

COMPARATIVE ANALYSIS OF EMPLOYEES' EMPATHY TOWARD PATIENT SATISFACTION BETWEEN STATE-OWNED AND PRIVATE-OWNED PUBLIC HOSPITAL IN MANADO

ANALISA PERBANDINGAN EMPATI PEGAWAI TERHADAP KEPUASAN PASIEN ANTARA RUMAH SAKIT UMUM MILIK PEMERINTAH DAN RUMAH SAKIT UMUM MILIK SWASTA

by
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Abstract: A patient's expression of satisfaction or dissatisfaction is a judgment on the quality of hospital care and as an indicator that shall be indispensable to the assessment of the quality of care in hospitals. One assessment of the quality is empathy. The purpose of this study is to compare employees' empathy toward patient satisfaction between state-owned and private-owned public hospital in Manado. This research is comparative research using quantitative method. The population of this research are the people live in Manado who experienced the service in public hospital in Manado. This research use random sampling technique and the sample of this research are 100 respondents. Data calculated using independent sample t-test and descriptive statistics methods. The result of this study shows there is no significant difference in employees' empathy toward patient satisfaction between state-owned and private-owned public hospital in Manado. The former patients are dissatisfied with the empathy performance by employees in both hospital. Hospital in Manado should consider about make a training to enhance their employees' empathy.

Keywords: *empathy, service, public hospital, patient satisfaction.*

Abstrak: Kepuasan pasien adalah penentu kualitas perawatan rumah sakit dan salah satu aspek penentu kualitas pelayanan adalah empati. Tujuan penelitian ini adalah untuk mengetahui apakah terdapat perbedaan dalam empati pegawai terhadap kepuasan pasien di rumah sakit milik pemerintah dan milik swasta di Manado. Penelitian ini adalah penelitian uji beda yang menggunakan metode kualitatif dalam pengumpulan data. Populasi dari penelitian ini adalah warga Manado yang sudah menikmati pelayanan di rumah sakit umum yang ada di Manado. Penelitian ini menggunakan metode sampel acak dengan total respondent sebanyak 100 orang. Kalkulasi data menggunakan metode independent sample t-test dan descriptive statistics. Hasil dari penelitian menunjukkan bahwa tidak ada perbedaan dalam ekpektasi namun ada perbedaan dalam persepsi pasien dalam hal ini di aspek empati afektif. Pasien juga tidak puas terhadap kualitas empati dari kedua tipe rumah sakit. Rumah sakit di Manado sebaiknya memikirkan untuk melakukan pelatihan terhadap peningkatan empati pegawai mereka.

Kata Kunci: *empati, pelayanan, rumah sakit umum, kepuasan pasien.*

INTRODUCTION

Research Background

The need for doctors and nonetheless the need of healthcare or hospital service as in general where doctors and nurses work for people. The fact that there is no city in this world can keep their entire citizen healthy require every single city in this world has at least one doctor in there or nearby. In other meaning, every single big city should have hospital to keep their citizen healthy. Hospital or a health care institution is providing patient the treatment with specialized staffs, doctors, nurses and medical equipment.

Hospital in Indonesia is being progressive either by the knowledge of the paramedics or in the breakthrough of brand new technology of medical equipment. In funding the hospital, Indonesian government try to collect fund from the citizen by the government program of BPJS as in English stands for "institution of social collateral giver". This BPJS work like health insurance where citizen pay little amount of money monthly and get a "free at point of delivery" service of hospital (all free access in the public hospital).

The Quality of service by a healthcare institution is a need to be known because the satisfaction of the customers or the patient somehow related to their healing process. Related to health, we talk about someone's life. Every single action in a hospital could determine a patient fate. Even word count in this case of service. Service quality has 5 dimensions and one of them is Empathy. Empathy extends far beyond a patient's medical history, signs, and symptoms. It is more than a clinical diagnosis and treatment. Empathy matters for a couple reasons. First, empathy is good for patients. It builds trust, which increases patient satisfaction and compliance. When patients perceive that they connect on common ground with the physician, they have better recovery rates. Second, empathy is good for doctors. According to research, patients seldom verbalize their emotional concerns outright and, when they do, their doctors often do not acknowledge the concerns. Empathy can counteract this issue, help doctors do their job well, and even buffer against physician burnout (Killam and Kasley, 2014).

