İŞLETME ARAŞTIRMALARI DERGİSİ JOURNAL OF BUSINESS RESEARCH-TURK

2022, 14(4), 2669-2685

https://doi.org/10.20491/isarder.2022.1526



Electronic Word-of-Mouth, Affective Commitment, and Consumer Buying Behavior in Healthcare Services during the COVID-19 Pandemic



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ARTICLE INFO

Keywords:

Affective commitment Consumer buying behavior Electronic word-of-mouth (EWOM) Healthcare services

Received 6 July2022 Revised 16 November 2022 Accepted 25 November 2022

Article Classification: Research Article

ABSTRACT

Purpose – As electronic word of mouth or EWOM has turn out to be an overriding data source for customers who buy products digitally, therefore, understanding how EWOM affects customer buying behavior (CBB) becomes quite important. Despite its significance, there aren't adequate studies that have investigated EWOM and its impact on consumers' decisions to acquire good(s) or service(s). As the earlier researchers divided EWOM to receiving and participating categories, this study set out to determine how participating EWOM affects customer behavior in the health sector. Additionally, this study looks at how does affective commitment mediates the relationship between the two forms of participating EWOM (intensity and content) and consumer purchasing behavior.

Design/methodology/approach – The data has been gathered via a self-administered questionnaire. There were two sections made for the questionnaire form. 164 hospitals' consumers were asked to rate their overall perceptual outlook on 27 questions to measure the participating EWOM constructs, as well as their beliefs regarding affective commitment, and purchasing behavior; 141 responses (86%) were deemed acceptable. The study focuses on North Cyprus hospitals' patients who searched and decided about the health services on digital media.

Findings – Participating EWOM components demonstrated positive impacts on affective commitment, according to the PLS-SEM analysis. The findings also disclosed a positive influence of affective commitment on customer purchasing behavior.

Discussion – The results of this study approved that when people welcome to participate EWOM, the benefits of EWOM become apparent. Based on this research, hospitals' managers and health sector decision makers should try to design and implement the suitable strategies for achieving further EWOM if they desire to boost their brand competitiveness.

1. INTRODUCTION

Reference groups have been extensively studied as one of the key predictors prompting customer behavior in the literature (Engel, 1995; Hawkins et al., 2001; Lang & Armstrong, 2018; Loudon & Della Bitta, 1993; Schiffman & Kanuk, 2007; Solomon, 2007), which includes the opinions of consumers' family, friends, coworkers, etc. (Hawkins et al., 2001; Solomon, 2007). One of the fundamentally influenced from the reference group is the "informational impacts" in that customers take advantage of brands based on the knowledge and recommendations of other members (Engel et al., 1995). Once a customer's opinion regarding a brand experience is reflected in their regular communications, this is referred to as word-of-mouth (WOM) marketing (Cheung & Thadani, 2012). WOM occurs through customers' preferences, which reflects their tendencies through their dialogues about a certain type of product. Undoubtedly, this is a powerful way of advertising that could be strengthened via various public activities planned and supported by organizations, or alternatively, it would also be possible through bilateral relationships among consumers themselves or between consumers and marketers.

Suggested Citation

Aghaei, I., Poormkhaje Namaghi S. (2022). Electronic Word-of-Mouth, Affective Commitment, and Consumer Buying Behavior in Healthcare Services during the COVID-19 Pandemic, *Journal of Business Research-Turk*, 14 (3), 2669-2685.

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Generally, consumers reckon Internet-based shopping is riskier than in-person shopping (Forsythe & Shi, 2003; Tan, 1999). Perceived risk of online purchasing can be summed up as the possibility or chance that a consumer might encounter losses or difficulties as a result of doing their shopping online. This encompasses uncertainty and unease with the potential for negative outcomes (Ko et al., 2004). Due to the fact that shopping that happens in a virtual setting is riskier, consumers seek more WOM messaging in an effort to do less risky purchasing (Hong & Yi, 2012; Kim & Song, 2010; Lee & Koo, 2012).

According to Rivis and Sheeran (2003), it is emphasized that customers desire to conform their friends or important individuals in order to conduct a buying behavior. Consumers are often influenced by the endorsement and support of reference groups when deciding whether or not to purchase particular goods or services (Yang et al., 2007). While making the decision whether to buy something or not, consumers frequently ask their peers for advice (Mullen & Johnson, 2013). The reference group's opinion is important and could be a significant factor in changing the customer preferences to shop online. Phelps et al. (2004) also emphasized the significance of understanding the underlying motives, mindsets, and behaviors of those who receive and share messages.

