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Generating Positive Words of Mouth in Healthcare Services

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Abstract

Words of mouth remain an issue to discuss. This study examines how service quality can influence trust to raise words of mouth. Service quality consists of core services quality and peripheral service. Positive words of mouth are measured by referencing intention. This study focuses on how service quality affects customer trust and words of mouth. Data was collected through a survey among patients in a private medical clinic in Kudus Regency. The data were analyzed using the Structural Equation Model on AMOS 21. The findings in this study showed that core service quality influences trust and referencing intention directly also indirectly. The peripheral service quality influences the customer trust while it has no direct effect on referencing intention. From this study, the management of the medical clinic has insights to improve service quality to increase positive words of mouth.

Keywords: Service Quality, Words of Mouth, WOM

INTRODUCTION

Health services in Indonesia are growing into an increasingly competitive industry. The community's growing need for adequate health facilities encourages competition among healthcare providers to provide the best services. Nowadays, people have a variety of alternative places for treatment or just doing a health check. Medical clinics are now the choice of many people with considerable distance from residence, fewer patient queues than in the hospitals or public health centers, and most importantly the quality of services provided.

Health clinics need a strategy to keep their business afloat in the midst of competition starting from advancing existing facilities to meet consumer needs while creating competitive advantage. The form of consumer appraisal of the services offered can determine the quality of the service (Zeithaml *et al.*, 1996)The second component for the addition of acceptance from customer value, is word of mouth (Goodman, 2009).The consumers tend to depend on word of mouth communication for choosing services. It will generate more benefit when the customer spreading good word of mouth and endure not spreading bad word of mouth). A study about the role of service quality on the form of WOM activities conducted on health industry activities showed that there was a dominant positive influence from commitment, followed by expected value variable, quality, trust, satisfaction, and loyalty towards the creation of WOM strengths (de Matos & Rossi, 2008). Some factors including empathy, reliability, responsiveness, certainty, and physical form of service have an indirect effect on interest in referencing. The empathy factor is known to have the greatest contribution in shaping WOM activity. A previous study found that service quality had no effect on WOM activities (Harrison-Walker, 2001).

The theory of trust-commitment mentions trust as a key variable in maintaining long-term relationships in a brand. Trust arises when consumers feel the promises are fulfilled and expectations are met in the fulfillment of the quality of service then trust to form a positive WOM. Furthermore, study on the effect of service quality on words of mouth with trust as intervening variable on car rental company, shows the quality of service affect the customer trust in creating WOM activity (Indriani and Nurcaya 2015). Zarei et al actually found another thing in the study of the effect of service quality on patient trust, the result dimension in the quality of service is environmental quality has no significant effect on trust (Zarei et al., 2015). Two other studies were found different things in the study of the influence of trust on WOM.) Earlier study found that elements of trust in the recommender had no effect on WOM communications(Akif et al., 2012). In contrast, another study found that customer trust affects WOM (Rizanata, 2014). The research gap, which is the background of this study, is the result of Harrison and Walker's research (2001), which shows that service quality is negatively related to WOM activity. In contrast, another study found that service quality had a positive effect on WOM (Sugama & Sukaatmadja, 2020). A research conducted at a car rental in Denpasar found that service quality may affect customer trust (Indriani & Nurcaya, 2015). While Zarei, et al (2015) found that service quality is not significant in influencing trust. De Matos and Rossi (2008) and Rizanata (2014) concluded that trust can generate WOM, otherwise Hasan et al (2012) concluded that trust factors in individuals such as skills and experience did not produce positive WOMs.



This study was conducted on a Healthcare in Kudus regency whiches providing medical services such as medical check up, family planning services, minor surgery, and health consultation. The source requested anonymity. Herein after referred to medical clinic "X". Based on data in recent years, more than 60% of medical clinic patients were dominated by institution clients. A pre-survey of 100 patients was conducted before the start of this research. The patients asked questions about their willingness to recommend to friends / relatives / acquaintances.It is known that 33% of patients are reluctant to recommend the clinic to the others From the reseach gap and phenomenon, then the formulation of this research problem is how the influence of service quality to the interests of referencing through trust variables. The referencing intention represents positive word of mouth.

