www.komyra.com

2022 08

Volume 9 No 3

# The Myanmar JOURNAL

Determinants of Brand Equity of Ah Yee Taung Co., Ltd

Khin Thet Htwe

FACTORS INFLUENCING DOMESTIC VIOLENCE AMONG WOMEN IN POBBATHIRI TOWNSHIP, NAY PYI TAW, MYANMAR Khin Sandi Myint

Effect of Performance Appraisal on Employee Performance of Private Banks in Pyay Township Than Thu Zar

Service Quality of Pact Global Microfinance in Chaung U Township, Sagaing Region, Myanmar Ei Ei Po

Patients' Satisfaction on Service Quality of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital In Myin Mu, Sagaing

Thin Thin Yu · Khaing Wai Chaw

CONSUMER DECISION MAKING STYLE ON MYANMAR TRADITIONAL COSTUME Toe Toe Aung

Effect of International Trade on Economic Growth of Myanmar Thida Htoo

Factor Associated with Maternal Mortality Ratio
Maw Maw Khin

Factors Influencing Formal and Informal Saving Behavior of Households in Bilu Island, Mon State, Myanmar Myint Myint Kyi · Ye Lwin

Determinants of Labor Force Participation among Rural Women in Myanmar

Hlaing Hlaing Moe  $\cdot$  Mar Mar Aye  $\cdot$  May Myat Thu

Sanofi's Value-based Services for Sustainable Business: ESG and Sustainability Strategies Jae-Woong Byun

A study on problems and solutions of Ecotourism Gwon Osung

Global Future Trends and Technology Required for Korean Industrial Complexes for Consumers Shinwon Letter from the Editor-in-Chief

Myanmar and Korea have many similarities and are complementary

relationship. Therefore, we believe that research exchange will expand mutual

understanding between Myanmar and Korea, and will be the cornerstone for

mutual development.

KOMYRA and YUE have co-published The Myanmar Journal since August

2014. So far, many scholars have published numerous papers through the

journal, and We are sure that this journal has helped many people

understand Myanmar and Korea more clearly and closely.

The Myanmar Journal covers various issues in Myanmar and Korea. It covers

various topics that can promote bilateral development and mutual

understanding, not limited to specific topics such as economy, industry,

society, education, welfare, culture, energy, engineering, healthcare, and

agriculture.

We hope that this journal will continue to promote understanding of the

current status and potential capabilities of Myanmar and South Korea and

promote in-depth international exchange and cooperation.

We would like to express our deepest gratitude to the editorial board and

YUE and KOMYRA for their valuable support in The Myanmar Journal

publication.

August 30, 2022

Youngjun Choi yj choi

Editor-in-Chief of THE MYANMAR JOURNAL

Vice-President of KOMYRA

Email: yjchoi@khu.ac.kr Office: +82-2-961-0485

Web address: komyra.com/doc/scope.php

### **EDITORIAL BOARD**

### **EDITOR-IN-CHIEF (Yangon University of Economics)**

Prof. Mya Thandar, Ph.D. (YUE, Myanmar)

### EDITOR-IN-CHIEF (Korea Myanmar Research Association)

Prof. Youngjun Choi, Ph.D. (KHU, Korea)

### ASSOCIATE EDITOR-IN-CHIEF

Hyejin Park (KOMYRA, USA) Nu Nu Lwin (YUE, Myanmar) Jiyeon Chun, Ph.D. (SCNU, Korea) Shinwon Kang, Ph.D. (SCNU, Korea)

### **Journal Managing EDITOR**

Kyuyoung Cho (KOMYRA, Timebee, Korea)

### Sector EDITOR

Communication and Energy sector EDITOR, Shinwon Kang (SCNU, Korea)
Economic & Management sector EDITOR, John Walsh (SIU RC, Thailand)
Food Engineering sector EDITOR, Jiyeon Chun (SCNU, Korea)
International Law sector, Jeremy Sarkin (University of South Africa, South Africa)
Social Welfare sector EDITOR, Shinsook Lee & Sunghee Kim (SCNU, Korea)
Statistics & Survey statistics sector EDITOR, Jungwha Do (ReLab, Korea)
Technology Management sector EDITOR, Taeho Park (SJSU, USA)
Tourism and Leisure sector EDITOR, Osung Gwon (JNUE, Korea)
Trade & Education sector EDITOR, Youngjun Choi (KHU, Korea)
Language, Literature & Culture Sector EDITOR, Santosh Kumar Ranjan (JNU, India)
Business and Industry sector EDITOR, Myint Moe Chit (U of Nottingham, Malaysia)
Tax accounting sector EDITOR, Hyunwoo Cho (SCNU, Korea)

### **ADVISORY BOARD**

Prof. Taeho Park, Ph.D. (SJSU, USA)

Prof. Tun Aung, Ph.D. (Meiktila University of Economics, Myanmar)

# INFORMATION ABOUT The Myanmar Journal

The Myanmar Journal (ISSN 2383-6563) is the official international journal co-published by Yangon University of Economics (YUE) and Korea Myanmar Research Institute (KOMYRA).

