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Patient loyalty model: An extended theory of planned behavior perspective (a case study in Bogor, Indonesia)

Sik Sumaedi I Gede Mahatma Yuda Bakti Tri Rakhmawati Nidya Judhi Astrini Medi Yarmen Tri Widianti

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Patient loyalty model

An extended theory of planned behavior perspective (a case study in Bogor, Indonesia)

Sik Sumaedi, I Gede Mahatma Yuda Bakti, Tri Rakhmawati,
Nidya Judhi Astrini, Medi Yarmen and Tri Widiанти
*Research Center for Quality System and Testing Technology,
Indonesian Institute of Sciences, Banten, Indonesia*

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Abstract

Purpose – This study aims to investigate the simultaneous effect of subjective norm, perceived behavioral control and trust on patient loyalty.

Design/methodology/approach – The empirical data were collected through survey. The respondents of the survey are 157 patients of a health-care service institution in Bogor, Indonesia. Multiple regressions analysis was performed to test the conceptual model and the proposed hypotheses.

Findings – The findings showed that subjective norm and trust influence patient loyalty positively. However, this research also found that perceived behavioral control does not influence patient loyalty significantly.

Research limitations/implications – The survey was only conducted at one health-care service institution in Bogor, Indonesia. In addition, convenience sampling method was used. These conditions may cause that the research results can not be generalized to the other contexts. Therefore, replication research is needed to test the stability of the findings in the other contexts.

Practical implications – Health-care service institutions need to pay attention to trust and subjective norm to establish patient loyalty.

Originality/value – This study is believed to be the first to develop and test patient loyalty model that includes subjective norm, perceived behavioral control and trust.

Keywords Consumers, Trust, Management, Loyalty, Subjective norm, Perceived behavioral control

Paper type Research paper

Introduction

Patient loyalty has been identified to be a key business success factor. A healthcare service institution (HSI) that can develop and maintain its patient loyalty will obtain a lot of benefits, such as increased in revenue and positive word-of-mouth communication (Mittal and Lassar, 1998; Zeithaml *et al.*, 2008; Chang *et al.*, 2013). Furthermore, relationship marketing researchers have revealed that patient loyalty is a central construct in a competitive business (e.g. Morgan and Hunt, 1994; Bruhn, 2002; Palmatier *et al.*, 2006). Meanwhile, it is well-documented that health-care service has become a competitive sector (Chang *et al.*, 2013). Thus, HSI should manage its patient loyalty effectively.

To manage patient loyalty effectively, the management of HSI should understand the factors that influence patient loyalty. Some researchers have already investigated the factors that influence patient loyalty. For example, Moliner (2009) studied 171 users of a



private hospital and 170 users of a public hospital in Spain. He found that patient loyalty is influenced by trust and satisfaction. [Mortazavi et al. \(2009\)](#) investigated 240 patients in four private hospitals in Mashhad, Iran. They showed that patient overall satisfaction affects loyalty. Furthermore, patient overall satisfaction is influenced by the nursing care, meal, patient room and admission and administrative services. [Gaur et al. \(2011\)](#) researched 320 patients in selected clinics in the city of Mumbai, India. They found that patient loyalty is influenced by relationship satisfaction and patients' confidence to the doctor. [Kessler and Mylod \(2011\)](#) studied the relationship between satisfaction and loyalty by using data from 678 hospitals in USA. They found significant relationship between the two constructs. [Suki and Suki \(2011\)](#) investigated 200 patients of the government hospital and clinics, as well as private clinics in The Federal Territory of Labuan, Malaysia. They found that loyalty is influenced by commitment directly. Furthermore, they found that satisfaction, trust and doctor reputation affect loyalty indirectly. [Ndubisi \(2012\)](#) studied 423 customers of health-care services in a major city in Malaysia. The research's finding showed that patient loyalty is affected by satisfaction. [Tam \(2012\)](#) researched 312 health-care service consumers in Hong Kong and he found that perceived value and satisfaction affect loyalty. However, the effect is moderated by perceived risk. [Amin and Nasharuddin \(2013\)](#) studied 216 patients of public and private hospitals in Malaysia. They found that satisfaction affects behavioral intention, which is another name of loyalty. Furthermore, [Qin and Prybutok \(2013\)](#) investigated 462 college students, which received urgent care at least one times, at a major southwestern university in the USA (urgent care industry) and they found that behavioral intention is influenced by image, service quality, perceived value and patient satisfaction.

As previously explained, most researchers proposed that patient satisfaction is the main determinant of patient loyalty ([Chang et al., 2013](#)). However, in fact, customer satisfaction is not enough to ensure loyalty ([Aurier and N'Goala, 2010; Bruhn, 2002; Chang et al., 2013](#)). In a competitive business, it needs more than customer satisfaction to build customer loyalty ([Aurier and N'Goala, 2010; Bruhn, 2002; Chang et al., 2013](#)). Furthermore, relationship marketing researchers have agreed that customer satisfaction is not the central construct in establishing customer loyalty (e.g. [Morgan and Hunt, 1994; Palmatier et al., 2006](#)).

