



THE ROLE OF BRAND TRUST IN HEALTHCARE INDUSTRY: IMPACT OF BRAND EXPERIENCE, INFLUENCER EXPERTISE, AND CULTURAL VALUES ON LOYALTY AND ADVOCACY

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ABSTRACT

The health sector is one comprising trust and consumer loyalty; hence, understanding the factors leading to consumer engagement and advocacy in this sector is a challenge. Existential large bodies of literature focus exclusively on brand trust in consumer goods and services; however, very little research focuses on how brand trust functions within the health sector. Additionally, there is a dearth of existing literature on the contribution of cultural variables, influencer knowledge, and brand experience to fostering advocacy, loyalty, and trust in healthcare marketing. The study closes this gap by examining how influencer knowledge and brand experience affect brand trust and evaluating how individual-level collectivist ideals affect the link between brand loyalty and brand trust. The desire to understand how healthcare companies may build customer trust in a high-stakes, trust-dependent business has led to the development of this research challenge.

This study was based on a quantitative approach by using snowball sampling to collect data from an audience in Karachi through a Google Form. Seven hypotheses are tested here that relate brand experience with influencer expertise, brand trust, parasocial relationships, brand loyalty, and brand





advocacy. From the empirical evidence of the research study, it has been proven that brand experience and influencer expertise positively affect building brand trust. This in turn would have positive spillover effects for developing parasocial relationships, brand loyalty, and brand advocacy. Furthermore, the ILVC moderated the relationship between brand trust and brand loyalty. It, therefore, adds to the richness of cultural aspects in consumer behaviour relating to healthcare marketing. This paper contributes to the academic theoretical base by advancing a comprehensive model for building brand trust and loyalty in the healthcare sector by relating brand experience, influencer expertise, and cultural context. This study gives healthcare marketers practical advice on how to use cultural values and establish experiences that foster trust while implementing marketing strategies. This study's geographical reach is constrained because it was restricted to Karachi and the data was self-reported, which restricts how far the results can be applied. To further understand the mechanisms that foster trust across industries, future studies can broaden its scope geographically, investigate other cultural aspects, and examine how these findings might be used in other fields.

KEYWORDS: Brand Trust, Brand Loyalty, Individual-level collective Value, Brand Advocacy, Parasocial Relationship

INTRODUCTION

Brand advocacy has emerged as a very critical determinant of organizational success, especially in competitive and consumer-driven industries such as healthcare. Brand advocacy reflects customers' readiness to actively promote a brand, often because of loyalty, trust, and satisfaction with a brand and its products or services (Fullerton, 2014). In the healthcare industry, where decisions are very dependent on trust and reputation, the advocacy of an existing satisfied customer can be the most potent driving force for growth and positive brand equity (Prentice & Loureiro, 2018). Healthcare advocates would usually do word-of-mouth marketing, which makes the brand more believable and catches the attention of more patients or potential consumers, sustaining and ensuring competition. As it plays a very significant role, knowing what factors result in brand advocacy is critical for healthcare organizations trying to establish a loyal customer base and strengthen their market presence.

Previous studies have widely discussed brand advocacy, and its antecedents, for example, customer satisfaction and brand loyalty. Hur et al. (2011) found that there is a direct relationship between customer satisfaction and advocacy behavior. However, changes in consumer behavior require further examination of complex indirect pathways that lead to advocacy in the healthcare field. This paper takes into consideration how brand experience and influencer expertise may play central roles in





preconditions toward achieving brand trust-a crucial trigger toward advocacy. Brand experience describes the sensory, affective, and cognitive engagement between a consumer and a brand; the impact is better brand association with enhanced emotional involvement and trust (Brakus et al., 2009). Similarly, influencer expertise, especially in areas where credibility is a concern, such as healthcare, can increase perceived trustworthiness and foster advocacy behaviors (Lou & Yuan, 2019). Through the integration of these independent variables, our study seeks to provide a more comprehensive understanding of how healthcare brands can build advocates through trust-building mechanisms.

The study introduces brand trust as a mediating variable between antecedents, such as brand experience and influencer expertise, and outcomes, including parasocial relationships, brand loyalty, and advocacy. Brand trust is fundamental in developing long-term consumer relationships and loyalty, especially in healthcare, where trust in the quality of services, safety, and ethics is of utmost importance (Delgado-Ballester, 2004). Besides, parasocial relationships represent an intermediary step between brand trust and advocacy as one-sided emotional attachments consumers develop with media personas. The latter enhance loyalty and advocacy of consumers as they deepen emotional ties with the brand (Hartmann & Goldhoorn, 2011). In addition, the collectivist values individual-level cultural dimension of Hofstede moderates the brand trust and its consequences. The group harmony and loyalty are underlined by collectivist values; hence, such values can potentially enhance the trust impact on loyalty and advocacy in collectivist cultures (Hofstede, 2001). With such mediators and moderators, our study offers a detailed framework to understand how such complex interplay of cultural, psychological, and experiential factors might influence brand advocacy in healthcare.

