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THE EFFECT OF BRAND EQUITY ON PURCHASE INTENTION IN THE CASE OF SELECTED DENTAL SPECIALITY CLINICS, ADDIS ABABA

BY

ELLENI HAILU

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ADDIS ABABA

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APPROVAL SHEET

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DECLARATION

I, the undersigned, declare that this thesis "THE EFFECT OF BRAND EQUITY ON PURCHASE INTENTION IN THE CASE OF SELECTED DENTAL SPECIALITY CLINICS, ADDIS ABABA" is my original work, prepared under the guidance of Mulugeta Gebremedhin(PHD). All sources of materials used for this thesis have been fully acknowledged. I further confirm that the thesis has not been submitted either in part or full to any other higher learning institution for the purpose of earning any degree.

_____   _____

Name   Signature

St, Mary's University, Addis Ababa   June 2021

ENDORSEMENT

This thesis has been submitted to St. Mary's University, School of Graduate Studies for examination with my approval as a University advisor.

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Advisor   Signature

St, Mary's University, Addis Ababa   June 2021

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ABBREVIATION AND ACRONYMS

AACAHB	Addis Ababa City Administration Health Bureau
ANOVA	Analysis of Variance
BPQ	Brand Perceived Quality
CBBE	Consumer-Based Brand Equity
COVID-19	Corona Virus Disease - 19
CR	Customer Relation
WHO	World Health Organization

ABSTRACT

It is essential for service firms, such as health sector like clinics to understand the dimensions of brand equity that influence purchase intention in order to be successful in this competitive marketing environment. The main objective of the study is to investigate the effect of brand equity on behavioural/ purchase intention of patients in the case of selected private dental specialty clinics in Addis Ababa. By taking the research objectives and questions into considerations, quantitative approach has been applied and both descriptive and explanatory research design are used for this study.The study used convenience non-probabilistic sampling technique. By using structured questionnaire, the data was collected from 326 customers of private dental speciality in Addis Ababa City with the response rate of 85%. Data was collected through self-administered questionnaire and analyzed using SPSS version 20. Both descriptive and inferential statistics were used to analyze and interpret the data. The results revealed that brand awareness, brand association, perceived quality, and brand loyalty had significant positive effect on purchase intention. Amongst them, perceived quality of dental medical service had the highest effect on purchase intention followed by brand awareness. Whereas, brand loyalty had the least effect on their decision to revisit the dental clinics. It can be concluded that quality of the medical service and association of themselves with the brand or company reputation affected the decision of patients for demanding the service further. Managements of dental speciality clinics should instil confidence in the minds the consumers or count on the company's reputation rather than chasing famous dentists. . The company also needs to know personality characteristics of its brands from the consumer's point of view and develop a brand image to match with the consumer's ideal self-concept. For the reason that customer's good brand image and/or brand association with the brand will encourage them to use the brand and satisfied by it.

Keywords*: Brand Equity, Brand Awareness, Brand Association, Perceived Quality, Brand Loyalty, Purchase Intention, Dental Clinic*

CHAPTER ONE

1. INTRODUCTION

1.1. Background of the Study

In the contemporary business atmosphere has become dynamic and competitive due to the continuous and rapidly changing elements in the market fueled by dramatic innovation in the information technology. In such dynamic market environment, business enterprises adopt many different types of strategic tools to survive. Brand equity is considered as one of effective marketing strategies and an important tool for associating a brand and influencing customers in making purchase decisions of a particular product. This is for the fact that brand equity for an established brand is normally determined by the perception of the brand consumers (Keller, 2010). Despite a number of factors comes into play in influencing behavioural intention of a consumer, developing strong brand equity is concerned as effective strategy to attract and retain potential customers (Rahmani, 2012).

According to Adam (2018), brand equity is termed as the total accumulated value or worth of brand the tangible and intangible asset that the brand contributes to its corporate parent, both financially and interest of selling leverage. Brand equity can increase or decrease the value of goods or service in the eyes of consumers, because the brand equity can help consumers interpret, process, and store large amounts of information about the product or service promised by the brand (Aaker, 1991). Whereas purchase intention is a customer preference of a given brand against the same brand offered by strategic competitors resulting in customer loyalty. Brand equity is the incremental usefulness and value gifted to a product or service by its brand name. It is the consumers' perception of the overall superiority of a product carrying that brand name when contrasted to other brands (Aaker, 1991). High brand equity conveys an opportunity for successful extensions, resilience against competitors' promotional forces and establishment of barriers to competitive entrance. Thus, necessity of periodic evaluation of brand value is undeniable.

The measurement can be carried out through either a financial or customer-based perspective (Keller and Lehmann, 2006). However, since the financial-based approach has limitations in terms of providing unbiased estimates of a brand's intrinsic value by merely accounting purposes (Aaker, 1991, 1996; Keller, 1998), the customer-based brand equity approach (CBBE) is the dominant perspective and the one preferred by a majority of academics and practitioners in marketing

research as it incorporates all practical information on customer behavior for the formulation of marketing strategies (Lassar, 1995; Prasad and Dev, 2000; Yoo and Donthu, 2001).

Now a day brand equity more and more has been defined in customer-based perspectives (Keller, 1993). According to Xu and Chan (2010) the customer-based brand equity (CBBE) is a study of brand equity from the customers' perspective and it can also be illustrated as diverse brand knowledge such as customers association, awareness, which influence customer' response to the marketing of a brand (Keller, 1993; Tong, 2009). Wang (2008) also explained that CBBE created when customers are further familiar with a brand and grasp some brand links in their memory such as favourable, strong and unique. CBBE is categorized it into four dimensions: brand awareness, brand association, perceived quality and brand loyalty (Aaker, 1996). These brand equity categories represent customers' evaluations and responses (purchase decisions) to the brand that can be willingly understood by consumers (Yoo and Donthu, 2001) hence, they have been commonly adapted to measure CBBE in earlier studies in different markets in different contexts.

Later contributions identifying the correlation between brand equity and a firm's performance have concluded that brands with higher equity tend to generate significant revenues as the result of enhanced preferences and material revisit intentions of customers (Cobb-Walgren, 1995; Washburn and Plank, 2002; Baldauf, 2003). What this implies is that brand equity channels its effect through its joint dimensions in terms of brand awareness, brand association, perceived quality and brand loyalty to the revisit intention. Yet, despite the significant effects of strong brand equity on price premiums, brand extension, great customer loyalty, and higher profitability and market value, little attention has been paid investigating patient-based brand equity and its effect on revisit intentions in the medical healthcare service segment. This study seeks to investigate the relationships between speciality clinics brand equity and purchase intentions from a customers' point of view by employing the multiple regressions approach. To do so, this study used the dental speciality higher clinics industry as a case study, which is considered as one of the most dynamic and competing markets in Addis Ababa.

1.2. Statement of the Problem

In Ethiopia, the growth of dental clinics increasing within time along with advanced technology, consumers expect better medical services. Over the last two decades, competition in healthcare has been part of reform in the country. According to Federal Ministry of Health (2020), there has been

an increasing number of dental clinics by 7.2% on average since the year 2015, which accounted for 67 dental speciality clinics throughout the country.

This large number of specialities also means increasing competition to gain more new patients, and maintain existing patient. Providing the freedom of choice in healthcare sometimes results in a fierce competition between medical service providers. In this competitive situation, healthcare success result on good technical skill and satisfying customer and encouraging them to return to the practice (Baldauf, 2003).

Since the number of physicians are very few in number compared to the consumer population, by the time, the physicians leave the company, the number of customers would drastically decrease. Peter (2015) explained that about 78% of private healthcare companies left the market within two or three years of their establishment due to lack of customer's repurchase intention. According to him, their sustainability utterly depends on the stay of socially known physician rather than company's reputation. Ethiopian private healthcare companies are not far from this facet. Ethiopian dental speciality clinics tend to invest more on attracting known dentists rather than working on developing their company brands because patients tend to chase known/famous physicians rather than the brand of the company.

Many of the prior studies in Ethiopian context also focus on the theoretical aspects of the field of brand equity and their impacts on consumer's behavioural intention (Hiwot, 2018; Getahun, 2016; Tsedale, 2018). They focused on brand equity and its effect on behavioural intention in the service domain, such as banks, Ethio telecom and airlines have been carried out, but the results of their findings were contradictory and suffered from lack of clarity and relevancy to the existing issues on the ground. For instance, Hiwot's (2018) study revealed that brand loyalty dimension of brand equity had the highest effect on purchase intention in the case of Ethio telecom. However, it is hard to accept the existence of brand loyalty for monopolized public company. Besides, the service providers in a less competitive market, companies often concerned about the services regardless the fulfillment of the customer's needs or the quality of service, let alone the branding of their companies or reputations.

A number of reviews have examined the brand equity and customer's loyalty in healthcare setting; however there exists no formal literature review regarding brand equity, its dimensions, and their effect on customer's revisit intention in Ethiopian healthcare service industry. Therefore, the aim of this study is to determine the inter-relationship of brand equity dimensions and to improve

customer's purchase/ revisit intention in healthcare setting. Thus, the main question is to what extent healthcare facilities build their brand equity to influence the revisit intention of their customers.

Thus, the purpose of this study is to investigate the effect of brand equity on behavioural/ purchase intention of patients in the case of selected private dental specialty clinics in Addis Ababa. The output of this study is believed to fill the aforementioned knowledge-practical, methodological and contextual gaps through investigating the effect of brand equity dimensions on purchase intentions of customers in the case of private dental higher speciality clinics in Addis Ababa.

1.3. Research Questions

The research problem of the current research is trying to shed light on the brand equity of dental specialty clinics and dental patients purchase or revisit intention. This makes the healthcare providers need to know answers for such a basic question as how brand equity dimensions affect the revisit intention of dental patients? This can be achieved through addressing the following research questions such as:

1- How does dental special clinics' brand awareness affect purchase intention of dental patients?

2- How do brand association of dental special clinics affect purchase intention of dental patients?

3- What is the effect of perceived quality of dental medical service on purchase intention of patients?

4- What is the effect of brand loyalty on purchase intention of dental special clinics' patients?

1.4. Objectives of the Study

1.4.1. General Objective

The general objective of the study is to investigate the effect of brand equity on behavioural / purchase intention of patients in the case of selected private dental specialty clinics in Addis Ababa.

1.4.2. Specific Objectives

i. Investigate the effect of dental special clinics' brand awareness on purchase intention patients

ii. Evaluate the effect of dental special clinics' brand association on purchase intention of patients

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iii. Evaluate the effect of perceived quality of dental medical service on revisit intention of patients

iv. Investigate the effect of dental special clinics' brand loyalty on purchase intention of patients

1.5. Significance of the Study

This research tried to closely investigate how brand equity affects purchase intention in the case of selected dental special clinics in Addis Ababa, and which brand equity dimension has significantly high effect onpurchase or revisit intention of dental speciality clinic. The output of this study is believed to have valuable benefits for different stakeholders interms of academic, industrial, organizational and socital benefits.

It contributes to the existing knowledge regarding which brand equity dimension as a marketing strategy can be used to influence the purchase inrention of a given dental medical service company in Ethiopian context. Besides, despitenumber of studies conducted in different industries, it is believed to shed light on the significance of brand value in the course of pursuading patients to purchase or revisit the service unit in private healthcare industry. On top of that, private speciality clinics will have some ground point to think over their marketing strategies to grasp how effectively and efficiently they need to invest on marketing communication to get the best out of it in regards to building unique and strong brand equity. Finally, the consumers have better opportunity or choices of better medical service resulted in competition of the service providers in the industry as well. It can be served as a springboard for further research for academicians as well as prospect graduates.

1.6. Scope of the Study

The scope of this study was delimited conceptually, geographically and methodologically for ease of management. Despite there being a number of factors that affect the purchase or revisit intention of dental specialty clinics, this study sought to investiagte only the effect of brand equity dimensions namely brand awareness, brand association, perceieved quality and brand loyalty on purchase intention of patients in dental helathcare service context. It was conducted in Addis Ababa as more than 73% of the speciality clinics are located in Addis Ababa (FMoG, 2019). The unit of measurement were customers or users of elected dental speciality clinics who were selected conveniently and willing to particitate in this survey.

1.7. Limitations of the Study

This study was conducted using a sample from private dental specialty clinics customers/patients that is found in Addis Ababa City. The generalizability of this study had limitations due to number external factors.

Amongst them, infinite population of dental specialty higher clinics' customers, convenience non-probabilistic sampling was applied to select the targeted sample respondents; the debacles of COVID-19 on availability of loyal customers/ patients/ due to fear of the current pandemics; and managers of the clinics were hesitant to disclose their brand strategy for the case sensitivity. These issues contributed their own influences on the overall generalizability of the study. Besides, exclusion of other factors such as medical service quality, staff's competence, availability of known physicians or specialists as well as company image affect the overall purchase/ visit intention of customers. However, the student research was taking all the necessary measures such as assuring the sufficiency of data representativeness, and collecting the primary data from different clinics to minimize the drawbacks/ sampling and researcher biases/ as much as possible.

The study attempted to analyze the findings based on the quantitative data only. So, future study shall use multi methods approach including interview and focus group discussions which could improve understanding and explore purchase intention further. This study focused on only private dental specialty clinics. However, it would have been better if additional dental clinics and public clinics were included so that a comparative study would have been conducted.

1.8. Organization of the Study

This study is organized into five main chapters. The first chapter refers introduction of the study which includes the background, the problem statement, the research objectives, significance and scope of the study. The second chapter focuses on literature review. It contains relevant theories, conceptual and empirical discussions leading to identification of research gaps and the conceptual framework. The third chapter presents the research design, target population, sampling methods, sample size, data collection instruments to be used as well as method of data analysis and presentation. The fourth chapter presents demographic characteristics, descriptive and inferential statistics analysis, findings and their interpretations. The last chapter consists summary of major findings, conclusions and recommendations of the research study.

CHAPTER TWO

2. REVIEW OF THE RELATED LITERATURE

The review of the related literature part is composed of theoretical review, empirical reviews and conceptual framework of the study. Theories and concepts brand, brand equity, consumer-based brand equity and consumer purchase intention are discussed under the theoretical review. Different relevant studies on the relationship between brand equity and purchase intention from different industry context will be presented as well so as to back up or argue the issues raised in the theoretical review. Finally, the research framework of the study is presented based on the theoretical and empirical review.