In the context of health-care service, researchers also began recognizing a similar condition. [Chang et al. \(2013\)](#) argued that customer satisfaction is not enough to explain patient loyalty. Their study showed that there is a weak relationship between patient satisfaction and patient loyalty. In Indonesia, [Patayawati et al. \(2013\)](#) found that satisfaction does not influence patient loyalty. Given this, it is important to study the other factors that influence patient loyalty in Indonesia.

Research gaps

Theoretically, the relationship between satisfaction and loyalty stems from the theory of planned behavior (TPB) ([Lai and Chen, 2011; Revels et al., 2010](#)). According to TPB, loyalty is influenced not only by satisfaction but also by subjective norm and perceived behavioral control ([Ajzen, 1991; Mouakket and Al-Hawari, 2012](#)). Thus, it may be argued that subjective norm and perceived behavioral control may influence patient loyalty. Given this, it is important to examine the effect of subjective norm and perceived behavioral control on patient loyalty. However, there is no significant effort to do so.

Besides the subjective norm and behavioral control, another factor that may affect patient loyalty is trust. Relationship marketing literature has revealed that trust is the key factor in building customer loyalty (Morgan and Hunt, 1994; Palmatier *et al.*, 2006). In the context of health-care service, the role of trust in explaining patient loyalty becomes more important because health-care service can be categorized as credence service (Zeithaml *et al.*, 2008; Chang *et al.*, 2013; Moliner, 2009). Unfortunately, there is no patient loyalty research that examines the simultaneous effect of trust, subjective norm and perceived behavioral control on patient loyalty.

Research objectives

To address the gap in the literature, this research investigates patient loyalty using a model that integrates two TPB variables (subjective norm and perceived behavioral control) and trust. Generally, this research tries to answer the question: what are the factors that influence patient loyalty? More specifically, this research aims to answer three questions. First, does subjective norm influence patient loyalty? Second, does perceived behavioral control influence patient loyalty? Third, does trust influence patient loyalty?

The results of this study are important for management team of a health-care institution. The findings of this study provide valuable information for the management regarding the factors that need to be considered in formulating patient loyalty development strategy. Furthermore, this study assists the management team to generate patients' loyalty. Health institutions stand to gain financially from patient loyalty, patient satisfaction, referral by other patients and increased productivity and efficiency and improve/or boast morale of health-care providers (Mittal and Lassar, 1998; Zeithaml *et al.*, 2008; Chang *et al.*, 2013).

The remainder of this paper is organized as follows. The first section reviews the theoretical background and the proposed hypotheses. The second section presents the research methodology. The third section describes the results of the research. The fourth section presents the theoretical and managerial implications. The final section is the conclusion of this paper.

Literature review and hypotheses development

Patient loyalty

The important role of patient loyalty in health-care service business has been identified by many researchers (Chang *et al.*, 2013). HSI with loyal patients will get many benefits, i.e. economic and non-economic benefits (Mittal and Lassar, 1998; Zeithaml *et al.*, 2008). Therefore, HSI needs to maintain and improve its patient loyalty.

Patient loyalty is a construct that represents patient's commitment to continually use certain HSI (Chang *et al.*, 2013; Moliner, 2009). Furthermore, loyal patients reuse the HSI when they need health-care service and recommend it to others (Chang *et al.*, 2013; Mittal and Lassar, 1998). On the other hand, disloyal patients easily switch to another service provider and spread negative word of mouth to others (Chang *et al.*, 2013; Mittal and Lassar, 1998).

To generate patient loyalty, a HSI needs to understand the factors that influence patient loyalty. Some scholars have performed research on the factors that affect patient loyalty (e.g. Chang *et al.*, 2013; Choi *et al.*, 2004; Kanibir and Nart, 2012; Kessler and Mylod, 2011; Mittal and Lassar, 1998; Bielen and Demoulin, 2007; Mortazavi *et al.*, 2009;

Gaur *et al.*, 2011; Chahal and Kumari, 2011; Ndubisi, 2012). However, most of them proposed that patient satisfaction is the main determinant of patient loyalty (Chang *et al.*, 2013). Meanwhile, a recent research performed by Chang *et al.* (2013) showed that satisfaction is not enough to explain patient loyalty. Their study showed that there is a weak relationship between patient satisfaction and patient loyalty. Furthermore, in the context of health-care service in Indonesia, Patayawati *et al.* (2013) found that satisfaction does not influence patient loyalty. Thus, it is important to perform another study on patient loyalty.

Marketing literature has identified that loyalty is affected by some variables. This research proposed that subjective norm, perceived behavioral control and trust are the determinants of patient loyalty. The meaning of those variables and the proposed hypotheses are explained below. The conceptual model is shown in Figure 1.

Subjective norm

The important role of subjective norm in behavior formation was identified by the theory of reasoned action and its replacement, TPB (Ajzen, 1991). This construct represents how others can affect someone's decision (Venkatesh and Davis, 2000). More specifically, in this research, subjective norm is defined as patient's perception on the pressure from relatively important people around him/her to keep using certain HSI (Venkatesh and Davis, 2000).

Based on TPB, subjective norm has positive impact on loyalty (Ajzen, 1991). This based on a view that:

[...]people may choose to perform a behavior, even if they are not themselves favorable toward the behavior or its consequences, if they believe one or more important referents think they should, and they are sufficiently motivated to comply with the referents (Venkatesh and Davis, 2000).

