The Impact Of Hospital Brand Image On Patient Loyalty And Patient Behavioral Intention: The Mediating Role Of Patient Satisfaction

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Abstract:
The purpose of this research is to inspect the hospital brand image impact on the Patient Loyalty and Patient Behavioral intention with the mediating role of Patient Satisfaction as well as the interconnections among hospital brand image, patient satisfaction, patient loyalty and patient behavioral intention. Also, this study aims to analyses hospital brand image (HBI)–patient loyalty (PL)-patient behavioral intention (BI) in healthcare by understanding PS modelled. Furthermore, the mediating effect from HBI to loyalty and HBI to through PS is examined. The data collected from the Railway General Hospital in Islamabad are used to test the relationship among patient loyalty, patient satisfaction and behavioral intention which impacted hospital brand image. The data collected in this study was analyzed by using SPSS. The results from this study shows positive association of hospital brand image on patient loyalty and patient behavioral intention. The findings also show that level of satisfaction partially mediates the relationship between hospital brand image and patient loyalty and behavioral. A favorable brand image increases various outcomes such as patient loyalty, and behavioral intention by effecting patient satisfaction. From a managerial perspective, by using this framework, hospital managers can not only understand the complex relationships among hospital HBI, PS, BI and Loyalty

but they can also use it in several ways. Since HBI is the main antecedent of our conceptual model, it not only impacts patient Loyalty directly but also indirectly through PS. This study is one of few studies that considered the importance of hospital brand image on the patient loyalty and behavioral intention but never studied with the mediation of patient satisfaction in hospital brand image.

Keywords: Hospital brand image HBI, Patient loyalty PL, Patient Behavioral Intention BI, Patient Satisfaction PS.

INTRODUCTION

In a competitive market, branding is a valuable asset for a company, serving as an intangible strength. Positive brands enable customers to visualize and understand products, reducing perceived risks in service purchases. Dobni and Zinkhan (1990) define brand image as customers' rational or intuitive opinions, encompassing both practical and symbolic values. Tailoring brand image to specific categories is crucial (Park and Srinivasan, 1994). Saleem and Raja (2014) note that a brand's image influences consumer recall, shaping their initial thoughts during purchases. Customers evaluate brands based on attributes, forming close bonds with those whose image aligns with their perceptions. In the healthcare sector, such as hospitals, brand image goes beyond customer satisfaction, influencing sustained performance through positive associations.

A customer's overall perception of a product, defined by Mohajerani and Miremadi (2012) as brand image, significantly impacts a company's reputation and financial performance. Recognized as a vital component for enterprises, brand image strongly shapes consumers' opinions, impacting purchase decisions and behavior. It is also emphasized that a robust brand image enhances company value and fosters client loyalty. Robinot & Giannelloni (2010) underscore the need for overall customer satisfaction, extending beyond the brand to encompass services like value, comfort, and quality to maintain client loyalty.

In healthcare, hospitals strategically leverage brand image for competitive advantage (Javalgi et al., 1992). Brand image, a key factor in overall company perception, significantly shapes patient satisfaction, loyalty, and repurchase intent. Hospitals focus on marketing strategies to enhance brand image, positively influencing patient behavior and satisfaction.

Despite its growing importance, research on hospital brand image is limited. This study fills the gap by presenting an integrated model exploring relationships among hospital brand image, service quality, patient satisfaction, and loyalty.

In examining the link between brand image, loyalty, and behavioral intention through patient satisfaction, we review existing research on 'patient satisfaction,' 'perceived service quality,' 'loyalty,' and 'hospital brand image.' Numerous studies highlight the impact of perceived service quality on patient satisfaction and satisfaction on loyalty. In the healthcare industry, an enhanced brand image positively influences these factors, contributing to overall organizational performance. Brand image, a key component of a firm's development strategy, is defined by Keller (1993) as 'a set of perceptions about a brand' and is reflected in consumer memory (Dobni & Zinkhan, 1990).

Brand image significantly influences consumer purchasing decisions, particularly when choosing among competing brands (Reza Jalilvand and Samiei, 2012). Drawing from the image forming theory (Cham et al., 2016), patients construct perceptions about a product or service through inductive inferences based on exposure to marketing communication and promotion techniques. Hospital brand image formation extends beyond the functional aspects, heavily influenced by the firm's marketing strategies and patient satisfaction (Opoku & Akorli, 2009). This study explores the impact of hospital advertisements and social media on shaping brand image.

