

The Influence of The Extended Pharmaceutical Marketing Mix on Customer Satisfaction in Pharmacies Jember District

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Submitted : 22th November 2024 ; Accepted : 8th October 2025

Doi : <https://doi.org/10.36858/jkds.v13i2.818>

ABSTRACT

Patient satisfaction is an important indicator of the quality of health care service including pharmaceutical services. Currently, patients are dissatisfied with prescription pharmaceutical service in pharmacies, so that marketing strategy efforts must confront to increase patient satisfaction. However, previous studies still used a general marketing mix (4P) concept there was no research related to the pharmaceutical industry about the development of marketing mix into 7P and there has been no study that discussed Influence between factors in 7P because previous studies only used the correlation observational design seeking for relationship between two or more variables. The current research was conducted to investigate the influence of Extended Pharmaceutical Marketing Mix (product, price, place, promotion, pharmacist, process and physical evidence) on customer satisfaction at pharmacies in Jember. The study has been a practical Developed Cross-sectional, realized in 9 pharmacies and through structured questionnaires answered by 405 consumers of it results were carried out a SPC PLS 4.0 analysis. Results indicated that the relationship between the dimensions of EPMix and Patient Satisfaction were positive and significant (T-Statistic > 1.96, P-value < 0.05). In addition, there were significant associations between some marketing mix factors (Product-price; Promotion-price; Professional personnel-service process and Service process-product). The drug price has the largest satisfaction impact (0.206 Coefficient, T-Statistic = 3.895, P-value = 0) and the environment had the smallest (0.122 Coefficient T-Statistic = 2.12 P-value = 0.034). Finally, the pharmaceutical marketing mix service quality and pricing could enhance patient satisfaction. Pharmacies are encouraged to increase their price transparency and to support the optimization of service processes, particularly involving patients and pharmacists to raise customer trust and loyalty.

Keyword: Extended Pharmaceutical Marketing Mix, Consumer Satisfaction, Pharmacy Services, Marketing Strategies

ABSTRAK

Kepuasan pasien merupakan indikator penting kualitas layanan kesehatan, termasuk layanan farmasi. Saat ini, pasien merasa tidak puas dengan layanan farmasi resep di apotek, sehingga upaya strategi pemasaran harus difokuskan untuk meningkatkan kepuasan pasien. Namun, studi sebelumnya masih menggunakan konsep pemasaran campuran (4P) secara umum, dan belum ada penelitian terkait industri farmasi tentang pengembangan pemasaran campuran menjadi 7P. Selain itu, belum ada studi yang membahas pengaruh antara faktor-faktor dalam 7P, karena studi sebelumnya hanya menggunakan desain observasional korelasi untuk mencari hubungan antara dua atau lebih variabel. Penelitian ini dilakukan untuk menyelidiki pengaruh Extended Pharmaceutical Marketing Mix (produk, harga, tempat, promosi, apoteker, proses, dan bukti fisik) terhadap kepuasan pelanggan di apotek-apotek di Jember. Studi ini merupakan penelitian praktis dengan desain cross-sectional, dilaksanakan di 9 apotek dan melalui kuesioner terstruktur yang diisi oleh 405 konsumen. Hasilnya dianalisis menggunakan SPC PLS 4.0. Hasil menunjukkan bahwa hubungan antara dimensi EPMix dan Kepuasan Pasien bersifat positif dan signifikan (T-Statistic > 1.96, P-nilai < 0.05). Selain itu, terdapat hubungan signifikan antara beberapa faktor pemasaran (Produk-harga; Promosi-harga; Tenaga profesional-proses layanan dan Proses layanan-produk). Harga obat memiliki dampak kepuasan terbesar (Koefisien 0,206, T-Statistic = 3,895, P-value = 0) dan lingkungan memiliki dampak terkecil (Koefisien 0,122, T-Statistic = 2,12, P-value = 0,034). Akhirnya, kualitas layanan dan penetapan harga dalam bauran pemasaran farmasi dapat meningkatkan kepuasan pasien. Apotek didorong untuk meningkatkan transparansi harga dan mendukung optimasi proses layanan, terutama yang melibatkan pasien dan apoteker, guna meningkatkan kepercayaan dan loyalitas pelanggan.

