

CONSUMER RACISM AGAINST SYRIAN-ORIGIN HEALTH SERVICES AND ITS EFFECT ON BUYING BEHAVIORS: TURKISH CASE*

SURİYE MENŞELİ SAĞLIK HİZMETLERİNE YÖNELİK TÜKETİCİ İRKCİLİĞİ VE SATIN ALMA DAVRANIŞLARINA ETKİSİ: TÜRKİYE ÖRNEĞİ

Res. Asst. Avni Can YAĞCI¹

Prof. Dr. Ayşe ŞAHİN²

ABSTRACT

In the study, it is aimed to determine how Turkish consumers evaluate the health services provided by Syrians, their willingness to buy these services, and whether there is a consumer racism tendency towards the services provided by Syrians in general. Within the scope of the research, the variables of consumer racism, willingness to buy and service judgment are determined. Data are collected from 302 participants in Yenişehir district of Mersin province by convenience sampling method. The hypotheses developed within the scope of the research are tested by applying the structural equation model and hierarchical regression analysis. According to the results, it is seen that consumer racism affects service judgment and willingness to buy services negatively, while service judgment positively affects service willingness to buy. It is determined that the variables of service judgment and importance of outcome have a mediating role in the relationship between consumer racism and willingness to buy services, while the level of interaction variable has no moderating role in this relationship.

Keywords: Consumer Racism, Consumer Behavior, Services Marketing, Willingness to Buy, Service Judgment.

JEL Classification Codes: M310, J100, F22, D12.

ÖZ

Bu araştırmada, Türk tüketicilerin Suriyelilerin sunduğu sağlık hizmetlerini nasıl değerlendirdiğinin, bu hizmetleri satın alma istekliliklerinin ve genel olarak Suriyelilerin sunduğu hizmetlere karşı tüketici ırkçılığı düzeyinde eğilimleri olup olmadığının tespit edilmesi amaçlanmıştır. Araştırma kapsamında tüketici ırkçılığı, satın alma istekliliği ve hizmet değerlendirmesi değişkenleri belirlenmiştir. Veriler Mersin ilinin Yenişehir ilçesindeki 302 katılımcıdan kolayda örnekleme yöntemiyle toplanmıştır. Araştırma kapsamında geliştirilen hipotezler yapısal eşitlik modeli ve hiyerarşik regresyon analizi uygulanarak test edilmiştir. Sonuçlara göre tüketici ırkçılığının hizmet değerlendirmesini ve hizmet satın alma istekliliğini olumsuz yönde, hizmet değerlendirmesinin ise hizmet satın alma istekliliğini olumlu yönde etkilediği görülmüştür. Tüketici ırkçılığı ve hizmet satın alma istekliliği arasındaki ilişkide hizmet değerlendirmesi ve sonucun önemi değişkenlerinin aracılık rolü olduğu, etkileşim düzeyi değişkeninin ise bu ilişkide düzenleyici rolünün olmadığı saptanmıştır.

Anahtar Kelimeler: Tüketici İrkçılığı, Tüketici Davranışı, Hizmet Pazarlaması, Satın Alma İstekliliği, Hizmet Değerlendirmesi.

JEL Sınıflandırma Kodları: M310, J100, F22, D12.

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¹  Mersin University, Faculty of Economics and Administrative Sciences, Department of Business, canyagci@mersin.edu.tr

²  Mersin University, Faculty of Economics and Administrative Sciences, Department of Business, asahin@mersin.edu.tr

GENİŞLETİLMİŞ ÖZET

Amaç ve Kapsam:

İrkçılık, son yıllarda küresel çapta yaşanan siyasi ve sosyolojik değişimlerin de etkisiyle halen büyük bir sorun olma niteliğini korumaktadır. Geçmişe kıyasla günümüzde daha siyasi ve sosyoloji temelli bir kavram olması ve kitlesel göçlerden dolayı birçok toplumun demografik ve sosyolojik yapılarının değişime uğraması nedeniyle ırkçılığın toplumlar ve bireyler üzerindeki etkileri farklı şekillerde açığa çıkabilmektedir. Son yıllarda Türkiye'deki göçmen ve mülteci sayısının artmasıyla birlikte bu kitlelere karşı ayrımcı ve ırkçı olarak değerlendirilebilecek tutum ve davranışların uygulandığı algısının yüksek düzeylerde olduğu tespitinde bulunulmaktadır. Yoğun göçe uğrayan ülkelerdeki azınlıkların kurduğu işletmelerin bu ekonomiler için gittikçe artan öneminin ve etnik çoğunluktaki tüketicilerin bu yabancı işletmelerden hizmet alma tercihlerinin piyasadaki tüm unsurları etkileyeceği bilinmektedir. Tüketici davranışlarının da toplumlardaki bu tür sosyolojik değişimlerden ve özellikle de kültürel veya ırksal tartışmalardan etkilendiği olgusu göz önünde bulundurulduğunda ırkçılığın tüketici davranışlarına, ürün/hizmet değerlendirmelerine, satın alma davranışlarına vb. süreçlere etki ettiği görülebilmektedir. Tüketici ırkçılığı kavramı da günümüzde tüm bu tartışmaların sonucunda ortaya çıkmaktadır. Son yıllarda Suriyeli mültecilerin Türkiye'de artan nüfusu ve iki nüfusun birbirleriyle kültürel, siyasi, ekonomik vb. etkileşimleri üzerine yapılan çalışmalar göz önünde bulundurulduğunda, Türk ve Suriyeli nüfusların entegrasyonu ve kültürel, siyasi, ekonomik vb. alışverişlerinde ciddi farklılıklar ve çelişkiler olduğu görülmektedir. Bu araştırmanın temel amacı, tüm bu olgulardan ve gelişmelerden yola çıkarak Türk tüketicilerin Suriyelilerin sunduğu sağlık hizmetlerini (diş çekimi ve cilt alerjisi tedavisi) nasıl değerlendirdiğini, bu hizmetleri satın alma istekliliklerini ve genel olarak Suriyelilerin sunduğu hizmetlere karşı tüketici ırkçılığı düzeyinde eğilimleri olup olmadığını saptamaktır. Yaklaşma-kaçınma çatışması teorisi ve hizmetlerin tüketiciler ile üreticiler arasında yüksek düzeyde etkileşim gerektirdiği olgusu birlikte ele alındığında ırkçı eğilimleri olan tüketicilerin azınlık etnik kökenlere sahip hizmet sunucularla etkileşime girmekten kaçındığı düşünülmektedir. Dolayısıyla, tüketici ırkçılığının Türk tüketicilerin azınlık etnik kökenlere sahip hizmet sunucuların ürettiği hizmetleri değerlendirme sürecinin ve bu hizmetleri satın alma istekliliklerinin tüketici ırkçılığı tarafından ne derecede etkilendiği araştırılmaktadır. Etkileşim düzeyi ve sonucun önemi gibi aracı değişkenlerin hizmet değerlendirmesi ve satın alma istekliliği gibi değişkenlere etkileri de bu araştırmanın amaçları arasında yer almaktadır.

Yöntem:

Araştırmanın güvenilirliğini ve geçerliliğini tespit etmek amacıyla güvenilirlik ve geçerlilik analizleri yapılmıştır. Yapısal doğruluğu tespit etmek amacıyla doğrulayıcı faktör analizi yapılmıştır. Sonraki aşamada verilerin analiz edilmesi için yapısal eşitlik modellemesi kullanılmıştır. Araştırmada frekans dağılımı, aritmetik ortalama, standart sapma, hiyerarşik regresyon, regresyon analizi ve doğrulayıcı faktör analizi gibi analiz yöntemleri kullanılmıştır. Analizler SPSS 25.0 ve LISREL paket istatistik programları kullanılarak yapılmıştır. Yapısal eşitlik modeli ve hiyerarşik regresyon analizleri uygulanarak regresyon, aracı rol ve düzenleyici rol hipotezleri test edilmiştir.