2.1. Theoretical Review

2.1.1 Definitions of Key Terms

Brand Asociation: Consists of all brand-related thoughts, feelings, perceptions, images, experiences, beliefs, attitudes (Kotler and Keller, 2006, p. 188)

Brand Awareness: The ability for a buyer to recognize or recall that a brand is a member   of a certain product category" (Aaker, 1991, pp.61).

Perceived quality: is usually at the heart of what customers are buying and is often used todifferentiate or position brands against others. It is also an important brandasset as, among all brand associations, only perceived quality has been shown to drive financial performance through the price premium that consumers areprepared to pay " (Klopper 2011, pp.38).

Brand loyalty: The tendency to be loyal to a focal brand, which is demonstrated by theintention to buy the brand as a primary choice. (Oliver, 1997, pp.3).

Purchase Intention꞉   Defined practically as the possibility of shopping and it is subject to willing purchase, considering purchase and recommendation purchase (Dodds,1991).

Customer-Based Brand Equity (CBBE):defined as "the differential effect of brand knowledge onconsumer response to the marketing of the brand in which brand knowledge isconceptualized, based on an associative network memory model

in terms oftwo components, brand awareness and brand image" (Keller 2003, pp.60).

2.1.2. Brand

In the continually changing world where customers" primary choice and manners in making decisions about which product to buy or service to use the selling company has to build and retain their brand in a way which makes it essential to the customer. Brand can be defined as "a name, term, sign, symbol, or design, or combination of them which is intended to identify the goods and services of one seller or group of sellers and to differentiate them from those of competitors" (Kotler, 1991; Kotler,1999). As pointed out in Keller (2013) branding has been around for centuries as a means to differentiate the goods of one producer from those of another. In fact, the word brand is derived from the Old Norse word brand, which means "to burn," as brands were and still are the means by which owners of livestock mark their animals to identify them (Keller,2013). On the other hand, in the contemporary world concept of branding has come to include much more than just creating a technique to identify a product or company. As DeChernatony and McDonald (2003) explanation brands have also been viewed to go ahead of the physical components of what they stand for to include additional attributes, which are important considerations for consumers' buying decisions.

Brand definitions are many; different authors provide their own justification towards the meaning of a brand. The definitions are useful to understand a brand from different perspectives. A brand is a unique name or symbol such as logos, trademarks or package design proposed to identify the goods or services of either seller or group of sellers and distinguish those goods or ser-vices from those of competitors as defined by (Aaker, 1991). According to Kotler (2000) meaning, a brand is essentially a seller's promise to deliver a specific set of features, benefits and ser-vices every time to the buyers. In the same way, Keller (2003) defines that a brand is an emotional and physiological association a firm has with a customer; strong brands acquire opinion, emotion and sometimes-physiological reaction from a customer. The brand is not just a name because the name created to identify the product whereas the brand is created to add value to the product and offer it a personality and the excellent brands can suggest an assurance of quality (Keller, 2003).

In addition, a brand is something that exists in the minds of consumers. It is a continual, distinctive business identity intertwined with links of personality, quality, origin, liking and other. It is also a long-lasting entity, deep-rooted in reality, but also reflecting the perceptions and perhaps even the

habit of consumers. According to Kotler and Keller (2006) to brand a product, it is important to educate consumers "who" the product is by giving it a name and using other brand elements to help to identify it as "what" the product achieves and "why" consumers should be worried about.

Branding engages in creating mental arrangements and serving consumers to organize their awareness about products in a manner that makes clear their decision-making and, in the process, present value to the firm. The way to branding is that consumers recognize variations among brands in a product category (Kotler and Keller, 2006); Branding is the practice by which companies creating unique and strong perceptions in the minds of consumers for their product offerings from competition (Keller, 2003).

In general, the process of branding originated as a means by which a firm could distinguish its goods or services from those of its competitors. In the beginning, branding acted as a guarantee of consistency and quality for consumers. Nowadays, however, brands are renowned for offering consumers a distinctive set of perceived benefits not found in other products. These perceived benefits potentially both simplify consumers" purchase decision making and offer a starting point for customer loyalty. According to Boyle (2007) argues that products that match their (consumers) want most intimately become brands. As he explains, it is the perceived unique benefits that brands offer consumers that give them their value adding potential and enable them to sustain a price premium over their commodity form

2.1.3. Branding in the Services Industry

As specified by Turley and Moore (1995) service industries are playing a more and more key role in the overall economy. Interest in the measurement of service quality is thus justifiably high and the delivery of higher levels of service quality is the strategy that is increasingly being offered as a key to service providers" efforts to position themselves more successfully in the marketplace (Turley and Moore,1995). However, the problem inherent in the realization of such a strategy is related to service quality, which is an elusive and abstract construct that is problematical to identify and evaluate (Turley and Moore, 1995). This means the service quality has be-come an increasingly important factor for success and survival in the service sector. It is often suggested that marketing in the service sector is somewhat challenging due to the unique characteristics of the service and the domination of experience and credibility of qualities. Actually, due to the natural service characteristics (i.e., tangibility, inseparability, heterogeneity and perishability), it has been argued that the concept of branding is more imperative to services than to physical goods (Kapferer, 2004).

As a result, the brand has been increasingly being aware of as an important determinant of consumer preference in the service sector (Turley and Moore, 1995).

2.1.4. Service Brand Equity

Brand equity for services is different than for products (Nath&Bawa, 2011). Berry(2000) goes so far to claim that brand equity is more important for services than for products. The reason behind why service brand equity is different from product brand equity is because of the characteristics of services, mainly the variability and intangibility (He & Li, 2011). They strengthen this argument by saying that when buying a service, the customer's ability to assess the quality of that service is lower than when assessing the quality of a product. They further say that this could increase the risk in the customer's mind when purchasing a service. "However, brand, given its intrinsic value, can help reduce the perceived risks of buying and consuming services." (He & Li, 2011: p.80). Although most of the researches on brand equity claim that there is a difference, it occasionally surfaces other research that says that this difference does not exist (Heaven, 1990; Rafiq, 1995).

Among researchers there are differences as to what the underlying factors to brand equity for service brands are. Berry (2000) is defining products and services as tangibles and intangibles. The brand is represented by the tangibles, however when it comes to intangibles, the brand is the company. He further created the service brand equity model, where he shows the connection between five factors and their impact on brand equity. These factors are companies presented brand, external brand communications, customer experience with company, brand awareness and brand meaning.

The company's presented brand, Berry (2000) describes as the company's communication of their identity that can be done through controlled channels such as presentation of services, the service center or advertising. External brand communications he further describes as the knowledge assimilated by customers regarding the service and company. This knowledge is information that the company has difficulties controlling, it can be assimilated through channels such as word of mouth and press (Berry, 2000). This factor influences both brand meaning and brand awareness that is the next step of the model. The factor called customer experience with the company. Hosein (2012) describes as simple as how the customer experiences the service provided by the company. This is one powerful factor that can destroy everything the company has worked for, if the service does not live up to the expectations of the customers.

Brand meaning is how the customer perceives the brand and what the customer associate with it. Brand meaning is primarily influenced by customer experience with the brand, the other two underlying factors do also influence brand meaning to some extent. According to Berry (2000) brand meaning in its turn is the factor that primarily affects brand equity.

The last factor is brand awareness that is mainly influenced by the presented brand, it is described by Hosein(2012) as if the customer is aware of the brand. Hence the external brand communication is another influencing factor; the brand needs to be communicated in order for the customer to be aware of it.

Most research regarding service brand equity use the foundation by Aaker (1991)or Keller (1993) and their factors when measuring brand equity for services. Balaji (2011) conducted a research regarding building a strong service brand and testing the relationship between the different brand equity factors. He based his research on Aaker's five factors and reached the conclusion that in services only three of them are significant; brand awareness, perceived quality and brand loyalty (Balaji, 2011). This conclusion hence excluded the importance of two of Aaker's five factors; brand association and other proprietary brand assets. There is a similar view regarding service brand equity within the healthcare sector, where perceived service quality and brand loyalty are considered being the factors that positively impact service brand equity (Chahal and Bala, 2012). These researchers define brand loyalty the same, as the consumer's willingness to rebuy a service on a regular basis even if there are cheaper alternatives or other influences from other companies.

Perceived quality is defined by Balaji (2011) as how the customer assesses the service in relation to what quality they previously expected it having. However, Chahal and Bala(2012) defines perceived service quality as the perception of the service before the service is experienced, in relation to other services. The last factor only used by Balaji(2011), brand awareness, is defined as the part the brand has in the consumer's mind. Further he states that in order to grab the attention of a customer during purchase decisions, building brand awareness is one of the main concerns a company has. He and Li (2011) explored the main factors for service brand equity in high-tech business, were they identified two main factors that affect service brand equity. They agree with previous researchers regarding the quality of the service (overall service quality) being an important factor. Which they define as the consumer's perceptions and expectations of a service after the service has been performed.

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However, they differentiate themselves from other researchers by claiming perceived value being the other factor influencing service brand equity (He and Li, 2011). This factor they explain as the value gap between the received and perceived benefits the customer has. How they value the outcome of the service after it has been executed (He and Li, 2011). Nathand Bawa (2011) conducted a research regarding measurements of brand equity in service firms on the Indian market.

They constructed a scale in order to measure the service brand equity, where they had four brand equity factors; brand familiarity, perceived quality, brand loyalty and brand association. By brand familiarity they mean that the customer knows of the brand, their ability to recall its logo and the customer opinion of the brand. When deciding how to measure the perceived quality, Nath and Bawa (2011) did it by asking respondents regarding how they perceive the quality and the reliability of the brand.

Brand loyalty is described as how frequently the customer uses the service and how long they could wait in case if out of stock but still use the service. Lastly brand association is described as the customer's trust and admiration for the brand, also if the brand differentiates itself from other brands. Pinar (2014) has come to the conclusion that four of Aaker´s (1991) factors are important for service brand equity; brand awareness, perceived quality, brand loyalty and brand association. However, they added four more factors; organizational association, emotional environment, learning environment and university reputation. These factors are specifically used when conducting university branding and measuring university brand equity where organizational association is defined as seeing the brand as an organization, where the whole organization (principles, employees and agenda) is regarded as the brand (Hosein, 2012).

Emotional environment is considered as the motion consumers have towards the brand, what the emotions are is different from person to person. According to Pinar (2014) the learning environment is seen as how the service is experienced, such as the co-created learning experience. They further define the factor university reputation as that university lives up to what is promised by them, such as for example the education. Hosein (2012) defines brand awareness, perceived quality, brand loyalty and brand association in accordance with several authors presented earlier definition of the concepts (Balaji,2011; Nath&Bawa, 2011). The concepts are defined in the same way as previously discussed.

2.1.5. Aaker's Consumer-Based Brand Equity

Many different views of brand equity have been proposed in the literature. Some define brand equity from a financial perspective while others define it from the customer perspective (Rios &Riquelme, 2010). The focus of this study is however only on the CBBE. Aaker (1991) views brand equity from the customer's perspective and define it as the positive differential effect a brand has on a customer response to a product or service.

A positive brand equity means that the customer responds more favourably to a product or service from a brand they know of than from an unknown brand (Keller, 1993). Pinar (2014) says that the main objective with all branding strategies is to build strong brand equity and this is mainly affected by what the customers have experienced, heard and learned about the brand. Christo doulides(2006) describes brand equity as the customer's knowledge, perceptions and attitudes towards a brand that allow the company to differentiate them and get a competitive advantage towards competitors. There is a disagreement within the CBBE literature regarding what factors that affect brand equity. There have been proposals for several different brand equity models and there is a great variation of what and how many factors that affect brand equity (Rios, 2010).

The components of CBBE lists are according to Aaker's model: brand awareness, perceived quality, brand association, and brand loyalty and so all these factors that brand equity measurement concept assesses in the mind of consumers is the overall value or brand equity. The total perception of all factors is then added together to find the mean brand equity by attitude components. Each dimension in this proposed model stated and discussed briefly as follows.

2.1.5.1. Brand Loyalty

The basic dimension of the brand equity is the brand loyalty (Gillett, 1989). Loyalty is often understood as actual retention that is a keystone of customer relationship (Gillett, 1989).With comparability, brand loyalty decreases doubtfulness and economize a customer the payment or expense of searching for fresh exchanges of the relational with other brands. The customers in this condition play a significant role to enhance profitability and sustained relationship in the long term (Chaudhuri& Holbrook, 2002).

Additionally, providing the firms with reduction the costs of marketing are one of the major benefits and antecedents of the brand equity. In the first stage, the acquisition of new customers may make the customer relationship unprofitable and causes the increasing of costs- references (Reichheld and

Sasser, 1990). Just in the next steps, through the diminished cost concerned in serving a devoted customer, create a bond more economical and commercial. This action has roots in the customer behavior (Kuehn, 1962).In the other word, loyal customers incline to create and reinforce the relationship and linkage with a company and act distinctively from other particular non-loyal customers (Zeithaml, 2000). Loyal customer through affecting clearly customer behaviours in both purchases and non-purchases contribute to the performance of financial in a firm (Zeithaml, 2000).

For instance, the loyal customer stress and concentrate a close bond and relationship with a firm along lower price elasticity, as well as such customer transfer recommendation by word of mouth (WOM) (Gremler& Brown, 1999).

Fundamentally, brand equity can create positive confidence in customers. Customers' loyalty has root in this confidence and encourages customers to pay a premium price as major characteristic for the brand. As a sample, Intelliquest Inc. and McKinsey co. in a study discovered that customers tend to purchase brand with low brand equity similar to Packard Bell solely at a discount of price compare with Compaq and IBM that offering their products at price premium (Lassar& Sharma, 1995).

