Drivers of Satisfaction In Inclusive Retail: the Mediating Role of Perceived Service Quality Among Consumers With Disabilities In India

Chitra A. Kundu[1], Dr. Hetal Thakar[2]

[1]Research Scholar, Parul institute of Management and Research, Parul University, Vadodara,
Email ID: kunduchitra700@gmail.com

[2]Associate Professor, Director, Centre for Distance & Online Education (CDOE) & Centre for Internal Quality Assurance (CIQA) Parul institute of Business Administration, Parul University, Vadodara.
Email ID: Hetal.thakaar29097@paruluniversity.ac.in

Cite This Paper as: Chitra A. Kundu, Dr. Hetal Thakar (2026) Drivers Of Satisfaction In Inclusive Retail: The Mediating Role Of Perceived Service Quality Among Consumers With Disabilities In India The Journal Of African Development L, Vol.7, No.1, 330-339

KEYWORDS

Customer; Satisfaction; Service; Quality; India

ABSTRACT

The study explores the relationship between inclusive retail service quality and customer satisfaction for consumers with disabilities in India with the mediating effect of Overall Service Quality. A quantitative cross-sectional research framework was designed which contained eight dimensions of service quality: Access, Responsiveness, Communication, Humaneness, Security, Empowering, Competence and Reliability. A total of 339 observations were used in the analytical data set. The measurement structure and hypothesized relationships were analyzed using confirmatory factor analysis and observed-variable path analysis in AMOS. Results showed that the seven service quality dimensions had significant relationships with Overall Service Quality, while Empowerment did not have a significant relationship. Reliability was the most important factor for Overall Service Quality. In addition, Overall Service Quality was found to have a strong positive correlation with the Customer Satisfaction ($\beta = .702$, $p < .001$). Mediation analysis showed seven dimensions that had both direct and indirect effects, with Responsiveness having complementary partial mediation, and six dimensions having only indirect mediation. The results suggest that the importance of reliable service delivery, accessible retail settings, clear communication and assistance from the staff are relevant to the concept of inclusive retail experience. The study is a contribution to the service quality literature because of the combination of the conventional and disability relevant dimensions in an overall mediation framework. It also provides an underlying reason to look at an inclusive approach to retail, which considers the wide range of needs of people with a disability

INTRODUCTION

Background

Retail spaces serve as significant and important areas in people's daily lives, offering access to basic goods, services and social relations. But the shopping experience of a person with a disability is not necessarily determined by product availability, cost and convenience (Akyazici & Yasar, 2026) . The physical environment, communication issues, employee attitudes, and presence of support staff can affect the way consumers with a disability interact with the retail environment and rate services (Cohen et al., 2023; Dodds & Palakshappa, 2022) . Therefore, inclusive retailing needs to be addressed not only through the physical access of the stores but also the service they provide during the shopping process.

The Rights of Persons with Disabilities Act, 2016 is a law in India that aims to ensure accessibility, equality and participation of persons with disabilities (Math et al., 2019) . While legal recognition of accessibility does not automatically mean that retail environments sufficiently meet the needs of consumers with disabilities, it does help ensure that they are accessible to all. However, legal recognition of accessibility does not guarantee that retail environments are accessible to all consumers, especially for those with disabilities. A person's experiences with a retail service may vary depending on the type of disability, availability of facilities, and employees' ability to meet personal needs (Edwards et al., 2018; Kaufman–Scarborough, 1999) . It is therefore essential to grasp these experiences, consequently, to get a better understanding of the inclusive retail service quality.

In the past, service quality has been considered as one of the key factors in customer evaluation and satisfaction (Li et al., 2021; Zhong & Moon, 2020) . Yet, service quality frameworks that have been developed in the general consumer market may not be sensitive to disability-specific needs. In this context, the present study considers eight dimensions of inclusive

retail service quality, which are Access, Responsiveness, Communication, Humaneness, Security, Enabling/Empowerment, Competence and Reliability and explores their relationships with Overall Service Quality and Customer Satisfaction of consumers with disabilities in India.

1.1. Service Quality and Customer Satisfaction

The concept of service quality has been studied extensively in marketing and consumer behaviour studies. (Parasuraman et al., 1988) have proposed the SERVQUAL framework which includes five dimensions of perceived service quality: reliability, responsiveness, assurance, empathy and tangibles. While there is a strong connection between service quality and customer satisfaction (Alzaydi et al., 2018; Brady & Cronin, 2001; Ekinci & Dawes, 2009) , it is a different type of evaluation. In brief, the quality of service is typically considered to be the customers' perceptions about the quality of service, while satisfaction is the customers' overall evaluative reaction to their consumption experiences (Oliver, 1980). This distinction gives a theoretical framework to study Overall Service Quality as a possible intervening variable between the individual service attributes and Customer Satisfaction.