Bulgular:

Tüketici ırkçılığı hizmet değerlendirmesini ve satın alma istekliliğini olumsuz etkilerken, hizmet değerlendirmesi satın alma istekliliğini olumlu etkilemektedir. Hizmet değerlendirmesi ve sonucun önemi değişkenleri tüketici ırkçılığı ile satın alma istekliliği arasındaki ilişkide aracı rolündedir. Etkileşim düzeyi değişkeninin ise tüketici ırkçılığı ile satın alma istekliliği arasındaki ilişkide düzenleyici rolü yoktur.

Sonuç ve Tartışma:

Tüketici ırkçılığı hizmet değerlendirmesini olumsuz yönde etkilemektedir. Buna göre Türk tüketicilerin Suriyelilerin sunduğu hizmetlere karşı tüketici ırkçılığı temelli eğilimleri, bu hizmetleri olumsuz değerlendirmelerine neden olmaktadır. Hizmet değerlendirmesinin hizmet satın alma istekliliğini olumlu yönde etkilediği görülmektedir. Buna göre Türk tüketiciler, Suriyelilerin sunduğu hizmetleri olumsuz değerlendirdiğinde bu hizmetleri Suriyelilerden satın almak istememektedir. Araştırma kapsamında tüketici ırkçılığının hizmet satın alma istekliliğini olumsuz yönde etkilediği görülmektedir. Buna göre Türk tüketicilerin Suriyelilerin sunduğu hizmetlere karşı genel anlamda beslediği tüketici ırkçılığı temelli eğilimleri, bu hizmetleri Suriyelilerden satın almak istememelerine neden olmaktadır. Hizmet değerlendirmesi, tüketici ırkçılığı ile hizmet satın alma istekliliği arasındaki ilişkiyi kısmi aracı olarak etki etmektedir. Sonucun önemi değişkeni, tüketici ırkçılığı ve hizmet satın alma istekliliği arasındaki ilişkide düzenleyici rol oynamaktadır. Buna göre Türk tüketicilerin Suriyelilerin sunduğu hizmetlere karşı tüketici ırkçılığı temelli eğilimleri ve bu hizmetleri satın alma isteklilikleri, bu hizmetlerden elde edecekleri sonuçların kendileri açısından önemine bağlı olarak olumlu yönde etkilenmektedir. Etkileşim düzeyi değişkeninin tüketici ırkçılığı ve hizmet satın alma istekliliği arasındaki ilişkide düzenleyici rol oynamadığını göstermektedir. Türk tüketiciler, bu eğilimin sonucunda Suriyelilerin sunduğu hizmetleri genel ve özel olarak (diş çekimi tedavisi ve cilt alerjisi tedavisi) olumsuz değerlendirip satın almaktan kaçınmaktadır. Türk tüketicilerin Suriyeli diş hekimlerinin ve dermatologların sunduğu sağlık hizmetlerini değerlendirmeleri ve satın alma isteklilikleri, bu hizmetlerden elde edecekleri sonucun önemine bağlı olarak olumlu yönde etkilenmektedir. Başka bir ifadeyle, Türk tüketiciler diş çekimi tedavisi ve cilt alerjisi tedavisi olmadan önce bu iki farklı sağlık hizmetinin kendileri açısından doğuracağı sonucun büyüklüğünü düşünerek Suriyeli diş hekimlerinden ve dermatologlardan bu hizmetleri almaktan kaçınmaktadır ve olumsuz değerlendirmektedir.

1. INTRODUCTION

With the liberal economy gaining an integrated and global identity, it was expected that consumption habits would change globally by going beyond national borders. It has been thought that this expected change in consumption habits would occur with the penetration of international goods and services into national markets, and as a result, with the prediction that consumers would prefer foreign goods and services to their domestic counterparts. However, these expectations could not be fully met due to developments such as far-right political orientations, mass migrations, demographic changes, and financial recession that have strengthened in many countries, especially since the 2010s. Depending on these developments, today's global socioeconomic conditions force many nations to a more authoritarian economic and political structure. As a result of demographic, economic and cultural changes, trends such as xenophobia, anti-immigration and extreme nationalism, which are both the causes and the results of far-right political orientations, are thought to emerge. Such trends negatively affect the cultural contacts of the majority ethnic groups with the minority and foreign ethnic groups, as well as negatively affect their economic relations, and even cause the majority ethnic groups to avoid establishing economic relations with minority and foreign ethnic groups as much as possible.

Such tendencies and social changes are also reflected in the consumption behaviors of individuals. These behaviors can be irrational, especially in the buying or decision-making processes, based on factors such as the image of the country of origin in the eyes of the consumer, and the historical and current feelings customers have towards a country. These feelings and thoughts can be either positive or negative. Majority ethnic groups avoid establishing economic relations with minorities and foreign ethnic groups, thus avoiding purchasing goods and services offered by minorities and foreigners, and directly evaluate these goods and services negatively. This situation, which can be a paradigm for many years, can be defined as "consumer racism". However, before evaluating consumer behavior in terms of consumer racism in Turkey, there is a need for a conceptual discussion of racism and its economic result, consumer racism.

2. LITERATURE REVIEW AND CONCEPTUAL DISCUSSION

It can be said that the thoughts, attitudes and behaviors of individuals in one society about the individuals of another society are shaped according to some sociological concepts that trigger each other but also differ from each other. Racism can also be considered as one of the most important sociological phenomena that affect the perspectives of individuals in a society on social issues, their status in a society and ultimately their social and individual behaviors. The concept of racism can be considered as the successor and final stage of the concepts of ethnocentrism and xenophobia (Fredrickson, 2011, p. 193). Ethnocentrism is defined as "the belief that one's own system of values and beliefs is superior to other cultures on the basis of language, behavior, traditions, and religion" (McCornack & Ortiz, 2017, p. 109). Xenophobia, on the other hand, is defined as "negative attitudes or fears that an individual develops towards individuals or groups that are different from oneself or the groups to which one belongs for real or imaginary reasons" (Hjerm, 2001, p. 43). Racism is "the idea that innate racial differences reveal the superiority of certain races and are one of the main factors determining human abilities" (Merriam-Webster, 2022). Racism is defined as "violent and insulting behaviors and thoughts directed against an inferior race in a hierarchical classification" (Sumbas, 2009, p. 263). According to a broader definition, racism is a social structure in which people are classified according to certain and unchangeable biological, cultural, traditional and linguistic characteristics and based on a hierarchical order based on race (Wodak & Reisigl, 1999, p. 181). It is emphasized that, unlike ethnocentrism and xenophobia, racism is not only an emotional, attitudinal and behavioral process, but also has an ideological dimension that can become a doctrine (Rodat, 2017, p. 133). Racism manifested with an anthropological/religious understanding from the 16th century to the 18th century, when the concept of race was first placed in a conceptual framework. From the 19th century to the present, it has become a dynamic phenomenon manifested by the understanding of biological, systematic and cultural racism, respectively. Nowadays, racism is not evaluated in the context of positive sciences and is evaluated in an economic, cultural and political framework against multiculturalism, immigrants and various national and religious minorities (Virdee & McGeever, 2018, pp. 1807-1808). In this context, the new understanding of racism can also be described as "cultural racism". Cultural racism is based on the idea that immigrants come from different cultures and should be excluded from society, as they are thought to cause social harm as a result. The concept of xeno-racism, which is defined as "new racism against asylum seekers", gains importance today, where the main group of people exposed to xenophobia is refugees. Xeno-racism is defined as a new understanding of racism that marginalizes refugees in order to protect economic welfare, national identity and culture (Fekete, 2001, p. 23; Alietti & Padovan, 2013, p. 587; Di Masso et al., 2014,

