

PURCHASING INTENTION OF CAMBODIAN CONSUMERS ON HEALTHCARE SERVICES IN THAILAND

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Abstract

Since there are demands for wellness and treatment, many countries have challenged each other to provide better healthcare to the patients without boundaries and without judging on races and nationalities. Therefore, Thailand has become one great destination for country such as Cambodia to come and get treatment. This research study is made to explore factor affecting purchasing intention of Cambodian consumers on healthcare services in Thailand. This study generated from survey conducted on 100 Cambodian patients who were receiving medical treatment from 5 different hospitals in Bangkok Thailand. To analyze the finding, the author used descriptive method, chi-square analysis, and data correlation to figure the relationship between each factor.

This research study received respond from almost equal amount of male and female. Most of the respondents are elderly adult who aged between 45 – 54 years, graduated from bachelor's degree, own business with mostly income range from USD 20,000 – USD 49,999 per annum, and living in provinces. The result of this study shall benefit student who want to gain knowledge; investor and entrepreneur who want to study before investing in these business; and government that want study proof for their development project on healthcare services in Thailand.

Keywords: Cambodian Consumers, healthcare services, purchasing intention

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Introduction and Investigating Constructs

There are necessities needs for every individual to fulfill their life include “psychological need”, “safety need”, “love/belonging need”, “esteem need”, and “self-actualization need” Maslow (1943).

Since the health care and medical treatment have been seemed to be preciously valuable and significantly priceless, there are people who are mostly senior people or those who reserve high position in a certain society purchase trip across the border in the purpose of seeking for medical treatment and related services. In addition, the term “medical tourist” start influencing and spread to the society for a few decades ago (Pikert, 2008).

After the recession period on 1997, the government of Thailand start promote spread medical services information to other country in order to back up the economy of the country which make the country reputation as the well-known destination for medical tourism especially in the beauty and cosmetic treatment, (Pikert, 2008).

Many Cambodia citizen seem to prefer Thailand which it comes to decision of choosing healthcare services. Since 2010, 3,837 Cambodian patients were spotted at the sampling hospital in Thailand and that numbers of patient present Cambodia in 9th rank among 14 other countries (Noree, Hanefeld & Smith (2016). The numbers of Cambodia presented and use Thailand medical services did not stopped there, yet, it even rose to 6,797 in 2013, followed by 12,660 in 2014, 24,857 in 2015, and 32,185 in 2016, according to the database provided by Ministry of Public Health Thailand (2017).

The perceived benefit is the accumulation of emotional benefit and functional benefit, which reflected as the result of attribution or purchase (Stanton *et al*, 2002).

Glynn Mangold and Faulds (2009), again, categorized Integrated Marketing Communication tools as; “traditional tools” and “internet-based promotional tools”, which “traditional tools” is referred to the approach where an organization figure out how to deliver the information about the company and its product to the public and produce awareness, also, get the audiences’ attention to the organization, while “internet-based promotional tools” is described as the indirect communication which the information is transmitted from one particular target to another and direct them to the organization when the information is appealing in their area of interest and concern

Therefore, this research study aims to figure out the relationship between demographic profile, perceived benefit (emotional benefit and functional benefit), and integrated marketing communication (offline channel and online channel) and purchasing intention of Cambodian consumers on healthcare services in Thailand. The conceptual framework of this study is showed in Figure 1.

