

**A CAUSAL RELATION MODEL OF MARKET ORIENTATION
AND EXTENDED MARKET ORIENTATION AFFECTING
STRATEGIC MANAGEMENT THROUGH HEALTH
ESTABLISHMENTS PERFORMANCE IN BANGKOK**



Wirut Nakkhasin

**A Dissertation Submitted in Partial
Fulfillment of the Requirements for the Degree of
Doctor of Philosophy (Integrated Tourism Management)
The Graduate School of Tourism Management
National Institute of Development Administration
2018**

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ABSTRACT

Title of Dissertation	A CAUSAL RELATION MODEL OF MARKET ORIENTATION AND EXTENDED MARKET ORIENTATION AFFECTING STRATEGIC MANAGEMENT THROUGH HEALTH ESTABLISHMENTS PERFORMANCE IN BANGKOK
Author	Wirut Nakkhasin
Degree	Doctor of Philosophy (Integrated Tourism Management)
Year	2018

The research was done in Bangkok Thailand due to high competition and the presence of a majority of Thailand's health establishments, which aims to 1) review market orientation, extended market orientation and strategic management affecting health establishment performance in Bangkok 2) to study the relationship between market orientation, extended market orientation and strategic management affecting health establishment performance in Bangkok 3) to investigate of concept for causal relation model of market orientation and extended market orientation affecting health establishment performance in Bangkok. The research method of this study is a mixed method research methodology, which quantitative and qualitative approaches. The population is Thailand's health establishments managers. The sample size was 412 managers, derived using statistical methods to determine a size which yields validity and reliability. The results reveal causal relationship model between market orientation, extended market orientation, strategic management, and health establishment performance as follow structured equation: $SM = 0.84MO + 0.40EMO$ and $PER = 0.80SM$

ACKNOWLEDGEMENTS

I would like to thank Siam University for formally sponsoring and supporting me as well as all of my colleagues. I extremely appreciate the National Institute of Development Administration (NIDA) for admitting me into this Doctor of Philosophy of Integrated Tourism Management course. I am deeply grateful to all my teachers' Assoc. Prof. Dr. Therdchai Choibamroong, Asst.Prof. Dr. Paithoon Monpanthong, Asst.Prof. Dr. Rugphong Vonsaroj, Dr. Woraruck Sucher, Asst.Prof. Dr. Pimmada Wichasin, Asst.Prof. Dr. Charoenchai Aekmapisarn, Asst.Prof. Dr. Suwaree Namuang Asst.Prof. Dr. Chokechai Suvetvattankul, Asst.Prof. Dr. Pattriya Lukpetch, Asst.Prof. Dr. Kanokan Kaewnuch, Asst.Prof. Dr. Kassara Sukpatch, Assoc. Prof. Dr.Yothin Sawangdee, and Asst.Prof. Dr. Sutsan Suttipisan

I would especially like to show my appreciation to Asst.Prof.Dr. Sangkae Punyasiri, my major advisor and Asst.Prof. Dr. Poonpong Suksawang, my co-advisor for their precious guidance, good vitalities that made this hard journey more delightful and less stressful.

I would also like to thanks NIDA's staff P'Kung, Leng, P'Nueng, P'Sa, P'Tha, and P'Oam, who continually reminded me of the administration process and encouraged me during the Ph.D. course.

Let me also thank my Ph.D. classmates (NITs5) in particular, P'Pum, P'Pat, P'Mink, P'Yut, P'Kik, P'Tu, and P'Tong for all support.

Additionally, I'd like to thank P'Fel, P'Porn, and P'Pratoom for your advice and health establishment managers in Bangkok, Thailand for the useful information.

Most importantly my family, without them, I would never have come so far. I would like to give special thanks to them. They helped me maintain my optimism during this extensive and painful journey.

Wirut Nakkhasin

August 2019



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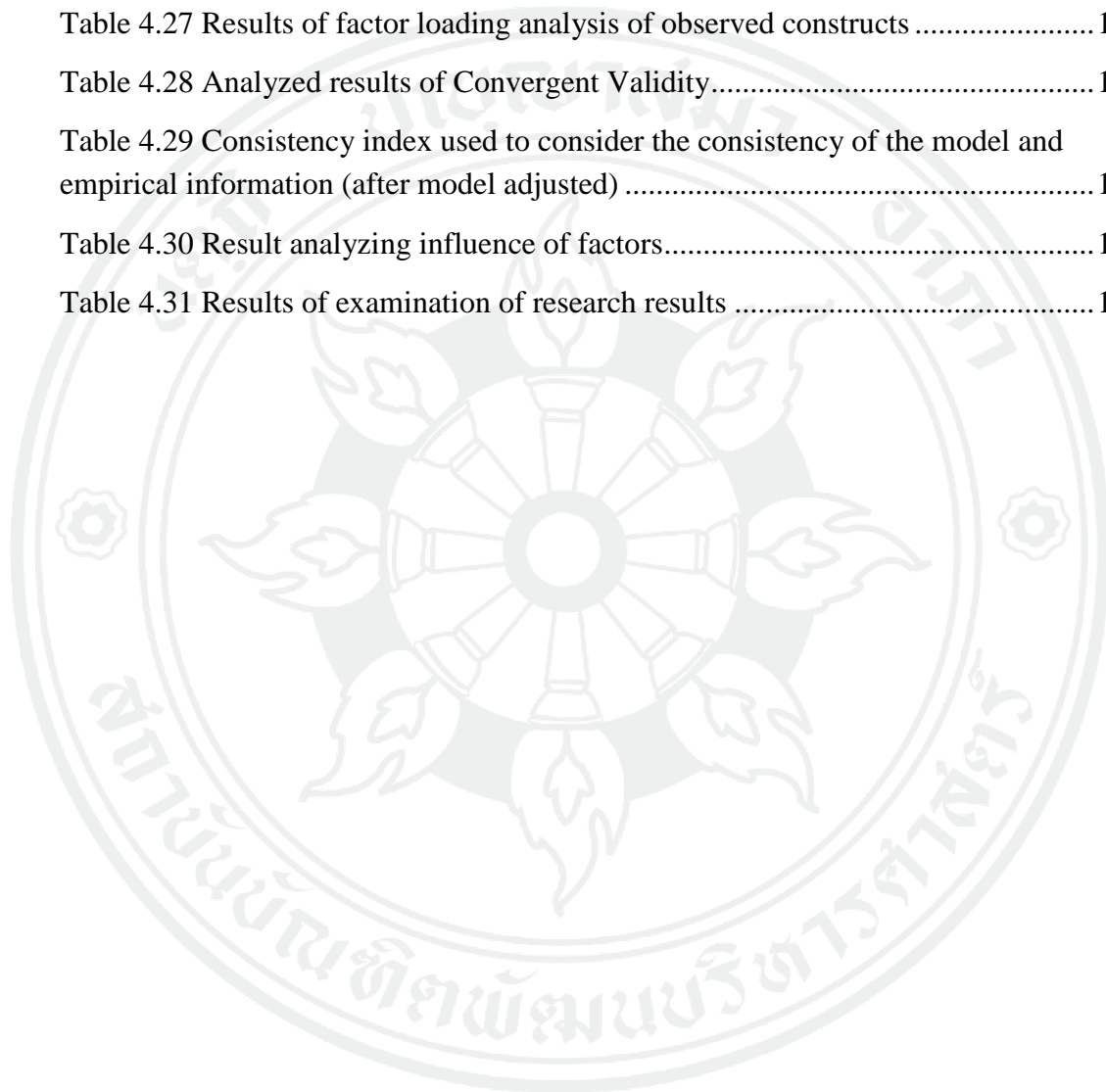
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CHAPTER 1

INTRODUCTION

1.1 Introduction

The first section of the study presents a picture of a large review which represents Thai spa development and the significance of market orientation, strategy and spa performance. There are three sections clarifying the essential nature of the review. This research explains clearly the objectives and research questions to gain advantageous outcomes. In conclusion, the research provides meaning and outlines the study limitations through achieving a shared comprehension.

1.2 Statement

Nowadays, Spa business grows 6% each year. Value of this market is around 1.69 hundred billion dollars or around 5.4 trillion baht during 2015-2020 matches with Wellness Tourism that growth to 27 trillion baht The Standard (2018). The significant factor is growing from seniority of society and middle class consumer who would like to pay for spa. In addition, the competition and hasty society which lead to stress of people then people use spa as relaxing method. Moreover, spa also use as beauty treatment which. The Big Tech companies, such as Amazon, Apple, Google and Facebook, also support this treatment too. Now using data and augmented reality enter the retail beauty market, aiming to disrupt the bricks-and-mortar stores that currently dominate this massive industry. It results good respond from customers who use service by Amazon already owns 20 percent of the online retail beauty market but is aiming to expand further with the recent launch of a line of low-priced, private-label personal care products, such as face washes and shaving creams (Global Wellness Insitute, 2018).

Spa business in Thailand grow around 8%, it wealth 3.5 hundred billion baht. It is ranked at 16th worldwide and 5th in Asia under China, South Korea and India

(The Standard, 2018). There are 3 types of spa. Firstly, is Day spa which short period (less than 3 hours). Secondly is Destination spa which is a course spa (3-25days), this type is specific needs from customers. Thirdly is hotel spa which provides in high standard hotel, this type gets customers from tourists, business persons and customers who prefer entertainment and activities. Today, spa is more complex and become health establishments for tourists to enjoy and variety of wellness services, offering medical care, and physical treatments (Leiper & Hing, 1998; Ministry of Public Health, 2011).

Thailand offers considerable potential in the field of health and wellness tourism. The National Economic and Social Development Board along with the Ministry of Public Health have sought to promote the vision of Thailand as the “Center of Excellent Health Care of Asia”. In particular, a five-year strategic plan was formulated by the Ministry of Public Health to run from 2004-2008 using the notion of “Thailand as a World Class Health Care Destination”. Specifically, this strategy has three components: medical care; health businesses such as Thai massage, and health products such as Thai herbs and food supplements. All of these operations had successfully existed prior to the government strategy of support (Department of Trade Negotiation, 2011; Ministry of Public Health, 2011; TAT, 2011).

. In addition, result of previous study shows many visitors are willing to spend on health and wellness products and services, thus benefitting the national economy. As a result, the government understands the significance of this industry. The Ministry of Public Health therefore introduced its second five-year plan for the period 2010-2014, branding Thailand as the “Center of Excellent Health Care of Asia” and bringing traditional Thai medicine into the fold. In addition, the Department of Health Service Support created the Workplace of International Healthcare Center to serve as a coordination point for Thailand’s health establishment. This body was intended to work with healthcare providers and the authorities to formulate appropriate strategies to achieve the national aims (Department of Trade Negotiation, 2011; Ministry of Public Health, 2011; TAT, 2011).

The Thai government has been setting new expectation levels through its campaigns of “Thailand as World Class Healthcare Destination” and “Spa Capital of Asia”. A strong and proactive public relations strategy has brought Thai healthcare and wellness tourism to the forefront in global awareness, making joint ventures attractive and bringing economic benefits to the country. The government has therefore shown considerable support to this particular industry through its strategic planning (Department of Trade Negotiation, 2011). In addition, the Department of International Trade Promotion under the Ministry of Commerce has lent its support to the endeavors, believing the country will benefit from cultivating an image as a world-class operator in the field. The local industry has emphasized Thainess as one of its unique selling points when promoting its services to the target audience. The key is to encourage visitors to Thailand to spend on services related to health, wellness, and recreation, such as Thai spas and massage. Support is also given to entrepreneurs who wish to set up such businesses in the country (Department of Trade Negotiation, 2011)

Bangkok is one of the most popular tourist destinations in the world. Bangkok is frequently ranked in first place as the ideal destination for a relaxing holiday. The capital of Thailand is a perfect city for true tourism. In 2017, the number of tourists visiting Bangkok proved that the city is a popular site for tourists. Based on a (BBC, 2017) there are many interesting attractions in Bangkok. The major sites of interest are mostly being historical landmarks or places of worship such as Phra Kaew temple, Arun temple, Ratchanadda temple, Traimit temple, Benchamabophit temple, Bovorat temple, and Suthat temple. There are also other places of interest such as palaces, museums, parks and shopping malls such as Chatuchak market, Chinatown (Yaowarat), Phahurat night market, or luxury department stores in Bangkok (TAT, 2017). The health establishments are the one of destination for tourists because service in term of spa is one of a service for Thai culture which has uniqueness for foreigners including low price of service comparing with foreign currencies. The target groups of customers are Thai and foreigners. The Department of Tourism recorded 26,861,095 Thai and 11,361,808 foreign visitors to Bangkok (ICEEMT, 2017). Therefore, according to the number of tourists from both domestic and foreign

sources, it can be concluded that every service business would like to be located in the Bangkok area in order to meet the greatest number of potential customers.

Health establishments in Bangkok has high competition problem because owners of health establishments have 1,790 from the total number of health establishments in Thailand is 2,053 which means that around 87% of spa services are located in Bangkok. A service of health establishments in Bangkok has various categories such as day/night spa or spa therapy from hospital or health establishments in the hotel. Bangkok has many and various hotels from five-star hotels to small hotels and guest houses, which some hotel was offer spa serviced. Furthermore, a service of health establishments can provide in commercial stores in order to reach more customers. Therefore, it can be concluded that the health establishment business competition is highest in the Bangkok area, it is important that spa businesses, which are a part of the service sector, need to have effective strategies to attract customers.

Market orientation is the method used in analyzing data from customers in order to understand the market demand (Kohli, Jaworski, & Kumar, 1993). In day health establishments, managers need to notice the demand from customers in order to develop services which satisfy customer needs. Once managers have developed new services for their day health establishments it is the duty of the managers to communicate with their staff to teach them about the objectives in providing the right services to customers. They must also respond to customer feedback about their new services based on customer satisfaction in order to ensure customer retention. Moreover, when developing a new business, managers also need to understand employee satisfaction. These developments would improve performance and provide a competitive advantage for day spas as a result.

Not only day spas must consider market orientation but also the strategy that each day spa uses will also be important in setting the direction of the business in the market. For example, when considering the day spa as “prospector”, managers need to find their new opportunity for developing a new product and service to attract their customers. There is also the day spa as “defender”, where managers need to retain

their customers and push customers to re-patronize their spa. However, the question remains as to what strategy will be the most appropriate in order to enhance day spa performance, and the previous literature provides little insight on this question.

1.3 Significance of the Study

Thailand's massage and spa businesses have expanded greatly in recent years in both numbers and revenues. Throughout the country, 2,053 health establishments are currently registered and certified by the Department of International Trade Promotion under the Ministry of Commerce. More specifically, 1,790 of these establishments are located in Bangkok, 113 are in the central region, 23 in the northeast, 3 in the north, and 124 in the south. Of the registered establishments, 26% (531) are spas for wellness, 59% (1,217) are massage providers for wellness, and 15% (305) are massage providers for beauty purposes (Department of International Trade Promotion 2014). The demand for these health and wellness services has increased rapidly, while Thailand is well equipped with the personnel and traditional skills to meet this demand. Thai massage, Thai herbal medicines, and Thai hospitality are all factors contributing to a strong reputation for excellence in health establishment services. Since the health establishment industry has the potential to expand further at around 10-15% annually, it clearly deserves its part in the government promotion strategy. The revenue for 2014 amounted to 4 billion baht, having grown consistently since 2006, according to the Ministry of Public Health (Department of Trade Negotiation, 2011; Ministry of Public Health, 2011) (Department of International Trade Promotion 2014). Customers from overseas typically have greater spending power than domestic consumers, and Thailand's international image can be enhanced further by providing high quality spa experiences to foreign customers.

The government clearly supports health promotion and the health establishment business, and the increasing number of providers and rising demand from consumers has proved the effectiveness of such an approach. However, it is essential to maintain the expectation of high standards in order to establish a worldwide Thai brand

reputation. However, one problem is that the regulation of health establishment standards has not necessarily kept pace with the expansion rate of the business.

Therefore, aggressive expansion of competition among health establishment businesses has compelled the government to give careful consideration to the logic of the marketing concept and the use of those ideas in the marketing of the national industry. At the business level, the absence of attention regarding the marketing concept and the emphasis on short-term financial returns has been blamed for the loss of Thai spa business market share. (Webster Jr, 1992) proposes that promotion comprises four measurements that must be understood individually and collectively in terms of their potential marketing value to the businesses. These measurements are the promotion through market orientation, extended market orientation, strategic management, and health establishment performance. The commitment of market orientation superiority as a competitive advantage is strongly supported by the rapidly developing body of empirical evidence that demonstrates a positive relationship between market orientation and health establishment business performance (Deshpandé, Farley, & Webster Jr, 1993; Narver & Slater, 1990; Ruekert, 1992).

Narver and Slater (1990) characterize market orientation as the business culture that commits the organization to the continuous creation of superior value for customers by encouraging three key factors: market generation of intelligence, market dissemination of intelligence, and responsiveness. This creates an environment which maximizes opportunities for learning about markets, for sharing information among all functions in the establishments so that common interpretations are reached, and for taking coordinated action. The result is that “market orientation appears to provide a unifying focus for the efforts, thereby leading to superior performance” (Kohli et al., 1993).

Market orientation, as a key component to competing rivals, provides strong standards for health establishment (Deshpandé et al., 1993) and may be a key success factor for some competitive strategies (Slater & Narver, 1993). However, Day (1992) notes that the developing assortment of work describing the relationship between

market orientation and performance has not discussed the specific actions that managers take to create and sustain that competitive advantage. Understanding the link between market orientation and strategy is important for a comprehensive appreciation of market orientation's contribution to spa performance. This study introduces strategy as a moderating factor between market orientation and Thai spa business performance to better understand how to apply market orientation as a competitive weapon.

For health establishment businesses to be successful in the long term, it is important to construct appropriate business standards in Thailand (Phayakkawichern, 2006). The current lack of standards for spa performance, product quality, and service responsiveness pose a threat to the potential success of the industry, so it is imperative that such measures be introduced in order to create a competitive advantage for health establishment businesses. Some spa managers are disappointed in the lack of standardization criteria, despite their own high standards and high-quality products and services. Such quality standardization is necessary to drive further sales expansion because although Thailand is widely perceived as the "land of Smiles" and is known for the warmth and hospitality of its people (TAT, 2017), these credentials are not necessarily sufficient to draw investment and promote aggressive business growth. The introduction of world-class professional standards in terms of spa quality, product quality, and staff attributes is vital to attract customers, so this point is critical for future development (TAT, 2017). Since health and wellness tourism is a largely intangible product, it is important to maintain control over health establishment performance (TAT, 2017). It has been observed that when businesses expand, this can often lead to inconsistency in standards, both for services and tangible goods. This is a potential threat to the reputation of health establishment services (Herington, Johnson, & Scott, 2006; Y. L. Lee & Hing, 1995).

The health establishment performance plays a critical role in the effectiveness of a marketing strategy. Many health establishments must concentrate their marketing efforts of particular target sectors, since this kind of differentiation is a common means of achieving success in the health establishments business (Chittithaworn,

Islam, Keawchana, & Yusuf, 2011; De Brentani, 1991; Matsuno, Mentzer, & Özsomer, 2002). The concept of health establishment performance is very closely linked to strategic management and market orientation (Farber & Wycoff, 1991; N. A. Morgan & Vorhies, 2018) Meanwhile, it is essential that health establishment providers understand how important health establishment performance is in maintaining competitiveness in changing global circumstances. Previously, spa managers have emphasized health establishment performance due to its economic influence, since customer loyalty and lower costs can bring about greater profitability (Augustyn & Ho, 1998; Cronin Jr & Taylor, 1992; Devaraj, Fan, & Kohli, 2002; Getz, 2001; Johlke & Duhan, 2000; W. C. Johnson & Sirikit, 2002; Leonard, 1982). While there is consensus that market orientation and performance are closely linked, it is thought that if the operational aspects of health establishment performance can be enhanced, the service quality, profitability, and customer satisfaction levels will also be enhanced (Kwaku Appiah-Adu, Fyall, & Singh, 2000; Bitner, Brown, & Meuter, 2000; Bolton & Drew, 1991; Chebat & Kollias, 2000; Heung & Cheng, 2000; Lam & Zhang, 1999; Sanchez, 2006; Su, 2004). One of the most important strategies for spa owners is to communicate the quality of their facilities and services to customers in order to gain a competitive advantage (Czepiel, Solomon, Suprenant, & Gutman, 1985; Denzin & Lincoln, 2011). Furthermore, the service experience is also critical, as explained by Zeithaml (1990). Accomplishing successful health establishment performance is the essential objective for most establishments and the analysis of market orientation leads to improved customer satisfaction, customer retention, and employee satisfaction (Jones & Sasser, 1995; Pizam & Ellis, 1999).

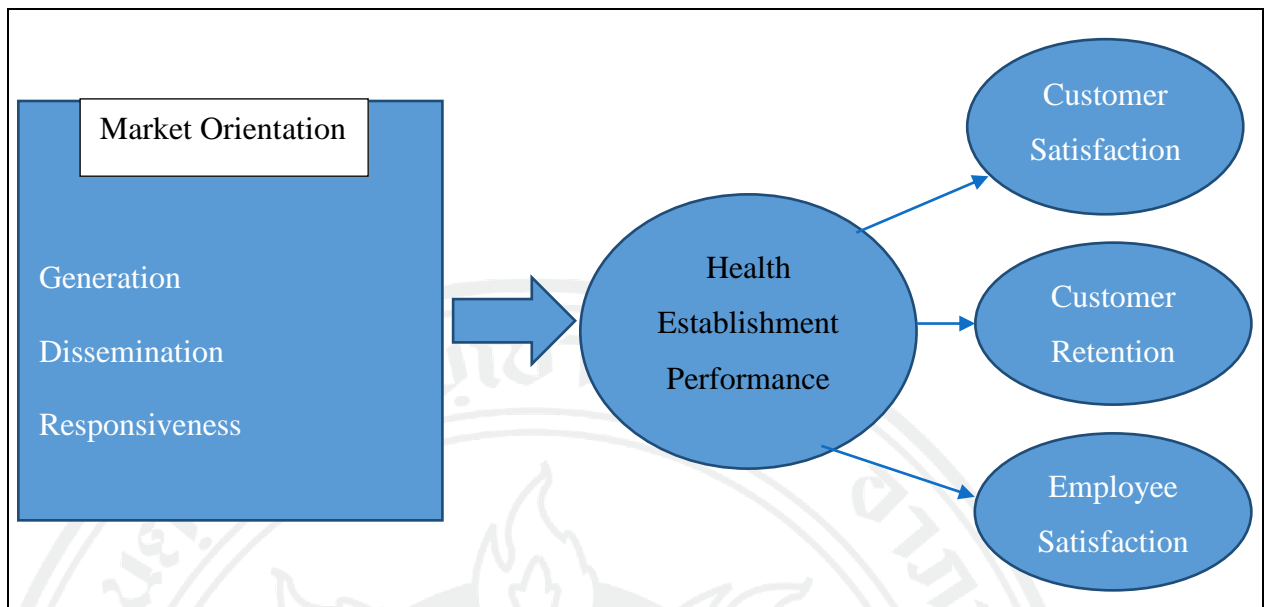


Figure 1.1 Market Orientation affecting Health Establishment Performance

Source: (Jones & Sasser, 1995; Pizam & Ellis, 1999)

In addition, (Yuksel, 2001) noted that strategic management will affecting ultimately result through levels of customer satisfaction, customer retention, and employee satisfaction.

Therefore Matsuno, K., Mentzer, J. T., & Özsoyer, A (2002) found the factor of MO (Generation, Dissemination, Responsiveness) that is a key factor but it is not covering explanation of change for Performance at all for few studies have reported an insignificant or negative relationship. In addition, this research studies is contextual variables both exogenous and endogenous in influencing firm growth relationship. It found that the others factors can be significant interaction effects to performance.

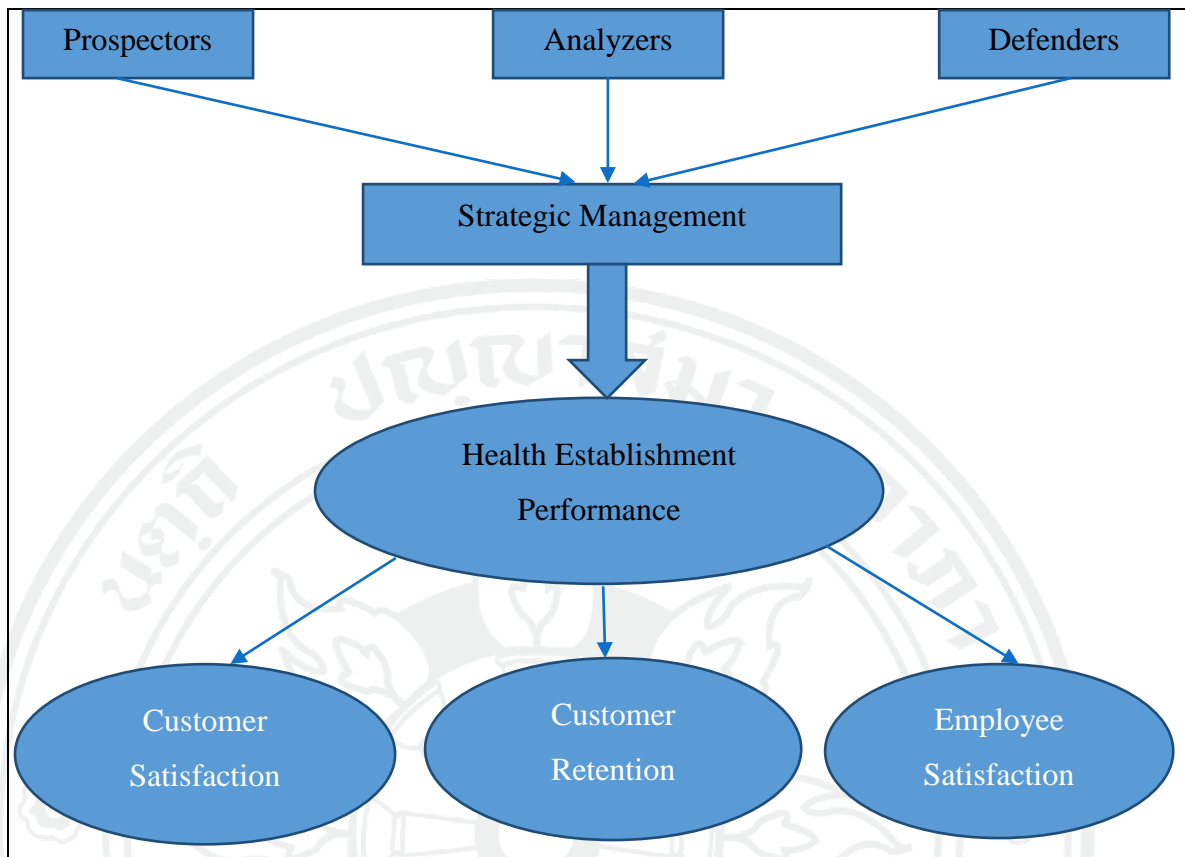


Figure1.2: Strategic Management affecting Performance

With an absence of health establishment performance standards, market orientation becomes difficult, making it harder to achieve customer satisfaction. Dissatisfied customers generate adverse word of mouth and state their intentions to shift to alternatives (Chebat & Kollias, 2000). It is thus advisable for companies to aim for customer satisfaction and hence customer retention. Indeed, attracting new customers might not be as important as retaining the current customer base. Health establishment customers will choose their spa on the basis of health establishment performance (Heung & Cheng, 2000). In today's highly competitive environment, health establishment providers must focus on performance as a means of positioning themselves within the marketplace (Hallowell, 1996; Kandampully & Suhartanto, 2000). Health establishment performance must meet or surpass customer expectations if the spa is to be profitable in the long term. Therefore, in order to manage a health establishment business, it is necessary to strategize to achieve customer satisfaction and strong financial performance. Furthermore, in Thailand the health establishment

industry has the advantage of gaining government support as a result of the sector's importance in the context of the wider economy as a whole. In addition, logistic has cost advantage that almost does not creating transportation cost because it is primarily a service business. Therefore, it is able to focus on improving the highest quality of service. From the perspective of the researcher, it is necessary for the health establishment businesses to utilize management expertise to upgrade their health establishment performance to achieve a competitive advantage. Accordingly, the title of this research is derived from this issue of developing health establishment performance for the success of health establishment businesses.

The proposed dissertation extends study of extended market orientation variable which is an additional variable affecting performance instead study only market orientation variable and empirically investigates the relevance of market orientation, extended market orientation and strategic management in determining health establishment performance. Specifically, this research attempts to address three components. The first component examines the causal relation model of market orientation and extended market orientation affecting strategic management through health establishment. Second evaluates causal relation model of market orientation and extended market orientation affecting strategic management through health establishment. Third creates causal relation model of market orientation and extended market orientation affecting strategic management through health establishment. It is possible to measure these components in order to improve the health establishment performance in Bangkok, Thailand.

1.4 Study Objectives

The principal study objectives are described as follows:

1.4.1. Examine the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER)

1.4.2. Evaluate the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER)

1.4.3. Create the causal relationship model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok.

1.5 Research Questions

The research questions in this study are listed as follows:

1.5.1 What is the market orientation of health establishments in Bangkok?

1.5.2 What is the extended market orientation of health establishments in Bangkok?

1.5.3 What is the strategic management of health establishments in Bangkok?

1.5.4 What is the performance of health establishments in Bangkok?

1.5.5 What are the relationships between market orientation, extended market orientation, strategic management, and health establishment performance?

1.6 Expected Study Results

The study is expected to provide the following results:

1.6.1 This study seeks to observe market orientation, extended market orientation, strategic management and health establishment performance factors

1.6.2 This study seeks to observe the model identification of market orientation, extended market orientation, strategic management and health establishment performance in Bangkok

1.6.3 This study seeks to comprehend the level of the relationship between market orientation, extended market orientation, strategic management and health establishment performance in Bangkok

1.6.4 This study creates the causal relationship model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok

1.7 Anticipated Study Benefits

It is expected that this study will yield the following benefits:

1.7.1 This study will provide direct benefits to managers of health establishment businesses and service industry companies. The findings will allow these people to create improved operational guidelines and management strategies which will permit the development of health establishment performance standards to deliver a competitive advantage for those businesses.

1.7.2 From the government perspective, the results will be of assistance for a number of departments such as the Ministry of Public Health, the Department of Health Service Support, and the Office of Health Business Promotion. Strategic plans will be improved through application of the findings regarding consumer demand for spa products and services.

1.7.3 The academic field will also benefit from the findings, especially with regard to the ideas of market orientation, extended market orientation, strategic management and health establishment performance.

1.8 Limitation

1.8.1 Content limitation

The researcher studies factor of Market Orientation because market orientation was one of the marketing factor which is interested by researchers and influence over performance. Moreover Market orientation factor does not cover the changing of overall performance in organization. Researcher need to use Extended Martker orientation and Strategic management instead. Extended Martker orientation and Strategic management influence over performance which are factors that organization need to consider which do not related to the external factor.

1.8.2 Sample Limiation

According to the sample of this research were spa managers working in health establishments in Bangkok. Bangkok was an area which has a huge market in Thailand therefore the result of this research may differ from health establishments which located in others province or others countries according to the number of spa business and aims of customer

1.9 Definition of Terms

1.9.1 Market Orientation:

Market orientation covers the behaviors of practices and activities in health establishments. In particular, this involves conceptualization by characterizing market orientation as “the health establishment culture that most effectively and efficiently creates the necessary behaviors for the creation of superior value for buyers and thus continuous superior performance for the business”. Based on this, three components were identified: intelligence generation, intelligence dissemination, and responsiveness.

1.9.1.1 Generation

Development, designing and modifying: products and services and systems using segmentation and product and service differentiation

1.9.1.2 Dissemination

Gathering, collecting and analyzing information related to customers and environmental factors through formal and informal means

1.9.1.3 Responsiveness

Sharing of information related to: customers and environmental factors ensuring the proper horizontal and vertical flow of information, and the participation of all departments using marketing tools

1.9.2 Extended Market Orientation

The notion of extended market orientation develops the expansion of market factors in order to coordinate activities related to the market orientation system. The system comprises suppliers, customers, competitors, regulations, social trends and movements, and the state of the economy as a whole.

1.9.3 Strategic Management

Strategic management concerns the performance in particular dimensions, where marketing activities have contingent relationships (i.e., defenders, prospectors, analyzers) and seem to be relevant to market orientation through considering strategic orientation type as a planned pattern of health establishment adaptation to the market environment.

1.9.3.1 Prospector

The prospector's capability is that of finding and exploiting new products and new market opportunities. Their product-market domain is usually broad and continuously developing.

1.9.3.2 Analyzer

The analyzer puts emphasis on developing new products and markets, but only after their feasibility has been verified.

1.9.3.3 Defender

A defender's good performance in the spa business depends on its ability to aggressively maintain its eminence within a well-defined market segment.

1.9.4 Health Establishment Performance

Defining health establishment performance is complicated by the variety of applications in the health establishment strategy literature – a variety that reflects a multitude of health establishment disciplines and concomitant diversity of research questions employed to measure outcomes as bellows.

1.9.4.1 Customer Satisfaction

The key secures customer loyalty and generating long-term financial performance.

1.9.4.2 Customer Retention

The ability of a company or product to retain its customers over some specified period. High customer retention means customers of the product or business tend to return to, continue to buy, or in some other way not defect to another product or business, or to non-use entirely.

1.9.4.3 Employee Satisfaction

This dimension attempts to assess the degree to which employees have a positive affective predisposition towards employment by the spa business.

1.9.5 Health Establishment (Day Spa)

This is a place where customers go for the day to get massages, facials, and body treatments such as sea salt scrubs and mud wraps. People call these day spas because, unlike destination spas or resort spas, customers do not spend the night on the premises. Moreover, there are currently located in Bangkok which is certified by the Ministry of Public Health.

1.9.6 Health tourism

Health tourism is a wider term for travel people that focuses on medical treatments and the use of healthcare services. It is divided into two categories:

- Health Tourism: travelling to receive medical treatment in specialized institutions jointly with tourism programs.
- Wellness Tourism: healthy people travelling to other cities to maintain their physical and psychological health through receiving certain services in specialized institutions.

1.9.7 Health tourism policy

Health tourism policy is policy that impact potential implications of medical tourism, which important action mechanisms to affect increasing or decreasing health tourism.

1.9.8 Thai traditional Medicine Hospital

Thai traditional Medicine commonly known as Thai Massage, is one of the world's oldest healing modalities, which culture has been largely influenced by Buddhism. And they believed that illness result from the imbalance of body. The treatment or healing of illness should focus in restore the balance of body including mind and spirit. The Thai Traditional massage, in fact, is one of the four elements of traditional Thai medicine. The remaining elements are nutritional counseling, Thai herbal medicine, and Spiritual healing (mediation).

1.9.9 Traditional Medicine Promotion

According to the National Health Security Act, B.E. 2545, Thailand has health welfare system for Thai citizens which aim to allow people to have the right to receive public health services. It identified Thai traditional medicine to participate in the movement of such policies as treatment options by requiring the hospital center, community hospital and clinic or community health centers. It must provide traditional Thai medicine services to make access to more patients resulting in the traditional Thai medicine played an important role in the public health system of Thailand.

1.10 Conclusion

This chapter described the significance of the study as well as the background, focusing on two main areas. The first concerns the importance of the spa industry, since the sector has been growing rapidly and in particular has drawn increasing tourist numbers to the country. The sector has enjoyed support from the government of Thailand and falls under the guidance of the Ministry of Public Health and Ministry of Commerce with the aim of creating a “World Class Healthcare Destination” and “Spa Capital of Asia” during the period from 2004-2014 as health businesses, alternative medicine, Thai herbs, and Thai traditional medicines have been promoted. The second issue is that of spa performance in terms of finances and strategies. The owner of a spa must always take into account strategy dimensions and market orientation, so spa performance is critical.

In addition, this chapter also explains the three objectives of the research, incorporating assessment of the current circumstances, guidelines for development, the research questions, and the benefits spa owners and government bodies can anticipate. This is especially applicable for the Ministry of Public Health, which might hold the role of utilizing the study findings to support spa businesses across the nation. Other academics may also find the results to be of interest, and may wish to apply the findings to other industries. The final part of the chapter covers the technical terms and definitions or the benefit of the reader.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

This section discusses the concepts of strategy and market orientation with the context of health establishment operation (spa) in Thailand, and in particular in Bangkok. The chapter explains the way health establishment has evolved the different classifications of health establishments, and the various types of health establishment treatments available. The idea of health establishment performance is also explained and is of importance for managers and marketers as well as the researchers. The idea of service encounters which appears in speeches related to marketing will also be presented as a means of describing the points in the process where customers interact with service providers. The outcome is that the notion of spa performance explains the connection between this performance and market orientation. Markets for health establishment services can also be segmented according to demographic characteristics, while earlier studies have made use of the ideas of strategy, market orientation, and health establishment performance. The conceptual framework for this study is therefore presented in order to cover all of the potential variables which might play an influential role. The theoretical distributions of research variables can be examined, and finally the research hypotheses are stated.

2.2 Health establishment Background (Spa)

2.2.1 Spa Origins

Spa is a word derived from the Latin “salus per aqua”, or literally “health from water”. It is also the name of a small Belgian town where the hot springs provided pain relief for the fallen soldiers during the Great War. In this case the word might be

a Walloon term for fountain, “espa”, which eventually mutated to the word we know today, “spa” (McCarthy & James, 2005; Miller, 1996). Spa in Belgium has been known for its waters since at least 1326 when it was mentioned by the ironmaster Collin le Loup for its curative properties. A similar water source was discovered in England by William Slings in 1551.

Timothy Bright, who was familiar with the original Belgian spa waters, applied the same name to the English version, while Doctor Dean of York published in 1626 a text describing the waters of Harrogate under the guidance of Bright. Even the French were soon to describe Harrogate as a spa, while Sheridan was the first to use the term for a resort based on mineral water (Leavy & Bergel, 2003). Miller (1996) adds that from a European perspective the idea of a spa is closely linked to the idea of a cure. The objective is to heal health problems by having the patient stay at the spa for a week while partaking of the mineral waters. This differs from the American notion of a spa which emphasizes fitness. In the past, American spas have been called “fat farms” since the main aim of the visitors was to lose weight. However, in general a spa is seen as a place which aims to improve overall health through a range of services which support the mind and body (International SPA Association, 2013). Customers improve their health and appearance through exercise, relaxation, and making use of the water as part of the treatment (Walsh, 1995).

The Thai Ministry of Public Health (2008) describes a spa as a holistic means of treatment which uses natural water and alternative medicines. It focuses on all of the five senses in order to achieve a balance of mental, physical, and emotional health. A spa therefore applies hydrotherapy in a holistic manner under the guidance of expert physicians and doctors, and this definition includes any place focusing on holistic health and relaxation (Cassar, 2000). The historical definition is that of a place where hot springs exist to soothe pain and cure aches. There can also be a spiritual element to a spa. In the modern definition, a spa simply facilitates the improvement of people’s mental and physical states, with water providing the key to these various treatments. In summary, historically, spa is a place where hot spring situated and its water can be used to cure and heal pains and aches. Spa can also

strengthen people's beliefs and faiths. And, in contemporary sense, spa is a place that can facilitate people in order to treat both physical and mental states. The use of water, as well as the use of vitamin and natural minerals, is the key element in spa treatments for National Industrial Skill Standard.

2.2.2 Health Establishment Classifications

2.2.2.1 On the basis of the announcement of the Ministry of Public Health, Service Establishment Act (issue 4), health establishments in Thailand can be classified as follows:

Table 2.1 Classification of health establishments by the Ministry of Public Health (2017)

Classification	Description
Spa operator	Services in health and wellness-related services such as water therapy and body massage except in the case of operation in a medical institution under the law on medical care or bath massage or bake in the bath. In addition, massage or bake services in accordance with the law on service.
Massage business for health and beauty	The massage is for health or beauty in a medical facility under the law of a sanatorium or public health unit, or a massage that is provided in a bath, massage or bake under the law on service.

Source: Ministry of Public Health (2017)

2.2.2.2 The International Spa Association-ISPA provides seven different spa establishment types as described below:

Table 2.2 Classification of health establishments by the International SPA Association (2013)

Classification	Description
Club spa	The spa is set up for members only, focusing on the comfort and well-being. The purpose is doing exercise and health care of the body such as physical fitness and health related physical fitness along with other services.
Day spa	A day spa is a place customers go for the day to get massages, facials, and body treatments, like pressing the body with organic oil and mud wraps and sea salt scrubs
Hotel and resort spa	The hotel or resort is the location of the spa. There are places for eating food. Service programs consist of massages to relax with changing atmosphere and sensations.
Cruise ship spa	The spa is located on the ship. The service program consists of various types including massage, fitness activities and healthy food.
Mineral spring spa	The spa is located in a place that is a source of hot springs or mineral water. Service programs focus on healing through water or minerals, such as salt, as part of the treatment.

Classification	Description
Destination spa	The spa is set up to provide health care primarily with accommodation. There are health activities, health food, and exercise and health education. Most of the time, there is a need to stay for a long time to relax and improve the way of life to better adjust the balance of body and mind, reduce weight, and exercise. The expert team will consider the program to suit each individual's health. They are located near natural resources, most of which use natural resources as an aid to activities such as mountains, sea, mud and hot springs.
Medical spa	The spa location is managed by doctors and nurses for the purpose of healing, health and beauty. The service program consists of healthy nutritional food, exercise, and massage therapy by using health knowledge. There are medical services from modern medicine and traditional Chinese massage programs. The treatments, such as reflexology, help illnesses; herbal treatments, body restoration, hypnosis, acupuncture, dermatology and anti-aging are also practiced. The majority of clients are in need of long-term care and specific therapies such as weight reduction and exercise.

2.2.2.3 Many different spa types exist to meet the varying needs of customers. These existing types in the United States are listed by Leavy and Bergel (2003) as described below:

Table 2.3 Classification of health establishments by Leavy and Bergel (2003)

Classification	Description
The destination spa, sometimes termed a “fat farm”	These provided detoxification programs with the aim of achieving weight loss. Food intake is severely restricted and participants engage in fitness training. Today they also attend lectures on healthy living and medical care

Classification	Description
The hotel and resort spa	This is typically a spa which has developed further from a day spa and incorporates exercise areas and a wet area. Many hotels have spa facilities which include exercise equipment for the use of guests as well as offering membership options to non-guests.
The day spa	These include city bathhouses, beauty salons, and skincare centers, providing services such as massages and wraps, and sometimes nutritional guidance.
The club spa	This kind of spa offers fitness services and other treatments for club members and additional guests.
The medi-spa	A blend of massage with herbal extracts and essential oils to relieve fatigue. It involves a specialized smelling aromatic product to relax.
Wellness center	Services include spa services and therapies that reflect the integrity of the link between the body, thoughts, emotions, social and mental well-being so that all are balanced.
Rehabilitation centers and hospital spas	Medical treatment in hospital improves health by using spa treatments using Watsu “water therapy” and exercise with elasticity.
Progressive health	Spa treatment with assessment for a specific period such as eating, relaxation, yoga therapy and massage

Source: Leavy and Bergel (2003)

2.2.2.4 Further health establishments classification categories are given by McCarthy and James (2005) as follows:

Table 2.4 Classification of health establishments by McCarthy and James (2005)

Classification	Description
Day spa	These spas offer a basic program such as half-day packages which include massage, facial, nail care, body treatments, and a light lunch
Salon spa	Salon spas can be similar to a day spa in terms of service provision, and many can offer a one-stop option with a range of services within the day
Home spa	Home spas are mobile, and hence can be used at special events as well as in the home or in offices and other locations of choice
Hotel spa	These spas are more luxurious than day spas since the clientele should be wealthier travelers who wish to relax or to keep up their regular health routines while they are away from home
Health or medical spa	Medical spas can provide various specialized treatments including cosmetic dentistry, chemical skin peels, laser treatments, and Botox injections. A licensed medical practitioner is required
Destination spa	This kind of spa offers a healthy vacation experience which involves fitness, wellness, and healthy nutrition and diet programs. Visitors learn how to live a healthy life and can apply the lessons in their daily lives

2.2.2.5 Miller (1996) explained that health establishments classification can be based on the management type, the services provided, and the condition of the premises. The main classifications are listed as follows:

Table 2.5 Classification of health establishments by Miller (1996)

Classification	Description
Resort spa	These spas are located at resorts and can offer a range of fitness and sporting programs as well as the regular water-based spa offerings
Amenity spa	These spas are typically found in a hotel or resort, where the main aim of the spa is to act as a complementary service for hotel guests
Destination spa	The destination spa is located within a hotel in order to serve the hotel guests. Non-guests are not allowed to use the services

2.2.3 Health establishments Treatment and Service Classification

2.2.3.1 The National Industrial Skill Standard as set out by the Department of Holistic Health Promotion classifies massages and health establishments treatments as described below (Department of Health Service Support, 2011):

Table 2.6 Classification of health establishment's treatments and services according to the Department of Health Service Support (2011)

Classification	Description
Thai Sapaya	This type of spa service involves traditional Thai massage which is well-known to those Thais who live in specific natural areas such as near the river, waterfalls, hot springs, streams, or the sea. In addition, the spa therapies use herbal compresses from local places as well as other local elements such as Thai herbs, Thai food, Thai fruits and Thai music
Western spa	Health care facilities use water with standard services in Western countries, such as whirlpools, Western massage, Western sauna, Western steam bath and exercise by the weight training tools
Thai spa	This is a health facility that uses water massage primarily. The

standard service originates from the Western model. However, there is also the application of Eastern wisdom and Thai wisdom in the delivery of the service

2.2.3.2 According to the Ministry of Public Health (2008), Thailand offers a range of health establishments treatments, while the range s extended by other foreign countries, as described below:

Table 2.7 Classification of health establishments treatments and services by the Ministry of Public Health (2008)

Classification	Description
Holistic health	Thai Traditional medicine system including cultural therapies and alternative medicine are transmitted and developed since the past, such as herbal treatment, massage therapy, the use of natural healing, meditation, yoga, and Qigong or acupuncture
Health and beauty	Provides facials which involve cleansing, toning, masks and moisturizing. Also provides body massages with wraps, and hair care
Aromatherapy	Aromatherapy achieves body balance with the mind and emotions that take methods of massage, baths, compresses, inhalations, vaporization and burner rooms applied together with the fragrance in the aroma or volatile oils
Hydrotherapy	The use of water relieves pain and improves general health. Treatments may include hot water, cold water, ice or steam, by soaking in a cold water bath or hot tub, or by sitting in a sink at waist height. Also includes mud baths, steam showers, and cold or hot compresses. It also covers drinking water with special properties such as mineral water
Thai spa	Thai spas use aromatic Thai herbs with scrubs, masks, compresses and saunas along with Thai traditional massage and Thai herbal bag compresses

Alternative treatments	These include acupressure, acupuncture, Ayurvedic medicines, biofeedback, body work, chelation therapy, chiropractic care, detoxification therapy, diagnostic testing, glandular therapy, herbal medicine, hydrotherapy, hypnotherapy, moxibustion, nutritional and psychological counselling, nutritional supplements and homeopathy, Siddha medicine, and unanimedicine
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2.2.3.3 The three health establishments treatment classifications listed below are obtained from Chiva-Som Academy (2013):

Table 2.8 Classification of health establishments treatments and services according to Chiva-Som Academy (2013)

Classification	Description
Massage therapy or physiotherapy	Includes a number of massage types such as hot stone massage, deep tissue massage, therapeutic Thai massage, Oriental foot massage, and invigorating massage
Beauty therapy	Provision of treatments such as nail care, waxing, facials, skin treatments and regular spa programs
Health and wellness therapy	Includes Ayurvedic treatments, simple lymphatic drainage massage, reflexology, Maya massage, Indian head massage, reiki, and mukha-shirodara

Source: Chiva-Som Academy (2013)

2.2.3.4 The various health establishments treatments which are available in a wide range of spa establishments are given as follows (McCarthy & James, 2005):

Table 2.9 Classification of health establishment's treatments and services by McCarthy and James (2005)

Classification	Description
Massage therapy	These include deep tissue massage, Swedish massage, sport massage, aromatherapy massage, hot stone massage, reflexology, reiki, Thai massage, rolling muscle therapy, raindrop therapy, Ayurvedic treatment, and cranio-sacral massage
Body treatments	Body treatments can include body polish, body wrap, salt glow, steam and body scrub, mud baths, and seaweed body peel
Hydro treatments	Spas provide jantzu, watsu, thalasso bath therapy, or vichy water treatment
Facials	Different facials comprise the European facial, the mini-facial which uses cucumber, teen facial, men's facial, and anti-aging facial
Beauty treatments	Beauty is achieved through spa manicures and pedicures, hair styling or colouring, paraffin wax treatments, permanent perms, deep conditioning of the hair, body waxing, lip treatments, laser hair removal, skin bronzing, and make-up

2.2.3.5 A number of different spa choices exist for potential customers, ranging from day spas to resort spas with their varying lengths of stay. There are also rehabilitation establishments and wellness centers which offer different treatment programs to visitors. According to Leavy and Bergel (2003), the various spa treatments can be described as follows:

Table 2.10 Classification of health establishments treatments and services by Leavy and Bergel (2003)

Classification	Description
Bath therapies using water, mineral, herbal, and essential oils	Various bath types including hot bath, cold bath, neutral bath, whirlpool bath, Kneipp bath, arm bath-cool temperature, arm bath-alternative temperature, foot bath-alternative temperature, herbal baths, mineral baths, essential oil baths, fango (mud) salicylic powder bath, whey powder bath, mud natrium bath, mustard powder bath, seaweed powder bath, oxygen bath, and bicarbonate bath
Massage, wellness, and physiotherapy	Includes a range of massage types such as shiatsu, Swedish massage, reflexology, athletic massage, water pressure massage, manual lymphatic drainage massage, sound and light therapy, Ayurvedic treatment, cranial sacral therapy, Feldenkrais method, Hellerwork, Trager work, Watsu, Jin Shin Jyutsu, ortho-bionomy, reiki, and rolfing
Sauna and steam vapour bath	Different steam bath types include steam vapour baths, facials, hot steam baths, and the Finnish sauna
Water affusions	Affusion types include leg and knee affusion, whole body affusion, arm affusion, chest affusion, neck affusion, and lumbar affusion
Affusions under pressure	These include Scotch hose shower blitz jet affusion and high temperature Kneipp hydro-herbal spa treatments
Showers and steam showers	Shower types comprise hot and cold showers, normal showers, Swiss showers and Vichy showers
Kneipp ablutions	This process involves washing with a wet cloth followed by the washing of the upper or lower extremities, chest and back. Whole body abluion follows, along with washing of the abdomen, and limbs
Body wraps	Various different wraps exist, including the dry blanket wrap, cool moist blanket body wrap, hot moist blanket body wrap,

Classification	Description
	Kneipp body wraps, calf wrap-cold temperature, wet socks, chest wrap-cold or hot, throat wrap-cold or hot, and cold lumbar wrap
Body packs	A wide range of body packs are available including mustard packs, hot and cold fango (mud) and clay packs, fango moor packs, parafango (paraffin fango) packs, alpine flower haypacks, hot neck haypacks, and hot lumbar haypacks
Hot compresses	These include hot or cold abdominal compresses and hot rolls
Mineral or herbal body masks and wrap therapies	This category includes volcanic fango body masks, seaweed body wraps, and Valerian herbal wraps
Exfoliation	Includes salt glow and body scrub treatments
Body hardening and spa conditioning therapies	Options include drybrushing, airbaths, dew walking, and water treading,

2.2.4 Health Establishment Treatments and Service Meanings

The literature review provides the researcher with an extensive list of spa treatments and therapies which are available at the various types of spa establishments. The various health treatments which exist in such establishments are presented alphabetically as follows (International SPA Association, 2013; Leavy & Bergel, 2003; McCarthy & James, 2005; Miller, 1996; Ministry of Public Health, 2008).

