Service Quality Gap Model as a Predictor of Customer Satisfaction among People with Disabilities in Vocational Rehabilitation Centers

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Abstract: The purpose of this study was to investigate the Service Quality Gap Model as a predictor of customer satisfaction among people with disabilities in Vocational rehabilitation centers. A quantitative survey research method was employed for this study. The independent variable is Service Quality Gap Model, while the dependent variable is customer satisfaction. The data were analyzed with Pearson correlation and multiple regression. Multiple regression was used. Participants were 150 individuals with disabilities (females, n= 10, 6.66%, and males 140, 93.33%). Findings show significant correlations between service quality gap model subscales and customer satisfaction. When put together, the independent variables (tangibility, reliability, responsiveness, assurance, and empathy) yielded a coefficient of multiple regression (R) of 0.664 and a multiple correlation square of 0.621. Each of the five independent variables made significant individual contributions to the prediction of customer satisfaction.

Keywords: Service Quality Gap Model, customer satisfaction, people with disabilities, Vocational rehabilitation centers.

INTRODUCTION

Vocational rehabilitation is defined as that stage of the related and coordinated rehabilitation process that includes the provision of vocational services such as vocational guidance, vocational training, and experiential use with the intent of enabling persons with disabilities to secure suitable work with the maximum possible compatibility in life by evaluating his energies and helping him to develop and benefit from them as much as possible [1].

Since the rehabilitation process is a continuous process and vocational rehabilitation as part of it aims to achieve economic sufficiency by working and engaging in a profession, craft, or job and continuing with it. The social, professional, and economic benefit to the extent that they can, self-realization and appreciation for them, restoring their self-confidence, achieving appropriate adaptation and mutual respect between them and the members of society as they are productive individuals in it, and it helps them to exercise their legitimate rights, especially in the field of obtaining jobs that are commensurate with their preparations and capabilities [2-5].

LITERATURE REVIEW

Service Quality Gap Model

The customer looks at quality through three aspects: the first is the technical or technical aspect

that refers to the activities and procedures, as well as the existing technologies through which the available service is provided, and its impact appears on the extent accuracy, speed, and logicality of performance and sequencing, and therefore it is reflected on the customer's attitudes towards the service, and the second is the functional aspect and is concerned with the mechanism of service performance by service providers with the entity, which affects the extent of customer satisfaction, by the workers who represent the service provider through their skills, sincerity of their promises and their initiative towards assistance, and the third is the environmental aspect of the environment of service provision, in which interaction takes place between the service-providing staff and the customer [6].

The gap model compares customers' expectations about the service and their perception of the quality of the service provided and then determines this gap between expectations and perceptions. Four gaps affect the gap between what is expected and what is perceived by the service:

Gap 1: It results from the difference between the customer's expectations and the service company's perception of customers' needs. The company does not always realize what the customers' needs and desires are and how the customer judges the components of the service due to the company's lack of information about the market, demand patterns, and customers' tastes [7].

Gap 2: It is the gap between the company's awareness of customers' needs and the company's ability to

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transform these needs into specifications, as the company may fail to translate these needs into service specifications that meet customers' needs [8].

Gap 3: It is the gap between the established service specifications and the actual performance of the service. When the service specifications do not match the way they are provided as a result of a lack of efficiency of workers or lack of motivation, this gap arises [8].

Gap 4: It is the gap between promises made through advertising and promotional means and the level of actual service provided to customers.

Gap 5: The gap between the expected and perceived level of service. It is the final result of the sum of these four gaps [9-15].

Customer Satisfaction

The relationship "satisfaction leads to quality" is wrong, and it is true that "quality harms satisfaction", and evidence of this is that the institution meets the needs of customers that include their satisfaction, when customer satisfaction has become a major goal of quality, considering that quality aims to raise the level of service to achieve satisfaction. Customers, when a successful organization has become the one that takes the opinions of customers in its operations and services provided to them, so that many organizations have participated in their customers in the design and development of their services and in their continuous evaluation processes, by defining clear procedures for customer complaints and suggesting their concerns and dealing with them and making an effort as possible to provide services to every person, including those with special needs (each customer has his own laboratories and makes him feel that he is the only customer of the institution), all for the sake of the customer's satisfaction with the quality of service provided by the institution and that satisfaction remains for it to meet the needs, desires and expectations of customers, whether these are desires, needs and expectations have been disclosed or not, and that the institution has followed one or more methods in measuring customer satisfaction and a reason for obtaining opinions, observations, complaints and suggestions of customers, so the institution makes efforts towards achieving More satisfaction by responding to desires and expectations and listening to feedback and complaints [16-21].

