

“A Study on Customer Awareness and Perception for Healthcare products in Indore”

Mr. Kali Charan Modak
Assistant Professor IBMR, IPS Academy Indore,
India Email-kali.modak@gmail.com, Mob-
+919981574946

ABSTRACT

The Indian healthcare industry was valued at US \$81.3 billion in 2014 and expected to reach US \$ 280 billion by 2020 (Healthcare industry, 2015). There has been a global rise in the use of healthcare product. There is a need for companies to understand how to better meet customers' requirements. Recently an increased interest in customer perception, awareness and buying behavior has shown by the company due to an amplified need for prerequisite of quality healthcare and increasing competition among healthcare product manufacturer with the increasing emphasis on quality healthcare. This study was designed to determine awareness, perception and buying behavior for healthcare products. The study of consumer awareness and perception not only helps to know the past but even envisage the opportunity. The demographic factors pertaining to the tendencies, attitude and priorities of inhabitants must be given due importance to have a fairly good understanding of the purchasing patterns of consumers. The present study revealed that customer perception, awareness plays an important role for consumer buying behavior. The study also revealed age wise, income wise, gender wise, education level and marital status wise significant difference in perception and awareness of customers. Consumer is king now days so it is very important to understand the present demographic changes and the impact of demographic variable on consumer awareness. Thus it could be concluded that quality product is a long term reality that would directly affects the customer's outcome.

Keywords: Customer awareness, Perception, Buying behavior, Healthcare products.

JEL Classification: 111, J11

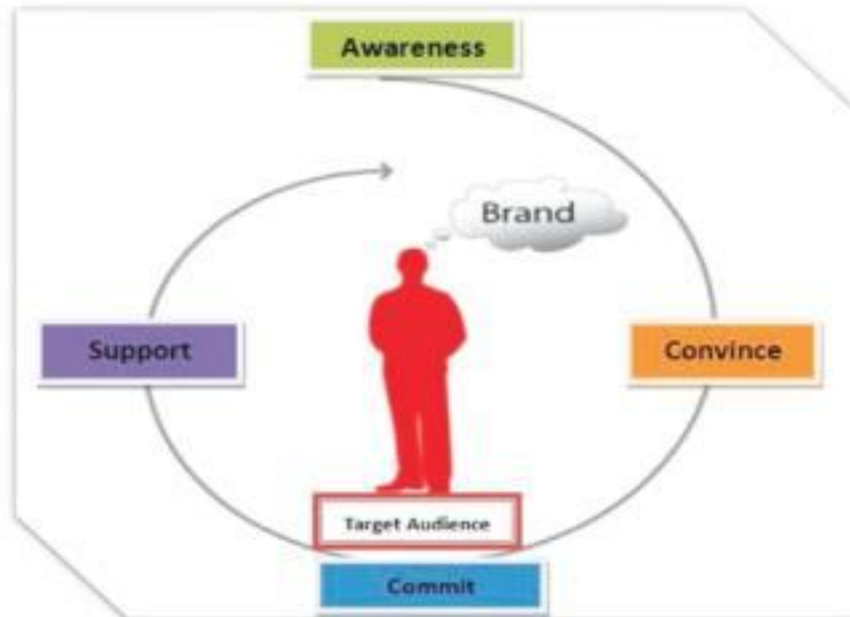
INTRODUCTION

Healthcare industry is changing very fast so the perception of consumer also changing very fast with the emergence of new product. Marketing play a major role in changing the perception, attitude and buying behavior of the society in broad-spectrum. Many earlier studies have already demonstrated the link between the perception of customer and the attitude and behavior towards purchase of a product. Society needs marketing for a range of reasons like information allocation, consumer persuasion, decision making etc. There is a tendency to involve the customer to a greater extent in evaluating the quality of healthcare product. Healthcare market is turning from sellers market into buyers market. Healthcare product manufacturer are focusing more and more towards marketing of their product. By evaluating customer's attitude and perception companies can evaluate the satisfaction so there is a need of evaluation of customer attitude and perception. Culture is having greatest impact on purchase behavior. Kotler et al., 1999, indicated that other than cultural factors different factors, for example, social, personal, and psychological factors have impact on consumer buying behavior. It has also been seen that increase in customer satisfaction can produce an increase in market capitalization.

Customer perception - Customer perception refers that how customer outlook a certain product based on customers own assumption. These assumptions are derivative from a number of factors, such as price and on the whole know-how. When it comes to influencing customers to buy a product, their awareness of the brand name must be taken into account. This awareness may vary based on the consumer or a definite demographic of purchaser. Customer perception can be developed from a diversity of factors, such as their own individual understanding or how they have heard other people knowledge the product. The Internet has changed how people practice brands and builds their perceptions. Social media and review websites make available access to reviews and information that help consumers form their own perceptions about brands and their products.

Customer awareness - Customer Experience Planning is important factor in marketing first of all companies will have to aware the mass regarding their product after speeding awareness companies will have to convince that the product which they are offering is good quality product. Then companies will have to fulfill the commitment with support to the customer. Then this whole cycle works as a brand creation tool which creates brand identity as shown in figure 1 .This process is heal full form creating awareness to create brand in market.