Table 2.11 Typologies of health establishments

Type	Description
Acupressure	This is a traditional Chinese treatment in which the fingers are

Type	Description
	used to push certain points on the skin to assist the natural healing process of the body
Acupuncture	Another traditional Chinese technique in which the skin is punctured using needles strategically inserted at specific points on the body
Aerobic exercise	This involves low intensity physical exercise repeatedly performed
Aqua aerobics	This is a kind of aerobic exercise which takes place in a pool and makes use of water resistance to provide a more vigorous workout which burns fat and boosts the heart
Aroma massage	Aroma massage uses natural essential oils in combination with Swedish massage over the whole body
Athletic massage	This kind of massage is very deep and penetrating and is favoured by sportsmen
Body scrub and clay/mud mask	The purpose is to clean and exfoliate the skin surface while the mask stage revitalizes the skin leaving a feeling of refreshment
Boxing	This is a combat sport which provides exercise to participants
Chi ball	This is an exercise program which has Chinese origins and requires the mind, soul, and body to be held in balance
Colon detoxification	This treatment extends the enema and cleans the colon through irrigation using water which contains herbs or enzymes which enter the body via the rectum
Craniosacral therapy	This is a holistic healing treatment which involves the use of light touch to balance the craniosacral organization in the body. The benefits are felt in the nerves, bones, and connective tissue within the head and spine
Crystal massage	This kind of treatment uses crystals to focus spiritual energy for healing through positive power of the mind and body
Cupping	Another Chinese alternative treatment which uses small cups for suction on various body parts

Type	Description
Deep tissue massage	This kind of massage addresses the deeper muscle tissue and aims to cause fragmentation of the adhesion of muscle tissue
Facial massage, scrub, and clay/mud mask	The skin is cleansed and exfoliation takes place to remove skin debris from the face. Revitalization is achieved through the use of a facial mask
Fit ball	In this kind of exercise, a fit ball is used to build and maintain core body strength
Foot massage	This kind of message treats the feet and the lower legs
Hot stone massage	Hot basalt lava stones are combined with Swedish massage. The hot stones ate brought into contact with tense parts of the body to relieve stress and bring about muscle relaxation
Indian head massage, Champissage	This is a soft head, neck, and facial massage which stimulates the energy channels of the body
Infant massage	This is a kind of massage for babies designed to stimulate the brain nerves so that the child will eat and gain weight more readily
Invigorating massage	This kind of massage softens fatty parts of the body so that the fat can be more easily burned
Jin Shin Jyutsu	This is another ancient practice focused on energy flows and the release of blockages
Lomi-Lomi	This kind of massage involves a rhythmical rocking and originated in Hawaii
Lypossage	This is a form of massage which boosts skin tone, promotes firmness, and fights against cellulite
Manicure	This involves the hands and fingers and is a form of cosmetic beauty treatment
Manual lymphatic drainage (MLD)	Another massage type, which is very light and aims to support the lymph drainage circulation system
Maya abdominal	This treatment involves the abdomen and pelvis areas with the aim

Type	Description
massage	of moving the uterus to an apt position while softening the muscles and relaxing the diaphragm. The pelvis can be aligned and the trunk muscles relaxed
Meditation	Meditation focuses the mind on the present moment through attention to visualization, breath, and movement. It helps the performer to relax
Oxygen bath	Oxygen-activated bath salts can help to form smooth bubbles which enhance the skin
Paraffin treatment	Hot paraffin wax is poured on to the body to eliminate toxins and provide a softer skin
Pilates	This was the idea of Joseph Pilates and aims to develop balance, elasticity, inner awareness and physical strength
Prenatal Massage	This is a technique designed to reduce pain in the neck, shoulders and lower back. It reduces tiredness and tenderness of the joints and can treat stretch marks
Pedicure	The feet and toes are treated for cosmetic beauty purposes
Qigong	This Chinese technique places the body and mind in a state of relaxation to support healing
Reflexology	This kind of massage uses finger pressure on certain points of the body to support energy flows through the body
Remedial massage	Similar to Swedish massage but with greater pressure, this technique address particular musculoskeletal issues
Reiki	The patient lies fully clothed on a bed while the treatment removes blockages and imbalances in the energy of the body from a physical, mental, and spiritual perspective
Russian bath	This involves a bath in a very hot room which contains heated rocks. The body is then bathed in iced-cold water
Scotch hose or jet shower	This treatment involves switching between hot and cold water which is sprayed through a high-speed nozzle
Shiatsu	This is a form of traditional Japanese massage which has links to

Type	Description
	acupressure from China. The meridians are bodily energy pathways which form the focus of the treatment
Shirodhara	This is an Ayurvedic therapy which makes use of medicated oils which are applied to the head and scalp. It offers exfoliation, supports the hair, and improves blood flow
Swedish massage	A number of techniques are combined in a Swedish massage, including petrissage, wringing, percussive tapping, rolling, and vibration. Pressure is placed on the deep muscles and the blood circulation is enhanced
Steam/sauna	The customer enters a room containing steam, which can be made by pouring water in to hot stones
Swiss shower	Swiss showers involve dynamic of gentle cascades of water to shower the body from shoulders to the feet
Tai chi	This exercise originates in China and involves smooth and slow movements which are designed to relax the body and mind
Thai herbal massage bag (hot compress)	This technique uses a hot towel or Thai herbal dabber which is placed on small areas of the body
Thai traditional massage	Thai massage uses rocking and stretching along with acupressure while the customer remains fully clothed
Trager work	This is an American medical practice which uses touch and praise to “free up” various body parts
Tui-na	This technique focuses on the manipulation and lubrication of the joints. It makes use of acupressure points to control energy flows in the body
Underwater pressure massage	A hose is used to provide a stream of pressurized water which is directed via interchangeable nozzles
Vichy shower	This kind of shower applies a horizontal shower bar which has nozzles to direct water at the whole of the body. The shower can

Type	Description
	be placed on a table and is covered by a gentle stream of water
Watsu	This technique is similar to Shiatsu but is performed in water
Whirlpool bath	Hot water is used in a bath which is invigorated using a propeller and the injection of air through a nozzle
Yoga	Yoga was originally a Hindu discipline which has the aim of reaching a state where the self-achieves spiritual perfection and true serenity

Sources: Miller (1996); Leavy and Bergel (2003); McCarthy and James (2005); Ministry of Public Health (2008); International SPA Association (2013).

This section can be summarized by placing the various spa treatments into five main classes which comprise a total of 44 treatment types. The five main treatment classes are massage, beauty, hydro, holistic, and fitness.

Health establishments for the purposes of this study are classed as day spas in line with the stated definitions of the Ministry of Public Health (2017). This act defines stand-alone services in health and wellness-related services such as water therapy and body massage including facials, pressing the body, mud wraps, and sea salt scrubs. It does not cover the case of operations in a medical institution under the law on medical care or for bath massage or baking in the bath. These health establishments serve customers within a short timeframe, usually of 1-5 hours. Accommodation is not available at the day spa (Chantraket R., 2016; McCarthy & James, 2005; Ravongpant P., 2018).

2.2.5 Thai traditional Medicine (TTM)

Thai traditional Medicine has four elements include Thai Massage, nutritional counseling, Thai herbal medicine, and Spiritual healing (mediation). Mostly it common knows as Thai Massage. National Health Security Act. B.E. 2454 shows Thailand have Health Security to everyone. This health security allows every citizen to get public health care. The regulatory of Health Security also note that Thai traditional medicine involve with health care including Hospital Center, Hospital in

rual area and Public health center need to provide Thai traditional health to patient by focusing on The Thai Traditional Medicine services in Thailand according to the trend of need especially toward massage and herbal remedies by 2009, 2011, 2013. There were increasing on election of health care 50.0% to 60.3% annually (Rutchanee Chantraket, Monthipa Sonksakda, Preeya Metranon, 2016) TTM practitioners was higher and the number of TTM personnel was less than the established staffing pattern (Pornphan Ravongpunt, 2018)

Form of Thai traditional medicine commonly known or Thai Massage is one of the world's oldest healing modalities, which culture has been largely influenced by Buddhism. And they believed that illness result from the imbalance of body. The treatment or healing of illness should focus in restore the balance of body including mind and spirit. Mostly service in Thai Traditional Massage Clinic include: Body massage, Foot massage, Aromatherapy, Herbal treatment massage. Which all clients must be consulted with qualified medical doctor before being massaged.

2.3 Market Orientation

Although the core concepts of market orientation were developed in the 1990s through the commissioned works by the Marketing Science Institute, it was Kohli and Jaworski, and Narver and Slater who established the conceptual framework behind market orientation and highlighted its suitability to business and marketing philosophy. Market orientation recommends an overall philosophy which focuses outwardly on the creation of value for customers and staff. Accordingly, Narver and Slater suggest three principal constructs in emphasizing the business culture: customer orientation, competitive orientation, and inter-functional coordination. According to the previous research of Kohli et al. (1993), health establishment performance would be more efficient if health establishments take into consideration the market orientation which is appropriate.

On the other hand, Kohli and Jaworski define market orientation based on the generation and dissemination and responsiveness of information throughout the organization, and timely response. These different approaches are considered as interrelated perspectives (Kweku Appiah-Adu & Djokoto, 2015). Thus, strategic orientation will shape the business philosophy on how to handle and perform business through a set of deeply ingrained values and beliefs that guide the business attempt to achieve a higher level of performance. These values and beliefs determine the resources that should be employed, going beyond individual capabilities and unifying resources and aptitudes in a cohesive manner. It is crucial to highlight that the capabilities are intangible and are based on interaction and knowledge (T. Morgan, Anokhin, Kretinin, & Frishammar, 2015; Ozkaya, Droge, Hult, Calantone, & Ozkaya, 2015). Furthermore, the effect of market orientation drives through performance that can be divided into 3 categories: customer satisfaction, customer retention, and employee satisfaction. The strategic management literature asserts that market orientation produces an improvement in market detection capabilities and customer bonding, thereby increasing health establishment performance as a whole. This also affects employees because improving bonding among co-workers and employees helps market orientation create a committed business that is defined as being based on

the willingness of individuals to sacrifice for the business, show team spirit, and have the motivation to satisfy customers' needs and generate workplace satisfaction (Jie, Subramanian, Ning, & Edwards, 2015). Furthermore, market orientation can reduce role conflict. That is, the incompatibility of expectations that affects employees' performance. In particular, market orientation promotes performance by creating a proactive attitude to satisfying customers' needs by dissemination of information across departments (Chung, 2018).

The field research of market orientation has three core themes: generation, dissemination, and responsiveness. Market orientation pertains not only to the current customers' needs and preferences, but also to the customers' future needs and preferences and to how employees react to customers (Masa'deh, Al-Henzab, Tarhini, & Obeidat, 2018). Dissemination means that participation of all departments in health establishments is required for responding effectively to a market need. Responsiveness involves taking action, such as selecting target markets, designing and offering products, and producing, distributing, and promoting the needed product in response to intelligence that is generated and disseminated in order to develop a long-term profitable business (Kasim, Ekinici, Altinay, & Hussain, 2018).

The principal justification for the prominent role of customers when creating and implementing strategies is the concept which forms the foundation for market orientation (Mulki & Wilkinson, 2017). The literature usually takes one of two views on market orientation. The first is the cultural perspective, which presents a concept of market orientation as a component of the health establishment culture which emphasizes consistently the need to deliver the best possible customer value (Izogo & Ogba, 2015; Kenyon, Meixell, & Westfall, 2016). The second is the behavioral perspective, from which the conceptualization focuses on particular types of health establishment behavior. (Liao, 2018) gives the example of market orientation as the generation of market intelligence across the health establishment as a whole and linked to the future needs of the customers. This intelligence is disseminated across all departments, leading to a response throughout the health establishment.

From the demand side, there is evidence in the literature to suggest that the use of market orientation can be an effective means of enhancing business performance, with this claim also applicable in the service industry (Mulki & Wilkinson, 2017; Ozkaya et al., 2015).

Health establishments which choose to use market orientation have an understanding of the important role market information plays in creating their business strategies, since it can help in addressing the needs of customers and matching their future demands (Degbey, 2015). The differing levels of usage of market orientation are visible in the way the main variables of consumer behavior interact. The performance of a health establishment will be improved when market orientation is adopted due to the beneficial influence on the connections between important performance variables. However, if businesses are less strongly inclined to use market orientation, those companies will be less capable of utilizing the positive influence on the connections between important performance variables.

This outcome arises because market orientation can be considered a capability, and also the key building block in learning businesses (Fidel, Schlesinger, & Cervera, 2015; Han & Hyun, 2015). When businesses consistently obtain information about their customers and competitors and internally share this data, the health business will be better able to build a performance memory for their operations, which can be vital if a learning business is to be developed.

When market orientation is implemented, the outcome is often an organizational culture which favors experimentation and a desire to achieve continual improvements in company operations. This suggests that when market orientation is used and developed, the business may develop more distinct activities with the sector which can have a concomitant effect on the behavior of consumers and employees (Heirati, O’Cass, & Schoefer, 2014; Trainor, Andzulis, Rapp, & Agnihotri, 2014).

In order to measure the influence of market orientation on consumer and employee behavior it is necessary to take into accounts the processes by which

consumers will perceive and assess the performance of any health establishment. This is because businesses which apply market orientation approaches might do so with one internally planned expectation, but the customer perception may be quite different, and hence the effect upon customer or employee behavior might not be as intended (Abdallah, Phan, & Matsui, 2016; Belás & Gabčová, 2016).

Market orientation must be recognized as an approach which is not outwardly obvious, so customers will not see this in the same way as employees. The effects are only perceived by the customer at the point of receiving the service from the company. The customer's view of the activities of the business will not, therefore, cover the full extent of what that business is actually doing in implementing market orientation. This makes it helpful to assess the effects of varying levels of market orientation upon the links between the main variables of consumers and behaviours (Suess, Weller, Evanschitzky, & Wangenheim, 2014).

Although the implementation of a market orientation approach can be useful to a company as it plans its internal activities and operation, it may also lead to increased costs for health establishments (Swaminathan, Groening, Mittal, & Thomaz, 2014). It is by no means assured that these higher costs will lead to favorable customer behavior in terms of increasing the likelihood of customers making repeat purchases or showing enhanced loyalty. To assess the effects of market orientation adoption upon employee and consumer behavior, it is therefore necessary to design a method which can record the entirety of the customer perceptions resulting from the consumption of the company's services, and which can assess the benefits and costs the customer perceives and their influence upon customer retention and satisfaction (Agnihotri, Dingus, Hu, & Krush, 2016).

This study applies an original approach in order to assess the way in which market orientation affects the links among the main variables of employee and consumer behavior, and in particular the functional and affective aspects of perceptions of performance. This issue is addressed from the point of view of the customer and also of the employee (He, Brouthers, & Filatotchev, 2018).

The literature contains few works concerning the influence of market orientation upon strategic management, although a couple does consider business performance from this perspective (Eisingerich, Auh, & Merlo, 2014; Lun, Shang, Lai, & Cheng, 2016). These studies take the view that market orientation moderates the relationships among the various observed performance outcomes. However, no studies exist which examine the moderating influence of market orientation upon the variables of consumer and employee behaviors.

While a substantial number of works have examined the effects of the implementation of market orientation, few have considered the influence upon the consumer from the stance of either employee or consumers themselves, which would offer an external view of the health establishment. Important works which did look at this perspective include those of (Li, Ye, Sheu, & Yang, 2018), (T. S. Morgan, Anokhin, & Frishammar, 2015) and (Boso, Cadogan, & Story, 2015). However, none of these looked at the way market orientation can moderate the variables of consumer and employee behavior.

2.3.1 Generation

The first activity of market orientation is market intelligence generation involving four distinct but interrelated steps (M. Kim, Vogt, & Knutson, 2015; Pizam, Shapoval, & Ellis, 2016; Sengupta, Balaji, & Krishnan, 2015).

1. Collecting and analyzing information pertaining to understanding current and potential customers' needs and preferences.
2. Scanning and analyzing exogenous factors outside the industry such as regulatory factors, economic trends, technology, and other environmental forces that may influence customers' needs and wants.
3. Monitoring, anticipating, and analyzing competitors' actions and how they might influence the current and future needs and preferences of customers.
4. The gathering and monitoring of market intelligence through formal and informal methods. The key to successful marketing is customer focus (Oliver, 2014). Customer focus requires health establishments to study and understand current and potential customers' needs, wants, satisfaction, behaviour, and other factors by systematic generation and analysis of information about customers' personal, psychological, social, and cultural surroundings (Abdallah et al., 2016; M. Kim et al., 2015). A customer-focused health establishment not only focuses on current customers' needs, but must also be proactive in anticipating changes in customers' needs, wants, demands, and so forth (Belás & Gabčová, 2016; Korschun, Bhattacharya, & Swain, 2014). The nature of health establishments is to exchange relationships with different types of customers at both the national and international levels while responding to their needs and wants (Mateias & Brettel, 2016).

Becoming truly market oriented, health establishments have to keep up with the dynamic nature of the current and future needs of different customers (Nunan, Sibai, Schivinski, & Christodoulides, 2018). Health establishments have to rethink their business philosophies to adopt a market orientation philosophy and review their

informational needs to intelligently establish a marketing information system that focuses on customers and the external environment (Goetsch & Davis, 2014; Swaminathan et al., 2014). Generation should be the means for health establishments to look at themselves through the eyes of their customers because they are likely to define problems and, hence, solutions (Agnihotri et al., 2016). For example, generation should show the extent of both employees' commitment to customers and the management understands of how to create customer value. Because of the dynamic nature of the environment, generation is needed to monitor exogenous factors such as government regulations, technology, economic conditions, and other environmental forces to assess their influence on customers' needs and preferences (Azad, Givi, Nakhoda, & Haseli, 2016; Mateias & Brettel, 2016). Such forces affect the performance of health establishments (Vega-Vázquez, Cossío-Silva, & Revilla-Camacho, 2016). Further, generation is also needed to analyze changing conditions in the health establishments and their impact on the needs and wants of customers (Song, Wei, & Wang, 2015). Specifically, a significant portion of health establishment interactions are inherently international (Rakthin, Calantone, & Wang, 2016). Thus, generation in the form of environmental scanning activities for the health establishments requires continuous monitoring and evaluation of external forces (Qu & Zhang, 2015; Yaprak, Tasoluk, & Kocas, 2015). Although researchers are still debating whether a focus on customers or competitors should be the center of generation activities (Frösén, Jaakkola, Churakova, & Tikkanen, 2016; Navarro-García, Arenas-Gaitán, & Rondán-Cataluña, 2014; Ruizalba, Bermúdez-González, Rodríguez-Molina, & Blanca, 2014), they seem to agree that health establishments which balance the two orientations tend to achieve better performance than those with emphasis on only one orientation (Caruana, Ramaseshan, & Ewing, 2015; Filatotchev, Su, & Bruton, 2017).

Competitors are one of the environmental forces that require special consideration from market intelligence because of their immediate and often massive influence on the health establishment performance (B. Nguyen, Yu, Melewar, & Chen, 2015). Competitor orientation entails gathering information: Who are the competitors? What products do they offer? And, do they represent an attractive

alternative from the perspective of the target customers? (Y. K. Lee, Kim, Seo, & Hight, 2015). More specifically, market intelligence has to monitor and evaluate competitors' strengths, weaknesses, and strategies in order to develop a response strategy (He et al., 2018). As mentioned earlier, health establishments are facing increasing and new demands from customers locally and internationally. Changes in the traditional marketing environment seem to be intensifying competition among health establishments (Bigné, Moliner, Vallet, & Sánchez, 2015). Consequently, health establishments have to continuously seek better ways to meet their customers' needs and wants as well as give special attention to generation with regard to monitoring competitors' actions and evaluating the level of competition. Multiple means of internally focused sources and externally focused sources can be used to acquire primary or secondary information (Yayla, Yenyurt, Uslay, & Cavusgil, 2018). Furthermore, (Song, Wang, & Cavusgil, 2015) mention four modes of generation, including market-focused, collaborative, experimentation, and repetitive experience.

Generation is the responsibility of marketing and non-marketing individuals and departments throughout the health establishment (T. Morgan et al., 2015). All marketing and non-marketing employees have to understand that their jobs include generation elements (Boso et al., 2015). Effective market generation in the health establishments requires formal and informal mechanisms to gather and monitor information related to customers, competitors, and environmental forces and for the availability of the gathered at one location to be disseminated effectively to other parts of the spas (Kweku Appiah-Adu & Djokoto, 2015; Ozkaya et al., 2015). Health establishments are flooded with information about their customers and could provide guidance for orientation if that information is utilized (T. Morgan et al., 2015).

Therefore, the goal is not simply to collect information; managers need to know what to do with this information. (T. S. Morgan et al., 2015) assert that most information collected would be thrown out. Among the management team members of these health establishments, a few have been exposed to marketing concepts and consider market generation to be an essential element for orientation towards

customers and competitors. They promote customer service, training programs, suggestion boxes, and customer complaints. They encourage formal and informal contacts with certain customers. They use local advertising and media to introduce their services, and so forth. Finally, the joint venture type of health establishments focus on customers' needs, wants, and satisfaction to be able to penetrate the spa market. These health establishments apply market generation by conducting customer surveys, customer service training programs, advertising, and sponsorship of social activities.

In order to measure the generation of information, the following items were employed: "manager asks customers about service and how better to serve them at least once monthly", "manager conducts research", "manager determines changes in customer behaviour", "manager gathers data on customer behavior trends", "manager information detects changes slowly", manager examines customers to determine the quality of services".

2.3.2 Dissemination

The second dimension of dissemination includes two points:

1. Health establishment wide dissemination of existing and anticipated information regarding the needs and preferences of present and potential customers, present and potential competitors, and other exogenous factors.
2. Effective use of disseminated information by encouraging the participation of virtually all departments and individuals in sharing information concerning present and potential customers' needs and preferences, competitors, and other exogenous factors.

Market orientation effectiveness requires the participation of all departments in the health establishment. It is critical for a variety of departments and individuals to be aware of market needs and changes and be responsive to those needs and changes

(Pascual-Fernández, López-Sánchez, Reynoso, & Santos-Vijande, 2016). Effective dissemination of market orientation is essential because it provides a shared basis for coordinated action by different departments. More specifically, sharing information not only increases its quality and value but also enables the health establishments to coordinate actions and improve its ability to make rapid decisions and execute them effectively (T. Morgan et al., 2015). In essence, intelligence dissemination is fundamental for a well-functioning health establishment. To become market oriented, health establishments need to encourage the sharing of information in virtually all departments in the organization. Functional barriers to information flow have to be removed for both vertical and horizontal communication systems to be efficiently utilized (Y. Chen, Tang, Jin, Li, & Paillé, 2015; Song, Wang, et al., 2015). Given that the health establishment is a service-oriented organization composed of many branches, He et al. (2018) pointed out that a horizontal communication system is particularly effective in disseminating information. As generation is enhanced when all departments and individuals are involved, dissemination enlarges its usefulness for all parties.

Any department or any individual in the health establishments can initiate information sharing with others (Bigné et al., 2015). A variety of formal and informal procedures have been recommended to disseminate information throughout the health establishments (Carlos Pinho, Paula Rodrigues, & Dibb, 2014). Formal mechanisms include teamwork, general meetings, focus groups, workshops, written documents, manuals, handbooks, newsletters, visual documents, the internet, videos, movies, or combinations of these strategies (Caruana et al., 2015; Filatotchev et al., 2017). Purposeful informal means of dissemination, such as “hall talk,” “story-telling,” field visits, business luncheons, etc., are a good source of sharing information (Frösén et al., 2016; Molander, Fellesson, & Friman, 2018).

In business of health establishments, employees’ and departments’ involvement in information dissemination will increase the quality of information gathered and improves the spa responsiveness to customers’ needs, competitors’ strategies, and the condition of other exogenous factors (Chao, Feng, & Li, 2015).

Generation and the sharing of information and responses to its meaning are critical to the success of health establishments, partnerships, and alliances (Frösén et al., 2016; Newman, Prajogo, & Atherton, 2016). Research suggests that bureaucratic management and formal centralized health establishment structures hinder the flow of communication, coordination, and connectedness (Marx & Brettel, 2015) and increase conflict and distrust (Kasim et al., 2018; Ruizalba et al., 2014). Some health establishments managed by traditional managers are typical examples of such structures. In these spas, routine information flows through the formal channels while important information will be shared with a trusted few. Managers who have experience focus on task forces, committees, liaison officers, newsletters, and general meetings to facilitate information sharing to enhance their competitive position and their ability to respond to customers' needs and demands. Moreover, the joint venture health establishments managed by managers believe that customer focus should be the job of all employees, not just marketing people. Consequently, they encourage information sharing to empower their employees to be capable marketers (Rakthin et al., 2016).

The extent of information dissemination can be measured through assessment of the following items: “managers have meetings among departments and forward information regularly”, “the health establishment is frequently given informational updates”, “information about health benefits is sent to the target consumers”, “managers seek information about consumer satisfaction via therapists and other staff”.

2.3.3 Responsiveness

The third activity of market orientation is intelligence responsiveness and includes the following three points:

1. Developing, designing, implementing, and adjusting products and services (tangibles and intangibles) in response to current and potential customers' needs and preferences.
2. Developing, designing, implementing, and adjusting systems to promote, distribute, and price products and services that respond to current and potential customers' needs and preferences.
3. Utilizing market segmentation, product or service differentiation, and other marketing tools in the development, design, implementation, and adjustment of products and services, and their corresponding systems of promotion, distribution, and pricing. While the purpose of intelligence generation and dissemination activities is to develop market knowledge (Yaprak et al., 2015), while the responsiveness dimension aims to use this market knowledge to guide strategy recognition, understanding, creation, selection, implementation, and modification in responding to market needs and changes (Vega-Vázquez et al., 2016). While the development of market knowledge would seem to be achieved through more effective formal and informal participation by all departments, utilizing such knowledge requires more formal actions based on product or services planning. Generally, responsiveness in health establishments requires intelligence development, implementation, and modification of products and services through understanding and anticipating customers' needs and preferences and initiating steps to respond to them (Qu & Zhang, 2015). Further, market responsive health establishments are required to develop, design, implement, and modify plans corresponding to the remaining controllable variables in marketing, namely pricing, distribution, and promotion. When the health establishments are a service, the situation is somewhat unique because of the nature of the services (Navarro-García et al., 2014). Likewise, promotional themes of health establishments

may be somewhat unique in that they often emphasize personalized services. They may, therefore, require more delicate, sophisticated appeals than are common in other promotions (Pantouvakis, Vlachos, & Zervopoulos, 2017; Song, Wei, et al., 2015). However, to be effective, health establishment's responsiveness has to be based on accurate market orientation. Marketing strategies such as segmentation, product or service differentiation, and positioning are often utilized (Hill & Brierley, 2017; Saeidi, Sofian, Saeidi, Saeidi, & Saaeidi, 2015). In the case of health establishments, segmentation, for example, would help categorize customers into various segments based on unique patterns of behavior, beliefs, size, and power. This segmentation, in turn, would help guide the establishment of appropriate products, pricing, promotion, and distribution strategies. In summation, individually and collectively, generation, dissemination, and responsiveness determine the nature of market orientation. Based on the previous discussion, (Izogo & Ogba, 2015) argue that differences between health establishments are largely a function of managerial practice, so health establishment responsiveness to market changes will differ from one spa to another. Traditional managers are not tuned to marketing activities (C. G. Lee & How, 2018). Hence, their responsiveness to market orientation is limited in the extent to which it will promote conformity and stability with other governmental institutions. On the other hand, some other managers have been trained consider the quality of products, services, and promotion to be their avenue to market success. They focus on becoming closer to customers by opening more branches, sponsoring sports or social healthcare, greeting customers, and by offering prizes and gifts for customers such as discounts and vouchers.

Responsiveness can be assessed on the basis of the following items: "managers choose how they will respond", the concepts of customer behavior and market orientation drive the development of new services", managers do not react to changes in consumer demand", managers frequently review the development of services", planning is guided by technology rather than market research", each health establishment department meets to make response plans", "managers act on response plans without delay", "managers take rapid corrective action", "responses involve the departments concerned".

Finally, managers use market orientation with employee participation to adjust the marketing offers to respond to current and expected customers' needs and wants, and competitors' strategies (Ennew, Binks, & Chiplin, 2015). In summation, health establishments differ in the extent to which they generate market information, disseminate it, and take action based on market orientation. As a result, it is expected that the degree of market orientation will differ between these health establishments.

Authors	Generation	Dissemination	Responsiveness	Customer orientation	Competitor orientation	Interfunctional coordination
Appiah-Adu, and Djokoto, (2015)	✓	✓	✓			
Ozkaya, et al., (2015).	✓	✓	✓			
Morgen, et al., (2015)	✓	✓	✓			
Boso, et al., (2015).	✓	✓	✓			
Pascual-Fernández, and López-Sánchez, (2016).	✓	✓	✓			
Morgan, et al., (2015)	✓	✓	✓			
Chen, et al., (2015)	✓	✓	✓			
Song, et al., (2015)	✓	✓	✓			
He, et al., (2018)	✓	✓	✓			
Yayla, et al., (2018)	✓	✓	✓			
Lee, et al., (2015)	✓	✓	✓			
Bigné, et al., (2015)	✓	✓	✓			
Nguyen, et al., (2015)	✓	✓	✓			
Pinho, and Rodrigues, (2014)	✓	✓	✓			
Caruana, et al., (2015)	✓	✓	✓			
Filatotchev, et al., (2017).	✓	✓	✓			
Frösén, et al., (2016)	✓	✓	✓			
Chao, et al., (2015)	✓	✓	✓			
Molander, et al., (2018)	✓	✓	✓			
Guo, et al., (2017)	✓	✓	✓			
Marx, and Brettel, (2015)	✓	✓	✓			
Newman, and Prajogo, (2016)				✓	✓	✓
Kasim, et al., (2018).				✓	✓	✓
Ruizalba, and Bermúdez-González, (2014)				✓	✓	✓
Rakthin, et al., (2016).				✓	✓	✓
Qu, and Zhang, (2015).				✓	✓	✓
Yaparak, et al., (2015).				✓	✓	✓
Navarro-García, and Arenas-Gaitán, (2014).				✓	✓	✓
Vega-Vázquez, and Cossío-Silva, (2016).				✓	✓	✓
Pantouvakis, Vlachos, and Zervopoulos, (2017).				✓	✓	✓
Song, Wei, and Wang, (2015)				✓	✓	✓

Figure 2.1 Review of Market Orientation

2.4 Extended Market Orientation

According to MO variable, the theory cannot good explain completely the relationship of various variables. That's why many researchers are interested studying other variables than MO variables that make it possible to better explains marketing relationships which is the EMO variable. EMO variable is still a complex variable and is oftenly a variable that depends on the environmental factors in the study area by Kohli et al. (1993) and Slater and Narver (1993). They suggest the idea of EMO variable is expanding rivalry, changing innovation, and client needs also have an effect through market orientation and unpredictability. On the basis of the reviews cited, market orientation can be explained as follows:

1. The constructed models and the variables used show certain differences in the earlier studies examined (Kohli et al., 1993; Slater, Olson, & Reddy, 1997).
2. Evaluations of business performance are not investigated widely in terms of boundaries of measurements and the absence of the measurement variables.
3. Market orientation has been estimated on just a single side (service provider) but not from the customer or competitors in external perspective.
4. Generally, market orientation and performance are moderately related depending on the extent of the integration of the focus and conditions.
5. The environmental factors have moderating effects on the relationship between market orientation and performance which are not significant but their previous effects on market orientation itself are significant.
6. It is suggested that strategic management has a moderating affect on the relationship between market orientation and performance but this has not been widely explored.

7. The concept and size of the sample should be expanded; the samples of researches are mostly shown from American business (not including health establishments in Bangkok context) and hence preclude generalization about the study results beyond the geographical limits.

8. Previous research has been limited to the internal structural components. There is no investigation which has investigated the previous role of business culture or other potential factors, such as external environmental factors. In addition, previous research has not formally incorporated the temporal dimension in market orientation research design.

According to previous support, an extended model of market orientation is developed as shown in the conceptual framework. This extended model explicitly forms the factors that are acquired in the marketing concept, market orientation, and their related literature. The center of this latent variable is the extended market orientation (EMO) construct. The EMO construct captures a set of business intelligence-related activities pertaining to a broader or extended range of market factors than those of the existing market orientation constructs, included as market factors in the EMO construct as shown below:

2.4.1 Customers

Normally, variable of customers are defined as people who buy services which is usually not included in the initial factors or factors that affect performance because it is a factor that is difficult to detect or control. But some researchers have argued the concept variable of customer that should have in EMO variable by (Gabriel, Cheshin, Moran, & van Kleef, 2016) argued that customers define significantly related performance. Zhu, Feng, and Choi (2017) reported that customers include both domestic and foreign consumers. Health, establishments have been succeeding in marketing their services despite practical obstacles. Terho, Eggert, Haas, and Ulaga (2015) found similarities in customers' purchasing decisions and lifestyles such as husband and wife interactions on treatments package buying decisions. Martinaityte,

Sacramento, and Aryee (2019) posited that similarity in customer preferences, motivations and perceptions may not be indicative of uniformity in customer behavior because the impacts of economic, environmental, governmental and family conditions could result in variations in customer behavior by market, region or geography. While customer behavior patterns are frequently based on the context in which customers operate, similarity in choice behavior and buyer motivations does not necessarily imply uniform customer behavior (Laari, Töyli, Solakivi, & Ojala, 2016). One approach to seeking common ground includes delineation of marketing segments designed to yield strong uniformity when evaluated for criteria such as attitudes and lifestyles (Martinaityte et al., 2019). Service preferences of customers for can be strongly associated with customer service acceptance resulting through performance (Cui & Wu, 2016; Rothwell, Hohne, & King, 2018).

In addition, customers are defined by strong patterns of consumer choice outcomes for services bought or acquired because customers' purchasing habits are intended to describe the service-specific choice outcome characteristics of customers in specific regions or markets. The propensity of health establishments to adapt services can vary with the type of service and the strength of customers' purchasing habits associated with those services (Zhu et al., 2017). Variation between customers' markets in health establishments in Bangkok with strong preferences can expand opportunities for international marketing segments (Terho et al., 2015). It is thus hypothesized that customers are positively correlated to performance.

Extended Market Orientation Customer can be measured on the basis of the following items: "functional departments", social media", "customer complains of adverse consequences to health".

2.4.2 Competition

Competition is defined as high levels of activity by business adversaries attempting to gain customer markets, competitive advantage or comparative advantage. Competition can have an important influence on performance (Arrfelt, Wiseman, McNamara, & Hult, 2015; Prajogo, 2016). According to Cucculelli and Bettinelli (2015), competition is perceived as one of the most important obstacles to performance, requiring strategies to compete with rivals. Competition on a Bangkok scale can involve large health establishments and large businesses that may not be profit-oriented, as well as small health establishments (Y. K. Lee et al., 2015). According to (Chuang & Lin, 2015), while the intensification of competition has resulted in increased numbers of health establishments using competitive intelligence in strategic decisions, many health establishments have serious blind spots concerning their competitors' capabilities, intentions, and possible reactions to offensive moves.

In domestic and international markets, strong competitors can undercut rivals by channeling resources into these markets. Tactics involving the achievement of market share gains through price-cutting can be countered with similar approaches, many of which require rapid responses and flexible service systems (N. P. Nguyen, Ngo, Bucic, & Phong, 2018). Health establishments that can introduce new services more quickly than their competitors, offer a variety of services more efficiently, and move swiftly to sales can increase their chances of achieving a competitive advantage driven through performance (S. K. Kim & Min, 2015). The intensity of competition in a given market can also influence the level of performance (Adnan, Abdullah, & Ahmad, 2016). The extent and intensity of competition in foreign markets can reduce the degree to which services can perform (Rajwani & Liedong, 2015).

(Huhtala, Sihvonen, Frösén, Jaakkola, & Tikkanen, 2014) proposed a direct relationship to exist between the degree of a health establishment's competitive position in different markets and the level of performance it could expect to be able to achieve in those markets. According to Cucculelli and Bettinelli (2015), competition is most importantly related in markets where health establishments' adversaries,

competitive position, and market share were similar.(Chuang & Lin, 2015) posited that market share leadership in both domestic and selected overseas markets can be expected to facilitate performance in those markets. The difficulty involved in making frequent major competitively driven service modifications across rivals can lead health establishments to conduct service planning and implementation by limiting service processes to one or a few services (Adnan et al., 2016).

On the other hand, (Y. K. Lee et al., 2015) argued that competition is not important variable through performance enough because health establishments facing competitively driven services and changes over intervals longer than one year were less likely to emphasize performance than health establishments experiencing more frequent competitively driven service changes. Their rationale was that in markets where competition was of relatively high intensity, health establishments had no time to identify market orientation and modify their services to meet performance. This viewpoint is supported by Chuang and Lin (2015) and others who contend that the drive for advantage in increasingly competitive domestic and overseas markets results in increased performance by virtue of increased customer satisfaction, customer retention and employee satisfaction. It is therefore hypothesized that competition is positively correlated to performance.

Extended Market Orientation Competition can be measured on the basis of the following items: “market services and trends”, “competitor information”, “price changes from rivals”, and “exciting promotional campaign launches by rivals ”,“rivals respond to regulatory changes.

2.4.3 Suppliers

Supplier selection is a strategic process to support the delivery of quality services and involves many treatments in health establishments. It directly impacts the performance of projects in terms of customer satisfaction, customer retention, and employee satisfaction. Supplier selection processes if properly performed can give an edge to health establishments in the form of networks constructed by competing

together for projects. (Ağan, Kuzey, Acar, & Açıkgöz, 2016) explored the importance of suppliers in the construction of business by conducting a study on different projects to measure the performance of each project on the basis of criteria such as pre-qualification, performance evaluation and performance measurement. Their paper revealed that suppliers should be started from very basic tasks such as setting standards for measuring quality and delivery reliability, and helping to fulfill legal and business requirements driven through performance (Graca, Barry, & Doney, 2015).

Based on the literature review the various criteria used to select suppliers were categorized in four major categories as procurement, quality, health, and safety. The findings suggest that procurement and quality-related characteristics are the highly preferable criteria that health establishments consider while evaluating suppliers. The review also explained that quality and delivery time are the most important characteristics of prior supplier performance considered by the health establishments, followed by experience and cost. This means that health establishment performance might be based on good suppliers that were selected regardless of their past performance (Terpend & Krause, 2015; Whipple, Wiedmer, & K. Boyer, 2015).

It is important for health establishments to find a good supplier network. The objective of a supplier is to achieve an uninterrupted flow of material with cost reliability. The supplier selection plays an important role, which involves competent suppliers in terms of technology, quality, cost capability, and deliveries (Jain, Khalil, Johnston, & Cheng, 2014). Also, health establishments focus on upgrading their suppliers by working collaboratively with them throughout the operations of the health establishment along the lines of what happens to satisfy customers. As a review, suppliers are evaluated based on technical aspects, quality, cost, and managerial capabilities. Then the evaluation results are compared against the customers' needs in the health establishment and classified into one of several services and customers' services selections (Graca et al., 2015; Villena & Craighead, 2017) investigated the use of specific criteria to select suppliers such as quality of the materials, implementing just-in-time, and plant stoppages due to material being out of

stock or poor product availability. Among the selected criteria, quality remained the utmost priority for health establishments, followed by delivery reliability, time, and availability. It is therefore hypothesized that suppliers are positively correlated to performance.

Extended Market Orientation Supplier measurements were based on the following criteria: “suppliers are willing learn more about spa products”, suppliers are regularly assessed for spa product quality”, “existence of new suppliers while managers continue to work with current suppliers”.

2.4.4 Regulatory Environment

The regulatory environment can affect performance through items such as patents and taxes in ways that make customer satisfaction, customer retention, and employee satisfaction necessary (Nechaev & Antipina, 2016). The impact of taxes on service pricing can vary substantially from market to market and can have a significant influence on efforts to employ performance (Bouazza, 2015). Taxation for health establishments operating in Bangkok has been known to force services to meet pricing restrictions (Klapper, Love, & Randall, 2014). Regulatory environments that have taken the form of host political interference can be a driver of modifications in health establishments’ operations, policies and strategies in ways that can negate the benefits of performance (Gobena, 2016). Different markets can require different service designs and business practices (Epifanova, Romanenko, Mosienko, Skvortsova, & Kupchinskiy, 2015). While many health establishments establish performance to improve customer satisfaction, customer retention, and employee satisfaction, they have also been known to use service regulations and standards as a means of protecting their own customers (Wales W., Shirokova G., Sokolova L., & Stein C., 2016). Regulatory environment-related delays in issuing approvals, for example, can be used to slow down competitors and buy time for the market. Highly stringent regulatory environments can drive service modifications and hamper competitors’ strategies (Y. Chen, Wang, Y., Nevo, S., Jin, J., Wang, L., & Chow, W. S., 2014).

While the regulatory environment can preclude performance that has not been appropriately adapted from being sold in some markets, in some cases it can be the driving force behind design modifications that make services marketable on a wider, larger scale (Nechaev & Antipina, 2016). Health establishments may avoid markets completely where requirements are extraordinarily stringent to preclude having to make services modifications (Klapper et al., 2014). Overall, the regulatory environment is viewed as one of the preeminent barriers to performance. It is hypothesized that stringent regulatory environments are positively correlated to performance.

Extended Market Orientation Regulatory measurement was based on these items: “managers review the effects of changes of customers, health establishment products and services, and human resources from different departments”, “market information quickly circulates through the organization”, “managers responds to customer needs information from therapists and other staff”.

2.4.5 Social Movements and Trends

Social movements and trends are defined as strong traditional or established ways of doing things that include attitudes toward services driven through performance. A major consideration in the implementation of performance includes the strength of social movements and trends with respect to services in markets where the services are to be sold (Hair Jr, Wolfinbarger, Money, Samouel, & Page, 2015; Xi, Kraus, Filser, & Kellermanns, 2015).