Problem Definition/Research Gap: Healthcare institutions globally face increasing competition due to open-door market policies (Kim et al., 2008c). The rise in the senior citizen population and heightened health awareness creates specific health needs. Loyalty closely aligns with behavioral intention (East, Sinclair, and Gendall, 2000), emphasizing the current focus on customer loyalty and patient behavioral intention in the hospital brand image field. This study explores the relationship among patient satisfaction, loyalty, behavioral intention, and the impact of hospital brand image, addressing a gap in understanding the mediating roles of perceived service quality (PSQ) and patient satisfaction (PS). While numerous studies integrate brand image, perceived service quality, patient satisfaction, and loyalty, the mediating roles of PSQ and PS in the relationship between hospital brand image and loyalty have not been extensively studied. This research fills

that gap by examining the direct and indirect impacts of hospital brand image on patient loyalty through the mediating roles of patient satisfaction. It also builds on preliminary studies identifying social and marketing factors influencing hospital brand image, such as pricing perception and advertising (Cham et al., 2015; Wu, 2011). Expanding on previous work, this study delves into the influence of hospital brand image on patient loyalty and behavioral intention, mediated by patient satisfaction, and links to the level of care provided by hospitals (Vimla & Taneja, 2021). The study adds depth to the understanding of relationships among brand image, loyalty, and patient satisfaction, addressing various aspects of patient satisfaction as a multi-dimensional construct and its strategic importance. The present study employs a survey methodology with questions related to behavioral intention and loyalty at admission and discharge, including satisfaction with hospital treatment, likelihood of recommending the hospital experience, cost effectiveness, and patient care quality.

This study explores the impact of hospital brand image on patient loyalty and behavioral intentions, specifically focusing on customer happiness, perceived value, and revisit intentions. It addresses the less-explored mediating role of patient satisfaction in the relationship between hospital brand image and both patient loyalty and behavioral intentions. Recognizing the competitive landscape in the medical service market favoring the buyer (Lee et al., 2010), the study aims to deepen understanding of these connections, emphasizing the need for increased competition among healthcare providers.

Research Questions: By following the research gap and research problems, the following research questions have been articulated:

1. Does hospital brand image effect patient loyalty?
2. Does hospital brand image effect patient behavioral intention?
3. Does patient satisfaction mediated the hospital brand image between patient loyalty and patient behavioral intention?

Research Objectives: The current study investigates how hospital brand image affect patient satisfaction and patient behavioral intention in the presence of mediating role of perceived service quality. The current study's objectives are based on the research questions:

1. To examine the relationship between hospital brand image and patient loyalty.
2. To examine the relationship between hospital brand image and patient behavioral intention.
3. To examine the mediation role of patient satisfaction between hospital brand image, patient loyalty and patient behavioral intention.

Theoretical Implication: This study explores the intricate relationship between hospital brand image and patient outcomes, emphasizing the mediating role of satisfaction. With a rising patient influx in countries like Pakistan and India, factors like qualified medical staff, long waiting lists, and economic considerations contribute to this growth. A robust brand image in the healthcare industry, influenced by patient satisfaction, can drive increased patient visits. Focusing on the Pakistani context, this study empirically investigates the impact of hospital brand image on patient outcomes, providing insights for hospitals to cultivate positive brand images (Andreassen, 1998).

Practical Implication: From a managerial perspective, hospital administrators can leverage the conceptual framework to comprehend the intricate relationships between hospital Brand Image (HBI), Patient Satisfaction (PS), and Loyalty. The primary antecedent, HBI, influences patient loyalty directly and indirectly through PS. To enhance HBI and gain a competitive edge, administrators can employ various marketing strategies, including patient communication, staff training, advertising, public relations, and online marketing. This differentiation can result in increased patient trust, heightened brand awareness, greater returns, and organizational growth. The conceptual approach underscores the importance of BI in brand building, emphasizing the need for hospitals to have a strong and positive BI compared to competitors. Understanding the motivations behind BI, Loyalty, and PS is crucial for managerial success in the healthcare industry, where patient visits can increase with a strong brand image. The competitive landscape necessitates hospital executives to proactively enhance their facility's perception.

Hospital Brand Image (HBI): Hospital Brand Image is the set of perceptions, beliefs, and impressions that patients hold about a specific hospital in the context of healthcare. It reflects the

overall impression a customer has about the hospital (Keller, 1993; Kotler and Clarke, 1986; Knapp, 2001).

Patient Loyalty (PL): Patient Loyalty is the customer's willingness to consistently choose a specific hospital for long-term healthcare needs and recommend the hospital to others. It encompasses preferences, intentions, and a commitment to future interactions with the hospital (Griffin, 2005; Mowen and Minor, 1998a).

Patient Satisfaction: Patient Satisfaction is the result of the perceived performance of a hospital compared to initial expectations. Antecedents to loyalty include service quality, satisfaction, trust, and commitment (Gaur et al., 2011). Dimensions leading to satisfaction include the physical environment, customer-friendly staff, communication, responsiveness, and overall satisfaction (Revaldi et al., 2022).

