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*Dr. Mehtab Alam*

## ABSTRACT

Effectively reducing the possible hazards connected with the facilitation of gender medical travel and tourism is the advancement of the artificial intelligence health system. The AI enhancement is to monitor and include the characteristics of medical journey from the initial location to the destination for treatment. Using a quantitative research technique (a survey research instrument and a PLS-SEM model), the study aims to enhance AI health systems to facilitate medical travel and tourism. 379 responders, including medical professionals, tourist experts, gender experts, and interested thinkers in AI health and technology, provided the data. According to the study findings, the AI health system of medical travel and tourism has significantly improved as a result of international medical legislation, cultural differences, safe medical destinations, and extended medical travel for gender people. In indicating AI while preserving the dignity of the holy site or the trip, the study raises the particular attention that religious travellers with gender based medical issues. Future research may concentrate on the expanded function of AI with particular emphasis to guarantee the honour and respect of the tourist location. For the best results from a reputable and secure gender vacation location, it is advised that AI deployment in the health system be centralized.

*Keywords:* artificial intelligence, health system, gender, medical travel and tourism.

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## I. INTRODUCTION

The advance artificial intelligence health system is engaged with the elements of gender based health, medical travel and tourism, global medical regulations, cultural differences, safe medical destination and prolong medical travelling (An, 2021). These are potential elements confronting multiple risks associated with the medical travel and tourism (Sumra & Alam, 2021). It is the responsibility of coincided advancements that allow gender s from the multiple destination to avail medical treatments (Peng et al., 2022). The enhance experience of the gender and the improve quality of care through the leading tools of AI is a reason for attractions within the medical tourism (Paryati, 2022). The enhanced role of AI in medical tourism are inter-related with the better health care system that is to transform the process of treatments for the gender. The care delivery service and the efficient channel of satisfying the gender arrange the automated administrative tasks while streamlining the operations and reduce risk of human error (Mahoney and Tang, 2024). The schedule for the appointments and the management of the gender medical record are to automate the system functioning within the health care. The personalization of the care is to integrate the AI role within the data patterns and trends of the gender health (Souza, 2021). It is sharing of the tailored plans of treatment for the bridging of the language barriers and presentation of the soft tools of gender satisfaction.

The use of the AI powered translation instruments for interventions of gender issues and medical professionals are reducing the communication gap, which is a major obstacle for rightful use of

medical services (Gualdrón, 2023). For medical tourism similar activities are transforming the deeper AI technologies while sharing the key areas of the medical tourism to improve the care of gender and experience (Bhat & Arumugam, 2021). The overall gender medical experience is transformed with the positive measures within the diagnostic evaluations. It is the support for the valuable insights having decisions from AI tools to proceed for the surgical procedure, treatment plans and the timely use of medication (Alam & Bahrein, 2021). The adaptation of the medical treatments is linked with the data support in terms of accurate treatment to be given to the gender (Olson and Reddy-Best, 2019). The individual seeking for the medical care in other region or the industry is assisted by the AI monitoring which is to follow-up the care through the remote services and sensor devices (Bhatia and Maidullah, 2022). The remote application of the AI tools in health care are to track the gender progress and monitoring with respect to the health (Andersen, 2022).

The incorporation of the AI in medical tourism is extremely essential to meet the desires of gender for the standard care and improve health care outcomes (Lewis et al., 2021). The dynamic process is following the ethical consideration towards the integrating AI in medical tourism and to share the able administrative process for health care (Andrade & Dinis, 2019). The human error in the conventional use of medical care are time consuming processes with the expensive diagnosis faced by the gender (Toth & Mason, 2021). It is the modification with AI system that result in faster data analysis and meeting the delays in documentations for limiting the delays and error-free medical treatment (Kama, 2023). The AI platform for the health care and medical tourism are to provide the electronic health records with the secure storage and access for the separate gender record. The improve efficiency is to enhance the data and security privacy (Alam & Kuppusamy, 2023). The readily available focus of the quality health care is enhancing the ultimate service for gender care and support the health care professionals to advance the process of effective decision making (Zarei et al., 2020). This

research is to examine the health system to be improved using the AI apparatus and to focus on lowering the potential threat to medical travel and tourism.