This research makes several key contributions to the literature on brand management and health marketing. First, it extends the understanding of brand advocacy by highlighting the critical roles of brand experience and influencer expertise in building brand trust. Second, it advances the conceptualization of parasocial relationships within healthcare marketing, shedding light on their potential to enhance advocacy behaviors. Third, it integrates Hofstede's collectivist cultural dimension as a moderator, offering novel insights into how cultural values shape trust's impact on loyalty and advocacy. Finally, the study's focus on the healthcare sector addresses a gap in the literature by emphasizing the unique dynamics of trust, loyalty, and advocacy in a high-stakes, trust-dependent industry. These contributions not only enrich academic discourse but also provide actionable insights for healthcare marketers seeking to build stronger consumer relationships and foster advocacy.

The study has developed the following research questions in light of the aforementioned discussions:





- 1. What is the effect of brand experience (BE) on brand trust (BT)?
- 2. What is the effect of Influencer expertise (IE) on brand trust (BT)?
- 3. What is the effect brand trust (BT) on parasocial relationship (PR)?
- 4. What is the effect brand trust (BT) on brand loyalty (BL)?
- 5. What is the effect brand trust (BT) on brand advocacy (BA)?
- 6. What is the effect brand loyalty (BL) on brand advocacy (BA)?
- 7. What is the moderating effect of individual-level collective values (ILCV) on brand trust (BT) and brand loyalty (BL)?

LITERATURE REVIEW

BRAND EXPERIENCE:

The term "brand experience" has been defined differently by several researchers. The number of previous purchases of a certain brand was used by Ortmeyer et.al (1991) to assess brand experience, which they defined as the purchasing behavior toward that brand. According to Kim and Sullivan (1998), brand experience is the outcome of purchasing or utilizing goods or services from a particular brand. Conversely, the brand experience was described by Ha and Perks (2005) as a favorable opinion about a brand. Qi et al. (2009) define brand experience as the result of a brand's communication and presentation. As a result, they developed several metrics on branding, word-of-mouth marketing, and advertising. The first scholars to describe and quantify brand experience were Brakus, Schmitt, and Zarantonello (2009). Brakus, Schmitt, and Zarantonello (2009) defined brand experience as "the subjective, internal consumer responses (sensations, feelings, cognitive and behavioral responses) evoked by brand-related stimuli that are part of a brand's design and identity, packaging, communications, and environments. The four aspects of brand experience, according to the same scholars, are sensory, emotive, intellectual, and behavioral.

INFLUENCER EXPERTISE:

Influencer knowledge could be best defined as having specialized knowledge or experience that an influencer gains about a particular field of business, which makes it relevant and essential to the target audience. Of course, this can very well decide how effectively or inadequately the influencer might shape a particular consumer's perceptions, get consumers to buy more from the associated brand, and earn their confidence over the related brand (Hovland et al., 1953; Lou & Yuan, 2019). Consumers will find the endorsements of the influencer believable and credible when they believe that the influencer is knowledgeable and has experience in a specific field.





These are authorities who are knowledgeable or even experts, whose advice to the consumers is helpful in informed decision. This perception of an expertise significantly contributes to the building of brand trust because the consumer relies on the quality and reliability of the brand itself based on the recommendation of the influencer (Sokolova & Kefi, 2020). With the influence of experts, one perceives the risk to a lesser extent, and there will be greater involvement, creating grounds for trust through the influencer, the brand itself, and ultimately its target population.

BRAND TRUST:

It is described by Moorman et al. (1993) as a person's readiness to depend on the trading partner they have grown to trust. Confidence in the trade partner is the foundation of trust (Dass et al., 2019; Morgan & Hunt, 1994). Chaudhuri and Holbrook (2001) define brand trust as the willingness of the typical consumer to believe that a brand will be able to fulfill its stated purpose in the future. Consequently, when it comes to brand trust, the brand is viewed as an active participant in customer interaction.

In addition to its utilitarian characteristics, brand trust has many other additional features. The new conception of brand trust emphasizes both the emotional (affective) assessments of positive brand experiences as well as the utilitarian (cognitive) tasks that a brand should fulfill based on observable product-level qualities (Johnson & Grayson, 2005). According to Singh et al. (2012), consumers' emotive connections with brands are the source of brand trust. This suggests that brand trust will be predicted by a consumer's higher degree of affective attachment to the brand, or brand love. Consumers' affective attachment to a brand is reflected in brand love (Bergkvist & BechLarsen, 2010). Therefore, brand love might predict brand trust because of its powerful affective character. Brand love is a reflection of consumers' emotive attachment to a brand (Bergkvist & Bech Larsen, 2010). Because of its strong emotive nature, brand love can thus predict brand trust. An emotional relationship is essential for the success of institutional relationship marketing because it promotes the growth of a favorable institutional image, which in turn promotes student trust, loyalty, and self-identification with the institutional community (Dollinger et al., 2018; Helgesen, 2008).

PARASOCIAL RELATIONSHIP:

A one-way relationship, wherein the consumers may feel close and intimate with a brand or a brand surrogate like a celebrity, influencer, or spokesperson without mutual interactions, constitutes a parasocial relationship (Horton & Wohl, 1956). In fact, it is relatively more easily built through





exposure to brand communication through media content or even social media engagements for closeness and a level of trust.