This journal aims to promote the mutual cooperation and development of Myanmar and Korea through intensive researches in the entire filed of society, economy, culture, and industry.

It will cover all general academic and industrial issues, and share ideas, problems and solution for development of Myanmar.

Articles for publication will be on-line released twice a year at the end of February and August every year on the Myanmar Journal webpage (http://www.komyra.com/bbs/board.php?bo\_table=articles).

## Patients' Satisfaction on Service Quality of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital In Myin Mu, Sagaing

Thin Thin Yu\* · Khaing Wai Chaw\*\*
University of Co-operative and Management, Sagaing

ABSTRACT: The study is to analyze the patients' satisfaction on service quality of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital in Myin Mu, Sagaing. By using the structured questionnaire with five point likert scale, the primary data was collected from a sample size of 235 respondents who are patients curing in eye hospital. The secondary data was cited from books, journals, articles and internet websites. According to multiple regression result, the patients satisfy on the factors such as quality of object, quality of infrastructure, quality of interaction, quality of atmosphere, trust and reputation. The majority of patients are old people who are contacting with the hospital because of poor visual acuity align with elderly. "Quality of process" measurement has not related with patients' satisfaction because the hospital's treatment is not just in time. This hospital is philanthropic hospital, thus there have the crowd of patients. Healthy knowledge, consumption pattern and physical exercises concerned with health should be given to the patients by nurses because the patients cannot perform the surgery immediately if they had the disease of diabetes or hypertension. The staff working at this hospital should be voluntary or hubby workers because it is the philanthropic hospital that offers the low salaries to staffs and so the patients are not treated well by them. Therefore, hospitals' responsible persons need to improve better healthcare services to increase patient satisfaction.

Key words: object, process, infrastructure, interaction, atmosphere

\* Associate Professor, Department of Economics, University of Co-operative and Management, Sagaing, thinthinyukhin@gmail.com

<sup>\*\*</sup> Master Student, Social Enterprise Management Major, University of Co-operative and Management, Sagaing

### I. Introduction

Healthcare sector is the backbone of a nation's well-being. Service is important for any organization and it is more important in the healthcare sector, especially hospital. Healthcare is organized and provided by public and private providers in many countries. Healthcare industry is the wide and intensive form of services, which are related to well being of human beings. Human behaviors affect on health such as consumption pattern, education level, housing styles, and employment. Alternatively, everyone has the good health that can do everything so "Health is Wealth". Healthcare system is now a challenge for every government, States, political parties and insurance agencies because of high competition in many fields. The healthcare system that was dominated by non- profit/public hospitals, is now provided increasingly by private sector. This competition results in satisfying patient through improvement in service quality dimensions, building trust and getting positive reputation.

Patient satisfaction has emerged as an increasingly important health outcome. (Williams, B. & Wilkinson, G., 1995). Patient satisfaction regarding healthcare is a multidimensional concept that now becomes a very crucial healthcare outcome. In Myanmar, for the development of health sector, Government has drawn up its health vision 2030 with the aim to provide comprehensive healthcare for the entire people. (Than Tun Sein & Phone Myint, et al.,, 2014). The healthcare industry in Myanmar is highly competitive as it has opened to the private sector during the year 2000. Private hospitals, as well as hospitals of non-profit oriented organizations offer a significant portion of available health services in almost every country in the world including Myanmar. These hospitals use various latest technologies of medical equipment, facilities, personal qualities and experience, and good customer service.

### 1. Rationale of the Study

For every hospital, patients are the main users. The primary function of the hospital is to care patients. Customers of healthcare industry are more sophisticated than in the past and at present demand for service quality of healthcare industry are more increasing. Moreover, the patients' satisfaction is an integral part of hospital management across the world and is the real testimony to the efficiency of hospital performance. (Swamy, 1975). In Myanmar, the costs of treatment of private hospitals are very high and the service qualities are good. However, there are difficulties for the low income people to cure the diseases in these hospitals. Although the philanthropic hospitals are very useful for the low-income people, some the

philanthropic hospitals have the bad service qualities. Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital is a philanthropic hospital, it has the eye surgery doctors who are the foreigners and the cost of treatment is also free of charge. Therefore, this paper is to study the patients' satisfaction provided by the services of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital.

