

The influence religiosity as a moderating patient satisfaction and positive word of mouth in Indonesian hospitals

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Abstract: The aim of this study was to fill a gap that is critical to developing strategies to increase positive word of mouth in health settings. Understanding the mediating role of patient satisfaction can provide insight into the areas of hospital service quality that most directly influence patient perception and subsequent recommendations. By forming clearer connections between these variables, healthcare providers can tailor their services to improve patient satisfaction and in turn stimulate positive word of mouth. The moderate role of religiosity can provide insight into whether and how religious beliefs influence patients' likelihood of spreading positive information by word of mouth based on their satisfaction with the healthcare experience. The research method used Causal Explanatory Research with a sample of 297 respondents in hospitals with religious ideology in Indonesia. Data management is done using SEM. Religiosity as a moderator of the relationship between patient satisfaction and positive women shows a C.R value of 6.075 and a significant probability (ρ) of 0.000 is obtained which is smaller than the required significance level of 0.05. Religiosity is able to significantly moderate the influence of Patient Satisfaction on Positive WOM.

Keywords: Hospital, Patient satisfaction, Positive WOM, Religiosity, Service quality.

1. Introduction

Positive Word of Mouth (WOM) is recognized as an important factor in marketing, influencing consumer behavior, and purchasing decisions (Vázquez-Casielles et al., 2013). WOM is considered an important communication strategy to influence consumer purchasing decisions (Bruce & Edgington, 2008). More than 50 years of research emphasize the importance of informal communication between customers, with WOM being a central topic of research (Oetting, 2009). Marketing researchers and practitioners believe that WOM is a powerful strategy that influences marketing performance (Oetting & Jacob, 2007), playing an important role in influencing repurchase decisions (Money et al., 1998); (Gremler et al., 2001). WOM has been identified as an important factor in consumer choice, giving a company the opportunity to increase its market share by fostering positive WOM among customers (Casaló Ariño et al., 2008).

Despite extensive research on WOM, there is still a lack of comprehensive understanding, especially in health-related industries. The specific relationship between Quality of Patient Care and WOM in healthcare settings has not been fully explored. The mediating role of patient satisfaction and the moderating role of religiosity in influencing WOM in healthcare settings warrant further investigation. Dandis et al., (2022), who found that there is a *tangible* dimension that has an insignificant effect on *word of mouth*. Meanwhile, the results of research by P. S. H. Tan et al., (2022) and Cham et al., (2021) said that *patient service quality* with its five dimensions has a significant effect on *word of mouth*. there is a significant relationship between SQ and WOM both directly (Liu & Lee, 2016) or indirectly through mediators such as customer satisfaction ((Hwang & Choi, 2019); (Mahmoud & Grigoriou, 2017).

According to Sipilä et al., (2017) also shows that WOM assumes an important role in defining consumer attitudes and service evaluation. Meštrović, (2017) concludes that "service quality has a direct and significant impact on satisfaction, satisfaction sequentially has a direct and significant impact on WOM, service quality has an indirect and significant impact on WOM through satisfaction.

WOM determined to play a direct positive role in the development of patient satisfaction and an indirect role in the development of patient loyalty (Dayan et al., 2022). In addition, customer satisfaction and patient perceived value significantly affect patient loyalty (word of mouth and revisit intent), however, customer perceived value does not significantly affect customer satisfaction (Nguyen et al., 2021). The experience of patient visits has a positive effect on patient satisfaction with the doctor, and intention WOM And patient satisfaction with the doctor plays a mediating role in this effect. Patient satisfaction with the doctor has a positive effect on intention WOM (Akbolat et al., 2021).

Religiosity affect Consumers who actively engage with their religious communities show higher interdependence, which leads to risk aversion (less experimentation, aversion to new products and technologies, brand loyalty). Consumers with a stronger religious identity have more positive attitudes toward religious products than those with weaker or no identity. Proposition Regarding Influencing Religious Values consumer behavior, which leads to economic purchasing decisions (Agarwala et al., 2019). Religiosity has a significant effect as moderating negative at Service Quality towards satisfaction (Abror et al., 2020), and Religiosity as an important factor of relationship moderation satisfaction towards Loyalty (Boon Liat et al., 2020). The conceptual model suggests that religiosity acts as an important social force that shapes individual behavior.