As revealed by Cheung et al. (2009) and Jensen et al. (2013), due to the high likelihood that WOM originates from an unidentified source, the importance of perceived source credibility is also included in their investigation. Several prior studies have examined the sender's attributes as antecedents of source credibility (Armstrong & McAdams, 2009; Flanagin & Metzger, 2003; Schoorman et al., 2007; Smith et al., 2005). When using an online platform, the capability to send and receive market information is defined as participation in EWOM (Chang et al., 2013). However, individuals may differ in their propensity to provide market information. As a result, engaging in EWOM involves engaging in both opinion-seeking and opinion-giving actions (Chu & Kim, 2011; Fong & Burton, 2006; Sun et al., 2006).

EWOM is powerful for a number of reasons. First, the recipient spends less time and money searching for the right information. Second, it is independent, at least if it comes from unofficial sources, which increases its credibility. Third, the informant has no financial stake in the brand's success. Thus, WOM communication is actually treated less skeptically than company-initiated promotional initiatives because of its non-commercial nature. Evidence indicates that negative information influences consumer opinions further than positive. Positive or negative word-of-mouth have different antecedents, and understanding these differences is important because negative WOM is approximately twofold as expected to affect a receiver's perception of a brand. For example, Mittal et al. (1998) verified that, according to the Prospect Theory, a negative perception of performance has a larger impact on customer satisfaction and the likelihood of repeated purchases than positive perceptions. Mittal et al. (1998) also resembled WOM to a double-edged sword where the negative blade has a higher possibility of cutting than the positive side. It has constantly been discussed that disappointed consumers are likely to publicly share their poor experiences of a company, thus damaging the brand reputation.

Earlier researchers have examined EWOM involvement by identifying two different groups of people (Ridings et al., 2006). People who express their thoughts on the Internet are known as "posters", and people who only look for other people's opinions on the online environment are known as "lurkers" (Burgee & Steffes, 2007; Ridings et al., 2006; Schlosser, 2005). For example, in the case of the health industry, customers who have received a healthcare service(s) in the past express their opinions by writing online reviews about their experience(s); on the other side, patients considering using a service(s) search for other people's online comments.

According to Nielsen (1983), approximately 70% of clients who encounter an error do not communicate this to the company. In a similar manner, Day et al. (1981) discovered that just one-third of unhappy clients actually complain to the company. According to Barich and Kotler (1991), customers who are happy with a product may share positive WOM with only three acquaintances, compared to customers who are unsatisfied, who may transfer negative WOM to eleven acquaintances. Similarly, Hart et al. (1990) proposed that those consumers with memories of inferior experience inform about eleven other potential consumers, whereas those with favorable memories inform only six. Word-of-mouth (WOM), which is informal and interpersonal in character, has the potential to be an effective and reliable communication channel (e.g., Harrison-Walker, 2001). However, WOM is not always as effective as it could be (East et al., 2008). Instead, it hinges on the

individual backgrounds of the giver and recipient as well as the situational factors of WOM generating. In other words, the results of WOM reflect both those who send it and those who receive and act on it (Sweeney et al., 2012). Therefore, identifying the elements that support effective WOM delivery is crucial.

By employing a dyadic paradigm and a multi-method research approach, Gilly et al. (1998) underlined that detailed insights into interpersonal information can be acquired. Despite the fact that EWOM is a two-way interaction between sources and seekers, the perspectives of the two are rarely taken into account when studying EWOM. Regardless of the significance of EWOM, there are just few researchers have inspected the two opposing aspects of EWOM behavior: generating and receiving. Even though EWOM is a complex kind of communication that allows individuals to interact with both businesses and one another, EWOM is mostly studied from a receiving perspective. Hence, there is a strong need to theoretically examine the ideas of contributing messages in the domain of EWOM. In order to address this gap, we concentrate on EWOM participation components even though EWOM behavior has been scrutinized by former researchers. This investigation used a survey of hospitals' patients to explore the impact of EWOM content/EWOM intensity of the nominated hospitals' social media or digital platforms on patients' affective commitment and consequently, purchasing behavior. The present research contributes to the literature of EWOM and consumer behavior particularly in the context of the health sector.

Throughout this research, as previously indicated, we had an introduction to the subject, tailed by a justification of the research's importance. Afterward, all relevant concepts were defined along with specifying of pertinent theories which led finally to stating the research design and hypotheses. By moving on to the next section, the methodology, procedures and data collection method are going to be detailed. In section four, the results of the analysis are reported. In section five, lastly, the findings are debated along with the policy implications, future research recommendations, and the limitations of this study.

