



Comparing Country-of-origin Image (COI) between Trust Dimension and Purchase Intention in Dental Tourism

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Abstract

The development of a country makes a difference in people's perception of country-of-origin image (COI). As a result, consumers make different evaluations on services from different countries. For developing countries, it is more difficult to promote the dental tourism industry than developed countries. This experimental study demonstrates the comparison of COI between trust dimension and purchase intention in dental tourism. 65 participants were randomized and separated into three groups: Singapore, Thailand and India. Independent samples t-tests were performed in order to gain more understanding in the trust dimension and customers' purchase intention. The findings indicate that human factor has the highest impact on respondents' trust in the quality of services in a country followed by process, facilities, and brand of organization. For developing countries with a low COI, if we create a strategy to increase trust in professional service quality by giving service providers' information such as human factor, processes, facilities, branding of organization, we can increase customers' purchase intention in dental tourism industry.

Keywords

Trust, Purchase intention, Dental tourism

Introduction

The term "dental tourism" describes tourists traveling overseas to obtain dental care services such as dental implants, crowns, or veneers. It may combine dental treatment with or without visiting tourist attractions of a country. The majority of medical tourists come from the industrialized countries of the world, especially Japan, America, Canada and Australia, where the cost of dental treatment is very high and waiting times for some treatments may in some cases be months and even years (Connell, 2006; Kesar & Mikulić, 2017).

Establishing Thailand as a dental tourism hub requires strategic planning in marketing communication. According to the "Thailand Medical Hub" policy, Thailand is positioning itself as a dental hub of Asia (Department of Health Service Support, 2016), while other countries such as India, Singapore and Malaysia also have the same policy. Although Thailand has a huge advantage in providing dental services ranging from the quality of the dentists and staffs to the quality of service that meets the world standard, Thailand has no unique marketing communication to distinguish itself from competitors in this area. For example, the study revealed that medical travel agents do the marketing in each target country which is based on their professional background and knowledge about those people's behavior (Rerkrujipimol & Assenov, 2011). To enforce competitiveness of Thailand as a dental hub of Asia, a concept of country-of-origin image (COI) should be considered because COI influences the way potential customers perceive the quality of products and services (Suter, Borini, Floriani, da Silva, & Polo, 2018). COI is influenced by a country's level of development. COI involves a culmination of trust from foreign tourists which requires time and strategic planning. For developing countries such as Thailand and India, it is more difficult to gain trust from dental tourists than developed countries such as Singapore. The question is "What should be the factor for developing countries to improve competitiveness in the dental tourism industry?" To achieve this challenge, this study aims to analyze and capitalize on potential key elements that affect purchase intention in dental tourism to build trust for dental service.

Literature Review

Relationship between the degree of development of a country and country-of-origin image (COI)

Many ranking countries in the world using a variety of matrices such as economy, politic, health cares, happiness for measuring competitiveness of countries. However, some reports show the same results. For example, the 2020 Index of Economic Freedom reported that Singapore's economic freedom score was 89.4, making it the world's freest economy in the world. However, the index ranked Thailand 43 and India 120. Compared to the Overall Best Countries Ranking by the U.S. News and World Report (2020), Singapore was ranked

16 followed by India at 25 and Thailand at 26 out of 80 surveyed countries. We speculate that countries, which have varying degrees of development, may have an effect on people's perception of quality of healthcare differently. As a result, early studies on the effect of country of origin indicate that consumers make different evaluation on products from different countries (Bilkey & Nes, 1982) and many studies reported the same results in different economic, political, innovative, and cultural contexts (Baughn & Yaprak, 1993; Pereira, Hsu, & Kundu, 2005; Phau & Prendergast, 2000).