## II. LITERATURE REVIEW

The assistance for the artificial intelligence health system, medical travel and tourism, global medical regulations, cultural differences, safe medical destination and prolong medical travelling is to improve gender medical record (Chandran et al., 2020). It is followed with the AI-Driven information for the health care providers those are to assess the gender data in a progressive manner (Tsaih & Hsu, 2018). It is to ensure the readily available need of the improvement for the data privacy and security. The use of the travel and tourism elements in the medical tourism are to encourage the quality health care services (Sumra et al., 2020). These are the considered satisfaction and the experience of the treatment in a progressive manner. For that reason, quality health care services for the gender are the prime motive for the satisfaction and experience which is to support the capabilities of the decisions taken for the betterment of genders (Fileri et al., 2021). The integration of the artificial intelligence in medical tourism is aligned sourcing of the treatments with the plans of advance diagnosis and care of the gender. It is the use of advance algorithms which is providing for the treatment plans and the care of the gender (Doborjeh et al., 2022). These are the continuous learning and adaptation of the personalized treatment plans for the latest search and practice in up-to-date information for systematic solution to the problems of health care. The use of the AI technology is embracing the evidence-based care which is providing high quality health care to the genders (Samara et al., 2020).

The challenge of global medical regulations, cultural differences and implementing the AI in medical tourism is lacking infrastructure with the advance instruments to integrate within the health care system (Alam et al., 2023). The coordination and continuous communication are providing the technology expertise for the data exchange and seamless connectivity (Wang and

Uysal, 2024). It is the collaboration from the autonomous provisions for the regulating of the privacy within the errors for the data security that is addressed through the efficient use of AI. This is enhanced with the trust and confidentiality that endorse the regulation of extensive training and education which is a supporting feature for the health care professionals (Jabeen et al., 2022). The care and gender experience with the technology is acknowledged through the leverage provided by the AI (Wong et al., 2022). These are supported by the compelling options of the artificial intelligence with the evolving role of ethical consideration in healthcare. The ethical extension of the accountability is managed with the major concerns of the gender information that is to prevent the unauthorized access to the data (Ivanov and Webster, 2019). Gender from the globe attract the medical services those are ensuring highest standards within the ethical and trustworthy experience of the health care.

The standards of the health care with respect to the artificial intelligence is paramount for the performance of desire medical destination that is to ease the facilities for gender (Bagga et al., 2020). It refers to the concerned support which is required in the form of ticketing, accommodation and the use of the tour operator services. For that matter, the aligned evaluation of the medical tourism is sharing the construct forecasting to fully implement the technological use of surgical procedures (Yoon and Lee, 2018). The arrivals over the medical tourism site are to ensure the marketing effectiveness and cost of the medical that expense that identified the competitive role of prolong travelling and use of safe destinations for genders. The medical tourism and the destination information system is to align the artificial intelligence as a mechanism for the competitive role of health care (Gaur et al., 2021). The enhance travelling of the patients are connected with the identified performance which is the following and using the global medical regulations, cultural differences, safe medical destination and prolong medical travelling (Lv et al., 2022). This is extending the role of medical research and tourism integration for the better and multiple opportunities those are to link with

the propagating marketing and sustainable development of the tourism.

The medical tourism offers safe medical destination and management of prolong medical travelling for the larger role of AI in health care system to satisfy the global genders arriving from the multiple destinations (Zhang et al., 2023). It is the attraction of the artificial intelligence to attract the gender while satisfying the appointment scheduling and valuable billing for the medical record. The efficiency enhanced the overall experience which is making of the medical tourism as an option of quality healthcare abroad (Arrioja-Castrejón and López-Fernández, 2021). The potential for revolutionizing the treatment plans is engaged with the machine learning diagnostics and vast analysis of the medical data. The continuous analysis and the shared improvements of the data leads to the improved outcomes for the sustainable prospects of the virtual reality and augmented reality-based technologies (De la Hoz-Correa et al., 2018).

