TRUST IN RELATIONSHIP MARKETING

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ABSTRACT

Trust is a critical factor fostering commitment in relationships between service providers and customers. The presence of trust improves the chance of successful service performance. A lack of trust often results in inefficient and ineffective performance. The importance of trust as a variant of successful relationship marketing has while distinguishing two targets of trust, the service provider and receiver, an empirical verification indicates that several variables influence trust formation in the receiver and that trust can also be transformed from the receiver to the seller.

Keywords: Trust, Service - provider, Receiver, Relationship marketing

INTRODUCTION

Trust can be defined as “the belief in the integrity, honesty and the reliability of another person” (Dwyer and Tanner, 2002). In general, trust leads to relationship commitment which is what marketers are striving to achieve. Trust is a key element for relationship success and tends to be related to a number of elements such as competitive advantage and satisfaction (Ratnasingam & Pavlou, 2003) in addition to commitment. While distinguishing, these two targets of trust (service provider and receiver), focus on the importance of trust as a condition of successful relationship marketing. The literature
review based on Doney and Cannon (1997) research, presents the conceptual model that identifies several variables that can influence trust development.

A. TRUST TOWARDS A SERVICE PROVIDER

Characteristics of the provider and reputation of the service provider are vital. The reputation has been defined as the public information concerning “the merit of trust” (trustworthiness). A favourable reputation puts in value the hospital’s credibility (Ganesan, 1994) and encourages them to establish relationships.

H1: Patient’s trust influences positively service provider's reputation.

B. HOSPITAL SIZE

The Hospital size can be defined while underlying many indicators like the annual turnover, the number of employees, the number of patients, as well as hospital's investments (Doney and Cannon, 1997, Silem, 1994; Matri Ben Jemaa and al, 2006). They proved empirically that more the size of the hospital more the patients consider that it deserves trust. Thus, we can consider hospital size as a trust determinant.

H2: Patient’s trust is positively associated to hospital's size.

C. HOSPITAL AND PATIENT RELATIONSHIP IN INVESTMENTS

A hospital’s investment is considered as particular or specific if it looses its value when the relationship is broken. These investments can be equipments, machines, facilities and even employee’s particular expertise.

H3: The eagerness of the hospital to make specific investments is positively associated to the patient’s trust.

D. DURATION OF RELATIONSHIP

The duration refers to the period of time patients and hospital have been in contact without considering the interaction frequencies. Dwyer and al (1987) affirm that through time, the experience with the hospital increases and the provider – receiver converges on leaving behind deep disagreements. Such periods provide to the two parts a better understanding of each other what encourages the development of trust between them. In the same context, Ganesan (1994) demonstrated that the seller–client experience is positively related to the client perception of benevolence as well as seller's credibility (the two trust dimensions).
H4: Patient trust is positively related to the duration of time they have been in contact with the hospital.

E. TRUST TOWARDS MEDICAL STAFF

The Doctors present an important role for trust development. The most common characteristics are expertise and capacity as well as the perceived like ability and perceived similarity by the patient as done by Doney and Cannon (1997). Expertise can be defined as a perception of the other knowledge and competence (Ghoshes and al, 2001). Indeed, several authors found that patients see the doctors with more expertise to worth more trust (Doney and Cannon, 1997).

H5: Patient’s trust is determined by the expertise of the doctors.

F. DURATION OF RELATIONSHIP

By duration of relationship, we designate the number of years during which the client knew the service-provider. The construction of a long-standing relation becomes a strategically vital objective (Cravens,1995), and this thanks to advantages generated by this type of relation (long-standing relationship) as the development of mutual trust as well as added value (Wood,1995).

H6: Patient’s trust is determined by the duration of relationship with the hospital.

RESEARCH METHODOLOGY

VARIABLES MEASURE

Used scales have been taken from Doney and Cannon (1997) research. All variables have been measured while using a Likert on a seven points scale.