Kata Kunci: Bauran Pemasaran Kefarmasian, Kepuasan Pasien, Pelayanan Kefarmasian, Strategi Pemasaran

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How to Cite : Rama, R. P., Candra Bumi, & Khoiron. The Influence of The Extended Pharmaceutical Marketing Mix on Customer Satisfaction in Pharmacies Jember District. *Jurnal Kesehatan Dr. Soebandi*, 13(2). <https://doi.org/10.36858/jkds.v13i2.818>

Introduction:

Patient satisfaction depicts the extent to which expectations are matched by the actual experiences of patients with health services (Ayele et al., 2020), which is one of the indicators for quality assessment of health facilities, including in a pharmacy. Some studies reported the low level of patient satisfaction toward pharmaceutical services in Indonesia: 58.08% of patients were disappointed with pharmaceutical services (Akhmad et al., 2019), in Tegal City 48% of consumers expressed disappointment (Umar & Jklr, 2020) and in Malang City most patients stated they were not satisfied with the quality of pharmacy services (Amir Parumpu et al., 2022; Narulita & Agus Santoso, 2021). Only a portion of patients were satisfied with pharmacy services in Jember Regency (Agustina et al., 2021), while the implementation of that study only ranged from 40–60% of patient visits.

Intense competition in the pharmaceutical industry (Syifaiddin et al., 2023), advances in information technology that make pharmacy customers wiser in drug purchases (Fitria et al., 2023), and the existence of a National Health Insurance program (JKN) since 2014 have resulted in significant changes to the business environment of pharmacies (Hijazi et al., 2021). These difficulties require pharmacies to develop their marketing and services in order to satisfy and retain patients.

The marketing mix and the related variables are indeed closely linked. The 4P pharmaceutical marketing concept (product, price, place and promotion) was introduced by Borden (1964) (Hailu et al., 2021). Nonetheless, as service and its provision, such as in pharmacy way of operation change over time the 4P is no longer able to fully encapsulate complex pharmacist services that are highly dependent upon customer dependence on personnel characteristics, process quality, physical evidences of service. Therefore, Lovelock et al. extended the concept by proposing three more elements of Personnel (Pharmaceutical Personnel), Process

(Service Process Pharmaceutical) and Physical evidence, into 7P (Muliwana & Suyanto, 2020; Prasetyawan et al., 2024).

The extension of the marketing mix into 7P need to be bolstered as doing so would provide attention to more holistic aspect of human and service that significantly contribute to patient satisfaction in pharmacy. In such societies where the expected service and patient perception is influenced by cultural and socioeconomic differences, to apply 7P model can be a better applicable approach to achieve improvement in service quality and patients confidence. This development will help ensure that there is a closer alignment between pharmacy performance, consumer demand and on-going competitiveness in local health service markets. Jember Regency is a regency of East Java, Indonesia with an area of 329 km² the Jember city is its capital. This diversity also affects the heterogeneity in consumer requirements and preference in pharmacies, which is a new area saturated with pharmaceutical service quality and marketing activities.

Some previous studies found a correlation between the marketing mix and patient satisfaction, but most only focused on the traditional marketing mix (product, price, place, and promotion), without including the other 3Ps (pharmaceutical personnel, pharmaceutical service process, and physical evidence). Previous studies that examined the marketing mix in general have not adequately explored the pharmaceutical marketing mix in pharmacies. Research to date has also merely emphasized certain aspects of the marketing mix without addressing the interactions and aggregate effects between elements.

The purpose of this study was to conduct a comprehensive assessment of the elements of the Extended Pharmaceutical Marketing Mix that affect customer satisfaction in pharmacies. This study also examines how pharmaceutical products affect prices, how promotion affects drug costs, the effect of personnel on the service process, and how the service process affects the pricing of pharmaceutical products.

Methods:

This study used a quantitative approach with a cross-sectional design. This research was conducted in nine pharmacies in Jember Regency, conducted from September to November 2024.

This study was conducted in accordance with ethical standards and was approved by the ethics committee of the Faculty of Dentistry at the University of Jember with ethical clearance number 2824/UN25.8/KEPK/DL/2024. Prior to data collection, informed consent was obtained from all participants, ensuring that they were fully aware of the purpose of the study and their right to withdraw at any time without consequence. The participants were assured of the confidentiality of their answers and the anonymity of their identity in the reporting of the research results. The study adhered to ethical guidelines to protect the rights and welfare of all individuals involved, thus promoting integrity and accountability in the research process.