The remote consultation for a traveller or the person within the scope of medical tourism is to receive the expert medical advice with the essential needs of travelling. The pre-operative planning for the overall gender's journey is endorsing the medical tourism which is the striking share of support to the medical tourism (Chaulagain and Hancer, 2023). The personalized care of reducing the costs with the use of augmented reality costs are the pre-operative and post-operative diagnostic for the compassionate health care experience of the medical tourists (Spoladore and Pessot, 2023). The forecasting of the travelling for medical tourism is possible with the alignment of tourists towards the desire destination with the improve standard of meeting the cultural differences. It is followed by the consideration of the desire regulations and the rules for obtaining medical visa which is a barrier for genders. The prolong medical travelling for frequent travellers is limited with the artificial intelligence in health system as the scope of prolong travelling is to improve the distance performance of the patient, which leads the development of Hypothesis that follows:

- H1: Artificial intelligence health system is positively correlated with medical travel and tourism
- H2: Artificial intelligence health system is positively correlated with global medical regulations
- H3: Artificial intelligence health system is positively correlated with cultural difference
- H4: Artificial intelligence health system is positively correlated with safe medical destination
- H5: Artificial intelligence health system is positively correlated with prolong medical travelling



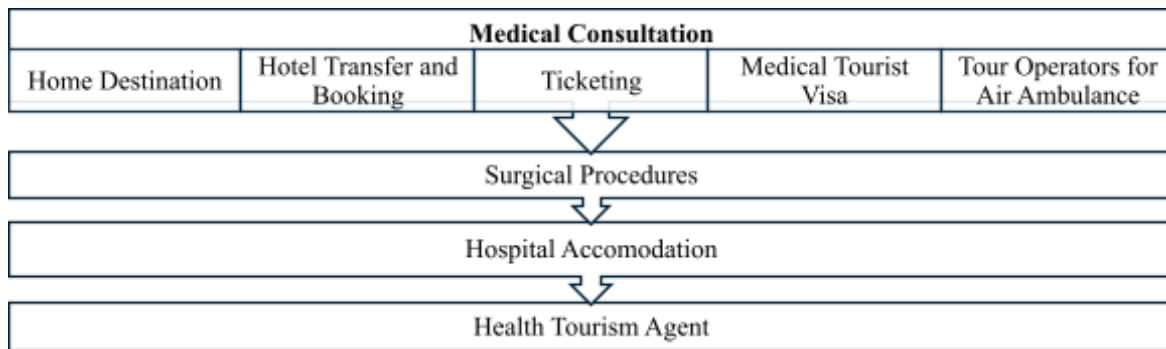
*Source: (Samara et al., 2020)*

*Figure 1: Conceptual Framework*

### III. GREY SYSTEM THEORY FOR GENDER IN AI MEDICAL TOURISM

The Grey System Theory in 1989 established the offers of the medical system for gender travellers to imply techniques, and factor analysis for medical tourism (Dang et al., 2020). The utilization of the AI medical tourism is based on the multiple and diverse use of the Grey System Theory which aligns with the commonly referred issues of a gender patient at home country while struggling for the visa and related services to meet the desire medical destination (Fileri et al., 2021). For the artificial intelligence used in medical traveling and tourism, Grey system forecasting of technological accuracy and successful application of global medical regulations, cultural differences, safe medical destination and prolong medical travelling for medical tourism destination (Doborjeh et al., 2022). Unlike the revenue generation for the prospective destination, gender facilitation in terms of health-related accommodation packages, ticketing and ambulances with the site seeing surgical treatments with the tour operators are resourceful medical opportunities. These are easing the process and smooth implementation of safe medical destination while providing for the management of prolong medical tourism (Samara et al., 2020). The special case of the model is

applied for the gender easing of international and travelling to the site of choice which includes the considered measurement of artificial intelligence within the frame of medical tourism (Spoladore and Pessot, 2023). The performance of the cultural differences and meeting of global medical regulation is ensuring the rightful choice of using artificial intelligence in facilitating the gender medical travelling for treatment and rehabilitation tourism.



