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Service Quality, Price Perception, And Consumer Purchase Decisions: Empirical Evidence From Nabila Medika Pharmacy Ciluluk

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A B S T R A C T
Apotek Nabila Medika Ciluluk faces a decline in transactions influenced by poor service quality, such as long waiting times and unclear information about medicines provided by staff. In addition, the price of medicines is considered less affordable for consumers. These conditions potentially reduce consumer purchasing decisions. This study aims to examine the conditions of service quality, price, and purchasing decisions at Apotek Nabila Medika Ciluluk, as well as to analyze the effect of service quality and price both simultaneously and partially on purchasing decisions. The study applies a qualitative approach quantified into descriptive and verificative analysis. The population consists of all consumers of Apotek Nabila Medika, with a sample of 98 respondents selected using purposive sampling. Data were analyzed using multiple linear regression with validity and reliability tests, classical assumption tests, coefficient of determination, F-test, and t-test. The results show that simultaneously, service quality and price significantly influence purchasing decisions. Partially, both variables also have a significant influence on purchasing decisions. This confirms that service quality and price are the main factors determining consumer decisions at Apotek Nabila Medika. The difference between this study and previous research lies in the object and location, namely Apotek Nabila Medika Ciluluk in 2025, as well as the focus solely on service quality and price, unlike previous studies that included other variables such as promotion, brand image, or product completeness.

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INTRODUCTION

A pharmacy is more than a retail point for medicines. For many consumers, it is the most immediate place to obtain health-related products, clarify how medicines should be used, and make a purchasing decision under conditions of uncertainty. This makes the commercial encounter distinctive. Consumers evaluate not only whether a product is available, but also whether employees respond promptly, provide understandable information, behave professionally, and offer prices that appear reasonable relative to competing pharmacies. Nabila Medika Pharmacy operates in Ciluluk, Cikancung, Bandung Regency. The transaction record contained in the source study shows 974 consumers in January 2025, an increase to 1,033 in February, followed by declines to 948 in March, 939 in April, and 879 in May. The downward movement after February suggested that the pharmacy was not consistently converting local demand into repeat or continued purchasing activity.

The preliminary survey provided a more detailed picture of the problem. Only 25% of the respondents gave positive responses to the service-quality items, while 75% reported negative perceptions. The absence of an effective queueing system, unclear medication information, and relatively long waiting times were the main concerns. Price also emerged as a source of hesitation. A majority of preliminary respondents considered medicines less affordable than expected and reported that some prices were not competitive with nearby pharmacies. The purchase-decision indicators showed the same tension. Consumers did not always compare alternatives before buying, and several respondents expressed limited satisfaction and weak intention to repurchase. These observations make service quality and price especially relevant because both can be managed directly by the pharmacy and can shape the perceived risk of a health-related purchase.

Service quality reflects how consumers evaluate the process through which a service is delivered. In the study, it was organized around reliability, responsiveness, assurance, empathy, and tangibles. Reliability concerns the ability to deliver the promised service accurately and on time. Responsiveness reflects speed and willingness to help. Assurance captures knowledge, courtesy, safety, and trust. Empathy concerns individual attention and understanding of customer needs, while tangibles refer to employee appearance, facilities, communication material, and supporting equipment (Tjiptono, 2024). These dimensions are particularly important in pharmacy settings because the consumer may not possess the same technical knowledge as the seller. A clear explanation can prevent confusion, while a slow or uncertain response can increase perceived risk. Previous work in pharmacy and retail contexts has reported a positive association between service quality and purchase decisions, although the strength of the relationship varies by setting (Armada & Oetoro, 2017; Manoy et al., 2021; Atussa'dyah & Hartaningtyas, 2022).

Price represents the monetary sacrifice required to obtain the product and the value that consumers compare with expected benefits. The source study measured affordability, price-quality fit, price-benefit fit, and competitive price. In a community pharmacy, consumers can often compare similar medicines

across outlets, making perceived price fairness an important screening criterion. Prior studies have found that price can meaningfully influence purchase decisions, particularly among consumers who have close substitutes available (Misnawati & Sumarni, 2020; Cahya et al., 2021; Gracia et al., 2024). Purchase decisions were conceptualized as a process that includes problem recognition, information search, evaluation of alternatives, the purchase decision itself, and post-purchase behavior. Based on this framework, three hypotheses were examined: service quality influences purchase decisions; price influences purchase decisions; and service quality and price jointly influence purchase decisions.

