

Limiting Accessibility: How Targeting Consumers with Disabilities Constrains Acceptable Prices for Innovations

MUSA ESSA 
JOHANNES BOEGERSHAUSEN 
GABRIELE PAOLACCI 

People with disabilities constitute 15% of the world's population with a total disposable income of more than \$2.6 trillion. However, few companies offer products tailored to the needs of this segment, making it important to understand how mass-market consumers react to innovations that target people with disabilities. Nine studies and six supplementary studies (twelve preregistered) reveal that innovations targeting consumers with disabilities are subject to comparatively greater scrutiny by mass-market consumers. Specifically, consumers find charging price premiums for innovative products less acceptable when they are targeted at people with disabilities. The aversion to targeting this segment occurs only when firms charge a price premium and persists even when firms provide cost justifications for the relatively higher prices. Drawing on research on disability stereotypes, we identify pity for people with disabilities as a critical driver of these reactions. Variations in pity across disabilities are related to the acceptability of a price premium for adaptive innovations. These findings are suggestive of a novel form of paternalism against consumers with disabilities. Paradoxically, this view may render the marketplace less inclusive for consumers with disabilities, as it could penalize companies that provide more options for this underserved segment.

Keywords: disability, pity, pricing, fairness, marketplace accessibility, stigma

INTRODUCTION

Disability is an umbrella term that describes both the medical (e.g., impairment) and social (e.g., stigma)

components of various human conditions involving physical, mental, psychological, and intellectual differences (World Health Organization 2011). Altogether, there are about 1.6 billion people with disabilities, constituting

Musa Essa (m.essa@tilburguniversity.edu) is a postdoc at Tilburg University, Warandelaan 2, 5037 AB Tilburg, The Netherlands. Johannes Boegershausen (boegershausen@rsm.nl) is Associate Professor of Marketing, Rotterdam School of Management, Erasmus University, Burgemeester Oudlaan 50, 3062 PA Rotterdam, The Netherlands. Gabriele Paolacci (gpaolacci@rsm.nl) is Associate Professor of Marketing, Rotterdam School of Management, Erasmus University, Burgemeester Oudlaan 50, 3062 PA Rotterdam, The Netherlands. Address all correspondence to Musa Essa. The first two authors contributed equally and are listed in reverse alphabetical order. This research is based on the dissertation of the first author. The authors thank the JCR review team for their constructive comments, particularly Mathew Isaac for being a very supportive and helpful associate editor. They are also grateful to Jen Argo, Romain Cadario, Christophe Lembregts, Vanessa Patrick, Hauke Roggenkamp, Camilla Zallot, and seminar participants at

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15% of the world's population (The World Bank 2023).¹ With an annual disposable income of more than \$2.6 trillion, consumers with disabilities also represent a sizeable market segment (Return on Disability 2024). Recently, a few pioneering companies across industries have begun bringing innovations to market that address their diverse needs. For example, in 2016, Tommy Hilfiger launched "Tommy Adaptive," a fashion line that includes shirts with magnetic buttons and jeans with Velcro fasteners instead of regular zippers, addressing the needs of people with limited motor abilities (e.g., missing limbs). Similarly, in 2022, the upscale home furnishing chain Pottery Barn launched its first "Accessible Home" line, including more than 150 pieces of furniture compliant with the Americans with Disabilities Act (ADA), such as pivoting mirrors and adjustable desks. Finally, in the gaming industry, Microsoft and Sony have launched adaptive controllers that, unlike their regular Xbox and PlayStation counterparts, feature large, fully programmable buttons and connect to external switches, buttons, mounts, and joysticks to help make gaming more accessible to people with limited mobility.

Though these initiatives are encouraging, adaptive products remain a rarity in most categories. Data from the Business Disability Forum (2022) suggest that 90% of consumers with disabilities may face difficulties during purchase decisions due to limited choice, design limitations, or insufficient information. Also suggestive of marketplace underrepresentation, data from Kantar's LINK+ (2021) ad database suggest that only 1% of all advertisements feature a person with a visible disability (see also Wang and Wei 2025).

