# SATISFACTION THEORY AND THE DISADVANTAGED CONSUMER

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## ABSTRACT

Previous research suggests that satisfaction processes may vary across different types of products and different time periods, but little research has sought to determine if satisfaction processes vary across different consumer groups. This qualitative study of disadvantaged consumers compares the existing satisfaction paradigm with consumers' actual consumption experiences to highlight limitations and deficiencies with the current theory as it applies to disadvantaged consumers. The results indicate that disadvantaged consumers do not seem to form or articulate prepurchase expectations, while performance, equity, and affect appear to play strong roles in their satisfaction judgments. Equity in terms of interactional fairness was especially dominant for services. The disadvantaged consumers in this study also failed to complain when accepting inferior dissatisfied, passively Implications for service and products. researchers. public policy makers, and marketing managers are discussed.

### **INTRODUCTION**

Customer satisfaction remains a central construct in marketing as companies continue to keep customer satisfaction as one of their primary goals (Fornell 1992; Morgan, Anderson, and Mittal 2005; Oliver 1997). As a result, a considerable amount of consumer satisfaction research in the last 30 years has focused on the discovery of the antecedents and outcomes of satisfaction. Many theoretical models of the satisfaction process have been developed and tested, and strong support for several antecedents has been found, including expectations (Bearden and Teel 1983; Churchill and Surprenant 1982; Oliver 1980, 1981), disconfirmation (Bearden and Teel 1983; Churchill and Surprenant 1982; Oliver 1981), performance (Churchill and Surprenant 1982; Oliver and DeSarbo 1988), experience-based norms (Woodruff, Cadotte, and Jenkins 1983), equity/fairness (Bowman and Das Narayandas 2001; Davidow 2003; Oliver and DeSarbo 1988; Oliver and Swan 1989a), affect/emotion (Westbrook 1980, 1987; Westbrook and Oliver 1991), desires congruency (Spreng and Olshavsky 1993; Spreng, MacKenzie and Olshavsky 1996), and causal attributions (Folkes 1984; Oliver and DeSarbo 1988) to name a few. The expectancy-disconfirmation framework, in particular, has garnered considerable attention, and variations of Oliver's (1980) model continue to build the satisfaction literature base.

While previous research on satisfaction suggests that satisfaction processes may vary across different types of products and different time periods (e.g., Cadotte, Woodruff, and Jenkins 1987; Churchill and Surprenant 1982), little research has sought to determine if satisfaction processes vary across different consumer groups. Furthermore, the expectancytraditional focus on the disconfirmation framework, or any other single satisfaction paradigm, may limit our understanding of customer satisfaction and its antecedents and consequences for all consumers (Fournier and Mick 1999; Grayson, and Ostrom 1994; Iacobucci. Arnould and Price 1993). For example, consumers who lack the knowledge and/or experience to conceptualize prepurchase

expectations in post-consumption measurement contexts should not logically be subjects of an expectancy-disconfirmation study. This example applies to the subjects of this study—disadvantaged consumers.

It is important to study disadvantaged consumers as they represent an important component of the U.S. economy, and researchers need a better understanding of this group. While specific estimates regarding the size of this group are not available since disadvantaged consumers represent a variety of sub-groups (i.e., lower income, elderly, lower education, illiterate, etc.), a recent study provides some insight into the potential size and importance of this group. Information Resources, Inc. (IRI), one of the world's largest marketing research companies. recently released a report focusing on lower income shoppers (Information Resources, Inc. 2007). While lower income shoppers do not represent disadvantaged completely all consumers, it does provide a general sense as to the size and buying power of this group. The IRI report indicates that lower income households will spend \$85.3 billion on consumer packaged goods in 2007 and that "lower income households are one of the hottest opportunities in the marketplace." In addition, the report states that "almost four out of every 10 consumers are considered lower income, representing one of the most underserved shopper segments in the United States." Given the size and spending power of this group (not to mention the public policy responsibility of marketers), it is important that researchers (once again) focus their attention on disadvantaged consumers.

Previous research suggests that disadvantaged consumers differ from other consumers in a number of ways and that traditional models may not adequately represent the pre-consumption, consumption, and post-consumption experience of these consumers (cf. Andreasen 1993; Capon and Burke 1980; Viswanathan, Rosa, and Harris 2005). Therefore, this study examines consumer satisfaction among disadvantaged consumer groups using qualitative techniques similar to those of Fournier and Mick (1999) in which subjects are allowed to describe their consumption experiences in depth. The goal of this exploratory research is to compare the existing satisfaction paradigm with the actual experiences of disadvantaged consumers to highlight limitations and deficiencies with the current theory as it applies to disadvantaged consumers.

The article is organized as follows. First, an overview of the concept of disadvantaged consumers is provided. Then, the expectancy-disconfirmation framework is reviewed along with a brief review of other common antecedents of satisfaction. The results from focus groups and depth interviews are provided and analyzed and then summarized with respect to previous Implications satisfaction research. for satisfaction researchers and for managers marketing to vulnerable consumers are then discussed.