Source: (Dang et al., 2020)

Figure 2: Application of Grey System Model

#### IV. METHODOLOGY

The quantitative research methodology implied for the key areas of this research those are included the artificial intelligence health system, medical travel and tourism, global medical regulations, cultural differences, safe medical destination and prolong medical travelling (Sumra et al., 2022; Alam, 2022). It is the categorical interventions and the shared visions of the traveling gender s those are coming from the middle and lower-middle class states (Arrijoja-Castrejón and López-Fernández, 2021). The positivist research paradigm engaged with the pragmatic research approach that interact with the medical travelling and tourism resolutions of the issues. The quantitative research method incorporates the sample of 379 from the population of 75000 as determined by the Krejcie and Morgan (1970). This drive towards the supporting and managing of the data within the efficient use of data loss over the errors developed from the analysis (Yoon and Lee, 2018). The PLS-SEM software is to be applied for the specific interventions and the use of the construct with the measurement of relationships and potential development of the model for the employing of AI in medical tourism (Gaur et al., 2021).

The development of the survey research instrument is provided with the alignment of the items to each of the variable and having close-ended questions in the form of multiple options given to the respondent for valuable input (Lv et al., 2022). It reflects the data collection from the relevant stakeholders of technology, AI operators, medical tourism experts and the

academic scholars for potential use of AI in health care. The analysis of the data collected is inter-linked with the measurement of single variable that is shared for the PLS-SEM as a leading software and to explain the improvement of the AI on the medical tourism (Wong et al., 2022). The research method chosen for the artificial intelligence use in the medical tourism aligns the systematic inquiry required for the resolution of issues related to the safe medical health and management of the timely integration of global regulations for the medical tourism.

