AN EMPIRICAL STUDY OF SERVICE QUALITY WITH SPECIAL REFERENCE TO GENDER

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Abstract: Service means doing work for the sake of another people. It has been paid or non-paid both. Generally the term quality matters when service becomes paid service. But in hospitals prospective either it has paid or non-paid, has most important. One should come in hospital if service quality if that hospital has well. Perception of service quality of hospitals has gender biased both male and female have different perception towards quality of services offered the hospital. In this study expectations of male and female of two different cities Ahmedabad and Ujjain have been taken and analysed. The sample size is 300 in which 169 are male and 131 are female responded and the primary data is collected by a structured questionnaire.

Keywords: Service quality, Perception, Expectation.

Introduction:

Service Quality as perceived by patients is defined as the degree and directions of discrepancy between patients' service perceptions and expectations. It is also defined as difference between "technical quality" (what is delivered in the form of treatment) and "functional quality" (how it is delivered), and as "process quality" (judged during the treatment of process) and "output quality" (judged after the treatment).

Service means doing work for the sake of another people. It has been paid or non-paid both. Generally the term quality matters when service becomes paid service. But in hospitals prospective either it has paid or non-paid, has most important. One should come in hospital if service quality if that hospital has well. Before came to hospital a person ask about the hospital to their family members, friends and relatives. Whatever the hospital they refer he/she may go there. People recommends to other when the hospital have all up-to-date facilities with quality. Perception of service quality of hospitals has gender biased both male

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and female have different expectations. Also both have different perception according to the services they taken from the hospitals.

Larsson and Wilde-Larsson (2010) presented a tentative model of patient satisfaction in a psychological framework. The framework had its starting point in the cognitive-phenomenological tradition developed by Lazarus and Folkman (1984), which states that the way a person appraises and copes with a situation causally contributes to his or her emotional reaction. In turn, the appraisal process is shaped by interacting person-related conditions and actual, external conditions. Socio-demographic characteristics, the individual's health conditions and personality are person-related conditions that affect the person's beliefs system (expectations) and commitments (preferences). The person-related conditions, including expectations and preferences, interact with external objective conditions, such as the model of care. The appraisal and coping processes follow the perception of actual care received (perceived health service attribute reality) and give an emotional reaction called patient satisfaction (Larsson, 1987; Larsson, et al., 1996; Larsson & Wilde-Larsson, 2010).

Literature Review:

Nandan et al (2006), the findings of their study that for health related problems community members first discuss with family members and other influential persons of their caste community and accordingly take decision regarding where to seek care and/or treatment. Majority of people first try some home treatment and only when they are not relieved they opt for approaching any provider. Choice of health provider is in fact dependant on decision makers which could be elder male family members or some other person from the community. Literacy status, socioeconomic status, past experience and perceived quality of health care services also play pivotal role in selection of provider. Quality of available health care services was poor in the opinion of respondents as a result of which rural community prefers to approach private providers ranging from indigenous medical practitioners, RMPs' and qualified doctors.

Narichiti (2010), clearly reveal that all the three Hospitals failed in creating patient centred hospital environment. The analysis on the perception of doctors and nursing staff clearly reveals that in case of Government General Hospital there is a perceptible gap in the minds of doctors and nursing staff and also on the dimensions of service expected and received by the patients on the environment created for achieving patient centre hospitals. However, the gap is thin in case of the doctors and nursing staff of St. Joseph's and NRI General Hospitals.

Singh (2010), concluded from the study was that the important reasons to visit government hospitals are fewer charges, geographical proximity, recommended by their friends or relatives. Patients are found to be dissatisfied with the doctors' checkups. Mostly patients were found dissatisfied with the hygiene and overall condition of the basic amenities. Half of the patients were satisfied with the recovery since admission in the hospital. Majority of patients were satisfied with various diagnostic services provided by hospitals. Mostly patients did not lodge complaint against the behavior of staff and quality of services.

Sharma (2011), shows that 'Healthcare delivery' and 'financial and physical access to care' significantly impacted the perception among men while among women it was 'healthcare delivery' and 'health personnel conduct and drug availability'. With improved income and education, the expectations of the respondents also increased. The overall quality of healthcare services is perceived to be higher in Primary Healthcare Centers than in Community Healthcare Centers (CHCs). Inadequate availability of doctors and medical equipments, poor clinical examination and poor quality of drugs were the important drawbacks reported at CHCs. Another interesting finding that emerged was with respect to IPD and OPD patients and their intention to visit the health centre in future. For those visiting the hospital for minor health problems, physical and financial access to health centres, and availability of doctors providing sufficient time, and satisfactory prescription to help them recover fast were more important than other factors.

