



Service Recovery Strategy in Private Hospitals: The Role of Experience, Symbolic, and Functional Brand Images

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ABSTRACT

This study investigates the influence of brand image on service recovery strategy, customer satisfaction, word-of-mouth communication, and revisit intentions within the context of private hospitals. The research identifies four dimensions of brand image: experiential, symbolic, functional, and social. The findings reveal that experiential, symbolic, and functional images positively impact service recovery strategy, while the social image does not have a significant positive effect. Service recovery strategies based on perceived justice significantly enhance customer satisfaction, which, in turn, fosters positive word-of-mouth and increases revisit intentions. The study highlights the importance of managing brand image to improve service recovery outcomes and maintain positive behavioural intention. Theoretical implications suggest further exploration of brand image factors and perceived justice in service recovery. Managerial implications emphasise the need for targeted marketing strategies that enhance functional and experiential brand images while avoiding social status associations. This study offers valuable insights for academia and practice, contributing to understanding and managing brand image and service recovery strategies in private hospitals.

Keywords: Service Recovery Strategy, Brand Image, Private Hospitals, Satisfaction, WOM

JEL Classifications: I11, L84, M31

1. INTRODUCTION

The core aim of the service recovery strategy lies in the concerted effort to recall satisfaction (Cheng et al., 2019; Amoako et al., 2023). Satisfaction is a pivotal determinant in service performance assessment and decision-making within the service sector (Odoom et al., 2019), as well as service excellence and quality. Customer satisfaction reflects that the service unit has exceeded the recipient's expectations. Measuring the level of satisfaction in service recovery strategy thus signifies the success of the service recovery process. Previous studies have demonstrated the correlation between customer satisfaction and the effectiveness of service recovery strategy. Additionally, there is evidence of the influence of customer satisfaction on various aspects, including word-of-mouth communication, brand loyalty, and customer revisit intention. (Liat et al., 2017; Zhang et al., 2018; Radu et al., 2019) Furthermore, the development

of word of mouth communication (Akinci and Aksoy, 2019; Donthu et al., 2021).

Service failure encompasses service quality that falls below customer expectations and results in dissatisfaction (Hoffman and Bateson, 1997). Effective service recovery strategy are crucial tools in restoring satisfaction (Mack et al., 2000). A failed service recovery strategy can have negative repercussions, leading to complaints, negative word-of-mouth, and even customer defection (Zhou and Duan, 2015). A prosperous service recovery strategy can lead to customer satisfaction and increase the likelihood of customers returning for future interactions. Additionally, satisfied customers are more inclined to engage in positive word-of-mouth communication, which can benefit the business (Ding and Lii, 2016; Moliner-Velázquez et al., 2015). Effective service recovery strategies are crucial for service businesses as they play a vital role in fostering customer satisfaction, promoting positive word-

of-mouth communication, cultivating customer loyalty, and enhancing competitiveness by reducing revenue loss (Mack et al., 2000; Wirtz and Mattila, 2004).

After the shift in the healthcare service paradigm from a focus on humanistic values to an industry-oriented profit-driven approach (Sasadhara Sasmita et al., 2021), Brand image is a crucial tool that hospital businesses utilise to enhance their competitive edge within the industry. Brand image is leveraged as a vital marketing tool in both acquisition strategy to attract new customers and retention strategy to maintain existing ones. It involves the brand's value perception and contributes significantly to its market positioning (Kim et al., 2008). The hospital's brand value is paramount for customer loyalty, and the hospital's image is a crucial foundation that helps build confidence and trust in the hospital's brand. Customer loyalty to the hospital's brand fosters a sense of commitment and confidence in utilising the hospital's services. Simultaneously, the hospital's image is equally significant as it creates impressions and perceptions among customers towards the hospital. These are vital components that contribute to building trust and the success of the hospital business effectively (Górska-Warsewicz, 2022). The study on the influence of brand image on satisfaction, service quality, and hospital performance found limited significance regarding service recovery strategy (Wu, 2011; Sciulli and Missien, 2015; Meesala and Paul, 2018; Raka Sukawati, 2021). Private hospitals have utilised brand-building strategies to strengthen their business by creating memorable experiences and enabling customers to differentiate the brand's personality. This approach enhances communication within customer groups (Cham et al., 2020; Fook et al., 2024). Indeed, a strong brand image yields various advantages for businesses, significantly when bolstering their competitive advantage (Demir et al., 2024). Creating a brand in the service industry significantly impacts customer service selection and buyer decision-making. A strong brand image instils confidence in customers that the services offered are high quality and trustworthy. Customers can filter their options and make decisions with greater confidence and assurance. Thus, building a sound and robust brand image is crucial for service businesses to succeed in the competitive market to its fullest potential (Ago et al., 2015; Owu et al., 2024).

On the other hand, creating a brand image can be a double-edged sword as it also shapes consumer expectations. When customers develop high expectations based on a solid brand image, there is a risk that the actual service may only sometimes meet these expectations. Therefore, while building a solid brand image is essential, it is equally crucial for businesses to ensure that they deliver on their promises and consistently meet or exceed customer expectations to maintain trust and loyalty (Andreassen and Gjerard, 2024). This impacts the opportunity to develop satisfaction among customer groups with high expectations (Ragwitz et al., 2009; Singh, 1996). This study aims to foster a profound understanding of the dimensions of brand image, underscoring its significance in aligning knowledge with business operations, particularly in service recovery strategy. There have been numerous studies on service recovery strategy, such as those in hotels, airlines, banks, department stores, and mobile network service providers (Abbas, 2012; Black et al., 2018; Kim and Oh, 2012; McQuilken et al., 2020; Rod and

Ashill, 2010). However, only some studies in the healthcare service industry, especially in hospitals, face service challenges (Özpinar, 2024). This is because patients receiving these services often have high levels of concern or expectations regarding the service outcomes compared to other service sectors. Therefore, if mistakes occur, service recovery strategy in the hospital industry will likely be even more challenging (Kau and Wan-Yiun Loh, 2006).

The healthcare service industry in Thailand has been continuously expanding, with a value of over 107 billion baht annually, and it is expected to increase continuously further (Kasikorn Research Center, 2015). The main factors contributing to Thailand's recognition include reasonable pricing, quality services meeting international standards, modern technology expertise among staff, excellent hospitality, and beautiful tourist destinations according to the 12th National Economic and Social Development Plan aims to develop Thailand as a global health hub (Office of the National Economic and Social Development Council, 2017). The Ministry of Public Health has been assigned as the principal agency to drive Thailand's development strategy as an international medical hub since 2004 (Thailand Board of Investment, 2019). Private hospitals in Thailand have gained international acclaim and are recognised as leading destinations for medical tourism (Mandagi et al., 2024). Due to its excellent quality of medical services, Thailand has been recognised as a country with outstanding healthcare services (Monthalee et al., 2016), Ranked 13th globally for its excellent healthcare services (Peter Carlisle, 2021). The private hospital business in Thailand is continuously growing, driven by various factors such as the ageing population, the expanding middle class, urban community expansion, the increasing number of both communicable and non-communicable diseases, and the rise in medical tourism. (Kasikorn Research Center, 2023).

Therefore, the researchers are interested in studying the influence of hospital brand image on service recovery strategy, satisfaction, word-of-mouth communication, and intention to revisit in the context of private hospitals in Thailand. Word-of-mouth communication is a critical outcome with behavioural implications related to the expectancy-disconfirmation theory of satisfaction (Oliver, 1980a), which refers to disseminating messages or information about a product or service from one person to another. The roles in sending and receiving messages are consumers' responsibilities (Chatterjee, 2001; Sen and Lerman, 2007). This study has utilised the Expectation Confirmation Theory to explain the process of satisfaction generation, considering what customers expect compared to the perceived value. If customers have lower expectations than perceived value, expectation confirmation occurs, leading to eventual satisfaction. The social exchange theory uses evaluation guidelines to compare costs and benefits within the consumer's mind. If consumers perceive that the benefits outweigh the costs, social exchange occurs. Conversely, if the benefits received are lower than the costs, no social exchange takes place (Xia et al., 2021).