Addressing these gaps is important to develop effective strategies to increase positive WOM in health contexts. Understanding how patient satisfaction mediates in the relationship between service quality and WOM can provide valuable insights in improving service quality and stimulating positive WOM. Examining how religiosity moderates the relationship between patient satisfaction and WOM can provide insight into the influence of religious beliefs on patient recommendations. This knowledge can inform healthcare providers about tailored approaches to improve patient satisfaction and stimulate positive WOM, taking into account the diverse religious backgrounds of patients.

This research was conducted in a hospital with religious ideology in Indonesia. Some hospitals in Indonesia make religious standards in providing health services. The religious standard certification instrument is an instrument to assess the implementation of religious standards in hospital management, include hospital management, human resource management, building and physical management, and services.

2. Methods

The quantitative approach used in this study use Causal Explanatory Research. By using a quantitative approach, researchers can formulate the variables under study for further causality testing using statistical tests, namely influence Service Quality in five dimensions, namely: reliability, tangible, responsiveness, assurance, empathy towards patient satisfaction, positive word of mouth and religiosity as mediator patient satisfaction towards positive word of mouth. The population in this study was all patients who had been hospitalized in hospitals in Indonesia with an average per month of 1153 patients. The sample was calculated using the Yamane Approach (1973) (Augusty, 2014: 174).

Based on calculations, the number of samples is 297. Sample collection techniques by *purposive sampling*, with criteria namely:

- 1) Patients have at least been hospitalized once in the past year,
- 2) The patient is not a hospital employee.

3. Results

The results of research on descriptive statistics of respondents' characteristics.

Table 1.
Characteristics of respondents.

	Criterion	Frequency (People)	Percentage (%)
Gender	Man	112	37.71
	Woman	185	62.29
Age	18 - 40 years	153	51.52
	41 - 60 years	126	42.42
	≥ 61 years old	18	6.06
Marital Status	Marry	234	78.79
	Unmarried	54	18.18
	Divorce	9	3.03
Education	Elementary school	18	6.06
	Junior high school	29	9.76
	Senior high school	122	41.08
	Diploma	17	5.72
	Bachelor	111	37.37
Work	Civil servants	31	10.44
	Private employees	55	18.52
	Self employed	51	17.17
	Professional	33	11.11
	Miscellaneous	127	42.76

Table 1 shows that there are more female respondents than men, which is 62.29%. Respondents based on age 51.52% aged 18-40 years. Marital status of respondents married the most, which is 78.79%. Respondents based on education had the most recent high school education, which was 41.08%. By occupation, most have other jobs, which is 42.76%.

Before data analysis was carried out, validity and reliability tests were carried out using the Confirmatory Factor application using the AMOS 24 application. Measurement models are initially carried out before estimating structural models. Here are the results of the validity and reliability test.

Table 2.
Test validity and reliability.

Indicators	p	Loading factor	Information	Construct reliability	Information
X1.1	***	0.659	Valid	0.956	Reliable
X1.2	***	0.757	Valid		
X1.3	***	0.841	Valid		
X1.4	***	0.736	Valid		
X1.5	***	0.834	Valid		
X1.6	***	0.783	Valid	0.966	Reliable
X2.1	***	0.745	Valid		
X2.2	***	0.863	Valid		
X2.3	***	0.749	Valid		
X2.4	***	0.798	Valid	0.955	Reliable
X3.1	***	0.722	Valid		
X3.2	***	0.819	Valid		
X3.3	***	0.847	Valid		
X3.4	***	0.812	Valid	0.978	Reliable
X4.1	***	0.790	Valid		
X4.2	***	0.847	Valid		

X4.3	***	0.801	Valid		
X5.1	***	0.777	Valid	0.966	Reliable
X5.2	***	0.862	Valid		
X5.3	***	0.870	Valid		
X5.4	***	0.840	Valid		
X5.5	***	0.629	Valid		
Z1.1	***	0.876	Valid	0.986	Reliable
Z1.4	***	0.854	Valid		
Z1.5	***	0.870	Valid		
M1.1	***	0.629	Valid	0.907	Reliable
M1.2	***	0.660	Valid		
M1.3	***	0.539	Valid		
M1.4	***	0.619	Valid		
M1.5	***	0.622	Valid		
M1.6	***	0.562	Valid		
M1.7	***	0.579	Valid		
M1.8	***	0.535	Valid		
M1.9	***	0.540	Valid		
M1.10	***	0.768	Valid		
M1.11	***	0.753	Valid		
M1.12	***	0.685	Valid		
M1.13	***	0.851	Valid		
M1.14	***	0.841	Valid		
M1.15	***	0.781	Valid		
Y1.1	***	0.768	Valid		
Y1.2	***	0.954	Valid	0.989	Reliable
Y1.3	***	0.921	Valid		