2. LITERATURE REVIEW

2.1 An Overview

On a digital social network, various types of virtual life exist, including personal friendships, group memberships, and corporate partnerships. People use the internet to interact with others, exchange desires and experiences, and have discussions about various topics (Zaglia, 2013). Since the theory of social network contends that human's social behaviors are ingrained in their internet-based interpersonal relationships (Granovetter, 1985), it is possible that social network behaviors have an impact on how members behave (De Valck et al., 2009). In recent years, thanks to the transmission capacity and the abundance of information sources on the Internet, marketers have moved from conventional to digital types of media to improve consumers' awareness and desires about certain companies (Duffett, 2015). A new environment for brand marketing communications has been shaped by the usage of digital media channels in marketing setting; it grants customers more control and provides an individual connection for client-generated content and social engagement (Chi, 2011). Digital brand marketing communication could make the marketing relationship between consumers and brands stronger.

2.2 EWOM

The expansion of the Internet in recent decades has caused a noteworthy rise in the number of internet users, which has had a substantial impact on various business sectors (Zainal et al., 2017). Word-of-mouth (WOM) has been considered extensively in a variety of industries worldwide to disseminate information about goods or services (Abubakar & Ilkan, 2016; Bulut & Karabulut, 2018; Jacobsen, 2018; Kenton, 2020). A novel kind of WOM which is called electronic word of mouth (EWOM) has evolved with growth of digital technologies. Online reviews that deliver customers' thoughts on goods, services, or businesses are an example of EWOM. They are the reliable information sources free from the commercial influence of companies (Leong et al., 2019; Serra-Cantallops et al., 2018). In the present work, EWOM participation is discussed as consumers' intention to share and transmit their opinions via digital media (Sun et al., 2006). Although several researchers (Chu & Sung, 2015; Hennig-Thurau et al., 2004; Ho & Dempsey, 2010; Lee et al., 2008) have explored the reasons why consumers create and disseminate messages about the products and brands, relatively few studies have investigated the outcomes of EWOM (Yoo et al., 2013). However, consumers are now individuals who create information in addition to consume it (Bahar, 2015).

2.3 Affective Commitment

According to definitions, affective commitment refers to a consumer's emotional bonds to companies that deepen their feelings of connection, affiliation, and commitment to them (Allen & Meyer, 1990; Fullerton, 2003; Su et al., 2014). According to Liu and Mattila (2015), consumer with stronger affective commitment have a great desire to assist the company to boost its productivity. Customers who are effectively committed are further possibly to positively suggest a manufacturer or service provider to others (Harrison-Walker, 2001). According to Singh et al. (2012), clients have an increased likelihood of being loyal to a company that treats its stakeholders ethically. In recent studies by Engizek and Yasin (2017), Hur et al. (2018), and Markovic et al. (2018), it was unveiled that corporate social responsibility (CSR) initiatives have a favorable impression on consumers' affective commitment to a company.

2.4 Consumer Buying Behavior (CBB)

A customer goes through multiple steps when making a purchase decision (Kim et al., 2014; Sparks & Browning, 2011; Zainal et al., 2017). Today, individuals frequently utilize various online platforms to obtain information prior to making purchases, which is essential for the entire purchasing process (Teng et al., 2014). A large group of buyers who previously made their purchase decisions based on advertisements or other types of offline channel have recently started to create their own decisions via digital platforms (Lee et al., 2008; Roy et al., 2020). However, reviews and comments found on social media are not always real. Trust in products or vendors is increased by customers' positive online feedback and reviews (Bulut & Karabulut, 2018). According to various studies, reference groups are recognized as one of the primary factors determining customers' purchasing behavior (Engel et al., 1995; Hawkins & Mothersbaugh, 2010; Solomon, 2007).

2.5 EWOM Content/ EWOM Intensity and Affective Commitment

People already enjoy giving and receiving advices and relating experiences with brands. Consumer involvement benefits businesses and other consumers in this way. Festinger's (1957) theory of cognitive dissonance made it appear sensible to look into how EWOM participation affects customer purchasing preferences based on e-loyalty. Therefore, according to cognitive dissonance theory, to decrease their psychological tension or uncertainty, consumers have a propensity to be consistent in their knowledge, beliefs and buying behaviors. Customers who actively contribute to EWOM by creating content refrain from actions that are inconsistent with the information and views they express. Therefore, positive comments encourage customers to remain more dedicated to the brand and have an impact on their purchasing behaviors as well.

