

ทัศนคติของผู้บริโภคต่อส่วนผสมการตลาดที่มีผลต่อความตั้งใจที่จะใช้บริการ ของร้านยาคณะเภสัชศาสตร์แห่งหนึ่ง

Client Attitudes toward Marketing Mix Potentially Influencing Intention to Use Services of a Pharmacy School Affiliated Community Pharmacy

นิพนธ์ต้นฉบับ

Original Article

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บทคัดย่อ

วัตถุประสงค์: เพื่อศึกษาทัศนคติของผู้บริโภคต่อส่วนผสมการตลาดที่มีผลต่อความตั้งใจที่จะมาใช้บริการของร้านยาคณะเภสัชศาสตร์ **วิธีการศึกษา:** การศึกษาแบบภาคตัดขวางเชิงพรรณนา ใช้แบบสอบถามเป็นเครื่องมือเพื่อเก็บข้อมูลจากผู้มาใช้บริการศูนย์การแพทย์สมเด็จพระเทพฯ สยามบรมราชกุมารี ซึ่งมีผู้ป่วยญาติผู้ป่วย บุคลากรและนิสิตของมหาวิทยาลัยศรีนครินทรวิโรฒ ด้วยการสุ่มแบบสะดวกจำนวน 500 คน แบบสอบถามประกอบด้วย ข้อมูลประชากรศาสตร์ ทัศนคติของผู้บริโภคที่มีต่อปัจจัยส่วนผสมการตลาดที่มีผลต่อความตั้งใจที่จะมาใช้บริการของร้านยาคณะเภสัชศาสตร์จำนวน 4 ด้านได้แก่ 1) ด้านผลิตภัณฑ์และบริการ ซึ่งแบ่งเป็น 5 ด้านย่อย (ด้านผลิตภัณฑ์ ด้านบริการคัดกรองโรค ด้านบริการจัดการเรื่องยา ด้านบริการปรับเปลี่ยนพฤติกรรมที่เสี่ยงสุขภาพ และด้านบริการวิชาการ) 2) ด้านราคา 3) ด้านสถานที่ และ 4) ด้านส่งเสริมการตลาด **ผลการศึกษา:** ค่าเฉลี่ยทัศนคติของผู้บริโภคที่มีต่อปัจจัยส่วนผสมการตลาดที่มีผลต่อความตั้งใจที่จะมาใช้บริการของร้านยาคณะเภสัชศาสตร์ 1) ด้านผลิตภัณฑ์และบริการมีค่าเป็น 3.91 เต็ม 5 คะแนน (ด้านย่อย: 3.88, 3.81, 3.89, 3.87 และ 4.14 คะแนนตามลำดับ) 2) ด้านราคา 3.90 คะแนน 3) ด้านสถานที่ 4.00 คะแนน และ 4) ด้านส่งเสริมการตลาด 3.96 คะแนน **สรุป:** ทัศนคติทุกด้านส่งผลต่อความตั้งใจที่จะมาใช้บริการจากร้านยาในระดับสูงยกเว้นทัศนคติด้านบริการวิชาการ (4.14 คะแนน) ที่มีผลต่อความตั้งใจที่จะมาใช้บริการจากร้านยาในระดับสูงสุด ดังนั้นร้านของคณะเภสัชศาสตร์ควรเน้นการพัฒนาความสามารถด้านบริการวิชาการให้กับอาจารย์เพื่อจูงใจให้ลูกค้ามีความตั้งใจที่จะมาใช้บริการร้านยาเพิ่มมากขึ้น

คำสำคัญ: ทัศนคติ, ส่วนผสมการตลาด, การคัดกรองโรค, การจัดการเรื่องยา, การปรับเปลี่ยนพฤติกรรมที่เสี่ยงต่อสุขภาพ, บริการวิชาการ