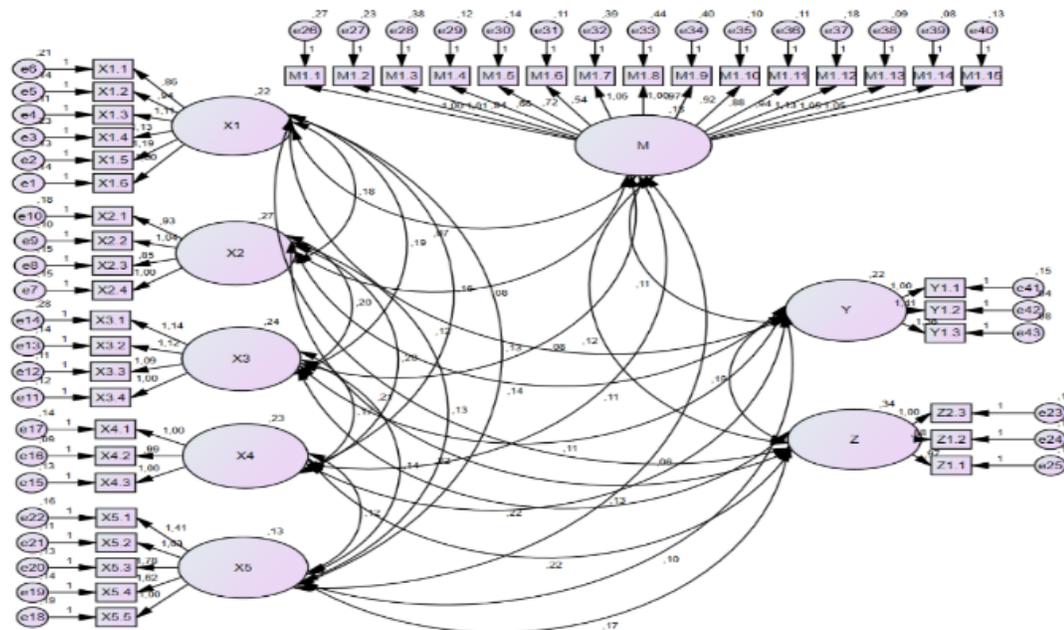


Figure 1.
Structural model.

Test results of validity and reliability in table 2. Shows that all indicators can meet the validity requirements (Loading Factor > 0.5), and the entire construct has passed the reliability test with a cut off value greater than 0.6 so that the preparation of questionnaire question items used to measure the variable's reliability, tangible, responsiveness, empathy, patient satisfaction, religiosity and positive WOM can be declared reliable and trustworthy as a consistent measuring tool.

Table 1.
Goodness of fit and cut off value structural model.

Criterion	Cut off value	Test results	Information
Chi-square	As small as possible	1240,642	Fit
Probability	≥ 0.05	0.000	Not fit
GFI	≥ 0.90	0.838	Not fit
AGFI	≥ 0.90	0.784	Not fit
TLI	≥ 0.95	0.940	Not fit
CFI	≥ 0.95	0.953	Fit
RMSEA	≤ 0.08	0.050	Fit
CMIN/DF	≤ 2.00	1.750	Fit

The results of the calculation of the goodness of fit index in the structural model are as Table 1. It can be seen that of the eight criteria, there are four criteria that have Fit criteria and the other is not Fit. Referring to Ferdinand's opinion, (2014:259) stated that based on the parsimony rule, if some of the fit criteria are met, then the model has been declared to have met the model's suitability.