As evaluated by reuse tendency and the desire to suggest, Ben-Shaul and Reichel (2018) found a positive association between consumer participation levels, levels of active contribution to EWOM, and commitment. Some investigations on the impacts of EWOM have concentrated on how it affects consumer commitment (Gruen et al., 2006; Kim et al., 2014), and also connects it to customer values (Gruen et al., 2006) and customer purchasing behaviors (Kim et al., 2014). Additionally, strong EWOM about the quality of service frequently dispels consumers' skepticism regarding intricate service features and the exchange of values expectancies and converts delighted customers into committed (Chawdhary & Dall'Olmo Riley, 2015; Kashif et al., 2013). Clients who are more committed to service providers are more inclined to spread the word about the advantages of that (Bettencourt, 1997). Furthermore, according to Liu and Mattila's (2015) research, consumers with strong affective commitment have a higher inclination to help the company boost its performance. Consumers with high affective commitment are further motivated to share the word about their favorable perceptions to friends and family (Su et al., 2014). This supports the findings of Tsao and Hsieh (2012) that effectively committed consumers desire to recommend a business through constructive EWOM communication. Affective commitment has a positive correlation with WOM communication, according to Nusair and Parsa's (2011) findings.

2.6 Affective Commitment and Consumer Buying Behavior

In comparison to conventional in-person shopping, Harris and Goode (2004) stated that building a committed online-based consumer is both harder and more crucial. Contrary to traditional shopping systems, individuals can evaluate products online before buying them. Within the online marketing literature, affective commitment is widely recognized as a crucial factor influencing purchase behavior (Anderson & Srinivasan, 2003; Chauke & Dhurup, 2017). Gummerus et al. (2012) revealed that the benefits of relaxation and pleasure

in entertainment mediate the consumer affective commitment of brand communities to promote engagement behavior. Intention is one of the two key reasons that determine individual behavior, as supported by the theory of reasoned action that Fishbein and Ajzen (1975) proposed. Therefore, it seems reasonable to assume that affective commitment might have an influence on consumer purchasing decisions for online shopping (Morales, 2005; Zheng et al., 2017).

2.7 Research Model and Hypothesis Development

Based on the above-mentioned sections to justify the relationships of the constructs, the hypotheses and the graphical model of the research are presented as below:

- H1. EWOM content positively and significantly influences affective commitment.
- H2. EWOM intensity positively and significantly influences affective commitment.
- H3. Affective commitment positively and significantly influences consumer buying behavior.
- H4. EWOM content positively and significantly influences customer buying behavior.
- H4a. Affective commitment has a mediating effect on the relationship between EWOM content and customer buying behavior.
- H5. EWOM intensity positively and significantly influences customer buying behavior.
- H5a. Affective commitment has a mediating effect on the relationship between EWOM intensity and customer buying behavior.

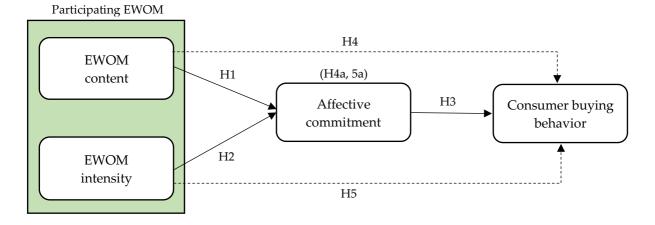


Figure 1 Research model

3. RESEARCH METHODOLOGY

3.1 Measurement

A five-point Likert scale was utilized for this research with anchors beginning with 1 (strongly disagree) to 5 (strongly agree). All measurement scales were adopted from formerly verified scales that have recently been utilized by various researchers. Utilizing a self-structured questionnaire, the data was gathered (Appendix A). There are two sections on the questionnaire form. The first part was designed to gather sociodemographic facts (gender, age, education, marital status, etc.). In the second part, respondents based on their opinions rated 27 items of the EWOM content/intensity, affective commitment, and purchasing behavior constructs. To assess EWOM content, a seven-item scale was employed, with one in all is "The hospital's social media in terms of attractiveness is discussed by me". On a three-item range, EWOM intensity was measured and one of the instance items was "I talk about this hospital to many individuals". Affective commitment was examined by employing an eight-item scale, with one among the items is "I feel like I belong to this hospital". Finally, consumer buying behavior was examined by employing a nine-item scale, with one amongst the sample items is "I intend to keep getting service from this hospital". An overview of the study's variables is shown in Table 1 as below:

Table 1 Summary of questionnaire items and sources

I. Aghaei - S. Poormkhaje Namaghi 14/4 (2022) 2669-2685

Type of variable	Variable / Construct	No. of items	Source
Socio-demographic	gender, age, education level, marital status, employment form, working experience, daily working hours	7	
Independent/ Dependent	EWOM intensity	3	Bulut & Karabulut (2018).
	EWOM content	7	Bulut & Karabulut (2018).
	Affective commitment	8	Garbarino & Johnson (1999); Mohammed & Al-Swidi (2020).
	Consumer buying behavior	9	Ebrahim (2020); Mukherjee & Nath (2007); Sung & Kim (2010).