A parasocial relationship, therefore, becomes a very integral component of the brand trust concept, where an emotional connection is created between the brand and the consumer (Labrecque, 2014). The consumer feels more that the brand representative or influencer is relatable, credible, and authentic, the more he is likely to trust the brand that is being endorsed (Chung & Cho, 2017). This perceived authenticity in parasocial relationships increases the confidence of the customer in the promises, of the brand (Kim et al., 2021).

BRAND LOYALTY:

The last aspect of consumer brand resonance is brand loyalty, which represents the customer's deepest bond and degree of connection with a brand (Aaker, 1991; Keller, 1993). One important characteristic of a solid connection is loyalty (Shimul & Phau, 2018). Prior research has mostly examined brand loyalty from two angles: behavioral and attitudinal (Hallowell, 1996). According to Oliver's (1999) theory of conative consumption object loyalty, brand loyalty in the context of this study is the consumer's steadfast want to make another purchase in the future. The attitudinal method examines brand loyalty through psychological components, such as consumer attitudes that motivate a general commitment to a company's offers (Hallowell. 1996). Given the body of evidence on students' dedication to business schools, it is important to acknowledge that most students would continue to pursue management degrees as their last college degrees. Therefore, while choosing their chosen universities, business schools need to make sure that their alma mater has the attitude loyalty of people who would support, advocate for, or influence others. According to Bowden (2011), trust is a key indicator of customer loyalty (Carvalho & Mota, 2010).

BRAND ADVOCACY:

When choosing whether to use a product or service, customers usually rely on offline and online recommendations from friends, peers, and other supporters (Eldegwy et al., 2018). Positive word of mouth (WOM) is one of the most important marketing communication strategies that promote client advocacy, according to Keller (2007). Customers communicate positive word-of-mouth (WOM) to their loved ones because they value positive experiences, and this may boost brand profitability through higher sales and customer loyalty (Srinivasan & Srivastava, 2010).





INDIVIDUAL-LEVEL COLLECTIVE VALUES:

Collectivist values are those individual-level tendencies wherein the person would like to support the needs, goals, and interests of their in-groups like family, community, or social groups at their expense. These values influence consumer behavior much and in relationships between a person and brands or even in the matter of trust on these brands. Consumers with collectivist attitudes are most likely to use shared experiences, cultural alignment, and emotional connections in making judgments about brands, which significantly influences brand trust.

People with collectivist values base their decisions on the influence of their in-groups, valuing opinions and shared experiences within the group (Triandis, 1995). Brands, by aligning their messaging and offerings with cultural and social values important to the collective, are fostering a sense of belonging and reliability, thus enhancing brand trust (Hofstede, 2001).

THEORETICAL GROUNDING:

The Theory of Planned Behaviors (TPB) states that a person's intentions are greatly influenced by their attitudes, whether positive or negative, on engaging in a certain behavior (Ajzen, 1991). In your conceptual framework, Brand Experience (H1) corresponds to attitudes since it creates perceptions and evaluations for consumers of the brand. Favorable brand experiences create trust as positive attitudes enhance consumer intentions toward interacting with the brand (Delgado-Ballester, 2003). Subjective norms in TPB is the perceived social pressure to either perform or not perform a behavior (Ajzen, 1991). In your model, Influencer Expertise (H2) also acts as a source of social validation. As such, subjective norms are positively influenced when the influencers are considered credible and knowledgeable; hence consumers tend to believe and act toward the brand through endorsements by these influencers (Horton & Wohl, 1956).

Perceived behavioral control, referring to the extent to which individuals feel confident about performing the behavior, is an integral component of TPB (Ajzen, 1991). In your model, Brand Trust encompasses this feeling of confidence; therefore, trust acts as a mediator for behavioral outcomes like parasocial relationships and brand loyalty. In addition, H5 Individual-Level Collective Values Dimension by Hofstede moderates this relationship. This reflects how cultural dimensions impact perception of control and decision-making behavior (Hofstede, 1984).



In TPB, intentions are applied in order to predict actions (Ajzen, 1991). In your model, Parasocial Relationships (H4) is what plays the role of intentions, since those emotional bonds developed with influencers result in trust in and loyalty towards the brand. This is the same case as with TPB: the trust-love relationship works as a link (Horton & Wohl, 1956).

According to TPB, attitudes, subjective standards, and perceived behavioral control all influence behavior (Ajzen, 1991). Similarly, in your model, Brand Loyalty and Brand Advocacy are consumer behaviors that are influenced by trust and parasocial relationships. Once trust is established, consumers are loyal and advocate for the brand, thus fulfilling the behavioral component of TPB (Delgado-Ballester, 2003; Keller, 2009).

CONCEPTUAL FRAMEWORK



HYPOTHESES DEVELOPMENT

BRAND EXPERIENCE AND BRAND TRUST:

Customers have a variety of expectations when buying branded goods (Laroche et al., 2012). According to Karjaluoto, Munnukka, and Kiuru (2016), satisfied consumers are more inclined to have faith in a company. Brand attributes (Loureiro, Gorgus, & Kaufmann, 2017), consumer-brand characteristics, and corporate features (Jain & Bagdare, 2011) are the three main antecedents of brand trust. The three elements of brand experience, both separately and together, have an effect on brand trust. According to Hwang, Han, and Choo (2015), relationships based on trust and experience are crucial for both service and non-service organizations.