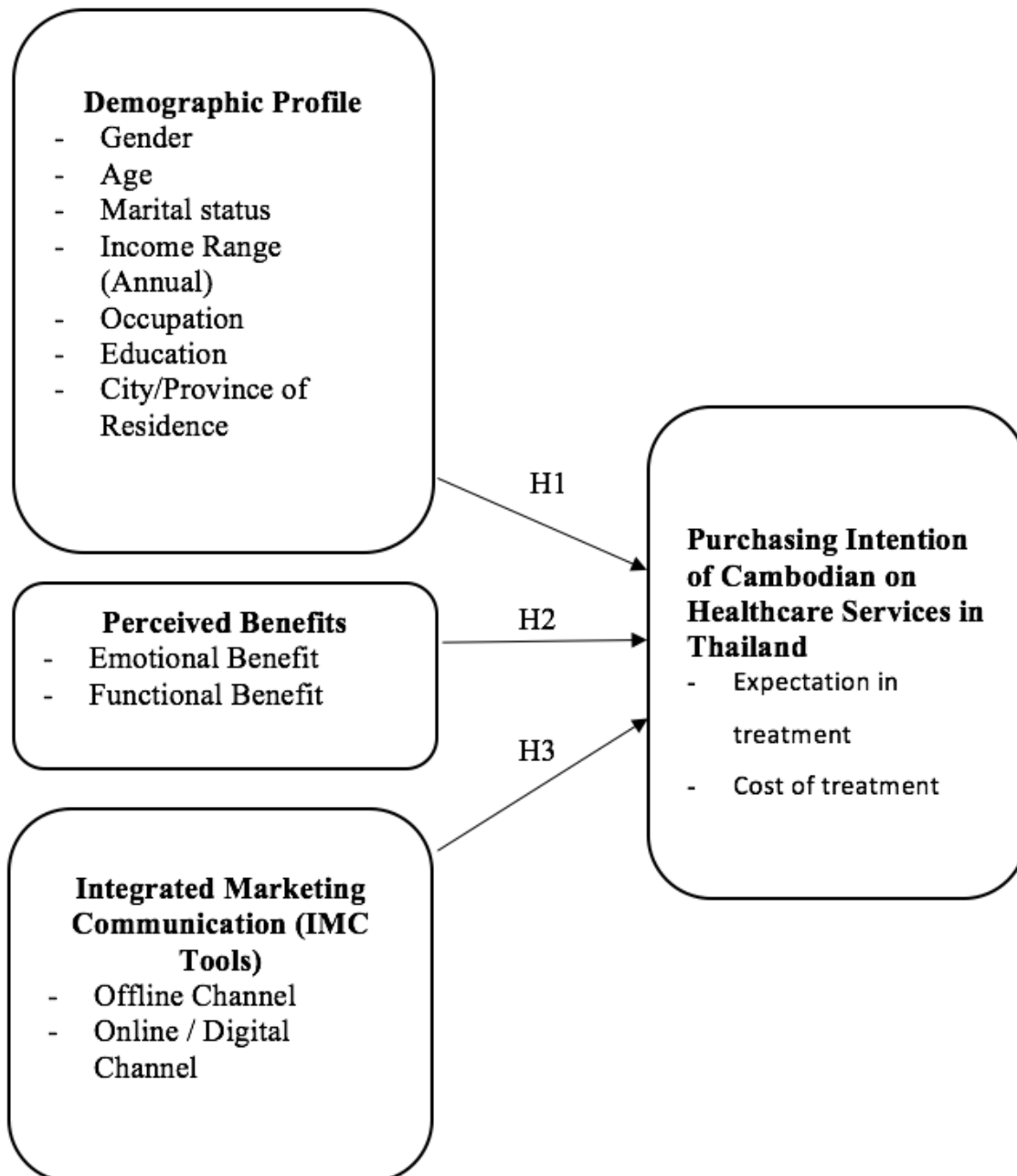


Figure 1 Conceptual Framework of the Study

Base on the relationship shown in the conceptual framework of the research study, the study hypotheses are:

- H1: Demographic profile will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.
- H2: Perceived benefit will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.
- H3: IMC tools will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.

Research Methodology

This research study discussed the relationship between demographic profile, perceived benefit, integrated marketing communication (IMC tools) and purchasing intention of Cambodian consumers on healthcare services in Thailand according to the following constructs:

1. Demographic profile: gender, age, marital status, income range (annual), Occupation, education, and city/province of resident
2. Perceived benefit: emotional benefit and functional benefit
3. Integrated marketing communication (IMC tools): online channel and offline channel
4. Purchasing intention: expectation in treatment and cost of treatment

This research study aims to collect data from the Cambodian patients who visit hospital in Thailand in order to receive medical check-up and treatment. There are 5 hospitals in Bangkok, Thailand which are selected to conduct the study. Those include Bangkok hospital, Phyathai 1 hospital, Phyathai 2 hospital, Phyathai 3 hospital, and Bumrongrad hospital. Due to the limitation of the study, the researcher collected need to specify the limited number of the respondents to collect data and analyze the data. Therefore, the researcher considered 100 respondents at minimum as a sample size.

In order to get equal respondents from the selected hospitals, the researcher equally separated the amount of questionnaire to the patient from Bangkok hospital, Phyathai 1 hospital, Phyathai 2 hospital, Phyathai 3 hospital, and Bumrongrad hospital. Quota sampling was adopted into this research study since the respondent can be managed for certain characteristics (Malhotra, 2017).

Table 1 Quota sampling method

Hospitals	Bangkok hospital	Phyathai 1 hospital	Phyathai 2 hospital	Phyathai 3 hospital	Bumrongrad hospital	Total
Amounts	20	20	20	20	20	100

In order to measure each variable, the researcher include the following item in each questionnaire section such as; Part I: demographic profile included gender, age, marital status, income range (annual), Occupation, education, and city/province of resident; part II: Perceived benefit included emotional benefit and functional benefit; part III: Integrated marketing communication (IMC tools) included online channel and offline channel, and part IV: Purchasing intention included expectation in treatment and cost of treatment.

