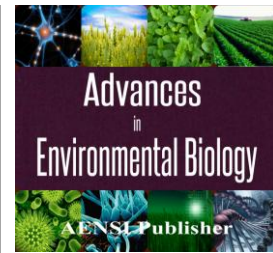




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Medical Tourism with Emphasis on Alzahra Ophthalmology Centre in Zahedan

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ABSTRACT

This study was conducted to identify potentials of ZAHEDAN medical tourism and strengthening medical tourism indicators in this city because ALZAHRA ophthalmology center is only ophthalmology center in the south east of IRAN and have certificates in quality management and environment and provides specialized services. This study was cross-sectional study. Data were gathered with two types of questionnaires. 44 personnel of ALZAHRA center who have bachelor or higher degree and 50 patients were completed these two types of questionnaires. Data entered in SPSS19 software and analyzed with descriptive statistics and multifactorial model. The results showed that ALZAHRA center in ZAHEDAN could develop medical tourism in ZAHEDAN city and equipping this center could attract medical tourists to the province's geographic position.

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INTRODUCTION

Today, a variety of physical and psychological diseases has increased due to the urban expansion and industrial development of the city. On the other hand, the dramatic importance of tourism, especially ecotourism sector globally and the various aspects of health tourism in particular, were evident to everyone. Moreover, with the optimal scheduling which is done in some countries, the reduced treatment costs as well as the recovery and rehabilitation of the patients was provided to a large extent.

1-1- Significance of Research:

Medical tourism, today, is the most important indicator of tourism and has the economic- high social benefits and means for patients to travel to other countries for cheaper medical service of their country. Tourists are interested in promoting mental, emotional and physical journey through the embracement of medical tourism [23].

Iran's foreign currency income relies on exporting the crude oil and to solve the problems arising from the dependence on foreign exchange of oil export revenues, it is necessary to invest on the production and exporting of those goods and services that may be causing foreign exchange earnings. This country in the midst of a defined set of products and services has some facilities with an investment potential that can be converted into actual power, used as a source of foreign exchange earnings and medical tourism is one of these cases.

Delgoshaei B., *et al.* in a study entitled "Status of Medical Tourism: The Case of Iran" carried out a descriptive, case and applied study. This study was conducted in four stages. Firstly go to the library and search the Web with valid data were obtained in the field of medical tourism. Secondly documents in the possession of the trustees in order to analyze the current situation were examined. These organizations were: the Ministry of Health and Medical Education, Cultural Heritage, Handicrafts and Tourism, Commercial Chamber of Industries and Mines and so on. The third step is to conduct a qualitative study, using in-depth interview guide, 30 individuals were selected by purposive sampling, in-depth interview and at the final stage, the findings of the learned stage were analyzed by summing up the advantages of using diamond tools (diamond advantage) and content analysis method. Participants were interviewed have one of the following criteria: (1) conducting research on medical tourism (2) having at least one year of experience in the field of medical tourism in charge of Organizations (3) having at least one year of experience in medical and health tours.

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In conclusion, this study suggests that according to that the city of Isfahan, in the field of cosmetic surgery has proper functionality and features of the environment in relation to human resources expert, thus, to promote medical tourism in the city, widespread attention to various aspects including proper planning, strengthening basic infrastructure, inter-sectorial coordination and effective marketing is needed.

1-1. Purpose of research:

Recognizing the potential of tourism in Zahedan

1-2. Research Hypothesis:

Al Zahra Hospital (specialized Ophthalmology) Zahedan causes the development of medical tourism in the city.

Population and samples:

The population of the research was referred to the staff and the patient at Hospital of Hazrat Zahra (peace be upon her). Employees were asked to have a bachelor's degree or higher that they were 52 individuals, and was not sampled due to the limitation of research census method, of which 44 patients completed the study questionnaires and cooperated and the patients who completed the questionnaire were 50, the study was limited because of the situation. Time required to complete the questionnaire was the fall of 2013. At the time of the accident happened on interviews with patients and a total of 50 questionnaires were completed. It is noteworthy that all patients in an average of 6500 to 7000 is of which highest in summer and lowest in autumn and winter (according to the statistics presented in Table 3-3, 108).