1.2. Inclusive Retail Service Quality

Conventional service quality frameworks must be applied in a way that takes into account the diversity of individual requirements and accessibility issues of consumers with disabilities. (Kaufman–Scarborough, 1999) contended that retail access goes beyond physical modifications and should be considered the overall shopping experience of consumers with mobility disabilities. This view emphasizes the need to consider accessibility as a component of service provision not just as a feature of the built environment.

Interpersonal components of retail services can also impact the consumer's perception of the shopping environment, in addition to providing accessibility (Baker et al., 2002; Kim & Kim, 2012) . These are relevant to employee responsiveness, communication, respectful treatment, and professional competence as retail interactions could involve various means of assisting and communicating. (Bitner, 1990) have shown that employee behaviour is crucial in influencing customers' assessments of service encounters and (Brady & Cronin, 2001) noted the significance of interaction quality in larger service quality evaluations.

Security, independence and empowerment also feature in inclusive retailing (Çelik, 2025) . These dimensions are related to whether or not a consumer is able to reach or navigate retail spaces, access information, make purchases and engage in retail shopping activities with an appropriate level of support and independence (Fisk et al., 2018) . The fact that they are included, allows them to be studied on a basis that takes into account the unique needs of persons with disabilities as consumers.

1.3. Research Gap

Although a great deal of literature exists on the concept of service quality and satisfaction, the issue of applicability of existing service-quality frameworks to consumers with disabilities is an important field of study to explore further. While more traditionally, the focus of models is on the general service encounter, disability-inclusive retailing adds other elements to accessibility, communication, autonomy and individual support.

Previous studies have focused on the accessibility of retail outlets and shopping patterns of people with disabilities (Balconi et al., 2025; Eskytė, 2019; Oluigbo et al., 2026) . But there is still potential for a more holistic analysis of the service quality dimensions from a traditional and disability-relevant perspective in a single conceptual framework, especially in the Indian retail scenario. In addition, a detailed analysis of each dimension of service quality as well as Overall Service Quality could help understand their direct and indirect links with Customer Satisfaction.

To remedy this, a framework that combines the eight dimensions of inclusive retail service quality was developed, and Overall Service Quality was used as a mediating variable in the study between these dimensions and Customer Satisfaction.

With the above discussion, the following research questions are raised:

RQ1:What is the influence of the service quality dimensions of inclusive retail on the Overall service quality among consumers with disability in India?

RQ2:What are the direct relationship of inclusive retail service quality dimensions with Customer Satisfaction?

RQ3:What is the relationship between Overall Service Quality and Customer Satisfaction among consumers with disabilities?

These questions help focus the analysis of the inclusive retail service quality and serve as the foundation for assessing the proposed conceptual framework.

MATERIALS AND METHODS

2.1. Research Design

This study used quantitative research approach with cross sectional research design to explore the effect of dimensions of

inclusive retail service on the satisfaction of people with disability in India. These eight elements of service quality were included in the conceptual framework, which were Access, Responsiveness, Communication, Humaneness, Security, Enabling/Empowerment, Competence, and Reliability. Overall Service Quality was set as an intervening variable to explore the direct and indirect links between these dimensions and Customer Satisfaction. The quantitative approach was deemed suitable to study the proposed relationships using multivariate statistical analysis.

2.2. Target Population and Sampling Technique

Target population include adult retail consumers with disabilities, who have experience of buying products or services from a retail establishment, in India. This study is limited to the experiences of consumers with disabilities because their experiences in retail may be impacted by disability access, communication, employee assistance, and other service related concerns

The non-probability purposive sampling method was suggested to recruit the subjects with characteristics related to the purpose of the study. The methodology was deemed suitable for targeting the targeted consumer segments and allowing the respondents to give a meaningful evaluation of the quality of retail service that they were able to access. The proposed inclusion criteria included having at least 18 years of age, that they had a recognized disability and had previous experience of shopping at retail establishments in India.

The study suggested that the benchmark disability classification in the Rights of Persons with Disabilities Act, 2016 should be used for determining disability eligibility. As per this classification, the person with at least 40% of a specified disability as certified by a competent authority would be eligible for inclusion. The proposed population thus included consumers with any of the following types of disability that met the benchmark criterion: locomotor disability, visual disability, hearing disability, and other specified disabilities.

The goal of this threshold was to give a consistent ground for the eligibility of a person rather than to suggest that persons with disabilities below 40% are not facing retail accessibility barriers.

There were 339 observations in the analytical dataset. The proposed purposive sampling process and criteria for disability eligibility is not an actual process of recruitment, but rather the process the data was supposed to be collected through.

2.3. Research Instrument and Measurement of Variables

The questionnaire was used as the main tool for measuring consumers' perception of the quality of retail service and satisfaction with inclusive service. The instrument consisted of eight dimensions of the service quality: Access, Responsiveness, Communication, Humaneness, Security, Enabling/Empowerment, Competence, and Reliability. Overall Service Quality was introduced as the mediating construct, and Customer Satisfaction as the dependent variable.

