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The Influence of Service Marketing Mix on Patient Visit Intentions at Multazam Hospital

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Abstract

This study examines the associations between six service marketing mix dimensions and patient visit intention at Multazam Hospital, Gorontalo, Indonesia. While previous studies have explored marketing mix strategies in healthcare, evidence regarding the relative contributions of individual service dimensions in private hospital settings remains important. This study employed a quantitative approach involving 175 respondents who received healthcare services at Multazam Hospital. Data were analyzed using multiple linear regression, supported by validity, reliability, and regression assumption testing. The findings revealed that product ($\beta = 0.165$; $p = 0.033$), people ($\beta = 0.360$; $p < 0.001$), and process ($\beta = 0.292$; $p < 0.001$) were positively and significantly associated with patient visit intention. Conversely, physical evidence, place, and promotion showed no statistically significant associations. The overall regression model was significant ($F = 40.201$; $p < 0.001$), explaining 58.9% of the variation in patient visit intention ($R^2 = 0.589$). People exhibited the largest standardized coefficient, followed by process and product. These findings contribute context-specific evidence that patient-facing service dimensions are particularly relevant to visit intention, providing practical insights for hospital marketing management.

Keywords: ***Hospital Marketing; Marketing Mix; Patient Visit Intention; Healthcare Services; Service Quality.***

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INTRODUCTION

The increasing complexity of healthcare services has made hospital marketing an important component of healthcare management. Hospitals are evaluated not only through medical treatment but also through service accessibility, professional interactions, administrative efficiency, and overall patient experiences. Within this context, the service marketing mix provides a framework for understanding how organizational attributes relate to patients' behavioral intentions. The traditional marketing mix comprises seven dimensions: product, price, place, promotion, people, process, and physical evidence. Alfani et al. (2023) highlighted the relevance of these dimensions to patients' decisions when selecting healthcare services, while Permatasari et al. (2026) emphasized their integration into hospital marketing strategies. Similarly, Berlianto (2024) demonstrated that marketing mix dimensions were associated with patient loyalty through satisfaction, suggesting that both tangible and experiential service attributes are relevant to healthcare marketing.

Previous studies have reported varying relationships between marketing mix dimensions and patient behavior. Prianugraha et al. (2024) identified differences in the significance of individual marketing dimensions across healthcare institutions, indicating that their associations may depend on organizational characteristics. Zebua et al. (2024) demonstrated relationships between marketing mix, patient experience, satisfaction, and loyalty, while Putri et al. (2025) highlighted the importance of service quality and patient evaluations in understanding revisit intention. In Gorontalo, Ayuba et al. (2022) reported a significant relationship between hospital marketing strategies and patient visit interest. Furthermore, Sako and Lababa (2022) identified challenges in implementing patient care procedures, emphasizing the importance of operational processes in healthcare delivery. These findings indicate that marketing dimensions may exhibit different relationships with patient-related outcomes across hospital settings.

The relevance of these issues is particularly evident at Multazam Hospital, Gorontalo, Indonesia. Institutional records indicate that patient visits increased from 1,197 in 2021 to 1,498 in 2022 and 1,663 in 2023, before declining to 1,422 in 2024 and increasing substantially to 8,816 in 2025. These fluctuations, alongside reported developments in specialist services, highlight the importance of understanding patients' evaluations of hospital services. However, changes in visit volumes cannot be attributed directly to marketing activities without considering other organizational and contextual factors. Research conducted at the same hospital by Muh. Akmar M. et al. (2026) examined relationships among service quality, hospital image, patient satisfaction, and loyalty. Although relevant, that study did not specifically examine

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the individual associations between service marketing mix dimensions and patient visit intention.

A synthesis of previous research identifies several gaps. First, the statistical significance of individual marketing mix dimensions has varied across healthcare settings (Alfani et al., 2023; Berlianto, 2024; Prianugraha et al., 2024). Second, previous investigations have predominantly emphasized patient satisfaction, loyalty, service selection, and revisit intention, although these outcomes differ conceptually from patient visit intention (Zebua et al., 2024; Putri et al., 2025). Third, regional studies examining hospital marketing, procedural implementation, and patient loyalty have not fully addressed the simultaneous and adjusted individual associations of six marketing mix dimensions with patient visit intention at Multazam Hospital (Ayuba et al., 2022; Sako & Lababa, 2022; Muh. Akmar M. et al., 2026). These limitations indicate the need for context-specific empirical evidence concerning the differentiated relevance of service marketing dimensions.