1-5-2. Tourism of Iran:

Iran has many travel and tourism attractions in itself. With the outbreak of war in Iran - Iraq severely reducing the incoming tourism took place in the country. In general, Iranians are cordial, kind, and generous people who have a keen interest in other cultures and other countries. Iran has a variety of tourist attractions in the Alborz Mountains to the shores of the Persian Gulf and the Caspian Sea.

After the Islamic Revolution of Iran in 1978, the majority of incoming tourists to Iran are the pilgrims and traders. From 2004 to mid-2008 Iran has one per cent growth in inbound tourists respectively. In particular, a significant increase was observed in number of tourists from Germany in 2008. According to the International Society of Travel and Tourism, a tourism and business growth rate is 11.3 percent and 4.6 percent in 2007, respectively. According to the Heritage Foundation, about 3.3 million tourists visited the country in 2009 among them, 70,000 people from Turkey, 3,000 from Germany, 3,000 people from China, and the rest were from other countries.

2-5-2. Medical tourism in Iran:

During the 1990s, the share of exports in GDP was less than 4%. Following the reforms implemented in the country in 2002, the rate rose to 7.4 percent but despite the relative improvement, the exporting of GDP has fundamental and structural abnormalities and still could not play a potential role in economic development. Hence it is necessary to invest in production and export of those products and services that can cause current earnings in the country. Among the array of products and services defined in some features and potential of the actual investment could be used as a source of foreign exchange earnings. Among these, the industry's health is located. It can be cited the staffing expertise and a global reputation, benefit from advanced medical facilities, access to modern medical practices, having several medical universities and ability to educate internal and foreign students, low-cost qualified medical services in the country. Investment in the sector so as to be able to provide services globally; can be considered to meet the needs of domestic as well as an important source of foreign exchange earnings for the country (Sherbafchy, 2010: 68). In 2004, nearly 12 million foreign patients were admitted that the amount reached in 2005 to 17 thousand and five hundred. The treatment of diseases such as infertility, plastic surgery, cosmetic surgery and dental implant gum are of the main reasons people travel to different cities in our country. High quality and cheap price of medical services in Iran comparing the Arabic countries of Central Asia and even Europe's resulted to choose Iran as a destination.

Most travelers of Medical tourism were from countries in the Persian Gulf and Central Asia.

3-5-2. most important opportunities of Iran's medical tourism are as follows:

- 1- Increased market access to international patients
- 2- Active participation of the private sector in the provision of medical services in the country
- 3- Doctors with a global reputation
- 4- Medical tourism, a chance to earn foreign exchange revenues in the health sector
- 5- Have better medical facilities to the region
- 6- Low costs of living in the country

- 7- Islamic rule on Afghanistan
8- Great tourist attractions in the...

2-5-4- Medical tourism , the most important threats are:

- 1- Lack of skilled staff speak English
- 2- Non-transferability of insurance medical tourists
- 3- Lack of institutions / agencies specialized medical tourism in the country
- 4- The absence of a program to develop medical tourism
- 5- Ordination between the poor and...

Introducing Zahedan:

The city of Zahedan due to the unique geographical, political and administrative training situation is an important city in the province. The city is located on the route connecting Iran to Pakistan, which borders of Pakistan, Mirjaveh are connected via road and rail links. The communication of Sistan and Baluchestan, Khorasan and Sistan and Baluchestan and Kerman are done through Zahedan; so this position is responsible for the operation of the services and businesses that the city, and has a privileged location in the East of the country. At the same time as the political center of the province, the agencies, institutions, companies, organizations, banks, insurance and investment has been centered in the city. The academic center of higher education and the proportion of the population of the city following Tehran, is the second largest academic city in the country (Ebrahimzadeh, 2012: 107), brought the city to further promote education, indigenous inhabitants of the city are particularly effective medical education and with the possibility of providing better trained and specialized in the field of medical and paramedical services provided at health centers in the city.