LITERATURE REVIEW

To understand the dynamics influencing consumer choices at Apotek Nabila Medika Ciluluk, this study integrates core concepts from marketing management and consumer behavior. Specifically, the framework centers on two independent variables—Service Quality and Price Perception—and their collective and partial impacts on the dependent variable, Consumer Purchase Decisions.Below are five relevant theories that substantiate this framework:

1. Theory of Service Quality Dimensions
   Service quality is defined as a global judgment or attitude relating to the superiority of a service, evaluated through customer expectations and actual experiences. According to Tjiptono (2024), service quality in retail and service sectors is operationalized through five primary dimensions:Reliability: The ability to perform the promised service dependably and accurately.Responsiveness: The willingness to help customers and provide prompt service.Assurance: The knowledge, courtesy, and competence of employees that inspire trust and confidence.Empathy: Caring, individualized attention given to customers.Tangibles: Physical facilities, equipment, and staff appearance.In a healthcare retail setting like a pharmacy, maintaining high standards across these dimensions minimizes perceived consumer uncertainty and builds long-term institutional trust (Armada & Oetoro, 2017).
2. Theory of Price and Consumer Value Perception
   Price represents the monetary sacrifice exchanged for the ownership or use of a product or service. Kotler and Armstrong (defined in foundational marketing frameworks and further synthesized by Yulianto, 2025) note that price is often the most flexible marketing mix element, directly impacting both revenue and perceived value. Consumer price perception is multifaceted, encompassing:Price affordability,The alignment between price and product quality,The alignment between price and functional benefits, andPrice competitiveness relative to alternative market providers (Misnawati & Sumarni, 2020).When consumers evaluate a community pharmacy where equivalent medical products are widely available, perceived price fairness acts as an essential screening filter determining whether an outlet remains in their active consideration set (Gracia et al., 2024).
3. Theory of Consumer Purchase Decision Process
   A purchase decision is the culmination of a complex cognitive and behavioral

process wherein a consumer selects a preferred option from a set of alternatives. As outlined by modern marketing literature (e.g., Nofirda & Susanto, 2024; Isra et al., 2024), the standard decision-making process involves five distinct stages:Problem Recognition: Identifying an unfulfilled need or health-related problem.Information Search: Seeking internal or external data to resolve the need.Alternative Evaluation: Weighing competing options based on attributes such as service speed, product availability, and cost.Purchase Decision: The final act of executing the transaction at a chosen venue.Post-Purchase Behavior: Post-acquisition satisfaction or cognitive dissonance that influences future loyalty and repeat patronage.

4. Theory of Customer Satisfaction and Behavioral IntentionsThe expectancy-disconfirmation paradigm, foundational to consumer behavior and service marketing (Tjiptono, 2024), posits that consumer decisions and repeat intentions are heavily driven by the alignment between prior expectations and actual service/product performance. When service quality and pricing structures meet or exceed consumer expectations—especially in routine or urgent health contexts—positive evaluations manifest as heightened purchase intentions, brand loyalty, and positive word-of-mouth (Manoy et al., 2021). Conversely, prolonged waiting times, unclear product guidance, or uncompetitive pricing create negative disconfirmation, prompting consumers to switch to alternative pharmacies (Cahya et al., 2021).
5. Stimulus-Organism-Response (S-R) Framework in Retail EnvironmentsThe Stimulus-Organism-Response (S-R) model adapted from environmental psychology provides a structural explanation for retail consumer behavior. In this context, external environmental cues managed by the retail outlet—such as store atmosphere, staff responsiveness, and transparent pricing structures (Stimulus)—influence the internal cognitive and emotional state of the consumer (Organism). This internal processing leads to approach or avoidance behaviors, culminating in the final Purchase Decision (Atussa'dyah & Hartaningtyas, 2022). This theoretical lens justifies examining service quality and price perception as primary external stimuli driving consumer choice within community pharmacies.