Population and Sample

The number of populations cannot be known with certainty (infinite population). The population of this study were consumers who visited pharmacies with inclusion criteria 1) Have a complete and valid operational license, issued through the Risk-based Online Single Submission (OSS) system. 2) The pharmacy has been established for at least 5 years, 3) Each pharmacy has at least 1 pharmacist and 2 pharmaceutical technical personnel. According to (Brimantari et al., 2023), sample calculations using the Lemeshow formula can be applied to determine the sample size when the total population cannot be known with certainty.

$$n = \frac{Z_{1-\frac{\alpha}{2}}^2 \cdot P(1 - P)}{d^2}$$

Notes:

n = Number of Samples

Z = Z score at 95% confidence = 1.96

P = Maximum estimate

d = Error Rate

$$n = \frac{1,96^2 \cdot 0,5 (1 - 0,5)}{0,05^2}$$

$$n = \frac{1,96^2 \cdot 0,5 \cdot 0,5}{0,0025}$$

$$n = \frac{3,8416 \cdot 0,25}{0,0025}$$

$$n = 384.16$$

From the formula, the minimum sample size is 385 respondents, sampling technique proportional visits to each pharmacy. In this study included 405 respondents

Research Tools/Instruments

This study used a questionnaire on demographic data, Extended Pharmaceutical Marketing Mix, and customer satisfaction in pharmacies. The validity test showed that the questionnaire was valid with a loading factor value >0.7 and $AVE > 0.5$. The reliability test shows that the questionnaire is reliable with a composite reliability value of > 0.7 , ensuring consistency and stability of measurement.

Analysis Technique

Multivariate analysis using SEM PLS (Structural Equation Modeling - Partial Least Squares) version 4 to analyze the determinants of customer satisfaction and the effect of extended pharmaceutical marketing mix on customer satisfaction

Results:

Individual Characteristics of Respondents

Table 1. Individual Characteristics Distribution of Respondents

Individual Characteristics	Number (n)	(%)
Age		
12 - 25 years (Teenagers)	75	18,5
26 - 45 years (Adults)	279	68,9
>45 years (Elderly)	51	12,6
Gender		
Female	208	51,4
Male	197	48,6

Individual Characteristics	Number (n)	(%)
Marital Status		
Unmarried	114	28,1
Married	247	61,0
Divorced	44	10,9
Latest Education		
Graduated from elementary school/equivalent	33	8,1
Graduated from junior high school/equivalent	97	24,0
Graduated from high school/equivalent	248	61,2
Graduated from university	27	6,7
Occupation		
Self-employed	161	39,8
Private employee	173	42,7
Civil Servant	21	5,2
Student	50	12,3
Tribe		
Pandalungan	172	42,5
Java	187	46,2
Madura	46	11,4

As per the data (Table 1), the majority of respondents are aged between 26–45 years old, female, married, have a high school education level, work as private employees and most likely fall into Javanese ethnicity. This is an overview of what we can believe to be the potential target market for our pharmacies around Jember based on this respondent profile. The pharmacies can target the marketing strategies to be directed at the women of 26–45 years old with high school level of education and working in private sector. The data (table 2) shows that most customers visit the pharmacies 2–3 times a month, travel a short distance, and purchase medicines. The high frequency of visits and close proximity indicate that these pharmacies are the first choice for daily health needs for the neighbouring communities. This

finding indicates a large market potential for healthcare products and services in the region. Pharmacies can leverage this data to develop loyalty programmes, product promotions, or consultation services that are more relevant to customer needs.

Table 2. Characteristics of customer visits at the pharmacy

Individual Characteristics	Number (n)	(%)
Visit Frequency		
Every 2-3 months/more	75	18,5
2 - 3 times a month	279	68,9
1 time a month	51	12,6
Time Travelled to Pharmacy		
Short (≤ 10 minutes)	256	63,2
Long (> 10 minutes)	149	36,8
Type of Products purchased		
Medicines	297	73,3
Vitamins/supplements	51	12,6
Medical equipment	41	10,1
Others	16	4,0

Partial Least Square (PLS) Analysis Results

PLS analysis used in the current study was undertaken in three steps. Initially, the measurement model evaluation was done to check the validity and reliability of latent constructs. The second is the structural model, which examines the relationship between constructs. Then, the hypothesis testing suggested was performed.

