

HEALTHCARE SERVICE QUALITY AND COST PERCEPTION ON SATISFACTION AND WORD-OF-MOUTH OF FAMILIES OF MENTAL DISORDER PATIENTS

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Abstract

This study aimed to understand the influence of healthcare service quality and cost perceptions on satisfaction and word-of-mouth of mental disorder patients' family. The sampling unit was family of mental disorder patients that had been treated in the Public Hospital within Ajatappareng Region, Indonesia. Accidental sampling was used to administer questionnaires to 100 respondents. This study uses SEM (Structural Equation Modeling) to test the hypothesis that has been proposed. As the result, healthcare service quality significantly affected satisfaction, but it insignificantly affected word-of-mouth. Then, satisfaction mediated healthcare service quality on word-of-mouth of the mental disorder patients' family. Moreover, cost perception significantly influenced satisfaction; and cost perception insignificantly influenced word-of-mouth. Whereas, satisfaction mediated cost perception on word-of-mouth of patients' family. Lastly, satisfaction significantly affected word-of-mouth of mental disorder patients' family in the Public Hospital within Ajatappareng Region, Indonesia.

Keyword: Healthcare service quality, Cost perception, Satisfaction, Word-of-mouth

INTRODUCTION

Globalization leads for competitive demand of health care services in Indonesia. This phenomenon also influences hospitals to provide various missions. Each hospital should contribute not only for a social mission, but also for human resource development. In this global era, hospitals as the healthcare institutions require intensive capital and human resources with appropriate corporate culture so they are able to use resources effectively and efficiently in order to to achieve the stated organizational objectives. Moreover, the key for future success of a hospital prevails two main areas, i.e. utilization of resources and users' satisfaction. The first relates to the implementation of human resources effectively and efficiently; while the second refers to the users' satisfaction on hospital services (e.g. patients and families).

Obviously, one of important aspects in creating satisfaction can be through the quality of services that is provided by a hospital. Another aspect that is raised from service quality is satisfaction. The feeling of enjoyment is generally initiated and ascended by patients as well as families who take care and visit the patients in the hospital. As the result, every hospital tends to compete with other hospitals in providing the best service to its customers or patients for being excellent hospital.

LITERATURE REVIEW

Health Services

Health services are generally in relation to customers' decisions to seek healthcares. Parasuraman and Zeithaml (1998) delineate service quality having disagreement between the real service that customers receive with the services that customers perceive. Moreover, the quality of service is generally as a multi-dimensional construct that is based on customer ratings of service suppliers and customer interactions with the service itself (Zeithaml and Bitner, 1996). Obviously, people have various purposes in taking healthcare services. Referring to Kasl and Cobb (1966), people usually use health services for three reasons, such as: prevention of illness, medical examination prior the symptoms of illness being not endured (preventive behavior), getting the disease diagnosis and having imperative action when the disease symptoms have been felt (illness behavior), and treating the disease after clinical confirmation in order to heal the disease. Hence, these prevent for severe diseases.

Therefore, SERVQUAL (Service Quality) method is preferably applied to investigate a quality of health service. Furthermore, the approach for service quality may be drawn through five dimension of service quality that are proposed by Parasuraman et al., (2005). His model includes physical evidence (tangibles), reliability, responsiveness, assurance, and empathy. Thus, these dimensions can be used as service quality determination. According to Zeithaml et

al. (2013), there are ten main factors in SERVQUAL that comprise tangible, reliability, responsiveness, competence, credibility, courtesy, security, access, and communication. Tangible is the physical evidence, for example: interior design and equipment layout. Reliability is the consistency that is drawn as the ability of a healthcare provider to provide services as what it promises. Responsiveness refers to response and responsibility that is defined as a willingness to help and provide fast and precise services to customers with clear information. Competence refers to skill full staff who gain mastery on product knowledge as well as who are able to work in team. Credibility is the trustworthiness of information about a product or a service to customers. Courtesy is the generosity or kindness of staff to customers. Security is a situation in which makes customers feel secure. Access relates to the uncomplicated practices in contacting staff and managers of organizations so the customers do not wait them untimely. Communication means that staff and managers are able to communicate information clearly to the customers. Therefore, appropriate language is required so the customers can understand for the given information. Last, understanding customers is essential to be considered by staff. This relates to how the staff understand the needs of customers.