The extension of existing brand has lower cost of advertising and higher sales with comparing to a new brand name, because there is significant knowledge about to original brand. These factors cause effectiveness in the marketing activities (Dacinand Smith, 1994; Smith and Park,1992).Consequently, there are a number of studies that have illustrated and explored customer relationship is a closely related idea to brand equity (Kumar, Ramani, and Bohling, 2004;Kumar, Venkatesan and Reinartz, 2006; Reinartzand Kumar, 2003; Reinartz, Thomas and Kumar, 2005). Kumar and his colleagues (2004) have investigated a lot of questions pertaining customer life value and how companies have to earmark their costs of marketing to the acquisition and retention.

As a result, in supplier companies of Iranian oil industry, brand loyalty and equity can be leveraged to increase and improve both productivity and effectiveness of the efforts of customer relationship, as well enhance customer equity (Leone, 2006). Due to all reasons illustrated aforementioned, the brand loyalty is a more important element that contribute to the marketing costs and improve the customer relationship management.

2.1.5.2. Perceived Quality

Perceived quality is one of the most important mediating dimensions and also brand equity is closely related with the high price performance. This condition boosts the profitability and prepares resources for combining the brand with fresh properties. And also, the provided resources are suitable for improving and promoting awareness in marketing and brand activities such as optimizing cost of customer acquisition, customer retention, Conversion rates, and research and development (R & D) in marketing (Aaker, 1991). Indeed, the suppliers such as companies in other industries use received quality as a powerful strategic weapon. They create the components of CR such as customer acquisition and satisfaction by regularly and profitably meeting the needs of customer and customer preferences for quality.

Based on these points, CR factors and brand equity literature, the relationship between the brand Perceived quality (BPQ) and CR factors can be considered as important dimensions for industrial marketing(Kotler&Gertner, 2002).

2.1.5.3. Brand Awareness

There are three reasons that illustrate brand awareness is significant in the decision making of a customer (Keller, 1993). The first reason is the brand comes to mind of customers when they think pertaining to the product group (Hoyer and Brown, 1990; Keller, 1993; Macdonald and Sharp, 2000). The next reason is brand awareness can influence judgments and decisions regarding brands in the consideration, in spite of no existence of other brand associates. Previous researches revealed that a minimum degree of brand awareness could have a meaningful impact on product purchase decisions, especially when customers have low involvement (Hoyer and Brown 1990; Keller 1993). The final evidences point out brand awareness impacts consumer decisions through arrangement and strength of brand associations in the brand image. Hence, brand awareness creates diversities in information processing (Hoyer and Brown 1990; Keller 1993). Additionally, the significance of brand awareness is to build stronger customer relationships that in turn influences present and future acquisitions in the business (Esch, Langner, Schmitt,andGeus, 2006). In addition, a study pointed out the usefulness of brand awareness in alternative of consumers by exhibition that customers who are aware of one brand in a selection set are likely to pick the identified brand even when it has lower quality compared to unrecognized brand (Hoyer and Brown 1990).Awareness of brand as the power of the brand's existence in the minds of customers (Pappu,Quester and Cooksey, 2005) is the first stage in the communication with the customer (Aaker,1991). The awareness of the brand is the

starting of loyalty (Aaker, 1991), there is a fact that a high level of awareness of brand can help customer to consider products and services in the point of buying (Yoo, 2000). As a result, the awareness of brand affects a customer's decision making via impacting the arrangement and effectiveness of brand association in the marketing activates (Keller, 1993).

Brand awareness is connected to brand familiarity, which relates to the level of customer knowledge(Alba and Hutchinson, 1987) and suggests worth for a brand (Rangaswamy, Burke and Oliva, 1993). Hence, in suppliers, Brand awareness is improved in different marketing activities such as advertising, direct mail, business press, WOM communication, and promotion activities that these activities increase CR indicators like customer retention and conversation rate, and customer share(Srinivasan, Park and Chang, 2005; Yoo,2000).

2.1.5.4. Brand Associations

Brand association is the thoughts a consumer has when a brand is recalled (Balaji,2011). According to Berry (2000) brand associations is what shapes the brand meaning. It is also one of the factors that differentiate the brand in consumer's minds and give reason for buying the service (Balaji, 2011). Nath and Bawa's (2011) research support Balaji´s (2011) view as they state that uniqueness is one of the benefits with brand associations. Brand association reflects the consumer's perception and associations linked to a brand based on their own experience and knowledge (Chahal and Bala, 2012).

Creating an emotional connection to the brand is an important factor for both service brands and online brands (Berry, 2000; Christodoulides, 2006). This should be done through feelings of trust, closeness and affection. The brand should have a connection with the customer's core values (Berry, 2000; Christodoulides, 2006).Trust is mentioned in online brand equity literature by several authors as a key factor in building positive brand associations for online business. From Rios and Riquelme´s (2010) research it is argued that trust have a direct impact on brand equity for online brands. Trust is important for online brands due to that the customer wants to feel safe making a purchase on the website (Rios, 2010). The primary concern for customers is often the security and the personal information that the company receive. Online businesses can improve their trust through keeping promises, money-back guarantees and customer support service (Page, 2002; Rios, 2010).

Customer service support does not influence brand equity directly but it affects the associations the customers make with the brand. Christodoulides(2006) say that customer service support is an influential characteristic for online brands and a possibility to differentiate the brand from competitors. This view is also shared by Kim (2002) who argues that customer service is one of the factors to use when differentiating the online brand. The possibility for customers to contact the online company increase the trust and confidence they feel towards the brand. From the literature it can be seen that there are some elements that impact customers brand associations. These elements are; trust, customer service and differentiation (Rios and Riquelme, 2008; Balji,2011).

2.1.6. Consumer Purchase Intention

In order to create an appropriate product or service, companies need to understand the consumer's behaviour and perception, and to meet their needs and requirements. According to Dodds(1991) purchase intention is the considered willingness of a potential buyer that will attempt to buy product or service. However, the purchase intention must be supported by the accessibility of the desired product; otherwise, the favour or the purchase intention will be meaningless (Chang, 1998).

The purchase intention defined practically as the possibility of shopping and it is subject to willing purchase, considering purchase and recommendation purchase (Dodds, 1991).

There are three things based on that can be the indicators showing that the customers have the intention to buy and those three indicators are information, interest, and attending (Hosein, 2012). Hosein (2012) explained the indicators as interest that "involves having some personal feeling about the displayed products without considering the final outcome". Attending involves "actual physical presence at the place". Information relates to "additional data that is gathered while attending and the information was not known or available before".

How brand equity can affect the purchase intention of consumers indicated by Aaker (1991) who stated that brand equity has a positive impact towards the consumers purchase intention. Kotler (2000) also stated that in the case of brands with high brand equity is critical for a brand to expect higher willingness to purchase, assuming that high brand equity positively influences purchase intent and become dominant in the market. Further, brand equity is an integral part of evaluating the brand and positively influencing the purchase decision (Aaker, 1991; 2009). The consumer-based brand equity terms in frame of purchase intentions have been studied recently and it can be stated if a product brand is known, then it can be increased the consumers choose likelihood and them

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purchase intention (Chi, 2009). Consumers in different countries give dissimilar priorities to the factors that affected their purchase intentions (Lee and Green, 1991). In summary, brand equity is the level of sway a brand name has in the minds of consumers, and the value of having a brand that is identifiable and well thought of. Organizations establish brand equity by creating positive experiences that entice consumers to continue purchasing from them over competitors who make similar products. This is done by generating awareness through campaigns that speak to target-consumer values, delivering on promises and qualifications when consumers use the product, and loyalty and retention efforts.

A key benefit of establishing positive brand equity is the benefits it can have on return on investment. Organizations that leverage the power of branding often earn more money than competitors, while spending less - whether on production, advertising, or elsewhere. For example, positive brand equity enables brands to charge price premiums. When consumers believe in the values put forth by a brand and the quality of their products, they will pay higher prices to purchase from that brand. Additionally, should an organization want to add new product offerings, marketing them under the same umbrella brand will help the new product take off faster, as trust has already been established.

This is especially important as a rising number of consumers, roughly 80%, now refuse to buy from a brand that they don't trust, and nearly 90% intend to disengage from a brand that breaches their trust.

Branding is a valuable intangible asset for sustainable growth of an organization. Positive branding enables customers to visualize product in a positive way thereby reducing customers' perceived risks in buying any service. It also helps companies achieve superior performance in a competitive market. Brand equity is considered as the power of every brand that is incorporated in the mind of all the consumers on the basis of what they have learnt, seen, felt, and heard about the brand. Brand loyalty and brand equity satisfies customer needs; therefore, study of brand equity gives an insight to gain a competitive advantage in business. In health care industry it is essential for the hospitals to be concerned about providing quality services, enabling consumers to continue preferring the services from the same healthcare organization, having positive influence in the mind of customer. Brand equity can be enhanced by increasing patients' benefits and doctors' independence.

In case of healthcare environment, if consumers continue to opt for the services from the same healthcare firm (or a provider) then he is considered as a loyal consumer. Chahal & Bala (2010)

describe service brand loyalty & repurchase behavior (behavioral loyalty) positive attitude (attitudinal loyalty) of consumers toward the hospital as synonyms. Boshoff and Gray (2004) stated that several studies advocated revisit intention as an indication for patient loyalty towards that healthcare organization. Further they described patient loyalty may be more appropriate viewed as a behavioral intention in case of hospitals. Hence, patient loyalty acts as a competitive asset for the hospital.

2.1.7. Distinctions between Brand Purchase Decision and Brand Purchase Intentions

Roozy(2014) states that purchase intention is subject to willing purchase, considering purchase and recommendation purchase. Purchase intention is a dependent variable that depends on several external and internal factors such as stimulus or trigger the cue that triggers a buyer towards considering a product or a brand to be in included in the consideration set, outcome expectation out of the use of the product or a service, the inspirational value, recommendation and emotional association (MbaSkool, 2016). Purchase intention refers to the extent to which a customer purchases a particular product, at the same time as refuses to shift to other products (Yoo, 2000). Kotler (2005) the consumer's purchase decision will be to buy the most preferred brand, but two factors can come between the purchase intention and the purchase decision.

The first factor is the attitudes of others. Purchase intention is also influenced by unexpected situational reasons. The consumer may form a purchase intention based on factors such as expected family in-come, expected price and expected benefits from the product. When the consumer is about to act, unexpected situational factors may arise to change the purchase intention. Thus, preferences and even purchase intentions do not always result in actual purchase choice. They may direct purchase behaviour, but may not fully determine the outcome. A consumer's decision to change, postpone or avoid a purchase decision is influenced heavily by perceived risk. The amount of perceived risk varies with the amount of money at stake, the amount of purchase uncertainty and the amount of consumer self-confidence. A consumer takes certain measures to reduce risk, such as avoiding purchase decisions, gathering more info and looking for national brand names and products with warranties.

2.2. Empirical Literatures Review and Hypothesis Formulation

I. *Relationship between brand equity and purchase intention*

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There were numerous researches conducted on the Customer Based Brand Equity of different products in different countries by using different models of brand equity. The student researcher has noted a few prior researches works carried out based on Aaker's 1991 well-known conceptual framework model.

Shoaib (2010) conducted a research to examine the Application and Practicality of Aaker's Brand Equity Model in Relation with Recurrent Purchases Decision for Imported Beauty Care Products (A Study of Female Customers" of Pakistan). These researchers used Asker's renowned conceptual framework of brand equity, and employing Linear Regression analysis to investigate the causal relationships amongst all the dimensions of brand equity and recurrent purchase decision of females for imported beauty care products. In their study, responses of 211 actual customers from Pakistan had used based upon purposive sampling technique. Based on the research findings demonstrates, Brand Quality, Brand Loyalty and Brand Association are the significant dimensions while having recurrent purchase decision about any imported beauty care product whereas Brand Awareness has found weaker support for the same. Finally, they recommended that significantly, this study is important for all worldwide manufacturers of beauty care products whose products are available in local market of Pakistan and it can appear as a source of female consumers" insight about brand awareness, brand loyalty, brand association and brand quality that they may keep in mind while selecting their important beauty care products.

Another similar work by Tong and Hawley (2009) also conducted their research on Measuring Customer Based Brand equity in the Chinese sportswear market. They employed structural equation modeling to investigate the causal relationship among the four dimensions of brand equity and overall brand equity in the sportswear market based on Aaker's conceptual framework of brand equity. They used a sample of 304 actual customers from China's two largest cities, Beijing and Shanghai. Their findings revealed that brand association and brand loyalty have a significant influence on brand equity. On the other hand, weak support is found for the perceived quality and brand awareness. In addition, the correlations among the four dimensions found to be positive and significant. Based on their findings, the researchers suggest that managers to channel their efforts primarily on brand loyalty and brand image and think the correlations among the four dimensions of brand equity.

A similar research work conducted by Oscar (2015) measuring the influence of customer-based store brand equity in the purchase intention in the Spain store brands. This study attempts to

propose an integrated model of Brand Equity in store or retailer brands based on Aaker's well-known conceptual model. Based on a sample of 362 consumers and 5 store brands, structural equation modeling is used to test research hypotheses. The results obtained reveal that store brand awareness, loyalty along with store brand perceived quality have a significant influence on consumers' intention to purchase store brands. Based on their study suggested that marketers and marketing managers from retailing companies should carefully consider the Brand Equity components when designing their brand strategies, and develop marketing activities in order to enhance their brands' awareness.

A study conducted by Akhtar(2016) to examine the impact of brand equity dimensions on consumer purchase decision in students of university of education Lahore, Okara campus. They used 100 questionnaires among the students by using probability sampling technique and employed regression and correlation to determine the relationship between independent and dependent variables. The results shows that brand equity influence purchase decision. Based on their findings they recommended that if the companies want to influence the purchase decision of its customers, then they should give proper attention towards its brand equity management.

Another similar research conducted by Suryadi(2015) to discover the impact of brand equity towards customer's purchase intention of PT. X's candy product in Indonesia. This researcher used simple random sampling with 102 respondents and analyzed by using multiple-linear regression. By the end of this research, he discovered how brand equity affects customer's purchase intention simultaneously and how each element of brand equity affects customer's purchase intention.

In this research, he found that brand equity simultaneously influences customer's purchase intention and out of four independent variables of BE, brand association and perceived quality are the individual elements that influence customer's purchase intention and the rest two (awareness and loyalty) do not significantly give individual impact to the dependent variable.