Empirically, some researchers have already tested the effect of subjective norm on customer loyalty. For example, Mouakket and Al-Hawari (2012) found positive relationship between subjective norm and loyalty. Their finding is also supported by Lee *et al.* (2009), Al-Debei *et al.* (2013), Chen *et al.* (2012), Lee (2010), Liao *et al.* (2007) and Hsu *et al.* (2006). Based on the explanation, the first hypothesis is formulated as follows:

H1. Subjective norm has a positive impact on patient loyalty.

Perceived behavioral control

TPB has recognized perceived behavioral control (PBC) as an important construct in behavior formation (Ajzen, 1991). PBC represents what extent someone feels he/she can overcome constraints to perform certain behavior (Venkatesh *et al.*, 2003). These

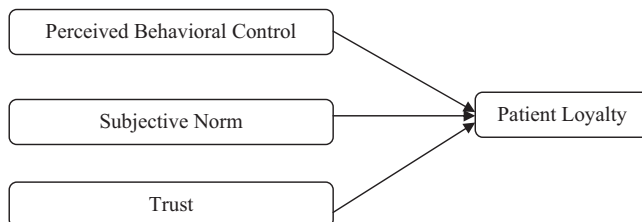


Figure 1.
The conceptual
model

constraints can be financial constraints or non-financial constraints (Zeithaml *et al.*, 2008). In this research, PBC is defined as patient's perception on the easiness he/she feels to keep using certain HSI (Ajzen, 1991).

Based on TPB, PBC has positive impact on patient loyalty (Ajzen, 1991). This based on a notion that someone may do something because it is easy to do (Ajzen, 1991; Venkatesh *et al.*, 2003). On the other hand, even though someone has a positive evaluation on a behavior or the important people around him/her recommend the behavior, he/she may not perform the behavior if it is difficult to do (Ajzen, 1991; Venkatesh *et al.*, 2003).

In the literature, some researchers have already tested the relationship between PBC and loyalty. Lee *et al.* (2009) found that PBC has positive impact on loyalty. This finding is supported by Al-Debei *et al.* (2013), Liao *et al.* (2007), Lee (2010) and Hsu *et al.* (2006). Thus, this research proposed the second hypothesis as follows:

H2. PBC has positive impact on patient loyalty.

Trust

Relationship marketing researchers have put trust as a central construct to explain customer loyalty (Morgan and Hunt, 1994). There are many scholars who tried to define trust. In this research, based on Wilson (1995), trust is defined as "a belief that [HSI] will act in the best interests of the [patient]". Furthermore, trust represents the reliability, integrity, intense and attitude of the HSI perceived by the patient (Sanchez-Franco, 2009; Schurr and Ozanne, 1985).

In an intense competition, researchers have already recognized the important role of trust in building customer loyalty (Bruhn, 2002; Morgan and Hunt, 1994; Palmatier *et al.*, 2006). It is believed that trust has positive impact on loyalty (Chang *et al.*, 2013; Moliner, 2009). Empirical studies have proved that trust positively affects loyalty in various contexts (Chiu *et al.*, 2009; Ganesan, 1994; Gefen, 2000; Lee, 2005; Liu *et al.*, 2005; Wen *et al.*, 2005). In health-care service, a similar result is also found by Kumar *et al.* (2013) and Patayawati *et al.* (2013). Based on the explanation, the third hypothesis is formulated as follows:

H3. Trust has positive impact on patient loyalty.

Research methodology

Research design

This research performed quantitative research methodology by using survey. We used the methodology for some reasons. First, the type of the research question posed is appropriate with the method (Yin, 1990). Second, the previous researches on the factors that influenced patient loyalty also used quantitative research methodology (e.g. Chang *et al.*, 2013; Choi *et al.*, 2004; Kanibir and Nart, 2012; Mittal and Lassar, 1998; Bielen and Demoulin, 2007; Mortazavi *et al.*, 2009; Gaur *et al.*, 2011; Chahal and Kumari, 2011; Ndubisi, 2012; Patayawati *et al.*, 2013). Third, it allowed for reaching a larger sample size (Sekaran and Bougie, 2010). Fourth, the approach (survey) also lends itself better to quantitative analysis (Sekaran and Bougie, 2010) and the approach is generally consistent with earlier research on this research's subject.

LHS
28,3*Key variables*

This research involved four key variables, namely, trust, patient loyalty, PBC and subjective norm. The operational definition of the variables is shown in [Table I](#).

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Instrument

The research instrument used was questionnaire. In the questionnaire, based on [Diamantopoulos et al.'s \(2012\)](#) recommendation, the research variables (trust, patient loyalty, PBC and subjective norm) were measured using multiple indicators. The instrument used a seven-point Likert scale ranging from “strongly disagree (1)” to “strongly agree (7)”.

Content validity

According to [Sakhtivel et al. \(2005\)](#), [Sekaran and Bougie \(2010\)](#) and [Tari et al. \(2007\)](#), content validity of an instrument can be ensured by deriving indicators from available literatures. More specifically, trust was measured using three indicators based on [Kantsperger and Kunz's \(2010\)](#) work. Four indicators of patient loyalty were taken from [Choi et al. \(2004\)](#), while three indicators of subjective norm were derived from [Francis et al. \(2004\)](#). PBC was measured using three indicators based on [Francis et al. \(2004\)](#).