Cost Perception

In this study, healthcare cost is framed through the theory of cost perception. This is conceptualized as the amount of money paid for a product or service. Cost perception is also described as the amount of value that consumers exchange for the benefit of owning or using a product or service (Kotler and Armstrong, 2012: 312). This is adequately conceptualized that cost is related to a product and that price is in accordance with services. Moreover, Buttle (1995) indicated that cost is the sum of all the sacrifices made by consumers to obtain the benefits of a product. In other words, the the cost is the amount of money for buying services or goods. The consumers exchange the money for a choice of product or service that is provided by the sellers.

Customer Satisfaction

Customer satisfaction varies on perceptions. According to Kotler and Keller (2012: 470), satisfaction refers to one's level of enjoyment after comparing the real performance or the perceived results and the expected performance. Moreover, customer satisfaction can be defined as the feeling of pleasure or disappointment that is generated from customers' identification on the perceived performance of products and the desired ones (Kotler and Keller, 2012: 128). In brief, satisfaction or dissatisfaction is resulted as the results of interaction between expectations and experience after using the services or services provided.

Word of Mouth

Word of mouth obviously relates to service quality. According to WOMMA (Word of Mouth Marketing Association), word of mouth is an activity in which consumers provide information about a brand or product to other consumers. Meanwhile, Sernovitz (2006: 5) identifies word of mouth as a conversation that naturally occurs between people. Indeed, word of mouth is a genuine consumer talks. Moreover, Griffin (2002: 30) argues that word of mouth is the most powerful path for businesses people to gain new customers. Drawing to Solomon (2011: 424), word of mouth is information of a product from individual to other individuals. In addition, word of mouth is considered having greater influence rather than formal advertising or marketing. Sernovitz (2006: 6) classifies word of mouth into two types namely organic word of mouth and amplified word of mouth. Organic word of mouth is a natural conversation about the positive qualities of a company. While, amplified word of mouth is a conversation that begins with a deliberate campaign to get people talking about a product quality. In brief, different people may deliver different information to others.

Hypothesis Development

Effect of Healthcare Service Quality on Satisfaction

Satisfaction is an emotional state that can influence one's justification on a service provided by a company (Oliver, 1999:33). Evaluation on service quality creates an emotional assessment on satisfaction (Brady and Robertson, 2001). Therefore, companies must provide satisfactory services to their customers. If consumers are satisfied with services that are provided a company, this will establish a strong relationship between company and consumers. The customers' satisfaction also leads for being profitable company. Theoretically, when a service is able to meet or to exceed customer expectations, then the customer will be satisfied (Parasuraman et al., 1998: 12). Therefore, this study hypothesized that:

H1: Healthcare service quality affects satisfaction of family of mental disorder patients.

Effect of healthcare service quality on word of mouth

Service quality is one of variables that can influence word of mouth. The better service quality provided by a hospital will establish actions to create a word of mouth that gives benefits to the hospital. Otherwise, word of mouth will not be constructed if the quality of services unmeet patients' expectation. Besides, negative word of mouth may be created when patients or their family are unsatisfactory with a hospital's services.

Harrison and Walker (2001: 60) indicate that the service quality is one of variables that can affect word of mouth. This study also argues that service quality positively affects the

customers' intention to establish word of mouth. Perception of service quality that is adjusted higher than expectation will generate a positive word of mouth. However, negative word of mouth will emerge if the offered services quality is lower than the expectation. Indeed, the negative information is intensively disseminated to other people. The negative view is generally shared more in details since people basically expect others having similar bad experience as theirs. Accordingly, Trarintya (2011) finds that the quality of service can affect satisfaction and word of mouth. Chao-Chan (2011: 4873) also shows that the quality of hospital services positively affect the patient's word of mouth and patient's family.