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Abstract

Objective: To determine client attitudes toward marketing mix that potentially influence the intention to use service of a pharmacy school affiliated community pharmacy. **Methods:** In this cross-sectional survey study, sample consisted of patients and their family members receiving services at the HRH Princess Maha Chakri Sirindhorn Medical Center, Srinakharinwirot University (SWU), and students and employee of SWU. A sample of 500 respondents was recruited by a convenience sampling. Questionnaire asked about the respondent's demographic characteristics, attitudes toward marketing mix potentially influencing the service use intention including attitudes toward 1) products and services with 5 sub-components (products, disease screening service, medication therapy management service, health behavior modification service, and academic services), 2) price, 3) place, and 4) promotion. **Results:** Out of a total of 5 points, mean scores of attitude toward 4 components of products and services, price, place and promotion were 3.91, 3.90, 4.00 and 3.96 points, respectively. For the first component, mean scores of 5 sub-components were 3.88, 3.81, 3.89, 3.87 and 4.14 points, respectively. **Conclusion:** Most components and sub-components were in high level, except for the sub-component of academic services which had a highest level (4.14 points). School of pharmacy should enhance academic service capacity of the faculty members to better serve the client.

Keywords: attitude, marketing mix, disease screening, medication therapy management, health behavior modification, academic services

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Introduction

Drugstore or community pharmacy, as an unofficial primary care unit, offers an easy, first access for self-care of common uncomplicated illnesses.¹ The crucial roles of community pharmacy hence are not limited only to drug use service, but also include appropriate drug use, screening for potential hypertension and diabetes, medication therapy management, and the promotion of appropriate drug use in community.² Community pharmacy of the Faculty of Pharmacy, Srinakharinwirot University (SWU) aims to be an

academic training site for pharmacy students. To be an adequate training site, quality pharmacy service has been delivered with an availability of quality health products including medications, cosmetics, herbal products, medical devices, and nutritional supplements. This kind of service is considered a traditional role of community pharmacy.

The public has been familiar with the traditional community pharmacy service such as dispensing and drug use counseling. Recently community pharmacy has introduced

new services to the public including chronic disease screening by history taking and basic physical examination, medication therapy management, systematic drug related problem solving and referral of customers to healthcare settings as needed. In addition, counseling services for lifestyle modifications to avert sedentary behaviors such as smoking cessation have been provided to the public in the hope of creating healthier population and ultimately a more sustainable public health system of the nation.² The community pharmacy of SWU has been continuously thriving such development.

In addition to the work as healthcare service unit, SWU community pharmacy is also obligated to survive as a private business unit. The SWU community pharmacy faces competition with other community pharmacies and other healthcare service settings, such as private clinics and hospitals. To be competitive, a unique selling point is needed. Marketing strategic planning could be created by the application of marketing mix concept consisting of product, service, price, location and promotion. Marketing mix is thus a crucial tool for community pharmacy to promote the business and improve service for the public.³⁻⁵ This study aimed to determine the customer's attitude toward marketing mix influencing the intention to use the service provided by the SWU community pharmacy.

In this study, Kotler's marketing mix concept⁶ was applied to guide the questions to assess the customer's attitude toward marketing mix influencing the intention to use the service. The attitude toward the marketing mix influencing the service use intention had certain aspects including products and services^{7,8}, price⁹, place^{7,9}, and promotion.^{9,10} Attitude toward products and services was not studied in services by community pharmacists.^{7,11,12} Therefore, this study focused attitude toward marketing mix regarding community pharmacy services including primary screening for chronic disease^{13,14}, medication therapy management¹⁵, and health-risk behavior modification.¹⁶⁻¹⁸ Since SWU community pharmacy is academically affiliated, attitude toward marketing mix regarding academic service provided by pharmacist instructors was also tested in this study.

Methods

In this cross-sectional study, study population was unusual. Since SWU community pharmacy is in the campus isolated from general community. The customers are mainly

SWU employees, students with narrow demographic range, and patients visiting the HRH Princess Maha Chakri Sirindhorn Medical Center (MSMC), the teaching hospital of the SWU Faculty of Medicine. The sample was selected by convenience sampling method. To be eligible, they were required to be able to communicate in Thai and willing to participate. Those unable to self-care were or younger than 18 years old were excluded from the study. The sample size was estimated based on the equation of Khazanie.¹⁹ With the unknown size of the study population, a confidence level of 95%, and a sampling error of 0.05, a total of 385 participants were required. We managed to recruit a total of 500 participants.

