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Doç. Dr. Selma KILIÇ KIRILMAZ
Sakarya Uygulamalı Bilimler Üniversitesi, Yönetim ve Strateji
skirilmaz@subu.edu.tr
Orcid: 0000-0002-8478-1910

Reyhan ÇOMAK
İstanbul Şişli Meslek Yüksekokulu, Tıbbi Dokümantasyon ve Sekreterlik Programı
reyhan.comak@sisli.edu.tr
Orcid: 0000-0003-2462-3053.

THE EFFECT OF CORPORATE SOCIAL RESPONSIBILITY DIMENSIONS ON BRAND PREFERENCE: A STUDY ON THE TURKISH HEALTHCARE SECTOR

Abstract

This study was conducted to determine the impacts of consumers' perceptions on economic, legal, ethical and philanthropic responsibilities specified in Carroll's (1991) four-dimensional Corporate Social Responsibility (CSR) model on brand preference. As part of the study conducted by adopting the quantitative research method, four hypotheses were developed in order to test the direct impacts of economic, legal, ethical and philanthropic responsibilities on consumer preferences. Data were collected through questionnaires and 394 valid responses from participants, who previously received services from private hospitals operating in Turkey. The obtained data were analyzed using Structural Equation Modeling. According to the findings obtained from the study; it was determined that economic, legal and ethical CSR dimensions positively affected the brand preference of consumers, however philanthropic CSR did not have a significant impact on the brand preference of consumers. Given these findings, it is understood that consumers in health services attach more importance to economic, legal and ethical responsibilities, but approach philanthropic responsibilities more cautiously.

The study indicates that CSR activities should be addressed not only with philanthropic activities, but also in a way that contributes to the competitive strategies of businesses. Businesses should develop holistic strategies for economic, legal, ethical and philanthropic responsibilities as well. In addition, the study also provides an explanatory contribution to the complicated findings in the literature by revealing that the impact of philanthropic CSR on brand preference is context-sensitive. Therefore, both theoretical and practical contributions were presented as a result of the study conducted.

Keywords: Economic CSR, Legal CSR, Ethical CSR, Philanthropic CSR, Brand Preference, Stakeholder Theory.

KURUMSAL SOSYAL SORUMLULUK BOYUTLARININ MARKA TERCIHINE ETKISI: TÜRKIYE SAĞLIK SEKTÖRÜ ÜZERINE BIR ARAŞTIRMA

Öz

Bu çalışma, Carroll'un (1991) dört boyutlu Kurumsal Sosyal Sorumluluk (KSS) modelinde belirtilen ekonomik, yasal, etik ve hayırseverlik sorumluluğun, marka tercihi üzerindeki etkilerini belirlemek amacıyla gerçekleştirilmiştir. Nicel araştırma yönteminin benimsendiği araştırmada, ekonomik, yasal, etik ve hayırseverlik sorumluluklarının tüketici tercihleri üzerindeki doğrudan etkilerini test etmek için dört hipotez geliştirilmiştir. Veriler, Türkiye'de faaliyet gösteren özel hastanelerden hizmet alan katılımcılardan anketler yoluyla toplanmıştır ve 394 geçerli anket analize dahil edilmiştir. Elde edilen veriler Yapısal Eşitlik Modeli kullanılarak analiz edilmiştir. Çalışmadan elde edilen bulgulara göre; ekonomik, yasal ve etik KSS boyutlarının tüketicilerin marka tercihlerini olumlu yönde etkilediği, ancak hayırseverlik odaklı KSS'nin tüketicilerin marka tercihleri üzerinde önemli bir etkisi olmadığı tespit edilmiştir. Bu bulgular ışığında, sağlık hizmetleri tüketicilerinin ekonomik, yasal ve etik sorumluluklara daha fazla önem verdiği, ancak hayırseverlik odaklı sorumluluklara daha temkinli yaklaştığı anlaşılmaktadır. Çalışma, KSS faaliyetlerinin sadece hayırseverlik faaliyetleri ile değil, aynı zamanda işletmelerin rekabet stratejilerine de katkıda bulunacak şekilde ele alınması gerektiğini göstermektedir. İşletmeler, ekonomik, yasal, etik ve hayırseverlik sorumlulukları için de bütünsel stratejiler geliştirmelidir. Ayrıca, çalışma, hayırseverlik odaklı KSS'nin marka tercihi üzerindeki etkisinin bağlama duyarlı olduğunu ortaya koyarak, literatürdeki karmaşık bulgulara açıklayıcı bir katkı sağlamaktadır. Bu nedenle, yapılan çalışmanın sonucunda hem teorik hem de pratik katkılar sunulmuştur.

Anahtar kelimeler: Ekonomik KSS, Yasal KSS, Etik KSS, Hayırsever KSS, Marka Tercihi, Paydaş Teorisi.

1. INTRODUCTION

Today, the concept of CSR is not only considered by businesses as philanthropic activities, but also as a strategic element that enables them to have an impact on the behavior of their consumers. Businesses can establish more positive relations with all their stakeholders on account of CSR. Consumers also want to see the businesses as institutions that not only show economic success, but also contribute to the society they operate in, exhibit ethical behaviors and act in accordance with the law (Carroll, 1991). This understanding, which embraces economic, legal, ethical and philanthropic responsibilities, reveals the impact of CSR on stakeholder trust and corporate legitimacy.

It is known that after the COVID-19 Pandemic, society's expectations from businesses have increased further. Especially, it has become very important for businesses to carry out their activities in an ethical, responsible and transparent manner in industries that provide more trust-based services such as the health sector. Following the pandemic period, consumers began to expect healthcare institutions to not only provide quality service but also to be more sensitive to issues such as ethical responsibility and contribution to the well-being of society (Ghaffar et al., 2025; Aman-Ullah et al., 2023). This situation once again emphasized the importance of CSR activities and revealed that CSR is a strategic element in its effect on brand preference.

A review of the literature suggests an increase in research on the impacts of CSR on consumer behavior. However, it is impossible to claim that the results of all these studies are consistent. Some studies found that CSR had positive impacts on brand preference and purchase intention (Dangaiso et al., 2024; Mate, 2024; Alfadul & AlKubaisy, 2024), while others indicated that this impact varied depending on the size of CSR (Achabou, 2020; Mirabi et al., 2014). For example, it was found that while economic and ethical responsibilities had stronger impacts on consumer preferences, the impact philanthropic initiatives may be more limited or context-dependent (Chomvilailuk & Butcher, 2024; Zhang et al., 2025). This situation put forward that the impact of CSR on consumers' brand preference may vary according to CSR dimensions.