To gain the customer's trust, you need to establish three values: performance value, price value, and ease of handling value. In terms of performance value, customers always look for goods and services that meet their demands and provide them with the required results. As for the price value, customers are very keen to pay a reasonable price and feel reassured that the costs of getting the good or service are less than possible. In terms of the value of the ease of dealing with the organization, the customers find that the organization is close to them and the procedures for obtaining the good or service are few, the ease of communication with the organization, the speed of response, and the spirit of personal dealing with customers [16].

Service Quality Gap Model as a Predictor

The indicators of service quality depend on standards and specifications set by the institution, something that expresses a tangible reality. In contrast, indicators of customer satisfaction depend on a sensitive base that is difficult to touch the perception of customers). Perceived quality is the most important because it is the customer who ultimately decides with whom to deal with the organization or its competitor [17].

The Effect of Tangibility on Customer Satisfaction

The customers of the service organization are affected by many factors when they make a decision to buy or use a particular service, and among those factors that have been given great importance is the physical environment or the so-called tangible elements that help create the environment or psychological atmosphere when purchasing or completing the service It also helps to form the impressions of the customers about the institution and the services it provides. Also, service organizations try to use physical evidence or tangible elements to reinforce the significance of their intangible products [18].

Effect of Empathy and Assurance on Customer Satisfaction

Mutual feelings between the service provider and the customer are basic phenomena in every relationship with others. Nevertheless, these feelings play a very influential role, and among those directed towards customers are feelings of empathy and assurance [19].

The Effect of Responsiveness and Reliability on Customer Satisfaction

The customer is affected by the way the service is provided, and the time he waits to obtain the service, which requires the service provider to be able to deal effectively with all customers' requirements and respond to their complaints and work to solve them quickly and efficiently in order to convince them that they are appreciated and respected by the institution they deal with it, in addition, the response expresses the initiative in providing the service by the workers with open arms, that is, how many wait to receive the service. The service to meet his needs and satisfy him here requires a balance between the response and the behavior of the service provider; that is, the degree, accuracy, and speed of response have an impact on the customer's desires and gain his satisfaction [18, 19].

The Department of Vocational Rehabilitation in the Kingdom of Saudi Arabia

This department is concerned with following up the procedures related to the education of paralyzed persons and the vocational rehabilitation of persons with disabilities (physical, sensory, or mental) on the most appropriate professions for their remaining abilities after disability and disability, and their employment, in order to achieve humanitarian, social and economic goals and transform them into capable, productive individuals To interact and adapt in society in a social way that allows them to integrate, participate and assert themselves in their family and social surroundings by training suitable persons with disabilities for this, and following up on their training, whether inside or outside the centers [22].

As for the objectives of the Vocational Rehabilitation Department, they are to rehabilitate the physical, sensory, and mentally handicapped by developing their special abilities and aptitudes, by training them in the appropriate professions in order to re-adapt them psychologically, socially, and professionally and make them able to work and earn a legitimate income. There are several vocational rehabilitation centers in the Kingdom that specialize in rehabilitating and training persons with physical, sensory, or mental disabilities on professions appropriate to their abilities and transforming them from crippled human energies to produce individuals capable of interacting with their fellow members of the community by training them in any suitable profession. It is also possible to train in the external community, that is, outside the vocational rehabilitation centers, according to programs and a joint training plan between the centers and training authorities, on professions that are not available in the centers as well as studying the request for the payment of bonuses due to the trainees and the bodies that supervise their training and secured training requirements [22].

There are three vocational rehabilitation centers in the Kingdom. The vocational rehabilitation centers for males and females include a number of departments and units in which training takes place in professions suitable for persons with disabilities, including (electricity, binding, carpentry, office work, typewriter, computer, and secretarial work), painting, engraving, ornamentation, landscaping, sewing, detailing, women's works, central works) and others. Training for these professions takes place in the men's and women's sections, each according to what suits him and what he chooses [22].