Relationship between country-of-origin image (COI) and trust dimension

The reason why researchers consider “trust” as an effect of COI is because trust is the foundation of commerce and plays an important role in professional services (Bagdoniene & Jakstaite, 2009; Crutchfield, 2001; Garbarino & Johnson, 1999; Swan & Nolan, 1985). Among marketing researchers, Morgan and Hunt (1994) regard trust as an essential factor for a successful relationship between customers and providers. Trust has been defined both in connotative and evaluative terms, such as “the expectations held by the consumer that the service provider is dependable and can be relied on to deliver on its promises” (Sirdeshmukh, Singh, & Sabol, 2002, p.17).

The organizational trust model by Mayer, Davis, and Schoorman (1995) is a model which suggests that factors of trustworthiness are ability, integrity, benevolence, and propensity (Figure 1).

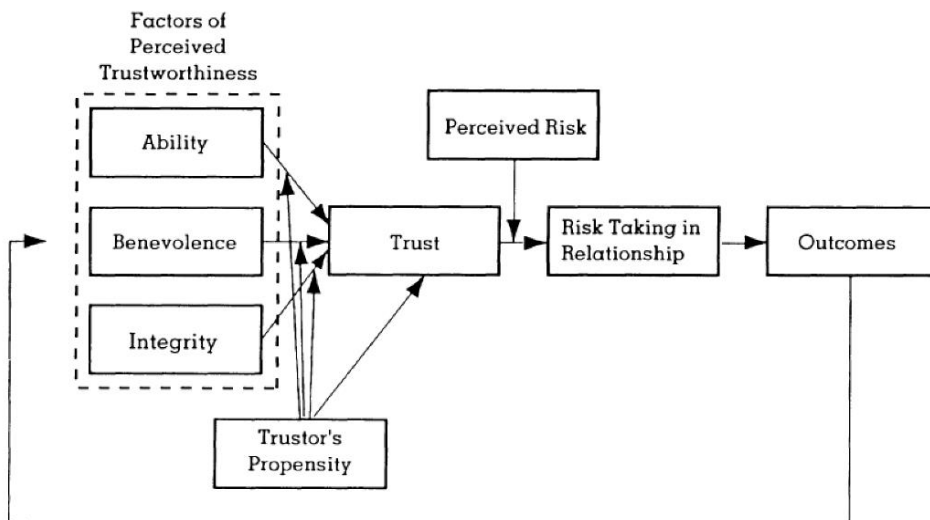


Figure 1 Organizational trust model (Mayer et al., 1995)

“Trust dimension” was introduced as an intervening variable. This mediating variable is very important because it demonstrates the existing relation between COI and purchase intention.

Regarding to professional service, attributes of the trust dimension were described by the concept of customer satisfaction and services marketing mix (Yelkur, 2000) . Professional service providers have specialized knowledge such as law, medicine, or accounting. This research explained four key factors in the service industry.

1. People means everyone who is involved in the product or service in both direct or indirect way to get in touch with the customers. For this study, we focused on dentists which are the main service provider to customers in the frontline.

2. Process includes direct activities and indirect activities. Direct activities add value at the customer interface as the consumer experiences the service such as the dental treatment process from the beginning until the outcome. Many processes are supported by indirect activities, often known as back-office activities, which support the service before, during and after it has been consumed such as a pickup service.

3. Physical evidence means the environment in which the service is delivered, where the firm and customer interact, and any tangible components that facilitate performance or communication of the service such as facilities, medical devices.

4. Organizational brand serves to describe an organization as a whole. It aims to create a consistent corporate image. It also reflects the trust of quality of service.

Relationship between trust dimension and purchase intention.

According to the medical tourism market, as competition among countries becomes keener, online marketing has turned out to be the most widely used marketing tool because buyers do not have face-to-face contact with dentists and are not able to take a substantial look at their services. Thus, it becomes more important to establish mutual trust. When it comes to online marketing communication, dental service providers have begun to realize the importance of trust as a core issue (Ganguly, Dash, & Cyr, 2009; Lin & Lu, 2010).