Among the mountains, it can be named the mount of Oshtoran with an altitude of 3012 meters, Anjirdan and Jykoo with 2255 meters altitude, and Pirkhan with 2221 meters altitude. Black Property Mountain is also another mountain in Zahedan. Zahedan is located among the elevations, and can be seen as the crater.

Results of the questionnaire for the staff of the Center for Ophthalmology:

- *Descriptive results of research*

Table 4.1: Distribution of population by sex workers.

Percent	Frequency	Sex
70.5	31	female
29.5	13	male
100	44	total

Source: author

Most respondents (5/70 percent) were women.

Table 4.2: Frequency distribution of employees by age.

Percent	Frequency	Age group
36.4	16	20-30
56.8	25	30-40
6.8	3	40 years old and more
100	44	Total

Source: author

Most of the subjects (8/56%) were in the age group 40-30 years.

Table 4.3: Frequency distribution of employees according to job.

Percent	Frequency	occupation
13.6	6	Physician
56.8	25	Nurse
29.6	13	Other
100	44	Total

Source: author

Most of the respondents (8/56%) were nurses.

Table 4.4: Frequency distribution of employees according to education level.

Percent	Frequency	Education
79.6	35	Bachelor
6.8	3	Master of Science
13.6	6	PhD
100	44	Total

Source: author

Most of the subjects (6/79 percent) had a bachelor's degree.

Table 4.5: Frequency distribution of employees according to their work experience.

Percent	Frequency	Work Experience
31.8	14	Less than 5 years

56.8	25	5-15 years
11.4	5	15-25 years
100	44	Total

Source: author

Most of the subjects (8/56%) had a record of 15-5 years.

Table 4.6: Comparison of mean factors in medical tourism.

Adverse conditions	Geographical conditions	Medical Equipment	Force of personnel	General	Factors
2.6	2.8	1.9	1.8	1.9	Average Score
0.52	0.64	0.66	0.39	0.77	standard deviation

Source: author

According to the respondents, the public factors, the medical personnel and equipment are between the two surfaces very good (1) and good (Score: 2), and factors, geographical terms and conditions between the good side (score 2), moderate (score 3), and the respondents have assessed all these factors as desirable.

Table 4-7: frequency of responses of public employees to the evaluation factors for attracting medical tourism.

situations general factors	Very good	Good	Average	Weak	Very weak	total
Health and hygiene	54.5	18.2	20.5	6.8	-	100
Medical Records and Information	29/5	50	18.2	2.3	-	100
Hospital committees	36.8	43.2	13.6	2.3	2.3	100
Qualitative indicators	36.4	34.1	27.3	2.3	-	100

Source: author

Among the options related to general hygiene and cleanliness by 5/54% has the maximum amount, this means that according to the majority of respondents believed that the hospital hygiene and cleanliness state is very good for health tourism.

Table 4-8: frequency response of the staff to assess the of personnel power to attract medical tourism.

situations personnel force	Very good	Good	Average	Weak	Very weak	total
Good reputation of specialists	72.7	27.3	-	-	-	100
Nursing Services	65.9	34.1	-	-	-	100
Medical Services	59.1	40.9	-	-	-	100
Least ability to speak English of a nurse	4.5	31.8	36.4	15.9	11.4	100

Source: author

Among the options for the staff, physician's good reputation is allocated to 7/72%, this means that the majority of respondents believed that the hospital specialist's Good reputation for attracting medical tourism is in a very good condition.

Table 4-9: frequency response of the staff to assess medical equipment for medical tourism.

total	Very poor	Weak	average	Good	Very Good	Status Medical Equipment
100	-	-	18.2	56.8	25	Existence of healthy and active equipment

Source: author

Most respondents (26.8 percent) believed that the medical equipment is in good shape to attract medical tourism.

