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Mediating Role of Consumer Innovativeness: The Impact of Social Media Engagement on Behavioural Beliefs in Private Healthcare

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<u>ABSTRACT</u>

High expectations and health beliefs from customers have impacted a rapid adoption of technology and digital innovations in virtual health and wellness. Henceforth, it is a challenge for private healthcare to consistently increasing social media engagement and health behaviours through social media successfully. The research objective in this study shows the researcher's intentions of conducting a research of Consumer Innovativeness to the impact of social media engagement on Behavioural Beliefs (BB) in private healthcare. A conceptual framework had been developed based on Health Protective Behaviours (HPB). The researcher looks into the significance of Behavioural Beliefs (BB) mediated by Consumer Innovativeness in understanding social media engagement in private healthcare through social media. A quantitative research was conducted on 400 respondents, both local and foreign respondents from private healthcare, which residing in Klang Valley. Due to the impact of COVID-19 pandemic issues, a non-probability sampling had been adopted by the researcher. In this research, purposive sampling had been adopted, whereby the researcher used selected and subjective sampling when selecting samples in surveys. The outcome from this research exposed that social media engagement through social media in private healthcare has significant positive relationship in private healthcare on Behavioural Beliefs (BB), Consumer Innovativeness (CI) and Health Protective Behaviour (HPB). In terms of mediating effects, Consumer Innovativeness (CI) has partially mediation on the relationship between Behavioural Beliefs (BB) and Health Protective Behaviours (HPB).

Key Words: Behavioural beliefs; Consumer innovativeness; Health protective behaviour

INTRODUCTION

The significance of social media engagement is heightened by the fragmentation of the social media environment, which has resulted in the formation of a large number of customer engagements with vastly different consumption needs and profiles In such cases, social media engagement become critical for private healthcare to reach out to and understand the needs of consumers in these various market segments, as well as to create new brands to meet those needs. Private healthcare use social media engagement to facilitate transactional interactions and create business value by drawing on their social networks, Facebook and Instagram have long dominated the social media landscape as the largest and most popular platforms (Influencer Marketing Hub, 2021). A number of new social media sites have increased to prominence in recent years. New social media platforms conversely have had a difficult time settling in (Influencer Marketing Hub, 2021). For example, TikTok debuted in year 2016 and rapidly increased traction among young segments. It quickly rose to the top of both the Apple app and Android app stores and in terms of popularity. In some ways, TikTok, on the other hand, has become a victim of their own success (Influencer Marketing Hub, 2021). As of 2021, over 86% of Malaysians are actively engaged with social media, which is a 24% rise from 2016. In 2020, the most commonly engaged social media sites by Malaysian were Facebook; Instagram; Facebook Messenger; and LinkedIn. Facebook was recorded the most common used social media across all so-

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Behavioural Beliefs on Social Media Engagement

Behavioural Beliefs (BB) is a thought that an individual expect outcome on something. According to previous researches, Behavioural Beliefs (BB) impact customers' behaviours toward advertising through online and social media platforms. Behavioural Belief (BB) gives an important predictor of social media engagement toward social media in private healthcare. Young segments are possibly ignore advertisement through social media engagement in private healthcare if they encounter an unflavourable experience, unrelated messages or doubtful toward a post or an advertisement.

Consumer Innovativeness on Social Media Engagement

The Consumer Innovativeness (CI) in this research could serve as a road map for private healthcare marketers interested in innovative marketing, customer innovation, product development, and globalisation. Understanding the Consumer Innovativeness of consumers as well as the psychological effects of globalisation is critical for long-term business success. As revealed by Ceyda Tanrikulu, (2022) [1]. the results showed that various generation cohorts are motivated to be innovative. The motivations for innovation were identified can help understand how social media engagement meet consumers' relevant demands. In other words, the cognitive based factors influenced segment differences in innovation. As a result, being better at offering social media engagement in entertainment, enjoyment, fun, and self-gratification is critical to the innovative product's value proposition in private healthcare.