There were 110 questionnaires delivered and collected. The data was screened for normal distribution which could be assumed for the Skewness value range of -1 to +1 and the Kurtosis value range of -2 to +2 (Tabachnick & Fidell, 2001). There were 10 sets of questionnaires were found to be faulty, so these were withdrawn from the analysis. Therefore, there were 100 responses remain for the data analysis.

Data Analysis

Each variable was elaborated using descriptive statistic method to identify mean, frequency, percentage, and standard deviation to find descriptive result. To test relationship of each hypothesis, the researcher used chi-square test (X^2 test) and data correlation.

Research Findings

The data screening process showed the symmetrical distribution of the data collection. Then, the further process would be about analyzing the data and figuring out the factors affecting purchasing intention of Cambodian Consumers on healthcare services in Thailand.

Result of Demographic Profile

The number of male participated in this study is 51% compare to female 49%. There are 5 group of people which are under 18 years old (1%), 18 to 24 years old (10%), 25 to 34 years old (20%), 35 to 44 years old (25%), 45 to 54(26%), 55 to 64 years old (11%), and over 65 years old (7%). Also, 44% of the participants are single while 56% other are in relationship. There are 29% of the participants who earn more than USD 50,000 annually, 40% which can earn in between USD 20,000 – USD 49,999, and the rest of 31% earn less than USD 19,999 per year. Most of the participant are business owner (33%), follow by governor position (31%), Office staff (21%), Professor (14%), and other (1%). The majority of the participant certified with bachelor's degree (39%), follow by high school graduate (26%), Master's degree level (18%), other specialty (10%), and PhD (7%). Most of the participant are from Phnom Penh (26%), the capital city of Cambodia, followed by patients from Kampong Chhnang (11%), Preah Vihear (7%), Siem Reap (6%), Sihanouk Ville (6%), Kampong Cham (5%), Banteay Meanchey (5%), Kratie (5%), Kampot (5%), Kampong Thom (4%), Kep (4%), Pursat (3%), Koh Kong (3%), Rattanakiri (3%), Kampong Speu (2%), Kandal (2%), Svay Rieng (2%), and Battambang (1%).

Result of Perceived Benefit

The study showed that the majority of the respondents agreed with the interaction between doctor and patient in hospital in Bangkok (Mean = 4.10), the positivity and hopefulness of the doctors and nurses from hospital in Bangkok (Mean = 4.10), the encouragement of the doctors and nurses from hospital in Bangkok (Mean = 4.20), and the special treat from doctor in hospital in Bangkok (E.g. the message from doctor asking about the patients' health after treatment and return home) (Mean = 4.00). while the respondents strongly agree with the state of trustfulness in associate with the profession of doctors and nurses from hospital in Bangkok (Mean = 4.30), and using medical services provided by hospital in Bangkok because my family always perform medical services in hospital in Bangkok (Mean = 4.80).

Furthermore, the majority of the respondents agreed with the technologies that implemented in the hospital in Bangkok (Mean = 3.90), the amount of payment (Mean = 3.60), fee structure set by hospital in Bangkok (Mean = 3.80), the accommodation provided by hospital in Bangkok (Mean = 4.10), the hygiene conduct throughout the whole medical service process in hospital in Bangkok (Mean = 4.00), and the ethical code of conduct of hospital in Bangkok (e.g. not accept tip, equality in serving each patient) (Mean = 4.10). While the respondents strongly agree with the hospitality of hospital service in Bangkok (Mean = 4.30), and the procedures, processes, and methods conduct by doctor and specialist in hospital in Bangkok to investigate and analyze the illnesses (Mean = 4.30).

Result of Integrated Communication Channel (IMC tools)

According to the majority of the respondent felt neutral with friend's recommendation (Mean = 3.20), satisfying with the cost structure (Mean = 3.20), flyer in Cambodia (Mean = 2.80), and the advertisement in newspaper (Mean = 2.80), while the respondent agree that they come because of the recommendation from the hospital in Cambodia

(Mean = 3.70), the recommendation from the branch of hospital in Bangkok in Cambodia (Mean = 3.50), the frequent of visiting Thailand (Mean = 4.20), and family's encouragement (Mean = 3.80), also the respondent disagreed that they come because they has a friend working in hospital in Bangkok (Mean = 2.20), received incentive from workplace (Mean = 2.60).