Table 4-10: frequency response of the staff to assess the geographical conditions for medical tourism.

situations Geographical conditions	Very good	Good	Average	Weak	Very weak	total
easy access to road features and desirable air transport	20.5	47.7	31.8	-	-	100
The standard of hotels and residences	2.3	61.4	29.5	6.8	-	100
good climate	6.8	18.2	45.5	25	4.5	100
recreational facilities for leisure	2.3	9.1	34.1	31.8	22.7	100

Source: author

Among the options related to the geographic conditions of standard hotels and residences stay with 4/61 allocated the maximum amount to itself, this means that according to the majority of respondents standard dungeons of hotels and residences has been affected in good shape to attract tourism.

Analytical results of Research:

It is worth mentioning that the choice of A1 to A4 options related to general conditions (questions 1 to 4 on the scale) are listed in Table 4-7, B1 to B4 options relating to the Status of Forces personnel (Questions 5 to 8 in

the questionnaire) are listed in Table 4-8, Option C1 is related to the medical equipment (question 9 in the questionnaire) are listed in Table 4-9, options D1 to D4 are related to geographic conditions (questions 10 to 13 in the questionnaire) are listed in Table 4-10 and Options E1 to E11 is related to adverse conditions (questions 14 to 24 in the questionnaire) are listed in Table 4-11 and the relationship between these variables in a multifactor analysis have been measured below.

First output Table shows the correlation matrix between variables. Note that all values of the main diagonal of the matrix show the correlations of each variable with itself first. When the relationship becomes a closer and more direct correlation and the neutral and the negative correlation is close to zero and is a close inverse relationship to each other are irrelevant.

Table 4-12: matrix of correlation between parameters, Correlation Matrix.

	A1	A2	A3	A4	B1	B2	B3	B4	C1	D1	D2	D3	D4	
Correlation	A1	1.000	.531	.764	.770	.126	.681	.639	-.026	.435	.386	.412	.176	.085
	A2	.531	1.000	.697	.564	.531	.257	.383	.228	.315	.523	.476	.324	.239
	A3	.764	.697	1.000	.708	.322	.646	.644	.262	.412	.558	.291	.112	.046
	A4	.770	.564	.708	1.000	.153	.601	.696	-.001	.566	.457	.444	.342	.167
	B1	.126	.531	.322	.153	1.000	-.010	.009	.110	-.014	.260	.164	-.015	.222
	B2	.681	.257	.646	.601	-.010	1.000	.669	.106	.368	.288	.358	.034	.117
	B3	.639	.383	.644	.696	.009	.669	1.000	.018	.653	.321	.329	-.020	-.113
	B4	-.026	.228	.262	-.001	.110	.106	.018	1.000	.163	.275	.113	-.022	-.008
	C1	.435	.315	.412	.566	-.014	.368	.653	.163	1.000	.211	.386	.298	.101
	D1	.386	.523	.558	.457	.260	.288	.321	.275	.211	1.000	.389	.301	.185
	D2	.412	.476	.291	.444	.164	.358	.329	.113	.386	.389	1.000	.467	.542
	D3	.176	.324	.112	.342	-.015	.034	-.020	-.022	.298	.301	.467	1.000	.659
	D4	.085	.239	.046	.167	.222	.117	-.113	-.008	.101	.185	.542	.659	1.000
	E1	-.193	.133	.080	.137	.013	.207	-.004	.349	-.043	.295	.030	.222	.227
	E2	.248	.047	.176	.247	-.118	.333	.250	.100	.295	.098	-.054	.317	.087
	E3	.084	.014	.024	-.113	-.018	-.002	-.129	.540	.252	-.049	.035	.160	.279
	E4	.188	.023	-.005	.240	.020	-.018	.105	-.141	.233	.041	.228	.281	.360
	E5	.436	.626	.521	.588	.369	.230	.290	.111	.447	.549	.720	.473	.422
	E6	.287	.016	.259	.066	.076	.307	.103	.037	-.171	-.009	.332	-.151	.182
	E7	.316	.238	.338	.304	.211	.233	.315	-.023	.188	-.066	.152	.085	.172
	E8	.461	.166	.341	.346	-.006	.430	.441	-.187	.149	-.008	.376	.034	.150
	E9	.539	.562	.580	.542	.348	.466	.528	.193	.521	.280	.649	.186	.280
	E10	.540	.300	.346	.655	-.072	.547	.595	-.137	.704	-.010	.450	.328	.277
	E11	.392	.137	.301	.249	.110	.390	.166	.138	.352	.138	.370	.386	.596

