



**VIEWPOINT: A PRIMER FOR INCLUSIVE SERVICE
MARKETING THEORY**

Journal:	<i>Journal of Services Marketing</i>
Manuscript ID	JSM-04-2020-0128.R1
Manuscript Type:	Viewpoint
Keywords:	Transformative, conceptual, Customer Service

SCHOLARONE™
Manuscripts

VIEWPOINT: A PRIMER FOR INCLUSIVE SERVICE MARKETING THEORY

Abstract

Purpose

This viewpoint sheds light on an as yet underrepresented consumer group. Considering impaired consumers in our theories would not only change these theories' meaning, but also add variance. Our theories would therefore develop from a specific case theory to a broadly acceptable and applicable theory.

Design/methodology/approach

As a viewpoint paper, this work relies on previously published literature and highlights exemplary shortcomings in the servicescape and customer experience theory.

Findings

The paper specifies shortcomings in the current theory development and application. While service marketing scholars consistently consider the normal and representative consumer, changing the customer groups will lead to a broader understanding of consumer behavior.

Originality/value

The paper not only highlights impaired consumers' different needs and expectations, but also discusses the difference between impairment and disability. Given this distinction, the paper calls for further research on such consumers.

Keywords: Inclusion, theory, services, impairments, disability

INTRODUCTION

“Over the last few years there has been a movement that encourages businesses to have bathrooms that are gender neutral. The idea caught on really quickly, was a huge public debate, got tons of media attention, and a lot of places have changed their bathrooms because of it. And yet people with disabilities have been asking for accessible bathrooms for DECADES with little or no results. And to be perfectly honest, a gender-neutral bathroom isn't a necessity as much as it is a 'luxury'. Although it may be uncomfortable to use a gender specific bathroom, it's still physically possible. A lack of handicap accessible bathrooms is depriving a large portion of the population of a basic human necessity. Those with disabilities physically CANNOT use many public bathrooms, whether they want to or not.

When I go somewhere and there's not an accessible bathroom, it's not upsetting because I expect people to cater to me, it's upsetting because it prevents me (and others with disabilities) from being independent and doing the things I want to do. In fact, I've even been denied a job I was qualified for because the company didn't have an accessible bathroom.

I don't want a bigger stall because I want more space, I NEED a bigger stall because I NEED more space. I literally can't fit my chair through the doorway of a regular stall, and I don't have enough room to shut the door behind me even if I manage to get in. Now I know nobody likes public bathrooms, but think about how many times you use them as you go about your day, whether you're at work, running errands, going out with friends, etc. Now what if each time you did an activity outside your home you had to think about what you would do if there wasn't a bathroom? Or what your game plan would be if you were suddenly needing a bathroom ASAP (we've all been there). Or if you have to limit your time somewhere because there isn't a bathroom. Would it limit how much you went out? Would it dictate how long you stayed? This is the thought process many people with disabilities have to think through when they leave their home. And perhaps a reason why many choose not to.” (Marx, 2020, Instagram)

From a service research perspective, the above seems like a setback. For several years, researchers have called for more studies on service inclusion (e.g., Fisk et al., 2018, Anderson et al., 2013), since they essentially agree that all customers, regardless of their physical condition, are of equal value. During the last decades, marketing research too saw changes and developments regarding its nature (Bowen, 2016), scopes (Tapp, 2004), journals (Cluley et al., 2019), and methods (Hair et al., 2018). These studies led to diverse and specialized marketing perspectives and a number of marketing theories (e.g., Cornelissen, 2002). Scholars also generated substantive theories, but refrained from altering or adapting marketing's objective – the customer. Consequently, marketing research builds on causal and consequential effects between generalized, medial, but well-situated, buyers and sellers,

1
2
3 which are universally applicable. Each customer therefore deserves to be assigned the same
4
5 amount of inherent value in a service exchange.
6

7
8 Recent marketing literature has begun to recognize underrepresented customer groups
9
10 (Anderson et al., 2013). Many researchers are therefore beginning to understand that the
11
12 service marketing discipline does not include such groups (e.g., Ostrom et al., 2015). In
13
14 addition, our theories broadly fail to grasp the marketplace experiences of non-traditional
15
16 buyers, such as physically, cognitively, intellectually, or socially disabled consumers; those
17
18 who are financially vulnerable, older or elderly, or sexual minorities; as well as all other types
19
20 of marginal or socially stigmatized consumers. Service marketing researchers have generated
21
22 substantive theories based on a foundation that represents causal consequential effects
23
24 between generalized buyers and sellers, which are assumed to be universally applicable. We
25
26 suggest that marketing researchers have failed to change substantive theories into more
27
28 general theories of marketing, because many overlook the importance of adding sample
29
30 variance to extant theories representing the full gamut of consumers' needs.
31
32
33

34
35 This viewpoint focuses the spotlight on overlooked customers. We emphasize
36
37 different forms of impairment and discuss the inclusion of people with so-called impairments
38
39 in our service marketing theory. Subsequently, we highlight these customers, who have been
40
41 overlooked so long, to add a sense of inclusivity to the service marketing discipline. We do so
42
43 not by destroying our foundation, but rather by expanding it. This viewpoint also
44
45 demonstrates that marketing still has a narrow perspective of consumers and highlights the
46
47 need for more inclusive theoretical thinking, both of which require increased research into
48
49 these long-neglected areas.
50
51
52

53 54 55 **INCLUDING THE EXCLUDED?**

56
57 Transformative service research (TSR) has recently been described as focusing “on
58
59 improving consumer and societal welfare through service” (Rosenbaum et al., 2011) with the
60

1
2
3 goal to enhance well-being for everyone (Anderson et al., 2013, Gustafsson et al., 2016). TSR
4 tries to eliminate service exclusion and its harmful impact on individuals' and societies' well-
5 being. Previous literature identified several excluded customers and consumers (see e.g., Fisk
6 et al., 2018 for an overview) and suggested a research agenda for service inclusion. However,
7 our perspective differs, as we focus on the need to include the underrepresented consumer in
8 our *theories*, rather than merely discussing the *applied exclusion*. We broaden TSR's
9 perspective by calling for disadvantaged (Andreasen, 1975), vulnerable (Baker et al., 2005,
10 Peñaloza, 1995, Rosenbaum et al., 2017), and captive consumers (Rayburn, 2015) to be
11 included in our theories.
12
13
14
15
16
17
18
19
20
21
22

23
24 Discussions on exclusion have a long tradition and focus on disabilities and disorders
25 rather than impairments. Identifying a person with a disability may appear straightforward,
26 but requires more than just the impression that such a person makes. The United Nations
27 Convention on the Rights of Persons with Disabilities defines people with disabilities as
28 including "those who have long-term physical, mental, intellectual or sensory impairments
29 which in interaction with various barriers may hinder their full and effective participation in
30 society on an equal basis with others" (United Nations, 2006, article 1). Rather than
31 emphasizing individuals' disabilities, the World Health Organization (WHO) focuses on their
32 level of health (World Health Organization, 2001). Because an individual's functioning and
33 disability occur in a context, the International Classification of Functioning, Disability and
34 Health (ICF) follows a social model of disability that regards disability as a (partly) socially
35 created problem, therefore also including environmental factors, such as the servicescape's
36 design.
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52

53
54 These environmental factors are of immense concern for people with impairments,
55 because they largely form their experiences. People with impairments face several barriers to
56 public and private participation (e.g., Smith, 1987, Navarro et al., 2015, McGuire, 1984). Not
57 only do the barriers differ due to the environment, but the individual's impairment also
58
59
60

1
2
3 hinders participation. For example, Miller and Kirk (2002) explored the tourism industry's
4 adoption of access for impaired people, finding that most professionals do not understand
5 consumers with impairments' specific needs, which highlights that the servicescape definition
6 and design do not apply (Darcy and Pegg, 2011). Burnett and Baker (2001) define a consumer
7 with a physical disability as "an individual with a physical impairment that limits activities."
8 Building on the WHO's understanding of disability, this definition highlights the activities
9 that such an individual can carry out and includes any interaction between this individual and
10 the environment (Poria et al., 2010). A disability is therefore simply the "result of a mismatch
11 between the user's needs and abilities and the environment" (Nicolle and Peters, 1999).
12
13
14
15
16
17
18
19
20
21
22
23

24 This definition highlights the idea that impairment (a functional limitation) and
25 disability (socially imposed restriction) are not the same (Oliver and Barnes, 2012). It is
26 therefore possible to have an impairment—that is, a problem "in body function or structure
27 such as a significant deviation or loss" (World Health Organization, 2001)—but not be
28 disabled, because the environment has been designed to take this impairment into account.
29 For example, one might have a mobility impairment and be unable to walk. A wheelchair then
30 allows one to move around freely, unless there are barriers like steps or stairs in the way
31 (Boxall et al., 2018). These are the barriers for disabled people, not their impairment (Oliver
32 and Barnes, 2012). Hughes and Paterson (1997) explain this important academic paradigm.
33 They emphasize that "*people with impairments were disabled by a social system which*
34 *erected barriers to their participation.*" According to this viewpoint, impairment is an
35 individual's functional limitation that mental or sensory impairment causes. Disability is the
36 loss or limitation of opportunities to participate, on an equal level with others, in a
37 community's normal life, due to physical and social barriers (Hughes, 1999, Shaw and Coles,
38 2004).
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57