Figure .1 Customer Experience Planning



Source: - <http://archives.rockpaperink.com/ctment/article.php?id=711>

A study is conducted by Philip Kotler to evaluate the customer perception on brand image of company in this he has done familiarity and favorability study. The familiarity is to measure the target audience's familiarity about the brand and their products. The favorability checks the feeling towards the brand and its products of the familiar audience. This grid defines perception of customers for brand and their product.

Figure .2 Familiarity and Favorability Grid By Philip Kotler (2004)



Source-http://www.researchersworld.com/ijms/vol2/issiiel/Paper_07.pdf

A study is conducted by Philip Kotler to evaluate the customer perception on brand image of company in this he has done familiarity and favorability study. The familiarity is to measure the target audience's familiarity about the brand and their products. The favorability checks the feeling towards the brand and its products of the familiar audience. This grid defines perception of customers for brand and their product.

The four cases and the respective view of the expert are as following

A- High familiarity and favorable attitude create most affirmative image so companies must work at maintaining its good status and high responsiveness.

B- Unfavorable attitude and High familiarity cause less recognizable to most people, but those who know it like it. Must gain the notice of more people. More investment is essential in attentiveness building.

C- Unfavorable attitude and low familiarity viewed negatively by those who knew it. Must find way out why people dislike it.

D- Favorable attitude and low familiarity seen to be a poor company or brand, and everyone knows it. Should lower its profile, recover its quality and then seek public attention.

REVIEW OF RELATED LITERATURE

Suleiman (2014) analyzed that people is not having proper information regarding the usage of herbal medicine. Health supplement and herbal remedies can cause unfavorable result so the people must use this product by care. Information plays a vital role for selecting the product. Customer should aware about the product before purchase.

Awad, Al-Shaye (2014) studied the awareness, perception and pattern of use for natural healthcare products. Healthcare product is useful in prevent illness and to and build the immune system. They further stated that respondent stressed the need for consulting a doctor before using herbal medicines.

Kotler, Armstrong (2009) stated that at the evaluation stage, consumer evaluates the brand for purchasing the product. Other factors can influence purchase intention and decision, the consumer thoughts and the consumer's income, price and expected products benefits.

Sukato, Elsey (2009) examined the phenomena of male consumer behavior in buying skin care products in Thailand. In order to find out the consumer behavior, Fishbein and Ajzen's model is employed as a theoretical framework and personalized by adding the self-image create. The results of the study confirm that social influences and attitudes have impacts on purchase behavior and purchase behavior in buying skin care products among Bangkok male consumers and therefore, the theory of reasoned action to evaluate consumer behavior is appropriate to explain male consumer behavior in the purchase of specific cosmetic product.

Vani et al. (2010) examined consumer behavior in Bangalore city regarding toothpaste brands and analyzed that consumer awareness of toothpaste is less in Bangalore city. Oral care market offers enormous prospective as diffusion and per capita expenditure of oral care product is very low in India. Further, the study establish that product image, advertisement through celebrity endorsement and offer play a significant role in buying toothpaste, sometimes based on the offers available in the market the consumer compare with competitor product and select the best one. Consumer also analyzed Product attribute for deciding a brand. The reason for Switching from one brand to other brands, selection of product is mainly based on advertisement, brand name of product, attractive packaging availability of product and price rise.

OBJECTIVES OF THE STUDY

- To study customer awareness for healthcare products.
- To analyze customer perception for healthcare products.

RESEARCH METHODOLOGY

The research design is descriptive in nature. The sampling unit was an individual consumer. The data collected from Indore Madhya Pradesh. Non-probabilistic convenience sampling was used to collect responses. Responses were collected from 15th Oct, 2015 to 30th Nov, 2015. The researcher personally

collected the data. Proper care was taken to make sure that the questionnaire is correctly filled. In total 120 responses were collected but 20 respondents were rejected due to incomplete replies. Finally, 100 complete questionnaires were used for data analysis purposes. The response was collected using self structured closed-ended questionnaire in five point likert scale.

Data entered into IBM SPSS 21 and descriptive analysis conducted. Two types of frequency distribution analysis used for data on a nominal scale. The simple frequency distribution used for single option question. Multiple response frequency distributions used for multiple or more than one option question. Mean and standard deviation for interval scale data. Statistical technique like Chi-square has been used for the analysis of data.

Figure .3 Conceptual framework of research



Hypotheses

H₀₁: Gender and awareness about Healthcare products are independent.

H₀₂: Age and awareness about Healthcare products are independent.

H₀₃: Income and awareness about Healthcare products are independent.

H₀₄: Education and awareness about Healthcare products are independent.

H₀₅: Marital status and awareness about Healthcare products are independent.

DATA INTERPRETATION AND RESULTS

The researcher has used Cronbach's Alpha reliability test to evaluate the reliability of the questionnaire for the survey study. The analysis was done using SPSS.

Table: 1 Cronbach's Alpha Reliability Statistics

Reliability Statistics	
Cronbach's Alpha	N of Items
.985	43

(Data Compiled by using SPSS)

As statistics tells more the Alpha value near to 1 more will be the reliability. The above table-1 reveals that the Cronbach's Alpha value = .985. Therefore based on the Alpha value it can be decided that the framed questionnaires are more reliable and the feedback survey can be organized by using the questionnaire.