p. 343). This understanding is essentially racist as it carries the traces of the old racist understanding by excluding and defaming the displaced and persecuted people. Furthermore, it is a xenophobic understanding of racism in form, as it causes fear towards those people because of their financial and ethnic background. Xenophobic individuals tend to exclude other individuals they define as strangers, avoid sharing common living spaces with them, and see them as invasive (Eser & Cicek, 2020, p.128). The majority ethnic group, which avoids any contact with foreigners or immigrants whom they consider as minorities in their social life, also has the potential to exclude minority ethnic groups economically or to avoid establishing economic relations with them. Ouellet (2007) puts forward the idea that consumers' preferences to buy domestic products cannot be explained only by consumer ethnocentrism and consumer animosity, and draws attention to the concept of consumer racism, which is at the extreme of these two concepts. Today, based on the fact that racism is evaluated in a cultural context rather than a biological understanding, consumer racism is defined as "antipathy by showing discrimination against a certain ethnic group in a symbolic way" (Ouellet, 2007, p. 115). According to the definition of Abdul-Latif and Abdul-Talib (2017, p. 616), consumer racism is "buying discrimination that develops due to cultural or ethnic differences". Thus, consumers can be racist in terms of consumption by seeing the products and services offered by a different ethnic group or a minority ethnic group as worthless and not buying them (Abdul-Latif, 2016, pp. 59-60). In modern society, individuals reflect their own values and personalities by attributing symbolic meanings to the products and services they are interested in. Therefore, when individuals assume the role of consumers, they can approach the products and services they are interested in with racist values and behaviors (Kennedy, 2001, p. 286). As a result of such attitudes and behaviors, the concept of consumer racism emerges. The concept of consumer racism refers to the evaluation of a product or service according to its ethnic origin (Abdul-Latif & Abdul-Talib, 2017, p. 619) and the long-term dissatisfaction with that ethnicity (Hill & Paphitis, 2011, p. 59). Situations such as the negative judgment of the products/services offered by the manufacturers from a minority ethnic group and the low willingness to buy the products/services belonging to this ethnic group are stated as the situations where consumer racism differs from other concepts such as consumer ethnocentrism and consumer animosity (Ouellet, 2007, p. 116). Since racism today is done in more indirect or covert ways than in the past (Dovidio & Gaertner, 2000, p. 315), it is stated that consumer racism can also occur indirectly, such as depriving an ethnic group of dislike from economic opportunities (Shoham & Gavish, 2016, p. 299). The tendency to avoid the products/services offered by minority ethnic groups due to the thought of depriving them of economic opportunities expresses the level of interaction (level of interaction) that should be established with them. The tendency of the majority ethnic groups to evaluate the products/services offered by the minority ethnic groups negatively may vary depending on how important the output they will obtain from these products/services is for them (importance of outcome).

2.1. Level of Interaction

Individuals tend to avoid the groups in which they develop racist attitudes and behaviors and avoid interacting with these groups as much as possible (Mocan & Raschke, 2016, p. 6). Level of interaction is defined as the level of contact between the buyer and seller of a product (Hill & Paphitis, 2011, p. 60). Based on approach-avoidance theory, Ouellet (2007, p. 117) argues that economic activities that require the interaction of ethnic groups exacerbate consumer racism to the detriment of minority ethnic groups. Thus, the majority ethnic group will evaluate the products produced by the minority ethnic group negatively and their willingness to buy these products will be low. Therefore, it is hypothesized:

H₁: Consumer racism negatively affects service judgment.

H₂: Consumer racism negatively affects the willingness to buy services.

It is thought that the level of interaction, one of the mediating variables of consumer racism, is based on the same logical foundations as approach-avoidance conflict (Donovan & Rossiter, 1982, p. 37). Accordingly, the more consumers feel the need to interact with a service provider from a minority ethnic group, the more they will want to stay away from that service provider with whom they engage in racist attitudes and behaviors. Consequently, as the severity of approach-avoidance conflict increases, consumer racism will increase accordingly (Ouellet, 2007, p. 117). In other words, as the level of interaction required with a service provider from a minority ethnic group increases, the willingness to buy that service is expected to decrease accordingly. It can be thought that the marketing effort with the highest potential to increase the severity of this conflict is services. Because when it comes to services, the contact or interaction that should be established between the parties is very important in the

buying and selling of services due to the principle of inseparability between the buyer and the seller (Zeithaml et al., 1985, pp. 33-34).

Therefore, it can be said that the level of interaction that consumers need to establish with the seller when buying a service is inversely proportional to consumer racism, and this negative relationship reflects negatively on service judgment and willingness to buy. Thus, it is hypothesized:

H_{2a}: The level of interaction has a moderating role in the relationship between consumer racism and willingness to buy services.

2.2. Importance of Outcome

The importance of outcome to be obtained from the service is also considered as one of the variables that affect the willingness of consumers to buy a product/service. Importance of outcome refers to the level of importance that consumers attribute to the outcome after buying a product (Hill & Paphitis, 2011, pp. 60-61). According to Ouellet (2007, pp. 117-118) consumer racism can negatively affect consumers' judgment process of products they consider important and their willingness to buy. These findings will be tested with the following hypotheses:

H_{2b}: The importance of outcome has a moderating role in the relationship between consumer racism and willingness to buy services.

H_{2c}: Service judgment has a mediating role in the relationship between consumer racism and the willingness to buy services.

H₃: Service judgment positively affects the willingness to buy service.

Accordingly, while consumers may prefer to buy products that they deem unimportant from minority ethnic groups despite their negative judgments, they may not want to buy products that they deem important from minority ethnic groups if they are offered by those groups. In other words, consumers may avoid buying products that they think will give them important outputs when they buy from ethnic groups that they dislike.

3. METHODOLOGY

Considering the increasing population of Syrian refugees in Turkey in recent years and the cultural, political and economic interactions of the two populations with each other, it is seen that there are severe differences and contradictions in the integration and cultural, political and economic exchanges of the Turkish and Syrian populations. According to the most recent demographic data before the data were collected, the registered Syrian refugee population in Mersin is 241.394 (Presidency of Migration Management, 2022). When compared to Mersin's total population (1,891,145), it is seen that the ratio of Syrians to Mersin's total population is 12.76%. This rate indicates that Syrians constitute a serious minority population in Mersin. According to this data, 16,754 of the total population of 258,694 people in the Yenişehir district of Mersin are Syrians (Dogan & Ozdemir, 2021, p. 42). Considering the surface area of Yenişehir district, it is understood that the population density of Syrians is higher in Yenişehir district compared to Akdeniz and Mezitli districts where there are more Syrian populations (Dogan & Ozdemir, 2021, p. 44). It is thought that the population density of the Syrians, who generally work in the service sector or run small shops (Dogan & Ozdemir, 2021, p. 44), in the Yenişehir district inevitably affects the economic interaction between the Turkish and Syrian population living in the district. Moreover, when it is assumed that Syrians also work in jobs that require a high level of interaction with the general population and have significant implications for consumers (i.e. healthcare services), how Turkish consumers evaluate the healthcare services that Syrians can provide, whether Turkish consumers will buy these Syrian-origin services, and whether Turkish consumers will exhibit consumer racism towards any services that Syrians can offer becomes critically important in terms of consumer behavior. However, assuming that Syrians also work in jobs such as health services, which require a high level of interaction with people from all demographic groups and whose results may be significant for consumers, the following questions are critical to the sociocultural and economic dimensions of consumption behavior:

- 1) How can the health services that Syrians might offer be judged by Turkish consumers?
- 2) Are Turkish consumers willing to buy these health services that Syrians can offer?
- 3) Can Turkish consumers engage in consumer racism against any service that Syrians can offer?