58 The social model of disability (Oliver, 1983, Oliver, 1990) emphasizes that although
59 individuals' impairments may be permanent, socially imposed restrictions can be changed
60

1
2
3 (Oliver and Barnes, 2012). The social construction of disability is a state of marginalization,
4
5 emphasizing social issues as a potential barrier rather than physical aspects (Shaw and Coles,
6
7 2004).
8
9

10 It is of the utmost importance to distinguish between an impairment and a disability.
11
12 We highlight that current designs and their guiding frameworks and theories are not inclusive
13
14 by nature. By distinguishing between impairment and disability, we define disability as a
15
16 culturally and historic phenomenon, not a universal essence (Shakespeare, 1994). It is thus not
17
18 about including the excluded; we emphasize the need to discuss the assumption of there being
19
20 generalized or standardized service consumers.
21
22
23
24

25 **THE NEED TO ADAPT THEORIES**

26
27 The broad field of marketing has also recognized the importance of providing people
28
29 with disabilities with the rights provided to other consumers, including the right to access the
30
31 marketplace and other services (e.g., Baker and Kaufman-Scarborough, 2001, Baker et al.,
32
33 2005). From both a legal and a social perspective, it is incumbent upon marketing entities to
34
35 ensure that people with disabilities are not barred, whether intentionally or unintentionally,
36
37 from access to goods and services that the marketplace offers. Service marketing literature has
38
39 recently begun to recognize underrepresented customer groups (Anderson et al., 2013).
40
41 Consequently, many researchers are now beginning to understand that the service marketing
42
43 discipline fails to include these groups, which include consumers with a disability (e.g.,
44
45 Ostrom et al., 2015), whom it has unintentionally harmed. The underlying emphasis is that
46
47 consumer with a disability experience services in a different way (Fisk et al., 2018).
48
49
50
51

52 Service research generally emphasizes the service environment and interactions, as
53
54 well as how customers experience these touchpoints. Some seminal frameworks, such as the
55
56 servicescape (Bitner, 1992) and customer experience (Holbrook and Hirschman, 1982),
57
58 highlight this general emphasis. In the remainder of this viewpoint, we review these two
59
60

1
2
3 constructs, address urgently needed research topics, and encourage researchers to engage in
4
5 empirical research by considering foundational theories from the perspectives of those with
6
7 vulnerabilities. The exemplary nature of these literatures in terms of emphasizing the crucial
8
9 differentiation between impairment and disabilities drove the choice of servicescape and
10
11 customer experience.
12

13 14 15 **Servicescape**

16
17 The foundation of Bitner's (1992) servicescape theory represents the causal
18
19 consequential effects between generalized buyers and sellers, which are assumed to be
20
21 universally applicable. However, this does not always apply. The literature discusses service
22
23 encounters' context widely (e.g., Harris and Ezeh, 2008), with the most used terminology
24
25 referring to the servicescape's purpose being the physical environment's design and the
26
27 service staff's qualities, which give rise to a desirable service experience and customer loyalty
28
29 (Hoffman and Turley, 2002, Bitner, 1992).
30
31
32

33
34 However, a recent literature review (Mari and Poggesi, 2013) only found two articles
35
36 that question the assumption of the 'perfect and able' consumer. In their qualitative critical
37
38 incident study, Baker et al. (2007) identified the retail environment as enabling or disabling
39
40 customers. Rosenbaum (2009) focused on one form of impairment and discussed the role of
41
42 third places in servicescapes. Following Proshansky's (1978) perspective, Rosenbaum and
43
44 Massiah (2011) extended Bitner's framework, but again considered the average customer.
45
46 Servicescape literature broadly discusses several dimensions' influence, but neglects each of
47
48 these dimensions' influence on the individual consumer.
49
50

51
52 The physical dimension of servicescapes clearly dominates consumers' behavior,
53
54 because the physical surrounding often disables impaired consumer. Consequently, these
55
56 consumers will not participate in a service encounter if they acknowledge a deficit in the
57
58
59
60

1
2
3 servicescape, nor will the service provision create any value for them, because both of them
4
5 will lead to a less-than-desirable customer experience.
6
7

8 **Customer experience**

9

10 Services are mostly provided with good intentions (Finsterwalder and Kuppelwieser,
11 2020) and service companies try to keep up with assumed expectations (e.g., Darcy and Pegg,
12 2011). However, relinquishing the assumed 'normal' customer assumption can easily lead to a
13 disappointing customer experience, straining the customer even more, which leads to value
14 co-destruction (Finsterwalder and Kuppelwieser, 2020, Fisk, 2009). People with impairments
15 often experience the same customer journey and touchpoint design significantly different
16 from those without impairments (a difference that disables people with impairments). The
17 most compelling customer experience strategies are based on products whose design is
18 informed by well-researched psychology (e.g., Klaus, 2014). The same applies to physical and
19 online store layouts. Marketers are therefore experts on human perception and persuasion.
20 Studies have also repeatedly shown that presentation hugely influences most people's
21 experiences. The way we are offered choices matters a great deal in respect of the one we
22 ultimately choose.
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39

40 The flaw in these customer experience models, such as Puccinelli et al.'s (2009)
41 holistic retail experience model, is that not all minds work similarly. For example, how
42 relevant is a customer experience designed to stimulate sensorially if a person with autism
43 wants to avoid such stimuli at all costs? While an average customer may perceive 'service
44 with a smile' as a relevant touchpoint management tactic, it will confuse a person with
45 Asperger syndrome. If we ask people with impairments and experienced disabilities what they
46 want from science, their answer is clear: they want consistent and positive customer
47 experiences; ones in which they do not feel disabled.
48
49
50
51
52
53
54
55
56
57
58
59
60

1
2
3 To deliver such experiences, we must understand what it means for impaired people to
4 live 'in an alien world' (Owen, 2012). Regrettably, most of our theories do not include this
5 variance in respect of needs and perceptions. Consequently, rather than modeling theory for
6 inclusion, we model for exclusion, which often drives and initiates what we consider social
7 disorder, adding another level of complexity.
8
9

10
11
12 In our paper, we adopt the social model view that distinguishes between people with a
13 disorder as an oppressed group and non-impaired marketers and marketing scholars as the
14 cause of and contributors to this oppression (Shakespeare, 2006). Take, for example,
15 consumers with autism: autism, or autism spectrum disorder (ASD), refers to a broad range of
16 conditions characterized by challenges related to social skills, repetitive behaviors, speech,
17 and nonverbal communication (Geschwind and Levitt, 2007). Verbal and non-verbal
18 communications are key dimensions of the delivery of the customer experience. People with
19 autism may not understand or appropriately use gestures, eye contact, facial expressions,
20 spoken language, tone of voice, and often take expressions literally. Consequently, service
21 script rules (Cook et al., 2002) do not apply to people with autism. Frameworks of customer
22 experience retail design (e.g., Puccinelli et al., 2009) that highlight the importance of sensory
23 attraction (Jain and Bagdare, 2011), would have autistic customers, who try to avoid sensory
24 overload, running for the exits (Bogdashina, 2003). Such store customer experience designs
25 are aimed at higher and re-patronage (Russo-Spena and Mele, 2012), but will result in the
26 opposite behavior in a person with autism.
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48

49 Consumers with autism are a segment that service marketers should not neglect for the
50 following two main reasons: One, consumers with autism spectrum conditions (ASC) make
51 more consistent decisions. Consequently, if we were to design their experience according to
52 their needs and wishes, they will be far more loyal than other segments (Farmer et al., 2017).
53 Two, Farmer, Swineford, Swedo, and Thurm's (2018) research indicates that consumers with
54 ASC are less susceptible to decoy options' effects when evaluating and choosing products
55
56
57
58
59
60

1
2
3 than those without ASC. Given that service marketers are struggling to determine what drives
4 consumer behavior, targeting the ASC segment should deliver a higher Return-of-Investment
5 than comparable segments and efforts (Lenskold, 2003).
6
7
8
9