2. LITERATURE REVIEW

2.1. Expectation Confirmation Theory (ECT)

The Expectation Confirmation Theory was developed in 1977 (Oliver, 1980). ECT is applied to explain and study consumer

satisfaction and purchase intention. ECT elucidates causal factors in predicting satisfaction, divided into two stages: pre-consumption and post-consumption. Generally, consumers form expectations beforehand and then perceive the actual performance of a product or service afterwards. Subsequently, consumers evaluate satisfaction by comparing it with the actual performance of the product or service after usage (Baek et al., 2014). Once consumers confirm that their expectations regarding a product or service are met and they find it reliable, satisfaction ensues. ECT is commonly utilised to confirm consumer behaviour. For instance, it is applied in technology acceptance models, marketing strategy studies, and investigations into the influence of factors or motivations on satisfaction. (Baharum and Jaafar, 2015; Jin et al., 2013; Rahi and Abd. Ghani, 2019).

2.2. Social Exchange Theory (SET)

SET explains the relationship between individuals in society based on assessments, cost-benefit analyses, or comparisons of benefits. It is rooted in economics, psychology, and sociology and is related to rational choice theory and structuralism theory. Besides, it is applied in business to elucidate the process of exchanging goods and plays a vital role in explaining inter-business relationships (Emerson, 1976). The core idea revolves around individuals engaging in social exchange relationships with others, expecting rewards in return for their exchanges. The Social Exchange Theory focuses on actions or behaviours that lead to contingent outcomes, meaning benefits that were not necessarily expected beforehand. It also emphasises studying both the relationships between unforeseen commonalities and the joint contributions in the process of providing benefits, referred to as “transactions,” and the patterns of relationships called “exchanges” (Blau, 1964).

The SET posits that each person’s interests will create interactions and patterns of exchange between one person and another, aiming to produce outcomes that lead to success in areas where they have yet to succeed. (Lawler and Thye, 1999) The exchange process ends when both parties agree that neither party is benefiting anymore (Konovsky & Pugh, 1994). Social exchange can be described as a fundamental human behaviour where individuals exchange benefits or give something of higher value to the recipient from their perspective but of lesser value from the giver’s perspective (Hormans, 1961). The kinds of stuff exchanged can be tangible and intangible, simultaneously possessing economic and social value. For instance, goods, cash, information, advice, social acceptance, and recognition can all be part of the exchange. The theory of social exchange is applied to explain the formation of behavioural intentions after service users are satisfied with the compensatory service processes of private hospitals in Thailand. It elucidates the informal social exchange patterns, such as mutual assistance, cooperation, information sharing, bond formation, and positive feelings between service users and recipients.

2.3. Brand Image

The image and brand are identical but not identical. However, a brand image is a fusion of relationships between all the elements to make recipients understand and perceive the brand’s purpose (Kalieva, 2015). The brand image is created by presenting the value the brand promises to deliver according to its pledged

standards. The brand image is a physical characteristic with social and psychological implications. The purpose of a brand image is to represent the characteristics of the desired product, indicating the usefulness of communication that can convey unique characteristics and patterns (Işoraitè, 2018). The brand image represents a particular product’s unique value and characteristics associated with the organisation (Bravo et al., 2010). Building a brand image can result from the impact of practical marketing activities and advertisements to foster consumer acceptance and generate positive attitudes towards the product. In the banking industry, creating a brand image that promotes brand citizenship perception can lead to a competitive advantage over competitors (Ghorbanzadeh, 2024) The brand image is the perception that consumers have of a product, and in evaluating a consumer’s brand image, there are invariably different components that vary from person to person (Islam et al., 2023).

A brand can be considered an asset of an organisation that adds value to its products and services. It is a blend of external physical attributes visible to consumers and internal functional features and benefits of the product that consumers experience after purchase or service usage. A good brand image of an organisation can create perception, value, and memorability, as well as promote acceptance, forgiveness, and familiarity with the brand. This fosters the development of a strong brand image (Cretu and Brodie, 2009). Developing a solid brand image is a crucial factor in generating business profits. A robust brand image can promote product purchases and play a role in stimulating consumers to make purchase decisions more frequently (Saad et al., 2024; Zhu et al., 2021). Consumers’ perceptions of brands or products are linked to the value or characteristics of the products with which they are familiar. This includes factors such as quality levels, design, and product pricing (Srivastava and Kamdar, 2009). The brand image of a product also helps create differentiation in competition (Singh and Sharma, 2023). Furthermore, it can help foster loyalty to the product. A brand’s image can engender loyalty toward the organisation by educating consumers about the product and instilling trust in it, thereby preventing consumers from switching to competitors’ products (Srivastava and Sharma, 2013).

The brand image of an organisation helps protect it from competitors and price wars in the business (Ramadhan et al., 2022; Van Heerde et al., 2008). The organisation that leads its products into the market and succeeds in building consumer confidence in its brand image can help protect the business from price competition in the market. This is because consumers have a solid connection to the brand or service, which helps differentiate it from competitors, making it less susceptible to brand discrimination or switching to competitors (Friedman and Leclercq, 2015; Khatibi et al., 2024). Brand image plays a role in reducing marketing expenses. Successful brands can reduce marketing expenses due to consumer familiarity with their products and services (Rafhdian et al., 2016). The importance of the brand image lies in its ability to sell itself in the market. Organisations may not need to spend on advertising or promotion because consumers know the brand and its products.

The brand image of a product is an asset of the business organisation. Trademarks, copyrights, and patents protect

the intellectual property rights of the organisation that owns the product's brand image. This prevents competitors from counterfeiting or imitating the product without permission (Ligaraba et al., 2024; Nakatani, 2024). The brand image of a product has an impact on its market value (Soretire and Muritala, 2023). A successful product brand in the market typically positively impacts the organisation's operations and profitability (Syed Alwi et al., 2016). The linkage of brand image and product branding is a psychological image that arises from perception. It is a process to deliver that image to consumer perception, which is a tangible and felt benefit. For example, when driving a socially accepted expensive car, the owner appears prestigious. This is an example of how the linkage of brand image and product branding meets the intangible yet felt benefits that consumers seek (Hamzah and Pontes, 2024). The consumer perception that leads to products with similar appearances having similar quality but differing brand images arises from customers' perceptions and the experiences that become ingrained (Natasiah, 2024). It has become increasingly important to use it as a basis for decision-making. Nowadays, marketing strategy often focuses on enhancing the psychological image and value perception of products, and the resulting psychological benefits help instil confidence and loyalty towards the products and services among consumers. The concept of managing brand image suggests that maintaining brand image should stem from the fundamental principles of functionality, symbolism, and experiential aspects. A brand that can maintain a balance and linkage among all three components of the brand image will enhance its effectiveness in the market, (Park et al., 1986)—studying the brand image of products in all four aspects derived from the fundamental perception of benefits in the context of private hospitals.

2.3.1. Experience image

This aspect refers to the company's symbolisation of the product's experience. The brand image can measure the product's value, even if the products and services belong to the same category. Creating a brand image can differentiate products and create marketing value.

2.3.2. Symbolic image

The symbolic aspect refers to the symbolic benefits of the product, which can create the brand image. This may come from accepting the product's quality and ability to meet consumer expectations. When consumers perceive the benefits of the product they receive, it can generate acceptance and contribute to a positive brand image.

2.3.3. Social image

The social aspect indicates and reflects the social status or type of consumer who purchases or uses the product. These products have tangible and intangible aspects, such as efficiency, credibility, confidence, familiarity, experience, and personal image.

2.3.4. Functional image

This aspect focuses on creating value in the product's functionality, which can be used to promote sales. Additionally, the brand's value can stimulate consumer spending and opportunities to increase market share. Consumer purchasing decisions are often influenced by the brand's value more than the price.

This study investigates the four dimensions of brand image based on the perception of benefits in the context of private hospitals. The research explores how these dimensions relate to brand image and consumer behaviour in the healthcare industry, providing insights into marketing communication strategy under the framework of brand image. The study aims to confirm the possibility and foundation of developing research hypotheses by gathering relevant studies to develop hypotheses. The study in the higher education industry investigates service recovery strategy and the quality of relationships in universities linked to brand image. It examines the outcomes of both causal variables, with satisfaction acting as a mediating variable. It was found that the quality of relationships and service recovery strategy positively influence the brand image. Additionally, this study measures the brand image with the second-order constructs, which consist of experiential, functional, and symbolic dimensions (Chen, 2015a).