METHODOLOGY

The study used a quantitative survey approach with descriptive, associative, and verificative purposes. The unit of analysis was the consumer of Nabila Medika Pharmacy. Primary data were collected directly from consumers using a structured questionnaire, while secondary data included pharmacy transaction records and supporting literature. Data collection was conducted during the 2025 research period through observation, interviews, and questionnaires. The population consisted of 4,773 consumers recorded from January to May 2025. The sample size was calculated using the Slovin formula with a 10% error allowance, producing 97.9 and rounded to 98 respondents. The source thesis contains an inconsistency in its abstract, which refers to purposive sampling, whereas the sampling calculation in the method chapter uses the Slovin formula. This article retains the documented sample size of 98 and reports

the method calculation as presented in Chapter III rather than silently reconciling the discrepancy.

Service quality (X1) was represented by reliability, responsiveness, assurance, empathy, and tangibles. Price (X2) was measured through affordability, fit between price and quality, fit between price and benefits, and price competitiveness. Purchase decision (Y) included problem recognition, information search, evaluation of alternatives, purchase decision, and post-purchase behavior. Responses were measured using a five-point Likert scale. The instrument was evaluated using item validity and Cronbach's alpha reliability. Subsequent analysis included descriptive statistics, the Kolmogorov-Smirnov normality test, tolerance and variance inflation factor for multicollinearity, the Glejser approach for heteroskedasticity, multiple linear regression, Pearson correlation, coefficient of determination, the simultaneous F-test, and partial t-tests in SPSS version 26. The source thesis states a 10% decision threshold in its hypothesis interpretation; the principal p-values reported in the SPSS outputs are also below 0.05. Statistical tables below are reproduced from the source without altering their numerical content.

RESULTS AND DISCUSSION

Instrument Validity and Reliability

All items exceeded the r-table criterion reported in the study and were retained. Internal consistency was also acceptable under the source criterion: Cronbach's alpha was 0.917 for service quality, 0.637 for price, and 0.678 for purchase decision. The images below reproduce the tables exactly as they appear in the thesis.

Tables 1: Validity

Item Pernyatan	R Hitung	R tabel	Keterangan
X1-1	0,702	0,1986	Valid
X1-2	0,264	0,1986	Valid
X1-3	0,480	0,1986	Valid
X1-4	0,586	0,1986	Valid
X1-5	0,566	0,1986	Valid
X1-6	0,656	0,1986	Valid
X1-7	0,694	0,1986	Valid

Tables 2: Reliability

Variabel	Nilai Hitung	Nilai Cronbach Alpha	Keterangan
Kualitas Layanan(X_1)	0,917	0,60	Realibel
Harga (X_2)	0,637	0,60	Realibel
Keputusan Pembelian (Y)	0,678	0,60	Realibel

Descriptive Assessment of the Main Variables

The full survey presents a more favorable picture than the preliminary survey. Service quality achieved an overall mean of 3.87 and was classified as good. Assurance and tangible elements were among the strongest dimensions, while the thesis identified complaint responsiveness as the weakest item. Price obtained an overall mean of 3.50 and was also categorized as good; the strongest perception concerned the fit between price and product quality, while competitive price remained a comparatively weaker area. Purchase decisions achieved a mean of 3.55, with the actual purchase-decision stage scoring highest and problem recognition scoring lowest.