LITERATUR REVIEW

Service Quality

Service quality can be interpreted as an effort to fulfill consumer needs and desires as well as the accuracy of delivery to balance consumer expectations(Tjiptono & Chandra G, 2005) The quality of service as a result of consumer evaluation of the comparison between expectations about the services offered with consumer perceptions on the performance of services performed (Zeithaml *et al.*, 1996). The basic for evaluating intangible services consists of five dimensions, namely:

- 1) Tangibles (tangible evidence); the company's ability to show its existence to external parties. The existence and capability of a dependable corporate infrastructure are a clear proof of the services of service providers such as buildings, vehicles, employee appearances, or applied technology.
- 2) Reliability; the ability to provide accurate service in accordance with the agreement with the consumer. Expectations from consumers include timeliness, the same service with other customers, sympathetic attitude and accuracy of service into aspects that must be met.
- 3) Responsiveness; the ability to serve quickly and precisely on consumers along with the provision of clear information. If unresponsive will lead to a negative perception of service quality.
- 4) Assurance; consumer confidence in the company will grow if the service provider has an advantage in communication, credibility, security, competence, and courtesy.



5) Empathy; service providers are required to pay sincere attention to consumers and will be better if delivered personally. If it can be implemented, the company will understand the specific needs, as well as create a comfort feeling to consumers.

The service quality model developed by Parasuraman, Zeithml and Berry in researching brands in the service sector classifies service quality as an indicator of core service quality and service quality peripherals. The quality of core services serve as the main reason and basic competence of the existence of a business in a market to create value in the eyes of consumers. The service quality model developed by Parasuraman, Zeitmhml and Berry in a series of brand research on six service sectors is one of the service quality approaches commonly used as guidelines for market research. Subsequent research grouped service quality indicators into core service quality and peripheral service quality.

Trust

Trustisakind of reliability and goodness of trustee that we can recognize (Doney & Cannon, 1997) . Further research argue that a trust represents a degree of trust in the dependence and respect of consumers on the seller (De Wulf, Kristof; Odekerken-Schroder, Gaby; Lacobucci, 2001). Meanwhile, according to Morgan and Hunt (1994), trust arises when a party believes in the reliability and integrity of its business associates. The dimensions of trust consist of ability, Benevolence, and Integrity (Mayer, R. C., Davis, J. H., & Schoorman, 1995). Another study states there is a positive relationship between trust and the intensity of consumer behavior for the future (Garbarino & Johnson, 1999) .This is in line with the research of Doney and Cannon (1997) which proves the role of trust is very high in repurchasing intensity. Repurchases and referral interests indicate the willingness of the customer to continue the relationship.

Words of mouth (WOM)

Words of mouth (WOM) according to Kotler (2001) is a personal communication about a product among consumers and people around him. Harrison and Walker (2001) express WOM as informal information between a non-commercial communicator about how he feels with a receiver about a brand, a product, an organization, or a service. WOM marketing is an effort to encourage people to talk



about the brand of a good or service with a simple and easy form of communication (Tamas, 2009). Based on the description can be concluded that WOM is an informal communication either from consumers or potential customers to others about a product / service or organization that is positive or negative.

RESEARCH METHOD

The data in this study taken from the results of questionnaires spread using purposive sampling. The criteria of respondent, a person who had been a patient of the private medical clinic "X". In determining the minimum number of samples to be taken using the number of parameters in this research model multiplied by 5. The research model is known to have 21 parameters, then the minimum sample taken is 105, the amount corresponds to the minimum sample likelihood criterion of 100 sample.

DISCUSSION

The number of questionnaires was taken as 117 patients, basic characteristics of respondents in this study are: age, gender, last education level, and occupation. Statistically respondent profile description, using Cross tabulation, summarized in table 1.