In the same way, research conducted by Roozy(2014) on the Effect of Brand Equity on Consumer Purchase Intention in the foods industry in India based on the Aaker four-component model of brand equity. They found that that brand loyalty has the most influence on increasing the brand equity and the purchases intention followed by perceived quality and brand association respectively whereas the brand awareness is not enough for purchase selection, decision and intention. They concluded that indeed the brand awareness does not merely lead to improving the brand equity.

They also recommended that the brand awareness should be accompanied by the emphasis on the product features, and that equity along with the awareness is more effective.

Another research work done by Gunawardane (2015) to examine the impact of brand equity on purchase intention on mobile connection service provider in Sri Lanka for 300 respondents by using structured questionnaires collected by simple random sampling technique. He found that there is a strong positive relationship between the brand awareness and perceived quality with purchase intention. However, rest of the other factors (brand association and loyalty) relationship with purchase intention is having less or moderate level relationship. His work results indicated that brand equity positively influences consumer's purchase intention. Based on data analysis he suggested that brand awareness and perceived quality would have a bigger impact on purchase intention than brand loyalty & brand association would.

2.2.1. Empirical Evidences in Ethiopian Context

The study conducted in the area of CBBE measurement in the Ethiopian context, those conducted by using Aaker (1991) brand equity model has discussed here. A master thesis done by Yodit (2017) on measuring CBBE in the case of TOMOCCA COFFEE in Ethiopia based on Aaker's brand equity model. The findings of her study showed that all the dimensions of CBBE namely, brand awareness, perceived quality, brand loyalty, and brand association have a positive and significant relationship with brand equity in Ethiopia which led to, the acceptance of the four hypotheses.

As much as the student researcher efforts there is no enough research works available from reputable sources except the master thesis work on CBBE in the Ethiopian context by Yodit (2017).

Even though she measured the relationship between BE and its dimensions, she did not substantiate how independent variables simultaneously and individually affect the consumer purchase intention. This study used Aaker's (1991) four-dimensional brand equity model based on the arguments forwarded in the literature to evaluate the effects of brand equity dimensions for consumer purchase intention making in Ethiopian private medical healthcare facilities' context.

II.   Hypothesis Formulation

Brand recall refers a situation when consumers see a product category, they can recall a brand name exactly, as well as brand recognition used to describe consumer's ability to identify a brand when there is a brand cue (Keller, 1993: Aaker, 1996). Similarly, Aaker (1996) states that for a new or

niche brand, the important issue is recognition; on the other hand, for a well-known brand, recall and top-of–mind is more sensitive and significant. It means, consumers can tell a brand correctly if they ever saw or heard it. Brand awareness plays a role consumer decision making by influencing the formation and strength of brand associations in the brand image. However, awareness only may not guide to purchase; awareness may only result in attention about the product. According to Pappu and Quester (2006) brand awareness is a first and necessary, but not satisfactory condition that leads to purchase. It is a necessary condition for brand equity, without which consumers cannot have brand associations, perceptions of quality and brand loyalty (Pappu and Quester, 2006). Based on this explanation, the following hypothesis is proposed:

H1- Brand Awareness has positive and significant effect on purchase intention

According to Zeithaml (1988) definitions perceived quality is the customer's decision about a product's overall superiority or advantage that is different from objective quality or actual quali-21 ty. Objective quality refers to the technical, measurable and verifiable nature of products/services, processes and quality controls. As stated by Anselmsson (2008) high objective quality does not automatically contribute to brand equity. Since it is impractical for consumers to make absolute and accurate judgments of the objective quality, they use quality characteristics that they link with quality. Perceived quality hence formed to judge the overall quality of a product/service. Perceived quality is one of the qualifications of customer satisfaction and has a positive outcome on customers purchase goal as explained by (Fayrene and Lee, 2011). When consumers perceive a brand to be of high quality, they are more likely to acquire the brand over rival brands, pay a premium price, and prefer the brand.

In addition, according to Aaker (1991) the added -value of perceived quality is believed to result in higher brand loyalty, larger customer base and more well-organized marketing programs. The following hypothesis is, thus, forwarded based on the above explanation:

H2- Perceived quality has positive and significant effect on purchase intention

Brand associations as the information in the consumer's mind linked to the brand. In the start, a brand may be just a name, symbol or design. However, when customers start in to experience the products, they start forming positive or negative associations towards the products and the brands. According to Kotler and Keller (2006) brand associations consist of all brand-related thoughts, feelings, perceptions, images, experiences, beliefs, attitudes and is anything linked in memory to a brand. This means, brand associations refer to consumers associations and interpretation of the

brand, which contains functional and emotional brand associations. The functional attributes are the tangible features of a product as defined by Keller (1993) performance is defined as a consumer's judgment about a brand's fault-free and enduring physical operation and excellence in the product's physical construction. Its non-functional attributes include symbolic features, which are the intangible features that meet consumers' needs for social approval, personal expression or self-esteem. (Keller 1993). These comprise trustworthiness, perceived value, differentiation and country of origin of the brand (Aaker, 1991). This leads to drive the consumers to acquire the product or service that suits their preference or associated value. Based on this explanation, the following hypothesis is forwarded:

H3- Brand association has positive and significant effect on purchase intention

Brand loyalty is the attachment that customers has to a brand, and regard it as to be a key aspect of the brand equity and it is associated with usage experience. It can also be taken as the tendency to be loyal to a focal brand, which demonstrated by the intention to buy the brand as a primary choice (Yoo and Donthu, 2001). According to Keller (1998) behavioral loyalty linked to consumer behaviour in the market that can be indicated by number of repeated purchases or commitment to re-buy the brand as a primary choice. Cognitive loyalty which means that a brand comes up first in a consumers' mind, when the need to make a purchase decision arises, that is the consumers' first choice (Keller,1998). The cognitive loyalty closely associated to the peak level of awareness (top-of mind), where the matter of attention also is the brand, in a given category, which the consumers recall first. As a result, a brand should be able to become the respondents' first choices (cognitive loyalty) and as a result purchased repeatedly. Referring this illustration, the following hypothesis is proposed as follows:

H4- Brand loyalty has positive and significant effect on purchase intention

2.3. Conceptual Framework and Hypothesis Formulation

The main purpose of this study is to investigate the effect of brand equity on purchase intention in Ethiopian healthcare service industry in the case of selected dental speciality clinics in Addis Ababa, Ethiopia. The conceptual framework is taken from Jalilvand (2011) and shows the effects of brand equity components on consumer purchase intention.

Brand equity dimensions; brand awareness, perceived quality, brand association, and brand loyalty are considered as independent variables that influence consumer purchase intention as dependent variable.

The figure –1 depicts that each brand equity dimensions namely brand awareness, perceived quality, brand association, and brand loyalty have direct relations with consumer purchase intention.
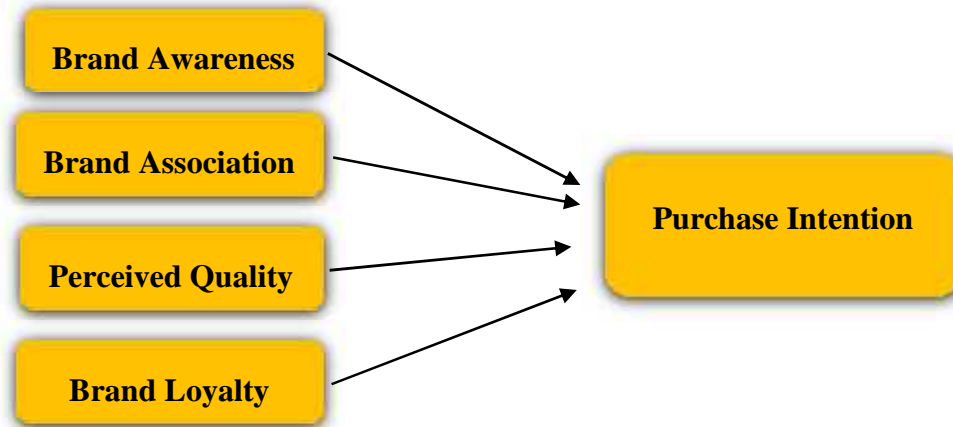
(Source: Jalilvand, 2011)

Figure 1: Conceptual framework of the study

Hypothesis

Based on the theoretical and empirical literature reviews, the following hypotheses were proposed:

H1: Brand awareness has positive significant effect on purchase intention of dental medical service

H2: Brand association has positive significant effect on purchase intention of dental medical service

H3: Perceived quality has positive significant effect on purchase intention of dental medical service

H4: Brand loyalty has positive significant effect on purchase intention of dental medical service

CHAPTER THREE

3. RESEARCH METHODOLOGY

This chapter concentrates on the scope of methodological procedures employed in this study. It includes research design, sample design procedures, data collection instruments, data collection procedures, data analysis techniques, reliability and validity test of date collection instrument and ethical considerations.

3.1. Research Approach

There is a tendency to divide research into qualitative and quantitative based on type of data utilized as the criterion for classification. Qualitative research involves studies that do not attempt to quantify their results through statistical summary or analysis. It seeks to describe various aspects about behaviour and other factors studied in the social sciences and humanities. The data are often in the form of descriptions, not numbers; whereas, quantitative research is a systematic and scientific investigation of quantitative properties and their relationships. The objective of quantitative research is to develop and employ mathematical models, theories and hypotheses pertaining to natural phenomena. The process of measurement is central to quantitative research because it provides the fundamental connection between empirical observation and mathematical expression of an attribute (Abbey, 2009). Thus, quantitative approach wastaken in this study to get insight to the nuances of the process for best selection of methodology tools that fitted best.

3.2. Research Design

In order to address the research gap identified and meet the specific objectives, explanatory research design was employed. Explanatory designseeks to establish cause-and-effect relationships. Its primary purpose is to determine how events occur and which ones may influence particular outcomes (Kothari, 2004). They are characterized by research hypotheses that specify the nature and direction of the relationships between or among variables being studied. The reason of using this method is to evaluate the relation between the stated dependent (purchase intention) and independent (brand equity) variables of the study.

In light of the explanatory research undertaken, descriptive and inferential analysis were used. The former is all about describing the targeted respondents' demographic characteristics and their perceptions towards the implementation of respective determinant dimensions of brand equity in

terms of perceived quality, brand loyalty, brand awareness and brand association; while the latter is used to analyze the relation of independent variables (brand equity) and overall purchase intention.

3.3. Population

A target population is the entire group of people or entities that the researcher is interested in and for which the researcher wishes to draw conclusions (Kothari, 2004). According to Addis Ababa City Administration Health Bureau, AACAHB (2019) report, the dwellers in Addis Ababa are estimated roughly around 4.5 million but the number is expected higher for the fact that the population has been growing 3% annually and the local migrants to the capital city substantially increasing since the last two decades. According to FMoH (2019), there are a total of 207 speciality clinics of which 62 dental clinics. However, customers of top six prominent dental special higher clinics in Addis Ababa namely Dr. Senait, Dr. Aklilu, Mina, Nahom, Gojeb and Dr. Emebet dental special higher clinics in descending ranking order rated by Wisdom Africa, Conjointly – the product & pricing research experts (2019). Thus, a population of admited and walking customers/ patients at the aforementioned six higher dental clinicwere targeted. The study population, thus, constitutes the inpatients who take for a medical treatment in the clinic during the survey period from March – April, 2021.

3.4. Sampling Technique

Even though healthcare service providers are obliged to have their own records of patients, the ethics doesn't allow them to transfer patients' medical history for third parties. As both the health institutes and concerned authorities are hesitant to provide the patients' list and their respective addresses, it is impractical to select samples from the sample frame randomly. According to Zikmund (2000), there are two main sampling methods, probability and non-probability sample. In this study the lack of access to a list of the population under study (unavailability of the sampling frame) makes fully randomized samples (probability sampling) difficult to obtain.

3.5. Sampling Size

Determining Sampling is the process of selecting a number of study units from a defined study population (Abiy, 2009). It is economical to take representative sample for the intended investigation when conducting census is unrealistic. Since the population of customers (patients in this case) is unknown or infinite due to the probability of walking customers, Cochran formula is

applied (Okeke, 2005; Hair, Bush, andOrtinua, 2000). Accordingly, the sample size for patients is computed as follows:

$$n = \frac{z^2(p)(q)}{e^2}$$

Where:

- n- Sample size
- z- Standard deviation given a corresponding confidence level of 95%
- p- Estimated proportion of incidence (success rate = 0.5)
- q- (1 –p) or assumed failure rate (0.5)
- e- Proportion of sampling error or error margin in a given situation (5%)

Thus, the sample size of the intended study with 95% confidence level, probability of 50% occurrence, probability of 50% failure and 5% marginal error, is obtained as:

$$n = \frac{z^2(p)(q)}{e^2} = \frac{(1.96)(0.5)(0.5)}{(0.5)^2} = 384.16 = 385$$

A representative sample size of 385 respondents were taken from six selected specialty higher clinic to get the intended sample size taking the possibility of relatively high non-response rate due to their health status at the time of conducting the survey.

Table 1: Sample Proportion per Stratum

Industry	Company	Questionnaire		Screening	
		Distributed	Collected	Missing	Usable
Dental Specialty Clinics	Dr. Senait	65	61	3	58
	Dr. Aklilu	65	59	3	56
	Mina Dental Care	65	63	0	63
	Nahom	65	52	5	47
	Gojeb	65	63	11	52
	Dr. Emebet	60	57	8	50
Total		**385**	**355**	**30**	**326**

(Source: Own Survey, 2021)

3.6. Source of Data

According to Catherine (2007), data may be collected as primary, secondary or both. Primary data are originated by the researcher for the specific purpose of addressing the problem at hand. On the other hand, secondary data contains relevant data that has been collected for a different purpose, but from which the conclusion is valuable for the purpose. In this study basically the primary source, quantitative data from the admitted patients at six selected dental speciality higher clinic was collected and used for analysis.

