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The Influence of Marketing Mix on Patient Satisfaction in the Inpatient Ward of Graha Husada Hospital in 2025

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ABSTRACT

Intensifying competition within the healthcare service sector necessitates that hospitals adopt effective strategies to sustain and enhance patient satisfaction levels. The implementation of marketing mix principles represents one such strategic approach. This investigation was conducted at Graha Husada Hospital Tuban, a type D referral facility situated in the southern region of Tuban Regency. The research employed an extended 4P marketing mix framework encompassing product, price, place, and promotion, supplemented by physical evidence as a critical component representing patients' perceived service quality among inpatients. The primary objective of this study was to examine the influence of marketing mix elements (product, price, place, promotion, and physical evidence) on patient satisfaction and to assess the effectiveness of marketing mix educational interventions. This quantitative investigation utilized a pre-experimental onegroup pretest-posttest design. Fifty inpatients were recruited through purposive sampling methodology. The intervention comprised educational brochure distribution, with measurements conducted pre- and post-intervention using validated structured questionnaires. Statistical analyses were performed using paired t-tests and Pearson correlation coefficients. Results demonstrated a significant increase in patient satisfaction following the intervention, with mean scores increasing from 89.14 to 100.62. Pearson correlation analysis revealed that physical evidence (r = 0.732) and product quality (r =0.719) exhibited the strongest associations with patient satisfaction, whereas price demonstrated no statistically significant influence. Overall, the marketing mix demonstrated a significant positive correlation with patient satisfaction (r = 0.699; p <0.05). The educational intervention focusing on marketing mix principles effectively enhanced inpatient satisfaction at Graha Husada Hospital Tuban.

Keywords: Marketing Mix Strategy, Patient Satisfaction, Healthcare Services, Hospital Management, Service Quality

INTRODUCTION

Healthcare sector competition necessitates hospitals to enhance service quality and patient satisfaction through appropriate strategic frameworks, with marketing mix implementation (product, price, place, promotion, and physical evidence) representing a fundamental approach (Batubara & Wibowo, 2019). Marketing mix elements are crucial as they encompass service quality dimensions, cost accessibility, facility comfort, and patient communication strategies. Patient satisfaction, particularly in inpatient services characterized by complex interactions, serves as a vital indicator of hospital service effectiveness (Asrultania et al., 2024; Dahmiri, 2022; Indraswati et al., 2023; Sukman et al., 2022; Titirlolobi et al., 2020; Wiratman et al., 2023).

The contemporary healthcare landscape has witnessed unprecedented transformation, with patient-centered care emerging as a fundamental paradigm shift that prioritizes patient experience and satisfaction outcomes (Pangaribuan et al., 2023; Porter & Teisberg, 2006). Healthcare organizations increasingly recognize that traditional medical excellence alone is insufficient for sustainable competitive advantage; rather, comprehensive service delivery approaches incorporating marketing principles have become essential for organizational success (Voyer, 2022; Zade et al., 2024). This evolution reflects broader societal expectations where patients, as informed consumers, demand not only clinical efficacy but also exceptional service experiences that address their holistic needs and preferences.

The application of marketing mix theory within healthcare contexts has gained considerable scholarly attention, with researchers demonstrating its relevance in understanding patient behavior and satisfaction determinants (Kotler & Keller, 2021; Salsabila et al., 2023). The extended marketing mix framework, incorporating the traditional 4Ps (product, price, place, promotion) alongside physical evidence, people, and process, provides a comprehensive lens for analyzing healthcare service delivery (Booms & Bitner, 1981). Physical evidence, in particular, assumes critical importance in healthcare settings where tangible environmental cues significantly influence patient perceptions of service quality and care outcomes (Ghildiyal et al., 2022).

Patient satisfaction represents a multidimensional construct encompassing clinical outcomes, interpersonal relationships, accessibility, convenience, and overall service experience quality (Mason, 2022). Research consistently demonstrates strong correlations between patient satisfaction levels and important organizational outcomes, including patient loyalty, positive word-of-mouth recommendations, reduced complaints, and improved financial performance (Paul, 2024). Furthermore, satisfied patients exhibit greater adherence to treatment protocols, experience better health outcomes, and contribute to positive organizational reputation within healthcare markets (Cleary & McNeil, 1988).

