

INNOVATION SCIENCE AND TECHNOLOGY

ISSUE 6, PART 1 / JUNE 2026

 Acceptance of papers



**Acceptance of
papers**

Published monthly



Topics

economics,
technology, social
sciences



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JOURNAL **"INNOVATION SCIENCE AND
TECHNOLOGY"** HAS BEEN REGISTERED
UNDER THE NUMBER **C-5669633** BY THE
AGENCY FOR INFORMATION AND MASS
COMMUNICATIONS (AOKA) OF THE
REPUBLIC OF UZBEKISTAN, EFFECTIVE
FROM OCTOBER 9, 2024.

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The scientific electronic journal "Innovation Science and Technology" has been included in the list of scientific publications recommended for the publication of main scientific results of dissertations for the award of PhD and DSc degrees in economics and technical sciences, in accordance with the Resolution No. 370 of the Presidium of the Higher Attestation Commission of the Republic of Uzbekistan, dated May 8, 2025.

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CONTENTS

FORMATION OF MEDICAL TOURISM CLUSTERS IN THE REGION

Yusupova Mehribon O'ktamovna

Associate Professor at Urgench State University named after Abu Rayhan Biruni

Annotatsiya. Mazkur tadqiqotda mintaqada tibbiy turizm klasterlarini shakllantirishning nazariy asoslari va amaliy istiqbollari tahlil qilindi. Tadqiqot davomida tibbiy turizm bozorining rivojlanish tendensiyalari, klaster yondashuvining nazariy tamoyillari hamda O'zbekiston va Buxoro mintaqasi misolida infratuzilma rivojlanishi o'rganildi. Klaster tarkibiga klinikalar, sanatoriylar, mehmonxonalar, transport xizmatlari, sayyohlik operatorlari va davlat institutlari kiritildi. Tahlil natijalari tibbiy va turistik infratuzilmaning parallel rivojlanishi xorijiy bemorlar oqimini ko'paytirganini, xizmatlar sifati va hududiy iqtisodiy faollikni oshirganini ko'rsatdi. Tadqiqot asosida klaster ishtirokchilarini muvofiqlashtirish, xalqaro sertifikatlashni kengaytirish va davlat-xususiy sheriklik mexanizmlarini rivojlantirish bo'yicha amaliy tavsiyalar ishlab chiqildi.

Kalit so'zlar: tibbiy turizm, klaster, mintaqaviy rivojlanish, sog'liqni saqlash, infratuzilma, xalqaro sertifikatlash, davlat-xususiy sheriklik, turizm xizmatlari, raqobatbardoshlik.

Аннотация. В исследовании были рассмотрены теоретические основы и практические перспективы формирования кластеров медицинского туризма в регионах. Были изучены тенденции развития рынка медицинского туризма, принципы кластерного подхода, а также развитие инфраструктуры на примере Узбекистана и Бухарского региона. В структуру кластера были включены клиники, санатории, гостиницы, транспортные службы, туристические операторы и государственные институты. Результаты анализа показали, что параллельное развитие медицинской и туристической инфраструктуры способствовало росту потока иностранных пациентов, повышению качества услуг и активизации региональной экономики. По итогам исследования были разработаны практические рекомендации по координации участников кластера, расширению международной сертификации и развитию механизмов государственно-частного партнёрства.

Ключевые слова: медицинский туризм, кластер, региональное развитие, здравоохранение, инфраструктура, международная сертификация, государственно-частное партнёрство, туристические услуги, конкурентоспособность.

Abstract. This study examined the theoretical foundations and practical prospects of developing medical tourism clusters in regional economies. The research analyzed medical tourism market trends, the principles of the cluster approach, and infrastructure development using Uzbekistan and the Bukhara region as examples. The cluster structure included healthcare institutions, sanatoriums, hotels, transport services, tourism operators, and public institutions. The findings demonstrated that the parallel development of medical and tourism infrastructure increased international patient flows, improved service quality, and strengthened regional economic activity. Based on the results, practical recommendations were developed to enhance stakeholder coordination, expand international accreditation, and strengthen public-private partnership mechanisms. The study confirmed the importance of cluster-based development for improving competitiveness and supporting sustainable regional growth.

Keywords: medical tourism, cluster, regional development, healthcare, infrastructure, international accreditation, public-private partnership, tourism services, competitiveness.

INTRODUCTION

In the global economy, medical tourism has evolved into an independent and rapidly expanding sector over the last decade. According to Grand View Research estimates, the global medical tourism market was valued at 34.0 billion USD in 2025 and is projected to reach 126.2 billion USD by 2035, growing at a compound annual growth rate (CAGR) of 14.1% during the 2026-2035 period [1]. Such market expansion is attributed to the increasing international mobility of patients, disparities in treatment costs, and the growing demand for high-tech medical services.