# DISADVANTAGED CONSUMERS

Disadvantaged consumers in the marketplace were studied extensively in the 1960s and 1970s as the U.S. consumerist gained momentum movement (e.g., Andreasen 1975; Barnhill 1972; Caplovitz 1963). During that period, emphasis was on identifying and quantifying vulnerable consumer groups and studying the various ways in which these consumers were disadvantaged, such price as paying premiums (Cady and Andreasen 1973; Caplovitz 1963; Marcus 1969). More recently, specific groups of disadvantaged consumers in the marketplace have been studied in depth (e.g., functionally illiterate consumers, Viswanathan, Rosa and Harris 2005).

The definition of a disadvantaged consumer has varied over the years, primarily because it includes so many different types of vulnerable consumers. Research in the 1960s and 1970s focused primarily on the poor and racial minorities, and to a lesser extent, children and the elderly (e.g., Andreasen 1976; 1982; Barnhill 1972; Caplovitz 1967). Barnhill (1972)viewed disadvantaged consumers on a spectrum ranging from consumers average middle class as "amateurs" compared to "specialized professional sellers" to handicapped consumers needing full governmental protection. More recently, Andreasen (1993) argued that the traditional concept of the disadvantaged consumer must be broadened to include recent immigrants, the physically handicapped, more ethnic minorities, and even in select cases such as automobile shopping, women. For the purposes of this research and consistent with previous research (Andreasen 1976: 1982; 1993; Gronhaug 1987). disadvantaged consumers are defined as those consumers who lack various financial, social, intellectual, or physical resources necessary to function well in the marketplace, and include vulnerable groups such as the poor, the elderly, minorities, the homeless, the illiterate. and others.

Previous research indicates that disadvantaged consumers experience а number of problems in the marketplace. For example, disadvantaged consumers receive less per dollar or per unit of effort expended than others, suggesting that they are more prone to experience problems in the marketplace (Andreasen 1975). Gronhaug (1987) referred to the concept of marketplace difficulties as well, suggesting that there was an "inverse Matthew effect" (p. 76) for disadvantaged consumers. Rather than the cumulative advantages enjoyed by the rich (i.e., the rich get richer), disadvantaged experience consumers cumulative disadvantages. When confronted with marketplace problems, their limited resources cause them to be even further economically challenged, thus causing more marketplace problems, and so on. As posited by Andreasen (1975), the very notion of disadvantaged consumers suggests that marketplace chances are not the same for everyone and assumes explicitly that some consumers are worse off than others.

Earlier research also suggests that the decision-making processes and buying behavior of disadvantaged consumers are different than those of non-disadvantaged For example, disadvantaged consumers. consumers have been found to shop less widely for bargains and alternative products (Caplovitz 1963: Andreasen 1976; Viswanathan, Harris and Rosa 2005), yet paradoxically often use low price as either a major shopping goal or their sole purchase criterion (Viswanathan, Harris and Rosa 2005). In addition, disadvantaged consumers in England use alternative retail channels (e.g., second hand shops, flea markets, charity stores) very frequently and use multiple outlets (Williams 2003). Their widespread shopping is primarily out of economic necessity, not choice. This behavior is distinctly different from inner city disadvantaged consumers in the U.S. who often rely on one or only a few stores and brands when making purchases (Andreasen 1976, Furthermore, disadvantaged con-1982). sumers are generally exposed less to print media (Belch and Belch 2004), further limiting information-seeking their and knowledge of alternatives. In summary, previous research suggests that the consumption experiences and the decisionmaking processes disadvantaged of consumers are somewhat different than those of other consumers. Therefore, this research seeks to determine if the satisfaction process for disadvantaged consumers is somehow different than the satisfaction process for other individuals.

## PREVIOUS CONSUMER SATISFACTION RESEARCH

Consumer satisfaction can be defined as an overall positive evaluation of performance based on all prior experiences with a firm (Anderson, Fornell, and Lehmann 1994; Fornell 1992). Excellent summaries of previous satisfaction research exist (e.g., Oliver 1997; Szymanski and Henard 2001; Yi 1991), so the goal of the following discussion is to provide a brief review of frequently studied antecedents of satisfaction. Accordingly, this review provides a brief overview of theoretical issues that will be discussed in the results section of the article.

### **Expectations and Disconfirmation**

The dominant satisfaction models proposed and tested in the consumer satisfaction literature have been variations of Oliver's (1980) model in which consumer expectations are the basis of post-purchase evaluations such as disconfirmation and satisfaction. In expectancy-disconfirmation theory, satisfaction is said to be formed on the basis of consumers' prepurchase expectations about the attributes or performance of a product/service as well as their judgments about whether the actual product/service performance is the same as (confirmation), better than (positive disconfirmation), or than expected (negative worse Expectations are said to disconfirmation). either assimilate toward or contrast against performance depending on the degree of difference between expectations and actual performance. Assimilation results in high/low satisfaction judgments when expectations are high/low (Oliver 1997) in order for consumers to avoid the dissonance that would result if expectations and satisfaction diverged. Most of the empirical research supports the assimilation effect, a positive relationship between expectations and satisfaction (e.g., Bearden and Teel 1983;

Oliver and DeSarbo 1988; Swan and Trawick 1981).

