Abstract

This research examines the health care related issues of the Chinese seniors retiring in Thailand. The objectives of the research are: a) to evaluate the level of satisfaction toward Thai healthcare among Chinese retirees in Thailand; b) to identify the barriers and facilitators of the satisfaction for Chinese retirees in Thailand to access healthcare; c) to suggest policy implications to increase access to medical care in the context of IRM. This study will use both quantitative and qualitative research methods. Data of this study will be collected through in-person questionnaire surveys and in-depth case-studies and processed through SPSS by binary logistic regressions.

Table of Content

Introduction and Review Literature ................................................................. 2
Research Objectives ...................................................................................... 2
Research Questions ....................................................................................... 2
Research Method: ......................................................................................... 3
Expected Benefit from this Proposal ........................................................... 3
Proposed Structure of the Research ............................................................. 3
Proposed Timeline ....................................................................................... 4
References ..................................................................................................... 5

Keywords: International retirement migrant, Elderly heath care, Chinese retirees, health tourism
Introduction and Literature Review

International retirement migration (IRM) and its related fields of expatriate residency (expats), residential tourism, long-term tourism and international second homes are rapidly growing and changing. Though the vast majority are of persons older, IRM is a misnomer for this topic as non-retired younger generations are also moving to these destinations, as they are increasingly able to work from virtually anywhere, due to the Internet economy and other trends associated with ever-increasing globalization. Many Chinese elders and young people regard Thailand as the Utopia for retirement, which Thailand is a popular destination for their abroad retirement. This research examined the health care related issues of the Chinese retirees in Thailand.

From the perspective of research subjects, most research about IRM mainly focus: a) the motivation; b) the characteristic of retirement migration from different culture background; c) the retirement life in abroad; (Bozic, 2006) d) a comprehensive study of the three previously mentioned. However, the studies that directly research health care in IRM is insufficient. The biggest challenge for international migrant retirees is probably accessing the health care services (Dwyer, 2000), which means health care is essential in the study of IRM. Nevertheless, health care is only an element with limited paragraph described on the paper that are about the research area of the retirement life in abroad. More study into travelers’ views of positive and unfavorable services in various agencies is needed as a benchmark for improving service quality.

From the perspective of the retiree group, most IRM studies are about European and North America retirees, and international retirees from Asia are inadequate by comparison. And among the papers about Asian retirees, they are mainly about Japanese IRM. (Ono, 2008; Ono, 2015) The group of Chinese senior retirees are being ignored. Even no single paper mainly studies Chinese retirement abroad, only some scholars focus on domestic retirement migrants. (Liang et al, 2021; Chen & Bao, 2021; Chou, 2007) Although Thailand is a health tourism destination for Chinese, previous studies have analyzed the health tourism from a macro view. (Pocock and Phua, 2011) From the micro view, there is a lack of the sight of the senior retirees, evidence-based investigation on Chinese residents’ knowledge and attitude toward health tourism (Liu et al., 2022) and so on. Even though Ye (2018) made an investigation of the Chinese tourists' decision-making on medical tourism in Thailand, but the health care issue was not included. Facing the reality that the inadequateness of research on Chinese retirement abroad and the health care on IRM studies, focusing on the Chinese retirees in foreign countries from health care aspect is meaningful.

Research Objectives:

a) To evaluate the level of satisfaction toward Thai healthcare among Chinese retirees in Thailand
b) To identify the barriers and facilitators of the satisfaction for Chinese retirees in Thailand to access healthcare
c) To suggest policy implications to increase access to medical care in the context of IRM;

Research Questions:

a) To what extent does health care service play a role in the retirees’ decision who chose their retirement in Thailand??
b) How satisfied are Chinese retirees in Thailand with the healthcare system?
c) Which factors affect the health care utilization of the retirees?
d) What are the barriers and facilitators the retirees face in utilizing the healthcare service?
e) What measures can be put in place to improve access to healthcare for Chinese retirees in Thailand?
f) What inspiration can the other nations get from the Thai healthcare in the context of IRM?

Research method:

This study will use both quantitative and qualitative research methods. Data of this study will be collected through in-person questionnaire surveys and in-depth case-studies. The sample will be selected through purposive sampling technique. According to Andersen’s behavioral model (Andersen, 1995), this study will set up three variables: predisposing factors, enabling factor and need. (Figure.1) Respondents who identify the health care in Thailand as excellent, and/or do not make trips to China for health care, and/or perceive their health status as excellent are considered in this study as “satisfied with health care.”

First questionnaire surveys will be done to collect the date, then qualitative research methods will be used through SPSS by binary logistic regressions. After the quantitative analysis to evaluate the level of satisfaction, quantitative research methods will be used to deeply elaborate the detailed patterns such as respondents’ experience, specific attitudes and feeling by interview to further identify the barriers and facilitators of the satisfaction. This step will decode the pattern that can be generalized to gain an insight under the universality.

Expected benefit from this proposal:

a) Recognizing the situation of accessing healthcare among the Chinese retirees in Thailand.

b) Adding knowledge to the existing literature where not much known about Chinese retirement abroad.

c) Improving the healthcare service needed for dealing with global aging issue

Proposed Structure of the Research

This study plan to organize in six chapters. Chapter 1 will provide an introduction to the study where the extent of the problem and justification of the framework, hypotheses, variables, research methods, and limitations of the study. Chapter 2 will explain the theoretical framework of this study, followed by the
review of literature. Chapter 3 will describe the methodology of the study. Chapter 4 will present the findings of the study based on descriptive statistics and regression results. Chapter 5 will provide a discussion of the findings and elaboration of case studies by quantitative research methods. Finally, Chapter 6 will include conclusion, and policy implications.

**Proposed Timeline:**

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