The hospital industry in Indonesia faces unique challenges characterized by increasing private sector participation, evolving regulatory frameworks, and rising patient expectations influenced by globalization and digital connectivity (Kementerian Kesehatan Indonesia, 2020). Type D hospitals, representing primary referral facilities serving specific geographic regions, must balance cost-effectiveness with quality service delivery while competing with larger tertiary institutions for patient preference (World Health Organization, 2019). This competitive environment necessitates sophisticated marketing strategies that differentiate services while maintaining accessibility for diverse socioeconomic populations (Agustina & Safaria, 2023).

Educational interventions targeting marketing mix awareness represent an innovative approach to enhancing patient satisfaction through improved service delivery understanding among healthcare staff and patients themselves (Anderson & Zeithaml, 1984; Irmana, 2023). Such interventions can facilitate better communication regarding available services, pricing structures, facility amenities, and quality assurance processes, thereby aligning patient expectations with actual service delivery capabilities (Islam & Muhamad, 2021). The effectiveness of these educational approaches, however, requires empirical validation within specific healthcare contexts to ensure practical applicability and sustainable implementation.

Graha Husada Hospital Tuban operates within East Java's competitive healthcare market, serving a diverse patient population with varying healthcare needs and economic capabilities. As a type D facility, the hospital functions as a crucial healthcare access point for southern Tuban Regency residents while competing with both public and private alternatives for patient preference. The facility's strategic location and service portfolio position it uniquely within the regional healthcare ecosystem, yet systematic evaluation of marketing effectiveness remains limited.

Previous research examining marketing mix applications in Indonesian healthcare contexts has yielded mixed findings, with studies indicating varying degrees of influence across different marketing elements and patient populations (Pitaloka & Harianto, 2025). International literature suggests that physical evidence and service quality dimensions typically demonstrate the strongest correlations with patient satisfaction, while price sensitivity varies significantly across demographic segments and healthcare service types (Wirtz & Lovelock, 2016). However, limited research has specifically examined the effectiveness of educational interventions in enhancing marketing mix impact on patient satisfaction outcomes.

Recent empirical investigations have provided substantial evidence regarding marketing mix effectiveness in healthcare settings, demonstrating evolving patterns in patient satisfaction determinants. Budiman and Achmadi (2023) conducted a comprehensive study examining the effect of marketing mix on patient satisfaction and loyalty among hospital inpatients, revealing that product, place, people, and

physical evidence significantly influenced patient satisfaction, while price showed no significant impact on satisfaction outcomes. The study further demonstrated that patient satisfaction served as a significant mediator between marketing mix elements and patient loyalty, with structural equation modeling confirming these relationships.

Similarly, Ravangard et al. (2020) investigated marketing mix influence on hospital selection in low-income countries, employing a cross-sectional design across six hospitals in Shiraz, Iran, and found that people, process, place, product, and promotion significantly affected patients' hospital selection decisions, with logistic regression analysis indicating that staff competency and service processes were particularly influential factors. Additionally, Chana et al. (2021) examined the 7Ps marketing mix impact on clinic services in Thailand using multiple regression analysis, demonstrating that process efficiency and people-related factors exhibited the strongest correlations with patient satisfaction scores, while traditional elements like promotion showed diminished influence in contemporary healthcare contexts. These recent findings collectively suggest a paradigmatic shift toward service-quality oriented marketing elements, with human resources and operational processes emerging as primary determinants of patient satisfaction in modern healthcare delivery systems.

The present investigation addresses this research gap by employing a preexperimental design to evaluate marketing mix influence on inpatient satisfaction at Graha Husada Hospital Tuban, while simultaneously assessing the effectiveness of targeted educational interventions. This approach provides both theoretical contributions to healthcare marketing literature and practical insights for hospital management regarding optimal service delivery strategies. The study's findings are anticipated to inform evidence-based decision-making processes for healthcare administrators seeking to enhance patient satisfaction through systematic marketing mix optimization while contributing to the broader understanding of healthcare service marketing effectiveness in Indonesian healthcare contexts.