The study used the typical grading for each construct (EWOM intensity/content, affective commitment, and consumer buying behavior). The final grade was computed with adding the responses to the items, then dividing by the total quantity of items. Further, five academicians in the area of health marketing and customer behavior checked the survey instrument and approved the validity of the questionnaire. Reliability statistic (Cronbach's Alpha) was selected to evaluate the questionnaire's internal consistency. Reliability results of the questionnaire ranged as $\alpha = 0.784$ for EWOM intensity (EI), $\alpha = 0.783$ standing for EWOM content (EC), $\alpha = 0.878$ for affective commitment (AC), and $\alpha = 0.820$ stands for consumer buying behavior (CBB). Since Alphas of 0.70 and more are taken as adequate internal consistency (Bowling, 2014), Alphas for all dimensions were sufficiently high to proceed the research.

3.2 Data Collection and Sampling Procedures

Online surveys have become one of the most efficient data collection instruments nowadays. Therefore, the questionnaire of this research was distributed online among the consumers of some selected hospitals in North Cyprus using an online survey tool known as Google Form in the period of the COVID-19 pandemic. The respondents should receive the health service(s) from one of the selected hospitals within the pandemic period and decide to visit the hospital based on available online information and reviews of the previous patients on the hospital's digital media platforms. The created dataset was utilized to test the hypotheses.

Teimouri et al. (2018) suggested that for each question a minimum of 5 respondents and a maximum of 10 are sufficient distribution. Therefore, by means of convenience sampling (Aghaei et al., 2022), we sampled and invited 164 customers (to participate by their own will, with no incentives or rewards provided) who used healthcare services and checked the hospital's social media inside North Cyprus. Finally, 141 questionnaires (86%) were retrieved to enhance the validity and generalizability of response. Also, because the dataset was analyzed by applying partial least squares-based structural equation modeling (PLS-SEM) via SmartPLS 3 statistical software, there is no concern about data noise, missing data, and skewness. In addition, PLS does not necessitate a very large sample size, thus, it could handle smaller sample sizes (Hair et al., 2013; Ringle et al. 2015).

3.3 Respondents' Profile

Table 2 lists the sociodemographic profiles of the survey participants as below:

Table 2 Sociodemographic profiles of survey participants (n = 141)

I. Aghaei – S. Poormkhaje Namaghi 14/4 (2022) 2669-2685

Variable	Description	Percentage
Gender	Male	56.0
	Female	44.0
Age	≤ 30 years	44.0
	31- 40 years	41.7
	41- 50 year	12.1
	≥50 years	2.1
Education Level	< Bachelor	33.1
	Bachelor	50.3
	≥ Master	16.6
Marital status	Single	54.9
	Married	45.1
Employment type	full-time employee	60.0
	part-time employee	40.0
Working experience	< 1 year	22.3
.	1 – 4 years	33.7
	5 – 10 years	29.7
	11 – 20 years	14.3
Daily working hours	< 8 hours	14.9
-	8 - 10 hours	79.4
	> 10 hours	5.7

4. FINDINGS

4.1 Descriptive Analysis

The mean scores for the constructs ranged from, 3.452 to 3.776 with the standard deviation from 1.014 to 1.279. Consumer buying behavior scored the very best with a mean of 3.776, while EWOM content showed a rock bottom mean at 3.452. The reported standard deviations in Table 3 that figures the data dispersion indicate the highest number for EWOM content at 1.279, and the smallest value of 1.014 for consumer buying behavior. Table 3 shows the results of the descriptive analysis as below:

Table 3 Descriptive analysis

Construct	No. of items	Mean	Standard deviation
EWOM Content (EC)	7	3.452	1.279
EWOM Intensity (EI)	3	3.562	1.248
Affective Commitment (AC)	8	3.609	1.141
Consumer Buying Behavior (CB)	9	3.776	1.014

4.2 Assessment of Measurement Model

The variance-based approach of partial least-based structural equation modeling (PLS-SEM), which used total variance to estimate parameters, is substantiated to assess the research's proposed model (Hair et al., 2013). PLS-SEM is a preferred and popular research method to study structural equation models because of its resilience (Ringle et al., 2015).