Construct validity

Factor analysis was used to check construct validity. The cut-off values used are (1) Kaiser–Meyer–Olkin (KMO) ≥ 0.5 , (2) factor loading of each indicators ≥ 0.5 , and (3) p -value of the Bartlett's test of sphericity ≤ 0.05 ([Hair et al., 2006](#); [Lai and Chen, 2011](#); [Malhotra, 2007](#)). [Table II](#) shows that all variables confirm construct validity.

Reliability

Cronbach's alpha analysis was conducted to check the reliability of the instrument. The instrument is said to be reliable if it has alpha coefficient value above or equal to 0.6 ([Hair et al., 2006](#); [Lai and Chen, 2011](#); [Malhotra, 2007](#)). [Table III](#) shows that all variables have good construct reliability.

| Variables | Operational definition | References (adapted from) |
|-----------------|--|--|
| Trust | A belief that health-care service institution will act in the best interests of the patient | Wilson, 1995 |
| PBC | Patient's perception on the easiness he/she feels to keep using certain health-care service institution | Ajzen, 1991 |
| Subjective norm | Patient's perception on the pressure from relatively important people around him/her to keep using certain health-care service institution | Venkatesh and Davis, 2000 |
| Patient loyalty | Patient's commitment to continually use and recommend certain health-care service institution | Chang et al., 2013 ; Moliner, 2009 |

Table I.
The operational definition of key variables

| Variables and indicators | KMO | Bartlett's test of Sphericity (significance) | Factor loading | Patient loyalty model |
|-------------------------------------|-------|---|----------------|--------------------------|
| <i>Subjective norm</i> | 0.770 | 0.000 | | 251 |
| SN1 | | | 0.952 | |
| SN2 | | | 0.971 | |
| SN3 | | | 0.966 | |
| <i>Trust</i> | 0.729 | 0.000 | | |
| TR1 | | | 0.931 | |
| TR2 | | | 0.978 | |
| TR3 | | | 0.974 | |
| <i>Perceived behavioral control</i> | 0.762 | 0.000 | | |
| PBC1 | | | 0.962 | |
| PBC2 | | | 0.940 | |
| PBC3 | | | 0.965 | |
| <i>Loyalty</i> | 0.628 | 0.000 | | |
| LOY1 | | | 0.827 | |
| LOY2 | | | 0.824 | |
| LOY3 | | | 0.874 | |
| LOY4 | | | 0.886 | |

Table II.
The results of
construct validity
testing

| Variables and indicators | Cronbach's alpha | |
|--------------------------|------------------|--|
| Subjective norm | 0.951 | Table III. The results of reliability testing |
| Trust | 0.956 | |
| PBC | 0.952 | |
| Loyalty | 0.855 | |

Sampling

The population of the study is the out-patients of HSI with a primary care facility in Bogor, Indonesia. Convenience sampling was chosen based on some reasons. First, the real characteristics of the population were unknown (Sekaran and Bougie, 2010). According to Sekaran and Bougie (2010), convenience sampling can be used if the real characteristics of the population were unknown. Second, there was an operational and financial limitation (Sekaran and Bougie, 2010). Three, according to Calder *et al.* (1981) in Park and Sullivan (2009), the use of convenience sampling in this research could still be tolerated because the research was designed to test the relationships among variables.

We distributed 158 questionnaires in a HSI in Bogor, Indonesia. Of the 158 questionnaires, 1 questionnaire was eliminated due to missing data. Hence, the final samples of the study are 157 out-patients (valid return rate is 99.39 per cent). This number fulfills the requirement of multiple regressions analysis, which is the statistical analysis method used in this study (Hair *et al.*, 2006). The male respondents (50.3 per cent) are slightly more than female respondents (49.7 per cent). The majority of the respondents are 31-40 years old (26.1 per cent). More completely, the respondents' demographic profiles are shown in Table IV.

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28,3

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| Variable | Category | (%) |
|------------------------|--------------------|------|
| <i>Gender</i> | Male | 50.3 |
| | Female | 49.7 |
| <i>Age</i> | ≤ 20 years old | 15.3 |
| | 21-30 years old | 20.4 |
| | 31-40 years old | 26.1 |
| | 41-50 years old | 21.7 |
| | ≥ 51 years old | 16.6 |
| <i>Education</i> | Other | 8.9 |
| | Junior high school | 22.3 |
| | Senior high school | 56.1 |
| | Diploma | 5.1 |
| | Bachelor | 7.0 |
| | Post-graduate | 0.6 |
| <i>Marital status</i> | Single | 20.4 |
| | Married | 74.5 |
| | Divorced | 5.1 |
| <i>Number of visit</i> | < 3 times | 27.4 |
| | 3-6 times | 15.9 |
| | 7-10 times | 8.3 |
| | > 10 times | 48.4 |

Table IV.
The respondents'
demographic profile

Data analysis

Since this study tested the simultaneous effect of two or more metric variables on one metric dependent variable, multiple regressions analysis was done to test the hypotheses (Hair *et al.*, 2006). In this research, multiple regressions analysis was conducted using SPSS 17.