Measurement Model Analysis (Outer Model)

Measurement Model Analysis (Outer Model) is conducted to confirm the validity and reliability of instruments that will be used. To measure the validity, convergent validity and discriminant validity tests are tested. It is based on the loading factor parameter (must be > 0.7) and by using the value of AVE (Average Variance Extracted) > 0.5 for Convergent Validity Analysis. The value of loading factor can be seen in figure 1, loading factor of this

model is greater than 0.7 and AVE also above can be seen in table 3 that all value are greater than 0.5, means that this model has met the requirements of Convergent Validity. In addition to this in Discriminant Validity by the cross-loading method, it is found that all Cross Loading values are more than 0.70 so this model sufficiently met discriminant validity criteria and overall fulfills the Validity test.

Table 3. Average Variance Extracted (AVE) Values

Variabel	AVE
(X1) Pharmaceutical Products	0,646
(X2) Drug Price	0,634
(X3) Place	0,674
(X4) Promotion	0,662
(X5) Pharmaceutical personnel	0,636
(X6) Pharmaceutical service process	0,636
(X7) Physical Evidence	0,647
(Y) Consumer Satisfaction	0,641

The Reliability test is utilized to determine whether measurement tools and instruments produce consistent and stable results. The Composite Reliability (CR) index is used in this study to assess the reliability of variables. CR Values above 0.7 is usually acceptable which means that the variables are reliable as it measures what it is supposed to measure. Table 4 displays that all CR of both constructs are above 0.7 for all variables in this study. This result indicates that the measurement instruments in this research have a good reliability so that it can be used to get consistent and accurate repeatable data. We can thus say that the variables are reliable enough to be subjected to analysis

Table 4. Composite Reliability Values

Variabel	Composite reliability (rho _a)
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(X1) Pharmaceutical Products	0,877
(X2) Drug Price	0,864
(X3) Place	0,882
(X4) Promotion	0,875
(X5) Pharmaceutical personnel	0,858
(X6) Pharmaceutical service process	0,865
(X7) Physical Evidence	0,865
(Y) Consumer Satisfaction	0,932

Structural Model Analysis (Inner Model)

The Godness of Fit test is a measure of how well the PLS SEM model developed can be seen through the R-Square, F-Square, and Q2 Predictive values. From table 5 (R-Square value) it can be seen that Pharmaceutical Products (X1) are influenced by the Pharmaceutical Service Process (X6) by 12.2% and the remaining 87.8% is influenced by other factors. While the pharmaceutical service process (X6) is influenced by pharmaceutical personnel (X5) by 12.8%, the rest (87.2%) is influenced by other factors. Then the drug price (X2) is influenced by promotion and pharmaceutical products by 9.9%, the remaining 90.1% is influenced by other factors. Consumer satisfaction is influenced by the 7P EPMM by 63.4%, while 36.6% is influenced by other factors outside this study.

Table 5. Composite Reliability Values

Variabel	R-square
(X1) Pharmaceutical Products	0,122
(X2) Drug Price	0,099
(X6) Pharmaceutical service process	0,128
(Y) Consumer Satisfaction	0,634

The inverse of the model is determined using effect size (f²). The f² includes 0.02 (small), 0.15 (moderate), and 0.35 (large) [49]. The results in Table 6 indicate that Variable (X1) Pharmaceutical Products has an effect on Variable (Y) Consumer Satisfaction of 0.095

where the category is weak and also on Variable (X2) Drug Prices with an influence of 0.053 which is quite infant too. Table 6. Variable (X2) Drug Price affects Variable (Y) Consumer Satisfaction of 0.073 (weak). Place variable (X3) has an effect on consumer satisfaction variable (Y) of 0.029 (weak). This means that Variable (X4)

Promotion contributes to the influence of 0.103 (weak category) to the influence on Variable (Y) Consumer Satisfaction and contribute in influencing 0.030 (weak category) to Variable (X2) Drug Price. The effect of Variable (X5) Pharmaceutical personnel to Variable (Y) Consumer Satisfaction is 0.061 (weak), and the effect of Variable (X5) Pharmaceutical personnel to Variable (X6)

Pharmaceutical service process is 0.146 (weak). Variable (X6), pharmaceutical service process has an influence to Variable (Y) consumer satisfaction 0.052 (weak), and to Variable (X1) product 0.139 (weak). It means, Variable (X7) Physical Evidence affects Variable (Y) Consumer Satisfaction by 0.027 (Weak).