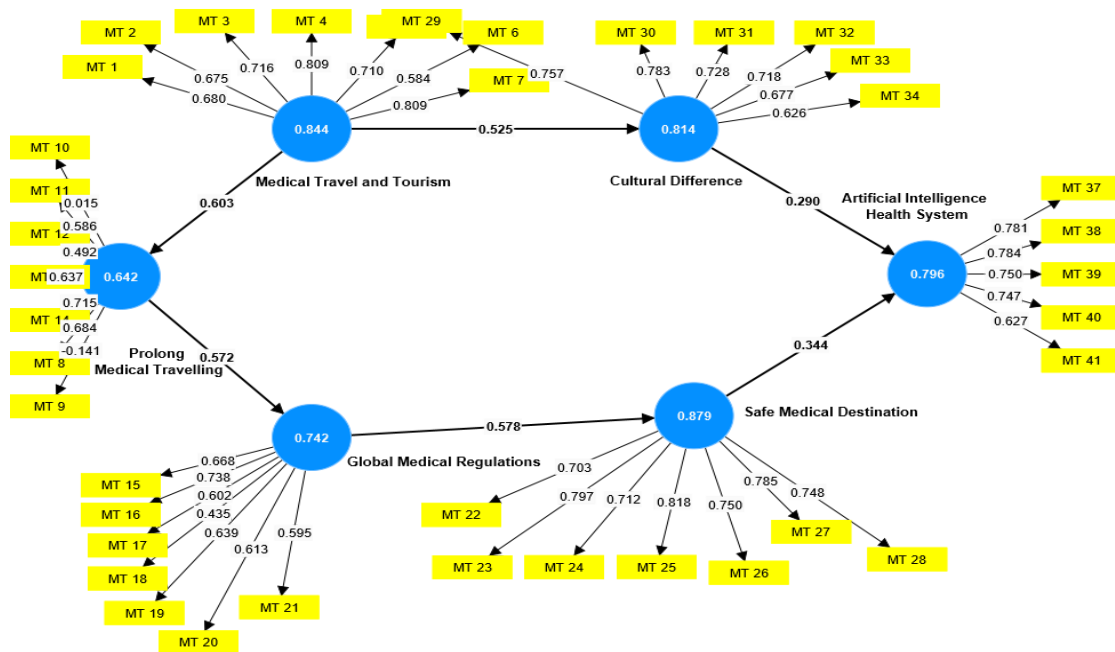
#### V. RESULTS & DISCUSSION

The participation of respondents with male 44.7% and female 45.3% that provide for the artificial intelligence role in medical travel and tourism. The demographical description is including the age range of 21-30 years with 31.3%, followed by 31-40 years with 25.7% and 41-50 with 23%. The remaining age of the respondents is calculated with 51-60 having 20% ratio in the research. The education is distributed with the intermediate at 11.4%, bachelor at 21.6% and master education with 30%. Post-graduate qualification of the participant is 37% that is higher in terms of giving opinion for artificial intelligence role in medical tourism. This is linked with the experience of 0-5 years at 13.3%, 6-12 years at 29.7%, and 13-20 years at 40% while remaining 20-25 years at 17% participation in the research.

The use of the PLS-SEM implied with the significant relationship as reflected from reliability values among the artificial intelligence health system (0.796), medical travel and tourism

(0.844), global medical regulations (0.742), cultural differences (0.814), safe medical destination (0.879) and prolong medical travelling (0.642). This follows with the r value of AI health (0.343), and related variables within the range of 0.3 is showing model and data fit for the use of AI in improving medical tourism and travelling services. These are showing a higher impact on the medical travelling and tourism using the improve artificial intelligence tools. It is essential for the health care to follow the harness

of power in the medical tourism industry with the range of benefits for the improved efficiency and useful progress for smart medical operations. The gender s and providers from the finding of this research indicate that an automated workers with the AI support for application of identified patterns and trends in AI. The surgical procedures with the medication and treatment plans are ensuring the accurate and effective treatments having the seamless experience without the consideration of AI within the medical tourism.



Source: Model Development from Survey Collected Data

Figure 1: PLS Model

The total effects of the variables with 0.2 to 0.5 values are reflecting the strength for inner model and improvement in cultural differences for the AI based health system. It is the global medical regulations that are stressing for the use of AI with prospective focus on safe medical destination. The discriminant validity values of 0.6, 0.5, 0.8 and 0.7 are the prospective measures for the determinants of AI in medical tourism with sustainable effects on the performance of gender s improve health outcomes. The value for the Fornell Larcker Criterion is between the 0.5 to 0.9 as illustrated from the findings of data used in this research. The explained model fit values from the overall data ratio provided with the saturated and estimated values those are sharing SRMR

from 0.114 to 0.178 from saturated and estimated model. It is following the d\_ ULS for both format of models with the value of 10.113 to 0.178 which is acceptable and model fit data for the artificial intelligence supported medical tourism.

The tested values share the correlation between each item with the value of 1.000 as significant contributor of association among the elements of artificial intelligence health system. It is aligned with the path coefficient values for each of the variable is showing between 0 and 1 which is testifying the assumption that improve AI health system is significantly lowering the potential risks associated with the medical travel and tourism. The involvement of the artificial intelligence as illustrated from the finding of the data analysis



are improving the AI health system to access for the widespread intersection of the risks to be decreased in medical travel tourism. It is to ease the access of the medical services for the individuals based on the digital use of technologies. These are sharing the valuable impacts and the considered working for the aspects of artificial intelligence health system, medical travel and tourism, global medical regulations, cultural differences, safe medical destination and prolong medical travelling. The cultural differences risks are possibly reduced with the implied area of artificial intelligence using multiple tools and instruments in the health care.