Significance of the Study

This study could contribute to the literature on customer satisfaction among people with disabilities in comprehensive rehabilitation centers. It can be said that Customer Satisfaction is necessary to provide quality services to all groups of customers. Findings from this study can also inform policymakers about the importance of quality of service as a safeguard for customer retention.

Hypotheses

Hypothesis 1: There is a positive correlation between tangibility and customer satisfaction.

Hypothesis 2: There is a positive correlation between reliability and customer satisfaction.

Hypothesis 3: There is a positive correlation between responsiveness and customer satisfaction.

Hypothesis 4: There is a positive correlation between assurance and customer satisfaction.

Hypothesis 5: There is a positive correlation between empathy and customer satisfaction.

Hypothesis 6: Service Quality Gap Model contributes to customer satisfaction.

METHOD

Design

For the purpose of this study, quantitative survey research was employed. The independent variable is

Service Quality Gap Model, while the dependent variable is customer satisfaction.

Population

All people with disabilities are targeted. There are three vocational rehabilitation centers in the Kingdom. The vocational rehabilitation centers for males and females include a number of departments and units in which training is carried out on professions suitable for persons with disabilities, including (electricity, binding, carpentry, office work, typewriter, computer, secretarial, painting, engraving, decoration, and coordinating Gardening, sewing, tailoring, women's works, central works.) and others. Training for these professions takes place in men's and women's sections.

Sample

A convenience sampling method was used to recruit participants. The inclusion criteria were as follows: Persons with physical disabilities such as amputees of the upper or lower extremities, paralyzed, blind and visually impaired, persons with mild mental disabilities, deaf and dumb, and hard of hearing. Participants were 150 individuals with disabilities (females, n= 10, 6.66%, and males 140, 93.33%). All of them voluntarily completed a consent form.

Instrument

A 22- item survey instrument was developed particularly for this research study. The first part is concerned with the demographic information, while the second part is concerned with the tools questions. The five-point Likert scale (strongly agree, somewhat agree, disagree, disagree, strongly disagree) was used to score the research tool, giving the response Strongly disagree (1), disagree (2), somewhat agree (3) Agree (4), strongly agree (5). The content validity of the scale was examined by a group of 10 experts. They assessed the relevance of each item using a four-point

Table 1: Reliability Analysis

Variable	Cronbach's Alpha	Remarks
Tangibility	0.756	Reliable
Reliability	0.843	Reliable
Responsiveness	0.828	Reliable
Assurance	0.856	Reliable
Empathy	0.883	Reliable
The scale	0.901	Reliable

Likert scale (where 1 represents "irrelevant" and 4 represents "highly relevant"). They provided suggestions and comments. The 22 items were judged to be quite or highly relevant. A content validity index was calculated at the item level (I-CVI = 0.90). Reliability analysis using Cronbach's Alpha showed that all of the four variables used in this research were reliable, as shown in Table **1**.

Procedures

Prior to administering the scales, people with disabilities were informed about the purpose of the study and voluntarily completed a consent form. To ensure that the respondents responded to the items honestly and sincerely, they were told not to identify themselves in any way on the scale paper. They were also informed that they should not be concerned with anything concerns their participation in the study, and their responses are for research purposes only and would be kept confidential. All data were entered in an SPSS file.

Data Analysis

The data were analyzed with Pearson correlation and multiple regression. Multiple regression was used to explore the relative contributions of the Service Quality Gap Model to the prediction of customer satisfaction among people with disabilities in comprehensive rehabilitation centers.

RESULTS

Descriptive Data and Inter-Correlations

Table **2** shows the means, descriptive statistics, and inter-correlations of service quality gap model subscales and customer satisfaction. Table **2** shows that there are significant correlations between service quality gap model subscales and customer satisfaction. Customer satisfaction correlates positively with tangibility (r =0.552), reliability (r =0.455), responsiveness (r =0.580), assurance (r =0.608) and empathy (r =0.542) (p <0.01).

Service Quality Gap Model as a Predictor of Customer Satisfaction

Results presented in Table **3** show that the independent variables (tangibility, reliability, responsiveness, assurance, and empathy), when put together, yielded a coefficient of multiple regression (R) of 0.664 and a multiple correlation square of 0.621.