### 2. Objective of the Study

The objective of the study is to analyze the patients' satisfaction on service quality provided by Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital.

### 3. Methods and Scope of the Study

By using the structured questionnaire with five points likert scale, the primary data were collected from the respondents (patients) of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital in Myin Mu Township. Secondary data are collected from books, journals, articles and internet web site. Descriptive Statistics and Multiple regression analysis are used. The scope of this study was mainly focused on 235 patients that are randomly selected from 574 patients, who are curing the eye diseases in this hospital in August, 2019.

### II. Literature Review

### 1. Patients' Satisfaction

Satisfaction can be derived as happiness achieved from the consumption of goods or services offered by a person or group of people or it may be state of being happy with the situation. Satisfaction is not the phenomenon waiting to be measured by people but is a judgment of people from over a period of time as they reflect from their experience. ((HeBE), 2003). Patient satisfaction is the substantial indicator in the healthcare. Patient satisfaction is used as the performance of measurement by different hospitals, principally on instrumental grounds such as adhering to treatment, recommendations and maintaining continuity of care different professionals influence patient satisfaction. (Thom, D.H., Hall, M.A. & Pawlson, L.G., 2004).

### 2. Service Quality

Service can be defined in many ways depending on which area the term is being used. Service is "any intangible act or performance that one party offers to another that does not result in the ownership of anything". (Kotler, P.; Kevin Lane Keller., 2009). Service can also be defined as an intangible offer by one party to another with mutual consideration for pleasure. Consumers mostly attracted towards a service by focusing on quality. (Solomon, 2009). Service quality is "the differences between customer expectations and perceptions of service". (Parasuraman, A., Zeithaml, V.A., & Berry, L.L., 1988).

### 3. 5Qs model

(Zineldin, 2006) expanded technical-functional and SERVQUAL quality models into framework of five quality dimensions, which consist of quality of Object, quality of Process, quality of Infrastructure, quality of Interaction and quality of Atmosphere. This model is now considered as an effective model for healthcare providers in order to evaluate patient's satisfaction.

### 1) Quality of Object

The technical quality (what customer receives), for example, relates to the clinical procedures carried out and it focuses on the technical accuracy of medical diagnosis and procedures. This dimension of service quality measures the treatment itself that is the main reason of why a patient is visiting a hospital in the context of his very basic need and want. (Zineldin, 2006).

### 2) Quality of Process

This dimension deals with the functional quality that how the healthcare organization provides the core service (the technical). This dimension measures how well activities of the healthcare are implemented practically. It includes the waiting times by the patients and speed of performing the health care activities by the staff. Sensitive issues are attached to the healthcare industry so process indicators should receive more attention. These indicators can be used to identify problems in service delivery and to suggest specific solutions. Front-line nurses/physicians/managers can use the process indicators to supervise/monitor activity at their facilities and to improve day-to-day decision-making. (Zineldin, 2006).

### 3) Quality of Infrastructure

This dimension of service quality measures the essential and basic resources that are needed to perform the healthcare services. This includes many attributes such as the quality of the internal competence and skills, know-how, experience, motivation, attitudes, technology, internal relationships, internal resources and activities. The most

important is how these activities are managed, cooperated and coordinated with each activity. Researchers found that technology infrastructure can play a vital role in patient satisfaction, and it has become a revolutionary key factor practicing in health care organization. (Zineldin, 2006).

### 4) Quality of Interaction

Communication/interaction among the people is always difficult to deal with. It is not communication/interaction among the machines, accounting systems or trading agreements, which can do it effectively with each other in order to exchange values. This dimension of service quality measures the quality of information exchange (e.g., the percentage of patients who are informed when to return for a check-up, amount of time spent by physicians or nurses to understand the patient's needs, etc.), and social exchange, etc. Perceived quality of interaction and communication reflects a patient's level of overall satisfaction.

### 5) Quality of Atmosphere

This dimension is concerned with the relationship and interaction process between the two parties that is influenced by the quality of the atmosphere in a specific environment where they cooperate and operate. The atmosphere indicators should be considered very critical and important because the belief that lack of frankly and friendly atmosphere explains poor quality of care. (Zineldin, 2006).