Research instrument

The research instrument was a questionnaire asking about the participants how they thought about each of the four main market mix components influencing the use of the service provided by the SWU community pharmacy. These four main marketing mix components included products and services, price, place, and promotion.

The questionnaire was examined for **content validity** by three experts using index of item objective congruence (IOC). Items with an IOC of lower than 0.5 was subject to elimination or revision as suggested by the experts. Items remained in each of the component were subject to further reliability test. For the first main marketing mix component regarding products and services, there were five sub-components (Table 1). The first sub-component was about the products which consisted of 11 items. One item had an IOC of less than 0.5 but could be retained after revision as suggested by the experts; while the other two failed the IOC criteria but were moved to form a more appropriate sub-component representing academic service. One item failed the IOC criteria and were eliminated. As a results, eight items remained in the product sub-component. The rest of the first component concerned pharmacist's services. The second sub-component was disease screening service. The original two items had acceptable content validity. However, the expert recommended one additional item to be more comprehensive for disease screening. As a result, three items were retained. The third sub-component concerning medication therapy management. All three original items were retained with acceptable content validity. Four original items of health-risk behavior modification, the fourth sub-component, were

retained. For the fifth sub-component, academic service, no original items were proposed. However, with the two items moved from the product sub-component as suggested by the experts, together with the other two additional items proposed by the experts, the final four items were subject to the further reliability test. A total of 22 items comprised the first component of the marketing mix that could influence the decision to use the service.

For the second, third and fourth components (i.e., price, place, and promotion, respectively), all of their original items were approved by the experts for content validity based on the IOC (5, 15 and 9 items, respectively) (Tables 2, 3 and 4). A total of 51 items from the four components of the marketing mix were subject to internal consistency reliability testing.

Items with acceptable content validity assessment were tested for **internal consistency reliability** with 50 individuals comparable to the study sample. After the test of internal consistency reliability, the number of items of each sub-component of the first component (products and services) was intact with 8, 3, 3, 4 and 4 items for sub-components of products, disease screening service, medication therapy management service, health-risk behavior modification service, and academic service, respectively (Table 1). Each sub-component was found to have a high internal consistency reliability with Cronbach's alpha coefficients of 0.84, 0.90, 0.86, 0.94 and 0.95, respectively. Internal consistency reliability of component 2 (price), 3 (place) and 4 (promotion) was at a high level with Cronbach's alpha coefficients of 0.84, 0.95 and 0.92, respectively (Tables 2, 3 and 4).

Each question was with a Likert-type rating scale ranging from 1-lowest, 2-low, 3-moderate, 4-high, and 5-highest. Total score of each component was averaged to 1 to 5 points. Level of influence to the potential use of the service was categorized as lowest (1.00 – 1.80 points), low (1.81 – 2.60 points), moderate (2.61 – 3.40 points), high (3.40 – 4.20 points), and highest (4.20 – 5.00 points).²⁰

Data collection procedure

This research was approved by the Ethics Committee of Srinakharinwirot University (approval number: SWUEC-370/2562E). Data collection had been conducted from July to September 2020. Permission to conduct the survey was requested to the MSMC director. Once permitted, the researcher conducted the survey in front of the main pharmacy unit of the MSMC. Prospective participants were

invited and detail of the study was provided. Once agreeing to participate, implied informed consent was obtained via participating in the survey. The survey tool was self-administered questionnaire. However, research assistants have helped reading and filling the questionnaire if asked. The participants were informed that they could discontinue filling the questionnaire at any time and they could skip any questions that they felt uncomfortable to answer. The questionnaire took about 10 minutes to complete. Once completed, participants were given a SWU shower gel (SerWU[®]) worth of 50 Baht as a token of appreciation. Data of participant's characteristics were recorded in code. All data were securely recorded in computerized database.

Data analysis

Descriptive statistics including frequency with percentage and mean with standard deviation were used to present all information. All analyses were performed using SPSS[®] version 22.