Disconfirmation, separate from expectations, has a significant positive effect on satisfaction in addition to the independent effect from expectations (Halstead, Hartman and Schmidt 1994; Oliver and DeSarbo 1988; Oliver and Swan 1989a). It should be noted that the use of the term expectancydisconfirmation in this research varies slightly from the specific definition used by Oliver (1997) in which expectancy disconfirmation is used to mean disconfirmation only (p. 27). We use the term more broadly, encompassing both expectations and disconfirmation. See Teas and Palan (2003) for a review of the empirical support found for the expectancydisconfirmation model and Szymanski and Henard (2001) for a meta-analysis of consumer satisfaction research results.

## Performance

Scholars who have expanded on the expectancy-disconfirmation model have isolated performance perceptions from disconfirmation judgments. That is. performance has been found in some cases to have a direct effect on satisfaction separate from and in addition to its indirect effect through disconfirmation. Performance has been looked at both objectively (e.g., performance quality ratings) or and subjectively (i.e., perceived performance) and has been found to be positively related to judgments (Churchill satisfaction and Surprenant 1982; Cronin and Taylor 1992; Halstead, Hartman and Schmidt 1994; Oliver and DeSarbo 1988).

# Equity

Equity judgments refer to consumer evaluations of the fairness or the rightness of an outcome or decision in reference to what others receive (Oliver 1997). Consumer equity judgments can take several forms, including: procedural justice—the manner in which outcomes are delivered, interactional justice—the manner in which a customer is treated in terms of respect and politeness, or distributive justice—consumers getting what is deserved based on their inputs (Seiders and Berry 1998). Satisfaction has been modeled as a direct, positive outcome of equity (e.g., Oliver and DeSarbo 1988; Oliver and Swan 1989a, 1989b; Swan and Oliver 1991).

### Affect

In addition to cognitive antecedents, several researchers have found consumer affective responses to consumption experiences to be precursors of satisfaction (Homburg, Koschate and Hoyer 2006; Mano and Oliver 1993; Oliver 1993; Westbrook 1987: Westbrook and Oliver 1991). Specifically, positive affect is significantly associated with satisfaction while negative affect leads to dissatisfaction. Affective factors play the strongest role in the early stages of satisfaction formation (Homburg, Koschate and Hoyer 2006). Even individual emotions such as joy have been found to positively impact consumer satisfaction (Soderlund and Rosengren 2004). Oliver (1989) suggested several satisfaction modes involving specific emotions including, for example, satisfaction-as-contentment, satisfaction-as-surprise, and satisfaction-as-relief or regret. These modes were expanded upon by Fournier and Mick (1999) to include satisfaction-as-love, satisfaction-as-awe, dissatisfaction-as-helplessness, and satisfactionas-resignation.

### METHOD

The satisfaction process of disadvantaged consumers was investigated through a series of five focus groups and nine in-depth interviews with disadvantaged consumers. The focus groups were held in five separate cities in a southeastern state in the U.S. The cities ranged considerably in size; some locations were rural, and others were more urban. The individual focus group participants ranged in number from 5 - 12, with a total of 44 adults participating. Females comprised 75 percent of the study participants. Participants were selected based on their enrollment in a state health insurance program that was created specifically for the indigent and uninsurable populations. One of the study's authors had access to these disadvantaged consumers through work with an insurance provider. Recruiting for each city was handled by the insurance provider's customer service representative in that city and was based on members' willingness and availability to be interviewed. Availability was often a function of the members' ability to obtain transportation to the focus group site. Some participants had been members for less than a year, while others had up to three years of experience in the healthcare program.

The participants in the focus groups were considered disadvantaged on the basis of disability, low income, little/no education, unemployment, poor health status, and/or age. Specifically, four insurance categories existed within the population: members who had previously been insured under Medicaid, those previously insured under Medicare, members with pre-existing chronic or serious illnesses who were unable to obtain private insurance. and members health who previously had no access to any health insurance at all. Each focus group was recorded via audiotape. Each participant was paid \$50 in cash and provided refreshments.

The focus group questions were openended, and multiple prompts were used to expand the discussions. Participants were asked about their experiences, perceptions, expectations, knowledge, and satisfaction with various aspects of their health insurance plan and with the health insurance provider. There was some variation in the coverage of topics depending on the issues raised by the participants during the focus group

discussion. The focus group moderators included one of the study's authors, who participated in all five focus groups, and one additional trained moderator. The interviewers probed for elaboration on topics of interest to the participants as well as on theory satisfaction constructs (e.g., disconfirmation), thereby allowing possible discovery of emergent themes. Transcripts of the audiotapes were analyzed by two of the study's authors. Themes from each focus group were categorized separately, and then common themes across all five groups were classified and analyzed. Interpretation of the data developed through multiple readings and the result of interplay between was assumptions from previous satisfaction research and emerging insights (Spiggle 1994).

Nine individual depth interviews were also conducted by one of the study's authors in one of the southeastern cities in which a Disadvantaged focus group was held. consumers were identified and solicited with the assistance of a community outreach center in the city. Participants' disadvantaged status was determined on the basis of participants' income, age, education, minority status, or the other variables mentioned earlier. Specific demographic information was gathered after each interview. Two subjects were eliminated from the study because it became apparent either during or after the interview that they did not truly reflect the definition of a disadvantaged consumer based on both their income and education level. Therefore, a total of seven in-depth interviews were used in the study. Table 1 provides a profile of the depth interview subjects.

