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AYURVEDA AND MEDICAL VALUE TRAVEL IN INDIA: A CONCEPTUAL FRAMEWORK

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Abstract—*The growing integration of healthcare and tourism has expanded the scope of medical tourism towards Medical Value Travel (MVT), encompassing healthcare, wellness, destination experiences and supporting travel services. Within this emerging ecosystem, Ayurveda represents a distinctive Indian proposition because it combines therapeutic practices with holistic wellbeing, traditional knowledge, cultural experiences and destination attributes. Although existing research has examined Ayurveda through wellness tourism, therapeutic mobility, service quality and destination perspectives, these streams remain fragmented and provide limited explanation of how the different dimensions collectively shape the value perceived by prospective Ayurveda medical travellers. This conceptual paper addresses this gap by synthesising literature relating to Ayurveda tourism, wellness tourism, therapeutic mobility, medical tourism and Medical Value Travel. Drawing primarily on Perceived Value Theory, the paper proposes a framework comprising six value-generating dimensions: Therapeutic Value, Holistic Wellness Value, Ayurveda Healthcare Service Quality, Authenticity and Cultural Value, Accessibility and Economic Value, and Destination Attractiveness. These dimensions are proposed to contribute to the Perceived Value of Ayurveda-Based Medical Value Travel, which subsequently influences Intention to Choose Ayurveda-Based Medical Value Travel. Push–Pull Theory provides complementary support for understanding traveller motivations and destination attractions. The paper's principal contribution is the integration of fragmented Ayurveda, wellness tourism and therapeutic-mobility perspectives into a unified traveller-oriented value framework for Ayurveda-based MVT in India. Seven theoretically grounded propositions are developed to guide future empirical research.*

Keywords: *Ayurveda; Medical Value Travel; medical tourism; wellness tourism; therapeutic mobility; perceived value; India; traditional medicine.*

1. Introduction

Medical tourism has developed beyond the simple movement of patients across national borders to obtain healthcare. Contemporary medical travel involves healthcare providers, patients, tourism destinations, facilitators, accommodation, transportation and other supporting services. Consequently, the value associated with health-related travel may extend beyond the clinical procedure itself to include accessibility, service quality, destination characteristics and the wider travel experience. This broader perspective is increasingly represented through the concept of Medical Value Travel (MVT). MVT emphasises the value created through the interaction of healthcare and tourism rather than viewing medical treatment as an isolated service. Such an approach is particularly relevant to countries where medical services coexist with wellness, traditional medicine and destination-based experiences.

India provides an important context for examining this development. The country's medical and wellness tourism policy has increasingly sought to integrate healthcare services, tourism infrastructure, destination development and facilitation mechanisms. The Ministry of Tourism's National Strategy and Roadmap for Medical and Wellness Tourism represents an explicit attempt to strengthen this ecosystem and position India within the international medical and wellness tourism market.

The development of India's MVT ecosystem is especially significant because healthcare-related travel in the country encompasses both modern medicine and traditional systems of medicine. Ayurveda, as one of India's established traditional healthcare systems, provides a distinctive proposition because its practices extend beyond disease-oriented treatment to encompass lifestyle, prevention, rejuvenation and holistic wellbeing. Recent research illustrates the strong relationship between Ayurveda and wellness tourism. Parakkal et al. (2024), for example, examined wellness tourism in Kerala and developed a Physical, Mental, Spiritual and Environmental framework for understanding wellness-tourism experiences. Their study highlights the multidimensional character of wellness experiences in a destination strongly associated with Ayurveda. However, Ayurveda-related travel cannot be understood solely through wellness tourism. Research on therapeutic mobility demonstrates that individuals may travel specifically to obtain Ayurveda treatment. Kaspar et al. (2023), for example, examined therapeutic mobility for Ayurveda treatment and demonstrated that treatment-related considerations form an important part of such travel. This indicates that Ayurveda can function simultaneously as a wellness experience and a health-related travel proposition.

