



Consumer decision making and store patronage behaviour in Traditional Chinese Medicine (TCM) halls in Singapore

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ABSTRACT

This paper examines who patronises Traditional Chinese Medicine (TCM) halls in Singapore and for what purpose. A quantitative study of 400 respondents identifies that TCMs are used primarily for the improvement of health and well being rather than the treatment of more serious medical conditions. While the patronage of TCM stores is not restricted to the Chinese population, traditional Mom-and-Pop outlets have come under increasing pressure from new market entrants. When choosing a TCM outlet, customers consider price and quality to be important factors while trust in the store keeper was also identified as a key determinant of store choice.

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1. Introduction

Traditional Chinese Medicine (TCM) is one the most widely practiced traditional medicine systems in the world (Duncan and Vertefeuille, 2003) and TCM practitioners have long been an integral part of Singapore's healthcare system. However in recent years the popularity of TCM has started to wane in favour of Western medical practices (Lee, 2006).

In 2000, the Singapore Ministry of Health introduced the TCM Practitioners Act, requiring practitioners to possess a valid practice certificate and conform to professional guidelines and a code of ethics (Health Sciences Authority, Singapore, 2008). As a result, the standard of provision has been raised as has the level of public confidence in TCM (Shen et al., 2005).

However, not everyone has welcomed the changes. David Tang, head of the Singapore TCM's Organisation Committee noted that, "Older establishments find it difficult to conform. Modern practices are squeezing out Mom-and-Pop apothecaries, where remedies are mixed by the pinch or handful" (quoted in Whitley, 2006).

While the traditional 'Mom-and-Pop' halls¹ may be in the process of slowly disappearing, TCM itself is undergoing a resurgence, with companies such as Z T P and Hock Hua, opening new contemporary formats. The industry leader, Eu Yan Sang not only operates a chain of modern retail outlets but also has research facilities and a number of private clinics.

The aim of this paper is to provide a better understanding of who uses TCM halls in Singapore and to provide an insight into their buying behaviour. It will look at the type of products purchased and customer's rationales for using TCM products. The research will then attempt to ascertain the most critical store attributes when selecting an outlet and comment on likely future changes in the TCM market.

In order to achieve these outcomes, the paper is divided as follows, first a review of the consumer decision making process and store patronage theories helps provide a conceptual framework for this paper. This will be followed by a brief overview of the structure of the TCM industry. After detailing the methodology, the paper provides an empirical section that outlines the findings of the research. Finally a series of conclusions are drawn.

2. Buyer behaviour and patronage theories

Santesmases (1996) noted the complexity of buying behaviour with numerous internal and external variables influencing the decision to purchase. Moreover it was identified that decision making varied according to product type with different products carrying different levels of risk. Consumer behaviour therefore requires an understanding of the actions directly involved in obtaining, consuming, and disposing of products and services, including the decision processes that precede and follow these actions (Engel et al., 2000).

Broadly there are two approaches for analysing consumer buying decisions. *Psychological models* concentrate upon psychological and cognitive processes such as motivation and need recognition. They focus upon the motives for buying and the process of learning and

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¹ TCM outlets have traditionally been called 'halls'. In this paper, the terms hall, store and outlet are used interchangeably.

attempt to explain how perceptions, beliefs, attitudes, and the buying situation, affect consumer behaviour. Psychological models also draw upon an understanding of sociological models and view consumer behaviour in the context of factors such as culture, social class, family, and lifestyle (Armstrong et al., 2007).

A second approach to understanding consumer decision making views the process in terms of a sequence of cognitive stages that involves information search, alternative evaluation, purchase decision, and outcome evaluation (Schiffman and Kanuk, 1994; Solomon, 1996). Consumer decision-making is therefore depicted as being both multi-staged and complex with several factors triggering problem recognition before initiating a sequence of actions to reach an outcome of satisfaction or dissatisfaction (Cox et al., 1983; Harrel, 1990). Such models vary in their approaches and utility. The most widely employed are those proposed by Nicosia (1968), Howard and Sheth (1968), and Engel et al. (1979, 2000).

While there is an abundant literature on the above models and concepts, the majority of empirical studies have been carried out in Europe and America. Fewer attempts have been made to understand consumer decision making in an Asian context and perhaps unsurprisingly none of this work appears to have been applied to the TCM industry.