Health Protective Behaviours (HPB)

The COVID-19 induced economic downturn has acted as a major catalyst for private healthcare digitization. The key benefits of social media engagement such as contactlessness, better price, convenience, and usefulness, were prioritised due to severe quarantine rules. Private healthcare benefitted from the strong penetration of social media engagement and digital marketing when it came to identifying and drawing new customers on a global, national, and local level. The current e-commerce trends are centered on ease and security. The COVID-19 pandemic has pushed customers to go digital and changed their Health Protective Behaviours (HPB) patterns all across the world. All e-commerce subsectors have been influenced by the significant shift in Health Protective Behaviours.

METHODS

A quantitative research was conducted on 400 respondents, both local and foreign respondents from private healthcare,

which residing in Klang Valley. Due to the impact of COVID-19 pandemic issues, a non-probability sampling had been adopted by the researcher. In this research, purposive sampling had been adopted, whereby the researcher used selected and subjective sampling when selecting samples in surveys.

Instruments

Google Form had been used to distribute survey questionnaires among respondents. A survey form link had been sent out to private healthcare customers directly and disseminating through The Management of private healthcare, insurance agents, Third Party Administrators (TPAs), insurance agencies, insurance companies, General Practitioners (GPs), Medical Officers (MO), specialist clinics, private clinics, private healthcare customers, patients, COVID-19 vaccines and amongst others. The researcher used 5 Point Likert Scale to gather response on how strongly the respondents agree with the statements mentioned in the questionnaires. 5 Point-Likert Scale was developed in 1932 by Rensis Likert to assess attitudes of respondents. Normally, there are five or seven scales used by respondents to provide their answers the scale to which they agree or disagree with a question, 5-Point-Likert Scale is also a kind of psychometric feedback measurement. Respondents give their level of answer to a question in five points, which are (1) Strongly disagree; (2) Disagree; (3) Neither agree nor disagree; (4) Agree; and (5) Strongly agree,. Both Social Sciences Statistical Software (SPSS) and PLS-SEM had been used to test reliability and validity for this research. Finally, the researcher had included the investigation plan and also the ethical consideration related with the study [2-6].

Behavioural Beliefs (BB) had been originally adopted from; the researcher had adopted all six (6) items in total. The Behavioural Beliefs (BB) is developed to measure subjective probabilities that the action will generate an outcome or a belief on positive outcomes caused by behaviours. The questionnaires had been adopted as the survey results displayed the largest amount of examples that both the attitude and behaviour intentions have high impact on consumer behaviors, on other words, the questionnaires were adopted using their Theory of Planned Behavior (TPB) to define its instruments. In addition, they were designed to examine consumers' attitudes and behaviours on social media in private healthcare. The list of items is listed as follows:

- Perform healthcare transactions using social media in private healthcare more secure.
- If I use social media in private healthcare, I will make payments effective and efficient.
- I will get the convenience of payment or queue is shorter when using social media in private healthcare.
- If I use social media in private healthcare, it will help reduce the burden of health issues.
- If I use social media in private healthcare, then I will reduce the transmission of disease through direct contact with people.
- If I use social media in private healthcare, then I will participate in the health and wellness activity by private health-

care provider.

The researcher had adopted all six items in total. The Consumer Innovativeness (CI) is established to assess the extent to which a customer is an innovator in a particular product. The list of items is listed as follows:

- The design of new trends on social media is attractive to me.
- Using new trends of social media would provide a novel experience.
- I feel more important when using new trends on social media.
- I like to follow global trends rather than sticking to traditions.
- Using new trends of social media would improve my image.
- People think positively of me when I use new trends of social media.