The service-quality dimensions were designed to cover various facets of the inclusive shopping experience, such as the accessibility of retail stores, the timeliness of employee interventions, the clarity of communication, the respect that is shown to customers, the customer's sense of security, the ease of shopping, employee competence, and consistency of service provision.

The constructs were represented with multiple measurement items. The model was based on the multidimensional service quality view of (Parasuraman et al., 1988) and the hierarchical conceptualization of service quality, that were put forward by (Brady & Cronin, 2001) ; dimensions relevant to consumers with disabilities were added.

2.4. Data Analysis Techniques

Data analysis was carried out by the software AMOS. The confirmatory factor analysis (CFA) was conducted to test the measurement structure and to check the fitness of the constructs proposed. The chi-square statistic (χ^2), Comparative Fit Index (CFI), Tucker–Lewis Index (TLI), Root Mean Square Error of Approximation (RMSEA), and Standardized Root Mean Square Residual (SRMR) were used to assess the measurement-model fit. Then observed-variable path analysis was used to test the relationships between hypothesized variables (eight dimensions of service quality, Overall Service Quality, and Customer Satisfaction). The model was structurally modeled as direct paths between each of the dimensions of service quality and Overall Service Quality and between each of the dimensions of service quality and Customer Satisfaction, as well as a path between Overall Service Quality and Customer Satisfaction.

To explore whether there were indirect relationships between the individual service-quality dimensions and Customer Satisfaction, mediation analysis was used to test the Overall Service Quality. Standardized path coefficients, significance level, and 95% confidence intervals were used to determine the direct, indirect, and total effects. The confidence intervals for indirect effects were estimated using the delta method. Indirect-only and complementary mediation patterns were identified when the direct effect, and their indirect effect, are statistically significant, respectively.

The coefficient of determination (R^2) was used to evaluate the explanatory power of the structural model. The significance of the results was determined at 5% level ($p < .05$).

RESULTS

The present study investigated the relationships between the eight dimensions of the inclusive retail service quality, the perceived overall service quality as a mediator, and customer satisfaction. Access (ACC), Responsiveness (RES), Communication (COM), Humaneness (HUM), Security (SEC), Empowerment (EMP), Competence (CMP) and Reliability (REL) were the eight dimensions.

The data used was 339 observations with descriptive statistics, confirmatory factor analysis (CFA), reliability and validity analysis, and structural path analysis and mediation test. Results are reported according to the convention used in covariance-based structural equation modelling (CB-SEM) which include unstandardized regression weights, standard errors, critical ratios, standardized regression weights, and significance levels.

4.1. Demographic profile of respondents

The socio-demographic profile of the respondents is given in Table 1. The sample comprised respondents with seven types of disabilities. The greatest number of disabilities were locomotor disability (27.7%), followed by visual disability (23.6%) and hearing disability (13.3%). The 12.4% who reported having a mental illness, 10.6% who reported having a speech and language disability, 6.8% who reported an intellectual disability, and 5.6% who reported another disability were the largest groups of people reporting disabilities.

As far as age is concerned, the age group 25-34 years had the highest proportion of respondents (28.3%), followed by 18-24 years (24.8%) and 35-44 years (23.0%). Females accounted for 51.3% of the respondents whereas males made up 48.7% of the respondents.

Table 1. Demographic characteristics of respondents (N = 339)

DEMOGRAPHIC CHARACTERISTIC	CATEGORY	FREQUENCY	PERCENTAGE (%)
DISABILITY TYPE	Hearing disability	45	13.3
	Intellectual disability	23	6.8
	Locomotor disability	94	27.7
	Mental illness	42	12.4
	Other	19	5.6
	Speech and language disability	36	10.6
	Visual disability	80	23.6
AGE GROUP	18–24 years	84	24.8
	25–34 years	96	28.3
	35–44 years	78	23.0
	45–54 years	49	14.5
	55–64 years	22	6.5
	65 years and above	10	2.9
GENDER	Male	165	48.7
	Female	174	51.3

Demographic composition shows representation by disability, by age of adults. However, generalizability of the findings should be considered in light of the relatively small number of older respondents and some categories of disabilities.

4.2. Descriptive statistics of service-quality dimensions

Descriptive analysis was used to analyze the ratings of the service quality attributes of organized retail stores by the respondents. All the questionnaire items were then rated on a seven-point Likert scale on which higher scores are more positive.The item-level means provided in the analysis were used to calculate the construct means presented in Table 2.

Table 2. Descriptive statistics of service-quality dimensions

Construct	Number of items	Mean
Access	3	4.203
Responsiveness	4	4.318
Communication	4	4.558
Humaneness	2	4.445
Security	2	4.445
Empowerment	2	4.425
Competence	3	4.473
Reliability	3	4.463

The highest mean score was for Communication (M = 4.558), followed by Competence (M = 4.473) and Reliability (M = 4.463). Access recorded the lowest mean score (M = 4.203) followed by Responsiveness (M = 4.318). The descriptive results indicated that there was generally positive evaluation of the interpersonal communication and staff skills, but the accessibility-related arrangements and responsiveness generally received lower evaluations. Differences in mean scores are descriptive only and should not be interpreted as being statistically different without the use of the proper inferential statistics..