While social movements and trends are difficult to explain and measure and are considered by some to be intangible, their association with performance strategies appears strong (Rahim & Olonode, 2018). According to Y. K. Lee et al. (2015), the increasing performance of markets and health establishments are critical to new services in health establishment performance make the relationship between national and international culture as performance which is an important issue. The influence of

social movements and trends is associated with every aspect of customers' satisfaction, customer retention and employee satisfaction (Real, Roldán, & Leal, 2014). The services people buy, the attributes of services people value and the opinions of services are all culture-based choices (Paniagua & Sapena, 2014). Performance strategies for services that are culturally compatible with the society in which they are marketed are more likely to succeed than performance strategies for services that are less culturally compatible (Gunasekaran, Subramanian, & Rahman, 2015).

(Melnyk, Bititci, Platts, Tobias, & Andersen, 2014) argued that performance can be based on different psychological meanings of the product in different markets. According to (Doran, 2015), different cultures have different rules regarding services. In some cases, performance is desirable in markets where services represent a significantly higher level of customer satisfaction (Gast, Filser, Gundolf, & Kraus, 2015). On the other hand, according to (Gunasekaran et al., 2015), if the image of health establishments in Bangkok is weak, it may be strategically desirable to design the services in a way that distinguishes them from typical services. Direct relationships have been proposed in the literature between social movements and trends and strategy effectiveness (Real et al., 2014). Services that have high cultural compatibility are more likely to be able to reap the benefits of performance (Melnyk et al., 2014; Rahim & Olonode, 2018). Performance has a greater likelihood of success in market environments where strong traditional or established ways of doing things do not preclude potential customers from purchasing services (Gast et al., 2015). It is hypothesized that strong social movements and trends are positively correlated to performance.

Extended Market Orientation Social Cultural measurement was based on these items: "information regarding environmental awareness which might have an impact on the health establishment", "data concerning new lifestyle trends which might change the use of health establishments".

2.4.6 Macroeconomic Factors

Macroeconomic factors can be defined to include high levels of per capita gross domestic product (GDP), disposable income, quality of life, purchasing power and education. Differences in economic development can lead to variations in the types of products purchased and can influence performance such as employee satisfaction. Customers in less developed markets may be unable to afford services that customers in more highly developed markets consider essential, and services regarded as inexpensive staples in some markets such as the U.S., Western Europe and China must be sold as expensive luxuries elsewhere (Ramasamy & Abar, 2015).

Even in Thailand, variation in macroeconomic factors can be substantial (Chaibi & Ftiti, 2015). Health establishment may therefore find themselves having to position their services as deluxe, relatively high-priced items in Bangkok, while a very different marketing strategy would be required in other markets, so variation in per-capita income levels can result in pricing and pricing structure requirements that impede performance (Fernández & Gulan, 2015). It shows that in order for services such as high-end spas to fall within reach of the potential customers in Thailand, the services may have to be modified so that customers will be able to afford them. Macroeconomic factors can influence customers' buying patterns and purchase quantities (Verdelhan, 2018). (Rey, 2015) defined macroeconomic similarity in terms of per capita GDP, disposable income and quality of life. Education levels (what is read and seen), television watching (level of awareness) and purchasing power, according to (Ramasamy & Abar, 2015) were indicators of the level of macroeconomic influence. The effects of macroeconomic factors can also be seen in terms of costs of capital and labor (Chaibi & Ftiti, 2015). According to (Fernández & Gulan, 2015), it would be more feasible to consider market orientation tools involving numerical controls in markets where critical labor shortages exist on the basis of labor cost savings than it would be to market these products where labor shortages did not exist. High levels of macroeconomic influence can result in divergence of tastes (Habib, Mileva, & Stracca, 2017). In general, it is believed that as people around the globe become well educated and more affluent, their tastes diverge (Verdelhan, 2018).

It is therefore hypothesized that macroeconomic factors are positively correlated to performance.

The mixed theories concept shows links to the building of extended market orientation. The latent variable comes from the paradigm of structure investigation performance (Goetsch & Davis, 2014). The model addresses both internal and external factors. Usually, business researchers emphasize internal characteristic factors in their models. In the other industrial sectors, researchers emphasize external factors. Performance is a standard of connection between internal and external characteristics that can be formulated (Trainor et al., 2014). Market orientation and market factors are first reviewed for extended market orientation. In this step, two of the previous components are suggested as stable factors. In addition, it is constructed from behavioral perspectives. The combined relationship drives the model without limiting the differences between internal and external factors (Nunan et al., 2018). This results in such behavioral activities, as hypothesized, that may take the forms of performance outcome. Moderators (strategic management) of the relationship between the extended market orientation are considered to influence health establishment performance. The moderators are assumed to be impermanent and less stable than previous environmental factors. By definition the observational period of the moderator should be more recent than for the extended market orientation variables before the results.

The latent variable of EMO (conceptual framework) shows the research areas investigated in the review because there have been many reviews of market orientation; the areas that have received empirical research attention are quite limited because the extended construct of market orientation is based on the structural investigation through performance concept, so this dissertation first examines additional evidence which might support or reject the current state of knowledge by focusing on the external environment factors and performance as a result. In previous research there is an absence of causal directionality incorporated in empirical investigation. This dissertation study attempts to improve on this deficiency by developing a structural equation model that explicitly tests the relationships between

extended market orientation through performance. The model provides some information based on recent inferences. In the next section, specific research questions and hypotheses for this dissertation are provided.

Extended Market Orientation Macroeconomic Environment measurement was carried out using the following items “industry growth rates”, “foreign exchange rates”, and “Ministry of Public Health”.

In conclusion, the latent variable shows that health establishments engage in a broad range of intelligence-related activities at varying degrees of investigation as a response to the environmental factors. In addition, the extent to which a health establishment engages in such activities determines the results of performance such as customer satisfaction, customer retention and employee satisfaction. Finally, the strengths of the relationships between intelligence-related activities investigation and results of market performance vary depending upon the health establishment’s specific situational factors (strategic management moderators).

	Customer	Competitor	Supplier	Regulatory environment	Social movements and trends	Macro-economic factors	Market infrastructure
Gabriel et al. (2015)	✓						
Zhu et al., (2017)	✓						
Terho et al., (2015)	✓						
Martinaityte and Sacramento (2016)	✓						
Laari et al., (2016)	✓						
Cui and Wu, (2016)	✓						
Rothwell et al., (2018)	✓						
Arrfelt et al., (2015)		✓					
Prajogo, (2016)		✓					
Cucculelli and Bettinelli (2015)		✓					
Lee et al., (2015)		✓					
Chuang and Lin (2015)		✓					
Nguyen et al., (2017)		✓					
Kim and Min (2015)		✓					
Adnan et al., (2016)		✓					
Rajwani and Liedong, (2015)		✓					
Huhtala et al., (2014)		✓					
Ağan et al., (2016)			✓				
Graca et al., (2015)			✓				
Villena and Craighead (2017)			✓				
Jain et al., (2014)			✓				
Whipple and Wiedmer (2015)			✓				
Terpend and Krause (2015)			✓				
Leonidou et al., (2015)			✓				
Ralston et al., (2015)			✓				
Narayanan et al., (2015)			✓				
Leonidou et al., (2015)			✓				
Ralston et al., (2015)			✓				
Narayanan et al., (2015)			✓				
Nair et al., (2015)			✓				
Nechaev and Antipina (2016)				✓			
Bouazza and Ardjouman, (2015)				✓			
Klapper et al., (2015)				✓			
Gobena and Van Dijke, (2016)				✓			
Epifanova and Romanenko, (2015)				✓			
Wales and Shirokova, (2016)				✓			
Chen et al., (2014)				✓			
Hair Jr et al. (2015)					✓		
Xi et al., (2015)					✓		
Bahim and Olonode, (2018)					✓		
Lee et al., (2015)					✓		
Real et al., (2014)					✓		
Paniagua and Sapena, (2014)					✓		
Gunasekaran et al., (2015)					✓		
Melnyk et al., (2014)					✓		
Doran, (2015)					✓		
Gast et al., (2015)					✓		
Habib et al. (2017)						✓	
Ramasamy and Abar (2015)						✓	
Chaibi and Fitri, (2015)						✓	
Fernández and Gulan, (2015)						✓	
Verdelhan, (2018)						✓	
Rey, (2015)						✓	
Koo et al. (2016)							✓
Hadiyati (2015)							✓
Cai et al., (2015)							✓

Figure 2.2 Review of Extended Market Orientation

2.5 Strategic Management

The review of the literature suggests the existence of moderating effects of strategic management through performance. The reason is that implementing a particular strategy is essentially a process adaptation resulting in health establishment performance adjusting to the market environment (Miles, Snow, Meyer, & Coleman Jr, 1978). Since the strategic management described by Miles et al. (1978) is a planned pattern of the adaptation with a particular set of performance criteria, market orientation in relation to performance should vary depending on the strategic management as Prospector, Analyzer, and Defender.

2.5.1 Prospector

Prospectors operate within a broad service market. This type of health establishment values being the first to enter with regard to new services and markets, despite the fact that some of these efforts do not result in high profits according to the product life cycle focusing on the introduction stage. The health establishment responds quickly to early signs regarding areas of productivity, and these responses often lead to further rounds of competitive actions. However, health establishments with this type of strategy may not maintain a strong market in every area that it enters. In addition, Prospectors endeavor to pioneer in-service market development by offering a frequently changing service line, and they compete primarily by stimulating and meeting new market opportunities. They generally devote more resources to entrepreneurial tasks, monitor evolving trends in the marketplace and new service development, and are led by a dominant coalition that possesses expertise in performance and R&D (Eisingerich et al., 2014).

Prospector types extend technological processes and facilitate flexibility in health establishment operations. As Miles et al. (1978) conclude, they rely on participative and decentralized decision making and tend to have complex coordination and communication mechanisms (Swaminathan et al., 2014). Prospectors have the ability to find and exploit new products and new market

opportunities. Their product-market domain is usually broad and continuously developing (Lun et al., 2016). Growth is primarily coming from the development of the new markets and services. They are innovators and, thus, often find technological innovation very expensive and not as efficient as competitors focused on performance. The Prospectors, therefore, evaluate themselves more often in terms of effectiveness in new service development and new market development, rather than market share or efficiency. It is, therefore, conceivable that a Prospector type of strategy has a positive moderating effect on the relationships between market orientation and extended market orientation driven through performance.

2.5.2 Analyzer

The Defender and the Prospector stand at two opposite extremes of environmental strategies (Koo Moon & Kwon Choi, 2014). The Analyzer exists between these two extreme strategies. A specific combination of the strengths of the two strategies, the Analyzer type minimizes risk while maximizing profit opportunity and performance. The Analyzer is concerned with developing new services and markets, but only after their feasibility has been verified (Eisingerich et al., 2014). The Analyzer strategy can be described as being a follower. The Analyzer's main concern is how to identify and capitalize on new product and market opportunities while at the same time preserving a stable core of services and market segments. Their performance criteria are a combination of those of the Defenders and Prospectors.

The Analyzer must maintain the health establishment standard of efficient operation while pursuing effectiveness through the well-conceived addition of new services and markets in order to survive in business. Analyzers try to maintain a stable, limited line of services, as do defenders, but also to mobilize quickly to pursue a carefully chosen set of more promising innovations in the health establishment. This type of health establishment is seldom a major competitor in areas compatible with its established service-market base. The health establishment will often be entering after the market has been tested. In addition, it avoids the mistakes made by the pioneers to

develop more cost-efficient services. In conclusion, Analyzers aspire to be a good, if not the best, performer in performance dimensions by definitions such as customer satisfaction, customer retention and employee satisfaction (Lun et al., 2016; Rodriguez, Peterson, & Ajjan, 2015). It is hypothesized that the Analyzer type of strategy has a positive moderating effect on the relationships between market orientation and extended market orientation driven through performance.

2.5.3 Defender

Defenders try to find and maintain a safe niche market in a relatively stable service. These health establishments tend to offer a more selective range of services compared to their competitors. In addition, they try to defend their market share by offering better quality, superior service, and lower prices creating improved performance. Health establishments using the Defender strategy have a conservative view regarding developments against competitors. They disregard innovations that do not directly influence current areas of operations and concentrate instead on excelling in their limited area.

A Defender's good performance as a health establishment depends on its ability to maintain aggressively its eminence within the well-defined market segment (Swaminathan et al., 2014). The aggressive maintenance effort is said to be evident in its continuous and intensive efforts to become more technologically efficient (Agnihotri et al., 2016). It is because the Defender's primary emphasis is more on efficiency, rather than on effectiveness, that their fundamental performance appraisal method involves comparing their efficiency with that of other competitors. Customer satisfaction, customer retention and employee satisfaction are efficiency measures. Fundamentally, market share is an effectiveness measure, although the Defenders seem to pay attention to maintaining their market share position in narrowly defined market segments. In fact, market share can be achieved through efficient operations and lower costs (Mateias & Brettel, 2016). The operation relies on centralized

decision making and tends to have relatively simple coordination mechanisms (Rodriguez et al., 2015).

It is hypothesized that Defender type of strategy has a positive moderating effect on the relationships between market orientation and extended market orientation drive through performance.

Based on the preceding arguments, the following hypotheses were developed to test the moderating effect of strategic management on the relationship between market orientation and extended market orientation through the performance of the health establishment.

	Defender	Prospectors	Analyzer	customer	competitor	interfunctional coordination	shareholder	innovators	entrepreneurial orientation	market orientation	resource orientation	Determinant	Descriptive Goal	Reactor
Brower and Row (2017)				√	√	√								
Kumar, Sharma, (2017)	√	√						√						
Colin, Cheng, and Huizingh (2014)									√	√	√			
Noble, Sinha, and Kumar, (2014)												√	√	
Lukasa, (2015)		√			√									√
Frambach et al., (2016)	√	√	√											
Dyer, and Song, (2014)	√	√	√											
Lin et al., (2014)	√	√	√											
Tomasz et al., (2016)	√	√	√											
Akman et al., (2015)	√	√	√											
Janine (2018)	√	√	√											
Pollard, and Morales, (2015)	√	√	√											
Cronin Jr et al., (2014)	√	√	√											
Madanoglu et al., (2014)	√	√	√											
Mishra et al., (2018)	√	√	√											
Hinderer, and Edgardo, (2017)	√	√	√											
Bozkurt, and Kalkan, (2014)	√	√	√											
Anwar, and Hasnu, (2016)	√	√	√											
Park, (2015)	√	√	√											
Wronka-Pośpiech, (2016)	√	√	√											
Hagen et al., (2017)	√	√	√											
Eshghi et al., (2014)	√	√	√											
Park, (2016)	√	√	√											
Lim et al., (2018)	√	√	√											

Figure 2.3 Review of Strategic Management

2.6 Health Establishment Performance (Day Spa)

Defining health establishment performance is complicated by the variety of applications in the health establishment strategy literature, a variety that reflects a multitude of health establishment disciplines and concomitant diversity of research questions employed to measure outcomes (Fornell, Morgeson III, & Hult, 2016). Common across these disciplines is the agreement that health establishment performance is central to business strategy theory as a demonstration of strategy effectiveness. A similar variety occurs in the general terminology across the literature, including concepts such as health establishment performance (Nunan et al., 2018; Peng, Lai, Chen, & Wei, 2015), or strategy-based performance (Goetsch & Davis, 2014; Peng et al., 2015). More than mere semantics, the terminology variety reflects different health establishment perspectives. (Suess et al., 2014) identify three perspectives of health establishment performance: (a) a goal approach in which performance is defined by goal attainment; (b) a systems resource approach in which performance is defined by the health establishment ability to secure scarce and valued resources, and (c) a process approach in which performance is defined in terms of the behavior of health establishment participants (Abdallah et al., 2016; Cogin, Sanders, & Williamson, 2018; Kassim, 2017; M. Kim et al., 2015; Korschun et al., 2014; Oliver, 2014; Orel & Kara, 2014; Pizam et al., 2016; Trainor et al., 2014).

Interestingly, (Jie et al., 2015) noted that researchers have been largely preoccupied with discussions and debates about issues of terminology, levels of analyses, and conceptual bases for assessment of performance. They continued by stating that “with the volume of literature on this topic continually increasing, there appears to be little hope of reaching any agreement on basic terminology and definitions”. Perhaps the reason for this is that different disciplines use different measures of health establishment performance because of the differences in their research questions (Mulki & Wilkinson, 2017).

Although the literature on spa performance indicates there is a lack of agreement about what constitutes health establishment performance, (Sengupta et al.,

2015) identified three perspectives that pervade the organization performance literature. These perspectives included goal approach, systems resource approach, and process approach. The goal approach assumed that organizations pursue ultimate and identifiable goals. The systems resource approach stressed the relationship between the organization and its environment. The process approach defined spa performance in terms of the behavior of organization participants.

(Izogo & Ogba, 2015) summed up the importance of health establishment performance to strategy along three dimensions, namely theoretical, empirical, and managerial. Theoretically, the concept of business performance is at the center of strategy. Most strategy theories either implicitly or explicitly underscore performance implications, since performance is the time test of any strategy. Empirically, most strategy research studies employ the construct of business performance to examine a variety of strategy content and process issues.

Managerially, the importance of health establishment performance is all too evident in the many prescriptions offered for performance improvements. Han and Hyun (2015) indicated that there are two major streams of research on the determinants of health establishment performance in the business policy literature.

In this section, the literature related to the conceptualization and measurement of health establishment performance is reviewed. Performance is the result of activity over the course of a specified period of time. Additionally, there is some question as to whether market share and overall spa performance are truly related (Mulki & Wilkinson, 2017). (Tontini, Söilen, & Zanchett, 2017) identify health establishment performance as a broad construct which includes customer satisfaction, customer retention and employee satisfaction. (Tzokas, Kim, Akbar, & Al-Dajani, 2015) suggest that, whenever possible, both customer and operational measures should be used as indicators of spa performance. An alternative to using objective measures of organizational performance is to use managerial perceptions. Perceptual measures have a variety of advantages over objective measures, including: (1) they avoid the

accounting-methods problem associated with objective measures; (2) they are easy to obtain (Fidel et al., 2015).

Measurement of health establishment performance is important to strategic management research, because it is the way in which health establishments assess the effectiveness of strategy development and execution (Hill & Brierley, 2017). Furthermore, the focus of strategy theory is rooted in explaining the differences among health establishment performance levels (Aghazadeh, 2015). Thus, the measurement of business performance is important to academics and practitioners alike. This section reviews the literature to present the definition of business performance, the complexity of its measurement in spas, evidence of the direct effects of market orientation on health establishment performance, and the mediators and moderators of market orientation through health establishment performance links.

Multiple, yet not mutually exclusive, distinctions of health establishment performance measurement are found in the literature. (van Doorn, Onrust, Verhoef, & Bügel, 2017) offer a primary distinction between measures of effectiveness and efficiency where “the former refer to the consolidation of a strong market position, for example, customer satisfaction, and customer retention” (Degbey, 2015). It is possible to operationalize a dimension of non-financial performance measures which are leading indicators of performance, such as customer satisfaction, customer retention, and employee satisfaction.

2.6.1 Customer Satisfaction

Customers are particularly important to health establishments because of high cost of gaining new customers (Hill & Brierley, 2017). (Katsikeas, Morgan, Leonidou, & Hult, 2016) found that market orientation enhances customer satisfaction and noted that their findings agreed with Degbey (2015) and with (Vafeiadis, Diamantaras, Sarigiannidis, & Chatzisavvas, 2015). Katsikeas et al. (2016) found a strong positive relationship between market orientation and customer satisfaction and retention in relation to competitors. The previous research supports the notion that

health establishment performance would be more efficient if health establishments consider the customers with whom they interact.

Customer satisfaction is strong evidence that superior quality drives the bottom line and value. Performance contains information enabling many health establishments to measure whether there is correlation (Al-Refaie, 2015). (Chang, Wong, & Fang, 2014) state that complete customer satisfaction is the key to securing customer loyalty and generating long-term financial performance. As the marketplace continues to change, quality of customer service, zero defects, and total quality represent persistent and pervasive unyielding elements of most companies' business propositions. In a market oriented health establishment, the elements to ensure a competitive advantage continue to be contented employees working with fulfilled and loyal customers. (De Haan, Verhoef, & Wiesel, 2015) assert that the key management practices to facilitate customer satisfaction are information seeking, training, and rewards and recognition. These service climate themes best predict specific facets of customer satisfaction.

Customer satisfaction measurement was based on these items: "friendliness in customer service", "quick service performance", "nicely decorated service areas", "service area ambiance", location convenience", and "high quality of services".

2.6.2 Customer Retention

Customer retention refers to the ability of a company or product to retain its customers over some specified period. High customer retention means customers of the product or business tend to return to, continue to buy, or in some other way not defect to another product or business, or to non-use entirely. Selling health establishment generally attempt to reduce customer defections (Rust, Moorman, & van Beuningen, 2016). Customer retention starts with the first contact a health establishment has with a customer and continues throughout the entire lifetime of a relationship and successful retention efforts take this entire lifecycle into account. The

health establishment's ability to attract and retain new customers is related to services, but also to the way it services its existing customers, the value the customers actually generate as a result of utilizing the solutions, and the reputation it creates within and across the marketplace (Fu & Deshpande, 2014; Simon et al., 2015).

Customer retention measurement was based on these items: "positive things", "strong positive recommendations", "returning customers", "customers reporting good impressions", and "customers considering the health establishments to be their first choice".

2.6.3 Employee Satisfaction

Service scholars argue that customer-oriented influence upon service-driven aspects in health establishments will lead to favorable psychological and social benefits. Examining these benefits may reveal how effectively health establishments are performing in terms of employee attitudes which, in turn, become the foundational ingredients used to create and deliver superior customer service during service encounters (Cullen, Edwards, Casper, & Gue, 2014; Hill & Alexander, 2017; T. W. Lee & Steers, 2017; McCann, Graves, & Cox, 2014).

The employee satisfaction dimension attempts to assess the degree to which employees have a positive affective predisposition toward employment by the health establishment (Atmojo, 2015). Based on (Pan, 2015), it is assumed that an employee's satisfaction can be inferred from attitude. This research focuses on performance as the basis for employee satisfaction with the support of (Pousa & Mathieu, 2015), and of Atmojo (2015) who concluded that employee satisfaction is one factor of performance. It is a common sentiment that employee satisfaction is necessary for health establishment performance. People often confuse their jobs with their identity. When asked what they do, employees often describe their tasks rather than their purpose in a larger endeavour. Most see themselves in a system in which they have little control. That is, they often perform their everyday tasks, deal with other employees or customers, and go home. When people in health establishments focus

only on their own position, they have little sense of responsibility to the results produced when all positions are functioning. In this section the researcher will look at employee satisfaction research and examine the current view that employees work attitudes have a major impact on performance.

(Huang, Li, Meschke, & Guthrie, 2015) suggest that job design factors, as well as job performance, influence job satisfaction. In other words, an employee will be more satisfied when the job allows him or her some control, some levels of autonomy, and a challenge. Of course, under certain conditions satisfaction may be related to performance, but this does not mean that it is the cause of performance (Fu & Deshpande, 2014). Today's manager correctly works towards a satisfied, fulfilled, and empowered work force. Because employees need collaboration, shared responsibility, and participative work groups, this goal is becoming more critical daily. Job satisfaction is the influential feeling an individual has towards a job or position. (Alshurideh, 2016) said that a focus on employee comfort has created feelings of entitlement within organizations, and feelings of entitlement do not create high performance. Yet, without satisfied employees, the health establishment will be at a distinct disadvantage in the marketplace (Al-Refaie, 2015; Dusterhoff, Cunningham, & MacGregor, 2014; McCann et al., 2014).

(Kenyon et al., 2016), (Al-Refaie, 2015) and (Degbey, 2015) cite employees' attitudes towards work as the basis for sound employee satisfaction theories. The implications of these studies are that positive employee attitudes will lead to greater health establishment performance. In looking at job satisfaction, it is important to distinguish between satisfaction, involvement, and intrinsic motivation (Asiedu, 2016). (Hill & Brierley, 2017) report that there is a consistent negative relationship between job satisfaction and the propensity to leave. The level of experiences which satisfy higher order needs on the job also depends on the degree to which his or her job actually provides the autonomy and growth experiences he or she feels it should (Tzokas et al., 2015).

(M. Kim et al., 2015) predict and prove that when jobs are high on their four core dimensions (achievement, recognition, responsibility, advancement), employees who desire higher-order needs satisfaction tend to have high motivation, and high job satisfaction. They are rarely absent from work, and supervisors rate them as doing high quality work.

In the job satisfaction construct there are many variables that researchers and theorists continue to examine and interpret. Not all of the commonly used interpretations of job satisfaction yield empirically comparable measures of satisfaction (Trainor et al., 2014). In their studies of attitude measures, (Abdallah et al., 2016) find that job satisfaction fails to predict turnover, while organizational commitment measures prove to be a better measure over time.

(Goetsch & Davis, 2014) talk about esprit de corps and the health establishment commitment of employees as a component of job satisfaction. Studies using judgmental measures show that market orientation is a big factor in business and overall job performance. Job scope lists are positively related to satisfaction with the work itself. Job satisfaction is closely related to tasks, goals and employee satisfaction.

(Casas-Arce, Lourenço, & Martinez-Jerez, 2017) find that performance under goal-setting conditions is a function of job performance. (Nunan et al., 2018) suggest ways to make employment more rewarding, and health establishments more effective, by using approaches in health establishments designed to treat employees as individuals. Job satisfaction influences employee satisfaction driven through performance (Fidel et al., 2015; Izogo & Ogba, 2015; Mulki & Wilkinson, 2017; Pan, 2015).

Employee satisfaction measurement was based on these items: “a fair salary”, “opportunities for promotion”, good quality of work and health service provision”, “benefits and recognition”, “rules and restrictions”, “employees positive attitude towards the health establishment”, “job valuation”, “good communication and

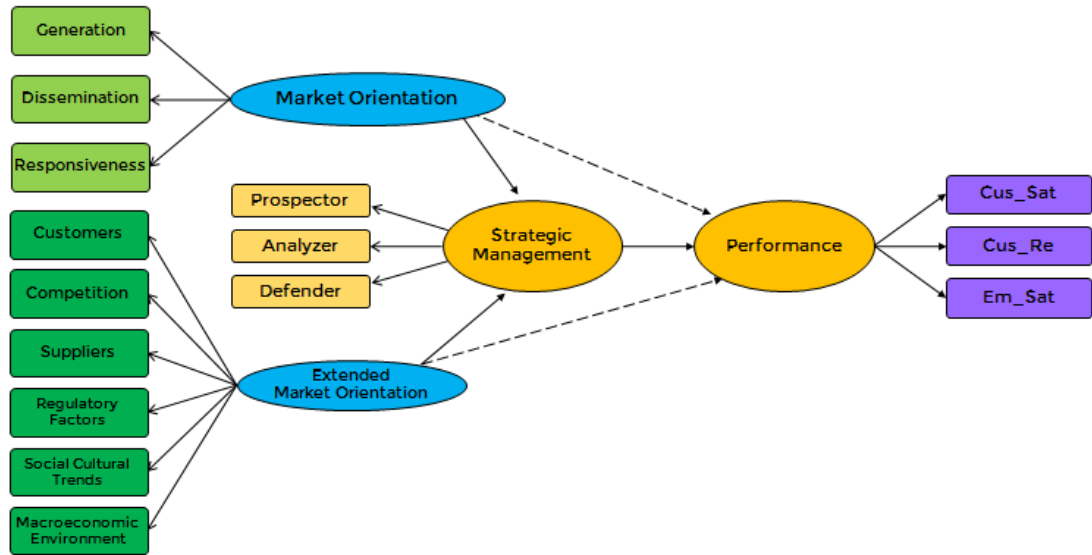
organization”, “motivation”, “fair working objectives”, “good supervisor-subordinate relationships”, “too much work to do”, “good relationships with colleagues”, “opportunity for increased earnings”, “excessive paperwork”, “freedom to express opinions”, “clarity of instructions from managers”.

	Customer satisfaction	Customer retention	Employee satisfaction
Saeidi et al., (2015)	√		
Hill and Brierley, (2017).	√		
Hill and Alexander, (2017)	√		
Lee and How, (2018)	√		
Hwang and Suh (2018)	√		
Eisingerich et al., (2014)	√		
Ennew et al., (2015)	√		
Swaminathan et al., (2014)	√		
Agnihotri et al., (2016)	√		
Mateias and Brettel (2016)	√		
Rodriguez et al., (2015)	√		
Azad et al., (2016)	√		
Lun et al., (2016)	√		
Moon and Choi (2014)	√		
Fornell et al., (2016)	√		
Nunan et al., (2018)	√		
Lourenço (2017)	√		
Peng et al., (2015)	√		
Goetsch and Davis (2014)	√		
Suess et al., (2014)	√		
Heirati et al., (2014)	√		
Belás and Gabcova (2016)	√		
Trainor et al., (2014)	√		
Abdallah and Phan (2016)	√		
Korschun et al., (2014)	√		
Oliver (2014)	√		
Kim et al., (2015)	√		
Pizam et al., (2016)	√		
Orel and Kara (2014)	√		
Cogin and Sanders, (2018)	√		
Kassim (2017)	√		
Jie et al., (2015)	√		
Pan (2015)	√		
Mulki and Wilkinson (2017)	√		
Sengupta et al., (2015)	√		
Izogo and Ogba (2015)	√		
Han and Hyun (2015)	√		
Tontini et al., (2017)	√		
Tzokas et al., (2015)		√	
Trainor et al., (2014)		√	
Fidel et al., (2015)		√	
Asiedu (2016)		√	
Scherer and Wunderlich (2015)		√	
Hill and Brierley (2017)		√	

	Customer satisfaction	Customer retention	Employee satisfaction
Aghazadeh (2015)		√	
van Doom et al., (2017)		√	
Degbey, (2015)		√	
Vafeiadis et al., (2015)		√	
Katsikeas et al., (2016)		√	
Bataineh et al., (2015)		√	
Alshurideh, (2016)		√	
Kenyon et al., (2016)		√	
Magatef and Tomalieh (2015)		√	
Al-Refaie, (2015)		√	
Chang et al., (2014)		√	
Simon et al., (2015)		√	
Rust et al., (2016)		√	
De Haan et al., (2015)		√	
Fu and Deshpande, (2014)			√
Hill and Alexander, (2017)			√
McCann et al., (2014)			√
Huang et al., (2015)			√
Korschun et al., (2014)			√
Cullen et al., (2014)			√
Lee and Steers (2017)			√
Darma and Supriyanto (2017)			√
Atmojo, (2015)			√
Pan, (2015)			√
Chiniara and Bentein, (2016)			√
Pousa and Mathieu, (2015)			√
Al-Refaie, (2015)			√
Dusterhoff et al., (2014)			√

Figure 2.4 Review of Health Establishments Performance

2.7 Research Conceptual Framework



2.8 Research Hypotheses

The conceptual framework for the research was informed by the evidence which was examined. This lends support to the idea of connections between marketing strategies, market orientation, and the performance of the health establishment. The following research hypotheses can thus be formulated on the basis of the study objectives and can be listed as follows:

2.8.1 There is a direct positive relationship between Market Orientation and Strategic Management

2.8.2 There is a direct positive relationship between Extended Market Orientation and Strategic Management

2.8.3 There is a direct positive relationship between Strategic Management and Health Establishment Performance

2.9 Conclusion

This section has offered a description of the principal theoretical concepts to be applied in this study, and has explored the terms and definitions commencing from the explanation of the origins of the spa, which generally refers to the notion of hot springs, health, and relaxation. The modern spa continues this tradition of making use of water for the benefit of physical and mental health, while the water itself serves as a source of essential vitamins and minerals. There are a number of different spa categories in operation today, which can be classified on the basis of the services they offer in the context of health, relaxation, and beauty treatments.

Among the various spa categories, it is also important to take into consideration the location of the spa in addition to the nature of the available treatment options. The

various spa types and treatments have been listed, with the information drawn from a number of sources. For the purposes of this study, the researcher has chosen to apply the definition of a day spa in accordance with the definition set out by Thailand's Ministry of Public Health (2017). This act defines health establishment services in health and wellness-related services such as water therapy and body massage including facials, body pressing, mud wraps and sea salt scrubs except in the case of operations in a medical institution under the law on medical care or bath massage or bake in the bath.

This section also discussed the concept of health establishment performance. The key factors of customer satisfaction, customer retention, and employees' satisfaction are all related to the performance of a health establishment, and allow that performance to be categorized in three sections: 1) market orientation and extended market orientation; 2) strategic management, and 3) health establishment performance. Results from this present study will not only provide a suitable context to assess the generalization of the existing knowledge in the current market orientation literature, but will also shed light on strategic management. By studying market orientation, extended market orientation and strategy, it is likely that this present study will help spa firms with the compatibility decision between health establishment capability (market orientation) and strategic orientation in order to increase performance. As health establishments in Thailand face the impact of being forced to compete against efficient spas from developed countries, they will have to improve their marketing skills in order to survive. This improvement in competitive skill will enable them to become successful spas. Aggressive health establishments in Thailand will provide a major boost to their customer satisfaction, customer retention, and employee satisfaction.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

According to the literature review and research objectives, a mixed methods research methodology can be applied in two phases. First, this part uses quantitative and qualitative approaches. The research was done in Bangkok Thailand due to simple random sampling for the presence of a majority of Thailand's health establishments. The population was chosen by the ability to answer the question. Sample size was derived using statistical methods to determine a size which yields validity and reliability. The researcher used a framework for conceptualizing the questionnaire by using exploratory factor analysis (EFA). In addition, the evaluation of the research instruments confirmed factors that resulted from the development of the questionnaire elements as part of the conceptual framework for the creation of tools for data collection. The samples were then analyzed by means of statistical analysis and confirmatory factor analysis (CFA). Path analysis was also performed in order to understand the influence of the variables according to the conceptual framework. Research instruments involved interviews with experts and questionnaires. Development of the questionnaire elements was performed using guidance derived from the study of related documents to qualify the items used on the questionnaire. Data analysis involved quantitative analysis through descriptive statistics and qualitative analysis of the content. The study sought to examine latent variables which serve to influence the implementation and outcome of market orientation, extended market orientation, strategic management, and health establishment performance.

3.2 Research Design and Rationale

The researcher has chosen to utilize mixed-methods research, including both quantitative and qualitative aspects due to the complexity of the topic of developing a causal relation model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok, the need to access personal perspectives and opinions, and also to capture the perceptions of a wide audience as an attempt to contribute to theory and practice. Moreover, it is hoped that utilizing mixed research methods may provide a better understanding of the research problem, generate findings which offer greater breadth and depth along with improved accuracy and validity, and will lead to a more comprehensive level of insight into the phenomena linking market orientation and extended market orientation affecting strategic management in the causal relation model through health establishment performance in Bangkok (R. B. Johnson & Onwuegbuzie, 2004).

3.3 Quantitative Research

Quantitative research involves the scientific investigation of quantitative properties and phenomena and their associated relationships. Falling within the positivist paradigm, the quantitative methodology closely follows the scientific method involving objectivity, reliability, validity representation, and generalization; it is both deductive and inductive (Vaske, 2008). Quantitative studies have the aim of making use of mathematical models, hypotheses or theoretical concepts which can be applied to the topic being investigated (Creswell, 2003). Survey research is a predominant method used in quantitative studies in the social sciences and is also widely used in the business dimensions of health establishment performance studies. Data from survey questionnaires can be collected on site at the health establishments (Vaske, 2008). Quantitative techniques involve numbers and generally the information collected and conclusions drawn are subject to statistical analysis.

3.4 Participants and Sample Size

Population

The population for this study comprised spa managers working in health establishments. This group of workers was chosen for this study because the spa managers have the responsibility for overseeing the operation of the health establishment and ensuring that the targets are accomplished. Administrative functions are the responsibility of the managers who must achieve their goals in all types of health establishment structures.

Chase (2017) defines the spa manager as the figure whose duty is to ensure that the health establishment is managed effectively and efficiently in order to help staff to achieve their functional objective of providing services to meet the needs of customers in a harmonious and cooperative manner.

Furthermore, the manager has the duty to coordinate the factors of human resources and physical materials in order to meet the goals of health establishment through observing the changing environmental circumstances and responding effectively through the resources at his disposal to improve performance and meet targets in terms of customer satisfaction, customer retention and employee satisfaction (Khodakarami & Chan, 2014). Managers operate different management styles based on their behaviours to their subordinates, their approaches to the job situation and the authorization transfer. Management must guide the health establishment to achieve its set targets and get the job done by others (Rezvani et al., 2016).

Managers are the ones with the highest authorization and power, who bear the responsibility for the whole health establishment that defines the establishment's purpose, long-term policies and strategies. They may analyze the widest databases of the internal environment (generation, dissemination and responsiveness) and the external environment (customers, competition, suppliers, regulatory factors, social cultural trends and macroeconomics) (Ellis, Nifadkar, Bauer, & Erdogan, 2017). In

addition, spa managers work to realize their purposes through focusing on application while their human skills are in the foreground (Rezvani et al., 2016). Finally, spa managers are responsible for the workers who actually do the job in addition to technical, commercial or administrative personnel.

Sample

In this study, the researcher collects the data from spa managers because they are the people who face the customers and know the data about customer satisfaction, customer retention and employee satisfaction in the health establishment. This is similar to taking secondary data and analyzing it. Customers can be tracked by purchasing patterns and histories stored in a computer system and organized so that it can be retrieved quickly to provide information for the users. Information contained in a customer database is obtained from receipts, credit card purchases, and information inquiries which request customer information to purchase a service. Customer databases are useful (Hult, Morgeson, Morgan, Mithas, & Fornell, 2017; Khodakarami & Chan, 2014; Morris & Davis, 1992). Moreover, information from employees can be explained directly by managers because the manager is the person who needs to interact and work with employees in the health establishment.

In this study, there is no statistical record published for managers in health establishments in Bangkok. There are 4 latent variables which mean 15 observed variables. In accordance with an infinite population of managers in health establishments in Bangkok in Thailand, the sampling size can be calculated by using a G*Power calculator (Shieh, 2001), with 81 = degree of freedom, 0.05 = alpha error probability, 0.3 = effect size w, 0.8 = Power. Therefore, the sampling size of spa managers working in health establishments is 412 spa managers. After that the sample of manager was choose by simple random sampling method from company list, which researcher gather data from Department of Trade Negotiation and sent questionnaire via email to samples

3.5 Research Process

This research used mix method to analysis data, which divide research in to two part as descript above the quantitative and qualitative. The quantitative also subdivide to 5 phase for easy understanding consist of:

- Phase 0 is review descriptive demographic data of spa manager's sample by descriptive statistic consist of mean and standard deviation. This phase has main propose to check validation of data and deep study about individual variable.

- Phase 1 is important step before analyze exploratory factor for latent variables, which shown how to analyze exploratory factor for latent variables by choosing important factors by review literature. After extracting factors, the latent variables will put into a model.

- Phase 2 is how to investigate measurement model for each latent variable for confirming structure model from phase 1. The researcher chooses these latent variables for this study that measure from observed variables by confirmatory factor analysis.

- Phase 3 is investigating relationship from latent variables in a structural equation model (SEM). It checks the levels of relationship to analyze SEM by CFA components.

- Phase 4 is analyzing SEM path analysis. It checks covariance of model to develop empirical information by considering covariance indexes, parameter value in each arrows and reasonable results of size and directions of parameters for each arrow.

3.6 Phase 0 Investigating quality of tools for research

3.6.1 Instrument Development

In accordance with the literature review, this research aims to measure the relationships among market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok. Therefore, this research has four latent variables which are market orientation factors (Kohli et al., 1993), extended market orientation (Kohli et al., 1993), strategic

management (Miles et al., 1978), and health establishment performance (Hult et al., 2007).

Questionnaires are obtained in consultation with the review of the literature and recommendations from the research advisor, Dr. Sangkae Punyasiri, National Institute Development Administration. The questionnaire of causal relation model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok had four parts, which were market orientation, extended market orientation, strategic management, and health establishment performance. Its items applied a 5-point Likert scale based on the anchors described as follows (see Appendix C for the full questionnaire):

- 1 - Disagree Strongly
- 2 - Disagree
- 3 - Neither agree nor disagree
- 4 - Agree
- 5 - Agree Strongly

This can interpret the result in to ranges as follow;

1.00 – 1.80 Disagree Strongly	or	Lowest level of important
1.81 – 2.60 Disagree	or	Low level of important
2.61 – 3.40 Neither agree nor disagree	or	Normal level of important
3.41 – 4.20 Agree	or	High level of important
4.21 – 5.00 Agree Strongly	or	Highest level of important

3.6.2 Validity

The concept of validity refers to the extent to which the items on the questionnaire are able to test the subject matter they are intended to test (Altinay & Paraskevas, 2009). Similarly, (Brown & Churchill, 2004) state that “content validity is the adequacy which the important aspects of the characteristics are captured by the measure”. For an instrument to be valid while covering all the relevant issues, the literature was consulted to determine which high significant variables are. It must be

taken into consideration when assessing health establishment performance. This research thus made use of the theoretical approach in measuring market orientation, extended market orientation, and strategic management through health establishment performance.

Three experts were invited to check the content validity of the questionnaire:

- Anan Chieochankitkan, lecturer of Dhurakij Pundit University
- Pornphen Lalitnuntikul, manager of IWARASPA
- Pratoom Vongsawas, owner of Thai Pattara SPA

The data were examined using Item-Objective Congruence (IOC) Index Corrections with adjustments made in accordance with the requirements. The expert assessors also provided an evaluation in which they rated each item in terms of its congruence with the stated objective. The IOC Index was obtained through allocating three possible scores to each item: +1 = congruent, 0 = uncertain, -1 = incongruent. An IOC score below 0.5 would result in the removal or revision of the item, while those with higher scores were accepted. Almost all items were acceptable in this study, suggesting a high degree of congruence with the stated objectives.

3.6.3 Questionnaire development

Before using the questionnaire for data collection, the researcher conducted an assessment of the questionnaire quality using a try out of 30 spa managers to test whether the questionnaire would be reliable and valid. There were four main parts of this research as follows:

The first part of the questionnaire was about market orientation and included 14 items. The items for this variable were developed from the previous research of Kohli et al. (1993). This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1).

The second part of the questionnaire was about the extended market orientation and included 18 items. The items for this variable were developed from the previous

research of (Kenichi, 1998). This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1).

The third part of the questionnaire was about the strategic management and included 11 items. The items of this variable were developed from the previous research of Dorociak (2007). This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1).

The fourth part of the questionnaire was about the health establishment performance and included 18 items. The items of this variable were developed from the previous research of Chi (2009). This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1).

The fifth part of the questionnaire would study the personal data of the respondent. This part consisted of five questions, which were related to gender, age, income, education, and experience in the spa business

3.6.4 Reliability

Brown and Churchill (2004) describe reliability as the “ability of a measure to obtain similar scores for the same object, trait, or construct across time, across different evaluation, or across the items forming the measure”. Two different types of reliability must be assessed using these criteria. The first is internal reliability, which requires the same instrument to be used to measure different people at a single time. The second is inter-judge reliability which requires different observers to reach the same conclusion when assessing the same outcome (Altinay & Paraskevas, 2009).

The try out using 30 spa managers was employed to test reliability as well as the validity of the content. In this study, the aim was to check the internal reliability by checking the different scores of the respondents to ensure that a similar measurement pattern was observed. The consistency could then be measured using the Cronbach’s Alpha coefficient. A test can be considered good if it is able to assess different aspects of the trait under examination. In such cases a test with good internal consistency will yield only moderate correlation between items, at around 0.70 to 0.90. If the correlation falls below this level it can be concluded that the items are not measuring the same things. Hence it is considered that the measurements are more reliable when the Alpha coefficient is high.

With regard to try out involving the 30 spa managers, the results comprised 4 factors: 1) Market Orientation; 2) Extended Market Orientation; 3) Strategic Management, and 4) Health Establishment Performance. Cronbach’s Alpha was used to carry out the reliability assessment value as follows.

Table 3.1 Cronbach's Alpha Interpretation

Variable	Cronbach's Alpha	Interpretation
Market Orientation	0.924	Excellent
Extended of Market Orientation	0.857	Good
Strategic Management	0.867	Good
Health Establishment Performance	0.848	Good

3.7 Phase 1 Analyze Exploratory Factor Analysis of Latent Variables - Exploratory Factor Analysis (EFA) by SPSS for Testing Uni Dimensions

Exploratory factor analysis (EFA) makes use of principal axis factoring analysis and principal component analysis and can be applied to data sets with the purpose of extracting significant factors to the greatest extent possible. The choice of these approaches was made on the basis of the literature review which makes it clear that such tools are highly suitable in exploratory studies (Cokley, Bernard, Cunningham, & Motoike, 2001; Fairchild, Horst, Finney, & Barron, 2004; Flowers, 2000; Howard, 1999; Oswald, Schmitt, Kim, Ramsay, & Gillespie, 2004).

Before the analysis, the variables were first checked for reliability, missing data, outliers, and accuracy. It was necessary to check that the distribution was normal, while skewness and kurtosis were also examined. Univariate outliers were determined, and an evaluation of multicollinearity was performed since the eigenvalues examined were greater than zero.

To identify underlying factors which might exist, principal component factor analysis was conducted using SPSS. This approach is widely used according to the literature (Fabrigar, Wegener, MacCallum, & Strahan, 1999). In order to achieve superior structure and delineation of component matrix factors, the factor that have factor loading below 0.3 were suppressed.

The literature review served to identify the principal factors employed in the study for the survey questions. The questions were analyzed by experts who reviewed the content and placed the items in groups according to semantic qualities before allocating a name to each of the groups. Because a strong relationship between factors was discovered, exploratory analysis was performed for a second time. Meanwhile, direct oblique rotation was employed with the principal axis factor method. The findings from both exploratory analyses could then be compared before selecting the appropriate model to use for the confirmatory study.

The researcher select to use Exploratory Factor Analysis to measure the internal consistency within the same variable and choosing only important factors to create the equation and represent the perfection of equation by reducing the data that not suitable from the variable. The researcher decide to use Kaiser-Meyer-Olkin (KMO) as popular method to reduce the data that not related in the variable base on KMO score which more than 0.5

3.8 Phase 2 Analyze Confirmatory Factor (CFA) Latent and Observed variables - Confirmatory factor analysis (CFA) by LISREL for Testing the Measurement Model

Confirmatory factor analysis (CFA) by LISREL for Testing the Measurement Model Confirmatory factor analysis (CFA) was carried out using the second data set and Structural Equation Modelling (SEM). CFA constructs a model to show the relationships among the variables which are observed. The aim is to quantitatively test the model or hypothesis proposed by the researcher. The model shows how the variables can define the construct and the nature of the relationship among these variables and constructs (Schumacker & Lomax, 2010). The CFA assumptions are initially flexible which enables interpretation to take place even in cases where multicollinearity is present. Secondly, CFA helps to reduce measurement errors since there are a number of indicators involved for each latent variable. SEM meanwhile permits the model to be tested rather than simply generating coefficients. Prior to assessing the general model fit, the data were checked for missing values, outliers, and multivariate normality. The data preparation process and the fit evaluation for the

empirical data and the conceptual model are shown below. The specifications of the model were based on the EFA results. On the basis of the latent and observed variables, the latest version of LISREL software 9.3 was used to design the conceptual model.

