

Scientia Research Library

ISSN 2348-0416 USA CODEN: JASRHB

Journal of Applied Science And Research, 2017, 5 (1):26-34

(http://www.scientiaresearchlibrary.com/arhcive.php)

UTILIZATION IMPROVEMENT OF EMERGENCY UNIT WITH CONSUMERS CARACTHERISTICS SOCIO PSYCOGRAPHIC ANALYSIS AND BRAND KNOWLEDGE AT PHC HOSPITAL SURABAYA

Martianawati

Doctoral Program Faculty Of Public Health Airlangga University Surabaya Indonesia

ABSTRACT

Emergency Unit of PHC Hospital Surabaya is one of the leading service unit which has an important role due to the 24-hour service is provided and supported by comprehensive equipment specifically for emergency action. During its development, PHC Hospital emergency unit utilization decreased from 2007-2011. To view the causes of this decrease we use socio psychographic analysis of characteristics of the consumers and brand knowledge to the community in an area of 3 km from the PHC Hospital. This research uses a type of observational. Research conducted research include cross sectional. The sampling technique used was Cluster Sampling. The first grouping based on the level of the village, and the second is the grouping level Of RT. 30 Pillars of neighbor taken 5 respondents respectively each Pillars of neighbors randomly. Sample from this research as much as 150 respondents. From the survey results revealed that people in about 3 km from PHC Hospital are women between the ages of 31 to 50 years with the economic status of middle where most of the respondents between the junior and senior high school education. People Who work with the Entrepreneurs with an income of one million dollars until two million rupiah each month choose go to the hospital because of the quality and people who working as an employee with income two million dollars until three million rupiah per month choose go to the clinic because of the price. Brand knowledge, Brand Awareness, especially shows that Emergency Units of PHC Hospital is the second in the Top of Mind community. While the Brand Image of Emergency Units of PHC Hospital, people still favor the rate and manner of payment in the Emergency Units of Competitors Hospital. The conclusion of this research is For the market share of down to middle level, the recommendations can be given is the embrace of market segments around the PHC Hospital, increased promotion, adjust rates, cooperation with third parties. For the market share of middle to high level, the recommendations can be given is to maintain market opportunities, strengthen education inside and collaboration with third parties.

Keywords: Emergency unit of the Hospital, Consumen Socio psychographics, Brand knowledge.

INTRODUCTION

The hospital is an organization engaged in the Health Ministry's daily contact with patients. In Act No. 36 of 2009 about health article 1 stated that the health care facility is a tool and or place that is used to organize the efforts of the Ministry of health, good promotif, preventive, curative as well as

rehabilitative programmers undertaken by the Government, local governments, and society (Health RI, 2009).

PHC hospital is one of the hospital that has complete facilities for the city of Surabaya. PHC Hospital also has Emergency Unit provided for the needs of the patient for 24 hours with all the facilities that have been specially designed and fit the needs of the emergency services. As a Hospital that has a number of health medical with complete facilities should have the trust of the community in the utilization of emergency services at the hospital PHC. It is inversely proportional to the Unit of emergency patients in hospitals increasingly PHC declined from 2007-2011.

Here are the factors that affect the utilization of emergency unit in a PHC Hospital Surabaya:

- 1. Factors Hospitals which include vision and mission hospitals, human resources, Facilities and infrastructure, the quality of service of Hospital, marketing strategies (Segmentation, Targeting, Positioning), organization, marketing management, marketing mix (Product, Price, Place, Promotion), Internal marketing.
- 2. Consumer Factors include Characteristics of the socio psychography, psycography (perception and Motivation), Service Needs, expectations of patients, consumer behavior, Brand Knowledge (Brand Awareness and Brand Image).
- 3. Environmental factors include Hospital competitors, Doctors, Transportation, distance, government policy and technology. To draw up recommendations to increase Brand Knowledge society about the Hospital PHC as an effort to increase the utilization of Emergency Unit in Hospital PHC Surabaya.

To improve the trust of the community we need to know the community and strengthen the socio Psycography, brand knowledge of consumer toward Hospitals PHC Surabaya.

MATERIALS AND METHODS

Types of observational research is a research approach in which the collection of data or information without the intervention or treatment with population (Supriyanto, 2003). In terms of implementation time research, including research performed research of cross sectional. The population of this research is all the pillars of the neighbors (RT) who have information and can represent society with a distance of 3 km radius around the Emergency Unit of PHC Hospital. Margastuti (1999) said that the radius of 3 km is the effective range of the hospital.