Result and discussion

Result

The results of the multiple regressions analysis are shown in Table V. According to Table V, the first hypothesis and the third hypothesis are accepted, while the second hypothesis is rejected. Hence, the results show that subjective norm and trust influence patient loyalty positively, while PBC does not influence patient loyalty.

The first finding of this research showed that the β coefficient of subjective norm is positive ($\beta = 0.088$) and the p value is lower than 0.05 ($p = 0.002$). This means subjective

| Independent variables ^a | Unstandardized coefficients | | Standardized coefficients | <i>T</i> | Significance | <i>R</i> ² |
|------------------------------------|-----------------------------|-------|---------------------------|----------|--------------|-----------------------|
| | B | Beta | | | | |
| (Constant) | -1.307E-16 | 0.069 | | 0.000 | 1.000 | 25.7% |
| Trust | 0.271 | 0.084 | 0.271 | 3.203 | 0.002 | |
| Perceived behavioral control | 0.051 | 0.075 | 0.051 | 0.683 | 0.496 | |
| Subjective norm | 0.280 | 0.088 | 0.280 | 3.188 | 0.002 | |

Table V.
The results of
multiple regressions

Note: ^aDependent variable: loyalty

norm affects patient loyalty positively and significantly. Thus, the first hypothesis was accepted. Furthermore, this finding supports the previous researches on trust – loyalty in the other contexts than health-care service, which are performed by Al-Debei *et al.* (2013), Chen *et al.* (2012), Hsu *et al.* (2006), Lee *et al.* (2009), Lee (2010), Liao *et al.* (2007), and Mouakket and Al-Hawari (2012).

The second finding of this research showed that the β coefficient of perceived behavioral control is positive ($\beta = 0.075$) and the p value is higher than 0.05 ($p = 0.496$). This means perceived behavioral control does not affect patient loyalty significantly. Thus, the second hypothesis was rejected. Furthermore, this finding is different from the findings of the previous studies performed in the other contexts than health-care services (e.g. Al-Debei *et al.*, 2013; Hsu *et al.*, 2006; Lee *et al.*, 2009; Lee, 2010; Liao *et al.*, 2007).

The third finding showed that the β coefficient of trust is positive ($\beta = 0.084$) and the p value is lower than 0.05 ($p = 0.002$). This means trust affects patient loyalty positively and significantly. Thus, the third hypothesis was accepted. Furthermore, this finding supports the previous research on trust – loyalty in the context of health-care service performed by Chang *et al.* (2013) and Moliner (2009).

Theoretical implication

Patient loyalty is a key success factor for HSI in a competitive business environment (Chang *et al.*, 2013). Therefore, it is important to investigate the factors that influence patient loyalty. Given this, this research tries to propose and test a patient loyalty model that integrates two TPB variables (subjective norm and PBC) and trust. In the existing literature, there is no significant effort to do so.

The results of this research showed that trust and subjective norm have positive impact on patient loyalty. Hence, this research supports the findings of the previous researches. More specifically, the other researchers have found positive relationship between trust and loyalty (Chiu *et al.*, 2009; Ganesan, 1994; Gefen, 2000; Lee, 2005; Liu *et al.*, 2005; Wen *et al.*, 2005), as well as the positive impact of subjective norm on loyalty (Al-Debei *et al.*, 2013; Chen *et al.*, 2012; Hsu *et al.*, 2006; Lee *et al.*, 2009; Lee, 2010; Liao *et al.*, 2007; Mouakket and Al-Hawari, 2012).

The results also indicate that the factors relate to the mitigation of the risks stemmed from service consumption is important to build patient loyalty. On the one hand, trust is a psychological effort performed by patient to minimize consumption risk that may have been higher if the service is provided by an untrusting HSI (Sheth and Parvatiyar, 1995). On the other hand, subjective norm represents sociological effort done by patient to ensure that he/she does not choose the wrong HSI by taking recommendations from people around him/her (Venkatesh *et al.*, 2003).

On the context of health-care services, there are only few researchers that studied the relationship between variables that relate to the mitigation of the risks stemmed from service consumption with patient loyalty. Furthermore, their findings have also supported our research finding. Moliner (2009) has found that trust influences patient loyalty. The sample of his research is patients of 19 hospital services of public hospital and patients of 27 hospital services of private hospital in Spain. Moliner's finding is also supported by Gaur *et al.* (2011), who surveyed patients who have visited the specialist doctor (dentists, gynecologists, physiotherapists, obstetricians and family physicians) in selected clinics in the city of Mumbai, India. Gaur *et al.* (2011) found that patient's

confidence in his/her doctor is positively related to patients' loyalty toward their health-care provider.

This research also showed that PBC does not influence patient loyalty. This is different from the findings of the previous studies (e.g. Al-Debei *et al.*, 2013; Hsu *et al.*, 2006; Lee *et al.*, 2009; Lee, 2010; Liao *et al.*, 2007). This may due to the nature of health-care service. Health-care service relates to the human's fundamental needs, which is the need to be healthy. People may think that health is a benefit beyond any consequences. This condition may cause that the patient becomes less sensitive to the constraints she/he faced in consuming the service so that PBC become irrelevant in explaining patient loyalty (Venkatesh *et al.*, 2003; Zeithaml *et al.*, 2008).