The global medical regulation is an essential area of sharing the lawful use of AI in medical travelling and tourism. It is provided with the safe medical destination to be considered while implying the potential access to the medicine and services for improve quality of care. The quality of the care and improve services are interrelated to the prolong medical service which may be improved for the better engagement of gender is towards the AI health system. Travelling across the regions for the medical treatments is aligned with the multiple cosmetic surgeries and procedures those are the specialized medical treatments. It is the paradigm of the medical shift that indicate multi-language marketing with the medical tourism to revolutionize the improve health of gender through the AI supported health system. The medical tourism expertise of the operators encourages the increasing travelling with the focus attention of easing the accommodation, immigration, and related issues of patient within the frame and purpose of medical tourism.

## VI. CONCLUSION

The research specified that improvement of the artificial intelligence health system is significant in lowering the potential risks associated with the gender medical travel and tourism, global medical regulations, cultural differences, safe medical destination and prolong medical travelling. It is the integration of the Grey System Theory that facilitate the accommodation, travelling,

consultation for medical destination, and level of performance for the desire medical care within the medical tourism system. The powered system of the AI is engaging with the potential analysis of the data for the single gender s having the diagnostic reports of health care with the multiple treatment plans and accurate interventions for the medical travel and tourism. The overall experience and engagement of the individual are seeking with the assistance of medical monitoring and follow-up care which is the resourceful response to the medical traveling and tourism risks.

Similar is the consideration from the finding of this research to regulate the religious tourism activities with the AI enabled support for the reducing the risk of misusing data technology in healthcare. This is extended with the alignment of rituals and performance of the obligatory services in the religious tourism activities comparable visiting to the holy sites with the medical teams having significant roles for the adoption and respectful use of artificial intelligence tools. This is an innovative approach to outline the regulation of the medical tourism in conjunctions for future research on the maintaining of honour and dignity of multiple religious travelling those necessity medical treatment and to pass through smart surgical procedures. The integration of the AI into medical tourism is reflection of the streamline administrative process that endorse the safe medical destination. The resolution of the prolong medical travelling for a gender during the performance of religious services is a major concern that is to be extended through this research on regulations of the medical tourism. The research is applicable and implied to the experts of medical tourism, executives working within the health care and the resourceful researchers serving for enhance role of artificial intelligence in medical tourism.

## REFERENCES

1. An, L. H. (2021). Chasing the rainbow: promoting LGBT Tourism on social media: case company: GayTravelFinland.
2. Alam, M & Kuppusamy, M. (2023) Integrated Management for Image Branding; A