Uzbekistan is emerging as one of the countries actively integrating into this process. According to official statistics, during the first eight months of 2024, more than 74.7 thousand foreign citizens visited the country for treatment purposes; this indicator has increased by 83.6 percent compared to the same period of the previous year [2]. The vast majority of medical tourists originate from neighboring countries, and such dynamics are strengthening the country's position as a regional medical hub.

State policy is directed towards the systematic development of this potential. The Presidential Decree

adopted on September 23, 2024, provides for the development of medical and wellness tourism, the establishment of medical tourism clusters, and the operation of modern hotel-type sanatoriums [3]. The decree outlines the introduction of a unified registry of medical and wellness institutions and the acceleration of international certification for clinics. At the government level, the «Medical Hospitality» program has been announced, with the country planning to generate an annual revenue of 300 million USD from medical services and tourism [4].

From a practical perspective, the cluster model is considered the most effective organizational form for achieving these objectives. A cluster unites clinics, sanatoriums, hotels, transport and logistics services, tour operators, and state institutions within a single territorial space, creating additional value through their mutual cooperation. The practical orientation of the article aims to determine the stages, participants, and economic impact of forming a cluster at the regional level. Such an approach consolidates the region's resources, enhances the quality of services, and diversifies the regional economy.

The aim of the research is to elucidate the theoretical foundations of forming a medical tourism cluster in the region and to substantiate its practical prospects using available statistical data. The objectives encompass the following: examining the application of the cluster approach to medical tourism; identifying the composition of cluster participants; evaluating infrastructure dynamics using the examples of Uzbekistan and the Bukhara region; and proposing a cluster model that ensures balanced regional development.

LITERATURE REVIEW

The theoretical foundation of the cluster concept was developed by M. Porter. According to his definition, a cluster is a geographic concentration of interconnected companies, suppliers, service providers, and associated institutions operating in a particular field, which are simultaneously linked by both competition and cooperation [5]. Such an approach is widely recognized as a mechanism that transforms regional competitiveness from a comparative advantage to a competitive advantage.

Studies on adapting cluster theory in the tourism sector have demonstrated the suitability of Porter's model for the fragmented structure of the industry. Researchers have substantiated that the development of a tourism cluster depends on resource provision and the ability to efficiently allocate these resources; through a cluster, small enterprises gain the opportunity to operate sustainably during the market entry stage [6]. Given that medical tourism is an industry with precisely such a fragmented structure, the cluster approach is highly applicable to it.

The concept of a medical tourism cluster has been studied separately. According to data from industry organizations, the formation of a healthcare cluster is considered a central step in establishing a medical tourism destination; in this context, hospitals, physicians, government bodies in healthcare and tourism, tour operators, and hotels act collaboratively to create a single, recognizable brand [7]. The cohesive reputation of the cluster becomes a key factor in increasing patient flows.

The developmental stages of a cluster have also been classified. Experts distinguish four phases: pre-cluster, emerging, expanding, and mature stages. In the emerging stage, hospitals begin to work with hotels and certain intermediaries; in the expanding stage, insurance companies, medical tourism companies, and the government join the network; and in the mature stage, robust collaboration is formed among all participants [8]. This stage-based model provides a practical criterion for assessing the current state of a cluster and planning subsequent steps.

International experience confirms the effectiveness of the cluster model. Mapping the medical tourism cluster in the case of Turkey has shown the positive impact of regional clustering on competitiveness [9]. Studies examining the experience of Thailand have substantiated the importance of the state's guiding role in cluster formation and development; the government acts as a facilitator that formulates policies to support cluster competitiveness [10]. Furthermore, the analysis of the Costa Rican cluster has demonstrated that the existence of a single institution coordinating the activities of participants is essential for long-term sustainability [11].

The value creation process within a cluster has been studied from a multi-stakeholder perspective. Researchers have established that, besides hospitals and patients, the government, medical intermediaries, material suppliers, and the local community jointly participate in value creation; the collaboration of these stakeholders enhances service quality and patient loyalty [12]. The co-creation of value transforms the cluster from a simple geographic concentration into a functional system.

The prospects of medical tourism in the context of Uzbekistan have been analyzed separately. It is noted that the number of inbound medical tourists to the country increased from 12 thousand in 2015 to over 61 thousand in 2023. Currently, there are opportunities to expand the international certification of clinics and develop multilingual services, and a comprehensive approach encompassing legal, infrastructural, personnel,

and regional dimensions has been recommended [13]. Research on improving the management mechanisms of the sanatorium-resort complex has substantiated a partially decentralized management system that combines vertical coordination with horizontal integration through a sectoral association [14]. Such a system ensures a balance between state regulation and market freedom.