Detailed testing of path coefficients is presented in Figure 2 and Table 3. The following Causality Test results:

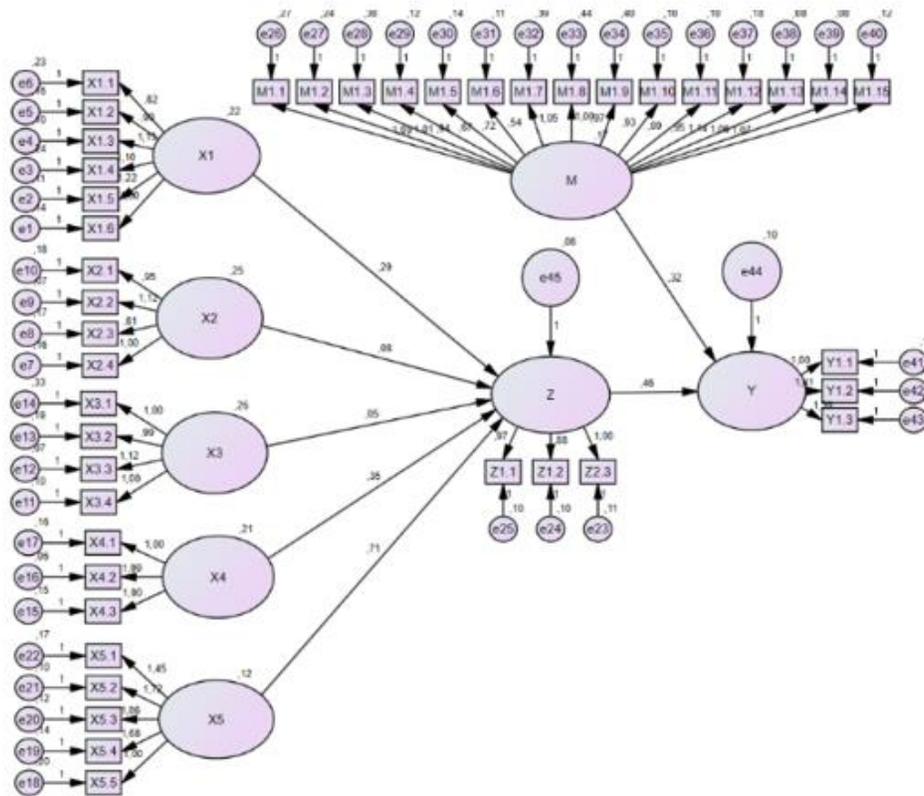


Figure 2. SEM test.

Table 3. Causality test results.

			Estimate	S.E.	C.R.	P	Information
Z	<---	X ₂	0.079	0.066	1.188	0.235	Hypothesis rejected
Z	<---	X ₃	0.051	0.073	0.695	0.487	Hypothesis rejected
Z	<---	X ₄	0.354	0.071	4.995	***	Hypothesis accepted
Z	<---	X ₁	0.294	0.075	3.950	***	Hypothesis accepted
Z	<---	X ₅	0.710	0.118	6.008	***	Hypothesis accepted
Y	<---	Z	0.460	0.050	9.183	***	Hypothesis accepted

Based on Table 3. It can be stated that the test results of the path coefficient for the effect of reliability (X₁) on patient satisfaction (Z) have a positive path of 0.294 with a CR of 3.950 and a probability of 0.000 which means that reliability has a significant effect on patient satisfaction. Tangible (X₂) to patient satisfaction (Z) has a positive path coefficient of 0.079 with a CR of 1.188 and a probability of 0.235 greater than the required significant level of 0.05 which means tangible is found to have an insignificant effect on patient satisfaction. Responsiveness (X₃) to patient satisfaction (Z) has a positive path coefficient of 0.051 with a CR of 0.695 and a probability of 0.487 greater than the required significant level of 0.05 which means that Responsiveness was found to have an insignificant effect on patient satisfaction. Assurance (X₄) to patient satisfaction (Z) has a positive path of 0.354 with a CR of 4.995 and a probability of 0.000 which means that Assurance Significant effect on patient satisfaction. Empathy (X₅) to patient satisfaction (Z) has a positive path of 0.710 with a CR of 6.008 and a probability of 0.000 which means that Empathy Significant effect on patient satisfaction. Patient

Satisfaction (Z) to Positive WOM (Y) has a positive path of 0.460 with a CR of 9.183 and a probability of 0.000 meaning that Patient Satisfaction Significant effect on Positive WOM.

