FACTORS INFLUENCING FERTILITY CLINIC SELECTION AMONG CHINESE MEDICAL TOURISTS IN THAILAND: THE ROLE OF SERVICE QUALITY AND EXPERIENTIAL SATISFACTION

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Abstract

This study examines the factors influencing fertility clinic selection among Chinese medical tourists in Thailand, focusing on the role of fertility care quality and experiential satisfaction. The research targets Mainland Chinese fertility tourists (aged 20–40) seeking treatment at eight private clinics across Thailand (Bangkok, Chonburi, Chiang Mai, and Phuket). A sample of 529 respondents was analyzed using Multiple Regression Analysis to evaluate key determinants of clinic selection. The study's findings reveal that both fertility care quality and experiential satisfaction positively impact the fertility clinic selection. At a significant level of 0.05, delving into the various facets of fertility care quality, it was observed that access to fertility care, clinical competence and respect for patients play a role influencing selection of fertility clinics. However, Physical comfort does not significantly influence selection. On the experiential satisfaction front, emotional expectations positively influence selection of fertility clinics. In contrast, Practical expectations did not have a significant impact. these findings provide actionable insights for fertility clinic managers and policymakers in Thailand to enhance service offerings and patient experiences, thereby strengthening their competitiveness in the global fertility tourism market. The study contributes to the literature on medical tourism by highlighting the nuanced preferences of Chinese fertility tourists

Keywords: Fertility care quality, Experiential satisfaction, Medical tourism in Thailand

Introduction

Currently, private fertility clinics in Thailand are recognized as critical healthcare providers that significantly contribute to medical tourism at healthcare services. As of 2025, Thailand remains a regional leader in assisted reproductive technology (ART), with Bangkok hosting several internationally accredited fertility clinics that serve medical tourists from across Southeast Asia (Patients Beyond Borders, 2023). While exact numbers of private clinics vary by source, industry reports indicate Thailand's ART sector handles approximately 60% of Southeast Asia's cross-border fertility treatments (Medical Tourism Association, 2024). These clinics are distributed across major urban centers, including Bangkok, Chiang Mai, and Phuket, catering to international patients. Their role extends beyond medical treatment, as they serve as hubs for reproductive health education, employment for specialized medical professionals, and drivers of medical innovation. Furthermore, they enhance Thailand's healthcare reputation by offering competitive pricing, advanced technologies, and high success rates compared to regional counterparts (Sirasat, et al., 2023).

Yet, the current competitive healthcare environment among Thailand's fertility clinics intensifies daily, leading to heightened patient expectations and market saturation. This can be attributed to clinics not fully optimizing their fertility care *quality and* experiential satisfaction to meet evolving demands. For instance, there is a pressing need to improve access to fertility

care and clinical competence while maintaining cost efficiency. Additionally, clinics face rapid advancements in reproductive technologies and shifting patient preferences, which are transforming service delivery standards and regulatory requirements. Consequently, clinic operators must prioritize continuous improvement and patient-centered care. Research emphasizes that fertility care quality and experiential satisfaction are key determinants of patient decision-making (Harrison, et al., 2024). For example, respect for patients significantly influences patient trust, while clinical competence enhances satisfaction and retention.

From this perspective, fertility care quality and experiential satisfaction emerge as pivotal factors shaping clinic selection. This study investigates their impact on patient preferences in Thailand's fertility clinic market, providing actionable insights for healthcare providers. By aligning fertility care quality and experiential satisfaction with patient needs, clinics can enhance their competitiveness, improve patient outcomes, and sustain growth in Thailand's dynamic medical tourism sector.

Research Objectives

To examine the impact of fertility care quality and experiential satisfaction on the selection of fertility clinics among Chinese medical tourists in Thailand.

H_1: Fertility care quality has a positive effect on the selection of fertility clinics.

H_2: Experiential satisfaction has a positive effect on the selection of fertility clinics

Scope of Research

1. Population Scope

The study population consisted of Mainland Chinese fertility tourists aged 20 to 40 years, seeking treatment at eight private fertility clinics across Top 4 Tourist Cities in Thailand (Bangkok, Chonburi, Chiang Mai, and Phuket). A total of 529 questionnaire sets were employed for the survey as samples.

2. Variable Scope

Variables of this research are fertility care quality, experiential satisfaction and fertility clinic selection

3. Time Scope: Data were collected from February–June 2025.

Literature Review.