The main purpose of this research, based on all these facts and developments, is to determine how Turkish consumers evaluate the health services (tooth extraction and skin allergy treatment) provided by Syrians, their willingness to buy these services, and whether there are consumer racism tendencies in general towards the services provided by Syrians. Considering the approach-avoidance conflict theory and the fact that services require a high level of interaction between consumers and producers, consumers with racist tendencies avoid interacting with service providers with minority ethnic backgrounds. For this reason, it is investigated to what extent Turkish consumers' judgment process of services produced by service providers of minority ethnic origin and their willingness to buy these services are affected by consumer racism. The effects of mediator variables such as the level of interaction and the importance of outcome on variables such as service judgment and willingness to buy are also among the objectives of this research.

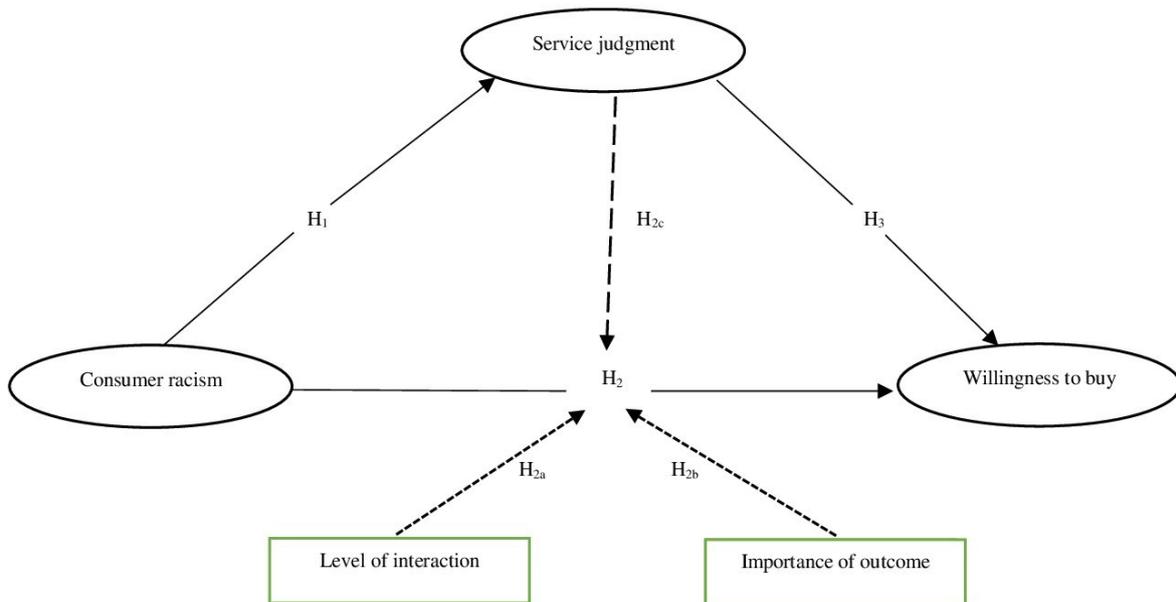
3.1. Ethical Consent of the Research

Ethics committee approval for the survey application of the study was obtained from Mersin University Social and Human Sciences Ethics Committee (Date: 18/05/2021, number: 2021-06 and meeting/decision no: 06).

3.2. Research Model and Hypotheses

The research model, which was created to answer the research questions and to indicate the relationships between the variables, is shown in Figure 1. The model was developed by the researcher.

Figure 1. Research Model



In line with the purpose of the research, the relevant literature was examined and the model and hypotheses of the research were formed. Service judgment, willingness to buy and consumer racism variables were determined as the main variables of the research model, while the level of interaction and the importance of outcome variables were determined as the mediator variables of the research model. The service judgment variable was evaluated by adapting a six-item 5-point Likert scale (Darling & Arnold, 1988, p. 63) to this experiment. The obtained reliability value of this scale was calculated as $\alpha = .87$. The willingness to buy variable was evaluated by adapting a six-item 5-point Likert scale (Klein et al., 1998, pp. 98-99) to this experiment. The obtained reliability value of this scale was calculated as $\alpha = .92$. A nine-item scale developed by Ouellet (2007, p. 120) was used to measure the consumer racism variable. The obtained reliability value of this scale was calculated as $\alpha = .79$. The levels of interaction of the participants with the healthcare professionals in order to benefit from the two different health services offered to them were measured on a 5-point Likert scale (1=Very low, 5=Very high). In order to measure the importance of the results to be obtained from these two different health services, the participants were asked to rank these health services on a 5-point Likert scale (1=Not important at all, 5=Very important).

3.3. Questionnaire Design and Implementation

Since all of the scales of the variables to be measured in the questionnaires were in English, they were first translated into Turkish by two translators. Three academicians who are experts in the field of marketing also evaluated the scale's adaptability to Turkish, semantic integrity and word choice. The questionnaire was prepared as a result of the positive evaluations of translators and academicians. The population of the research consists of Turkish consumers born between 1946-2000 and living in the Yenisehir district of Mersin. According to the most up-to-date demographic information obtained regarding the adult population between the ages of 18-65+, which is specified as the research sample, 217.732 citizens in this age range live in Yenişehir district of Mersin province (TUIK, 2022). The number of samples to be obtained from a population of more than 100,000 with a 5% margin of error and a 95% confidence level was determined as 400 (Singh & Masuku, 2014, p. 11). For this purpose, data was collected from 407 participants who met the sampling criteria in the first stage of the data collection process. 105 incomplete or incorrectly filled surveys were excluded and the data obtained from the remaining 302 surveys were taken into consideration. The research sample consisted of 302 participants who fit the characteristics of the specified universe and agreed to participate in the survey. Data were collected between April 15th 2022 and May 30th 2022. In the scope of the research, convenience sampling method was applied due to the time and budget constraints required to reach the entire universe. Structural equation model is defined as a convenient analysis method for analysis with small samples (Sahinoglu & Yakut, 2019, p. 10). The minimum number of samples recommended for the analyses made with structural equation modeling was determined as 200 (Boomsma, 1982; as cited in Wolf et al., 2013, p. 920). According to Gebring and Anderson (1985; as cited in Tanaka, 1987, p. 136), strong calculations can be made when the sample determined for the analyses made with structural equation modeling is between 50 and 300. According to Chin and Newsted (1999, p. 314), a sample size between 30 and 100 is a valid range for the structural equation modeling method. According to Hoyle and Gottfredson (2015, p. 991), the necessary sample size was determined as 200 and above in order for a research model to be successfully tested with the structural equation model. Therefore, the sample size of 302 participants reached within the scope of this research is sufficient as it is above the minimum number of samples specified for the analyses to be made with the structural equation model. Due to the pandemic conditions, the questionnaires were prepared and administered via an online platform. Two different questionnaires related to two different health services were presented to the participants, namely tooth extraction treatment, which requires a high level of interaction and is thought to be perceived as more serious in terms of its outcomes, and skin allergy treatment, which is thought to require a relatively low level of interaction and is thought to be more tolerable in terms of its outcomes. The reason for presenting two different surveys regarding these two distinct healthcare services to the participants is the anticipation that the levels of interaction required for and the importance of outcomes of these healthcare services, assumed to be provided by Syrians, will differ between low and high levels. It is also anticipated that this differentiation, in the context of healthcare services that demand a high level of interaction and have significant consequences, will lead to consumer racism based on the approach-avoidance theory. In these two questionnaires, two similar scenarios related to the health services in question were presented before the main scale items to be measured. The names of the health care providers in these scenarios were manipulated to determine whether these names had ethnic (Syrian) connotations in the pre-test. In the pre-test, a hypothetical name (Sayyid Jamal) was created and it was measured whether this name evokes the name of a Syrian. This measurement was made on a 5-point Likert scale. This created hypothetical name was presented to 110 participants who were deemed suitable for the pre-test, and according to the average of the answers given on a 5-point Likert scale (3.56), it was decided to use it in two different scenarios that will be presented to the participants in the following stages. In the scenarios included in the tooth extraction treatment and skin allergy treatment questionnaires; it has been hypothesized that consumers have a problem that requires receiving these health services, that they cannot find enough health professionals to provide these services in a safe and high quality manner in the region of residence (Yenişehir), and therefore they have learned through local media channels that a Syrian dentist/dermatologist (i.e. Sayyid Jamal), who graduated with honors, has started to serve in his own clinic in the region of residence. Therefore, hypothetical conditions were presented to the participants in order to answer these questionnaires, without the condition that they actually suffer from these disorders or that they actually go to a private or public hospital or practice in the region where they live. After the pre-test, the surveys were finalized and prepared for application. 128 participants answered the tooth extraction treatment questionnaire and 174 participants answered the skin allergy treatment questionnaire.