To address these gaps, the present study examines six service marketing mix dimensions: product, physical evidence, place, promotion, people, and process. The price dimension is excluded in accordance with the operational scope of the original research. The novelty of this study lies in examining the differentiated statistical associations of six service marketing mix dimensions with patient visit intention within a private hospital in Gorontalo. By evaluating these dimensions simultaneously, the study provides evidence regarding their relative explanatory contributions after adjustment for other variables. This approach offers a more specific understanding of service marketing relationships than examining the marketing mix solely as an aggregate construct.

Accordingly, this study aims to analyze the individual and simultaneous associations between product, physical evidence, place, promotion, people, and process and patient visit intention at Multazam Hospital, Gorontalo. The findings are expected to contribute to the application of the service marketing mix framework in private healthcare management and provide practical considerations for improving healthcare personnel management, service delivery processes, and hospital marketing strategies. Given the cross-sectional research design, the findings are interpreted as statistical associations rather than causal effects.

LITERATURE REVIEW

Service Marketing Mix in Hospital Management

The service marketing mix is an integrated framework comprising seven dimensions: product, price, place, promotion, people, process, and physical evidence. In healthcare management, these dimensions represent organizational

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attributes that may shape patients' evaluations and behavioral intentions. Alfani et al. (2023) demonstrated the relevance of marketing mix dimensions to patients' hospital selection decisions, while Permatasari et al. (2026) emphasized their integration into hospital marketing strategies. However, their statistical associations with patient behavior may vary across healthcare institutions. Prianugraha et al. (2024) reported differences in the significance of individual marketing dimensions across healthcare settings, while Berlianto (2024) identified relationships involving marketing mix dimensions, patient satisfaction, and loyalty. The present study examines six dimensions, excluding price in accordance with the original research scope.

Patient Visit Intention

Patient visit intention refers to an individual's willingness to select or utilize healthcare services at a particular institution. According to Ajzen (1991), behavioral intention reflects an individual's motivational readiness to perform a behavior, although actual behavior may also depend on other factors. Within healthcare services, visit intention is related to patients' evaluations of service quality, institutional reliability, and previous service experiences. Putri et al. (2025) demonstrated relationships between service evaluations and revisit intention, while Zebua et al. (2024) examined the associations among marketing mix, patient experience, satisfaction, and loyalty. Similarly, Muh. Akmar M. et al. (2026) investigated service quality, hospital image, satisfaction, and loyalty at Multazam Hospital. Nevertheless, patient satisfaction, loyalty, and visit intention remain conceptually distinct outcomes.

Product and Patient Visit Intention

Product refers to healthcare services offered by hospitals, including medical treatment, specialist services, diagnostic facilities, and supporting clinical services. Patients may consider the availability and suitability of these services when selecting a healthcare institution. Alfani et al. (2023) and Permatasari et al. (2026) highlighted the importance of healthcare service offerings within hospital marketing strategies. Accordingly, the following hypothesis is proposed:

H1: Product is significantly associated with patient visit intention at Multazam Hospital.

Physical Evidence and Patient Visit Intention

Physical evidence represents tangible hospital attributes, including cleanliness, building conditions, waiting areas, medical equipment, and supporting facilities. These characteristics may influence patients' perceptions of comfort, professionalism, and institutional reliability. Berlianto (2024) identified relationships

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involving physical evidence, patient satisfaction, and loyalty. However, its independent association with visit intention requires further examination.

H2: *Physical evidence is significantly associated with patient visit intention at Multazam Hospital*.

Place and Patient Visit Intention

Place refers to the accessibility of healthcare services, including hospital location, transportation availability, parking facilities, and ease of reaching service units. Accessibility may influence hospital selection, although patients may prioritize specialist availability or service quality over geographical convenience. Prianugraha et al. (2024) demonstrated that the relevance of marketing dimensions varies across healthcare institutions, supporting the need to examine place within the present research context.

H3: Place is significantly associated with patient visit intention at Multazam Hospital.

Promotion and Patient Visit Intention

Promotion encompasses hospital communication activities, including social media, health education, service announcements, and community outreach. Effective promotional communication may strengthen patients' awareness of healthcare services. Berlianto (2024) identified relationships involving promotion and patient-related outcomes, while Ayuba et al. (2022) demonstrated the relevance of hospital marketing strategies to patient visit interest in Gorontalo. Nevertheless, the independent relationship between promotion and visit intention requires empirical assessment.

H4: Promotion is significantly associated with patient visit intention at Multazam Hospital.

People and Patient Visit Intention

People refers to healthcare professionals and supporting personnel involved in hospital service delivery. Their professionalism, responsiveness, communication, and interpersonal interactions may contribute to patients' evaluations of healthcare services. Muh. Akmar M. et al. (2026) highlighted the relevance of service quality and satisfaction to patient loyalty at Multazam Hospital, while Zebua et al. (2024) demonstrated relationships involving patient experience and loyalty. These findings support examining healthcare personnel as a distinct service marketing dimension.