		GEN	TOTAL			
CRITERIA	Male				Female	
	- Σ	%	Σ	%	Σ	%
Age:		70		/0		
15-25 years	24	19,0%	36	37,9%	60	51,3%
26-35 years	15	13,0%	20	21,1%	35	29,9%
36-45 years	6	6,3%	16	16,8%	22	18,8%
Total	45	38%	72	76%	117	100%
Last Education:	Σ	%	Σ	%	Σ	%

Table 1 Respondent Description



Junior High School	11	11,6%	15	15,8%	26	22,2%
Senior High School	27	28,4%	43	45,3%	70	59,8%
Diploma/Bachelor	7	7,4%	14	14,7%	21	17,9%
Total	45	47%	72	76%	117	100%
Occupation:	Σ	%	Σ	%	Σ	%
Private Employee	20	21,1%	31	32,6%	51	43,6%
Entrepreneur	14	14,7%	12	12,6%	26	22,2%
Housewife	0	0,0%	8	8,4%	8	6,8%
Student	11	11,6%	21	22,1%	32	27,4%
Total	45	47,4%	72	75,8%	117	100%

Source: Data processed, 2021

The assumptions that must be met in SEM are: (1) sample size; the number of samples in this study has fulfilled the requirement that is greater than 100, (2) normality test; data criteria have a normal distribution if the critical ratio for multivariate shows a value below 2.58. The results of normality test data are presented in the following table.

Variable	min	max	skew	c.r	Kurtosis	c.r
x14	2.000	10.000	066	292	782	-1.727
x13	20.000	10.000	150	663	534	-1.180
x12	1.000	10.000	155	684	446	984
x9	2.000	10.000	254	-1.122	863	-1.905
x10	1.000	10.000	074	329	436	963
x11	2.000	10.000	227	-1.003	719	-1.588
x4	1.000	10.000	134	591	886	-1.957
x5	2.000	10.000	279	-1.233	263	581

Table 2 Normality Test



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x6	2.000	9.000	203	897	725	-1.600
x7	2.000	10.000	336	-1.485	280	619
x8	2.000	10.000	303	-1.339	204	451
x3	1.000	10.000	099	439	766	-1.692
x2	1.000	10.000	085	376	882	-1.948
x1	1.000	10.000	162	716	851	-1.879
Multivariate					799	-204

Source: Data processed, 2021

Normality test shows that the value of C.R. for multivariate of -0.204, the figure is below - / + 2.58. Thus it can be concluded that the data variable manifest (observed variable) is normally distributed.

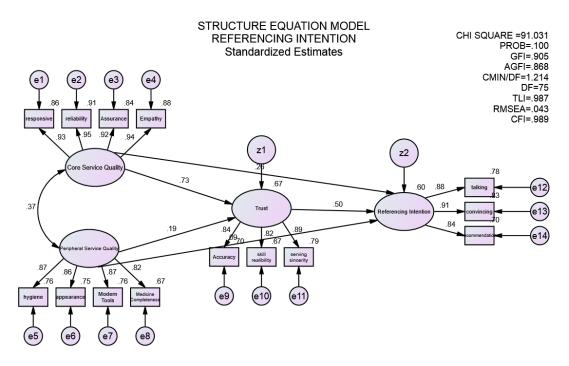
The multivariate outlier evaluation is done by calculating the mahalanobic distance for each mean of all variables by looking at the Mahalanobis Value <Chi Square Distribution Table. The calculation of the cost of a mobilized distance is based on a chi-square value of 14 degrees (number of indicators) at P <0.05 level is 31.39 (seen from the chi-square distribution table). Result of calculation of minimum distance equal to 9,174 and maximum distance equal to 31,587 bigger than chi square value (14; 0,005). But the value is not far from the maximum distance value should be 31.39 and the upper (p2) value is more than 0.005, so the researcher does not delete the data, so it can be said outlier still acceptable.

Indications of multicollinearity and singularity can be shown by the determinant value of the covariance matrix which is really small or close to zero. Conversely, if the determinant value of covariance is far from zero then there is no or little indication of multicollinearity and singularity. From the results if the data obtained by the determinant value of the sample covariance matrix is 229.395 indicates that the value is far from zero, so the research data is feasible to use.