RESEARCH METHODOLOGY

This quantitative investigation employed a pre-experimental one-group pretest-posttest design to analyze marketing mix influence on inpatient satisfaction at Graha Husada Hospital Tuban (Marsden & Torgerson, 2012; Sugiyono, 2017). The study was conducted in inpatient wards during February–March 2025. The research population comprised all inpatients, with a sample of 50 respondents selected using purposive sampling based on predetermined inclusion and exclusion criteria. The intervention involved marketing mix education through brochure-based materials, while data collection utilized Likert scale-based questionnaires that underwent validity and reliability testing. Data analysis was conducted systematically: univariate analysis described respondent characteristics and

variable distributions, bivariate analysis employed paired t-tests or Wilcoxon Signed-Rank Tests to examine pre- and post-intervention differences, and Pearson correlation tests assessed inter-variable relationships. Multivariate analysis using multiple linear regression determined dominant factors influencing patient satisfaction.

RESULT AND DISCUSSION

Respondent characteristics revealed that among 50 inpatients, the majority were female (52%) within the productive age range of 19–45 years (60%). Most respondents possessed secondary education equivalent qualifications (44%) and worked as entrepreneurs (28%). Regarding income distribution, the largest group fell within the middle-income bracket of Rp 5–10 million (32%), though a substantial low-income group (< Rp 1.5 million, 24%) was also present. The majority utilized BPJS as their payment method (70%), with most having visited Graha Husada Hospital multiple times previously.

Table 1 Respondent Characteristics

Frequency	Percentage	
24	48%	
26	52%	
30	60%	
20	40%	
6	12%	
3	6%	
2	4%	
22	44%	
4	8%	
11	22%	
2	4%	
8	16%	
10	20%	
10	20%	
8	16%	
14	28%	
12	24%	
8	16%	
10	20%	
	24 26 30 20 6 3 2 22 4 11 2 8 10 10 8 14	

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Characteristics	Frequency	Percentage	
Rp 5 – Rp 10 million	16	32%	
Rp 10 million	4	8%	
Healthcare visits			
1 times	12	24%	
2 times	21	42%	
≥3 times	17	34%	
Healthcare facility			
Clinic/private practice	7	14%	
Community health center	11	22%	
Graha Husada Hospital	14	28%	
Public/other hospitals	18	36%	
Payment Method			
BPJS	35	70%	
Private	15	30%	
Total	50	100%	

Source: Author's Analysis

Pearson correlation analysis demonstrated significant relationships between marketing mix elements and patient satisfaction (r=0.699; p<0.05). Physical evidence (r=0.732) and product (r=0.719) exhibited the strongest influence on patient satisfaction, followed by place (r=0.557) and promotion (r=0.326). Conversely, price (r=0.064; p=0.660) showed no significant relationship with patient satisfaction.

Table 2 Marketing Mix Elements Overview

Marketing Mix Elem	ent N MeanSt	d. Deviation
Product	5022,10	1,693
Price	5021,42	1,819
Promotion	5020,76	3,007
Place	5022,02	2,470
Physical	5020,74	2,988

Source: Author's Analysis

Research findings indicate that marketing mix elements (5P) demonstrate significant relationships with patient satisfaction. Product and physical evidence emerged as dominant factors with strong influence, consistent with previous research emphasizing the importance of medical service quality, facilities, and environmental comfort. Meanwhile, place and promotion also proved influential in enhancing patient satisfaction, particularly through service accessibility and appropriate communication strategies. The non-significant influence of price suggests that patients prioritize service quality over costs incurred. This supports

the perceived value concept in service marketing theory, where benefits received by patients are more important than service pricing. Overall, these findings align with Kotler et al. (2020) affirming that effective marketing strategy combinations can enhance positive patient perceptions.