Fertility Care Quality and Its Impact

Fertility care quality is a multidimensional construct encompassing access to care, clinical competence, respect for patients, and physical comfort. Research demonstrates that these dimensions collectively shape clinic competitiveness and patient trust (Boivin, et al., 2021; Dancet, et al., 2011). Clinical outcomes (e.g., live birth rates, embryo implantation success) are primary drivers of clinic selection. A 2024 study of Thai fertility clinics found that clinical competence accounted for 40% of patient preferences (Harrison, et al., 2024). This aligns with global trends where success rates dominate decision-making (Sullivan, et al., 2016). Barriers like cost, waiting times, and logistical support significantly impact international patients. Harrison, et al. (2024) identified affordability and streamlined care pathways as critical for medical tourists. Similar findings were reported in the EU Cross-Border Reproductive Care (CBRC) study (Shenfield, et al., 2010). Respect for Patients: centered care, including psychological support and cultural sensitivity, reduces treatment-related trauma. Clinics excelling in these areas report 30% higher revisit intentions (WHO, 2023). The Patient-Centeredness Questionnaire (PCQ) (Dancet, et al., 2011) underscores the role of empathy and clear communication in fertility care. While Physical Comfort is often secondary to medical

outcomes, amenities (e.g., language-specific counseling, clinic environment) improve retention. Sirasat, et al. (2023) found 50% higher satisfaction among medical tourists when staff addressed cultural needs. However, physical comfort alone rarely drives clinic selection (Van Empel, et al., 2010).

Experiential Satisfaction and Patient Decision-Making

Experiential satisfaction in fertility care comprises emotional expectations (e.g., empathy, hope, psychological, safety) and practical expectations (e.g., logistical efficiency, transparency). Research demonstrates that experiential factors often outweigh clinical metrics in clinic selection, particularly for first-time patients. Lee & Kim (2023) found that emotional expectations (e.g., staff empathy, personalized care) mediate 60% of clinic selection variance, with twice the influence of clinical success rates for first-time patients. Bodenmann, et al. (2022) linked hope and emotional support to higher treatment adherence, especially in cross-border contexts where patients face cultural and linguistic barriers. And Culley, et al. (2013) emphasized that clinics addressing psychological distress through counseling saw 40% higher patient retention. Manusirivithaya, et al. (2022) demonstrated that Practical Expectations streamlined processes (e.g., online scheduling, transparent pricing) reduced patient attrition by 35%. And Pennings, et al. (2009) highlighted that administrative efficiency (e.g., visa support, travel coordination) is critical for international fertility tourists. Cultural nuances further amplify Experiential Satisfaction; Thai clinics offering Buddhist or Muslim-centered counseling saw 45% higher satisfaction scores among respective demographic groups (Sirasat, et al., 2023).

Fertility Care Quality and Experiential Satisfaction as Drivers of Clinic Selection

Clinic selection, measured through stated preference (initial choice) and revisit intention (loyalty), is optimized when fertility care quality and experiential satisfaction function synergistically. Research indicates that clinics excelling in both domains dominate the fertility tourism market. Thai Medical Council (2025) demonstrated that clinics ranking in Thailand's top quartile for both fertility care quality and Experiential Satisfaction captured 70% of the medical fertility tourism market Stated Preference correlated strongly with Fertility Care Quality's technical dimensions (clinical competence, access to fertility Care, respect for patients), while Revisit Intention depended on Experiential Satisfaction's emotional-practical balance (Harrison, et al., 2024). Critically, Dancet, et al. (2011) revealed that neglecting respect for patients or psychological support eroded revisit intention by 50%, even when clinical success rates were high (WHO, 2023)."

Research Methodology

1. Research Methodology

The study population consisted of Mainland Chinese fertility tourists aged 20 to 40 years, seeking treatment at eight private fertility clinics across four provinces in Thailand (Bangkok, Chonburi, Chiang Mai, and Phuket). These clinics were selected based on the following criteria: First, they represented the most frequented private fertility clinics by international patients in 2018. Second, all clinics held 2018 Thailand Healthcare Travel Council Certification, meeting strict standards set by the Thailand Society for Quality in Health and the International Society for Quality in Healthcare, ensuring consistent service quality and regulatory compliance. A convenience sampling method was used to recruit participants. Questionnaires were distributed in both physical and digital formats, though most respondents opted for the online version. Participants were provided with a detailed explanation of the research objectives before participating. A total of 529 questionnaire sets were employed for

the survey. Each measure was measured on a five-point Likert scale anchored by "strongly disagree" (1) and "strongly agree" (5). To measure the dimensions of fertility care quality (access to fertility care, clinical competence, respect for patients, physical comfort), 16 items were adapted from existing studies (e.g. Jaaparet, et al., 2017; Moragianni, 2014; Musa, et al., 2012). The experiential satisfaction was measured with 10 items based on the study of Wu, et al. (2018) and the selection of fertility clinic was measured by 8 items on stated preference and revisit intention