The study in the hotel industry examines the influence of service recovery strategy and service quality on the predictive variable of customer satisfaction. It identifies the role of brand image in hotels as an outcome resulting from customer satisfaction and possessing characteristics that transmit customer loyalty. This study supports the link between the organisational brand image in the context of the service recovery strategy. Brand image in this study is measured using a single first-order construct without specifying subcomponents (Liat et al., 2017).

A study in the airline industry in the central East Asian region among passengers regarding perceptions of fairness in compensation, processes, and interactions in the role of service recovery strategy towards satisfaction with service recovery strategy. By specifying that brand image plays a role as an intervening variable in the three-dimensional service recovery strategy, the study found that brand image influences satisfaction with service recovery strategy concerning perceptions of fairness in compensation and interactions but has no influence on processes. Brand image plays a role in studying service recovery strategy (Nikbin et al., 2010).

A study in the online product service industry has delineated the roles of brand equity and brand identity as guiding variables between the relationships of perceptible service recovery strategy, which include apology, compensation, speed of response, and courtesy, linking to service recovery strategy through perceptions of fairness and satisfaction with service recovery strategy. The study's findings reveal that brand equity and identity negatively mediate between compensation and sincerity. This study demonstrates that brand image in the context of service recovery adversely impacts businesses when errors occur (Lu et al., 2020).

2.4. Service Recovery Strategy (SRS)

Gronroos (1988) Service recovery strategy refers to addressing and resolving customer complaints or grievances to regain customer satisfaction with the service. It involves actions taken to rectify service failures or attempts to turn dissatisfied customers into satisfied ones. Service recovery can include providing solutions to problems or complaints raised by customers, aiming to restore them to a state of satisfaction. Service recovery strategy is about

responding to service failures or customer dissatisfaction by rectifying the situation and restoring customer satisfaction. Service businesses can proactively address situations arising from service errors when customers complain as a means of service recovery.

A service failure occurs when a customer has specific expectations regarding the level of service they anticipate receiving. However, upon actually experiencing the service, they perceive it to be below their expected standards (Shapiro and Nieman-Gonder, 2006). When a service failure occurs, customers will assess the nature of the failure and demonstrate their emotions and behaviours accordingly (Bonifield and Cole, 2007). A service unit that fails to manage service failures will create a negative image for the organisation and continuously impact damages. This relates to reputation and perception within the organisation.

Service recovery is a process with structured steps designed to manage customers who have had negative experiences with a service. Effective service recovery is crucial for customers who encounter problems with service failures because they are emotionally involved with the failure and are directly impacted. They also evaluate the effectiveness or performance of the service recovery strategy implemented to compensate for their dissatisfaction with the service (Berry and Parasuraman, 1991). Service managers must possess knowledge and expertise in service recovery and have skills to train employees to effectively manage service failures to maintain the organisation's service quality. Even the most exceptional service businesses can only partially prevent service failures. Therefore, service marketers focus on studying and understanding the processes of service failures and efficient service recovery methods to reduce the severity of customer dissatisfaction resulting from service failures (Hess Jr. et al., 2003). Service businesses must acknowledge the inevitability of service failures and strive to minimise them as much as possible, if not avoid them altogether (Odoom et al., 2019). A study in the e-commerce sector found that service recovery plays a significant role in garnering attention to the details of service management and processes. Service recovery, including designing procedures to address issues, is crucial for changing the negative perceptions resulting from customer dissatisfaction. Ultimately, effective service recovery aims to retain customers in the long run (Kim, 2007).

In multidimensional service businesses, the challenge of selecting a service recovery strategy is inherently tricky to avoid (Agarwal and Selen, 2011). Service errors that may occur result from service situations where the perceived level falls below the expected level of the service user (Hoffman and Bateson, 1997). In the tourism service industry, service errors can arise from various sources, including the unavailability of services, unreasonably slow service provision, and other core service failures. Additionally, errors may stem from inadequate responsiveness to customer needs and requests, lack of readiness, or employees' lack of intention to provide service. (Ennew et al., 2014). Therefore, it remains challenging to pinpoint specific strategies that are most suitable. However, literature in the past has recognised this complexity and continued to persistently emphasise studying service recovery strategy through fairness perceptions as a fundamental principle across various service sectors.

Perceived justice regarding compensation, processes, and interactions have been widely acknowledged and applied as the three main components in measuring service recovery strategy. They are closely related to customer satisfaction (Fouroudi et al., 2020). Implemented effectively, it can help restore customer confidence, satisfaction, and loyalty after a service failure (Cheng et al., 2019; Nguyen et al., 2021; Zhu and Park, 2022). The concept of perceiving service recovery strategy through fairness has been widely applied in the service industry, including hotels, airlines, mobile phone networks, and even semi-service businesses such as online retail (Arsenovic et al., 2021; Balaji et al., 2018; Nikbin et al., 2016). This study measured service recovery strategy through the perception of fairness, using a popular scale proposed by the previous literature (Tax et al., 1998). The researchers modified this scale to be linguistically and contextually suitable for private hospital settings, aligning it with service failures. Additionally, hypothetical scenarios were created covering all three dimensions of perceived fairness in service recovery. This was done to ensure respondents could provide accurate and consistent information under hypothetical situations, including service failures and the corresponding service recovery strategy. The researchers developed hypothetical scenarios using qualitative research techniques following Creswell's (2017) guidelines for structured interviews. The rationale behind using hypothetical scenarios was that service failure incidents could not be predicted, leading to limitations in data collection regarding sample size and duration and difficulties in conducting experiments due to potential customer impact. In the hotel industry, hypothetical scenarios are commonly used as they help mitigate the cost associated with customers experiencing service failures, a form of experimental research that upholds consumer rights to service. Therefore, researchers collected studies that applied hypothetical scenarios in the context of service failures to explore service recovery strategies.

The literature review gathered studies on service recovery strategies in various service industries that utilise hypothetical scenarios as a research tool alongside opinion-based questionnaires. For instance, a study on hotel service recovery strategy in China was designed with four scenarios: (1) high justice service recovery, (2) low justice service recovery, (3) joint recovery, and (4) firm recovery. Hypothetical scenarios are popular in service marketing research and can closely mirror real-life service failure incidents (Balaji et al., 2018). Research on service recovery in the restaurant industry in China has also been designed through hypothetical scenarios for the same reason. Hypothetical situations are beneficial in simplifying the use of critical incidence analysis techniques (Kim and Jang, 2014).

2.5. Satisfaction (SAT)

Satisfaction refers to happiness or contentment when one succeeds and fulfils one's expectations or desires (Qimei et al., 2008). Satisfaction also means happiness or contentment when one receives success or obtains what one desires (Thompson and Sunol, 1995). Satisfaction refers to the level of feeling that results from comparing the perceived outcomes of a service or performance against the customer's expectations. Satisfaction matches the customer's expectations; satisfaction occurs; if it

exceeds expectations, it leads to delight. However, dissatisfaction arises if the service or product received falls below expectations (Kotler, 1994).

Satisfaction is the response that reflects customers' desires and is their judgment regarding products and services. Satisfaction can be perceived differently depending on each individual's perspective (Oliver, 1977). The satisfaction reflecting the success of the service recovery strategy is measured chiefly based on customer satisfaction. However, some aspects are measured from the perspective of service providers, such as assessing the perceived effectiveness of employees, employee satisfaction, motivation in performing duties, or even job satisfaction and intention to quit (Paşamehmetoğlu et al., 2022; Pinna et al., 2018). Employees providing services know that the service business and customer satisfaction are closely related components. It could be argued that the product of a service business is the value of customer satisfaction itself. Therefore, frontline employees skilled in service recovery and providing efficient service play a significant role in creating satisfaction in service recovery strategy. (McQuilken et al., 2020; Zahoor, 2020).

Measuring satisfaction can be done based on the expectancy confirmation theory, which states that satisfaction arises from comparing service expectations and perceptions. Satisfaction will occur if the value is negative, meaning that expectations are lower than perceptions. Conversely, if perceptions are lower than expectations, a positive outcome will result, meaning that dissatisfaction will occur if customers perceive service to be lower than expected (Campbell, 1996; Myers, 1991). Perceived lower than expectations may arise from various factors such as service errors, service unavailability, or customers having higher expectations than what the service provider can realistically deliver (James, 2007).