1. Market orientation (latent variable) comprises 3 observed variables (generation, dissemination, responsiveness)
2. Extended market orientation (latent variable) comprises 6 observed variables (customer, competition, supplier, regulatory factors, social cultural trends, macroeconomic environment)
3. Strategic management (latent variable) comprises 3 observed variables (prospector, defender, analyzer)
4. Health establishment performance (latent variable) comprises 3 observed variables (customer satisfaction, customer retention, employee satisfaction)

3.9 Phase 3 Analyze Confirmatory Factor (CFA) relationships - CFA of LISREL for Testing Correlations among Latent Variables

The sections which follow explain the process employed to prepare the data and assess the fit of the empirical data to the conceptual model. The specifications of the model were based on the EFA results. On the basis of the latent and observed variables, the latest version of LISREL software 9.3 was used to design the conceptual model. The researcher would measure the relationships between the four main factors which were market orientation, extended market orientation, strategic management, and health establishment performance.

3.10 Phase 4 Analyze Structural Equation Model - SEM by LISREL for Testing the Effect of Latent Variables

PATH analysis was used to describe the directed dependencies among a set of variables. In addition to being thought of as a form of multiple regressions focusing on causality, PATH analysis can be viewed as a special case of structural equation modelling (SEM) in which only single indicators are employed for each of the variables in the causal model. That is, PATH analysis is SEM with a structural model, but no measurement model. Other terms used to refer to PATH analysis include

causal modeling, analysis of covariance structures, and latent variable models (Schumacker & Lomax, 2010)

This research uses PATH analysis in order to answer which variable influences which variable based on the conceptual framework.

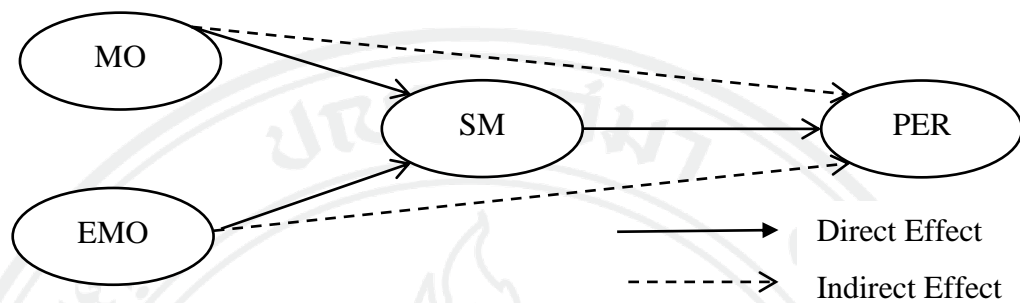


Figure 3.1 Path analysis

The result of interpret related to the suitable of Lisrel Model as follow;

Table: Interpretation of relationship which suitable for Lisrel model

Index	Consistency level	Description
Chi-Square χ^2	$P > 0.05$	Must see together with other indexes May be biased due to the size of the sample
χ^2/df	2:1 (Tabachnik and Fidell, 2007) 3:1 (Kline, 2005)	Adjust according to sample size. If large sample group should use 2: 1 criteria
RMSEA (Root Mean Square Error of Approximation)	RMSEA < 0.07 (Steiger, 2007)	Less than 0.03, very good consistency
GFI (Goodness of Fit Index)	GFI > 0.95	Value between 0 - 1 Great value shows that the model has good consistency
AGFI (Adjusted Goodness of Fit Index)	AGFI > 0.95	The value may be greater than the range 0 - 1.

Index	Consistency level	Description
RMR (Root Mean Square Residual)	RMR < 0.08 (Tabachnik and Fidell, 2007)	Is the average squared between the difference of the rest of the variance of the sample and Estimated variance Not the standard value
SRMR (Standardized Root Mean Square Residual)	SRMR < 0.08 (Hu and Bentler, 1999)	Standard SRMR values, easy to interpret
NFI: Normed Fit Index	NFI > 0.95	In the case that the sample is small, it tends to be overestimated.
NNFI (Non-Normed Fit Index) or Tucker-Lewis Index (TLI)	NNFI > 0.95	Not the standard value. May be a value beyond the range 0 - 1 that is appropriate for fictional data (simulation studies) (Sharma et al. 2005; McDonald and Marsh, 1990)
CFI (Comparative Fit Index)	CFI > 0.95	Range between 0 - 1
CN (Critical N)	CN > 200 (Diamantopoulos A. & Siguaw A. J., 2000)	Represents the sample value that must be reached in order to make the model acceptable

CHAPTER 4

DATA ANALYSIS

This chapter shows the analysis and results from questionnaires causal relationship of market orientation factors and strategic management affecting health establishment performance in Bangkok and demographic data of participants which divided from 2 parts. First, it is quantitative data analysis. Second, it is qualitative data analysis. In addition, this research will answer objectives as follows:

1. Examine the causal relationship of market orientation factors and strategic management affecting health establishment performance in Bangkok (MO and SM)
2. Examine the causal relationship of extended market orientation factors and strategic management affecting health establishment performance in Bangkok (EMO and SM)
3. Examine the causal relationship of strategic management and health establishment performance in Bangkok (SM and PER)
4. Evaluate the causal relationship of market orientation factors and strategic management affecting health establishment performance in Bangkok (MO and SM)
5. Evaluate the causal relationship of extended market orientation factors and strategic management affecting health establishment performance in Bangkok (EMO and SM)
6. Evaluate causal relationship of strategic management and health establishment performance in Bangkok (SM and PER)
7. Create the causal relationship model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok.

The researches can define to four phases as:

Phase 0 or preparing data phase: is descriptive data of questionnaire for validation and deep study about variable.

Phase 1 is how to analyze exploratory factor for latent variables by choosing important factors by review literature. After extracting factors, the latent variables will put into a model.

Phase 2 is how to investigate measurement model for each latent variable for confirming structure model from phase 1. The researcher chooses these latent variables for this study that measure from observed variables by confirmatory factor analysis.

Phase 3 is investigating relationship from latent variables in a structural equation model (SEM). It checks the levels of relationship to analyze SEM by CFA components.

Phase 4 analyze SEM path analysis. It checks covariance of model to develop empirical information by considering covariance indexes, parameter value in each arrows and reasonable results of size and directions of parameters for each arrow.

Table 4.1 Symbolism and Description

Symbolism	Description
Variable	
MO	Market orientation
EMO	Extended market orientation
SM	Strategic management
PER	Health establishment performance
G	Generation
D	Dissemination
R	Responsiveness
CUS	Customer
CO	Competition
SU	Supplier
RE	Regulatory factors
SO	Social cultural trends
MA	Macroeconomic
PROS	Prospector
AN	Analyzer
DE	Defender

Symbolism	Description
Cus_sat (CUSSAT)	Customer satisfaction
Cus_ret (CUSRET)	Customer retention
Emp_sat (EMPSAT)	Employee satisfaction
Abbreviations SEM	
χ^2	Chi-square
χ^2/df	Relative Chi-square Ratio
Df	Degree of Freedom
GFI	Goodness of fit index
SRMR	Standardized Root mean square residual
RMSEA	Root mean square error of approximation
AGFI	Adjust Goodness of Fit Index
NFI	Normed fit index
RMR	Root mean square residual
DE	Direct effect
IE	Indirect effect
TE	Total effect
Statistic meaning	
P (P-Value)	Level of statistical significance or Probability Level in rejecting hypothesis
Mean	Arithmetic Mean
S.D.	Standard Deviation
R	Correlation Coefficient
R^2	Coefficient of Determination
T	t-test

4.1 Phase 0 Descriptive data of questionnaire

This phase was descriptive statistic of every variable in questionnaire which conducts before future studies in structure equation model for validation and deep study about variable. The descriptive data consist of: demographic, market orientation, extended market orientation, strategic management, and health establishment performance, which can be shown as follow:

4.1.1 Demographic Characteristics of spa managers

Table 4.2 Descriptive Statistics Results for Demographic Characteristics of spa managers

Managers profile	Frequency	Percent (%)
Gender		
Male	134	32.53
Female	278	67.47
Total	412	100.00
Age		
21-30 years	19	4.61
31-40 years	102	24.75
41-50 years	197	47.81
More than 50 years	94	22.83
Total	412	100.00
Income range		
10001-20000 baht	11	2.66
20001-30000 baht	36	8.73
30001-40000 baht	82	19.90
40001-50000 baht	106	25.72
More than 50000 baht	177	42.99
Total	412	100.00
Education Level		
Less than Bachelor degree	116	28.15
Bachelor degree	229	55.58
Master degree	67	16.27
Total	412	100.00
Experience in health establishment		
Less than 2 years	7	1.69
2-5 years	84	20.38
5-8 years	97	23.54
8-11 years	121	29.36
More than 11 years	103	25.03

Managers profile	Frequency	Percent (%)
Total	412	100.00

The results of the descriptive statistics of participants have shown personal data from spa manager: gender, age, income range, education level and experience in health establishment. The results of the data analysis are presented in Tables 4.2 of a sample of 412 participants are:

Genders of participants are accounted 134 participants for 32.53 percent of male and 278 participants for 67.47 percent of female.

The age of the participants ranged from 21-30 years old, which accounted 19 for 4.61 percent. The age of the participants ranged from 31-40 years old, which accounted 102 for 24.75 percent. The age of the participants ranged from 41-50 years old, which accounted 197 for 47.81 percent. The age of the participants ranged from more than 50 years old, which accounted 94 for 22.83 percent.

Income range of participants ranks from 10001-20000 baht, which accounted 11 for 2.66 percent. Income range of participants ranks from 20001-30000 baht, which accounted 36 for 8.73 percent. Income range of participants ranks from 30001-40000 baht, which accounted 82 for 19.90 percent. Income range of participants ranks from 40001-50000 baht, which accounted 106 for 25.72 percent. Income range of participants ranks from more than 50000 baht, which accounted 177 for 42.99 percent.

Education level ranged from less than bachelor degree, which accounted 116 for 28.15 percent. Education level ranged from bachelor degree, which accounted 229 for 55.58 percent. Education level ranged from less than master degree, which accounted 67 for 16.27 percent.

Experience in health establishment ranged less than 2 years, which accounted 7 for 1.69 percent. Experience in health establishment ranged from 2-5 years, which accounted 84 for 20.38 percent. Experience in health establishment ranged from 5-8 years, which accounted 97 for 23.54 percent. Experience in health establishment ranged from 8-11 years, which accounted 121 for 29.36 percent. Experience in health establishment ranged from more than 11 years, which accounted 103 for 25.03 percent.

The descriptive statistic of market orientation factor affecting performance of health establishment in Bangkok

4.1.2 Market orientation

This section of questionnaire was employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1). The questions evaluate latent variable of market orientation compose 3 observed variables which means generation, dissemination, responsiveness have 14 questions, which developed from literature review and expertise. The numbers of participants are 412.

Table 4.3 Value of mean and standard deviation for market orientation information generation

Item	Mean	Standard Deviation	Level Description
Market orientation- Generation			
1. In this health establishment, manager asks customers to find out what services will need in the future.	3.56	.89	High
2. Manager talks with or survey with relative from customer who can influence from services in this health establishment for customers in the future.	3.48	.92	High
3. Receptionist from this health establishment interacts directly with customers to learn how to serve better.	3.37	.72	Normal
4. Therapist from this health establishment interacts directly with customers to learn how to serve them better.	3.44	.72	High

Item	Mean	Standard Deviation	Level Description
5. Manager finds changes in customers' needs.	3.57	1.00	High
6. In health establishment, manager investigates information on competitors.	3.61	1.26	High
7. Manager detects changes technology in health establishment.	3.85	1.03	High
8. Manager detects changes regulation in health establishment.	4.03	.89	High
Total	3.61	.75	High

The table shows the market orientation - Information Generation has average of 3.61 which is high level position. The results of information generation in each factor were high level, except no.3 Receptionist from this health establishment interacts directly with customers, which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Manager detects changes regulation in health establishment has mean equal to 4.03 and standard deviation is .89
2. Manager detects changes technology in health establishment has mean equal to 3.85 and standard deviation is 1.03
3. In health establishment, manager investigates information on competitors. Has mean equal to 3.61 and standard deviation is 1.26
4. Manager finds changes in customers' behavior that use services but it cannot suddenly serve customer's needs has mean equal to 3.57 and standard deviation is 1.00
5. In this health establishment, manager asks customers at least once a month to find out what services they will need in the future has mean equal to 3.56 and standard deviation is .89

6. Manager often talks with or survey with relative from customer who can influence from services in this health establishment for customers in the future has mean equal to 3.48 and standard deviation is .92

7. Therapist from this health establishment interacts directly with customers to learn how to serve them better has mean equal to 3.44 and standard deviation is .72

8. Receptionist from this health establishment interacts directly with customers to learn how to serve them better has mean equal to 3.37 and standard deviation is .72

Table 4.4 Value of mean and standard deviation for market orientation information dissemination

Item	Mean	Standard Deviation	Level Description
Market Orientation- Dissemination			
1. Manager has interdepartmental meetings between receptionist and therapist to discuss market trends and developments.	3.87	.80	High
2. It has sending information for health establishment through customers.	4.36	.80	Highest
3. Other departments in health establishment inform trends of services information to manager.	4.37	.83	Highest
Total	4.20	.69	High

The table shows the market orientation - Information Dissemination has average of 4.20 which is high level position. The results of information dissemination in each factor were highest level, except no.1 Manager has interdepartmental meetings between receptionist and therapist to discuss market trends and developments, which was only in high level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Other departments in health establishment inform trends of services information to manager has mean equal to 4.37 and standard deviation .83
2. It has sending information for health establishment through customers has mean equal to 4.36 and standard deviation .80
3. Manager has interdepartmental meetings between receptionist and therapist at least once a quarter to discuss market trends and developments. has mean equal to 3.87 and standard deviation .80

Table 4.5 Value of mean and standard deviation for market orientation responsiveness

Item	Mean	Standard Deviation	Level Description
Market Orientation-Responsiveness			
1. Principles of market segmentation and customer behavior drive new service development in this health establishment.	3.94	1.06	High
2. Manager tends to ignore changes in customers' service needs for a reason.	3.36	1.02	Normal
3. Manager periodically reviews service development to ensure that services are in line with customer's needs.	3.48	.91	High
Total	3.59	.85	High

The table shows the market orientation - Responsiveness has average of 3.59 which is high level position. The results of responsiveness in each factor were high level, except no.2 Manager tends to ignore changes in customers' service needs for a reason, which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Principles of market segmentation and customer behavior drive new service development in this health establishment. has mean equal to 3.94 and standard deviation 1.06

2. Manager periodically reviews service development to ensure that services are in line with customer's needs has mean equal to 3.48 and standard deviation .91
3. Manager tends to ignore changes in customers' service needs for a reason has mean equal to 3.36 and standard deviation 1.02

4.1.3 Extended market orientation

This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1). The questions evaluate latent variable of extended market orientation composed 6 observed variables which means customer, competition, supplier, regulatory factor, social cultural trends, macroeconomic have 18 questions, which developed from literature review and expertise. The numbers of participants are 412.

Table 4.6 Value of mean and standard deviation for extended market orientation of customer

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation - Customer			
1. Manager collects customers' need of using spa service by social media. (customers) (chat, facebook, line, instagram)	3.58	.89	High
2. Marketing personnel in health establishment spend time discussing customers' future needs with middle man. (customers)	3.50	.93	High
3. Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately. (customers)	3.36	.73	Normal
Total	3.48	.73	High

The table shows the extended market orientation - customer has average of 3.48 which is high level position. The results of customer in each factor were high level, except no.3 Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately, which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Manager collects customers' need of using spa service by social media. (customers) (chat, facebook, line, instagram) has mean equal to 3.58 and standard deviation .89
2. Marketing personnel in health establishment spend time discussing customers' future needs with other functional departments. (customers) has mean equal to 3.5 and standard deviation .93
3. Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately. (customers) has mean equal to 3.36 and standard deviation .73

Table 4.7 Value of mean and standard deviation for extended market orientation of competition

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation – Competition			
1. In health establishment, manager, receptionist and therapist are collecting competitor information. (competition)	3.29	.93	Normal
2. Manager has meetings to discuss market trends and service developments (competition)	3.25	1.14	Normal
3. Manager tends to take faster than competitor does to respond to a change in	3.27	.85	Normal

Item	Mean	Standard Deviation	Level Description
regulatory policy. (competition)			
Total	3.27	.84	Normal

The table shows the extended market orientation - competition has average of 3.27 which is normal level position. The results of competition in each factor were normal level. These can order highest level to lowest with program SPSS calculation as bellows. The results of competition in each factor have high level. It orders highest level to lowest with program SPSS calculation as bellows:

1. In health establishment, manager, receptionist and therapist are collecting competitor information. (competition) has mean equal to 3.29 and standard deviation .93
2. Manager tends to take longer than competitor does to respond to a change in regulatory policy. (competition) has mean equal to 3.27 and standard deviation .85
3. Manager has functional meetings very often to discuss market trends and service developments (competition) has mean equal to 3.25 and standard deviation 1.14

Table 4.8 Value of mean and standard deviation for extended market orientation of suppliers

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation - Suppliers			
1. In health establishment, manager spends time with suppliers to learn more about spa products of suppliers. (suppliers)	3.68	.88	High
2. In health establishment, manager asks	3.21	.84	Normal

Item	Mean	Standard Deviation	Level Description
suppliers regularly for their assessment of spa product and service quality. (suppliers)			
3. Manager in health establishment gives opportunity for new suppliers even though manager interacts with existing ones. (suppliers)	3.57	.94	High
Total	3.49	.76	High

The table shows the extended market orientation - supplier has average of 3.49 which is high level position. The results of supplier in each factor were high level, except no.2 In health establishment, manager asks suppliers regularly for their assessment of spa product and service quality (suppliers), which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. In health establishment, manager spends time with suppliers to learn more about spa products of suppliers. (suppliers) has mean equal to 3.68 and standard deviation .88
2. Manager in health establishment gives opportunity for new suppliers even though manager interacts with existing ones. (suppliers) has mean equal to 3.57 and standard deviation .94
3. In health establishment, manager asks suppliers regularly for their assessment of spa product and service quality (suppliers) has mean equal to 3.21 and standard deviation .84

Table 4.9 Value of mean and standard deviation for extended market orientation of regulatory factors

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation -Regulatory Factors			
1. Manager reviews the effect of changes of customers (e.g., regulation of service in health establishment environment on customers)	3.55	.89	High
2. Manager in health establishment shares information spa service and product for human resources from other departments. (regulatory factors)	3.49	.93	High
3. The activities of all departments in health establishment are well coordinated. (regulatory factors)	3.37	.71	Normal
Total	3.47	.73	High

The table shows the extended market orientation - regulatory factors has average of 3.47 which is high level position. The results of regulatory factors in each factor were high level, except no.3 the activities of all departments in health establishment are well coordinated (regulatory factors), which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Manager reviews the effect of changes of customers (e.g., regulation of service in health establishment environment on customers) has mean equal to 3.55 and standard deviation .89
2. Manager in health establishment shares information spa service and product for human resources from other departments. (regulatory factors) has mean equal to 3.49 and standard deviation .93
3. The activities of all departments in health establishment are well coordinated. (regulatory factors) has mean equal to 3.37 and standard deviation .71

Table 4.10 Value of mean and standard deviation for extended market orientation of social cultural trends

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation - Social Cultural Trends			
1. In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment. (Social)	3.63	.96	High
2. In health establishment, manager collects and evaluates information of emerging lifestyles that might affect health establishment. (Social)	2.90	1.33	Normal
3. Even manager came up with a great marketing plan; manager probably would not be able to implement it in a timely use. (Social)	3.24	1.20	Normal
Total	3.25	.99	Normal

The table shows the extended market orientation - social cultural trends have average of 3.25 which is normal level position. The results of social cultural trends in each factor were normal level, except no.1 In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment (Social), which was only in high level. These can order highest level to lowest with program SPSS calculation as bellows:

1. In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment (Social) has mean equal to 3.63 and standard deviation .96
2. Even manager came up with a great marketing plan; manager probably would not be able to implement it in a timely use (social) has mean equal to 3.24 and standard deviation 1.20

- In health establishment, manager collects and evaluates information of emerging lifestyles that might affect health establishment (Social) has mean equal to 2.90 and standard deviation 1.33

Table 4.11 Value of mean and standard deviation for extended market orientation of macroeconomic environment

Item	Mean	Standard Deviation	Level Description
Extended Market Orientation - Macroeconomic Environment			
1. In health establishment, manager frequently collects and evaluates exchange rate (Macroeconomic)	3.60	.98	High
2. In health establishment, manager frequently collects and evaluates industry growth rate. (Macroeconomic)	3.51	1.02	High
3. In health establishment, manager maintains contacts with officials of government (e.g., Ministry of Public Health) in order to collect and evaluate information. (Macroeconomic)	3.46	.78	High
Total	3.52	.80	High

The table shows the extended market orientation - macroeconomic environment has average of 3.52 which is high level position. The results of macroeconomic environment in each factor were high level. These can order highest level to lowest with program SPSS calculation as bellows:

- In health establishment, manager frequently collects and evaluates exchange rate (Macroeconomic) has mean equal to 3.60 and standard deviation .98
- In health establishment, manager frequently collects and evaluates industry growth rate. (Macroeconomic) has mean equal to 3.51 and standard deviation 1.02

- In health establishment, manager maintains contacts with officials of government (e.g., Ministry of Public Health) in order to collect and evaluate information. (Macroeconomic) has mean equal to 3.46 and standard deviation .78

4.1.4 Strategic management

This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1). The questions evaluate latent variable of strategic management compose 3 observed variables which means prospector, analyzer, defender have 11 questions, which developed from literature review and expertises. The numbers of participants are 412.

Table 4.12 Value of mean and standard deviation for strategic management of prospector

Item	Mean	Standard Deviation	Level Description
Strategic management – Prospector			
1. Health establishment sacrifices short-term profitability to gain more market share.	3.61	.83	High
2. Manager strives to be the one for health establishment in markets.	3.77	.91	High
3. Manager puts on building relationships with customers.	3.54	.72	High
4. Manager has strong marketing activities to increase customers.	3.64	.79	High
Total	3.64	.65	High

The table shows the strategic management - prospector has average of 3.64 which is high level position. The results of prospector in each factor were high level. These can order highest level to lowest with program SPSS calculation as bellows:

- Manager strives to be the one for health establishment in markets has mean equal to 3.77 and standard deviation .91

2. Manager has strong marketing activities to increase customers has mean equal to 3.64 and standard deviation .79
3. Health establishment sacrifices short-term profitability to gain more market share has mean equal to 3.61 and standard deviation .83
4. Manager puts on building relationships with customers has mean equal to 3.54 and standard deviation .72

Table 4.13 Value of mean and standard deviation for strategic management of analyzer

Item	Mean	Standard Deviation	Level Description
Strategic management - Analyzer			
1. Manager is usually the first ones to introduce various services to customers.	3.76	.81	High
2. Manager adopts a rather conservative view when making major decisions.	3.76	.96	High
3. When confronted with a major decision, manager typically comprehensive analyses of the health establishment situations faced.	3.67	.88	High
4. Manager tends to be risk averse.	3.91	.83	High
Total	3.78	.77	High

The table shows the strategic management - analyzer has average of 3.78 which is high level position. The results of analyzer in each factor were high level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Manager tends to be risk averse. has mean equal to 3.91 and standard deviation .83
2. Manager adopts a rather conservative view when making major decisions has mean equal to 3.76 and standard deviation .96
3. Manager is usually the first ones to introduce various services to customers has mean equal to 3.76 and standard deviation .81

- When confronted with a major decision, manager typically comprehensive analyses of the health establishment situations faced has mean equal to 3.67 and standard deviation .88

Table 4.14 Value of mean and standard deviation for strategic management of defender

Item	Mean	Standard Deviation	Level Description
Strategic management - Defender			
1. Manager frequently uses price cutting to increase market share.	3.77	.98	High
2. Manager possesses a considerable degree of bargaining power of supplier.	3.65	1.06	High
3. Manager tends to catch customer group on the long term than on the short term.	3.72	1.01	High
Total	3.71	.90	High

The table shows the strategic management - defender has average of 3.71 which is high level position. The results of defender in each factor were high level. These can order highest level to lowest with program SPSS calculation as bellows:

- Manager frequently uses price cutting to increase market share has mean equal to 3.77 and standard deviation .98
- Manager tends to catch customer group on the long term than on the short term has mean equal to 3.72 and standard deviation 1.01
- Manager possesses a considerable degree of bargaining power of supplier has mean equal to 3.65 and standard deviation 1.06

4.1.5 Health establishment performance

This section of the questionnaire employed a 5-point Likert scale ranging from Agree Strongly (5) to Disagree Strongly (1). The questions evaluate latent variable of health establishment performance compose 3 observed variables which means customer

satisfaction, customer retention, employee satisfaction have 18 questions, which developed from literature review and expertise. The numbers of participants are 412.

Table 4.15 Value of mean and standard deviation for health establishment performance of customer satisfaction

Item	Mean	Standard Deviation	Level Description
Health establishment performance - Customer satisfaction			
1. Therapist is friendly with customers.	3.55	1.05	High
2. Receptionist is friendly with customers.	3.55	.97	High
3. Health establishment has decorated reception and service area.	4.04	.99	High
4. Health establishment has ambiance of the reception area.	4.04	.97	High
5. Health establishment has convenient location.	4.40	.91	Highest
6. In health establishment has a good quality of service comparing to competitors	4.29	.87	Highest
Total	3.98	.73	High

The table shows the health establishment performance - customer satisfaction factors have average of 3.98 which is high level position. The results of customer satisfaction in each factor were high level, except no.5 and no.6, which were in highest level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Health establishment has convenient location has mean equal to 4.40 and standard deviation .91
2. In health establishment has a good quality of service comparing to competitors has mean equal to 4.29 and standard deviation .87

3. Health establishment has decorated reception and service area has mean equal to 4.04 and standard deviation .99
4. Health establishment has ambiance of the reception area has mean equal to 4.04 and standard deviation .97
5. Receptionist is friendly with customers has mean equal to 3.55 and standard deviation .97
6. Therapist is friendly with customers has mean equal to 3.55 and standard deviation 1.05

Table 4.16 Value of mean and standard deviation for health establishment performance of customer retention

Item	Mean	Standard Deviation	Level Description
Health establishment performance – Customer retention			
1. Customers say positive things about this health establishment to others.	2.91	.81	Normal
2. Customers would highly recommend the health establishment to their friends and family.	2.98	.90	Normal
3. Customers will come back this health establishment again.	2.76	.63	Normal
4. Customers really impress staying in this health establishment.	2.94	.66	Normal
5. Customers consider this health establishment to be my first choice when customer travels next time.	3.17	.84	Normal
Total	2.95	.59	Normal

The table shows the health establishment performance - customer retention factors has average of 2.95 which is normal level position. The results of customer retention

in each factor were normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Customers consider this health establishment to be my first choice when customer travels next time has mean equal to 3.17 and standard deviation .84
2. Customers would highly recommend the health establishment to their friends and family has mean equal to 2.98 and standard deviation .90
3. Customers really impress staying in this health establishment has mean equal to 2.94 and standard deviation .66
4. Customers say positive things about this health establishment to others has mean equal to 2.91 and standard deviation .81
5. Customers will come back this health establishment again has mean equal to 2.76 and standard deviation .63

Table 4.17 Value of mean and standard deviation for health establishment performance of employee satisfaction

Item	Mean	Standard Deviation	Level Description
Health establishment performance – Employee Satisfaction			
1. Employee receives income with a fair amount for the work.	3.57	.89	High
2. Employee receives the recognition when he works.	3.50	.93	High
3. Employee satisfies in health establishment that he works with.	3.37	.71	Normal
4. Employees compare work progress between this health establishment to other.	3.44	.71	High
5. Employees have too much to do at work.	3.57	1.00	High
6. Employees enjoy their coworkers.	3.60	1.26	High
7. Employees can express opinion to manager.	3.86	1.03	High
Total	3.56	.78	High

The table shows the Health establishment performance – employee satisfaction factors have average of 3.56 which is high level position. The results of employee satisfaction factors in each factor were high level, except no.3 Employee satisfies in health establishment that he works with, which was only in normal level. These can order highest level to lowest with program SPSS calculation as bellows:

1. Employees can express opinion to manager has mean equal to 3.86 and standard deviation 1.03
2. Employees enjoy their coworkers has mean equal to 3.6 and standard deviation 1.257
3. Employees have too much to do at work has mean equal to 3.57 and standard deviation 1.00
4. Employee receives income with a fair amount for the work has mean equal to 3.57 and standard deviation .89
5. Employee receives the recognition when he works has mean equal to 3.5 and standard deviation .93
6. Employees compare work progress between this health establishment to other has mean equal to 3.44 and standard deviation .71
7. Employee satisfies in health establishment that he works with has mean equal to 3.37 and standard deviation .71

4.2 Phase 1 Investigating Exploratory Factor of Latent and Observed Variables

Exploratory factor analysis (EFA) for latent variables by choosing important factors by review literature, index object congruence (IOC), validity and reliability finding calculate with SPSS program as bellows.

1) The latent variable of market orientation composes which result of Kaiser-Mayer-Olkin (KMO) = .57, Bartlets test of sphericity = 118.14, Significant = .000, Cumulative = 53.17. It means appropriate.

2) The latent variable of extended market orientation composes which result of Kaiser-Mayer-Olkin (KMO) = .54, Bartlets test of sphericity = 1451.08, Significant = .000, Cumulative = 35.61. It means inappropriate.

3) The latent variable of strategic management composes which result of Kaiser-Mayer-Olkin (KMO) = .59, Bartlets test of sphericity = 121.36, Significant = .000, Cumulative = 53.83. It means appropriate.

4) The latent variable of health establishment performance composes which result Kaiser-Mayer-Olkin (KMO) = .45, Bartlets test of sphericity = 218.54, Significant = .000, Cumulative = 49.22. It means inappropriate.

Table 4.18 Summary of relationship between variables used for analyzing components of exploratory factors before erase some factors

Independent variable	Observe variable	KMO	Bartlets test	Sig.	Cumulative %	Conclusion
MO	3	0.57	118.14	0.00	53.17	Appropriate
EMO	6	0.54	145.08	0.00	35.61	Inappropriate
ST	3	0.59	121.36	0.00	53.83	Appropriate
PER	3	0.45	218.54	0.00	49.22	Inappropriate

Exploratory factor for latent variables by choosing important factors by review literature, index object congruence (IOC), validity and reliability finding calculate with SPSS program after erase observed variables of Competition (CO) and Macroeconomic Environment (MA) from Extended Market Orientation, and Customer Satisfaction (Cus_Sat) from Health Establishment Performance (PER) factors as bellows.

1) The latent variable of market orientation composes which result of Kaiser-Mayer-Olkin (KMO) = .57, Bartlets test of sphericity = 118.15, Significant = .000, Cumulative = 53.17. It means appropriate.

2) The latent variable of extended market orientation composes which result of Kaiser-Mayer-Olkin (KMO) = .53, Bartlets test of sphericity = 1355.81, Significant = .000, Cumulative = 52.90. It means appropriate.

3) The latent variable of strategic management composes which result of Kaiser-Mayer-Olkin (KMO) = .59, Bartlets test of sphericity = 121.36, Significant = .000, Cumulative = 53.83. It means appropriate.

4) The latent variable of health establishment performance composes which result Kaiser-Mayer-Olkin (KMO) = .50, Batlets test of sphericity = 186.35, Significant = .000, Cumulative = 80.23. It means appropriate.

Table 4.19 Summary of relationship between variables used for analyzing components of exploratory factors after exclude unwanted observe variable

Independent variable	Observe variable	KMO	Bartlets test	Sig.	Cumulative %	Conclusion
MO	3	0.57	118.15	0.00	53.17	Appropriate
EMO	4	0.53	135.81	0.00	52.90	Appropriate
ST	3	0.59	121.36	0.00	53.83	Appropriate
PER	2	0.50	186.35	0.00	80.23	Appropriate

In table 4.20 found that the relationship between observed variables are almost have relation each other and relations of observed variables have same direction with 38 pairs by value of correlation coefficient between relationships. The size of relation or values of correlation coefficient have between 0.105 to 0.986 that signified in term of statistic with 0.01 and 0.05. In the other hand, the relations of observed variables have opposite direction with 8 pairs by value of correlation coefficient between relationships. The size of relation or values of correlation coefficient have between -0.098 to -0.318 that signified in term of statistic with 0.01 and 0.05 and no relationship with 20 pairs.

Considering the correlation coefficient between observed variables in the same latent variables, it was found that all were positive relation as follow:

MO has 6 pairs of positive direction correlation coefficient. The size of relation or values of correlation coefficient have between 0.178 to 0.446.

EMO has 10 pairs of positive direction correlation coefficient. The size of relation or values of correlation coefficient have between 0.091 to 0.979.

SM has 6 pairs of positive direction correlation coefficient. The size of relation or values of correlation coefficient have between 0.224 to 0.446.

PER has 3 pairs of positive direction correlation coefficient. The size of relation or values of correlation coefficient is 0.605

Table 4.20 Result of Pearson Correlation Coefficient between observed variables

	G	D	R	CUS	SU	RE	SO	PROS	AN	DE	CUSRET	EMPSAT
G	1.000											
D	0.446**	1.000										
R	0.243**	0.178**	1.000									
CUS	0.884**	0.331**	0.205**	1.000								
SU	0.235**	0.247**	0.094	0.236**	1.000							
RE	0.899**	0.348**	0.227**	0.979**	0.217**	1.000						
SO	0.096	-0.038	0.060	0.105*	0.277**	0.091	1.000					
PROS	0.136**	0.060	0.054	0.191**	-0.074	0.182**	0.017	1.000				
AN	-0.114*	-0.135**	-0.098*	-0.094	-0.318**	-0.107*	0.020	0.446**	1.000			
DE	-0.067	-0.190**	-0.035	-0.040	-0.252**	-0.036	-0.100*	0.224**	0.231**	1.000		
CUSRET	0.592**	0.289**	0.219**	0.553**	0.191**	0.569**	0.089	0.350**	0.072	0.068	1.000	
EMPSAT	0.986**	0.409**	0.235**	0.900**	0.229**	0.909**	0.114*	0.161**	-0.057	-0.087	0.605**	1.000

*statistically significant level of 0.05

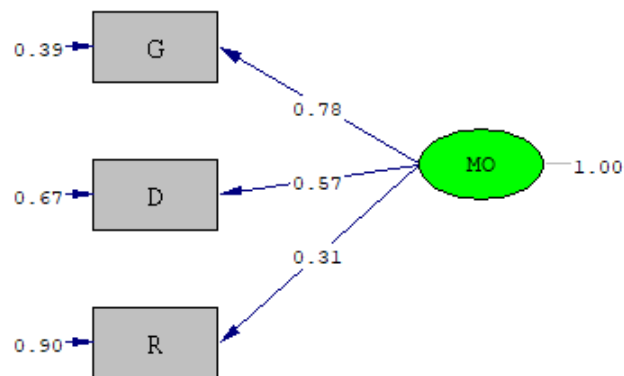
**Statistically significant level of 0.01

4.3 Phase 2 Investigate measurement model

Investigation measurement model for each latent variable for confirming structure model from phase 1, the researcher chooses these latent variables for this study that measure from observed variables by confirmatory factor analysis.

4.3.1 Confirmatory Factor Analysis of Market Orientation (MO)

From literature review related market orientation (MO), there are various variables found to be used in research as follows: Generation (G), Dissemination (D), and Responsiveness (R). According to figure 4.1, model measuring market orientation found that all factor loading passed the defined criteria



Chi-Square=0.00, df=0, P-value=1.00000, RMSEA=0.000

Figure 4.1 Confirmatory Factor Analysis of Market Orientation (MO)

Table 4.21 Goodness of Fit Statistics of Market Orientation

	Chi-Square (χ^2)	Df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
MO	0.00	0	0.00	1.00	1.00	1.00	0.00	0.00

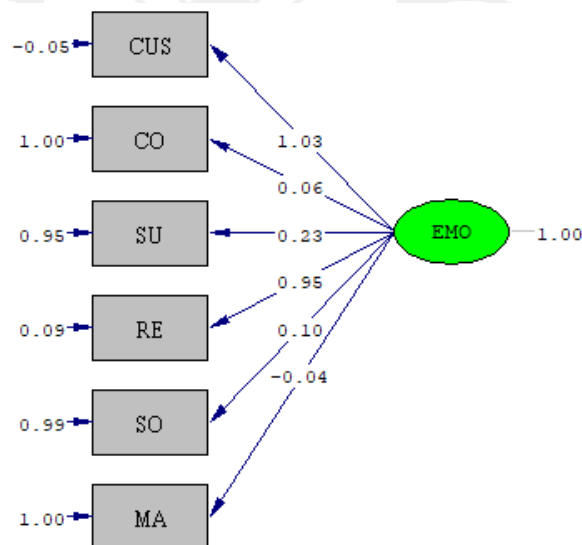
Figure 4.1 and table 4.21 found the Chi-square and Degree of Freedom (χ^2 /df) equal to 0. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00 which compare value of statistics between standardized for investigating Degree of Freedom (χ^2 /df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model of theory (Tabachnick & Fidell, 2007). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Market Orientation has a good fit with the model of theory in agreement level of acceptance.

According to analyze observed variables of Market Orientation found that weight of 3 observed variables of Market Orientation ordering highest to lowest score are Generation (G) 0.78, Dissemination (D) 0.57 and Responsiveness (R) 0.31

4.3.2 Confirmatory of Extended Market Orientation (EMO)

1. Before erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA).

From literature review related extended market orientation (EMO), there are various variables found to be used in research as follows: Customer (Cus), Competition (CO), Suppliers (SU), Regulatory Factors (RE), Social Cultural Trends (SO) and Macroeconomic Environment (MA). According to figure 4.2, model measuring extended market orientation found that 4 factors loading passed the defined criteria which have Customer (Cus), Suppliers (SU), Regulatory Factors (RE), and Social Cultural Trends (SO). In the other hand, 2 factors loading are not passed the defined criteria of T-value which have Competition (CO) and Macroeconomic Environment (MA).



Chi-Square=125.85, df=9, P-value=0.00000, RMSEA=0.178

Figure 4.2 Confirmatory Factor Analysis of Extended Market Orientation (EMO) (before erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA)).

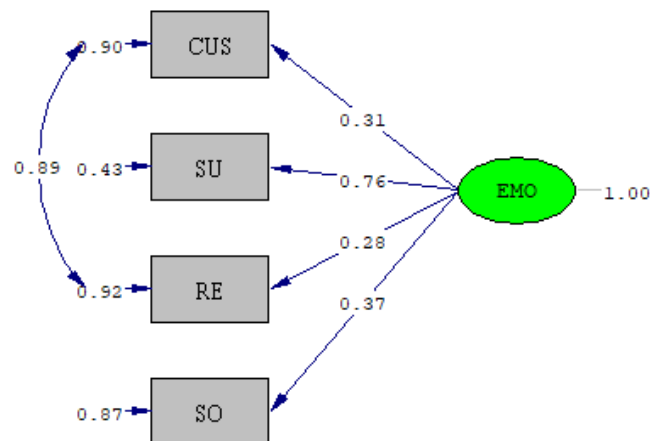
Table 4.22 Goodness of Fit Statistics of Extended Market Orientation (before erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA)).

	Chi-Square (χ^2)	Df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
EMO	125.85	9	13.98	0.00	0.91	0.79	0.08	0.18

Figure 4.2 and table 4.22 found the Chi-square and Degree of Freedom (χ^2 /df) equal to 13.98. The probability of p-value is 0.00, GFI = 0.91, CFI = 0.79, RMR = 0.08 and RMSEA = 0.18 which compare value of statistics between standardized for investigating Degree of Freedom (χ^2 /df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model of theory (Tabachnick and Fidell, 2007). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Extended Market Orientation has not a good fit with the model of theory in agreement level of acceptance.

2. After erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA).

From the Figure 4.2 found that T-value of Competition (CO) and Macroeconomic Environment (MA) less than 1.96. The researcher has been modifying model by cutting off 2 factors related extended market orientation (EMO), there are various variables found to be used in research as follows: Customer (Cus), Suppliers (SU), Regulatory Factors (RE), and Social Cultural Trends (SO). According to figure 4.2, model measuring extended market orientation found that all factor loading passed the defined criteria of T-value.



Chi-Square=0.28, df=1, P-value=0.59526, RMSEA=0.000

Figure 4.3 Confirmatory Factor Analysis of Extended Market Orientation (EMO) (after erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA)).

Table 4.23 Goodness of Fit Statistics of Extended Market Orientation (after erase 2 observed variables of Competition (CO) and Macroeconomic Environment (MA)).

	Chi-Square (χ^2)	Df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
EMO	0.28	1	0.28	0.59	1.00	1.00	0.00	0.00

Figure 4.3 and table 4.23 show cutting Competition (CO) and Macroeconomic Environment (MA) factors. The Chi-square and Degree of Freedom (χ^2 /df) equal to 0.28. The probability of p-value is 0.59, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00 which compare value of statistics between standardized for investigating Degree of Freedom (χ^2 /df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model of theory Tabachnick and Fidell (2007). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Extended Market Orientation (EMO) (Cut EMO after reduce some factors) has a good fit with the model of theory in agreement level of acceptance.

According to analyze observed variables Extended of Market Orientation found that weight of 4 observed variables of Extended Market Orientation ordering highest to lowest score are Supplier (SU) 0.76, Social cultural trends (SO) 0.37, Customer (CUS) 0.31 and Regulatory factor (RE) 0.28

4.3.3 Confirmatory Factor Analysis of Strategic Management (SM)

From literature review related Strategic Management (SM), there are various variables found to be used in research as follows: Prospector (PROS), Analyzer (AN), and Defender (DE). According to figure 4.4, model measuring Strategic Management found that all factor loading passed the defined criteria

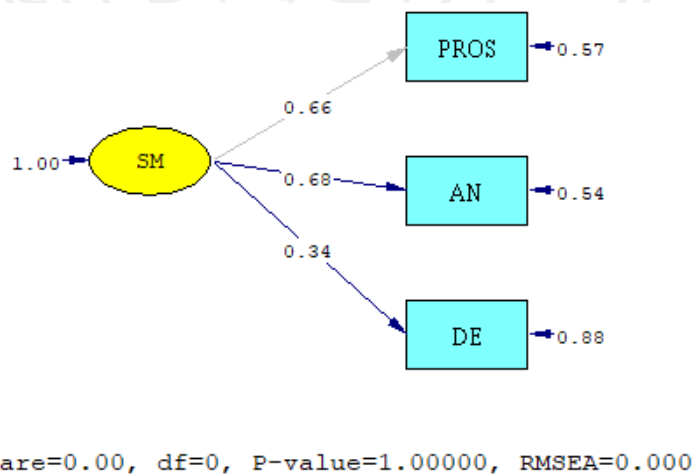


Figure 4.4 Confirmatory Factor Analysis of Strategic Management (SM)

Table 4.24 Goodness of Fit Statistics of Strategic Management

	Chi-Square (χ^2)	Df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
SM	0.00	0	0.00	1.00	1.00	1.00	0.00	0.00

Figure 4.4 and table 4.24 found the Chi-square and Degree of Freedom (χ^2 /df) equal to 0. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00 or saturated model or perfectly fits the data. Which compare

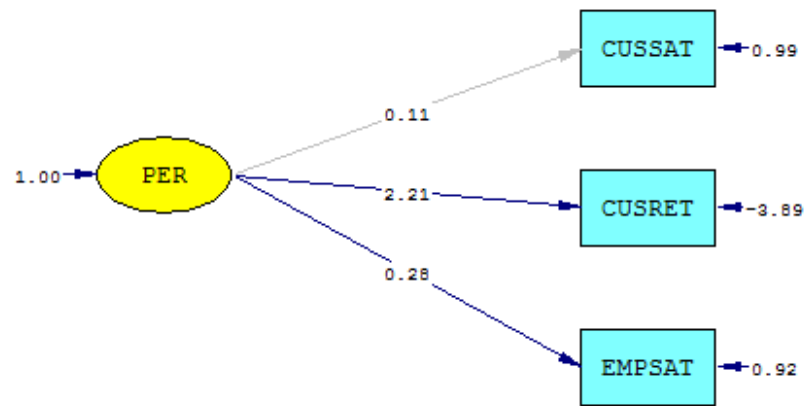
value of statistics between standardized for investigating Degree of Freedom (χ^2/df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model of theory (Schumacker & Lomax, 2010; Suksawang, 2014). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Strategic Management (SM) has a good fit with the model of theory in agreement level of acceptance.

According to analyze observed variables of Strategic Management found that weight of 3 observed variables of Strategic Management ordering highest to lowest score are Analyzer (AN) 0.68, Prospector (PROS) 0.66 and Defender (DE) 0.34

4.3.4 Confirmatory Factor Analysis of Health Establishment Performance (PER)

1. Before erases observed variable of Customer Satisfaction (Cus_Sat).

From literature review related Health Establishment Performance (PER), there are various variables found to be used in research as follows: Customer Satisfaction (Cus_SAT), Customer Retention (Cus_ret), and Employee Satisfaction (EMp_Sat). According to figure 4.5, model measuring Health Establishment Performance found that 2 factors loading passed the defined criteria which have Customer Retention (Cus_ret), Employee Satisfaction (Emp_Sat). In the other hand, 1 factor loading is not passed the defined criteria of T-value which has Customer Satisfaction (Cus_Sat).



Chi-Square=2.24, df=0, P-value=1.00000, RMSEA=0.000

Figure 4.5. Confirmatory Factor Analysis of Health Establishment Performance (PER) (before erases observed variable of Customer Satisfaction (Cus_Sat)).

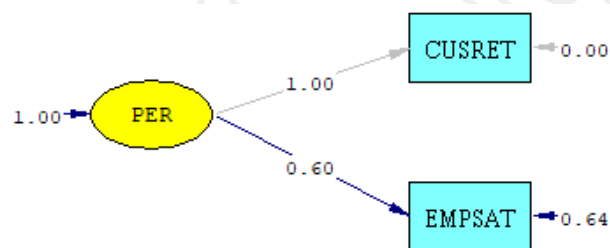
Table 4.25 Goodness of Fit Statistics of Health Establishment Performance (before erases observed variable of Customer Satisfaction (Cus_Sat)).