4.3. Assessment of the measurement model

The structural relationships were examined after examining the properties of the measures of the dimensions of service quality using confirmatory factor analysis (CFA). The measurement evaluation was conducted in terms of internal consistency reliability, convergent validity, discriminant validity and global model fit. Single items were used to measure Overall Service Quality and Customer Satisfaction. Therefore, they were not used in the computation of the multi-item reliability and convergent validity.

4.3.1. Internal consistency reliability and convergent validity

Internal consistency was evaluated by using Cronbach's alpha and convergent validity was evaluated by the average variance extracted (AVE). The overall service-quality instrument showed a Cronbach's alpha of .948, which suggested that it had high internal consistency at the aggregate scale level.

The eight dimensions had an average AVE ranging from .508 to .579, which is all above the recommended AVE value of .50. The results indicate that acceptable variance was accounted for by the constructs in the indicators to which they relate.

Table 3. Reliability and convergent validity assessment

Construct	Items	AVE	Square root of AVE
Access	3	.550	.741
Responsiveness	4	.570	.755
Communication	4	.527	.726
Humaneness	2	.569	.754
Security	2	.579	.761
Empowerment	2	.574	.757
Competence	3	.551	.742
Reliability	3	.508	.712

The results suggest good AVE scores for all eight dimensions of service quality. The highest AVE was in the security (.579) and the lowest in the reliability (.508). All values fulfilled the conventional threshold, however, the lower AVE value for reliability indicates that its measurement precision needs to be considered.

4.3.2. Discriminant validity

The Fornell – Larcker criterion was used to evaluate the discriminant validity. In keeping with this criterion, the AVE for each construct should be higher than the correlations of that construct with other constructs.

Table 4. Discriminant validity matrix

Construct	ACC	RES	COM	HUM	SEC	EMP	CMP	REL
Access	.741							
Responsiveness	.493	.755						
Communication	.539	.547	.726					
Humaneness	.463	.564	.529	.754				
Security	.510	.505	.536	.439	.761			

Empowerment	.495	.472	.534	.474	.442	.757		
Competence	.554	.538	.589	.583	.537	.534	.742	
Reliability	.531	.533	.531	.499	.532	.432	.561	.712

The interconstruct correlations for the diagonal values were found to be higher than the diagonal values. Communication and Competence correlated the highest (r = .589) followed by Humaneness and Competence (r = .583). These correlations were lower than those of AVE which were the corresponding square roots.

The reported composite-level correlations, therefore, meet the Fornell–Larcker comparison. The results, however, give preliminary evidence of discriminant validity only within a covariance-based measure model since the correlation matrix is based on observed composite scores.

4.3.3. Confirmatory factor analysis and model fit

A chi-square statistic, comparative fit index (CFI), Tucker–Lewis index (TLI), root mean square error of approximation (RMSEA), and standardized root mean square residual (SRMR) were used to evaluate the overall fit of the measurement model.

Table 5. Measurement model fit indices

FIT INDEX	RECOMMENDED GUIDELINE	OBTAINED VALUE
CHI-SQUARE (X^2)	—	242.000
DEGREES OF FREEDOM	—	209
X^2/DF	Below 3.00	1.158
SIGNIFICANCE OF X^2	Above .05	.060
CFI	Above .95	.991
TLI	Above .95	.989
RMSEA	Below .06	.021
RMSEA 90% CI	—	.000–.033
SRMR	Below .08	.031