Another research by Kitapci *et al.* (2014:161) indicates that satisfaction affects the word of mouth. Then, Naidu (2008), Trarintya (2011), and Chao-Chan (2011) prove that positive word of mouth will be delivered by patients and families who have been satisfying with a healthcare provider's assistance. They also convey that negative communication through word of mouth emerge when patients and their families are dissatisfied with its service. Yet Maulana (2010) argues different result that patients' word of mouth about a hospital's service quality affect no loyalty of patients. The different research findings generate a gap about the impact of healthcare service quality on word of mouth. Thus, the second hypothesis in this study is developed as follow:

H2 : Healthcare service quality affected word of mouth of family of mental disorder patients.

Effect of Cost Perception on Satisfaction

Previous researches have indicated the relationship between cost perception and satisfaction. For example, a relevant research was done Herrmann *et al.* (2007: 49) finding the effect of cost perception on satisfaction. He concludes that the price justification has a direct relationship with customer satisfaction. Moreover, Lailia *et al.* (2012: 1) find different results that the service quality and consumer value influence consumer satisfaction, but the cost perception has no effect on customer satisfaction. This indicates a gap between cost perception and satisfaction. Therefore, the third hypothesis of this study shows that:

H3 : Cost perception affects satisfaction of family of mental disorder patients.

Effect of Cost Perception on Word of Mouth

Previous research mentions five factors in determining the level of customer satisfaction. The factors are product quality, service quality, emotional, price and cost (Lupiyoadi, 2008:158). According to Tjiptono (2008: 352), customer satisfaction includes several benefits for a company, such as: reaction to low cost producer strategy, economical benefit of customer retention, customer lifetime value, persuasive power for word of mouth, cost sensitivity

reduction, and customer satisfaction. These are as indicator for a business success in the future. Therefore, the variable that affect the word of mouth is the cost (Lupiyoadi, 2008: 158; Tjiptono, 2008: 352).

Moreover, Chan et al. (2003: 872) show that prices have a significant effect on relationships with customer satisfaction; in turn, satisfied customers tend to transfer good references about a product or service to others. Thus, this maintains word of mouth recommendations to others. In contrast, another research conducted by Tomida and Satrio argue that cost perception does not affect word of mouth (2016:1). This indicates a gap regarding the effect of cost perception on satisfaction. Meanwhile, this study hypothesizes that:

H4 : Cost perception affects word of mouth of family of mental disorder patients.

Effect of Satisfaction on Word of Mouth

The higher level of satisfaction of patient's family will be beneficial for a hospital. In contrary, the lower level of satisfaction that is felt by patient's family will decrease consumer behaviors. This can undermine the hospital's benefit. Clearly, ultimate satisfaction of patients' family can lead for positive perspectives on the service quality that match between what is perceived and what is achieved. Furthermore, such satisfying patients and family will share positive or good things about the hospital to other people. In turn, such patients and family will stay loyally, spending more time, and paying premium prices. Accordingly, Tjiptono (2008: 44) explains that customer satisfaction has a positive impact on the willingness of consumers to recommend products or companies to others (positive word of mouth). Hanson (2000: 277) indicated that word of mouth is the most important influence for converting a new group or new users who have not used a product or a service yet. In addition, Taghizadeh *et al.* (2013) confirms for the influence of satisfaction with word of mouth. Furthermore, the fifth hypothesis is formulated as follow:

H5 : Satisfaction affects word of mouth of family of mental disorder.

RESEARCH METHOD

This study applied quantitative method with causality approach due to variables being studied. The population of this study were families of mental disorder patients who had been treated in the Public Hospital within Ajatappareng Region. The total numbers of mental disorder patients were 2,430 patients. In this study, a family was represented by one person for each patient. So the population was also 2,430 families. Furthermore, this study used accidental sampling technique for data collection. By using Slovin formula, the sample size was considered 100 respondents, i.e. the of family members of mental disorder patients in the Public Hospital within

Ajatapareng Region. Data collection techniques in this study by using questionnaires. This study uses SEM (Structural Equation Modeling) to test the hypothesis that has been proposed.

ANALYSIS AND RESULTS

In this study, research results were gained from 100 respondents. They were collected through non probability sampling in the form of accidental sampling with questionnaires to 100 family members of mental disorder patients in the Public Hospital within Ajatapareng Region. The respondents were characterized due to their age, gender, education, and treatment period. The investigated respondents were mostly between 45-50 years old (about 45% of participants). The female respondents were 68 people; they were higher than male respondents. The 57% of respondents were identified having highest education equaled to senior high schools. In this study, the family members being investigated were those who treated mental disorder patients in the hospital for less than one month (41%). Thus, the following figure was the analysis results of structural model estimation.