Customers’ purchase intention is a favored output that the business owners expect. We can measure it though a customer’s willingness to purchase, confidence to purchase, recommendation to others etc. The organizational trust model also provides a better understanding relationship between trust in the quality of the service (trust dimension) and customers’ behavior intention. In the professional service industry, high uncertainty and information asymmetry play an important role in customer’s purchasing decisions meaning that customers take a risk to get professional service with different amounts of information. As a result, customers may have different interpretations. For example, customers may define the problem with difficulty as they cannot exactly explain what they want from professional service providers and are not able to evaluate the benefit received from services

(Crooks et al., 2015; Han & Hyun, 2015; Lu, Fan, & Zhou, 2016). These demonstrated several reasons why someone may have considerable difficulty making decisions. Therefore, trust is one of the most effective methods of reducing uncertainty and misunderstanding. Trust is the goal of a professional service marketing communication strategy.

In conclusion, this study tried to explore the relationship of COI, trust dimension and purchase intention (Figure 2).

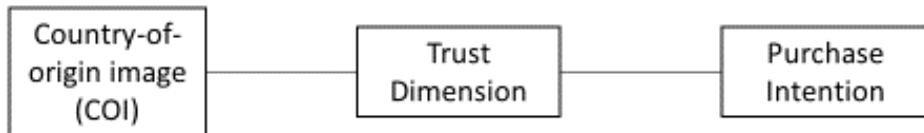


Figure 2 Relationship between COI, Trust Dimension and Purchase Intention

Methodology

Design

We used an experimental research approach to answer our research questions. Dental tourism was used as representative of the professional service industry. Matched pair design was performed to conduct this research (Thyer, 2012). Matched pair design helps to reduce participant variables because the researcher has tried to pair up the participants so that each condition has people with similar abilities and characteristics such as gender, nationality (McLeod, 2017). International students (age 18-25) who had never visited Singapore, Thailand or India were recruited to participate in the study. These countries were chosen because they have the same medical hub policy. We randomized participants and separate them into three groups. The following steps were then taken: (1) Singapore's image was provided to group 1, (2) Thailand's image was provided to group 2, and (3) India's image was provided to group 3. Then, we conducted a pre-test to find which dimensions were the most influential to COI. Every participant was asked to answer questions about overall COI. Next, half of each group read the same dental service information (human factor, process, and facilities factor) and answered four questions related to trust dimension and three questions related to purchase intention. The control groups did not receive any dental service information but still answered questions related to purchase intention. The surveys were distributed to the international students online community at Chungnam National University, South Korea.

Sampling plan

A sample is a subset of the population (Sekaran & Roger, 2010). The literature has outlined several methods for determining the sample size. Many studies suggest that each

parameter should have at least 10 participants. In other words, the most acceptable way is a 10:1 ratio (10 samples for one variable). Some have proposed that a sample size larger than 30 and less than 500 can be appropriate (Dong & Maynard, 2013; Grimshaw et al., 2000). The sample size should be several times (preferably ten times or more) as large as the number of variables in a multivariate study (including multiple regression analysis) (Batistatou, Roberts, & Roberts, 2014; Furtak, Seidel, Iverson, & Briggs, 2012; Thyer, 2012).

Considering the above, the quantitative number of variables times ten and above is sufficient to meet the (no. of variables x 10) criteria. This study has eight variables: the degree of development of a country, country-of-origin image (COI), trust dimension and purchase intention. We calculated the minimum sample size by no. of variables x 10 = 3 x 10 = 30

80 international students (age 18-25) who had never visited Singapore, Thailand, or India before were recruited to participate in this study. International students were chosen because they represent different ethnic identities and therefore were believed to reduce bias. Moreover, the Internet has become an important tool for education and information-sharing. Participants at this age are able to get data from online platforms and make decision based on that data. Unfinished survey experiments were excluded. The total sample size was 65 and was divided equally into three groups: (1) Singapore image was provided to pair 1 (2) Thailand image was provided to pair 2, and (3) India image was provided to pair 3. Then, the participants of each pair were divided in half and gain more dental information. Next, participants answered four questions about the trust dimension. The researcher did not provide any further information regarding dental services for control groups (Figure 3). Demographic characteristics of the participants are shown in Table 1.