### 4. Trust

Trust can be a defining characteristic of the relationship between patients with their physicians and other care providers. Trust in the physicians is one of the strongest predictors of patient decision for enrolling their treatment of any diseases. Mostly the patient trust is linked to proposed or reported patient devotion to treatment recommendations. (Thom, D.H., Hall, M.A. & Pawlson, L.G., 2004).

### 5. Reputation

Herbig & Milewicz (1993) explained that corporate reputation is trust which keeps its promises in a decided manner. Reputation is established by the exchange of information from one user to another. Mostly, reputation develops when entities are unsure or unaware about one another's options or motives and where they deal with each other repeatedly in related circumstances or past dealings observable with other firms. Past performance always has the good matters while dealing with customers; firm's profile is observable in terms of services, quality, information and word of mouth continuously by the customers. Reputation is a precious and valuable

commodity, it takes time to build and need continuous improvement to maintain. (Herbig, P.; Milewicz, J, 1993).

# III. Background History of Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital

Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital is situated on the road of Mandalay-Monywa in Htisaung Village, Myin Mu Township, Sagaing Region. The founders of this hospital are Baddanata Vamsapalalankara and Baddanta Pannasirilankara, who are the pupils of Min Gon Tipitakadhara Dhammabanatagarika Sayadaw. It was pegged out on November 25, 2012. It was successfully constructed within 9 months by the support of Sattamajotikadhaja professor Dr. Venus from Thailand, by the donation of Dr. Parasat (the chairman of Bangkok Air Line and Bangkok Hospital) and by the donations of all donors from the whole Myanmar.

Hospital was established by the slogan of "Do not your life because of eye strain". On 17th September, 2013, opening ceremony was successfully held leading by the donors, Dr. Parasat and his family, donors from local and abroad and divisional chiefs. The most modernization eye testing machines and devices are used in the eye operation rooms in the hospital that were donated only by Dr. Parasat's family. And then he also donated Seven Dragon Water Purified Machine to this hospital in 2016. This hospital is running on the (budget) finance of donors from local and abroad, Mr. Dave Richard and Mrs. Kerry Richard from Australia who supports monthly cost of the hospital and income from selling purified drinking water (PH7). Within six years after it was established, 576400 outpatients and 137572 surgery patients had been given well treatments for eyes. Various kinds of eye diseases have been successfully cured or treated.

In the hospital, there are many facilities such as restaurant, convenience store, eyeglasses and medicine shops. Two interpreters have been employed for the translation of the explanation of state surgeons. At this moment, specialist doctors and surgeries from Thailand, American, Australia, New Zealand, Nepal, India, etc... diagnose the patients themselves and eye treatment training school to be able to learn modern surgery and to generate eye nurses and skillful labors and Shwe Ya Tu Tipittaka Ayupala general hospital have been built. There is hospital administrator's office, eye specialist examination room, outpatient department, Examination room, Laser treatment room, exclusive room treated with insecticides for patients after operation not to be infected by some diseases, Computer room for registration of surgery patients, Biomatery room and information centre.

Since the hospital has opened, Professor Dr. Yi Yi Aung from Mandalay Eye

specialist hospital is curing the eye surgeries along with her leadership. And the eye specialist surgeries in army, People Eye Care Foundation (PECF) Thailand, Dr. Samsram Watanachote and the eye specialist surgeries from Bangkok Hospital and the nurses in Myanmar are curing monthly and giving the treatment of eye surgery as a program of "GIFT OF SIGHT" (GOS) by cooperating together. In addition, Dr. Radiya, eye specialist for child in Thailand, is curing to eye slanting surgery to children who suffered the eye diseases. He is encouraging them to strengthen their mind and to walk confidently throughout the life. By the negotiation of Dr. Geoffrey Cohn from the Royal Australia and New Zealand College of OPTHALMOLOGISTS RANZO Eye Foundation, the sustainable treatments and the surgeries have been serving by supporting the medicines, the medical devices, and the expert surgeries from abroad. Therefore, this hospital is a place where gives the gift of light and the way to success for persons who are lack of light and access.

### IV. Data Analysis and Findings

In this study, the descriptive statistics method and inferential statistics method show which factors are the influence variables on domestic violence and what are the frequencies, percentages and the relationship between them.

This study used five sets of questionnaires to analyze the most influential factors on patient satisfaction. Each factor includes different number of items and each item is measured on five-points Likert scale questionnaire (from 1= strongly disagree, to 5= strongly agree).