Health Protective Behaviour (HPB) The researcher had adopted all nine (9) items in total. The Health Protective Behaviour (HPB) is developed to measure the health protecting elements of lifestyles and changes of health protective behavior in adults. The list of items are listed as follows:

- I consider opinion from social media in private healthcare while selecting information related to health and wellness.
- I feel social media in private healthcare is a good source to get information on health and wellness preventive measures.
- I can change my opinion about health and wellness based on updates reported in social media in private healthcare.
- Social media in private healthcare plays an important role in educating me about the procedures to follow in the event of outbreak of disease.
- Social media in private healthcare play an important role in increasing my knowledge of general preventive behaviors to control the infection.
- Social media in private healthcare play an important role in spreading awareness of health and wellness in the community.
- Social media in private healthcare play an important role in educating people on how to protect others if they are ill.
- Social media in private healthcare play an important role in decreasing fear, anxiety, and confusion about health and wellness among people.
- I trust in what is posted on social media in private healthcare related to health and wellness [6-12].

RESULTS AND DISCUSSION

The Outcomes Produced are Distributed into Four Parts

Part 1: Demographic profile of respondents associated with

information such as nationality, gender, marital status, age, family monthly income, education level, social media tools use the most for health and wellness purposes, how often to use social media for health and wellness purposes, when to use social media for health and wellness purposes normally, and main reasons for using social media in health and wellness. **Table 1** shows the important information about the respondents' profile.

Table 1: Demographics of respondents

Character- istic	Descrip- tion	Frequency	Valid Per- cent	Cumu- lative Percent
Are They	Yes	400	100	100
Private Healthcare Customer?	No	0	0	100
Т	otal	400	100	n/a
	Malaysian	358	89.5	89.5
	Indian	20	5.0	94.5
Nationality	Indonesian	15	3.75	98.25
	Vietnamese	2	0.5	98.75
	Others	5	1.25	100
Т	otal	400	100	n/a
Quarter	Male	159	39.8	39.8
Gender	Female	241	60.3	100
of	Total	400	100	n/a
of	Married	255	63.8	63.8
	Single	140	35.0	98.8
Marital	Widowed	3	0.8	99.5
Status	Divorced/ Separate	2	0.5	100
Т	otal	400	100	n/a
	Less than 25 years old	127	31.8	31.8
	25 to 34 years old	56	14.0	45.8
Age	35 to 44 years old	140	35.0	80.8
, ige	45 to 54 years old	58	14.5	95.3
	55 to 64 years old	18	4.5	99.8
	More than 65 years old	1	0.3	100
Т	otal	400	100	n/a
	Less than RM 5,000	76	19.0	19.0
Family Monthly	RM 5,001 to RM 10,000	181	45.3	64.3
Income	RM 10,001 to RM 20,000	106	26.5	90.8
	More than RM 20,000	37	9.3	100
Т	otal	400	100	n/a

	High school or below	43	10.8	10.8
	Certificate or Diploma	110	27.5	38.3
Education Level	Bachelor's Degree	132	33.0	71.3
20101	Post- graduate education	29	7.3	78.5
	Profession- al certificate	86	21.5	100
То	otal	400	100	n/a
	Student	12	3.0	3.0
	Administra- tive/clerk	64	16.0	19.0
	Managerial level	57	14.3	33.3
Occupation	Profes- sional	145	36.3	69.5
	Business- man	117	29.3	98.8
	Retiree	1	0.3	99.0
	Without occupation	4	1.0	100
Тс	otal	400	100	n/a

Part 2: Data investigation deals with the research instrument such as normality, validity and reliability. In the other words, all the Structural Equation Modelling (SEM) assumption are being confirmed to make sure all the circumstances of proceeding with SEM are being fulfilled. **Table 2** shows the Social Media Engagement Behaviour of Private Healthcare Customers.