A review of the literature also suggests that studies on the impacts of CSR on consumer preferences are mostly conducted in developed countries and product-oriented sectors. Whereas, it is understood that the studies conducted in developing countries and in the context of the service sector, especially in the health sector, are limited. Due to its nature, there may be differences in the perception of CSR dimensions in the health sector, where consumers' expectations of trust and ethical responsibility are quite high (Ghaffar et al., 2025). In addition, it is further understood that there are very few empirical studies addressing the impacts of CSR on brand preference in a multidimensional way within the context of developing countries such as Turkey. In this sense, the study seeks to answer the following fundamental research question:

RQ: How do the economic, legal, ethical and philanthropic responsibility dimensions defined in Carroll's (1991) CSR pyramid affect the brand preference of consumers in the Turkish health sector and how do these impacts differ among the dimensions?

Based on this fundamental question, the study aims to explain the inconsistent findings in the literature and to present a multidimensional evaluation specific to the health sector by testing the impact of each CSR dimension on brand preference individually.

In this study, Carroll's (1991) CSR model was taken as a basis. This model has a four-dimensional construct that includes economic, legal, ethical and philanthropic responsibilities. Each dimension in the model is examined individually in the study conducted while aiming to account for different findings in the literature. In this way, the impacts of CSR on brand preference are addressed in a holistic way in the context of dimensions and offer new perspectives specific to the health sector.

It can be argued that the study, along with its theoretical contributions, also reveals important results for practitioners and policy-makers. Determining which CSR dimension is attached more importance by consumers will guide the strategic planning of medical enterprises. In addition, the results obtained from the study will be the basis for the social service planning of policy makers.

As a result, Carroll’s (1991) CSR pyramid and brand preference theory were integrated and discussed as part of the study conducted. This study presents theoretical and empirical contributions in the context of the health sector and the developing country. The following sections provide detailed information on the theoretical framework, hypotheses, and methodology of the study.

2. THEORETICAL FRAMEWORK AND HYPOTHESIS DEVELOPMENT

2. 1. CSR Dimensions and Stakeholder Theory

CSR is a dynamic process that strives to establish a balance between economic performance and social responsibility (Aupperle et al., 1985). Carroll (1991) defined CSR as the responsibility of businesses not only to make profits but also to the society, environment in which they operate and other stakeholders. Carroll (2016, 2021) argued that CSR can be considered as a pyramid with economic, legal, ethical and philanthropic dimensions. Dahlsrud (2008), on the other hand, stated that there are many CSR definitions in the literature and these definitions can be classified under five dimensions: economic, social, environmental, stakeholder and philanthropic.

The theoretical foundations of CSR are based on the stakeholder theory developed by Freeman (1984). In this theory, the stakeholder is defined as “any group or individual that affects or is affected by the achievement of the goals of the organization”. Therefore, the stakeholders of the business include not only its shareholders, but also its employees, customers, suppliers, the government and the society. Stakeholder Theory, therefore, argues that CSR activities indirectly contribute to business performance. As a matter of fact, Selvarajah et al. (2018) and Abd Jamil et al. (2022) revealed that CSR practices enhance corporate performance by strengthening relations with stakeholders. In line with this finding, Jones (1995) and Jones et al. (2017) stated that strong stakeholder relations have turned into a sustainable profitability for businesses in the long term. Carroll (1991) also expressed that CSR provides a holistic benefit that serves not only financial performance but also stakeholder interests. According to Carroll (1991), “there is a natural harmony between the idea of corporate social responsibility and the stakeholders of a business”.

The CSR pyramid developed by Carroll (1991) to define CSR, which includes economic, legal, ethical and philanthropic dimensions, actually puts forward the responsibilities of businesses towards their stakeholders. In their later studies, Carroll (2016, 2021) stated that this model should be integrated with business strategies as well. Carroll (2016, 2021) also emphasized that ethical and voluntary responsibilities play a decisive role in competitive advantage and corporate reputation building processes.

At the bottom of the CSR pyramid is the Economic Responsibility Dimension (Carroll, 1991). According to this dimension, businesses should both benefit the society and make a profit in a sustainable way. Carroll (1991, 1999) believes that Economic Responsibility involves a business producing goods and services needed by the society, generating employment and providing returns to its investors. The economic strength of businesses enables them to create value not only for their shareholders but also for their employees, suppliers and customers (Carroll, 2016). Drucker (1984) also highlighted that the most basic social responsibility of businesses is the economic sustainability. Furthermore, Drucker (1984) stated that other areas of social responsibility would be meaningless if profitability could not be ensured.

The Legal Responsibility Dimension ranks above the economic responsibility in Carroll's (1991) CSR pyramid and underlines that businesses should act in accordance with the laws and regulations determined by the state when conducting their activities. Carroll (1991, 1999) believes that society expects businesses to act in accordance with the law while undertaking their economic activities. Therefore, legal regulations also set out the minimum normative rules that businesses must conform to (Schwartz & Carroll, 2003). Carroll (2016) stated that the legal responsibility of businesses is not only to comply with the law ad verbum, but also to act in accordance with the spirit of the laws. Hence, businesses are required not only to comply with the legal legislation on issues such as environmental protection, consumer rights, data privacy, occupational health and safety, but also to construe these regulations with an ethical understanding.

The Ethical Responsibility Dimension ranks above legal responsibility in Carroll's (1991) CSR pyramid. Carroll (2016) describes ethical behavior as the responsibility to "do the right thing" in accordance with the values of society, even in gray areas not defined by laws. Ethical responsibility requires businesses not only to comply with the law but also to act in line with the values acknowledged by society as right, fair and honest. Ethical Responsibility also requires businesses to integrate values such as fairness, integrity, transparency and respect for human rights into their decision-making processes (Carroll, 1991, 1999). The importance of ethical CSR has increased due to the advancing level of awareness of consumers and their easier access to information. Today, consumers are not only seeking out quality products or services, but also for reliable brands that adhere to ethical values (Stanaland et al., 2011). In the study conducted on the Kenyan telecommunications sector by Mate (2024), it was determined that ethical practices have a direct and significant impact on consumer brand preference.

Philanthropic CSR Dimension ranks at the top of Carroll's (1991) CSR pyramid. Carroll (1991) states that the dimension of philanthropic responsibility emphasizes that businesses should contribute to the development of the welfare level of the society they are in. Carroll (1991) also expresses that this contribution should be made voluntarily, not with concerns of legal or economic requirements. Philanthropic CSR emphasizes that businesses should act as good "corporate citizens" (Carroll, 1998; Schwartz & Carroll, 2003). Philanthropic responsibility activities include activities for the benefit of the community such as donations, sponsorships, social projects, education and health initiatives. These activities can be carried into effect by businesses not only for altruistic reasons, but also to strengthen corporate reputation and improve existing relations with stakeholders (Carroll, 2016).