Patient Behavioral Intention: Patient Behavioral Intention is an individual's decision or commitment to engage in specific behaviors related to healthcare services. It is an indicator of customer loyalty and retention, often measured through repurchase (or revisit) intention and willingness to recommend the hospital to others (Purwianti and Tio, 2017; Ajzen & Fishbein, 1977; Chen & Tsai, 2007; Ramkissoon & Uysal, 2011; Som, Marzuki, Yousefi, & Abu Khalifeh, 2012).

Outline of Report: The first chapter introduces the study's background, research questions, aims, and significance. Chapter two offers a literature review, while the third chapter outlines the research framework and model. The methodology is detailed in the fourth chapter, and the analysis and findings are presented in the fifth chapter. The sixth chapter includes discussions on the findings, implications, limitations, future research, and conclusions.

LITERATURE REVIEW

The brand is a crucial intangible asset contributing to sustained outstanding performance (Roberts and Dowling 2002). Brand image, formed by perceptions of quality and esteem, represents a customer's overall impression of a company (Yagci, Biswas, and Dutta 2009). In healthcare, a hospital's brand image encompasses patients' beliefs and impressions (Kotler and Clarke 1987). A positive brand image enhances a

hospital's competitive position and influences patient choice (Javalgi et al. 1992).

Brand image directly impacts loyalty (Merrilees and Fry 2002), and it indirectly influences loyalty through customer satisfaction (Davies and Chun). This underscores the influence of brand image on consumer loyalty. In the healthcare industry, a positive hospital brand image is associated with increased patient loyalty (Sirapracha and Tocquer 2012). Despite the importance of brand image, few studies specifically address hospital brand image.

Patient loyalty is defined as a consistent, non-random purchase behavior by a decision-making unit (Griffin and Lopez 2005). In healthcare, patient loyalty reflects a customer's willingness to continuously engage with a hospital and recommend it to others. Patients often rely on a hospital's brand image when choosing a healthcare provider, impacting their decision-making process (AlSaleh 2019, Kemp, Jillapalli, and Becerra 2014, Wu et al. 2011).

Brand image influences customer loyalty through factors like satisfaction, behavior, commitment, product favor, trust, and moving cost (Aaker 1997). Porter and Claycomb (1997) measure brand image through symbolic and functional dimensions, influencing customer perceptions. Aaker (1997) categorizes brand image into brand value, characteristics, and associations. While some studies focus on individual determinants, a comprehensive conceptual framework integrating academic findings is lacking.

Hypotheses arise from the research, suggesting a positive hospital brand image enhances patient loyalty, aligning with the broader understanding of brand image as a predictor of customer loyalty in the hospital context. These hypotheses warrant further investigation to deepen our understanding of the relationships between hospital brand image and patient outcomes. Based on above arguments following is hypothesized by:

This leads us to our hypothesis 1:

H1: Hospital brand image directly influences patient loyalty

An individual's behavioral intention, indicating their plan to revisit a facility or program, is a key marker of service enterprise success (Baker and Crompton 2000; Oliver 2014). The Theory of Reasoned Action (TRA) suggests that attitudes toward a specific behavior influence conduct through the intermediary of behavioral intention (Fishbein 1975; Ajzen

1988). Behavioral intentions, such as word-of-mouth promotion, repurchase intention, and price sensitivity, can be influenced by constructs like service quality, patient satisfaction, hospital image, service value, and trust (Tsai, Chen, and Chien 2012).

In the healthcare industry, behavioral intentions are crucial indicators of loyalty and patient satisfaction (Oliver 2014). Studies reveal a connection between behavioral intention and patient satisfaction, representing patients' intentions to return for treatment and recommend the institution to others (Chaniotakis and Lymperopoulos 2009; Choi et al. 2004; Kim et al. 2008; Wu 2011). Behavioral intention is the determination to carry out a specific behavior, often aligning with overt future behavior (Ajzen and Fishbein 1977).

Studies in general tourism show a direct relationship between overall satisfaction and the intention to return. In the healthcare context, patient satisfaction is linked to behavioral intention, influencing patient loyalty directly or indirectly (Hutchinson, Lai, and Wang 2009; Kim and Bang 2015). The relationship between behavioral intention and patient satisfaction, particularly regarding image, is evident in the healthcare industry (Chaniotakis and Lymperopoulos 2009; Choi et al. 2004; Kim et al. 2008a; Lee, Lee, and Wu 2011). Image, representing the overall impression on customers' minds, plays a crucial role in influencing behavioral intention (Dichter 1985; Ladhari, Souiden, and Ladhari 2011).