There are significant changes happened in all over the city in Indonesia including Manado, since Indonesia establish BPJS nationally in 2014. One of them is the booming of patients at the referral hospitals either by outpatient or inpatient, since everyone have the access to have health facility. Actually since every single people in Indonesia have access to hospital, they also have the choice to have the free medical treatment at public hospital or with charge in private hospital. Although with all ease given to get access for a healthcare service there still are so much problems related to hospital in Manado. For example, by the view of general citizen, they always counting and distinguish the service given by the general hospitals and by the private hospitals. The most often dimension of service quality they barely mention is empathy which the physicians considered by them as less empathetic.

We are sometimes hear people from various class criticize and condemning the bad, unprofessional and less empathetic in giving health service. Those are saw and felt by the patient and their family point of view whosoever experience the bad service in some private-owned or state-owned hospital. Moreover, we can also hear in our neighborhood or written in the media there are so many complaints regarding to the disappointing act or attitude of some physician in some hospital such as: less care, not responsive, unskilled, fierce, rude, etc. Lack of empathetic and caring behaviors, has resulted in an increasing number of complaints against health professionals in Australia (Dean, 2017).

One case happened to Erwinsyah Piliang in 2015 that have been abjected and harassed by a doctor in Haji Medan Hospital (Muamar, 2015 at Tribun Medan News). The doctor yell, rudely pulling, and insulting the poor victim because He told the doctor that the wound by the operation they did was festering. Another case that happened in regional state-owned Karawang hospital, one patient named Titih died in the hospital service waiting room in 2017. She died after she's been waiting for hours with her very severe heart attack condition and get no medical treatment (Solehudin, 2017 at Jawapos).

Empathy that felt by the patient in a healthcare in Kim and Kaplowitz (2004) is the patient feelings of being understood and accepted by the physician. This understanding and acceptance consists in turn of two components: cognitive (when someone sees another person experiencing an emotion, and develops similar emotion themselves) and affective (when someone know how others feel and can put those feelings to use) (Kozeki and Berghammer, 1992). If every hospital have their employees had this dimension (empathy), there would be less patient suffering, less death case of malpractice, but more recovery rates, and more happy patient by fulfillment of their satisfaction. The common people that have not much knowledge in the world of medical and hospital service, can only guess, talk, and judge the service given to them or their family or beloved when the bad thing happen in that service given.

In Indonesia or even Manado one of the important research like empathy quality in a hospital can be stated as rare even though there are so many cases that revealed or still remains a secret of some physician's bad attitude,

behavior, communication-with-patient, that can injure or even kill some patient. There also found in my literature survey that will be included to this paper, on a hospital service quality comparative research, there found the dimension that often not significant in the service given by private-owned and state-owned is empathy.

The above description is underlying reason why this study is undertaken. This research will find out whether public or private hospitals in Manado have their employee had better empathy for the patients according to the patient's experiences. This research will use descriptive statistics and t-test as the tools to see the gap of empathy given to the patient in public and private hospitals in Manado through the point of view of the patient.

Research Objective

The main objective of this research is as follows:

1. To identify the difference in patient expectations of cognitive empathy between the employees in state-owned and private-owned public hospitals in Manado
2. To identify the difference in patient perceptions of cognitive empathy between the employees in state-owned and private-owned public hospitals in Manado
3. To identify the differences in patient expectations of affective empathy between the employees in state-owned and private-owned public hospitals in Manado
4. To identify the difference in patient perception of affective empathy between the employees in state-owned and private-owned public hospitals in Manado

THEORETICAL REVIEW

Marketing

Marketing is a societal process by which individuals and groups obtain what they need and want through creating, offering, and freely exchanging products and services of value with others (Kotler and Keller, 2012)

Service

The definition of services as mentioned in Kotler and Armstrong (2006), "Service is any act or performance of one party can offer to another that is essentially intangible and does not result in the ownership of anything. Its production may or may not be tied to a physical product". Means that service is any performance by an act of one side party which is intangible and some are tied but some aren't have relation with physical product.

Service Quality

Service quality is an aspect that has aroused considerable interest and sparked debate in current research literature, because of the difficulties in both defining and measuring it with no consensus emerging on either issue (Wisniewski, 2001). Service quality defined as the consumer's rating of the overall excellence or superiority of the service offered (Kleyhans and Zhou, 2012)

Customer Satisfaction - Patient Satisfaction

Customer satisfaction is predetermined by how the expectations of the customer are met (Kotler and Keller, 2012). Customer satisfaction is directly connected to customers' needs. The higher the expectations are the more difficult it is for the company to satisfy customers and fulfill their needs (Zeithaml, Bitner and Gremler, 2010:187).