Specifically sampling techniques used is Cluster Sampling. In this research the first grouping is the level of the village and the second is grouping level RT. The number of RT as a whole is 427. From the overall RT is then taken samples as much as 30 RT where the value of 30 is sampling minimum requirements. The determination of the RT that made the sample is by selecting random and proportional from each village are included in the range from 3km to 30 RT is then taken 5 community each RT conduct sweeping operations each RT. With the number of sample as many as 5 people each RT he obtained the number of sample 150 respondents.

RESULT AND DISCUSSION

Table 1. The distribution of respondents based on education in area 3 km of PHC Hospital in 2012

No.	Level	of	Frequen	(%)
	Edu	cation	cy	
1	Have	Not	6	4.00
	Com	pleted		

	Elementa	ary	
	Scho	ool	
2	Junior Hi	gh 49	32,67
	Scho	ool	
3	Senior Hi	gh 82	54,67
	Scho	ool	
4	Universi	ty 13	8,67
	Total	150	100,00

Table 2. The Distribution of respondents based on the work in the area 3 km of PHC Hospital in 2012

No.	Profession	Frequency	(%)
1	civil servants	12	8,00
2	Armed Forces	0	0.00
3	Entrepreneur	76	50.67
4	Employees	40	26,67
5	Farmers	26	10,67
6	Unemploymen	1	0.67
	t or Housewife		
7	Other	5	3.33
	Total	150	100,00

Based on the above table, the majority of respondents working in the sector entrepreneur 50.67% and then an employee of 26,67%.

Table 3. The Distribution of respondents based on the income in the area 3 km of PHC Hospital in 2012

No	Income	Frequency	(%)
1	\leq Rp 1.000.000,00	16	10,67
2	1.001.000,00-	66	44,00
	2,000,000,00		
3	2.001.000,00-	54	36,00
	3.000.000,00		
4	3.001.000,00-	14	9.33
	4.000.000,00		
5	≥4.000.000,00	0	0.00
	Total	150	100,00

Based on table 3 above can be illustrated that most respondents (44.00%) is a medium-income level per month are 1.001.000,00-2.000.000,00 whereas 36% of respondents per month income is 2.001.000,00-3.000.000,00.

Table 4. The utilization of Emergency Unit of PHC Hospital by respondents in the area 3 km of PHC Hospital in 2012

No ·	Use of Emergency Unit	Frequency	(%)
1	Yes	57	38,00
2	Not	93	62,00
The	Total	150	100,00

Based on the table note that as many as 93 people (62,00%) never utilize Emergency Unit of PHC Surabaya and 57 people (38%) admit to ever utilize Emergency Unit of PHC Hospital Surabaya.

Table 5. Customs treatment of respondents in area 3 km of PHC Hospital in 2012

No.	Choice of	Frequency	(%)
	Treatment		
1	Hospital	66	44,00
2	Clinics	66	44,00
3	Public Clinic	44	2.67
4	Pharmacy	10	6,67
5	Treatment of	4	2.67
	Own		
	Total	150	100,00

From table 5, we can know that the communities in the area 3 km of PHC Hospital mostly when in need of the treatment Ministry is to go to hospitals and clinics. Where a percentage of the community, both of which chose to go to the hospital or medical treatment that memiih go to health centers, medical treatment is the same, namely of 44.00%. This means that treatment and go to the hospital is a community choice for medical treatment other than go on medical treatment to the clinic. So the opportunities for capturing emergency unit of PHC Hospital market as large as a clinic.

No	Consideration of choosing	Frequency	(%)
	where to go treat	1.4	0.22
1	distance and transportation from place of residence	14	9,33
2	the price affordable services	81	54,00
3	Quality of service	46	30,67
4	Citation	9	6,00
	Total	150	100,00

Table 6. Consideration on medical treatment of respondents in area 3 km of PHC Hospital in 2012

From table 6 above can be seen in the community as a whole reason choosing health services, the first consideration is the affordable price (54.00%), then quality (30,67%). So the market opportunities could be corrected with a quality improvement in Emergency Unit of PHC Hospital.

100,00

No	Know or get to know	Frequency	(%)
1	Know	128	87,07
2	Do Not Know	19	12 ,93

The Total

Table 7. Brand recognition Emergency Unit of PHC Hospital by respondents area 3 km in 2012

On the table it can be seen that the 128 people (87,07%) know about emergency unit of PHC Hospital whereas 12.93% (19 people) of respondents do not know.