Table 5. Original Recap Of Service-Quality Dimensions

No	Dimensi	Skor	Rata-rata
1.	Keandalan (*Realiability*)	1.459	3,72
2.	Daya Tanggap (*Responsiveness*)	1.422	3,62
3.	Jaminan (*Assurance*)	1.590	4,05
4.	Empati (*Emphaty*)	1.551	3,96
5.	Bukti Fisik (*Tangibles*)	800	4,08
	Rata - rata	6.822	3,87

Table 6. Original Recap Of Price Dimensions

No	Dimensi	Skor	Rata-rata
1.	Keterjangkauan harga	315	3,21
2.	Harga sesuai dengan kualitas	380	3,87
3.	Kesesuai harga dengan manfaat	371	3,78
4.	Harga berdasarkan kemampuan bersaing	307	3,13
	Rata - rata	1.373	3,50

Table 7. Original Recap Of Purchase-Decision Dimensions

No	Dimensi	Skor	Rata-rata
1.	Pengenalan masalah	307	3,13
2.	Pencarian informasi	323	3,29
3.	Evaluasi alternative	384	3,91
4.	Keputusan pembelian	402	4,10
5.	Perilaku pasca pembelian	328	3,35
	Rata - rata	1.774	3,55

Classical Assumption Tests

The residual normality test reported an asymptotic significance of 0.200. Tolerance was 0.544 and VIF was 1.839 for both independent variables, indicating no problematic multicollinearity under the criteria used in the study. The heteroskedasticity test returned significance values of 0.137 for service quality

and 0.605 for price, both above the reported threshold. These results support the use of the multiple regression model.

Table 8. Original SPSS Kolmogorov-Smirnov Normality Output

One-Sample Kolmogorov-Smirnov Test		
		Unstandardized Residual
N		98
Normal Parameters[a,b]	Mean	.0000000
	Std. Deviation	2.47307173
Most Extreme Differences	Absolute	.051
	Positive	.050
	Negative	-.051
Test Statistic		.051
Asymp. Sig. (2-tailed)		.200[c,d]
a. Test distribution is Normal.		
b. Calculated from data.		
c. Lilliefors Significance Correction.		
d. This is a lower bound of the true significance.		

Table 9. Original SPSS Multicollinearity Output

Coefficients[a]			
Model		Collinearity Statistics	
		Tolerance	VIF
1	Kualitas Layanan	.544	1.839
	Harga	.544	1.839
a. Dependen t Variable: y			

Table 10. Original SPSS heteroskedasticity output

Coefficients[a]				
	Unstandardized	Standardized Coefficie		

Model		Coefficients		nts	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	3.117	.824		3.784	.000
	Kualitas Layanan	-.026	.018	-.206	-1.501	.137
	Harga	.039	.076	.071	.518	.605
a. Dependen t Variable: ABS_RES						

Multiple Linear Regression and Correlation

Table 11. Original SPSS Multiple Linear Regression Output

Coefficients[a]									
Model		Unstandardized Coefficients		Standardize d Coefficients	t	Sig.	Correlations		
		B	Std. Error	Beta			Zero-order	Partial	Part
1	(Constant)	4.133	1.456		2.838	.006			
	Kualitas Layanan	.095	.031	.328	3.049	.003	.574	.299	.242
	Harga	.451	.134	.363	3.372	.001	.585	.327	.268
a. Dependen t Variable: Keputusan Pembelian									

The estimated equation was Y = 4.133 + 0.095X1 + 0.451X2. Holding price constant, a one-unit increase in service quality was associated with a 0.095-unit increase in purchase decision. Holding service quality constant, a one-unit increase in price perception was associated with a 0.451-unit increase. The standardized coefficients were 0.328 for service quality and 0.363 for price, indicating that price was the stronger predictor within the joint model.

Table 12. Original SPSS Pearson Correlation Matrix

Correlations				
		Kualitas Layanan	Harga	Keputusan Pembelian
Kualitas Layanan	Pearson Correlation	1	.676**	.574**
	Sig. (2-tailed)		.000	.000
	N	98	98	98
Harga	Pearson Correlation	.676**	1	.585**
	Sig. (2-tailed)	.000		.000
	N	98	98	98
Keputusan Pembelian	Pearson Correlation	.574**	.585**	1
	Sig. (2-tailed)	.000	.000	
	N	98	98	98
**. Correlation is significant at the 0.01 level (2-tailed).				

Service quality correlated positively with purchase decisions ($r = 0.574$; $p < 0.001$), while price showed a slightly stronger positive correlation ($r = 0.585$; $p < 0.001$). Service quality and price were also positively related ($r = 0.676$; $p < 0.001$), but the collinearity statistics remained within the limits used by the study.