Table 3 Marketing Mix Correlation with Patient Satisfaction

	Pearson	0.710	
Product -	Correlation	0,719	
Product -	Sig.	0,000	
	N	50	
	Pearson	0,064	
Price -	Correlation	0,004	
FIICE -	Sig.	0,660	
-	N	50	
	Pearson	0,326	
Promotion -	Correlation	0,320	
1 Tolliotion =	Sig.	0,021	
_	N	50	
	Pearson	0,557	
Place -	Correlation	0,557	
1 lace	Sig.	0,000	
- -	N	50	
Physical -	Pearson	0,732	
	Correlation	0,732	
	Sig.	0,000	
	N	50	
	Pearson	0,699	
Mix Marketing -	Correlation		
	Sig.	0,000	
	N	50	

Source: Author's Analysis

Normality testing revealed that all research variables were normally distributed (Sig. > 0.05). Subsequently, t-tests were employed to analyze patient satisfaction differences before and after marketing mix intervention. Mean satisfaction scores increased from 89.14 to 100.62, representing an 11.48-point improvement. The calculated t-value of 4.072 with significance of 0.000 (< 0.05) indicated significant differences.

Research findings demonstrated significant patient satisfaction improvement following educational intervention through hospital marketing mix brochures. Mean satisfaction scores increased from 89.14 to 100.62 (difference of 11.48), and Paired Sample T-Test yielded a calculated t-value of 4.072 with significance of 0.000 (p < 0.05), resulting in null hypothesis rejection. These findings align with

Kotler and Keller theory (2021) that satisfaction increases when service performance meets or exceeds expectations, and Zeithaml et al. theory (2024) that promotion plays crucial roles in enhancing patient understanding and satisfaction. These findings are also consistent with previous research, Mutia and Pujianto (2022) and Ozden et al. (2024) demonstrated that patient education and marketing mix implementation positively impact satisfaction. Brochures proved effective as educational media by providing clear information, enhancing patient understanding, and strengthening feelings of being valued. The impact extends beyond satisfaction improvement to patient loyalty toward the hospital.

Table 4 Marketing Mix Influence on Patient Satisfaction

Patient Satisfaction Mean Mean Difference t-calculated Significance.

Pre-intervention	89,14	11,48	4,072	0,000
Post-intervention	100,62	11,40	4,072	0,000

Source: Author's Analysis

The present investigation's findings demonstrate convergent validity with recent empirical evidence regarding service-oriented marketing mix elements in healthcare environments. Consistent with the longitudinal study conducted by Budiman and Achmadi (2023), which established that product quality, facility placement, human resources, and physical evidence exerted significant influence on patient satisfaction while pricing structures exhibited negligible impact, the current research similarly identified robust correlations between product dimensions (r = 0.719) and physical evidence components (r = 0.732) with patient satisfaction outcomes, whereas pricing variables demonstrated statistical insignificance (r = 0.064; p = 0.660). Nevertheless, the present findings diverge from certain conclusions reported by Hoque et al. (2020), whose cross-sectional investigation across Iranian healthcare facilities identified promotional activities as significant determinants of hospital selection behavior, contrasting with the moderate promotional influence observed in this study (r = 0.326). This discordance may reflect contextual variations between Indonesian and Middle Eastern healthcare markets, or differential patient expectations regarding institutional communication protocols (Javaid et al., 2024).

The educational intervention's efficacy in enhancing patient satisfaction demonstrates partial alignment with contemporary healthcare marketing scholarship, while revealing distinctive patterns not previously documented. Although the substantial satisfaction score improvement from 89.14 to 100.62 following structured brochure distribution parallels communication effectiveness findings reported by Chana et al. (2021) in Thai clinical environments, the magnitude of improvement observed exceeded theoretical predictions. Chana et al. documented moderate promotional effects on patient satisfaction measures,

whereas the current intervention achieved considerable satisfaction enhancement. This differential outcome may result from intervention-specific methodological approaches or baseline satisfaction variations within the study population. Furthermore, these results partially contradict expectation-disconfirmation paradigms proposed by Oliver (1980) and refined by Anderson and Zeithaml (1984), as the intervention enhanced satisfaction without modifying actual service delivery mechanisms, suggesting that perceptual management strategies may generate satisfaction improvements independent of performance modifications (Vargo & Lusch, 2017).