Testing the results of moderation analysis using SEM analysis is presented in Figure 3 and Table 4 as follows:

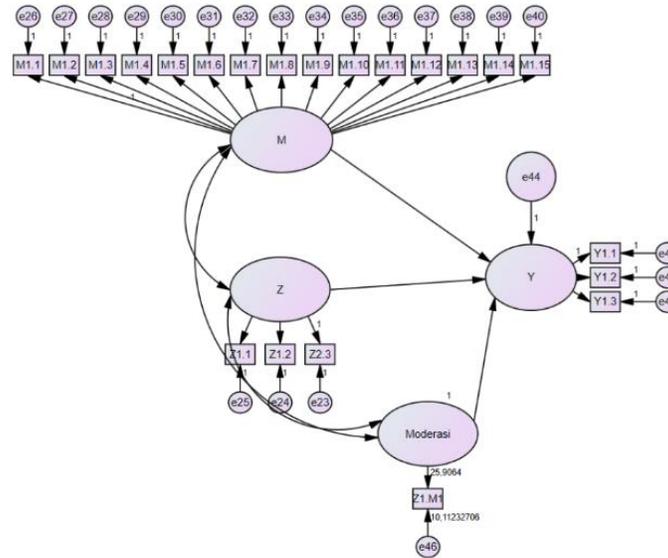


Figure 3. Moderation test.

Table 4. Moderation test results.

			Estimate	S.E.	C.R.	P	Information
Y	<---	M	0.003	0.001	6,075		Hypothesis accepted

Based on Table 4. It can be stated that the test results for the effect of Moderated Patient Satisfaction Religiosity (M) on Positive WOM (Y) have a positive path of 0.003 with a CR of 6.075 and a probability of 0.000 which means that religiosity is found to be a significant moderation in the influence Patient Satisfaction towards Positive WOM. The results of the analysis accept the research hypothesis (H₇).

4. Discussion

Results of data analysis influence reliability towards patient satisfaction indicates that the variable Reliability has a significant influence on patient satisfaction. This suggests that the hypothesis states that Reliability Affect Patient Satisfaction has been proven correct. Then it can be said that reliability hospitals in Indonesia may affect patient satisfaction. A positive value of the coefficient indicates that the higher the reliability hospital, it will increase patient satisfaction. Conversely, if reliability hospital Decreased, it will decrease patient satisfaction.

Reliability in this context refers to consistency, reliability, and accuracy in the provision of health services to patients. Reliability namely the company's ability to provide services as promised accurately and reliably. Performance must be in accordance with customer expectations which is reflected punctuality, the same service without errors, sympathy and with high accuracy. Briefly it can be interpreted as the ability to deliver promised services accurately, on time, and reliably.

Results of data analysis influence tangible towards patient satisfaction indicates if the variable tangible has an insignificant influence on patient satisfaction. This can be demonstrated if the hypothesis

states that tangible significant effect on patient satisfaction not accepted. The value of the coefficient indicates a positive value, so it can be explained that the higher tangible then it will increase patient satisfaction. Thus, it can be concluded physical evidence in Hospitals in Indonesia cannot affect the satisfaction of their patients.

Physical Evidence is the ability of a company to show its existence to external parties. The appearance and ability of the company's physical facilities and infrastructure and the condition of the surrounding environment are clear evidence of the services provided by this service provider including: physical facilities (buildings, warehouses and others), technology (equipment and equipment used), and the appearance of its employees. Briefly it can be interpreted as the appearance of physical facilities, equipment, personnel and communication materials.

Results of data analysis influence responsiveness towards patient satisfaction indicates if the variable responsiveness has an insignificant influence on patient satisfaction. This can be demonstrated if the hypothesis states that responsiveness Significant effect on patient satisfaction not accepted. The value of the coefficient indicates a positive value, so it can be explained that the higher responsiveness then it will increase patient satisfaction. Thus, it can be concluded responsiveness in Hospitals in Indonesia cannot affect the satisfaction of their patients.

The results of data analysis of the effect of assurance on patient satisfaction show that assurance variables have a significant influence on patient satisfaction. This shows that the hypothesis that assurance affects patient satisfaction has been proven correct. So, it can be said that guarantees in hospitals in Indonesia can affect patient satisfaction. A positive coefficient value indicates that the higher the hospital guarantee, the more patient satisfaction will increase. Conversely, if the hospital guarantee decreases, it will decrease patient satisfaction.