Moreover, the majority of the respondent agree that they come to hospital in Bangkok because of the website of hospital in Bangkok (Mean = 3.60), while they felt neutral that they come because of the advertising in the social network (Mean = 3.20), the promotional package (Mean = 2.80), doing a research and received suggestion (Mean = 3.10), suggestion on blog (Mean = 2.70).

Result of Hypothesis Tests

H1: Demographic profile will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.

The study found that there was a partial relationship between demographic profile and purchasing intention on healthcare services in Thailand. The majority of respondents were found to consider “family check-up package”, “visiting mail after surgery” and “free accommodation” when purchasing healthcare services in Thailand.

H2: Perceived benefit will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.

The study found that there was a partial relationship between perceived benefit and purchasing intention on healthcare services in Thailand. The study showed that the majority of respondent agree that emotional benefit and functional benefit do effect the intention of Cambodian to purchase healthcare services in Thailand in both expectation in treatment and cost of treatment.

H3: IMC tools will affect on Cambodian Purchasing Intention on Healthcare Services in Thailand.

The study found that there was a partial relationship between integrated marketing communication (IMC tools) and purchasing intention on healthcare services in Thailand. The study showed the majority of respondent agree that offline channel and online channel do effect the intention of Cambodian to purchase healthcare services in Thailand in term of expectation in treatment and cost of treatment.

Conclusion and Recommendations

In this research study, the author aims to clarify if demographic profile, perceived benefit, and integrated marketing communication (IMC tools) has effect on Cambodian purchasing intention on healthcare service in Thailand. The result has showed as follows:

The research study has showed there is a partial relationship between demographic profile and purchasing intention. The study showed that different marital status, income level (annual), and occupation has no relationship to purchasing intention except gender, age, highest

qualification level, and current living area has highly agreed with their purchasing intention over healthcare in Thailand.

Based on the study of hypothesis 2 in this study, there is partial support for significant relationship between perceived benefit and purchasing intention when it comes to purchasing medical treatment service, which is found to be similar to the study of Ying-Feng (2009), and Tung-Zong (1994).

According to the study, the finding in the research has showed that there is partial support for significant relationship between integrated marketing communication and purchasing intention when it comes to purchasing medical treatment service which is similar previous author finding such as Endang (2017) and Jaideawsangwan (2018) that has figured out that there is a significant relationship between integrated marketing communication and purchasing intention.

All in all, the finding of this study has showed there are varieties within demographic profile of the respondent such as gender, age, marital status, income level (annual), occupation, highest qualification level, and current living area are likely to be varied in “sophisticated technology in surgery”, “sophisticated technology in check-up”, “staff treat like family member”, “use USA standard”, “use France standard”, “send visit mail, family check-up package”, “free accommodation”, “USD 1,000 check-up package”, “USD 2,000 check-up package”, “USD 3,000 check-up package”, “USD 50,000 for surgery and guarantee fast recovery”. There also found that there is no relationship between perceived benefit, integrated marketing communication, and purchasing intention at the significant level of 0.05.

Implication of the Study

According to the conducted research study, most of the respondents age between 45 and 54 years old and finished bachelor’s degree, own businesses, earn around USD 20,000 to USD 49,999 per year, and most are from the provinces. According to this result, Cambodian who are be able to travel for medical treatment in Bangkok, Thailand are elderly adult who are in middle-class and high-class income with high education background such as bachelor’s degree.

In educational sector, this study may reflect on people understanding of the reasons that Cambodian decide to come far from home for better healthcare service in Bangkok, Thailand. For lecturer, this can be a supportive instance on lecturing for cross-border healthcare commerce.

As entrepreneurial sector, people may use this research study to support the study of enhance alliances with healthcare service outside and inside Cambodia in order to fulfil the patient’s willingness.

For government sector, this study may help to understand whether what part of problem or lacking in healthcare quality that the government should patch.

Recommendation for Future Study

In the process of conducting this research study, there are multiple limitations which being obstacles for researcher. These limitations have left spaces for future researcher as following:

This research conducted only on 100 patients from 5 hospitals such as Bangkok hospital, Phyathai 1, Phyathai 2, Phyathai 3, and Bumrongrad hospital in Bangkok, Thailand. The suggestion for the greater and clearer result may would suggest the future researcher to extend the area to research since there are many more hospitals and clinics across Bangkok and other provinces in Thailand where there are many more Cambodians and other nationalities gathering for healthcare and treatment.

Furthermore, the future researcher may would like enlarge the scale of data collection for more respondents since there are many other Cambodian patients and other nationalities who are receiving medical treatment in Thailand.

The future researcher may need to explore other factors that may interfere with purchasing intention such as perceived risks, satisfaction, and purchasing behavior so the further research can be deem as guideline and resources in medical treatment and hospitalization industry.

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