Results

Of the 500 participants, the majority of them were patients visiting the MSMC hospital (72.4%), followed by SWU students (26.0%), and SWU employees (13.1%). They were 34.79 ± 14.0 years old by average, had an average monthly income of $18,894 \pm 15,660$ Baht. Most of them had or were studying for a Bachelor's degree (49.4%) followed by those with high school diploma or vocational degree (28.0%). In terms of healthcare payment, participants with social security, universal coverage, and civil servant medical benefit scheme were in equal proportions.

Attitude toward marketing mix components influencing the use of the service provided by the SWU community pharmacy

The first component of the marketing mix, products and services, was rated highly influencing with an overall mean score of 3.91 ± 0.74 points (Table 1). Levels of influence to use the service of each of all sub-component was found as follows. The sub-component of products was rated as highly influencing (3.88 ± 0.79 points). The item "Having reliable products available" was rated the highest (4.18 ± 0.98 points) and considered highly influencing to use the service. This item was rated as highly (33.27%) and highest (46.98%)

influencing by 80.25% of the participants. The second most rated influencing item was “Products having clear, complete product detail on original packages or on labels of repacked package.” With a mean score of 4.14 ± 0.98 points, the item was considered highly influencing. It was rated as highly and highest influencing by 79.68% of the participants.

For the second sub-component of the first component, disease screening service was rated as highly influencing to use the service with a mean score of 3.81 ± 0.95 points. The item “Having blood pressure screening available” was rated the highest (3.83 ± 1.05 points) and considered highly influencing to use the service. This item was rated as highly and highest influencing by 63.84% of the participants. The third sub-component, medication therapy management service, was viewed as highly influencing with a mean score of 3.89 ± 0.87 points. The item “Having medication refill service for patients with well controlled chronic disease” was rated the highest (3.94 ± 0.96 points) and considered highly influencing to use the service. This item was rated as highly and highest influencing by 69.40% of the participants.

The fourth sub-component, health-risk behavior modification service, was viewed as highly influencing with a mean score of (3.87 ± 0.95 points). The items “Having exercise and rehabilitation counseling available” and “Having diet and nutrition counseling available” were both rated the highest with an equal mean score of 3.90 ± 1.00 points) and considered highly influencing to use the service. The item “Having exercise and rehabilitation counseling available” was rated as highly and highest influencing by 69.78% of the participants. The fifth sub-component, academic service, was rated as highly influencing with a mean score of 4.14 ± 0.84 points. The item “Having drug use counseling by pharmacists” was rated the highest (4.23 ± 0.91 points) and considered highest influencing to use the service. This item was rated as highly and highest influencing by 82.63% of the participants.

The second component, price, was considered highly influencing to use the service (3.90 ± 0.84 points). The item “Having price tag clearly displayed” was rated the highest (4.09 ± 1.05 points) followed by the item “Price worth the product quality” (4.02 ± 0.98 points). The two items were considered highly influencing to use the service. While the former item was rated as highly and highest influencing by only 59.71% of the participants; the latter was rated as such by 73.19% of the participants.

The third component, place, was considered highly influencing to use the service (4.00 ± 0.78 points). The item “Clean store” was rated the highest (4.26 ± 0.97 points) and considered highly influencing to use the service. This item was rated as highly and highest influencing by 82.92% of the participants. The second most rated item was “Merchandises orderly arranged for easy finding” (4.21 ± 0.95 points) which was rated as highly and the highest influencing by 82.60% of the participants.

For the fourth component of the attitude toward the marketing mix, promotion, it was considered highly influencing to use the service (3.96 ± 0.77 points). The item “Employees with good human relationship” was rated the highest (4.28 ± 0.93 points) and considered highly influencing to use the service. This item was rated as highly and highest influencing by 83.97% of the participants. The second most rated item was “Employees in clean attire with reliable look” (4.18 ± 0.94 points) which was rated as highly and the highest influencing by 81.01% of the participants.

Discussions and Conclusion

The attitude toward the marketing mix influencing the service use intention for the SWU community pharmacy among individuals using services at the MSMC hospital, SWU students and SWU employees was determined in our study. The most influencing component of the marketing mix was place, followed by promotion, products and services, and price. The score of each of the four components was in the high, if not the highest, level of influence on the intention to use the service.