Measuring satisfaction directly through questions, without considering customer expectations, is a standard method used in customer satisfaction surveys. This method is a simple performance rating, where satisfaction is measured without necessarily comparing it to customer expectations. For example, they ask customers to rate their satisfaction with banking services or the cleanliness of restrooms in a shopping mall. In this approach, criteria or standards for interpreting satisfaction levels need to be established. While this method helps gather data quickly and easily, considering customer expectations may be more reliable. Therefore, using fair and beneficial interpretation criteria is essential for evaluating the outcomes of such satisfaction measurements (Tse and Wilton, 1988).

Based on Equity Theory, satisfaction metrics come in generalised and business-specific forms. These metrics gauge overall satisfaction by considering both cognitive and affective factors. For example, in healthcare settings, providers should focus on creating emotional connections with patients from the outset to enhance overall satisfaction. By blending cognitive and affective dimensions, these metrics offer a comprehensive view of satisfaction, aiding service providers in improving customer experience in private and public healthcare (Pinna et al., 2018).

Customer satisfaction depends mainly on responsiveness. Adequate responsiveness leads to higher satisfaction, fostering loyalty and bidirectional communication. Conversely, insufficient responsiveness results in negativity or dissatisfaction. Studies explore how satisfaction influences service recovery strategy linked to bidirectional communication across various industries ((Balaji and Sarkar, 2013; Komunda and Osarenkhoe, 2012; Moliner-Velázquez et al., 2015b).

2.6. Words of Mouth (WOM)

Bone (1992) defines word-of-mouth communication as the exchange of opinions and perspectives among two or more individuals, which influences marketing communication, acting as a source of market communication (Bone, 1992). Stern (1994) defines WOM as the verbal exchange of messages between individuals who are close to each other, representing direct communication in real life (Stern, 1994). Dabholkar (1995) describe WOM as the intention to recommend products or services to others in the future.

The extant literature explored 58% of consumers consider information obtained from word-of-mouth communication highly credible, generating up to a 50% increase in purchase intent. Additionally, 88% of consumers trust recommendations from people they know, leading to a 91% increase in consumer trust; with the advent of the internet, communication between consumers has become more convenient and faster (Keller and Fay, 2012). Word-of-mouth communication occurs electronically through devices such as computers, laptops, tablets, or mobile phones, and it is called Electronic Word-of-Mouth (EWOM). EWOM involves consumers discussing the advantages and disadvantages of products, which are then widely spread online (Hennig-Thurau et al., 2004). WOM mainly means sharing information about a product or service from one consumer to another who may not have previously known or encountered each other (Gruen et al., 2006). Electronic word-of-mouth (eWOM) is a new form of interpersonal communication that relies on consumer-generated information. This new data is presented from the perspective of consumers who have purchased and used the product, including their experiences, value evaluations, and opinions (Park et al., 2012).

Electronic word-of-mouth (eWOM) has emerged as a significant form of communication in the digital age, facilitated by online social networks. It involves sharing information among consumers and propagating opinions regarding products, services, and brands. eWOM operates through various channels, such as social media platforms, online forums, and review websites. The effectiveness of eWOM is measured through three main dimensions: intensity, valence of opinion, and content. Intensity refers to the volume and frequency of consumer comments, interactions, and engagement with online content. The valence of opinion assesses whether the shared opinions are positive or negative towards the subject matter. Content encompasses the information shared online related to products, services, and brands, including details about their features, quality, and pricing. As eWOM continues to shape consumer perceptions and influence purchase decisions, understanding its dynamics and impact is crucial for businesses seeking to leverage digital marketing strategy effectively (Goyette

et al., 2010). From the concepts and theories discussed above, it can be summarised that consumers highly trust word-of-mouth communication regarding the advantages and disadvantages of products and services. This form of communication helps consumers confidently make purchase decisions as they receive information from real user experiences. Therefore, developing a marketing strategy that utilises word-of-mouth communication can effectively generate interest and satisfaction in an organisation's products and services in current and future competitive markets.

2.7. Revisit Intention (RVI)

Revisit Intention refers to the decision-making process of returning to use the services of the same service provider. This is influenced by the level of satisfaction with the products and services received, derived from past experiences with the products and services received initially or in previous instances. Factors contributing to this decision-making process can be internal and external to the consumer (Kim et al., 2012). Repurchase refers to consumers who decide to use it again based on their favourable experiences with a service. This decision is often influenced by the satisfaction derived from receiving attentive service from the provider and the consumer's loyalty towards the service (Taylor and Baker, 1994). Furthermore, this positive experience tends to create a favourable attitude, leading the service users to consider using the service again (Oliver, 1997).

The study on factors influencing repeat patronage at health-conscious restaurants identified four key factors: perceived health benefits, value, satisfaction, and intention to use the service. These factors, combined with consumer behavior, create a highly intricate pattern before purchasing: customers must hold a positive attitude and have prior experience from trial usage (P. T. Odoom et al., 2021). External influences, such as salespersons, discounts, promotions, pricing, and packaging, also play a significant role. These factors collectively impact purchase decisions, product or service usage, and post-consumption satisfaction, ultimately shaping a positive attitude towards the product (Ehrenberg, 1988). The return purchase or reuse of a product or service depends on the customer's first experience with the service. A positive and satisfactory initial service experience increases confidence and satisfaction with that product or service. This tendency increases the likelihood of customers returning to use the service again with greater confidence and satisfaction in the product or service. It also helps to build long-term relationships between customers and businesses. Providing excellent and memorable customer service from the first interaction is crucial in establishing confidence and satisfaction in the business. It is a critical factor in creating loyal and long-lasting customer relationships. If customers are satisfied with a service, it can lead to loyalty, repeat purchases, and what is known as a "loyalty bond." This means customers willingly pay for the same product or service again. The loyalty bond serves as a source of profit and growth for businesses. Increased purchases reduce marketing expenses and mitigate the risks associated with high market competition.

The most critical factors driving repeat purchases are the service quality and customer satisfaction the service provider provides. Additionally, the loyalty bond customers develop towards a brand

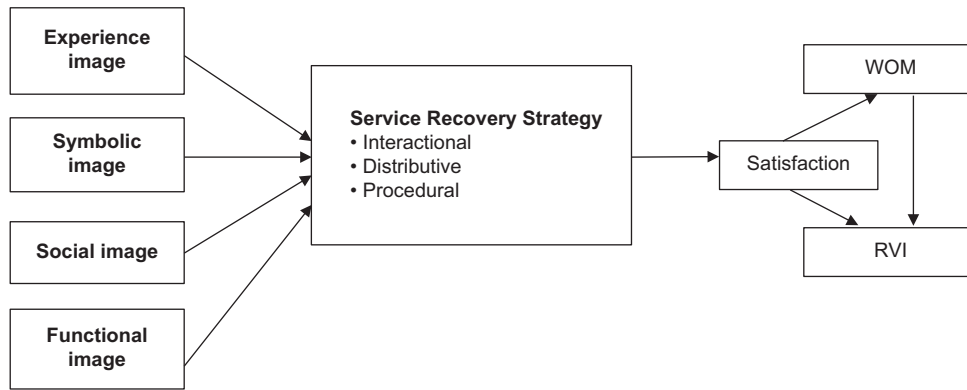
plays a significant role. In marketing and business, the quality of service and customer satisfaction have a profound impact and are crucial in encouraging customers to return for repeat purchases (Taylor and Baker, 1994). Studies on the process of repeat purchase intention in the service industry reveal seven components based on customer perceived value: service quality, service value, customer satisfaction, past loyalty, switching costs, provider changeability, and brand preference (Hellier et al., 2003). The study on repeat purchase intention or returning to use the service again in the airline industry, based on the Stimulus-Organism-Response (SOR) model, reveals that stimulation through visual stimuli, such as interior decoration, cleanliness, layout, and lighting management in the aircraft cabin, and touch stimuli, such as footrest width, cabin temperature, and seat comfort, influences the brand image of the airline and encourages repeat service usage. Two formats characterise the consumer decision-making (Setiowati and Putri, 2012). Genuine intention to repurchase or reuse services often entails wanting to be part of the word-of-mouth process or following recommendations. Both of these pathways contribute to consumer loyalty towards products and services. Therefore, customers with high loyalty to a brand are more likely to return for repeat purchases or use the services again (Baldinger and Rubinson, 1996).