Table - 2. Demographic Profile of the Respondents

Variables		Frequency	Percent
Gender	Male	53	53.0
	Female	47	47.0
Age	20-30	18	18.0
	30-40	17	17.0
	40-50	30	30.0
	above 50	35	35.0
Income	Less than 10000	5	5.0
	10000-20000	16	16.0
	20000-30000	41	41.0
	Above 30000	38	38.0
Education	SSC	36	36.0
	HSC	20	20.0
	Graduation	22	22.0
	other	22	22.0
Marital Status	Married	58	58.0
	Unmarried	42	42.0

Source: Primary data

Interpretation

From the above demographic profile table-2 it is perceived that almost 53% of respondents are male and 47 % are female. The frequency of male respondents is more than female respondents. Majority of the respondents belong to the age group of above 50 (35%) and 30% belong to the age group 40-50. 41% of respondents fall under the monthly income level 20000-30000. 22% of the respondents are graduates and 58 % respondents are married.

Hypothesis: 1

H₀: Gender and awareness about Healthcare products are independent.

H₁: Gender and awareness about Healthcare products are related.

Table -3 : Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Gender * Awareness	100	100.0%	0	0.0%	100	100.0%

(Data Compiled using SPSS)

		Awareness					Total
		Highly Aware	Aware	Neither Aware nor Not Aware	Not Aware	Highly Not Aware	
Gender	Male	10	20	16	4	3	53
	Female	2	8	26	6	5	47
Total		12	28	42	10	8	100

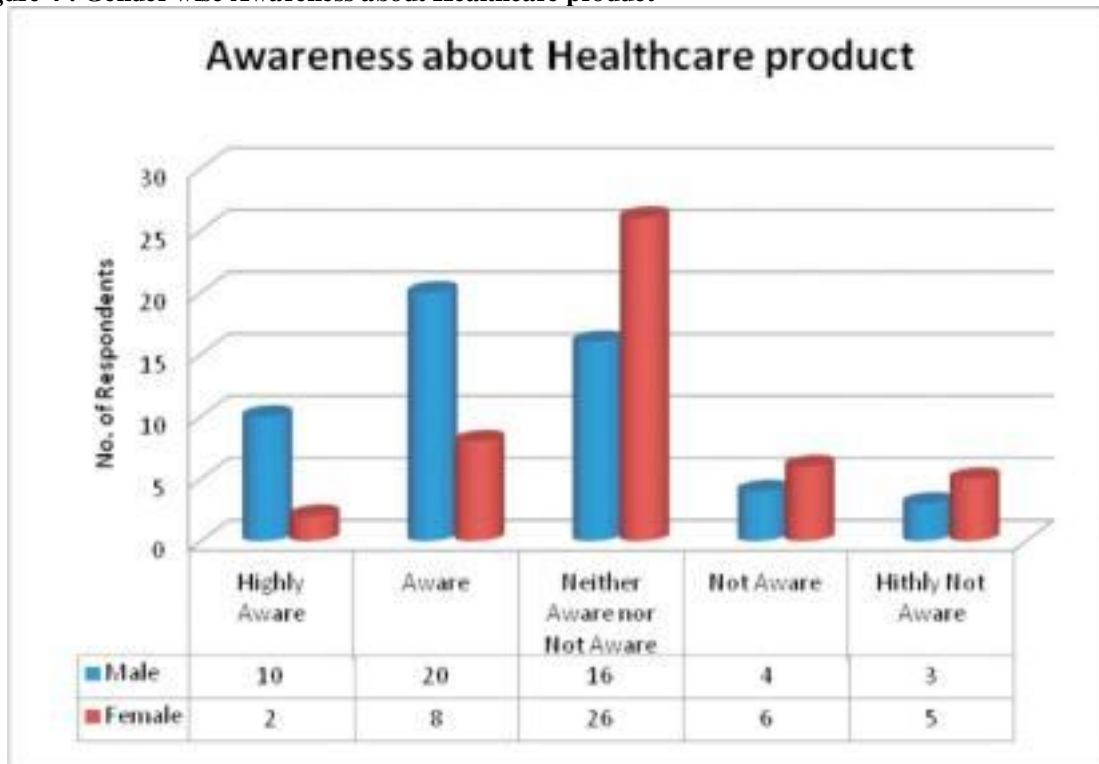
(Data Compiled usiag SPSS)

Table -5 : Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	13.446 ^a	4	.009
Likelihood Ratio	14.087	4	.007
Linear-by-Linear Association	9.399	1	.002
N of Valid Cases	100		

a. 3 cells (30.0%) have expected count less than 5. The minimum expected count is 3.76. (Data Compiled using SPSS)

Figure 4 : Gender wise Awareness about Healthcare product



From the table 4 it can be identify that, out of 100 total respondents 53% are male and 47% are female. Out of male respondents majority fall under aware 20% followed by neither aware nor not aware 16% followed by highly aware 10% and the lowest level of respondents fall under highly not aware and not aware category are 3% and 4 % respectively. Out of female respondents majority fall under neither aware nor not aware 26% followed by aware 8% and the lowest level of respondents fall under highly aware category are 2%. It can be inferred that majority of female respondents are not aware compared to male respondents. From the table 5 it can be identify that, the Pearson chi-square value is 13.446 and p-value is less than .05, ($p = 0.009$). So we can reject the null hypothesis, and say that Gender and awareness about Healthcare products are related.

Hypothesis: 2

H₀: Age and awareness about Healthcare products are independent.

H₁: Age and awareness about Healthcare products are related.