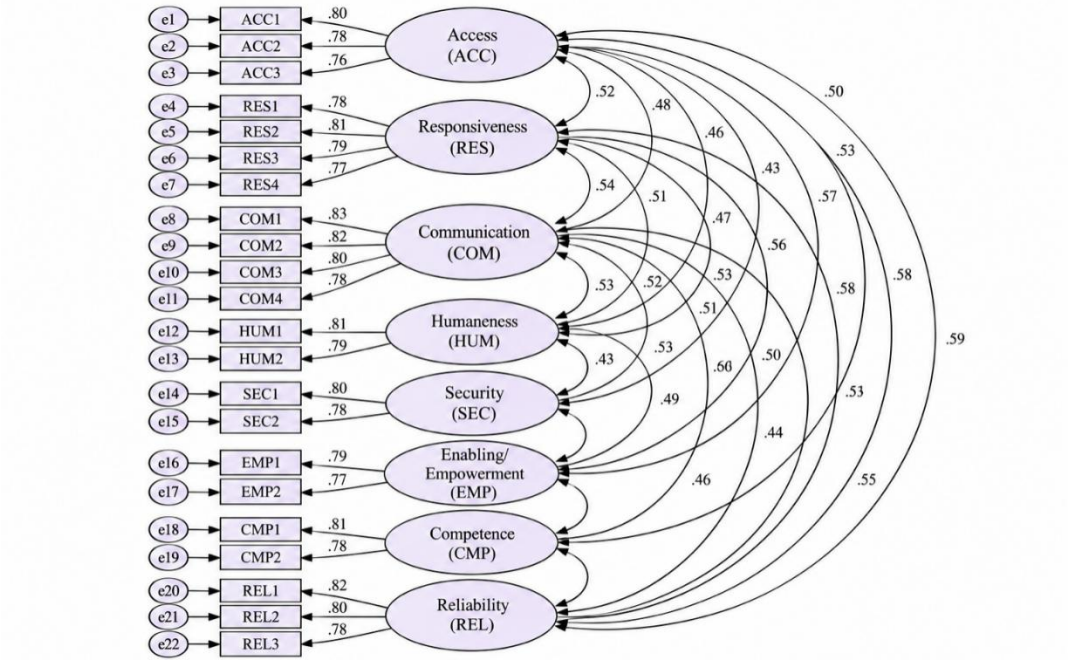


Figure 1 – Measurement Model

The measurement model exhibited a good global fit with a $\chi^2(209) = 242.000$, p = .060 and a normed chi-square of 1.158. Increments fit indices were higher than usual (CFI = .991; TLI = .989). Likewise, RMSEA (.021) and SRMR (.031) showed low fit and error.

The results indicate that the measurement specification estimated well the observed covariance structure.

4.4. Structural model assessment

After the measurement assessment the structural relationships were discussed with path analysis. The eight service quality dimensions were used as exogenous predictors, Overall Service Quality was used as a mediator, and Customer Satisfaction was used as the endogenous outcome variable in the model.

The structural estimates were analyzed in terms of unstandardized regression weights (B), standard errors (SE), critical ratios (CR), standardized regression weights (β) and the levels of significance associated with them.

Table 6. Mediation Effect of Overall Service Quality on the Relationship Between Service Dimensions and Customer Satisfaction

Predictor	Indirect Effect	β (Indirect)	95% CI [LL, UL]	p	Direct Effect	p	Total Effect	p
Access	0.108	0.101	[0.041, 0.175]	.001	−0.043	.385	0.065	.266
Responsiveness	0.092	0.088	[0.026, 0.157]	.006	0.137	.005	0.229	< .001
Communication	0.108	0.100	[0.037, 0.179]	.003	0.022	.680	0.130	.039
Humaneness	0.074	0.076	[0.014, 0.134]	.016	0.050	.259	0.124	.021
Security	0.092	0.091	[0.030, 0.154]	.004	−0.064	.166	0.028	.606
Empowerment	0.050	0.049	[−0.010, 0.110]	.100	−0.001	.975	0.049	.367
Competence	0.080	0.075	[0.009, 0.152]	.028	−0.055	.304	0.025	.692
Reliability	0.166	0.153	[0.095, 0.238]	< .001	0.071	.171	0.237	< .001