147

Table 8. The main options are the community surrounding the Emergency unit of PHC Hospital then Competitors Hospital in 2012

No	The Main	Frequency	(%)
	Choices		
1	Emergency	45	30,00
	Unit of PHC		
	Hospital		
2	Emergency	101	67.33
	Unit of Al-		
	Irsyad Hospital		
3	Emergency	3	2.00
	Unit of Adi		
	Husada		
	hospital		
	Kapasari		
4	Emergency	1	0.67
	Unit of RSAL		
	Tanjung Perak		
	The Total	150	100,00

From table 8 we knowing that the ultimate choice of society when the need is to go to Emergency Unit of Al-Irsyad Hospital with a large percentage of as much as 67.33% of respondents.

DISCUSSION

From the research, it can be explained that:

Communities in the area 3 km from Emergency Unit of PHC Hospital is a middle-class society down. The reason for choosing the hospital is due to quality, and they choose Clinic is because of the price. This shows the level of awareness of the community to utilize existing services at the hospitalare pretty but constrained by the price or the cost. In accordance with the statement of Kotler (2010) that income level affects a person's consumption level.

In this case, the hospital should be able to attract potential consumers who prefer the clinics with the reason the price by making the image to the public that the price for treatment to hospital still affordable but get a satisfying quality.

The Brand Awareness of the community in the area especially for Brand recognition (brand

identifier) is already pretty high this is proven by the percentage who know Emergency Unit of PHC Hospital is as much as 87.07%. Public knowledge about emergency Unit of PHC Hospital dominated ever since a visit to the hospital and PHC information obtained from their families. This is supported by the existence of a statement of Keller (2003) which explains that word of mouth is a powerful source of information.

In accordance with the results of the study, the Top of mind of the community Emergency Unit of Al-mukmin Hospital more famous than Emergency Unit of PHC Hospital.

Types of Brand Association, show that the Emergency Unit of PHC Hospital has a Ministry that was satisfactory either from the side of the service products and non-product as well as the benefits it brings. But of all the ministries, the public still feel proud when using Emergency Unit of PHC Hospital. This can be corrected with an overall communications Efforts of hospitals, to influence the perceptions, opinions, beliefs, and attitudes of different groups or stackholder against hospitals (Supriyanto and Ernawati 2008,2009,2010).

Uniqueness of brand association, the most unique attribute of the Emergency Unit of Al-Mukmin Hospital compared with Emergency Unit of PHC is about the payment system. PHC Hospital have to requires new payment system is more attractive, flexible and preferred compared to competitors Hospital.

CONCLUSION

Based on the results of his research and discussions that have been conducted obtained conclusions:

- 1. The Community had revenue of 1.001.000,00 2.000.000,00 each month has a tendency to Seek medical treatment and people who have income 2.001.000,00-4.000.000,00 each month have a tendency of treatment to the hospital. The reason the public who choose to Seek medical treatment is the price, while the communities who choose to seek treatment in hospitals because of the quality.
- 2. Brand Knowledge Community
- Brand Recognition

Emergency Unit of PHC Hospital (87,07%). Information source about the presence from word of mouth that comes from family (32,03%) and travelled at PHC Hospital (56,25%).

• Top of mind

The hospital is known by the public but PHC is still a 2nd choice society in medical treatment.

• Type of brand association

Users rate this product service that is in complete associated with medical specialists, and assessing skills practitioner already well and ensure the recovery of the patient. Non product attributes Emergency Unit of PHC Hospital have appropriate means that users expect access and transportation is fairly easy.

Service process of treatment is assessed quickly, including the giving of information of post treatment. Emergency Unit has been sought in accordance with the expectations of the users, besides that his service is friendly, fast and responsive.

Not yet a user while using the pride of health services at Emergency Unit of PHC Hospital and haven't been able to recommend other people to seek treatment at Emergency Unit of PHC.

After using the service, users was pleased and satisfied with the service provided by Emergency Unit of PHC Hospital.

• Favorability of brand association

The overall factor is ability and skills of human resources existing in the Emergency Unit of PHC equally favoured in comparison with the surrounding competitors.

Factors or physical facilities, cafeteria, parking, Garden, Mosque, 24 hour service, transportation, hospitality officer, are perceived the same as competitors. But for the factor of cost services, Emergency Unit of PHC Hospital are perceived more expensive than competitors.