The distinction becomes increasingly important in the context of India's policy developments. The Government of India introduced a dedicated Ayush Visa on 27 July 2023 for foreigners seeking treatment under AYUSH systems. The visa framework covers treatment and wellness at appropriately accredited or registered facilities. In July 2026, the Government further described the Ayush Visa and related initiatives as part of a comprehensive strategy to promote Ayush-based Medical Value Travel and position India as a global hub for traditional medicine and wellness tourism. These developments suggest that Ayurveda is moving from being viewed predominantly as a wellness-tourism product towards becoming part of a more formal health-travel ecosystem. Yet academic research has not developed at the same pace.

Existing studies have generated valuable insights into Ayurveda-related wellness experiences, destination resources, therapeutic mobility and healthcare services. However, these dimensions have generally been examined through separate research streams. Wellness studies emphasise holistic experience and destination attributes, while therapeutic-mobility studies focus more strongly on treatment-seeking and practical considerations. Consequently, there remains limited theoretical explanation of how these diverse dimensions collectively create value for a traveller considering Ayurveda-based Medical Value Travel. This fragmentation represents the central research problem addressed in the present paper. The issue is not simply that insufficient studies have examined Ayurveda. Rather, the existing literature does not adequately integrate the therapeutic, wellness, service, cultural, economic and destination dimensions of Ayurveda-related travel into a unified traveller-oriented model of Medical Value Travel.

To address this problem, the present paper develops a conceptual framework based primarily on Perceived Value Theory. The framework proposes six value-generating dimensions: Therapeutic Value, Holistic Wellness Value, Ayurveda Healthcare Service Quality, Authenticity and Cultural Value, Accessibility and Economic Value, and Destination Attractiveness. These dimensions are conceptualised as antecedents of Perceived Value of Ayurveda-Based MVT, which is subsequently proposed to influence Intention to Choose Ayurveda-Based MVT. The paper therefore seeks to connect three previously fragmented domains: Ayurveda and wellness tourism, therapeutic mobility, and Medical Value Travel. Its principal contribution is the integration of these dimensions into an Ayurveda-specific value framework rather than the claim that the individual determinants themselves are entirely new.

2. Review of Literature

2.1 Ayurveda, Wellness Tourism and Holistic Experience

Ayurveda has become strongly associated with wellness tourism, particularly in destinations such as Kerala. The tourism proposition surrounding Ayurveda often extends beyond treatment to encompass physical wellbeing, mental relaxation, spiritual experience, lifestyle practices and environmental qualities. Parakkal et al. (2024) demonstrate this multidimensional character through their Physical, Mental, Spiritual and Environmental framework for wellness tourism in Kerala. Their research is particularly relevant because it was conducted in a destination renowned for Ayurveda and specifically examined tourists seeking wellness treatments.

The findings support the argument that Ayurveda-related tourism creates multiple forms of benefit rather than a purely functional treatment benefit. Consequently, a traveller may evaluate Ayurveda in terms of the combined wellness experience rather than treatment alone. This literature provides the foundation for the proposed construct of Holistic Wellness Value.

2.2 Ayurveda and Therapeutic Mobility

A second stream of literature approaches Ayurveda through therapeutic mobility. Kaspar et al. (2023) examined the experiences of individuals travelling to India for Ayurveda treatment and demonstrated that therapeutic travel can involve a combination of health-related motivations and practical considerations. Their work is significant because it moves Ayurveda research beyond the conventional wellness-tourism perspective and recognises Ayurveda as a potential reason for undertaking substantial geographic mobility.

This evidence supports the proposition that Ayurveda-based MVT may involve travellers seeking therapeutic benefits rather than merely relaxation or recreation. Accordingly, Therapeutic Value represents one of the central dimensions of the proposed framework.

2.3 Healthcare Service Quality

Healthcare service quality is particularly important in medical travel because travellers experience uncertainty when obtaining treatment away from their usual healthcare environment. For Ayurveda-based MVT, service quality may encompass the competence and professionalism of practitioners, reliability of treatment delivery, communication, treatment facilities, responsiveness and perceived credibility.