The first part includes personal factors of the patients such as gender, age, marital status, education level, occupation, income, eye diseases of respondents, and quantity of cure time. The second part consists of service quality which includes five factors; quality of object, quality of process, quality of infrastructure, quality of interaction and quality of atmosphere. The third part consists of trust, reputation and patient satisfaction.

 Sr. No.
 Gender
 Number of Respondents
 Percentage (%)

 1 Male
 113
 48.1

 2 Female
 122
 51.9

 Total
 235
 100

Table 1. Gender of Respondents

Source: Survey Data (August, 2019)

Table (1) shows that (122) or (51.9%) of female respondents are suffering from eye diseases and (113) or (48.1%) of male respondents are suffering from eye diseases. This indicates that the female respondents are more suffered from eye diseases than the male ones.

Table 2. Age of Respondents

Sr. No.	Age	Number of Respondents	Percentage (%)
1	20 years and Under	2	9
2	Between 21 and 40 years	19	8.1
3	Between 41 and 60 years	103	43.8
4	Between 61 and 80 years	108	46.0
5	81 years and Above	3	1.3
	Total	235	100

Source: Survey Data (August, 2019)

Table (2) shows that the age of respondents. The majority of the respondents (108) or (46.0%) are the age between 61 years and 80 years who are suffering the poor visual acuity with advancing age.

Table 3. Marital Status of Respondents

Sr. No.	Marital Status	Number of Respondents	Percentage (%)
1	Single	50	21.3
2	Married	185	78.7
	Total	235	100

Source: Survey Data (August, 2019)

Table (3) shows that there are (185) or (78.7%) of total respondents are married and (50) or (21.3%) of respondents are single. It is founded that the married people are more than single that come and take treatment in the eye hospital.

Table 4. Education Level of Respondents

Sr. No.	Education Level	Number of Respondents	Percentage (%)
1	Monastic Education level	76	32.3
2	Primary Education Level	116	49.4
3	Secondary Education Level	16	6.8
4	Higher Education Level	8	3.4
5	College / University Level	5	2.1
6	Graduate / Post Graduate Level	14	6.0
	Total	235	100

Source: Survey Data (August, 2019)

According to table (4), the education level for (116) or (49.4%) of total respondents are primary level of education and this is the largest number of the respondents.

Table 5. Occupation of Respondents

Sr. No.	Occupation	Number of Respondents	Percentage (%)
1	Business Owner	14	6.0
2	Government Staff	33	14.0
3	Student	3	1.3
4	Farmer	76	32.3
5	Dependant	74	31.5
6	Others	35	14.9
	Total	235	100

Source: Survey Data (August, 2019)

Table (5) shows that (76) respondents are farmers, (74) are dependants, (33) are government staffs, (14) are business owners, (3) are students, and (35) are other respondents who are the retired people and the casual workers. Therefore, most of the respondents are earning as farmers.

Table 6. Monthly Income of Respondents

Sr. No.	Monthly Income(Kyat)	Number of Respondents	Percentage (%)
1	100000 and Under	126	53.6
2	Between 100,001 and 200,000	83	35.3
3	Between 200,001 and 300,000	15	6.4
4	Between 300,001 and 400,000	8	3.4
5	Between 400,001 and 500,000	3	1.3
6	500,001 and Above	0	0
	Total	235	100

Source: Survey Data (August, 2019)

Table (6) shows that the respondents (or) patients are not higher income earners. The majority of the eye hospital's patients are the lower level of income earners, under 100,000 kyats per month.

Table 7. Eye Diseases of Respondents

Sr.No.	Eye Diseases of Respondents	Number of Respondents	Percentage (%)
1	Glaucoma surgery	65	27.7
2	Cataract surgery	114	48.5
3	Eyeball removal surgery	0	0

4	Eyeball replaced surgery	0	0
5	Eye shell knob surgery	5	2.1
6	Eyelid repair surgery	4	1.7
7	Eyeball slanting surgery	0	0
8	Others	47	20.0
	Total	235	100

Source: Survey Data (August, 2019)

According to table (7), the number of respondents (114) are taking the cataract surgery, and it is found that the patients take generally the cataract surgery for their health in eye hospital.