Table 2: Social media engagement behaviour of private health customers

Character- istic	Description	Fre- quency	Valid Percent	Cumu- lative Percent
	Twitter	98	n/a	n/a
Social Me-	Facebook	387	n/a	n/a
dia Platform	Instagram	371	n/a	n/a
Used the	Whatsapp	400	n/a	n/a
Most for	Snapchat	0	n/a	n/a
Health and Wellness	Telegram	85	n/a	n/a
Purpos- es (Can	TikTok	355	n/a	n/a
	YouTube	368	n/a	n/a
Choose Up	LindkedIn	95	n/a	n/a
to 3).	WeChat	106	n/a	n/a
	Others	0	n/a	n/a
Frequency	Daily	397	99.3	99.3
of Using	Once a week.	0	0	99.3
Social Media for	2 to 3 times a week.	0	0	99.3
Health and Wellness Purpose.	More than 4 times a week.	3	0.08	100
·	Total	400	100	n/a

Moment of	During free time.	387	96.8	96.8
Accessing Social	Whilst at school / work.	0	0	0
Media Platform for Health and	During emergency occasions.	0	0	0
Wellness	Meal times.	0	0	0
Purpose.	Any spare moment.	13	3.3	100
	Total	400	100	n/a
	Increase the knowl- edge on disease.	400	n/a	n/a
	Express my emo- tions and feelings.	25	n/a	n/a
	Share my experi- ence on disease and its treatment.	59	n/a	n/a
Main reasons for Using Social Media in Health and Wellness (Can Choose Up to 3).	Getting advice and support from doc- tors and health and wellness profes- sionals.	199	n/a	n/a
	Find answers for additional and for- gotten questions.	350	n/a	n/a
	Help others people in the health and wellness matters.	9	n/a	n/a
	Buy and sell health and wellness prod- uct and service.	224	n/a	n/a
	Read and share reviews.	17	n/a	n/a
	Others	0	n/a	n/a

AVE measures the level of variance captured by a construct versus the level due to measurement error, values above 0.7 are considered very good, whereas, the level of 0.5 is acceptable. For convergent validity, the AVE is higher and more than 0.5 such as Behavioural Beliefs (BB) 0.772, Consumer Innovativeness (CI) 0.931, and Health Protective Behaviour (HPB) 0.967. **Table 3** below shows the "convergent validity" and "reliability" of the reflective measurement models.

Table 3: The convergent validity" and "reliability of reflective measurement models

Key Con- struct	Items	Load- ings	Cron- bach's Alpha	Com- posite Reli- ability	"rho_A"	AVE
	BB1	0.893				
Be-	BB2	0.832		0.953	0.947	0.772
havioural Beliefs (BB)	BB3	0.811	0.941			
	BB4	0.790				
	BB5	0.863				
	BB6	0.881				
	CI1	0.839				
Consumer	CI2	0.833			0.911	0.000
Innova- tiveness	CI3	0.709	0.910	0.931		
	CI4	0.801	0.910	0.931		0.692
(CI)	CI5	0.688				
	CI6	0.831				

	HPB1	0.867				
Health Protective Behaviour	HPB2	0.855				
	HPB3	0.854				
	HPB4	0.849				
	HPB5	0.834	0.961	0.967	0.962	0.764
(HPB)	HPB6	0.844				
	HPB7	0.853				
	HPB8	0.854				
	HPB9	0.826				

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Part 3: Analyse the causal impact of Behavioural Beliefs (BB) and Consumer Innovativeness (CI) on Health Protective Behaviour (HPB) using SEM via Smart-PLS 3.0. In addition, path coefficient is assessed in order to evaluate the hypothesized relationships between constructs in a study. The coefficients of the significant path, t-values, and standard error are assessed through bootstrapping procedure. The bootstrapping technique ensures that measures are calculated better. This is done by repetitively calculating re-samples of 5,000 and cases using bootstrapping, Hair the 5,000 bootstrapping samples used are to ensure that a proxy is given to the distribution of the empirical standard error of the model, the path coefficients were determined using t-statistics from the bootstrapping standard error procedure. The results of direct effect are as follows.