SAMPLE DESCRIPTION

The sample frame comprised 200 patients receiving treatments in various departments of different hospitals.

MEASURE SCALE RELIABILITY

The alpha of Cronbach has been calculated for every scale, the gotten values provide a good reliability (between 0.64 and 0.94).
HYPOTHESES VALIDATION

Hypotheses developed in this survey imply relations of reason to effect. To verify them we will use the analysis of regression. For this, following indicators were used:
- VIF: Factor of inflation of the variance
- F: The test of Fisher and
- T: The test of Student

ANALYSIS AND RESULTS INTERPRETATION

Results of the regression characteristics of the hospital and Trust towards it

<table>
<thead>
<tr>
<th>F</th>
<th>Sig</th>
<th>Coeff</th>
<th>B</th>
<th>T</th>
<th>Sig</th>
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<tr>
<td>12.066</td>
<td>0.000</td>
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</table>

| Reputation | 0.233 | 2.03  | 0.034 | 1.124 |
| Size       | 0.414 | 3.24  | 0.001 | 1.124 |

Results of the regression characteristics of the hospital relationship and trust towards it

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<th>F</th>
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<tr>
<td>5.325</td>
<td>0.003</td>
<td>2.611</td>
<td>0.024</td>
<td>1.123</td>
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<tr>
<td>Willingness to customise</td>
<td>0.312</td>
<td>2.611</td>
<td>0.024</td>
<td>1.123</td>
<td></td>
<td></td>
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<tr>
<td>Confidential information sharing</td>
<td>0.403</td>
<td>3.203</td>
<td>0.013</td>
<td>1.011</td>
<td></td>
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<tr>
<td>Length of relationship</td>
<td>2.9081</td>
<td>0.32</td>
<td>0.173</td>
<td>1.126</td>
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Results of the regression characteristics of the medical staff and trust towards him

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<td>12.066</td>
<td>0.000</td>
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<tr>
<td>Expertise</td>
<td>0.233</td>
<td>2.03</td>
<td>0.034</td>
<td>1.009</td>
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<tr>
<td>Capacity</td>
<td>0.214</td>
<td>1.24</td>
<td>0.230</td>
<td>1.009</td>
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Results of the regression trust towards the medical staff and trust towards hospital

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<td>12.01</td>
<td>0.001</td>
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<tr>
<td>Trust towards medical staff</td>
<td>0.45</td>
<td>3.5</td>
<td>0.001</td>
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The results confirm the importance of the provider’s characteristics (size, reputation). These variables appear to be important in different domains as many authors are unanimous on their effect on client’s trust (Ganesan, 1994; Dasguptas, 1988; Anderson and Weitz, 1989..). It has also been demonstrated that the “Willingness to customize” is also an antecedent of trust. Indeed this kind of behaviour shows that the business seller is sincere what makes that he deserves trust. In accordance with the previous researches, private information sharing is an important variable in the determination of trust since it gives sign of the good faith and seller's benevolence (Doney and Cannon, 1997). For the salesperson and in accordance with previous research results, it appears that their expertise, their discerned likeability as well as the frequency of their business contacts constitutes keys variables to trust development. To make some specific investments, play an important role for trust development towards him. It suggests that to develop and maintain a relation of trust with his customer, the provider must concentrate his efforts this way regarding staff expertise.

CONCLUSION

Results showed that service provider’s characteristics (size and reputation), confidential information sharing, as well as his willingness likeability, as well as formal contact frequency revealed a great importance, what emphasizes the importance of medical staff’s training either on behavioral level or on product characteristics. Results also showed that trust generated by medical staff is transferable and it (trust) is developed differently towards the two targets. This result is very important because it shows that besides his assets (tangible or intangible), the service provider can develop trust through his staff.

5. LIMITATIONS AND FURTHER RESEARCH

This work does not constitute a finished study. On the contrary, it only tries to suggest areas of improvement.
REFERENCES