Before examining the hypotheses, reliability of the constructs, convergent validity, and discriminant validity should be considered. Initially, composite reliability (CR) was evaluated as a criterion of the structural model's reliability. As reported in Table 4, CR values in this analysis are between 0.817 to 0.952, which passed the suggested threshold of 0.70 proposed by Hair et al. (2017). In the next step, convergent validity was verified. This involves checking the factor loadings and average variance extracted (AVE). Depending on the results shown in Table 4, factor loadings for all items passed the suggested threshold of 0.60 proposed by Hair et al. (2009), except four items (CB3, CB4, CB8, CB9) which were deleted. AVEs were between 0.613 and 0.784, which overtake the recommended cut-off point 0.50. Table 4 exposes the outcomes of the measurement model below:

Table 4 Measurement analysis

Construct	Items	Factor loading	AVE	CR
EWOM Content (EC)	EC1	0.767	0.613	0.916
	EC2	0.833		
	EC3	0.853		
	EC4	0.878		
	EC5	0.829		
	EC6	0.600		
	EC7	0.680		
EWOM Intensity (EI)	EI1	0.931	0.784	0.817
•	EI2	0.853		
	EI3	0.869		
Affective Commitment (AC)	AC1	0.779	0.715	0.952
, ,	AC 2	0.827		
	AC3	0.892		
	AC 4	0.731		
	AC 5	0.882		
	AC 6	0.913		
	AC 7	0.863		
	AC8	0.864		
Consumer Buying Behavior (CB)	CB1	0.700	0.615	0.855
	CB2	0.672		
	CB3	Item deleted		
	CB4	Item deleted		
	CB5	0.766		
	CB6	0.869		
	CB7	0.606		
	CB8	Item deleted		
	CB9	Item deleted		

The discriminant validity (DV) was assessed after the convergent validity. It can be referred to the extent that the constructs utilized in the model are differentiated from each other (Hair et al., 2017). Two approaches were used to evaluate DV; firstly, Fornell and Larcker (1981) criterion by examining the relations between the measures of probably overlapping constructs, and then, the Heterotait-Monotrait Ratio (Henseler et al., 2015). Table 5 indicates that the necessary discriminant validity has been achieved in all constructs when the square roots of AVEs are higher than the off-diagonal numbers in their corresponding rows and columns.

2676

 Table 5 Discriminant validity (Fornell-Larcker Criterion)

Construct	AC	СВ	EC	EI
AC	0.846			
СВ	0.708	0.784		
EC	0.755	0.605	0.783	
EI	0.799	0.669	0.778	0.885

Notes: Bold values on the diagonal represent the square root of AVE, while other entries represent the correlations.

After that, the HTMT ratio was utilized at 0.90 as it is the determiner conservative cut-off value (Henseler, et al., 2015), thus, the value above that suggests a lack of DV (Hair et al., 2017). The outcomes were attained for the HTMT displayed in Table 6.

 Table 6 Discriminant validity (Heterotait-Monotrait Ratio)

Construct	AC	СВ	EC	EI
AC				
СВ	0.866			
EC	0.855	0.812		
EI	0.881	0.879	0.894	

It is shown from the HTMT value that, all of the DV's presumptions were confirmed by this research. In all, the model measurement signified adequate reliability and validity.

4.3 Assessment of Structural Model

The structural model evaluates the causal relationships amongst the SEM model's factors. In order to measure the statistical significance of the hypothesized model, Hair et al. (2017) recommended using a bootstrapping approach with a resampling technique, path coefficient to evaluate the structural model, R2, and matching tvalues. R² is an indicator between zero and one to show the power of analysis to predict dependent variable(s) by independent variable(s). A higher R² value indicates a more accurate prediction. According to Hair et al. (2017), assessing the change in R² value is important. Presenting the results of the current study specify that the R² value computed for affective commitment is 0.684 proposing that 68.4% of the variation in affective commitment would be described by the EWOM intensity/content constructs. Likewise, the R² value for customer buying behavior was 0.615 proposing that 61.5% of the variance in customer buying behavior is explained by its predictors in the model. The predictive sample reuse technique, commonly called Stone-Geisser's Q², may be adopted as a method for predictive relevance besides staring at the immensity of the R². Henseler et al. (2009) also used this method to evaluate the research model's capacity to predict. Formed on the blindfolding procedure, Q² assesses the predictive validity of a model through PLS-SEM approach. Q² numbers bigger than zero (0) imply the exogenous construct(s) have predictive relevance for the endogenous construct(s) (Hair et al., 2013). The Q² numbers of affective commitment (CV Red = 0.478) and consumer buying behavior (CV Red = 0.281) signify that the research model has sufficient predictive relevance.