	E1	E2	E3	E4	E5	E6	E7	E8	E9	E10	E11		
Correlation	A1	-.193	.248	.084	.188	.436	.287	.316	.461	.539	.540	.392	
	A2	.133	.047	.014	.023	.626	.016	.238	.166	.562	.300	.137	
	A3	.080	.176	.024	-.005	.521	.259	.338	.341	.580	.346	.301	
	A4	.137	.247	-.113	.240	.588	.066	.304	.346	.542	.655	.249	
	B1	.013	-.118	-.018	.020	.369	.076	.211	-.006	.348	-.072	.110	
	B2	.207	.333	-.002	-.018	.230	.307	.233	.430	.466	.547	.390	
	B3	-.004	.250	-.129	.105	.290	.103	.315	.441	.528	.595	.166	
	B4	.349	.100	.540	-.141	.111	.037	-.023	-.187	.193	-.137	.138	
	C1	-.043	.295	.252	.233	.447	-.171	.188	.149	.521	.704	.352	
	D1	.295	.098	-.049	.041	.549	-.009	-.066	-.008	.280	-.010	.138	
	D2	.030	-.054	.035	.228	.720	.332	.152	.376	.649	.450	.370	
	D3	.222	.317	.160	.281	.473	-.151	.085	.034	.186	.328	.386	
	D4	.227	.087	.279	.360	.422	.182	.172	.150	.280	.277	.596	
	E1	1.000	.330	.330	-.098	-.035	.236	-.168	-.193	-.166	.071	.074	-.128
	E2	.330	1.000	.344	.208	.069	-.255	.043	-.170	-.104	.290	.368	
	E3	-.098	.344	1.000	.180	-.080	-.028	-.005	-.324	-.096	-.014	.595	
	E4	-.035	.208	.180	1.000	.241	.364	.360	.259	.005	.155	.161	
	E5	.236	.069	-.080	.241	1.000	.154	.155	.204	.672	.420	.255	
	E6	-.168	-.255	-.028	.364	.154	1.000	.402	.653	.299	-.039	.057	
	E7	-.193	.043	-.005	.360	.155	.402	1.000	.743	.494	.427	.059	
	E8	-.166	-.170	-.324	.259	.204	.653	.743	1.000	.646	.486	-.056	
	E9	.071	-.104	-.096	.005	.672	.299	.494	.646	1.000	.676	.215	
	E10	.074	.290	-.014	.155	.420	-.039	.427	.486	.676	1.000	.328	
	E11	-.128	.368	.595	.161	.255	.057	.059	-.056	.215	.328	1.000	

Source: author (SPSS)

The second output table show Bartlett test results that is an approximate of K2. Bartlett test sig value is less than 5% (0.000), indicating that factor analysis to identify the structure, operating model, and the assumption is known as the correlation matrix is rejected. The KMO with 378/0 value at the beginning of the table and when the sample is positive, and the number of sample is sufficient for factor analysis.

Table 4-13: KMO index and the Bartlett test to assess the adequacy of the sample KMO and Bartlett's Test.

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.378
Bartlett's Test of Sphericity	Approx. Chi-Square	1099.099
	df	276
	Sig.	.000

Source: author (SPSS)

The fourth output of the total variance explained contains three parts:

- The first part of the eigenvalues is labeled Initial Eigenvalues determining factors that have eigenvalues greater than one, and remaining in the analysis. Factors that have eigenvalues less than 1 are excluded from the analysis. Factors extracted from the analysis of the factors that explain most of the variance will not cause them.