10 The goal of designing favorable customer experiences is often to maintain existing
11 customers and attract new ones (Rust and Zahorik, 1993). The latter is often associated with
12 communicating the brand values via, for example, advertising (Lemon et al., 2001). However,
13 traditional advertising's rules do apply to consumers with ACS, because they can filter out
14 extraneous contextual information better than the rest of us in order to make rational
15 economic decisions. The package's color and the products surrounding it are therefore
16 irrelevant to consumers with ACS when they decide whether or not to put it in their basket.
17 Instead, the autistic shopper focuses on what really matters: the ingredients, price, and the
18 need to own such a product (Cytowic, 2017). Retailers are currently trying to address some of
19 these challenges by, for example, introducing 'quiet hours' in their stores for customers who
20 struggle with noise and music (BBC, 2018). Nevertheless, these are just little steps, and,
21 regrettably, often not well aligned with consumers with ASC's need (Forbes, 2012). One
22 might, for example, argue that stores should simply offer noise-isolating headphones at the
23 entrance, allowing their customers who have problems with noise and music to shop
24 whenever they want. However, online experiences and platforms are an excellent start
25 regarding designing more inclusive services. Or so, one would think. But isn't the attempt to
26 move impaired customers from stores to online shopping against inclusion's very nature?
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49

50 DISCUSSION

51
52 Many practitioners and researchers acknowledge the need for inclusive thinking. Our
53 analyses highlighted several challenges and solutions within the framework of the disability
54 social model. It is not the impairment that disables people, it is society (Oliver and Barnes,
55 2012, Shakespeare, 2006). In service marketing and service marketing theory, though, we
56
57
58
59
60

1
2
3 have largely ignored the tremendous societal need that this finding reveals. Although
4
5 promising research is ongoing, we still focus on the well-situated, educated, and healthy
6
7 unimpaired consumer. The following sections highlight the finding's contribution to the
8
9 literature, practitioners, and society.
10
11

12 **Contribution to the Literature**

13
14
15 It is often said that practice finds a solution, but researchers explain it away. On
16
17 reconsidering the impairment construct, it becomes obvious that service marketing
18
19 management and theory exclude the relevant individuals rather than including them. Service
20
21 marketing theories ignore the social model that distinguishes between people with a disorder
22
23 or an impairment as an oppressed group and non-impaired marketers and scholars as the cause
24
25 of and contributors to this oppression (Shakespeare, 2006). Recent research has started
26
27 emphasizing the idea of service marketing for a better world (Anderson et al., 2013,
28
29 Gustafsson et al., 2016) and expands to include suppressed groups (Rosenbaum et al., 2017).
30
31 However, we need to take the next step when developing our theories.
32
33
34

35
36 When our fundamental theoretical models were first developed and discussed, the
37
38 average consumer seemed an appropriate subject – and still is, in some cases. However, many
39
40 of our models are more than two decades old, and need reconsideration or improvement. By
41
42 highlighting two theories in our field, our paper points to the downsides of such old-fashioned
43
44 thinking, but also suggests ways to overcome this. Specifically, we propose a new way of
45
46 thinking, which allows for considering a broader consumer base, including those with
47
48 impairments, in our thinking in order to reduce disability barriers.
49
50
51

52 *Think non-traditionally in respect of theory and modeling*

53
54 Service marketing researchers strive to identify new paradigms and prove new
55
56 hypotheses. In doing so, most researchers consider the average customer and ignore the non-
57
58 average customers. Our paper suggests thinking about service marketing models and related
59
60

1
2
3 assumptions on a much broader basis and including as many customer groups as possible. For
4
5 example, when developing a new service marketing model, think about customers with
6
7 neurological or developmental disorders. An autistic might react totally differently than your
8
9 model predicts. Find the causes of this difference, explain them, and adapt your model. In this
10
11 way, models become generalizable in the fullest sense.
12
13

14 15 *Think open-mindedly in respect of methods and sampling*

16
17 Recent research questions the need for simple models, assumptions, and routines
18
19 (Luoto et al., 2017). Indeed, traditional thinking implies that researchers are looking for a
20
21 specific distribution in their sample to test their assumptions. In doing so, methodologists
22
23 explain outliers away (e.g., Watkins, 2018, Miller and Bamberger, 2016, Dougherty and
24
25 Thomas, 2012) and ignore their individual difference. Against the background of our paper,
26
27 such an approach could ignore impaired people, exclude them from participating in research
28
29 studies, and hinder the researcher from finding new and unexpected results. In other words,
30
31 13% of the American non-institutionalized population (U.S. Census Bureau, 2018) will
32
33 become disabled and neglected, which will affect the collected sample's representativeness.
34
35 Research models therefore need to include impaired people and sampling needs to take this
36
37 recommendation into consideration.
38
39
40
41
42

43 **Contribution to Managers**

44
45 The implications of the finding for managers are two-fold. One, designing services,
46
47 products, and offerings for inclusion is unavoidable, since legislation is forcing companies to
48
49 design their online (e.g., W3C, 2020) and offline offerings in compliance with inclusion
50
51 (Means and Anderson, 2013). Customer experience (CX) managers who plan the customer
52
53 journey by putting themselves in the shoes of a customer with a mental or physical condition
54
55 may be well-intentioned, but is likely to miss the point (Angrave, 2014). Angrave (2014) goes
56
57 on to explain that “differentiated customer experiences require differentiated thinking,”
58
59
60

1
2
3 maintaining that enhancing CX for everyone must include input from those who experience
4 things differently (Grönroos, 2012). A 2015 international survey showed that a number of
5 service providers, including Amazon, Apple, and Disney, are planning outstanding customer
6 experiences for all customers. More importantly, though, designing for inclusion is good
7 business, which is amplified by, for example, consumers with impairments being the number
8 one global emerging market (Donovan, 2017). Consequently, as many business examples
9 highlight (Nawaz et al., 2019), inclusion focuses on creating favorable customer experiences
10 for all.
11
12
13
14
15
16
17
18
19
20
21

22 **Contribution to Society**

23
24 Without question, the service marketing field can contribute to creating a better world
25 by turning its attention to marketplace accessibility for all. Since improving inclusion affects
26 the larger community, as well as people with disabilities, positively, this call to investigate
27 social inclusion is both timely and relevant. Developing a paradigm that recognizes,
28 investigates, and accommodates diverse audiences is central to achieving inclusivity in
29 service marketing research. Following the lead of those entities that have adopted, for
30 example, universal design principles (Steinfeld and Maisel, 2012), marketers can shift from a
31 generalized consumer focus to a more human-centered perspective. This change should lead
32 to tangible societal results in terms of consumer empowerment, equality in the marketplace,
33 improved customer experiences, and heightened customer satisfaction. As a byproduct,
34 marketing organizations will realize gains in firm equity, increased legal compliance, and
35 higher profit margins.
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50

51 Service marketers can begin by recognizing persons with physical, mental, or social
52 impairments as market segments comprised of capable individuals who are active members of
53 society and lifelong consumers. Finding ways to reduce or eliminate the barriers that trigger
54 impairments to become disabilities in the marketplace holds the promise of enabling such
55
56
57
58
59
60

1
2
3 consumers to participate in community life on an equal level with others. Collaborative efforts
4
5 undertaken with businesses, governments, non-profits, and other stakeholders will be essential
6
7 to realize win-win situations that will benefit people with disabilities and other marginalized
8
9 groups, businesses, organizations, and society as a whole.
10
11

12 13 **ADD VARIANCE TO OUR THEORIES!** 14

15 This paper opens various avenues for further research. First and foremost, scholars
16
17 need to reconsider fundamental service marketing and service theory models. In keeping with
18
19 the idea of inclusion, models such as the customer experience and the servicescape need
20
21 rethinking. A fruitful way of doing so could be to identify average-consumer-driven theories
22
23 and adapt them to consider all kinds of consumers. Second, the service marketing discipline
24
25 needs far more awareness of the inclusion challenges. Service marketing aims to provide
26
27 every customer with satisfactory experiences. Research should therefore focus on specific
28
29 customer groups and identify the determinants of their satisfactory experience. For example,
30
31 examining the different servicescape dimensions' altering weights if we were to alter the
32
33 customer groups seems a worthwhile effort. We assume that the field's previous research
34
35 results will change dramatically when we replicate studies by, for example, including
36
37 physically impaired people.
38
39
40
41
42

43 Scholars could also develop specific models for impaired customers. For example, the
44
45 servicescape should look very differently if we include a physically impaired customer.
46
47 Including another customer with a different impairment in the model might change the
48
49 servicescape again. It could be interesting to try and identify the underlying fundamental
50
51 requirements for an all-inclusive servicescape design.
52
53

54 From a methodological perspective, service marketing models could be tested with
55
56 non-average customers. That is, a context sensitive, but outlier sample of impaired customers
57
58 could be adopted to test the proposed model. For example, when focusing on the customer–
59
60

1
2
3 employee relationship, a sample of Asperger-impaired customers could test the model and its
4
5 assumptions. We encourage researchers to also embrace more exploratory methods in order to
6
7 gain insights from the segments we mentioned, such as ethnography, with regard to the
8
9 servicescape challenges that we highlighted (e.g., von Koskull, 2020), or from action research
10
11 in order to include the customer when examining the designed customer experience's
12
13 proposed benefits (e.g., Elg et al., 2020).
14
15