The path coefficients analysis (resampling = 1000) was conducted to assess the statistical importance of the relationships of the constructs in the model (See Table 7). The path analysis results revealed that between EWOM content and EWOM intensity towards affective commitment both is a significant positive relationship (β = 0.337, t-value = 2.307 and β = 0.537, t-value = 3.491 respectively), therefore, hypotheses 1 and 2 are both supported. Regarding affective commitment on customer buying behavior, there is a strong significant positive relationship with β = 0.784 and t-value = 18.159, thus, third hypothesis is supported. The reported outcomes in Table 7 also revealed that EWOM content has a positive and significant impact on customer purchasing behavior (β = 0.373, t = 4.098), which shows supporting the hypothesis 4. Finally, the results are in line with H5 and support the reasoning that the higher the level of EWOM intensity about the healthcare services, the higher the customer buying behavior (β = 0.349, t = 3.755). Hence, H5 is also supported. The summary of examining H1, H2, H3, H4, and H5 are reported in Table 7 as seen below:

Table 7 Structural model's results

I. Aghaei – S. Poormkhaje Namaghi 14/4 (2022) 2669-2685

Hypothesis	Relationship	Path coefficient	t-value	Decision
H1	$EC \rightarrow AC$	0.337**	2.307	Supported
H2	$EI \rightarrow AC$	0.537***	3.491	Supported
НЗ	$AC \rightarrow CB$	0.784***	18.159	Supported
H4	$EC \rightarrow CB$	0.373***	4.098	Supported
H5	$EI \rightarrow CB$	0.349***	3.755	Supported

Notes: ** p < 0.05, ***p < 0.01.

One of the study's main aims was to investigate the mediating effect of affective commitment on two relationships of the model: first, between EWOM content and consumer buying behavior, and second, between EWOM intensity and consumer buying behavior both in healthcare sector. The mediation effect was tested using bootstrapping method for outcomes produced from 1000 resamples.

As Table 8 shows, with presence of mediator, while the indirect effect on the relationship of EC, AC, and CB is significantly positive (β = 0.213, p < 0.01), the relationship between EC and CB has no evident significant direct effect. Remarkably, it is approved that affective commitment construct performs as a full mediator variable for EWOM content and consumer buying behavior. Likewise, it was found that at the presence of affective commitment as a mediator variable of the relationship between EI and CB, both the indirect effect (β = 0.145, p < 0.01) and direct effect (β = 0.202; p < 0.05) relationships remained significant simultaneously. It approves that affective commitment can also be a partial mediator variable for the relationship for EWOM intensity on consumer buying behavior in healthcare services sector as shown in Table 8 below:

Table 8 Testing of mediating effects

Hypothesis		Estimate	BC 95% CI		Mediating effects
		Estimate .	Lower	Upper	Mediating effects
H4a	Direct effect (EC \rightarrow CB)	0.163	-0.052	0.357	Full mediation
П4и	Indirect effect (EC \rightarrow AC \rightarrow CB)	0.213***	0.105	0.392	Full mediation
115.	Direct effect (EI \rightarrow CB)	0.202**	0.006	0.394	Dantial madiation
H5a	Indirect effect (EI \rightarrow AC \rightarrow CB)	0.145***	0.060	0.277	Partial mediation

Notes: ** p < 0.05, ***p < 0.01; n = 141. BC, bias-corrected; CI, confidence interval.

5. CONCLUSION AND POLICY IMPLICATIONS

5.1 Conclusion

The principal goal of the present research was to consider the relationship amongst EWOM content/ EWOM intensity, affective commitment, and consumer purchasing behaviors. The proposed model and developed hypotheses of the research have been analyzed by utilizing PLS-SEM technique. In conclusion, it has been shown that there is a considerable positive coefficient between EWOM content and affective commitment on the one hand, and EWOM intensity and affective commitment on the other. This finding suggests that a high level of EWOM content will positively impact affective commitment; furthermore, a high level of EWOM intensity will enhance the consumers' affective commitment to the hospital. This result concurs with previous studies investigating the connection between EWOM participation and affective commitment (Cheung et al., 2009). In general, the results demonstrate that a higher level of EWOM stimulates individuals to use or reuse a healthcare service(s) rendering by hospitals.

Likewise, the study's findings reveal that affective commitment positively and significantly related to consumer buying behavior. The findings of this study confirm the discoveries of previous studies in the extant

literature (Kashif et al., 2013) which infer that it is achievable through a high degree of affective commitment to impact effectively consumer buying behavior (Su et al., 2014).