Table-6 : Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Age * Awareness	100	100.0%	0	0.0%	100	100.0%

(Data Compiled using SPSS)

Table-7 : Age - Awareness Cross tabulation

Count

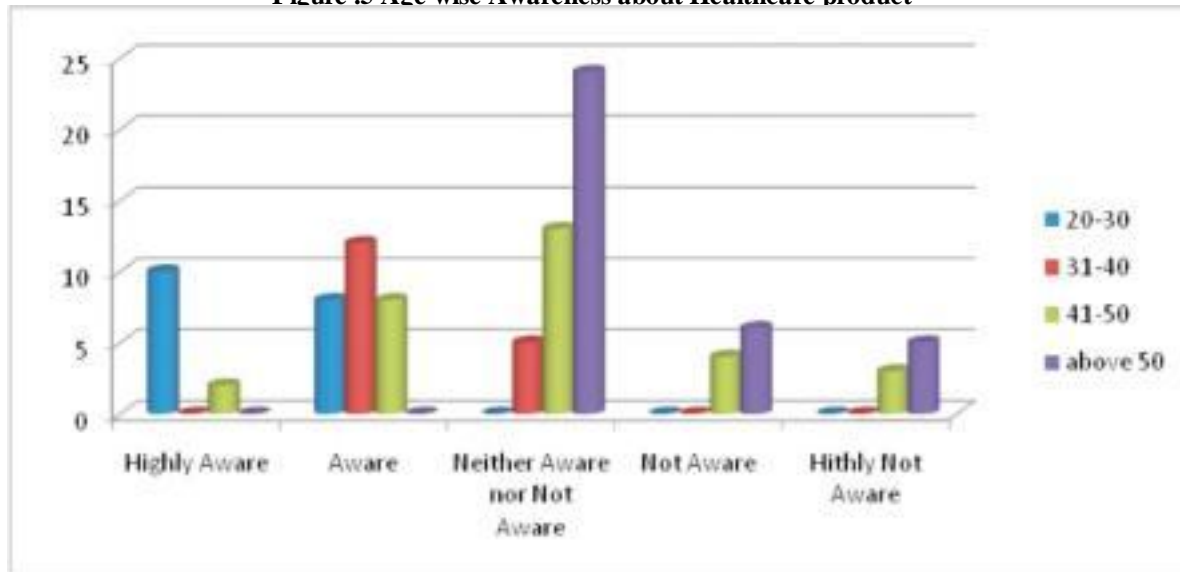
		Awareness					Total
		Highly Aware	Aware	Neither Aware nor Not Aware	Not Aware	Highly Not Aware	
Age	20-30	10	8	0	0	0	18
	31-40	0	12	5	0	0	17
	41-50	2	8	13	4	3	30
	above 50	0	0	24	6	5	35
Total		12	28	42	10	8	100

(Data Compiled using SPSS)

Table-8 : Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	82.372 ^a	12	.000
Likelihood Ratio	93.788	12	.000
Linear-by-Linear Association	46.368	1	.000
N of Valid Cases	100		

a. 13 cells (65.0%) have expected count less than 5. The minimum expected count is 1.36. (Data Compiled using SPSS)

Figure .5 Age wise Awareness about Healthcare product

From the table 7 it can be identify that, out of 100 total respondents 18% belongs to the age group of 20-30 years and 17% belongs to the age group of 31-40 years. 30% belongs to the age group of 41-50 years. 35% belongs to the age group of More than 50 years. Out of age group of 20-30 years respondent's majority 55.6% fall under highly aware, followed by 44.4% under aware. Out of age group of 31-40 years respondent's majority 70.6% fall under aware and 29.4% fall under neither aware nor not aware. Out of age group of 41-50 years respondent's 6.7% fall under highly aware and 26.7% fall under aware, 43.3% fall under neither aware nor not aware and 13.3% fall under not aware, 10% highly not aware. Out of age group of more than 50 years respondent's 14.3% fall under highly not aware, 68.6% fall under neither aware nor not aware. 17.1% fall under not aware. So we can conclude that youngster is more aware than older person for healthcare products. From the table 8 it can be identify that, the Pearson chi-square value is 82.372 and p-value is less than .05, ($p = 0.000$). So we can reject the null hypothesis, and say that Age and awareness about Healthcare products are related.

Hypothesis: 3

H₀: Income and awareness about Healthcare products are independent.

H₁: Income and awareness about Healthcare products are related.

Table-9 : Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Income * Awareness	100	100.0%	0	0.0%	100	100.0%

(Data Compiled using SPSS)

Table-10 : Income * Awareness Cross tabulation

Count		Awareness					Total
		Highly Aware	Aware	Neither Aware nor Not Aware	Not Aware	Highly Not Aware	
Income	less than 10000	5	0	0	0	0	5
	10000-20000	5	11	0	0	0	16
	20000-30000	2	16	16	4	3	41
	Above 30000	0	1	26	6	5	38
Total		12	28	42	10	8	100