For the first component of the marketing mix, products and services, the sub-component of academic service was rated the highest and the only sub-component with the highest influence for the intention to use the service. As an academic-affiliated community pharmacy, this expectation for academic service was not unexpected. This should be an obvious opportunity for the pharmacy to offer more academic oriented service to the customer. Among all items of the products and service component, having reliable product available was rated as the most highly influencing the intention to use the service. This finding was consistent with the study in customers serviced at chain community pharmacies in Bangkok metropolitan area.²¹ The procurement of quality -

Table 1 Attitude toward marketing mix potentially influencing the intention to use the services at SWU community

pharmacy (N = 500).

Items by marketing mix components	n	% by level of the influence*					Mean ± SD	Level
		1	2	3	4	5		
1. Products and services component								
1.1 Products								
1. Having well known products available	495	1.62	6.67	27.07	33.94	30.71	3.85 ± 0.99	High
2. Having reliable products available	496	2.82	3.23	13.71	33.27	46.98	4.18 ± 0.98	High
3. Products having clear, complete product detail on original packages or on labels of repacked package	492	2.64	4.27	13.41	35.37	44.31	4.14 ± 0.98	High
4. Having a wide range of brands for a given product	490	2.45	6.73	29.18	39.39	22.24	3.72 ± 0.96	High
5. Having a wide range of products available (eg., drugs, foods, nutritional supplements, cosmetics and medical devices)	493	1.83	6.09	25.76	34.08	32.25	3.89 ± 0.99	High
6. Having products produced by SWU Faculty of Pharmacy available, such as alcohol gel, shower gel, and cracked heel cream	492	3.05	7.32	25.81	33.94	29.88	3.80 ± 1.04	High
7. Having consultation for OTOP health products provided by SWU pharmacy faculty members	495	2.02	10.51	30.30	30.81	26.46	3.69 ± 1.04	High
8. Having consultation for herbal products provided by SWU pharmacy faculty members	489	2.45	7.57	28.02	30.67	31.29	3.81 ± 1.04	High
						subtotal	3.88 ± 0.79	High
1.2 Disease screening service								
1. Having blood pressure screening available	496	3.23	6.26	26.67	32.32	31.52	3.83 ± 1.05	High
2. Having blood glucose screening available	496	2.22	7.26	29.23	33.27	28.02	3.78 ± 1.01	High
3. Having body mass index screening by weighing and measuring waist circumference	495	2.63	7.68	25.05	34.55	30.10	3.82 ± 1.03	High
						subtotal	3.81 ± 0.95	High
1.3 Medication therapy management service								
1. Having in-depth interview to identify drug related problems including non-compliance (e.g., forgetting to take medication, dose self-adjustment, drug self-discontinuation)	496	1.81	5.24	27.02	34.27	31.65	3.89 ± 0.97	High
2. Having call for identified drug related problems	494	2.23	7.69	23.89	36.23	29.96	3.84 ± 1.01	High
3. Having medication refill service for patients with well controlled chronic disease	487	1.23	6.37	23.00	36.14	33.26	3.94 ± 0.96	High
						Subtotal	3.89 ± 0.87	High
1.4 Health-risk behavior modification service								
1. Having smoking cessation counseling available	494	2.23	9.51	22.67	34.62	30.97	3.83 ± 1.04	High
2. Having weight loss/control counseling available	493	2.03	7.71	23.35	32.86	32.05	3.85 ± 1.02	High
3. Having diet and nutrition counseling available	491	1.82	6.87	24.04	33.74	33.54	3.90 ± 1.00	High
4. Having exercise and rehabilitation counseling available	493	2.43	6.49	21.30	38.54	31.24	3.90 ± 1.00	High
						subtotal	3.87 ± 0.95	High
1.5 Academic service								
1. Having counseling for drug use and health by SWU pharmacy faculty members available	496	1.82	4.25	16.60	36.84	40.49	4.10 ± 0.95	High