Q2 Predictive Relevance indicates how well we can predict the value of an endogenous latent variable (dependent variable) from the value of exogenous latent variables (independent variables) using the PLS model built. This means Q2 evaluates the model's generalization on new data. Referring to the result of the data processing (table 7), values of independence predictive relevance > 0 for variable (X1)

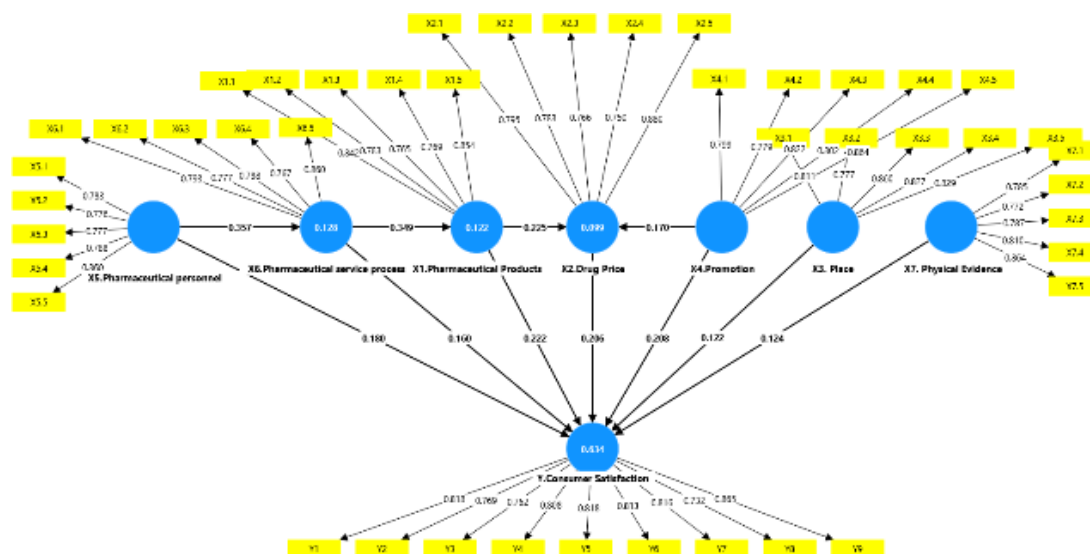


Figure 1. The SEM PLS EPMM Model of Consumer Satisfaction

Table 6. F-Square Values

Variabel	(Y) Consumer Satisfaction	(X1) Pharmaceutical Products	(X2) Drug Price	(X6) Pharmaceutical service process
(X1) Pharmaceutical Products	0,095		0,053	
(X2) Drug Price	0,073			
(X3) Place	0,029			
(X4) Promotion	0,103		0,030	
(X5) Pharmaceutical personnel	0,061			0,146

Variabel	(Y) Consumer Satisfaction	(X1) Pharmaceutical Products	(X2) Drug Price	(X6) Pharmaceutical service process
(X6) Pharmaceutical service process	0,052	0,139		
(X7) Physical Evidence	0,027			
(Y) Consumer Satisfaction	0,095		0,053	

Pharmaceutical Products is $0.076 > 0$, in variable (X2) Drug Price is $0.058 > 0$, in variable (X6) Pharmaceutical service process is $0.078 > 0$ and in variable (Y) Consumer Satisfaction as much 3,99. The proportions of variance in the data that can be accounted for by the research model is 7.6%, 5.8%, 7.8% and 39.9%. The rest 92.4%, 94.2%, 92.2 and 60.1% explained by variable that not included in this study Therefore, this study can be categorized as a study that has Goodness of Fit.