Consumer Perception - Patient perception

The customer perception definition in Hanna and Wozniak (2013:75) is the process of selecting, organizing, and interpreting sensations into a meaningful whole. Perception is highly subjective and therefore easily distorted and individual's frame of reference affects the way he or she interprets sensation.

Consumer Expectation - Patient Expectation

Consumer expectation generally refers to the needs and wants of individuals in the economic marketplace. Such expectations are usually driven by people's preconceived ideas regarding goods or services (Vitez, 2018).

Dimension of service quality

According to Tjiptono (2006) , the general characteristics of the quality of these services is divided into five, namely: Intangible, variability, inseparability, perishability, and lack of ownership.

Data Collection Method

The data used in this research consists of two types of data, which are primary and secondary data. Primary data were collected from in-depth interviews, and secondary data were obtained through scholarly journals, textbooks, and previous researches.

Empathy

Empathy that described by Zoll and Enz (2012) is the ability and inclination of a person to understand what others think and feel in a certain situations.

Cognitive Empathy

The cognitive aspect of physician empathy is defined as the physician's ability to accurately apprehend the mental state of his or her patients (the ability to take another person's point of view) and to effectively communicate this perspective back to the patients (Kim, Kaplowitz and Johnston 2004:3).

Affective Empathy

The delivery of healthcare services-from primary care to secondary and tertiary levels of care-is the most visible part of any healthcare system, both to users and the general public. There are many ways of providing healthcare in the modern world. The place of delivery may be in the home, the community, the workplace, or in health facilities.

Hospital/Healthcare industry

Improving access, coverage and quality of health services depends on the ways services are organized and managed, and on the incentives influencing providers and users.

Previous Research

Ramez (2013) in his research use a sample of hospital and health clinic patients in Manama, the capital of Bahrain patients with at least one year of health experience with the hospitals and there where administrated questionnaires were distributed. They were surveyed by interviewers at different geographical locations, such as, hospitals, homes and business offices. 250 patients agreed to participate in the survey.. The remaining 235 questionnaires, which represent 94% of the study samples, were considered suitable to be included in further statistical analysis. The main purpose of his research is to find out and compare the perceptions of service quality from the perspective of patients of public and private hospitals in Bahrain. Use T-test for comparing the mean scores of patients' expectations, perceptions and dissatisfactions for all service quality statements in private and public hospitals. And One Way ANOVA was carried out to test whether there is a significant differences between the weighted mean gap scores of all dimensions and overall service quality in both populations groups. At the end of his research, he found out that Bahrain patients have high expectations for all dimensions of service quality, especially in the private sector, but non-significant differences are found between private and public hospitals, except for the empathy dimension. Patients' perceptions of services provided by private sector are much better than services in public sector. Both groups of patients are dissatisfied with the healthcare services of Bahrain.

Kim, Kaplowitz and Johnston (2004) in their research study attempted to develop new scales of patient-perceived, empathy-related constructs and to test a model of the relationships of physician empathy and related constructs to patient satisfaction and compliance. The interviewers promised that the patient would remain anonymous and that physicians would not see individual responses. After 2 weeks of the survey, 550 questionnaires were collected out of approximately 800 outpatients. They tested their model via Structural Equation Modeling (SEM) using the EQS version 5.7b for Windows. SEM also prefers confirmatory factor analysis (CFA). They used a comprehensive two-step modeling approach to develop, test, and estimate their model. At The end of their research, Sung soo kim, Stan kaplowitz, Mark v. Johnston find out that patient-perceived physician empathy significantly influenced patient satisfaction and compliance via the mediating factors of information exchange, perceived expertise, interpersonal trust, and partnership. Improving physician empathic communication skills should increase patient satisfaction and compliance.

Lan and Yan (2013) designed their study to explore the impact of trust, interaction and empathy in doctor-patient relationship on patient satisfaction. They have utilizes questionnaires with target patients in Taiwan as the

intended respondents. A total of 446 valid questionnaires were collected for relevant analysis using regression models. They found out that Trust ($t=4.215, p<0.001$), interaction ($t=4.997, p<0.001$) and empathy ($t=8.474, p<0.001$) have shown significant positive correlation with patient satisfaction ($p<0.001$).