2. Having counseling for safety and toxicity of drugs and health products by SWU pharmacy faculty members available	492	1.63	4.67	17.48	36.79	39.43	4.08 ± 0.95	High
3. Having basic diagnosis by pharmacist	495	1.41	2.42	17.78	36.16	42.22	4.15 ± 0.90	High
4. Having drug use counseling by pharmacists	495	2.02	2.42	12.93	35.96	46.67	4.23 ± 0.91	Highest
						subtotal	4.14 ± 0.84	High
						Total of component 1	3.91 ± 0.74	High
2. Price component								
1. Price worth the product quality	496	2.82	3.02	20.97	35.89	37.30	4.02 ± 0.98	High
2. Price set under the market ones	495	1.62	7.47	29.49	29.90	31.52	3.82 ± 1.01	High
3. Price set comparable to the market ones	493	2.84	7.10	27.38	42.39	20.28	3.70 ± 0.96	High
4. Having price tag clearly displayed	494	3.64	4.66	32.19	44.33	15.18	4.09 ± 1.05	High
5. Having non-cash payment channel available (e.g., smart phone payment, credit card)	495	4.04	7.07	21.82	30.71	36.36	3.88 ± 1.10	High
						Total of component 2	3.90 ± 0.84	High
3. Place component								
1. The pharmacy locating close to convenient store in the hospital close perimeter	495	2.83	5.86	22.42	31.11	37.78	3.95 ± 1.04	High
2. The pharmacy locating close to coffee shop (e.g., Amazon®), a bank (Siam Commercial Bank), and SWU student dormitories	495	3.64	10.10	28.48	30.60	27.68	3.68 ± 1.09	High
3. The pharmacy is comfortable, spacious and well ventilated	494	1.82	5.26	16.80	36.44	39.68	4.07 ± 0.97	High
4. The pharmacy controlled with a comfortable temperature	495	1.01	4.85	16.77	38.38	38.99	4.09 ± 0.91	High
5. Having adequate space allowing for conveniently browsing merchandise and waiting for check-out	495	1.82	5.05	20.40	34.14	38.59	4.03 ± 0.98	High
6. Using computerized system to promote service, e.g., queue card, prescription labeling	494	2.63	5.47	25.10	34.41	32.39	3.88 ± 1.01	High
7. Providing fast service, with limited waiting and pre-dispensing time	496	2.22	4.03	16.73	35.69	41.33	4.10 ± 0.97	High
8. Chairs for customers waiting for pharmacist service in order available	496	1.61	10.08	25.00	34.48	28.83	3.79 ± 1.02	High
9. Distinct storefront sign	493	2.43	4.26	21.10	33.06	39.15	4.02 ± 1.00	High
10. Having space for private counseling service with the pharmacist	493	2.43	4.87	18.46	39.76	34.48	3.99 ± 0.97	High
11. Spacious parking lot provided	493	3.65	8.72	23.12	30.63	33.87	4.00 ± 0.97	High
12. Having shuttle bus available	493	2.84	6.69	23.94	30.02	36.51	3.91 ± 1.06	High
13. Clean store	492	3.25	20.03	11.79	30.89	52.03	4.26 ± 0.97	Highest
14. Merchandises orderly arranged for easy finding	494	2.63	3.04	11.74	35.43	47.17	4.21 ± 0.95	Highest
15. Store well lit	493	2.23	3.25	11.97	37.93	44.62	4.19 ± 0.93	High
						Total of component 3	4.00 ± 0.78	High
4. Promotion								
1. Various marketing promotions offered (eg., discount and coupons)	496	1.81	7.46	33.06	33.65	27.02	3.74 ± 1.00	High
2. Membership offered for purchase-based discount or purchase record	496	2.62	11.49	29.84	32.46	23.59	3.63 ± 1.05	High
3. Appropriate drug use instruction and advice provided by pharmacist	496	2.62	3.43	16.53	33.87	43.55	4.12 ± 0.98	High
4. Employees in clean attire with reliable look	495	2.63	2.42	13.94	36.16	44.85	4.18 ± 0.94	High
5. Employees with good human relationship	493	2.64	1.83	11.56	32.45	51.52	4.28 ± 0.93	Highest
6. Advertising products and services on various proximities	492	1.63	6.30	29.47	32.93	29.67	3.83 ± 0.98	High
7. Having educational leaflets/materials accompanying drug dispensing	496	2.02	3.83	23.19	36.09	34.27	3.97 ± 0.95	High
8. Educational materials available in store	496	2.22	4.03	24.80	34.11	29.84	3.90 ± 0.95	High
9. Online services available (sales and consultation for drug use and health)	495	1.41	7.27	23.84	33.33	33.94	4.00 ± 2.10	High
						Total of component 3	3.96 ± 0.77	High