In the context of medical tourism, a positive association between hospital brand image and behavioral intention is anticipated, as customer satisfaction with services is expected to enhance their attitude and intention to revisit (Kim et al. 2008b; Lee, Lee, and Wu 2011). Loyalty or behavioral intention may be positively impacted directly or indirectly by brand image. Based on above arguments following is hypothesized by:

H2: Hospital Brand Image directly influenced on Behavioral Intention

Customer happiness positively influences brand loyalty, with satisfied customers more likely to become devoted, repeat buyers (Mohsan et al. 2011). Customer pleasure significantly impacts brand loyalty (Maharani 2021). Patient satisfaction, defined as the congruency between expectations and actual care received, is a reflective process that begins with high service standards (Aragon and Gesell 2003; Moliner 2009).

Positive patient satisfaction enhances a hospital's reputation, leading to increased service utilization and market share (Andaleeb 1998). There is a positive association between hospital brand image and patient loyalty (Da Silva and Syed Alwi 2008b).

Satisfaction is a consequence of customer evaluations and outcomes, and it significantly influences loyalty intentions (Vasudevan, Gaur, and Shinde 2006). Brand image has a direct effect on loyalty, but it can also indirectly influence loyalty through customer satisfaction (Merrilees and Fry 2002; Davies and Chun 2002). Patient trust, a key mediator impacted by patient satisfaction, influences brand image's direct and indirect effects on loyalty (Alrubaiee and Alkaa'ida 2011; Andreassen and Lindestad 1998; Hart and Rosenberger III 2004).

Kian & Heng identified factors impacting patient satisfaction and loyalty, showing the mediating role of patient satisfaction (Wu et al. 2011). A positive brand image enhances patient satisfaction, influencing behavioral intention and loyalty (Kian & Heng). Customer happiness and brand image have a positive relationship (Romaniuk and Sharp 2003; Su 2005; Zhi 2005; Lin 2005; Chen 2005; Xu 2011; Shi 2006; Lin 2006; Yang 2006; Zhang 2015). Customer satisfaction and brand value also have a positive relationship (Gu 2005).

Customer happiness, tied to brand image, is a significant factor for success (Lee, Ganesh 1999). A strong correlation exists between brand image and customer satisfaction, leading to loyalty. Service innovation and brand image contribute to customer loyalty and satisfaction (China Unicom). Consumer loyalty is influenced by a positive brand-related experience and contributes to patient behavioral intention and revisit intention (Khan and Rahman 2015). The study emphasizes the direct and indirect effects of patient satisfaction on patient loyalty (Oliver 1997; Lai et al. 2009).

And it studied the positive association between hospital brand image and patient loyalty. Therefore, it can be hypothesized that satisfied patients will be more loyal towards their hospital. Based on above arguments following is hypothesized by:

H3: Patient satisfaction mediates the relationship between Hospital brand image and patient loyalty

Satisfaction strongly influences behavioral intention in the healthcare context (Aliman and Mohamad 2016). Service quality significantly impacts both patient satisfaction and

behavioral intention (Amin and Nasharuddin 2013). Brand image, according to Aaker (1997), comprises various associations such as product characteristics, invisibility, customer benefits, and more, with different associations having varying effects on a brand's image. The behavioral intention of patients is influenced by their perception of a hospital's brand image, making it a crucial factor in patient loyalty (Da Silva and Syed Alwi 2008b).

Patient satisfaction is key to healthcare providers for maintaining relationships, identifying strengths and weaknesses, and financial gains (Aldaqal et al. 2012; Pakdil & Harwood 2005). Past studies show a direct connection between patient satisfaction and behavioral intentions (Cronin Jr and Taylor 1992), with patient satisfaction leading to loyalty (Hutchinson et al. 2009). Customer satisfaction and brand image exhibit strong correlations, and brand image directly influences customer satisfaction (Zhang and Mo, 2015; Chen 2008). Chen (2011) classifies brand association into functional and non-functional, with organizational association divided into corporate ability and social responsibility, showing a favorable relationship with customer satisfaction.

Patient satisfaction influences behavioral intention positively, mediating the relationship between hospital brand image and patient behavior (Wu et al. 2011). Positive brand image directly impacts patient loyalty and enhances the hospital's reputation (Olson and Dover 1979). Behavioral intention is crucial in measuring organizational success, with common indicators being the willingness to return and word-of-mouth impact (Bitner et al. 1994; Lin 2016). Behavioral intention refers to consumers' loyalty and their willingness to recommend a company due to good service (Purwianti and Tio 2017). The study emphasizes the direct and indirect effects of patient satisfaction on behavioral intention in healthcare settings.

Customer satisfaction, following a service interaction, strongly influences intended behavior, and satisfied customers are more likely to stay with the same service provider (Dolnicar, Coltman, and Sharma 2015; Kageyama and Barreda 2018). Behavioral intention, in the context of medical tourism, is linked to the propensity of medical tourists to recommend and return to facilities (Saiprasert 2011). The study underscores the importance of customer satisfaction in improving relationships and aiding client retention (Lee and Park 2019).