	Chi-Square (χ^2)	df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
PER	0.00	0	0.00	1.00	1.00	1.00	0.00	0.00

Figure 4.5 and table 4.25 found the Chi-square and Degree of Freedom (χ^2 /df) equal to 0, or saturated model or perfectly fits the data. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.0, RMR = 0.00 and RMSEA = 0.00 which compare value of statistics between standardized for investigating Degree of Freedom (χ^2 /df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model of theory (Tabachnick & Fidell, 2007). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Health Establishment Performance (PER) has a good fit with the model of theory in agreement level of acceptance.

2. After erases observed variable of Customer Satisfaction (Cus_Sat).

From the Figure 4.5 found that T-value of Customer Satisfaction (Cus_Sat) less than 1.96. The researcher has been modifying model by cutting off 1 factor related Health Establishment Performance (PER), there are various variables found to be used in research as follows: Customer Retention (Cus_ret), and Employee Satisfaction (EMp_Sat). According to figure 4.6, model measuring Health Establishment Performance found that all factor loading passed the defined criteria of T-value.



Chi-Square=0.00, df=0, P-value=1.00000, RMSEA=0.000

Figure 4.6 Confirmatory Factor Analysis of Health Establishment Performance (PER) (after erases observed variable of Customer Satisfaction (Cus_Sat)).

Table 4.26 Goodness of Fit Statistics of Health Establishment Performance (after erases observed variable of Customer Satisfaction (Cus_Sat)).

	Chi-Square (χ^2)	Df	χ^2 /df	p-value	GFI	CFI	RMR	RMSEA
PER	0.00	0	0.00	1.00	1.00	1.00	0.00	0.00

Figure 4.6 and table 4.26 show cutting Customer Satisfaction (CUSSAT) factor. The Chi-square and Degree of Freedom (χ^2 /df) equal to 0.00 or saturated model or perfectly fits the data. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.00, RMR = 0.000 and RMSEA = 0.00 which compare value of statistics between standardized for investigating Degree of Freedom (χ^2 /df) should be less than 2. p-value should not significant. GFI and CFI should higher than 0.9, RMR and RMSEA should less than 0.05. It means that the model of statistic has a good fit with the model

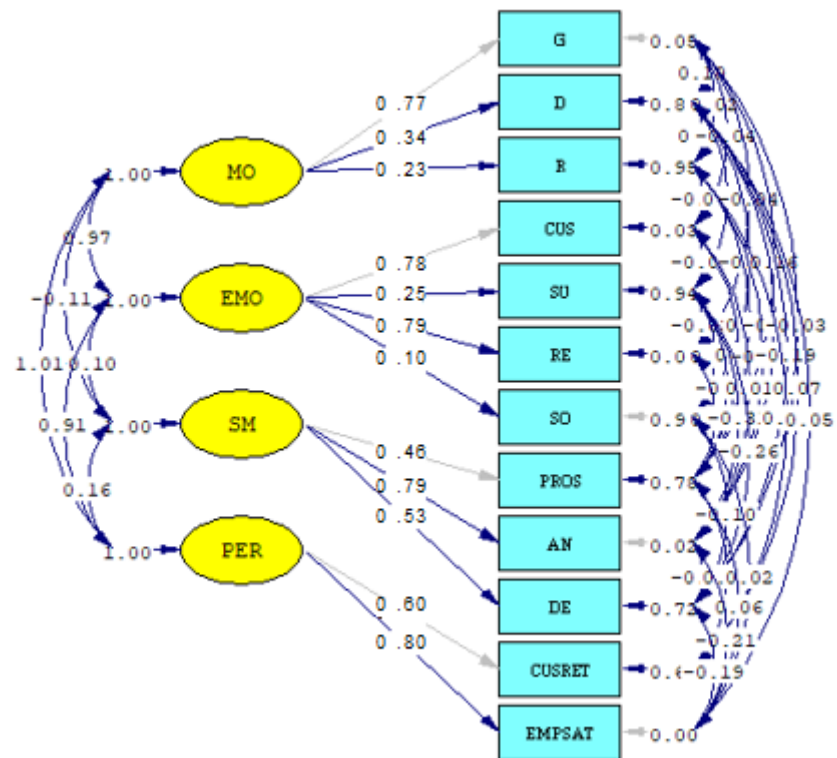
of theory (Tabachnick & Fidell, 2007). In conclusion, the value of the above shows in the standard of evaluation. It means that the model of Health Establishment Performance (Cut PER after reduce some factors) has a good fit with the model of theory in agreement level of acceptance.

According to analyze observed variables of Health Establishment Performance found that weight of 2 observed variables of Health Establishment Performance ordering highest to lowest score are Customer Retention 1.00 and Employee Satisfaction 0.60.

4.4 Phase 3 Investigating measurement model

Investigating relationship from latent variables in a structural equation model (SEM), it checks the levels of relationship to analyze SEM by CFA components.

4.4.1 Confirmatory Factor Analysis of Market Orientation, Extended Market Orientation, Strategic Management and Health Establishment Performance



Chi-Square=15.12, df=19, P-value=0.71471, RMSEA=0.000

Figure 4.7 Confirmatory factor analysis Market Orientation, Extended Market Orientation, Strategic Management and Health Establishment Performance

Table 4.27 Results of factor loading analysis of observed constructs

Observed Variables	Standard Factor Loading	t-value	Error of Variance	Coefficient of determination
MO				
G	0.77	-	0.05	0.65
D	0.34	7.28	0.08	0.11
R	0.23	4.84	0.09	0.05
EMO				
CUS	0.78	-	0.03	0.67
SU	0.25	4.76	0.09	0.06
RE	0.79	8.51	0.01	0.69
SO	0.10	2.11	0.09	0.01
SM				
PROS	0.46	-	0.07	0.22
AN	0.79	10.75	0.02	0.68
DE	0.53	4.57	0.07	0.28
PER				
CUSRET	0.60	-	0.06	0.36
EMPSAT	0.80	15.37	0.00	0.64

*statistically significant level of 0.05 ($1.96 < t\text{-value} < 2.58$)

**Statistically significant level of 0.01 ($t\text{-value} > 2.58$)

According to Figure 4.7 and Table 4.24 model measuring Market Orientation (MO) included 3 indicators found that all factors loading passed the defined criteria. According to timely information, Generation (G) had highest factor loading as 0.77, following by Dissemination (D) factor loading is 0.34 and Responsiveness (R) factor loading is 0.23. When considering the Coefficient of determination, Generation (G) had highest Coefficient of determination as 0.65, following by Dissemination (D) is 0.11 and Responsiveness (R) coefficient of determination is 0.05.

Considering model measuring Extended Market Orientation (EMO) included 4 indicators found that all factors loading passed the defined criteria. Regulatory Factor (RE) factor loading had highest factor loading as 0.79, Customer (CUS) factor loading is 0.78, Supplier factor loading (SU) is 0.25 and Social Cultural Trends (SO) is 0.10. When considering the Coefficient of determination, Regulatory Factor (RE) had highest Coefficient of determination as 0.69, following by Customer (CUS) is 0.67, Supplier factor loading (SU) is 0.06, and Social Cultural Trends (SO) coefficient of determination is 0.01.

Due to model measuring Strategic Management (SM) included 3 indicators found that all factors loading passed the defined criteria. Analyzer (AN) had highest factor loading as 0.79, following by Defender (DE) factor loading is 0.53 and Prospector (PROS) factor loading is 0.46. When considering the Coefficient of determination, Analyzer (AN) had highest Coefficient of determination as 0.68, following by Defender (DE) is 0.28, and Prospector (PROS) coefficient of determination is 0.22.

Finally, model measuring Health Establishment Performance (PER) included 2 indicators found that all factors loading passed the defined criteria. Employee Satisfaction (EMPSAT) factor loading had highest factor loading as 0.80 and Customer Retention (CUSRET) factor loading is 0.60. When considering the Coefficient of determination, Employee Satisfaction (EMPSAT) had highest Coefficient of determination as 0.64; following by Customer Retention (CUSRET) is 0.36.

4.4.2 Convergent Validity Determination

The Convergent Validity was the list indicator with common variance to determine lists or indicators for measuring the same variables. The Convergent Validity measurement could be divided into 3 kinds as follows (Hair, Anderson, Tatham, & Black, 2005) and (Knight, 2004).

1. Factor Loading – High factor loading demonstrated high chance of similarities. The standard factor loading should be greater than 0.5

2. Average Variance Extracted (AVE) – The accepted AVE should be 0.5 or higher. The value could be calculated from equation (Diamantopoulos and Siguaw, 2013).
3. Composite Reliability – The accepted composite reliability should be 0.6 or higher. It could be calculated from the equation (Diamantopoulos and Siguaw, 2013).

In overview summary, average variance extracted (AVE) and the composite reliability (CR) were presented in 4.25.

Table 4.28 Analyzed results of Convergent Validity

Observed Variables	Standard Factor Loading	Error of Variance	Average Variance Extracted (AVE)	Combined reliability (CR)
MO			0.37	0.56
G	0.77	0.05		
D	0.34	0.08		
R	0.23	0.09		
EMO			0.50	0.73
CUS	0.78	0.03		
SU	0.25	0.09		
RE	0.79	0.01		
SO	0.10	0.09		
SM			0.49	0.16
PROS	0.46	0.07		
AN	0.79	0.02		
DE	0.53	0.07		
PER			0.68	0.80
CUSRET	0.60	0.06		
EMPSAT	0.80	0.00		

Table 4.28 found that the value of combined reliability (CR) of observed variables are high between 0.16 – 0.80. The latent variable of Health Establishment Performance (PER) has highest score of 0.80, Extended Market Orientation has score 0.73, Market

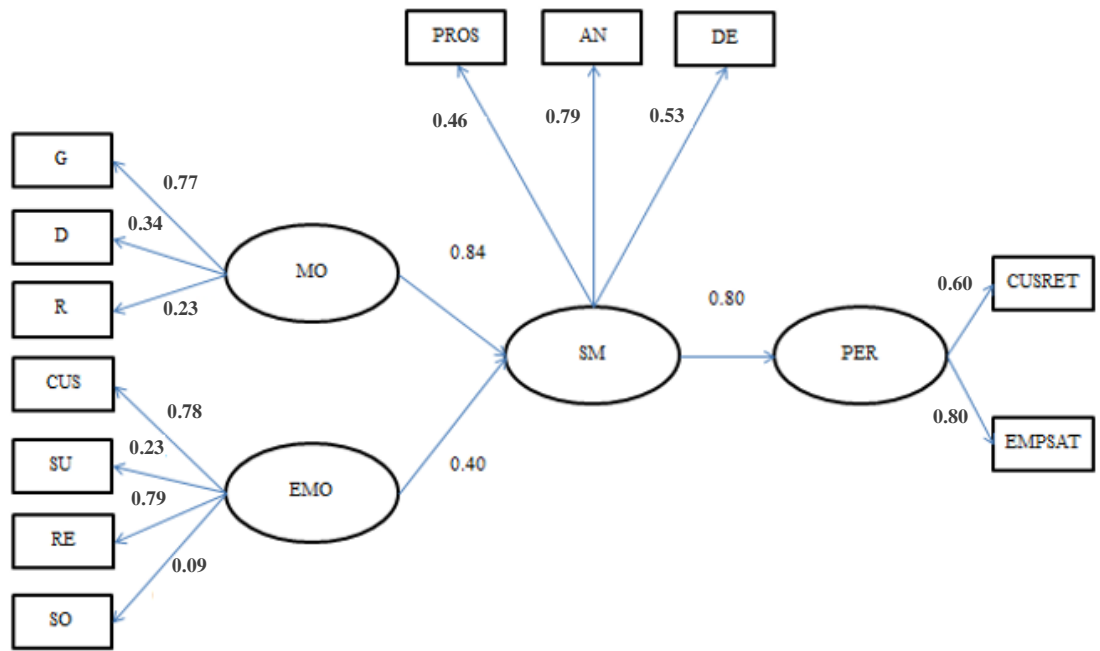
Orientation has score 0.56 and Strategic Management has score 0.16. The Average Variance Extracted (AVE) is between 0.37 – 0.68. The latent variable of Health Establishment Performance (PER) has highest score of 0.68, Extended Market Orientation has score 0.50, Strategic Management has score 0.49 and Market Orientation has score 0.37. Which only latent variable of Strategic Management (SM) that has AVE and CR lower than 0.5.

4.5 Phase 4 Investigating SEM path analysis

Results of path analysis of causal relation model of market orientation and extended market orientation affecting strategic management through health establishment performance was constructing by structural equation modeling. The structural equation modeling is a multivariate statistical analysis technique that is used to analyze structural relationships. This technique is the combination of factor analysis and multiple regression analysis, and it is used to analyze the structural relationship between measured variables and latent constructs by checks covariance of model to develop empirical information by considering covariance indexes, parameter value in each arrows and reasonable results of size and directions of parameters for each arrow. These made the model also called casual modeling because it tests the proposed casual relationships.

4.5.1 Investigation of causal relation model of market orientation and extended market orientation affecting strategic management through health establishment performance structure based on an assumption of research and empirical data (after model modification)

After model modification via drawing the line according to the suggestion obtained by the recently modified model, the correspondence between the model and empirical data was improve, and also the statistic values were suited with the determined values. For analyzing results after model modification were shown in Figure 4.9 and table 4.27.



Chi-Square=32.98, df=26, P-value=0.16267, RMSEA=0.026

Figure 4.8 Path analysis after model modification

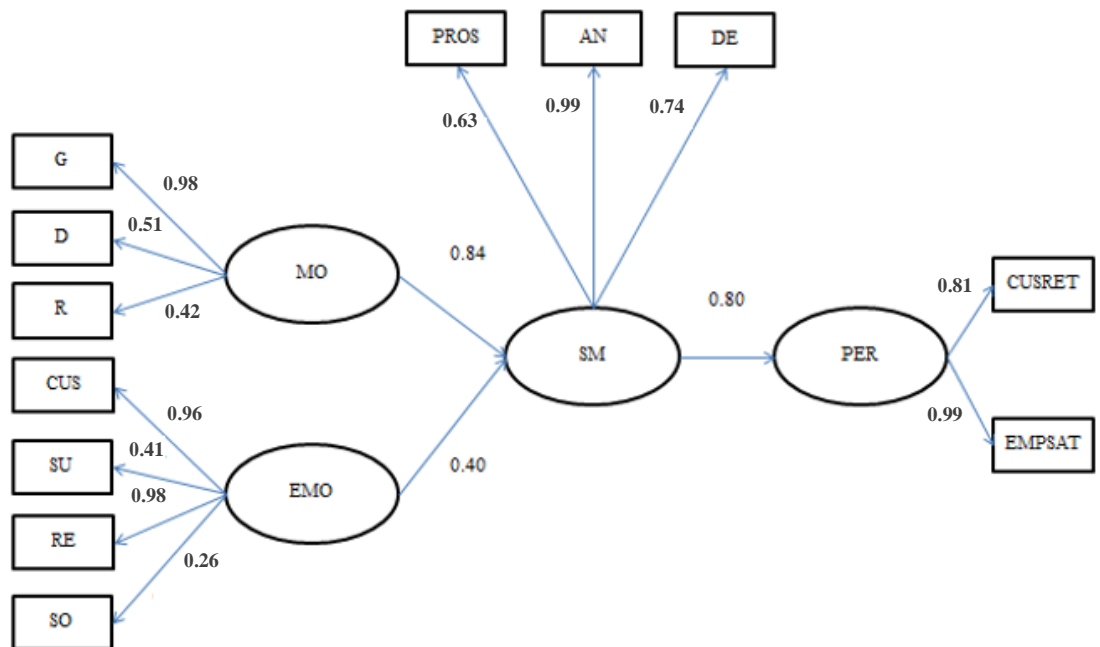


Figure 4.9 Standardize structure equation model

Table 4.29 Consistency index used to consider the consistency of the model and empirical information (after model adjusted)

Consistency Index/ harmony index	Index considering criteria	Analyzed results	The considered results
1. Absolute fit index			
1.1 p-value	>0.05	0.16	Good
1.2 Relative χ^2 (χ^2 /df)	<5.00	1.27	Good
1.3 GFI (goodness of fit index)	≥ 0.80	0.99	Good
1.4 AGFI (adjusted goodness of fit index)	≥ 0.80	0.96	Good
2. Relative fit index			
2.1 NFI (normal fit index)	≥ 0.95	0.99	Good
2.2 CFI (comparative fit index)	≥ 0.80	0.99	Good
2.3 RFI (relative fit index)	≥ 0.80	0.98	Good
3 Consistency Index of Error			
3.1 RMSEA (root mean square error of approximation)	<0.08	0.03	Good
3.2 RMR (root mean square residual)	<0.08	0.02	Good

According to Table 4.30, the analyzing results showed that the modified model was corresponded with the empirical data after model modification, meaning that the theoretical assumption was in agreement with the empirical data. Considering on Consistency Index as follow:

Absolute fit index: the Chi-Square (χ^2) was equal to 32.98, degree of freedom (df) was 26, the relative Chi-Square (χ^2 /df) was equal to 1.27, where the

standard was lower than 5. In the case of goodness of fit index (GFI), it was equal to 0.99, where the standard was determined that the values should be higher or equal to 0.80. AGFI was 0.96, which was considered higher than the standard which determined that any value that can be satisfied should be higher than or equal to 0.80,

Relative fit index: NFI was equal to 0.99 higher than standard value 0.95. The CFI and RFI was equal to 0.99 and 0.98 respectively, where the standard value was higher than 0.80.

Consistency Index of Error: RMSEA was 0.03 and RMR = 0.02, where the standard value was lower than 0.80. Considering in the whole picture, it was found that most of indices were in the standard values, so it could be implied that the model was in agreement with the empirical data, as shown in Figure 4.9.

4.5.2 Result analyzing of influence factors, Market Orientation, Extended Market Orientation, Strategic Management, Health Establishment Performance from Causal Relation Model Market Orientation and Extended Market Orientation Affecting Strategic Management through Health Establishment Performance

To answer the research question mentioned in Chapter 1. A proposal framework and a set of hypotheses were developed and are now being testing in this section by using output of the SEM. For details of analysis, the researcher showed the relationship between causal factors in each way, and the assumption was listed as followed

Table 4.30 Result analyzing influence of factors

<i>Independent variable</i>	R^2	SM			MO			EMO		
<i>Dependent variable</i>		TE	DE	IE	TE	DE	IE	TE	DE	IE
SM	0.96	-	-	-	0.84**	0.84**	-	0.40**	0.40**	-
		-	-	-	(0.22)	(0.22)	-	(0.12)	(0.12)	-
		-	-	-	3.80	3.80	-	3.44	3.44	-
PER	0.64	0.80**	0.80**	-	0.67**	-	0.67**	0.32**	-	0.32**
		(0.20)	(0.20)	-	(0.07)	-	(0.07)	(0.06)	-	(0.06)
		4.10	4.10	-	9.28	-	9.28	5.65	-	5.65
$\chi^2 = 32.98$ df = 26 p = 0.16 $\chi^2/df = 1.27$ GFI = 0.99 RMSEA = 0.03 SRMR = 0.04										

*statistically significant level of 0.05 ($1.96 < t\text{-value} < 2.58$)

**Statistically significant level of 0.01 ($t\text{-value} > 2.58$)

The analytical result of causal relation model of market orientation factors effecting health establishment's performance in Bangkok uses programme of LISREL Version 9.3. According for direct effect can conclude Structural Equation model of this research as follow:

$$SM = 0.84MO + 0.40EMO \quad R^2 = 0.96 \quad (1)$$

$$PER = 0.80SM \quad R^2 = 0.64 \quad (2)$$

The latent variable of Strategic Management (SM) has direct effect from Market Orientation (MO) and Extended Market Orientation (EMO). The sizes of direct effect are 0.84 and 0.40. It's significant in term of statistic at level of 0.01. The model is shown the coefficient of determination (R^2) for structural equation model of Strategic Management (SM) is 0.96, or variance latent variable of Strategic Management (SM) is 96 percent.

The latent variable of Health Establishment Performance (PER) has direct effect from Strategic Management. The size of direct effect is 0.80. It's significant in term of statistic at level of 0.01. In addition, the latent variable of Health Establishment Performance (PER) has indirect effect from Market Orientation (MO) and Extended Market Orientation (EMO). The sizes of direct effect are 0.67 and 0.32.

It's significant in term of statistic at level of 0.01. The model is shown the coefficient of determination (R^2) for structural equation model of Health Establishment Performance (PER) is 0.64, or variance latent variable of Health Establishment Performance (PER) is 64 percent.

4.5.3 Results of causal relation model market orientation and extended market orientation affecting strategic management through health establishment performance

Table 4.31 Results of examination of research results

Hypotheses	Path Analysis	Results of Hypothesis testing	Level of statistical significance
Market Orientation affected Strategic Management	MO → SM	Market Orientation directly and positively affected Strategic Management	P<0.01 (significant)
Extended Market Orientation affected Strategic Management	EMO → SM	Extended Market Orientation directly and positively affected Strategic Management	P<0.01 (significant)
Strategic Management affected Health Establishment Performance	SM → PER	Strategic Management directly and	P<0.01 (significant)

positively
 affected Health
 Establishment
 Performance

Market Orientation affected Health Establishment Performance	$MO \rightarrow SM$ $\rightarrow PER$	Market Orientation indirectly and positively affected Health Establishment Performance	$P < 0.01$ (significant)
Extended Market Orientation affected Health Establishment Performance	$EMO \rightarrow SM$ $\rightarrow PER$	Extended Market Orientation indirectly and positively affected Health Establishment Performance	$P < 0.01$ (significant)

CHAPTER 5

CONCLUSION AND DISCUSSION

5.1 Introduction

This research used quantitative methodology, which used questionnaires as research instrument. The 412 of managers working in health establishments were used to analysis structural equation model in statistical software LISREL. The result of the findings can summarize category as research objective as follows:

- 1) Examine the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER) by using Exploratory factor analysis (EFA) with Kaiser-Meyer-Olkin (KMO) test for sampling adequacy for reduce and chosing only apporpreate variable.
- 2) Evaluate the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER) by using Comfimatary factor analysis (CFA) between individual latenet variable and empirical data.
- 3) Create the causal relationship model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok by using Comfimatary factor analysis (CFA) between causal relation model and empirical data.

5.2 Conclusion

5.2.1 Objective 1 examine the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER)

5.2.1.1 Exploratory factor for latent variables

In this phase, the researcher choose factor for every latent variable by choosing important factors which affect its own latent variable by exploratory method. The results are:

Latent Market Orientation (MO) has 3 observers which KMO equal to 0.57 and Significant 0.00, it consists of Generation (G), Responsiveness (R) and Dissemination (D). According to the survey showed that therapist and receptionist often ask information or making a survey for detect change of customer behavior which a part of Generation. A part of manager focus on Responsiveness by investigate customer and well segmented and regulary makes an appointment with therapist and receptionist to solve problems base on the theory of Dissemination

Latent Extended Market Orientation (EMO) has 4 observers which KMO equal to 0.53 and Significant 0.00, it consists of Customer (CUS), Suppliers (SU), Regulatory Factors (RE) and Social Cultural Trends (SO). According to the survey good or a bad review, there show response for credibility. Morevoer manager focus on materials qualities that use to serve customers which sometimes also important to materials various to different situation such as Islamic customers they cannot use product which has alcohol

Latent Strategic Management (SM) has 3 observers which KMO equal to 0.59 and Significant 0.00, it consists of Prospector (PROS), Analyzer (AN) and Defender (DE). According to the survey found that spa often select Analyzer strategic for sustainability for business by does not take risk. Moreover, also using Defender strategy helps for promotions in term of solving problems of losing customers. In additional, a good manager suppose to be Prospector to finds always the opportunities to increase and expand customers in many ways even though cutting loses profit

Latent Health Establishment Performance (PER) has 2 observers which KMO equal to 0.50 and Significant 0.00, it consists of Customer Retention

(CUS_RET) and Employee Satisfaction (EMP_SAT). According to the survey found that spa will concern over Employee satisfaction because customers like same therapists when they use at first time. It means that we have care therapists to as much as possible. In addition, follow Customer Retention with evaluate customers after services via talk or recommend service.

5.2.1.2 Investigate measurement model for each latent variable

This for confirming structure model in each variable by using confirmatory factor analysis method. The results are:

Latent MO has Chi-square and Degree of Freedom (χ^2 /df) equal to 0. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00. These mean the model of Market Orientation has a good fit with the model of theory in agreement level of acceptance

Latent EMO has Chi-square and Degree of Freedom (χ^2 /df) equal to 1. The probability of p-value is 0.59, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00. This means that the model of Extended Market Orientation (EMO: after reduce some factors) has a good fit with the model of theory in agreement level of acceptance.

Latent SM has Chi-square and Degree of Freedom (χ^2 /df) equal to 0. The probability of p-value is 1.00, GFI = 1.00, CFI = 1.00, RMR = 0.00 and RMSEA = 0.00. This means that the model of Strategic Management (SM) has a good fit with the model of theory in agreement level of acceptance.

Latent PER has Chi-square and Degree of Freedom (χ^2 /df) equal to 0.00. This means that the model of statistic has a good fit with the model of theory in agreement level of acceptance.

5.2.2 Objective 2 Evaluate the causal relationship of market orientation, extended market orientation strategic management affecting health establishment performance in Bangkok (MO, EMO, SM, and PER)

5.2.2.1 Acceptance of Model

According to the result, it is concluded that Structural Equation Model (SEM) corresponds to an empirical data. This means that it agrees with the main hypothesis: the model based on this theory corresponds with the empirical data. The research's developed model of health establishment performance in Bangkok was checked by considering covariance indexes. The final SEM model can show as Figure 5.1.



Figure 5.1 A Result of Causal Model Analysis of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok

The consistency index of model as follow:

Absolute fit index: the Chi-Square (χ^2) was equal to 32.98, degree of freedom (df) was 26, the relative Chi-Square (χ^2/df) was equal to 1.27, goodness of fit index (GFI), it was equal to 0.99, and AGFI was 0.96.

Relative fit index: NFI was equal to 0.99. The CFI and RFI was equal to 0.99 and 0.98 respectively.

Consistency Index of Error: RMSEA was 0.03 and RMR = 0.02,

It was found that all of indices were in the standard values range, so it could be implied that the model was in agreement with the empirical data.

5.2.2.2 Investigate element in latent variable

This phase was investigating element (observe indicator) in latent variable by using CFA method, which found that:

Market Orientation (MO) included 3 indicators found that all factors loading passed the defined criteria. According to timely information, Generation (G) had highest factor loading as 0.77, following by Dissemination (D) factor loading is 0.34 and Responsiveness (R) factor loading is 0.23.

Extended Market Orientation (EMO) included 4 indicators found that all factors loading passed the defined criteria. Regulatory Factor (RE) factor loading had highest factor loading as 0.79, Customer (CUS) factor loading is 0.78, Supplier factor loading (SU) is 0.25 and Social Cultural Trends (SO) is 0.10.

Strategic Management (SM) included 3 indicators found that all factors loading passed the defined criteria. Analyzer (AN) had highest factor loading as 0.79, following by Defender (DE) factor loading is 0.53 and Prospector (PROS) factor loading is 0.46.

Health Establishment Performance (PER) included 2 indicators found that all factors loading passed the defined criteria. Employee Satisfaction (EMPSAT) factor loading had highest factor loading as 0.80 and Customer Retention (CUSRET) factor loading is 0.60.

5.2.3 Objective 3 create the causal relationship model of market orientation and extended market orientation affecting strategic management through health establishment performance in Bangkok

5.2.3.1 Structural Equation of Model

According for direct effect can conclude Structural Equation model of this research as follow:

$$SM = 0.84MO + 0.40EMO \quad R^2 = 0.96 \quad (1)$$

$$PER = 0.80SM \quad R^2 = 0.64 \quad (2)$$

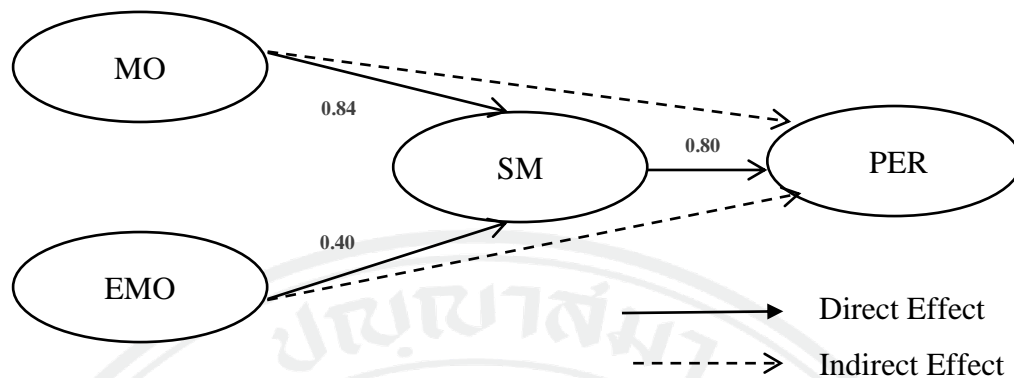


Figure 5.2 Causal relation model of Health establishment performance in Bangkok

With equation model can described as follow;

The latent variable of Strategic Management (SM) has direct effect from Market Orientation (MO) and Extended Market Orientation (EMO). The sizes of direct effect are 0.84 and 0.40

The latent variable of Health Establishment Performance (PER) has direct effect from Strategic Management. The size of direct effect is 0.80.

5.2.3.2 Investigate relationship between latent variable

This phase was investigating relationship between latent variable by using CFA method, which found that:

1) Market Orientation (MO)

- Has a positive direct to Strategic Management (SM). The direct effect, statistically significantly, is 0.84.

- Has a positive in-direct effect to Health Establishment Performance (PER), statistically significantly, is 0.67.

2) Extended Market Orientation (EMO)

- Has a positive direct to Strategic Management (SM). The direct effect, statistically significantly, is 0.40.

- Has a positive in-direct effect to Health Establishment Performance (PER), statistically significantly, is 0.32.

2) Strategic Management (SM)

- Has a positive direct effect to Health Establishment Performance (PER), statistically significantly, is 0.80.

5.2.3.3 Hypothesis test

Researcher can conclude the purpose research objective from analyze causal relation model of market orientation affecting strategic management through health establishment performance as follow:

Hypothesis 1 (MO and SM) does Market Orientation affected Strategic Management: The result shown, Market Orientation has directly and positively affected Strategic Management at significant level 0.01, which size of effect is 0.84.

Hypothesis 2 (EMO and SM), does Extended Market Orientation affected Strategic Management: The result shown, Extended Market Orientation has directly and positively affected Strategic Management at significant level 0.01, which size of effect is 0.40.

Hypothesis 3 (SM and PER), does Strategic Management affected Health Establishment Performance: The result shown, Strategic Management has directly and positively affected Health Establishment Performance at significant level 0.01, which size of effect is 0.80.

Hypothesis 4 (MO>SM>PER), does Market Orientation affected Health Establishment Performance: The result shown, Market Orientation in-directly and positively affected Health Establishment Performance at significant level 0.01, which size of effect is 0.67.

Hypothesis 5 (EMO>SM>PER), does Extended Market Orientation affected Health Establishment Performance: The result shown, Market Orientation in-directly and positively affected Health Establishment Performance at significant level 0.01, which size of effect is 0.32.

5.3 Discussion

The discussions of results are as follows;

Issue 1: The relationship between the causal factors influencing on Health Performance.

Issue 2: The causal factors influence on Health Establishment Performance.

Issue 3: Many well-known observe indicators are dsicard from latent variable.

Issue 1: The relationship between the causal factors influencing on Health Establishment Performance.

A finding of this question is an analysis to explain the main purpose of the research in order to study a relationship between causal factor influencing on Health establishment performance in Bangkok as below;

Hypothesis 1: does Market Orientation affected Strategic Management.

According to the finding, it is found that Market Orientation has directly and positively affected Strategic Management at significant level 0.01, which size of effect is 0.84. The interview revealed most of the manager explains that their data come from their employee and searching over the social network. Most of the information that customer focus on are price of service, promotion over the service, location, package of service. In conclusion, information from surround of Spa is important to manage strategy of Spa business, moreover the way to spread the Spa information to the stakeholder also important to lead effective strategy, lastly was response of the customer and employee is an indicator for the effective Spa strategy. In accordance with market orientation theory, this is not outwardly obvious, so customers will not see this in the same way as employees. The effects are only perceived by the customer at the point of receiving the service from the company (Suess, Weller, Evanschitzky, & Wangenheim, 2014). The inquiry of such information that cannot be collected from observation is therefore the right choice. In additional Trainor et al. (2014) has confirm test that market orientation and extended market orientation, has combined relationship to moderate (strategic management) influence health establishment performance.

Hypothesis 2: does Extended Market Orientation affected Strategic Management.

According to the finding, it is found that Extended Market Orientation has directly and positively affected Strategic Management at significant level 0.01, which size of effect is 0.40. The results revealed that manager being concern not only from walk in customer but also customer who contact via other media such as social media, especially information which can be posted global and can watch by publicity which explains to the society about the trend of society. According Nunan et al. (2018) was specific behavioral activities may take the forms of performance outcome, witch that factor not included in market orientation. As same as Trainor et al. (2014) whom classify performance as a standard of connection between internal and external characteristics.

Hypothesis 3: does Strategic Management affected Health Establishment Performance.

According to the finding, it is found that Strategic Management has directly and positively affected Health Establishment Performance at significant level 0.01, at size of effect of 0.80, which very high. The interview revealed Most of strategy that health establishment used was Prospector and Analyzer by conservative spa business which try to keep their standard and focus on keeping current customer instead of attract new customer. Once the strategy had been used in effective direction, the business of spa would be better than the salary and benefit to employee would be better as a result to employee satisfaction. These were exactly as reviewed theory (Goetsch & Davis, 2014) which health establishment's specific situational factors or strategic management was depending on relationships between intelligence-related activities investigation and results of market performance. The moderators are assumed to be impermanent and less stable when limit data, which results in such behavioral activities, that may take the forms of performance outcome in strategic management (Nunan et al., 2018). And as reviewed theory of Miles et al. (1978) which has described strategic management as pattern of the adaptation with a particular set of performance criteria for target, this mean performance should vary depending on the strategic management directly.

Hypothesis 4: *does Market Orientation affected Health Establishment Performance.*

According to the finding, it is found that Market Orientation in-directly and positively affected Health Establishment Performance at significant level 0.01, which size of effect is 0.67. Theses according to the Mulki & Wilkinson (2017), Tontini, Söilen, & Zanchett (2017), found that Market Orientation has higher level affect to Performance more that Extended Market Orientation and has very high direct effect because it is a clearly correlated variable makes measuring and checking easy. In addition ogo & Ogba, 2015 summed up the importance of health establishment performance to strategy as theoretical, empirical, and managerial which empirically is a research study employ the construct of business performance to examine a variety of strategy content and process issues?

The structure equation model can also be subdivided to check the relationship between variables that many researchers are interested in as follows;

Hypothesis 4a: does Market Orientation affected Health Establishment Performance. The result found that Market Orientation has indirect effect to customer retention (MO>SM>Cus_ret) at size effect of 0.54.

Hypothesis 4b: does Market Orientation affected Health Establishment Performance. The result found that Market Orientation has indirect effect to employee satisfaction (MO>SM>Emp_sat) at size effect of 0.67

Hypothesis 5: *does Extended Market Orientation affected Health Establishment Performance.*

According to the finding, it is found that Market Orientation in-directly and positively affected Health Establishment Performance at significant level 0.01, which size of effect is 0.32. Theses according to the Mulki & Wilkinson (2017), Tontini, Söilen, & Zanchett (2017), that identify health establishment performance as a broad construct which includes customer satisfaction, customer retention and employee satisfaction, wich park of Extented Market Orientation variable, Although Tzokas, Kim, Akbar, & Al-Dajani (2015) also suggest that, whenever possible, both customer and operational measures should be used as indicators of spa performance.

The structure equation model can also be subdivided to check the relationship between variables that many researchers are interested in as follows;

Hypothesis 5a: does Extended Market Orientation affected Health Establishment Performance. The result found that Market Orientation has indirect effect to customer retention (EMO>SM>Cus_ret) at size effect of 0.26.

Hypothesis 5b: does Extended Market Orientation affected Health Establishment Performance. The result found that Market Orientation has indirect effect to employee satisfaction (EMO>SM>Emp_sat) at size effect of 0.32

Issue 2: The causal factors that influence on Health Establishment Performance.

A finding of this question is an analysis of factors that were component of latent variable in research structure equation model of Health establishment performance in Bangkok. Can descript as latent variable as follow;

Latent variable 1: Market Orientation (MO)

According to the research, the latent variable Market Orientation (MO) consist of 3 observe which are Generation, Dissemination, and Responsiveness with factor loading of 0.77, 0.34 and 0.23 respectively. The reason which Generation has highest coefficient of determination was it's the responsibility of marketing and non-marketing plan. The Intelligence Generation was formal and informal mechanisms to gather and monitor information related to customers, competitors, and environmental forces and for the availability of the gathered intelligence at one location to be disseminated effectively to business (Kweku Appiah-Adu & Djokoto, 2015; Ozkaya et al., 2015). In addition, managers must take action from customer's information such as selecting target markets, designing and offering products, and producing, distributing, and promoting the needed product in response to intelligence that is generated and disseminated in order to develop a customer satisfaction, customer retention and employee satisfaction. In conclusion, Market orientation is health establishment culture which favors experimentation and a desire to achieve continual improvements in operations. This suggests that when market orientation is used and developed, the business may develop more distinct activities with the sector which can have a concomitant effect on the behavior of consumers and employee.

Latent variable 2: Extended Market Orientation (EMO)

According to the research, the latent variable Extended Market Orientation (EMO) consist of 4 observe which are Regulatory Factor, Customer, Supplier factor loading, and Social Cultural Trends with factor loading of 0.79, 0.78, 0.23 and 0.09 respectively. The Regulatory environment factor was most important because, it can affect performance through indirect items such as patents and taxes in ways that make customer satisfaction, customer retention, and employee satisfaction (Nechaev & Antipina, 2016). The impact of taxes can direct affect pricing of service varies on market or location, which can have a significant influence on efforts of employ performance. Regulatory environments that have taken the form of host political interference can be a driver of modifications in health establishments' operations, policies and strategies in ways that can negate the benefits of performance.

Additionally, regulatory factors of health establishment such as assigning employees or customers dress the specified uniforms and have a health check before using the service influencing customers have confident and satisfied with the service with international standards, clear procedures, safety and including time's flexibility of services. It influences a customer need that is a part of regulatory factors had highest affecting to extended market orientation factor.

Latent variable 3: Strategic Management (SM)

According to the research, the latent variable Strategic Management (SM) consist of 3 observe which are Analyzer, Defender, and Prospector with factor loading of 0.79, 0.53 and 0.46 respectively. The cause that made Analyzer was highest factor loading maybe Analyzer was combination of the strengths of the two strategies of Prospector and Defender by minimizes risk while maximizing profit performance. The Analyzer will concern developing new services and markets opportunities only after their feasibility has been verified. The new products strategic will assist attention of customer, made them interest, feel attentiveness, and want to experimental, these help directly to continuously growth and developing of organization. Although the new market opportunities strategic also expand the target group of customer to increase market share. In conclusion strategic management is the name that managers

use to set up goal for helping to achieve more easily the direction through health establishment performance. In addition, it evaluates the mistakes and lists by actions when managers provide new services, promotions and information's attractiveness to customers. Strategic management can be used in various situations such as prospector's strategy will use to find new or expanding market, creating product differentiation. Analyzer strategy uses when customers come to use service and advice how to develop health establishment performance. Defender strategy is to use when health establishment need to maintain their uniqueness or traditional standard.

Latent variable 4: Health Establishment Performance (PER)

According to the research, the latent variable Health Establishment Performance (PER) consist of 2 observe which are Employee satisfaction and Customer satisfaction with factor loading of 0.80 and 0.60 respectively. These mean the employee satisfaction was important than customer satisfaction due to type of business as health establishment has few expert employees (skill and characteristic), but plenty of customer with low competition in business. To keep employees satisfied and protected from resignation, or moving to other workplace is the best method to preserve performance.

Issue 3: Many well-known observe indicators are dsicard from latent variable.

In this research many observe indicator of latent variable were discard in process of elimination by KMO statistic method to reduce un/low-relate observe, which will make error in equation model. These cause the structure equation model of Health establishment performance in Bangkok have uniq latent variable that diffent from normal marketing theory. The removed observe indicator can be described separately by latent variables as follow;

Removed observed in latent 1: Extended Market Orientation (EMO)

In this research latent Extended Market Orientation (EMO) has only 4 indicators consist of Regulatory Factor (RE), Customer (CUS), Supplier factor loading (SU) and Social Cultural Trends (SO), which discard 2 factors of Competition (CO) and Macroeconomic Environment (MA) in EFA process which is opposed to the

theory that Competition can have an important influence on performance, with was activity by business adversaries attempting to gain competitive advantage (Arrfelt et al., 2015; Prajogo, 2016), and most important obstacles to performance (Cucculelli & Bettinelli, 2015). In context of Thailand, the cause that competition factor was exclude from SEM, maybe could happen from the management did not give importance to the development of a competitive in medical institution. Currently the competitive situation of Thai health establishment in Bangkok was not high due to some health establishment in Thai was classified as a public or private hospital (spa included), stand-alone health establishment, health establishment in department and health establishment communities. They clearly focus their target group of service as low-mid, mid-high and Luxury customer identified from hospital and spa readiness and service rates. These market segmentation of health establishment resulted in no need to compete over customer or low competition in the business. Management does not need to focus on the issues of investigates competitor's information or customers' behavior include management practices to facilitate customer satisfaction as information seeking, training, and rewards and recognition. In the case of unimportant Macroeconomic Environment factor maybe happen because "industry growth rates" of health establishment was stable growth due to reason as CO factor by market segmentation of health establishment and Thailand will have more elderly every year or step into elderly society which help growth in number of customer. In addition, the "foreign exchange rates" was another unimportant in health establishment because mostly of customer come from Thailand and service was not related to import or export.

Removed observed in latent 2: Health Establishment Performance (PER)

Another latent which has excluded factor form theory was Health Establishment Performance (PER), which reduce from 3 factor to 2 factor consist of Customer Retention (CUS_RET), and Employee Satisfaction (EMP_SAT). The Customer Satisfaction (CUS_SAT) was exclude form theory by EFA method which is opposed to the theory that market orientation has a strong positive relationship enhances customer satisfaction (Degbey, 2015; Katsikeas et al., 2016) which means Customer satisfaction is one of the result from operation or Performance that happens

from market orientation (Al-Refaie, 2015). In addition, Chang, Wong and Fang (2014) state that complete customer satisfaction is the key to securing customer loyalty and generating long-term financial performance. This maybe could happen because customer satisfaction and customer retention has very similar respond effect to allow customers to re-purchasing the service, but customer retention has more relation to Health Establishment Performance as figure 4.5, which customer satisfaction have only 0.11 coefficient of determination compare to 2.21 of customer retention.

5.4 Suggestion

1. Further research can study causal relation model of market orientation and extended market orientation affecting strategic management through performance other organizations in the tourism industry
2. Future research of Health Establishment Performance should develop from basic factor as market orientation and extend market orientation, which should be weight to develop in the market orientation factor first.
3. The alternative way to increase Health Establishment Performance is improving Strategic Management in Prospector, Analyzer, and Defender, which should focus on Prospector factor.
4. In the further research, the researcher needs to add the mediator which may possibly influence performance.