Dave et al (2014) revealed that there was no significant difference between the male and female for the desire of best treatment. Respondents between the age group between 31 to 40 years had given highest importance to cleanliness and hygiene. It was found that young patients were more quality conscious than older patients. It was also found that 26 per cent of total respondents were satisfied with hospitals services and remaining 76 per cent were dissatisfied with hospitals services.

Research Methodology:

Objectives:

1. The main objective of this study is to examine the expectation and perception of Male and Female people towards service quality of hospitals.

2. To study the expectation and perception of Male people towards service quality of hospitals.

3. To study the expectation and perception of Female people towards service quality of hospitals.

4. To compare expectations of Male and Female people towards service quality of hospitals.

5. To compare perceptions of Male and Female people towards service quality of hospitals.

Sampling Unit:

The universe of the study consists of peoples of Ahmedabad and Ujjain cities. Sampling Unit was the peoples who came in Ahmedabad and Ujjain cities hospitals.

Sampling Size:

The sample size planned to be n =300 respondents. Initially 320 questionnaire were distributed out of which 159 from Ahmedabad and 161 from Ujjain were received back. Nine questionnaire from Ahmedabad and eleven questionnaire from Ujjain have been randomly selected end eliminated to make sample 300 (150 each from Ahmedabad and Ujjain).

Sampling Method:

Simple random sampling method was adopted for the study.

The Tool for Data Collection:

The data for the study had collected through a well-structured questionnaire. The questionnaire consists of statements relating to expectation and perception of service quality of hospitals. The questionnaire consists of three parts A, B and C. Part-A consists of demographic variables like Age, Gender, Qualification, Occupation, Type of hospitals, Category of treatment and number of visits etc.

The Part-B of questionnaire consists of the level of Expectation and Part-C consists of Perception regarding Service Quality of Hospitals. The variables were grouped under five dimensions of SERVQUAL such as –Tangible, Reliability, Responsiveness, Assurance and Empathy. Each factor consists of four to five statements. Likert Scale was used in the questionnaires. All Respondents were asked to rank their choices ranging from 1 to 5 for each major factor, where 1 is the 'Strongly Agree', 2 is 'Agree', 3 is 'Can't Say', 4 is 'Disagree', 5 is 'Strongly Disagree'.

Tools for Analysis:

Z-Test is used for the analysis of data.

$$z = \frac{(\overline{x_1} - \overline{x_2}) - (\mu_1 - \mu_2)}{\sqrt{\dfrac{\sigma_1^2}{n_1} + \dfrac{\sigma_2^2}{n_2}}}$$

Where as

$\overline{x}_1$ = mean of the sample one

$\overline{x}_2$ = mean of the sample two

μ_1 = Hypothesized mean for sample one

μ_2 = Hypothesized mean for sample two

σ_1 = Standard deviations of sample one

σ_2 = Standard deviations of sample two

n_1 = Number of respondent for sample one

n_2 = Number of respondent for sample two

Standard value of Z= 1.96.

Data Analysis and Interpretation:

On the basis of above objective following hypothesis have been formed

$H_{01:}$ -There is no significance difference between the expectation and perception of Male people towards service quality of hospitals.

Table:1 TESTING THE LEVEL OF SIGNIFICANCE BETWEEN THE EXPECTATIONS AND PERCEPTIONS OF MALE PEOPLE TOWARDS SERVICE QUALITY OF THE HOSPITALS								
Sub Hypot heses	Parameters	Expectations		Perceptions		Z-Value	5% Level of Signif icance	Results
		Mean	Std Dev	Mean	Std Dev			
H01.1	Tangibles	1.974	0.854	2.373	1.122	3.678	1.96	Not Accepted
H01.2	Reliability	2.192	0.967	2.196	1.030	0.035	1.96	Accepted
H01.3	Responsive ness	2.183	0.983	2.439	1.109	2.244	1.96	Not Accepted
H01.4	Assurance	2.230	0.969	2.366	1.032	1.250	1.96	Accepted
H01.5	Empathy	2.233	1.063	2.456	1.123	1.879	1.96	Accepted

Testing the level of significance between the expectations and perception of Male people towards service quality of the hospitals:

Table: 1, shows that H01.2, H01.4 and H01.5 have been accepted. H01.1 and H01.3 has not been accepted.