Managerial implication

The results of this research give managerial implications for HSI managers in establishing patient loyalty. The findings show that HSIs need to pay attention to trust and subjective norm.

Trust relates to "a belief that [healthcare service institution] will act in the best interests of [the patient]" (Wilson, 1995). To increase the trust of the patient, in designing operational and marketing strategies, HSI managers need to make sure that the patients have deep positive convictions on HSI's excellent practice, reliability and integrity and that they would act according to patients' expectations. Furthermore, it is also important for HSI to measure the trust level of its patient. The results of the measurement are useful to establish improvement plan.

Subjective norm represents patient perception on the pressure from relatively important people around him/her to keep using certain health-care service institution (Venkatesh and Davis, 2000). Given this, HSI managers need to identify who are important people around their patients. HSI managers also need to assure that people around the patients (or communities where they belonged to) have positive perceptions on them. Furthermore, HSI managers need to develop effective public relation strategies to establish patient loyalty.

Conclusion

This research has tried to test the influence of subjective norm, perceived behavioral control and trust on patient loyalty. This is important because there is limited literature on the topic. Based on the data analysis, this research found that subjective norm and trust influence patient loyalty positively. However, this research also found that perceived behavioral control does not influence patient loyalty significantly.

Even though this research has generated interesting findings, there are some limitations. First, the sampling method used was convenience sampling and the data collection was done only in one health-care institution in Bogor, Indonesia. Thus, it would be hard to generalize the findings of this research into other contexts. Second, this research only included three variables (subjective norm, perceived behavioral control and trust). The R^2 is 25.7 per cent. It indicates that there are still other variables that may affect patient loyalty. Based on the limitations, we suggest that future researches should include the other variables in the research model, involve more HSIs and use higher sample size.

References

- Ajzen, I. (1991), "The theory of planned behavior", *Organizational Behavior and Human Decision Processes*, Vol. 50 No. 2, pp. 179-211.
- Al-Debei, M., Al-Lozi, E. and Papazafeiropoulou, A. (2013), "Why people keep coming back to Facebook: explaining and predicting continuance participation from an extended theory of planned behavior perspective", *Decision Support System*, Vol. 55 No. 1, pp. 43-54.
- Amin, M. and Nasharuddin, S.Z. (2013), "Hospital service quality and its effects on patient satisfaction and behavioural intention", *Clinical Governance: An International Journal*, Vol. 18 No. 3, pp. 238-254.
- Aurier, P. and N'Goala, G. (2010), "The differing and mediating roles of trust and relationship commitment in service relationship maintenance and development", *Journal of the Academy of Marketing Science*, Vol. 38 No. 3, pp. 303-325.
- Bielen, F. and Demoulin, N. (2007), "Waiting time influence on the satisfaction-loyalty relationship in services", *Managing Service Quality: An International Journal*, Vol. 17 No. 2, pp. 174-193.
- Bruhn, M. (2002), *Relationship Marketing: Management of Customer Relationships*, Financial Time Prentice Hall, Harlow.
- Calder, B.J., Phillips, L.W. and Tybout, A.M. (1981), "Designing research for application", *Journal of Consumer Research*, Vol. 8 No. 2, pp. 197-207.
- Chahal, H. and Kumari, N. (2011), "Evaluating customer relationship dynamics in healthcare sector through indoor patients' judgement", *Management Research Review*, Vol. 34 No. 6, pp. 626-648.
- Chang, C.-W., Tseng, T.-H. and Woodside, A.G. (2013), "Configural algorithms of patient satisfaction, participation in diagnostics, and treatment decisions' influences on hospital loyalty", *Journal of Services Marketing*, Vol. 27 No. 2, pp. 91-103.
- Chen, S.-C., Yen, D.C. and Hwang, M.I. (2012), "Factors influencing the continuance intention to the usage of Web 2.0: an empirical study", *Computers in Human Behavior*, Vol. 28 No. 3, pp. 933-941.
- Chiu, C.-M., Chang, C.-C., Cheng, H.-L. and Fang, Y.-H. (2009), "Determinants of customer repurchase intention in online shopping", *Online Information Review*, Vol. 33 No. 4, pp. 761-784.
- Choi, K.-S., Cho, W.-H., Sunhee, L., Lee, H. and Kim, C. (2004), "The relationships among quality, value, satisfaction and behavioural intention in health care provider choice: a South Korean study", *Journal of Business Research*, Vol. 57 No. 8, pp. 913-921.
- Diamantopoulos, A., Sarstedt, M., Fuchs, C., Wilczynski, P. and Kaiser, S. (2012), "Guidelines for choosing between multi-item and single-item scales for construct measurement: a predictive validity perspective", *Journal of the Academy of Marketing Science*, Vol. 40 No. 3, pp. 434-449.
- Francis, J.J., Eccles, M.P., Johnston, M., Walker, A., Grimshaw, J., Foy, R., Kaner, E.F.S., Smith, L. and Bonetti, D. (2004), *Constructing Questionnaires Based on the Theory of Planned Behavior: A Manual for Health Services Researchers*, Centre for Health Services Research, Newcastle Upon Tyne.
- Ganesan, S. (1994), "Determinants of long-term orientation in buyer-seller relationships", *Journal of Marketing*, Vol. 58 No. 2, pp. 1-19.
- Gaur, S.S., Xu, Y., Quazi, A. and Nandi, S. (2011), "Relational impact of service providers' interaction behavior in healthcare", *Managing Service Quality*, Vol. 21 No. 1, pp. 67-87.
- Gefen, D. (2000), "E-commerce: the role of familiarity and trust", *Omega: The International Journal of Management Science*, Vol. 28 No. 6, pp. 725-737.