A favorable client experience creates a lasting relationship and trust with the business, according to earlier research (Kahneman, 2011). In a similar vein, customers who have a negative brand experience





are unlikely to trust or repurchase it. Customers may also discuss their unfavourable encounters with these businesses (Bauer, Mühl, & Heinrich, 2008). Both brand qualities and customer personality factors influence consumers' confidence in a brand. Additionally, a company's brand image is improved by its participation in corporate social responsibility (Fetscherin, 2014). According to Gentile, Spiller, and Noci (2007), customers are more likely to trust brands that have previously delivered a satisfying experience. Customers may thereby establish a long-lasting bond with the brand. Heinrich, Bauer, and Mühl (2008) and Berry, Carbone, and Haeckel (2002) also found similar results. We formulate the following hypothesis in light of the discussion above:

H1 Brand Experience positively affects Brand Trust

INFLUENCER EXPERTISE AND BRAND TRUST:

Influencer expertise is the knowledge, skill, and perceived credibility an audience has of the domain in which an influencer focuses (Hovland et al., 1953). Consumers perceive influencers as sources of information they can rely on if the influencers are expert and competent within their domain. This increases the persuasiveness of the influence (Ohanian, 1990). Expertise is an important determinant of audience attitudes toward brands because the information provided by a knowledgeable influencer is more likely to be trusted by consumers (Freberg et al., 2011).

Not only do they possess expertise within a niche but also build trust with their delivery of accurate, relevant, and valuable content. Expertise builds perceived authenticity to endorsements and authenticity is the leading driver of brand trust (Erkan & Evans, 2016).

Customer are likely to believe brands endorsed by influencers who show high levels of expertise because such influencers are seen to be well-informed about the products or services they are promoting (Hwang & Jeong, 2016). Expertise increases the perceived credibility of the endorsement, making consumers more receptive to the message and more likely to trust the brand (Djafarova & Rushworth, 2017). Based on the review of the literature, it can be hypothesized that:

H2 Influencer Expertise positively affects Brand Trust

BRAND TRUST AND PARASOCIAL RELATIONSHIP:

According to Lacap et al. (2024), social media influencers build and preserve parasocial ties with their followers, which boosts followers' faith in the companies they suggest. Furthermore, brand trust is a





precondition for the parasocial interaction (Shuliakouskaya, 2023). Additionally, the "consumer-brand relationship" gives customers the impression that there aren't many dangers and that the business will fulfill its commitments (Chaihanchanchai et al., 2024). Zhao et al. (2023) further support the connection between "parasocial relationships and brand trust" by claiming that the "Uncertainty Reduction Theory (Berger & Calabrese, 1975) and the Meaning-Transfer Model" (McCracken, 1989) serve as the cornerstones of these relationships.

However, Leite and Baptista (2022) assert that a brand cannot win over customers' trust by itself. Social media influencers and their followers must engage in parasocial interactions (Bashokouh et al., 2020). Additionally, recent studies show that most customers seek guidance from trustworthy social media influencers, even in the face of the wealth of information on social media (Aw & Labrecque, 2023). Therefore, we contend that brand trust is significantly impacted by parasocial interactions (Burnasheva & Suh, 2022).

H3 Brand Trust positively affects Parasocial Relationship

BRAND TRUST AND BRAND LOYALTY:

Trust is necessary for two trade partners to establish and preserve a relationship (Cardoso et al., 2022). Some scholars think that the three main components of brand trust are "credibility, integrity, and benevolence" (Hussein et al., 2023). Each of these has an effect on brand loyalty, either directly or indirectly. There are several methods to characterize brand loyalty. However, most research believes it is related to the enduring relationships between companies and their clients. Consumers who trust a brand are more likely to remain loyal to it than those who don't (Alnaim et al., 2022).

Moreover, consumers who have a high degree of trust in a brand are certain that it will fulfill their expectations and that there won't be any risks—financial or otherwise—related to their purchase, according to Mansouri et al. (2022) (Suhan et al., 2022). As a result, they frequently serve as brand ambassadors and develop brand loyalty (Juwaini et al., 2022).

H4 Brand Trust positively affects Brand Loyalty

BRAND TRUST AND BRAND ADVOCACY:





According to Lovett et al. (2013), brand advocacy is the degree to which consumers actively suggest or promote a brand to others, acting as unofficial brand ambassadors. It is the outcome of trust, emotional attachment to the brand, and favorable brand experiences (Becerra & Badrinarayanan, 2013). Advocates actively promote the company through their network in addition to being happy customers (Fullerton, 2011). Because trust improves brand attachment, which raises readiness for endorsement, it is essential to brand advocacy (Chaudhuri & Holbrook, 2001). Indeed, it is founded on trust, which is established by moral behavior, dependability, and constant quality (Kumar et al., 2013). For instance, consumers are more likely to suggest a brand to others if they perceive it to be operating in their best interests (Harrison-Walker, 2001).

H5 Brand Trust positively affects Brand Advocacy

BRAND LOYALTY AND BRAND ADVOCACY:

Brand advocacy represents volunteer endorsement of the brand through satisfied customers that serve as the brand ambassadors who share good experiences and promote other stakeholders to engage even further with the brand (Fullerton, 2011). Advocates act from trust, satisfaction, and emotional attachment toward the brand in a manner making advocacy an outstanding performance indicator of how well a brand is doing (Wallace et al., 2014).