Results shows that there is significant difference between the expectation and perception of Male people towards the service quality parameters viz. Reliability, Assurance and Empathy. Hence sub hypothesis H01.2, H01.4 and H01.5 have been accepted. Whereas service quality parameters Tangible and Responsiveness i.e. sub hypothesis H01.1 and H01.3 has not been accepted. It also shows that there is a level of dissatisfaction of Male people towards the service quality of hospitals. Results show that there is huge difference between the expectation and perception of people.

In case of 'Tangible' services of Male people the mean value of expectation (1.974) is slightly less than the mean value of perception of male people (2.373). Whereas expectation of Male people has slightly less deviation (0.854) comparative to the value of perception (1.122). This sub hypothesis Z value has not been accepted as the basis for the study in terms of expectations and perceptions of Male people towards the 'Tangible' services of the hospital.

In case of 'Reliability' services of Male people the mean value of expectation (2.192) is slightly less than the mean value of perception of male people (2.196). Whereas expectation of Male people has slightly less deviation (0.967) comparative to the value of perception (1.030). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Male people towards the 'Reliability' services of the hospital.

In case of 'Responsiveness' services of Male people the mean value of expectation (2.183) is slightly less than the mean value of perception of male people (2.439). Whereas expectation of Male people has slightly less deviation (0.983) comparative to the value of perception (1.109). This sub hypothesis Z value has not been accepted as the basis for the study in terms of expectations and perceptions of Male people towards the 'Responsiveness' services of the hospital.

In case of 'Assurance' services of Male people the mean value of expectation (2.230) is slightly less than the mean value of perception of male people (2.366). Whereas expectation of Male people has slightly less deviation (0.969) comparative to the value of perception (1.032). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Male people towards the 'Assurance' services of the hospital.

In case of 'Empathy' services of Male people the mean value of expectation (2.233) is slightly less than the mean value of perception of male people (2.366). Whereas expectation of Male people has slightly less deviation (1.063) comparative to the value of perception (1.123). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Male people towards the 'Empathy' services of the hospital.

H_{02}: There is no significance difference between the expectation and perception of Female people towards service quality of hospitals.

Testing the level of significance between the expectations and perception of Female people towards service quality of the hospitals:

Table: 2, shows that H02.1, H02.2, H02.3, H02.4 and H02.5 have been accepted.

Results shows that there is significant difference between the expectation and perception of Female people towards the service quality parameters viz. Tangible, Reliability, Responsiveness, Assurance and Empathy. Hence sub hypothesis H02.1, H02.2, H02.3, H02.4 and H02.5 have been accepted. Viz. Tangibility, Reliability, Responsiveness, Assurance and Empathy. It also shows that there is a level of dissatisfaction of Female towards the service quality of hospitals. Results show that there is huge difference between the expectation and perception of people.

Table:2 TESTING THE LEVEL OF SIGNIFICANCE BETWEEN THE EXPECTATIONS AND PERCEPTIONS OF FEMALE PEOPLE TOWARDS SERVICE QUALITY OF THE HOSPITALS								
Sub Hypotheses	Parameters	Expectations		Perceptions		Z-Value	5% Level of Significance	Results
		Mean	Std Dev	Mean	Std Dev			
H02.1	Tangibles	1.801	0.761	1.984	0.840	1.848	1.96	Accepted
H02.2	Reliability	2.090	0.915	2.204	0.972	0.981	1.96	Accepted
H02.3	Responsiveness	2.156	0.947	2.305	1.017	1.226	1.96	Accepted
H02.4	Assurance	2.080	0.932	2.253	0.941	1.500	1.96	Accepted
H02.5	Empathy	2.122	0.959	2.341	1.070	1.750	1.96	Accepted

In case of 'Tangible' services of Female people the mean value of expectation (1.801) is slightly less than the mean value of perception of Female people (1.984). Whereas expectation of Female people has slightly less deviation (0.761) comparative to the value of perception (0.840). This sub hypothesis Z value has been accepted as the basis for the study

in terms of expectations and perceptions of Female people towards the 'Tangible' services of the hospital.

In case of 'Reliability' services of Female people the mean value of expectation (2.090) is slightly less than the mean value of perception of Female people (2.204). Whereas expectation of Female people has slightly less deviation (0.915) comparative to the value of perception (0.972). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Female people towards the 'Reliability' services of the hospital.