Each interview was audio recorded, and respondents were paid \$25 for their participation. The goal of the in-depth interviews was to supplement the information gathered from the focus groups and to investigate additional product and service categories beyond those discussed in the focus groups. Some of the products discussed in the depth interviews included automobile tires. hair products, computers, work uniforms, cleaning products, and purses, to name a few. The data collection method followed the qualitative approach of Fournier and Mick (1999) in which satisfaction was examined from "the firsthand viewpoints of the persons involved" (p. 5), including both past events and present salient experiences. The interviews focused on two recent (within six months) purchases: one in which participants were very satisfied and one in which participants were very dissatisfied. The satisfaction model used for the a priori themes was primarily that of Oliver (1980, 1997) and others in which expectations, disconfirmation, performance, and various post-usage responses (satisfaction and complaining behaviors) were examined. After the interviews were completed and transcribed, two of the authors (who did not conduct the interviews) independently read and analyzed each transcript. Then, the transcripts were read and analyzed together, with the goal of discovering common themes, uncovering new insights, and, like Fournier and Mick (1999 p. 7), "challenging existing theory."

Overall, the sampling frame posed particular challenges for the data collection efforts. In both the focus groups and depth interviews, the sample consisted of many consumers with limited communication skills. Some of the focus groups were held in rural locations in which regional dialects compounded the problem of the inarticulateness of the subjects. Focus groups and personal interviews were chosen not only as an exploratory research tool but partially due to the literacy constraints of some disadvantaged consumers. Surveys are generally not viable research design alternatives for this population.

### Table 1

<b>Depth Inter</b>	view Pa	rticipants
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Participant	Gender	Age	Income Level	Occupation	Race
Mable	Female	65 or older	\$5,000-\$9,999	Retired	Caucasian/White
Geraldine	Female	45-54	\$15,000-\$19,999	Food Service	African- American
Peggy	Female	45-54	\$10,000-\$14,999	Homemaker	Caucasian/White
Stephen	Male	45-54	\$10,000-\$14,999	Retired	Caucasian/White
Carolyn	Female	45-54	Less than \$5,000	Service Worker	African- American
Nancy	Female	55-64	\$20,000-\$29,999	Managerial/Administrative	Caucasian/White
Jerry	Male	25-34	\$40,000-\$49,999	Professional/Technical	African- American

#### RESULTS

The following sections discuss the results of the focus groups and in-depth The discussion of the results interviews. focuses on highlighting instances where current theory of satisfaction and the dominant satisfaction paradigm do not completely reflect the real-world consumption post-consumption experiences and of disadvantaged consumers. Thus, the goal is in identifying limitations and deficiencies with current satisfaction theory as it relates to disadvantaged consumers. Relevant excerpts from both the focus groups and depth interviews are included in the discussion of the results.

### Lack of Expectation Formation

The influence of expectations on consumer satisfaction has received much attention in satisfaction research during the previous three decades (Bearden and Teel

1983; Churchill and Surprenant 1982; Oliver 1980, 1981). The results from the current research, however, suggest a somewhat less prominent role of expectations in the satisfaction process. In both the focus groups and depth interviews, participants were asked to describe their initial expectations for various products and services. Overall, the majority study participants of were completely unable to form or articulate their expectations, regardless of the number or the types of questions asked. Multiple variations of expectations questions were used (i.e., "Before you were enrolled, what did you expect from the company?" or "When you first became a member, what did you expect?) as were extensive probing questions to uncover participants' initial expectations. descriptions other Terms and than expectations (i.e. "What did you think the product would be like?" and "How did you think the product would work?") were also used to overcome the potential problem of participants not understanding the term expectations.

While limitations in the comrespondents munication ability of the certainly contributed to the lack of discussion relative to their prepurchase expectations, it became evident throughout the research process that the disadvantaged participants truly had very limited expectations prior to many purchases. When attempting to discuss their expectations, participants often told stories about their current situation such as medical health problems and/or the performance of their health insurance plan. For example, the excerpts below demonstrate several responses (clearly unrelated to the topic of expectations) that participants provided when asked about their initial expectations. These verbatim quotes highlight the difficulty that most of the participants had discussing with their prepurchase expectations.

> "I mean, I haven't had...no...well, I haven't had any bills. What I've...my son is needing his teeth operated on, and they have...I didn't know you have to be approved for it now. At first, you know, you just go to the doctor and they said well, this has got to be done, but they had sent me a letter in the mail I think last week some time saying that it was going to be approved. I guess if he wasn't going to be approved, they was going to let me know then too, but I thought everything...you go to the doctor for...that they approve it. I guess not, though. I guess it has to be OK'd then. That's about it."

> "I ain't had no problems, none at all, so...You

know, everything I had has been fine."

"Ah, I became uninsurable, okay? Because I had a lot of major medical problems, and they've come through, you know, real good on mine, and I'm glad I went with them because I...I had an aneurysm repair in '95, or then in '94, and in '95 I had a major hernia repair, & they've come through real good."