The intention of Gen Y consumers to repurchase or reuse online services can be explained using the SOR model, focusing on external stimuli. Three main factors include website appearance, security, and online promotion, with variables such as online trust playing a crucial role in fostering the intention to repurchase products online. Mathematical theories like the NDB theory and the LSD theory are utilised to statistically analyse the rates of repurchase in the consumer goods industry. Moreover, they help understand the complex behaviour of consumers, where prior experiences and external influences like advertising or promotions influence a positive attitude towards a product. These factors affect purchasing decisions, product usage, and post-usage satisfaction, eventually shaping a positive attitude towards the product (Ehrenberg, 1988). The Theory of Repurchase Decision-making (TRD) aims to enhance the understanding of predicting individuals' decisions to repurchase products. This theory integrates factors from marketing concepts and consumer behaviour to explain the repurchase process. It utilises beliefs in behavioural aspects such as baseline behaviours, attitudes, reference group influence, and individual intentions. Drawing from the Theory of Reasoned Action (TRA) and integrating elements of Perceived Behavior Control from the Theory of Planned Behavior (TPB), TRD also incorporates the Model of Goal Directed Behavior (MGB), including factors like desire, past behaviour frequency, and comparison of desire versus the cost of switching. Additionally, TRD considers factors such as overall image, customer satisfaction, and commitment in decision-making (Han and Ryu, 2012). The conceptual framework is illustrated in Figure 1.

3. METHODS

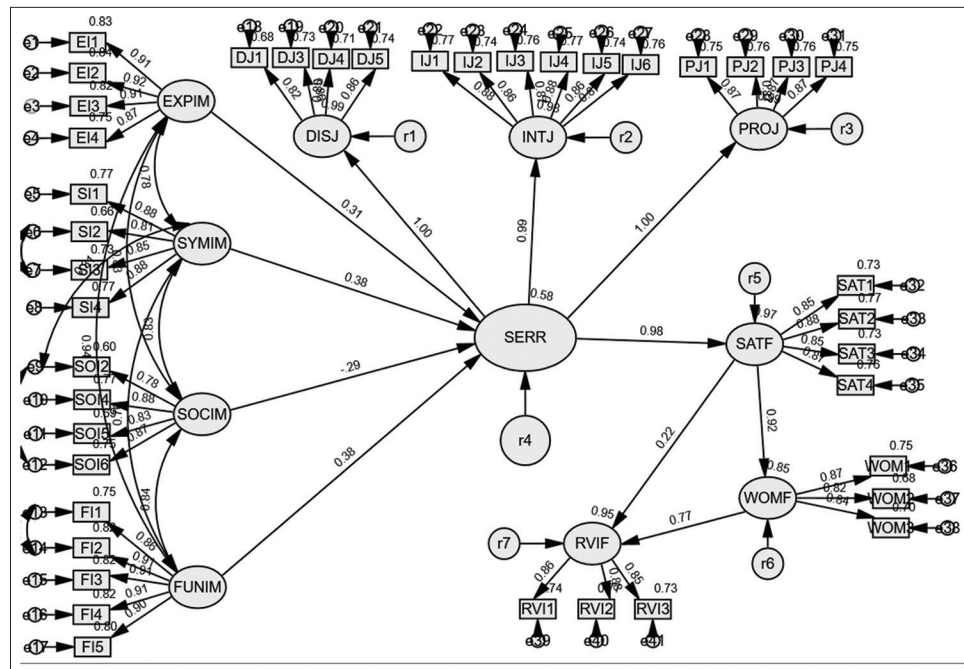
The questionnaire was developed from the previous study—four brand image dimensions adapted by Sondoh Jr et al. (2007) (Jr et al., 2007; Lassar et al., 1995). The service recovery strategy

Figure 1: Conceptual framework



Source: Author work

Figure 2: Path analysis



Source: Author work

is adapted from three dimensions (Maxham and Netemeyer, 2002; Smith et al., 1999; Tax et al., 1998). Word-of-mouth communications: Three items were adapted from Rageh Ismail and Spinelli, (2012). Revisit intention, three items adapted from Tih and Lee (2013). This study applied the scenario-based approach for service failures and recovery, developed by a structured interview questionnaire (Creswell, 2013). The index of congruence (IOC) has been used to review the questionnaire validity related to the explicit meaning and reflex to each construct acceptance at a level >0.50. The average score obtained from five service marketing experts has passed the lower threshold.

The data collection is from 1 Oct 2023 to 31 Oct 2023 after the submission for exemption of the ethics committees was granted on HE663322.. The 850 respondents have been received via G-forms. As the online questionnaire has limitations on intention, the data screening has been filtered out by a standard deviation (SD) of less than .25 from all items (Collier, 2020). A total of 600 screened

samples have been analysed for normality and outliers to meet the assumptions of the statistics. Structural equation modeling by IBM AMOS has taken over confirmatory factor analysis and path analysis to investigate the proposed hypothesis.

4. RESULTS

The demographic data analysis describes the sample characteristics as been illustrated in Table 1. Among the sample group, the highest percentage of individuals is females, accounting for 52.2%, followed by males at 31.7. The most significant proportion is single individuals at 42.5%, followed by couples at 39.2%. For location distribution nationwide in Thailand, the highest percentage is from the South at 33.3%, closely followed by Bangkok and Central at 30.7%. However, the North is the least represented location, accounting for only 14.0%. Age distribution reveals that the most significant percentage falls within the 51-60 age group at 19.8%, followed closely by those between 21

Table 1: Demographic characteristics

Characteristics	Frequency	Percentage
Gender		
Males	190	31.7
Females	313	52.2
LGBTQ+	97	16.2
Marital Status		
Single	255	42.5
Couple	235	39.2
Others	110	18.3
Age (Mean=33.34 years old S.D.=11.00 Year)		
<20 years	24	4.8
Between 21 and 30 years	108	21.6
Between 31 and 40 years	14	2.8
Between 41 and 50 years	23	4.6
Between 51 and 60 years	99	19.8
More than 60 years	70	14.0
Occupation		
Students	75	12.5
Employees	117	19.5
Government officer	152	25.3
Business owner	195	32.5
Housewife	16	2.7
Freelance	18	3.0
Unemployed	11	1.8
Retired	16	2.7
Others	75	12.5
Highest education		
Under graduated	202	33.7
Graduated or equal	216	36.0
Master degree or equal	174	29.0
Doctoral degree	7	1.2
Others	1	0.2
Monthly income		
<15,000 THB	110	18.3
Between 15,001 and 35,000 THB	250	41.7
Between 35,001 and 55,000 THB	207	34.5
Between 55,001 THB	31	5.2
Others	110	18.3
Location		
Northeast	132	22.0
Bangkok and Central	184	30.7
South	200	33.3
North	84	14.0
The previous service use within 6 months		
Vaccination	102	17.0
Annual health check up	125	20.8
Illness FOLLOW up	134	22.3
Pregnancy visit	39	6.5
Vist friend/family/relatives	185	30.8
Others	15	2.5
Direct-experienced dissatisfaction caused by private hospital service		
Long waiting	24	4.0
Improver staff manners	12	2.0
Appointment failures	15	2.5
Bill collection failures	18	2.0
Crowded area	36	6.0
Never	501	83.5
Total	600	100.0

and 30 years at 21.6%. The smallest percentages are seen in the age groups of 31-40 years and over 60 years, each comprising 2.8% and 14.0% of the sample, respectively. Occupationally, business owners constitute the highest percentage at 32.5% of the sample, followed by government officers at 25.3%. Conversely, unemployed individuals and retirees are the least represented

occupational categories, each accounting for 1.8% and 2.7%, respectively. The highest education level attained was that most graduates hold equivalent degrees, constituting 36.0%, followed by undergraduates at 33.7%. However, doctoral degree holders are the few, making up only 1.2%. Regarding monthly income, the highest percentage falls within the range of 15,001-35,000 THB at 41.7%, followed by 34.5% at 35,001-55,000 THB. Conversely, those earning more than 55,001 THB account for only 5.2%.

Among the services used within 6 months, visiting friends/family/relatives is the most common at 30.8%, followed by illness follow-up at 22.3%. However, the least used service is pregnancy visits, constituting only 6.5% of the sample. Lastly, dissatisfaction with private hospital services is most commonly due to overcrowded reception, with 6.0% of the sample expressing this concern. Conversely, improper staff manners and appointment failures are the least common dissatisfactions, each accounting for 2.0% of the sample.