Conceptual Framework

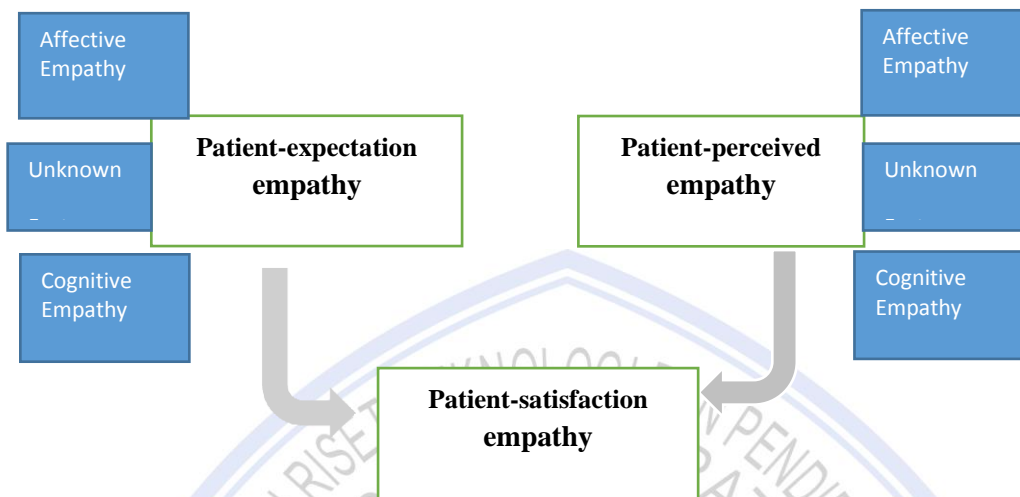


Figure 1. Research Framework
 Source: data processed adapted from Karen Ann Brown’s dissertation in 1990

RESEARCH METHOD

Research Approach

The research type is comparative research using descriptive statistics to calculate the expectation mean (E), perception mean (P) and gap mean scores for each item in the Empathy scale in both the private and public hospitals, and T-test where it will identify if there any significant differences. This study conducted in Manado, North Sulawesi, Indonesia, will be specifically conduct to former patient of state-owned and private-owned hospital in Manado at the accepted hospital in the table below,

Population, Sample and Sampling Technique

According to Cooper and Schindler (2006), Population is generalized to the object/subject which have a certain quantity and characteristic that is required by researcher to study and to gain conclusion. The population in this research is the people live in Manado that had experience service in some favorite hospital in Manado. Roscoe (1975) proposed the rules of thumb (Sekaran and Bougie, 2009) such as that sample size larger than 30 and less than 500 are appropriate and the sample size should be several times (preferably 10 times or more) as large as the number of variables in multivariate study (including multiple regression analysis). This research have 100 respondent.

Data Collection Method

Method that used to collect the data in this research is by physical form of questionnaire and by google form of questionnaire. The implementation will be structured and unstructured to the respondent, either to patient respondents or to the health professionals’ respondent. The use of questionnaire is to get the primary data from respondent.. A scale is a tool or mechanism by which individuals are distinguished as to how they differ from one to another on the variable of interest to our study. Likert scale as “An Interval scale that specifically uses the five response categories ranging from ‘strongly disagree’ to ‘strongly agree’ which require the respondent to indicate a degree of agreement or disagreement with a series of statement related to the stimulus”.

Operational Definition of Research Variables

- Empathy : Cognitive empathy, Affective empathy

- Patient satisfaction: Patient perception, patient expectation

Instrument Testing

Measurement tools are instruments used by researchers to aid in the assessment of subjects, informants, or respondents. The instrument must be valid and reliable, based upon the conceptual framework, and relevant to the research topic.

Data Analysis Method, Validity and Reliability

Method used in this research is independent sample T-test and descriptive analysis, and the validity and reability of the data calculated using SPSS.

RESULTS AND DISCUSSIONS

Results

The first section is the results validity, reability T-Test and descriptive analysis, and the second section explains about the discussions after the interviews.