H5: People is significantly associated with patient visit intention at Multazam Hospital.

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Process and Patient Visit Intention

Process encompasses hospital registration, administrative procedures, waiting arrangements, service coordination, and healthcare delivery mechanisms. Clear and efficient procedures may contribute to more favorable patient experiences. Sako and Lababa (2022) highlighted challenges in implementing patient care procedures, while Berlianto (2024) identified relationships involving service processes and patient-related outcomes. These findings provide a basis for examining the relationship between service processes and patient visit intention.

H6: Process is significantly associated with patient visit intention at Multazam Hospital.

Integrated Marketing Mix Framework

The six marketing mix dimensions represent interconnected organizational attributes that may be associated with patient visit intention. Previous research has demonstrated the relevance of integrated marketing strategies to hospital selection and visit interest (Alfani et al., 2023; Ayuba et al., 2022). However, differences across healthcare settings indicate the need to evaluate both individual dimensions and their simultaneous statistical associations. Accordingly, the following hypothesis is proposed:

H7: Product, physical evidence, place, promotion, people, and process are jointly associated with patient visit intention at Multazam Hospital.

This framework provides the theoretical foundation for assessing the individual and simultaneous associations between service marketing mix dimensions and patient visit intention using multiple linear regression analysis.

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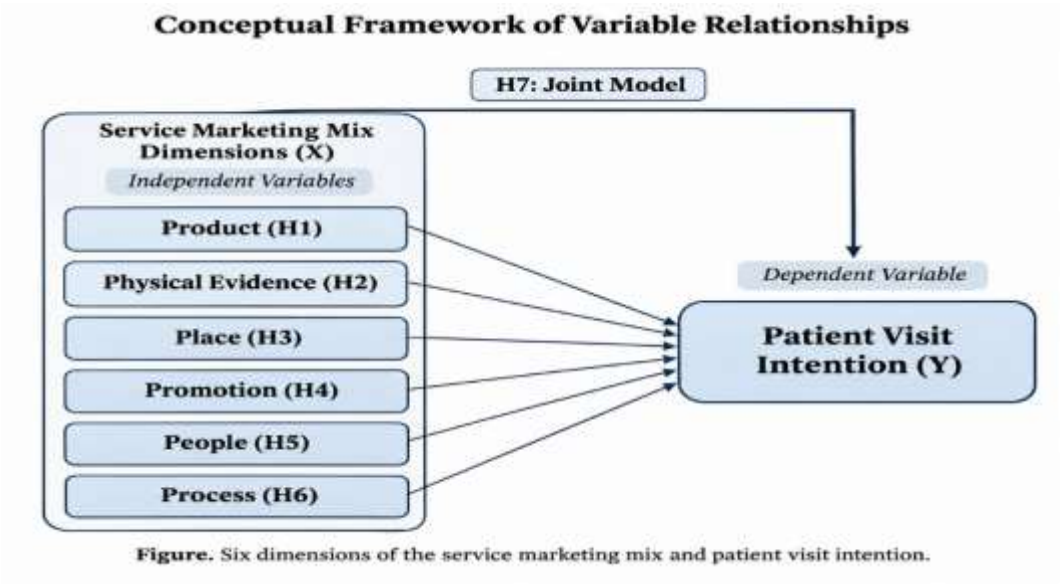


Figure. Six dimensions of the service marketing mix and patient visit intention.

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RESEARCH METHOD

Research Design

This study employed a quantitative analytical approach using a cross-sectional design. The design was selected because it enabled the examination of the associations between the dimensions of the service marketing mix and patient visit intentions within a single period of observation. In line with the research objective, the study did not seek to establish causal relationships, but rather to assess the individual and simultaneous statistical associations between the independent variables and the dependent variable.

Research Setting and Time

The study was conducted at Multazam Hospital, Gorontalo, Indonesia. Data collection took place from June to July 2026. This setting was selected because Multazam Hospital represents a private healthcare institution experiencing changes in service development and patient visit patterns, thereby providing a relevant context for examining patient evaluations of service marketing dimensions.

Population and Sample

The population of this study comprised patients receiving services at Multazam Hospital. The sample size was determined based on the indicator-based approach adopted in the original research design, namely five respondents for each measurement indicator. With 35 indicators used in the instrument, the resulting sample size was 175 respondents. Accordingly, the study involved 175 patients as respondents. This sample size was considered sufficient to support the intended statistical analysis using multiple linear regression.

Research Variables

This study consisted of one dependent variable and six independent variables.

The dependent variable was *patient visit intention (Y)*, which refers to the patient's reported willingness or tendency to choose, revisit, and utilize healthcare services at Multazam Hospital.