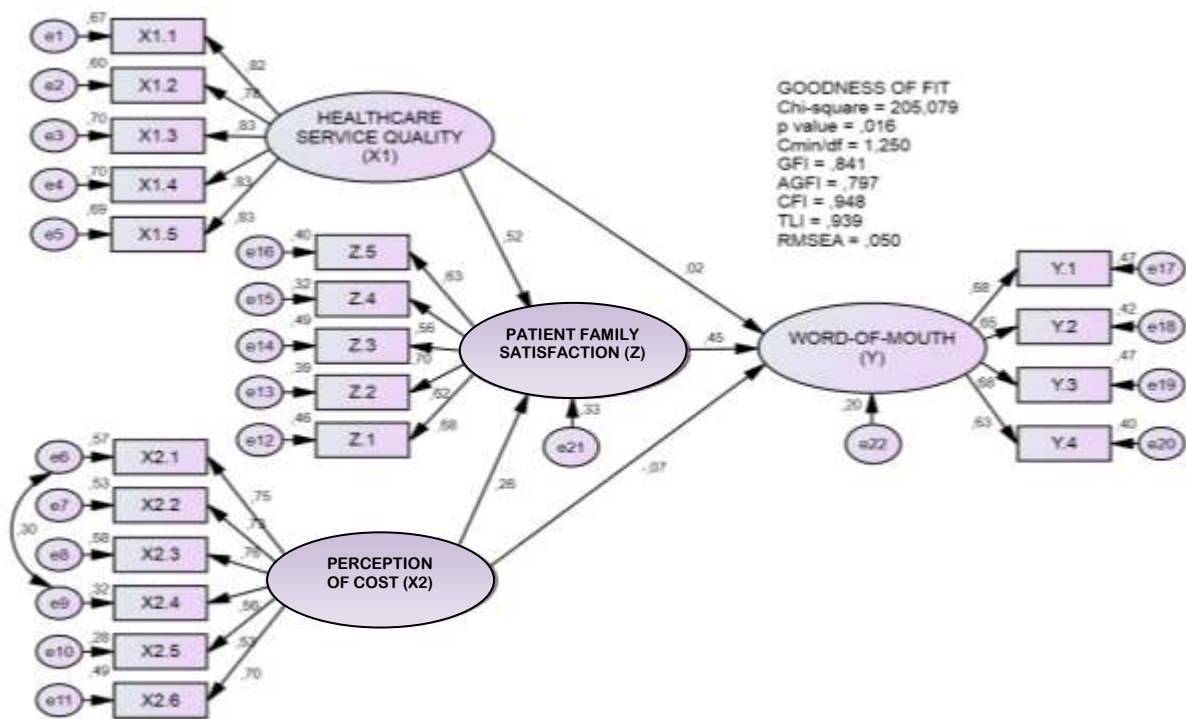


Figure 1. Output of SEM Modification

In addition, the result of indexed value calculation on goodness of fit that was generated from structural model was obtained (Table 1).

Table 1. Value on Goodness of Fit and Cut off Value Modification Model

Criterion	Model Test	Critical	Notes
	Results	Value	
Probability of X^2 Chi square	0.016	≥ 0.05	Fit
Cmin/DF	1.250	≤ 2.00	Fit
RMSEA	0.050	≤ 0.08	Fit
GFI	0.841	≥ 0.90	Marginal
AGFI	0.797	≥ 0.90	Not Fit
TLI	0.948	≥ 0.95	Marginal
CFI	0.939	≥ 0.95	Marginal

Therefore, this study demonstrated that criterion on goodness of fit had resulted better indexes rather than previous models.

DISCUSSIONS

Consumers generally expect for high quality of service. In this study, the patients and families were satisfied when the service quality of a healthcare provider as given as they perceived. Moreover, the patients and families would state for ideal and excellent perception on service quality when the hospital could provide assistance beyond what they expect. Therefore, some findings on service quality of the investigated hospital would be presented below.