Table 1. Reliability Statistics

	Chronbach's alpha	Status
Expectation	.948	Reliable
Perception	.866	Reliable
Both	.916	Reliable

Source: Processed Data, 2018

Validity

The correlation index for all questions for analysing employees' empathy toward patient satisfaction in Manado are greater than 0.195 (R for 100 sample) and below the significance level of 5%; therefore, the data is considered as valid.

Table 2. Independent sample T-test

		Sig.2-tailed
Expectation of Cognitive Empathy	Equal variances assumed	0.739
	Equal variances not assumed	0.739
Perception of Cognitive Empathy	Equal variances assumed	0.134
	Equal variances not assumed	0.134
Expectation of Affective Empathy	Equal variances assumed	0.683
	Equal variances not assumed	0.683
Perception of Affective Empathy	Equal variances assumed	0.019
	Equal variances not assumed	0.019

Source: Processed Data, 2018

Table 3. Descriptive statistics

S-o	Expectation		Perception		Gap		S-o	P-o	S-o	P-o
	P-o	S-o	P-o	S-o	P-o	P-o				
			Cognitive	4.31	4.39	3.51	3.69	-0.80	-0.70	
Q1	4.48	4.44	3.82	3.8571	-0.66	-0.58				
Q2	4.26	4.28	4.18	3.02	-0.08	-1.26				
Q3	4.36	4.34	4.04	3.12	-0.32	-1.22				
Q4	4.54	4.56	3.98	3.76	-0.56	-0.80				
Q5	4.18	4.4	3.06	4.04	-1.12	-0.36				
Q6	4.3	4.44	3.72	3.72	-0.58	-0.72				
Q7	4.38	4.52	3.74	3.44	-0.64	-1.08				
Q8	4.28	4.24	3.26	4.12	-1.02	-0.12				

Q9	4	4.42	3.14	4.02	-0.86	-0.40			
Q10	4.28	4.3	3.52	3.28	-0.76	-1.02			
Q11	4.44	4.44	3.82	3.44	-0.62	-1.00			
Q12	4.28	4.38	2.88	4	-1.40	-0.38			
Q13	4.34	4.42	3.6	3.74	-0.74	-0.68			
Q14	4.36	4.46	3.02	3.94	-1.34	-0.52			
Q15	4.18	4.24	2.82	3.86	-1.36	-0.38			
			Affective	4.33	4.34	3.40	3.71	-0.94	-0.62
Q16	4.5	4.56	3.2	4.14	-1.30	-0.42			
Q17	4.44	4.56	3.7	3.62	-0.74	-0.94			
Q18	4.16	4.42	3.06	3.84	-1.10	-0.58			
Q19	4.28	4.44	3.56	3.48	-0.72	-0.96			
Q20	4.22	4.28	3.14	3.88	-1.08	-0.40			
Q21	4.16	4.16	3.68	3.5	-0.48	-0.66			
Q22	4.46	4.36	3.38	3.84	-1.08	-0.52			

Source: Processed Data, 2018

Discussion

Hospital is a place where people with injury or disease treated and taken care of by physicians. Hospital industry can be found all over the world. Although hospital industry is generally between profit and non-profit organization but the profit taken is considered big. In Indonesia, hospital by the owner is divided in two types, state-owned and private-owned. People have the freedom to choose whether they want to have free service in state-owned public hospital or have to be charged in having service in private-owned public hospital.

State-owned hospital is a hospital that holds by the government and funded by government. All of the operational fee, maintenances, investments for development, are borne by the government using APBD or APBN. Usually the state-owned public hospital in Indonesia work hard for getting new development in research, equipment, experts, and some are forget to build good relationship with the patient which make some patient uncomfortable and some feel discriminated.

Private-owned hospital is a hospital that runs by company with a purpose of getting profit. All of the activity in private-owned hospital funded by the payment collected from the patient or their insurance for the medical service given to them. For the facility, private-owned hospital is considered good equated to state-owned hospital such as having operating room, maternity ward, emergency room, general and specialist polyclinic. Private-owned hospital usually skimping about the cost and procurement but they work hard in making patient satisfied. All of the operational fee, employee salary, maintenance, and all the activity in private-owned hospitals depend on their income from the patient. That is why the cost patient must pay in private-owned hospital usually more than in the state-owned hospital.

