Waiting to Give: the Effects of Waiting on Future Behavior

Ashley Craig, Harvard Business School, USA
Ellen Garbarino, University of Sydney, Australia
Stephanie Heger, Washington University, USA
Robert Slonim, University of Sydney, Australia

Waiting leads to lower service evaluations and re-patronage intentions. However, wait-time research has had to rely on these self-reported measures since actual return behavior has been unavailable. In a prosocial context, we demonstrate waiting negatively affects long-term re-patronage behavior and the behavioral effects are not always consistent with the self-reported effects.

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Ashley Craig, Harvard Business School, USA
Ellen Garbarino, University of Sydney, Australia
Stephanie Heger, Washington University, USA
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EXTENDED ABSTRACT

Waiting is a common and generally unpleasant occurrence that costs consumers both time and money so it is not surprising that it has received significant attention in the literature. The wait time literature generally finds that longer waits incite customer frustration and annoyance and lead to lower service evaluations (Dube-Rioux et al. 1989, Hui and Tse 1996, Taylor 1994). However, previous wait time research has had to rely on service evaluation and future intentions as proximal outcome measures since return behavior at the individual level has been unavailable. Our results offer the first demonstration that longer waits not only negatively affect attitudes and intentions but also future behavior such as delayed returns or not returning at all.

We examine the effects of wait time in the context of blood donations in cooperation with the Australian Red Cross Blood Service (the Blood Service). Using the Blood Service’s database, we unobtrusively track the effects a specific waiting experience on the subsequent behavior using unique donor identification numbers. The Blood Service data is supplemented by survey data exploring the traditional outcomes of satisfaction and intention to donate. We hypothesize that wait times negatively affect all three outcomes. Since a number of studies find that women’s behavior in prosocial contexts is less responsive to changes in the environment than men’s, we will also explore whether this gender moderation is evidenced across our three wait time responses (Andreoni and Vesterlund 2001; Andreoni et al. 2003, Conlin et al. 2003).

The survey, completed in the recovery room at four urban centers, took 5-10 minutes and 98% of donors completed the survey. The administrative data includes the complete donation histories from the time of the survey in July 2009 through 2013 so that it is possible to identify when, if ever, survey respondents returned. Our measure of wait time is taken from the administrative data and is recorded as the difference, in minutes, between the registration time (i.e., arrival time) and the start of donation (i.e., “needle in” time). 848 surveys could be matched with donors in the administrative data.

To examine the effects on satisfaction and intentions we use ordered logits. To study return behavior of whole blood donors we estimate a hazard model. Additionally, the hazard model accounts for the non-normality of the duration distribution and the right censoring of the data. The hazard model allows us to estimate the expected number of days a donor delays his/her return donation.

All three outcome measures show a strong negative effect of waiting. An increase in wait time of one standard deviation (20 minutes) above average reduces the likelihood of a donor reporting the highest level of satisfaction by 8 percentage points (p<.01) and the likelihood of a donor reporting that he is ‘Completely certain’ to donate again by 6 percentage points (p<.01). This negative effect wait time carries through to actual return behavior (p<.01); an increase in wait time of one standard deviation (20 minutes) above average reduces the likelihood that a donor returns on any given day by 12%. Our results show that while the effects of past donation history and age on satisfaction, intentions and actual return behavior are similar across measures, there is a notable difference in the effect of gender; women stated being both more satisfied and having a greater intention to return (Satisfaction=0.18, p<.05; Intention=0.20, p<.10), but have a lower propensity to actually return (Return=–0.12, p<.10). Thus, the survey response data masks a potentially important heterogeneity.

To clarify the nature of the results, we include separate interactions for wait time by females and by males. Both men and women are dissatisfied with longer waits and they negatively affect intentions (Satisfaction: wait * men = -0.0009, p<.01; wait * women = -0.02, p<.01; Intention: wait * men = -0.01, p<.01; wait * women = -0.009, p<.01). However, the negative reactions to waiting only carry over into a negative return rate for men, with women showing no significant decline in return rate (Return: wait * men = -0.01, p<.01; wait * women = -0.002, p<.10). An examination of the X² statistics show this difference is marginally significant (p<.06).

This paper estimates the effect of wait time on the satisfaction, intention to donate and actual return behavior of blood donors. Longer waits negatively affect future behavior, along with satisfaction and behavioral intentions. While we find similar overall conclusions from the survey responses to satisfaction and future intentions as with the actual return behavior, however the survey-based responses do not reflect the heterogeneity we capture in the actual return behavior. In particular, men and women respond to increased time costs in different ways. Male whole blood have an elastic response: longer waits cause male whole blood donors, but not female, to delay their return to give whole blood. This finding corroborates existing laboratory and field evidence that demand for altruism is more elastic for males than females (Andreoni and Vesterlund 2001; Andreoni et al. 2003, Conlin et al. 2003).

REFERENCES