Coefficient of Determination and Relative Contribution

Table 13. Original SPSS Model Summary

Model Summary[b]				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.633[a]	.403	.388	2.49897
a. Predictors: (Constant), Harga, Kualitas Layanan				
b. Dependen t Variable: Keputusan Pembelian				

The multiple correlation coefficient was 0.633. R Square was 0.403 and adjusted R Square was 0.388, showing that service quality and price jointly explained 40.3% of the observed variation in purchase decisions. The remaining 59.7% may be connected with variables not included in the model, such as product availability, convenience, promotion, brand trust, recommendations, location, or the urgency of a consumer's health need.

Table 14. Original Partial-Determination Output and Calculation

Coefficients[a]									
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Correlations		
		B	Std. Error	Beta			Zero-order	Partial	Part
1	(Constant)	4.133	1.456		2.838	.006			
	Kualitas Layanan	.095	.031	.328	3.049	.003	.574	.299	.242
	Harga	.451	.134	.363	3.372	.001	.585	.327	.268
a. Dependen t Variable: Keputusan Pembelian									

The partial contribution calculation in the thesis assigns 18.8% to service quality and 21.5% to price. Price therefore provides the larger contribution to the explanatory power of the model.

Hypothesis Testing

Table 15. Original SPSS Simultaneous F-Test

Anova[a]						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	396.899	2	198.450	31.778	.000[b]
	Residual	593.260	95	6.245		
	Total	990.159	97			
a. Dependen t Variable: Keputusan Pembelian						
b. Predictors: (Constant), Harga, Kualitas Layanan						

The ANOVA output reports F = 31.778 with p < 0.001. Service quality and price therefore have a statistically significant joint relationship with purchase decisions.

Table 16. Original SPSS partial t-test

Coefficients[a]				
	Unstandardized Coefficients	Standardized Coefficients		

Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	4.133	1.456		2.838	.006
	Kualitas Layanan	.095	.031	.328	3.049	.003
	Harga	.451	.134	.363	3.372	.001
a. Dependen t Variable: Keputusan Pembelian						

The partial test shows that service quality is positive and significant (B = 0.095; beta = 0.328; t = 3.049; p = 0.003), supporting the first hypothesis. Price is also positive and significant (B = 0.451; beta = 0.363; t = 3.372; p = 0.001), supporting the second hypothesis. The simultaneous result supports the third hypothesis. Some narrative passages in the source thesis cite different t-statistics and a different price coefficient; this article follows the reproduced SPSS tables as the primary statistical record.

Discussion: Service Quality as a Source of Trust

The significant service-quality effect is consistent with the nature of pharmacy transactions. A consumer may enter a pharmacy with limited information, uncertainty about the correct product, or concern about how a medicine should be used. In that situation, the employee becomes part of the value offered. Courtesy, accuracy, speed, and an understandable explanation reduce the effort and perceived risk involved in the purchase. The descriptive pattern is informative. The strongest service perceptions were related to assurance and tangibles, including polite employees and professional appearance. These attributes strengthen credibility because consumers often use visible behavior as a signal of competence. Yet the source thesis identified complaint handling and responsiveness as a weaker point. This suggests that the pharmacy's interpersonal manner may already be positive, while the operational system supporting rapid response still needs improvement.

The practical implication is that service quality should be managed as a process rather than as employee friendliness alone. A simple queueing system, faster stock recording, clear responsibility for complaints, and a standard routine for explaining dosage, use, and precautions can make the service more predictable. During busy periods, customers should know their position in the queue and the approximate waiting time. These changes can reduce frustration without requiring a major redesign of the business. The result is broadly aligned with previous findings that better service quality is associated with stronger purchase decisions in retail and pharmacy contexts (Armada & Oetoro, 2017; Manoy et al., 2021; Atussa'dyah & Hartaningtyas, 2022). However, the current study adds a local community-pharmacy perspective in which service is closely connected to trust and health-related information.