The broader medical-tourism literature identifies quality and related healthcare characteristics as important considerations in medical-travel decisions. Research specifically focused on Ayurveda and wellness tourism likewise demonstrates the importance of professionally delivered services and appropriate treatment facilities. The present framework therefore treats Ayurveda Healthcare Service Quality as a value-generating dimension rather than limiting its role to service satisfaction.

2.4 Authenticity and Cultural Value

Ayurveda possesses a cultural dimension that differentiates it from many conventional medical-tourism services. The treatment experience can be connected to Indian traditional knowledge, cultural practices and historically embedded approaches to health and wellbeing. The destination literature on Kerala demonstrates that cultural and natural resources contribute to the broader wellness-tourism proposition. Such characteristics may enhance the symbolic and experiential value associated with travelling to India for Ayurveda. Therefore, Authenticity and Cultural Value is incorporated into the proposed framework as a dimension through which Ayurveda-based MVT may generate additional perceived benefits.

2.5 Accessibility and Economic Value

Medical travel involves both benefits and sacrifices. Travellers may consider treatment cost, availability, waiting time, travel effort and the ease of obtaining healthcare services. Research on therapeutic mobility for Ayurveda demonstrates the importance of practical considerations such as treatment availability, cost and waiting time. These factors are particularly relevant to MVT because the traveller must undertake geographic mobility to obtain the desired healthcare service. Consequently, Accessibility and Economic Value represents the relationship between the practical benefits of obtaining Ayurveda treatment and the sacrifices associated with travelling for it. This construct is consistent with Perceived Value Theory, which conceptualises value partly through the relationship between perceived benefits and perceived sacrifices.

2.6 Destination Attractiveness

The destination itself forms an important part of Ayurveda-related travel. Natural resources, cultural heritage, climate, tourism infrastructure, accommodation and the overall environment can enhance the experience surrounding Ayurveda treatment. Research on Kerala's wellness tourism demonstrates the importance of destination resources in shaping its wellness proposition. Therefore, Ayurveda-based MVT should not be conceptualised solely as a healthcare-provider decision. The traveller may evaluate the destination as part of the total value proposition. Accordingly, Destination Attractiveness is proposed as another antecedent of perceived value.

3. Theoretical Foundation

3.1 Perceived Value Theory

Perceived Value Theory constitutes the principal theoretical foundation of this framework. Zeithaml (1988) conceptualised perceived value as a consumer's overall assessment of the utility of a product or service based on perceptions of what is received and what is given. Sweeney and Soutar (2001) subsequently demonstrated that consumer

value is multidimensional and may incorporate several types of benefits. This perspective is particularly appropriate for Ayurveda-based MVT because travellers evaluate several dimensions simultaneously.

A prospective traveller may consider:

- therapeutic benefits;
- holistic wellbeing;
- quality of healthcare delivery;
- authenticity of the Ayurveda experience;
- cultural benefits;
- affordability;
- accessibility; and
- destination characteristics.

These individual evaluations can collectively produce an overall judgement regarding whether travelling to India for Ayurveda is worthwhile. The proposed framework therefore positions Perceived Value as the central integrating mechanism.

3.2 Push–Pull Theory

Push–Pull Theory provides complementary theoretical support. Push factors relate to internal motivations that encourage travel, such as health needs, desire for wellbeing or dissatisfaction with existing healthcare options. Pull factors are destination characteristics that attract travellers, such as Ayurveda availability, destination reputation, cultural authenticity, natural resources and healthcare facilities. The proposed framework therefore incorporates both perspectives indirectly. Therapeutic Value and Holistic Wellness Value can reflect traveller-oriented benefits, whereas Destination Attractiveness, Authenticity and Cultural Value, and Healthcare Service Quality can contribute to destination-related attractiveness. However, Perceived Value Theory remains the principal theoretical foundation because the central purpose of the framework is to explain how these diverse benefits are integrated into an overall value judgement.