Tests on the full model in this study also through two stages, namely the suitability test model and the significance test of causality through regression coefficient (Ferdinand, 2006). The results for full model research studies presented in figure 1.



Figure 1 Full Model Analysis



Based on the test results, which can be seen in Figure 1, the value of Chi Square = of GFI, CMIN / DF, TLI, RMSEA and CFI whereas the AGFI value shows marginal results of 0.868 but the value is still reasonable disposition, not far below 0.90. The results show that the constructs are acceptable.

The reliability criteria (> 0.70) and the variance extract (> 0.50) are met by all latent variables so it is concluded that all indicators are observed variables and are able to explain the latent variables formed at once explain the constructs.

Hypothesis testing

Table 3
Regression Weight Structural Equation

	Variable Ro	elationship	Estimate	S.E.	C.R.	Р
Trust	<	Core Service Quality	.522	.053	9.824	***
Trust	<	Peripheral Service Quality	.228	.086	2.628	.009



Referencing Intention	<	Trust	.529	.151	3.496	***
Referencing Intention	<	Core Service Quality	.196	.098	1.990	.047
Referencing Intention	<	Peripheral Service Quality	.116	.102	1.133	.257

Source: Primary Data Processed, 2021

The test uses Critical Ratio to test a causality relationship.

Interpretation of hypothesis test results in table 3:

1. The Influence of Core Service Quality on Trust

Hypothesis 1: The Quality of Core Services positively affects trust

The estimation parameter for testing the effect of core service quality on trust shows CR value of 3.496 with probability of 0.000 has fulfilled the requirement of H1 acceptance that is C.R. must be greater than 1.96 and the probability value is less than 0.05. Thus it is concluded that the first hypothesis is proved. The indicator that has the largest loading factor is the accuracy (x2), so it is concluded that the accuracy factor has the greatest role in shaping the quality of core services.

2. The Influence of Peripheral Service Quality to Trust

Hypothesis 2: The Quality of Peripheral Services positively affects trust

The estimation parameter for testing the effect of peripheral service quality on belief shows CR value of 2,628 with probability of 0.009. Because CR> 1.96 and probability significance <0.05, it can be concluded that the second hypothesis is proved. The loading factor results for every indicator that makes up the peripheral service quality, shows that modern equipment is the biggest factor in shaping the quality of peripheral services.

3. The Influence of Core Service Quality on Referencing Intention

Hypothesis 3: The Quality of Core Services positively affects referencing intention



The estimation parameter for testing of the effect of core service quality on reference mint shows CR value of 1.990 with probability of 0.047. Because CR> 1.96 and the probability significance <0.05, it can be concluded that the third hypothesis is proved.

4. The Influence of Quality of Peripheral Service on Referencing Intention

Hypothesis 4: The Quality of Peripheral Services positively affects the referencing intention

The estimation parameter for testing the effect of peripheral service quality on the reference interest shows CR value of 1.133 with probability of 0.257.

Because CR <1.96 and probability significance> 0.05, it can be concluded that the fourth hypothesis is not proven.

5. The Influence of Trust in Referencing Intention

Hypothesis 5: Trust positively affects the referencing intention

The estimation parameter for testing the effect of peripheral service quality on the reference interest shows the CR value of 3.496 with probability of 0.00. Because CR> 1.96 and the probability significance <0.05, it can be concluded that the fifth hypothesis is proved. Loading factor indicator of trust toward the seriousness of clinic officer in serving has the highest value in representing the variable of trust. The biggest factor in influencing the interest of referencing based on the total effect value is the core service quality (0.626) while the peripheral service quality only has 0.192 loading factor. Medical Clinic "X" needs to prioritize the quality of core services in order to increase trust so that the interest of r is also higher.