The independent variables consisted of six dimensions of the service marketing mix, namely:

1. **Product (X1)**, referring to the quality, completeness, and suitability of healthcare services provided by the hospital.
2. **Physical Evidence (X2)**, referring to the tangible aspects of the hospital environment, including facilities, cleanliness, and comfort.

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3. **Place (X3)**, referring to the accessibility and location-related aspects of the hospital.
4. **Promotion (X4)**, referring to communication and information activities undertaken by the hospital to introduce its services.
5. **People (X5)**, referring to the competence, responsiveness, communication, and professionalism of healthcare and administrative personnel.
6. **Process (X6)**, referring to the procedures, administrative flow, and service delivery mechanisms experienced by patients.

Data Collection Technique and Instrument

The study used primary and supporting data sources. Primary data were collected through a structured questionnaire administered to respondents. Supporting data were obtained through observation and documentation. The questionnaire was developed using a Likert scale to measure respondents' perceptions of each variable. The instrument consisted of 35 statement items distributed across the six independent variables and the dependent variable. The operational indicators reflected the conceptual dimensions of service marketing and patient visit intention as defined in the study framework.

Instrument Validity and Reliability

Before conducting the main analysis, the research instrument was tested for validity and reliability. Item validity was assessed using product-moment correlation, comparing each item correlation coefficient with the relevant critical value. Items meeting the validity threshold were retained for analysis. Reliability was evaluated using Cronbach's alpha. The reported reliability coefficients were 0.680 for product, 0.704 for physical evidence, 0.738 for place, 0.680 for promotion, 0.734 for people, 0.735 for process, and 0.781 for patient visit intention. Because all coefficients exceeded the minimum threshold of 0.60, the instrument was considered sufficiently reliable for use in the study.

Data Analysis Technique

Data were analyzed quantitatively using IBM SPSS Statistics version 22. The analytical procedure consisted of descriptive and inferential stages. Descriptive analysis was used to summarize respondent characteristics and to describe respondents' perceptions of each research variable. Inferential analysis was then conducted using multiple linear regression to examine the relationships between the six dimensions of the service marketing mix and patient visit intention. The regression model used in this study can be expressed as follows:

$$Y = \alpha + \beta 1X1 + \beta 2X2 + \beta 3X3 + \beta 4X4 + \beta 5X5 + \beta 6X6 + \varepsilon$$

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where:

- Y = patient visit intention
- α = constant
- β1–β6 = regression coefficients
- X1 = product
- X2 = physical evidence
- X3 = place
- X4 = promotion
- X5 = people
- X6 = process
- ε = error term

To test the hypotheses, the study employed:

1. t-test, to assess the individual association of each independent variable with patient visit intention.
2. F-test, to assess the simultaneous association of all independent variables with patient visit intention.
3. Coefficient of determination (R^2), to assess the proportion of variation in patient visit intention explained by the regression model.

All statistical tests were interpreted using a significance level of 5% (α = 0.05).

Ethical and Analytical Considerations

The data used in this study were obtained from respondents within the hospital service context and were analyzed in aggregate form for academic purposes. The findings are interpreted as statistical associations within a cross-sectional framework. Therefore, the results should not be understood as evidence of direct causality, but rather as empirical indications of how the examined service marketing dimensions are related to patient visit intention within the setting of Multazam Hospital.

RESULTS

Respondent Characteristics

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The study involved 175 respondents who received healthcare services at Multazam Hospital, Gorontalo. Respondent characteristics were examined based on gender, age, and educational attainment to provide an overview of the demographic composition of the study sample.

Table 1. Demographic Characteristics of Respondents (N = 175)

Characteristic	Frequency (n)	Percentage (%)
Gender		
Male	64	36.6
Female	111	63.4
Age		
Under 20 years	7	4.0
20 years	8	4.6
21–30 years	103	58.9
31–40 years	33	18.9
Over 40 years	24	13.7
Educational attainment		
Elementary school	4	2.3
Junior high school	12	6.9
Senior high school	82	46.9
Undergraduate degree	77	44.0

Source: Primary data analysis (2026).

As presented in Table 1, female respondents constituted the majority of the sample, accounting for 63.4%, whereas male respondents represented 36.6%. Regarding age distribution, the largest proportion of respondents belonged to the 21–30-year age group (58.9%), followed by those aged 31–40 years (18.9%) and respondents older than 40 years (13.7%). Participants younger than 21 years collectively accounted for a relatively small proportion of the sample.

In terms of educational attainment, respondents with senior high school qualifications represented 46.9%, followed by undergraduate degree holders at 44.0%. The remaining respondents had completed junior high school (6.9%) or

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elementary school (2.3%). These findings indicate that the sample was predominantly composed of younger adults with secondary or undergraduate education.