3.7. Data Collection Instruments

This study is mainly intended to carry out using quantitative data. Quantitative data of brand equity and purchase intention was collected through close-ended questionnaire. The questions are adapted from similar study by Jalilvand, (2011). Assessing and collecting data was not an easy task as the researcher tries to collect the data from different respondents walking or admitted in higher clinics in Addis Ababa. In addition to English language, a local language (Amharic) questionnaire was offered as option. The questions enable the participants to express their opinion on the brand equity dimensions (such as brand awareness, perceived quality, brand association, and service brand loyalty) used by the clinic and purchase intention. Standardized questionnaires were prepared which contain only closed ended questions, and was distributed to the targeted respondents to self-administer. It was prepared by reviewing literature related to the objectives of the study and has three parts such as respondents' demographic profile, brand equity and overall purchase intention.

3.8. Testing of the Research Instruments

Before undertaking the analysis to examine the effect of the independent variables on the dependent variable, the researcher undertook the validity and reliability test to assure the research instruments and was valid besides reliable.

3.8.1 Validity and Reliability Test

The validity of test reveals the degree to which a measuring instrument measures what it is intended to measure (Saunders, 2004). As it is stated in the methodology part, for the sake of assuring the validity of the research instrument, all the variables were adopted from previous research works. In

order to look over the overall content validity of the instrument such as clarity, length & wording of all variables (items) were inspected by expertise in the area.

To increase the degree of clarity & understanding ability, the English version questionnaire has been translated into Amharic language. Furthermore, the researcher also conducted a pilot test of the questionnaire among the customers of the dental special clinics and distributed 30 questionnaires to gather feedbacks towards enhancing the validity of the instruments in line with content validity. Besides, the researcher acquired and incorporated the opinions of the patients and advisors so as to enhance the scale validity.

Table 2: Cronbach's Alpha Test for Reliability

Reliability Statistics		
Variables	**Cronbach's Alpha ( )**	**N of Items**
Brand Awareness	.790	4
Brand Association	.758	4
Perceived Quality	.700	4
Brand Loyalty	.717	4
Purchase Intention	.820	4
Overall Reliability	**.928**	**20**

Source: Own Survey, 2021

Cronbach (1951) stated that reliability is one of the major criteria for evaluating research instruments. It is used to measure the internal consistency (reliability) of a research instrument. Table 2 shows the Cronbach's alpha coefficient for variables reported to measure the reliability of the questionnaire under consideration. According to Hair, et al., (2006), if is > 0.7, it means that it has high reliability, 0.5 is sufficient, and if is smaller than 0.3, then it implies that there is low reliability. Thus, the alpha coefficients result for all factors were found to be greater than 0.7 which shows that the internal consistency is good. The overall reliability of the instrument results in 0.928 that is also higher than the Cronbach's limited level of 0.7 for internal consistency. After identifying the criteria of the Cronbach's reliability analysis for the internal consistency of the instruments the next step leads to the data analysis part.

3.9. Data Analysis and Presentation

The study used multi-regression analysis models for testing the hypotheses drawn from the conceptual framework.

Regression analysis is a statistical method used to deal with the formulation of mathematical model depicting relationship amongst variables which can be used for the purpose of prediction of the value of dependent variable, given the value of the independent (Kothari, 2004). Linear regression estimates the coefficients of the linear equation, involving one or more independent variables that best predict the value of the dependent variable. Multiple linear regression is conducted to identify the relationship and to determine the most dominantbrand equity variables that influence purchase intention. To evaluate the relation between service brand equity and overall purchase intention dimensions, the multi-regression analysis model is depicted as:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + e$$

Where: Y = Overall Purchase Intention; X_1= Brand Awareness; X_2 = Brand Association; X_3= Perceived Service Quality; X_4 = Brand Loyalty; e = error term; $_0$ = constant, term; $_{1, 2, 3,4}$= coefficient terms.

3.10. Ethical Considerations

It is important to consider ethical principles when conducting a business research. Ethical issues are categorized into four different types: harm to participants, lack of informed consent, invasion of privacy and deception (Bryman, 2011). In this study, there are descriptive questions about the respondent's' age and gender but this information is not enough to identify the person. The second ethical principle to consider is the lack of informed consent. The third ethical principle concerns the invasion of privacy. In this study the respondent had the opportunity to skip a question if it is judged sensitive. Furthermore, this study is not of a sensitive nature which enhances the respondents' willingness to answer. The fourth ethical principle refers to deception which occurs if respondents are led to believe that a research is about something else than what it is. Taking the ethical principles into account and fully live up to the requirements, it can be classified as ethical.

CHAPTER FOUR

4. DATA PRESENTATION, ANALYSIS AND INTERPRETATION

This chapter presents the data presentations, analysis, and interpretations in relation to the effect of brand equity on behavioural/purchase intention of patients in the case of selected private dental specialty clinics in Addis Ababa.

4.1. Data Screening and Validation

Data screening is important because it ensures the validity of research findings. It is also important to check for any errors that occurred during data collection and data entry before further analysis. Thus, once the primary data was collected, prior to the analysis, the questionnaire was reviewed and it was to certify that if questionnaires were filled appropriately. Any incomplete or missing responses were rejected from the subsequent analysis. The steps which stated in the data analysis section such as coding, eliminating coding and data entry error, known as "clearing the data", Rubin & Babbie (2010) was performed in this research.

4.2. The Questionnaire Response Rate

In order to make the collected data suitable for the analysis, all questionnaires were screened to be complete. All unreturned questionnaire and returned incomplete questionnaires were considered as errors and removed from the survey data. Out of the 385 distributed questionnaires 355 were returned and 30 questionnaires were not returned. The collected questionnaires were checked for errors and 29 incomplete questionnaires were identified and discarded. Out of the 355 collected questionnaires, 326 were found to be usable and used for final analysis. Thus, 85% response rate had been obtained.

Table 3: Questionnaire response rate

Industry	Company	Questionnaire		Screening	
		Distributed	Collected	Missing	Usable
Dental Specialty Clinics	Dr. Senait	65	61	3	58
	Dr. Aklilu	65	59	3	56
	Mina Dental Care	65	63	0	63

	Nahom	65	52	5	47
	Gojeb	65	63	11	52
	Dr. Emebet	60	57	8	50
Total		**385**	**355**	**30**	**326**

(Source: Own Survey, 2021)

4.3. Descriptive Statistics

4.3.1. General Information about the Respondents

The first part of the questionnaire consists of the general profile of respondents. This part of the questionnaire requested a limited amount of information related to general information about the respondents. Accordingly, the following variables about the respondents were summarized and described in the table 4 below. These variables include:

Table 4: General Information about the Respondents

Demographic and General Information Related			
Demographic Variable	**Categories**	**Outcomes**	
		Frequency	**Percentage (%)**
Gender	Male	214	65.6
	Female	112	34.4
	Total	**326**	**100.0**
Age in years	18-30 years	40	12.3
	31-45 years	114	35.0
	46-60 years	115	35.3
	Above 60 years	57	17.5
	Total	**326**	**100.0**
Educational Level	High school and below	71	21.8
	Diploma	134	41.1
	Degree	98	30.1
	Masters and Above	23	7.1
	Total	**326**	**100.0**

Monthly Income	< 5,000	94	28.8
	5,000-10,000	144	44.2
	10,001-15,000	50	15.3
	>15,000	38	11.7
	Total	**326**	**100.0**
Experience	1-5 Years	185	56.7
	6-10 Years	104	31.9
	>10 years	37	11.3
	Total	**326**	**100.0**

Source: Own Survey, 2021

As shown in item 1 of Table 4, there were marginally more male respondents than female. 65.6% of the respondents were found to be male and the remaining 34.4% of the respondents were female.

With regards to age category, as shown in item 2 of the same table above, the age distribution showed 35.3% of the respondents were 46-60 years old, 35% were 31-45 years old, 17.5% were above 60 years old, and the rest 12.3% were between 18-30 years old. Most of the respondents involved in the study were from 46-60 years old. This showed the participants are more of adults.

On the educational status of the respondents, the majority (41.1%) had certificate Diploma,30.1% of them were First Degree holders,21.8% of them attended high school and below, and the rest 7.1% had Masters' Degree and above holder. Thus, the result implies that the majority of the respondents were possessed a high level of education and they have knowledge to evaluate the brand equity as well as to fill the questionnaire.

Furthermore, with regards to monthly income, the majority (44.2%) were earned the monthly income of Birr 5,000 to 10,000 followed by Birr less than Birr 5,000 which accounted for 28.8%. The rest 15.3% and 11.7% of them were earned 10,001 to 15,000 and more than Birr 15,000, respectively.

Finally, about 56.7% had dealt with Dental specialty for 1-5 years followed by 6-10 years which accounted for 31.9%. The remaining 11.3% were customers who have dealt with the speciality clinic for greater than 10 years.

4.3.2 Descriptive Analysis of the Variables of the Study

Descriptive statistics were used to describe the basic features of the data in a study. It provides simple summaries about the sample and the measures. The researcher used descriptive statistics to present quantitative descriptions in a manageable form; each descriptive statistic reduces lots of data into a simpler summary (Gelman, 2007). The mean scores have been computed for all the four brand equity variables by equally weighing the mean scores of all the items under each dimension. Respondents were asked to rate their insight / observation on a five-point Likert type scale ranging from 1- being strongly disagree to 5- strongly agree for brand image dimensions.

To compare the respondents' perception towards the variables, the scale is set in such a way that respondents strongly disagreed if the mean scored value is in the range of 1.00 – 1.80; disagreed within 1.81 – 2.60; neither agreed nor disagreed within 2.81 - 3.40; agreed if it is in the range of 3.41 – 4.20; while strongly agreed when it falls within 4.21 – 5.00. In addition, standard deviation shows the variability of an observed response. The result is presented below.

Table 5: Descriptive Statistics of Brand Awareness

Descriptive Statistics			
	N	Mean	Std. Dev.
I take special initiative to know the specialty dental clinic brand	326	4.04	1.076
The specialty clinic brand is fixed on my mind	326	3.81	1.040
I can distinguish the specialty clinic brand from others	326	4.07	.922
Company's promotional practices help me recognize this brand	326	4.10	.914
Average mean	**326**	**4.16**	**.796**

Source: Own Survey, 2021

With the objective of evaluating brand awareness, the prescribers 'ability to recall and recognize the brand as reflected by their ability to identify the brand under different conditions to certain associations in memory was assessed. Under brand awareness, 4 specific statements were asked in the form of Likert scale. Each statement focused on the theoretical background and how much it influences the purchase decision of customers of the clinics. From the above statistic table, the researcher understand that the aggregate mean is (Mean=4.16) with the standard deviation (0.796) this implies that the majority respondents inclined to agree on the importance of brand awareness on their decision.

Table 6: Descriptive Statistics of Brand Association

Descriptive Statistics			
	N	Mean	Std. Dev.
I take the dental specialty clinic as a prestige	326	3.61	1.158
The brand of the dental specialty clinic comes to my mind quickly.	326	3.85	1.060
I experience the sense of self-esteem using the dental medical service	326	3.78	1.040
The dental specialty clinic service suits my personality	326	4.06	1.009
Average mean	**326**	**4.04**	**.807**

Source: Own Survey, 2021

Under brand association there are four statements which were used to test effect of brand association on customer's purchase decision. From the above statistics result, the customers response rate is (Mean=4.04) with the standard deviation (0.807), which means the response of the respondents apt to agreed up on brand statement questions. Based on this, the researcher came to understand that brand association has effect on purchase intention in the specialty clinics.

Table 7: Descriptive Statistics of Perceived Quality

Descriptive Statistics			
	N	Mean	Std. Dev.
The dental specialty clinic service is high quality	326	3.77	1.031
The dental specialty clinic service is reliable	326	4.06	.913
The dental clinic's medical treatment makes me feel healthier	326	3.84	1.151
In comparison to its competitors, overall quality of the dental specialty clinic services must be of very good quality	326	4.40	.809
Average mean	**326**	**4.13**	**.748**

Source: Own Survey, 2021

Since it is impossible for prescribers to make fully accurate judgments of the objective quality, they use quality attributes that they associate with their expectation from the dental specialty clinics to deliver to the patient they are selecting for he/she to use the service. Accordingly, the above table shows the descriptive result of perceived quality dimensions. The respondents were asked four questions with regards to the perceived quality about the dental specialty clinics. From the above statistics result, the customers response rate is (Mean=4.13) with the standard deviation (0.748), which means the response of the respondents apt to agreed up on perceived quality statement

questions. Based on this, the researcher came to understand that perceived quality has effect on purchase intention in the dental specialty clinics.

Table 8: Descriptive Statistics of Brand Loyalty

Descriptive Statistics			
	N	Mean	Std. Dev.
The performance of the service brand satisfies me	326	3.66	1.192
I would recommend the specialty clinic's services to others	326	4.16	.892
The brand offers better service to me than other competitors	326	3.90	.904
The dental specialty clinic brand would be the first choice if I need dental medication.	326	4.13	.904
Average mean	**326**	**4.09**	**.752**

Source: Own Survey, 2021

Loyalty is a core dimension of brand equity Aaker (1991) defines brand loyalty as the attachment that a customer has to a brand. Based on this definition four items related to brand loyalty was put to the respondents and the result is shown in the above table. From the above statistics result, the patients' response rate is (Mean=4.09) with the standard deviation (0.752), which means the response of the respondents apt to agreed up on brand loyalty statement questions. Based on this, the researcher came to understand that brand loyalty has effect on purchase intention in thedental specialty clinics.

Table 9 indicates the summary of the mean and standard deviation of both dependent and independent variables considered for this study. As we can see from the table below, the average values of all the variables are below the mid-point. This indicates that the respondents were happy with regards to the purchase intention. Among the variables, brand awareness has relatively the highest mean value of 4.16 which could be taken as highly influencing the purchase intention. Among the variables, the next high mean values among the independent variables are perceived quality with mean value of 4.13, brand loyalty with mean values of 4.09and brand association with the mean value of 4.04. They have small differences in mean values from purchase intention.

Table 9: Summary of Overall Brand Equity Dimensions

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Dev

Brand Awareness	326	1	5	4.16	.796
Brand Association	326	1	5	4.04	.807
Perceived Quality	326	2	5	4.13	.748
Brand Loyalty	326	2	5	4.09	.752
Purchase Intention	326	2	5	4.29	.695
Valid N (listwise)	326				

Source: Own Survey, 2021

4.4 Correlation Analysis

A correlation refers to a quantifiable relationship between two variables, and the statistic that provides an index of that relationship is called a correlation coefficient r, which is a measure of the relationship between two interval or ratio variables.