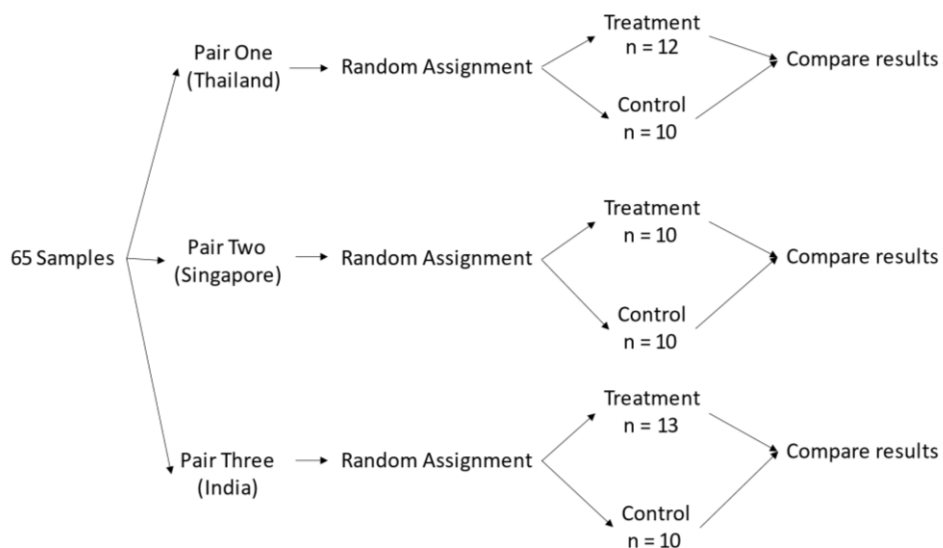


Figure 3 Experiment Matched Pair Design and Sampling Plan

Table 1 Demographic Characteristics of the Participants

Variables		Pair one (Thailand)		Pair Two (Singapore)		Pair Three (India)	
		Treatment	Control	Treatment	Control	Treatment	Control
Gender	Male	6	5	5	5	7	5
	Female	6	5	5	5	6	5
Nationality	Asian (South Korean, Japanese, Chinese)	6	4	4	4	6	4
	European (British, Swedish, German)	3	3	3	3	4	3
	American	1	1	1	2	1	2
	Australian	2	2	2	1	2	1
Total		12	10	10	10	13	10

Variables and measurement

A Likert Scale is an ordinal psychometric measurement of attitudes, beliefs, and opinions. The responses were easily quantifiable and compute subjective value by mathematical analysis. This study employed a Likert-type five-point bipolar scale to capture overall COI, trust dimensions and purchase intension. We summarize our variables, operational definition, attributes and research tool in Table 2.

Table 2 Summary of Variables, Operational Definition, Attributes and Research Tool

Variables	Operational Definition	Attributes	Research Tool
Country-of-origin image (COI)	Overall perception to the country	Country-of-origin image (COI)	Do you have positive or negative perception to overall country's image?
Trust dimension	Trust in quality of the service	Human factor(T1)	Dentist with world class degree affect my trust in quality of the service
		Process (T2)	Standard of treatment process affect my trust in quality of the service
		Facilities factor (T3)	Innovative facilities affect my trust in quality of the service
		Organizational brand (T4)	Brand image of dental hospitals/clinics affect my trust in quality of the service
		Overall trust in quality of the service (T_All)	- How much you trust in quality of the service you increase after getting this information?
Purchase intention Behavior	Favor Behavior	Willingness to purchase (P1)	I would like to purchase this service when I have a chance soon.
		Recommend (P2)	I will introduce this brand's product to my friends
		Confident in service (P3)	I'm confident of purchasing this brand's product regardless of time