Instrument Validity and Reliability

Instrument evaluation was conducted to assess the measurement characteristics of the questionnaire. The original validity assessment used item-total correlations, whereas internal consistency was examined using Cronbach's alpha coefficients. The validity analysis indicated that the reported item correlation coefficients exceeded the critical correlation value of 0.148. The observed correlations ranged from 0.295 to 0.683 for product, 0.340 to 0.629 for physical evidence, 0.474 to 0.585 for place, 0.408 to 0.616 for promotion, 0.461 to 0.658 for people, 0.395 to 0.623 for process, and 0.438 to 0.730 for patient visit intention. The reliability results are presented in Table 2.

Table 2. Internal Consistency of Research Variables

Variable	**Cronbach's Alpha**
Product (X1)	0.680
Physical Evidence (X2)	0.704
Place (X3)	0.738
Promotion (X4)	0.680
People (X5)	0.734
Process (X6)	0.735
Patient Visit Intention (Y)	0.781

Source: Primary data analysis (2026).

As shown in Table 2, Cronbach's alpha coefficients ranged from 0.680 to 0.781. The highest internal consistency coefficient was observed for patient visit intention (α = 0.781), followed by place (α = 0.738), process (α = 0.735), and people (α = 0.734). Product and promotion recorded the lowest coefficients, each with an alpha value of 0.680. Although these coefficients exceeded the minimum threshold of 0.60 adopted in the original research, they indicate comparatively modest internal consistency. The overall results suggest that the measurement scales demonstrated varying but generally acceptable levels of internal consistency under the study's adopted criterion.

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Assessment of Regression Assumptions

Before estimating the multiple linear regression model, the original analysis assessed residual normality, multicollinearity, and heteroscedasticity. Residual normality was examined visually using a histogram and a normal probability plot. The histogram was interpreted as displaying an approximately bell-shaped distribution, while the probability plot indicated that the observed points generally followed the diagonal reference line. These visual observations did not reveal substantial departures from the normality assumption.

Multicollinearity was evaluated through tolerance and variance inflation factor (VIF) values. The results are summarized in Table 3.

Table 3. Multicollinearity Assessment

Independent variable	Tolerance	VIF
Product	0.412	2.426
Physical Evidence	0.489	2.045
Place	0.367	2.724
Promotion	0.473	2.115
People	0.324	3.089
Process	0.361	2.772

Source: Primary data analysis (2026).

All tolerance values exceeded 0.10, ranging from 0.324 to 0.489. Similarly, the VIF values ranged from 2.045 to 3.089, remaining below the conventional threshold of 10 adopted in the original analysis.

These findings indicate that the model did not exhibit severe multicollinearity according to the specified diagnostic criteria. Nevertheless, the VIF values suggest some correlation among the explanatory dimensions, which is relevant when interpreting their adjusted regression coefficients. Heteroscedasticity was evaluated visually through a residual scatterplot. The original analysis reported that residual points were distributed without an evident funnel-shaped or systematic pattern. On this basis, no pronounced heteroscedasticity pattern was identified through visual inspection. Collectively, the reported diagnostic findings did not indicate major violations of the regression assumptions under the assessment procedures employed in the study.

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Multiple Linear Regression Analysis

Multiple linear regression was employed to examine the individual associations between six service marketing mix dimensions and patient visit intention. The regression results are presented in Table 4.

Table 4. Multiple Linear Regression Results

Variable	B	Standard Error	Standardized β	t	p-value
Constant	3.392	2.720	—	1.247	0.214
Product (X1)	0.177	0.083	0.165	2.145	0.033
Physical Evidence (X2)	0.051	0.066	0.055	0.776	0.439
Place (X3)	-0.054	0.083	-0.053	-0.652	0.516
Promotion (X4)	0.061	0.075	0.059	0.815	0.417
People (X5)	0.376	0.091	0.360	4.147	< 0.001
Process (X6)	0.313	0.088	0.292	3.552	< 0.001

Source: Primary data analysis (2026).

Based on the unstandardized coefficients, the estimated regression equation is:

$$Y = 3.392 + 0.177X1 + 0.051X2 - 0.054X3 + 0.061X4 + 0.376X5 + 0.313X6 + \varepsilon$$

The regression results indicated that product, people, and process were positively and significantly associated with patient visit intention after adjustment for the remaining explanatory variables.