3.4. Analysis and Evaluation of Data

Before the data collected within the scope of the research were analyzed, missing or incorrect data were removed from the data set. First, reliability and validity analyses were conducted to determine the reliability and validity of the research. Since the Cronbach's Alpha coefficients of all three variables are between 0.70 and 0.95, it is understood that the internal consistency of the scales is quite good and reliable. Confirmatory factor analysis was performed to determine the structural consistency. In the next step, structural equation modeling was used to analyze the data. Various methods were used to analyze the data in the study. In this context, methods such as frequency distribution, arithmetic mean, standard deviation, hierarchical regression, regression analysis and confirmatory factor analysis were applied. Analyses were made using SPSS 25.0 and LISREL programs. The analyzes and findings are listed below under the sub-headings within the framework of the research model.

4. FINDINGS

Table 1. Demographic Characteristics of the Sample

Gender	n	%	Age	n	%
Women	155	51.3	18 - 29	158	52.3
Men	147	48.7	30 - 41	108	35.8
Education Level	n	%	42 - 53	33	10.9
Elementary school graduate	4	1.3	54 - 65	2	0.07
Secondary school graduate	28	9.3	65 +	1	0.03
High school graduate	114	37.7	Income Level	n	%
Associate degree graduate	48	15.9	3000 TL and below	171	56.6
Undergraduate degree graduate	89	29.5	3001 TL – 5000 TL	80	26.5
Graduate degree graduate	19	6.3	5001 TL – 7000 TL	39	12.9
			7001 TL – 9000 TL	7	2.3
			9001 TL – 11000 TL	2	0.07
			11001 TL and above	3	0.01

*n = 302

Table 1 shows the demographic information of the participants. 51.3% of the research sample consisted of female participants and 48.7% of male participants. 1.3% of the participants were primary school graduates, 9.3% were secondary school graduates, 37.7% were high school graduates, 15.9% were associate degree graduates, 29.5% were undergraduate degree graduates, and 6.3% were graduate degree graduates. 52.3% of the participants were in the 18-29 age range, 35.8% were in the 30-41 age range, 10.9% were in the 42-53 age range, 0.07% were in the 54-65 age range and 0.03% were in the age range of 65 years and above. 56.6% of the participants had an income of 3000 TL or less, 26.5% had an income of 3001 TL – 5000 TL, 9% had an income of 5001 TL – 7000 TL, 2.3% had an income of 7001 TL – 9000 TL, 0,07% had an income of 9001 TL - 11000 TL and 0.01% had an income of 11000 TL and above. The manipulation controls of the mediating variables of the research model, the level of interaction and the importance of outcome, were shown in Table 2 below.

Table 2. Importance of Outcome and Level of Interaction Manipulation Controls

Manipulation	(n=302)				
	n	Mean	Std. Dev.	P	
Importance of Outcome	Tooth extraction treatment	128	3.75	0.611	,000
	Skin allergy treatment	174	2.64	0.911	
Level of Interaction	Tooth extraction treatment	128	3.80	0.628	,000
	Skin allergy treatment	174	2.67	1.020	

As seen in Table 2, tooth extraction treatment was manipulated high in terms of the importance of outcome and level of interaction manipulations, and skin allergy treatment was manipulated low in both respects. Therefore, it was revealed that the participants had a high level of interaction with the Syrian dentist while receiving tooth extraction treatment and that this treatment was highly important for them. It was also revealed that the participants had a relatively low level of interaction with the Syrian dermatologist while being treated for skin allergy and that this treatment was relatively important for them. As can be understood from the results of manipulation control, the importance of outcome was measured as 3.75 for manipulation of tooth extraction treatment whereas it was measured as 2.64 for skin allergy treatment. Level of interaction manipulation was measured as 3.80 for tooth extraction treatment and 2.67 for skin allergy treatment. The difference between these manipulations for two different health services was also found to be statistically significant ($p=0.00$). Thus, as predicted in the study, a ranking can be made between two different health services as high and low according to the level of interaction and the importance of the results. As a result, manipulations of the level of interaction and the importance of outcome were successful.

4.1. Validity Analysis

Before the analysis of the research hypotheses, confirmatory factor analysis was performed through the LISREL program to test the construct validity of the scales used in the study and to analyze whether the research model had good fit values. In the first stage, it was examined whether the parameter values were significant in the confirmatory factor analysis. In the next stage, a goodness-of-fit analysis was performed by considering the goodness-of-fit indices so that the model could be accepted as a whole. Standard load and error values were examined in order to discover to what extent the observed variables could explain the latent variables. In order to determine the convergent validity, the composite reliability (CR) and explained variance (VE) values were examined. The result of the analysis was shown in Table 3 below.

Table 3. Parameter Estimates for Confirmatory Factor Analysis

Variables	Items	n=302			
		R ²	S.R.K.*	CR**	VE***
Consumer Racism (CR)	CR1.	0.51	0.71	0.797	0.497
	CR2.	0.36	0.61		
	CR5.	0.59	0.77		
	CR6.	0.53	0.72		
Service Judgment (SJ)	SJ1.	0.38	0.61	0.833	0.502
	SJ3.	0.38	0.68		
	SJ4.	0.53	0.73		
	SJ5.	0.56	0.75		
	SJ6.	0.58	0.76		
Willingness to Buy (WB)	WB1.	0.59	0.77	0.912	0.723
	WB2.	0.80	0.89		
	WB3.	0.87	0.93		
	WB5.	0.64	0.80		

*All standard load and error values are significant at the 0.05 level.

**CR = Composite Reliability

***VE = Explained Variance

Standard load and error values (SRK), composite reliability (CR) and explained variance (VE) values of three variables were examined in Table 3. In order to ensure convergent validity, the explained variance value must be greater than 0.50 and the composite reliability value must be greater than 0.70 (Fornell & Larcker, 1981, 45-46; Hair et al., 2010, 666). Table 3 shows the composite reliability and explained variance values of consumer racism, service judgment and willingness to buy dimensions. As seen in the table, the composite reliability values of consumer racism, service judgment and willingness to buy dimensions were determined as 0.797, 0.833 and 0.912, respectively. It was seen that these three coefficients were higher than the value of 0.70, which must be reached in

order to ensure the composite reliability. When the explained variance values in the same table were examined, the explained variance values of the three dimensions were 0.497, 0.502 and 0.723, respectively. These three values are higher than 0.50 which is the explained variance limit required to ensure convergent validity. Therefore, according to the results in Table 3, the construct validity of consumer racism, service judgment and willingness to buy scales was provided in terms of convergent validity. After determining the significance of parameter values in confirmatory factor analysis, goodness of fit analysis was performed in order to accept the model as a whole. Confirmatory factor analysis fit scores applied on the research model were given in the left column of Table 4 below, and good fit and acceptable fit intervals were given in the right two columns.