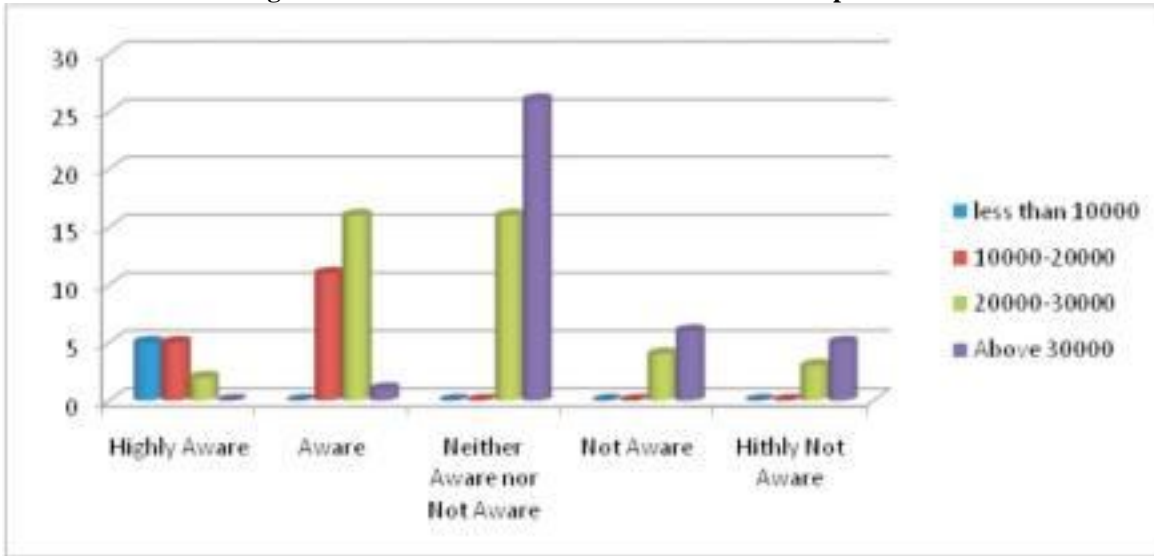
(Data Compiled using SPSS)

Table-11: Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	86.469 ^a	12	.000
Likelihood Ratio	85.578	12	.000
Linear-by-Linear Association	42.869	1	.000
N of Valid Cases	100		

a. 15 cells (75.0%) have expected count less than 5. The minimum expected count is .40. (Data Compiled using SPSS)

Figure .6 Income wise Awareness about Healthcare product



From the table 10 it can be identify that, out of 100 total respondents 5% belongs to the income group of less than 10000 rupees and 16% belongs to 10000-20000 rupees income. 41% belongs to 20000-30000 rupees income. 38% belongs to above 30000 rupees income. Out of income group of less than 10000 rupees respondent's majority 100% fall under highly aware. Out of income group of 10000-20000 rupees 31.2% under highly aware, 68.8% fall under aware. Out of income group of income group of 20000-30000 rupees 4.9% fall under highly aware, 39% fall under aware, 39% fall under neither aware nor not aware, 9.8% not

aware, 7.3% highly not aware. Out of age group of income group of above 30000 rupees 2.6% fall under aware, 68.4% fall under neither aware nor not aware. 15.8% fall under not aware, 13.2% fall under highly not aware. So we can conclude that income above 20000 rupees more aware than income below 20000 rupees for healthcare products. From the table 11 it can be identify that, the Pearson chi-square value is 86.469 and p-value is less than .05, ($p = 0.000$). So we can reject the null hypothesis, and say that Income and awareness about Healthcare products are related.

Hypothesis: 4

H_0 : Education and awareness about Healthcare products are independent.

H_1 : Education and awareness about Healthcare products are related.

Table-12 : Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Education * Awareness	100	100.0%	0	0.0%	100	100.0%

(Data Compiled using SPSS)

Table-13 : Education * Awareness Cross tabulation

Count		Awareness					Total
		Highly Aware	Aware	Neither Aware nor Not Aware	Not Aware	Highly Not Aware	
Education	SSC	10	20	6	0	0	36
	HSC	2	1	10	4	3	20
	Graduation	0	7	15	0	0	22
	Others	0	0	11	6	5	22
Total		12	28	42	10	8	100

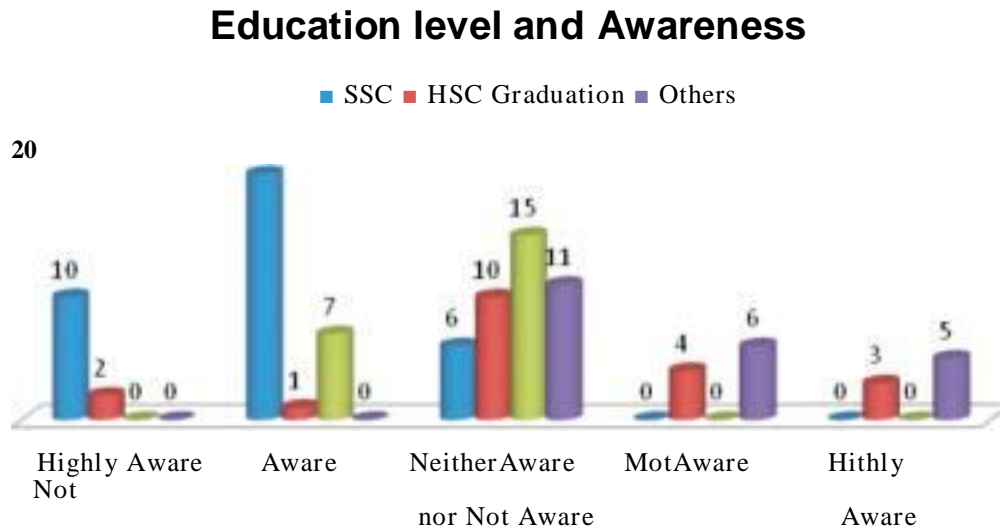
Table-14 : Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	68.555 ^a	12	.000
Likelihood Ratio	84.373	12	.000
Linear-by-Linear Association	34.428	1	.000
N of Valid Cases	100		

a. 12 cells (60.0%) have expected count less than 5. The minimum expected count is 1.60. (Data Compiled using SPSS)