Product demonstrated a positive regression coefficient (B = 0.177; β = 0.165; p = 0.033). People also exhibited a positive and statistically significant coefficient (B = 0.376; β = 0.360; p < 0.001), as did process (B = 0.313; β = 0.292; p < 0.001). In contrast, physical evidence (B = 0.051; p = 0.439) and promotion (B = 0.061; p = 0.417) exhibited positive but statistically non-significant coefficients. Place demonstrated a negative coefficient (B = -0.054; p = 0.516), which was likewise statistically non-significant.

Comparison of standardized regression coefficients showed that people had the largest positive coefficient (β = 0.360), followed by process (β = 0.292) and product (β = 0.165). These values describe the relative magnitudes of the estimated standardized coefficients within the fitted model. They do not, however, establish that the coefficients differ significantly from one another.

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Coefficient of Determination

The explanatory performance of the regression model was evaluated using the multiple correlation coefficient, coefficient of determination, adjusted coefficient of determination, and standard error of the estimate.

Table 5. Multiple Regression Model Summary

Model statistic	Value
Multiple correlation coefficient (R)	0.768
Coefficient of determination (R^2)	0.589
Adjusted R^2	0.575
Standard error of the estimate	1.895

Source: Primary data analysis (2026).

As presented in Table 5, the regression model produced an R^2 value of 0.589, indicating that the six service marketing mix dimensions collectively accounted for approximately 58.9% of the observed variation in patient visit intention.

The adjusted R^2 was 0.575, indicating that the model explained approximately 57.5% of the variation after adjustment for the number of explanatory variables and sample size. The multiple correlation coefficient was 0.768, while the standard error of the estimate was 1.895. The proportion of unexplained variation was approximately 41.1%, indicating that the specified regression model did not account for all variation in patient visit intention.

Simultaneous Regression Significance

The overall statistical significance of the regression model was evaluated using analysis of variance (ANOVA).

Table 6. ANOVA Results for the Multiple Regression Model

Source	Sum of Squares	df	Mean Square	F
Regression	866.571	6	144.429	40.201
Residual	603.566	168	3.593	
Total	1470.137	174		

Source: Primary data analysis (2026).

The ANOVA results demonstrated that the overall regression model was statistically significant, $F(6, 168) = 40.201$, $p < 0.001$.

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Accordingly, the null hypothesis that all six population regression coefficients were simultaneously equal to zero was rejected. This finding indicates that the set of service marketing mix dimensions was jointly associated with patient visit intention. Nevertheless, the significant overall F-test does not imply that every individual marketing dimension was statistically significant. The individual regression coefficients must therefore be interpreted alongside the partial significance tests.

Hypothesis Testing Results

The research hypotheses were evaluated using the individual t-tests and the simultaneous F-test at a significance level of 0.05.

Table 7. Summary of Hypothesis Testing

Hypothesis	Relationship examined	p-value	Decision
H1	Product and patient visit intention	0.033	Supported
H2	Physical evidence and patient visit intention	0.439	Not supported
H3	Place and patient visit intention	0.516	Not supported
H4	Promotion and patient visit intention	0.417	Not supported
H5	People and patient visit intention	< 0.001	Supported
H6	Process and patient visit intention	< 0.001	Supported
H7	Joint association of the six marketing mix dimensions with patient visit intention	< 0.001	Supported

Source: Primary data analysis (2026).

As shown in Table 7, four of the seven research hypotheses were supported by the reported statistical results. At the individual level, H1, H5, and H6 were supported, indicating statistically significant positive associations of product, people, and process with patient visit intention. Conversely, H2, H3, and H4 were not supported because physical evidence, place, and promotion did not exhibit statistically significant adjusted associations. At the model level, H7 was supported,

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demonstrating that the six marketing mix dimensions were jointly associated with patient visit intention.

Summary of Empirical Findings

The empirical findings reveal a differentiated pattern of associations between the six service marketing mix dimensions and patient visit intention. Although the overall regression model was statistically significant and explained 58.9% of the observed variation in the dependent variable, only product, people, and process exhibited statistically significant individual associations. People recorded the largest standardized coefficient, followed by process and product. Physical evidence, place, and promotion did not exhibit statistically significant coefficients after accounting for the remaining explanatory dimensions.

These findings provide the empirical basis for the subsequent discussion concerning the differentiated relevance of service marketing dimensions in private hospital management. In particular, the results permit an examination of why patient-facing service attributes may display different adjusted associations with visit intention than physical, geographical, and promotional dimensions. Such interpretations are developed in the following discussion section without extending the statistical findings beyond the evidence available from the cross-sectional analysis.