Table 8. Cure Time of Respondents

Sr.No.	Cure Time	Number of Respondents	Percentage (%)
1	One Time	209	88.9
2	Two Times	21	8.9
3	Three Times	0	0
4	Greater than three	5	2.1
	Total	235	100

Source: Survey Data (August, 2019)

According to table (8), it is found that the number of respondent (209), who have taken curing as one time, (21) and (5) are the respondents who have taken curing as two times and greater than three times respectively.

Table 9. Reliability Test of the Study

Sr. No	Variables	Cronbach's Alpha Value	Number of Items
1	Quality of Object	0.812	6
2	Quality of Infrastructure	0.794	5
3	Quality of Interaction	0.784	8
4	Quality of Atmosphere	0.770	6
5	Trust	0.800	6
6	Reputation	0.780	5
7	Patient Satisfaction	0.853	5

Source: Survey Data (August, 2019)

Table (9) shows the Cronbach's alpha values for service quality, trust and reputation of Htisaung eye hospital. According to the result, all scales for service quality are high reliability as their Cronbach's alpha values are above or over the benchmark value of 0.70. According to the table, alpha value for quality of object is 0.812 which is the largest alpha value among five service qualities, meaning that the

services for the technical accuracy of medical diagnosis and procedures are the best. The alpha value for trust and reputation are more than 0.70, so that the relationship between the patients and the physicians has strong trust and reputation on the services of physicians, nurses and other careful providers. And Patients' satisfaction which is the separate variable is the highest level on all service qualities of this eye hospital.

Table 10. Descriptive Statistics for Patient Attitude towards Patient Satisfaction

Question Item	Statements	Mean	Standard Deviation
Q1	The good feeling on the treatment of the hospital.	4.979	0.1446
Q2	The satisfaction on well careful treatment as you hopes.	4.966	0.1817
Q3	The satisfaction on the staffs of the hospital.	4.932	0.2524
Q4	The satisfaction on all services of the hospital.	4.962	0.2134
Q5	Expectation of patients corresponding to the treatment and services provided by the hospital.	4.962	0.1923
	Overall Mean	4.9602	

Source: Survey Data (August, 2019)

In table (10), according to the results, the overall mean value is (4.9602). Although the mean values of Question item (4) and (5) are equal, the standard deviations are different, showing that the statement of Question item (5) "Expectation of patients corresponding to the treatment and services provided by the hospital (0.1923)" is better satisfaction than the statement of Question item (4) "The satisfaction on all services of the hospital (0.2134)". Among all Question items, Question item (3) is the least mean value (4.932) and the most standard deviation (0.2524), that is the statement of this Q3 "The satisfaction on the staffs of the hospital" showed the strongly disagree level of the respondents. Otherwise, the patients do not like the services of the staffs of the hospital.

Table 11. Multiple Regression Analysis of Independent Variables Related to Patient Satisfaction

Model	Unstandardized Coefficients		Standardized Coefficients	t-test	Sig.	VIF
iviodei	В	Standar d Error	Beta			VIF
(Constant) Quality of Object Quality of Infrastructure Quality of Interaction Quality of Atmosphere Trust Reputation	0.114 0.194*** 0.232*** 0.242*** 0.178*** 0.296*** 0.320***	0.281 0.047 0.050 0.051 0.044 0.116 0.120	0.306 0.212 0.308 0.283 0.236 0.247	0.407 4.160 4.670 4.710 4.040 2.564 2.663	0.685 0.000 0.000 0.000 0.000 0.011 0.008	3.486 1.334 2.749 3.143 5.437 5.521
R <sup>2</sup>			0.646			

Adjusted R <sup>2</sup>	0.637	
F-value	69.367	

Source: SPSS result

Dependent variable: Patient Satisfaction

\*, \*\*, \*\*\*: indicate statistical significance at the 1% level, 5% level, 10% level

According to table (11), the adjusted R square is 0.646 revealing that 64.6% of total variance in patient satisfaction is explained by variables. Result show that F value is 69.367 that is significant at P=0.000 (<0.01). The regression coefficient between quality of object and patient satisfaction is 0.194 (t=4.160, P=0.000). This shows that patients are satisfied on quality of object. The regression coefficient between quality of infrastructure and patient satisfaction is 0.232 (t=4.670, =0.000). This shows that patients are satisfied on quality of infrastructure. The regression coefficient between quality of interaction and patient satisfaction is 0.242 (t=4.710, P=0.000). This shows that patients are satisfied on quality of interaction. The regression coefficient between quality of atmosphere and patient satisfaction is 0.178(t=4.050, P=0.000). This shows that patients are satisfied on quality of atmosphere. The regression coefficient between trust and patient satisfaction is 0.296 (t=2.564, P=0.011). The regression coefficient between reputation and patient satisfaction is 0.320 (t=2.663, P=0.008). This shows that patients are satisfied on trust and reputation.