(Data Compiled using SPSS)

Figure 7 : Education level wise Awareness about Healthcare product



From the table 13 it can be identify that, out of 100 total respondents 36% belongs to SSC education level and 20% belongs to HSC education level. 22% belongs to Graduation education level. 22% belongs to other education level. Out of SSC education level respondent's 27.8% fall under highly aware, 55.6% are aware, 16.7% are neither aware nor not aware, 0% not aware, 0% highly not aware. Out of HSC education level respondent's 10% fall under highly aware, 5% are aware,50% are neither aware nor not aware, 20% not aware, 15% highly not aware. Out of graduation education level respondent's 0% fall under highly aware, 31.8% are aware,68.2% are neither aware nor not aware, 0% not aware, 0% highly not aware. Out of other education level respondent's 0% fall under highly aware, 0% are aware,50% are neither aware nor not aware, 27.3% not aware, 22.7% highly not aware. So we can conclude that graduate respondents are more aware than other for healthcare products. From the table 14 it can be identify that, the Pearson chi-square value is 68.555 and p-value is less than .05, (p = 0.000). So we can reject the null hypothesis, and say that education level and awareness about Healthcare products are related.

Hypothesis: S

H₀: Marital status and awareness about Healthcare products are independent.

H₁: Marital status and awareness about Healthcare products are related.

Table-15 : Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Marital status * Awareness	100	100.0%	0	0.0%	100	100.0%

(Data Compiled using SPSS)

Table-16 : Marital status * Awareness Cross tabulation

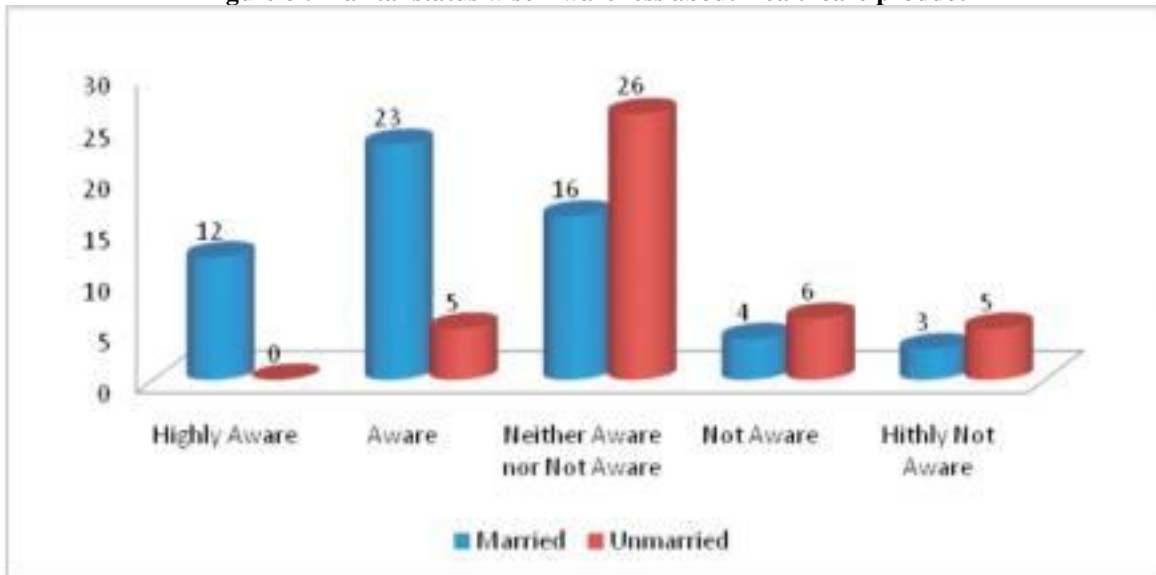
		Awareness					Total
		Highly Aware	Aware	Neither Aware nor Not Aware	Not Aware	Highly Not Aware	
Marital status	Married	12	23	16	4	3	58
	Unmarried	0	5	26	6	5	42
Total		12	28	42	10	8	100

(Data Compiled using SPSS)

Table-17: Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	24.931 ^a	4	.000
Likelihood Ratio	29.916	4	.000
Linear-by-Linear Association	17.554	1	.000
N of Valid Cases	100		

a. 3 cells (30.0%) have expected count less than 5. The minimum expected count is 3.36. (Data Compiled using SPSS)

Figure 8 : Marital status wise Awareness about Healthcare product

From the table 16 it can be identify that, out of 100 total respondents 58% are married and 42% are unmarried. Out of married respondent's 20.7% fall under highly aware, 39.7% are aware, 27.6% are neither aware nor not aware, 6.9% not aware, 5.2% highly not aware. Out of unmarried respondent's 0% fall under highly aware, 11.9% are aware, 61.9% are neither aware nor not aware, 14.3% not aware, 11.9% highly not aware. So we can conclude that married people are more aware than unmarried people for healthcare products. From the table 17 it can be identify that, the Pearson chi-square value is 24.931 and p-value is less than .05, ($p = 0.000$). So we can reject the null hypothesis, and say that marital status and awareness about Healthcare products are related.