DISCUSSION

The Differentiated Role of the Service Marketing Mix

The findings demonstrate that the six service marketing mix dimensions were jointly associated with patient visit intention at Multazam Hospital, Gorontalo (R^2 = 0.589; F = 40.201; $p < 0.001$). However, only product, people, and process showed statistically significant positive associations, while physical evidence, place, and promotion were not significant. These findings indicate that the overall significance of the marketing mix does not necessarily reflect equal contributions from its individual dimensions. The results are consistent with Alfani et al. (2023) and Ayuba et al. (2022), who demonstrated the relevance of marketing strategies to hospital selection and patient visit interest. Similarly, Prianugraha et al. (2024) identified variations in the significance of marketing mix dimensions across healthcare institutions. The present study extends these findings by examining the adjusted associations of six marketing dimensions simultaneously within a private hospital setting.

People and Patient Visit Intention

People demonstrated the largest standardized regression coefficient (β = 0.360; $p < 0.001$), indicating a significant positive association between patients'

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perceptions of healthcare personnel and visit intention. Professionalism, responsiveness, communication, and interpersonal interactions may contribute to patients' evaluations of hospital services. This finding aligns with Muh. Akmar M. et al. (2026), who emphasized the relevance of service quality and satisfaction to patient loyalty at Multazam Hospital. Similarly, Zebua et al. (2024) demonstrated relationships involving patient experience, satisfaction, and loyalty. Although these studies examined different behavioral outcomes, they support the relevance of patient-facing interactions in healthcare management. Nevertheless, the present results reflect perceived personnel attributes and do not establish causal relationships between employee performance and subsequent hospital visits.

Process and Patient Visit Intention

Process exhibited a significant positive association with patient visit intention ($\beta = 0.292$; $p < 0.001$). This finding suggests that patients' evaluations of registration procedures, administrative arrangements, service coordination, and operational clarity are relevant to their reported willingness to utilize hospital services. Sako and Lababa (2022) identified challenges in implementing patient care procedures in Gorontalo, highlighting the importance of organizational processes in healthcare delivery. Similarly, Berlianto (2024) reported relationships involving service processes and patient-related outcomes. These findings suggest that hospital marketing should be considered alongside operational management. However, the present study measured patient perceptions rather than objectively recorded waiting times or service efficiency.

Product and Patient Visit Intention

Product demonstrated a positive and statistically significant association with patient visit intention ($\beta = 0.165$; $p = 0.033$). Healthcare service availability, specialist services, diagnostic facilities, and the perceived suitability of medical offerings may contribute to patients' hospital evaluations. This finding is consistent with Alfani et al. (2023) and Permatasari et al. (2026), who emphasized the relevance of healthcare offerings within hospital marketing strategies. In the context of Multazam Hospital, reported developments in specialist services provide institutional background for understanding the importance of service availability. Nevertheless, the findings do not establish that service expansion directly caused changes in patient visits. Instead, they indicate that patients' perceptions of healthcare offerings were significantly associated with visit intention within the regression model.

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Non-Significant Marketing Mix Dimensions

Physical evidence (β = 0.055; p = 0.439), place (β = −0.053; p = 0.516), and promotion (β = 0.059; p = 0.417) did not demonstrate statistically significant adjusted associations with patient visit intention. These findings should not be interpreted as evidence that hospital facilities, geographical accessibility, or promotional communication are unimportant. Rather, their independent statistical associations were not significant after accounting for other marketing dimensions. The physical evidence finding differs from Berlianto (2024), who identified relationships involving the physical environment and patient-related outcomes. Meanwhile, Prianugraha et al. (2024) reported variations in the relevance of promotional activities across healthcare settings. Such differences may reflect institutional characteristics, patient expectations, and the behavioral outcomes examined. Consequently, these dimensions should remain part of hospital management, although their relative associations with visit intention require context-specific evaluation.

Theoretical Contribution and Managerial Implications

The principal contribution of this study lies in demonstrating differentiated statistical associations between six marketing mix dimensions and patient visit intention within a private hospital in Gorontalo. While the overall model explained 58.9% of the observed variation, significant individual associations were concentrated in product, people, and process. This finding contributes context-specific evidence to previous regional studies addressing hospital marketing, service procedures, and patient loyalty (Ayuba et al., 2022; Sako & Lababa, 2022; Muh. Akmar M. et al., 2026). From a managerial perspective, the results support greater attention to healthcare personnel, communication practices, administrative procedures, and the suitability of healthcare offerings. However, management priorities should also consider clinical safety, accessibility, organizational resources, and patient needs. The findings therefore support an integrated hospital marketing strategy rather than the exclusion of statistically non-significant dimensions.