Third, as Table 4-15 shows the eigenvalues Rotation sums of squared loadings can be extracted rotated factors. In this example, the 1, 2, 3 factors are with eigenvalues greater than 1 and remaining in analyzes. If the column is proportional cumulative variance, notice that these three factors can be 193/65% of the variability (variance) explains the variables. Note that remaining in the rotation, the proportion of total variation explained by these three factors, however, unlike the constant rotation method, in which a greater percentage of changes (283/41%) is determined, operating in rotation, each of them roughly explained the same proportion of the variation. These features are deductive (Varimax) to change the factors that are unevenly distributed.

Table 4-14: Communalities between variables.

Communalities	Initial	Extraction
A1	1.000	.887
A2	1.000	.808
A3	1.000	.894
A4	1.000	.839
B1	1.000	.701
B2	1.000	.864
B3	1.000	.817
B4	1.000	.893
C1	1.000	.803
D1	1.000	.745
D2	1.000	.827
D3	1.000	.773
D4	1.000	.853
E1	1.000	.934
E2	1.000	.804
E3	1.000	.933
E4	1.000	.742
E5	1.000	.811
E6	1.000	.914
E7	1.000	.852
E8	1.000	.939
E9	1.000	.948
E10	1.000	.932
E11	1.000	.856

Extraction Method: Principal Component Analysis.

Source: author (SPSS)

It is the fifth output of Scree plot that was requested for the variables. This graphic chart of the specific value is extracted in each operating. The amount of variance explained (eigenvalues) quickly drops after extraction of the third factor. Eigenvalues of the first, second and third factors are greater than one, and for this reason are remained in the outputs.

Sixth output of matrix of non-rotated components illustrates that contains the factor loadings (original score) of each of 3 remaining variables.

Interpretation of factor loadings without rotation is not simple. Thus agent flips to rise the ability of their interpret. This is in the next exit.

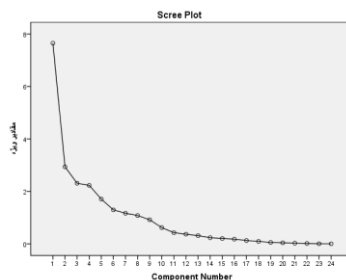
The output of rotated component matrix shows that the factor loadings of each of the variables included in the third factor is the remainder after the rotation. This matrix can be interpreted as a comfortable balance of the previous matrix that is not rotated. However, more absolute values of these coefficients, more agent role in the total variation (variance).

Table 15-4: Total variance explained.

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	7.649	31.869	31.869	7.649	31.869	31.869	4.452	18.548	18.548
2	2.936	12.235	44.105	2.936	12.235	44.105	3.073	12.803	31.351
3	2.309	9.619	53.724	2.309	9.619	53.724	2.747	11.445	42.796
4	2.229	9.286	63.010	2.229	9.286	63.010	2.543	10.597	53.394
5	1.707	7.113	70.124	1.707	7.113	70.124	2.413	10.053	63.446
6	1.295	5.395	75.519	1.295	5.395	75.519	2.072	8.635	72.082
7	1.165	4.856	80.375	1.165	4.856	80.375	1.585	6.602	78.684
8	1.079	4.497	84.872	1.079	4.497	84.872	1.485	6.188	84.872
9	.918	3.826	88.698						
10	.619	2.580	91.278						
11	.426	1.776	93.054						
12	.368	1.534	94.588						
13	.314	1.308	95.896						
14	.236	.983	96.879						
15	.204	.852	97.730						
16	.179	.746	98.476						
17	.128	.532	99.008						
18	.094	.390	99.398						
19	.055	.231	99.629						
20	.040	.166	99.795						
21	.025	.105	99.900						
22	.017	.069	99.969						
23	.005	.021	99.989						
24	.003	.011	100.000						

Extraction Method: Principal Component Analysis.