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Appendix A:

Item objective congruence (IOC)

Market Orientation – Generation	Agree +1	Neutral 0	Disagree -1
<p>1. In this health establishment, manager asks customers at least once a month to find out what services they will need in the future.</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการได้สอบถามการใช้บริการกับลูกค้าอย่างน้อยเดือนละครั้งเพื่อหาว่าบริการใดที่ลูกค้าต้องการในอนาคต</p>	+1	0	-1
<p>2. Manager often talks with or survey with relative from customer who can influence from services in this health establishment for customers in the future.</p> <p>ผู้จัดการมักพูดคุยหรือสำรวจความต้องการผู้ที่ลูกค้าพามา สามารถมีอิทธิพลต่อการใช้บริการสถานประกอบการเพื่อสุขภาพลูกค้าในอนาคต</p>	+1	0	-1
<p>3. Receptionist from this health establishment interacts directly with customers to learn how to serve them better.</p> <p>พนักงานต้อนรับมีปฏิสัมพันธ์โดยตรงกับลูกค้าเพื่อเรียนรู้วิธีการให้บริการได้ดียิ่งขึ้น</p>	+1	0	-1

<p>4. Therapist from this health establishment interacts directly with customers to learn how to serve them better.</p> <p>นักบำบัดมีปฏิสัมพันธ์โดยตรงกับลูกค้าเพื่อเรียนรู้วิธีการให้บริการได้ดียิ่งขึ้น</p>	+1	0	-1
<p>5. Manager finds changes in customers' behavior that use services but it cannot suddenly serve customer's needs.</p> <p>ผู้จัดการค้นพบการเปลี่ยนแปลงของพฤติกรรมการใช้บริการสถานประกอบการเพื่อสุขภาพแต่ยังไม่สามารถตอบสนองความต้องการของลูกค้าได้ทัน</p>	+1	0	-1
<p>6. In health establishment, manager investigates information on competitors.</p> <p>ในสถานประกอบการเพื่อสุขภาพ ผู้จัดการสืบหาข้อมูลเกี่ยวกับคู่แข่งอย่างน้อยเพียงใด</p>	+1	0	-1
<p>7. Manager detects changes technology in health establishment.</p> <p>ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลงเทคโนโลยีสถานประกอบการเพื่อสุขภาพ</p>	+1	0	-1
<p>8. Manager detects changes regulation in health establishment.</p> <p>ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลงกฎระเบียบในสถานประกอบการเพื่อสุขภาพ</p>	+1	0	-1

Market Orientation – Dissemination	Agree +1	Neutral 0	Disagree -1
1. Manager has interdepartmental meetings between receptionist and therapist at least once a quarter to discuss market trends and developments. ผู้จัดการมีการประชุมระหว่างพนักงานต้อนรับ และ นักบำบัดอย่างน้อยไตรมาสละครั้งเพื่อหารือเกี่ยวกับแนวโน้มของตลาดและการพัฒนา	+1	0	-1
2. It has sending information for health establishment through customers. มีการส่งข้อมูลข่าวสารของสถานประกอบการเพื่อสุขภาพไปให้ลูกค้า	+1	0	-1
3. Other departments in health establishment inform trends of services information to manager แผนกต่างๆในสถานประกอบการเพื่อสุขภาพพบมีการแจ้งข้อมูลแนวโน้มการใช้บริการแก่ผู้จัดการ	+1	0	-1

Market Orientation – Responsiveness	Agree +1	Neutral 0	Disagree -1
1. Principles of market segmentation and customer behavior drive new service development in this health establishment. หลักการของการแบ่งส่วนตลาดและพฤติกรรมของลูกค้าผลักดันการพัฒนาบริการใหม่ ในสถานประกอบการเพื่อสุขภาพ	+1	0	-1
2. Manager tends to ignore changes in customers' service needs for a reason. ผู้จัดการจึงอาจละเว้นการเปลี่ยนแปลงในความต้องการของบริการของลูกค้าด้วยเหตุผลส่วนตัว	+1	0	-1
3. Manager periodically reviews service development to ensure that services are in line with customer's needs.	+1	0	-1

ผู้จัดการประเมินการพัฒนาบริการเป็นระยะเพื่อให้มั่นใจว่าสอดคล้องกับสิ่งที่ลูกค้าต้องการ			
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Extended Market Orientation

Extended Market Orientation - Customer	Agree +1	Neutral 0	Disagree -1
1. Manager collects customers' need of using spa service by social media (Facebook, Line, and Instagram). (customers) ผู้จัดการ รวบรวมข้อมูลความต้องการการใช้บริการสปาของลูกค้าด้วยวิธีสื่อสังคม (เฟซบุ๊ก, ไลน์, อินสตาแกรม) (ลูกค้า)	+1	0	-1
2. Marketing personnel in health establishment spend time discussing customers' future needs with other functional departments. (customers) พนักงานฝ่ายการตลาดในสถานประกอบการเพื่อสุขภาพ ใช้เวลาพูดคุยเกี่ยวกับความต้องการในอนาคตของลูกค้ากับหน่วยงานอื่น ๆ (ลูกค้า)	+1	0	-1
3. Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately. (customers) ลูกค้ากล่าวถึงสถานประกอบการด้านสุขภาพในแง่ลบ ผู้จัดการจะตอบสนองต่อคำวิจารณ์ทันที (ลูกค้า)	+1	0	-1

Extended Market Orientation – Competition	Agree +1	Neutral 0	Disagree -1
<p>1. In health establishment, manager, receptionist and therapist are collecting competitor information. (competition)</p> <p>ในสถานประกอบการเพื่อสุขภาพมีเพียง ผู้จัดการ พนักงานต้อนรับ และ นักบำบัดรวบรวมข้อมูลคู่แข่ง (การแข่งขัน)</p>	+1	0	-1
<p>2. Manager has functional meetings very often to discuss market trends and service developments (competition)</p> <p>ผู้จัดการมีการประชุมเชิงปฏิบัติการเพื่อหารือเกี่ยวกับแนวโน้มของตลาด และการพัฒนาบริการเป็นประจำ (การแข่งขัน)</p>	+1	0	-1
<p>3. Manager tends to take longer than competitor does to respond to a change in regulatory policy. (competition)</p> <p>ผู้จัดการมีแนวโน้มที่จะใช้เวลานานกว่าคู่แข่งในการตอบสนองต่อการเปลี่ยนแปลงนโยบายด้านกฎระเบียบ (การแข่งขัน)</p>	+1	0	-1

Extended Market Orientation – Suppliers	Agree +1	Neutral 0	Disagree -1
<p>1. In health establishment, manager spends time with suppliers to learn more about spa products of suppliers. (suppliers)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการใช้เวลาอยู่กับคู่ค้าเพื่อเรียนรู้เพิ่มเติมเกี่ยวกับผลิตภัณฑ์สปา (คู่ค้า)</p>	+1	0	-1
<p>2. In health establishment, manager asks suppliers regularly for their assessment of spa product and service quality. (suppliers)</p> <p>ผู้จัดการสถานประกอบการเพื่อสุขภาพประเมินคู่ค้าเกี่ยวกับการบริการและ</p>	+1	0	-1

คุณภาพของผลิตภัณฑ์สปา (คู่ค้า)			
3. Manager in health establishment gives opportunity for new suppliers even though manager interacts with existing ones. (suppliers) ผู้จัดการสถานประกอบการเพื่อสุขภาพเปิดโอกาสให้คู่ค้าใหม่ โดยยังคงมีปฏิสัมพันธ์กับคู่ค้ารายปัจจุบันอยู่ (คู่ค้า)	+1	0	-1

Extended Market Orientation - Regulatory Factors	Agree +1	Neutral 0	Disagree -1
1. Manager reviews the effect of changes of customers (e.g., regulation of service in health establishment environment on customers) ผู้จัดการตรวจสอบผลกระทบจากลูกค้า เช่น กฎระเบียบการใช้บริการสถานประกอบการเพื่อสุขภาพของลูกค้า (ปัจจัยด้านกฎระเบียบ)	+1	0	-1
2. Manager in health establishment shares information spa service and product for human resources from other departments. (regulatory factors) ผู้จัดการสปามีการให้ความรู้ด้านการใช้บริการสปาและผลิตภัณฑ์แก่บุคลากรในแผนกต่างๆ (ปัจจัยด้านกฎระเบียบ)	+1	0	-1
3. The activities of all departments in health establishment are well coordinated. (regulatory factors) กิจกรรมของหน่วยงานต่าง ๆ ในหน่วยสถานประกอบการเพื่อสุขภาพ นี้มีการประสานงานกันดี (ปัจจัยด้านกฎระเบียบ)	+1	0	-1

Extended Market Orientation - Social Cultural Trends	Agree +1	Neutral 0	Disagree -1
<p>1. In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment. (Social)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการรวบรวมและประเมินข้อมูลเกี่ยวกับ ผลิตภัณฑ์ที่ช่วยรักษาสิ่งแวดล้อม ซึ่งอาจส่งผลต่อสถานประกอบการเพื่อสุขภาพ (สังคม)</p>	+1	0	-1
<p>2. In health establishment, manager collects and evaluates information of emerging lifestyles that might affect health establishment. (Social)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการรวบรวมและประเมินข้อมูลเกี่ยวกับ ผู้บริโภคยุคใหม่ ซึ่งอาจส่งผลต่อสถานประกอบการเพื่อสุขภาพ (สังคม)</p>	+1	0	-1
<p>3. Even manager came up with a great marketing plan; manager probably would not be able to implement it in a timely use. (social)</p> <p>แม้ว่าผู้จัดการจะมีแผนการตลาดที่ยอดเยี่ยม แต่ผู้จัดการอาจจะไม่สามารถใช้งานได้ตามทันเวลา (สังคม)</p>	+1	0	-1

Extended Market Orientation - Macroeconomic Environment	Agree +1	Neutral 0	Disagree -1
<p>1. In health establishment, manager frequently collects and evaluates exchange rate (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการมักรวบรวมและประเมินข้อมูลอัตราแลกเปลี่ยนเงิน (เศรษฐศาสตร์มหภาค)</p>	+1	0	-1
<p>2. In health establishment, manager frequently collects and evaluates industry growth rate. (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการมักรวบรวมและประเมินข้อมูลอัตราการเติบโตของอุตสาหกรรมสถานประกอบการเพื่อสุขภาพ (เศรษฐศาสตร์มหภาค)</p>	+1	0	-1
<p>3. In health establishment, manager maintains contacts with officials of government (e.g., Ministry of Public Health) in order to collect and evaluate pertinent information. (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการจะติดต่อกับเจ้าหน้าที่ของหน่วยงานรัฐบาล (เช่นกระทรวงสาธารณสุข) เพื่อรวบรวมและประเมินข้อมูลที่เกี่ยวข้อง (เศรษฐศาสตร์มหภาค)</p>	+1	0	-1

Strategic management

Prospector	Agree +1	Neutral 0	Disagree -1
<p>1. Health establishment sacrifices short-term profitability to gain more market share.</p> <p>สถานประกอบการเพื่อสุขภาพยอมขาดทุนกำไร เพื่อที่จะสร้างฐานลูกค้าเพิ่มขึ้น</p>	+1	0	-1
<p>2. Manager strives to be one of the top three for health establishment in markets.</p> <p>ผู้จัดการมุ่งมั่นที่จะเป็นหนึ่งในสามอันดับแรกของ สถานประกอบการเพื่อสุขภาพ ในตลาด</p>	+1	0	-1
<p>3. Manager puts a lot of emphasis on building relationships with major customers.</p> <p>ผู้จัดการให้ความสำคัญกับการสร้างความสัมพันธ์กับลูกค้ารายใหญ่</p>	+1	0	-1
<p>4. Manager has a strong tendency to support marketing activities tending to increase customers</p> <p>ผู้จัดการมีแนวโน้มที่จะสนับสนุนกิจกรรมทางการตลาดที่มีแนวโน้มสร้างลูกค้าเพิ่มขึ้นได้</p>	+1	0	-1

Analyzer	Agree +1	Neutral 0	Disagree -1
1. Manager is usually the first ones to introduce various services to customers. ผู้จัดการมักจะเป็นคนแรกที่แนะนำบริการต่างๆไปยังลูกค้า	+1	0	-1
2. Manager adopts a rather conservative view when making major decisions ผู้จัดการยึดติดกับมุมมองที่ค่อนข้างอนุรักษ์นิยมเมื่อมีการตัดสินใจที่สำคัญ	+1	0	-1
3. When confronted with a major decision, manager typically comprehensive analyses of the health establishment situations faced เมื่อเผชิญหน้ากับการตัดสินใจที่สำคัญผู้จัดการมักจะทำการวิเคราะห์สถานการณ์ที่ครอบคลุมทุกด้าน	+1	0	-1
4. Manager tends to be risk averse. ผู้จัดการมีแนวโน้มที่จะไม่เสี่ยง	+1	0	-1

Defender	Agree +1	Neutral 0	Disagree -1
1. Manager frequently uses price cutting to increase market share. ผู้จัดการมักใช้การตัดราคาเพื่อเพิ่มส่วนแบ่งการตลาด	+1	0	-1
2. Manager possesses a considerable degree of bargaining power of supplier. ผู้จัดการมีอำนาจในการต่อรองกับคู่ค้า	+1	0	-1
3. Manager tends to catch customer group on the long term than on the short term. ผู้จัดการมีแนวโน้มที่จะมุ่งเน้นการจับกลุ่มลูกค้าในระยะยาวมากกว่าในระยะสั้น	+1	0	-1

Health establishment performance

Customer satisfaction	Agree +1	Neutral 0	Disagree -1
1. Therapist is friendly with customers นักบำบัดมีความเป็นมิตรต่อลูกค้า	+1	0	-1
2. Receptionist is friendly with customers พนักงานต้อนรับ มีความเป็นมิตรต่อลูกค้า	+1	0	-1
3. Health establishment has decorated reception and service area สถานประกอบการเพื่อสุขภาพ มีการตกแต่งของพื้นที่ต้อนรับ และพื้นที่ให้บริการ	+1	0	-1
4. Health establishment has ambiance of the reception area สถานประกอบการเพื่อสุขภาพ มีบรรยากาศต้อนรับ	+1	0	-1
5. Health establishment has convenient location สถานประกอบการเพื่อสุขภาพมีที่ตั้งสะดวก	+1	0	-1
6. In health establishment has a good quality of service comparing to competitors สถานประกอบการเพื่อสุขภาพมีคุณภาพและบริการที่ดีกว่าเมื่อเปรียบเทียบกับคู่แข่ง	+1	0	-1

Customer retention	Agree +1	Neutral 0	Disagree -1
1. Customers say positive things about this health establishment to others. ลูกค้าพูดในเชิงบวกเกี่ยวกับสถานประกอบการเพื่อสุขภาพที่นี้ต่อผู้อื่น	+1	0	-1
2. Customers would highly recommend the health establishment to their friends and family ลูกค้าแนะนำเกี่ยวกับสถานประกอบการเพื่อสุขภาพอย่างแน่นอนกับเพื่อนและครอบครัวของฉัน	+1	0	-1
3. Customers will come back this health establishment again ลูกค้ามีความมั่นใจจะกลับมาที่สถานประกอบการเพื่อสุขภาพนี้อีกครั้ง	+1	0	-1
4. Customers really impress staying in this health establishment. ลูกค้าประทับใจเป็นอย่างมากในการอยู่ในสถานประกอบการเพื่อสุขภาพ	+1	0	-1
5. Customers consider this health establishment to be my first choice when customer travels next time. ลูกค้าพิจารณาสถานประกอบการเพื่อสุขภาพแห่งนี้เป็นทางเลือกแรก ที่ลูกค้าจะใช้ในครั้งต่อไป	+1	0	-1

Employee Satisfaction	Agree +1	Neutral 0	Disagree -1
1. Employee receives income with a fair amount for the work. พนักงานได้รับค่าตอบแทนอย่างยุติธรรม	+1	0	-1
2. Employee receives the recognition when he works. พนักงานได้รับการยกย่องในการปฏิบัติงาน	+1	0	-1
3. Employee satisfies in health establishment that he works with. พนักงานพึงพอใจต่อสถานประกอบการเพื่อสุขภาพที่ตัวเองทำงานอยู่	+1	0	-1
4. Employees compare work progress between this health establishment to other. พนักงานเปรียบเทียบความก้าวหน้าของงานระหว่างสถานประกอบการเพื่อสุขภาพที่นี่กับที่อื่น	+1	0	-1
5. Employees have too much to do at work. พนักงานมีความรับผิดชอบในตำแหน่งงานมากเกินไป	+1	0	-1
6. Employees enjoy their coworkers. พนักงานสามารถเข้ากับเพื่อนร่วมงานได้ดี	+1	0	-1
7. Employees can express opinion to manager. พนักงานสามารถเสนอความคิดเห็นต่อผู้จัดการได้	+1	0	-1

Appendix B:

Try out 30

No	Names	Address	No.of licenses
1	Ruendara Spa	95/1 Nongkaem Sub-District, Nongkaem District, Bangkok 10160	100100001
2	Refresh @ 24 Spa	43Klongton Sub District, Klongtoey District, Bangkok 10110	100100002
3	Harnn Heritage Spa	4,4/5 Patumwan Sub-District, Patumwan District, Bangkok 10330	100100003
4	Jorjia Spa	1209,1211 Suanluang Sub-District, Suanluang District, Bangkok 10250	100100004
5	Elemis Spa	159 Lumpini Sub-District, Patumwan District, Bangkok 10330	100100005
6	Breeze Spa	847 Phayathai Sub-District, Ratchatewi District, Bangkok 10400	100100006
7	Modan Spa	23/57-60 Huaikhwang Sub-District, Bangkapi District, Bangkok 10320	100100007
8	Avani Spa	257 Samre Sub-District, Thonburi District, Bangkok 10600	100100008
9	The Spa	10/1 Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100100009
10	My Spa	246 Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100100010
11	Lek@BTS	402 Praram 1 Rd, Phatumwan Sub-District, Phatumwan District, Bangkok 10330	100200090
12	Lek Foot	412/3 Soi SiamSquare 1, Pharam 1 Rd,	100200091

No	Names	Address	No.of licenses
	Massage	Phatumwan Sub-District, Phatumwan District, Bangkok 10330	
13	Pharatee Massage	1907/1 Soi Sukhumvit 73, Sukhumvit Rd, North Phakanong Sub-District, Wathana District, Bangkok	100200092
14	Ban House Massage	2/48 Soi Sribumpen, Pharam 4 Rd, Thungmahamek Sub-District, Sathorn District, Bangkok 10120	100200004
15	Anne Se Monin Spa	188 Silom Rd, Suriyawong Sub-District, Bangrak District, Bangkok 10500	100200001
16	Star Massge	348 Soi Lasalle 20, Lasalle Rd, Bangna Sub- District, Bangna District, Bangkok 10260	100200006
17	Whawa Massage	17 Soi Ramkhamhaeng 24 Yak 28, Huamark Sub- District, Bangkok District, Bangkok 10240	100200008
18	Magic Hand Bangkok Massage	21/35 Soi Ngamdupee, Pharam 4 Rd, Thungmahamek Sub-District, Sathorn District, Bangkok 10700	100200002
19	Bua Pinnacle Thai Massage	5/27 Soi Ngamdupee, Praram 4 Rd, Thungmahamek Sub-District, Sathorn District, Bangkok 10700	100200003
20	Thadsanee Massage	4 Sukhumvit 4 Rd, Klongtoey Sub District, Klongtoey District, Bangkok 10110	100200005
21	Chunseng Massage	304/5 Phayathai Rd, Phetburi Sub-District, Ratchatewi District, Bangkok 10400	100200009
22	Ram65 Massage	278/180 Ladprao 122 Rd, Plubpla Sub-District, Wangthonglang District, Bangkok 10310	100200079
23	Yama Herbal Massage	53 Soi Thonglor55, Sukhumvit 55 Rd, North Klongton Sub-District, Wathana District, Bangkok	100200080

No	Names	Address	No.of licenses
24	Orchid Massage	12 Decho Rd, Suriyawong Sub-District, Bangrak District, Bangkok 10500	100200081
25	Charlie Massage	203 Khaosan Rd, Taladyod Sub-District, Pranakorn District, Bangkok 10200	100200082
26	Nuad Gaya	1213/157 Soi 8, Ladprao 94 Rd, Plubpla Sub- District, Wangthonglang District, Bangkok	100200083
27	Reuan Mintra Massage	2 , Soi Phetkasem 55/3, Phetkasem Rd, Laksong Sub-District, Bangkae District, Bangkok 10160	100200084
28	Gold Hand Thai Massage	45/2 Soi Kasemsan 2, Pharam 1 Rd, Wangmai Sub-District, Patumwan District, Bangkok 10330	100200085
29	Hana Massage	265/8 Sukhumvit Rd, Klongton Sub-District, Klongtoey District, Bangkok 10110	100200086
30	Sabai Thai Massage	2/16 Soi Sribumpen, Sathorn 1 Rd, Thungmahamek Sub-District, Sathorn District, Bangkok 10120	100200087

Appendix C:

Questionnaire

“A Causal Relation Model of Market Orientation and Extended Market Orientation Factors Affecting Strategic Management through Health Establishment Performance in Bangkok, Thailand”

My name is Wirut Nakkhasin. I am a Ph.D. student at National Institute of Development Administration (NIDA), School of Tourism Management. As part of the completion of my degree, I am conducting research regarding **“A Causal Relation Model of Market Orientation and Extended Market Orientation Factors Affecting Strategic Management through Health Establishment Performance in Bangkok, Thailand”**. To help the researcher achieve this, I would appreciate you taking 10-15 minutes of your valuable time to complete this questionnaire. Your information is greatly essential for analysis and will be kept confidential and used for research purposes only.

Thank you very much for your participation.

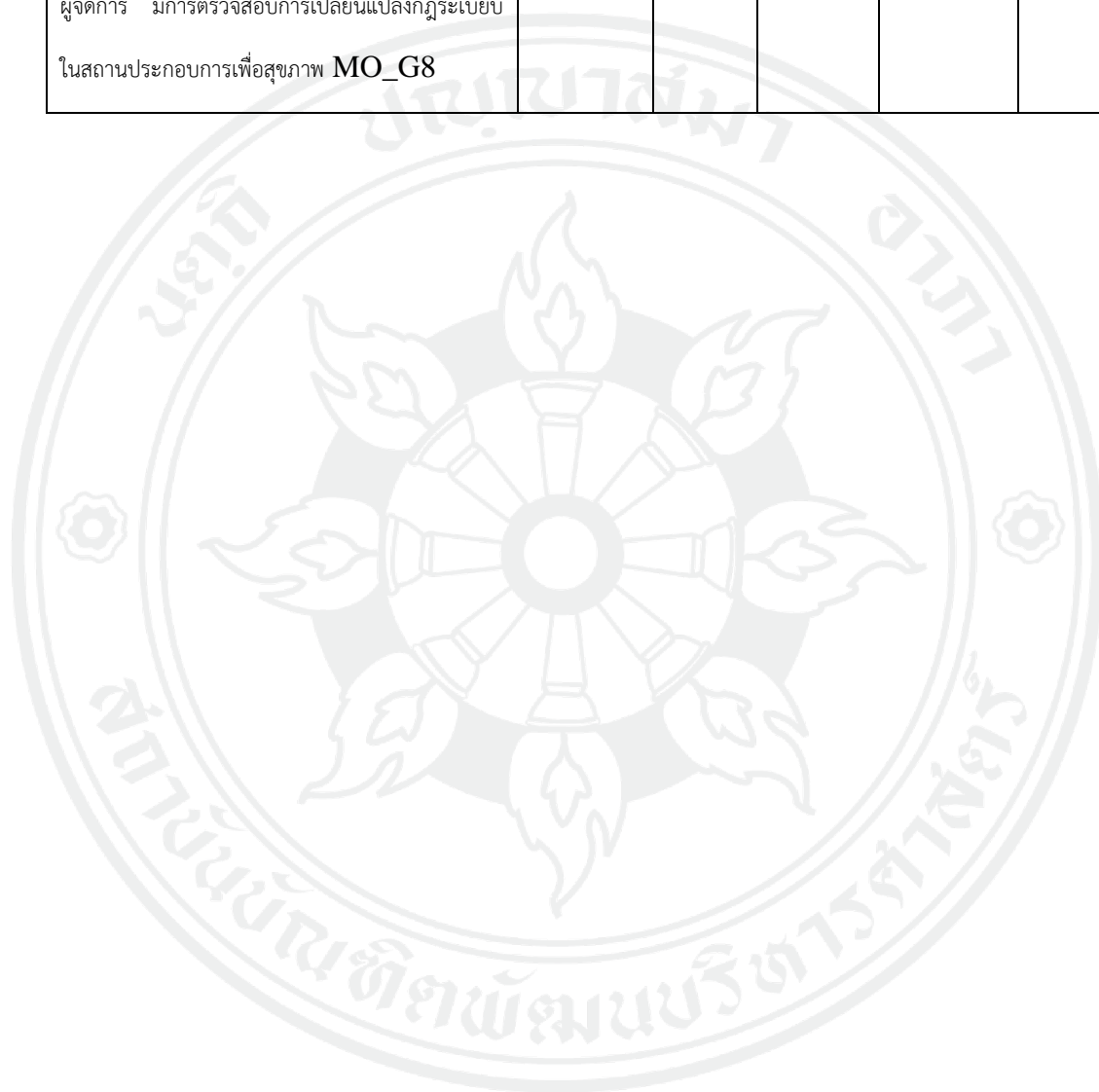
Questionnaire

Market orientation

Market orientation - Generation	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. In this health establishment, manager asks customers at least once a month to find out what services they will need in the future.</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ ผู้จัดการได้สอบถามการใช้บริการกับลูกค้าอย่างน้อยเดือนละครั้งเพื่อหาว่าบริการใดที่ลูกค้าต้องการในอนาคต</p> <p>MO_G1</p>	5	4	3	2	1
<p>2. Manager often talks with or survey with relative from customer who can influence from services in this health establishment for customers in the future.</p> <p>ผู้จัดการมักพูดคุยหรือสำรวจความต้องการที่ลูกค้าพามา สามารถมีอิทธิพลต่อการใช้บริการสถานประกอบการเพื่อสุขภาพลูกค้าในอนาคต</p> <p>MO_G2</p>	5	4	3	2	1
<p>3. Receptionist from this health establishment interacts directly with customers to learn how to serve them better.</p>	5	4	3	2	1

พนักงานต้อนรับมีปฏิสัมพันธ์โดยตรงกับลูกค้าเพื่อเรียนรู้วิธีการให้บริการได้ดี ยิ่งขึ้น MO_G3					
4. Therapist from this health establishment interacts directly with customers to learn how to serve them better. นักบำบัดมีปฏิสัมพันธ์โดยตรงกับลูกค้าเพื่อเรียนรู้วิธีการให้บริการได้ดียิ่งขึ้น MO_G4	5	4	3	2	1
5. Manager finds changes in customers' behavior that use services but it cannot suddenly serve customer's needs. ผู้จัดการค้นพบการเปลี่ยนแปลงของพฤติกรรมการใช้บริการสถานประกอบการเพื่อสุขภาพแต่ยังไม่สามารถตอบสนองความต้องการของลูกค้าได้ทัน MO_G5	5	4	3	2	1
6. In health establishment, manager investigates information on competitors. ในสถานประกอบการเพื่อสุขภาพ ผู้จัดการสืบหาข้อมูลเกี่ยวกับคู่แข่งมากน้อยเพียงใด MO_G6	5	4	3	2	1
7. Manager detects changes technology in health establishment.	5	4	3	2	1

ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลงเทคโนโลยี สถานประกอบการเพื่อสุขภาพ MO_G7					
8. Manager detects changes regulation in health establishment. ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลงกฎระเบียบ ในสถานประกอบการเพื่อสุขภาพ MO_G8	5	4	3	2	1



Market Orientation - Dissemination	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. Manager has interdepartmental meetings between receptionist and therapist at least once a quarter to discuss market trends and developments.</p> <p>ผู้จัดการมีการประชุมระหว่างพนักงานต้อนรับ และ นักบำบัดอย่างน้อยไตรมาสละครั้งเพื่อหารือเกี่ยวกับแนวโน้มของตลาดและการพัฒนา MO_D1</p>	5	4	3	2	1
<p>2. It has sending information for health establishment through customers.</p> <p>มีการส่งข้อมูลข่าวสารของสถานประกอบการเพื่อสุขภาพไปให้ลูกค้า MO_D2</p>	5	4	3	2	1
<p>3. Other departments in health establishment inform trends of services information to manager</p> <p>แผนกต่างๆในสถานประกอบการเพื่อสุขภาพพบมีการแจ้งข้อมูลแนวโน้มการใช้บริการแก่ผู้จัดการ MO_D3</p>	5	4	3	2	1

Market Orientation – Responsiveness	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. Principles of market segmentation and customer behavior drive new service development in this health establishment.</p> <p>หลักการของการแบ่งส่วนตลาดและพฤติกรรมของลูกค้าผลักดันการพัฒนาบริการใหม่ ในสถานประกอบการเพื่อสุขภาพ MO_R1</p>	5	4	3	2	1
<p>2. Manager tends to ignore changes in customers' service needs for a reason.</p> <p>ผู้จัดการจึงอาจละเว้นการเปลี่ยนแปลงในความต้องการของบริการของลูกค้าด้วยเหตุผลส่วนตัว MO_R2</p>	5	4	3	2	1
<p>3. Manager periodically reviews service development to ensure that services are in line with customer's needs.</p> <p>ผู้จัดการประเมินการพัฒนาบริการเป็นระยะเพื่อให้มั่นใจว่าสอดคล้องกับสิ่งที่ลูกค้าต้องการ MO_R3</p>	5	4	3	2	1

Extended Market Orientation

Extended Market Orientation – Customer	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. Manager collects customers' need of using spa service by social media (Facebook, Line, Instragram). (customers)</p> <p>ผู้จัดการรวบรวมข้อมูลความต้องการการใช้บริการสปาของลูกค้าด้วยวิธีสื่อสังคม (เช่น เฟสบุ๊ก, ไลน์, อิน스타그램)</p> <p>EMO_C1</p>	5	4	3	2	1
<p>2. Marketing personnel in health establishment spend time discussing customers' future needs with other functional departments. (customers)</p> <p>พนักงานฝ่ายการตลาดในสถานประกอบการเพื่อสุขภาพ ใช้เวลาพูดคุยเกี่ยวกับความต้องการในอนาคตของลูกค้ากับหน่วยงานอื่น ๆ (ลูกค้า)</p> <p>EMO_C2</p>	5	4	3	2	1
<p>3. Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately. (customers)</p> <p>ลูกค้ากล่าวถึงสถานประกอบการด้าน</p>	5	4	3	2	1

สุขภาพในแง่ลบ ผู้จัดการจะตอบสนองต่อ คำวิจารณ์ทันที (ลูกค้า) EMO_C3					
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Extended Market Orientation – Competition	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
1. In health establishment, manager, receptionist and therapist are collecting competitor information. (competition) ในสถานประกอบการเพื่อสุขภาพมีเพียง ผู้จัดการ พนักงานต้อนรับ และ นักบำบัด รวบรวมข้อมูลคู่แข่ง (การแข่งขัน) EMO_CO1	5	4	3	2	1
2. Manager has functional meetings very often to discuss market trends and service developments (competition) ผู้จัดการมีการประชุมเชิงปฏิบัติการเพื่อ หารือเกี่ยวกับแนวโน้มของตลาดและการ พัฒนาบริการเป็นประจำ (การแข่งขัน) EMO_CO2	5	4	3	2	1
3. Manager tends to take longer than competitor does to respond to a change in regulatory policy. (competition)	5	4	3	2	1

<p>ผู้จัดการมีแนวโน้มที่จะใช้เวลานานกว่า</p> <p>คู่แข่งในการตอบสนองต่อการ</p> <p>เปลี่ยนแปลงนโยบายด้านกฎระเบียบ</p> <p>(การแข่งขัน) EMO_CO3</p>					
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Extended Market Orientation – Suppliers	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. In health establishment, manager spends time with suppliers to learn more about spa products of suppliers. (suppliers)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้</p> <p>ผู้จัดการใช้เวลาอยู่กับคู่ค้าเพื่อเรียนรู้เพิ่มเติมเกี่ยวกับผลิตภัณฑ์สปา (คู่ค้า) EMO_S1</p>	5	4	3	2	1
<p>2. In health establishment, manager asks suppliers regularly for their assessment of spa product and service quality. (suppliers)</p> <p>ผู้จัดการสถานประกอบการเพื่อสุขภาพ</p> <p>ประเมินคู่ค้าเกี่ยวกับการบริการและคุณภาพของผลิตภัณฑ์สปา (คู่ค้า) EMO_S2</p>	5	4	3	2	1
3. Manager in health establishment	5	4	3	2	1

<p>gives opportunity for new suppliers</p> <p>even though manager interacts with existing ones. (suppliers)</p> <p>ผู้จัดการสถานประกอบการเพื่อสุขภาพ</p> <p>เปิดโอกาสให้ลูกค้าใหม่ โดยยังคงมี</p> <p>ปฏิสัมพันธ์กับลูกค้ารายปัจจุบันอยู่ (ลูกค้า)</p> <p>EMO_S3</p>					
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Extended Market Orientation - Regulatory Factors	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. Manager reviews the effect of changes of customers (e.g., regulation of service in health establishment environment on customers)</p> <p>ผู้จัดการตรวจสอบผลกระทบจากลูกค้า</p> <p>เช่น กฎระเบียบการใช้บริการสถานประกอบการเพื่อสุขภาพของลูกค้า</p> <p>(ปัจจัยด้านกฎระเบียบ) EMO_R1</p>	5	4	3	2	1
<p>2. Manager in health establishment shares information spa service and product for human resources from other departments. (regulatory factors)</p>	5	4	3	2	1

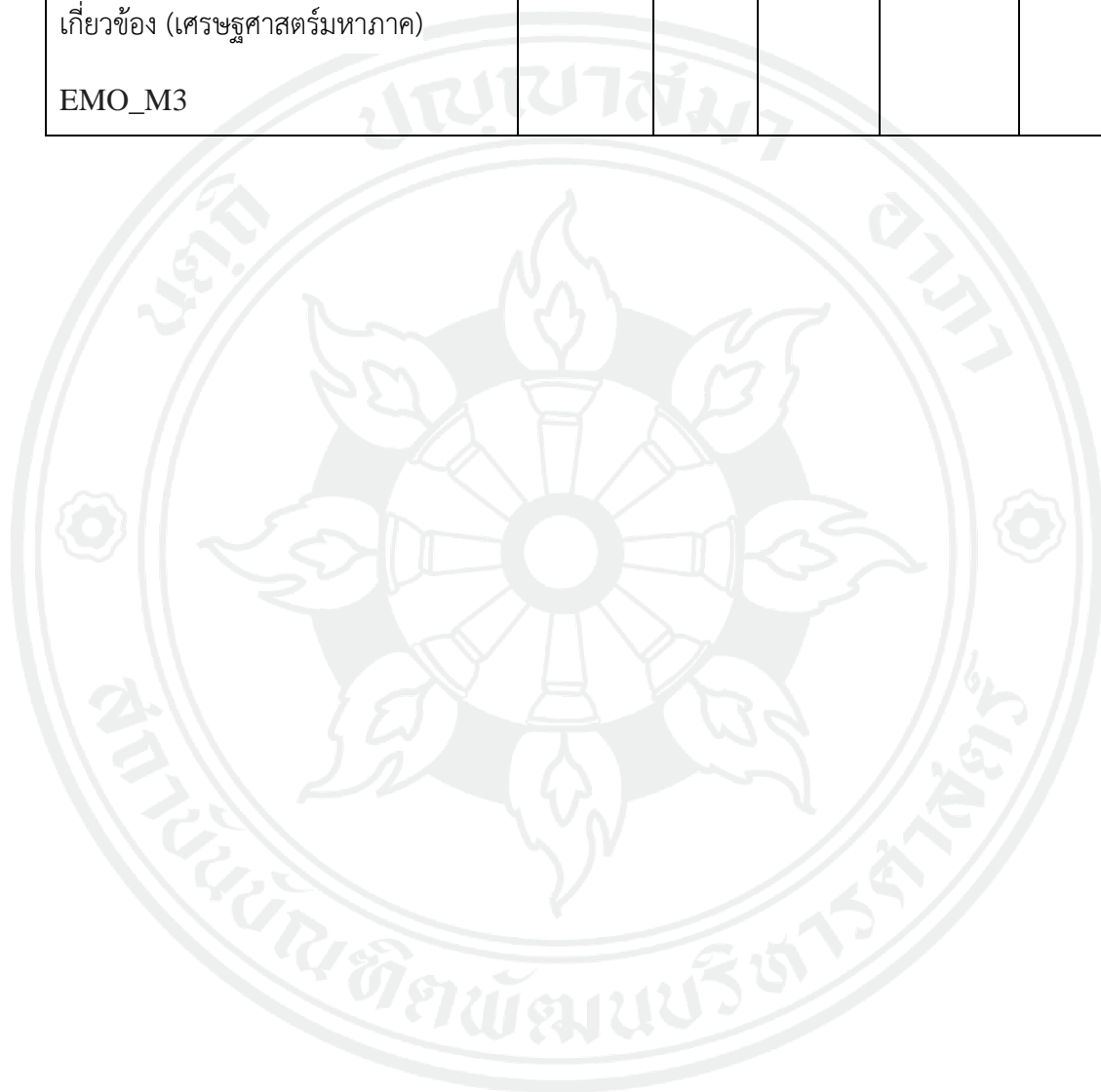
ผู้จัดการสปาให้มีการให้ความรู้ด้านการใช้ บริการสปาและผลิตภัณฑ์แก่บุคลากรใน แผนกต่างๆ (ปัจจัยด้านกฎระเบียบ) EMO_R2					
3. The activities of all departments in health establishment are well coordinated. (regulatory factors) กิจกรรมของหน่วยงานต่าง ๆ ในหน่วย สถานประกอบการเพื่อสุขภาพ นี้มีการ ประสานงานกันดี (ปัจจัยด้านกฎระเบียบ) EMO_R3	5	4	3	2	1

Extended Market Orientation - Social Cultural Trends	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
1. In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment. (Social) ในสถานประกอบการเพื่อสุขภาพนี้ ผู้จัดการรวบรวมและประเมินข้อมูล	5	4	3	2	1

<p>เกี่ยวกับ ผลิตภัณฑ์ที่ช่วยรักษา</p> <p>สิ่งแวดล้อม ซึ่งอาจส่งผลกระทบต่อสถาน</p> <p>ประกอบการเพื่อสุขภาพ (สังคม)</p> <p>EMO_SO1</p>					
<p>2. In health establishment, manager collects and evaluates information of emerging lifestyles that might affect health establishment.</p> <p>(Social)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้</p> <p>ผู้จัดการรวบรวมและประเมินข้อมูล</p> <p>เกี่ยวกับ ผู้บริโภคยุคใหม่ ซึ่งอาจส่งผลกระทบต่อ</p> <p>สถานประกอบการเพื่อสุขภาพ (สังคม)</p> <p>EMO_SO2</p>	5	4	3	2	1
<p>3. Even manager came up with a great marketing plan; manager probably would not be able to implement it in a timely use.</p> <p>(social)</p> <p>แม้ว่าผู้จัดการจะมีแผนการตลาดที่ยอดเยี่ยม</p> <p>แต่ผู้จัดการอาจจะไม่สามารถใช้</p> <p>งานได้ทันเวลา (สังคม) EMO_SO3</p>	5	4	3	2	1

Extended Market Orientation - Macroeconomic Environment	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
<p>1. In health establishment, manager frequently collects and evaluates exchange rate (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ ผู้จัดการมักรวบรวมและประเมินข้อมูล อัตราแลกเปลี่ยนเงิน (เศรษฐศาสตร์มหา ภาค) EMO_M1</p>	5	4	3	2	1
<p>2. In health establishment, manager frequently collects and evaluates industry growth rate. (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ ผู้จัดการมักรวบรวมและประเมินข้อมูล อัตราการเติบโตของอุตสาหกรรมสถาน ประกอบการเพื่อสุขภาพ (เศรษฐศาสตร์ มหภาค) EMO_M2</p>	5	4	3	2	1
<p>3. In health establishment, manager maintains contacts with officials of government (e.g., Ministry of Public Health) in order to collect and evaluate pertinent information. (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้</p>	5	4	3	2	1

<p>ผู้จัดการจะติดต่อกับเจ้าหน้าที่ของ หน่วยงานรัฐบาล (เช่นกระทรวงสาธารณสุข) เพื่อรวบรวมและประเมินข้อมูลที่เกี่ยวข้อง (เศรษฐศาสตร์มหภาค) EMO_M3</p>					
--	--	--	--	--	--



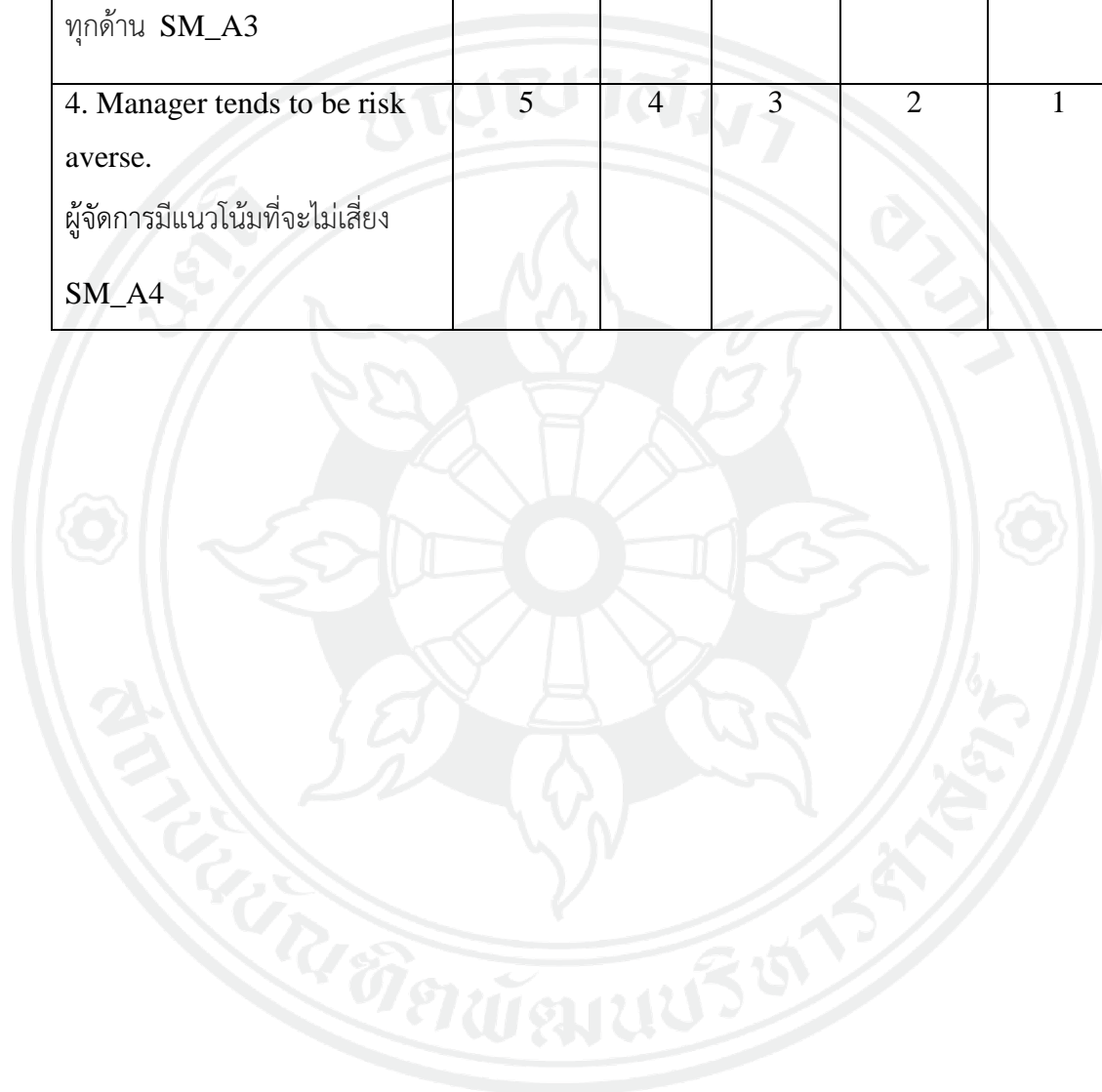
Strategic management

Prospector	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Health establishment sacrifices short-term profitability to gain more market share. สถานประกอบการเพื่อสุขภาพ ยอมขาดทุนกำไร เพื่อที่จะสร้างฐานลูกค้าเพิ่มขึ้น SM_P1	5	4	3	2	1
2. Manager strives to be one of the top three for health establishment in markets. ผู้จัดการมุ่งมั่นที่จะเป็นหนึ่งในสามอันดับแรกของ สถานประกอบการเพื่อสุขภาพ ในตลาด SM_P2	5	4	3	2	1
3. Manager puts a lot of emphasis on building relationships with major customers. ผู้จัดการให้ความสำคัญกับการสร้างความสัมพันธ์กับลูกค้ารายใหญ่ SM_P3	5	4	3	2	1
4. Manager has a strong tendency to support	5	4	3	2	1

marketing activities tending to increase customers ผู้จัดการมีแนวโน้มที่จะสนับสนุนกิจกรรมทางการตลาดที่มีแนวโน้มสร้างลูกค้าเพิ่มขึ้นได้ SM_P4					
---	--	--	--	--	--

Analyzer	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Manager is usually the first ones to introduce various services to customers. ผู้จัดการมักจะเป็นคนแรกที่แนะนำบริการต่างๆไปยังลูกค้า SM_A1	5	4	3	2	1
2. Manager adopts a rather conservative view when making major decisions ผู้จัดการยึดติดกับมุมมองที่ค่อนข้างอนุรักษ์นิยมเมื่อมีการตัดสินใจที่สำคัญ SM_A2	5	4	3	2	1
3. When confronted with a major decision, manager typically comprehensive analyses of the health establishment situations faced.	5	4	3	2	1

เมื่อเผชิญหน้ากับการตัดสินใจที่ สำคัญผู้จัดการมักจะทำการ วิเคราะห์สถานการณ์ที่ครอบคลุม ทุกด้าน SM_A3					
4. Manager tends to be risk averse. ผู้จัดการมีแนวโน้มที่จะไม่เสี่ยง SM_A4	5	4	3	2	1



Defender	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<p>1. Manager frequently uses price cutting to increase market share.</p> <p>ผู้จัดการมักใช้การตัดราคาเพื่อเพิ่มส่วนแบ่งการตลาด SM_D1</p>	5	4	3	2	1
<p>2. Manager possesses a considerable degree of bargaining power of supplier.</p> <p>ผู้จัดการมีอำนาจในการต่อรองกับคู่ค้า SM_D2</p>	5	4	3	2	1
<p>3. Manager tends to catch customer group on the long term than on the short term.</p> <p>ผู้จัดการมีแนวโน้มที่จะมุ่งเน้นการจับกลุ่มลูกค้าในระยะยาวมากกว่าในระยะสั้น SM_D3</p>	5	4	3	2	1

Health establishment performance

Customer satisfaction	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.Therapist is friendly with customers นักบำบัดมีความเป็นมิตรต่อลูกค้า PER_CS1	5	4	3	2	1
2.Receptionist is friendly with customers พนักงานต้อนรับ มีความเป็นมิตรต่อลูกค้า PER_CS2	5	4	3	2	1
3.Health establishment has decorate reception and service area สถานประกอบการเพื่อสุขภาพ มีการตกแต่งของพื้นที่ต้อนรับ และพื้นที่ให้บริการ PER_CS3	5	4	3	2	1
4.Health establishment has ambiance of the reception area สถานประกอบการเพื่อสุขภาพ มีบรรยากาศต้อนรับ PER_CS4	5	4	3	2	1
5.Health establishment has convenient location สถานประกอบการเพื่อสุขภาพมี	5	4	3	2	1

ที่ตั้งสะดวก PER_CS5					
6. In health establishment has a good quality of service comparing to competitors สถานประกอบการเพื่อสุขภาพมี คุณภาพและบริการที่ดีกว่าเมื่อ เปรียบเทียบกับคู่แข่ง PER_CS6	5	4	3	2	1

Customer retention	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Customers say positive things about this health establishment to others. ลูกค้าพูดในเชิงบวกเกี่ยวกับสถานประกอบการเพื่อสุขภาพที่ติดต่อผู้อื่น PER_CR1	5	4	3	2	1
2. Customers would highly recommend the health establishment to their friends and family. ลูกค้าแนะนำเกี่ยวกับสถานประกอบการเพื่อสุขภาพอย่างแน่นอนกับเพื่อนและครอบครัวของตน PER_CR2	5	4	3	2	1
3. Customers will come back this health establishment again ลูกค้ามีความมั่นใจจะกลับมาที่สถานประกอบการเพื่อสุขภาพนี้อีกครั้ง PER_CR3	5	4	3	2	1
4. Customers really impress staying in this health establishment.	5	4	3	2	1

<p>ลูกค้าประทับใจเป็นอย่างมากใน การอยู่ในสถานประกอบการเพื่อ สุขภาพ PER_CR4</p>					
<p>5. Customers consider this health establishment to be my first choice when customer travels next time. ลูกค้าพิจารณาสถาน ประกอบการเพื่อสุขภาพแห่งนี้ เป็นทางเลือกแรก ที่ลูกค้าจะใช้ ในครั้งต่อไป PER_CR5</p>	5	4	3	2	1

Employee Satisfaction	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. Employee receives income with a fair amount for the work. พนักงานได้รับค่าตอบแทนอย่างยุติธรรม PER_ES1	5	4	3	2	1
2. Employee receives the recognition when he works. พนักงานได้รับการยกย่องในการปฏิบัติงาน PER_ES2	5	4	3	2	1
3. Employee satisfies in health establishment that he works with. พนักงานพึงพอใจต่อสถานประกอบการเพื่อสุขภาพที่ตัวเองทำงานอยู่ PER_ES3	5	4	3	2	1
4. Employees compare work progress between this health establishment to other. พนักงานเปรียบเทียบความก้าวหน้าของงานระหว่างสถานประกอบการเพื่อสุขภาพที่นี่กับที่อื่น PER_ES4	5	4	3	2	1
5. Employees have too much to do at work. พนักงานมีความรับผิดชอบในตำแหน่งงานมากเกินไป PER_ES5	5	4	3	2	1
6. Employees enjoy their coworkers.	5	4	3	2	1

พนักงานสามารถเข้ากับเพื่อน ร่วมงานได้ดี PER_ES6					
7. Employees can express opinion to manager. พนักงานสามารถเสนอความ คิดเห็นต่อผู้จัดการได้ PER_ES7	5	4	3	2	1



Part 5: Personal Data**1. Gender**

- Male Female

2. Age:

- Less than 20 years 20- 30 years
 31-40 years 41-50 years
 More than 50 years

3. Income Range

- Less than 10,000 baht 10,000 - 20,000 baht
 20,001 - 30,000 baht 30,001 - 40,000 baht
 40,001 – 50,000 baht More than 50,000 baht

4. Education Level

- Less than Bachelor degree Bachelor degree
 Master degree Doctorate degree

5. Experience in health establishment

- Less than 2 year 2 – 5 years
 5 – 8 years 8 – 11years
 More than 11 years

ส่วนที่ 5: ข้อมูลส่วนบุคคล

1. เพศ

- ชาย หญิง

2. อายุ:

- น้อยกว่า 20 ปี 20-30 ปี

- 31-40 ปี 41-50 ปี

- มากกว่า 50 ปี

3. รายได้

- น้อยกว่า 10,000 บาท 10,000 - 20,000 บาท

- 20,001 - 30,000 บาท 30,001 - 40,000 บาท

- 40,001- 50,000 บาท มากกว่า 50,000 บาท

4.ระดับการศึกษา

- ต่ำกว่าปริญญาตรี ระดับปริญญาตรี

- ระดับปริญญาโท ระดับปริญญาเอก

5.ประสบการณ์ในธุรกิจสปา

- น้อยกว่า 2 ปี 2 - 5 ปี

- 5 - 8 ปี 8 - 11ปี

- มากกว่า 11 ปี

Appendix D:

Depth interview 30 managers & interview questionnaire

Qualitative in-depth interview profile

Interview with manager position and health establishment's name

No	Names	Address	No.of licenses
1	Divana Virtue Spa	10 Sriwiang Rd, Silom Sub-District, Bangrak District, Bangkok 10500	110009059
2	Spa Indra	120/126 Ratchaprarop Rd, Phayathai Sub-District, Ratchathewi District,	110002059
3	Raintree Spa	3/1 Soi Sukhumvit 11, Sukhumvit Rd, North Klongton Sub-District, Wathana District, Bangkok	110003158
4	Vareena Spa	259 North Klongtoey Sub-District, Wathana District, Bangkok	100100017
5	Spa Athenee	61 Vitayu Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110006958
6	Health Care and Spa	390/1/2/3 Srinakarin Rd, Nongbon Sub-District, Prawet District, Bangkok 10250	110008059
7	Apicha	904 Room B501 Seacon Square shopping Mall M.6 Srinakharin Rd. Nhongbon Sub-District, Pravet District, Bangkok 10250	2100017259
8	Punda Day Spa	112/8 Ratpattana Rd, Sapansoong Sub-District, Sapansoong District, Bangkok 10240	110006658
9	S I – Hom	302/1 Soi Klong Lumjeak School, Klongjan Sub-District, Bang Kapi District, Bangkok 10240	210032860
10	Le Spa	8/2 Rangnam Rd, Phayathai Sub-District, Ratchathewi District, Bangkok 10400	110001359

11	Bio Beaute' Day Spa	195/1,Ratchadapisak Rd,KhlongToei,Khlongtoei,Bangkok10110	100100014
12	Number one	1/7-8 Phetburiroad Sub-District, Ratchatewi District, Bangkok 10400	100200009
13	Yunomori Onsen and Spa	120/5 Soi Sukhumvit 26, Sukhumvit Rd, Khlong Ton Sub-District, Khlong Toei District, Bangkok	110005157
14	Garden Spa	1759/6 Phetkasem Rd, Laksong Sub-District, Bangkae District, Bangkok 10160	100100028
15	Prothitirat Spa	280,282 Putamonyhon 3 Rd, Bang Kae District, Bangkok 10160	100300005
16	Bandara Spa	9 Mhu 7 Bang Waek Rd, Bang Phai Sub-District, Bang Kae District, Bangkok 10160	110003659
17	Mallica	Sarin Palace Buildiing, Soi Jarunsaniswong 13, Bang Waek Rd, Bangkok 10160	100200126
18	Chivarom	North Bang Kae Rd Bang Kae District, Bangkok 10160	1002001267
19	Ban Thai	9 Chakrapong Rd, Talat yot Sub-District, Phra Nakhon District, Bangkok 10200	210011658
20	Chawan Massage 19	28/7 Soi Sukhumvit19, Sukhumvit Rd, North Klongtoey Sub-District, Wathana District, Bangkok 10110	100200088
21	Mazzy	109 Sapansoong Sub-District, Sapansoong District, Bangkok 10240	100200015
22	Ponnapat Massage	20 ,North Prakanong Sub-District, Wathana District, Bangkok 10110	100200059
23	SoSpa	2 North Sathorn Rd, Silom Sub-District, Bangrak District, Bangkok 10500	100100021
24	Kiritara Spa&Massage	55 Sukhaphiban5 Rd, Ao Ngoen Sub-District, Saimai District, Bangkok 10220	100100022
25	Anantara Spa	257/1-3 Charoennakhon Rd, Samre Sub-District,	100100023

		Thonburi District, Bangkok 10600	
26	Ruen Spa	1000 Bangbon Sub-District, Bangbon District, Bangkok 10150	100100025
27	Devarana Spa	946 Praram4 Rd, Silom Sub-District, Bangrak District, Bangkok 10500	100100026
28	Center Point Massage&Spa	2/16 Soi Sukhumvit24, Sukhumvit Rd, Klongton Sub-District, Klongtoey District, Bangkok 10110	100100027
29	Treasure Spa	426 Siamsquare Soi7, Praram1 Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	100100029
30	Pairin Spa	108/11 Soi Rambudtri, Khaosan Rd, Taladyod Sub-District, Pranakhon District, Bangkok 10200	100100015

Interview Questionnaire

“A Causal Relation Model of Market Orientation Factors Effecting Health Establishment Performance in Bangkok, Thailand”

Interview Questionnaire

Manager information

Part 1: Please indicate you job position
 your responsibility in this spa business ,
 educational background

Part 2: In your opinion, How to
 analyze market orientation regarding to 1.....
 3 factors as follows?
 1. Generation 2.....
 2. Dissemination
 3. Responsiveness 3.....