Table 2: Descriptive Statistics and Inter-Correlations of Service Quality Gap Model Subscales and Customer Satisfaction

Variables	1	2	3	4	5	6
Tangibility						0.552**
Reliability						0.455**
Responsiveness						0.580**
Assurance						0.608**
Empathy						0.542**
Customer Satisfaction						
Mean	14.32	20.15	15.21	16.18	20.56	
Standard deviation	2.14	1.78	1.88	1.76	1.44	

** $P < 0.01$.

Table 3: The Regression Results of the Predictor Variables (Tangibility, Reliability, Responsiveness, Assurance, and Empathy) and the Outcome Measure (Customer Satisfaction)

Model Summary[b]									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change statistics				
					R Square change	F Change	Df1	Df2	Sig. F change
1	0.300[a]	0.664	0.621	18.20103	0.090	6.279	5	144	0.003

[a]Predictors: (Constant), Tangibility, Reliability, Responsiveness, Assurance, and Empathy.
[b]Dependent Variable: customer satisfaction.

Table 4: Summary of Multiple Regression Analysis between the Predictor Variables (Tangibility, Reliability, Responsiveness, Assurance, and Empathy) and the Outcome Measure (Customer Satisfaction)

ANOVA					
Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	4160.269	5	2080.134	6.279	0.003[a]
Residual	42072.231	144	331.277		
Total	46232.500	149			

[a]Predictors: (Constant), Tangibility, Reliability, Responsiveness, Assurance, and Empathy.
[b]Dependent Variable: customer satisfaction.

This shows that 62.1% of the total variance in customer satisfaction of those who participated in the study is accounted for by the combination of tangibility, reliability, responsiveness, assurance, and empathy. The table also indicates that the analysis of variance of the multiple regression data produced an F-ratio value significant at 0.05 level ($F(5, 144) = 6.279$; $P < 0.01$).

As for results displayed in Table **5**, each of the five independent variables made significant individual contributions to the prediction of customer satisfaction. The results indicated that the following beta weights, which represented the relative contribution of the independent variables to the prediction, were observed. Mindfulness ($b = -0.840$, $t = -3.313$; $P < 0.01$) and resilience ($b = 0.414$, $t = 1.921$, $P < 0.05$).

The normal probability plot of the residuals, as shown in Figure **1**, is approximately linear. This supports the condition that the error terms are distributed in a normal way.

DISCUSSION

The purpose of this study was to investigate the effects of service quality gap model subscales on one outcome measure, namely, customer satisfaction, as well as investigating the relative contribution of service quality gap model subscales to customer satisfaction among people with disabilities in vocational rehabilitation centers. Additionally, the aim was to find out if there were relationships between and among service quality gap model subscales and customer

Table 5:   **Relative Contribution of the Independent Variables to the Prediction of Job Burnout. Coefficients[a]**

Model	Unstandardized coefficients		Standardized coefficients	t	sig
	B	**Std error**	**Beta**		
(constant)	54.963	8.246		6.666	0.000
Tangibility	0.840	0.253	0.287	3.313	0.001
Reliability	0.614	0.225	0.246	2.621	0.001
Responsiveness	0.635	0.234	0.250	2.744	0.001
Assurance	0.619	0.229	0.248	2.635	0.001
Empathy	0.711	0.241	0.267	2.998	0.001