First, the result of causality test indicated that healthcare service quality had a significant effect on satisfaction of family of mental disorder patients in the Public Hospital within Ajatappareng Region, Indonesia. In other words, the better healthcare service quality would increase the satisfaction of respondents. Moreover, the descriptive result illustrated that the healthcare service quality and the satisfaction of its patients' families were classified as good. The descriptive result also indicated that healthcare service quality improvement was preferred on tangible indicators. This meant that the respondents' satisfaction could be significantly extended due to the establishment facilities, utilities, staff, and hospital environment. These were classified as the need for improving the physical aspects of hospital.

Parasuraman *et al.*, (1988) argue when the service provided meets or exceeds the customers' expectations will lead them to be satisfied. Therefore, this study agreed that hospitals needed to improve the service quality to customers. The higher quality of services could generate consumer behaviors that advanced benefits for the hospital. Conversely, when consumers got bad service, they would feel dissatisfied. Such situation leads for unfavorable

consumer behavior; in turn, this can undermine a company or a service provider (Zeithaml et al., 2003). Other researches, such as: Kitapci et al. (2014); Dabri (2014), Pantauvakis (2014), and Zineldin (2010) proved similar finding that healthcare service quality affected patients' satisfaction.

Second, the result of causality test proved that healthcare service quality did not affect word of mouth of the family of mental disorder patients in the Public Hospital within Ajatappareng Region. As the descriptive results, the healthcare service quality and word of mouth are equally in high level. The descriptive result also indicated that the improvement of healthcare service quality was preferred for tangible indicators because the effect was not significant. In brief, the increasing of healthcare service quality had no significant impact on the word-of-mouth of respondents.

The quality of health services that was considered good by the family of mental disorder patients in the Public Hospital within Ajatappareng Region. However, this still could not affect their positive word of mouth. This was identified owing to the culture of "*siri na pacce*" (embarrassment culture) of Bugis Makassar. This culture expressed the families' disturbance in sharing others about the services for mental disorder patients. This study found that the problems were in relation to the family status among Bugis communities. They stated their embarrassment in delivering word of mouth on healthcare services for mental disorder patients. Therefore, the family as respondents of this study would not share their positive word-of-mouth to other people, even though the patients had got adequate healthcare service quality. In short, social status destructed positive word of mouth on the good service quality for mental disorder patients in the Public Hospital within Ajatappareng Region.

This research was different with a research by Harrison and Walker (2001). They found that service quality was a variable that could influence word of mouth. Other researches by Chao-Chan (2011) also provided results that hospital service qualities positively affected word of mouth of patients and their families. Moreover, Swan and Oliver (1989) confirmed that satisfied consumers or patients would bring positive word of mouth, recommend others to purchase a product, and re-buy the same products. They also conveyed that negative word of mouth would prohibit others to buy products or to use the service.

In addition, this research result was similar to Mudassar et al. (2013: 51-56). He found that word of mouth did not play a role in service quality and customer satisfaction. He also identified that the customers who got good service quality thought not to be necessarily willing to deliver word of mouth due to various reasons, such as: customers' lack of product knowledge and customers' lack of enthusiasm or interest in conveying information. Furthermore, this study suggested whether or not the variables that did not affect word of mouth, managers needed to

classify different experiences of customers or patients. In short, positive word of mouth might be impossible to achieve without good consumer research results.

Third, this study found that cost perception affected satisfaction of family of mental disorder patients in the Public Hospital within Ajatappareng Region. This hospital provides second class health service so its health service quality is equal between one and other patients. Therefore, the family of mental disorder patients determined having similar perception that cost for second class would provide similar satisfaction between patient families. Then, analysis result for individual respondent about cost perception variable showed that the growth of cost perception was conducted mainly on transparency indicator (most important indicator) and cost reliability (indicator with bad appraisal).

Moreover, the causality testing proved that the cost perception had a significant effect on family satisfaction in the Public Hospital within Ajatappareng Region. The descriptive results indicated that the cost perception and satisfaction were equally classified at a high level. The descriptive result also indicated that the increasing of cost perception was preferred in cost reliability indicator. This meant that patient's family would significantly improved satisfaction by improving cost reliability of hospital services.