The results of data analysis of the effect of empathy on patient satisfaction show that the empathy variable has a significant influence on patient satisfaction. This shows that the hypothesis that empathy affects patient satisfaction has been proven correct. So, it can be said that empathy in hospitals in Indonesia can affect patient satisfaction. A positive coefficient value indicates that the higher the hospital's empathy, the more patient satisfaction will increase. Conversely, if hospital empathy decreases, it will decrease patient satisfaction.

The results of data analysis of the effect of patient satisfaction on positive WOM show that the patient satisfaction variable has a significant influence on positive WOM. This shows that the hypothesis that patient satisfaction affects positive WOM has been proven correct. So, it can be said that patient satisfaction in hospitals in Indonesia can affect positive WOM. A positive coefficient value indicates that the higher the satisfaction of hospital patients, the more positive WOM will increase. Conversely, if hospital patient satisfaction decreases, it will decrease positive WOM.

The results of this study show that patient satisfaction has a significant influence on positive Word of Mouth (WOM), highlighting that patient satisfaction plays a key role in spreading positive recommendations about health services. The study confirms that when patients are satisfied with the service they receive, they tend to give positive recommendations to others, either directly to family and friends, or through various communication platforms such as social media, online reviews, or forum discussions. Positive patient experiences conveyed to others, both orally and in writing, have great potential to influence people's perceptions of health services. Such positive recommendations can spark interest in others to seek the same services, increase trust and a positive image of health care providers, and influence the decisions of others in choosing the health services they need. Therefore, patient satisfaction plays an important role in influencing positive WOM, which in turn can have a significant impact on the image, reputation, and growth of healthcare providers.

The results of the analysis of the role of moderation religiosity on the effect of patient satisfaction on positive WOM show that religiosity can moderate the effect of patient satisfaction on positive WOM in hospitals. The research highlights that a person's level of religious belief and involvement influences the relationship between patient satisfaction and how much they disseminate positive recommendations related to healthcare. The results showed that individuals with high levels of

religiosity, when satisfied with the health care received, tended to be more active in disseminating positive recommendations to their communities or networks that shared similar values or beliefs. This may be because religion or spirituality can reinforce social attachments and values of solidarity within the same group, thus spreading positive experiences about health services becomes more common among members of those communities. Conversely, individuals with low levels of religiosity may not show a strong correlation between patient satisfaction and positive WOM due to lack of involvement in the same community or lack of urgency in disseminating healthcare-related information based on their personal experiences. Thus, the results of the study reveal the importance of considering religiosity factors in understanding and moderating how patient satisfaction contributes to Positive WOM in a diverse environment from the viewpoint of individual religions and beliefs.

5. Implication

The theoretical findings of this study reinforce the understanding that aspects of service quality, such as reliability in service, confidence in the ability of health systems, and the ability of medical staff to understand and respond to patient needs, play an important role in shaping patient satisfaction. Its theoretical implications point to the importance of these dimensions in models of service quality directly related to patient perception and evaluation of health services. This underscores that patient satisfaction is not only influenced by medical outcomes alone, but also by non-medical aspects such as trust, empathy, and reliability of services.

The results of the study further suggest that the influence of tangibles and responsiveness factors does not significantly affect patient satisfaction, having important theoretical implications in the context of understanding health care quality. These findings highlight those physical aspects in healthcare, such as the physical condition of facilities, medical equipment, responsiveness in services, and waiting times, are not key factors that significantly affect patient satisfaction. Implication in specific contexts, these elements are not the main determinants of patient satisfaction. This can lead to the interpretation that non-physical or non-technical factors have a stronger influence on patient satisfaction in healthcare contexts, such as trust, empathy, consistency, and effective communication.

The next theoretical finding that patient satisfaction has a significant effect on Positive Word-of-Mouth (WOM) has substantial theoretical implications in service theory and consumer behavior. Theoretically, these findings confirm that patient satisfaction has an important role in shaping positive communication behaviors, where patients who are satisfied with health services tend to spread positive recommendations to others. This implication confirms that patient satisfaction not only reflects individual satisfaction levels, but also acts as a catalyst for spreading positive information related to healthcare. These results reinforce theories about the domino effect in consumer behavior, where patient satisfaction can trigger a series of positive reactions, including the dissemination of positive information and recommendations about healthcare, which in turn can influence other consumers' decisions in choosing a health service.