In case of 'Responsiveness' services of Female people the mean value of expectation (2.156) is slightly less than the mean value of perception of Female people (2.305). Whereas expectation of Female people has slightly less deviation (0.947) comparative to the value of perception (1.017). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Female people towards the 'Responsiveness' services of the hospital.

In case of 'Assurance' services of Female people the mean value of expectation (2.080) is slightly less than the mean value of perception of Female people (2.253). Whereas expectation of Female people has slightly less deviation (0.932) comparative to the value of perception (0.941). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Female people towards the 'Assurance' services of the hospital.

In case of 'Empathy' services of Female people the mean value of expectation (2.122) is slightly less than the mean value of perception of Female people (2.314). Whereas expectation of Female people has slightly less deviation (0.959) comparative to the value of perception (1.070). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations and perceptions of Female people towards the 'Empathy' services of the hospital.

H_{03}: - There is no significance difference between the expectations of Male and Female people towards service quality of hospitals.

Table:3
TESTING THE LEVEL OF SIGNIFICANCE BETWEEN THE EXPECTATIONS OF MALE AND FEMALE TOWARDS SERVICE QUALITY OF THE HOSPITALS

Sub Hypotheses	Parameters	Expectations		Expectations		Z-Value	5% Level of Significance	Results
		Mean	Std Dev	Mean	Std Dev			
H03.1	Tangibles	1.974	0.854	1.801	0.761	1.969	1.96	Not Accepted
H03.2	Reliability	2.192	0.967	2.090	0.915	1.004	1.96	Accepted
H03.3	Responsiveness	2.183	0.983	2.156	0.947	0.256	1.96	Accepted
H03.4	Assurance	2.230	0.969	2.080	0.932	1.456	1.96	Accepted
H03.5	Empathy	2.233	1.0637	2.122	0.959	1.007	1.96	Accepted

Testing the level of significance between the expectations of Male and Female people towards service quality of the hospitals:

Table: 3, shows that H03.2, H03.3, H03.4 and H03.5 have been accepted.H03.1 has not been accepted.

Results shows that there is significant difference between the expectations of Male and Female people towards the service quality parameters viz. Reliability, Responsiveness, Assurance and Empathy. Hence sub hypothesis H03.2, H03.3, H03.4 and H03.5 have been accepted. It also shows that there is a level of dissatisfaction of Male and Female towards the service quality of hospitals. Results show that there is huge difference between the expectations of people. Whereas H03.1 has not been accepted.

In case of 'Tangible' services of Male people, the mean value of expectation (1.974) is slightly less than the mean value of the expectations of Female people (1.801). Whereas people in Male has slightly high deviation (0.854) comparative to the value of expectation of Female people (0.761). This sub hypothesis Z value has not been accepted as the basis for the study in terms of the expectations of Male and Female people towards the 'Tangible' services of the hospital.

In case of 'Reliability' services of Male the mean value of expectation (2.192) among people is slightly high than the mean value of expectations of Female people (2.090). Whereas people in Male has slightly high deviation (0.967) comparative to the value of expectation of Female people (0.915). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations of Male and Female people towards the 'Reliability' services of the hospital.

In case of 'Responsiveness' services of Male the mean value of expectation (2.183) among people is slightly high than the mean value of expectation of Female people (2.156). Whereas

people in Male has slightly high deviation (0.983) comparative to the value of expectation of Female people (0.947).This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations of Male and Female people towards the 'Responsiveness' services of the hospital.

In case of 'Assurance' services of Male the mean value of expectation (2.230) among people is slightly high than the mean value of expectation of Female people (2.080). Whereas people in Male has slightly high deviation (0.969) comparative to the value of expectation of Female people (0.932). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations of Male and Female by people towards the 'Assurance' services of the hospital.

In case of 'Empathy' services of Ahmedabad, the mean value of expectation (2.233) among people is slightly high than the mean value of expectation of Female people (2.122). Whereas people in Male has slightly high deviation (1.063) comparative to the value of expectation of Female people (0.959). This sub hypothesis Z value has been accepted as the basis for the study in terms of expectations of Male and Female people towards the 'Empathy' services of the hospital.

H_{04}: -There is no significance difference between the perceptions of Male and Female people towards service quality of hospitals.