Carroll's (1991) CSR pyramid is a comprehensive model that evaluates the responsibilities of businesses towards society from a multidimensional perspective. Economic, legal, ethical and philanthropic responsibilities in the pyramid are in a hierarchical relationship, but these dimensions have been transformed into an interdependent structure in today's complex business environment. For this reason, recent studies reveal that CSR is no longer just a concept limited to economic performance or reputation management, but has also become a strategic tool that affects issues such as consumer trust, brand loyalty and consumer preference (Modyop et al., 2022; Dangaiso et al., 2024; Ghaffar et al., 2025).

2.2. CSR Dimensions and Brand Preference

Brand preference is the tendency of the consumer to choose a particular brand among other alternatives, and this tendency is shaped not only by the quality of the product or service, but also by the values represented by the brand and the understanding of social responsibility (Chang & Liu, 2009; Prados-Peña & Del Barrio-García, 2020). Therefore, CSR practices have become increasingly decisive in consumers' brand selection processes today (Brown & Dacin, 1997; Sen & Bhattacharya, 2001). CSR practices form a sense of trust by creating positive impressions of the brand in the minds of consumers (Lichtenstein et al., 2004) and increase brand value by providing customer satisfaction as well (Luo & Bhattacharya, 2006).

The relationship between CSR and customer preferences can be regarded as one of the most concrete reflections of stakeholder theory. Maignan (2001) claimed that consumers are the stakeholder group that gives the fastest and strongest response to the behavior of businesses. For this reason, CSR practices of businesses are considered by consumers as an indicator of their commitment to ethical values, sustainability and social sensitivity. This situation strengthens the brand image in the eyes of consumers while increasing consumer confidence (Freeman & Velamuri, 2023).

Studies on the brand preference, brand loyalty and reputation of CSR customers have revealed that CSR strengthens these relationships. Waheed et al. (2020) found out that the integration of CSR principles into marketing strategies increases trust and loyalty in customer relationships. Rathore et al. (2022) demonstrated that CSR activities directly affect consumer purchasing behaviors. Similarly, Kumar and Singh (2022) determined that ethical and social responsibility-based initiatives strengthen brand reputation and competitive advantage. Tao et al. (2023), on the other hand, put forward that suppliers with high social responsibility awareness are preferred more. Therefore, CSR practices should not be considered merely as an ethical requirement. These applications should also be regarded as a trust-based brand communication tool to be established with consumers. Stakeholder theory considers CSR as a strategic element that increases both social responsibility and brand preference for businesses.

2.3. Hypothesis Development

2.3.1. The Relationship between Economic CSR and Brand Preference

The studies conducted on the impacts of the economic responsibility dimension of CSR on consumer behavior has been widely examined in the context of marketing and service sector (Chang & Liu, 2009; Cobb-Walgren et al., 1995; Prados-Peña & Del Barrio-García, 2020; Aman-Ullah et al., 2023; Dangaiso et al., 2024). However, these studies do not reveal a full consensus on the impact of economic CSR dimension on brand preference.

While Prados-Peña and Del Barrio-García (2020) argue that economic CSR increases preference behavior by strengthening brand trust, Achabou (2020) underlined that brands with long-term economic CSR history do not always dominate consumer preference, and factors such as price, quality and brand image could be decisive. Similarly, Dangaiso et al. (2024) found out that in developing economies, economic and social CSR investments positively affect consumer preference through brand credibility and attitude, while Mirabi et al. (2014) noted that in some cases, perceived brand quality may be a stronger determinant than CSR.

Specifically, in the healthcare sector, Aman-Ullah et al. (2023) put forward that the economic and service quality dimensions of CSR strengthen patient satisfaction and loyalty, while Modyop et al. (2022) found that economic responsibilities in the context of the digital sector create indirect impacts through brand admiration and reputation. Ghaffar et al. (2025) also analyzed the impact of both CSR and service quality on corporate reputation in healthcare, indicating that reputation is an element that strengthens brand preference.

In this context, examining the impact of economic CSR dimension on brand preference in trust-based sectors such as healthcare will fill an important gap in the literature. Accordingly, the following hypothesis is proposed:

H1: Economic CSR positively affects consumers' brand preference.

2.3.2. The Relationship Between Legal CSR and Brand Preference

When we examine the CSR literature, it is understood that various studies have been conducted on the impact of legal responsibility on consumer behavior, however there is no complete consistency between the findings of these studies. Hamid et al. (2020) determined that compliance with environmental legal regulations strengthens brand reliability and responsible corporate perception. Similarly, Uhlig et al. (2020) found out that compliance with the law is directly related to the brand. Kang and Hustvedt (2014) also identified that businesses acting in accordance with the law are perceived as more reliable by consumers. However, Mirabi et al. (2014) revealed that legal compliance in the banking sector has a limited impact on brand preference and that consumers react more to perceived quality and performance indicators. Ho et al. (2016) also argued that the impact of legal responsibility on brand preference in the context of the sharing economy is overshadowed by trust and loyalty to the brand.

When the legal CSR and customer behavior studies conducted by focusing on the health sector are examined, it can be stated that the findings obtained from the studies are mostly based on the trust of customers. For example, Aman-Ullah et al. (2023) determined that the perception of legal compliance paves the way for repetitive preference behavior by increasing patient confidence and satisfaction. However, the authors in question stated that the direct impact was limited. Similarly, Mirabi et al. (2014) found out that legal compliance and transparency levels create indirect impacts on brand preference through trust perception. Considering these findings, it can be argued that legal liability strengthens corporate reputation and consumer trust, especially in trust-based sectors such as healthcare.

Uhlig et al. (2020) put forward that legal compliance and regulatory standards constitute not only mandatory obligations, but also an "ethical framework" that ensures the sustainability of social legitimacy. Therefore, legal CSR can be considered as a strategic tool not only for ensuring compliance, but also for institutionalizing trust and legitimacy. Consequently, investigating the direct impacts of legal CSR on customer preference will fill an important gap. In light of these theoretical and empirical findings, the following hypothesis is proposed:

H2: Legal CSR positively affects consumers' brand preference.