All in all, the outcomes of this research reveal there are significant and positive relationships amongst EWOM content/intensity, affective commitment, and consumer buying behavior that holding the same view in the past studies (Zheng et al., 2017). Furthermore, mediation roles of affective commitment on the relationships between two kinds of EWOM participation and consumer buying behavior are verified. Thus, our objectives were attained, and all hypotheses were supported.

5.2 Implications

Consumer buying behavior is one of the real challenges extensively companies' leaders particularly health sector face in today's competitive market (Lee et al., 2008; Roy et al., 2020). However, it appears from our research that benefits of EWOM emerge when consumers are willing more to share their reviews online. In line with this research findings, hospitals' managers should plan to embrace the ways that can inspire their customers to participate in sharing their experiences and reviews about a product(s) or brand(s) electronically via digital media of hospitals. To improve patients' participating EWOM, leaders of companies should provide the necessary supports, such as efficient communication channel and information processing via their digital platforms. Efficient communication is crucial to make a strong connection with clients in terms of thoughts sharing and purchasing decisions. The results verify this view and indicate that hospitals' leaders or decision makers should implement suitable methods to maintain a specific level of communication and linkage with customers in different forms specifically online.

Since the importance of effective communication is acknowledged in this study which supports the previous related studies' findings, recognizing the ways in which the products are going to be advertised and shown, and the media that are going to be used for the establishment of the connection between producers/providers and customers are very important. The health system managers, as such, should choose those mediums that can provide the best results.

5.3 Limitations and Future Research Recommendations

During this research project, some flaws were detected, mostly in the data gathering procedure. Due to the COVID-19 pandemic time, it was challenging to gather data for the research task, which was the main limitation noted during this study. Also, the data was gathered from customers of hospitals only in North Cyprus who became acquainted with hospitals via hospital's digital media. Hence, the generalization of the outcomes should be made with care. Furthermore, the research is focused in the context of health sector, therefore, the results might not be induced to other organizations in North Cyprus.

Considering the method of this research, it's important to propose the subsequent further research ideas. First, we recommend the same study to focus on other service industries such as education, banking, etc. for finding more relevant results that can be compared with the results existing in the literature. Second, future researchers are advised to collect factual data from other geographies to contribute more in the relevant literature. Besides, though the sample size of this work suitable the study purpose, use of a larger sample causes more reliable results.

Lastly, in the study examining the concepts of EWOM, affective commitment, and consumer buying behavior, we propose future research should have a deep look at the other effective concepts. For instance, as researchers Engizek and Yasin (2017), Hur et al. (2018), and Markovic et al. (2018) unveiled, corporate social responsibility (CSR) initiatives have a favorable impression on consumers' affective commitment to the company. Further, investigating EWOM factor as sensing EWOM and acting EWOM further seems advantageous.

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Appendix A- Questionnaire

EWO	OM content
1	The hospital's social media in terms of attractiveness is discussed by me.
2	The hospital's social media in terms of prices of services offered is discussed by me.
3	The hospital's social media in terms of variety of the services offered is discussed by me.
4	The hospital's social media in terms of the ease of communication with crew is discussed by me.
5	The hospital's social media in terms of the rapid serving is discussed by me.
6	The hospital's social media in terms of the hospital's notoriety is discussed by me.
7	The hospital's social media in terms of quality of the services offered is discussed by me.
EWO	OM intensity
8	The healthcare organization is communicated very frequently than the rest of services organization
	by me.
9	The healthcare organization is communicated very frequently than the rest of organizations of any other type.
10	I talk about this hospital to many individuals.
Affec	tive Commitment
11	I am a loyal patron of this hospital.
12	Belonging to this hospital is my proudness.
13	I feel like I belong to this hospital.
14	It highly matters that the hospital has long-term success.
15	The hospital possesses a high level of individual meaning for me.
16	I sense that this hospital is part of my family.
17	I sense that I am emotionally connected with this hospital.
18	I feel a strong sense of identification with this hospital.
Cons	umer Buying Behavior
19	I would like to talk to my friends and acquaintance about the hospital.
20	I would like to continue using the services of the hospital through the next one year.
21	I would be willing to pay a higher price for this hospital over other hospitals.
22	If the hospital had no available reservations, I would have no problem finding a different hospital
	with which I would want to make reservations.
23	I intend to keep getting service from this hospital.
24	I am committed to this hospital.
25	I will choose this hospital the next time I need a service.
26	Even if another hospital has the same offers as this one, I would prefer the offers of this hospital.
27	If the services of another hospital are not different from this hospital in any way, it seems smarter
	to purchase this hospital.