[a]Predictors: (Constant), Tangibility, Reliability, Responsiveness, Assurance, and Empathy.
[b]Dependent Variable: customer satisfaction.
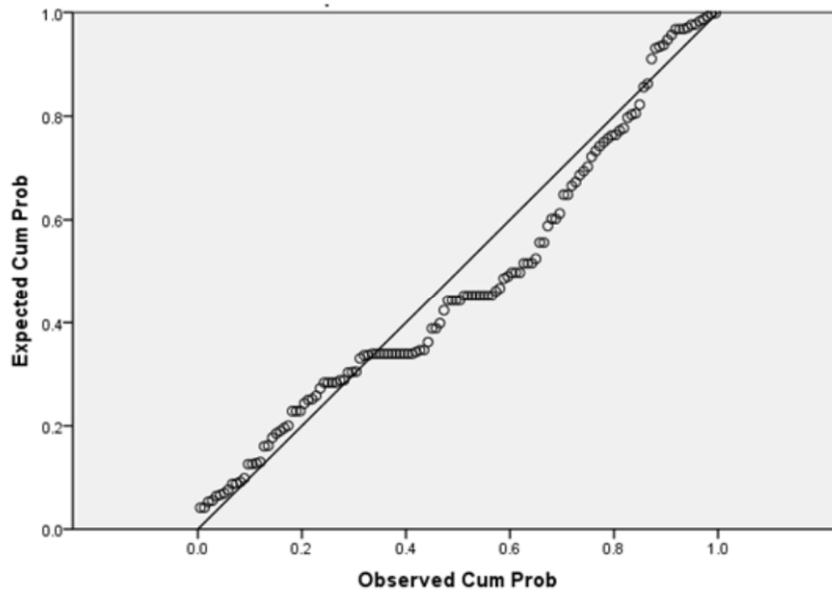
Figure 1: Normal P-P plot of regression standardized residual.

satisfaction among people with disabilities in vocational rehabilitation centers. In this regard, the findings extend our knowledge on the association between service quality gap model subscales and customer satisfaction among people with disabilities in vocational rehabilitation centers.

The service quality gap model (SERVQUAL model) posits that tangible, reliability, responsiveness, assurance, and empathy are fundamental service quality elements that may strongly invoke customer satisfaction [23-25]. Customer satisfaction exists when services or products provided by service providers meet their expectations [26]. When perceived service quality is high, then it will lead to an increase in customer satisfaction. Service quality leads to customer satisfaction, and this is in line with Saravana & Rao [27], and Lee *et al*. [28] acknowledge that customer satisfaction is based upon the level of service

quality provided by the service provider [24]. A higher perception also indicates higher satisfaction as service quality and satisfaction are positively related [29]. This means that dimensions with higher perception scores depict higher satisfaction on the part of customers, and lower perception scores depict lower satisfaction. This customer satisfaction comes from the interaction between the consumer and service provider [24]. This finding has also supported and extended previous researchers' findings [19-29].

The findings of this study showed that the Service quality gap model (SERVQUAL model) with the appropriate implementation of tangibility, reliability, responsiveness, assurance, and empathy in vocational rehabilitation centers had been an important predictor of customers' satisfaction. This goes in line with previous literature [30-35].

CONCLUSION

We would like to draw attention to that the labor market in most countries of the world, even the developing ones, has expanded so that the work that people can do with disabilities has increased. Therefore, it is no longer possible in many cases to continue to rely on training within the workshops of rehabilitation centers and traditional works such as carpet making, ceramics industry, leatherwork, and knitting works. Or rely on work that consists of a small number of tasks and does not require training on the task or work for more than months. Hence, the training program within the rehabilitation centers or the specialized education schools (e.g., the professional preparatory stage) should be considered as a program intended to prepare for entering the work field on the basis of discovering tendencies, preparations, and refining capabilities, as well as by dealing with a work environment under the supervision of a specialist and training in the skills necessary for professional adaptation; this is called work behavior. Current research and practice within Vocational rehabilitation centers need to incorporate tangibility, reliability, responsiveness, assurance, and empathy as key dimensions of the service quality domain.

SUGGESTIONS FOR FURTHER RESEARCH

Further research should be carried out in order to enhance our understanding of the service quality gap model as a predictor of customer satisfaction among people with disabilities in Vocational rehabilitation centers, how they are measured because they are very important for service organizations and centers, especially those which provide services to individuals with disabilities (e.g., Persons with physical disabilities such as amputees of the upper or lower extremities, paralyzed, blind and visually impaired, persons with mild mental disabilities, deaf and dumb and hard of hearing). A similar study could be conducted with a larger sample size so that results could be generalized to a larger population.

LIMITATIONS

Some limitations in this study should be mentioned. Self-reported questionnaires for data collection have obvious biases such as shared method variance. Future studies should collect this information using other sources of information less prone to this type of bias, such as the interview process, peer review, or reports from parents.

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AVAILABILITY OF DATA AND MATERIALS

The datasets used and/or analyzed during the current study are available from the corresponding author on reasonable request.

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