- Hair, J.F., Anderson, R.E., Tatham, R.L. and Black, W.C. (2006), *Multivariate Data Analysis*, 6th ed., Prentice Hall, Englewood Cliffs, NJ.
- Hsu, M.-H., Yen, C.-H., Chiu, C.-M. and Chang, C.-M. (2006), "A longitudinal investigation of continued online shopping behavior: an extension of the theory of planned behavior", *International Journal of Human-Computer Studies*, Vol. 64 No. 9, pp. 889-904.
- Kanibir, H. and Nart, S. (2012), "The effects of internal relationship marketing on superior customer relations as competitive performance: evidence from healthcare industry", *Procedia – Social and Behavioral Sciences*, Vol. 58, pp. 1378-1385.
- Kantsperger, R. and Kunz, W.H. (2010), "Consumer trust in service companies: a multiple mediating analysis", *Managing Service Quality*, Vol. 20 No. 1, pp. 4-25.
- Kessler, D.P. and Mylod, D. (2011), "Does patient satisfaction affect patient loyalty?", *International Journal of Health Care Quality Assurance*, Vol. 24 No. 4, pp. 266-273.
- Kumar, R.S., Dash, S. and Purwar, C. (2013), "The nature and antecedents of brand equity and its dimensions", *Marketing Intelligence & Planning*, Vol. 31 No. 2, pp. 141-159.
- Lai, W.-T. and Chen, C.-F. (2011), "Behavioral intentions of public transit passengers: the roles of service quality, perceived value, satisfaction, and involvement", *Transport Policy*, Vol. 18 No. 2, pp. 318-325.
- Lee, M.-C. (2010), "Explaining and predicting users' continuance intention toward e-learning: an extension of the expectation-confirmation model", *Computers & Education*, Vol. 54 No. 2, pp. 506-516.
- Lee, R., Murphy, J. and Neale, L. (2009), "The interactions of consumption characteristics on social norms", *Journal of Consumer Marketing*, Vol. 26 No. 4, pp. 277-285.
- Lee, T.M. (2005), "The impact of perceptions of interactivity on customer trust and transaction intentions in mobile commerce", *Journal of Electronic Commerce Research*, Vol. 6 No. 3, pp. 165-180.
- Liao, C., Chen, J.-L. and Yen, D.C. (2007), "Theory of planning behavior (TPB) and customer satisfaction in the continued use of e-service: an integrated model", *Computers in Human Behavior*, Vol. 23 No. 6, pp. 2804-2822.
- Liu, C., Marchewka, J.T., Lu, J. and Yu, C.-S. (2005), "Beyond concern-a privacy-trust-behavioral intention model of electronic commerce", *Information & Management*, Vol. 42 No. 2, pp. 289-304.
- Malhotra, N.K. (2007), *Marketing Research: An Applied Orientation*, 5th edn., Pearson Education, Inc, Prentice Hall, Upper Saddle River, NJ.
- Mittal, B. and Lassar, W. (1998), "Why do customer switch? The dynamics of satisfaction versus loyalty", *The Journal of Services Marketing*, Vol. 12 No. 3, pp. 177-194.
- Moliner, M.A. (2009), "Loyalty, perceived value, and relationship quality in healthcare services", *Journal of Service Management*, Vol. 20 No. 1, pp. 76-97.
- Morgan, R.M. and Hunt, S.D. (1994), "The commitment-trust theory of relationship marketing", *Journal of Marketing*, Vol. 58 No. 3, pp. 20-38.
- Mortazavi, S., Kazemi, M., Shirazi, A. and Aziz-Abadi, A. (2009), "The relationships between patient satisfaction and loyalty in the private hospital industry", *Iranian J Public Health*, Vol. 38 No. 3, pp. 60-69.
- Mouakket, S. and Al-Hawari, M.A. (2012), "Examining the antecedens of e-loyalty intention in an online reservation environment", *The Journal of High Technology Management Research*, Vol. 23 No. 1, pp. 46-57.