Table 7. Construct Crossvalidated Redundancy Values

Variabel	Q^2 (=1-SSE/SSO)
(X1) Pharmaceutical Products	0,076
(X2) Drug Price	0,058
(X6) Pharmaceutical service process	0,078
(Y) Consumer Satisfaction	0,399

Table 8. The Relationship Between Variables Test Results

Variabel	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics (O/STDEV)
(X1) Pharmaceutical Product -> (X2) Drug Price	0,225	0,227	0,071	3,179
(X1) Pharmaceutical Products -> (Y) Consumer Satisfaction	0,222	0,222	0,049	4,490
(X2) Drug Price -> (Y) Customer Satisfaction	0,206	0,204	0,053	3,895
(X3) Place -> (Y) Customer Satisfaction	0,122	0,122	0,053	2,307
(X4) Promotion -> (X2) Drug Price	0,170	0,170	0,075	2,285
(X4) Promotion -> (Y) Customer Satisfaction	0,208	0,209	0,041	5,057
(X5) Pharmaceutical personnel -> (X6) Pharmaceutical service process	0,357	0,359	0,061	5,839
(X5) Pharmaceutical personnel -> (Y) Customer Satisfaction	0,180	0,180	0,051	3,548
(X6) Pharmaceutical service process -> (X1) Pharmaceutical Products	0,349	0,351	0,062	5,606
(X6) Pharmaceutical service process -> (Y) Customer Satisfaction	0,160	0,160	0,045	3,547
(X7) Physical Evidence -> (Y) Customer Satisfaction	0,124	0,125	0,058	2,144

The Relationship Between Variables Test

The rule of the hypothesis acceptance that is if $T\text{-Argument} > 1,96$ and $P\text{-Value} < 0.05$ Therefore H_a Accepted and H_o refused, according the data at table 8, The Variable (X1) Pharmaceutical Products as a positive and significant effect against to Variable (Y) Consumer Satisfaction. Variable (X2) The price of the drug has a positive and significant effect on variable (Y) Consumer Satisfaction. This can be seen from the value of coefficient regression 0.206. and based on the data management results $T\text{-statistic} = 3.895$ greater than $T\text{-table} = 1.96$ with $P\text{-value} = 0.000$. Place Variable (X3) has a partially positive and significant effect on Consumer Satisfaction Variable (Y). Promotion (X4) has positive and significant impact on Consumer Satisfaction (Y). Variable (X5) Pharmaceutical personnel positively and significantly affects Variable consumer Satisfaction (Y). Variable (X6) Pharmaceutical service process has a significant and positive effect on Variable (Y) consumer satisfaction. The impact of Physical Evidence (X7) Variable on Consumer Satisfaction (Y) Variable is positive and significant

There is a positive and significant effect of Variable (X1) Pharmaceutical Products to Variable (X2) Drug Prices. Variable (X4) Promotion positively and significantly influences Variable (X2) Drug Price. Pharmaceutical personnel (X5) has a positive and significant partial effect on the pharmaceutical service process (X6). The pharmaceutical service process (X6) has a positive and significant partial effect on Variable (X1) Pharmaceutical Products.

The analysis shows that the relationship between pharmaceutical personnel and the pharmaceutical service process (coefficient 0.357, $T\text{-Statistic} 5.399$, $P\text{-value} 0$) has the strongest influence in this model. The competence and professionalism of pharmaceutical personnel determine the efficiency and quality of service, thereby improving consumer experience. Pharmaceutical personnel and drug prices have the highest influence on customer satisfaction, with each showing strong coefficient values. The drug price has a coefficient of 0.206, with a $T\text{-statistic}$ of 3.895 and a $P\text{-value}$ of 0, indicating that affordable drug prices strongly influence the

level of customer satisfaction. Pharmaceutical staff has a coefficient of 0.18, with a $T\text{-Statistic}$ of 3.545 and a $P\text{-value}$ of 0, showing a positive influence on customer satisfaction through competent and friendly service. These two factors together create a positive shopping experience and increase consumer trust in the pharmacy.

Certain factors have less impact on customer satisfaction. Influence of physical evidence of pharmacy is also lower (coefficient 0.124, $T\text{-Statistic} 2.144$, $P\text{-value} 0.032$), which is interpreted that although clean and tidy facilities can give comfort for consumers, but considering direct service factors as well as price play a higher role in the consumer view about the quality of pharmacy itself.