* Influence level: 1 = the lowest, 2 = low, 3 = moderate, 4 = high, and 5 = the highest.

products from reliable GMP-certified manufacturers must be the basis not only for the SWU pharmacy but all community pharmacies. The availability of and consultation for OTOP products including health and herbal products by SWU pharmacy faculty members was the second most rated influencing aspect of products and services marketing mix. This could be due to the portion of participants was SWU present students who probably were not familiar with and/or did not pay much attention on OTOP products. For a wider range of population, practicing pharmacists should expand their role perceived by customers from conventional dispensing role in community and hospital pharmacies to certain wider unconventional ones.

According to the disease screening service sub-component, the most rated was the blood pressure screening service. At present, SWU community pharmacy should offer blood pressure screening service to help refer individuals with high risk to seek a timely medical attention. Based on the medication therapy management service, medication refill service for patients with well controlled chronic disease was rated the most influencing item. As the policy of medication refill at community pharmacies has been promoted by the Ministry of Public Health²², the SWU community pharmacy should consider offering such service. Among items of health-risk behavior modification service, the counseling for exercise and rehabilitation was rated the highest. This could be consistent with a new trend of healthy wholistic lifestyle. The pharmacy should consider offering such consultation service.

For the academic service, drug use counseling by pharmacists was rated the most influencing marketing mix by participants. As an academic affiliated pharmacy, this cognitive service should be offered to the customer. Therefore, every faculty pharmacist on duty should be trained to provide drug use counseling effectively.

For the second component of the marketing mix that could potentially affect the intention to use service at the community pharmacy, price was also rated as highly influencing. This was consistent with the study in Bangkok metropolitan area where worthiness and price of the product were viewed as influencing.²⁰ It is thus imperative to display price clearly. For electronic payment method, even though it was not the most rated factor, it was of a great concern. Given the widespread electronic payments, new lifestyle trend, and covid-19 pandemic, various electronic payment channels for customers are relatively inevitable.

For the marketing mix regarding place, clean store was considered the most important factor which was also consistent with the previous study on chain pharmacies.²⁰ The SWU community pharmacy has to hold the clean place standard up both inside and outside. Location of the pharmacy was rated as highly influencing to the intention to use the service. The SWU pharmacy is locating in a building relatively far from the MSMC hospital, and invisible from the outside. This location factor could be an obstacle for customer access. In the future, the pharmacy might have to consider relocating to a site more accessible for patients and visitors of the MSMC hospital.

Regarding marketing promotion, public relationship with the pharmacy employees was rated the most influencing factor to the intention to use the service which was consistent with few previous studies.^{7,21} This is not surprising given the present service-mind mentality in all businesses. The SWU community pharmacy should maintain and improve public relation mindset among its present and future employees.

This study has certain limitations. Since the study was conducted at the MSMC hospital, demographic characteristics of the participants could be relatively limited. In addition, the unique location of the SWU academic-affiliated community pharmacy could also lead to findings different from other locations. Generalization of the findings from this study to other community pharmacies especially those in private sector and other populations should be cautious. More studies on a wider range of community pharmacies and population could provide more understanding on the marketing mix that could be influencing the intention to use the service.

In conclusion, academic service was found the most influencing marketing mix that could potentially affect the intention to use the service of an academic-affiliated community pharmacy. To gain more trust from prospective clients, this type of academic-affiliated community pharmacy should enhance the academic-based community pharmacy competencies among the pharmacist faculty members.