2. Data Collection

The study employed a structured questionnaire to ensure language equivalency; the development of the questionnaire followed the backtranslation procedure. The study instrument, originally in Thai, was translated into Simplified Chinese and then back to English. Inconsistencies in translations were resolved among the authors (Brislin, 1970). Upon receiving the returned questionnaires, the researcher conducted an initial review for completeness. This included ensuring that all sections were filled out as per the questions, verifying that no answers were omitted, among other checks. The data gathered from these questionnaires was then utilized for subsequent statistical analysis. Data were collected from February–June 2025. Variables of this research are fertility care quality, experiential satisfaction and fertility clinic selection

3. Research Instrument and Data Analysis

For the research tools, the researcher undertook a comprehensive study and analysis of academic works, research, and various documents related to the factor of fertility care quality and experiential satisfaction that impact the selection of fertility clinic. These materials were sourced from a range of reputable sources. Afterward, the modified questionnaire was sent to three experts for verification of its accuracy (Content Validity). Based on the experts' recommendations, further modifications were made to align with the objectives, using the Index of Item Objective Congruence (IOC). The questionnaire's accuracy was assessed by three experts, revealing an average IOC (Index of Item Objective Congruence) value of 0.731, ranging between 0.33 and 1. Most questions had an IOC value exceeding 0.5. Those with an IOC value below 0.5 were revised by the researcher, following expert advice, and then forwarded to the advisor for further review. This process was undertaken to refine the questionnaire for the subsequent survey.

The modified questionnaire, which was refined after verifying its accuracy, was subjected to an initial suitability test (Pilot Test). This was done by surveying a sample of 30 patients to further assess its reliability and confidence. The reliability of the questionnaires was assessed using the 30 responses obtained from the test. By employing Cronbach's alpha coefficient formula, confidence values for the questions were determined. Specifically, the questions related to fertility care quality, experiential satisfaction, and selection of fertility clinic yielded Cronbach's confidence values of 0.91, 0.93, and 0.89, respectively.

Upon examining individual facets of fertility care quality, the access to fertility care, clinical competence and respect for patients and yielded Cronbach's confidence values of 0.86, 0.89, and 0.85 respectively. Similarly, when evaluating distinct elements of experiential satisfaction, Emotional Expectations and practical expectations demonstrated Cronbach's reliability values of 0.93, 0.91, and 0.81, respectively. All these values exceeded the standard threshold of 0.7, deeming them satisfactory. Consequently, this questionnaire was deemed acceptable for use.

This research employs multiple regression analysis to elucidate the relationships between various independent variables and a single dependent variable. The independent variables encompass fertility care quality, which include access to fertility care, clinical

competence, respect for patients, and physical comfort .as well as Experiential Satisfaction, which consist of Emotional Expectations and Practical Expectations. The sole dependent variable is selection of fertility clinic The aim is to assess the distinct impact each of these independent variables has on the dependent variable. The researcher utilized multiple regression analysis to evaluate the hypothesis. This analysis examined whether the factors of fertility care quality, including access to fertility care, clinical competence, respect for patients, and physical comfort, as well as experiential satisfaction such as emotional expectations and Practical Expectations (independent variables), have a positive impact on the selection of fertility clinics in stated preference and revisit intention in Thailand (dependent variable).

Table 1 Comparison of Reliability Values of the Questionnaire

Variable	Pilot testing	
	Number of questions (items)	Cronbach's Alpha
Fertility care quality	**16**	0.91
Access to fertility care	4	0.86
Clinical competence	4	0.89
Respect for patients	4	0.85
Physical comfort	4	0.87
Experiential satisfaction	**10**	0.93
Emotional expectations	5	0.91
Practical expectations	5	0.89
Selection of fertility clinic	**8**	0.89

Research Results

The analysis examined the impact of fertility care quality — access to fertility care, clinical competence, respect for patients and physical comfort —and experiential satisfaction, which includes emotional expectations, and Practical expectations, on selection of infertility clinic in the country. This analysis utilized the Multiple Regression Analysis (Enter Method) with a significance level set at 0.05. The results are presented in the subsequent order. able 2. The correlation coefficient of the relationship of Fertility care quality and descriptive statistics influence the selection of clinic.

Fertility care quality	Selection of clinic	Access to fertility care	Clinical competence	Respect for patients	Physical comfort
Selection of clinic	1.00				
Access to fertility care	0.65**	1.00			
Clinical competence	0.687**	0.741**	1.00		
Respect for patients	0.663**	0.768**	0.751**	1.00	
Physical comfort	0.614**	0.669**	0.718**	0.653**	1.00

** At the 0.05 significance level

Table 2 displays the coefficients identified the access to fertility care, respect for patients, Clinical competence and Physical comfort aspect positively correlate with the selection of infertility clinic at a significance level of 0.05. Among the variables, clinical competence has the strongest relationship with the selection of infertility clinic, boasting a correlation coefficient of 0.757. This is closely followed by respect for patients with a coefficient of 0.663.