Table:4 TESTING THE LEVEL OF SIGNIFICANCE BETWEEN THE PERCEPTIONS OF MALE AND FEMALE TOWARDS SERVICE QUALITY OF THE HOSPITALS							
Sub Hypot Hese	Parameters	Perceptions		Perceptions		Z-Value	5% Level of Signif icance	Results
		Mean	Std Dev	Mean	Std Dev			
H04.1	Tangibles	2.373	1.122	1.984	0.840	3.607	1.96	Not Accepted
H04.2	Reliability	2.196	1.030	2.204	0.972	0.072	1.96	Accepted
H04.3	Responsiveness	2.439	1.109	2.305	1.017	1.158	1.96	Accepted
H04.4	Assurance	2.366	1.032	2.253	0.941	1.052	1.96	Accepted
H04.5	Empathy	2.456	1.123	2.341	1.070	0.962	1.96	Accepted

Testing the level of significance between the perceptions of Male and Female people towards service quality of the hospitals:

Table: 4 shows that H04.2, H04.3, H04.4 and H04.5 have been accepted.H04.1 has not been accepted.

Results shows that there is significant difference between the perceptions of Male and Female people towards the service quality parameters viz. Reliability, Responsiveness, Assurance and Empathy. Hence sub hypothesis H04.2, H04.3, H04.4 and H04.5 have been accepted. It also shows that there is a level of dissatisfaction of Male and Female towards the service quality of hospitals. Results show that there is huge difference between the perception and perception of people. Whereas H04.1 has not been accepted.

In case of 'Tangible' services of Male the mean value of perception (2.373) among people is slightly high than the mean value of the perceptions of Female people (1.984). Whereas people in Male has slightly high deviation (1.122) comparative to the value of perception of Female people (0.840). This sub hypothesis Z value has not been accepted as the basis for the study in terms of the perceptions of Male and Female people towards the 'Tangible' services of the hospital.

In case of 'Reliability' services of Male the mean value of perception (2.196) among people is slightly high than the mean value of perceptions of Female people (2.204). Whereas people in Male has slightly high deviation (1.030) comparative to the value of perception of Female people (0.972). This sub hypothesis Z value has been accepted as the basis for the study in terms of perceptions of Male and Female people towards the 'Reliability' services of the hospital.

In case of 'Responsiveness' services of Male the mean value of perception (2.439) among people is slightly high than the mean value of perception of Female people (2.305). Whereas people in Male has slightly high deviation (1.109) comparative to the value of perception of Female people (1.017).This sub hypothesis Z value has been accepted as the basis for the study in terms of perceptions of Male and Female people towards the 'Responsiveness' services of the hospital.

In case of 'Assurance' services of Male the mean value of perception (2.366) among people is slightly high than the mean value of perception of Female people (2.253). Whereas people in Male has slightly high deviation (1.032) comparative to the value of perception of Female people (0.941). This sub hypothesis Z value has been accepted as the basis for the study in terms of perceptions of Male and Female by people towards the 'Assurance' services of the hospital.

In case of 'Empathy' services of Male the mean value of perception (2.456) among people is slightly high than the mean value of perception of Female people (2.341). Whereas people in

Male has slightly high deviation (1.123) comparative to the value of perception of Female people (1.070). This sub hypothesis Z value has been accepted as the basis for the study in terms of perceptions of Male and Female people towards the 'Empathy' services of the hospital.

Findings and Conclusion:

There is significant difference between the expectation and perception of Male peoples towards the service quality parameters viz. Reliability, Assurance and Empathy. Whereas service quality parameters Tangible and Responsiveness has not been accepted. It also shows that there is a level of dissatisfaction of Male peoples towards the service quality of hospitals. Results show that there is huge difference between the expectation and perception of people.

There is significant difference between the expectation and perception of Female peoples towards the service quality parameters viz. Tangible, Reliability, Responsiveness, Assurance and Empathy. It also shows that there is a level of dissatisfaction of Female towards the service quality of hospitals.

There is significant difference between the expectations of Male and Female people towards the service quality parameters viz. Reliability, Responsiveness, Assurance and Empathy. It also shows that there is a level of dissatisfaction of Male and Female towards the service quality of hospitals.

There is significant difference between the perceptions of Male and Female people towards the service quality parameters viz. Reliability, Responsiveness, Assurance and Empathy. It also shows that there is a level of dissatisfaction of Male and Female towards the service quality of hospitals.

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