Table 4. Confirmatory Factor Analysis Goodness-of-Fit Results

Fit Indices	Fit Scores (n=302)	Good Fit ¹	Acceptable Fit ¹
Chi-square (X^2)	81.02		
X^2/df	1.306	$0 \leq X^2/df \leq 2$	$2 < X^2/df \leq 3$
RMSA	0.032	$0 \leq RMSA \leq .05$	$.05 < RMSA \leq .08$
CFI	0.99	$.97 \leq CFI \leq 1.00$	$.95 < CFI \leq .97$
RFI	0.97	$.95 \leq RFI \leq 1.00$	$.90 < RFI \leq .95$
IFI	0.99	$.90 \leq IFI \leq 1.00$	$.85 < AGFI \leq .90$
NFI	0.98	$.95 \leq NFI \leq 1.00$	$.90 < NFI \leq .95$
NNFI	0.99	$.97 \leq NNFI \leq 1.00$	$.95 < NNFI \leq .97$
GFI	0.96	$.95 \leq GFI \leq 1.00$	$.90 < GFI \leq .95$
SRMR	0.036	$0 \leq SRMR \leq .05$	$.05 < SRMR \leq .10$

Source: (Schemelleh-Engel et al., 2003, p. 52).

Table 4 shows the goodness of fit results of confirmatory factor analysis. Within the scope of goodness of fit analysis, various fit indices such as X^2/df , RMSA, CFI, RFI, IFI, NFI, NNFI, GFI and SRMR were calculated. According to the results from Table 4, it is seen that all the items in the measurement model were in good fit with the model. According to the results, convergent validity, which is the first condition of construct validity, was provided. Then, discriminant validity analysis was conducted for the variables of consumer racism, service judgment and willingness to buy. In Table 5 below, correlations between variables and discriminant validity of the model were tested.

Table 5. Cross-Structural Correlations and Divergent Validity

	Consumer Racism	Service Judgment	Willingness to Buy	
Consumer Racism	1			0.74
Service Judgment	0.375*	1		0.71
Willingness to Buy	- 0.493*	- 0.458*	1	0.85

*The correlation coefficient is significant at the 0.01 level.

The average explained variance values of consumer racism, service judgment and willingness to buy variables in Table 5 were calculated as 0.74, 0.71 and 0.85, respectively. It was seen that these explained mean variance values were higher than the correlation values between variables. The correlation values between the variables were significant at the 0.01 level. The negative correlation of the willingness to buy variable with the other two variables indicates that it has a negative relationship with these variables. Furthermore, as seen in Table 5, all of the correlation values between variables were lower than 0.80. This indicates that there is no multicollinearity problem between the variables. Based on all these evaluations, it is observed that the discriminant validity of this study is also provided, and therefore the construct validity is provided in terms of all conditions.

4.2. Testing Hypotheses with the Structural Equation Model

A goodness-of-fit analysis was conducted to determine whether there was a fit between the research model and the data obtained through structural equation modeling. The results are shown in Table 6 below.

Table 6. Structural Equation Model Goodness-of-Fit Results

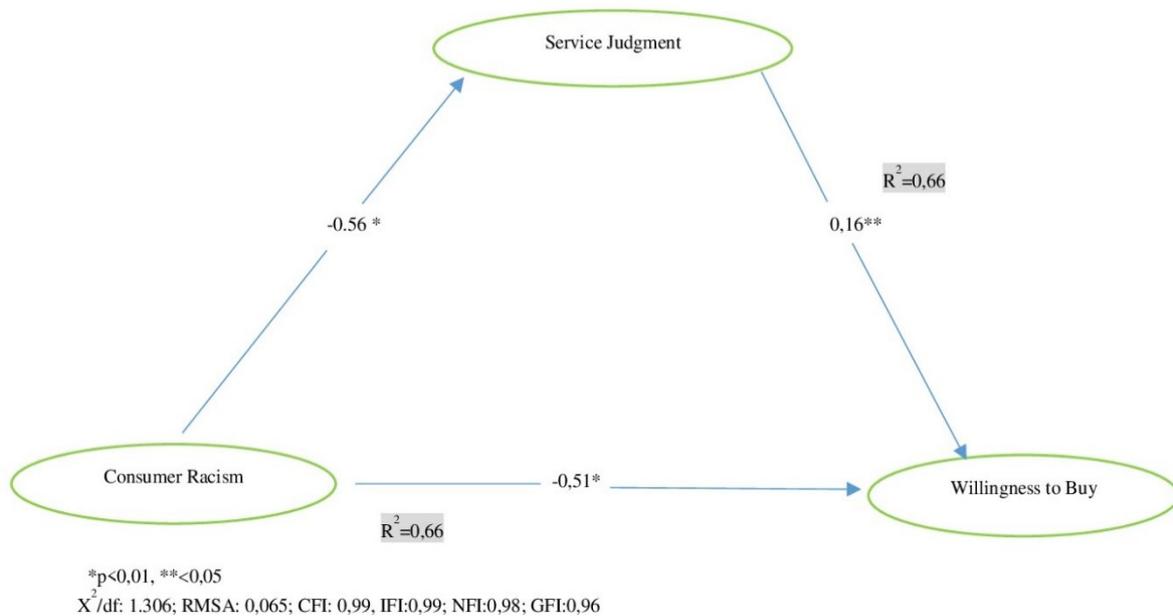
Fit Indices	Fit Scores (n=302)	Good Fit ¹	Acceptable Fit ¹
Chi-square (X ²)	81.02		
X ² /df	1.306	0 ≤ X ² /df ≤ 2	2 < X ² /df ≤ 3
RMSA	0.032	0 ≤ RMSA ≤ .05	.05 < RMSA ≤ .08
CFI	0.99	.97 ≤ CFI ≤ 1.00	.95 < CFI ≤ .97
RFI	0.97	.95 ≤ RFI ≤ 1.00	.90 < RFI ≤ .95
IFI	0.99	.90 ≤ IFI ≤ 1.00	.85 < AGFI ≤ .90
NFI	0.98	.95 ≤ NFI ≤ 1.00	.90 < NFI ≤ .95
NNFI	0.99	.97 ≤ NNFI ≤ 1.00	.95 < NNFI ≤ .97
GFI	0.96	.95 ≤ GFI ≤ 1.00	.90 < GFI ≤ .95
SRMR	0.036	0 ≤ SRMR ≤ .05	.05 < SRMR ≤ .10

The results of all the indices examined reveal that there is a fit between the research model and the data. After the goodness of fit analysis, the structural equation model analysis results and parameter estimates are shown in Table 7 below.

Table 7. Structural Equation Model Analysis Results Parameter Estimates

Hyp.	Relationship	(n=302)				Hyp.	R ²
		β	Std. Error	t value	Sig.		
H ₁	CR→SJ	-0.56	0.078	-7.12	p<0,01	Supported	0.31
H ₃	SJ→WB	0.16	0.074	0.15	p<0,05	Supported	
H ₂	CR→WB	-0.51	0.079	-6.51	p<0,01	Supported	0.66

Figure 2. Structural Equation Model and Relationships



In the structural equation model, the effect of consumer racism on service evaluation, the effect of service evaluation on service willingness to purchase and the effect of consumer racism on service purchase willingness are observed. The relationships tested in the measurement model are shown in Figure 2 above. According to the results from Figure 2, consumer racism has a negative effect on service judgment (-0.56, p<0.01), service judgment

has a positive effect on willingness to buy services (0,16, $p < 0,05$) and consumer racism has a negative effect on willingness to buy services (-0,51, $p < 0,01$). Thus, according to these results, H_1 (0.01), H_2 (0.01) and H_3 (0.05) hypotheses are supported. Service judgment explains 66% of the change in willingness to buy service. It can also be seen that consumer racism explains 66% of the change in willingness to buy service.