Thus, patient satisfaction has a positive effect on behavioral intention. This leads to the formulation of the following hypothesis 4 Based on above arguments:

H4: Patient satisfaction mediates the relationship between hospital brand image and behavioral Intention
Research Model
To determine the effect of hospital brand image on patient loyalty and patient behavioral intention under the mediating role of patient satisfaction analyses were made.
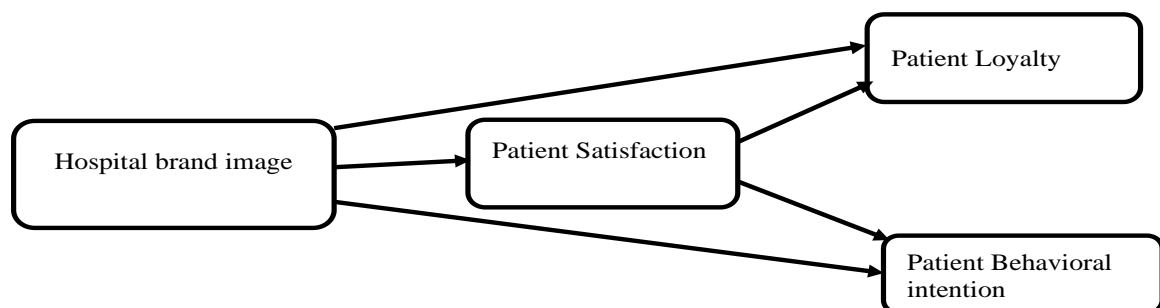

Figure 1: Research Model

RESEARCH METHODOLOGY

Research Design: The current study adopted a descriptive research design, specifically causal research design, to investigate the impact of Hospital Brand Image on Patient Loyalty and Patient Behavioral Intention, with a focus on the mediating role of Patient Satisfaction. The independent variable, Hospital Brand Image, was central to the model, and the research considered the mediating influence of Patient Satisfaction. Questionnaires in hard copy were distributed to collect responses from patients at Railway General Hospital Rawalpindi.
The study was conducted in a field setting, and participants, registered patients, were approached on-site to fill out the questionnaires within their treated environment. Employing a quantitative research approach, the study utilized a cross-sectional time horizon, specifically in December 2022, to ensure completion and analysis within a defined timeframe. This descriptive, deductive research approach is considered mono-method as it solely relies on one type of research

approach, and the data collection involved a snapshot view of the specific phenomenon at that particular time.

There was minimal research interference, and the study was grounded in a field setting, utilizing cross-sectional data collection. The translated questionnaire was employed to accommodate respondents' language preferences, a common practice in research. This approach, being cost-effective, minimizes researcher interference, reducing potential bias from respondents. It allows respondents to comfortably respond to questionnaires at their own pace, ensuring thoughtful and justified responses.

The unit of analysis for this research was the individual, specifically patients registered at Railway General Hospital, Rawalpindi. By focusing on personalized data from patients within the specified area, the study aimed to gather targeted responses, with the patients serving as the unit of analysis to assess the impact of hospital brand image on patient loyalty and behavioral intention, both directly and through the mediating variable of patient satisfaction.

Population & Sampling: The population for this study consisted of patients from Railway General Hospital Rawalpindi, specifically those suffering from acute and chronic diseases. The data collection involved a direct method, with all items translated for visiting patients, and the questionnaires were filled out by the researcher.

Convenience sampling, a non-probability sampling technique, was employed for data collection. This technique was chosen for its cost-effectiveness, ready availability, and easy accessibility, aligning with the study's objectives. A total of 256 respondents participated in the study, with 109 males and 147 females. Among them, 141 patients were uneducated and admitted to the hospital.

The research instrument, developed based on the conceptual model, utilized measures adapted from existing literature with slight modifications for the specific context. The scales included three items for Hospital Brand Image, four items for Patient Satisfaction, three items for Patient Loyalty, and three items for Patient Behavioral Intention. These scales were adapted from various studies, such as Hsieh and Li (2008) for brand image, Panjakajornsak (2008) for satisfaction, Kondasani and Panda (2015) for behavioral intention, and Choi et al. (2004) for repeat behavior indicators. Pretesting was conducted to establish the face validity of the measurement

scales. The collected data were analyzed using SPSS, and Smart PLS was utilized to examine the mediating role of patient satisfaction in the associations between hospital brand image, patient loyalty, and behavioral intention.

Demographics: The basic demographical information included in this research are included after utilization previous researches. The questions about demographical information were included at the end of questionnaire. The demographical part used a nominal scale being in the start of the questionnaire. It involved basic information of the respondent such as Duration, age, gender and education. Respondents were given an open full hand either if they tell their name or hide.

Scales and Measures

Hospital Brand Image: The construct of hospital brand image was measured using three items modified from the scale proposed by (Hsieh and Li 2008). Respondents used a five-point Likert scale (1 = "strongly disagree" to 5 = "strongly agree").