- Prospective Outlook from Abbottabad as a Tourism Destination Valley of Pakistan, *BESRA Germany, International Conference on Recent Developments in Social Science and Digital Economy* / Washington DC.
3. Alam, M. (2022). Understanding and improving digital tourism events in Pakistan. In *Technology Application in Tourism Fairs, Festivals and Events in Asia* (pp. 233-247). Singapore: Springer Singapore.
  4. Alam, M., & Bahrein, K. (2021) Image Branding Factors & Facilitating Model Of Tourism Destinations Management During Covid-19 In Pakistan. *Journal of Tianjin University Science and Technology*, Vol 54, Issue10:2021 (428-444). DOI: 10.17605/OSF.IO/956PY
  5. Alam, M., Kuppusamy, M., & Kunasekaran, P. (2023). The role of destination management in mediating the determinants of Cyberjaya Tourism image branding. *Cogent Business & Management*, 10(3), 2259579.
  6. Andersen, J. B. (2022). Risks in LGBTQ+ Tourism.
  7. Andrade, H., & Dinis, G. (2019). Perspective on the LGBTQ Segment: The View of Tourism Accommodation Establishments of the City of Porto. *Critical Tourism Studies Proceedings, 2019*(1).
  8. Arrijoja-Castrejón, E., & López-Fernández, A. M. (2021). Analysis of medical tourism and the Effect of using digital tools to profile travelers in Mexico. In *Computer Science and Engineering in Health Services: 5th EAI International Conference, COMPSE 2021, Virtual Event, July 29, 2021, Proceedings* 5 (pp. 143-161). Springer International Publishing.
  9. Bagga, T., Vishnoi, S. K., Jain, S., & Sharma, R. (2020). Medical tourism: treatment, therapy & tourism. *Int J Sci Technol Res*, 9(3), 4447-4453.
  10. Bhat, I. A., & Arumugam, G. (2021, October). Construction, validation and standardization of general self-confidence scale. In *International conference on emotions and multidisciplinary approaches-ICEMA* (p. 121).
  11. Bhatia, A., & Maidullah, S. (2022). Voice of the Unheard: Travel Motivation and Intention of Indian Gays and Lesbians. *Revista Latino-Americana de Turismologia*, 8(1).
  12. Chandran, S. D., Puteh, F., Azmi, N. A., & Suki, N. M. (2020). Exploring the development of medical tourism industry in Southeast Asia region. *International Journal of Business Ecosystem & Strategy* (2687-2293), 2(3), 28-32.
  13. Chaulagain, S., Le, L. H., & Hancer, M. (2023). Traveling for medical tourism: The roles of demographics, past experience and medical tourism destination familiarity. *International Journal of Hospitality & Tourism Administration*, 1-26.
  14. Dang, H. S., Nguyen, T. M. T., Wang, C. N., Day, J. D., & Dang, T. M. H. (2020). Grey system theory in the study of medical tourism industry and its economic impact. *International journal of environmental research and public health*, 17(3), 961.
  15. De la Hoz-Correa, A., Muñoz-Leiva, F., & Bakucz, M. (2018). Past themes and future trends in medical tourism research: A co-word analysis. *Tourism management*, 65, 200-211.
  16. Doborjeh, Z., Hemmington, N., Doborjeh, M., & Kasabov, N. (2022). Artificial intelligence: a systematic review of methods and applications in hospitality and tourism. *International Journal of Contemporary Hospitality Management*, 34(3), 1154-1176.
  17. Filieri, R., D'Amico, E., Destefanis, A., Paolucci, E., & Raguseo, E. (2021). Artificial intelligence (AI) for tourism: an European-based study on successful AI tourism start-ups. *International Journal of Contemporary Hospitality Management*, 33(11), 4099-4125.
  18. Gaur, L., Afaq, A., Singh, G., & Dwivedi, Y. K. (2021). Role of artificial intelligence and robotics to foster the touchless travel during a pandemic: a review and research agenda. *International Journal of Contemporary Hospitality Management*, 33(11), 4079-4098.
  19. Gualdrón, C. J. B. (2023). *Gender power relations at work and at home: experiences of women in tourism in San Gil*,