16
17 Future research needs to consider impaired customers in theory and application. Table
18
19 1 lists illustrative questions that researchers could answer and expand upon.
20
21

22
23
24 ===== Table 1 about here =====
25
26

27
28 Finally, reviewers and editors should look for such "unusual" papers and datasets. As
29
30 service marketing researchers, we need to add variance to the theory and avoid being trapped
31
32 in the same old way of thinking.
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

REFERENCES

- 1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
- ANDERSON, L., OSTROM, A. L., CORUS, C., FISK, R. P., GALLAN, A. S., GIRALDO, M., MENDE, M., MULDER, M., RAYBURN, S. W., ROSENBAUM, M. S., SHIRAHADA, K. & WILLIAMS, J. D. 2013. Transformative service research: An agenda for the future. *Journal of Business Research*, 66, 1203-1210.
- ANDREASEN, A. R. 1975. *Disadvantaged Consumer*, New York, NY, The Free Press.
- ANGRAVE, J. 2014. *Differentiated customer experiences require differentiated thinking* [Online]. Available: <https://thehive.hivemindnetwork.com/2014/07/22/differentiated-customer-experiences-require-differentiated-thinking-2/> [Accessed 09/04/2020].
- BAKER, S. M., GENTRY, J. W. & RITTENBURG, T. L. 2005. Building Understanding of the Domain of Consumer Vulnerability. *Journal of Macromarketing*, 25, 128-139.
- BAKER, S. M., HOLLAND, J. & KAUFMAN-SCARBOROUGH, C. 2007. How consumers with disabilities perceive “welcome” in retail servicescapes: a critical incident study. *Journal of Services Marketing*, 21, 160-173.
- BAKER, S. M. & KAUFMAN-SCARBOROUGH, C. 2001. Marketing and Public Accommodation: A Retrospective on Title III of the Americans with Disabilities Act. *Journal of Public Policy & Marketing*, 20, 297-304.
- BBC. 2018. *Morrisons 'quiet hour' for autistic shopping introduced* [Online]. Available: <https://www.bbc.com/news/uk-44884183> [Accessed 09/04/2020].
- BITNER, M. J. 1992. Servicescapes: The Impact of Physical Surroundings on Customers and Employees. *Journal of Marketing*, 56, 57-71.
- BOGDASHINA, O. 2003. *Sensory perceptual issues in autism and Asperger syndrome: Different sensory experiences--different perceptual worlds*, London, England, Jessica Kingsley Publishers.

- 1
2
3 BOWEN, D. E. 2016. The changing role of employees in service theory and practice: An
4
5 interdisciplinary view. *Human Resource Management Review*, 26, 4-13.
6
7
8 BOXALL, K., NYANJOM, J. & SLAVEN, J. 2018. Disability, hospitality and the new
9
10 sharing economy. *International Journal of Contemporary Hospitality Management*,
11
12 30, 539-556.
13
14
15 BURNETT, J. J. & BAKER, H. B. 2001. Assessing the Travel-Related Behaviors of the
16
17 Mobility-Disabled Consumer. *Journal of Travel Research*, 40, 4-11.
18
19
20 CLULEY, R., GREEN, W. & OWEN, R. 2019. The changing role of the marketing
21
22 researcher in the age of digital technology: Practitioner perspectives on the digitization
23
24 of marketing research. *International Journal of Market Research*, 62, 27-42.
25
26
27 COOK, L. S., BOWEN, D. E., CHASE, R. B., DASU, S., STEWART, D. M. & TANSIK, D.
28
29 A. 2002. Human issues in service design. *Journal of Operations Management*, 20,
30
31 159-174.
32
33
34 CORNELISSEN, J. 2002. Academic and Practitioner Theories of Marketing. *Marketing*
35
36 *Theory*, 2, 133-143.
37
38
39 CYTOWIC, R. E. 2017. *Why Advertising Falls Flat in Individuals With Autism* [Online].
40
41 Available: [https://www.psychologytoday.com/gb/blog/the-fallible-mind/201708/why-](https://www.psychologytoday.com/gb/blog/the-fallible-mind/201708/why-advertising-falls-flat-in-individuals-autism)
42
43 [advertising-falls-flat-in-individuals-autism](https://www.psychologytoday.com/gb/blog/the-fallible-mind/201708/why-advertising-falls-flat-in-individuals-autism) [Accessed 09/04/2020].
44
45
46 DARCY, S. & PEGG, S. 2011. Towards Strategic Intent: Perceptions of disability service
47
48 provision amongst hotel accommodation managers. *International Journal of*
49
50 *Hospitality Management*, 30, 468-476.
51
52
53 DONOVAN, R. 2017. *Exploring a \$55-billion untapped market* [Online]. Available:
54
55 [https://www.theglobeandmail.com/report-on-business/careers/leadership-](https://www.theglobeandmail.com/report-on-business/careers/leadership-lab/exploring-a-55-billion-untapped-market/article36383190/)
56
57 [lab/exploring-a-55-billion-untapped-market/article36383190/](https://www.theglobeandmail.com/report-on-business/careers/leadership-lab/exploring-a-55-billion-untapped-market/article36383190/) [Accessed 09/04/2020].
58
59
60 DOUGHERTY, M. R. & THOMAS, R. P. 2012. Robust decision making in a nonlinear
world. *Psychological Review*, 119, 321-344.

- 1
2
3 ELG, M., GREMYR, I., HALLDÓRSSON, Á. & WALLO, A. 2020. Service action research:
4
5 review and guidelines. *Journal of Services Marketing*, 34, 87-99.
6
7
8 FARMER, C., SWINEFORD, L., SWEDO, S. E. & THURM, A. 2018. Classifying and
9
10 characterizing the development of adaptive behavior in a naturalistic longitudinal
11
12 study of young children with autism. *Journal of Neurodevelopmental Disorders*, 10, 1.
13
14 FARMER, G. D., BARON-COHEN, S. & SKYLARK, W. J. 2017. People With Autism
15
16 Spectrum Conditions Make More Consistent Decisions. *Psychological Science*, 28,
17
18 1067-1076.
19
20
21 FINSTERWALDER, J. & KUPPELWIESER, V. G. 2020. Intentionality and transformative
22
23 services: Wellbeing co-creation and spill-over effects. *Journal of Retailing and*
24
25 *Consumer Services*, 52, 101922.
26
27
28 FISK, R. P., DEAN, A., M., ALKIRE, L., JOUBERT, A., PREVITE, J., ROBERTSON, N.
29
30 & ROSENBAUM, M. S. 2018. Design for service inclusion: creating inclusive service
31
32 systems by 2050. *Journal of Service Management*, 29, 834-858.
33
34
35 FISK, R. P. 2009. A Customer Liberation Manifesto. *Service Science*, 1, 135-141.
36
37
38 GESCHWIND, D. H. & LEVITT, P. 2007. Autism spectrum disorders: developmental
39
40 disconnection syndromes. *Current Opinion in Neurobiology*, 17, 103-111.
41
42
43 GRÖNROOS, C. 2012. Conceptualising value co-creation: A journey to the 1970s and back
44
45 to the future. *Journal of Marketing Management*, 28, 1520-1534.
46
47
48 GUSTAFSSON, A., HÖGSTRÖM, C., RADNOR, Z., FRIMAN, M., HEINONEN, K.,
49
50 JAAKKOLA, E. & MELE, C. 2016. Developing service research – paving the way to
51
52 transdisciplinary research. *Journal of Service Management*, 27, 9-20.
53
54
55 HAIR, J. F., BABIN, B. J., ANDERSON, R. E. & BLACK, W. C. 2018. *Multivariate Data*
56
57 *Analysis*, Cengage.
58
59
60 HARRIS, L. C. & EZEH, C. 2008. Servicescape and loyalty intentions: an empirical
investigation. *European Journal of Marketing*, 42, 390-422.