The predominance of physical evidence and product quality as principal satisfaction determinants presents both confirmatory and contradictory evidence relative to international healthcare marketing investigations. While these findings substantiate Javaid et al. (2024) regarding environmental factors' significance, they contrast with their emphasis on human resource and procedural elements as primary determinants. The current study identified facility accessibility (r = 0.557) as more influential than promotional activities (r = 0.326), diverging from Chana et al. (2021), who established procedural efficiency and interpersonal service dimensions as exhibiting the strongest satisfaction correlations. This variation suggests that Indonesian patient populations may prioritize tangible service attributes over intangible interpersonal dimensions, potentially reflecting cultural preferences for concrete rather than abstract service qualities (Hofstede et al., 2010). Additionally, these findings challenge universal applicability of service-dominant logic frameworks proposed by Vargo and Lusch (2004), suggesting market-specific adaptations may be necessary.

The investigation's outcomes contribute to evolving healthcare marketing paradigms while challenging established theoretical assumptions. The statistical insignificance of pricing variables on patient satisfaction contradicts traditional marketing theory and empirical evidence from developed healthcare markets where price sensitivity maintains relevance in consumer decision-making processes (Kumar & Reinartz, 2018). These results also partially dispute Lovelock and Wirtz's (2016) assertions regarding price sensitivity variations across demographic segments, as the diverse socioeconomic sample composition (24% low-income, 32% middle-income brackets) uniformly demonstrated price insensitivity. However, these findings support value-based healthcare conceptualizations advanced by Porter and Teisberg (2006) while questioning the generalizability of Western healthcare marketing models to Southeast Asian contexts. The educational intervention's success in enhancing satisfaction through information dissemination exclusively presents novel empirical evidence extending beyond existing literature, suggesting that perception management strategies may demonstrate superior effectiveness in emerging healthcare markets compared to developed economies (Moorman et al., 1993).

CONCLUSION

This research demonstrates that marketing mix elements significantly correlate with inpatient satisfaction at Graha Husada Hospital. Product and physical evidence factors serve as primary determinants of satisfaction, while price shows no significant influence. Educational interventions regarding marketing mix principles prove effective in enhancing patient satisfaction. Graha Husada Hospital should focus on improving medical service quality, facility comfort, and strengthening digital promotion strategies to enhance patient satisfaction. Future research is recommended to expand variables, employ designs with control groups, increase the number of respondents, and involve more hospitals to achieve more representative results.

The theoretical implications of this investigation extend beyond immediate practical applications, contributing substantively to healthcare marketing literature through empirical validation of marketing mix theory within Indonesian healthcare contexts. The findings challenge conventional marketing paradigms by demonstrating that price insensitivity among diverse socioeconomic patient populations may reflect unique characteristics of healthcare service consumption, where perceived value supersedes cost considerations in satisfaction determination. Furthermore, the successful implementation of educational interventions as satisfaction enhancement mechanisms introduces a novel dimension to healthcare marketing strategies, suggesting that perception management through structured information dissemination represents a cost-effective approach to service quality improvement without requiring substantial infrastructure modifications. Future theoretical development should explore the mediating mechanisms through which educational interventions influence satisfaction outcomes and investigate the generalizability of price insensitivity findings across different healthcare service categories.

From a practical perspective, these findings provide evidence-based foundations for healthcare administrators seeking to optimize patient satisfaction through strategic marketing mix implementation. The predominance of product quality and physical evidence as satisfaction drivers indicates that hospitals should prioritize clinical excellence and environmental enhancements over pricing strategies when designing patient-centered service delivery approaches. The demonstrated effectiveness of educational interventions offers healthcare institutions an accessible and economically viable method for improving patient satisfaction scores, with potential applications extending to quality accreditation processes and competitive positioning strategies within increasingly competitive healthcare markets. Hospital management should consider implementing systematic educational programs targeting both staff and patients, developing comprehensive physical evidence enhancement protocols, and establishing regular

satisfaction monitoring systems to ensure sustainable improvement in service quality outcomes.

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