Source: author (SPSS)

**Fig. 4.1:** Scree plot Source: author (SPSS).**Table 16-4:** Component Matrix^a.

	Component							
	1	2	3	4	5	6	7	8
A1	.802	-.163	-.134	-.193	.165	-.102	-.312	-.169
A2	.682	.141	-.228	.426	.041	-.207	-.096	.188
A3	.786	-.067	-.383	.089	.283	.026	-.194	.009
A4	.837	-.032	-.219	-.104	-.196	-.011	-.199	.032
B1	.274	.064	-.034	.593	.234	-.290	-.152	.327
B2	.685	-.133	-.237	-.306	.146	.340	.004	-.300
B3	.711	-.265	-.366	-.325	-.030	-.010	-.011	.006
B4	.138	.417	-.256	.159	.581	.246	.431	.158
C1	.650	.168	-.106	-.392	-.106	-.307	.247	.146
D1	.502	.301	-.342	.401	-.014	.141	-.291	-.140
D2	.695	.106	.305	.270	-.111	-.039	.199	-.337
D3	.419	.530	.379	.042	-.407	.010	-.072	.005
D4	.400	.431	.658	.197	-.099	.105	.033	-.119
E1	.104	.418	-.267	.191	-.289	.697	.207	.167
E2	.247	.468	-.112	-.559	-.046	.279	-.229	.259
E3	.058	.591	.245	-.319	.623	-.112	.105	.086
E4	.276	.018	.581	-.131	-.039	.181	-.399	.342
E5	.735	.209	.053	.412	-.224	-.068	.016	-.010
E6	.278	-.493	.424	.203	.427	.378	-.097	-.195
E7	.470	-.456	.347	-.063	.168	.050	.052	.516
E8	.537	-.705	.308	.002	-.010	.209	.122	.033
E9	.809	-.222	.018	.220	.006	-.096	.429	.031
E10	.723	-.097	.078	-.408	-.330	-.108	.318	.070
E11	.453	.479	.324	-.298	.317	-.177	-.060	-.304

Extraction Method: Principal Component Analysis.
a. 8 components extracted.

Source: author (SPSS)

Hypothesis testing:

In order to test the hypothesis which states that the hospital of al-Zahra in Zahedan can cause the development of medical tourism in the city, the results of the data collected according to the views of hospital staff of al-Zahra (analysis completed questionnaire), we can say that the comparison of mean factors in medical tourism (Table 4-6) of the personnel, the public and medical equipment factors, with averages of 8.1 points, 9.1 and 9.1 have the greatest impact on tourism and conditions and adverse geographical conditions are 6.2 and 2.8 in the next priorities and have less impact than other factors. The average mean score for this factor is 2.2, indicating that the hospital of al-Zahra is located, based on the development of tourism, between the two levels of good health (mean score 2), moderate (mean score 3). The most effective multifactor test of 1-8 options of the questionnaire is related to the public and the staff (Table 4-15), therefore, we conclude that the hospital staff were all factors have been evaluated at an appropriate level and thus, we can conclude that this hypothesis is confirmed, this center can cause the development of medical tourism in the city of Zahedan.

Table 17-4: Rotated Component Matrix^a.

	Component							
	1	2	3	4	5	6	7	8
A1	.837	.137	.182	.177	.169	.058	-.245	.111
A2	.396	.224	-.003	.190	.746	.002	.086	-.026
A3	.795	-.003	.164	.111	.451	.122	.073	-.015
A4	.727	.224	.036	.371	.245	-.154	.056	.185
B1	-.014	.054	.083	-.066	.824	.061	-.068	.013
B2	.823	.088	.262	.159	-.190	.120	.175	-.068
B3	.747	-.103	.140	.470	.046	-.073	.007	.019
B4	.035	-.103	.050	.006	.264	.693	.511	-.260
C1	.372	.167	-.109	.752	.088	.209	-.056	.068
D1	.538	.292	-.179	-.209	.457	-.046	.286	-.048
D2	.280	.746	.264	.200	.180	.017	-.003	-.225
D3	.025	.756	-.186	.198	.082	.006	.131	.322
D4	-.085	.854	.166	.004	.076	.203	.066	.193
E1	.042	.160	-.132	-.017	.000	-.055	.939	.053
E2	.335	.014	-.302	.189	-.202	.302	.298	.586
E3	-.058	.109	-.104	.033	-.017	.932	-.087	.172
E4	.002	.287	.319	-.006	.039	.024	-.078	.741
E5	.315	.600	.061	.228	.508	-.111	.156	-.034
E6	.203	.128	.853	-.344	-.018	.056	-.088	-.011
E7	.059	-.077	.707	.379	.239	.020	-.076	.368
E8	.268	.087	.843	.265	-.023	-.270	-.072	.033
E9	.335	.299	.466	.545	.374	-.007	.084	-.293
E10	.369	.289	.167	.813	-.112	-.060	.001	.082
E11	.320	.519	-.073	.081	-.082	.619	-.267	.105
Extraction Method: Principal Component Analysis.								
Rotation Method: Varimax with Kaiser Normalization.								
a. Rotation converged in 24 iterations.								