It is a very useful means to summarize the relationship between two variables with a single number that falls between -1 and +1 (Field, 2005). As per the guideline suggested by Field (2005), the strength of relationship 0.1 to .29 shows week relationship; 0.3 to 0.49 is moderate; >0.5 shows the strong relation between the two variables. Hence, in this study correlation analysis was used to examine the relation between dependent and independent variables.

Table 10: Pearson Correlation Matrix

Correlations					
	Brand Awareness	Brand Association	Perceived Quality	Brand Loyalty	Purchase Intention
Brand Awareness	1				
Brand Association	.730**	1			
Perceived Quality	.651**	.700**	1		
Brand Loyalty	.579**	.594**	.554**	1	
Purchase Intention	.718**	.755**	.789**	.606**	1
** Correlation is significant at the 0.01 level (2-tailed).					
N=326					

Source: Own Survey, 2021

The Pearson correlation test was conducted to know the degree of relationship between the independent variables. Accordingly, table 10 reveals the result of the correlation coefficient between the brand equity dimensions and purchase intention. The result indicates that all of the independent variables have strong positive correlation with the dependent variable. Among them, the association between perceived quality and purchase intention had the most strongly positive with correlation coefficient of 0.789 and significant at 0.01. This indicates perceived quality had highly determined purchase intention among other independent variables. Brand association is the second most determinant of the purchase intention with strong positive correlation coefficient of 0.755. Besides, brand awareness and brand loyalty also had strong positive relationship and significant with purchase intention with the correlation coefficient of 0.718 and 0.606 respectively.

Therefore, from the result one can conclude that all the brand equity dimensions had a strong and positive correlation with purchase intention.

4.5 The Assumptions for Testing Regression Analysis

Meeting the assumptions of regression analysis is necessary to confirm that the obtained data truly represented the sample and that the researcher has obtained the best results (Hair et al., 1998). There are many assumptions to consider but the researcher focused on the major ones that are easily tested with SPSS.

4.5.1. Multicollinearity

The multi-collinearity among the variables was measured to determine if any correlation existed among the independent variables. If independent variables are correlated, there is likely a redundant measure in the regression equation. Correlations were examined by means of the bivariate correlation measure in SPSS. None of the independent variables had correlations of 0.70 or greater, which would have inferred collinearity (Tabachnick&Fidell, 1996). In addition, the multi-collinearity in this study was checked using the Tolerance and VIF value. If tolerance value closed to 1 and VIF value is around 1 and not more than 10, it can be concluded that there is not multi-collinearity between independent variable in the regression model (Pallant, 2011). As it is showed in table 11, all independent variables have a Tolerance value greater than 0.01 and VIF value less than 10. Therefore, there was no multi-collinearity exists in this case.

Table 11: Collinearity Diagnosis

Coefficients[a]			
Model		Collinearity Statistics	
		Tolerance	VIF
1	Brand Awareness	.294	3.396
	Brand Association	.261	3.839
	Perceived Quality	.472	2.120
	Brand Loyalty	.595	1.680
a. Dependent Variable: Purchase Intention			

Source: Own Survey, 2021

4.5.2. Test of Normality

Screening data for assessing the normalization of variables is a critical step in multivariate analysis (Hair, 2010).

Normality refers to the shape of a normal distribution of the matric variable (Robert, 2006). For variables with normal distribution, the values of skewness and kurtosis are zero, and any value other than zero indicated deviation from normality (Hair, 2010). In addition, a check for normality of the error term is conducted by a visual examination of the normal probability plots of the residuals. The normality probability plots were plotted to assess normality. The P-P plots showed in figure 2 were approximately a straight line instead of a curve. The skewness value provides an indication of the symmetry of the distribution. The index of skewness takes the value zero for a symmetrical distribution. A positive skewness value indicates right skew while a negative value indicates left skew (Fidell, 2001). The result of histogram in figure 3 showed a little left skew.

Table 12: Normality of Distribution Using Descriptive Statistics (Skewness and Kurtosis)

Descriptive Statistics					
	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
Brand Awareness	326	-.589	.135	-.184	.269
Brand Association	326	-.527	.135	-.044	.269
Perceived Quality	326	-.447	.135	-.424	.269
Brand Loyalty	326	-.580	.135	.166	.269

40

Purchase Intention	326	-.623	.135	-.105	.269
Valid N (listwise)	326				

Source: Own Survey, 2021

Figure 2: Normal Point Plot of Standardized Residuals
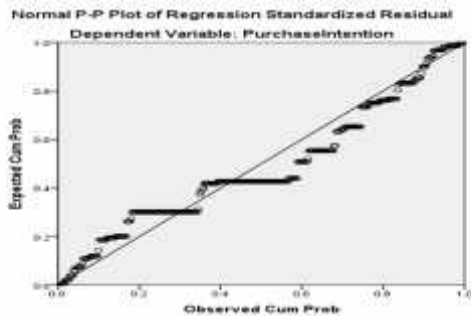
Source: Own Survey, 2021

Figure 3: Frequency Distribution of Standardized Residuals
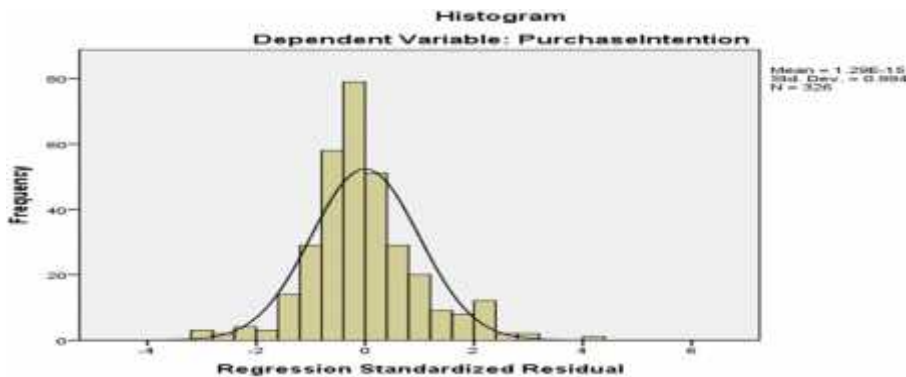
Source: Own Survey, 2021

4.5.3. No Auto-correlation/Independent of Errors

To determine the autocorrelation between observations Durbin-Watson test was used. The Durbin-Watson statistic ranges in value from 0 to 4. A value near 2 indicates non-autocorrelation; a value toward 0 indicates positive autocorrelation; a value toward 4 indicates negative autocorrelation (Field, 2005). With Durbin Watson value of 2.008, which is very close to 2, it can be confirmed that the assumption of independent error has almost certainly been met *(Please refer table 7)*.

4.5.4. Linearity

The linearity of the relationship between the dependent and independent variable represent the degree to which the change in the dependent variable is associated with the independent variable (Hair et al., 1998). In a simple sense, linear models predict values falling in a straight line by having a constant unit change (slope) of the dependent variable for a constant unit change of the independent variable (Hair et al., 1998). The linearity assumption can easily be checked using scatterplots or residual plots: plots of the residuals vs. either the predicted values of the dependent variable or against (one of) the independent variable(s) (Hoekstra et al., 2014). The scatter plots of standardized residuals versus the fitted values for the regression models were visually inspected from figure 4.

Figure 4: Frequency Distribution of Standardized Residuals
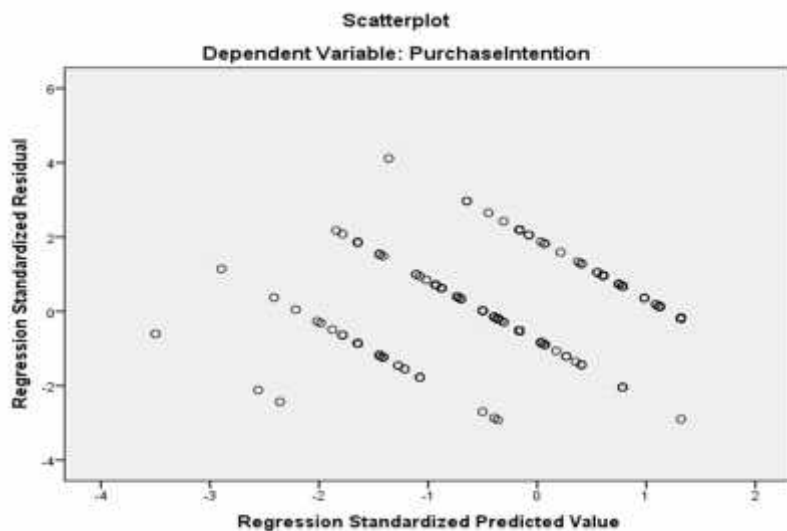
Source: Own Survey, 2021

4.6. Multiple Linear Regression Analysis

Multiple linear regression is the method of analysis for assessing the strength of the relationship between each of a set of explanatory variables (Landau and Brian, 2004). In this study regression was conducted in order to determine the explanatory power of the independent variables (brand awareness, brand association, perceived quality, and brand loyalty) in the variance of the dependent variable (Purchase Intention). Adjusted R square was used to measure the percentage of variance in the dependent variable explained by the independent variables. From the multiple linear regression

analysis, the standard regression coefficient (beta weight) was also determined to compare the relative effect of each independent variable had on the variability of the purchase intention.

When overall purchase intention was regressed on the 4-independent variable (brand awareness, brand association, perceived quality, and brand loyalty) the independent variables contribute to statistically significant level p-value < 0.001. The multiple correlation coefficient $R = 0.850$ indicates that there is a strong correlation between the observed purchase intention and those predicted by the regression model. In terms of variability in observed purchase intention accounted for by the fitted model, this amounts to a proportion of $R^2 = 0.723$, or 72.3% showed in table 13.

Table 13: Model summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.850[a]	.723	.719	.368	.723	209.137	4	321	.000	2.008
a. Predictors: (Constant), Brand Loyalty, Perceived Quality, Brand Awareness, Brand Association										
b. Dependent Variable: Purchase Intention										

Model Summary[b]

Source: Own Survey, 2021

Since by definition R^2 will increase when further terms are added to the model even if these do not explain variability in the population, the adjusted R^2 is an attempt at improved estimation of R^2 in the population (Landau and Brian, 2004). Use of this adjusted measure leads to a revised estimate that 72.3% of the variability in purchase intention in the population can be explained by the four explanatory variables. The other variables that were not considered in this study explain about 27.7% of the variability of purchase intention in the population.

Table 14: ANOVA

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
	Regression	113.387	4	28.347	209.137	.000[b]
1	Residual	43.509	321	.136		
	Total	156.896	325			

Source: Own Survey, 2021

The **ANOVA** table shows the overall significance/acceptability of the model from a statistical perspective (Pedhazur, 1982). The above ANOVA table shows the acceptability of the model. The p-value is less < 0.05 i.e., 0.001 which indicates the variation is explained by the model is not due to chance.

As table 13 advocate the researcher can connote that R, R^2, and Adjusted R^2 conducted for the multiple regression predict the customers purchase decision based on the linear combination of brand equity independent variables is statistically significant.

F-ratio determines whether the model is a good fit for the data. The F-ratio is calculated by dividing the average improvement in prediction by the model (MSM) by the average difference between the model and the observed data (MSR). If the improvement due to fitting the regression model is much greater than the inaccuracy within the model then the value of F will be greater than 1 and SPSS calculates the exact probability of obtaining the value of F by chance (Pedhazur, 1982). The F-ratio for the above model is 209.137, which is very unlikely to have happened by chance.

The regression coefficient

This study intends to identify the most contributing independent variable in the prediction of the dependent variable. Thus, the strength of each predictor (independent variable) influencing the criterion (dependent variable) can be investigated via standardized Beta coefficient. The regression coefficient explains the average amount of change in the dependent variable that is caused by a unit change in the independent variable. The larger value of Beta coefficient an independent variable has, brings the more support to the independent variable as the more important determinant in predicting the dependent variable.

Table 15: Summary of Regression Coefficient on Purchase Intention

Coefficients[a]					
Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		

		.691	.131		5.268	.000
	(Constant)					
	Brand Awareness	.137	.047	.157	2.894	.004
1	Brand Association	.199	.050	.232	4.021	.000
	Perceived Quality	.422	.040	.455	10.621	.000
	Brand Loyalty	.117	.035	.127	3.322	.001
a. Dependent Variable: Purchase Intention						

The result of standardized regression coefficient (Beta weight) showed in table 15 for brand awareness, brand association, perceived quality, and brand loyalty were 0.157, 0.232, 0.455, 0and 0.127 respectively. The significance levels for all independent variables were less than to 0.05 (5%). The multiple linear regression analysis result revealed that there is a positive significant relationship between the independent variables and dependent variable. Since, coefficients of the predictor variables were statistically at less than 5% level of significance for all independent variables.

The Beta value tells us about the effect of each predictor on the purchase intention and. If the value is positive we can tell that there is positive effect between the predictor and the outcome, whereas a negative coefficient represents negative effect/relationship. For these data, all of the predictors had a positive Beta value, which indicates positive effect. Therefore, the hypotheses for these four variables were confirmed as they showed a positively significant effect on purchase intention. The specified regression equation takes the following form

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + e$$

Where: Y = Overall Purchase Intention; X_1= Brand Awareness; X_2 = Brand Association; X_3= Perceived Service Quality; X_4 = Brand Loyalty; e = error term; $_0$ = constant, term; $_{1, 2, 3,4}$= coefficient terms. Therefore, the regression equation for this study derives as:

$$Y = 0.691 + 0.157X_1 + 0.232X_2 + 0.455X_3 + 0.127X_4 + e$$

4.7. Discussion of the Result

This study was aimed to investigate the effect of brand equity on behavioural/ purchase intention of patients in the case of selected private dental specialty clinics in Addis Ababa. Under the umbrella

of brand equity; brand awareness, brand association, perceived quality, and brand loyalty were selected as the brand equity dimensions as indicated in literature review section.