Discussion: Price as a Decision Filter

Price produced the largest standardized coefficient and partial contribution in the joint model. This finding is plausible in a market where consumers can compare the same or similar medicines across nearby pharmacies.

When the functional product difference is small, the perceived fairness of the price can quickly determine whether an outlet remains in the consumer's consideration set. Importantly, the variable should be interpreted as consumers' evaluation of price rather than the mechanical effect of raising prices. A positive coefficient indicates that more favorable perceptions of affordability, price-quality fit, price-benefit fit, and competitiveness are associated with stronger purchase decisions. It would therefore be incorrect to interpret the coefficient as evidence that simply increasing nominal prices will increase demand.

The descriptive findings support this interpretation. Respondents generally considered the relationship between price and quality to be good, yet price competitiveness received a lower assessment. The pharmacy can address this gap by monitoring frequently purchased items against nearby competitors, keeping price information visible, and avoiding unexpected differences at the point of payment. Where price reductions are not feasible, the pharmacy can increase perceived value through reliable consultation, clear information, loyalty incentives, or economical product bundles. The result is consistent with studies that identify price as an important determinant of consumer choice (Misnawati & Sumarni, 2020; Cahya et al., 2021; Gracia et al., 2024). In the Nabila Medika setting, the effect is slightly stronger than that of service quality, indicating that value-for-money remains central even when service is evaluated positively.

Integrated Discussion and Managerial Implications

Service quality and price should not be managed as separate marketing levers. Consumers judge the total exchange: what they pay, what they receive, and how difficult or reassuring the process feels. A competitive price may attract a customer, but poor information or a long wait can reduce satisfaction. Conversely, excellent service may not secure the purchase when the consumer perceives the price as substantially higher than comparable alternatives. The model explains 40.3% of purchase-decision variation, leaving a substantial portion outside the two predictors. This is important for managerial interpretation. Product availability, prescription fulfillment, location, opening hours, recommendations from family or health professionals, online information, previous experience, and urgency may also shape where a consumer buys medicine. The present results therefore identify two important drivers rather than a complete model of pharmacy behavior.

For Nabila Medika, a practical improvement program can begin with three connected routines. First, establish a service standard for queue handling, response time, and medication explanation. Second, maintain a small competitor-price dashboard for frequently purchased products and review it regularly. Third, collect short post-purchase feedback so that management can identify whether dissatisfaction originates from waiting time, employee communication, product availability, or price. These routines convert survey findings into observable operating indicators.

The study also offers a useful research implication. Future models may examine whether satisfaction or trust mediates the effect of service quality on repeat purchasing, and whether price sensitivity moderates the relationship between

price perception and choice. Transaction-level data could also distinguish first-time purchases from genuine repeat behavior.

CONCLUSIONS AND RECOMMENDATIONS

This study examined service quality, price, and purchase decisions among 98 consumers of Nabila Medika Pharmacy in Ciluluk. The descriptive results classify service quality, price perception, and purchase decisions as good. Service quality had a positive and statistically significant effect on purchase decisions, and price also had a positive and statistically significant effect. The simultaneous model was significant and explained 40.3% of purchase-decision variation.

Price had the larger standardized coefficient and partial contribution, but the finding does not reduce the importance of service quality. The two variables operate together in the customer's value judgment. Consumers are more likely to choose the pharmacy when prices are perceived as fair and competitive and when employees are responsive, courteous, knowledgeable, and able to provide clear information.

Managerial Recommendations

Nabila Medika should prioritize faster complaint handling, clearer medication information, and a more orderly queueing process. At the same time, management should periodically compare prices of frequently purchased medicines with nearby competitors, improve price transparency, and consider loyalty or bundle programs where appropriate. These actions should be monitored through waiting-time records, complaint-resolution time, repeat-purchase data, and short customer feedback.

Limitations and Future Research

The study is limited to one pharmacy, a cross-sectional survey, and three variables. Future research should include additional factors such as product completeness, convenience, trust, promotion, customer satisfaction, digital service, and repurchase intention. A larger multi-pharmacy sample would improve generalizability and allow researchers to compare urban and semi-rural consumer behavior.

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