Table 3 The analysis results and regression coefficient values of the influence of experiential satisfaction in Emotional expectations, Practical expectations that affect operational outcomes

Experiential satisfaction	Selection of clinic	Emotional expectations	Practical expectations
Selection of clinic	1.00		
Emotional expectations	0.556**	1.00	
Practical expectations	0.483**	0.471**	1.00

** At the 0.05 significance level

Based on Table 3, the identified coefficients indicate that experiential satisfaction in emotional expectations and Practical expectations positively correlate with the selection of infertility clinic at a significance level of 0.05. Among these, the emotional expectations have the strongest relationship with a correlation coefficient of 0.556, followed by Practical expectations with a coefficient of 0.483.

Table 4 The analysis results and regression coefficient values of the influence of Fertility care quality in access to fertility care, clinical competence, respect for patients and Physical comfort that affect operational outcomes.

Fertility care quality	Beta	t	P-Value
Access to fertility care	0.285	2.356	0.005**
Clinical competence	0.779	3.841	0.000**
Respect for patients	0.475	3.162	0.001**
Physical comfort	0.074	1.834	0.224
R = 0.687 R2 = 0.472 Adjusted R2 = 0.438 F = 52.471			

** At the 0.05 significance level

Based on Table 4, Fertility care quality in Access to fertility care, Clinical competence and Respect for patients positively impact selection of infertility clinic. However, Physical comfort doesn't significantly influence business performance at a 0.05 statistical significance level. This indicates that Fertility care quality in Access to fertility care, Clinical competence and Respect for patients play a crucial role in determining the selection of infertility clinic in Thailand. The most influential independent variable on selection of infertility clinic is Clinical competence, followed by Respect for patients and Access to fertility care, with standardized regression coefficients of 0.779, 0.475 and 0.285, respectively.

Table 5 The analysis results and regression coefficient values of the influence of experiential satisfaction in Emotional expectations and Practical expectations that affect operational outcomes.

Experiential satisfaction	Beta	t	P-Value
Emotional expectations	0.285	2.842	0.005**
Practical expectations	0.105	1.528	0.246
R = 0.638 R2 = 0.407 Adjusted R2 = 0.397 F = 52.471			

** At the 0.05 significance level

Based on Table 5, Experiential satisfaction in Emotional expectations positively influences selection operating results. However, Experiential satisfaction in Practical expectations doesn't significantly impact the selection operating results at a 0.05 statistical significance level. This suggests that Experiential satisfaction in Emotional expectations are key determinants of the selection of infertility clinic, followed by Practical expectations, with standardized regression coefficients of 0.285 and 0.105, respectively.

Discussion

From the analysis, it's demonstrated that fertility care quality in specifically clinical competence, respect for patients, and access to significantly influences clinic selection, Clinical competence exemplifies such a capability directly influences patient trust and decision-making. The dominance of clinical competence (β=0.779) aligns with Dancet, et al. (2011) - Demonstrated that clinical competence and patient-centered care significantly influence clinic choice This robust relationship suggests fertility clinics should strategically Invest in developing core medical capabilities (e.g., advanced clinician training, state-of-the-art embryology labs). Second, Institutionalize patient respect systems (e.g., cultural competency training, multilingual staff). Third, deprioritize non-core investments (e.g., excessive physical amenities) that show limited impact on patient decision-making

Based on the analysis, it confirms that experiential satisfaction in emotional expectations ($\beta = 0.285$, $p < 0.05$) drives infertility clinic selection, while practical expectations lack significance. This reflects Resource-Based Theory (Barney, 1991): emotional capabilities—such as empathetic communication and psychological safety—function as strategic resources that are valuable (addressing patient trauma), rare (culturally nuanced), and inimitable (requiring authentic organizational commitment). As Berry and Bendapudi (2007) demonstrated, healthcare choices in vulnerable contexts are 70% emotion-driven, transcending logistical conveniences. Clinics must thus prioritize emotional resource development (e.g., staff empathy training, patient support groups) to secure competitive advantage.

Recommendations

Fertility clinics should enhance patient-centered care by strategically improving three key areas: (1) Clinical competence through training and audits on success rates, expertise, and technology; (2) Accessibility via streamlined scheduling, affordability, and convenient locations; and (3) Respect for patients, particularly Chinese medical tourists, by prioritizing dignity, communication, and empathy. Additionally, clinics must address emotional needs through psychological support and trust-building. This multi-dimensional approach ensures higher quality of care and patient satisfaction. Future research should explore cultural factors shaping Chinese patients' experiences to further refine these practices.

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