Brand trust and advocacy have been a topic of many studies, and it has been shown that trust is one of the main factors that would make customers be an advocate for the brand (Chaudhuri & Holbrook, 2001). The perception of the brand as reliable, honest, and consistent in its offerings is more likely to be recommended by consumers to others (Fullerton, 2011).

Over the years, largely because of the social media influencer whose area of expertise has become considered to be the new credibility of that particular following through their endorsement within a network which engenders trust within their followers because the area of expertise of an influencer has increasingly been considered one of the key determinants to establish trust for brand advocacy, (De Veirman et al., 2017).

H6 Brand Loyalty positively affects Brand Advocacy

INDIVIDUAL LEVEL COLLECTIVE VAULE AND BRAND TRUST AND BRAND LOYALTY:



Bond (2002) claims that consumers with high ILCV exhibit characteristics such as organizations that prioritize values above personal goals and a need for meaning via social interaction, which may promote in-group connectedness and cohesiveness. Customers with low ILCV, on the other hand, prioritize their own demands over those of the group and are self-centred (Bond, 2002; Schwartz, 1990). Customers that score well on the ILCV are more likely to value exceptional service, make repeat purchases, and, consequently, promote a product, according to some study. Patterson et al. (2006). Given that prior research indicates that ILCV as a predictor significantly influences customer perception and behavior, it could play a part in the connection in the brand loyalty model. The study's empirical model, which is described below, shows how variations in ILCV across consumers act as a moderator in the link among promotion, perceived brand quality, brand trust, and brand loyalty.

H7 Individual-Level Collective Values moderates the Brand Trust and Brand Loyalty **METHODOLOGY**

RESEARCH DESIGN

Abbott and McKinney (2013) define research design as the overall plan or approach that guides researchers from the beginning of their study until the point of data analysis. Choosing the right sampling procedure, determining the minimum sample size, and identifying the target population are all essential components of a strong study design. It also involves creating and implementing a survey that is in line with the goals of the research (Bloomfield & Fisher, 2019). All of the aforementioned research elements have been covered in the following portions. Both qualitative and quantitative research are possible. Due to the quantitative data that was gathered, this study is quantitative.

INSTRUMENTATION

The questionnaire for this study is broken up into two sections. Demography is the subject of the first part. Each item in this section is based on a nominal scale (Hair et al., 2020). The primary research is covered in Section 2. One denotes a low degree of agreement, and five denotes a high level, according to the five- and seven-point Likert Scale (Sarstedt et al., 2020), which is the basis for the items in this section. Table 1 displays the build, its sources, and the number of components in each construct.

Table 1. Instrumentation

| | al of Medical & Health Sciences Review VOL-2, ISSUE-1, 2025 nline ISSN: 3007-309X Print ISSN: 3007-3081 https://jmhsr.com/index.php/jmhsr | N |
|-------------------------------|--|-------|
| Variables | Sources | Items |
| Brand Experience | Brakus et al. (2009) | 12 |
| Influencer Expertise | Ohanian (1990) | 5 |
| Brand Trust | Delgado-Ballester (2003) | 8 |
| Parasocial Relationship | Kim et al. (2015) | 6 |
| Brand Loyalty | lty Halim (2006) | |
| Brand Advocacy | Wilk et al.'s (2019) | 16 |
| Individualism vs. Collectivis | Sm Donthu and Yoo's (2011) | 2 |

POPULATION AND SAMPLE

Casteel and Bridier (2021) define a population as the total number of individuals inside a sampling frame. The whole group of persons the researcher is interested in is referred to as the "target population." Data for the study was gathered from Karachi. Many experts believe that Karachi is a representation of Pakistan because it is home to people from every ethnic background. The study's sample size was 300, which is calculated by rule of thumb (Hair et al. 2010). The data for the study were gathered using the snowball sampling approach through Google Forms.

STATISTICAL ANALYSIS

For analysis, several statistical software are available, such as SPSS and Smart PLS. The advantages of these two tools are varied (Manley et al., 2020). Smart PLS, which is easier to use and can test many regression equations at once. We used a two-step method in the Smart PLS as recommended. First, we created a measurement model for validity and reliability results then we created a structural model for hypotheses results.

RESULTS

DEMOGRAPHIC PROFILE

The sample's demographics include age, gender, marital status, job status, education, and income level. Table 2 displays a summary of the responder profile.

Table 2 Demographics

| Demographics | Category | Frequency | Percentage |
|--------------|----------|-----------|------------|
| Age | 16-25 | 10 | 3% |
| | 26-35 | 94 | 32% |

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|--|---|--|---|
| | 36-45 | 117 | 39% |
| | 46-55 | 36 | 12% |
| | 56+ | 43 | 14% |
| Gender | Male | 234 | 78% |
| | Female | 66 | 22% |
| Education | Intermediate | 6 | 2% |
| | Bachelor Degree | 111 | 37% |
| | Master Degree | 132 | 44% |
| | Post-Graduation Degree | 51 | 17% |
| Mariatal Status | Single | 69 | 23% |
| | Married | 231 | 77% |
| Income Level | Up to Rs. 50000 | 16 | 5% |
| | Rs. 51000 to 75000 | 102 | 34% |
| | Rs. 76000 to 100000 | 84 | 28% |
| | Rs. 101000 to 125000 | 63 | 21% |
| | Rs. 126000 + | 35 | 12% |

MEASUREMENT MODEL:

The study has chosen to approach its results in two steps. We initially created a measurement model to illustrate the relationship between latent variables and indicators (Wong, 2013). The results of internal consistency, composite reliability, discriminant validity, and fit indices are covered in the following sections. In Figure 2, the measurement model is displayed.