Discriminant validity is whether variables that are supposed to be distinct from each other are, in fact, distinct. It ensures that the measures used in a study are not too highly correlated with each other, as this can indicate that they are measuring the same underlying construct rather than distinct constructs shown in Table 2.

Construct validity refers to the extent to which a measure assesses the underlying theoretical construct or concept intended to be measured. The results in Table 3 suggest that the measurement items for each dimension demonstrate good construct validity, as evidenced by high factor loadings, composite reliability, and average variance extracted values.

4.1. Path Analysis

The analysis of beta values (β) regarding the relationship between variables found that the beta values ranged between 0.228 and 0.97. The hypothesis testing results can be summarised as follows: The image of the product experience influences service recovery strategy ($\beta = 0.262$, $t = 2.530$, $P = 0.011$). The image of the product symbolism influences the service recovery strategy ($\beta = 0.318$, $t = 5.653$, $P = 0.000$). The image of the product social aspect influences the service recovery strategy ($\beta = -0.282$, $t = -3.520$, $P = 0.000$). The image of the product usability influences service recovery strategy ($\beta = 0.346$, $t = 3.075$, $P = 0.000$). Service recovery strategy influence satisfaction ($\beta = 0.986$, $t = 25.373$, $P = 0.000$). Satisfaction influences face-to-face communication ($\beta = 0.914$, $t = 25.073$, $P = 0.000$). Satisfaction influences the intention to return to use the service again ($\beta = 0.228$, $t = 2.673$, $P = 0.000$). And face-to-face communication influences the intention to return to use the service again ($\beta = 0.804$, $t = 8.751$, $P = 0.000$).

The model exhibits a high level of congruence and adequacy with the observed data, as evidenced by five fit indices meeting the established criteria: $\chi^2/df = 2.146$, GFI = 0.941, CFI = 0.963, RMSEA = 0.069, and SRMR = 0.019. Therefore, the structural equation model effectively captures the fit index. Specifically, the χ^2/df ratio falls within an acceptable range, suggesting a

Table 2: Discriminant validity

Variables	EI	SY	SOI	FI	DJ	IJ	PJ	SAT	WOM	RVI
EI	0.901	-	-	-	-	-	-	-	-	-
SY	0.747**	0.854	-	-	-	-	-	-	-	-
SOI	0.776**	0.867**	0.842	-	-	-	-	-	-	-
FI	0.796**	0.714**	0.771**	0.894	-	-	-	-	-	-
DJ	0.682**	0.628**	0.607**	0.671**	0.829	-	-	-	-	-
IJ	0.698**	0.625**	0.607**	0.689**	0.802**	0.870	-	-	-	-
PJ	0.668**	0.584**	0.569**	0.654**	0.783**	0.729**	0.869	-	-	-
SAT	0.663**	0.604**	0.596**	0.660**	0.793**	0.707**	0.818**	0.861	-	-
WOM	0.599**	0.593**	0.594**	0.593**	0.726**	0.714**	0.798**	0.740**	0.844	-
RVI	0.626**	0.613**	0.592**	0.621**	0.738**	0.727**	0.727**	0.751**	0.765**	0.864

Table 3: Factor loading, CR, AVE, and Cronbach's Alpha

Variables and Items	Loading	CR	AVE	α
Experience Image (EI)		0.945	0.812	0.945
(EI1) From your past experiences, using the services with private hospitals make you tend to choose this hospital services in future if needed.	0.863			
(EI2) Based on your past experiences, , using the services with private hospitals contribute a good impression on you.	0.900			
(EI3) From your past experiences, using the services with private hospitals make you feel good.	0.924			
(EI4) From your past experiences, using the services with private hospitals bring happiness to you.	0.915			
Symbolism Image (SY)		0.915	0.730	0.918
(SY1) Using services with private hospitals makes you feel less looked down upon.	0.877			
(SY2) Using services with private hospitals supports the lifestyle you aspire to.	0.853			
(SY3) Using services with private hospitals helps you fit in better with your social group.	0.779			
(SY4) Using services with private hospitals makes you appear more desirable than others.	0.904			
Social Image (SOI)		0.907	0.710	0.902
(SOI2) Using services with private hospitals promotes a positive perception of you by others.	0.894			
(SOI4) You are proud to have used services with private hospitals.	0.834			
(SOI5) Your current social group admires those who use services with private hospitals.	0.851			
(SOI6) Private hospitals align with your social status image.	0.788			
Functional Image (FI)		0.952	0.800	0.953
(FI1) Services provided by private hospitals are efficient and meet certified standards.	0.847			
(FI2) Private hospitals provide medical services that are good quality.	0.897			
(FI3) Private hospitals have modern medical devices and treatment guidelines.	0.909			
(FI4) Private hospitals offer comprehensive facilities to meet your needs.	0.911			
(FI5) Private hospitals have an appropriate environment for providing healthcare services.	0.905			
Service Recovery Strategy - Distributive (DJ)		0.898	0.688	0.909
(DJ1) The hospital provides compensation that exceeds your expectations.	0.825			
(DJ3) The hospital accurately and appropriately corrects service failures.	0.851			
(DJ4) You satisfied with the hospital's problem-solving approaches.	0.851			
(DJ5) The hospital provides compensation that exceeds your expectations.	0.857			
Service Recovery Strategy - Interactive (IJ)		0.949	0.758	0.949
(IJ1) Staff handle service failures politely.	0.883			
(IJ2) Staff show understanding of the problem you encountered.	0.863			
(IJ3) Staff are sincere in providing service from beginning to end.	0.872			
(IJ4) Staff show care about the problem you encountered.	0.879			
(IJ5) Staff make every effort to solve the problem for you.	0.855			
(IJ6) Staff value your feedback throughout the process of resolving the problem.	0.871			
Service Recovery Strategy - Procedural (PJ)		0.925	0.756	0.925
(PJ1) The hospital resolves problems quickly.	0.863			
(PJ2) Complaints are addressed promptly.	0.871			
(PJ3) Complaint procedures are appropriate.	0.865			
(PJ4) The hospital's policy is implemented fairly.	0.878			
Satisfaction (SAT)		0.920	0.742	0.920
(SAT1) You are satisfied with the hospital's problem-solving approach.	0.856			
(SAT2) You believe that the hospital has made you satisfied with its problem-solving approach.	0.885			
(SAT3) You feel good about the hospital's problem-solving approach.	0.851			
(SAT4) Overall, you are satisfied with the hospital's problem-solving approach.	0.854			
Word of Mouth (WOM)		0.882	0.714	0.881
(WOM1) You would tell your friends and family about your experience with this hospital.	0.853			
(WOM2) If this hospital is mentioned in a conversation, you intend to speak positively about it.	0.855			
(WOM3) You would recommend this hospital when someone you know asks for advice on choosing a hospital.	0.826			
Revisit Intention (RVI)		0.898	0.747	0.897
(RVI1) If you need health services, you would consider this hospital as your first choice.	0.824			
(RVI2) If you need health services in the future, you are inclined to choose this hospital.	0.906			
(RVI3) If you have a need for health services in the next 6 months, you would choose to use the services at this hospital.	0.860			

Table 4: Path analysis

Relationship	β	S.E.	t-statistics	Hypothesis
EI -----> SRS	0.262*	0.103	2.530	Accepted
SY -----> SRS	0.318***	0.056	5.653	Accepted
SOI -----> SRS	-0.282***	0.080	-3.520	Accepted
FI -----> SRS	-0.346**	0.112	3.075	Accepted
SRS -----> SAT	0.986***	0.039	25.373	Accepted
SAT -----> WOM	0.914***	0.036	25.073	Accepted
SAT -----> RVI	0.228**	0.850	2.673	Accepted
WOM -----> RVI	0.804***	0.920	8.751	Accepted

$R^2_{SRS}=0.58$, $R^2_{SAT}=0.97$, $R^2_{WOM}=0.85$, $R^2_{RVI}=0.95$, * $P<0.05$, ** $P<0.01$, *** $P<0.001$

good model fit. The Goodness of Fit Index (GFI) exceeds the threshold of 0.08, indicating a robust fit. The Comparative Fit Index (CFI) also surpasses 0.90, affirming the model's adequacy. The Root Mean Square Error of Approximation (RMSEA) value is below 0.08, indicating a satisfactory model fit to the observed data. Furthermore, the Standardized Root Mean Square Residual (SRMR) is below 0.08, indicating a reliable fit. In conclusion, these findings support that the structural equation model comprehensively explains the interrelationships between variables and aligns well with empirical data.