Table 4 below shows the direct effect of variables. One of the key constructs in the research construct is determining the effect of Behavioural Beliefs (BB) construct on Health Protective Behaviours (HPB). In terms of Behavioural Beliefs (BB), the path coefficient (beta-coefficient) is positive 0.294 (p=0.000, t=4.726), suggesting that Behavioural Beliefs (BB) has a positive and high significant effect on Health Protective Behaviours (HPB) as both t-values and p-values satisfy the threshold values (p<0.05 and t>1.96). This mean when Behavioural Beliefs (BB) increases by 1 unit, it will increase Health Protective Behaviours by 0.294 units. This shows that Behavioural Beliefs (BB) has a significant effect on Health Protective Behaviours (HPB). In sum, Behavioural Beliefs (BB) has a positive and high significant effect on Health Protective Behaviours (HPB). In sum, Behavioural Beliefs (BB) has a positive and high significant effect on Health Protective Behaviours (HPB).

Table 4: The direct effect of variables

Main Construct	Original Sample (O)	T Statistics	p-value
Behavioural Beliefs (BB) -> Health Protective Behaviour (HPB)	0.294	4.726	0.000
Consumer Innovativeness (CI) -> Health Protective Behaviours (HPB)	0.131	2.335	0.019

Behavioural Beliefs (BB) ->			
Consumer Innovativeness	0.317	6.179	0.000
(CI)			

In terms of Consumer Innovativeness (CI), it has positive and significant direct effects on Health Protective Behaviours (HPB). This means Consumer Innovativeness (CI) has a positive and significant effect on Health Protective Behaviours (HPB) with a β -coefficient of 0.131 (p=0.019, t=2.335), as the β -coefficients are associated with p<0.05 and t>1.96 suggesting Consumer Innovativeness (CI) has significant effects on the Health Protective Behaviours (HPB). This means by increasing 1 unit of Consumer Innovativeness (CI), it will cause to increase Health Protective Behaviours (HPB) by 0.131 units. This shows that Consumer Innovativeness (CI) has a significant effect on Health Protective Behaviours (HPB). In sum, Consumer Innovativeness (CI) has positive and significant direct effects on Health Protective Behaviours (HPB).

In terms of Behavioural Beliefs (BB), it has positive and significant direct effects on Consumer Innovativeness (CI). This means Behavioural Beliefs (BB) has a positive and high significant effect on Consumer Innovativeness (CI) with a β -coefficient of 0.317 (p=0.000, t=6.179), as the β -coefficients are associated with p<0.05 and t>1.96 suggesting Behavioural Beliefs (BB) has significant effects on the Consumer Innovativeness (CI). This means by increasing 1 unit of Behavioural Beliefs (BB), it will cause to increase Consumer Innovativeness (CI) by 0.317 units. This shows that Behavioural Beliefs (BB) has a significant effect on Consumer Innovativeness (CI). In sum, Behavioural Beliefs (BB), it has positive and significant direct effects on Consumer Innovativeness (CI).

Part 4: The last section of the data assessment deals with the "Mediating Effect" of the Consumer Innovativeness (CI) on the connection between Behavioural Beliefs (BB) and Health Protective Behaviour (HPB). **Table 5** below shows the mediating effect of Consumer Innovativeness (CI) on the relationship between Behavioural Beliefs (BB) and Health Protective Behaviour (HPB).

Based on the **Table 5**, in terms of mediating effect of Consumer Innovativeness (CI) on the relationship between Behavioural Beliefs (BB) and Health Protective Behaviours (HPB), it has a positive and significant mediating effects as the p<0.05 (p=0.018) and t>1.96 (t=2.044). Besides that, Behavioural Beliefs (BB) and Consumer Innovativeness (CI) also have positive and significant indirect effects on Health Protective Behaviours (HPB) with a VAF of 27.85%. In another words, this means that Consumer Innovativeness (CI) has partial mediating effects on the relationship between Behavioural Beliefs (BB) and Health Protective Behaviours (HPB). This is because VAF falls between 20% and 80%.

Table 5: The Mediation Effect of Specific Indirect Effect.