This result was consistent with findings of Herrmann et al. (2007). They found that the fairness over cost perception had a direct relationship with satisfaction. Thus, this study suggested hospital's policy makers to concern on costs perception affecting satisfaction although many families of patients did not know how the standard cost of treatment. The policy makers also needed to review for calculating and determining the costs of products or services since the costs gave impact on customer satisfaction. Overall, this study concluded that the cost perception affected customer satisfaction, but it did not affect word of mouth. Therefore, this finding needed to be considered by hospital management in calculating the cost component appropriately.

Fourth, this study found that cost perception did not affect word of mouth of family of mental disorder patients in the Public Hospital within Ajatappareng Region. In this study, the mental disorder patients were all in the second class healthcare service as well as in the same healthcare costs. So the respondents argued that the patients were in the same quality and quantity. The respondents also thought that the families did not need to give positive word of mouth about the service quality for mental disorder patients. The latest opinion was considered owing to social and cultural status "siri na pacce" for Bugis Makassar community.

Besides, the result of causality testing proved that cost perception had no significant effect on respondents' word-of-mouth. Better perception on healthcare costs brought less significant impact on the more positive word of mouth of families of mental disorder patients in

the Public Hospital within Ajatappareng Region. This finding was inconsistent with a finding of Lupiyoadi (2001:158) that customer satisfaction was generated with cost perception, instead of other four factors. Similarly, Chen *et al.*, (1993) stated that costs had a significant effect on relationship with customer satisfaction. They also argued that the satisfied customers tended to provide good reference of products to others; in turn, the customers constructed word-of-mouth recommendations.

In this study, cost perception did not have a significant effect on word of mouth because of two aspects. First, the families did not concern on the amount of hospital cost. They greatly concerned on the patients' best treatment assistance and immediate recovery. Second, the families focused more on social status due to the negative stigma on cheap cost meaning poor quality. Bugis Makassar communities were commonly reluctant to tell others about families treated in mental disorder hospital with cheap hospital costs. In brief, this related to the sense of family's prestige and social status.

Fifth, the result of causality test proved that satisfaction had a significant effect on word of mouth of family of mental disorder patients in the Public Hospital within Ajatappareng Region. This study also indicated that the higher satisfaction of patient families influenced the higher level of word of mouth. The descriptive result showed that satisfaction and word-of-mouth were equally classified as high. This study also indicated that the hospital tended to advance the patient family' satisfaction on its service quality in the purpose to establish their word of mouth to communities. In other words, the patient family's word of mouth was expected to be higher significantly by improving service conformity as the patients expect for. Thus, the research hypothesis indicating satisfaction affected word of mouth of family of mental disorder patients in the Public Hospital within Ajatappareng Region could be accepted.

Moreover, the result was consistent with Oliver (2007) illustrating satisfaction as an emotional notion affected the given services assessment. If the patient's family felt the service quality being given as they expected, then it would create a satisfaction. Thus, the patient families would say positive things about the hospital to others.

Accordingly, Oliver and Swan (1989) stated when consumers were satisfied, then a positive word-of-mouth could be created; in turn, the consumers would recommend other to buy. Similarly, when the patients or the patient families were satisfied with the hospital services, then they would give positive word of mouth and recommend others to visit the hospital. Conversely, when the patients and families were not satisfied, so they would command not to visit the hospital. In brief, this study concluded that satisfaction encourages the creation of word-of-mouth communication.

CONCLUSION

Healthcare service quality affects patient's family satisfaction, but does not affect word-of-mouth. The hospital should improve the quality of health service (healthcare service quality) especially on the tangible aspect, the supporting facilities in the clinic according to the needs of the patient should be adequate, the officer should be friendly and polite, and the condition of environmental cleanliness in the treatment room and waiting room is further improved.

Cost perception affects patient's family satisfaction and does not affect word-of-mouth. The hospital immediately fix the perception of the cost, especially with respect to the reliability of the costs agreed in the letter of agreement and no charges outside the contents of the letter agreement. Satisfaction affects the word-of-mouth of the patient's family. Increased patient satisfaction, especially in services that are more tailored to expectations, means that hospital management should research internally to the patient's family to inquire as to their expectations of how best to provide services. Improving the effectiveness of word-of-mouth, especially the willingness of the patient's family to invite other people whose family members also experience mental disorders.

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