Research Limitations and Future Directions

Several limitations should be acknowledged. First, the cross-sectional design prevents causal interpretation of the observed associations. Second, the single-hospital setting limits generalizability to other healthcare institutions. Third, patient visit intention was measured through self-reported questionnaires rather than actual subsequent hospital visits. Fourth, the model excluded price and therefore did not examine the complete seven-dimensional marketing mix. Additionally, several reliability coefficients were relatively modest, and the available sampling information did not establish probability-based representativeness. Future studies should

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consider multicenter and longitudinal designs, incorporate additional marketing dimensions, and examine actual healthcare utilization. Further investigation of patient satisfaction, trust, and perceived value may also provide a broader understanding of the relationships between service marketing strategies and patient behavior.

CONCLUSION

This study demonstrated that the six-dimensional service marketing mix was significantly associated with patient visit intentions at Multazam Hospital, Gorontalo ($F = 40.201$; $p < 0.001$), explaining 58.9% of the observed variation ($R^2 = 0.589$). Individually, people ($\beta = 0.360$), process ($\beta = 0.292$), and product ($\beta = 0.165$) exhibited significant positive associations, whereas physical evidence, place, and promotion showed no statistically significant adjusted associations. These findings indicate that the explanatory relevance of marketing mix dimensions differs within the examined healthcare setting. The study contributes context-specific evidence to healthcare service marketing by highlighting the relevance of patient-facing interactions, service processes, and healthcare offerings in understanding visit intentions. From a managerial perspective, the findings suggest that hospital management should consider strengthening personnel responsiveness, improving service procedures, and maintaining the suitability of healthcare services without neglecting accessibility, physical facilities, and promotional communication.

Nevertheless, the cross-sectional design limits causal inference, while the single-hospital setting and reliance on self-reported intentions constrain generalizability. Future research should employ longitudinal and multicenter designs, incorporate additional marketing dimensions, and examine actual healthcare utilization to provide a more comprehensive understanding of patients' behavioral responses to hospital marketing strategies.

REFERENCES

Akmar M, M., Baderan, U. S., & Makur, D. S. (2026). Revisiting patient loyalty in healthcare: The mediating role of patient satisfaction in the relationship between service quality and hospital image. Asian Journal of Management, Entrepreneurship and Social Science, 6(2), 1010–1024. https://doi.org/10.63922/ajmesc.v6i02.1630

Alfani, S., Widjanarko, B., & Sriatmi, A. (2023). Bauran pemasaran jasa (7P) terhadap keputusan pasien dalam memilih layanan di rumah sakit: Literature review. Holistik Jurnal Kesehatan, 17(1), 1–8. https://doi.org/10.33024/hjk.v17i1.8870

Copyright at authors some right reserved this work is licensed under a Creative Commons Attribution-ShareAlike 4.0 International License.

Ayuba, S., Mohamad, I., Lolo, A., & Mooduto, W. I. S. (2022). The impact of the hospital's marketing strategy on the interest of patient visits based on the marketing mix approach at Boliyohuto Hospital. Journal of Health, Technology and Science, 2(1), 59–69. https://doi.org/10.47918/jhts.v2i2.274

Prianugraha, A. R., Rahim, A. H., & Sukajie, B. (2024). Analisis marketing mix 7P terhadap minat kunjungan ulang pasien di Klinik Khasanah Medika dan Baitul Syifa tahun 2024. Jurnal Syntax Admiration, 5(12), 5339–5357. https://doi.org/10.46799/jsa.v5i12.1590

Permatasari, U. I., Novirwan, U., Umchudloh, U., Prestiaji, U., & Rohendi, R. (2026). The implementation of the service marketing mix (7P) as a service marketing strategy in hospitals: A literature review. Jurnal Indonesia Sosial Sains, 7(3), 879–888. https://doi.org/10.59141/jiss.v7i3.2257

Putri, C. F. M., Sudirman, V. W., & Irawati, J. (2025). Understanding patient revisit intention and word of mouth in healthcare services: A SERVQUAL-based framework with higher-order constructs. Jurnal Manajemen dan Kewirausahaan, 13(2), 144–160. https://doi.org/10.26905/jmdk.v13i2.15591

Sako, U., & Lababa, Z. (2022). Implementation of standard operating procedures for patient care. Journal La Sociale, 3(1), 40–46. https://doi.org/10.37899/journal-la-sociale.v3i1.606

Tiffany, & Berlianto, M. P. (2024). The effect of the 7Ps service marketing mix towards patient loyalty through patient satisfaction as a meditating effect in X Hospital. Intisari Sains Medis, 15(3), 1152–1158. https://doi.org/10.15562/ism.v15i3.2178

Zebua, L., Irwandy, Pasinringi, S. A., Rivai, F., Sidin, I., & Mumang, A. A. (2024). The impact of marketing mix and patient experience on public patient loyalty in hospitals: Satisfaction as an intervening variable. Asia Pacific Journal of Health Management, 19(1), Article i2267. https://doi.org/10.24083/apjhm.v19i1.2267.

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