The biggest factor in influencing the interest of referencing based on the total effect value is the core service quality (0.626) while the peripheral service quality only has 0.192 loading factor

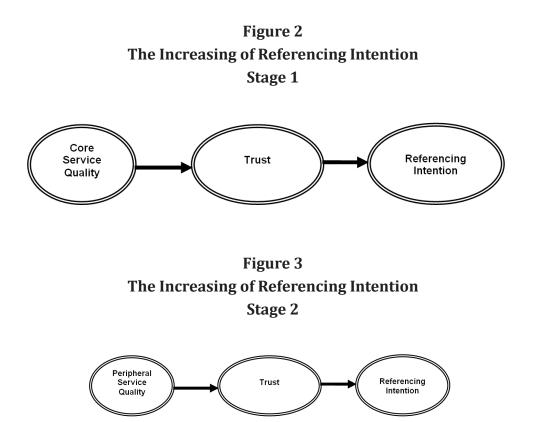
CONCLUSION

One of the objectives of the study was to examine whether the quality of service influenced the patient's beliefs so as to increase the interest of referencing. The higher referencing intention can maximize words of mouth testing the relationship



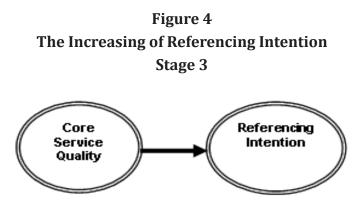
between variables, core service quality, peripheral service quality, trust, and interest in referencing shows that inter variables affect each other. The calculation of influence indirectly, the quality of core services has a greater impact than the quality of peripheral services .From the description, then the process of interest formation process referenced as follows:

While for the quality of service peripherals proved to have an effect on the interest of trust through trust variables, the process is set forth in figure 4



The calculation of the direct influence between the quality of core services and peripherals with trust and then reference interest, it indicates that the quality of core services influences the interests of referencing, while the quality of peripheral services has no direct effect on the referencing intention.





In the research findings, respondents' perceptions on indicators of responsiveness, appropriateness, courtesy, and service are the same, the researchers draw the conclusion that Medical clinic "X" patients consider the service at Medical clinic "X" still ordinary. While the indicators of hygiene, appearance, equipment and completeness of the drug, the perception of respondents concluded that all four factors will increase confidence in the ability of Medical clinic "X". Respondents tend to refer the Medical clinic "X" because of the quality of core services (responsiveness and decency). From the aspect of peripheral service quality, respondents feel normal, and some even compare with other clinical facilities. The authors concluded that interest in referrals would be higher if patients were more confident in the quality of clinical services. The physical aspect of Medical clinic "X" needs to be improved so that it increases the patient's trust. In the research findings, respondent's perceptions on indicators of responsiveness, appropriateness, courtesy, and service are the same, and the findings conclude that medical clinic "X" patients consider the service at medical clinic "X" still ordinary. While the indicators of hygiene, appearance, equipment and completeness of the drug, the perception of respondents concluded that all four factors will increase confidence in the ability of medical clinic "X". Respondents tend to refer the medical Clinic "X" because of the quality of core services (responsiveness and decency). From the aspect of peripheral service quality, respondents feel normal, and some even compare with other clinical facilities. . Medical clinic "X" needs to prioritize the quality of core services in order to increase trust so that the interest of r is also higher.

This study shows that interest in referrals would be higher if patients were more confident in the quality of clinical services. The physical aspect of medical Clinic "X" needs to be improved so that it increases the patient's trust.



This study discusses consumer behavior in health services, it would be better if the previous research reference using a journal from the field of marketing health services. Researchers still use many references in terms of business marketing in general.

Further research on the importance of referring to marketing in the health field, should further enhance the study of marketing research in particular factors that affect the interest of reference in the health care industry. The quality variables of core services and peripheral quality in health marketing studies may be developed specifically. The study of the variables of interest in health care business strategy in the future using qualitative method, because in answering the patient confidence variable more detail if presented in the form of description. Then the future research should define a broader object, which is examined not only in one clinic for the case study of words of mouth (WOM). Future studies are expected to be more diverse and discover more unique marketing phenomenon related to positive WOM.



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