- 1
2
3 HOFFMAN, D. K. & TURLEY, L. W. 2002. Atmospherics, Service Encounters and
4
5 Consumer Decision Making: An Integrative Perspective. *Journal of Marketing Theory*
6
7 *and Practice*, 10, 33-47.
8
9
10 HOLBROOK, M. B. & HIRSCHMAN, E. C. 1982. The Experiential Aspects of
11
12 Consumption: Consumer Fantasies, Feelings, and Fun. *Journal of Consumer*
13
14 *Research*, 9, 132-140.
15
16
17 HUGHES, B. 1999. The Constitution of Impairment: Modernity and the aesthetic of
18
19 oppression. *Disability & Society*, 14, 155-172.
20
21
22 HUGHES, B. & PATERSON, K. 1997. The Social Model of Disability and the Disappearing
23
24 Body: Towards a sociology of impairment. *Disability & Society*, 12, 325-340.
25
26
27 JAIN, R. & BAGDARE, S. 2011. Music and consumption experience: a review. *International*
28
29 *Journal of Retail & Distribution Management*, 39, 289-302.
30
31
32 KLAUS, P. 2014. Towards practical relevance — Delivering superior firm performance
33
34 through digital customer experience strategies. *Journal of Direct, Data and Digital*
35
36 *Marketing Practice*, 15, 306-316.
37
38
39 LEMON, K. N., RUST, R. T. & ZEITHAML, V. A. 2001. What drives customer equity?
40
41 *Marketing management*, 10, 20-25.
42
43
44 LENSKOLD, J. D. 2003. *Marketing ROI the path to campaign, customer, and corporate*
45
46 *profitability*, McGraw-Hill.
47
48
49 LUOTO, S., BRAX, S. A. & KOHTAMÄKI, M. 2017. Critical meta-analysis of servitization
50
51 research: Constructing a model-narrative to reveal paradigmatic assumptions.
52
53 *Industrial Marketing Management*, 60, 89-100.
54
55
56 MARI, M. & POGGESI, S. 2013. Servicescape cues and customer behavior: a systematic
57
58 literature review and research agenda. *The Service Industries Journal*, 33, 171-199.
59
60
61 MARX, D. 2020. *Restroom* [Online]. Instagram. [Accessed 20/01/20].

- 1
2
3 MCGUIRE, F. A. 1984. A factor analytic study of leisure constraints in advanced adulthood.
4
5 *Leisure Sciences*, 6, 313-326.
6
7
8 MEANS, B. & ANDERSON, K. 2013. *Expanding Evidence Approaches for Learning in a*
9
10 *Digital World*, Office of Educational Technology, US Department of Education.
11
12 MILLER, C. C. & BAMBERGER, P. 2016. EXPLORING EMERGENT AND POORLY
13
14 UNDERSTOOD PHENOMENA IN THE STRANGEST OF PLACES: THE
15
16 FOOTPRINT OF DISCOVERY IN REPLICATIONS, META-ANALYSES, AND
17
18 NULL FINDINGS. *Academy of Management Discoveries*, 2, 313-319.
19
20
21 MILLER, G. A. & KIRK, E. 2002. The Disability Discrimination Act: Time for the Stick?
22
23 *Journal of Sustainable Tourism*, 10, 82-88.
24
25
26 NAVARRO, S., GARZÓN, D. & ROIG-TIerno, N. 2015. Co-creation in hotel–disable
27
28 customer interactions. *Journal of Business Research*, 68, 1630-1634.
29
30
31 NAWAZ, A., JAVED, A. & RAJA, U. M. 2019. Impact of workspace design on employee's
32
33 productivity: a case study of public sector universities in Hazara division.
34
35 *International Journal of Sustainable Real Estate and Construction Economics*, 1, 201-
36
37 214.
38
39
40 NICOLLE, C. & PETERS, B. 1999. Elderly and Disabled Travelers: Intelligent Transport
41
42 Systems Designed for the 3rd Millennium. *Transportation Human Factors*, 1, 121.
43
44
45 OLIVER, M. 1983. *Social Work with Disabled People*, London, MacMillan.
46
47
48 OLIVER, M. 1990. *The Politics of Disablement*, London, MacMillan.
49
50
51 OLIVER, M. & BARNES, C. 2012. *The New Politics of Disablement*, Basingstoke,
52
53 PalgraveMacmillan.
54
55
56 OSTROM, A. L., PARASURAMAN, A., BOWEN, D. E., PATRÍCIO, L. & VOSS, C. A.
57
58 2015. Service Research Priorities in a Rapidly Changing Context. *Journal of Service*
59
60 *Research*, 18, 127-159.

- 1
2
3 OWEN, J. 2012. *The Benefits of Disability in the Workplace* [Online]. Forbes. Available:
4
5 [https://www.forbes.com/sites/judyowen/2012/05/12/a-cost-benefit-analysis-of-](https://www.forbes.com/sites/judyowen/2012/05/12/a-cost-benefit-analysis-of-disability-in-the-workplace/#67eef1993501)
6
7 [disability-in-the-workplace/#67eef1993501](https://www.forbes.com/sites/judyowen/2012/05/12/a-cost-benefit-analysis-of-disability-in-the-workplace/#67eef1993501) [Accessed 09/04/2020].
8
9
- 10 PEÑALOZA, L. 1995. Immigrant Consumers: Marketing and Public Policy Considerations in
11
12 the Global Economy. *Journal of Public Policy & Marketing*, 14, 83-94.
13
- 14 PORIA, Y., REICHEL, A. & BRANDT, Y. 2010. The Flight Experiences of People with
15
16 Disabilities: An Exploratory Study. *Journal of Travel Research*, 49, 216-227.
17
18
- 19 PROSHANSKY, H. M. 1978. The City and Self-Identity. *Environment and Behavior*, 10,
20
21 147-169.
22
- 23 PUCCINELLI, N. M., GOODSTEIN, R. C., GREWAL, D., PRICE, R., RAGHUBIR, P. &
24
25 STEWART, D. 2009. Customer Experience Management in Retailing: Understanding
26
27 the Buying Process. *Journal of Retailing*, 85, 15-30.
28
29
- 30 RAYBURN, S. W. 2015. Consumers' captive service experiences: it's YOU and ME. *The*
31
32 *Service Industries Journal*, 35, 806-825.
33
34
- 35 ROSENBAUM, M. S. 2009. Restorative servicescapes: restoring directed attention in third
36
37 places. *Journal of Service Management*, 20, 173-191.
38
39
- 40 ROSENBAUM, M. S., CORUS, C., OSTROM, A. L., ANDERSON, L., FISK, R. P.,
41
42 GALLAN, A. S., GIRALDO, M., MENDE, M., MULDER, M., RAYBURN, S. W.,
43
44 SHIRAHADA, K. & WILLIAMS, J. D. 2011. Conceptualization and Aspirations of
45
46 Transformative Service Research. *Journal of Research for Consumers*, 1-6.
47
48
- 49 ROSENBAUM, M. S. & MASSIAH, C. 2011. An expanded servicescape perspective.
50
51 *Journal of Service Management*, 22, 471-490.
52
53
- 54 ROSENBAUM, M. S., SEGER-GUTTMANN, T. & GIRALDO, M. 2017. Commentary:
55
56 vulnerable consumers in service settings. *Journal of Services Marketing*, 31, 309-312.
57
58
- 59 RUSSO-SPENA, T. & MELE, C. 2012. "Five Co-s" in innovating: a practice-based view.
60
Journal of Service Management, 23, 527-553.

- 1
2
3 RUST, R. T. & ZAHORIK, A. J. 1993. Customer satisfaction, customer retention, and market
4
5 share. *Journal of Retailing*, 69, 193-215.
6
7
8 SHAKESPEARE, T. 1994. Cultural Representation of Disabled People: Dustbins for
9
10 Disavowal? *Disability & Society*, 9, 283-299.
11
12 SHAKESPEARE, T. 2006. The social model of disability. In: DAVIS, L. J. (ed.) *The*
13
14 *Disability Studies Reader*. New York: Psychology Press.
15
16
17 SHAW, G. & COLES, T. 2004. Disability, holiday making and the tourism industry in the
18
19 UK: a preliminary survey. *Tourism Management*, 25, 397-403.
20
21
22 SMITH, R. W. 1987. Leisure of disable tourists: Barriers to participation. *Annals of Tourism*
23
24 *Research*, 14, 376-389.
25
26
27 STEINFELD, E. & MAISEL, J. 2012. *Universal design: Creating Inclusive Environments*,
28
29 John Wiley & Sons.
30
31 TAPP, A. 2004. The changing face of marketing academia: What can we learn from
32
33 commercial market research and practitioners? *European Journal of Marketing*, 38,
34
35 492-499.
36
37
38 UNITED NATIONS. 2006. *Convention on the Rights of Persons with Disabilities* [Online].
39
40 Available: [https://www.un.org/development/desa/disabilities/convention-on-the-](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html)
41
42 [rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html)
43
44 [disabilities-2.html](https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html) [Accessed 16/01/19].
45
46
47 VON KOSKULL, C. 2020. Increasing rigor and relevance in service research through
48
49 ethnography. *Journal of Services Marketing*, 34, 74-77.
50
51
52 W3C. 2020. *What's New in WCAG 2.1* [Online]. Available:
53
54 <https://www.w3.org/WAI/standards-guidelines/wcag/new-in-21/> [Accessed
55
56 09/04/2020].
57
58
59 WATKINS, M. W. 2018. Exploratory Factor Analysis: A Guide to Best Practice. *Journal of*
60
Black Psychology, 44, 219-246.