Part 3: In your opinion, How to
 analyze extended market orientation 1.....
 regarding to 6 factors as follows?
 1. Customer 2.....
 2.Competition
 3.Supplier 3.....
 4.Regulatory factor 4.....
 5.Social cultural trend
 6. Macro-economic environment 5.....

 6.....

Part 4: Which strategy would be used
 in order to develop competitive

- advantage 1.....
- 1. Prospector
- 2. Analyzer 2.....
- 3. Defender 3.....

Part 5: In your opinion, how strategy type increases spa performance according to 3 factors as follows? 1.....

- 1. Customer satisfaction 2.....
- 2. Customer retention
- 3. Employee satisfaction 3.....

Part 6: How Market Orientation has relationship between Strategic management? 1.....

2.....

3.....

Part 7: How Extended Market Orientation has relationship between Strategic management? 1.....

2.....

3.....

Part 8: How Strategic management has relationship between Health Establishment Performance? 1.....

2.....

.....
 3.....

“รูปแบบความสัมพันธ์เชิงสาเหตุของทิศทางตลาดและการขยายทิศทางตลาดส่งผลต่อการจัดการ
 กลยุทธ์ต่อประสิทธิภาพสถานประกอบการเพื่อสุขภาพในกรุงเทพ, ประเทศไทย”

แบบสอบถามสัมภาษณ์

ข้อมูลผู้จัดการ

ส่วนที่ 1: กรุณาระบุตำแหน่งงาน ความ

รับผิดชอบในสถานประกอบการเพื่อสุขภาพ,

ความรู้พื้นฐาน

ส่วนที่ 2: ในความคิดเห็นของคุณ, คุณจะ

วิเคราะห์ทิศทางตลาด จากสามปัจจัย

ดังต่อไปนี้อย่างไร?

1. สถานการณ์ปัจจุบัน

2. การเผยแพร่

3. การตอบสนอง

ส่วนที่ 3: ในความคิดเห็นของคุณ, คุณจะ

วิเคราะห์การขยายทิศทางตลาด จาก6ปัจจัย

ดังต่อไปนี้อย่างไร?

- | | |
|------------------------|--------|
| 1.ลูกค้า | 2..... |
| 2.การแข่งขัน | |
| 3.ตัวแทน | 3..... |
| 4.ปัจจัยกฎระเบียบ | |
| 5.แนวโน้มสังคมวัฒนธรรม | 4..... |
| 6.เศรษฐศาสตร์มหภาค | |

ส่วนที่ 4: กลยุทธ์ใดควรนำมาใช้เพื่อพัฒนา

ความได้เปรียบทางการแข่งขัน

- | | |
|------------------------|--------|
| 1.กลยุทธ์เชิงรุก | 1..... |
| 2.กลยุทธ์เชิงวิเคราะห์ | 2..... |
| 3.กลยุทธ์เชิงป้องกัน | |
| | 3..... |

ส่วนที่ 5:

ในความคิดเห็นของคุณกลยุทธ์จะช่วยเพิ่ม

ประสิทธิภาพของสถานประกอบการเพื่อสุขภาพได้

1.....

.....

อย่างไรในด้านต่อไปนี้? 2.....

1.ความพึงพอใจของลูกค้า

2.การรักษาลูกค้าเอาไว้ 3.....

3.ความพึงพอใจของพนักงาน

ส่วนที่ 6:

ทิศทางตลาดมีความสัมพันธ์ระหว่างการจัดการ 1.....

กลยุทธ์อย่างไร?

2.....

3.....

ส่วนที่ 7:

การขยายทิศทางตลาดมีความสัมพันธ์ระหว่าง 1.....

การจัดการกลยุทธ์อย่างไร?

2.....

3.....

ส่วนที่ 8:

การจัดการกลยุทธ์มีความสัมพันธ์ระหว่าง 1.....

ประสิทธิภาพของสถานประกอบเพื่อสุขภาพ

อย่างไร? 2.....

.....

3.....

.....



Appendix E:

Measurement factors

Latent variables	Observed variables	Measurements
Market orientation	Generation	<p>1. In this health establishment, manager asks customers at least once a month to find out what services they will need in the future.</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการได้สอบถามการใช้บริการกับลูกค้าอย่างน้อยเดือนละครั้งเพื่อหาว่าบริการใดที่ลูกค้าต้องการในอนาคต</p> <p>MO_G1</p> <p>2. Manager often talks with or survey with relative from customer who can influence from services in this health establishment for customers in the future.</p> <p>ผู้จัดการมักพูดคุยหรือสำรวจความต้องการผู้ที่ลูกค้าพามา</p>

		<p>สามารถมีอิทธิพลต่อการใช้ บริการสถานประกอบการเพื่อ สุขภาพลูกค้าในอนาคต</p> <p>MO_G2</p> <p>3. Receptionist from this health establishment interacts directly with customers to learn how to serve them better. พนักงานต้อนรับมีปฏิสัมพันธ์ โดยตรงกับลูกค้าเพื่อเรียนรู้ วิธีการให้บริการได้ดียิ่งขึ้น</p> <p>MO_G3</p> <p>4. Therapist from this health establishment interacts directly with customers to learn how to serve them better. นักบำบัดมีปฏิสัมพันธ์โดยตรง กับลูกค้าเพื่อเรียนรู้วิธีการ ให้บริการได้ดียิ่งขึ้น MO_G4</p> <p>5. Manager finds changes in customers' behavior that use services but it cannot</p>
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		<p>suddenly serve customer's needs.</p> <p>ผู้จัดการค้นพบการเปลี่ยนแปลงของพฤติกรรมการใช้บริการสถานประกอบการเพื่อสุขภาพแต่ยังไม่สามารถตอบสนองความต้องการของลูกค้าได้ทัน</p> <p>MO_G5</p> <p>6. In health establishment, manager investigates information on competitors.</p> <p>ในสถานประกอบการเพื่อสุขภาพผู้จัดการสืบหาข้อมูลเกี่ยวกับคู่แข่งมากน้อยเพียงใด MO_G6</p> <p>7. Manager detects changes technology in health establishment.</p> <p>ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลงเทคโนโลยีสถานประกอบการเพื่อสุขภาพ</p> <p>MO_G7</p> <p>8. Manager detects changes regulation in health establishment).</p> <p>ผู้จัดการ มีการตรวจสอบการเปลี่ยนแปลง</p>
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		<p>กฎระเบียบในสถานประกอบการเพื่อ สุขภาพ MO_G8</p>
	<p>Dissemination</p>	<p>1. Manager has interdepartmental meetings between receptionist and therapist at least once a quarter to discuss market trends and developments. ผู้จัดการมีการประชุมระหว่างพนักงานต้อนรับ และ นักบำบัดอย่างน้อยไตรมาสละครั้งเพื่อหารือเกี่ยวกับแนวโน้มของตลาดและการพัฒนา MO_D1</p> <p>2. It has sending information for health establishment through customers. มีการส่งข้อมูลข่าวสารของสถานประกอบการเพื่อสุขภาพไปให้ลูกค้า MO_D2</p> <p>3. Other departments in health establishment inform trends of services information to manager</p>

		<p>แผนกต่างๆในสถาน</p> <p>ประกอบการเพื่อสุขภาพพบบมี</p> <p>การแจ้งข้อมูลแนวโน้มการใช้</p> <p>บริการแก่ผู้จัดการ MO_D3</p>
	<p>Responsiveness</p>	<p>1. Principles of market segmentation and customer behavior drive new service development in this health establishment.</p> <p>หลักการของการแบ่งส่วนตลาด</p> <p>และพฤติกรรมของลูกค้าผลักดัน</p> <p>การพัฒนาบริการใหม่ ในสถาน</p> <p>ประกอบการเพื่อสุขภาพ</p> <p>MO_R1</p> <p>2. Manager tends to ignore changes in customers' service needs for a reason.</p> <p>ผู้จัดการจึงอาจละเว้นการ</p> <p>เปลี่ยนแปลงในความต้องการ</p> <p>ของบริการของลูกค้าด้วยเหตุผล</p> <p>ส่วนตัว MO_R2</p> <p>3. Manager periodically reviews service</p>

		<p>development to ensure that services are in line with customer's needs.</p> <p>ผู้จัดการประเมินการพัฒนา บริการเป็นระยะเพื่อให้มั่นใจว่า สอดคล้องกับสิ่งที่ลูกค้าต้องการ</p> <p>MO_R3</p>
<p>Extended Market Orientation</p>	<p>Customer</p>	<p>1. Manager collects customers' need of using spa service by social media. (customers)</p> <p>ผู้จัดการ รวบรวมข้อมูลความต้องการการใช้บริการสปาของลูกค้าด้วยวิธีสื่อสังคม (เช่น แชท, facebook, line, instagram) EMO_C1</p> <p>2. Marketing personnel in health establishment spend time discussing customers' future needs with other functional departments. (customers)</p> <p>พนักงานฝ่ายการตลาดในสถาน ประกอบการเพื่อสุขภาพ ใช้ เวลาพูดคุยเกี่ยวกับความ</p>

		<p>ต้องการในอนาคตของลูกค้ากับ หน่วยงานอื่น ๆ (ลูกค้า) EMO_C2</p> <p>3. Customer accuses a harmful in health establishment in negative way, manager would respond to the criticism immediately. (customers) ลูกค้ากล่าวถึงสถาน ประกอบการด้านสุขภาพในแง่ ลบ ผู้จัดการจะตอบสนองต่อคำ วิจารณ์ทันที (ลูกค้า) EMO_C3</p>
	<p>Competition</p>	<p>1. In health establishment, manager, receptionist and therapist are collecting competitor information. (competition) ในสถานประกอบการเพื่อ สุขภาพมีเพียง ผู้จัดการ พนักงานต้อนรับ และ นักบำบัด รวบรวมข้อมูลคู่แข่ง (การ แข่งขัน) EMO_CO1</p>

		<p>2. Manager has functional meetings very often to discuss market trends and service developments (competition)</p> <p>ผู้จัดการมีการประชุมเชิงปฏิบัติการเพื่อหารือเกี่ยวกับแนวโน้มของตลาดและการพัฒนาบริการเป็นประจำ (การแข่งขัน) EMO_CO2</p> <p>3. Manager tends to take longer than competitor does to respond to a change in regulatory policy. (competition)</p> <p>ผู้จัดการมีแนวโน้มที่จะใช้เวลานานกว่าคู่แข่งในการตอบสนองต่อการเปลี่ยนแปลงนโยบายด้านกฎระเบียบ (การแข่งขัน) EMO_CO3</p>
	Supplier	<p>1. In health establishment, manager spends time with suppliers to learn more about spa products of</p>

		<p>suppliers. (suppliers)</p> <p>ในสถานประกอบการเพื่อ สุขภาพนี้ผู้จัดการใช้เวลากับคู่ ค้าเพื่อเรียนรู้เพิ่มเติมเกี่ยวกับ ผลิตภัณฑ์สปา (คู่ค้า)</p> <p>EMO_S1</p> <p>2. In health establishment, manager asks suppliers regularly for their assessment of spa product and service quality. (suppliers)</p> <p>ผู้จัดการสถานประกอบการเพื่อ สุขภาพประเมินคู่ค้าเกี่ยวกับ การบริการและคุณภาพของ ผลิตภัณฑ์สปา (คู่ค้า)</p> <p>EMO_S2</p> <p>3. Manager in health establishment gives opportunity for new suppliers even though manager interacts with existing ones. (suppliers)</p> <p>ผู้จัดการสถานประกอบการเพื่อ</p>
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	<p>Regulatory</p>	<p>1. Manager reviews the effect of changes of customers (e.g., regulation of service in health establishment environment on customers) ผู้จัดการตรวจสอบผลกระทบจากลูกค้า เช่น กฎระเบียบการใช้บริการสถานประกอบการเพื่อสุขภาพของลูกค้า (ปัจจัยด้านกฎระเบียบ) EMO_R1</p> <p>2. Manager in health establishment shares information spa service and product for human resources from other departments. (regulatory factors) ผู้จัดการสปาให้มีการให้ความรู้ด้านการใช้บริการสปาและผลิตภัณฑ์</p>

		<p>แก่บุคลากรในแผนกต่างๆ (ปัจจัยด้านกฎระเบียบ) EMO_R2</p> <p>3. The activities of all departments in health establishment are well coordinated. (regulatory factors) กิจกรรมของหน่วยงานต่าง ๆ ในหน่วยงานประกอบการเพื่อสุขภาพ นี้มีการประสานงานกันดี (ปัจจัยด้านกฎระเบียบ) EMO_R3</p>
	<p>Social Cultural Trends</p>	<p>1. In health establishment, manager collects and evaluates information of environmental consciousness that might affect health establishment. (Social) ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการรวบรวมและประเมินข้อมูลเกี่ยวกับผลิตภัณฑ์ที่ช่วยรักษา</p>

		<p>สิ่งแวดล้อม ซึ่งอาจส่งผลกระทบต่อ สถานประกอบการเพื่อสุขภาพ (สังคม) EMO_SO1</p> <p>2. In health establishment, manager collects and evaluates information of emerging lifestyles that might affect health establishment. (Social) ในสถานประกอบการเพื่อ สุขภาพนี้ผู้จัดการรวบรวมและ ประเมินข้อมูลเกี่ยวกับ ผู้บริโภค ยุคใหม่ ซึ่งอาจส่งผลกระทบต่อสถาน ประกอบการเพื่อสุขภาพ (สังคม) EMO_SO2</p> <p>3. Even manager came up with a great marketing plan; manager probably would not be able to implement it in a timely use. (social) แม้ว่าผู้จัดการจะมีแผนการ ตลาดที่ยอดเยี่ยม แต่ผู้จัดการ</p>
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		อาจจะไม่สามารถใช้งานได้ ทันเวลา (สังคม) EMO_SO3
	Macroeconomic Environment	<p>1. In health establishment, manager frequently collects and evaluates exchange rate (Macroeconomic) ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการมักรวบรวมและประเมินข้อมูล อัตราแลกเปลี่ยนเงิน (เศรษฐศาสตร์มหภาค) EMO_M1</p> <p>2. In health establishment, manager frequently collects and evaluates industry growth rate. (Macroeconomic) ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการมักรวบรวมและประเมินข้อมูล อัตราการเติบโตของอุตสาหกรรมสถานประกอบการเพื่อสุขภาพ (เศรษฐศาสตร์มหภาค)</p>

		<p>EMO_M2</p> <p>3. In health establishment, manager maintains contacts with officials of government (e.g., Ministry of Public Health) in order to collect and evaluate pertinent information. (Macroeconomic)</p> <p>ในสถานประกอบการเพื่อสุขภาพนี้ผู้จัดการจะติดต่อกับเจ้าหน้าที่ของหน่วยงานรัฐบาล (เช่นกระทรวงสาธารณสุข) เพื่อรวบรวมและประเมินข้อมูลที่เกี่ยวข้อง (เศรษฐศาสตร์มหภาค) EMO_M3</p>
<p>Strategic management</p>	<p>Prospector</p>	<p>1. Health establishment sacrifices short-term profitability to gain more market share.</p> <p>สถานประกอบการเพื่อสุขภาพยอมขาดทุนกำไร เพื่อที่จะสร้างฐานลูกค้าเพิ่มขึ้น SM_P1</p> <p>2. Manager strives to be</p>

		<p>one of the top three for health establishment in markets.</p> <p>ผู้จัดการมุ่งมั่นที่จะเป็นหนึ่งในสามอันดับแรกของสถานประกอบการเพื่อสุขภาพในตลาด SM_P2</p> <p>3. Manager puts a lot of emphasis on building relationships with major customers.</p> <p>ผู้จัดการให้ความสำคัญกับการสร้างความสัมพันธ์กับลูกค้ารายใหญ่ SM_P3</p> <p>4. Manager has a strong tendency to support marketing activities tending to increase customers</p> <p>ผู้จัดการมีแนวโน้มที่จะสนับสนุนกิจกรรมทางการตลาดที่มีแนวโน้มสร้างลูกค้าเพิ่มขึ้นได้ SM_P4</p>
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	Analyzer	
		<p>1. Manager is usually the first ones to introduce various services to customers. ผู้จัดการมักจะเป็นคนแรกที่แนะนำบริการต่างๆไปยังลูกค้า SM_A1</p> <p>2. Manager adopts a rather conservative view when making major decisions ผู้จัดการยึดติดกับมุมมองที่ค่อนข้างอนุรักษ์นิยมเมื่อมีการตัดสินใจที่สำคัญ SM_A2</p> <p>3. When confronted with a major decision, manager typically comprehensive analyses of the health establishment situations faced เมื่อเผชิญหน้ากับการตัดสินใจที่สำคัญผู้จัดการมักจะทำการวิเคราะห์สถานการณ์ที่ครอบคลุมทุกด้าน SM_A3</p>

		<p>4. Manager tends to be risk averse.</p> <p>ผู้จัดการมีแนวโน้มที่จะไม่เสี่ยง</p> <p>SM_A4</p>
	Defender	<p>1. Manager frequently uses price cutting to increase market share.</p> <p>ผู้จัดการมักใช้การตัดราคาเพื่อเพิ่มส่วนแบ่งการตลาด</p> <p>SM_D1</p> <p>2. Manager possesses a considerable degree of bargaining power of supplier.</p> <p>ผู้จัดการมีอำนาจในการต่อรองกับคู่ค้า SM_D2</p> <p>3. Manager tends to catch customer group on the long term than on the short term.</p> <p>ผู้จัดการมีแนวโน้มที่จะมุ่งเน้นการจับกลุ่มลูกค้าในระยะยาวมากกว่าในระยะสั้น SM_D3</p>

<p>Health establishment performance</p>	<p>Customer satisfaction</p>	<p>5. Health establishment has convenient location สถานประกอบการเพื่อสุขภาพมีที่ตั้งสะดวก PER_CS5</p> <p>6. In health establishment has a good quality of service comparing to competitors สถานประกอบการเพื่อสุขภาพมีคุณภาพและบริการที่ดีกว่าเมื่อเปรียบเทียบกับคู่แข่ง PER_CS6</p>
	<p>Customer retention</p>	<p>1. Customers say positive things about this health establishment to others. ลูกค้าพูดในเชิงบวกเกี่ยวกับสถานประกอบการเพื่อสุขภาพที่นี้ต่อผู้อื่น PER_CR1</p> <p>2. Customers would highly recommend the health establishment to their friends and family ลูกค้าแนะนำเกี่ยวกับสถานประกอบการเพื่อสุขภาพอยู่</p>

		<p>างแน่นอนกับ เพื่อนและ ครอบครัวของฉัน PER_CR2</p> <p>3. Customers will come back this health establishment again ลูกค้ามีความมั่นใจจะกลับมาที่ สถานประกอบการเพื่อสุขภาพนี้ อีกครั้ง PER_CR3</p> <p>4. Customers really impress staying in this health establishment. ลูกค้าประทับใจเป็นอย่างมากใน การอยู่ในสถานประกอบการ เพื่อสุขภาพ PER_CR4</p> <p>5. Customers consider this health establishment to be my first choice when customer travels next time. ลูกค้าพิจารณาสถาน ประกอบการเพื่อสุขภาพแห่งนี้ เป็นทางเลือกแรก ที่ลูกค้าจะใช้ ในครั้งต่อไป PER_CR5</p>
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	Employee Satisfaction	<p>1. Employee receives income with a fair amount for the work.</p> <p>พนักงานได้รับค่าตอบแทนอย่างยุติธรรม PER_ES1</p> <p>2. Employee receives the recognition when he works.</p> <p>พนักงานได้รับการยกย่องในการปฏิบัติงาน PER_ES2</p> <p>3. Employee satisfies in health establishment that he works with.</p> <p>พนักงานพึงพอใจต่อสถานประกอบการเพื่อสุขภาพที่ตัวเองทำงานอยู่ PER_ES3</p> <p>4. Employees compare work progress between this health establishment to other.</p> <p>พนักงานเปรียบเทียบความก้าวหน้าของงานระหว่าง</p>
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		<p>สถานประกอบการเพื่อสุขภาพ ที่นี้กับที่อื่น PER_ES4</p> <p>5. Employees have too much to do at work.</p> <p>พนักงานมีความรับผิดชอบใน ตำแหน่งงานมากเกินไป PER_ES5</p> <p>6. Employees enjoy their coworkers.</p> <p>พนักงานสามารถเข้ากับเพื่อน ร่วมงานได้ดี PER_ES6</p> <p>7. Employees can express opinion to manager.</p> <p>พนักงานสามารถเสนอความ คิดเห็นต่อผู้จัดการได้ PER_ES7</p>
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Appendix F:



ที่ ศร ๐๘๒๖ ๓๖/ ๕๔๕

คณะกรรมการจัดการการท่องเที่ยว
สถาบันบัณฑิตพัฒนบริหารศาสตร์
๓๑๘ ถนนเฉลิมพล แขวงคลองจั่น
เขตบางกะปิ กรุงเทพฯ ๑๐๖๑๐

๑๕ ธันวาคม ๒๕๖๓

เรื่อง จะความยินยอมคราะห์เก็บข้อมูลงานวิจัย

เรียน

- สิ่งที่ส่งมาด้วย ๑) โครงร่างวิจัยนิพนธ์
- ๒) แบบสอบถาม

ด้วย นายวิรุฒ นาคะสิทธิ์ รมตีสมาชิกสภา ๕๖๓๘๗๓๑๖๒ "นักศึกษาลักสูตรปริญญาตรี
บัณฑิต สาขาการจัดการการท่องเที่ยวแบบบูรณาการ คณะการจัดการการท่องเที่ยว สถาบันบัณฑิต
พัฒนบริหารศาสตร์" ได้อนุมัติหัวข้อวิจัยนิพนธ์ เรื่อง "รูปแบบความสัมพันธ์เชิงสาเหตุของจิตทางตลาดส่งผล
ต่อประสิทธิภาพผลตามประกอบการเพื่อสุขภาพ กรุงเทพฯ" โดยมี อาจารย์ ดร.แสงมณ บุญศิริ เป็นอาจารย์
ปรึกษาวิทยานิพนธ์

เพื่อให้กระทำการดำเนินการวิจัยสำเร็จร่งไปด้ว้ดี และเห็นประโยชน์แก่หน่วยงานและภาคส่วน
เกี่ยวข้อง จึงได้ผลความยินยอมคราะห์ให้ นาย วิรุฒ นาคะสิทธิ์ เข้าทำการเก็บรวบรวมข้อมูลโดยใช้แบบสอบถาม
และสัมภาษณ์ ทั้งนี้ผู้วิจัยจะเป็นผู้ประสานวัน และเวลาในการขอเข้าเก็บรวบรวมข้อมูลดังกล่าว ตามลำดับ
จนเห็นสมควร

จึงเรียนมาเพื่อโปรดพิจารณาให้ความยินยอมคราะห์ในการเก็บข้อมูลวิจัยด้วย จะเป็นพระคุณยิ่ง
และขอขอบคุณ" ณ โอกาสนี้

ขอแสดงความนับถือ

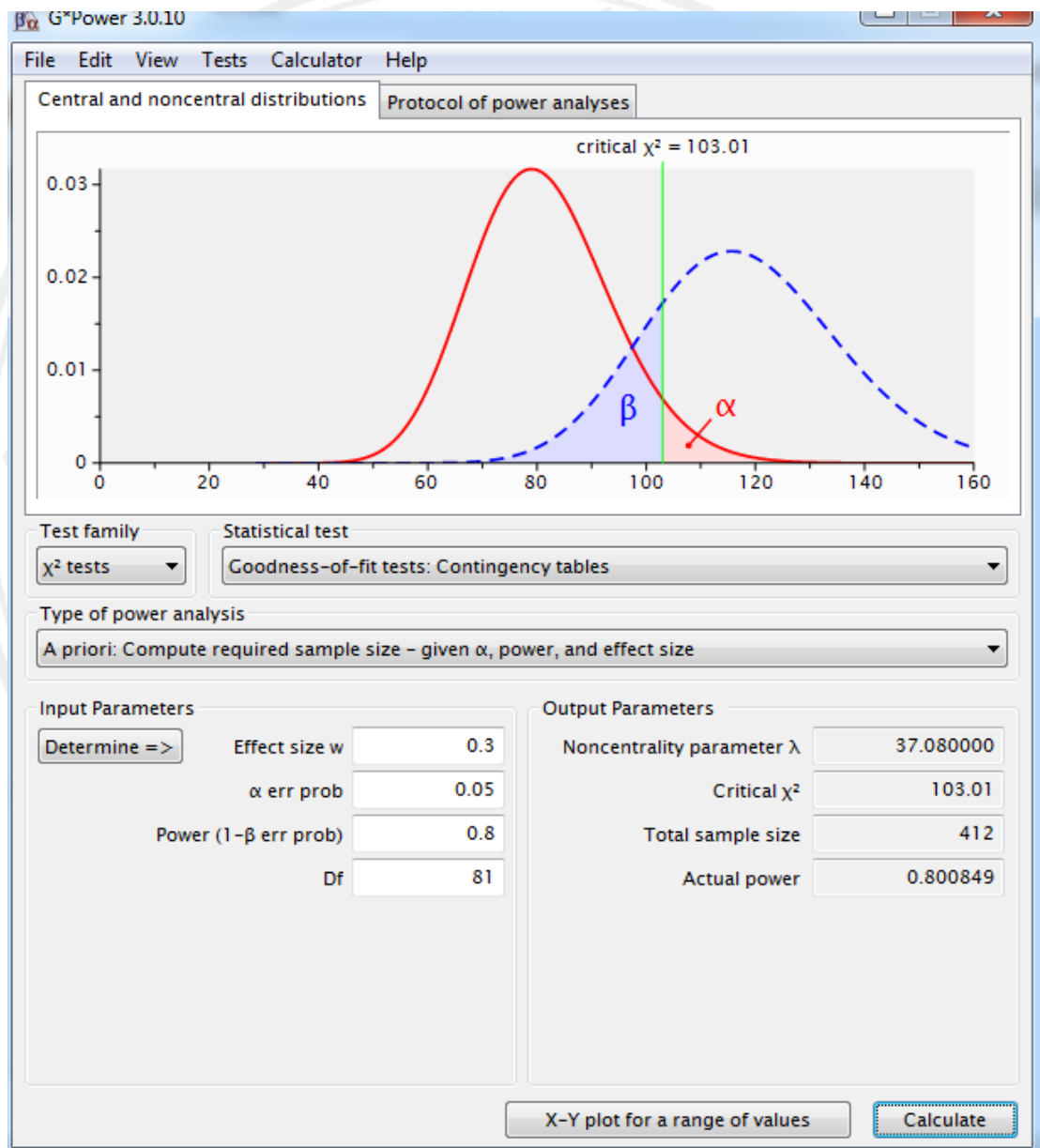
(อาจารย์ ดร.สุanee สุนะบุญ)
รองค.บคฝายบริหาร

รักษาราชการแทนคณบดีคณะกรรมการจัดการท่องเที่ยว

ผู้ประสานงาน
นายวิรุฒ นาคะสิทธิ์
โทรศัพท์ ๐๙ ๕๓๕๖ ๖๖๖๔

Appendix F:

Sample size



G*Power 3.0.10

File Edit View Tests Calculator Help

Central and noncentral distributions Protocol of power analyses

[1] -- Friday, August 03, 2018 -- 09:37:57

χ^2 tests – Goodness-of-fit tests: Contingency tables

Analysis: A priori: Compute required sample size

Input:

Effect size w	=	0.3
α err prob	=	0.05
Power (1- β err prob)	=	0.8
Df	=	81

Output:

Noncentrality parameter λ	=	37.080000
Critical χ^2	=	103.01
Total sample size	=	412
Actual power	=	0.800849

Clear Save Print

Test family: χ^2 tests

Statistical test: Goodness-of-fit tests: Contingency tables

Type of power analysis: A priori: Compute required sample size - given α , power, and effect size

Input Parameters

Determine =>

Effect size w	0.3
α err prob	0.05
Power (1- β err prob)	0.8
Df	81

Output Parameters

Noncentrality parameter λ	37.080000
Critical χ^2	103.01
Total sample size	412
Actual power	0.800849

X-Y plot for a range of values Calculate

G*Power 3.0.10

File Edit View Tests Calculator Help

Central and noncentral distributions Protocol of power analyses

[1] -- Friday, August 03, 2018 -- 09:37:57

χ^2 tests – Goodness-of-fit tests: Contingency tables

Analysis: A priori: Compute required sample size

Input:

Effect size w	=	0.3
α err prob	=	0.05
Power (1- β err prob)	=	0.8
Df	=	81

Output:

Noncentrality parameter λ	=	37.080000
Critical χ^2	=	103.01
Total sample size	=	412
Actual power	=	0.800849

Clear Save Print

Test family: χ^2 tests

Statistical test: Goodness-of-fit tests: Contingency tables

Type of power analysis: A priori: Compute required sample size - given α , power, and effect size

Input Parameters

Determine =>

Effect size w	0.3
α err prob	0.05
Power (1- β err prob)	0.8
Df	81

Output Parameters

Noncentrality parameter λ	37.080000
Critical χ^2	103.01
Total sample size	412
Actual power	0.800849

X-Y plot for a range of values Calculate

Appendix G:

List of health establishments

No	Names	Address	No.of licenses
1	Lek@22	18 Soi Sukhumvit22, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100200058
2	Yanin Thai Massage	132 Soi Samsen2, Samsen Rd, Banphanthom Sub-District, Pranakorn District, Bangkok 10200	100200078
3	Baan Sabai	2043/2 Soi Sukhumvit77/1, Sukhumvit Rd, North Prakanong Sub-District, Wathana District, Bangkok 10110	100200056
4	T.Thai Massage	23/4 Soi SouthNana, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100200060
5	Aunchaya Massage	1251/9 Krungthep-Non Rd, Bangsue Sub-District, Bangsue District, Bangkok 10800	100200061
6	Chaophaya Vej Health Massage	247 Ratchadapisek Rd, Dindang Sub-District, Dindang District, Bangkok 10400	100200062
7	Center Point	388 Praram1 Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	100200063
8	Center Point(Siam Square3)	266/3 Siamsquare Soi3, Praram1 Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	100200064
9	My Care Massage	749 Praram2 Rd, Bangmod Sub-District, Jomthong District, Bangkok 10150	100200065
10	SbaySbay Thai Massage	6299 Prakanong Khlongtoei Bangkok 10260	100200053
11	Relax Sense	4/1 Khlongtoei Khongtoei Bangkok 10110	100200054

	Thai Massage		
12	Sareerud Massage	15 Chandrakasem Jatujak Bangkok 10900	100200057
13	Bai Spa	247 Ratchadapisak Dindang Dindang Bangkok 10400	100100012
14	Center Point Massage&Spa	128/4-5 Siom Soi 6 Ratchadapisak Suriyawong Bangrak Bangkok10500	100100013
15	Spa Inter Continental	971,973 Phloenchit Lumpini Pathumwan Bangkok 10330	100100016
16	Lanpo Massage	10/21 Soi Sukhumvit13 Sukhumvit Rd, NortKhlontoei Wattana Bangkok	100200068
17	Sor.Sala Massage	5,SoiWatcharapol,Watcharapol Rd.,ThaRaeng,BangKhen,Bangkok10230	100200071
18	Sai Ngen Massage	108/59 Phahonyothin Rd,Victory Monument,Bangkhen,Bangkok10220	100200077
19	Porn Massage	291,SoiPhanitAnan,Sukhumvit71Rd,NortKhongto ei,Wattana, Bangkok	100200073
20	The Sun Massage	1530,Prakanong,Khlontoei,Bangkok10260	100200042
21	Duangkeaw Massage	120/57 ,Thungsonghong,Lak Si,Bangkok,10210	100200043
22	Sirivaj Thai Massage	1365,1367,1369,Saunluang,Saunluang,Bangkok1 0250	100200044
23	128ThaiMassa ge	128 Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100200045
24	Nagaoga Massage	316 Yannawa Sub-District, Sathorn District, Bangkok 10140	100200046
25	Porjai Massage	323 Bangmod Sub-District, Thungkru District, Bangkok 10140	100200047
26	Pailin Massage	1511/63-64 Samsennai Sub-District, Payathai District, Bangkok 10400	100200048

27	Arunda Oriental Massage	16 Payathairoad Sub-District, Ratchatewi District, Bangkok 10400	100200049
28	Anuntra Massage	587,589 Bangna Sub-District, Bangna District, Bangkok 10260	100200050
29	Armuy and Yuga Massage	384 Soi Sukhumvit101/1 Sukhumvati, Bangchak Sub-District, Prakanong District, Bangkok 10260	100200051
30	Chacha Massage	14/3 Klongtoey Sub-District, Wathana District, Bangkok 10110	100200052
31	Romyavit Massage	77-79 Watratchaborpith Sub-District, Pranakorn District, Bangkok 10200	100200031
32	Sang Thai Massage	932-934 Taladnoi Sub-District, Samphanthawong District, Bangkok 10100	100200032
33	Rungjaroen Thai Massage	240 Klongtongsai Sub-District, Klongsan District, Bangkok 12000	100200033
34	Surawong Masage center	37/5 Suriyawong Sub-District, Bangrak District, Bangkok 10500	100200034
35	Saitong Massage	12/2 North Klongtoey Sub-District, Wathana District, Bangkok 10110	100200035
36	Enjoy Masage	623 Makkasan Sub-District, Ratchathewi District, Bangkok 10400	100200036
37	Abhaibhubejhr Thai Traditional	105/1 Ladyao Sub-District, Jatujak District, Bangkok 10900	100200037
38	Firenze	739 Kannayao Sub-District, Kannayao District, Bangkok 10230	100200038
39	Suanplu Thai Massage	1345 Silom Sub-District, Bangrak District, Bangkok 10500	100200039
40	Slow Life Thai Massage	BTS Phaya Thai Exit 3, Sriyuthaya Rd, Bangkok 10400	100200040
41	Absolute Spa	Rd. Nimitmai, Jatujak District, Bangkok 10900	100200041

42	Pornsupha Massage	9/378 Anusaowaree Sub-District, Bangkhen District, Bangkok 10240	100200020
43	Bann Thai Massage	96/1 Chanasongkram Sub-District, Pranakorn District, Bangkok 10200	100200021

44	Nancy Massage	98 Chanasongkram Sub-District, Pranakorn District, Bangkok 10200	100200022
45	Samsen Massage	20 Banpanthom Sub-District, Pranakorn District, Bangkok 10200	100200023
46	Spaya Massage	82 Banpanthom Sub-District, Pranakorn District, Bangkok 10200	100200024
47	Greenleafethara Massage	481 Makkasan Sub-District, Ratchatewi District, Bangkok 10400	100200025
48	Baandahla Massage	352 Klongjan Sub-District, Bangkok District, Bangkok 10240	100200026
49	Baandahla Nawamin Massage	99/187 Klongkum Sub-District, Buengkum District, Bangkok 10240	100200027
50	Phutawan Thai Massage	151 Wangthonglang Sub-District, Wangthonglang District, Bangkok 10310	100200028
51	Narawadee Health Massage	271 Bangna Sub-district, Bangna District, Bangkok 10260	100200029
52	Lucky Massage	4/2 Klongton Sub-District, Klongtoey District, Bangkok 10110	100200030
53	C.Chang Thai Massage	566 Suanluang Sub-District, Suanluang District, Bangkok 10250	100200007
54	Unique	2/2 Phetburiroad Sub-District, Ratchatewi District, Bangkok 10400	100200008
55	Laan Thai Massage	70/26 Makkasan Sub-District, Ratchatewi District, Bangkok 10400	100200010
56	Hudthaporn	13 Talingchan Sub-District, Talingchan District, Bangkok 10200	100200011

	Massage	Bangkok 10170	
57	Jum Health Massage	3/33 Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100200012
58	Chabakaew Massage	527 Nakornchaisri road Sub-District, Dusit District, Bangkok 10300	100200013
59	Sima Massage	4/35 Wangburapapirom Sub-District, Pranakorn District, Bangkok 10200	100200014
60	Magic Hand's S15 Massage	59/1 Soi Sukhumvit15, Sukhumvit Rd, North Klongtoey Sub-District, Wathana District, Bangkok 10110	100200089
61	Mazzy Srivara branch	1329 Wangthonglang Sub-District, Wangthonglang District, Bangkok 10310	100200016
62	Unyarin Health Massage	228 Banglamphulang Sub-District, Klongsan District, Bangkok 10600	100200017
63	Sangkarn Massage	99/5 Payathai road Sub-District, Ratchatewi District, Bangkok 10400	100200069
64	Fuengfah Massage	8/12 Ladprao Sub-District, Ladprao District, Bangkok 10230	100200070
65	Subaru Ann Massage	139/2 North Klongton Sub-District, Wathana District, Bangkok 10110	100200072
66	Hudthathip Massage	220 Phetburi road Sub-District, Ratchatewi District, Bangkok 10400	100200075
67	Chang Thai Massage	52/11 Bangkunnong Sub-District, Bangkoknoi District, Bangkok 10700	100200076
68	Unchan Health Massage	313 Silom Sub-District, Bangrak District, Bangkok 10500	100200001
69	Smihra Massage	9 Ladprao Sub-District, Ladprao District, Bangkok 10230	100200002
70	Thip Massage	387 Bangplad Sub-District, Bangplad District, Bangkok 10700	100200003
71	Thidaporn	22 Bangplad Sub-District, Bangplad District,	100200004

	Massage	Bangkok 10700	
72	The Touch Massage	11/2 Lumpini Sub-District, Pathumwan District, Bangkok 10330	100200005
73	The Touch Ruamrudee Massage	38/1 Lumpini Sub-District, Pathumwan District, Bangkok 10330	100200006
74	Away Spa	106,108 Silom Sub-District, Bangrak District, Bangkok 10500	100100011
75	Spa de vie	29 North Klongtoey Sub-District, Wathana District, Bangkok 10110	100100018
76	Jasmin Massage	2534/233 Bangklo Sub-District, Bangkorlam District, Bangkok 1012	100100019
77	Seven Eden Spa	27 Silom Sub-District, Bangrak District, Bangkok 10500	100100020
78	Le Spa with L'occitane	189 North Klongtoey Sub-District, Wathana District, Bangkok 10110	100100024
79	Nuch Massage	1/8 Klongton Sub-District, toey District, Bangkok 10110	100200007
80	SamAang Thai Massage	82/45 Moo.19 Salathamasob Sub-District, Tawiwathana District, Bangkok 10170	100200018
81	@Jasmin Massage	61 Klongton Sub-District, Klongtoey District, Bangkok 10110	100200019
82	Lek Massage House	887/1 Wangmai Sub-District, Pathumwan District, Bangkok 10330	100200066
83	Lek Massage	14/3 Klongtoey Sub-District, Klongtoey District, Bangkok 10110	100200067
84	Grandios Spa	66/4 Soi Sukhumvit20, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110009759
85	Pirin Spa	108/11 Soi Rambudtri, Khaosan Rd, Taladyod Sub-District, Pranakorn District, Bangkok 10200	110009859

86	Seven Eden Spa	27 Soi Saladang1, Silom Rd, Silom Sub-District, Bangrak District, Bangkok 10500	110009459
87	Harnn Heritage Spa	4,4/5 Floor12 M Centower, Rajdamri Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	110009559
88	Nacha Spa&Massage	2 Moo.6 Soi 60, Praram 2 Rd, Samaedam Sub- District, Bangkuntean District, Bangkok 10150	110006959
89	Neva Spa	10/1 Windsor Suites Hotel, Soi Sukhumvit 20, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110007959
90	Refresh@24 Spa&Massage	43 Soi Sukhumvit24, Sukhumvit Rd, Klongton Sub-District, Klongtoey District, Bangkok 10110	110001459
91	C.T. Spa life	234/2 Avenue Ratchayothin Floor3, Ratchadapisek Rd, Ladyao Sub-District, Jatujak District, Bangkok 10900	110000259
92	Bellezza Spa	104/43 Moo.1, Thungsonghong Sub-District, Laksi District, Bangkok 10211	110008160
93	Divana Massage&Spa	7 Soi Sukhumvit25, Sukhumvit Rd, North Klongtoey Sub-District, Wathana District, Bangkok 10110	110008359
94	Quan Spa	518/8 Phloenchit Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110008459
95	Garden Spa and Yoga	1759/6 Phetkasem Avenue Room:P 1-04, Phetkasem Rd, Laksong Sub-District, Bangkake District, Bangkok 10160	110008559
96	Ozone Spa	55/99 Kanlapaphruek Rd, Bangkuntean Sub- District, Jomthong District, Bangkok 10150	110008659
97	Mulberry Spa	132 Soi Sukhumvit23, Sukhumvit Rd, North Klongtoey Sub-District, Wathana District, Bangkok 10110	110008759