Figure 2: Measurement Model

DESCRIPTIVE ANALYSIS:

The findings of AVE, composite reliability, and internal consistency are shown in Table 3.

Table 3: Descriptive Analysis

| Construct | Cronbach's Alpha | Rho_A | Composite | Average Variance | |
|--------------------------|------------------|-------|-------------|------------------|--|
| | | | Reliability | Extracted (AVE) | |
| Brand Advocacy | 0.812 | 0.821 | 0.865 | 0.617 | |
| Brand Experience | 0.705 | 0.705 | 0.819 | 0.630 | |
| Brand Loyalty | 0.760 | 0.761 | 0.863 | 0.677 | |
| Brand Trust | 0.837 | 0.844 | 0.885 | 0.607 | |
| Influencer Expertise | 0.819 | 0.822 | 0.873 | 0.680 | |
| Parasocial Relationships | 0.838 | 0.842 | 0.891 | 0.672 | |

Table 3 demonstrates that all AVE values must be higher than 0.60, all Cronbach's values are larger than 0.70, and all composite reliability values are greater than 0.80 (Pering, 2020). The results show that these values fall inside the specified range, which leads us to conclude that the constructs meet the necessary criteria for both convergent validity and internal consistency.

DISCRIMINANT VALIDITY

In addition to discriminant validity based on Fornell and Larcker (1981), researchers should look into HTMT ratios, an enhanced form of discriminant validity, according to scholars like Roemer Schuberth and Henseler (2021). As previously stated, the study has employed both approaches for discriminant validity evaluations in compliance with the authors' recommendations. The findings of the HTMT ratio and the Fornell and Larcker (1981) criterion are shown in Tables 4 and 5 (Henseler, 2021).

Table 4: Discriminant Validity (Fornell and Larcker, 1981)

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|--------------------------|--|-------|-------|-------|-------|-------|
| Construct | BA | BE | BL | BT | IE | PR |
| Brand Advocacy | 0.719 | | | | | |
| Brand Experience | 0.488 | 0.728 | | | | |
| Brand Loyalty | 0.462 | 0.608 | 0.823 | | | |
| Brand Trust | 0.465 | 0.578 | 0.544 | 0.779 | | |
| Influencer Expertise | 0.480 | 0.551 | 0.465 | 0.623 | 0.762 | |
| Parasocial Relationships | 0.405 | 0.475 | 0.642 | 0.423 | 0.391 | 0.820 |

The "square root of AVE values must be greater than Pearson Correlation values," according to Fornell Larcker (1981). The findings shown in Table 4 corroborate the findings of Fornell and Larcker (1981).

Table 5: Discriminant Validity (HTMT Ratio)

| Constructs | BA | BE | BL | BT | IE | PR |
|--------------------------|-------|-------|-------|-------|-------|----|
| Brand Advocacy | _ | | | | | |
| Brand Experience | 0.637 | | | | | |
| Brand Loyalty | 0.578 | 0.835 | | | | |
| Brand Trust | 0.552 | 0.741 | 0.675 | | | |
| Influencer Expertise | 0.584 | 0.727 | 0.592 | 0.744 | | |
| Parasocial Relationships | 0.484 | 0.622 | 0.804 | 0.504 | 0.475 | - |

According to Roemer Schuberth and Henseler (2021), HTMT values had to be less than 0.90. The HTMT ratios have been used to show discriminant validity since the results are consistent with the authors stated above.

PREDICTIVE POWER OF THE MEASUREMENT MODEL

As recommended by Ramayah et al. (2017), the study employed R2 and Q2 values to assess the measurement model's predictive power. Table 6 provides an overview of the findings.

Table 6: R Square Values and Q Square Values

| Construct | R | R Square | SSO | SSE | Q ² (=1- |
|----------------|--------|----------|----------|----------|---------------------|
| | Square | Adjusted | | | SSE/SSO) |
| Brand Advocacy | 0.279 | 0.274 | 1800.00 | 1550.018 | 0.139 |
| Brand Loyalty | 0.296 | 0.294 | 900.000 | 661.237 | 0.265 |
| Brand Trust | 0.467 | 0.464 | 1500.000 | 1090.791 | 0.273 |



By the recommendations of Ramayah et al. (2017) and Harel (2009), the findings demonstrate that Q square values are greater than zero (0) and R square values are at least 0.20. Consequently, it is logical to conclude that the "measurement model has adequate predictive power."

FIT INDICES

Table 7: Fit Indices

| | Saturated Model | Estimated Model | | |
|------------|-----------------|-----------------|--|--|
| SRMR | 0.068 | 0.010 | | |
| d_ULS | 1.731 | 4.533 | | |
| d_G | 0.607 | 0.756 | | |
| Chi-Square | 1041.553 | 1202.521 | | |
| NFI | 0.932 | 0.990 | | |

Wong (2013) proposes that NFI > 0.90 and SRMR < 0.08. The findings shown in Table 7 support the

above-mentioned researcher's hypothesis, demonstrating the measurement model's appropriate fitness.