1
2
3 WORLD HEALTH ORGANIZATION. 2001. *International Classification of Functioning,*

4
5 *Disability and Health (ICF)* [Online]. Available:

6
7 <https://www.who.int/classifications/icf/en/> [Accessed 16/01/19].
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Journal of Services Marketing

TABLE 1. ILLUSTRATIVE QUESTIONS FOR FURTHER RESEARCH

Domain	Research Question
<i>Overarching</i>	<ul style="list-style-type: none"> ▪ Which of our theories consider impaired consumers? ▪ Do we exclude or include consumers in our theories? Which ones are more prone to ex/inclusion? ▪ How do service delivery and service design need to change? ▪ Do we disable consumers by applying our theories? ▪ Can we create a theory of inclusion?
<i>Theory-driven</i>	
Servicescape	<ul style="list-style-type: none"> ▪ How do we define a servicescape that considers impaired consumers? ▪ Are we able to describe a servicescape that considers all or most forms of impairment? ▪ Do we necessarily need to exclude specific clusters of impaired consumers? ▪ Is the latter a conscious or an unconscious decision? ▪ What impact does the building of servicescapes for specific customer groups only have on business? ▪ What is the dominant decision-factor for impaired consumers to participate in a service?
Customer experience	<ul style="list-style-type: none"> ▪ How would other customers react if we were to consider impaired consumers in our business? ▪ What does the customer experience look like for specific impaired customer groups? ▪ Can inclusive customer experiences be designed and delivered, and, if yes (or no), how and why (not)? ▪ Should we consider different research streams and practices, such as universal design, to advance service inclusion design? If yes, which ones, why, and how?
Value creation	<ul style="list-style-type: none"> ▪ How does co-creation and value creation change for different impaired customers? ▪ Is value perception and experience the same for all groups? ▪ Is creating value by practicing inclusion good business?
<i>Methodological</i>	<ul style="list-style-type: none"> ▪ Which models hold when considering altered consumer groups? ▪ How do we collect samples of impaired consumers? How do we consider them in our surveys? ▪ Does sampling strategy need to change? How? ▪ What is the most appropriate way of including impaired consumers in our research?

1
2
3 **Response to the reviewers of the manuscript “INCLUSIVE SERVICE MARKETING**
4 **THEORY: A PRIMER” (JSM-04-2020-0128.R1)**
5
6

7 **Response to the Associate Editor**

8 Thank you for your constructive review of our manuscript, we appreciate your helpful
9 comments and respond to the issues you raised as follows.
10
11

12
13 **AE-C1 (Associate Editor, Comment 1)**
14

15 This is an interesting viewpoint but needs some work before it is ready for publication. In
16 particular can you please note for the reference after the opening quote that this is verbatim
17 from Instagram - it looks like an academic reference at first glance. Please amend the title
18 of the paper to "Viewpoint: A primer for inclusive service marketing theory" so this is
19 clearly identified as a viewpoint article. Please ensure that your point is clearly
20 differentiated from Fisk et al 2018. The reviewers have offered useful comments to guide
21 the revision
22
23
24

25
26
27 **RAE-C1 (Response to Associate Editor, Comment 1)**
28

29 Thank you for your comments, we now added the word viewpoint to the title. We added the
30 Instagram citation at the end of the statement in question. We believe that by addressing
31 both reviewers' comments, we differentiate our viewpoint sufficiently from Fisk et al.
32 (2018).
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Reviewer 1

Thank you for your constructive review of our manuscript, we appreciate your helpful comments and respond to the issues you raised as follows.

R1-C1 (Reviewer 1, Comment 1)

The paper has many interesting parts. However, these parts are not well tied together in the current form. The methodological issues and considerations for researching and designing for service inclusion is very interesting and could provide a point of differentiation from prior research.

RR1-C1 (Response to Reviewer 1, Comment 1)

Thank you for your positive stance on our paper. We are confident that by incorporating your valuable suggestions we have improved the paper significantly.

R1-C2 (Reviewer 1, Comment 2)

1. Originality: Does the paper contain new and significant information adequate to justify publication?: There are a number of interesting parts to this paper but it is unclear what is novel and significant in this piece. The paper is also not adequately differentiated from Fisk et al. 2018.

RR1-C2 (Response to Reviewer 1, Comment 2)

Thank you for this comment, the purpose of our paper is not a differentiation from Fisk et al. (2018), instead we enhance it, deepen Fisk et al.'s discussions, and call for greater awareness of the need for marketing research to also consider inclusion – please see page 4 in our manuscript. We have eliminated any references that could infer differentiation.

R1-C3 (Reviewer 1, Comment 3)

This paper has potential for originality, but this potential is not realised in its current form.

RR1-C3 (Response to Reviewer 1, Comment 3)

Thank you for your kind comment. We hope that by incorporating your and the other

reviewers' suggestion our contribution will be much clearer by allowing us, for example, to further emphasize the rethinking of our theories for all consumers (see our response to your comment R1-C2, and your comment R1-C4).

R1-C4 (Reviewer 1, Comment 4)

2. Relationship to Literature: Does the paper demonstrate an adequate understanding of the relevant literature in the field and cite an appropriate range of literature sources? Is any significant work ignored?: The paper demonstrates a good understanding of the TSR literature, and foundational service literatures. The argument for needing to rethink our theories to account for consumers who have previously been unaccounted for is an important one.

RR1-C4 (Response to Reviewer 1, Comment 4)

Thank you for this kind comment. We agree that the rethinking of our theories is a significant point and one of the main contributions of our paper.

R1-C5 (Reviewer 1, Comment 5)

A minor point: at times, there is reference to "a number of marketing theories" or "many researchers" but only one citation is included. This argument would be strengthened by demonstrating the breadth with more key citations.

RR1-C5 (Response to Reviewer 1, Comment 5)

Excellent point, but rather than indulging in Belk's citation style, and keeping a viewpoint's limited word count in mind, we have, for example, added the relevant phrase to the references you mentioned. We apologize for overlooking this in our original draft.

R1-C6 (Reviewer 1, Comment 6)

3. Methodology: Is the paper's argument built on an appropriate base of theory, concepts, or other ideas? Has the research or equivalent intellectual work on which the paper is based been well designed? Are the methods employed appropriate?: The main weaknesses of this paper are methodological.

1
2
3
4 First, many of the key concepts are not adequately defined. The paper is positioned as
5 shedding “light on an as yet underrepresented consumer group”. The term underrepresented
6 consumer group is introduced without explicit mention of who/what this refers to.
7 Throughout the paper, there are multiple terms introduced, each referring to consumer
8 groups with very different marketplace experiences and issues, including: overlooked
9 consumers; impaired consumers; disabled consumers; physically, cognitively,
10 intellectually, or socially disabled consumers; financially vulnerable; older or elderly;
11 homosexual; marginal or socially stigmatized consumers; disadvantaged; vulnerable;
12 people with a disorder. It is unclear whether all these are grouped as an underrepresented
13 consumer group.
14
15
16
17
18

19 20 **RR1-C6 (Response to Reviewer 1, Comment 6)**

21
22 Thank you for raising this point. We would like to draw your attention to page 3 in our
23 introduction, where we define this underrepresented consumer groups in detail by stating:
24 “In addition, our theories broadly fail to grasp the marketplace experiences of non-
25 traditional buyers, such as physically, cognitively, intellectually, or socially disabled
26 consumers; those who are financially vulnerable, older or elderly, or sexual minorities; as
27 well as all other types of marginal or socially stigmatized consumers” We believe that you
28 will agree that all the groups you mentioned are included in this description.
29
30
31
32
33
34

35 36 **R1-C7 (Reviewer 1, Comment 7)**

37 Additionally, the paper differentiates between consumers with impairments and disabilities,
38 and highlights how it is of utmost importance to make this distinction. However, the
39 distinction is not evident in the discussion of service scape and consumer experience. At
40 times, these terms also appear to be used interchangeably in these discussions.
41
42
43
44

45 46 **RR1-C7 (Response to Reviewer 1, Comment 7)**

47 Thank you for creating awareness of this. However, we checked that the terms impairment
48 and disability are not used interchangeably anywhere in the manuscript. For example, on
49 page 7 we mention that “The physical dimension of servicescapes clearly dominates
50 consumers’ behavior, because the physical surrounding often disables impaired consumer.
51 Consequently, these consumers will not participate in a service encounter if they
52 acknowledge a deficit in the servicescape, nor will the service provision create any value
53 for them, both of which will lead to a less-than-desirable customer experience.”
54
55
56
57
58
59
60

R1-C8 (Reviewer 1, Comment 8)

The sections on servicescapes and customer experience are interesting and contain some novel insights. However, the justification for why these two literatures were chosen for review is not explicitly clear. If certain types of consumers have been unaccounted for in many of our marketing and service literatures, a stronger justification of why these two were singled out is needed.

RR1-C8 (Response to Reviewer 1, Comment 8)

Excellent point, we now included a sentence on page 6/7 stating that: “The exemplary nature of these literatures in terms of emphasizing the crucial differentiation between impairment and disabilities drove the choice of servicescape and customer experience.”