Mediation Effect	Original Sample (O)	T Statistics (O/STDEV)	p-value	Direct Effect	VAF	Mediation Type
Behavioural Beliefs (BB) -> Consumer Innovativeness (CI) -> Health Protective Behaviours (HPB)	p-value	2.044	0.018	0.041	27.85%	Partial Medi- ation

CONCLUSION

The current literature presented had been assessed and re-

viewed so as to establish the relation between Behavioural Beliefs (BB) and Health Protective Behaviour (HPB). The exist-

ing research had been concluded and confirmed that by improving Behavioural Beliefs (BB) in social media engagement, it enhances Health Protective Behaviour (HPB) and customer engagement among private healthcare customers. Hence, it is concluded that when private healthcare develop their knowledge of Behavioural Beliefs (BB), it will enable them to increase social media engagement through social media in private healthcare sector. In terms of Behavioural Beliefs (BB), based on the past researchers, it is concluded that by enhancing Behavioural Beliefs (BB) of social media, it will increase social media engagement In sum, it is concluded that Behavioural Beliefs (BB) improves social media engagement through social media among the private healthcare.

Besides that, the current literature presented had been assessed and reviewed so as to establish the relation between Consumer Innovativeness (CI) and Health Protective Behaviour (HPB). The existing research had been concluded and confirmed that by improving Consumer Innovativeness (CI) in social media engagement, it enhances Health Protective Behaviour (HPB) and customer engagement among private healthcare customers.

In addition, past researchers revealed that a risk taker who is willing to do things differently, the ability to handle multiple ideas concurrently, offering different perspectives on old problems, the ability to find solutions when challenged, standing out in disagreement with a group, being able to inspire and motivate others, and drawing energy from frequent change are all characteristics of a customer with high Consumer Innovativeness (CI). These characteristics may entice a customer to pursue an engagement in the development of new technological ventures, Consumer Innovativeness (CI) is critical for both literature and private healthcare business. The need for broadening knowledge about similarities and differences among consumers as markets expand globally, private healthcare launching new products with increasing frequency, encouraging consumer welfare through innovation, relying on successful innovation to contribute to private healthcare's growth and profit, Consumer Innovativeness accelerates innovative behaviour, which drives innovation adoption and diffusion Furthermore, according to the current approach in consumer behaviour discipline, determining Consumer Innovativeness (CI) is a critical stage to ensure that a product or service meets the appropriate needs Consumer Innovativeness (CI) is a psychological state that can provide reliable insight into a tendency to pursue goals, such as the intention to adopt new goods and services. In the consumer behaviour literature, the concept of Consumer Innovativeness (CI) makes a significant contribution to understanding the key triggers that lead to customer engagement and is suggested to be useful for predicting consumers' innovative purchasing behaviour. Hence, it is concluded that when private healthcare develop their knowledge of Consumer Innovativeness (CI). Creativity and innovation trends in social media tend stimulate private healthcare customers' interest. Private healthcare identify new opportunity by focusing on these trends of social media engagement. Over two-third of digital advertisements on social media in private healthcare have become more vital since Consumer Innovativeness (CI) has been improved through desktop and mobile. Psychology has a significant influence on consumer adoption of innovation, with Consumer Innovativeness acting as a mediator in sum, it is concluded that Consumer Innovativeness (CI) improves Health Protective Behaviour (HPB) and social media engagement through social media among the private healthcare.