FINDINGS

- Majority of female respondents are not aware compared to male respondents.
- Gender and awareness about Healthcare products are related.
- Youngster is more aware than older person for healthcare products.
- Age and awareness about Healthcare products are related.
- Income above 20000 rupees is more aware than income below 20000 rupees for healthcare products.
- Income and awareness about Healthcare products are related.
- Graduate respondents are more aware than other for healthcare products.
- Education level and awareness about Healthcare products are related.
- Married people are more aware than unmarried people for healthcare products.
- Marital status and awareness about Healthcare products are related.

SUGGESTIONS

From the above findings we can suggest that health care companies should consider the entire demographic factor while launching health care product. Health care company should take the feedback from customer regarding the satisfaction of that product so that they can upgrade the quality of the existing product. Health care company can also engage in Corporate Social Responsibility action so that they can create good brand image in customers mind. By analyzing customer's perception and awareness level they can connect their product with customer and increase the current market share.

LIMITATIONS

The study is limited to the study of awareness, perceptions and buying behavior of customers of healthcare products. The perception of customers is limited to the time period of the study. Primary data has its own limitations. As this study was conducted only in Indore region the finding cannot be generalized for overall state. If the sample size could be taken a bit larger, we could have reached to more accurate results.

IMPLICATIONS OF THE STUDY

The study related to customer perception, awareness & buying behavior will help healthcare firm in improving their marketing strategies. Company will know the psychology of customers related to their product. Companies will be aware regarding the factors which influence buying behavior and decision making, thought process of customers. This study will be helpful in designing new marketing campaign for healthcare marketer.

CONCLUSION

To summarize, various studies have highlighted the aspects like consumer's awareness, attitude, familiarity, side effect, marketing mix, quality, experience, belief and knowledge, pattern of usage and packaging related issues of healthcare products. It is the age of competition. Due to changing lifestyle people fall ill regularly. To fight with that problem people prefer lifestyle healthcare product. Healthcare product products are helpful in controlling various diseases and to stay fit. Health care companies should consider the demographic factor along with environmental factors to establish their product into the market. Kotler & Keller's, (2009) also analyzed that the brand awareness plays an important role in consumer buying behavior, so the healthcare companies should focus on brand image building also.

It can be concluded that many people are not aware or not having faith on healthcare product so the policy maker will have to work on this front to create awareness among different gender, different age group, deferent, income level, deferent education and marital status. By adopting this strategy they can capture the market. Changing business environment is encouraging healthcare companies to develop a new model of business and to rethink on strategies to match the present need of market. So consumer perception and awareness plays an important role to decide the move of market.

REFERENCES

- Awad, A., & Al-Shaye, D. (2014), Public awareness, patterns of use and attitudes toward natural health products in Kuwait: A cross-sectional survey. *BMC Complementary and Alternative Medicine*, 14, PP. 105.
- Abu Bashar et.al (2012) A study of influence of demographic factors on consumer Impulse buying behavior, *International Journal of Management and Strategy (IJMS)* 2012, Vol. No. 3, Issue 5, July-Dec.2012 PP. 1-18.
- Arnold, M.J. and Reynolds, K.E. (2003) "Hedonic shopping motivations", *Journal of Retailing*, Vol. 79 No.2,PP..77-95.
- Anderson KJ, Revelle W (1994). Impulsivity and time of day: Is rate of change in arousal a function of impulsivity? *J. Personal. Soc. Psych.*, 67(2): PP. 334-344.
- Babin, B.J., Darden, W.R. and Griffin, M. (1994) "Work and/or fun: Measuring hedonic and utilitarian shopping value", *Journal of Consumer Research*, Vol. 32, PP.243-256.
- Beatty, S.E. & Ferrell, M.E. (1988), "Impulse buying: modeling its precursors", *Journal of Retailing*, Vol. 74, PP. 169-191.
- Bellenger, Danny, N., Dan H. Robertson and Elizabeth C. Hirshman.,1978. "Impulsive Buying Varies By Product", *Journal of Advertising Research*, 18(December), PP. 15-18.
- Bloch, P.H., Sherrell, D.L., and Ridgway, N.M. (1986) "Consumer search: An extended framework", *Journal of Consumer Research*, Vol. 26, PP. 124-145.
- Buttle, F. and Coates, M. (1984), "Purchase motives", *The Service Industries Journal*, Vol.4,No.1,PP. 71-81.
- Coughlin, M. and O'Connor, P.J. (1985). Gender role portrayals in advertising: An individual differences analysis. In Hirschman, E.C. and Holbrook, M.B. (eds.). *Advances in Consumer Research*, 12, PP. 238-241, Ann Arbor, MI: Association for Consumer Research.
- Dittmar, H. & Drury, J. (2000), "Self-image- is it in the bag? A qualitative comparison between 'ordinary' and 'excessive' consumers", *Journal of Economic Psychology*. Vol. 21. PP. 109-142.
- Donovan, R.J. & Rossiter, J.R. (1982), "Store atmosphere: An environmental psychology approach", *Journal of Retailing*. Vol. 58(Spring), PP. 34-57.
- Dagmar recklies (2015) customer perception, Retrieved from <http://www.ask.com/business-finance/customer-perception-7e490f419d41a746>.
- Eastlick, M. and Feinberg, R.A. (1999), "Purchase motives for mail catalog shopping", *Journal of Business Research*, Vol.45, No. 3,PP. 281-290.
- Ekeng et.al (2012) Effect of demographic characteristics on consumer impulse buying among consumers of calabar municipality, cross river state, *Academic Research International* ,Vol. 3, No. 2, September 2012, PP. 568-574.
- Fischer, E. and Arnold, S.J. (1990). More than a labor of love: Gender roles and **Christmas** gift shopping. *Journal of Consumer Research*,17,December,PP.333-345.
- Gilbert, D.C. and Jackaria, N. (2002). The efficacy of sales promotions in UK supermarkets: A consumer view. *International Journal of Retail & Distribution Management*, 30 (6), PP.315-322.
- Huff, L.C. and Alden, D.L. (1998). An investigation of consumer response to sales promotions in developing markets: A three country analysis. *Journal of Advertising Research*, 38(3), PP.47-56.
- Irshad Ali, Manmohan Yadav (2015) a study of consumer perception of herbal products in bhopal (with special reference to vindhya herbal products) PP.69-80.
- Jaffe, L.J. (1991). Impact of positioning and sex-role identity on women's responses to advertising. *Journal of Advertising Research*, June/July, PP.57-64.