According to the regression coefficients, by using the 5Qs model, the patients are satisfied on Q(1) quality of object, Q(3) quality of infrastructure, Q(4) quality of interaction, Q(5) quality of atmosphere. The regression coefficients of "trust" and "reputation" show that the patients are satisfied on the services of their physicians and the reputation of hospital.

### V. Conclusion

### 1. Findings and Discussions

Most of the respondents are female who are more suffered from eye diseases than the male. The most of age group is between 61 years and 80 years who are suffering the poor visual acuity due to the old age. The married people are more than the single who come and take treatment in the eye hospital. The majority of the respondents are the farmers who have the primary level of education. So, they have the low level of healthy knowledge. The majority of the patients are the lower level of income earners, under 100,000 kyats per month, so they have the monetary

difficulties for the medical check-up. The patients take generally the cataract surgery for their health in eye hospital. The respondents have taken curing as two times and sometimes greater than three times. According to the data analysis, the patients have the higher satisfaction on the services of the eye hospital. They do not like only one service quality that the services of the staffs of the hospital who have poor communication on the patients.

### 2. Suggestions and Recommendations

These results of the study have the important implications both for theoretical and practical perspectives. From the theoretical perspectives, this study contributes to the impact of service quality, trust and reputation through patient satisfaction. According to result, the patients of the eye hospital gave positive effect for the quality of object, infrastructure, interaction and atmosphere. These four dimensions consist of different attributes, and these four dimensions of the service quality are sense of (i) using modern machines for treatments and surgery (operation), setting wards and beds, wide hospital's compound, security, support facilities such as tables, seats, (ii) diagnosis, drugs and getting medicine at one stock place, seats and benches are comfortable, easily to find entrance and exist, enough clean toilets, (iii) interaction, right information and feedback, receptionists, security guards and cleaners (iv) good relationship, fresh air, good cleanliness, tranquility and peace. These attributes gave positive result by the patients of eye hospital. This reflects the actual situation that this eye hospital is providing international standard healthcare services. Thus, hospitals' responsible persons are suggested to improve better healthcare services to increase customer satisfaction.

By developing the relevant trust and reputation such as sufficient doctors, nurses and staff, warmly welcoming, rapid and precise service, doctors' decisions, the result of health development, good reputation, various kinds of treatments for eye-diseases, doctors from foreign countries and free services etc., for their patients, their satisfaction would be increased. Having professional and specialist doctors from foreign countries for treatment, doctors' qualifications and having free services are trust and reputation at Shwe Ya Tu Tipitaka Cakkhupala Eye Hospital so that hospital must also maintain these factors.

"Quality of process" measurement has not related with patients' satisfaction because the hospital's treatment is not just in time. This hospital is philanthropic hospital, thus there have the crowd of patients. Healthy knowledge, consumption pattern and physical exercises concerned with health should be given to the patients by nurses because the patients cannot perform the surgery immediately if they had the disease of diabetes or hypertension. The staffs working at this hospital should be

voluntary or hubby workers because it is the philanthropic hospital that offers the low salaries to staffs, so the patients are not treated well by them. In addition to improve the quality of services, for the eye injuries due to diabetes there should be have the medical departments that can treat other ailments. Due to the activities of social enterprise, and good location and road connectivity, existing dental and oral health services is expanded with donations and other general hospital are encouraged to expand. Depending on this hospital, the socio economic condition of Htisaung village will also be expanded and developed for the improvement of healthcare and wellbings.

### 3. Needs for Further Study

Other researchers are suggested to add and study other philanthropic/private hospitals in Sagaing to represent the total population of Myanmar and to study public sectors. This study does not consider the employees who provide the services to patients. Further study can be held to investigate the effect of 5Qs model of the service quality, trust and reputation on employee's job satisfaction in healthcare sector. And future study could be needed to test the same variables in other service sector.

### Acknowledgements

Firstly, I would like to deepest thank to Dr. Moe Moe Yee, Rector of University of Co-operative and Management, Sagaing, for her permission and encourage to writing this paper. Secondly, I would like to greatly thank to U Kyaw Thu Ra, Professor and Head of Department of Economics, to give a chance to participate in Korea Myanmar Research Association (KOMYRA) the Myanmar Journal. Thirdly, I am very thanks to Daw Khin Aye Myint, Professor (Retired) and Head of Department of Applied Statistics, for her statistical calculation of data analysis. Fourthly, I would like to sincerely thank to Dr. Kyi Kyi Win, Professor and Head of Department of Co-operative Studies, for her kindly edition and correction to this paper. Finally, I am also thanks to Ma Khaing Wai Chaw, Master Student of Social Enterprise Management major, for her collecting data from this hospital.