*"I ain't had no trouble out of them."* 

Other participants appeared to more fully understand the concept of expectations but simply indicated that they did not have any expectations prior to the purchase. The following verbatim quotes reflect different individuals' responses to questions about their expectations prior to the actual purchase.

"No. I didn't bother thinking about all that."

"No, not really. I just always wanted one."

*"When I first saw it, nothing.* 

While many participants were unable to identify their prepurchase expectations, it was evident that a limited number of participants had some prepurchase expectations. These expectations were, however, very general. As indicated in the excerpts below, participants stated that they expected that the product "would work" or would be "good." "Something that, you know, that worked good and had good quality to it. That it worked and satisfied."

"I expected them to be good."

"No. Well you know you take something like that you know, you think, well they'll work fine you know. You wouldn't think something like that would be something defaulty in it or something; dealing with the medical field."

*"That the product needs to do its job."* 

Perhaps it is not surprising that participants were unable to articulate their expectations given the recent findings of Viswanathan, Rosa, and Harris (2005). In their study of functionally illiterate consumers, clearly a disadvantaged group, they found most consumers operating primarily in the "visual and concrete realm rather than in the symbolic and abstract realm" (p. 22). Expectations represent an abstract construct, as well as something that must be recalled from memory, sometimes from the distant past. Therefore the lack of any consistent or meaningful findings on expectations among a group with education, literacy, and communication limitations can perhaps be explained this way.

It could be argued that many consumers would have difficulty verbalizing prepurchase expectations in postpurchase situations. However, previous research has successfully utilized similar qualitative methods to uncover respondent prepurchase expectations postpurchase in situations (Gardial, Clemons, Woodruff, Schumann, and Burns 1994; Gardial, Woodruff, Burns, Schumann, and Clemons 1993). In these two

separate studies of non-disadvantaged consumers, respondents were able to provide a detailed recollection of their prepurchase expectations. Thus, the inability of disadvantaged consumers to discuss their prepurchase expectations in the current study suggests а decreased emphasis on expectations in the satisfaction process of disadvantaged consumers.

### **Emphasis on Interactional Fairness**

Previous research supports the influence of equity judgments such as distributive, procedural, and interactional fairness in the satisfaction process (Oliver and Swan 1989; Blodgett, Hill, and Tax 1997; Goodwin and Ross 1992). The results from the current study, however, suggest that a much greater emphasis should be placed on when interactional fairness studying satisfaction of disadvantaged consumers. Interactional fairness reflects the manner in which the customer is treated and focuses on the interpersonal aspects of the transaction (Blodgett, Hill, and Tax 1997; Goodwin and Ross 1992). It was evident that participants' satisfaction level depended greatly on their perceptions of interpersonal dimensions. As indicated in the excerpts below, participants' often discussed interpersonal dimensions when asked about their overall level of satisfaction.

"I was treated very courteously and seemingly concerned."

"We were treated nice."

"You are treated indifferently."

"I felt like a ping pong ball in the hand of giants." "It was nothing I could prove, but it is just something you pick up in an attitude. It was a skin specialist...you know I almost felt like leaving the office because of his attitude."

"I wish I hadn't of come here."

"We're treated as though whatever negative outtcome that could be expected is supposed to be falling at our door steps. I'm treated like I'm going to get pain medication to resell when I'm suffering."

"I was treated good. I was treated nice."

"Most of the staff seem to be very helpful and willing and wanting to respond to you."

*"Most of the time when I call, they're real nice."* 

Participants were particularly sensitive to issues related to respect and dignity. The disadvantaged consumers interviewed often felt as though they were treated with less respect as a result of their disadvantaged status, and this had a negative influence on their overall level of satisfaction. The following excerpts echo these concerns:

> "...there's a few staff members there that, I mean, they're just not as friendly as they used to be when I came in with the, you know, other insurance when I came in...like they are

paying their taxes for me to see the doctor or something..."

"Yeah, it's like {our insurance} is the lowest, the lowest, you know, to have. Like doctors are not touching it."

"I'd expect to be treated like a human."

"That's the way they treat you, low...low...just low. Your insurance, you know, they need to respect you."

Subjects' fairness responses were not nearly as lengthy or as emotional for product when compared categories to service It may be that interpersonal categories. fairness plays a greater role in satisfaction with services than with products due to the interpersonal interactions that occur in the service delivery process. This supports Fournier and Mick's (1999 p.16) suggestion that the "equity model may not be germane" for products as compared to services. In addition, health insurance represents a type of "credence product" which is difficult to evaluate even after the service is performed (Nelson 1974). Thus, interactional fairness becomes the consumer's surrogate measure of service quality.

### Satisfaction as "Here and Now"

Satisfaction can be defined both as a transaction-specific evaluation and an overall evaluation based on all prior experiences with a product or service provider (Anderson and Fornell 1994; Bitner and Hubbert 1994; Fornell 1992). The focus of satisfaction for the current study was on disadvantaged consumers' overall satisfaction with a product or service provider since overall satisfaction is a better indicator of a firm's past, current and future performance (Anderson, Fornell, and Lehmann 1994). Despite the focus on overall satisfaction in the current study, disadvantaged participants' satisfaction evaluation often focused on recent transaction-specific performance. Participants were often unable to provide a global satisfaction evaluation and were only able to provide performance evaluations based on recent events. For example, in the focus groups describing their health insurance, participants focused their overall evaluation on a medical problem they were currently experiencing or had experienced in the recent past. Lengthy, complicated, non-linear stories of specific medical histories and specific procedures were often relayed when disadvantaged customers were asked about their overall satisfaction with the health insurance provider. Examples of such statements are provided below.