2.3.3. The Relationship between Ethical CSR and Brand Preference

When the studies on the impact of ethical CSR on brand preference are examined, it can be stated that there is no complete consensus. Jeon et al. (2020) found that ethical responsibilities have a strong impact on brand attitude in the sharing economy and this impact is indirectly reflected in brand preference. Similarly, Mate (2024) determined that ethical behaviors in the mobile communication industry have a direct and significant impact on brand preference. Mahrinasari (2020) demonstrated that CSR image plays an intermediary role in the chain of brand value, preference and purchase intention; Boccia and Sarnacchiaro (2018), on the other hand, showed that the impact of ethical responsibility may be limited in consumers with low knowledge level. Hsu et al. (2022) put forward that ethical behavior strengthens stakeholder trust and business-society relations, while underlining that practices based on ethical values deepen the emotional bonds established with the consumer. However, Achabou (2020) determined that ethical practices do not always create brand preference, and that economic factors are very important along with ethical practices as well.

The importance of ethical CSR is even more evident in the studies conducted in the healthcare sector. Aman-Ullah et al. (2023) and Ghaffar et al. (2025) presented that ethics-based responsibilities have a direct impact on patient confidence, satisfaction, and re-preference intention. These findings demonstrate that ethical responsibilities are an important element shaping consumer behavior, especially in trust-based sectors. Based on these theoretical and empirical findings, the following hypothesis is developed:

H3: Ethical CSR positively affects consumers' brand preference.

2.3.4. The Relationship between Philanthropic CSR and Brand Preference

There are findings in the literature on the impact of philanthropic CSR on consumer behavior; however, these impacts differ according to the sector and contexts. Hwang et al. (2019) stated that philanthropic practices in the restaurant sector strengthen consumers' brand attitudes and citizenship behaviors. Similarly, Jani et al. (2019) indicated that co-creation-based environmental and social CSR programs in the accommodation sector contribute significantly to customer loyalty and brand preference; Chomvilailuk and Butcher (2024) showed that guests' participation in philanthropic social contributions reflects positively on brand preference by increasing emotional well-being. However, based on the studies conducted by Mirabi et al. (2014) and Achabou (2020), it can be claimed that philanthropic CSR does not always create a preference advantage, and in some cases, basic factors such as price, quality or service performance are more decisive. Zhang et al. (2025) also expressed that philanthropic responsibilities can increase the positive perception of the brand in times of crisis, but this impact depends on the level of trust and CSR-brand harmony. Carroll (2016), on the other hand, stated that carrying out philanthropic activities merely for strategic purposes can weaken the "perception of sincerity" in the eyes of the consumer.

Given the studies conducted in the health sector, it is understood that the impact of philanthropic CSR may be more limited compared to other dimensions. Ghaffar et al. (2025) reported that voluntary activities such as community fund-raising efforts, free health screenings, and patient support programs were perceived positively, but had weaker impacts on direct brand preference than economic and ethical responsibilities. This may be due to the fact that consumers attach importance to functional factors such as economic factors, ethical behavior, legal compliance and service quality in healthcare services.

Therefore, philanthropic CSR's impact on brand preference may vary depending on the context, level of trust, and perceived sincerity despite contributing to the positive perceptions of businesses by the consumers. Accordingly, testing the direct impact of philanthropic CSR on brand preference in the Turkish healthcare sector will contribute to explaining conflicting findings in the literature and determining the relative importance of CSR dimensions. In line with these theoretical and empirical foundations, the following hypothesis is developed:

H4: Philanthropic CSR positively affects consumers' brand preference.

The research model, whose theoretical framework and hypotheses are explained above, is presented in Figure 1. The research model was developed based on Carroll's (1991) four-dimensional Corporate Social Responsibility approach. In this context, Economic CSR, Legal CSR, Ethical CSR, and Philanthropic CSR constitute the independent variables of the research, while Brand Preference is considered the dependent variable. The model tests the direct effects of consumers' perceptions of companies' economic, legal, ethical, and philanthropic social responsibility practices on brand preference. Furthermore, the model aims to reveal whether the effects of CSR dimensions on brand preference differ across dimensions. In this respect, the research model aims to empirically test the effects of corporate social responsibility on brand preference from a holistic and multidimensional perspective in the context of the healthcare sector.

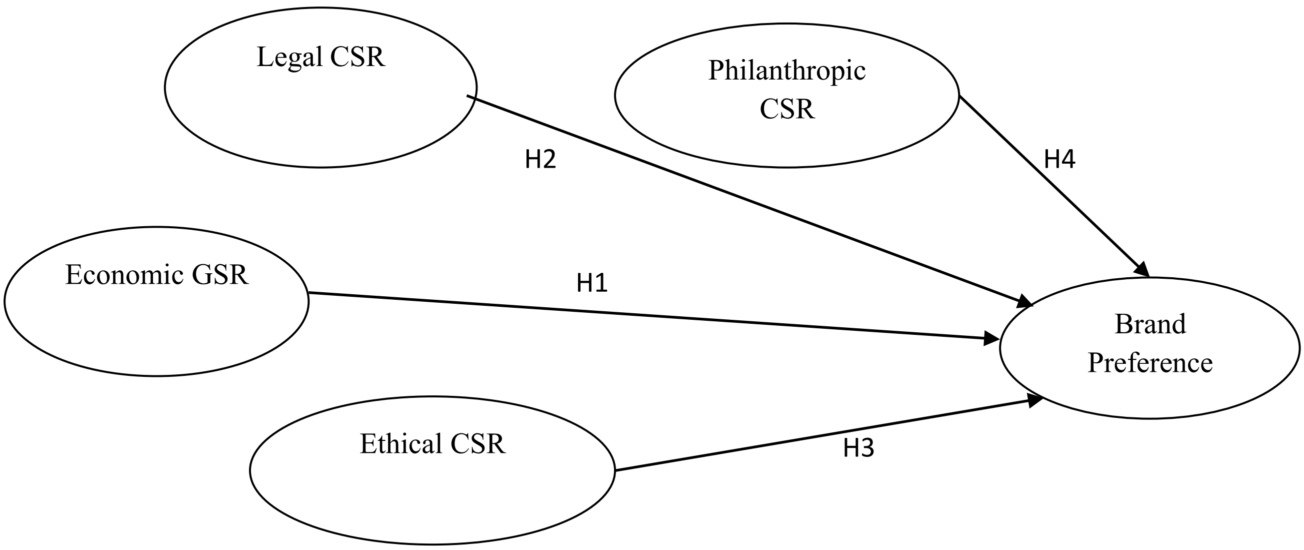

Figure 1: Conceptual Research Model

3. METHODOLOGY

This study was planned with quantitative research method and correlational research design. The objective of the study is to determine the impacts of consumers' perceptions on economic, legal, ethical and philanthropic responsibilities specified in Carroll's (1991) four-dimensional CSR model on brand preference. As part of the study, data were collected using the survey technique.