• Uniqueness of brand association

For the uniqueness factor, which is noteworthy because the payment system is still not cooperating with some insurance.

Explanation of Brand knowledge of Emergency Unit of PHC Hospital component at the top in Brand Awareness for the variable top of mind still needs to be improved, while the components of the Brand Image that needs to be examined is the cost and other insurance markets.

SUGGESTION

Based on the research that has been done, so the researchers suggest:

- 1. To intermediate level:
 - 1) Improving market share and capture opportunities through market penetration.
 - 2) Improve relationships with customers by means of CRM with a goal as marketers customers through word of mouth.
 - 3) Cooperation with third party insurance with consideration to the financial side.
- 2. For medium-level market share to the top:
 - 1) Keep the mid-level market opportunities with increasing quality.
 - 2) Improve customer focus with meet the needs expected by market.
 - 3) Conducting educational, empowerment and internal employee satisfaction.
 - 4) Cooperation with relevant parties (Physician practices, Clinics, NGOS) for the Emergency Installtion promotes PHC Hospital with how to improve news coverage in talk shows, radio, the mass media and family gathering.
- 3. Suggestions for other researchers

Should the researcher later leads to quality of service by using CRM Experiental marketing or to increase the utilization of Emergency Unit of PHC Hospital Surabaya.

REFERENCES

- [1] Aaker, D. A. (1991). "Managing brand equity". New York: Free Press.
- [2] Aaker, D. A. (1996). "Building strong brands". New York: Free Press.
- [3] Aaker, D.A., "Measuring Brand Equity Across Product and Market", California Management Review, 1996;38(3):pp. 102-121.
- [4] Aaker, J. L., "Dimensions of brand personality". Journal of Marketing Research, , , 1997;34:pp 347–356.
- [5] Aaker, J. L., "The malleable self: The role of self-expression in persuasion". Journal of

- *Marketing Research*, **1999**;36:pp. 45–57.
- [6] Aaker, J. L., V. Benet-Martinez, and J. Garolera., "Consumption symbols as carriers of culture: A study of Japanese and Spanish brand personality constructs". Journal of Personality and Social Psychology, **2001**;81(3):pp. 492–508.
- [7] Arikunto, Suharsimi, Manajemen Penelitian, Jakarta: Rineka Cipta, 2009.
- [8] BPS Surabaya, "Surabaya dalam Angka" Badan Pusat Statistik Surabaya Jawa Timur, 2012.
- [9] Dewi, Kinorika. "Menciptakan *Brand Equity* Melalui Kepuasan Pelanggan". *Jurnal Janavisi*, **2003**;6(1).
- [10] Departemen Kesehatan RI. (1994). Standar pelayanan Rumah Sakit. Cetakan ketiga. Direktorat Jenderal Pelayanan Medik Direktorat Rumah Sakit Umum dan pendidikan Jakarta. Heding, T. Knudtzen, FC and Bjjerre, M., **2009**, *Brand Management: Reserch. Theory and Prectice*. Abingdon. Routledge
- [11] Durianto, Bambang et. al. Brand Equity Ten. Jakarta: Gramedia Pustaka Utama, 2004.
- [12] Harjanto, Rudy, *Prinsip-prinsip Periklanan*, Dewan Perguruan Periklanan Indonesia, Jakarta, **2009**.
- [13] Jarvis, Wade., and., Steven Goodman., "Effective marketing of small brands: niche positions, attribute loyalty and direct marketing ", The Journal of Product and Brand Management, 2005;14(4/5):pp. 292-299.
- [14] Keller, Kevin Lane. "Conceptualization, Measuring, and Managing Customer Based Brand Equity". *Journal of Marketing*, Vol. 57. Januari, **1993**.
- [15] Kartajaya, Hermawan., Seri 9 elemen Marketing:Hermawan Kartajaya on Brand, Bandung: Mizan Media Utama. 2004.
- [16] Kotler, P. 2000. Manajemen Pemasaran. Edisi Milineum. Jakarta: Prenhallindo.
- [17] Kotler, P., 2009, Manajemen Pemasaran 13e, Jakarta, Penerbit Erlangga.
- [18] Kotler, P., Amstrong G. **2006.** *Principal of Marketing*. New Jersey: Pearson Prentice Hall.
- [19] Mangold, W. Glynn., Fred Miller., and., Gary R. Brockway, "Word-of-Mouth Communication in the Service Marketplace", The Journal Of Services Marketing, 1999;13(1):pp. 73-89.
- [20] Margastuti, Heny Poetri., Strategi meningkatkan tingkat hunian rawat inap kelas atas di Rumah Sakit (Studi Benchmarking RS. Adi Husada Kapasarai dengan RS. Adi Husada Undaan Wetan Surabaya). Tesis. Fakultas Kesehatan Masyarakat: Unair, 1999.
- [21] Mujiharjo, Bagyo ., Analisis Faktor faktor yang Mempengaruhi Kepuasan Pelanggan dan Pengaruhnya terhadap Loyalitas Pelanggan (Studi pada 138 Rumah sakit BRI Demak), Jurnal Sains Pemasaran Indonesia, 2006;5(2).
- [22] Qomarudin, MB, *Fokus Group Diskusi*. Bagian Pendidikan Kesehatan Dan Perilaku Fakultas Kesehatan Masyarakat Universitas Airlangga, **2004**.
- [23] Rangkuti Freddy, 2004, The Power of Brands. PT Gramedia Pustaka Utama, Jakarta.
- [24] Sciffman leon G., Kanuk Leslie Lazar :2007, Consumer Behavior ,9 Edition, Pearson Educational. New Jersey-USA.