R1-C9 (Reviewer 1, Comment 9)

4. Results: Are results presented clearly and analysed appropriately? Do the conclusions adequately tie together the other elements of the paper?: The paper identifies “we propose a new way of thinking, called “inclusion theory”...” (p. 11). While this paper makes a good argument for the need to adapt theories to account for some consumers who may not have previously been accounted for, the review of the servicescape and customer experience literatures does not provide a new theory.

RR1-C9 (Response to Reviewer 1, Comment 9)

We agree with your point and changed the corresponding sentence on page 11 to: “Specifically, we propose a new way of thinking, which allows for considering a broader consumer base, including those with impairments, in our thinking in order to reduce disability barriers.”

R1-C10 (Reviewer 1, Comment 10)

Additionally, Fiske et al. (2018) proposed a theory of service inclusion, including the four pillars that make up the multifaceted concept. It is unclear what the “inclusion theory” in this paper provides over, or as an addition to, the service inclusion theory introduced previously.

RR1-C10 (Response to Reviewer 1, Comment 10)

As suggested, we deleted the reference in question and emphasized our contribution according to your suggestion. Please also see our reply to your comment 9, RR1-C9.

R1-C11 (Reviewer 1, Comment 11)

5. Implications for research, practice and/or society: Does the paper identify clearly any implications for research, practice and/or society? Does the paper bridge the gap between theory and practice? How can the research be used in practice (economic and commercial impact), in teaching, to influence public policy, in research (contributing to the body of knowledge)? What is the impact upon society (influencing public attitudes, affecting quality of life)? Are these implications consistent with the findings and conclusions of the paper?: The discussion of autistic consumers included in the customer experience section provided some interesting insights.

RR1-C11 (Response to Reviewer 1, Comment 11)

Thank you for your kind comments on this part of our paper. Much appreciated.

R1-C12 (Reviewer 1, Comment 12)

The paper also identifies implications for research, practice and society. However, these are generic rather than in actionable form, and appear to not be drawn from the assertions made in the paper. These sections can be strengthened to demonstrate what researchers, practitioners and society can learn from the insights specific to this paper, rather than service research more broadly.

RR1-C12 (Response to Reviewer 1, Comment 12)

You are absolutely correct, the implications are rather generic by nature, because we want to highlight that researchers, managers, and society's thinking needs to be changed in order to, for example, design servicescapes and customer experiences with inclusion in mind and to avoid impairments becoming disabilities. This is our viewpoint's emphasis, and we believe that specific suggestions regarding how to do this will distract from our focus. In layman's terms, we emphasize that we need to THINK about these consumer groups differently, rather than tell our readers HOW to think about them differently. We hope this makes sense and finds your approval.

R1-C13 (Reviewer 1, Comment 13)

6. Quality of Communication: Does the paper clearly express its case, measured against the technical language of the field and the expected knowledge of the journal's readership? Has attention been paid to the clarity of expression and readability, such as sentence structure, jargon use, acronyms, etc.: Minor points: There is some room for improvement in communication, particularly regarding clarity of expression. For instance, there are times when "they" is used with little indication of who or what "they" refers to. There are also in-text referencing issues (e.g. p. 5 "Hughes and Paterson (1997)").

RR1-C13 (Response to Reviewer 1, Comment 13)

Thank you for creating awareness of this. The points you raised have been addressed, we returned the revised manuscript to our proofreader for fine-tuning.

We would once more like to thank you for your helpful suggestions. We hope that you approve of the revisions based on your recommendations. We truly believe that your comments have helped us improve the quality of the manuscript significantly. Thank you very much!

Response to Reviewer 2

Thank you for your constructive review of our manuscript. We appreciate your helpful comments and respond to the raised issues as follows.

R2-C1 (Reviewer 2, Comment 1)

I wish the authors best of luck in further revising the paper, and I hope that they find my comments helpful.

RR2-C1 (Response to Reviewer 2, Comment 1)

Thank you, this is most kind and most appreciated. We are confident that by addressing your comments our manuscript's quality improved significantly.

R2-C2 (Reviewer 2, Comment 2)

1. Originality: Does the paper contain new and significant information adequate to justify publication?: I thank the authors for sending in this viewpoint manuscript for review. I believe your paper makes some important points that justify publication, and I hope that my comments will be helpful in improving and clarifying the paper. As service research has often focused on an abstract, generalized average consumer, your paper makes an important contribution in raising awareness of how services might affect other consumer groups and their dis/abilities. Having said this, there are some issues with the paper as it stands right now, which I would like to draw your attention to. These relate mostly to the implications and discussion.

RR2-C2 (Response to Reviewer 2, Comment 2)

Thank you, we addressed these in the following sections.

R2-C3 (Reviewer 2, Comment 3)

2. Relationship to Literature: Does the paper demonstrate an adequate understanding of the relevant literature in the field and cite an appropriate range of literature sources? Is any significant work ignored?: On page 2 you discuss the developments taking place in the field of marketing, saying that "these studies led to diverse and specialized marketing perspectives and a number of marketing theories". Could you elaborate a bit on this, and

1
2
3
4 provide some examples of "marketing theories" that you are referring to? Are you thinking
5 about some specific theories here? At the moment this section seems a bit too vague.
6
7

8 9 **RR2-C3 (Response to Reviewer 2, Comment 3)**

10 Thank you for this comment. We can definitely see your point, but believe that by just
11 pointing out a few theories at this stage of the introduction might lead to the question why
12 we selected these and not others. We hope that by focusing on the servicescape and
13 customer experience, which are highly relevant to our viewpoint, later in our paper, we
14 elaborated marketing theories sufficiently.
15
16
17
18
19
20

21 22 **R2-C4 (Reviewer 2, Comment 4)**

23 On page 3 you continue the discussion, talking about marketing research in general, and
24 citing papers by Anderson et al. (2013) and Ostrom et al. (2015), which are both more
25 specifically concerned with Transformative Service Research. I believe that within the
26 much larger field of marketing, underrepresented customer groups have been investigated
27 at least to some extent – this goes especially for consumer research and a number of CCT
28 studies (eg. immigrants as well as ethnic and sexual minorities have been the focus of a
29 number of consumer research studies). However, within service research (which I assume
30 this paper is positioned in) marginalized and underrepresented consumers have indeed
31 been mostly absent and invisible. This possible conflation between "marketing" and
32 "service marketing" runs throughout most of the paper, and I would prefer that the paper
33 would make a clearer distinction between these two.
34
35
36
37
38
39

40 41 **RR2-C4 (Response to Reviewer 2, Comment 4)**

42 Thank you for creating awareness of this important distinction. Keeping your comment in
43 mind, we re-read the manuscript and agree that it was imprecise in this regard. In this
44 version of the manuscript, we ensured that the more general "marketing" vs. the specific
45 "service marketing" appears where we intended it to appear. We hope that this change
46 allows for a clearer distinction between the two research fields.
47
48
49
50
51
52

53 54 **R2-C5 (Reviewer 2, Comment 5)**

55 You make a very important argument on page 5 in pointing out that an impairment (a
56 functional limitation) and a disability (socially imposed restriction) are not one and the
57 same. These kind of understandings and discussions of disabilities are much needed in our
58 field, as both physical and online services play a crucial role in how consumers'
59
60

1
2
3
4 impairments might manifest themselves socially as disabilities. It is worth emphasizing the
5 relevance of this distinction for the field of service research, as well as discussing the
6 entailing responsibilities of service providers.
7
8
9

10 **RR2-C5 (Response to Reviewer 2, Comment 5)**

11
12 We very much appreciate your kind comments and evaluation of our viewpoint's emphasis.
13 Thank you.
14
15
16
17

18 **R2-C6 (Reviewer 2, Comment 6)**

19
20 Could you please specify what "models" within customer experience you are referring to?
21 As CX is a large field of research, with studies varying in approaches, methods and
22 conclusions, it would help the reader if CX is presented a bit more concretely, with
23 citations to recent studies. As it stands now, it is not clear which model specifically you are
24 referring to, when you say that "The flaw in this model is that not all minds work the same
25 way."
26
27
28
29
30

31 **RR2-C6 (Response to Reviewer 2, Comment 6)**

32
33 Excellent point, we have added the following sentence to the section in question on page 8,
34 stating: "The flaw in these customer experience models, such as Puccinelli et al.'s (2009)
35 holistic retail experience model, is that not all minds work similarly."
36
37
38
39
40

41 **R2-C7 (Reviewer 2, Comment 7)**

42
43 3. Methodology: Is the paper's argument built on an appropriate base of theory, concepts,
44 or other ideas? Has the research or equivalent intellectual work on which the paper is
45 based been well designed? Are the methods employed appropriate?: In general the paper
46 would benefit from a stronger connection to existing service research. Please see my
47 comments in "Relationship to literature" and "Implications for research, practice and/or
48 society".
49
50
51
52
53

54 **RR2-C7 (Response to Reviewer 2, Comment 7)**

55
56 Thank you for highlighting these points, which we addressed according to your suggestions
57 in the relevant sections.
58
59
60

R2-C8 (Reviewer 2, Comment 8)

4. Results: Are results presented clearly and analysed appropriately? Do the conclusions adequately tie together the other elements of the paper?: See other comments

5. Implications for research, practice and/or society: Does the paper identify clearly any implications for research, practice and/or society? Does the paper bridge the gap between theory and practice? How can the research be used in practice (economic and commercial impact), in teaching, to influence public policy, in research (contributing to the body of knowledge)? What is the impact upon society (influencing public attitudes, affecting quality of life)? Are these implications consistent with the findings and conclusions of the paper?: The paper addresses specifically the concepts of servicescape and customer experience. However, the section on servicescapes is rather short, especially when compared to the section on customer experience. Is there a need to have these as separate sections? In that case I would recommend elaborating the discussion on servicescapes.