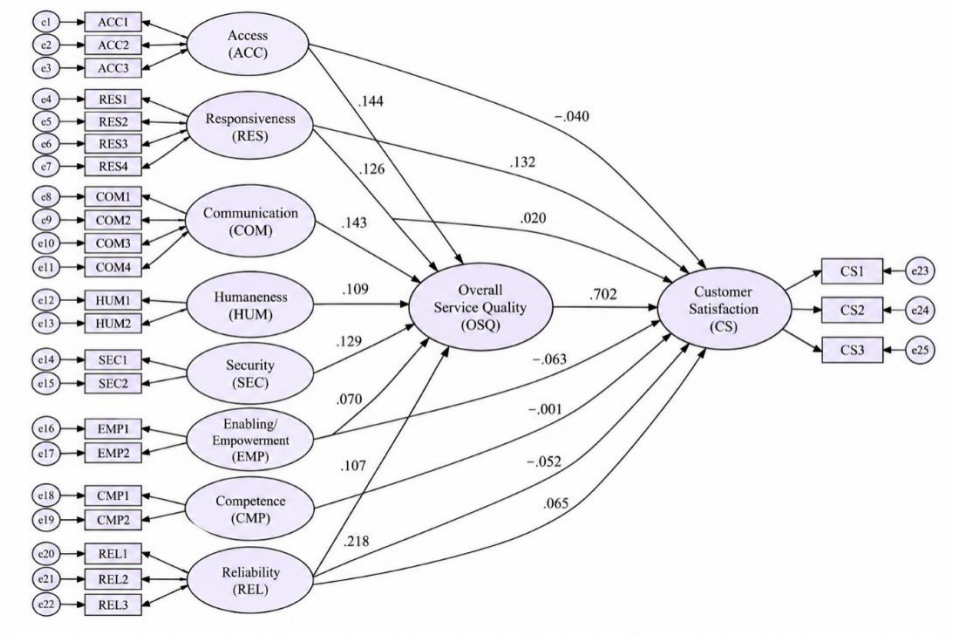


Figure 2 – Structural Model

The mediation analysis indicated that Overall Service Quality significantly mediated the effects of seven of the eight service dimensions on Customer Satisfaction. Specifically, significant indirect effects were observed for Access (β = .101, p = .001, 95% CI [0.041, 0.175]), Responsiveness (β = .088, p = .006, 95% CI [0.026, 0.157]), Communication (β = .100, p = .003, 95% CI [0.037, 0.179]), Humaneness (β = .076, p = .016, 95% CI [0.014, 0.134]), Security (β = .091, p = .004, 95% CI [0.030, 0.154]), Competence (β = .075, p = .028, 95% CI [0.009, 0.152]), and Reliability (β = .153, p < .001, 95% CI [0.095, 0.238]). For all situations, the 95% confidence interval for the indirect effect did not contain a value of zero, which

indicates a statistically significant indirect effect via Overall Service Quality.

Of these relationships, Responsiveness had a partial mediation effect—both the indirect (β = .088, p = .006) and the direct (β = .132, p = .005) effect on Customer Satisfaction were statistically significant. This implies that Responsive had direct and indirect effects on Customer Satisfaction with the mediation of its perception of Overall Service Quality.

The indirect effects of Access, Communication, Humaneness, Security, Competence and Reliability through Overall Service Quality were statistically significant (p < .05), which resulted in full mediation, while the direct effects of Access, Communication, Humaneness, Security, Competence and Reliability on Customer Satisfaction were not (p > .05). Therefore, these service dimensions seem to impact Customer Satisfaction mainly through their impact on Overall Service Quality.

There was no significant mediation for Empowering. Its indirect effect was non-significant (β = .049, p = .100, 95% CI [−0.010, 0.110]), with the confidence interval containing zero. The direct effect was also not significant (β = −.001, p = .975), so there was no evidence of direct effect of Empowerment on Customer Satisfaction, nor did it have a direct effect on Customer Satisfaction through Overall Service Quality.

Of note, Reliability had the highest standardized indirect effect (β = .153, p < .001), followed by Access (β = .101) and Communication (β = .100), indicating that these dimensions have an indirect effect on Customer Satisfaction which is primarily through the strengthening of Overall Service Quality perceptions.

DISCUSSION AND IMPLICATIONS

The present study explored the relationship between eight dimensions of inclusive retail service quality and Customer Satisfaction, and Overall Service Quality acting as a mediator between the two. The results showed that seven of eight dimensions significantly related to Overall Service Quality and Empowerment showed a nonsignificant relationship. Overall, these findings confirm the multidimensional nature of service quality as proposed by (Alzaydi et al., 2018; Parasuraman et al., 1988; Sureshchandar et al., 2002) that customers' perceptions of service quality are influenced by multiple aspects of service delivery.

Reliability emerged as the strongest predictor of Overall Service Quality (β = .218, p < .001), followed by Access (β = .144, p < .001) and Communication (β = .143, p = .002). The salience of Reliability is in line with Parasuraman et al. (1988) who concluded that the dependability of service is one of the cornerstone elements of perceived service quality. Access and Communication are also significant contributions, and are consistent with the importance of accessibility placed on consumers with disabilities by (Tuli et al., 2023) , who noted that it is not just in the physical infrastructure but the general shopping experience. The results indicate that the consistent provision of services, the environment of retail establishments and the communication in inclusive retail are especially important for the overall evaluations of service quality.

Responsiveness was found to have a significant relationship with Overall Service Quality (β = .126, p = .005) and Customer Satisfaction (β = .132, p = .005). This result was consistent with the SERVQUAL model, which identified four areas of service attributes as being important: promptness and willingness to help (Parasuraman et al., 1988). Humaneness and Security also had strong positive correlations with Overall Service Quality, which aligns with (Ekinci & Dawes, 2009; Etgar & Fuchs, 2009; Hartline & Jones, 1996) , who suggested that interaction quality and service performance impact customers' overall perceptions of service. On the other hand, the non-significant relationship between Empowerment indicates that other factors, such as perceived autonomy and individual accessibility needs, may play a role in the contribution of this factor which requires further investigation.

The results support the positive relationship between Overall Service Quality and Customer Satisfaction (β = .702, p < .001) as found by (Annamdevula & Bellamkonda, 2016; Lee et al., 2000) who identified perceived service quality as an important antecedent of satisfaction. Indirect effects were also found to be significant for seven dimensions with regards to mediation analysis. The indirect effect was highest for Reliability (β = .153, p < .001), with Responsiveness showing partial mediation (i.e., both direct and indirect effects were significant). Access, Communication, Humaneness, Security, Competence, and Reliability showed evidence of indirect-only mediation—the traditional definition of "full mediation. These results are consistent with the service-quality perspective of a hierarchy offered by (Brady & Cronin, 2001) , which indicates that individual service attributes are linked to satisfaction mostly through a higher-order assessment of service quality.