4. Research Gap

The review reveals four interconnected gaps.

4.1 Conceptual Gap

Ayurveda-related tourism has predominantly been examined through wellness-tourism and therapeutic-mobility perspectives. These perspectives provide valuable but incomplete explanations of Ayurveda-based MVT.

4.2 Theoretical Gap

The literature identifies numerous determinants but provides limited integration of them through a unified theoretical mechanism explaining how they collectively generate value.

4.3 Relational Gap

Existing studies identify attributes associated with Ayurveda tourism, wellness and therapeutic travel, but the relationships among these attributes, overall perceived value and behavioural intention remain insufficiently integrated.

4.4 Contextual Gap

India has increasingly institutionalised AYUSH-based medical travel. The introduction of the Ayush Visa in 2023 and subsequent government emphasis on Ayush-based MVT demonstrate the emergence of an institutional ecosystem. However, a corresponding traveller-oriented conceptual model remains underdeveloped.

The research gap can therefore be stated as follows:

Existing research provides fragmented evidence concerning the therapeutic, wellness, service, cultural, economic and destination dimensions of Ayurveda-related travel, but lacks an integrated theoretical explanation of how these

dimensions collectively create perceived value and influence travellers' intention to choose Ayurveda-based Medical Value Travel in India.

5. Research Purpose

The purpose of this conceptual paper is to synthesise existing literature on Ayurveda, wellness tourism, therapeutic mobility and Medical Value Travel and to develop a theoretically grounded framework explaining how therapeutic, wellness, service, cultural, economic and destination-related dimensions contribute to perceived value and intention to choose Ayurveda-based Medical Value Travel in India.

6. Research Objectives

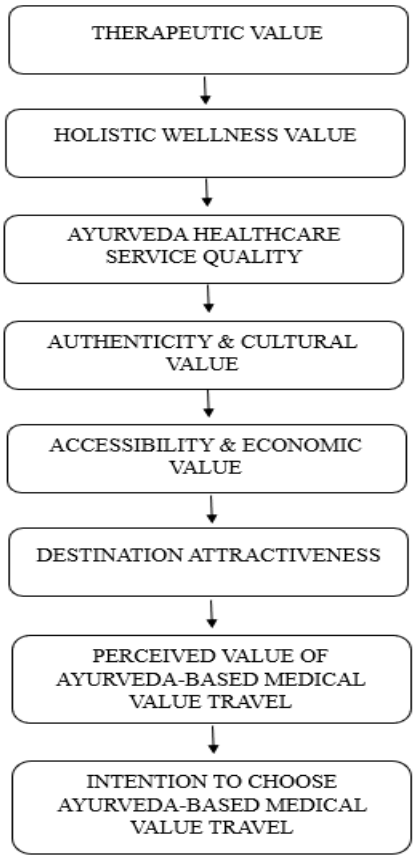
The paper seeks to:

1. Critically synthesise existing literature on Ayurveda tourism, wellness tourism, therapeutic mobility and Medical Value Travel.
2. Identify and integrate the major determinants relevant to the value proposition of Ayurveda-based Medical Value Travel.
3. Establish a theoretically grounded explanation of how the identified determinants contribute to travellers' perceived value of Ayurveda-based Medical Value Travel.
4. Develop a conceptual framework and theoretically grounded propositions linking the identified determinants, perceived value and intention to choose Ayurveda-based Medical Value Travel.

7. Proposed Conceptual Framework

The framework consists of six antecedent constructs, one central value mechanism and one behavioural outcome.

Figure 1. Proposed Conceptual Framework



Source: Author's own construction based on the reviewed literature.

8. Construct Development

8.1 Therapeutic Value

Therapeutic Value represents the perceived health-related benefits that a traveller expects to obtain through Ayurveda treatment. Previous therapeutic-mobility research supports the relevance of treatment-related considerations in Ayurveda travel. The present paper extends this evidence by positioning therapeutic value as a contributor to overall MVT value.