- [25] Simamora, Bilson (**2002**), *Aura Merek: 7 Langkah Membangun Merek yang Kuat*, Jakarta: PT Gramedia Pustaka Utama.
- [26] Stoner, j., and Freeman, R. (1990). *Manajemen*. Edisi Terjemahan. Prentice Hall inc. New Jersey.
- [27] Mujiharjo, Bagyo (2006), Analisis Faktor faktor yang Mempengaruhi KepuasanPelanggan dan Pengaruhnya terhadap Loyalitas Pelanggan (Studi pada138 Rumah sakit BRI Demak), Jurnal Sains Pemasaran Indonesia, 2006;5(2).
- [28] Qomarudin, MB, **2004**, *Fokus Group Diskusi*. Bagian Pendidikan Kesehatan Dan Perilaku Fakultas Kesehatan Masyarakat Universitas Airlangga.
- [29] Rangkuti Freddy, **2004**, *The Power of Brands*. PT Gramedia Pustaka Utama, Jakarta.
- [30] Rose, S., Schuldt, H., Moller, T., Frohlich, N., **2010**. *A Benchmark for Context Data Management in Mobile Applications*. Databases and Information Systems Research Group University of Basel.
- [31] Sciffman leon G., Kanuk Leslie Lazar :2007, Consumer Behavior ,9 Edition, Pearson Educational. New Jersey-USA.
- [32] Simamora, Bilson (**2002**), *Aura Merek: 7 Langkah Membangun Merek yang Kuat*, Jakarta: PT Gramedia Pustaka Utama.
- [33] Stoner, j., and Freeman, R. (1990). *Manajemen*. Edisi Terjemahan. Prentice Hall inc. New Jersey.
- [34] Supriyanto, S dan Ernawaty, **2010**, *Manajemen Pemasaran Jasa Pelayanan kesehatan*. Surabaya.Administrasi dan Kebijakan kesehatan fakultas kesehatan masyarakat universitas Airlangga.
- [35] Suryadi Prawirosentono, **2007**. *Filosofi Baru Tentang Manajemen Mutu Terpadu Abad 21: Kiat Membangun Bisnis Kompetitif*, Jakarta: Bumi Aksara.
- [36]http://www.belbuk.com/the-power-of-brand-teknik-mengelola-brand-equity-dan-strategi-pengembangan-merek-p-6648.html (diunduh tanggal 15 Maret 2012 pukul 21.56 WIB).
- [37]http://id.shvoong.com/business-management/marketing/2060960-45 carapromosi/#ixzz1vEdBLZ1R (diunduh hari kamis tgl 17-05-2012 pukul 22.00 WIB).
- [38]http://www.vldb2010.org/proceedings/files/vldb_2010_workshop/PersBD_2010/resources/Pers DB2010_1.pdf (diunduh pada tanggal 15 Maret 2012 pukul 20.02 WIB).
- [39]http://www.cl.cam.ac.uk/research/dtg/www/files/publications/public/dtw20/HotMobile2011DC. pdf (diunduh pada tanggal 20 Maret 2012 pukul 21.30 WIB).