The results of this study then found that moderating the effect of patient satisfaction on Positive Word-of-Mouth (WOM) has interesting theoretical implications in understanding consumer behavior and communication in the context of healthcare. This implication confirms that religious factors can be a significant moderator variable in the relationship between patient satisfaction and positive behaviors of information delivery about health services. From the perspective of consumer behavior theory, these findings emphasize that an individual's level of religiosity can influence the extent to which patient satisfaction influences the positive recommendations disseminated. High religiosity can increase an individual's tendency to disseminate positive information related to health services after feeling satisfied, especially in communities or environments that share similar religious values or beliefs. Thus, these results broaden understanding of psychological factors, such as religion, in moderating the relationship between patient satisfaction and Positive WOM, enabling the development of strategies that are more effective in influencing positive communication about health services in communities with different religious backgrounds.

The results showed that reliability, assurance, and empathy had a significant influence on patient satisfaction while physical evidence (*tangible*) and responsiveness had no effect in Indonesian hospitals had practical implications that had an impact on improving the quality of health services in these hospitals. This implication confirms that focusing on aspects such as service reliability, patient confidence in service quality, and the ability of medical staff to understand and respond to patient needs are important keys in improving patient satisfaction in Indonesian hospitals. Although physical evidence and responsiveness do not have a significant impact, their practical implications point to the need for evaluation and improvement in aspects that may be less dominant in influencing patient satisfaction.

The results of this study also show that patient satisfaction has a significant effect on Positive Word-of-Mouth (WOM) in Indonesian hospitals has important practical implications in health service management. This implication underlines those efforts to increase patient satisfaction in Indonesian hospitals will not only have an impact on the positive perception of individual patients, but will also bring benefits in developing the hospital's image and reputation in the community. By focusing efforts on improving patient satisfaction, Indonesian Hospitals have the opportunity to encourage and reinforce positive recommendations from patients to family, friends, and communities, which directly affect the image of the hospital and the decision of prospective patients to choose health services at Indonesian Hospitals. The practical implication is that in an effort to increase Positive WOM, Indonesian Hospitals need to prioritize strategies oriented towards increasing patient satisfaction, ensuring consistent service, as well as providing a satisfactory experience for every patient who comes, thus contributing to improving the image and public trust in Indonesian Hospitals.

The implications further highlight the need for different approaches in designing communication and marketing strategies to reinforce positive recommendations from patients, especially in environments with diverse religious backgrounds. In a practical context, Indonesian hospitals need to consider how aspects of religiosity can influence patients' decisions in disseminating positive recommendations. By understanding that religious factors play a role in consumer perceptions and behavior, hospitals can adopt a more sensitive approach to religious preferences in an effort to promote Positive WOM. This can include using language or messages that are more in line with religious values, providing a supportive environment for individuals with different religious backgrounds, and encouraging communication that is consistent with the religious values held by society. Thus, Indonesian hospitals can create a more inclusive environment and support broader positive recommendations, which in turn will strengthen the positive image of the hospital and influence future patient decisions.

6. Conclusion

The results showed that service *reliability*, *assurance*, and empathy have a significant influence on patient satisfaction, hospitals in Indonesia can strengthen these aspects in health service strategies. Although physical evidence (*tangible*) and *responsiveness* do not significantly affect patient satisfaction, a more in-depth evaluation of physical aspects that might affect patient perception of facilities as well as improvements in responsive communication may be needed. Meanwhile, although patient satisfaction does not directly affect *positive Word-of-Mouth* (WOM), understanding and responding to differences in patients' levels of religiosity in observing patient satisfaction can help improve positive recommendations influenced by religious factors outside the hospital. Through a focus on maintaining reliability, assurance, and empathy as well as a deep understanding of the influence of religiosity on patient satisfaction, it can improve the service quality that leads to a positive patient experience and improved hospital image.

Acknowledgement:

We would like to thank STMIK Muhammadiyah Paguyangan Brebes and Rumah Sakit Umum Muhammadiyah Siti Aminah Bumiayu for supporting of this research in 2022.

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