Patient Satisfaction: Patient satisfaction was measured using the four-item version of the scale developed by (Panjakajornsak 2008) in this study. Participants provided responses on a five-point Likert scale.

Patient Loyalty: Patient loyalty was measured using the three items of the scale produced by (Kondasani and Panda 2015). Responses were recorded on a five-point Likert scale.

Patient Behavioral Intention: Patient behavioral intention was measured using the three items of the scale developed by (Choi et al. 2004) in this study. Participants indicated their agreement on a five-point Likert scale.

Control Variables: One-way ANOVA will be performed to control for variations in dependent variables, if any.

Data Analysis Procedure

Data will be analyzed using SPSS, and the following procedures/tests will be carried out:

Frequency Distribution: To understand the distribution of responses.

Descriptive Statistics: To provide a summary of key characteristics of the data.

Reliability Analysis: To assess the internal consistency of the measurement scales.

One Way ANOVA: For controlling variations in dependent variables.

Correlation Analysis: To explore relationships between variables.

Regression Analysis: To examine the strength and nature of relationships between variables.

RESEARCH ANALYSIS

The total 256 respondents were included in the study. All respondents were registered patients in Railway General Hospital of Rawalpindi. 109 are males and 147 are females. As shown in table 1

Table 1 Gender Demographic Analysis

Gender	Frequency	Percent
Male	109	42.6
Female	147	57.4
Total	256	100.0

As looking on the age profile 10.2 percent (n=26) respondents belong to the age group 01-18 years, 22.7 percent (n=58) respondents belong to age group 19-30 years, 18 (n=46) percent respondents were from age group 31-45 years, 23.4 percent (n=60) respondents were from the age group 46-60 years and 25.8 percent (n=66) respondents were from the age group above 60 years. All respondents were registered in Railway General Hospital of the Rawalpindi. Data was collected from the parents of 1-12 years respondents. As shown in table 2

Table 2 Age Demographic Analysis

Sr.	Variable	Frequency	Percent
1	1-18 years	26	10.2
2	19-30 years	58	22.7
3	31-45 years	46	18.0
4	46-60 years	60	23.4
5	60 and above	66	25.8

As looking up on education profile of the patient's 15.6 percent (n= 40) have done matriculation, 21.5 percent (n=55) have completed intermediate, 7.4 percent (n=19) have completed bachelor's degree while 0.4 percent (n=1) have completed the education masters and above and 55.1 percent (n=141) are uneducated. Results show that out of the sample of 256 participants in which 7.40% of the individuals had done graduation followed by individuals who were Masters and those who had completed MS/Mphil with 0.40% respectively. As shown in table 3

Table 3 Qualification Demographics Analysis

S	Variable	Frequency	Percent
1	Matric	40	15.6
2	Intermediate	55	21.5
3	Bachelor	19	7.4
4	Master	1	.4
5	Uneducated	141	55.1

One-way ANOVA was performed in order to control the variations in patient loyalty and patient behavioral intention on the basis of demographic variables. Results revealed (see table 5.2.1) no significant differences in mean values of both patient loyalty and involvement in patient behavioral intention among the groups on the basis of age group, education level. Results revealed significant differences in mean values of both patient loyalty and involvement in patient behavioral intention among the groups on the basis of gender and duration and it will control during regression**.** As shown in table 4

Table 4 Control Variables Analysis

Sr	Demographics	Patient loyalty		Patient Behavioral Intention	
		f statistics	p value	f statistics	p value
1	Gender	6.732	0.26	4.875	.028
2	Age	1.148	.331	1.178	.321
3	Qualification	.745	.552	.552	.562
4	Duration	32.184	0.000	26.209	0.000

Reliability of each scale was measured in table 5 using Cronbach's alpha. We found Cronbach's alpha (α) reliabilities for hospital brand image = 0.963, patient satisfaction = 0.995, patient behavioral intention = 0.998 and patient loyalty = 0.999 in reliability analysis.

Table 5 Reliability Analysis

Sr	Variable Name	Mean	Cronbach's Alpha
1	Hospital Brand Image	4.8177	0.963
2	Patient Satisfaction	4.8350	0.995
3	Patient Behavioral Intention	4.8320	0.998
4	Patient Loyalty	4.8372	0.999

The relationship between the variables is revealed through a correlation analysis of the study variables. It indicates whether there is a strong or weak association between the variables. Chronbach's alpha, according to Parasuraman et al. (1991), is a de facto indicator of convergent validity. One question is used to gauge perceptions of overall hospital brand image. A significant connection with a value of 0.68, most significant connection with a value greater than 0.7 and a 2-tailed significance level of less than 0.01 is found. This shows that the measuring scale is convergently valid. Additionally, the following correlation analysis was completed. Correlation coefficients of the variables are presented in table 6.