Table 8. Hierarchical Regression Analysis of the Moderating Effect of Level of Interaction on the Relationship Between Consumer Racism and Willingness to Buy

	Model 1		Model 2	
	β	t- value	β	t- value
Consumer Racism	-0.711*	-9.786	-0.707*	-9.721
Level of Interaction	0.066	0.903	0.068	0.930
CR * LOI	-	-	0.062	-0.855
R^2	0.245		0.247	
ΔR^2			.002	
F	48.585*		32.604*	

Dependent variable: Willingness to buy

* $p < .001$

Hierarchical regression analysis was used to test the H_{2a} and H_{2b} hypotheses, which were developed to examine the moderating roles of the importance of outcome and the level of interaction in the relationship between consumer racism and willingness to buy. Due to the non-categorical nature (Cohen, 1978; as cited in Jessor et al., 1997, p. 927; Arnold, 1982, p. 156; Kara & Gurdal, 2017: 88; Dodanwala et al., 2021, p. 27) of the level of interaction and the importance of outcome variables, hierarchical regression analysis was used for the study of these moderating effect hypotheses. The results of the hierarchical regression analysis conducted to examine the moderating role of level of interaction in the relationship between consumer racism and willingness to buy are given in Table 8. According to these results, in the first regression model, it was observed that consumer racism ($\beta = -0.711$, $p < .001$) and the level of interaction as a moderating variable ($\beta = 0.066$, $p < .001$) had a significant effect on willingness to buy ($R^2 = 0.245$, $p < .001$). According to the first model, the moderating effect of level of interaction on the relationship between consumer racism and willingness to buy explains this relationship by 24.5%. In the second model, the interaction variable, which is obtained by multiplying the variables of consumer racism and level of interaction, was included in the equation and it was seen that the interaction variable had a significant and positive effect on willingness to buy ($R^2 = 0.247$, $\beta = 0.062$, $p < .001$). According to the second model, the moderating effect of the importance of the outcome on the relationship between consumer racism and willingness to buy services explains this relationship by 24.7%. In other words, the total explained variance increased from 24.5% to 24.7% with the inclusion of the interaction variable into the model. Therefore, it was determined that the level of interaction did not have a moderating role in the relationship between consumer racism and willingness to buy, and the H_{2a} hypothesis was rejected.

Table 9. Hierarchical Regression Analysis of the Moderating Effect of Importance of Outcome

	Model 1		Model 2	
	β	t- value	β	t- value
Consumer Racism	-0.713*	-9.802	-0.707*	-9.877
Importance of Outcome	0.009	0.122	0.007	0.094
CR * IOO	-	-	.166*	-3.230
R^2	0.238		0.261	
ΔR^2			.026	
F	48.056*		36.526*	

Dependent variable: Willingness to buy

* $p < .001$

In the first part (model 1) of the hierarchical regression analysis applied to test the moderating effect hypotheses, the standardized z values of the dependent and moderating variable were simultaneously included in the analysis. In the second part (model 2) of the hierarchical regression analysis, the interaction variable created by multiplying the standardized z values of the dependent and independent variables was included in the analysis and the change in the R² value was observed. The results of the hierarchical regression analysis conducted to examine the moderating role of the importance of outcome in the relationship between consumer racism and willingness to buy are given in Table 9. According to these results, in the first regression model, consumer racism ($\beta = -0.713$, $p < .001$) and the importance of outcome as the moderator ($\beta = 0.009$, $p < .001$) had a significant effect on willingness to buy ($R^2 = 0.238$, $p < .001$). According to the first model, the moderating effect of the importance of outcome on the relationship between consumer racism and willingness to buy explains this relationship by 23.8%. In the second model, the interaction variable, which is obtained by multiplying the variables of consumer racism and the importance of outcome, was included in the equation and it was seen that the interaction variable had a significant and positive effect on the willingness to buy ($R^2 = 0.261$, $\beta = 0.166$, $p < .001$). According to the second model, the moderating effect of the importance of outcome on the relationship between consumer racism and willingness to buy explains this relationship by 26.1%. In other words, the total explained variance increased from 23.8% to 26.1% with the inclusion of the interaction variable into the model. Therefore, it was determined that the importance of outcome had a moderating role in the relationship between consumer racism and willingness to buy and the H_{2b} hypothesis was accepted.

Figure 3. The Mediating Role of Service Judgment in the Relationship Between Consumer Racism, and Willingness to Buy

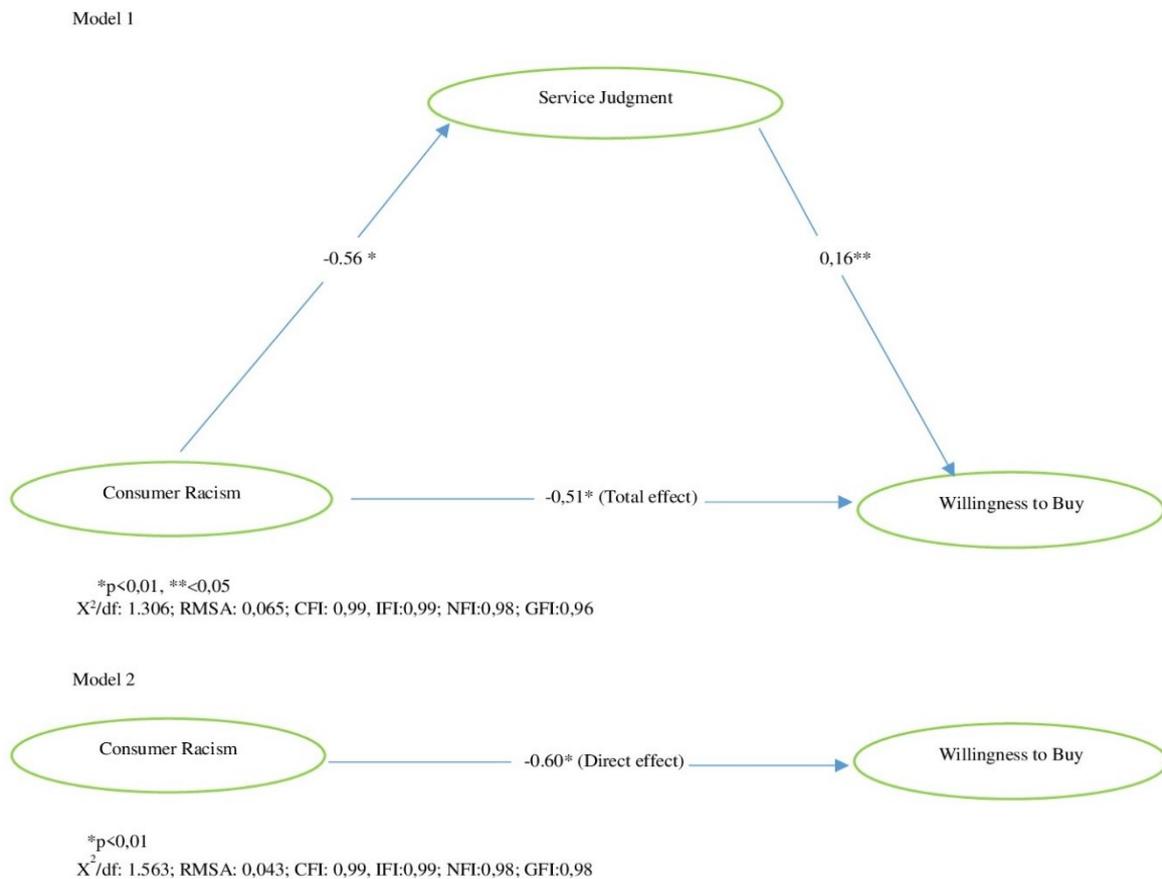


Table 10. Parameter Estimates of the Relationships Between Consumer Racism, Service Judgment and Willingness to Buy

	Hyp.	Relationships	(n=302)			
			β	Std. Error	t value	Sig.
Model 1 (mediated)	H ₁	CR→SJ	-0.56	0.078	-7.12	p<0.01
	H ₃	SJ→WB	0.16	0.074	2.15	p<0.05
	H ₂	CR→WB (Total Effect)	-0.51	0.079	-6.51	p<0.01
Model 2 (not mediated)		CR→WB (Direct Effect)	-0.60	0.066	-9.04	p<0.01