One weakness of consumer decision making models is that they do not consider how consumers evaluate different service channels (Ehrenberg, 1998). In the context of this study, it is important to understand the reasons and variables that affect TCM customer store choice selection. As such, it remains relevant to also examine briefly the literature on store patronage behaviour.

Store image is believed to have strong influence on the consumer's choice of retail store. Martineau (1958) purported that a store is defined in the shopper's mind, partly by its functional qualities and partly by an aura of psychological attributes. Lindquist (1974) shares a similar view and describes store choice as a combination of tangible and intangible factors that reflect consumer attitudes towards individual stores. Neal et al. (1999) and May (1981) further suggested that retailers should be concerned not only with their own image, but also the image of their mall/precinct as consumers may make their patronage decisions based on the shopping environs as well as the individual store.

Visser and du Preez (2001) note that shopping orientation is a complex and multidimensional concept that is extremely difficult to define. As Shim and Kotsiopoulos (1992) state:

“...researchers have investigated various relationships among factors influencing both shopping orientations and patronage behaviour, and their findings appear to be inconsistent” (p. 49).

Although complex, a number of previous retail and marketing studies have identified several consumer oriented store attributes as being potentially significant for the consumer's evaluation of stores. They include merchandise assortment and quality, customer service, store layout, convenience, cleanliness, and atmosphere (Mazursky and Jacoby, 1986; Levy and Weitz, 2001, and Blackwell et al., 2007). Neal et al. (1999) for example identified the dimensions considered critical in influencing store choice (Table 1).

While many attributes are important to customers, advocates of determinant attributes theory like Myers and Alpert (1968) and Arnold et al. (1983) asserted that there will only be one or a few pertinent factors, which are perceived to be the decisive factor(s) across the various retail formats.

Table 1
Critical store attributes.
Source: Neal et al. (1999).

Dimension of store image	Components
Merchandise	Quality, selection, style, price
Service	Lay-by-plan, sales personnel, easy return, credit, delivery
Clientele	Customers
Physical facilities	Cleanliness, store layout, shopping ease, attractiveness
Convenience	Location, parking
Promotion	Advertising
Store Atmosphere	Congeniality, fun, excitement, comfort
Institutional	Store reputation
Post-transaction	Satisfaction

As noted, the majority of studies on consumer behaviour have been conducted in the United States and Europe, with a concentration on the food and grocery industries. Prior to detailing the profile and decision making process of TCM shoppers, the next section will provide a brief contextual overview of TCM in Singapore.

3. TCM in Singapore

Singapore is a multi-racial country with a population of 4.6 million. The Chinese form the largest ethnic group (76%), followed by the Malays (14%), Indians (6%) and other races (4%). TCM is a system of medicine that aims to prevent or heal disease by maintaining or restoring the yin-yang balance in the body. It is derived from the belief that all forces in nature are interconnected and interdependent and that treatments can assist in the achievement of balance and harmony (Eu Yan Sang, 2007).

The diagnosis of a patient's condition in TCM consists of three activities: an extensive interview, pulse diagnosis, and a tongue examination. The prescriptions are made up of herbs that are derived from plant, animal, and mineral substances. Patients have to boil the combinations of herbs and then allow the concoction to simmer for hours before drinking. The strength of TCM lies in its gentle, gradual remedies, and is aimed at evaluating and improving the physical, mental, spiritual and social circumstances of the patient (Sivin, 1987).

A traditional 'Mom-and-Pop' TCM hall is typically a shop-house that provides these herbal remedies to customers. Patients seek advice from the 'pharmacist' on dosages and the duration of treatments. The pharmacist then picks the appropriate herbal mix for customers to take home and boil. In addition, a TCM hall sells 'over the counter' medicines for minor ailments such as flu, fever as well as wellness improvement products such as bird nests and cordyceps.²

Traditional TCM halls in Singapore are mainly family run and are passed down through the generations. It is a male oriented industry that operates on an apprentice-master relationship with the son learning from the father. While still operating in many public housing areas, this form of TCMs has been in decline for a number of years. One reason has been, that for the past three decades Singapore Government policies have favoured a Western based healthcare system and viewed TCM as a secondary form of treatment for the Chinese population.

Government backed schemes in the 1980s such as Medisave, (a compulsory savings programme based on a payroll levy) and Medishield (an insurance scheme) ensured that every

² Cordyceps is a genus of fungi that includes about 400 described species.

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