Table 6 Correlation Analysis

Sr	Variable Name	1	2	3	4
1	Hospital Brand Image	1			
2	Patient Satisfaction	.953**	1		
3	Patient Behavioral Intention	.946**	.965**	1	
4	Patient Loyalty	.949**	.984**	.963**	1

Note: * p<.05, ** p<.01

Results of the correlation analysis reveal that among the control variables, monthly income has a significant positive correlation with Hospital brand image has been found to have significantly positive association with Patient Behavioral Intention (r = .965, p = < 0.01, 2-tailed) and patient loyalty (r =.963, p-value = < 0.01, 2-tailed). A positive association between patient satisfaction and patient behavioral intention can also be observed (r = .965, p = < 0.01, 2-tailed). A positive association between patient satisfaction and patient loyalty can also be observed (r = .984, p = < 0.01, 2-tailed). The results show that there is a strong positive correlation between HBI and BI (0.965** indicates that the correlation is highly significant. .963**** indicates that the correlation is highly significant. .946** indicates that the correlation is highly

significant. Based on the this, you can see that the strongest relationship is between hospital brand image and patient loyalty, with a correlation coefficient of .985**. This suggests that there is a moderate positive relationship between these two variables. Also based on the this, you can see that the strongest relationship is between hospital brand image and patient behavioral intention, with a correlation coefficient of .965**. This suggests that there is a moderate positive relationship between these two variables. Results of the correlation analysis reveal that among the control variables.

The regression analysis, specifically using the Hayes process model no. 14, was employed to ascertain the quantitative relationships between various study variables. For Hypothesis 1, indicating a direct positive relationship between hospital brand image (HBI) and patient loyalty (PL), the results revealed a significant relationship (β = 0.1277, p = 0.0016). The p-value of 0.0016 suggests a substantial link between HBI and PL, supporting Hypothesis 1. Similarly, Hypothesis 2, asserting a positive impact of HBI on patient behavioral intention (BI), was supported by significant positive relationship results (β = 0.3008, p = 0.0000).

In line with Hypothesis 3, which posits that patient satisfaction mediates the relationship between HBI and patient loyalty, the analysis showed that patient satisfaction indeed acts as a mediator. The β-value was 0.9135, with a confidence interval (CI) from 0.5722 to 1.3005, indicating mediation. Hypothesis 3 is therefore supported.

Furthermore, for Hypothesis 4, suggesting that patient satisfaction mediates the relationship between HBI and patient behavioral intention, the analysis confirmed the mediating role of patient satisfaction. The β-value was 0.7169, with a CI from 0.2649 to 1.2213. The p-value for the regression model was 0.0026, signifying a significant relationship between HBI and BI through patient satisfaction. Hypothesis 4 is consequently supported, affirming the mediating role of patient satisfaction in the relationship between hospital brand image and patient behavioral intention.

Table 7 Regression Analysis

Variables	b	se	t	p
HBI → PL	.1277	.0400	3.1956	.0016
HBI → BI	.3008	.0554	5.4277	.0000
HBI → PS → PL	.9135	.1852	3.1956	.0000
HBI → PS → BI	.7169	.2443	5.4277	.0026

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Bootstrap results for indirect effect	Indirect effect	LL 95% CI	UL 95% CI
	.9135	.5722	1.3005
	.7169	.2649	1.2213

N=256, *p<.05, **p<.01, ***p<.001, LL=Lower limit, UL=Upper limit, HBI= Hospital Brand Image,

PL= Patient Loyalty, BI=patient behavioral intention, PS=Patient Satisfaction

Table 8 Hypotheses Testing

Hypotheses	Remarks
H1: Hospital brand image directly influences patient loyalty	Supported
H2: Hospital Brand Image directly influences Behavioral Intention	Supported
H3: Patient satisfaction mediates the relationship between hospital brand image and patient loyalty	Supported
H4: Patient satisfaction mediates the relationship between hospital brand Image and behavioral Intention	Supported

DISCUSSION

The discussion highlights the integral role of Hospital Brand Image (HBI) in shaping patient satisfaction, loyalty, and behavioral intentions within the healthcare industry. The study delves into the complex relationships among HBI, Patient Satisfaction (PS), and loyalty, emphasizing the need for healthcare businesses to strategically manage their brand image to thrive in a competitive environment.