RESEARCH METHODOLOGY

The research is based on the integration of theoretical generalization and practical analysis methods. M. Porter's theory of competitive advantage [5] and models of tourism cluster development [6] were adopted as the conceptual framework for cluster formation. The structural participants of the medical tourism cluster were identified through a multi-stakeholder approach [12], while the progressive development of the cluster was interpreted based on a stage-based model [8].

Open and verified statistical sources were utilized as the empirical foundation. Country-level medical tourist flow indicators were obtained from international information sources relying on official statistics [2], whereas state policy was examined on the basis of normative documents [3]. The regional level was examined using the example of the Bukhara region, and changes in healthcare capacity, as well as the number of hotels and tourism enterprises, were taken into account based on a scientific source utilizing regional statistical data [15].

To ensure the consistency of the analysis, the data were structured at three levels: global market dynamics, national flow indicators, and regional infrastructural capacity. The data utilized in the study were analyzed based on indicative metrics that allow for the assessment of the overall scale and structure of medical tourism development [15]. Since all numerical indicators were obtained from open sources with available references, the results of the analysis are fully verifiable.

ANALYSIS AND RESULTS

The functional structure of the cluster consists of complementary participants located around its central core. Figure 1 presents the structural model of the medical tourism cluster, in which clinics and multidisciplinary hospitals, sanatorium and resort facilities, hotels, transport and logistics services, tour operators, state institutions, certification, and insurance services are integrated into a single system. The collaborative activity of these participants provides the patient with a comprehensive service chain and enhances the competitiveness of the cluster [12].

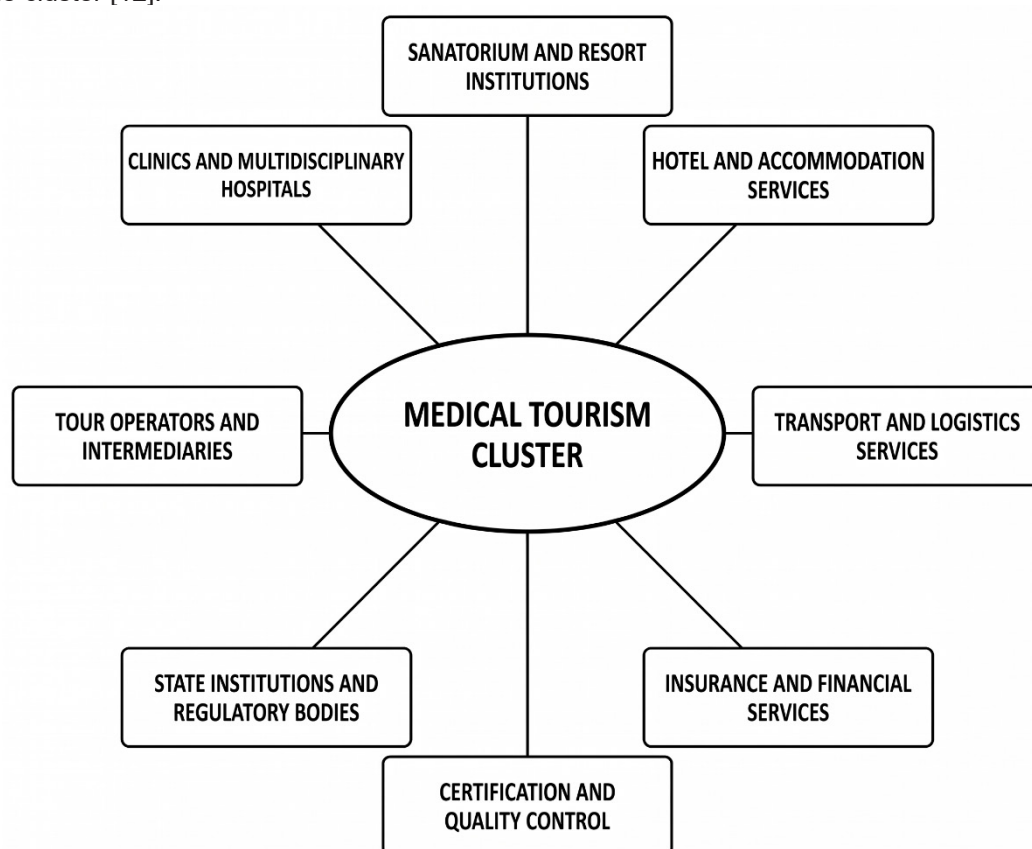


Figure 1. Structural model of the regional medical tourism cluster

At the regional level, the formation of medical tourism infrastructure is characterized by positive dynamic trends. Specifically, in the Bukhara region, the number of hotels has reached 607, and the number of tourism

enterprises has reached 186 [15]. The infrastructural capacity of the healthcare system is also consistently expanding. In particular, the number of hospital facilities in the region increased from 89 in 2020 to 134 in 2024, growing by 50.5 percent over four years. The highest growth rates were recorded in 2023 at 24.2 percent and in 2024 at 13.6 percent [15]. At the same time, the number of medical organizations among small business entities increased from 58 to 66, contributing to the diversification of the medical services market. These growth trends can be evaluated as a result of the expansion of public-private partnership mechanisms and reforms aimed at developing medical tourism clusters [15].