STRUCTURAL MODEL

The relationship between "exogenous and endogenous variables," seen in Figure 3, is measured using the structural model.







Figure 3: Structural Model

HYPOTHESES RESULTS

Four hypotheses are supported by the data, whereas seven are not, as Table 8 demonstrates.

Table 8: Hypotheses Results

| Hypotheses | β | T Stat. | P Value | Results |
|---|-------|---------|---------|----------|
| Brand Experience \rightarrow Brand Trust (H1) | 0.339 | 5.982 | 0.000 | Accepted |
| Influencer Expertise \rightarrow Brand Trust (H2) | 0.439 | 8.215 | 0.000 | Accepted |
| Brand Trust \rightarrow Parasocial Relationships (H3) | 0.425 | 7.422 | 0.000 | Accepted |
| Brand Trust \rightarrow Brand Loyalty (H4) | 0.349 | 5.353 | 0.000 | Accepted |
| Brand Trust \rightarrow Brand Advocacy (H5) | 0.306 | 4.354 | 0.000 | Accepted |
| Brand Loyalty \rightarrow Brand Advocacy (H6) | 0.304 | 4.420 | 0.000 | Accepted |
| Individualism & Collectivism*Brand Trust \rightarrow | 0.088 | 2.122 | 0.034 | Accepted |
| Brand Loyalty (H7) | | | | |

DISCUSSION

This study aims to determine the dynamics of brand trust in the health sector by identifying a specific function through influencer knowledge, brand experience, and Hofstede's cultural characteristics. Influencer knowledge (H2) and brand experience (H1) have a good effect on brand trust, which in turn has a positive effect on parasocial relationships (H3), brand loyalty (H4), and brand advocacy (H5). Furthermore, data showed that brand loyalty has a favorable impact on brand advocacy (H6) and that ILCV moderates the relationship between brand trust and brand loyalty (H7). Therefore, the results provide a substantial contribution to the literature in several respects.





Brand experience has also been found to build brand trust based on earlier researches on consumer behavior (Keller, 2003). Such a robust brand experience with consistency in quality and significant customer involvement makes the consumers believe in that brand, especially in healthcare where trust determines the consumer decision-making process (Morgan & Hunt, 1994). Thus, the consumers find the more memorable experiences-based healthcare brands as much more trustable (Fournier, 1998). The fact that influencer expertise positively affects brand trust reinforces the notion that social media influencers are crucial in the development of consumer perception (Djafarova & Trofimenko, 2019). The involvement of expert influencers by healthcare brands enhances credibility and trustworthiness. This fact is particularly highly relevant in the health care sector since expertise and authority are major drivers of trust and loyalty between consumers and other entities (González-Rodríguez, 2020). These influencers were experts with such knowledge that could help build up authority and thereby induce trust over the brand to be endorsed.

Brand trust is found to be the foundation of forming parasocial relationships and promoting brand loyalty and advocacy, as shown by the findings of this study. The concept of parasocial relationships was first introduced by Horton and Wohl (1956) to explain consumer connections with brands endorsed by influencers. These relationships are essential in developing brand loyalty, since they help establish deeper emotional bonds (Chung & Cho, 2017). Additionally, the relationship of brand trust is also positively associated with brand loyalty and brand advocacy and is similar to previous research based on the principle that trust was essential for securing long-term customers (Chaudhuri & Holbrook, 2001). Health-care brand trust increases not only consumer loyalty but also advocacy through satisfaction, wherein happy customers communicate about the brand with others (Brown & Dacin, 1997).

The present study is novel in the modulating effect of ILCV on the relationship between brand trust and brand loyalty. According to Hofstede's cultural dimensions theory, individuals from collectivist cultures place more value on relationships and community, which ultimately influences their perceptions of brand loyalty (Hofstede, 2001). In the health care sector, consumer decisions are typically influenced by values as a collective such as maintaining family well-being, and trust in the healthcare brand may influence loyalty more strongly in collectivist cultures (Lee & Lyu, 2014). The findings of this study emphasize the role that cultural values play when it comes to the influence of consumer behavior in health care.





CONCLUSION

It studied the dynamics of brand trust in the healthcare sector based on the impact of cultural values, influencer expertise, and brand experience. Influencer expertise and brand experience have been shown to increase brand trust, which in turn affects parasocial relationships, brand advocacy, and brand loyalty. Individual-level collectivist values actually modulate the relationship between brand loyalty and brand trust, highlighting the importance of the cultural context in shaping consumer behavior. These results open the door for the healthcare sector to leverage brand trust—which is influenced by experiential and cultural factors—to boost consumer advocacy and loyalty.

While the parasocial connection is crucial for brand advocacy and loyalty, this study adds to the body of literature by highlighting influencer skill and brand experience as key elements influencing brand trust. The role of collectivist ideals in mitigating the effects of brand trust on loyalty can also be better understood according to this study. This has thus been the appeal to healthcare marketers through developing a positive brand experience, working with expert influencers, and considering cultural factors in an effort to establish long-term consumer relationships. Thus, healthcare brands would build trust, loyalty, and advocacy and therefore thrive in the long run in this trust-dependent industry.