As indicated in the above table 9, all of the regression coefficients (Beta Coefficients) between the brand equity and purchase intention have positive values. Hence, there were no inverse relation between the dependent and independent variables. The brief discussion on each hypothesis is given below.

Hypothesis 1: states that brand awareness has a positive significant effect on purchase intention of patients. This is supported at = 0.157, and p value of 0.004 at p < 0.01. It is shows that brand awareness dimension certainly has a significant and positive effect on consumer purchase intention. A one unit increase in brand awareness will bring a 0.157 unit increase in consumer purchase intention. Therefore, it is proved that the hypothesis H1 is supported. The awareness variable has a positive relationship with consumer purchase intention indicating that when more consumers are able to recall the dental speciality clinics from memory, the better the brand's purchase intention will be. Aaker (1991) states that when consumers are able to recall a brand from memory when thinking of a given product group, it indicates a strong brand position for the given brand. The findings in this study support previous studies by Oscar (2015); Gunawardane(2015) where their study results suggest that brand name awareness (brand recognition and brand recall) is the strongest determinant of consumer purchase intention. On the other hand, other studies have found weaker support for the same findings are such as the study by Shoaib; Tong and Hawley (2009). Whereas the research conducted that is inconsistent with findings by Suryadi (2015); Roozy(2014). They investigated the influence of brand equity dimensions on consumer purchase intention or decision based on Aaker's (1991) four-dimensional brand equity model, but the findings revealed that brand awareness had no support on influencing consumer purchase intention.

Hypothesis 2: states that brand association has a positive significant effect on purchase intention of patients. This is supported at = 0.232 and p value of 0.000. A unit increase in brand association will produce a 0.232 unit increase in consumer purchase intention. Hence, the hypothesis is supported. The finding was in line with other previous studies by Gunawardane(2015) revealed that brand association has effect on purchase intention.

Hypothesis 3: states that perceived quality has a positive significant effect on purchase intention of patients. This is supported at = 0.455 and p value of 0.000. It means perceived quality significantly affects the consumer purchase intention. A unit increase in perceived quality will

produce a 0.455 unit increase in consumer purchase decision. So, the hypothesis is supported. Lovelock (2008) also argues that customers evaluate service quality by comparing what they expect against what they perceive. Therefore, because the products from this brand meet the consumers' expectations, it can be said that consumers have higher service expectations to the specialty dental clinics. The finding was also consistent with the results by other researchers' studies by Gunawardane(2015); and Roozy(2014). Their result confirms that perceived quality would have a bigger impact on purchase intention in a similar context. This study also in line with the findings of Tong & Hawley (2009) research on Measuring Customer Based Brand equity in the Chinese sportswear market that revealed the perceived quality have high influence on customer decisions.

Hypothesis 4 states that brand loyalty has a positive significant effect on purchase intention of patients. This is supported at   = 0.127 and p value of 0.001., which is statistically significant at the 0.01 level. Hence, the findings showed that the hypothesis (H4) is sup-ported. Additionally, it also considered as the strongest determinant of consumer purchase intention in dental clinics. The result was congruent with prior researches conducted within the context of brand equity dimensions effect on consumer purchase intention by Shoaib; Tong and Hawley (2009); Oscar (2015). Furthermore, the result was consistent with previous research conducted by Roozy(2014) on the context of consumer purchase decisions factors from the perspective of brand equity dimensions. They found that that brand loyalty has the most influencing factor on increasing the purchases intention. On the other hand, the finding of the study is inconsistency with the findings of the study by Suryadi (2015)

In general, this indicates that each of the independent variables in a regression model is significantly affecting customers' purchase intention in the dental specialty clinics in Addis Ababa city. Hence, all of the independent variables were strongly correlated with purchase intention in specialty dental clinics whereby the entire hypotheses (H1, H2, H3, and H4) supported by this research model as shown in the table 16.

Table 16: Summary of the Research Hypothesis Test Result

Hypothesis	Analysis Used	Findings		Result
H$_1$	Multiple Regression	= 0.157; p<.05	Positive Significant	*Supported*
H$_2$	Multiple Regression	= 0.232; p<.05	Positive Significant	*Supported*

H₃	Multiple Regression	= 0.455; p<.05	Positive Significant	*Supported*
H₄	Multiple Regression	= 0.127; p<.05	Positive Significant	*Supported*

Source: Own Survey, 2021

In general, this indicates that each of the independent variables in a regression model is significantly affecting customers' purchase intention in the dental specialty clinics in Addis Ababa city. Hence, all of the independent variables were strongly correlated with purchase intention in specialty dental clinics whereby the entire hypotheses (H1, H2, H3, and H4) supported by this research model as shown in the Table 16.

CHAPTER FIVE

5. SUMMARY, CONCLUSION, AND RECOMMENDATION

This chapter contains four sections. The first section describe the summary of the major findings of the study, the second section deals with the conclusions and the third section reveals the recommendations for the findings of the study. The end section highlights the directions for further studies.

5.1. Summary of Major Findings

Based on the analyses, the following major findings are drawn:

Specific Objective 1- Investigate the effect of dental special clinics' brand awareness on purchase intention of patients

- The results of the findings revealed that brand awareness had positive and significant effect on purchase intention of patients as = 0.157, at p value of 0.004. Thus, it is proved that the hypothesis (H1) is supported. The awareness variable has a positive relationship with patient's purchase intention indicating that when more consumers are able to recall the dental speciality clinics from memory, the better the brand's purchase intention will be.

Specific Objective 2- Evaluate the effect of dental special clinics' brand association on purchase intention of patients.

- The result also illustrated that brand association has a positive significant effect on purchase intention of patients. This is supported at = 0.232 and p value of 0.000. A unit increase in brand association will produce a 0.232 unit increase in consumer purchase intention. Hence, the hypothesis (H2) is supported.

Specific Objective 3- Evaluate the effect of perceived quality of dental medical service on revisit intention of patients

- Perceived quality of the dental clinics' medical service had relatively the highest positive and significant effect on purchase intention of patients. This is supported at = 0.455 and p value of 0.000. The hypothesis (H3) is supported as the perceived quality significantly affected the consumer purchase intention, i.e., customers evaluate service quality by comparing what they expect against what they perceive.

Specific Objective 4- Investigate the effect of dental special clinics' brand loyalty on purchase intention of patients

- Brand loyalty had also a positive significant effect on purchase intention of patients. This is supported at $= 0.127$ which is statistically significant at the 0.01 level. Hence, the findings showed that the hypothesis (H4) is supported. Additionally, it also considered as the weakest determinant of consumer purchase intention in dental clinics.

5.2. Conclusions

The study is conducted to examine the effect of brand equity dimensions on purchase intention in dental specialty clinics in Addis Ababa City. These findings may not be in-depth of the research in this area for the reason that other factors other than customer-based brand equity dimensions may influence consumer purchase intention. However, a strong positive relationship may give a good picture of how brand equity dimensions contributed positively to retain and develop long-term relationship with customers. Based on the findings a number of conclusions generated as follows:

It had concluded that the most dominant factor in shaping their consumer purchase intention was perceived quality as it was found to be the first significant variable of consumer dental specialty clinic purchase intention. Perceived quality indicates consumers' overall perception about the quality/superiority of a particular product or service in comparison to other service brand equity in similar clinics available service products. So, respondents believed that there is high quality and reliable service and treatments that make customers feel healthier. Brand perceived quality found to be relatively the highest effective dimensions that affect patient's purchase intention. Next to perceived quality, brand awareness also had positive and significant effect on revisit intention of patients. It indicates the customers' ability to recall and recognize the brand as reflected by their ability to identify and link the brand name, logo, symbol under different conditions. That means, the dental clinics have distinguishable logo and promotional activities that made patients easily recognize the brand from other similar competitive brands. However, patient's thoughts, feelings or perceptions related to the brand had less influence of their intention to utilize the service. Similarly, customer's loyalty to the dental clinics in regards to continue to prefer the services from the same healthcare providers (or a provider), had the least effect on their revisit intention of the facilities. This might arise from customer's count on or chasing prominent or socially famous dentists rather than other competent service provision by the speciality clinic.

That means customers easily switch to other brand, and recommending the facility to others as long as known dentist is out there rather that the dental clinic/ company brand.

In general, this research revealed that there is a significant and positive relationship between all four customers-based brand equity dimensions and patient purchase intention. However, based on this research finding the entire brand equity dimensions were not equally vital. The four dimensions of customer-based brand equity namely brand awareness, perceived quality, brand association, and brand loyalty differ in the degree to which they enforce consumer purchase intention. That means according to the above findings perceived quality is strong predictor and then followed by brand association, brand awareness, and brand loyalty respectively.

5.3. Recommendations

Based on the findings of the study and conclusions made, the following possible recommendations were drawn:

Based on the findings of the study and conclusions made, the following possible recommendations were drawn:

- Apparently, perceived value of the dental medical service is a powerful predictor of medical revisit intentions, implying that customers in Addis Ababa are more sensitive to the quality of the service in relation to the price that they pay. Dental specialty clinic managers have to be meticulous about setting prices and take into consideration perceived value in their customer survey so as to make their marketing promotions more effective.

- Building customers' brand awareness/brand association contributes to increase the revisit intentions. Dental specialty clinic managers can use a news website, forums, short text message, emails, radio and other communication methods to keep their brand relationship with customers. It is generally regarded as a good idea to foster brand awareness/brand association of dental medical service markets such as students/ teenagers over a long time as they would be the potential customers in the future. In addition, the segmentations can guide the firm to better match customers' demands and reduce competition due to their recognition of the brand and medical services.

- Brand loyalty has the least effect on revisit intentions in this case. So, it is important to develop customers' brand loyalty to improve dental specialty clinic's revisit intentions.

Aiming to be a socially recognized company seems to make the best as it improves the brand's reputation, and simultaneously facilitates raising funds for expansion plan. Therefore, establishing more branches and a renowned brand will enhance brand loyalty in the cognitive section. Managers can cooperate with relevant industries and companies, using promotion, especially price discounts, to attract these customers to experience their brand. And for long term development, loyalty program for members should be built with E-commerce systems. Offering different service charges and promotions to different members at different booking/ medical appointment times can make customers more loyal and meanwhile bring more profit to the specialty clinics.

- The dental specialty clinics should focus on promotion policies to generate well-built image towards their brand as well as to capture the purchase intention of the consumers who think more regarding brand names and compete with other similar brands. The company also needs to know personality characteristics of its brands from the consumer's point of view and develop a brand image to match with the consumer's ideal self-concept. For the reason that customer's good brand image and/or brand association with the brand will encourage them to use the brand and satisfied by it.

- The study focused on the effect of customer-based brand equity dimensions on consumer purchase intention only from consumers' perspective and did not measure the perceptions from employees and owners' side. Hence, future researches need to consider both ways and identify differences from the consumers and employee's perspective.

References

AACAHB (2019). Addis Ababa City Administration Health Bureau, Urban development Indicators, Addis Ababa.

Aaker, D. A. (1991). *Managing Brand Equity: Capitalizing on the Value of a Brand Name*. New York: The Free Press.

Aaker, D.A. (1996). *Building Strong Brands*. New York: The Free Press, a Division of Simon & Schuster Inc.

Abbey, E. (2009). Determinants of brand equity: a verification approach in the beverage industry in Turkey, *Marketing Intelligence & Planning*, Vol. 23, No. 3, pp. 237- 248.

Abiy, A. (2009). Coffee Production and Marketing in Ethiopia, European. *Journal of Business and Management,* Vol.6, No.37, pp 109-121.

Akhtar, N. (2016). Impact of Brand Equity on Consumer Purchase Decision in L'Oreal Skincare Products. *International Review of Management and Business Research* Vol. 5 Issue.3 pp.19.

Alba J. & Hutchinson, N. (2008). The battle of brands in the Swedish market for consumer-packaged food: A cross-category examination of brand preference and liking, *Journal of Brand Management*, 16(1), pp. 63-79.

Balaji C. Krishnan (2001). Brand equity: is it more important in services? *Journal of Services Marketing,* 15(5),328-342.

Baldauf, V. (2003). What Drives Customer Equity? Marketing Management, 10 (1). 20-25.

Bawa, A. (2011) Measuring Customer-Based Brand Equity*, Journal of Consumer Marketing* 12(4):19

Berry, W. (2000). *Multiple Regressions in Practice. Sage University Paper Series on Quantitative Applications in the Social Sciences*, Series No. 07-050. Newbury Park, CA: Sage Publications, Inc.

Bryman, M. (2011). Encounter Satisfaction Versus Overall Satisfaction Versus Quality: The Customer's Voice Service Quality: New Directions in Theory and Practice. Thousand Oaks: Sage. In Rust, R.T., & Oliver, R.L. (Eds.), 72-94

Catherine, G. (2007). Factors that determine the corporate image of South African banking institutions. International Journal of Bank Marketing 13(3):12-17.

Chahal, L & Bala, P. (2012). Brand name strategies in the service sector, *The Journal of Consumer Marketing,* 12(4).42-50.

Chang, H.H and Liu, Y.M. (2009). *The Impact of Brand Equity on Brand Preference and SMEs*. 1st Ed., Edward Elgar Publishing, Cheltenham, England, UK.

Chang, M. (1998). Predicting Unethical Behavior: A Comparison of the Theory of Reasoned Action and the Theory of Planned Behavior, *Journal of Business Ethics*, Vol. 17, pp. 1825 1834.

Chaudhuri, M. & Holbrook, F. (2002). Significant components of service brand equity in healthcare sector, *International Journal of Health Care Quality Assurance*, 24(4). 343-362.

Chi, H., H. Yeh and Y. Yang (2009). The impact of brand awareness on consumer purchase intention: The mediating effect of perceived quality and brand loyalty. *Journal of International Management Studies,* 4(1): 135-144.

Chi, M. (2009). The relationships of customer satisfaction, customer loyalty, and profitability: an empirical study, *International Journal of Service Industry Management*, 4(6) 27-42

Chieng, M. & Goi, D. (2011). *Essentials of Marketing*.3rd ed., Pearson Education Ltd., Prentice hall.

Christodoulides, E. (2006). 'A process model of brand co creation', *Brand management and research implications*, Vol.16, No.2, pp.122-131.