The study population was determined as private hospitals operating in Istanbul Province. The sample was selected by purposive sampling method among the hospitals in this population that actively carry out CSR activities. The reason why the purposive sampling method was preferred in the study is to determine the relationship between CSR and brand preference more clearly. The hospitals in the research sample are the organizations that are reputable and recognized in the sector in terms of CSR. In the study, the selection of these organizations with high recognition enabled a healthier evaluation of consumer perceptions and brand preference. Hospitals that did not have CSR activities were not included in the sample. A survey was filled out by reaching 403 participants who received services from 13 private hospitals determined as samples within the scope of the study. After missing or incorrect answers were eliminated, 394 valid surveys were evaluated.

In the study, data were collected using the face-to-face survey technique. The survey form was applied to the participants on a voluntary basis and responses were collected accordingly. In the preparation of the questions, scales for which validity and reliability tests were performed in previous, studies were used. The survey consists of two parts. In the first part, there are questions about the demographic information of the participants such as gender, age, educational status. The second part involves items about Economic CSR, Legal CSR, Ethical CSR and Philanthropic CSR and brand preference. *For purposes of the study, the approval of the Ethics Committee dated 21.02.2023 and numbered E.76068 was obtained from the Ethics Committee of the Sakarya University of Applied Sciences.*

The 18-item scale developed by Maignan and Ferrell (2001) was implemented in order to measure the Economic CSR, Legal CSR, Ethical CSR and Philanthropic CSR variables in the study. The 4-item scale developed by Chang and Liu (2009) was used to measure the Brand Preference variable as well. The items in the scales were answered by the participants as 5-point Likert type (1=Strongly disagree, 5=Strongly agree)

The data obtained from the participants were analyzed through SmartPLS 4 statistical program. Partial Least Squares-Structural Equation Modeling (PLS-SEM) was applied in the study. For the analysis process, the validity and reliability of the scales were first tested. Then, the hypotheses were tested with the Analysis of the Structural Model.

4. FINDINGS

4.1. Descriptive Traits of the Research Group

The demographic traits of 394 respondents were examined in terms of gender, age, and educational status variables. The findings for demographic variables are presented in Table 1. When the table in question is examined, the findings indicate that 68% of the respondents are women in terms of gender distribution; the highest participation in the age variable is in the 30-39 age groups and in the case of education, the majority of the respondents are university graduates.

Table 1: Demographic Information of the Respondents

	Trait	Number	Percentage
Gender	Female	269	68.3
	Male	125	31.7
Age	20-29	94	23.9
	30-39	115	29.2

	40-49	100	25.4
	50-59	56	14.2
	60 ≥	29	7.4
Education	Primary Education	76	19.3
	High School	115	29.2
	University	180	45.7
	Postgraduate	23	5.8

4.2. Findings on the Validity and Reliability Analysis of Scales

Before proceeding to the analysis of the research design, the validity and reliability levels of all constructs covered by the study were evaluated. In this context, internal consistency reliability, convergent validity and discriminant validity analyzes were performed. Cronbach's Alpha and Composite Reliability (CR) coefficients were examined for internal consistency reliability. In the determination of convergent validity, factor loadings and the values of the explained mean variance (AVE) were used. It is expected that factor loadings would be ≥0.70; Cronbach Alpha and composed reliability coefficients would be ≥0.70; and the value of average variance extracted would be ≥0.50 (Hair et al., 2006; Hair et al., 2019; Fornell & Larcker, 1981).

Table 2 below shows the results regarding the internal consistency reliability and convergent validity of the constructs included in the study. According to Hair et al. (2019), factor loadings should be ≥0.708. Authors recommend that the items with factor loads between 0.40 and 0.70 should be excluded from the model if the AVE or CR values are below the threshold value. Therefore, Eth1, Eth2, Eth3, Eth4, Eth9 and Leg5 with factor loads below 0.708 were excluded from the model. Although the factor loading of Leg6 was below 0.708, it was not excluded from the model because the AVE and CR values were not below the threshold values.

Table 2: Results of the Measurement Model.

Variable	Item	Factor Load	Cronbach Alfa	CR	AVE
EconomicCSR	Eco1	0.815	0.731	0.760	0.644
	Eco2	0.753			
	Eco3	0.837			
Legal CSR	Leg1	0.851	0.889	0.892	0.697
	Leg2	0.878			
	Leg3	0.875			
	Leg4	0.859			
	Leg6	0.698			
Ethical CSR	Eth5	0.759	0.866	0.867	0.599
	Eth6	0.755			
	Eth7	0.792			
	Eth8	0.771			
	Eth10	0.791			
	Eth11	0.777			
Philanthropic CSR	Phi1	0.789	0.894	0.897	0.653
	Phi2	0.807			
	Phi3	0.826			
	Phi4	0.838			
	Phi5	0.820			
	Phi6	0.769			
Brand Preference	Brp1	0.826	0.832	0.846	0.661
	Brp2	0.816			
	Brp3	0.781			
	Brp4	0.828			

The factor loadings of the statements in the scales are shown in Table 2, when the values in the table are examined, the findings indicate that the factor loadings vary between 0.698 and 0.878. These values show that all items have acceptable factor loads. Also, realization of the Cronbach's Alpha coefficients of the constructs between 0.731 and 0.894 and the composite reliability (CR) coefficients between 0.760 and 0.897 revealed that the model was at a satisfactory level in terms of internal consistency reliability. In addition, the Average Variance Explained (AVE) values between 0.599 and 0.697 indicate that the constructs meet the convergent validity condition. In line with these findings, it can be claimed that each variable in the model is highly correlated with its own indicators and the measurement constructs are statistically reliable and valid.

The discriminant validity of the model was tested by two different methods. First, the criterion proposed by Fornell and Larcker (1981) was evaluated by examining whether the square root of the AVE value of each variable was higher than the correlation values of that variable with other variables. Secondly, the HTMT (Heterotrait-Monotrait Ratio) coefficient developed by Henseler et al. (2015) was applied. Having HTMT values below the 0.90 limit indicates that discriminant validity is achieved.

According to the criterion of Fornell and Larcker (1981), the square root of the explained mean variance (AVE) values of the constructs in the study should be higher than the correlation coefficients between the constructs in the study. Table 3 details the results of the analysis made in accordance with the Fornell and Larcker (1981) criterion. The values in parentheses in the table are the square root values of AVE. When the values in the table are examined, the findings indicate that the AVE square root value of each structure is higher than the correlation coefficients with other structures. Thus, the discriminant validity was confirmed by this criterion.