The testing hypotheses 1-8 reveal the predictive ability of the brand image in all four dimensions in Figure 2 and Table 4. The Power of Predictor (R-square) for brand image is 58%, while service recovery strategy can predict satisfaction at 97%. Satisfaction can further predict face-to-face communication and intention to return to use the service at 85% and 95%, respectively.

5. DISCUSSION

5.1. Influence of Experience Image on Service Recovery Strategy

The study reveals that the experience image of private hospitals positively influences the service recovery strategy. The finding aligns with previous research in the context of hospitals, particularly evident in countries where health business advertising is prohibited (Kim et al., 2008). This results in outcomes that promote the success of customer-hospital relationships through brand experience strategy. The limited previous studies on a direct relationship between brand image and service recovery strategy only found a relationship in promoting service quality, patient satisfaction, and patient loyalty in the service recovery context (Wu, 2011). Studies have shown that corporate image is a mediator between service recovery strategy and satisfaction with the service recovery strategy (Nikbin et al., 2010). This study has expanded knowledge about corporate brand image's influence on sources' role in service recovery strategy, which can be used to develop a marketing strategy to deal with service failures. The power of brand experience is covered by online brand image, which influences brand loyalty, (Cleff et al., 2018) affects the service recovery strategy, improves customer satisfaction, and minimises switching behaviour (Chigwende and Govender, 2020).

5.2. The Influence of Symbolic Image on Service Recovery Strategy

The study found that the symbolic image of private hospitals positively impacts service recovery strategy. Previous studies

have shown that a service recovery strategy can enhance brand image directly and through customer satisfaction. (Chen, 2015b; Liat et al., 2017) While this study provides similar findings, it differs in the direction of the relationship's origin. Specifically, the hospital's brand image is an element that enhances the perception of a successful service recovery strategy. This study demonstrates that when private hospitals have a brand image as a symbol in the minds of service users, and when a service failure occurs, followed by the implementation of a service recovery strategy, the brand image retained by customers can enhance the success of this strategy. This aligns with the creation of brand value that positively impacts the organisation. However, few studies primarily focus on the moderating effect of brand image on service strategy through perceived justice in service recovery strategy. (Lu et al., 2020) This study shows that brand image development is crucial in creating a thriving service recovery strategy.

5.3. The Influence of Social Image on Service Recovery Strategy

The study found that the social image of private hospitals does not positively impact service recovery strategy. It was observed that the sample group held different views on the role of the social image of private hospitals, reflecting their personalities, compared to the brand image in terms of experience, symbolism, and utility. This may be due to the differences in the types of products or services. Previous studies have shown the influence of social brand image in products like televisions and cosmetics (Sondoh Jr. et al., 2007; Lassar et al., 1995). While service businesses have limited studies on incorporating social brand image elements (Chen, 2015b; Kahle and Kim, 2006; Salciuviene et al., 2009). Creating a brand image arises from the customer's perception of the value of a product or service, which determines the brand image in the consumer's mind. However, this study found that the social image of private hospitals does not negatively impact service recovery strategy. This suggests that if the social image of private hospitals is presented in a way that creates a distinct social hierarchy in the minds of consumers, it could reduce the success of the service recovery strategy. Therefore, marketing communications in developing an organisation's social brand image must be conducted with caution and careful consideration of appropriateness.

The failure severity, time of recovery, repeated occurrences, repeated failures, and cynical customers all impede the efficacy of service recovery approaches, directly and indirectly diminishing the effectiveness of service recovery strategy. The effectiveness of a service recovery strategy is often contingent upon factors primarily associated with the service provider. These factors encompass the corporate leadership style, employee self-efficacy, and manager-subordinate interaction. Consequently, service users and providers play pivotal roles in determining the success of service recovery endeavours (Lin, 2011). This study introduces the concept of brand image as a factor on service providers that detrimentally influences service recovery strategy, constituting a noteworthy and original discovery. Social brand image, constructed by utilising products or services reflecting consumers' social identities, holds considerable importance. It is shaped by perceived value and utility derived from consumption experiences. Within this study, service users'

reflections on their interactions with private hospital services failed to cultivate a favourable social brand image. Consequently, private hospitals should abstain from marketing communications to cultivate consumer perceptions of social brand image.

5.4. The Influence of Functional Image on Service Recovery Strategy

The study reveals that the functional image of private hospitals positively affects service recovery strategy. Specifically, the research finds that the product image related to usage has the most significant positive impact compared to other factors investigated. This aligns with previous studies on the perceived service quality of private hospitals, particularly regarding reliability and assurance, which influence the intention to re-engage with private hospitals (Chokpiriyawat, 2016). The functional image of products plays a prominent role in the healthcare service industry, particularly within private hospital businesses. Examining the relationship between product and brand image, it is evident that it primarily stems from the benefits and value generated through usage experiences (Kato, 2021). The functional image also shapes purchase intentions and enhances organisational competitiveness (Salciuviene et al., 2009)—the limited integration of brand image theory with the context of service failures and recovery services (Sahaf and Fazili, 2024). The study suggests that examining the relationship between product and brand image is limited in the context of the service recovery strategy. However, some studies have found that brand equity positively influences service recovery strategy through perceptions of fairness across all three dimensions, which align closely with this study (Filho et al., 2023). Therefore, the novel findings of this study shed light on how marketing communication through the development of product brand image in the context of usage plays a role in promoting the success of service recovery strategy for private hospitals.

5.5. The Influence of Service Recovery Strategy on Satisfaction

The study reveals that service recovery strategy impacts satisfaction. This study employs a scenario-based approach, with a service recovery strategy based on perceived justice, which has been widely recognised and implemented as a service recovery strategy across various industries, including product sales and service-based businesses (Ding and Lii, 2016; Migacz et al., 2018; Muhammad and Gul-E-Rana, 2020; Zhu and Park, 2022). The findings of this study align with accepted research, indicating that a successful service recovery strategy should result in customer satisfaction (Kron et al., 2023; Lanza et al., 2009; Liao et al., 2022; Ozkan-Tektas and Basgoze, 2017; Singh and Crisafulli, 2016; Spreng et al., 1995). Therefore, this study concludes that employing fairness-based approaches to address service failures as part of service recovery strategy in the private hospital sector effectively achieves success in service recovery processes. It can generate outcomes that lead to customer satisfaction for individuals impacted by service failures or unmet expectations set by service providers.

5.6. The Influence of Satisfaction on Word-of-Mouth Communication

This study finds that a successful service recovery strategy positively impacts WOM. Previous research in the context of

service recovery has identified several factors, including empathy, product brand image, and intention to switch to alternative service providers. However, WOM is widely recognised as a significant factor, particularly in the context of service failures. Generally, WOM can have positive and negative implications (Sukhu and Bilgihan, 2023). When differentiating between traditional face-to-face communication and electronic word-of-mouth (e-WOM) through online social media, the latter represents a continual result from user satisfaction with products, services, or service recovery strategy (Dangaiso et al., 2024). WOM significantly influences the effectiveness of business units and fosters business competitiveness as it holds considerable sway over consumer decision-making regarding whether to choose or forgo utilising services in the contemporary era (Mohamed et al., 2024).

5.7. The Influence of Satisfaction on Service Recovery Strategy on Revisit Intention

This study links behavioural intention, namely the revisit intention, with satisfaction towards service recovery strategy, which aligns with previous research findings (Ali et al., 2023; Diaz et al., 2017; Sidhu et al., 2023; Yoo, 2020). The study finds that the weight of intention to reuse services is lower than WOM, suggesting a higher commitment to reuse services than face-to-face communication. Customers satisfied with the service recovery strategy are more inclined to engage in positive WOM than intending to reuse services. This aligns with studies on service recovery strategy in the hotel industry (Kim et al., 2009). Furthermore, this is consistent with studies conducted in the tourism industry (Gholipour Soleimani and Einolahzadeh, 2018; Sinatria and Sumadi, 2024). Therefore, this study concludes that an effective service recovery strategy can benefit healthcare service businesses, particularly in the context of private hospitals, by fostering customer revisit intention.