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References

1. Yotsombut K, Palapinyo S. Telephone-based drug information service: a community pharmacy experience. *Thai Pharm Health Sci J* 2009;4(3): 327-333. (in Thai)
2. Kitikannakron N, Sookaneknun P, Soorapan S, et al. Roles of university's pharmacies in pharmaceutical services and pharmaceutical clerkships. *Srinagarind Med J* 2012;27(4):386-392. (in Thai)
3. Nitadpakorn S, Farris KB, Kittisopee T. Factors affecting pharmacy engagement and pharmacy customer devotion in community pharmacy: A structural equation modeling approach. *J Pharm Pract* 2017;15(3):1-8.
4. Mirzaei A, Carter SR, Schneider CR. Marketing activity in the community pharmacy sector—a scoping review. *Res Social Adm Pharm* 2018;14(2): 127-137.
5. Hindi AMK, Schafheutle EI, Jacobs S. Applying a whole systems lens to the general practice crisis: cross-sectional survey looking at usage of community pharmacy services in England by patients with long-term respiratory conditions. *BMJ Open* 2019;9(11):1-9.
6. Philip K, Keller KL. Marketing management. Upper Saddle River, New Jersey. Pearson Prentice Hall, 2009.
7. Sutaksina W. Factors affecting buying decision on medicine in drug stores in Bangkok. M.B.A. thesis. Bangkok. Thammasat University, 2015. (in Thai)
8. Wattanasuwagul K. Factors of marketing mix influencing customers' buying behavior, satisfaction and repurchase intention: A case study of Watsons drug store. M.B.A. thesis. Bangkok. Srinakharinwirot Univeristy, 2012. (in Thai)
9. Tippuvatanon A. Marketing mix factors that influence customers selection of the pharmacy: A case study of Bangplee District - Samutprakarn Province. M.B.A. thesis. Samutprakarn. Nation University, 2014. (in Thai)
10. Chantanasombat W, Suksod P. How quality of services offered by community pharmacy retain their customers? The mediating role of sales promotional tools. A cross-sectional study of the pharmaceutical sector of Thailand. *Sys Rev Pharm* 2020;11(4):119-126.
11. Upakdee N, Dhippayom T. Community pharmacy service under the National Health Insurance in Australia. *J Health Sci* 2015:182-194.
12. Duangsuriyarate P, Chuanchom T. Feasibility study of changing RAMA health shop of Ramathibodi Hospital to drugstore. *Thai J Pharm Prac* 2020;12(1):37-47. (in Thai)
13. Sunee L, Achara N, Acharawan T, Nadthatida H, Nirachara T. Results of the screening risk of people by Faculty of pharmacy drugstore, KhonKaen University. *Isan J Pharm Sci* 2014;9(3):155-158. (in Thai)
14. Chalongsuk R, Aree W. Clients' satisfaction with health promotion services provided by community pharmacists in Bangkok. *Thai Bull Pharm Sci* 2016;11(2):13-26.
15. Wiboonsirikul K, Pharm M. Outcome of medication therapy management services in health promoting hospital Tambon Hansung, Bangpahan District, Phra Nakhon Si Ayutthaya Province. *J Prev Med Assoc Thai* 2010;1(1):24-36. (in Thai)
16. Um IS, Armour C, Krass I, Gill T, Chaar BB. Managing obesity in pharmacy: the Australian experience. *Pharm World Sci* 2010;32(6):711-20.
17. Chalongsuk R, Bunditanukul W. Success rates for smoking cessation service by community pharmacist. *Thai Bull Pharm Sci* 2016;11(1):17-29.
18. Kevrekidis DP, Minarikova D, Markos A, Malovecka I, Minarik P. Community pharmacy customer segmentation based on factors influencing their selection of pharmacy and over-the-counter medicines. *Saudi Pharm J* 2018;26(1):33-43.
19. Khazanie R. Statistics in a world of applications. New York. Harper Collins College Publishers, 1996.
20. Silanoi L, Chindaprasert K. The use of rating scale in quantitative research on social sciences, humanities, hotel and tourism study. *J Manag Sci UBU* 2019;8(15):112-126.
21. Saejew O. Factors affecting customer's satisfaction in chain drugstores in Bangkok: M.B.A. thesis. Bangkok. Thammasat University, 2010. (in Thai)
22. Matchon Weekly. October 1st, 2020, D-day for medication refill service at community pharmacies. Sep. 23, 2019. (Accessed on Feb. 10, 2020, at https://www.matchonweekly.com/hot-news/article_231637) (in Thai)