### References

- Abernathy, Marietta. 2015. Perceived Patient Satisfaction with Hospital Services and Interventions. Nursing Theses and Capstone Projects, 217.
- Clark, T.; Rajaratnam, D. 1999. International Services: Perspectives at Century's End . Journal of Services Marketing , 13 (4/5), 298–310. doi: https://doi.org/10.1108/08876049910282556
- HeBE, H. B. 2003. Measurement of patient satisfaction guidelines: . Health Strategy Implementation Project, 4-25.
- Herbig, P.; Milewicz, J. 1993. The Relationship of Reputation and Credibility to Brand Success . Journal of Consumer Marketing, 10 (3), 18–24. doi:https://doi.org/10.1108/eum0000000002601.
- Johansson, P., Oleni, M. and Fridlund, B. 2002. Patient satisfaction with nursing care in the context of health care: A literature study. Scandinavian Journal of Caring Science, 16, 337-344. doi:doi:10.1046/j.1471-6712.2002.00094.x
- Jones, A. J. 2002. On the concept of trust. DECISION SUPPORT SYSTEMS. 33(3), 225 232. doi: https://doi.org/10.1016/S0167-9236(02)00013-1
- Kotler, P.; Kevin Lane Keller. 2009. Marketing Management. Upper Saddle River, N.J.,.
- Mirjam, N. K. 2016. In-patients and Out-patient satisfaction of service delivery in Katutura Hospital. . Thesis.
- Mukhtar, F, & Anjum, A, et al.,. 2013. PATIENT SATISFACTION; OPD Services in Tertiary Care Hospital of Lahore. .
- Parasuraman, A., Zeithaml, V.A., & Berry, L.L. . 1988. SERVQUAL: A multiple-item scale for measuring consumer perceptions of service quality. Journal of Retailing, 64 (1), 12-40.
- Peter Johansson RN, & Magnus Oléni RN, et al., 2002. Patient satisfaction with nursing care in the context of health care: a literature study. Scandinavian Journal of Caring Sciences, 16(4). 337-338.
- Rizyal, A. D. 2012. Patients' Satisfaction with eye care services at Nepal Medical College.
- Sathish, A.S. and Indradevi R, S. G. 2018. A Service Quality and its Influence on Customer Satisfaction in Multi-Speciality Hospital. 7(4), 356 359.
- Sayed, N H & Shams, U R. 2012. Patient Satisfaction Regarding Hospital Services: A case study of UMEA Hospital. . Thesis.
- Shelton, P. J. 2000. Measuring and improving patient satisfaction. Book.
- Solomon, M. 2009. Consumer behavior, Buying, Having and Being. (8. edition, Ed.) Inc.413.
- Swamy, J. 1975. Product performance and customer satisfaction: A new concept. . Journal of Marketing, 40(2), 204-2012. .
- Swan, J. E., & Combs, L. J. 1976. Product performance and consumer satisfaction: A new concept. Journal of Marketing, 40(2), 25–33. doi: https://doi.org/10.2307/1251003
- Than Tun Sein & Phone Myint, et al.,. 2014. The Republic of the Union of Myanmar health system review, Health Systems in Transition. 4(3).
- Thom, D.H., Hall, M.A. & Pawlson, L.G. 2004. Measuring patients trust in physician when assessing quality of care. 23(4), 124-132. .
- Williams, B. & Wilkinson, G. 1995; 2018. Patient satisfaction in mental health care:

evaluating and evaluative method. British Journal of Psychiatry, 559-562. doi:10.1192/bjp.166.5.559

Zineldin, M. 2006. The quality of health care and patient satisfaction. International journal of health care quality assurance, 19(1), 60-92.

# The Myanmar JOURNAL

- Volume 9 Number 3 February 2022

30 August 2022

Yangon University of Economics (Myanmar) Korea Myanmar Research Association (Korea) 2014~, Semiannual ISSN: 2383-6563(Online)

Co-published with Yangon University of Economics (YUE) and Korea Myanmar Research Association (KOMYRA)

http://www.komyra.com/doc/submission.php