> "My provider was not available and. ah...I had a terrible migraine. I didn't want to go to the Emergency Room because that's not an emergency. To me it was. because it hurt so badly. Anyway, I called the 1-800 number and told them what was going on and in ten minutes they called back and said you've been approved to go to your local Emergency And, I told him you Room. know some people gets the headaches where they feel them coming on, you know...mine don't do but one or twice a year but anyway, but I told them it wasn't all the way there yet but if it got worse that I would go and I laid down and got quiet and everything went away so I didn't have to use it, but I

almost did but within ten minutes they gave me approval on the phone.

"One problem they have is some things that I have had to have...it takes up to a year or a year and a half to get the approval to get them, and...sure, I'm going to need them in a year to a year and a half, but I need it now."

"I've only had one problem with it and when I was supposed to..had some dye through me at {a local hospital}...and when I got there they didn't have my paper work...I said, 'Lady, you're playing with somebody's life, how would you like me to make you eat them words."

These results indicate that disadvantaged consumers have difficulty taking a step back and providing a global evaluation of a company or product based on all of their experiences. This finding seems to reflect satisfaction as context-dependent in that performance is evaluated only in terms of experiences, previous current not or accumulated experiences (Fournier and Mick At the same time, most of these 1999). respondents conceptualize performance in a very transaction-specific manner. That is, satisfaction with their health insurance is based on their current medical situation, insurance needs. current current and performance (claims paid) rather than the cumulative effect of these experiences. Thus, disadvantaged customers appear to equate satisfaction with a "what have you done for me lately?" scenario. While it seems likely that all consumers (not just disadvantaged consumers) weigh recent experiences more

heavily than prior experiences when forming overall satisfaction judgments, the results from this study suggest that disadvantaged consumers are either unable to integrate experiences across time into their satisfaction judgment or simply choose to form their satisfaction judgment based almost exclusively on the most recent transaction.

## Satisfaction as Affect

While early models of consumer satfocused isfaction on more cognitive antecedents (e.g. Oliver 1980), research eventually included affect as an important determinant of satisfaction (Westbrook 1980, 1987; Westbrook and Oliver 1991). The results from the focus groups and depth interviews suggest a much greater role of affect in the satisfaction process. In fact, satisfaction was often equated as positive affect by many of the disadvantaged respondents interviewed. Throughout the groups depth interviews. focus and participants repeatedly equated satisfaction with being happy and dissatisfaction with being unhappy. The importance of affect in the satisfaction process is reflected in the excerpts below.

*"I'm not happy with it."* 

"I was disappointed."

"Just being happy with it I guess."

"I guess, you know, that you're not happy with it."

"I'm unhappy with it."

"Oh, I was just so frustrated...I ended up crying on the phone."

"Well yeah I like it...So I'm happy with it." "It made me mad."

"...it makes you feel bad. It really does and it's like, okay I'm trying and I'm doing what they told me to do and they say it's suppose to do this and it is not. And you feel bad, about, you know obviously it looks bad todav because I'm not feeling real good. You know you go out and you think well I'm doing all this and yet, here look at it. And that makes you just feel bad about yourself. You know that kind of sets your whole day sometimes, vou know?"

These results support the important role that affect plays in the satisfaction process but suggest that affect may actually play a more prominent role in the development of satisfaction for disadvantaged consumers. In fact, the disadvantaged consumers that were interviewed often discussed affect as the primary antecedent while failing to discuss disconfirmation which typically serves as the primary antecedent of satisfaction in most research. The variation in these responses supports Fournier and Mick's (1999, p. 5) suggestion that satisfaction has different meanings for different consumers—what they call a "multi-model, multi-modal blend of motivations, cognitions, emotions, and meanings. These exploratory results suggest satisfaction, for disadvantaged that consumers, does not appear to be as deeply rooted in the expectancy-disconfirmation compared framework when to other consumers.

# **Passive Acceptance/Lack of Complaining**

While this research focused primarily on the conceptualization of and antecedents to consumer satisfaction, the focus groups and

interviews also revealed one notable difference in the consequences of satisfaction/dissatisfaction for disadvantaged consumers. Previous research supports voice, exit, and loyalty as the main consequences of dissatisfaction (Hirschmann 1970; Singh 1990). The results of this research, however, indicate that for disadvantaged consumers, voice or formal complaining to the company is an option that is rarely understood or properly utilized. Often, these disadvantaged consumers did not appear to be aware of or knowledgeable about the process needed to complain to the company. For example, when focus group participants were asked about their complaining behavior, several participants indicated that they did not know that they could complain or did not know how to The excerpts below echo these complain. concerns.

> "I didn't know they had a number to call. I would have bombarded them if I had."

"If I'd known more about it {the ability to complain}, I wouldn't have had the trouble I'm in now."

"I don't know no grievance number."

Other participants expressed somewhat of a passive resignation to their situation. These respondents generally felt as if complaining would not result in a positive outcome.