Proposition 1 (P1): Therapeutic Value positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

8.2 Holistic Wellness Value

Holistic Wellness Value represents the perceived physical, mental, spiritual and broader wellbeing benefits associated with Ayurveda. Recent Kerala research supports the multidimensional character of wellness tourism associated with Ayurveda.

Proposition 2 (P2): Holistic Wellness Value positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

8.3 Ayurveda Healthcare Service Quality

Ayurveda Healthcare Service Quality represents the traveller's perception of the professionalism, reliability, responsiveness, credibility and quality of Ayurveda healthcare delivery. High-quality healthcare services can increase expected benefits and reduce uncertainty associated with medical travel.

Proposition 3 (P3): Ayurveda Healthcare Service Quality positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

8.4 Authenticity and Cultural Value

Authenticity and Cultural Value represents the perceived benefit derived from experiencing Ayurveda as an Indian traditional healthcare system embedded within cultural knowledge and practices. The cultural dimension can differentiate Ayurveda-based MVT from conventional medical tourism.

Proposition 4 (P4): Authenticity and Cultural Value positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

8.5 Accessibility and Economic Value

Accessibility and Economic Value captures the perceived affordability, availability and convenience of obtaining Ayurveda treatment through travel.Treatment cost, availability and waiting time have been identified as relevant considerations in therapeutic mobility.

Proposition 5 (P5): Accessibility and Economic Value positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

8.6 Destination Attractiveness

Destination Attractiveness represents the extent to which natural, cultural, infrastructural and tourism characteristics make India attractive for Ayurveda-based MVT. Recent Kerala research confirms the importance of environmental and destination dimensions in wellness-tourism experiences.

Proposition 6 (P6): Destination Attractiveness positively contributes to the Perceived Value of Ayurveda-Based Medical Value Travel.

9. Perceived Value as the Central Mechanism

The framework positions Perceived Value as the central mechanism connecting the six dimensions with behavioural intention. The proposed logic is that travellers do not necessarily respond directly to every individual attribute. Instead, they may integrate the benefits and sacrifices associated with Ayurveda-based MVT into an overall evaluation. For example, a traveller may perceive strong therapeutic benefits but simultaneously consider treatment cost and accessibility. Another traveller may value Ayurveda's authenticity and wellness benefits but place greater emphasis on healthcare service quality. Perceived Value therefore provides a theoretically appropriate mechanism through which diverse attributes can be integrated into a single overall evaluation.

10. Perceived Value and Intention to Choose Ayurveda-Based MVT

The final relationship proposes that favourable perceived value increases intention to choose Ayurveda-based MVT. When travellers perceive that the total benefits of the Ayurveda journey justify the associated monetary, temporal and psychological sacrifices, they are expected to develop a stronger intention to select Ayurveda-based MVT.

Proposition 7 (P7): Perceived Value of Ayurveda-Based Medical Value Travel positively contributes to Intention to Choose Ayurveda-Based Medical Value Travel.

11. Summary of Propositions

Proposition	Proposed relationship
P1	Therapeutic Value → Perceived Value
P2	Holistic Wellness Value → Perceived Value
P3	Ayurveda Healthcare Service Quality → Perceived Value
P4	Authenticity & Cultural Value → Perceived Value
P5	Accessibility & Economic Value → Perceived Value
P6	Destination Attractiveness → Perceived Value
P7	Perceived Value → Intention to Choose Ayurveda-Based MVT

12. Theoretical Contribution

The framework makes three principal theoretical contributions. First, it extends Ayurveda tourism research from a predominantly wellness-oriented perspective towards an integrated Medical Value Travel perspective. Second, it applies Perceived Value Theory to integrate multiple dimensions of Ayurveda-based travel. Rather than treating therapeutic, wellness, service, cultural, economic and destination characteristics as isolated variables, the framework conceptualises them as complementary sources of overall value. Third, the framework provides a traveller-oriented perspective. Much existing discussion focuses on destinations, providers, policy or therapeutic mobility. The present model instead asks how a prospective traveller may evaluate the complete Ayurveda-MVT proposition. The paper therefore contributes a conceptual bridge between Ayurveda tourism, wellness tourism, therapeutic mobility and Medical Value Travel.