- Ndubisi, N.O. (2012), "Mindfulness, reliability, pre-emptive conflict handling, customer orientation and outcomes in Malaysia's healthcare sector", *Journal of Business Research*, Vol. 65 No. 4, pp. 537-546.
- Palmatier, R.W., Dant, R.P., Grewal, D. and Evans, K.R. (2006), "Factors influencing the effectiveness of relationship marketing: a meta-analysis", *Journal of Marketing*, Vol. 70, pp. 136-153.
- Park, H.-H. and Sullivan, P. (2009), "Market segmentation with respect to university students' clothing benefits sought: shopping orientation, clothing attribute evaluation, and brand repatronage", *International Journal of Retail & Distribution Management*, Vol. 37 No. 2, pp. 182-201.
- Patayawati, D.Z., Setiawan, M. and Rahayu, M. (2013), "Patient satisfaction, trust, and commitment: mediator of service quality and its impact on loyalty (an empirical study in Southeast Sulawesi public hospitals)", *IOSR Journal of Business and Management*, Vol. 7 No. 6, pp. 1-14.
- Qin, H. and Prybutok, V.R. (2013), "A quantitative model for patient behavioral decisions in the urgent care industry", *Socio-Economic Planning Sciences*, Vol. 47 No. 1, pp. 50-64.
- Revels, J., Tojib, D. and Tsarenko, Y. (2010), "Understanding consumer intention to use mobile services", *Australasian Marketing Journal*, Vol. 18 No. 2, pp. 74-80.
- Sakhtivel, P.B., Rajendran, G. and Raju, R. (2005), "TQM implementation and students' satisfaction of academic performance", *The TQM Magazine*, Vol. 17 No. 6, pp. 573-589.
- Sanchez-Franco, M.J. (2009), "The moderating effects of involvement on the relationship between satisfaction, trust and commitment in e-banking", *Journal of Interactive Marketing*, Vol. 23 No. 3, pp. 247-258.
- Schurr, P.H. and Ozanne, J.L. (1985), "Influences on exchange processes: buyer's preconceptions of a seller's trustworthiness and bargaining toughness", *The Journal of Consumer Research*, Vol. 11 No. 4, pp. 939-953.
- Sekaran, U. and Bougie, R. (2010), *Research Methods for Business: A Skill Building Approach*, 5th edn., Wiley, Sussex.
- Sheth, J.N. and Parvatiyar, A. (1995), "Relationship marketing in consumer markets: antecedents and consequences", *Journal of the Academy of Marketing Science*, Vol. 23 No. 4, pp. 255-271.
- Suki, N.M. and Suki, N.M. (2011), "Patient satisfaction, trust, commitment and loyalty toward doctors", *International Conference on Sociality and Economics Development IPEDR*, Vol. 10, pp. 498-502.
- Tam, J.L.M. (2012), "The moderating role of perceived risk in loyalty intentions: an investigation in a service context", *Marketing Intelligence & Planning*, Vol. 30 No. 1, pp. 33-52.
- Tari, J.J., Molina, J.F. and Castejon, J.L. (2007), "The relationship between quality management practices and their effects on quality outcomes", *European Journal of Operation Research*, Vol. 183 No. 2, pp. 483-501.
- Venkatesh, V. and Davis, F.D. (2000), "A theoretical extension of the technology acceptance model: four longitudinal field studies", *Management Science*, Vol. 46 No. 2, pp. 186-204.
- Venkatesh, V., Morris, M.D., Davis, G.B. and Davis, F.D. (2003), "User acceptance of information technology: toward a unified view", *MIS Quarterly*, Vol. 27 No. 3, pp. 425-478.
- Wen, C.-H., Lan, L.W. and Cheng, H.-L. (2005), "Structural equation modeling to determine passenger loyalty toward intercity bus", *Journal of the Transportation Research Board*, Vol. 1927 No. 2005 (Transit: Planning, Management and Maintenance, Technology, Marketing and Fare Policy, and Capacity and Quality of Service), pp. 249-255.

-
- Wilson, D. (1995), "An integrated model of buyer-seller relationships", *Journal of the Academy of Marketing Science*, Vol. 23 No. 4, pp. 335-345.
- Yin, R.K. (1990), *Case Study Research: Design and Methods*, Applied Social Research Methods Series, Vol. 5. Sage Publications, Newbury Park, CA.
- Zeithaml, V., Bitner, M.J. and Gremler, D.D. (2008), *Services Marketing: Integrating Customer Focus Across the Firm*, 5th ed., McGraw-Hill, Boston, MA.

Further reading

- Akbar, M.M. and Parvez, N. (2009), "Impact of service quality, trust, and customer satisfaction on customer loyalty", *ABAC Journal*, Vol. 29 No. 1, January-April, pp. 24-38.
- Berry, L.L. (1995), "Relationship marketing of services-growing interest, emerging perspectives", *Journal of the Academy of Marketing Science*, Vol. 23 No. 4, Fall, pp. 236-245.
- Bodet, G. (2008), "Customer satisfaction and loyalty in service: two concepts, four constructs, several relationships", *Journal of Retailing and Consumer Services*, Vol. 15 No. 3, May, pp. 156-162.
- Clemes, M., Gan, C., Kao, T.-H. and Choong, M. (2008), "An empirical analysis of customer satisfaction in international air travel", *Innovative Marketing*, Vol. 4 No. 2, pp. 49-62.
- Day, G.S. (1969), "A two-dimensional concept of brand loyalty", *Journal of Advertising Research*, Vol. 9 No. 3, pp. 29-35.
- Gallo, M. (2011), "Measuring passenger satisfaction: a strategy based on Rasch analysis and the ANOM", *Journal of Applied Quantitative Methods*, Vol. 6 No. 2, pp. 27-35.
- Yoo, M. and Bai, B. (2013), "Customer loyalty marketing research: a comparative approach between hospitality and business journals", *International Journal of Hospitality Management*, Vol. 33, pp. 166-177.

Corresponding author

Sik Sumaedi can be contacted at: sik_s_01@yahoo.com

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