Discussion:

The results of this study indicate that 7P elements at Extended Pharmaceutical Marketing Mix which are Pharmaceutical product, drug price, place, promotion, pharmaceutical personnel, service process and physical evidence are important factor of pharmacy customer satisfaction. This finding is in accordance with the results of several previous studies (Dede Dwi Nathalia & Rozy, 2022; Fitria et al., 2023; Intan & Fadillah, 2023; Nurman et al., 2024; Setiawan et al., 2021; Zainuddin et al., 2022). Among these elements, price is the most powerful factor affecting consumers buying behaviour. And this demonstrates extreme consumer price sensitivity as explained in the context of HET regulation. However, competitive pricing goes hand in hand with product quality, or else consumer trust would be at stake. Drug quality, including both product authenticity and availability, also impacts on customer retention in addition to drug price. However, a strategic site-selection of the pharmacies, suitable promotions being planned to promote consumer interaction within these areas, clearly defined lines of responsible and knowledgeable service (or lack thereof) that is as stress-free as possible with well-established logistics processes, trucks/pickup stations to transport successfully sold products back by consumers are also key influencers on customer satisfaction seen in the pharmaceutical sector. But the weight of each of these factors is different.

Location is important but less so than price or product quality. This means pharmacy managers must create a comprehensive marketing plan.

This research analyzes the interactions amongst marketing mix (7P) variables pharmaceutical products (X1)–drug prices (X2), promotions (X4)–drug prices (X2), pharmaceutical personnel (X5)–pharmaceutical service process (X6), and pharmaceutical product X1–pharmaceutical service process X6, in Jember district Indonesia. The results provide substantial evidence, which is in accordance with previous studies. For instance, emphasized that principles of supply and demand govern drug prices, so our study's finding that product availability is a direct determinant of pricing aligns with this notion (Ashigbie et al., 2020). Similarly with Mukattash et al., (2024) this finding parallels that of promotional strategies amplify market competition and influence consumer perceptions of pricing, as this research supplements.) The assertion in this study on service quality being adversely affected if pharmaceutical personnel is used inefficiently resonates with (Osemene & Afolabi, 2020) that competency is required to provide optimal care. In addition, the linkage of service processes and product supply resonance enhances (Vik et al., 2021). This indicates availability of the product which is found to be very important characteristic that help businesses in effective inventory management. Thus, the current research is novel as it offers a more in-depth analysis of inter-variable relationships within the 7P framework, allowing for an advanced management perspective on how these elements work together to influence consumer satisfaction and market dynamics in context of pharmacy

Limitation:

The study has several limitations that should be acknowledged. Firstly, it focused on nine pharmacies in Jember, which may limit the generalizability of the findings to other regions or settings. Additionally, the cross-sectional design captures only a snapshot in time, making it difficult to establish causal relationships between the marketing mix elements and consumer satisfaction. The reliance on structured

questionnaires also introduces the possibility of response bias, as participants' perceptions and satisfaction levels are subjective. Furthermore, while the study examines the Extended Pharmaceutical Marketing Mix, it may not encompass all factors influencing consumer satisfaction, such as external market conditions or competitor strategies. Lastly, changes in consumer behavior or market dynamics over time were not accounted for, which may affect the relevance of the results in the future.

Conclusions:

The conclusion of this study is that the seven dimensions of the Extended Pharmaceutical marketing mix have a positive and significant relationship with the level of customer satisfaction in pharmacies in Jember district Indonesia. In addition, the results also found a positive correlation between several marketing mixes (Product with price, Promotion with price, Pharmaceutical Personnel with service process and service process with product). On the other hand, the price variable has the highest statistical significance while the place variable has the lowest statistical significance on patient satisfaction. The results of this study also conclude that an expanded pharmaceutical marketing mix strategy based on these factors will increase patient satisfaction which has an impact on improving service quality in the Jember Pharmaceutical Sector. In the end, by implementing this strategy, it is hoped that the pharmacy will be able to survive and thrive amidst the various challenges that are currently occurring

Acknowledgement

I would like to express my sincere gratitude to all those who contributed to the completion of this study. Special thanks go to my supervisors, Dr. Candra Bumi and Dr. Khoiron, for their invaluable guidance and support throughout the research process. I am also grateful to the respondents from the pharmacies in Jember for their participation and willingness to share their insights.

Conflict of Interest:

I declare that there are no conflicts of interest regarding the publication of this study. This research was conducted independently, and no financial or personal relationships influenced the findings or conclusions. All resources utilized in the study were appropriately acknowledged, and the research was conducted in accordance with ethical standards. The integrity of the research process was maintained to ensure transparency and objectivity in presenting the result

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