- Kotler, P., & G., A. (2009), *Principles of Marketing* (12th ed.). New Delhi: Pearson Education.
- Keller, K. & Kotler, P., 2009. *Marketing management* 13th ed. Prentice Hall. Upper Saddle River. New Jersey.
- Kotler p., Armstrong G., Saunder J., and Wong, v., (1999) "principle of marketing' (2nd edn) England; prentice hall.
- Kevin Budelmann, Yang Kim, Curt Wozniak (2012) *Customer Experience Planning*, Retrieved from <http://archives.rockpaperink.com/content/article.php?id=711>.
- Lifu, F.L. (2003) *Product Packaging and Its Effect on Consumer Buying Choice in Calabar*. Unpublished M. Sc. Thesis, University of Calabar—Nigeria.
- Mishra, U. S., Das, J. R., Mishra, B. B. and Mishra, P. (2012), "Perceived benefit analysis of sales promotion: a case of consumer durables", *International Research Journal of Finance and Economics*, Issue 98, PP. 145-154.
- Nuntasaree Sukato, & Elsey, A model of male consumer behavior in buying skin care products in thailand ,*ABAC Journal* Vol. 29, No. 1 (January-April 2009, PP.39-52).
- Ndubisi (2005) *Gender Differences in Customer Behavioural Responses to Sales Promotion*,*Asia Pacific Management Review* (2005) 10(3), PP. 175-185.
- Oppenheim, A. (1992). Questionnaire, design, interviewing and attitude measurement. In Gilbert, D.C. and Jackaria, N. (eds.). *The efficacy of sales promotions in UK supermarkets: A consumer view*. *International Journal of Retail & Distribution Management*, 30 (6), PP.315-322.
- Park, C. (2003), "Hedonic-Experiential Values in Online Shopping: Antecedents and Consequences", *Asia Pacific Journal of Information Systems* 13(4), PP.73-96.
- Qualls, W.J. (1987). Household decision behavior: The impact of husbands' and wives' sex role orientation. *Journal of Consumer Research*, 14, PP.264-279.
- Rook, D. W. and Gardner, M. P. (1993), "In the mood: impulse buying's affective antecedents", *Research in Consumer Behavior*, Vol. 6, PP. 1-26.
- R. Lichtenstein et al., (1997). "An Examination of Deal Proneness Across Sales Promotion Types: A Consumer Segmentation Perspective". *Journal of Retailing*, Volume 73(2), PP.283-297.
- Shukla R. (2015), *A study on customer satisfaction for corporate hospital services: An empirical investigation* ,*Oorja*, PP.47-54.
- Suleiman, A. K. (2014), *Attitudes and Beliefs of Consumers of Herbal Medicines in Riyadh, Saudi Arabia*. *Journal of Community Medicine & Health Education*, IV(2).
- Teunter. (2002). "Analysis of Sales Promotion Effects on Household Purchase Behavior" ERIM Ph.D. Series Research in Management. Erasmus University Rotterdam.
- Vani, G., Babu, M. G., and Panchanathan, N. (2010), "Toothpaste brands: a study of consumer behaviour in Bangalore city", *Journal of Economics and Behavioral Studies*, Vol. 1, No. 1, PP.27-39.
- Wood, Michael, 1998, *Socio Economic Status, delay of gratification, and Impulsive Buying*. *Journal of Economic Psychology*, 19, PP.295-320.
- Zheng. (2006). "Internet Shopping And Its Impact On Consumer Behavior". (Dissertation for MSc International Business). University of Nottingham.
- Zajonc, R.B. (1980). Feeling and thinking: Preferences need no inferences. In Huff, L.C., & Alden, D.L. (eds.). *An investigation of consumer response to sales promotions in developing markets: A three country analysis*. *Journal of Advertising Research*. 38 (3), PP.47-56.