In conclusion, the results confirm the importance of a multi-dimensional approach to service quality in order to investigate inclusive retail experiences and indicate Overall Service Quality's mediating effects in the customer satisfaction model.

Implications of the Study

5.1. Theoretical Implications

The study makes a valuable addition to the service-quality literature by applying the SERVQUAL approach to a more encompassing retail context that includes disability-sensitive aspects like Access and Enabling/Empowerment. The results validate the difference between the service-quality attributes, Overall Service Quality and Customer Satisfaction. In

addition, the results of the mediation indicated that the dimensions of service quality are not all equally related to satisfaction: Responsiveness showed both direct and indirect relationships, while the majority of other dimensions were only indirectly related to satisfaction. Likewise, the nonsignificant results found on the Empowerment measure point to a need for more theoretical development.

5.2. Managerial Implications

The results indicate that the retailers' emphasis on consistent and reliable service delivery, easy shopping and communication to reinforce service quality is crucial. Attention should be focussed on Responsiveness, where prompt resolution of customer problems and prompt assistance were directly and indirectly linked with Customer Satisfaction. Retail firms also should focus on employee training on respectful communication, disability sensitivity, and disability assistance. Enabling access to retail premises is not the only way to improve accessibility; ensuring reliable and customer sensitive service practices is also important.

LIMITATIONS AND FUTURE RESEARCH

The cross-sectional design precludes causal interpretations of the relationships, and the data used in the study preclude empirical generalizations until validated with actual consumer responses. Future studies should analyze differences between the disability category, retail format and demographic groups. Other constructs such as perceived autonomy, dignity, trust, shopping independence etc. could also contribute to the explanation of the relationships between inclusive service quality and Customer Satisfaction.

CONCLUSION

The study focused on the parts and wholes of the service quality associated with the retail service dimensions, which in turn, explained Customer Satisfaction with Overall Service Quality in an inclusive retail service. The results showed that the factors of Reliability, Access, Communication, Responsiveness, Humaneness, Security, Competence were also found to be significantly related to Overall Service Quality, while Enabling/Empowerment was not found to be significantly related. The overall service quality was positively associated with customer satisfaction with $\beta = .702$, $p < .001$. The mediation analysis also showed that there were seven dimensions where there was a significant indirect effect, such as in the case of Responsiveness, which showed complementary mediation, and six dimensions which showed indirect-only mediation.

The results highlight the importance of effective communication, service delivery and employee assistance in the proposed inclusive retail framework, as well as accessibility. They also emphasize that Overall Service Quality should be taken into account in assessing the relationship between each service attribute and satisfaction. The framework offers the foundation for further empirical research on the inclusive retail experience of consumers with disabilities in India.

REFERENCES

1. Akyazici, A. O., & Yasar, D. (2026). Disability-Specific Spatial Friction in Department Store Interiors: A Mixed-Methods Study of Inclusive Retail Design. Buildings, 16(12), 2405. https://doi.org/10.3390/buildings16122405
2. Alzaydi, Z. M., Al-Hajla, A., Nguyen, B., & Jayawardhena, C. (2018). A review of service quality and service delivery. Business Process Management Journal, 24(1), 295–328. https://doi.org/10.1108/BPMJ-09-2016-0185
3. Annamdevula, S., & Bellamkonda, R. S. (2016). Effect of student perceived service quality on student satisfaction, loyalty and motivation in Indian universities. Journal of Modelling in Management, 11(2), 488–517. https://doi.org/10.1108/JM2-01-2014-0010
4. Baker, J., Parasuraman, A., Grewal, D., & Voss, G. B. (2002). The Influence of Multiple Store Environment Cues on Perceived Merchandise Value and Patronage Intentions. Journal of Marketing, 66(2), 120–141. https://doi.org/10.1509/jmkg.66.2.120.18470
5. Balconi, M., Angioletti, L., & Acconito, C. (2025). "Choose with your eyes closed" instore shopping experience and spatial maps in visually impaired and sighted persons. Universal Access in the Information Society, 24(1), 853–865. https://doi.org/10.1007/s10209-024-01115-0
6. Bitner, M. J. (1990). Evaluating Service Encounters: The Effects of Physical Surroundings and Employee Responses. Journal of Marketing, 54(2), 69–82. https://doi.org/10.1177/002224299005400206
7. Brady, M. K., & Cronin, J. J. (2001). Some New Thoughts on Conceptualizing Perceived Service Quality: A Hierarchical Approach. Journal of Marketing, 65(3), 34–49. https://doi.org/10.1509/jmkg.65.3.34.18334
8. Çelik, A. A. (2025). Empowering Visually Impaired Consumers in Retail: A Systematic Review of Accessible Payment Solutions for All. Ege Akademik Bakis (Ege Academic Review), 25(2), 437–454. https://doi.org/10.21121/eab.20250212
9. Cohen, A. H., Fresneda, J. E., & Anderson, R. E. (2023). How inaccessible retail websites affect blind and low vision consumers: their perceptions and responses. Journal of Service Theory and Practice, 33(3), 329–351. https://doi.org/10.1108/JSTP-08-2021-0167
10. Dodds, S., & Palakshappa, N. (2022). Service inclusion: the role of disability identity in retail. Journal of Services Marketing, 36(2), 143–153. https://doi.org/10.1108/JSM-06-2021-0217