Results

Descriptive statistics were performed to quantitatively describe overall COI (Table 3). Regarding the overall COI comparison of each country, the results demonstrate that the average perception of overall COI was significantly higher in Singapore (M = 4.35, SD = 0.59) than were those in Thailand (M = 3.49, SD = 0.61) and in India (M = 2.70, SD = 0.88). Then, one-way analysis of variance (Table 4) and Scheffe post-hoc (Table 5) were performed to find out differences in overall COI of each country.

Table 3 Means and Standard Deviations of Attributes in Overall COI by Country

	Country	n	M	SD
Overall	Thailand	22	3.49	.61
COI	Singapore	20	4.35	.59
	India	23	2.70	.88
	Total	65	3.48	.91

Table 4 One-way Analysis of Variance of Overall COI

	Sum of squares	df	Mean Square	F	Sig.
Between Groups	29.29	2	14.64	30.76	.000
Within Groups	36.66	63	.48		
Total	65.95	65			

Table 5 Multiple Comparisons (Post-hoc) of Emotional Dimension and Overall COI

Dependent Variable	(I) Country	(J) Country	Mean Difference (I-J)	Std. Error	Sig.
Overall COI	Thailand	Singapore	-.86*	.19	.000
		India	.79*	.18	.000
	Singapore	Thailand	.86*	.19	.000
		India	.79*	.21	.000
India	Thailand	-.79*	.18	.000	
	Singapore	-1.65*	.21	.000	

One-way ANOVA was conducted to compare the differences overall COI in Singapore, Thailand and India. There were significant differences in overall COI, $F(2,77) = 30.76$, $p = 0.000$ (Table 3) at the $p < .05$ level. In addition, Post hoc analyses using the Scheffe post hoc criterion for significance indicated that the average perception of overall COI was significantly higher in Singapore ($M = 4.35$, $SD = 0.59$) than were those in Thailand ($M = 3.49$, $SD = 0.61$) and in India ($M = 2.70$, $SD = 0.88$), $F(2,77) = 30.76$, $p = 0.000$ (Table 4). These finding demonstrate that the degree of development of the countries reflects the quality of overall performance, productivity and quality of those countries.

Then, t-tests were performed to investigate the differences between experimental groups and control groups of each country. According to the t-test analysis, we analyzed differences in trust quality of professional service (trust dimension) and customer's purchase intension (Table 6).

Table 6 Independent Samples Test in Trust Dimension and Purchase Intention by Countries

	Country	Experimental group			Control group			T	Sig.
		n	M	SD	n	M	SD		
Trust Dimension	Thailand	12	3.42	.95	10	2.55	.52	2.88	.007
	Singapore	10	3.60	.53	10	3.50	.53	0.43	.673
	India	13	3.23	.60	10	2.00	.47	5.34	.000
Purchase Intension	Thailand	12	3.49	1.14	10	2.18	.38	3.69	.001
	Singapore	10	4.63	.25	10	3.80	.32	6.50	.000
	India	13	2.95	.79	10	2.20	.42	2.70	.013

Participants who received Thailand dental information had a higher trust in quality of dental service (trust dimension) ($M = 3.42$, $SD = 0.95$) than the control group who did not receive any information ($M = 2.55$, $SD = 0.52$), $t(35) = 2.89$, $p = .007$). Similarly for the India case, the experimental group had higher trust in quality of dental service ($M = 3.2$, $SD = 0.60$) than the control group ($M = 2.00$, $SD = 0.47$), $t(18) = 5.33$, $p = 0.000$) There was no significant difference in Singapore between experimental group and control group. As a result, providing high dental performance information helps customers to gain trust in the quality of dental service of developing countries.