13. Practical Implications

The framework has implications for healthcare providers, destination marketers and policymakers.

13.1 Ayurveda Healthcare Providers

Providers should not focus exclusively on treatment availability. The proposed framework suggests that perceived value may also depend on healthcare service quality, authenticity, wellness experiences and accessibility.

13.2 Destination Marketers

Destination marketers can position Ayurveda as an integrated health, wellness and cultural experience rather than simply as a spa or wellness product.

13.3 Policymakers

Policy development can focus on improving accessibility, quality assurance, accreditation, information availability and coordination between healthcare and tourism stakeholders. The introduction of the Ayush Visa provides an important institutional foundation for this development. The Government has explicitly linked the Ayush Visa and related measures to the promotion of Ayush-based MVT.

14. Methodological Approach for Future Empirical Research

Although the present paper is conceptual, the proposed framework provides a foundation for future empirical investigation. Future researchers can operationalise the six antecedent constructs using validated measurement scales adapted to the Ayurveda-MVT context. The proposed relationships can subsequently be tested using survey-based

methods among prospective or actual Ayurveda medical travellers. Structural equation modelling could be considered for testing the complete framework because the model contains multiple latent constructs and a proposed mediating relationship through perceived value. However, such empirical testing falls outside the scope of the present conceptual paper.

15. Limitations and Future Research

The conceptual nature of the paper represents its primary limitation. The proposed relationships have not been empirically tested in the present study. Future research should therefore examine the framework using primary data from international and domestic travellers who have considered or experienced Ayurveda-based MVT.

Future empirical studies could also investigate whether the framework operates differently across:

- international versus domestic travellers;
- first-time versus repeat Ayurveda travellers;
- treatment-seeking versus wellness-oriented travellers;
- different age groups;
- different source countries; and
- different Ayurveda destinations within India.

Future research could also investigate whether perceived value mediates the relationship between the proposed antecedents and behavioural outcomes.

16. Conclusion

Medical Value Travel is increasingly being understood as an ecosystem that extends beyond conventional medical treatment to include healthcare, wellness, destination and supporting tourism services. India represents a particularly relevant context because its MVT ecosystem includes both modern healthcare and traditional systems such as Ayurveda. Ayurveda occupies a distinctive position at the intersection of medical and wellness tourism. Existing research demonstrates its importance in wellness tourism and provides evidence of therapeutic mobility for Ayurveda treatment. Recent Indian policy developments, including the introduction of the Ayush Visa and explicit government efforts to promote Ayush-based Medical Value Travel, further demonstrate the growing institutional relevance of this sector. Nevertheless, academic research remains fragmented across wellness tourism, therapeutic mobility, service quality and destination studies. The present paper responds to this fragmentation by proposing a theoretically grounded value framework.

The framework identifies six dimensions—Therapeutic Value, Holistic Wellness Value, Ayurveda Healthcare Service Quality, Authenticity and Cultural Value, Accessibility and Economic Value, and Destination Attractiveness—as potential sources of perceived value. Perceived Value is subsequently proposed to influence travellers' intention to choose Ayurveda-based MVT. The primary contribution of the paper is therefore the integration of fragmented dimensions into a unified traveller-oriented framework for Ayurveda-based Medical Value Travel in India. Rather than positioning Ayurveda exclusively as wellness tourism or conventional medical tourism, the framework conceptualises it as a multidimensional Medical Value Travel proposition in which therapeutic, experiential, cultural, service, economic and destination benefits collectively contribute to traveller-perceived value. The seven propositions developed in the paper provide a foundation for future empirical research and testing of this emerging conceptualisation.

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