The mediating role of service judgment in the relationship between consumer racism and willingness to buy is reflected in Table 10 above. When the mediating and independent variables are included in the model together, it can be mentioned that there is a mediating effect by evaluating whether there is a relationship between the predictor and the predicted variables or whether the degree of the relationship decreases. According to the analysis results reflected in Table 10, there are statistically significant relationships between consumer racism (predictor) and service judgment (mediating) ($a=-0.56$, $p<0.01$); between service judgment (mediating) and willingness to buy (predicted) ($b=0.16$, $p<0.05$) and between consumer racism (predictor) and willingness to buy (predicted) ($c=-0.51$, $p<0.01$). When consumer racism (predictor) and service judgment (mediating) are included in the model together, the relationship between the predictor and the predicted is statistically insignificant ($c1=-0.60$, $p>0.10$). Consequently, it is seen that service judgment has a partial mediating effect on the relationship between consumer racism and willingness to buy services. Thus, the H_{2c} hypothesis is supported. After the analyses applied to the hypotheses developed within the scope of the research, a general evaluation of the results of the hypotheses is shown in Table 11 below:

Table 11. Research Hypotheses Results

H ₁ : Consumer racism negatively affects service judgment.	Supported
H ₂ : Consumer racism negatively affects the willingness to buy services.	Supported
H _{2a} : The level of interaction has a moderating role in the relationship between consumer racism and willingness to buy services.	Not Supported
H _{2b} : The importance of outcome has a moderating role in the relationship between consumer racism and willingness to buy services.	Supported
H _{2c} : Service judgment has a mediating role in the relationship between consumer racism and the willingness to buy services.	Supported
H ₃ : Service judgment positively affects the willingness to buy service.	Supported

5. CONCLUSION AND RECOMMENDATIONS

Consumer racism is analyzed based on the consumption relations of a majority ethnic group with minority ethnic groups in a country. Due to the Syrian Civil War that has been going on since 2011, Syrians who took refuge in Turkey and set up businesses should be considered as an important minority group that affects the Turkish market. The question of how the products/services produced by Syrians are evaluated by Turks and the attitudes of Turks towards these products/services also create an opportunity to examine consumer racism in Turkish conditions. The aim of this study is to first determine whether Turkish consumers tend to be racist towards the services offered by Syrians in terms of consumption. The specific purpose of this study is to determine the willingness of Turkish consumers to buy two different health services offered by Syrian dentists and dermatologists, and how they evaluate these services, based on the scenarios presented to the participants, depending on the level of interaction they need to establish while buying these services and the importance of outcome of these services. Within the scope of the research, the participants were asked to rank two different health services, namely tooth extraction treatment and skin allergy treatment, in terms of level of interaction and importance of outcome variables. According to the average of the responses of the participants, tooth extraction treatment was higher compared to skin allergy treatment in terms of level of interaction and importance of outcome. It was observed that the level of interaction that the participants need to establish with the dentist who offers this treatment while receiving tooth

extraction treatment and the importance of outcome they will obtain from this treatment are more important for them than the level of interaction they need to establish in the treatment of skin allergy and the importance of outcome they will obtain from this treatment. Regression, mediator and moderating hypotheses were tested by applying the structural equation model and hierarchical regression analysis.

According to the general results of these analyses, consumer racism affects service judgment negatively. Accordingly, consumer racism-based tendencies of Turkish consumers towards the services offered by Syrians cause them to evaluate these services negatively. It was observed that service judgment affects the willingness to buy services positively. Accordingly, when Turkish consumers evaluate the services offered by Syrians negatively, they do not want to buy these services from Syrians. Moreover, it was observed that consumer racism affects the willingness to buy services negatively. Accordingly, consumer racism of Turkish consumers towards the services provided by Syrians causes low willingness to buy services provided by Syrians. The H₁, H₂ and H₃ hypotheses results show parallelism with the findings in the literature (Ouellet, 2005; Ouellet, 2007; Hill & Paphitis, 2011; Shoham & Gavish, 2016; Abdul-Latif, 2016). Whether the level of interaction has a moderating role in the relationship between consumer racism and willingness to buy services was tested with the H_{2a} hypothesis. The findings show that the level of interaction variable does not play a moderating role in the relationship between consumer racism and willingness to buy services. Based on the approach-avoidance theory (Donovan & Rossiter, 1982; Mocan & Raschke, 2016), the finding that the level of interaction examined in the context of consumer-producer relations does not play a moderating role between consumer racism and willingness to buy services differs from the findings in the literature (Ouellet, 2007). According to the findings of the H_{2b} hypothesis, the importance of outcome plays a moderating role in the relationship between consumer racism and willingness to buy services. Accordingly, consumer racism-based tendencies of Turkish consumers towards the services offered by Syrians and their willingness to buy these services are positively affected depending on the importance of the results they will obtain from these services. This result is also consistent with the findings in the literature (Ouellet, 2007). According to the results of the H_{2c} hypothesis, service judgment has a partial mediating effect on the relationship between consumer racism and willingness to buy services. This finding is also consistent with the findings in the literature (Hill & Paphitis, 2011).

According to the general results of this research, Turkish consumers generally tend to engage in consumer racism towards the services provided by Syrians. As a result of this orientation, Turkish consumers evaluate the general and private services (tooth extraction treatment and skin allergy treatment) offered by Syrians negatively and avoid buying them. Turkish consumers' evaluations and willingness to buy the health services offered by Syrian dentists and dermatologists are positively affected by the importance of outcome they will obtain from these services. In other words, considering the importance of the outcome they will obtain from these two different health services, Turkish consumers avoid buying these services from Syrian dentists and dermatologists, and evaluate these services unfavorably. It is known that in countries like Turkey with intense refugee movements, the foreign population has been included in the economy of those countries over the years and offers products and services by taking part in many sectors. However, these populations, who establish their own lives after a few generations in the countries they take refuge in and want to compete and survive in the markets of those countries, may encounter the prejudices and racism of consumers belonging to the majority ethnic group in those countries. As a result of these attitudes and behaviors, minority asylum-seeker business owners may experience serious economic losses. Some suggestions can be made to avoid this disadvantage. Since the problem of Syrian refugees is culturally, politically, demographically and economically important, and the problems between Turks and Syrians in these areas affect the economic life of Syrians, both communities can be educated on sociological issues such as asylum, migration, and adaptation. Projects and policies designed for this goal can strengthen the ties between these two communities.

Thus, first of all, xenophobia and racism can be prevented, and it can be ensured that they participate more easily in many areas of social life, including economic life. Syrian business owners can pave the way for breaking down the possible prejudices of Turkish consumers against Syrian origin services by providing training for Syrian workers on language, business etiquette and customer relationship management. In order to avoid facing consumer racism by Turkish consumers, Syrian business owners can offer products and services with brand names, symbols and identity that match the perceptions of Turkish consumers, while avoiding emphasizing the ethnic origins or country of origin of these products and services. Therefore, Syrian business owners can not only offer products and services for their own communities, but also can increase their market share and accelerate their economic and social adaptation processes by appealing to Turkish consumers. Moreover, Syrians can offer products and services

in their businesses that are compatible with Turkish culture. In order to be recognized and gain share in the Turkish market, Syrian business owners can initiate an effective promotional campaign that contains methods such as placing ads to local, regional and national media channels, public relations, digital marketing, and sales promotions. Furthermore, Syrian business owners can prioritize institutionalization and build up brand trust. Likewise, Syrian doctors may resort to options such as word-of-mouth marketing, billboards, newspaper and magazine advertisements, and social media communication to avoid consequences such as negative service judgment and willingness to buy the healthcare services they provide. In case the health institutions where Syrian doctors work may encounter negative service judgment and willingness to buy, these institutions can publicize the qualifications, experience and professionalism of these Syrian doctors through written and oral explanations.

DECLARATION OF THE AUTHORS

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