According to the results mentioned above, the overall COI tends to be an important factor which affects several other variables. For example, when we treated respondents by providing dental information, we found that there is no significant effect on trust in dental service quality in Singapore which has the highest overall COI. The finding demonstrates that developed countries with high COI could have a positive effect on trust in the professional service of those countries. However, for developing countries (e.g. Thailand and India) with

lower COI when compared to Singapore, we found that if we treated respondents by giving dental information to increase trust in dental service quality, purchase intention of respondents increased.

In addition, there was a statistically significant difference in customer's purchase intention between the experiment group and the control group. For example, participants taking Thailand dental information had higher purchase intention ($M = 3.49$, $SD = 1.14$) than the control group who did not get any information ($M = 2.18$, $SD = 0.38$), $t(35) = 3.69$, $p = 0.001$). The findings indicated that providing high dental performance information helps customers to gain purchase intention of dental service.

Next, in order to gain more understanding in the trust dimension and customers' behavioral intention. Data from treatment group from Thailand, Singapore and India were analyzed. Descriptive statistics were performed in each attribute of the trust dimension (Table 7).

Table 7 Means and Standard Deviations of Attributes in Trust Dimension by Countries

	Country	n	M	SD
Trust in dentist (T1)	Thailand	12	4.23	.59
	Singapore	10	4.60	.52
	India	13	2.92	.76
	Total	35	3.90	.85
Trust in Process (T2)	Thailand	12	3.42	.58
	Singapore	10	4.30	.48
	India	13	2.62	.87
	Total	35	3.44	.94
Trust in Facility (T3)	Thailand	12	3.35	.56
	Singapore	10	4.00	.47
	India	13	2.54	1.05
	Total	35	3.30	.86
Trust in Brand (T4)	Thailand	12	3.58	.58
	Singapore	10	3.60	.52
	India	13	2.62	.87
	Total	35	3.33	.77

The results demonstrate that dentist (T1, $M = 3.90$, $SD = 0.85$) got the highest score on respondents' trust in quality of each country followed by process (T2, $M = 3.44$, $SD = 0.94$), facilities (T3, $M = 3.30$, $SD = 0.86$) and brand (T4, $M = 3.33$, $SD = 0.77$) (Table 5). This finding indicates that dentists may have the possibility to gain trust from respondents and reflects the quality of each county followed by process, facilities, and brand

of organization. The possible reason behind this could be explained by the concept of customer satisfaction and services marketing mix (Yelkur, 2000). Yelkur (2000) suggested that the most important factor that impacts customer satisfaction is an actual service provided by frontline employees.

Discussion

Our objective was to compare COI between trust dimension and purchase intention. It was speculated that countries which have varying degrees of development may affect people's perception of COI differently. As a result, early studies on the effect of COI indicate that consumers make different evaluations on products from different countries (Bilkey & Nes, 1982). The finding shows that Singapore has a significantly higher perception of overall COI than developing countries. A possible explanation is that the degree of development of the countries reflects the quality of overall performance, productivity, and quality of those countries. The degree of development of the countries affects consumer's perception of a country and country of origin image (COI) directly.

According to trust dimension descriptive statistic, the results demonstrate that dentist has the highest impact on respondents' trust in the quality of each country followed by process, facilities, and brand of organization. The possible reason behind this could be explained by the concept of customer satisfaction and services marketing mix (Yelkur, 2000). Yelkur's study suggested that the most important factor that impacts customer satisfaction is an actual service provided by frontline employees.