IMPLICATIONS

This study's findings have some practical implications for healthcare marketers. First, the healthcare brands need to invest in creating positive brand experiences that are based on trust. This is achieved through personalized customer interactions, quality service delivery, and transparent communication. Second, healthcare brands need to be very careful about the selection of influencers with expertise in the healthcare field to enhance their credibility and trustworthiness. With growing social media use, brands should start utilizing influencer marketing. Thirdly, marketers ought not to ignore the impact of cultural values for consumer loyalty building. In collectivist cultures, those marketing approaches that focus more on communal well-being and benefits to the collective tend to be robust in enhancing trust and loyalty toward a brand.

LIMITATIONS AND FUTURE RESEARCH





One of the major drawbacks of this research is that its sample population only came from Karachi, which was a single geographic location. This narrowed data collection but it may not be as generally applicable to different regions or other countries with possibly different cultural, social, and healthcare dynamics. It has somewhat limited its ability to draw overarching generalizations about the overall national or international trends in health care by focusing on a selected population of the urban audience. In addition, responses may have been differentially biased from one another by certain characteristics, such as access to technology or familiarity with healthcare influencers, which may have affected the responses.

Furthermore, this study is based on self-reported data. Such data is susceptible to lots of bias such as social desirability and recall bias. Responses are likely to be answers that respondents believed were the expected ones or socially desirable rather than their opinions or behavior. The study used a snowball sampling technique. This method is effective in reaching the audience but probably ended up with a non-random sample. The snowball sampling technique often leads to the overrepresentation of certain groups or characteristics, making generalization limited in this context as well. Last but not least, the industry under observation here is health, which has strong trust elements in it. It may therefore make the finding specific to an industry and might not be replicable in another area, for instance, a consumer goods business or technology-based enterprise, due to the variation in mechanisms toward the building of trust.

Future studies could examine the impact of brand trust in various sectors, for example, technology or consumer goods, to ascertain whether the relationships identified in this study generalize to other contexts.

More research may also be conducted longitudinally to assess the long-term influence of brand experience and influencer expertise on brand trust, loyalty, and advocacy. This could open further avenues of investigation for other cultural dimensions aside from collectivism, such as power distance or uncertainty avoidance, to provide further insight into how cultural values may influence consumer behavior.

QUESTIONNAIRE





BRAND EXPERIENCE (BE)

BE 1. The healthcare brand that I use creates a strong impression through its visual presentation, such as its logo, facilities, or packaging.

BE 3. I engaged in a lot of thinking while interacting with the healthcare brand that I use, considering its impact on my health and well-being.

BE 4. This healthcare brand sparks my curiosity and helps me solve problems related to my health needs.

INFLUENCER EXPERTISE (IE)

IE 1. My preferred healthcare influencers are knowledgeable about their domain.

IE 2. My preferred healthcare influencers possess relevant qualifications in their field.

IE 3. My preferred healthcare influencers demonstrate the required skills to guide audiences

effectively.

IE 4. My preferred healthcare influencers are recognized experts in their domain.

IE 5. My preferred healthcare influencers have substantial experience in their respective healthcare specialties.

BRAND TRUST (BT)

BT 1. The healthcare brands that I use consistently meet my expectations for healthcare services or products.

BT 2. The healthcare brands that I use give me confidence and assurance in the quality of their

healthcare offerings.

BT 3. The healthcare brand that I use has never let me down in delivering reliable healthcare

solutions.

BT 4. I trust healthcare brands that I use to be honest and transparent in their healthcare-related communications.

BT 5. I feel I can depend on healthcare brands that I use for my healthcare needs.

PARASOCIAL RELATIONSHIP (PR)

PR 1. I feel close enough to use the healthcare recommendations provided by my preferred digital influencer.

PR 2. I feel comfortable with the healthcare-related messages shared by my preferred digital influencer.





PR 3. I can rely on the information I get from my preferred digital influencer about healthcare products or services.

PR 4. I am fascinated by the healthcare content shared by my preferred digital influencer.

BRAND LOYALTY (BL)

BL 1. I will consistently select my preferred healthcare brand due to my ongoing trust and satisfaction.

BL 2. I will not switch to another healthcare brand, regardless of the alternatives available.

BL 3. I am willing to pay more for my preferred healthcare brand because of the value it offers.

BRAND ADVOCACY (BA)

BA 1. Mention satisfaction with the performance of my preferred healthcare brand.

BA 2. Discuss my preferred healthcare brand in a positive manner.

BA 3. Express confidence that my preferred healthcare brand provides excellent service.

BA 4. Inform others about available discounts, offers, or promotions for my preferred healthcare brand.

BA 5. Share additional details about my preferred healthcare brand, such as location, costs, or promotional information.

BA 6. Spread information about promotions or financial assistance programs for my preferred healthcare brand.

INDIVIDUAL-LEVEL COLLECTIVE VALUES (ILCV)

IL 1. When selecting a healthcare brand or service, I prioritize values and beliefs that align with the preferences of my family or community.

IL 2. While deciding on a healthcare brand or service, I consider the well-being and interests of my family or community above my personal preferences.

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