- Colombia (Doctoral dissertation, Wageningen University).
20. Ivanov, S., & Webster, C. (2019). Conceptual framework of the use of robots, artificial intelligence and service automation in travel, tourism, and hospitality companies. *Robots, artificial intelligence, and service automation in travel, tourism and hospitality*, 7-37.
  21. Jabeen, F., Al Zaidi, S., & Al Dhaheri, M. H. (2022). Automation and artificial intelligence in hospitality and tourism. *Tourism Review*, 77(4), 1043-1061.
  22. Kama, A. (2023). But where is your wife? Reflections of a gay tourist in a heteronormative environment. In *Inclusion in Tourism* (pp. 189-202). Routledge.
  23. Lewis, C., Prayag, G., & Pour, S. (2021). Linking travel motives to identity and travel behavior of the Australian LGBT market during COVID-19. *Journal of Travel & Tourism Marketing*, 38(7), 725-741.
  24. Lv, H., Shi, S., & Gursoy, D. (2022). A look back and a leap forward: a review and synthesis of big data and artificial intelligence literature in hospitality and tourism. *Journal of Hospitality Marketing & Management*, 31(2), 145-175.
  25. Mahoney, L. M., & Tang, T. (2024). *Strategic social media: From marketing to social change*. John Wiley & Sons.
  26. Olson, E. D., & Reddy-Best, K. (2019). "Pre-topsurgery, the body scanning machine would most likely error:" Gender and gender nonconforming travel and tourism experiences. *Tourism Management*, 70, 250-261.
  27. Paryati, P. (2022). Estimation of Artificial Intelligence Andesite Resources Mining Area with Schlumberger Model and Vertical Sound Method.
  28. Peng, M. L., Wickersham, J. A., Altice, F. L., Shrestha, R., Azwa, I., Zhou, X., ... & Ni, Z. (2022). Formative evaluation of the acceptance of HIV prevention artificial intelligence chatbots by men who have sex with men in Malaysia: focus group study. *JMIR Formative Research*, 6(10), e42055.
  29. Samara, D., Magnisalis, I., & Peristeras, V. (2020). Artificial intelligence and big data in tourism: a systematic literature review. *Journal of Hospitality and Tourism Technology*, 11(2), 343-367.
  30. Souza, G. (2021). *Mediating the Marginal: A Computational Analysis of Representational Hierarchies, Aesthetic Tourism, and Queer Imagination on Instagram* (Doctoral dissertation, Massachusetts Institute of Technology).
  31. Spoladore, D., & Pessot, E. (2023). An ontology-based decision support system to foster innovation and competitiveness opportunities of health tourism destinations. *SpringerBriefs in Applied Sciences and Technology*, 61-71.
  32. Sumra, K. B. Alam, M., Iftikhar H (2022) Cities Poor Management In Social Protection And Covid-19: Gender Inequalities And Opportunity Bias.
  33. Sumra, K. B., & Alam, M. M. (2021). Promoting religious tourism management for creating a soft image of Pakistan. In *Global Development of Religious Tourism* (pp. 149-174). IGI Global.
  34. Sumra, K. B., Ahmad, M. S., & Alam, M. (2020). Informal Economy, Social Inequalities And street Vendors In Pakistan: Governance, Politics And tourism In Pandemic.
  35. Sumra, K. B., Alam, M., & Aftab, R. (2022). Artificial intelligence for strengthening administrative and support services in public sector amid COVID-19: Challenges and opportunities in Pakistan. *Advances in Data Science and Intelligent Data Communication Technologies for COVID-19: Innovative Solutions Against COVID-19*, 153-172.
  36. Sumra, K. B., Alam, M., Noor, K. B. M., Hali, S. M., & Iftikhar, H. (2022). Factors Affecting Artificial Intelligence and Management of Institutional Response to the Event of Coronavirus in Pakistan. *Pertanika Journal of Social Sciences & Humanities*, 30(4).
  37. Toth, S. J., & Mason, C. W. (2021). "Out" in the Countryside: Gay Tourist Perspectives on Rural Travel in British Columbia, Canada: Gay Tourist Perspectives on Rural Travel. *Journal of Rural and Community Development*, 16(3).

38. Tsaih, R. H., & Hsu, C. C. (2018). Artificial intelligence in smart tourism: A conceptual framework.
  39. Wang, Y. C., & Uysal, M. (2024). Artificial intelligence-assisted mindfulness in tourism, hospitality, and events. *International Journal of Contemporary Hospitality Management*, 36 (4), 1262-1278.
  40. Wong, B. K. M., & Hazley, S. A. S. A. (2020). The future of health tourism in the industrial revolution 4.0 era. *Journal of Tourism Futures*, 7(2), 267-272.
  41. Yoon, S. N., & Lee, D. (2018). Artificial intelligence and robots in healthcare: What are the success factors for technology-based service encounters?. *International Journal of Healthcare Management*.
  42. Zarei, A., Feiz, D., Maleki Minbashrazgah, M., & Maleki, F. (2020). Factors influencing selection of medical tourism destinations: A special niche market. *International Journal of Healthcare Management*, 13(sup1), 192-198.
  43. Zhang, B., Zhu, Y., Deng, J., Zheng, W., Liu, Y., Wang, C., & Zeng, R. (2023). "I am here to assist your tourism": Predicting continuance intention to use AI-based chatbots for tourism. Does gender really matter?. *International Journal of Human- Computer Interaction*, 39(9), 1887- 1903
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