Independent t-tests were performed in order to gain more understanding regarding the trust dimension and customers' purchase intention. The results show high dental performance information help customers to gain trust in the quality of dental service of developing countries (e.g. Thailand, India) but not in a developed country (e.g. Singapore). Singapore is a developed country which has the highest performance in Southeast Asia. With good COI, people believe in the quality of productivity and service of Singapore. Thus, providing dental information of Singapore does not significantly change the trust dimension. For developing countries which have inherently been associated with low trust in the quality of dental service, providing comprehensive dental performance information helps customers gain trust in the quality of dental service. Furthermore, providing high dental performance information helps customers to gain purchase intention of dental service in every country. The results confirm the interaction between trust dimension and purchase intention, meaning that people who have a high perception of trust in the quality of dental service tend to have high purchase intention. This finding supports the organizational trust model suggesting that factors of perceived trustworthiness are ability, integrity, benevolence, and propensity (Mayer, Davis, & Schoorman, 1995). When people have sufficient trust in the quality of the service, they will be confident to take a risk and purchase the service afterward.

Theoretical implication

According to the “ trust dimension” , we proposed four attributes relevant for professional service industry which are (1) human factor, (2) process, (3) facilities factor, (4) organizational branding. Human factor has the highest impact on customers’ trust in the quality of services followed by process, facilities, and brand of organization. The possible reason behind this could be explained by the concept of customer satisfaction and services marketing mix (Yelkur, 2000). Yelkur’s study demonstrates that the most important factor that impacts customer satisfaction is an actual service provided by frontline employees. This means that quality of service comes together with the quality-of-service provider. The result emphasizes the linkage of trust theory, satisfaction and services marketing theory which helps us to better understand important insights of customers’ behavior in service perspective.

Practical implication

Traditionally, COI is synonymous with “ made-in” country, which is implicated in the productivity and quality of goods and services of that country (Reid, 2008; Sharma & Patterson, 1999). COI reflects the overall image of that country to the world. Establishing COI is very challenging and takes a long time because it requires improvement in every aspect of the nation such as economic, education, and public policy. In addition, COI is subjective and is based on individual perception. It is difficult in regard to service industry because it is impossible to print “made-in” on service. In the case of developing countries, COI may lead people to perceive the lower quality of the service than that in developed countries. This is an undeniable disadvantage for developing countries. People tend to delay a decision if they do not trust the COI of the country.

Nonetheless, effective strategic marketing communication may help developing countries significantly boost their service industries. Strategic marketing communication should focus on the trust dimension as a key message. Our research proves that improving the trust dimension affects purchase intention rate in developing countries which have low COI. We found that that a service provider has the highest impact on customers’ trust in the quality of services followed by process, facilities, and brand of organization. To be more specific, our suggestions for developing countries in order to gain more trust are: (1) Service providers who have certified from well-known organizations or universities will help increase customers’ trust in quality of service. (2) Achieving world-class standards in process and facilities of the service (e.g. ISO, JCI) will assure customers in aspects of outcome and safety. Following these recommendations, the branding of the organization will be more positive and reflect a proper appreciation of the distinctive character of professional.

Limitations and future research

Regarding the sampling procedure, the sample size and ages of the sample population are not sufficient to generalize the conclusions. The use of international students as participants might have affected the generalizability or the external validity of the findings. We justified that the use of this kind of sample can be useful for certain research situations. Hence, we suggest that representative samples should be more varied in terms of sample size and participant ages.

In the case of this experiment, we relied on online research instruments that measured attitudes and behavioral intention. Thus, our general limitation is that we cannot prove that people answered what they really think or behave in ways that reflect their underlying attitudes. Moreover, it is possible that some participants did not understand the research tool. In future studies offline simulation experiments should be conducted.

Conclusion

The results indicate the connection between the degree of development of a country and overall COI. The higher degree of development of a country, the better overall COI. In regards to the trust dimension, the findings indicate that human factors have the highest impact on respondents' trust in the quality of services in a country followed by process, facilities, and the organization's brand. We proposed "trust dimension" as an intervening variable that related to purchase intention. The results demonstrate that developed countries with high COI could have a positive effect on trust in the professional service of those countries. On the other hand, for developing countries with low COI, if we create a strategy to increase trust in professional service quality by giving service providers' information such as staffs, processes, facilities, branding of organization, we can increase customers' purchase intention in the dental tourism industry.

Declaration of Conflicting Interests

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