Table 3: Discriminant Validity Results (Fornell and Larcker Criteria).

	Brand Preference	Economic CSR	Ethical CSR	Legal CSR	Philanthropic CSR
Brand Preference	(0.813)	-	-	-	-
Economic CSR	0.613	(0.803)	-	-	-
Ethical CSR	0.640	0.694	(0.774)	-	-
Legal CSR	0.587	0.590	0.658	(0.835)	-
Philanthropic CSR	-0.560	-0.665	-0.783	-0.642	(0.808)

HTMT (Heterotrait-monotrait ratio) coefficients proposed by Henseler et al. (2015) indicate the ratios of the mean correlations of the items of all variables included in the study to the geometric averages of the correlations of the items of the same variable. The authors expressed that if the constructs being measured are theoretically close to each other, the HTMT coefficient should be below 0.90, and for constructs that are theoretically far from each other, it should be below 0.85. When the HTMT coefficient in Table 4 is checked, it is observed that all values are below the threshold value.

Table 4: Discriminant Validity Results (HTMT Criteria).

	Brand_Preference	Economic CSR	Ethical CSR	Legal CSR	Philanthropic CSR
Brand_Preference	-	-	-	-	-
Economic CSR	0.745	-	-	-	-
Ethical CSR	0.738	0.862	-	-	-
Legal CSR	0.661	0.726	0.751	-	-
Philanthropic CSR	0.636	0.823	0.890	0.722	-

In order to determine the effectiveness of each item on other items Cross-loadings are used (Hair et al., 2019). If the constructs are valid, there are high correlations between cross-loadings of the same structure. If the constructs are not valid, items can be extracted from the model to create a better model with high validity. In this study, cross loadings were used to determine the impact of Economic CSR, Legal CSR, Ethical CSR and Philanthropic CSR on Brand Preference. The results on cross loadings are given in Table 5.

Table 5: Table of Cross Loadings.

Cross loadings					
	Brand Preference	Economic CSR	Ethical CSR	Legal CSR	Philanthropic CSR
Brp1	**0.826**	0.597	0.619	0.598	-0.535
Brp2	**0.816**	0.442	0.496	0.379	-0.443
Brp3	**0.781**	0.413	0.432	0.329	0.408
Brp4	**0.828**	0.506	0.499	0.544	-0.414
Eco1	0.470	**0.815**	0.561	0.495	-0.605
Eco2	0.370	**0.753**	0.496	0.414	-0.480
Eco3	0.595	**0.837**	0.602	0.501	-0.520
Eth5	0.482	0.508	**0.759**	0.532	-0.555
Eth6	0.499	0.525	**0.755**	0.457	-0.585
Eth7	0.501	0.559	**0.792**	0.464	-0.662
Eth8	0.482	0.565	**0.771**	0.534	-0.592
Eth10	0.531	0.560	**0.791**	0.582	-0.628
Eth11	0.472	0.505	**0.777**	0.484	-0.613
Leg1	0.504	0.465	0.545	**0.851**	-0.548
Leg2	0.481	0.458	0.532	**0.878**	-0.523

Leg3	0.514	0.519	0.564	**0.875**	-0.534
Leg4	0.492	0.477	0.554	**0.859**	-0.514
Leg6	0.455	0.546	0.550	**0.698**	-0.561
Phi1	-0.488	-0.538	-0.680	-0.553	**0.789**
Phi2	-0.443	-0.557	-0.662	-0.471	**0.807**
Phi3	-0.451	-0.522	-0.620	-0.517	**0.826**
Phi4	-0.472	-0.547	-0.616	-0.540	**0.838**
Phi5	-0.478	-0.533	-0.605	-0.509	**0.820**
Phi6	-0.369	-0.535	-0.617	-0.522	**0.769**

Based on the findings in Table 2, Tables 3, Table 4 and Table 5, it can be claimed that discriminant validity is achieved.

Cronbach's Alpha coefficient was implemented to evaluate the reliability of the scales, and the results obtained are shown in Table 2. When the Cronbach's Alpha values of the scales are examined from the table in question, it is observed that Economic CSR is 0.731; Legal CSR is 0.889; Ethical CSR is 0.866; Philanthropic CSR is 0.894 and Brand Preference is 0.832. As the value found in the Cronbach Alpha coefficient, which takes a value between 0 and 1, approaches 1, the reliability of the scale used in the study increases. When the numerical ranges of reliability coefficients are examined, if the coefficient is $0.00 \leq \alpha < 0.40$, the scale is unreliable; on the other hand, if it is $0.40 \leq \alpha < 0.60$, it is lowly reliable; if it is $0.60 \leq \alpha < 0.80$, it is a reliable scale. Moreover, if it is $0.80 \leq \alpha < 1.00$, the scale is accepted as highly reliable in the literature (Kalaycı, 2014, p. 405).

4.3. Testing the Structural Model

The structural equation model created to test the hypotheses of the study is shown in Figure 2, The model was analyzed with the Partial Least Squares method (PLS-SEM) using the SmartPLS statistical software (Sarstedt et al., 2019). With respect to the research design, PLS algorithm was run to calculate linearity, path coefficients, R^2 and impact size (f^2), on the other hand, Blindfolding analysis was also run to calculate the prediction power (Q^2). 5000 sub-samples were collected from the sample through bootstrapping to evaluate the significance of PLS path coefficients, and t values were calculated.