> "No, 'cause I just figured that the store wouldn't take them back, so I just kept them. I just said the heck with it."

> > "Nobody to tell."

"No. Cause I bought it at the Dollar Store."

"No. I figure it wouldn't do no good. Just blowing hot air. Just take my losses and keep moving."

The level of passive resignation is even evident in a rather extreme case reflected in the excerpt below. This participant did not complain about having to wait for a referral despite the severity of the problem and the extremely negative consequences of the delay. The participant's child suffered a permanent hearing loss due to a delay in treatment for a simple ear infection, yet she never complained during or after the referral process and subsequent appointment.

> "...my four year old, she woke up saying her ear was hurting, and I gave her some medicine, and I made her appointment with her an doctor. They told me I was going to need a referral with so and so and a week to two weeks. When she did get there, partial she had hearing loss...And she had an ear infection that whole time...because my little girl I have to holler at her now."

Across all of the focus groups and depth interviews, there was a general lack of awareness of the grievance procedures available to the customers. This finding was especially surprising with the health plan members participating in the focus groups since the health insurer had engaged in numerous marketing efforts to inform its members of the grievance or complaint process. Because they were often less confident and less articulate than average consumers, these disadvantaged respondents also appeared more vulnerable to service failures because of their reluctance to voice their concerns. These results suggest a satisfaction-as-resignation mode for disadvantaged consumers which reflect a passive acceptance of an unwelcome and unavoidable state, one in which declining expectations are met by a low performance level (Fournier and Mick 1999).

Andreasen (1993) has acknowledged that the disadvantaged do not complain as much but that the underlying reasons are not known. One possible explanation is that disadvantaged consumers have lower and more homogeneous expectations and thus have less perceived dissatisfaction (Gronhaug 1987). The results of the current research, however, suggest that issues related to illiteracy, lack of knowledge of the complaint process, and passive resignation may explain this previous finding.

Henry's (2005) findings about disempowered consumers might also be relevant here. He found that lower, manual labor, working class consumers were less likely to actively seek opportunities than their higher class, professional counterparts. They were uncertain about the future, had a desire to reduce stress, and lacked task persistence. These findings suggest that the disadvantaged consumers in this study may have avoided formal complaining because complaining is inherently stressful and requires follow up action after a consumption experience. Further, if disadvantaged consumers feel disempowered, it is unlikely that they would feel comfortable complaining to an authority figure.

## DISCUSSION AND IMPLICATIONS

While previous research suggests that the satisfaction process may vary across categories, little research product has investigated whether or not the satisfaction process varies across different types of Therefore. consumers. the research summarized in this article sought to compare the actual postpurchase evaluation process of disadvantaged consumers with the dominant satisfaction paradigm which supposedly reflects the satisfaction process of all consumers. Overall, this exploratory research uncovered some interesting things about disadvantaged consumers and suggests that the dominant satisfaction paradigm may not necessarily reflect the satisfaction process for at least one consumer segment, disadvantaged consumers. See Table 2 for a summary of key findings.

# Table 2

# **Key Findings of Exploratory Research**

- Disadvantaged consumers were either unable to form or to articulate expectations in a concrete manner. Those with defined expectations had low expectation levels.
- Disadvantaged consumers focus heavily on interactional fairness when evaluating services as compared to products.
- Disadvantaged consumers put emphasis on the most recent product or service experiences when making evaluations.
- Disadvantaged consumers view satisfaction as an affective response.
- Disadvantaged consumers do not necessarily fit the traditional expectancydisconfirmation model of satisfaction.
- Disadvantaged consumers may be more vulnerable regarding product and service failures due to their lack of complaining.

Taken together, the focus groups and depth interviews indicate that disadvantaged consumers do not seem to form prepurchase expectations. If they do, they cannot recall them in postpurchase contexts or cannot disadvantaged articulate them. Those consumers who can recall their expectations tend to have very low level expectations that are not very attribute-specific. Their satisfaction judgments also tend to be global in nature and seem to vary depending on whether the reference point is products or services. When dissatisfied with a service, equity judgments appear to play an important role in satisfaction, especially with respect to also interactional fairness. Satisfaction appears to be based on performance, especially for specific product or service experiences that the disadvantaged consumers had.

When it comes to (dis)satisfaction with an existing product or service, current performance or current transactions play a dominant role, regardless of how the conceptualize consumers satisfaction/dissatisfaction in general. Affect also plays a prominent role in disadvantaged consumers' evaluations, while disconfirmation judgments were negligible. The disconfirmation finding is consistent with the disadvantaged consumers' lack of expectation formation. Disadvantaged consumers tend to be more passive when dissatisfied, accepting lesser service quality or poor product performance without complaining.

These exploratory findings, when integrated with previous qualitative research on satisfaction, highlight several important things for satisfaction researchers, strat-egists, and policy makers. First, this study supports the arguments in an article by Fournier and Mick (1999) in which they claim that preconsumption standards have been overemphasized in satisfaction models. They call for a contingency approach to satisfaction in which some models are based on expectations, and others are not. This flexible approach was also suggested by Spreng, MacKenzie and Olshavsky (1996).

