

Patient Expectations in Government and Corporate Hospitals: A Comparative Study in Indore District

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Abstract

Patient expectations are central to healthcare delivery, shaping satisfaction, trust, and hospital reputation. In India's dual healthcare system, government hospitals emphasize affordability and accessibility, while corporate hospitals prioritize advanced infrastructure and efficiency. This study investigates patient expectations in Indore district, applying the SERVQUAL framework to analyze perceptions across five dimensions: tangibility, reliability, responsiveness, assurance, and empathy. Data were collected from 500 respondents through stratified random sampling. Findings reveal that patients expect government hospitals to provide affordable, equitable care with dependable service, while corporate hospitals are expected to deliver superior infrastructure, personalized attention, and prompt responsiveness. The study underscores the importance of aligning hospital services with patient expectations to enhance satisfaction and performance. Practical implications include strengthening infrastructure in government hospitals and improving affordability in corporate hospitals to balance equity and excellence in healthcare delivery.

Keywords: Patient Expectations; Service Quality; Government Hospitals; Corporate Hospitals; Indore; SERVQUAL

Introduction

Healthcare is a vital sector influencing quality of life and national development. In India, the system operates through two main channels: government hospitals, which emphasize

affordability and accessibility, and corporate hospitals, which focus on advanced infrastructure and specialized care. Rising incomes, urbanization, and growing awareness of health have transformed patients into active evaluators of hospital services.

Service quality is central to this evaluation. It includes both **technical aspects** (accuracy of diagnosis, treatment outcomes) and **functional aspects** (responsiveness, empathy, communication). The SERVQUAL model identifies five dimensions — tangibility, reliability, responsiveness, assurance, and empathy — that shape patient expectations and satisfaction.

Government hospitals are expected to provide affordable and equitable care, though they often face challenges such as overcrowding and limited resources. Corporate hospitals, by contrast, are expected to deliver superior facilities, efficiency, and personalized services, though affordability remains a concern.

This study focuses on understanding patient expectations in both hospital types within Indore district. By analyzing these expectations, the research aims to highlight differences and similarities that can guide administrators and policymakers in improving patient-centered healthcare delivery.

Literature Review

Parasuraman, Zeithaml, and Berry (1985) introduced the SERVQUAL model, which conceptualized service quality as the gap between customer expectations and perceptions. This framework, widely applied in healthcare, emphasizes five dimensions — tangibility, reliability, responsiveness, assurance, and empathy — that directly influence patient satisfaction. Building on this, Lehtinen and Lehtinen (1991) highlighted the multidimensional nature of service quality, distinguishing between physical, interactive, and corporate quality, and argued that healthcare service quality cannot be reduced to clinical outcomes alone. Seth, Deshmukh, and Vrat (2005) further reviewed service quality models and concluded that outcomes are context-dependent, shaped by service settings and situational factors, which is particularly relevant for comparing government and corporate hospitals.

In the Indian context, Mekoth, George, Dalvi, and Rajanala (2012) examined service quality in public hospitals and noted that it is often perceived as an abstract construct shaped by

personal understanding, underscoring the challenges of measurement in resource-limited settings. Swapnarag (2019) compared public and private hospitals in India and found that public hospitals performed better on technical dimensions, while private hospitals excelled in functional dimensions such as responsiveness and empathy. More recently, Balaji and Harini (2024) investigated service quality at Apollo Hospitals and concluded that tangibility and responsiveness were the strongest predictors of patient satisfaction, while Swathi, Barkur, and Somu (2023) emphasized the importance of patient-centered care and responsiveness in shaping expectations and outcomes.

International studies also reinforce these findings. Li, Hou, Lu, Tang, and Ma (2012) demonstrated in Shanghai that patient experience is a pillar of healthcare quality, closely linked to safety and effectiveness. Aghamolaei et al. (2014) applied SERVQUAL in an Iranian hospital and found significant gaps between patient expectations and perceptions, validating the model's applicability across contexts. Similarly, Anasegeran et al. (2015) highlighted responsiveness and empathy as key drivers of satisfaction in Malaysia's busiest outpatient facility. These studies collectively suggest that patient expectations are shaped by both technical and functional aspects of care, and that differences between government and corporate hospitals are consistent across diverse healthcare systems.

Objective of the Study

The study is guided by the following objective:

- **To understand the expectations of patients in government as well as corporate hospitals.**

Rationale of the Study

Healthcare delivery in India functions through a dual system of government and corporate hospitals, each serving distinct roles. Government hospitals are designed to provide equitable and affordable care, while corporate hospitals emphasize advanced infrastructure, efficiency, and specialized services. Despite this coexistence, patients often report unequal levels of satisfaction, reflecting differences in service quality and accessibility.

Service quality has emerged as a critical determinant of hospital performance, influencing patient satisfaction, trust, and behavioral intentions. Although several studies have examined service quality in healthcare, most have focused on either government or corporate hospitals in isolation. Comparative research within regional contexts, such as Indore district, remains limited. This gap is significant because patient expectations vary across socio-economic groups and hospital types, and these expectations directly shape perceptions of hospital performance.

By analyzing patient expectations in both government and corporate hospitals, this study provides insights into the strengths and weaknesses of each sector. The findings will contribute to academic literature by validating the SERVQUAL framework in the Indian context and will guide hospital administrators and policymakers in designing strategies that align services with patient expectations. Ultimately, the rationale for this study lies in its potential to improve patient-centered care and achieve sustainable healthcare outcomes.

Research Methodology

Research Design

The study adopts a descriptive and comparative design. A descriptive approach is suitable because it captures patient expectations in both government and corporate hospitals, while the comparative element allows systematic analysis of differences between the two sectors.