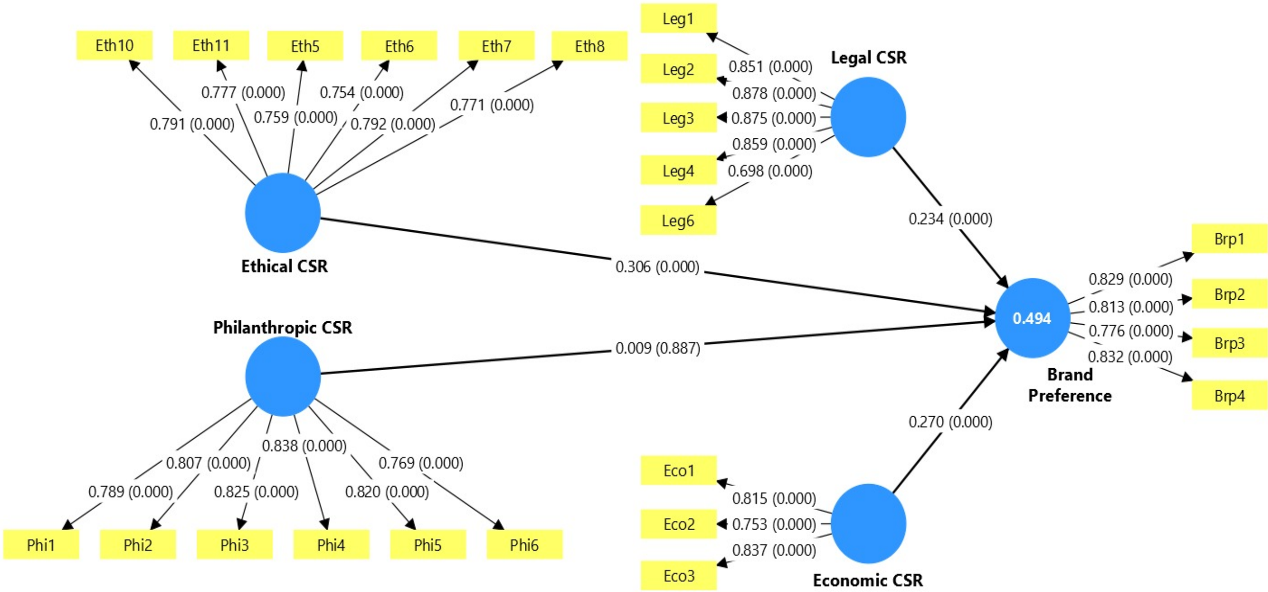

Figure 2: Structural Equation Model

VIF, R^2, f^2 and Q^2 values with respect to the research results are presented in Table 6. When the VIF (Variance Inflation Factor) values between the variables were examined, it was understood that there was no linearity problem among the variables since the values were below the threshold value of 5 (Hair et al., 2019). 16

For the Brand Preference, R^2=0.494, indicating a medium-high level of explanatory power.

Having an impact size coefficient (f^2) of 0.02 and above represents small; 0.15 and above represents medium; 0.35 and above represents large (Cohen, 1988). According to Sarstedt et al. (2019), it is not possible to make reference to an impact in cases where the coefficient is below 0.02. When the impact size coefficients (f^2) in Table 6 are examined, it is inferred that Economic CSR has a low impact size of 0.066; Legal CSR has a low impact size of 0.053; Ethical CSR has a low impact size of 0.058; and Philanthropic CSR has no impact on the model with the impact size coefficient of 0.000.

Having the Q^2 value obtained by blindfolding is greater than zero indicates that the research design has the power to predict endogenous variables (Hair et al., 2017). Since the Q^2 values in the table are greater than zero (Q^2 =0.471), it can be implied that the research design has the predictive power of Brand Preference.

Table 6: Research Design Coefficients.

Variables		VIF	R^2	f^2	Q^2
Economic CSR	Brand Preference	2.159	0.494	0.066	0.471
Legal CSR		1.970		0.053	
Ethical CSR		3.202		0.058	
Philanthropic CSR		2.933		0.000	

4.4. Direct Impacts and Hypothesis Testing

The results for the direct impacts in the research design are shown in Table 7.

When Table 7 is examined, firstly, it was found out that the impact of Economic CSR on Brand Preference is statistically significant and positive (t: 3.856, p: 0.000 and β: 0.270).

Secondly, it was found out that the impact of Legal CSR on Brand Preference is statistically significant and positive (t: 3.546, p: 0.000 and β: 0.234).

Thirdly, when the impact of Ethical CSR on Brand Preference is examined, it is identified that this impact is statistically significant and positive (t: 3.842, p: 0.000 and β: 0.306).

Lastly, no significant result was found in the impact of Philanthropic CSR on Brand Preference since t value was below 1.96 and p value was above 0.05 (t: 0.142, p: 0.887 and β: 0.009).

Table 7: Direct Impact Coefficients

Variables	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics	P values	Hypothesis Result
Economic CSR -> Brand Preference	0.270	0.272	0.070	3.856	0.000	Accepted
Legal CSR -> Brand Preference	0.234	0.236	0.066	3.546	0.000	Accepted
Ethical CSR -> Brand Preference	0.306	0.304	0.080	3.842	0.000	Accepted
Philanthropic CSR - > Brand Preference	0.009	0.010	0.064	0.142	0.887	Rejected

In the light of these results, the H1, H2 and H3 hypotheses of the study were supported, however, the H4 hypothesis was not supported.

4. DISCUSSION

This study examined the impacts of Carroll's (1991) four-dimensional Corporate Social Responsibility (CSR) model on consumer brand preference in the Turkish Healthcare Sector. The findings revealed that economic, legal and ethical CSR dimensions significantly and positively affected brand preference; however, philanthropic CSR did not have a statistically significant impact on brand preference. These findings both have parallels with the existing literature and clarify some inconsistencies.

Looking at the research findings, it is understood that economic CSR positively affects brand preference. This finding demonstrates that consumers care about the price stability of the relevant brand and the good economic indicators when choosing a brand. It is understood that similar results were obtained in the literature as well. For instance, Aman-Ullah et al. (2023)

found that CSR activities in the healthcare sector strengthen patient satisfaction and loyalty, while Dangaiso et al. (2024) put forward that economic CSR determines consumer preferences through brand credibility in developing economies. In addition, Lai et al. (2010) emphasized that economic responsibility is the main determinant in the link between corporate reputation and brand performance. In line with these results, it can be claimed that rational consumer behavior is still dominant in the healthcare sector and economic CSR is associated with reliability and quality by consumers. Therefore, the results of this study support the findings that economic responsibility plays a strategic role on brand preference.

Another finding of the study is that legal CSR positively affects consumers' brand preference. This finding means that consumers in high-confidence sectors such as healthcare value that businesses act in accordance with the law. Hamid et al. (2020) revealed that environmental and social legal compliance increases brand reliability; Kang and Hustvedt (2014) found out that businesses acting in accordance with legal compliance are perceived more reliably by consumers. In the banking sector, Mirabi et al. (2014) stated that transparency and commitment elements can be decisive in brand preference, but the impact may vary depending on the sector and customer characteristics. Similarly, the findings of this study indicate that legal responsibilities in healthcare services are considered as a means of avoiding risk and building trust for consumers. For this reason, it is understood that legal CSR is considered by consumers in healthcare services as an element that reinforces the legitimacy of the brand and supports patient trust.