At the national level, the medical tourism sector is also demonstrating stable development rates. Specifically, the number of medical tourists visiting Uzbekistan increased from 32.4 thousand in 2021 to 86.2 thousand in 2025, transforming the country into one of the most active and promising medical tourism destinations in Central Asia [15]. This process indicates the growing quality of medical services, infrastructural capabilities, and the country's increasing competitiveness in the international market. The development dynamics of medical tourism infrastructure and service capacity, using the example of the Bukhara region, are presented in

Table 1.

Dynamics of infrastructure and medical tourist flow in the Bukhara region[1]¹

Indicator	2020/2021	2024/2025	Change, in percent (%)
Hospital facilities, units	89	134	50.5
Small business medical organizations, units	58	66	13.8
Hotels, units	-	607	-
Tourism enterprises, units	-	186	-
Inbound medical tourists to the country, individuals	32,400	86,199	growth

The indicators in Table 1 confirm the practical effectiveness of the cluster model: medical capacity and tourism infrastructure are growing in parallel, and their regional concentration is forming a comprehensive service system. As a result of state policy stimulating the international certification of clinics, the quality of services is adapting to international requirements [3]. Such rapid formation of regional infrastructure strengthens the possibility of the cluster transitioning from the expansion stage to the maturity stage [8].

The analysis also highlights the necessity of focusing on the issue of territorial distribution. In the Bukhara region, a significant portion of hospital facilities is located in the regional center, and there are additional opportunities to further expand the capacity of medical services in the districts in the future [15]. A distributed manifestation of the cluster model that ensures balanced territorial development will create an opportunity to more effectively utilize the potential of all areas of the region in the future: directing new medical and wellness capacities to peripheral districts will reduce intra-regional disparities and more fully engage the region's potential. Such an approach can be implemented through public-private partnership instruments [3].

The obtained results connect the theoretical model with practical data. The geographic concentration of interconnected participants emphasized in Porter's theory [5] is taking a real form in the case of Bukhara: the concurrent growth of hospitals, hotels, and tourism enterprises indicates that the core of the cluster is being formed. Meanwhile, international experience confirms that the guiding role of the state [10] and the presence of a coordinating institution [11] are the conditions that ensure the sustainability of the cluster. The normative document adopted in Uzbekistan legally reinforces precisely these conditions [3].

CONCLUSION AND RECOMMENDATIONS

The conducted analysis has demonstrated that the formation of medical tourism clusters in the region is a theoretically well-founded and practically promising direction. The cluster model integrates clinics, sanatoriums, hotels, transport, tour operators, and state institutions into a single system, providing the opportunity to efficiently utilize regional resources and enhance the quality of services.

Empirical data have confirmed that the cluster approach is yielding tangible results within the context of Uzbekistan. The parallel growth of medical and tourism infrastructure in the Bukhara region, along with the increase in the flow of medical tourists at the national level, demonstrates the positive impact of clustering reforms. The strengthening of state programs and the regulatory framework robustly supports this continuous growth.

Based on the research results, the following recommendations have been developed. First, it is expedient to establish a single institution coordinating the activities of cluster participants in each region; this institution

¹ Source: Frontiers in Sustainable Tourism, 2026 [15].

will ensure long-term sustainability. Second, linking public-private partnership instruments with the allocation of new capacities in peripheral districts will significantly strengthen regional balance. Third, continuing the international certification of clinics will enhance the international competitiveness of the provided services. Fourth, implementing a partially decentralized system that harmonizes vertical coordination and horizontal integration in cluster management is considered highly effective.

As a final conclusion, it can be emphasized that the formation of a distributed medical tourism cluster in the region serves balanced regional socio-economic development. The cluster model diversifies the regional economy, creates new jobs, and solidifies the country's position in the international medical services market. It is advisable that future studies be directed towards the quantitative assessment of cluster efficiency based on patient-level data.

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Proofreader: Zokir ALIBEKOV

Layout and Designer: Oloviddin Sobir ugli

2026. № 6

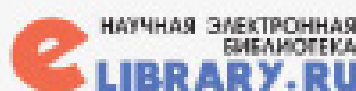
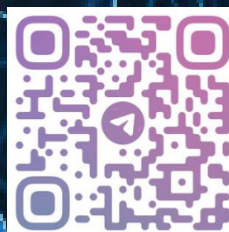
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