The findings reveal that HBI significantly influences patient loyalty both directly and indirectly. Through enhanced perceived service quality, HBI contributes to increased patient satisfaction and intent to return. The study underscores the importance of brand image as a tangible asset linked to the brand, impacting customer perceptions and influencing revisit decisions. Management strategies focused on aspects like service quality, trust, and reputation are crucial for achieving positive behavioral intentions in favor of the hospital. The structural model analysis, based on a consumer group at Railway General Hospital Rawalpindi, demonstrates the reliability and validity of the measurement results. The strong associations between HBI, patient satisfaction, and patient loyalty are supported by significant correlation coefficients and regression analysis results. The study establishes that HBI directly influences patient loyalty, supporting the hypothesis that a positive brand image positively impacts consumer

loyalty. This finding aligns with existing research highlighting the favorable relationship between brand image and customer loyalty in various contexts. Moreover, the study explores the impact of HBI on behavioral intention, revealing both direct and indirect effects. The direct relationship emphasizes the crucial role of brand image in creating service quality, patient satisfaction, and loyalty. The indirect pathway involves a sequence where a positive HBI leads to elevated service quality, increased customer happiness, and, consequently, enhanced behavioral intention.

The discussion emphasizes the mediation role of patient satisfaction in the relationship between HBI and both patient loyalty and behavioral intention. This underscores the significance of continuously assessing and addressing patient satisfaction to boost loyalty and revisit intentions. The study suggests practical implications for hospital managers, urging them to employ various marketing methods to build and maintain a positive HBI, thereby gaining a competitive edge in attracting and retaining patients.

In conclusion, the study offers valuable insights into the intricate dynamics of HBI, patient satisfaction, and loyalty in the healthcare sector. It provides a comprehensive framework for hospital administrators and managers to understand and leverage these relationships for organizational growth and success.

CONCLUSION

The study concludes that a positive hospital brand image significantly influences patient loyalty and behavioral intention. Four supported hypotheses underscore the importance of brand image in shaping patient perceptions and revisit intentions. The findings emphasize the indirect impact of brand image through patient satisfaction on loyalty and behavioral intention. For services producers, this suggests a strategic focus on building brand image through patient satisfaction. The study's contribution lies in advancing consumer behavior and branding theories, providing practical insights for healthcare providers in enhancing competitiveness and fostering customer loyalty in the medical tourism industry. Notably, the negative correlation between brand image and behavioral intention underscores the pivotal role of patient satisfaction in simultaneously improving both aspects.

Limitations and Future Research: This study, conducted in Pakistan, has limitations such as its single-country focus and cross-sectional design with respondent intention as the outcome variable. Future research should broaden the scope to include medical tourists from various countries, employ longitudinal studies to assess actual behavior, and incorporate qualitative methods like interviews and focus groups. Additionally, expanding the sample to include diverse age groups and exploring the impact of brand image and benefits on customer happiness, loyalty, and trust are suggested. The study identifies gaps in the literature on the relationships between health brand image, patient satisfaction, and loyalty, emphasizing the need for more comprehensive frameworks and integrated analyses in future research. Bias may be present due to the convenience sampling method, and emotional-based questions could influence responses.

Recommendations: Future studies should be conducted within specific hospitals to ensure that the hospital logo itself does not adversely impact patient loyalty. Hospitals may consider such investigations as part of their brand strategy, ensuring patient welfare through careful evaluation before selecting a particular hospital. Similar studies in other industries have been conducted by researchers to identify potential factors affecting customer loyalty and behavioral intention. Hospitals can benefit from cross-industry comparisons to glean insights and strategies from successful loyalty-building practices in different sectors. Hospital branding strategy is crucial for building patient trust, enhancing internal consistency, and developing a patient-centered image to improve overall brand image. It is recommended that hospitals invest in developing a strong brand identity to meet patient needs effectively. Hospitals should focus on a patient-centric approach to determine whether patient satisfaction and behavioral intention can translate into loyalty, a key factor in hospital performance. Regular assessments of patient satisfaction with services and quality, along with their intention to return for future medical visits, can provide valuable insights. Differentiating the hospital brand is essential to capture the attention of the target audience. Hospitals should identify key components of their brand's unique value proposition and use them to define the brand, thereby setting themselves apart in the competitive healthcare landscape. Hospitals should consider their brand as a valuable asset, encapsulating

capabilities, successes, and objectives. Consistency in brand identity is crucial for attracting satisfied clients, ultimately leading to patient loyalty and a positive behavioral intention to revisit the hospital. Consistent branding significantly influences how people perceive the hospital, impacting the caliber of employees hired, the volume of recommendations received, and the number of patients choosing the hospital. Devoting resources to building and ensuring brand consistency can lead to increased patient satisfaction and loyalty. To improve results, hospitals should focus on enhancing the overall patient experience. Patient compliance with treatment suggestions is more likely when positive feelings about the doctor and care received are present. While patient satisfaction should not be the sole driver of outcomes, it should be considered a balancing factor in achieving high-quality care. In summary, hospitals should conduct focused studies, adopt a patient-centric approach in branding, differentiate their brand, consider it as a valuable asset, ensure brand consistency, and prioritize the improvement of the patient experience for long-term success and loyalty.

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