98	Bio Beaute Day Spa	195/7 Soi Ratchadapisek, Klongtoey Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110008859
99	Plethora Spa	99 Esplanade Cineplex, Ratchadapisek Rd, Dindang Sub-District, Dindang District, Bangkok 10400	110008959
100	Bhawa Spa	13/27,83/29 Vitayu Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110009159
101	Desheli Spa	444 Floor8 Pathumwan princess hotel, Payathai Rd, Wangmai Sub-District, Pathumwan District, Bangkok 10330	110009259
102	Bangkok Natural Spa	1148 Soi Pattanakarn30, Pattanakarn Rd, Suanluang Sub-District, Bangkok 10250	110009359
103	Sabai Corner Spa	90,92 Soi Sathorn9, South Sathorn Rd, Yannawa Sub-District, Sathorn District, Bangkok 10120	110007059
104	Siamtouch Massage&Spa	526/1-5 Prachautid Rd, Wangthongluang Sub-District, Wangthongluang District, Bangkok 10310	110007159
105	The Okura Spa	57/1 Park Ventures, Vitayu Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110007259
106	Orchid House Spa&Massage	315/203-204 Soi Sathupradit19, Sathupradit Rd, Chongnonsi Sub-District, Yannawa District, Bangkok 10120	110007359
107	Nasha Spa&Beauty	55/4 Kanlapaphruek Rd, Bangkae Sub-District, Bangkaw District, Bangkok 10160	110007459
108	So Thai Spa Bangkok	269 Soi Sukhumvit31, North Klongton Sub-District, Wathana District, Bangkok 10110	110007559
109	Nara Spa	246 Time Square building Room:318A, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110007659

110	Let's Relax Ekkamai	18 Parkland Floor2 Building B, Sukhumvit Rd, North Klongton Sub-District, Wathana District, Bangkok 10110	110007759
111	Relief Herbal Spa	66/62 Soi Ladplakao60, Ladplakao Rd, Anusaowaree Sub-District, Bangken District, Bangkok	110007859
112	JW Health Club&Spa	4 Sukhumvit 2 Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110006158
113	Seven Rituals Sanctuary&Spa	10 Sukhumvit Rd, North Klongtoey Sub-District, Wathana District, Bangkok 10110	110006358
114	The Royal Orchid Mandara Spa	2 Charoenkrung Rd, Bangrak Sub-District, Bangrak District, Bangkok 10500	110006458
115	Anantara Spa	155 Ratchadamri Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110006558
116	Sanctuary Wellness Spa	19 Soi Sukhumvit18, Sukhumvit Rd, Klongtoey Sub-District, Klongtoey District, Bangkok 10110	110006758
117	Rarinjinda Wellness Spa	100 Floor30,31 Grande Center Point Ploenchit hotel, Vitayu Rd, Lumpini Sub-District	110006858
118	Artas Spa	49 Ploenchit Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110002758
119	My Spa	246 Time Square Building Floor3, Sukhumvit Rd, Klongtoey	110002858
120	Let's Relax Phromphong	77 Soi Sukhumvit 39, Sukhumvit Rd, North Klongton Sub-District, Wathana District, Bangkok	110003258
121	The Grande spa	250 Sukhumvit Rd, Khlongtoei Sub-District, Khlongtoei District, Bangkok 10110	110002958

122	The Antidot	30 Sukhumvit 21 Rd (Asoke), North Khlongtoei Sub-District, Wathana District	11001758
123	The Oriental Spa	250 Sukhumvit Rd, Khlong Toei Sub-District, Khlong Toei District, Bangkok 10110	11000458
124	Massira Wellness & Spa	2074 Charoen krung Rd, Wat Phraya Krai Sub-District, Bang Kho Lham, Bangkok	110000658
125	Panpuri Oraganic Spa	999 Lobby floor, Kaset plaza shopping mall, Pleonjit Rd, Lumpini Sub-District, Patumwan District, Bangkok 10330	110002159
126	Modan Spa	23/57-60 Rama 9 Rd, Bangkapi Sub-District, huaykwang District, Bangkok 10320	110001059
127	Ruen Spa	1000 Ekachai Rd, Bangbon Sub-District, Bangbon District, Bangkok 10150	110002258
128	Idin Beauty and Spa	9/1 Sukhapiban 5 Rd, Orngern Sub-District, Sai Mai District, Bangkok 10220	110003358
129	Let's Relax Terminal	2,88 6 th floor, Soi Sukhumwit 19 (Wathana) Sukhumwit Rd,	110003759
130	Heavenly Spa	39 Soi Suanplu, South Sathorn Rd, Thungmahamek Sub-District, Sathorn District, Bangkok	110000259
131	Chan Spa Health Care	9/3 CentralPlaza Pinklao Building, 5 th floor, Room No.502 Boromarajonani Road, Arun Amarin Sub-District, Bangkok Noi District, Bangkok	11000859
132	Cha Spa	67,69,71,7,75,77 Somdet Phra Pinklao Rd, Bang Yi Khan Sub-District,	11000959
133	I-Sawan	494 Ploenchit Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	110001459
134	Bangkok Oasis Spa	64 Soi Sawadee, Sukhumvit 31 Rd, North Khlong Tan Sub-District, Wathana District	110001259

135	Spa Cenvaree at Centara Grand	999/99 26th floor, Rama 1 Rd, Pathumwan Sub-District, Bangkok 10330	110001859
136	Away Spa	106,108 North Sathon Rd, Silom Sub-District, Bangrak District, Bangkok 10500	110004459
137	Spa Cenvaree	1695 Phaholyothin Rd, Jatujak Sub-District, Jatujak District, Bangkok 10900	110000359
138	Spa Bangkok Samsen 30	6 Soi Samsen Samsen Rd, Dusit Sub-District, Dusit District, Bangkok 10800	110000859
139	Phothalai The Thai Velnest Center	28 Soi Yothinpattana 13, Praditmanutham Rd, Khlong Jan Sub-District, Bangkok District, Bangkok 10240	110004859
140	Chi the Spa at Shangri-la	89 Wat Suanplu, Charoen Krung Rd, Bangrak Sub-District, Bangkok 10500	110003859
141	Anantara Spa	257/1-3 Charoennakorn Rd, Samre Sub-District, Thonburi District, Bangkok 10600	110009059
142	Jasmine Spa	2534/23 Soi Nok Khet, Bang klo Sub-District, Bang Kor Lham District, Bangkok 10120	110000959
143	Spa Botanica	13/3,28/1-4 South Sathon Rd, Thungmahamek Sub-District, Sathon District, Bangkok 10120	110004559
144	Anantara Spa Sathon	36 Narathiwat Ratchanakarin Rd, Yanawa Sub-District, Sathon District, Bangkok 10210	110005958
145	Spa Center Point	266/3 Soi Siam square3 Rama 1 Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	210023759
146	Palm Herbal Retreat	522/2 Soi Thonglor 16, Sukhumvit 55 Rd, North Khlong Ton Sub-District, Wathana District, Bangkok 10110	110000659
147	The Oasis Spa Bangkok	88 Soi Sukhumvit 51, Sukhumvit Rd, North Khlong Ton Sub-District, Wathana District, Bangkok 10110	110004957

148	Le spa with L'Occitane	198 between 13-15 Sukhumwit Rd. North Khlong Toey Sub-District	110005057
149	Spa at Le Meridien	40/5 Suravong Rd. Sripraya Sub-District Bangrak District, Bangkok 10500	110005257
150	The Peninsula Spa	333 Charoennakorn Rd. Klongtonsai Sub-Disrict Klongsarn District, Bangkok	110004458
151	Rassayana Retreat	57 Sukhumvit Rd. North Khlong Ton Sub-District, Wathana District, Bangkok 10110	110002158
152	Kanthara health and Spa	916 Lasal Rd. Bangna Sub-District, Bangna District, Bangkok 10260	110001958
153	Spa De Concorde	204 Ratchada Rd. Huaykwang Sub-District, Huaykwang District, Bangkok 10320	110000258
154	Banyan Tree Spa	21/100 South Sathorn Tungmahamek Sub-District, Sathorn District, Bangkok 10120	110007758
155	Rarinjinda Wellness Spa	153/2 Soi Mahardleklhuang Ratchadamri Rd. Lumpini Sub-district, Pathumwan District, Bangkok 10310	110005458
156	Kiri Tara Spa & Mas	55 Sukapibal 5 Rd. O Ngoen Sub-District, Saimhai District, Bangkok 10220	110005658
157	C.T.Spa Life Bangkae	257 2 Floor Room number 2A-L24B Phetkasem Rd. North Bangkae Sub-District, Bangkae District, Bangkok 10160	110005858
158	Anne Semonin Spa	188 Sofitel Hotel Silom Rd. Suriyawong Sub-District, Bangrak District, Bangkok 10500	110003958
159	Bali Spa	247 Ratchapisek Rd. Din Daeng Sub-District, Dindeng District, Bangkok 10400	110001658
160	Seasons Spa	27/3 Witthayu Rd. Lumpini Sub-District, Pathumwan District, Bangkok 10330	110004958
161	Leaders Wellness	149 Boromratchachonnani Rd, Arun Amarin Sub-District, Bangkok Noi District, Bangkok	110001458

		10700	
162	Boran Massage & Spa	88 Soi Rong Mueang 2, Rama 6 Rd (New Rama 6), Rob Mueang Sub-District, Pathumwan District, Bangkok 10330	110001858
163	Mah Thai Massage	54 Soi Ngam Doo Plee, Rama 4 Rd, Thung Maha Thep Sub-District, Sathon District, Bangkok 10120	210032260
164	Naruphorn	1313 Soi Inthamara 43, Sutthisan Rd, Din Daeng Sub-District, Din Daeng District, Bangkok 10400	210032360
165	Perfect Day Thai Massage	12/3-4 Soi Srinakarin 5, Srinakarin Rd, Hua Mak Sub-District, Bang kapi, Bangkok 10240	210032460
166	The Paradise Massage	128/7 Soi 6, Silom Rd, Suriyawong Sub-District, Bang Rak District, Bangkok 10500	210032560
167	Baanthai 2 Thai Massage	338/4 Kalpapruuek Rd, Bang wa Sub-District, Phasi Charoen District, Bangkok 10160	210032660
168	Hatthaphorn Massage	13 Soi Suan Phak 27, Suan Phak Rd, Taling Chan Sub-District, Taling Chan District, Bangkok 10170	210032760
169	Beauty Bangkok	981 Silom Rd, Silom Sub-District, Bang Rak District, Bangkok 10500	210032960
170	Pearwa Massage	109 Soi Saranakom 2, Saranakom Rd, Seekan Sub-District, Don Mueang District, Bangkok 10210	210033060
171	The Rest Massage House	55/83 Kalpapruuek Rd, Bang Khun Thian Sub-District, Jom Thong District, Bangkok 10150	210033160
172	Charlie Massage	203 Khao San Rd, Talad Yao Sub-District, Pranakorn District, Bangkok 10200	210030759
173	Lemongrass Thai Heritage	167/4 Ratchada Rd, Din Daeng Sub-District, Din Daeng District, Bangkok 10400	210030859

	Massage		
174	Sabai Massage House	61/5-6 Rama 9 Rd, Huay Kwang Sub-District, Huay Kwang District, Bangkok 10310	210030959
175	Rama Healthy Massage	131/1 Soi Tawee Mit, Rama 9 Rd, Huay Kwang Kwang Sub-District, Huay Kwang District, Bangkok 10310	210031059
176	Premium Healthy by Kanni	98/3 Pho-Kaeo Rd, Nawamin Sub-District, Bueng kum District, Bangkok 10240	210031159
177	Green Leaf Massage	481 Soi Ratchaprarop 2, Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210031259
178	Baan Thai Massage	127/24 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210031359
179	Proud Thai Massage	1450/2 Soi Charoen Krung 44, Charoen Krung Rd, Bang rak Sub-District, Bang Rak District, Bangkok 10110	210031459
180	Thitima Thai Massage	75 Soi Lat Krabang 11, Lat Krabang Rd, Lat Krabang Sub-District, Lat Krabang District, Bangkok 10520	210031659
182	Nirane	81/1 Soi Udomsuk 17, Sukhumvit 103 Rd, Bangna Sub-District, Bangna District, Bangkok	210031859
183	Chan Thai Traditional Massage	120/40-41 Soi 3, Ratchaprarop Rd, Phayathai Sub-District, Ratchathewi District, Bangkok 10400	210031959
184	MB Massage	1/5 Soi Ruamrudee, Petchburi Rd, Phayathai Sub-District, Ratchathewi District, Bangkok 10400	210032059
185	I Sabay Massage	1/6 Soi Somprasong 3, Petchburi Rd, Pha Phayathai Sub-District, Ratchathewi District,	210032159

		Bangkok 10400	
186	Sakulna Massage	64/21 Soi Charoen Krung 42/1 Charoen Krung Rd, Bang Rak Sub-District, Bang Rak District, Bangkok 10500	210028759
187	Moom Sabye	383 Nawong Pattana Rd, Seekan Sub-District, Don Muaeng District, Bangkok 10210	210028859
188	Ananta Massage	166/22 Bang Khun Non Rd, Bang Khun Non Sub-District, Bangkok Noi District, Bangkok 10700	210028959
189	DD Diamond Massage	60-60/17 Soi Silom 2/1, Silom Rd, Suriyawong Sub-District, Bang Rak District, Bangkok 10700	210029059
190	Diora Lang Suan	36 Soi Lang Suan, Pleonjit Rd, Lumpini Sub-District, Patumwan District, Bangkok 10330	210029159
191	Uncle Oot Thai Massage	1/1 Happy Land center Ladprao Rd, Klongchan Sub-District, Bangkok District, Bangkok	210029459
192	Kai Thai	1/1 Happy Land center Ladprao Rd, Klongchan Sub-District, Bangkok District, Bangkok	210029559
193	Raktaraa Thai Massage	3105 Enigma Plaza Ladprao Rd, Klongchan Sub-District, Bangkok District, Bangkok 10240	210029659
194	Suksumprad Old Massage	47/35-37 Ring Rd, Bang Kae Sub-District, Bang Kae District, Bangkok 10160	210029759
195	Suphatha Thai Massage	140 2/54-4 Soi Pharam 2 Rd, Samaedam District, Bangkok	210029859
196	Kruiasirimas Massage	1 PetchKasem Soi, Bang Kae North Sub-District, Bang Kae District, Bangkok 10150	210029959
197	Nathaa Thai Massage for Health	12/1 Sukhumvit 23 Soi, Klong Toey Sub-District, Klong Toey District, Bangkok 10110	210030059
198	Fah Salon	261 Sukhumvit 22 Soi, Klong Toey Sub-District,	210030159

	Massage & Nail	Klong Toey District, Bangkok 10110	
199	Pinnara	50/8 6 Moo Bang Khun Thian Rd, Samae Dam Sub-District, Bang Khun Thian District, Bangkok 10150	210030259
200	Samsen Massage	20 Samsen Rd, Ban PhanThom Sub-District, Bangkok	2100303359
201	Spaya Massage	82 Samsen Rd, Ban PhanThom Sub-District, Bangkok	210030459
202	Fifty Five Massage	55 Ram Mutri Soi Jakkaphong Rd, Chana SongKhram Sub-District, PhanaKron District, Bangkok	210030559
203	Bua Pinnacle	5/27 Ngam Duphli Soi, Pharam 4 Thung Maha Mek Sub-District, Sathon District, Bangkok 10110	210030659
204	Bann sabai	2043/2 Sukhumvit 77/1 Soi, Sukhumvit Rd, PhraKhanong north Sub-District, Wat thanaa District, Bangkok 10260	210016659
205	ADD Massage	593/16 Sukhumvit 33/1 Soi, Sukhumvit Rd, Klongton north Sub-District, Wat thanaa District, Bangkok 10110	210016759
206	Siam breeze	65/2 Sukhumvit 22 Soi, Sukhumvit Rd, Klongton Sub-District, KlongToey District, Bangkok 10110	210016859
207	Mano	1120/1122/1124 Charoen Nakorn Rd, ,Banglumphu Lower Sub-District, Klongsan District, Bangkok 10600	210016959
208	Zenith Thai Massage	395/3 Satupadit19 Soi Satupadit Rd, ,Chong Nonsi Sub-District, Yanawa District, Bangkok 11120	210017059

209	Hana	265/8 Sukhumvit 22 Soi, Sukhumvit Rd, Klongton Sub-District, KlongToey District, Bangkok 10110	210017159
210	Hathawet massage for Health	186 RamKhamHaeng 16 Soi RamkhamHaeng Rd, Huamark Sub-District, Bangkapi District, Bangkok 10240	210025459
211	Ramburi	34 RamKhamHaeng 2 Soi 5 RamkhamHaeng 2 Rd, Dokmai Sub-District, Prvet District, Bangkok 10240	210025559
212	M@B Massage	475/14 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210025659
213	Darin Massage	120/126 room un36 Ratchaprarop Rd, Phayathai Sub-District, Ratchathewi District, Bangkok 10400	210025859
214	Thai House Massage	888/427-431 Phetchaburi Rd, Phetchaburi Sub- District, Ratchathewi District, Bangkok 10400	210026059
215	Nakara Health Skin	493/1 Sathupradit Rd, Chong Nonsi Sub-District, Yannawa District, Bangkok 10120	210026159
216	Bonmarche	253/5 Pracha Uthit Rd, Thungkru Sub-District, Thungkru District, Bangkok 10140	210026259
217	Suk Chiva Som	318/5 Onnut - Lat Krabang Rd, Lat Krabang Sub-District, Lat Krabang District, Bangkok 10520	210026359
218	Hutawhet Massage 2	118/69 Soi Ramkhamhaeng 24 Huamark Sub- District, Bangkapi District, Bangkok 10240	210026559
219	Hutawhet Massage 1	440 Soi Ramkhamhaeng 24 Huamark Sub- District, Bangkapi District, Bangkok 10240	210026659
220	Thai Rak 2	2 Soi Ramkhamhaeng 24 Bangkapi Sub-District, Bangkapi District, Bangkok 10240	210026759

221	Saeng Thai Massage	932-934 Chareonkrung Rd, Tarad noi Sub-District, Samphanthawong District, Bangkok 10100	210026859
222	Pailin massage	1511/63-64 Phaholyothin Rd, Samsan nai Sub-District, Phayathai District, Bangkok 10400	210026959
223	The Bridge massage	1575/49 Soi Khang Wat Phai Tan Phaholyothin Rd, Samsan nai Sub-District, Phayathai District, Bangkok 104002	210027059
224	Sbaya	262/2 Phuthth bucha Rd, Bangmod Sub-District, Chom Thong District, Bangkok 10150	210027159
225	Healthy Home	50/9 Soi Wattanawong Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210027259
226	Choeun Meun Thai Massage	510 Suthisarn Rd, Din Daeng Sub-District, Din Daeng District, Bangkok 10400	210027359
227	Smile Massage	5 Soi Sukumvit 15 Sukumvit Rd, North Klong Toey Sub-District, Wattana District, Bangkok 10110	210027459
228	Kan-Eing	3105 Ladprao Rd, Klongchan Sub-District, Bang kapi District, Bangkok 10240	210027559
229	Good Massage	3105 Ladprao Rd, Klongchan Sub-District, Bang kapi District, Bangkok 10240	210027659
230	Nong Num Massage	1/1 Soi Happyland Happyland Rd, Klongchan Sub-District, Bang kapi District, Bangkok 10240	210027759
231	Aunchisa Massage	57 Ladprao Rd, Klongchan Sub-District, Bang kapi District, Bangkok 10240	210027859
232	Chokdee Massage	49 Soi Sukumvit 3 Sukumvit Rd, North Klongton Sub-District, Wattana District, Bangkok 10110	210027959
233	Gayavej1	10 Soi Canthn 18/7 Yaek 28 Thung Wat Don Sathorn District, Bangkok 10120	210028059

234	Gayavej2	57 Soi Canthn 18/7 Yaek 28 Thung Wat Don Sathorn District, Bangkok 10120	210028159
235	Tigerlily Massage	833 Happyland Rd, Sai 1 Klongchan Sub- District, Bang kapi District, Bangkok 10240	210028259
236	Ning Nuad Thai	1112/127 Soi sukumvit 48 sukumvit Rd, Phra Khanong Sub-District, Klong Toey District, Bangkok 10110	210028359
237	Lemongrass Massage	111/2-3 Soi Niamutis Ratchada Rd, Dindeang Sub-district, Dindeang District, Bangkok 10400	210028459
238	Relax Smile	500/13 Soi Ucharoen Asoke Dindeang Rd. Bangkok 10400	210028559
239	Suntaree Massage	23/2-3 Soi Sukhumvit 13 Sukhumvit Rd. North Khlomg Toey Sub-District, Watthana District, Bangkok 10110	210028659
240	Bangkok Sports Massage	90 Soi Tonglhor Sukhumvit Rd. North Khlomg Ton Sub-District, Watthana District, Bangkok 10110	210017359
241	Bandara	352 Ladprao 101 Rd. Khlomgwan Sub-District, Bang Krap District, Bangkok 10240	210017459
242	Magic Hand 2	2/12 Soi Sribampen Rama 4 Rd. Tungmahamek Sub-District, Sathorn District, Bangkok 10210	210017559
243	Nuad Thai Hiso	32/3 Soi Sribampen Rama 4 Rd. Tungmahamek Sub-District, Sathorn District, Bangkok 10210	210017659
244	Red Massage	447/4 Ratchaparop Rd. Makkasan Sub-District, Ratchathrwi District, Bangkok 10400	210017759
245	Ruenvilai Massage	57/9 Ratchaparop Rd. Makkasan Sub-District, Ratchathewi District, Bangkok 10402	210017859
246	Lotus Massage	16/4 Soi Sukhumvit 19 Sukhumvit Rd. Watthana District, Bangkok 10110	210017959

247	Sayamon Massage	513 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210018059
248	Song Seum Thai Massage	421/2 Sukhothai Rd, Suan Jit La Da Sub-District, Dusit District, Bangkok 10300	210018159
249	Sima	4/35 floor 2 room G219 The Old Siam Burapha Rd, Burapha Pirom Sub-District, Phranakhon District, Bangkok 10200	210018259
250	Orchid Massage	425 M. 10 Ratchaprarop Rd, Ratchathewi Sub- District, Makkasan District, Bangkok 10400	210018359
251	Feung Fa	100-102 Kanchanaphisek Rd, Bang Bon Sub- District, Bang Bon District, Bangkok 10150	210018459
252	Por Kru Home Massage	14 Soi Prachasongkhro 6 Din Daeng Sub- District, Din Daeng District, Bangkok 10400	210018559
253	Thai Massage 39	1/54-55 Soi Sukhumvit 39 Sukhumvit Rd. North Klongton Sub- District, Wattana District, Bangkok 10110	210018659
254	Karada49 (terrace)	49 Soi Sukhumvit 44 Sukhumvit Rd, North Klongton Sub- District, Wattana District, Bangkok 10110	210018859
255	Flower Massage	1091/209 Soi Phetchaburi 33 New Petchaburi Rd, Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210018959
256	Sheen Massage	19 Soi 10 Sukhumvit Rd, Klong Toey Sub- District, Klong Toey District, Bangkok 10110	210019059
257	Eoi Royal Thai Massgge	24/3 Soi Sukhumvit 35 (Charoen Niwet) North Klongton Sub- District, Wattana District, Bangkok 10110	210019159
258	Karada	93,96 Soi Sukhumvit 26 Sukhumvit Rd, Klongton Sub- District, Klong Toey District, Bangkok 10110	210019259

259	Pu Ta Wan	151-153 Soi Ladprao55/2 Ladprao Rd, Saphan Sung Sub- District, Wangthonglang District, Bangkok 10310	210019459
260	Thai Massage	984/88 Soi PridiBanomyong 40 Sukhumvit Rd, 71 North Klongton Sub- District, Wattana District, Bangkok 10110	210019559
261	Natarom	1329/10 Ladprao Rd, Wangthonglang Sub-District, Wangthonglang District, Bangkok 10310	210019659
262	Radiana Health	1091/57 Soi Jarurat New Petchaburi Rd, Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210019759
263	Indra Massage	476 Soi SuanPhlu South Sathorn Rd, Thungmamekh Sub- District, Sathorn District, Bangkok 10120	210019859
264	Inrada Massage	840/6 Soi La Salle La Salle Rd, Bang na Sub-District, Bang na District, Bangkok 10260	210019959
265	Lanpo	10/21 Soi Sukhumvit 13 Sukhumvit Rd, North Klong Toey Sub- District, Wattana District, Bangkok 10110	210020059
266	Tams Massage	40/6 Soi Wattanawong Ratchaparop Rd, Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210020159
267	Mai Thai Massage	2/50 Sri Baphuen Yenxakas Rd, Thungmamekh Sub- District, Sathorn District, Bangkok 10120	210020259
268	Banhouse Shop	2/48 Soi Sri Baphuen Rama4 Rd, Thungmamekh Sub- District, Sathorn District, Bangkok 10120	210020359
269	Malaiseeda Massage	261/3 Soi Sukhumvit22 Sukhumvit Rd, Klong Toey Sub- District, Klong Toey District, Bangkok 10110	210020459

270	China World Sarpuri	11 Ph. Phdung Khang Rd, Samphanthawong Sub- District, Samphanthawong District, Bangkok 10100	210020559
271	7 Massage	19/2 Soi Inthamra1 Sutthisan Winitch1 Rd, Samsan ni Sub- District, Phayathai District, Bangkok 10400	210020659
272	Lilasabye Massage	52/1 Soi Phetchaburi5 Phetchaburi Rd, Thung Phayathai Sub- District, Ratchathewi District, Bangkok 10400	210020759
273	Sangkarn Massage	99/5 Soi Sangkarn Ratchaprarop Rd, Phayathai Sub- District, Ratchathewi District, Bangkok 10400	210020859
274	Lucina Massage	4/1 Soi Sukhumvit26 Sukhumvit Rd, Klong Toey District, Bangkok 10110	210020959
275	Trantawan Massage	117/1-2 Soi Surawong Surawong Rd, Suriyawongse Sub- District, Bang rak District, Bangkok 10500	210021059
276	Empire Health & Relax	425/9 Soi Wattanawong Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210021159
277	Thai Rak	49 Ramkhamhaeng Rd, Ramkhamhaeng Sub- District, Bangkapi District, Bangkok 10240	210021259
278	Khacha Massage	301 Phuthabucha Rd, Bang-Mod Sub- District, Chom Thong District, Bangkok 10150	210021359
279	Bua	425/18 Ratchaprarop Rd, Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210021459
280	Baipho Massage	57/5 Soi Ratchaprarop8 Ratchaprarop Rd, Makkasan Sub- District, Ratchathewi District, Bangkok 10400	210021559
281	Pan Mai Hom	33/3 Kalpapruerk Rd, Bangkae Sub- District, Bangkae District, Bangkok 10160	210021659

282	Holiday Relax Massage	59/1 Soi Sayna Thiphy Sukhumvit22 Rd, North Klong Toey Sub- District, Wattana District, Bangkok 10110	210021859
283	Ram 65 Massage	278/180 Soi Ladprao122 Ladprao Rd, Phlabphla Sub- District, Wangthonglang District, Bangkok 10310	210021959
284	Kocho ran	4/8 Sukhumvit23 Rd, North Klongton Sub- District, Wattana District, Bangkok 10110	210022059
285	Sor Sa La	5 Watcharapon Rd, Tha raeng Sub- District, Bang Khen District, Bangkok 10220	210022159
286	Natural	21 Watcharapon Rd, Tha raeng Sub-District, Bang Khen District, Bangkok 10220	210022259
287	Jasmine Massage	61 Soi Sukhumvit22 Sukhumvit Rd, Klongton Sub- District, Klong Toey District, Bangkok 10110	210022359
288	My Friend Thai Massage	70/2 Phetchaburi Rd, Phayathai Sub-District, Ratchathewi District, Bangkok 10400	210022459
289	Tiger Massage	160/12 Soi Thonglor16 Sukhumvit Rd, 55 North Klongton Sub-District, Wattana District, Bangkok 10110	210022559
290	Indara	47/3-7 Ratchadamri Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	210022659
291	Saran Thai Massage	333/100 Laksi plaza building Kamphaeng Phet 6 Rd, Tlad Bangkhen Sub-District, Laksi District, Bangkok 10210	210022759
292	Tanarin health care	1091/78 Soi 33 New Petchaburi Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210022859
293	Sai Ngeun Massage	108/59 Phaholyothin Rd, Anusawari Chay Sub- District, Bang Khen District, Bangkok 10220	210022959

367	Kirana	20/2 Chong Nonsi Rd, Chong Nonsi Sub-District, Yannawa District, Bangkok 10120	210023059
294	49 Taninthorn Massage	22/76 Vibhavadi Rangsit 35 Rd, Snam bin Sub-District, Don Muang District, Bangkok 10120	210023159
295	Aroma Home	172 Narathiwat Rajanagarindra Rd, Chong Nonsi Sub-District, Yannawa District, Bangkok 10120	210023259
296	Nagaoka	409/8 Soi Chareonkrung 65 Chareonkrung Rd, Yannawa Sub-District, Sathorn District, Bangkok 10160	210023359
297	Sabai Thai Massage	2/16 Soi Sri Baphuen Thungmamekh Sub-District, Sathorn District, Bangkok 10120	210023459
298	Ban Chomnard Saladaeng	1/28-29 Soi Sala Daeng Silom Sub-District, Bangkok District, Bangkok 10500	210023559
299	Klaikaya Thai Massage	129/8 Soi Chaengwattana10 Chaengwattana Rd, Thung Song Hong Sub-District, Laksi District, Bangkok 10210	210023659
300	Ponnapat Massage	20 Soi Pridi Banomyong2 Sukhumvit71 Rd, Phra Khanong North Sub-District, Wattana District, Bangkok 10110	210023859
301	Da La House Thai Massage	99/187 M.6 Soi Navamin70 Navamin Rd, Klongkum Sub-District, Bueng Kum District, Bangkok 10240	210023959
302	Somboon	921,923,925 Rama3 Rd, Bangpongpan Sub-District, Yannawa District, Bangkok 10120	210024059
303	Serene	50 Soi Chareonkrung 42/1 Chareonkrung Rd, Bangkok Sub-District, Bangkok District, Bangkok 10500	210024159
304	Sud Kha Neung	19,21 Soi Nok Khet Sudpraserith Rd, Bangkok Sub-District, Bangkok District, Bangkok 10120	210024259

305	Siam massage	233-235 Pracharasbaphey Rd, Huai Khwang Sub-District, Huai Khwang District, Bangkok 10310	210024359
306	Ratchada Thai Massage	167/6 Ratchadapisek Rd, Din Daeng Sub-District, Din Daeng District, Bangkok 10400	210024459
307	Cha Ba Prai Thai Massage	44/86 Soi Charansanitwong12 Charansanitwong Rd, Thapra Sub-District, Bangkok Yai District, Bangkok 10600	210024559
308	Bangkok Massage and Salon	108/4 Soi Rambutri Khao San Rd, Tlad Yxd Sub-District Phra Nakhon District, Bangkok 10200	210024659
309	Ruen Nuad Massage Studio	42 convent Rd, Silom Sub-District Bang ruk District Bangkok 10500	210024759
310	Chor Chang Thai Massage	566 Soi Onnuch46 Sukhumvit77Rd, Suan Luang District, Bangkok 10250	210024859
311	Home Massage	1888/1 Ladkrabang Rd, Ladkrabang Sub-District, Ladkrabang District, Bangkok 10521	210024959
312	Pian Massage and Beauty Salon	108/15-16 Soi Rambutri Khao San Rd, Tlad yxd Sub-District, Phra Nakhon District, Bangkok 10200	210025059
313	Darin Beauty and Massage	303 Soi Rambutri Tlad yod Sub-District, Phra Nakhon District, Bangkok 10200	210025159
314	Rinda	84 Phra Athit Rd, Chnasngkhram Sub-District, Phra Nakhon District, Bangkok 10200	210025259
315	Siriwet Thai Massage	1365,1367,1369 Soi Phathnakar27 Phathnakar Rd, Suan Luang Sub-District, Suan Luang District, Bangkok 10250	210025359
316	Choon Seng	304/5 Phayathai Rd, Phetchaburi Sub-District, Ratchathewi District, Bangkok 10400	210015959

317	Baansuan Massage	613/1 Ramindra Rd, Kannayao Sub-District, Kannayao District, Bangkok 10230	210016059
318	Pin Thai Massage	417/12-13,423/4-6 Ratchathewi Rd, ThungPhayathai Sub-District, Ratchathewi District, Bangkok	210016159
319	Love Spa	507 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210016259
320	Yaluemchan	491/5 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210016359
321	Unyarin Health Massage	228 Krung Thon Buri Rd, Banglumphu lang Sub- District, Khonkaen District, Bangkok	210016459
322	Umaporn	419/7 Ratchaprarop Rd, Makkasan Sub-District, Ratchathewi District, Bangkok 10400	210056559
323	Silom Village Heal	288/6-7 Silom Rd, Suriyawongse Sub-District, Bang Rak District, Bangkok 10500	210013759
324	Sompong Massage	1285 Onnut 46 Suan Luang Sub-District, Suan Luang District, Bangkok	210013859
325	Rapee Massage	16/1 Silom Rd, Suriyawongse Sub-District, Bang Rak District, Bangkok 10500	210013959
326	Man da ra Bangkok	167/5 Suriyawongse Bang Rak District, Bangkok 10500	210014059
327	Time for Massage	982/22 Room 1110 1 st Floor Sukhumvit Rd, Phra Khanong Sub-District	210014159
328	Maden Massage	5 Narathiwat Rd, Suriyawongse Sub-District, Bang Rak District, Bangkok	210014259
329	Sofa Salon & Massage	4/10 Soi Sukhumvit 5 Sukhumvit Rd, North Nana Sub-District, Wattana District, Bangkok 10110	210014359
330	Suphap Thai Massage	860 Charoenrat Rd, Klong Tonsai Sub-District , Khonkaen District, Bangkok 10600	210014459

331	Anasia Thai Massage	941 Sukhumvit Rd, 77 Suan Luang Sub-District, Suan Luang District, Bangkok 10250	210014559
332	Ban-Prapassorn Massage	1538,1540 Soi Sukhumvit 48/3 Sukhumvit Rd, Phra Khanong Sub-District, Klong Toey District, Bangkok 10110	210014659
333	JW Massage	2/32 Sukhumvit Rd, Klong Toey Sub-District, Klong Toey District, Bangkok 10110	210014759
334	Ann Maya	830 Sukhumvit Rd, Phra Khanong Sub-District, Klong Toey District, Bangkok	210014859
335	Yardpet Thai Massage	3/30 Soi Sukhumvit 18 Sukhumvit Rd, Klong Toey Sub-District, Klong Toey District, Bangkok 10110	210014959
336	Traditional Thai Massage	9 Rama9 Rd, 58 Suan Luang Sub-District, Suan Luang District, Bangkok 10250	210015059
337	Thonglor Dahla Thai Massage	6/2 Soi Sukhumvit 55(Thonglor) Sukhumvit Rd, North Klongton Sub-District, Wattana District, Bangkok 10110	210015159
338	Sumalai Thai Massage	159/13 Soi Sukhumvit 55 North Klongton Sub- District, Wattana District, Bangkok 10110	210015259
339	Senses Massage and Aroma	148 Soi Narathiwat 3 Narathiwat Rd, Silom Sub- District, Bang Rak District, Bangkok 10500	210015359
340	Thaikung	1008 Charoenkrung Rd, 22-24 Tlad Noi Sub- District, Samphanthawong District, Bangkok 10100	210015459
341	Wariya	120/2 Soi Sukhumvit 26 Sukhumvit Rd, Klongton Sub-District, Klong Toey District, Bangkok 10110	210010758
342	Badin House	531/7 Intrapong Rd, Phlabplha Sub-District, Wangthonglang District, Bangkok 10310	210010458

343	The Sun	1530 Soi 48/3 Sukhumvit Rd, Phra Khanong Sub-District, Klong Toey District, Bangkok 10110	210010958
344	Sook Sabai Health Massage	23/13-14 3-4 floor Soi Sala Daeng 1 Rama4 Rd, Silom Sub-District, Bang Ruk District, Bangkok 10500	210011058
345	Surawong Massage	37/5 Soi Surawong Plaza Surawong Rd, Suriyawongse Sub-District, Bang Ruk District, Bangkok 10500	210011158
346	Tree Massage	2035/5 Soi Sukhumvit 77/1 Sukhumvit Rd, North Phra Khanong Sub-District, Wattana District, Bangkok 10260	210011258
347	Rompho Massage	2027 Soi Sukhumvit 77/1 Sukhumvit Rd, North Phra Khanong Sub-District, Wattana District, Bangkok 10260	210011358
348	Top Massage	128 Sukhumvit Rd, Klong Toey Sub-District, Klong Toey District, Bangkok 10110	210011458
349	Srirach Health Massage	15 Soi Sannibat Tesaban Ratchadapisek Rd, Chun Ka Sam Sub-District, Chatuchak District, Bangkok 10900	210011558
350	Rungcharoen Thai Massage	240 Charoen Nakorn 8-10 Klong Tonsi Sub-District, Khonkaen	210011758
351	Asia Health Massage	181/2 Sukhumvit Rd, 22 Sukhumvit Sub-District, Klongton District, Bangkok 10110	210011858
352	Anunya Massage	4/36 Sukhumvit Rd, Klong Toey Sub-District, Klong Toey District, Bangkok 10110	210011958
353	My Dear Massage	672/19 Soi Chareonkrung 30 Si Phraya Rd, Bang Ruk District, Bangkok 10500	210012058
354	Be Rich Massage	261/9 Soi Sukhumvit 22 Sukhumvit Rd, , Klong Toey Sub-District, , Klong Toey District, Bangkok 10110	210012158

355	The Tivoli Massage	71/2-3 Soi Sri Baphuen Yen Akat Rd, Thungmamekh Sub-District, Sathorn District, Bangkok 10120	210012258
356	Fuyuki Relax	759 Sukhumvit Rd, 41-43 North Klongton Sub- District, Wattana District, Bangkok 10110	210012358
357	Fuyuki 5	762/3 Sukhumvit Rd, Klongton Sub-District, Klong Toey District, Bangkok	210012458
358	Tammachart	392/44 Rama1 Rd, Pathumwan Sub-District, Pathumwan District, Bangkok 10330	210012558
359	Ngamta Massage	844 Sukhumvit Rd, Phra Khanong Sub-District, Klong Toey District, Bangkok 10110	210012658
360	Siritara	20 Soi Lasal 36 Sukhumvit Rd, 105 Bang NA Sub-District, Bang Na District,	210012758
361	Ruamreudee	30/17-19 Wireless Rd, Lumpini Sub-District, Pathumwan District, Bangkok 10330	210012858
362	Armuy Ann Yuka	384 Sukhumvit Rd, 101/1 Bang Chak Sub- District, Phra Khanong District, Bangkok	210012958
363	Bong Koch Massage	185 Sukhumvit Rd, 22 Klongton Sub-District, Klong Toey District, Bangkok 10110	210013058
364	Green Leaf	291 3rd floor Chatrium Hotel Sathorn Narathiwat Rajanagarindra Rd, Chong Nonsi Sub-District, Yannawa District, Bangkok 10120	210013158
365	Orion Thai massage	38 Charoen Nakorn Rd, Klong Tonsi Sub- District, Khonkaen District, Bangkok	210013258
366	Jirapon Massage	86 Itsaraphap Rd, Somdej Chao Phraya Sub- District Khonkaen District, Bangkok	210013358
367	Saithong Massage	12/2 Sukhumvit23 Rd,Klong Toey North Sub- District,Vatthana District,Bangkok 10100	210015659
368	Anong Health Massage	196 Rad Yar Rd,Klong San Sub- District,Bangkok 10600	210015759

369	Buasai	3/1 RangNam Rd,Phrayathai Sub-District, Ratchathewi District,Bangkok	210006858
370	9Zenthai Massage	515,517 Sukhumvit29 SukhumvitRd,KlongToey North Sub-District	210006458
371	Baansuan Massage	1865 CharoenNakornRd,BangrumpuSub- District,Klong San District,Bangkok	210003359
372	Prem	181/3 SukhumvitRd,Klong Tun Sub- District,Klong Toey District,Bangkok 10110	210001159
373	Sabai Sabai Health Massage	300 Sukhumvit22 Rd,Klong Toey Sub- District,Klong Toey District,Bangkok 10110	210000159
374	Happy Massage	180 Silom Rd,Suriyavong Sub-District,Bang Rak District,Bangkok 10500	210000648
375	Jasmine Massage	343 Surawong Rd, Surawong Sub-District,Bang rak District,Bangkok	210000759
376	Tip Thai Massage	132 Samsen Rd,Ban Pan Thom Sub-District	210000759
377	The eight spa	Sivatel Bangkok Hotel, 53 Witayu Rd. Lumpini Sud-District, Pathumwan District, Bangkok, Thailand, 10330	100200186
378	Tree Sabai Massage	87 Sukhaphiban2 Rd. Pravet Sub-District, Bangkok, Thailand 10250	100200187
379	Klin Prang Hom Massage	14/55 Prang Arun Village, Ladprakao Rd. Ladprao Sub-District, Bangkok, Thailand 10310	100200191
380	Boutique Massage	2430 Charoen krung 9, Charoen krung Rd. Wat Praya Krai Sub-District, Bangkorlaem District, Bangkok Thailand 10120	100200194
381	Lan Sasi Massage	112-114 Miteparb Village, Sukhumvit 52 Rd. Klong toey District, Bangkok, Thailand, 10260	100200195
382	D'etre Massage for Health	32/3 Soi Lad krabang 41/1, Lad krabang District, Bangkok, Thailand, 10520	100200196

383	Joy Sammakorn Massage	121 Soi Ramkhamhaeng 112, Saphansung Sub-District, Saphansung District, Bangkok, Thailand, 10240	100200200
384	Ruen Petch Massage	60 Happy land sai 2 Rd. Klong jun Sub-District, Bang kapi District, Bangkok, Thailand, 10240	100200201
385	Nad Pob Massage	78/23 Nalin city Building, Klong song ton noon Sub-District, Lad krabang District, Bangkok, Thailand, 10520	100200203
386	Na Baan Thon Massage	3 Soi Chak Phra, Klong Chak Phra Sub-District, Ta ling chan District, Bangkok, Thailand, 10170	100200206
387	Tra Krai Hom Massage	2023 Sukhumvit77 Rd. Phra kanong Sub-District, Wattana District, Bangkok, Thailand, 10110	100200207
388	Teshima Seitai Massage	53 Premire Thonglor, Sukhumvit Rd. Klong tun nuer Sub-District, Wattana District, Bangkok, Thailand, 10110	100200209
389	Baan puen Massage	25 Soi Sukhumvit 11, Klong toey Sub-District, Wattana District, Bangkok, Thailand, 10110	100200210
390	Marn Nam Massage	39 Soi. Ladprao 26, Jom phon Sub-District, Chatujak District, Bangkok, Thailand, 10900	100200211
391	Nuad Tam Rab Massage	997/4 Soi Phibul u-phatham, Samsennork Sub-District, Huey kwang District, Bangkok, Thailand, 10310	100200212
392	Butterfry Massage	Soi Sukhumvit 22 Klong toey Sub-District, Klong toey District, Bangkok, Thailand, 10110	100200217
393	Chom Chan Massage	429/96 Ban klang mueng Lardprao-Chok chai 4 Village, Lad prao-Wang hin Rd, Lad prao District, Bangkok, Thailand, 10230	100200218
394	Pimmalai Massage	2105/1 Sukhumvit Rd. Bang chak Sub-District, Phra kanong District, Bangkok, Thailand,	100200222

395	Puralai Massage	33 Soi Sukhumvit 77, Sukhumvit Rd. Phra kanong Sub-District, Wattana District, Bangkok, Thailand 10110	100200223
396	De va Massage	667/5 Soi Wachiratham satid 43-45, Sukhumvit 101/1 Rd. Bang chak Sub-District, Phra kanong District, Bangkok, Thailand, 10260	100200226
397	Pradit Massage	140 Somdaj Phrajao Taksin Rd. Bang yi ruer Sud-District, Thon buri District, Bangkok ,Thailand, 10600	100200227
398	Bosge Massage	919/6 Sukhumvit Rd. Klong tan nuer Sub-District, Wattana District, Bangkok, Thailand, 10110	100200232
399	La fe' Pin klao Massage	5/85 Soi Bharom Rajchoni 13, Arun –amrin Sub-District, Bangkok Noi Disttrict, Bangkok, Thailand, 10700	100200233
400	Thai-Lanna Masssge	173 Soi Seri thai 81/1 , Seri thai Rd. Khannayao Sub-District, Khannayao District, Bangkok, Thailand, 10230	100200235
401	Pan Preeda Massage	2008/39 Soi Phahonyothin 32/1 Chatuchak District, Bangkok , Thailand, 10900	100200236
402	Phagawadee Massage	Charan sanidwong 35 Rd, Soi bangprom 13, Phasi Charoen District, Bangkok, Thailand, 10170	100200237
403	Sirigaya Masssage	46/128 Nuan chan Rd, Nuan chan Sub-District, Buengkum District, Bangkok, Thailand, 10240	100200242
404	Sammy Beauty Massage	424 Bharom Rajchoni Rd. Bangplad Disttrict, Bangkok, Thailand, 10700	100200244
405	Ruen Da Lha Massage	161/5 Soi. Budha bucha39, Rama2 Rd, Bang kae District, 10160	100200245
406	Suphanika Massage	219,221 Ramintha Rd, Kananyao District, Bangkok, Thailand, 102230	100200246

407	Sri mala Massage	Huamark Center, Ramkamhaeng Rd. Huamark Sub-District, Bang kapi District, Bangkok, Thailand, 10240	100200248
408	S' Sense Massage	562/16 Soi. Sathorn3, Thung Mahamek Sub- District, Sathorn District, Bangkok, Thailand, 10120	100200249
409	Phu dao Massage	63 Soi Sukhumvit63, Sukhumvit Rd, Klong tan Sub-District, Wattana District, Bangkok, Thailand, 10110	100200250
410	Serene spa	55 Soi. Charoenkrung42/1, Chroenkrung Rd, Bangrak District, Bangkok, Thailand, 10500	100200251
411	Montana Massage	438 Soi Chan47, Chan Rd. Sathorn District, Bangkok, Thailand, 10120	100200254
412	Wintate Thai Massage	359/8 On nut Rd, Pravet District, Bangkok, Thailand, 10250	100200256

BIOGRAPHY

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ACADEMIC BACKGROUND	B.A. in Arts, Assumption University, Bangkok, Thailand in 2009 M.S.C, Master of Science Management, Assumption University, Bangkok, Thailand in 2013
EXPERIENCES	Lecturer, Faculty of Hospitality and Tourism, Siam University, Bangkok, Thailand