11. Edwards, K., Rosenbaum, M. S., Brosdahl, D., & Hughes, P. (2018). Designing retail spaces for inclusion. Journal of Retailing and Consumer Services, 44, 182–190. https://doi.org/10.1016/j.jretconser.2018.06.013
12. Ekinci, Y., & Dawes, P. L. (2009). Consumer perceptions of frontline service employee personality traits, interaction quality, and consumer satisfaction. The Service Industries Journal, 29(4), 503–521. https://doi.org/10.1080/02642060802283113
13. Eskytė, I. (2019). When Accessibility of Public Space Excludes. Shopping experience of people with vision impairments. The Journal of Public Space, (Vol. 4 n. 4), 37–60. https://doi.org/10.32891/jps.v4i4.1233
14. Etgar, M., & Fuchs, G. (2009). Why and how service quality perceptions impact consumer responses. Managing Service Quality: An International Journal, 19(4), 474–485. https://doi.org/10.1108/09604520910971566
15. Fisk, R. P., Dean, A. M., Alkire (née Nasr), L., Joubert, A., Previte, J., Robertson, N., & Rosenbaum, M. S. (2018). Design for service inclusion: creating inclusive service systems by 2050. Journal of Service Management, 29(5), 834–858. https://doi.org/10.1108/JOSM-05-2018-0121
16. Hartline, M. D., & Jones, K. C. (1996). Employee performance cues in a hotel service environment: Influence on perceived service quality, value, and word-of-mouth intentions. Journal of Business Research, 35(3), 207–215. https://doi.org/10.1016/0148-2963(95)00126-3
17. Kaufman–Scarborough, C. (1999). Reasonable access for mobility-disabled persons is more than widening the door. Journal of Retailing, 75(4), 479–508. https://doi.org/10.1016/S0022-4359(99)00020-2
18. Kim, J., & Kim, J. (2012). Human factors in retail environments: a review. International Journal of Retail & Distribution Management, 40(11), 818–841. https://doi.org/10.1108/09590551211267593
19. Lee, H., Lee, Y., & Yoo, D. (2000). The determinants of perceived service quality and its relationship with satisfaction. Journal of Services Marketing, 14(3), 217–231. https://doi.org/10.1108/08876040010327220
20. Li, F., Lu, H., Hou, M., Cui, K., & Darbandi, M. (2021). Customer satisfaction with bank services: The role of cloud services, security, e-learning and service quality. Technology in Society, 64, 101487. https://doi.org/10.1016/j.techsoc.2020.101487
21. Math, S., Gowda, G., Basavaraju, V., Manjunatha, N., Kumar, C., Philip, S., & Gowda, M. (2019). The rights of persons with disability act, 2016: Challenges and opportunities. Indian Journal of Psychiatry, 61(10), 809. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_105_19
22. Oluigbo, C. U., Okonta, E. D., Osamor, S. N., & Ndubuisi, C. B. (2026). User Accessibility in Shopping Malls: Towards Compliance and Inclusive Design. ABC2: Journal of Architecture, Building, Construction, and Cities, 2026(03), 35–59. https://doi.org/10.66408/abc2.2026.36
23. Parasuraman, A., Valarie, V. A., & Berry, L. L. (1988). SERVQUAL: A multiple-item scale for measuring consumer perceptions of service quality. Journal of Retailing, 64(1), 12–40.
24. Sureshchandar, G. S., Rajendran, C., & Anantharaman, R. N. (2002). The relationship between management's perception of total quality service and customer perceptions of service quality. Total Quality Management, 13(1), 69–88. https://doi.org/10.1080/09544120120098573
25. Tuli, N., Srivastava, R., & Kumar, H. (2023). Navigating services for consumers with disabilities: a comprehensive review and conceptual framework. Journal of Services Marketing, 37(9), 1132–1150. https://doi.org/10.1108/JSM-06-2023-0204
26. Zhong, Y., & Moon, H. C. (2020). What Drives Customer Satisfaction, Loyalty, and Happiness in Fast-Food Restaurants in China? Perceived Price, Service Quality, Food Quality, Physical Environment Quality, and the Moderating Role of Gender. Foods, 9(4), 460. https://doi.org/10.3390/foods9040460