Cobb-Walgren, W. (1998). The impact of hospital brand image on service quality, patient satisfaction and loyalty, *African Journal of Business Management* 5(15), 4873-4882.

Cooper, D. R. & Schindler, P. S. (2014). Business research methods. 8th ed. New York: Mcgraw Hill.

Cronbach, J. (1951). *Research design; Qualitative, Quantitative and Mixed methods Approaches*.3rd ed. California: Sage publication.

Dacin, R. & Smith, S. (2006). *Business research methods*.10th Ed. New Delhi: Tata McGraw Hill Publishing Company Inc.

DeChernatony L. and McDonald M. (2003). *Creating Powerful Brands: In Consumer, Service and Industrial Markets*. 3rd ed., Butterworth-Heinemann.

Dodds, R. (1991). Multiple regressions in psychological research and practice. *Psychological Bulletin,* 69(3), 161-182.

Dodds, W. (1991). Effects of price, brand, and store information on users' product evaluation. *Journal of Marketing Research*, 28(3): 307-319.

Farquhar, P. (1989). Managing Brand Equity, Marketing Research, Vol.1 (September), pp. 24-33.

Fayrene, Y. L., and Lee, G. (2011). Customer-Based Brand Equity: A Literature Review, Journal of Arts Science & Commerce, II, pp. 33-42.

FDRE, Central Statistical Agency (2013). Population projection of Ethiopia for all regions. At Woreda Level from 2014-2017, August 2013, Addis Ababa.

Fidell, L. (2001). *Social Research: Theory, Method and Techniques. London*: SAGE publication In.

Field, A. (2005). *Regression; Discovering statistics using SPSS*, 2, pp.143-217.

Field, A. (2009). Discovering Statistics using SPSS. London: Sage Publication Inc.

Gelman, A. and Hill, J. (2006).*Data Analysis Using Regression and Multilevel/ Hierarchical Models*. Cambridge University Press.

Gunawardane N. (2015). Impact of Brand Equity towards Purchasing Decision: A Situation on Mobile Telecommunication Services of Sri Lanka. *Journal of Marketing Management*: Vol. 3, No. 1, pp. 100-117.

Gunawardane N. R. (2015). Impact of Brand Equity towards Purchasing Decision: A Situation on Mobile Telecommunication Services of Sri Lanka. *Journal of Marketing Management*: Vol. 3, No. 1, pp. 100-117.

Hair, J., Bush, W. & Ortinua, B. (2000). *Multivariate Data Analysis.*6th ed. NJ, USA: Pearson Prentice Hall.

Hair, J.F., Anderson, R.E. and Tatham, R.L. (1998). *Multivariate Data Analysis*. 5[th]edition. Upper Saddle River, NJ: Prentice-Hall.

Hoekstra R., Morey R., Rouder J., & Wagenmakers E. (2014). 'Robust Misinterpretation of Confidence Intervals', Psychonomic Bulletin & Review 21, pp. 1157-1164.

Keller, K.L. (1993). Conceptualizing, measuring, and managing customer-based brand equity, *Journal of Marketing* 57(1): 1-22

Landau S. and Brian E. (2004) *A Handbook of Statistical Analyses Using SPSS*. London: Chapman & Hall/CRC Press LLC.

Pedhazur, E.J. (1982). *Multiple Regression and Behavioral Science*. Explanation and Prediction, 2.

Roozy E., Arastoo, M. A., & Vazifehdust, H. (2014). Effect of Brand Equity on Consumer Purchase Intention: *Indian Journal of Scientific Research*: 6 (1), pp.1-6.

Shoaib, M., Saima, U. and Asif, M. (n.d.). To Examine the Application and Practicality of Aaker's Brand Equity Model in Relation with Recurrent Purchases Decision for Imported Beauty Care Products (A Study of Female Customers" of Pakistan), *Journal of Managerial Sciences*, Vol. 3, No. 1, pp.115-139.

Suryadi D. (2015). The Impact of Brand Equity towards Purchase Intention on PT. X"s Candy. *Business Management Journal*, Vol. 3, No. 2, pp. 1-8.

Tabachnick, B. & Fidell, L. (2001). *Using Multivariate Statistics*. New York: Harper Collins College Publishers.

Annex 1: Survey Questionnaire

Questionnaire to Be Filled by Respondents

Dear Respondent,

My name is Elleni Hailu, a postgraduate student of St. Mary's University, School of Graduate Studies. I am conducting a study to assess the effects of brand equity on purchase intention among selected dental speciality clinics, Addis Ababa. The purpose of this questionnaire is to gather data regarding how the brand equity in terms of brand awareness, perceived quality, brand association and brand loyalty has an effect on consumer preference. Your honest and sincere responses for this questionnaire will play a great role in making the research successful. I assure you that all the responses will be treated confidentially and only be used for academic purpose. Participation is purely voluntary and no need to write your name.

I thank you in advance for offering your golden time and if you have any question, please feel free to contact me by the below contact:

    Elleni Hailu

    Phone: +251 986258419

    Email:shoniad21@gmail.com

I. General Information

Please mark [X] in the appropriate box to indicate your choice

1. Sex   ☐ Male   ☐ Female

2. Age (Years)   ☐ 18 – 30   ☐ 31 – 45   ☐ 46 – 60   ☐ > 60

3. Education   ☐ High School   ☐ Diploma   ☐ Degree   ☐ Masters
                   ☐ Others, please specify _____

4. Income   ☐ < 5,000 Birr   ☐ 5,000 – 10,000 Birr   ☐ >10,000 Birr

5. Experience   ☐ 1 – 5 years   ☐ 6 – 10 years   ☐ > 10 years

II. Questions Regarding Study Variables

Here under the questions with regard to the brand equity of selected dental speciality clinics and purchase intention, therefore, you are kindly requested to put "X" mark on the box which represents your degree of agreement.

1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree.

S/N	Dimensions -	Scale				
	Brand Awareness	1	2	3	4	5
1.	I take special initiative to know the speciality dental clinic brand					
2.	The speciality clinic brand is fixed on my mind					
3.	I can distinguish the speciality clinic brand from others					
4.	Company's promotional practices help me recognize this brand					
	Brand Association	1	2	3	4	5
5.	I take the dental speciality clinic as a prestige					
6.	The brand of the dental speciality clinic comes to my mind quickly.					
7.	I experience the sense of self-esteem using the dental medical service					
8.	The dental speciality clinic service suits my personality					
	Perceived Quality	1	2	3	4	5

		1	2	3	4	5
9.	The dental speciality clinic service is high quality					
10.	The dental speciality clinic service is reliable					
11.	The dental clinic's medical treatment makes me feel healthier					
12.	In comparison to its competitors, overall quality of the dental speciality clinic services must be of very good quality					
	Brand Loyalty	1	2	3	4	5
13.	The performance of the service brand satisfies me					
14.	I would recommend the speciality clinic's services to others					
15.	The brand offers better service to me than other competitors					
16.	The dental speciality clinic brand would be the first choice if I need dental medication.					
	Purchase Intention	1	2	3	4	5
17.	I would buy the dental medical service rather than any other dental clinic service available.					
18.	I am willing to use this company's medical service in the future					
19.	I am willing to recommend others to use this company's medical service					
20.	I will say positive words about this dental clinic service					

Many Thanks!!!

Annex 2: Survey Questionnaire

ጥናታዊ ጽሁፍ ቃለመጠይቅ

በመላሾች የሚሞላ ቃለ መጠይቅ

የተከበሩ መላሽ፣

ስሜ እሌኒ ኃይሉ ሲሆን የቅድስተ ማርያም ዩኒቨርሲቲ የድህረ- ምረቃ ትምህርት ቤት የድህረ-ምረቃ ተማሪ ስሆን በአዲስ አበባ በሚገኙ በተመረጡ ልዩ የጥርስ ህክምና ክሊኒኮች ላይ የብራንድ እቃዎች በግገር ፍላጎት ላይ ያላቸውን ተጽዕኖ ለመገምገም ጥናት እያካሄድኩ እገኛለሁ። የዚህ ቃለ መጠይቅ አላማ የብራንድ ግንዛቤ በተመለከተ ብራንድ እቃዎች የግገር ፍላጎት ላይ ተጽዕኖ እንዴት እንደሚያመጡ ለማወቅ መረጃ መሰብሰብ ነው። ለዚህ ከቃለ መጠይቁ የሚሰጡት እውነተኛ እና ታማኝነት ያለው መረጃ ይህንን ጥናታዊ ጽሁፍ ስኬታማ ለማድረግ ከፍተኛ አስተዋጽኦ አለው የሚሰጡት ሁሉም ምላሾች በሚስጥር የሚያዙና ለትምህርት አላማ ብቻ በጥቅም ላይ የሚውሉ መሆናቸውን ላረጋግጥልዎት እወዳለሁ። በዚህ ጥናታዊ ጽሁፍ ላይ መሳተፍ ሙሉ በሙሉ በፍቃደኝነት ላይ የተመሰረተ ሲሆን በቃለ መጠይቁ ላይ ስምዎትን መጻፍ አይጠበቅብዎትም።

ወርቃማ ጊዜዎን ስለሰጡኝ በቅድሚያ እያመሰገንኩዎት ማንኛውም ጥያቄ ካለዎት እባክዎትን በሚከተለው አድራሻ በኩልሊ ያናግሩኝ ወደኋላ አይበሉ።

እሌኒ ኃይሉ

ስልክ ቁ. +251 986258419

ኢሜል shoniad21@gmail.com

I. ጠቅላላ መረጃ

እባክዎ [X] ምልክት ምርጫዎትን ለማመልከት በትክክለኛ ሳጥኑው ስጥ ያስቀምጡ

1. ፆታ   ወንድ   ሴት

2. እድሜ (አመት)   ☐ 18 – 30 ☐ 31 – 45 ☐ 46 – 60 ☐>60

3. ትምህርት ደረጃ   ☐ ከፍተኛ ት/ቤት   ☐ ዲግሪ ☐ ማስተርስ

                     ☐ ሌላ፣ እባክዎ ይግለፁ_____

4. ገቢ   ☐ <5,000 ብር ☐ 5,000 – 10,000 ብር ☐ >10,000 ብር

5. የስራል ምድ   ☐ 1-5 አመት   ☐ 6-10 አመት   ☐>10 አመት

II. የሚጠኑ ቫሪያ ብሎችን የሚያመለከቱ ጥያቄዎች

ከዚህ በታች የተመረጡ ልዩ ክሊኒኮች ብራንድ እቃ እና የግብር ፍላጎት በተመለከት ጥያቄዎች ቀርበዋል፡፡ ስለዚህ የመስማማት ደረጃዎትን የሚገልጽ ምርጫ ለማመልከት የ "X" ምልክት እንዲያስቀምጡ በአክብሮት እንጠይቅዎታለን፡፡

1 = በከፍተኛ ሁኔታ እስማማለሁ፣ 2 = እስማማለሁ፣ 3 = ገለልተኛ, 4 = አልስማማም፣ 5 = በከፍተኛ ሁኔታ አልስማማም

አቅጣጫዎች	ስኬል				
የብራንድ ግንዛቤ	1	2	3	4	5
የልዩ የጥርስ ህክምና ክሊኒክ ብራንድ ለማወቅ ከፍተኛ ተነሳሽነት አለኝ					
የልዩ ክሊኒክ ብራንድ በአእምሮዬ ላይ የታተመ ነው					
ልዩ የጥርስ ህክምና ክሊኒክ ብራንድ እቃዎች ከሌሎች መለየት እችላለሁ					
የኩባንያው የማስታቂያ ተግባር ይህንን ብራንድ በደንብ እንድገነዘብ አስችሎኛል					
ከብራንድ ጋር የተያያዘ	1	2	3	4	5
ልዩ የጥርስ ህክምና ክሊኒኮች የተለየ አድርጌ እመለከታቸዋለሁ					
የልዩ የጥርስ ህክምና ክሊኒክ ብራንድ ወዲያውኑ ወደአእምሮዬ ይመጣል					
የጥርስ ህክምና አገልግሎት ሳግኝ ከፍተኛ የራስ መተማመን ተለማምጃለሁ					
የጥርስ ልዩ ህክምና ክሊኒክ አገልግሎት ለማንነቴ እርካታ ይሰጠኛል					
በልምድ የሚገኙ ብቃቶች	1	2	3	4	5
የልዩ የጥርስ ህክምና ክሊኒክ አገልግሎት ከፍተኛ ጥራት አለው					

የልዩ የጥርስ ህክምና ክሊኒክ አገልግሎት አስተማማኝ ነው					
የጥርስ ህክምና ክሊኒክ ውስጥ የሚሰጡ ህክምና ጤነኛ ያደርጉኛል					
ከተወዳዳሪ የህክምና ክሊኒኮች አንፃር አጠቃላይ የጥርስ ህክምና ክሊኒክ አገልግሎት ጥራት ከፍተኛ ደረጃ ጥራት ያለው መሆን አለበት					
የብራንድ ታማኝነት	1	2	3	4	5
የብራንድ አገልግሎት አፈጻጸም ያስደስተኛል					
ልዩ የጥርስ ህክምና ክሊኒክ አገልግሎት ሌሎችም እንዲያገኙ እመክራለሁ					
ብራንዱ ከእኔ ይልቅ ለሌሎች ተወዳዳሪዎች የተሻለ አገልግሎት ይሰጣል					
የጥርስ ህክምናአ ገልግሎት ስፈልግ የልዩ የጥርስ ህክምና ክሊኒክ ብራንድየ መጀመሪያ ምርጫዬ ነው					
የግዢ ፍላጎት	1	2	3	4	5
ከሌሎች የጥርስ ህክምና አገልግሎቶች በላይ የጥርስ ህክምና አገልግሎት መግዛት እፈልጋለሁ					
ወደፊት የዚህን ኩባንያ የህክምና አገልግሎት ለማግኘት ፍቃደኛ ነኝ					
ሌሎች የዚህን ኩባንያ አገልግሎት እንዲያገኙ ለመምከር ፍቃደኛ ነኝ					
ስለዚህ የጥርስ ህክምና ክሊኒክ አገልግሎት አውንታው አስተሳሰብ አለኝ					

በጣም አመሰግናለሁ!