Besides that, the current literature presented had been assessed and reviewed in order to establish the relation between Behavioural Beliefs (BB) and Consumer Innovativeness (CI). The existing research had been concluded and confirmed that by improving Behavioural Beliefs (BB) in social media engagement, it enhances Consumer Innovativeness (CI) of the private healthcare customers through social media in private healthcare. The learning process or vicarious innovativeness has an effect on innate Consumer Innovativeness (CI) and Health Protective Behaviours (HPB). Innovators with unique personality traits seek information about innovations, and the information they obtain motivates them to adopt new technology. Through personal and impersonal interactions, innovators seek new information and experiences through social media engagement. Innovative private healthcare customers communicate with one another via healthcare social media, serving as opinion leaders to the rest of society, past researchers revealed that attitudes and Behavioural Beliefs (BB) influences consumers' intention to purchase green products through Consumer Innovativeness (CI) Behavioral Beliefs (BB) influence attitudes toward behavior, while normative beliefs affect subjective norms. The intention to act is shaped by these beliefs of the behavior's consequence, which result in positive evaluation. Behavioral Beliefs (BB) is considered a direct antecedent and one of the proxy of actual behavior lastly, the current literature presented had been assessed and reviewed in order to establish the mediating effect of Consumer Innovativeness (CI) on the relationship between Behavioural Beliefs (BB) and Health Protective Behaviour (HPB) of the private healthcare customers through social media in private healthcare. It had been concluded and confirmed that there is a significant relationship between Consumer Innovativeness (CI), Behavioural Beliefs (BB) and Health Protective Behaviour (HPB) of the private healthcare customers through social media in private healthcare. Ever since the investigation of the existing research supported the theoretic propositions, it is concluded that Consumer Innovativeness (CI) enables to mediate the relationship between Behavioural Beliefs (BB) and Health Protective Behaviour (HPB) of the private healthcare customers through social media in private healthcare. The existing research confirmed that by improving Consumer Innovativeness (CI) in social media engagement, it enhances engagement among private healthcare customers Creativity and innovation trends in social media tend stimulate private healthcare customers' interest,. Private healthcare identify new opportunity by focusing on these trends of social media engagement, Over two-third of digital advertisements on social media in private healthcare have become more vital since Consumer Innovativeness (CI) has been improved through desktop and mobile. For example, New Feeds feature of Facebook linked together with Instagram posts to optimise engagement of social media, Chaffey (2020). Private healthcare customers engage with social media in private healthcare such as Facebook and Instagram to look for health and wellness information, desired doctors and also urgent enquiries on treatment, Social media allow private healthcare and doctors

engage with new and existing private healthcare customers, Social media in private healthcare is transforming with new technology. It improves social media engagement and provides opportunity for private healthcare to engage with their customers. Private healthcare gets cost effective leads by boosting Consumer Innovativeness (CI) through social media in private healthcare, There is also an influence of similar strength of Behavioural Beliefs (BB) from previous researchers such as the respondent's perception that engaging in physical activities will likely improve their Health Protective Behaviours (HPB) i.e. health and fitness, mental well-being, and these will not interfere with their commitments. The targeting options available in the social media era can be extremely beneficial in communicating that message towards Health Protective Behaviours (HPB). There is also the possibility of attempting to encourage respondents who are not currently physically active to become more active in the future by improving Behavioural Beliefs (BB), which include elements of positive outcomes, support from important people, and enjoyment of the exercise process itself Nikola

Limitations and Future Research

It had been identified that there are some limitations in related to the research, even though there are establishments on validity and reliability of the instrument. The research's main flaw is its lack of comprehensiveness, not only in terms of the respondents' location. Further research in this area may be required to cover a large geographic area, further demographics and also new socio-psychological variables related to social media engagement with the purpose of getting greater insights on the relationships that have been studied. The sample size of the research was restricted to private healthcare customers of private healthcare providers residing in Klang Valley. Therefore, research findings may not be comprehensive across all private healthcare industry. In addition, the research was done for all social media platforms in general.

The researcher did not focus on specific social media platforms. Therefore, future researcher may study deeper in this area into the social media engagement rate by private healthcare customers who engage with social media in private healthcare. Therefore, social media engagement strategies and its relationships may be investigated according to the level of social media engagement and their attitude and behaviour towards private healthcare.

In sum, in order to encourage private healthcare to practice full adoption of the social media engagement strategy, future researchers may come out with a scale or test social media engagement applicability across private healthcare industries. Future researchers can decide which measurements of social media engagement are increasing customer relationships with different segmentation effectively through social media platforms.

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