Cognitive and affective empathy has been used to investigate patient expectation, perception and satisfaction/dissatisfaction in both state-owned and private-owned hospitals in Manado. 100 out of 124 questionnaires have been qualified to the further research and have been calculated using IBM SPSS statistics 24, with independent sample t-test method have been used to see the level of difference of patient satisfaction of employees empathy in state-owned and private-owned public hospital in Manado, and descriptive statistics to calculate the mean value of patient perception, patient expectation, and patient satisfaction (gap) of employees empathy in state-owned and private-owned public hospital in Manado.

The result of independent sample t-test showed that there are no significant difference on patient expectation (both cognitive and affective) of employees' empathy in state-owned and private-owned hospital in Manado. This means that patient expecting the same service given from both type of hospital. For the cognitive aspect, t-test showed that there is no significant difference which means that the both type of hospital have not much different in giving service in this case cognitive empathy for their patients. On the other hand, t-test resulting that there is significant difference in patient perception of affective empathy between these two types of hospital. This means that employees in both type of hospital are giving different kind of service in this case affective empathy for their patients.

The result of descriptive statistics shows the findings that in Manado the private-owned public hospital have greater mean value rather than the state-owned public hospital have although there wasn't a big number of difference unless in affective aspect of empathy. This still means patient feel that the employee in private-owned hospital have better empathy than the employee in state-owned hospital.

In cognitive and affective empathy, there found a similarity with previous study in Kim, Kaplowitz and Johnston (2004) where there are no big difference of scores between cognitive and affective empathy for patient satisfaction. Which means that base on patient's perspectives; employees in the hospital have the same level of cognitive (empathy by thoughts) and affective (empathy by feelings) empathy. What differ this research from Kim, Kaplowitz and Johnston (2004) findings is there found small difference of number where cognitive empathy has less score than affective empathy while this research found a small difference of number where affective empathy has less score than cognitive empathy.

The same thing that found from the previous study (Ramez, 2013) is this research finds out there are negative gaps in all over the questions between patient expectation and patient perception. He also found that in Bahrain the employees in private-owned public hospitals are considered by the patients as having better empathy than the employees in state-owned public hospitals.

There also found a similarity with another previous research (Arasli, Ekiz and Katircioglu, 2008) in case of patient perception where the scores for empathy dimension fall below their expectation. The same finding found in another previous research (Mostafa, 2005) where patient expectation was found have higher scores for empathy dimension rather than their perception.

Different findings for this type of researches are determined by the area where the research is taken place. Since this research taken place in Manado, the result reflect the expectation of most Manadonese, the perception of Manado former patients base on what they have experienced in a hospital, and the satisfaction/dissatisfaction base on the gap score between patient expectation and patient perception.

CONCLUSION AND RECOMMENDATION

Conclusion

There are four constructive findings that can be concluded from the overall result in this research using independent sample t-test analysis, which are listed as follow:

1. There is no difference in patient expectations of cognitive empathy between the employees in state-owned and private-owned public hospitals in Manado.
2. There is no difference in patient perception of cognitive empathy between the employees in state-owned and private-owned public hospitals in Manado.
3. There is no difference in patient expectations of affective empathy between the employees in state-owned and private-owned public hospitals in Manado.
4. There is significant difference in patient perception of affective empathy between the employees in state-owned and private-owned public hospitals in Manado.

There also findings from the descriptive statistics analysis that the private-owned hospitals in Manado have higher mean value than state-owned hospitals have, although with small number of gap. It means that apparently private-owned hospital's employees in Manado have better empathy shown to the patients than what state-owned hospital's employees showed.

Recommendations

In this section are recommendations that can be given based on the results of research that has been done, as follow:

1. Private-owned hospital in Manado should enhance their employees' empathetic skill so that the patient will be satisfied with their service. Because nowadays the Manado state-owned physicians' empathetic skill is getting better and some items of question showed already beyond private-owned hospital although just a little bit number of difference. If private-owned hospitals in Manado won't do some innovation in this area, then they will lose their patient sooner or later because empathy dimension is very important in order to win the heart of consumer in this case patient. Also, the payment from patients are the only income they can get from, dissimilar from state-owned hospital that get subsidise from the APBN or APBD, that state-owned hospital will not going to be bankrupt immediately when there not much income they can get in a period of time.
2. State-owned hospitals in Manado also have to do some enhancement because there found so much negative gap between patient expectation and patient perception of the empathy given, what worse is there is no single positive gap found (same as private-owned hospital gap score), which means that the patients are definitely not satisfied with the service in this case empathy dimension that given to them.

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