Westbrook's (1997) arguments went a He suggested that any step farther. psychological process model of consumer satisfaction that relies on a comparison standard framework, whether based on expectations or some other standard, is largely irrelevant when it comes to a practical, organizational application. Our results support this notion and extend it to disadvantaged consumers in particular. It should be noted that the research findings somewhat contradict Wells' (1993)supposition that expectations play "pivotal roles in consumer behavior" (p. 494), and that researchers must not ignore expectation effects when developing consumer models. It should be noted that previous expectation research conducted among nondisad-vantaged groups typically used surveys or experiments to study expectations, using closed-end scales rather than open-ended questions. It is therefore possible that even more advantaged consumers would have difficulty expressing expectations in an open-ended fashion, especially for infrequently purchased and complex products such as health insurance. Future research might follow up bv examining the similarities in and differences between the articulated expectations of advantaged vs. disadvantaged consumers using more quantitative methods.<sup>1</sup>

This pilot research, while clearly exploratory in nature, lays some initial groundwork for future theory development in satisfaction among disadvantaged consumers. Based on the findings, a satisfaction model that applies to disadvantaged consumers should include two primary antecedents: perceived per-formance and equity. The include equity construct should an overall/global measure of fairness as well as specific measures of procedural and interactive justice (e.g., Bowman and Das Narayandas 2001; Davidow 2003; Smith, Bolton, and Wagner 1999; Tax, Brown and Chandrashekaran 1998). In addition, the performance measure should tap into current product/service performance only, not past performance. When it comes to the issue of fairness, the findings here confirm arguments that equity models may be more appropriate in the context of services rather than products (e.g., Fournier and Mick 1999). The model would not necessarily include either expectations or discon-firmation, but might include various affective measures given the high degree of emotion found in the responses of the disadvantages consumers studied here.

In other ways the results mirror those of Fournier and Mick (1999) in which a satisfaction-as-resignation mode was identified, with one important difference. Fournier and Mick link the satisfaction-asresignation mode to the traditional expectancy-disconfirmation model in terms of declining expectations and subsequent confirmations of low performance. Our results suggest the same passive submission and acceptance that typify a resignation mode, but they clearly do not conform to an expectations processing model. In addition, for some focus group participants, а dependency mode of satisfaction became evident in that a negative dependency or helplessness theme emerged. This was evident with some members who had no other options for health insurance other than their current program and were thus unable to even consider switching to an alternative provider. Some helplessness was also exhibited in the

<sup>&</sup>lt;sup>1</sup>The authors thank two anonymous reviewers for these comments and suggestion.

telling of medical stories in which members expressed being completely dependent on health care providers not only for medical outcomes but for important referrals and preauthorizations of procedures in order to achieve insurance coverage.

For marketing managers who wish to disadvantaged consumers, several reach caveats are in order. Promotion and other marketing information must be carefully tailored and targeted in order to communicate effectively with this group. Given the findings of Viswanathan, Rosa, and Harris (2005) about concrete vs. abstract concepts, messages to the disadvantaged should be direct and concrete. Their study also suggests that any tactic that reduces their anxiety over purchase decisions or avoids negative emotions will help vulnerable consumers. Our research also found that the negative emotions experienced by disadvantaged consumers can be powerful indicators of dissatisfaction, yet this rarely translated into complaining behavior. Managers therefore need to find ways to solicit feedback from their disadvantaged consumers in order to diagnose and prevent product and service failures, thereby improving satisfaction and Because current performance repurchase. dominated the satisfaction processing of disadvantaged consumers, managers will need to be vigilant in their customer service efforts to ensure that product/service failures are corrected quickly.

Public policy makers may need to greater attention on reaching focus disadvantaged consumers and educating them about marketplace practices and their rights as consumers, specifically their rights to seek redress. Increasing the complaint rates among dissatisfied disadvantaged consumers may be a worthy public policy goal. In addition, finding out the root causes of their lack of complaining is important. Do disadvantaged consumers choose to remain silent because they are unaware of their complaint options or

because they think their complaints will go unanswered? Or are there other reasons underlying their behavior? Additional research among disadvantaged consumers is needed to address this issue.

Policy makers might also focus on consumer education and self-help programs for the disadvantaged in which other marketplace practices are addressed. For example, as services take on increasing importance in our economy, equitable treatment of the disadvantaged by service providers might be an area in which to focus resources. This will be especially important in certain service categories such as health care, insurance, banking, and even cellular service.

Given the low literacy of some disadvantaged consumers (e.g., Viswanathan, Rosa, and Harris 2005) and the limited communication education and skills demonstrated by the participants in this study, the issue of consumer understanding or knowledge must be addressed. How likely are some disadvantaged consumers to understand important communication from companies such as product instructions or warning labels? Of greatest importance is human safety. Beyond that, companies must be concerned about any product liability issues that might come into play (e.g., Morgan and Riordan 1983). Finally, consumers who have problems understanding service instructions have been shown to experience higher levels of difficulty using the service, lower satisfaction levels, higher switching intentions, and were less likely to recommend the service to others (Jones, Taylor, Becherer, and Halstead 2003).

These findings suggest that extraordinary efforts may be needed to satisfy dis-advantaged consumers and turn them into loyal customers.

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