5.8. The Influence of WOM on Revisit Intention

This study unveils a significant correlation between word-of-mouth (WOM) communication and the intention to revisit a service provider. WOM is classified explicitly within the sub-components of behavioural intention, as highlighted in previous research (Ha and Jang, 2009; Ok et al., 2006). Moreover, these findings resonate with studies conducted in the airline industry, which similarly demonstrate a link between WOM and the intention to reuse services (Liu and Lee, 2016).

5.8.1. Theoretical implications

1. **Exploration of Brand Image Factors:** This study introduces novel insights into the significance of brand image factors within service recovery strategy, filling a gap in existing literature. While prior research has predominantly focused on remedial actions or negative determinants hindering the efficacy of service recovery strategy, this study underscores the pivotal role of brand image perception, mainly through social media and marketing communication, in fostering and impeding these strategies' success. Consequently, further investigation into the nuanced dimensions of brand image specific to each service-oriented industry is warranted.
2. **Examination of Perceived Justice Factors:** This research illuminates the underexplored realm of perceived justice

factors and their efficacy within the healthcare service sector. In contrast to the prevailing concentration on leisure and hospitality industries like airlines and hotels, this study accentuates the applicability of perceived justice in healthcare establishments, particularly those catering to health maintenance and treatment services. The intricate nature of service recovery strategy within these domains merits deeper scrutiny, offering avenues for nuanced investigation.

3. Insights into Emotional Intelligence Factors: This study presents fresh insights into emotional intelligence factors, a domain that has yet to receive scholarly attention concerning consumer behaviour. While extant literature has primarily examined the emotional intelligence of service personnel engaged in issue resolution and service recovery, this research suggests a limited impact of customer emotional intelligence on the efficacy of service recovery strategy. Instead, it advocates for a focal shift towards enhancing the emotional intelligence of service providers. These findings contribute substantively to the burgeoning field of service marketing, enriching theoretical constructs of customer satisfaction, service recovery strategy, and brand image.

5.8.2. Managerial implications

Marketing managers in hospital businesses and related service-oriented organisations can utilise research findings to gain a competitive advantage and address service failures by cultivating brand image perceptions. Enhancing brand image perception across dimensions such as usability, experience, and symbolism is crucial while avoiding marketing communications that reinforce societal stereotypes.

The study identified a negative impact of social symbolism concerning service recovery strategy. Hence, marketers should refrain from associating the brand image with social status. Accessing private hospital services in Thailand is relatively attainable, considering the diverse range of private hospitals available. However, there needs to be a standardised service classification system in the hotel industry. Therefore, communications should avoid elevating private hospitals' social status beyond service. Communicating such messages may lead to negative consequences if service quality fails to meet expectations or if there are service errors, especially in comparison to public hospitals.

Marketing professionals can present media that promote the functional brand image reflecting the effectiveness of medical treatment, which is the core service of private hospital businesses. Utilising international standards such as JCI (Joint Commission International) or ISO (International Standardisation Organisation) can communicate service standards that reflect the core services of private hospitals. Private hospitals in Thailand have established a brand image in usability through the presentation of advanced medical equipment and treatment technologies, as well as leveraging the specialised expertise of healthcare professional teams or utilising the personal brand image of physicians or hospital administrators to communicate treatment effectiveness within a framework reflecting treatment efficacy.

Marketing professionals can present media that promotes the experiential brand image by reflecting patient experience through the ambience of private hospital environments. Precisely, in outpatient waiting areas, private consultation rooms, and relaxation lounges, the atmosphere reflects a soothing environment to reduce patient anxiety related to illness. Promoting the role and importance of family members and caregivers as integral components of the treatment experience contributes to shaping brand image perception concerning the patient experience. However, it is essential to note that advertising regulations for hospital businesses in Thailand are more relaxed than in other countries like South Korea. Therefore, marketers should establish a relationship with the brand image perception concerning patient experience, encompassing patients who have been treated and recovered from illnesses and those who may not have the chance to survive and receive palliative care before passing away.

Symbolic brand image can create symbols within the minds of service users in this study, representing a balance between the selected services and the lifestyle or personal characteristics of the service users. Hence, marketers can communicate by creating symbols that reflect their service users. Private hospitals targeting medical tourists can create symbols of being savvy choices. Meanwhile, hospitals focusing on cosmetic surgery may establish a brand image of trendsetters, linking symbols that align with the lifestyle patterns of their target service users.

Social brand image uncovered a negative influence on a service recovery strategy. Therefore, marketers should avoid communicating the domain of social brand image. In Thailand, accessing services from private hospitals is generally feasible due to the diverse levels of private hospitals available. However, no standardised service classification system is similar to the hotel industry. Nevertheless, services can be differentiated based on medical service rates. Therefore, communications reflecting treatment in private hospitals should not convey a social image of inferiority. Hence, marketers should refrain from communicating that private hospitals elevate the social status of service users. Engaging in such communication could negatively affect businesses if service errors or the service falls below user expectations.

The implications of a service recovery strategy based on perceived justice are pivotal in formulating practical service recovery approaches within the private healthcare sector. As such, hospital marketers must strategise and delineate methodologies to mitigate potential errors or service inadequacies. Drawing upon recurring issues or service deficiencies as guiding frameworks, these strategies are tailored to enhance user perceptions of fairness across multifaceted dimensions. Achieving perceived justice in procedural aspects involves imparting training to employees to identify or anticipate potential concerns promptly. Upon detection, immediate action is warranted, accompanied by a comprehensive elucidation of the procedural steps involved and the anticipated timeframe for resolution. Regarding fostering perceived justice in interpersonal exchanges, employee training programs are designed to cultivate empathy and prioritise resolving issues or dissatisfactions as if they were personally experienced. Handling

grievances or dissatisfactory encounters should adhere to a decorum of politeness and strict adherence to established service protocols. Perceived justice related to incentivisation entails the provision of diverse privileges commensurate with the severity of the problem or service lapse. These privileges may encompass discounts, exclusive spa amenities, or augmented frequency of medical consultations sans supplementary charges. Nonetheless, the provision of supplementary benefits necessitates meticulous planning and training, coupled with authorisation from supervisors to execute clear-cut decisions to maximize efficacy.

WOM communication is crucial, as this study reveals its influential role in re-engaging users of private hospital services. Therefore, in addition to developing WOM communication through a service recovery strategy, marketers should foster such interaction by creating easily accessible channels for users to participate in face-to-face communication behaviours. These channels can be established by granting privileges to users who have experienced service failures and have been satisfied through a service recovery strategy, encouraging them to share their stories through online platforms such as Facebook, Instagram, or TikTok.

5.9. Recommendations for Future Research

Future research should investigate positive brand factors such as personality and familiarity. Additionally, it is recommended that hospital brand perceptions within each network be compared. For instance, major hospital networks in Thailand include Bangkok Dusit Medical Services (BDMS), Thonburi Healthcare Group, Kasemrad Group, and the Bangkok Hospital Group. Comparisons of hospital brand perceptions can be conducted across these networks. Studying outcome factors related to word-of-mouth communication or intention to use services is advisable. For example, factors like brand evangelism and switching intention could be explored. It is recommended that user characteristics be investigated in the role of intervening variables, such as gender and socioeconomic status. Customer expectations are highly variable in the service industry and significantly impact service quality. Additionally, it is vital to study user types, as service recovery strategy may not solely arise from service errors but also from customer expectations exceeding what is reasonable (over-expectation customer). Moreover, it is suggested that errors, such as delivery failures, unavailable service, and unprompted staff errors, be examined within the framework of user expectations and service quality.

6. CONCLUSION

This study summarises the influence of brand image on service recovery strategy, satisfaction, word-of-mouth communication, and revisit intentions. The study identifies four brand image dimensions: the experiential, symbolic, and functional dimensions positively influence service recovery strategy, while the societal dimension negatively impacts them. Furthermore, the study reveals that all three components of service recovery strategy, distributive justice, interactional justice, and procedural justice, can contribute to satisfaction with service recovery strategy. Additionally, satisfaction positively affects both word-of-mouth communication and revisit intentions.

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