Source: author (SPSS)

Table 6-4: comparison of mean factors in medical tourism.

Mean factor	General	Personnel force	Medical equipment	Geographical conditions	Adverse conditions
Average score	1.9	1.8	1.9	2.8	2.6
SD	0.77	0.39	0.66	0.64	0.52

Completing and equipping the hospital of al-Zahra could attract medical tourists to the province in terms of geographic location, according to the analysis carried out in this study on the factors obtained, the factors evaluated in terms of tourism therapy staff, medical equipment operating at a mean score of 9.1 is between the two levels is very good and good, and we can say that although this is a good level, but the newer and more up to date equipment used for the hospital to be in a better position of tourism attraction in the area and in geographical terms, with the average rating of 8.2 and the average is between two solid surfaces can be used to improve the facilities of road and air transport, creating more standard hotels and accommodation dungeons and create recreational facilities for leisure, and improve geographic conditions (Table 4-10). So completing the medical and hospital equipment could attract tourists to the province's geographical location.

Conclusion:

In this chapter, the interpretation of field and library findings and hypothesis testing was performed. According to the theoretical foundations of library, we conclude that ophthalmology center of al-Zahra (peace be upon her) is having good condition and the staff can cause al-Zahedan tourism development with regard to medical equipment, geographical conditions and adverse conditions were determined in the field, can be updated

using the appropriate equipment, the provision of more recreational facilities for recreation and upgrade the other side of the suggestions mentioned, the center will promote medical tourism situation.

Table 15-4: explained variances.

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	7.649	31.869	31.869	7.649	31.869	31.869	4.452	18.548	18.548
2	2.936	12.235	44.105	2.936	12.235	44.105	3.073	12.803	31.351
3	2.309	9.619	53.724	2.309	9.619	53.724	2.747	11.445	42.796
4	2.229	9.286	63.010	2.229	9.286	63.010	2.543	10.597	53.394
5	1.707	7.113	70.124	1.707	7.113	70.124	2.413	10.053	63.446
6	1.295	5.395	75.519	1.295	5.395	75.519	2.072	8.635	72.082
7	1.165	4.856	80.375	1.165	4.856	80.375	1.585	6.602	78.684
8	1.079	4.497	84.872	1.079	4.497	84.872	1.485	6.188	84.872
9	.918	3.826	88.698						
10	.619	2.580	91.278						
11	.426	1.776	93.054						
12	.368	1.534	94.588						
13	.314	1.308	95.896						
14	.236	.953	96.879						
15	.204	.852	97.730						
16	.179	.746	98.476						
17	.128	.532	99.008						
18	.094	.390	99.398						
19	.065	.231	99.629						
20	.040	.166	99.795						
21	.025	.105	99.900						
22	.017	.069	99.969						
23	.005	.021	99.989						
24	.003	.011	100.000						

Extraction Method: Principal Component Analysis.

Table 10-4: Frequency distribution of responses to the research community to evaluate geographic conditions to attract medical tourism.

situations	Very good	Good	Average	Weak	Very weak	total
Geographical conditions						
easy access to road features and desirable air transport	20.5	47.7	31.8	-	-	100
The standard of hotels and residences	2.3	61.4	29.5	6.8	-	100
good climate	6.8	18.2	45.5	25	4.5	100
recreational facilities for leisure	2.3	9.1	34.1	31.8	22.7	100

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