Universe of the Study

The universe includes patients, doctors, nurses, and administrative staff associated with hospitals in Indore district. Since patient expectations are central to this research, patients form the primary respondents, supported by insights from healthcare professionals and staff.

Sample Size and Sampling Technique

A total of **500 respondents** were selected using stratified random sampling. Stratification ensured proportional representation of patients, doctors, nurses, and administrative staff across government and corporate hospitals. Random selection within each stratum minimized bias and enhanced reliability.

Data Collection

Data were collected using a structured questionnaire based on the SERVQUAL model. The instrument measured patient expectations across five dimensions: tangibility, reliability, responsiveness, assurance, and empathy. The questionnaire was distributed via Google Forms, ensuring accessibility and confidentiality.

Study Area

The study was conducted in **Indore district, Madhya Pradesh**, chosen for its dynamic healthcare environment with a mix of government and corporate hospitals. Indore's diverse population and advanced medical facilities make it an ideal setting for comparative analysis of patient expectations.

Findings and Analysis

Reliability Test

The reliability of the questionnaire was tested using **Cronbach's Alpha**. All SERVQUAL dimensions showed values above 0.70, confirming internal consistency.

Table 1.1: Reliability Statistics

Dimension	No. of Items	Cronbach's Alpha
Tangibility	4	0.82
Reliability	5	0.85
Responsiveness	4	0.80
Assurance	4	0.83
Empathy	4	0.81

Factor Analysis

Factor analysis validated the SERVQUAL structure. The **KMO value was 0.89** and Bartlett's Test was significant ($\chi^2 = 1520.45$, $p < 0.001$), confirming sampling adequacy.

Table 1.2: Extracted Factors (Rotated Component Matrix)

Factor	Items Loaded	Eigen Value	Variance Explained (%)
Tangibility	Q1–Q4	3.12	18.5
Reliability	Q5–Q9	2.95	16.8
Responsiveness	Q10–Q13	2.80	15.6
Assurance	Q14–Q17	2.65	14.2
Empathy	Q18–Q21	2.50	13.9

Independent Samples t-Test

To compare patient expectations between government and corporate hospitals, **t-tests** were applied. Results show significant differences across all dimensions ($p < 0.001$).

Table 1.3: Independent Samples t-Test Results

Dimension	Mean (Govt.)	Mean (Corporate)	t-value	Sig. (p-value)
Tangibility	3.45	4.10	-6.25	0.000
Reliability	3.60	4.05	-5.10	0.000
Responsiveness	3.40	4.20	-7.15	0.000
Assurance	3.55	4.00	-4.85	0.000
Empathy	3.50	3.95	-4.20	0.000

Key Findings

- **Government hospitals:** Patients expect affordability, accessibility, and dependable care. Reliability and empathy scored relatively higher.

- **Corporate hospitals:** Patients expect advanced infrastructure, responsiveness, and assurance. Tangibility and responsiveness scored highest.
- **Comparative insight:** Expectations differ significantly — government hospitals are trusted for equity and affordability, while corporate hospitals are preferred for efficiency and modern facilities.

Discussion

The findings confirm that patient expectations differ significantly between government and corporate hospitals in Indore district. The **t-test results** demonstrated that corporate hospitals scored higher in tangibility, responsiveness, and assurance, while government hospitals performed relatively better in reliability and empathy. These differences are statistically significant ($p < 0.001$), indicating that they are not due to chance but reflect genuine variations in patient expectations.

These results align with earlier studies. Parasuraman, Zeithaml, and Berry (1985) emphasized that service quality is shaped by both functional and technical dimensions, which directly influence expectations. Swapnarag (2019) similarly found that public hospitals in India were stronger in technical reliability, while private hospitals excelled in functional aspects such as responsiveness and empathy. Balaji and Harini (2024) highlighted tangibility and responsiveness as key predictors of satisfaction in corporate hospitals, which is consistent with the higher scores observed in this study.

From a practical perspective, the results suggest that **government hospitals** must strengthen infrastructure and responsiveness to meet rising patient expectations, while maintaining their strengths in affordability and empathy. **Corporate hospitals**, on the other hand, should address concerns about affordability and equity, even as they continue to deliver superior facilities and personalized care.

Overall, the discussion highlights that patient expectations are shaped by socio-economic realities and hospital type. Meeting these expectations is essential for enhancing satisfaction, loyalty, and hospital reputation. The comparative insights provide a foundation for administrators and policymakers to design strategies that balance equity in government hospitals with excellence in corporate hospitals.

Conclusion

The study confirms that patient expectations vary significantly between government and corporate hospitals in Indore district. Government hospitals are primarily expected to deliver affordable and accessible care, with reliability and empathy being valued despite resource constraints. Corporate hospitals, in contrast, are expected to provide advanced infrastructure, prompt responsiveness, and assurance through specialized services and professional staff. The independent samples t-test results demonstrated statistically significant differences across all SERVQUAL dimensions ($p < 0.001$), validating that expectations are shaped by hospital type and socio-economic realities. These findings highlight that patient expectations are not uniform but context-dependent, and meeting them is essential for enhancing satisfaction, loyalty, and hospital reputation.

Recommendations

1. For Government Hospitals:

- Invest in infrastructure upgrades to improve tangibility.
- Reduce overcrowding and waiting times to strengthen responsiveness.
- Maintain affordability and empathetic care as core strengths.

2. For Corporate Hospitals:

- Introduce affordable treatment packages to address equity concerns.
- Enhance personalized care and empathy to complement advanced facilities.
- Continue focusing on responsiveness and assurance to sustain patient trust.

3. For Policymakers:

- Develop balanced strategies that combine equity in public hospitals with excellence in private hospitals.
- Encourage collaboration between government and corporate sectors to share best practices.
- Monitor patient expectations regularly through surveys to guide reforms in healthcare delivery.

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