Research findings put forward that ethical CSR perception also positively affects consumers' brand preference. This finding shows that consumers attach importance not only to functional benefits but also to the values and social stance of the medical institution when evaluating brands in health services. Mate (2024) determined that ethical practices (including product, price, promotion and advertising ethics) have a direct impact on consumer brand preference. Also, Mahrinasari (2020) demonstrated that ethical CSR increases purchase intention through brand value and preference; Boccia and Sarnacchiaro (2018), on the other hand, found out that ethical awareness is decisive in consumer behavior. The findings of this study demonstrate that the behaviors of medical enterprises based on ethical values guide consumers' preferences for the brand.

In the study, the hypothesis that philanthropic CSR has an impact on brand preference was rejected. This finding is in line with some other studies in the literature as well. For example, Mirabi et al. (2014) determined that philanthropic social activities have a limited impact on consumer preference; Achabou (2020) determined that even brands with long-term and positive CSR history do not provide a significant advantage in consumer preference. In support of these studies, Carroll (2016) also stated that sometimes philanthropic activities carried out for strategic purposes rather than altruistic reasons can weaken the perception of "sincerity" in consumers.

This study shows that, philanthropic CSR was not found to have a significant impact on brand preference, which means that in healthcare services, consumers primarily attach importance to more concrete practices and indicators such as service quality, ethical standards and compliance with the law. In addition, as is known, philanthropic CSR practices have an indirect and long-term impact on the health sector. This may cause consumers to fail to evaluate the impacts of philanthropic CSR in the short term. This finding supports the views in the literature that philanthropic CSR creates context-sensitive and secondary impacts (Chomvilailuk & Butcher, 2024; Zhang et al., 2025).

It can be considered that the most remarkable finding of the study is that the philanthropic social responsibility dimension did not have a significant impact on brand preference. Philanthropic responsibilities rank at the highest level in Carroll's (1991) CSR pyramid and are regarded as the responsibilities that businesses voluntarily fulfill in order to contribute to community welfare. However, it can be claimed that such philanthropic activities in the Turkish healthcare sector are often considered as "secondary" or "perfunctory" by consumers. The most important reason for this situation may be that ethical, legal and economic responsibilities are prioritized by consumers. Healthcare consumers expect service providing enterprises to exhibit ethical behavior, comply with legal regulations, and prioritize service quality rather than making voluntary donations or implement social projects. Therefore, it can be argued that consumers prefer brands that engage in such activities more. This outcome is also in line with the findings of Maignan and Ferrell (2001) and Pérez and Rodríguez del Bosque (2015a). Similarly, these studies also emphasized that the impact of philanthropicCSR practices on consumer behavior may weaken depending on the context. For this reason, the insignificant impact of philanthropic CSR on brand preference can be explained as being due to the nature of the industry and the differences in consumer expectations.

In conclusion, it can be claimed that the CSR perceptions of consumers in the healthcare sector are mostly evaluated according to economic, ethical and legal dimensions. These findings suggest that healthcare service consumers prefer businesses that provide health services based on their compliance with ethical values and laws. It is further indicted that philanthropic responsibility activities are less effective in consumers' brand preferences in the context of the healthcare sector. In this respect, the study provides a new perspective on the corporate social responsibility dynamics of the Turkish healthcare sector.

5. RESULTS, CONTRIBUTIONS AND RECOMMENDATIONS

5.1. Results

This study examined the impacts of economic, legal, ethical and philanthropic responsibilities on consumers' brand preference in the healthcare sector within the framework of Carroll's (1991) four-dimensional CSR model. The findings showed that economic, legal and ethical CSR dimensions positively affected brand preference, while philanthropic CSR did not have a significant impact.

According to the results obtained, it can be claimed that consumer behaviors in the healthcare sector are mostly based on trust, quality and ethical values. In the healthcare sector, it is observed that economic responsibility is considered by consumers with the expectation that the quality of service is sustainable and accessible; legal responsibility provides confidence in the relevant business by reducing the risk perception of consumers, and ethical responsibility contributes to consumer preference within the framework of the social value and reputation of the brand. However, it is understood that philanthropic responsibilities create indirect and contextual impacts in healthcare services. It can be argued that these responsibilities remain secondary in environments where factors such as service quality, ethical behavior and trust are prioritized.

The study in question reveals that CSR varies depending on the dimensions in the healthcare sector. In addition, it is emphasized that economic, legal and ethical responsibilities play an important role in brand preference and that evaluating these responsibilities together will have a strong impact on brand preference.

5.2. Theoretical Contributions

This study makes an important contribution to the literature by testing Carroll's (1991) CSR pyramid in the context of the Turkish healthcare sector. First of all, the research findings empirically put forward the different impacts of the four dimensions of CSR on brand preference and show the context sensitivity of the models accounting for the relationship between CSR and consumer behavior. The insignificant impact of philanthropic CSR emphasizes the importance of cultural and sectoral dynamics in developing economies. In addition, the study supports the findings of Maignan and Ferrell (2001) and Pérez and Rodríguez del Bosque (2015b), confirming once again that the impact of CSR on consumer perception is context-dependent.

5.3. Policy and Policy Implications

The results obtained from the study signify that medical enterprises should exhibit a holistic approach in CSR practices. Medical enterprises can increase consumer confidence by strengthening their ethical and legal responsibilities. In particular, brand credibility can be increased for consumers through the practices such as complying with patient rights and data privacy. Development of a transparent pricing strategy and providing financial stability by the medical enterprises will contribute to consumers' perception of economic CSR. Medical enterprises should redesign philanthropic CSR activities to be "sincere" and "socially benefit-oriented" in order to engage consumers. Projects to be implemented on topics such as public health, health literacy, environmental health, etc. can contribute to increasing the perception of philanthropic CSR.

5.4. Future Research

The study is limited to private hospitals in Istanbul. In future research studies, the generalizability of the research outcomes can be enhanced by involving public and private hospitals operating in different regions. In addition, qualitative research can be conducted to reveal the reasons why philanthropic CSR does not have an impact on brand preference. In future studies, the impacts of mediating variables such as reputation, trust, satisfaction or loyalty can be tested in the impacts of CSR perception on brand preference.

Declaration: During the preparation of this study, DeepL Artificial Intelligence software was used for English-Turkish and Turkish-English translations, and Chat GPT 5.0 Generative Artificial Intelligence software was used to ensure the linguistic integrity of the text.

Conflict of interest

The authors declare no conflicts of interest.

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During the preparation of this manuscript, OpenAI's ChatGPT was used solely to support language consistency and linguistic refinement. All scientific content, empirical analyses, interpretations, source verification, and final manuscript decisions were undertaken and critically reviewed by the authors, who take full responsibility for the final content of the manuscript.

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