RR2-C8 (Response to Reviewer 2, Comment 8)

Thank you for raising this point. In alignment with most of the recent CX papers (e.g., Lemon and Verhoef, 2016; Becker and Jaakkola, 2020; De Keyser et al., 2020), We believe that servicescape is a part of the overall customer experience. Thus, while important, it is just a part of the overall experience, which the space allocation in our review reflects.

R2-C9 (Reviewer 2, Comment 9)

The discussion on page 9, regarding consumers with ASC is rather essentializing and is grounded in quite a market-based morality. I find it a bit problematic to say that individuals with certain medical conditions or disabilities should be targeted by marketers because they can be more profitable or loyal. Shouldn't the point be about equal opportunities and equal rights to a service? This is more of a moral obligation (as discussed eg. by Fisk et al. 2018), rather than a means to increase revenue. This viewpoint article would be in a good position to take into account and discuss this discrepancy between the paradigms of market logic vs. ethics and equal rights. At the moment I read the paper as making an ethical claim, but basing it on a market logic, which negates the point. In other words: Transformative Service Research should not be about finding undiscovered profitable customers, but about ensuring equal rights for different consumer groups and enabling fair access to services.

RR2-C9 (Response to Reviewer 2, Comment 9)

We can most certainly see your point from a service research viewpoint, and, in an ideal world, a plea that addresses the morality of the case would suffice. However, we cannot ignore customer experience practice, and the managerial viewpoint. Regrettably, and independently of our opinions and preferences, a market-based approach still drives the vast majority of managers and businesses. Given that the Journal of Services Marketing's aim is also to influence and guide practice, we believe it is our obligation to not only plead with managers to fulfill their moral obligations, but also to create awareness that by doing so, their business aims will also be fulfilled. While we agree with your point, we do not believe that inclusion should be an either-or proposition (morals versus market), and are confident that if managers understand the benefits, their ultimate goal of providing more customers with better experiences will be achieved.

Let us underline this dilemma with a real-life example. Being impaired and using a wheelchair does not only mean you need adapted space in rooms or toilets, it also excludes you from service providers without an adapted or sufficiently large toilet. This holds true for restaurants, bars, shops, and even dentists and doctors, who might be accessible, but not "useable." A female wheelchair user might thus be forced to see a specific gynecologist because the others do not provide a suitable toilet (the same applies to males and urologists, of course). Overall, this is, in our opinion, neither a matter of access nor of morals, but a matter of managerial awareness. 21 million persons in the US have a physical impairment and 5 million persons in the EU use a wheelchair – all of them customers whom managers miss simply by not providing a suitable toilet.

We believe that this is the beauty of a viewpoint: it stimulates a fruitful and interesting discussion, and, judging by what you write above, we might have succeeded.

R2-C10 (Reviewer 2, Comment 10)

I would also disagree with your statement on page 11, "In this way, models become generalizable in the fullest sense". If anything, I would read the whole argumentation in this paper as a strong claim that totalizing and generalized models cannot adequately take into account the many differences between types of consumers. When seeking a generalized model that would take into account everything, all the detailed, actionable insights are lost. Please elaborate.

RR2-C10 (Response to Reviewer 2, Comment 10)

We appreciate your disagreement. The viewpoint our paper is trying to convey, is not to argue against moving toward the generalizability of the theory or models; however, based upon your comments, we should have explained this better. We in fact argue that in order to reach generalizability, we need to include more consumer segments, such as those we highlighted in our paper. What we disagree with, is that the current models, which do not vary in terms of the customer base (analytics and insights), and on which the segments are based, could be deemed generalizable.

Right now, we focus on a specific customer segment - the non-impaired, educated, and well-situated customer - which limits the generalizability and application of our models. Thinking out of the box can help address the customer groups for which all service scholars are currently searching. This might require adapted models, which will advance the generalizability, or completely new models for specific customers groups.

While the above might sound contradictory, we suggest that by keeping as many customer segments (for the lack of a better word) as possible in mind when we think about (for example) designing customer experiences in the first place, we will create more inclusive and, therefore, more generalizable and acceptable models.

R2-C11 (Reviewer 2, Comment 11)

In general, the above relates to your claims about thinking “non-traditionally” about methods. At the moment the paper discusses implications for quantitative methods and modelling. However, wouldn’t some qualitative, more exploratory or in-depth methods be more relevant, with regards to the claims that this paper makes? What good is it to measure averages, if our purpose is to understand the needs and special attributes of different, disadvantaged groups? To me it sounds like researchers should go out and listen, observe, and ask questions instead. What about ethnographic methods to uncover potentially restrictive roles of servicescapes in people’s mobility and behaviour (see eg. von Koskull 2020)? Or phenomenological approaches to investigate feelings and thoughts of different consumer groups? Or action research, which includes the research subjects in seeking new solutions that would benefit them (see eg. Elg et al. 2020)? All in all, this section of the paper needs more work.

RR2-C11 (Response to Reviewer 2, Comment 11)

1
2
3
4 Thank you for this excellent suggestion. We have added the following sentences and
5 references to the section in question to address your comment (p. 13).

6 We encourage researchers to also embrace more exploratory methods to gain insights from
7 the segments we mentioned, for example, the ethnography of the servicescape challenges
8 we have highlighted (von Koskull et al., 2020), or action research that includes the
9 customer when examining the designed customer experience's benefits (e.g., Elg et al.,
10 2020).
11
12
13
14
15

16 **R2-C12 (Reviewer 2, Comment 12)**

17
18
19 The implications for managers sections is quite thin at the moment. Could this be better
20 connected to your initial distinction between impairment and disability?
21
22
23

24 **RR2-C12 (Response to Reviewer 2, Comment 12)**

25
26 Thank you for raising this point. Regrettably, though, the word count for viewpoints is
27 strictly limited, and addressing the reviewer comments already added to the word count.
28 Additionally, we use different examples throughout the text, which could indicate how
29 managers should address these challenges.

30 Please also see our reply to Reviewer 1's comment RR1-C12, stating that:

31
32 You are absolutely correct, the implications are rather generic by nature, because we want
33 to highlight that researchers, managers, and society's thinking needs to be changed in order
34 to, for example, design servicescapes and customer experiences with inclusion in mind and
35 to avoid impairments becoming disabilities. This is our viewpoint's emphasis, and we
36 believe that specific suggestions regarding how to do this will distract from our focus. In
37 layman's terms, we emphasize that we need to THINK about these consumer groups
38 differently, rather than tell our readers HOW to think about them differently. We hope this
39 makes sense and finds your approval.

40 We hope this makes sense and finds your approval.
41
42
43
44
45
46
47
48

49 **R2-C13 (Reviewer 2, Comment 13)**

50
51 6. Quality of Communication: Does the paper clearly express its case, measured against
52 the technical language of the field and the expected knowledge of the journal's readership?
53 Has attention been paid to the clarity of expression and readability, such as sentence
54 structure, jargon use, acronyms, etc.: All in all the quality of communication is good, but I
55 would suggest a professional proofreading. In addition, this field requires some sensitivity
56 and precision with regards to terminology. For example, autism spectrum disorder is not an
57 intellectual impairment, as the text suggests on page 11.
58
59
60

RR2-C13 (Response to Reviewer 2, Comment 13)

Thank you for pointing this out, and do pardon the oversight. We have changed the sentence to define the autism spectrum as a “neurological and developmental disorder.”

R2-C13 (Reviewer 2, Comment 13)

In addition, on page 3 I would replace “homosexual” with “sexual minorities” to include more variety regarding gender and sexual identities that might be marginalized or socially stigmatized.

RR2-C13 (Response to Reviewer 2, Comment 13)

Excellent point, we changed the sentence and adopted your suggestion. Please be kind enough to note that the revised manuscript was again proofread professionally.

We would like to thank you once more for your helpful suggestions. We hope that you approve of the revisions we made to the paper based on your recommendations. We truly believe that your comments have helped us improve the manuscript’s quality significantly. Thank you very much!