As a market segment, consumers with disabilities are inherently complex to serve. First, recent work on marketplace inclusivity (Patrick and Hollenbeck 2021; Shulman and Gu 2024) emphasizes the importance of adopting an inclusive design approach, that is, designing products and services with extreme users in mind so that they are accessible to all people, and creating the best match between the user and the product. This approach is promising. For example, the OXO Good Grips kitchen tools not only accommodate people with limited grip strength (e.g., due to arthritis) but also work well for the mass market. However, such designs are sometimes incompatible with the preferences of the mass market (e.g., few mass-market consumers would prefer magnetic buttons to standard buttons on formal dress shirts). Moreover, disability is a broad umbrella term comprising groups of people (e.g., the U.S. Department of Labor's A to Z list of "disabilities and

workplace accommodations" features 102 different disabilities) with heterogeneous attributes and preferences, making it challenging to develop a one-size-fits-all adaptive innovation that effectively addresses the needs of *all* consumers with disabilities. Second, many firms have limited experience and expertise within their in-house research and development teams to pursue this segment. Third, managers might also question the commercial viability of this segment due to both top- (e.g., insufficient volume) and bottom-line considerations (e.g., inability to realize cost savings via economies of scale). Interestingly, one of the adaptive fashion pioneers, Tommy Hilfiger, encountered significantly higher costs (i.e., 25–30%) and lower margins for its Tommy Adaptive products (Kenny and Keenan 2023). Rather than commercial goals, the personal experience of its founder, Tommy Hilfiger, who has two children on the autism spectrum, was a critical catalyst for the brand's engagement in this space (Hoireabhaird 2018).

While these explanations concern either firm- or market-related factors, our research examines *customer-based* constraints that companies may face when targeting people with disabilities. Given the higher cost of producing adaptive products, they are usually sold at a price premium. For example, in the gaming industry, the Adaptive Xbox Controller and the Sony Access controller have price premiums of 67% and 20%, respectively. How do mass-market consumers react to these premiums? Consider the example of Nike's Go FlyEase sneaker, an innovative model launched in 2021 that allows for hands-free entry, which was sold at a 67% price premium compared to the base model. Despite not being marketed to people with disabilities specifically, there was widespread public and viral outcry in response to Nike's premium pricing and limited initial distribution strategy, accusing the brand of being immoral and seeking to exploit people with disabilities (CBC 2021). As illustrated in Table 1, such premium pricing strategies are commonplace for the small number of adaptive innovations offered by major brands. To collect additional preliminary field evidence for such reactions (Boegershausen et al. 2022), we scraped the replies ($N=485$) to a viral TikTok video in which an influencer praised the launch of Pottery Barn's "Accessible Home" line. Despite the favorable stance of the influencer regarding Pottery Barn's strategy, almost a third of all replies (28%) explicitly mentioned the prices of Pottery Barn's innovative "Accessible Home" collection. Of these comments, the price mentions were significantly more likely to be negative (73.9%) than positive (26.1%, $\chi^2(1) = 31.56, p < .001$).

Drawing on these illustrative examples, we propose that mass-market consumers (i.e., consumers not targeted by adaptive innovations) apply particularly

1 We use person-first (e.g., consumers with a disability) and identity-first (e.g., disabled consumers) interchangeably to describe people with disabilities, given the diversity of preferences in different communities of people with disabilities.

TABLE 1

ILLUSTRATIVE EXAMPLES OF MAJOR BRANDS' ADAPTIVE INNOVATIONS AND PRICING STRATEGY

Brand	Adaptive innovation	Description ^a	% Price premium ^a	Launch date
Nike	Go FlyEase	Sneakers offering hands-free entry via a tensioner band and a bi-stable hinge that hold the shoe in a steady position while open.	67%	April 2021
Microsoft	Adaptive Xbox Controller	A controller designed for gamers with limited mobility that serves as a unified hub for devices to make gaming more accessible.	67%	September 2018
Sony	Access Controller	A highly customizable PlayStation 5 controller kit designed to make gaming more accessible.	20%	January 2023
LEGO	LEGO Braille Bricks	LEGO Braille Bricks feature different patterns of studs on top that spell letters, numbers, and symbols in braille, allowing blind and visually impaired children to learn the language while playing.	157%	September 2023
Victoria's Secret	VS and PINK Adaptive	Innerwear collection (e.g., bras, panties) designed for people with disabilities featuring magnetic closures, front adjustable straps, and sensory-friendly fabrics.	42%–49% (depending on the product)	October 2023
MiaTui Bags	Samantha Inclusive Bag	Mobility clips to attach handbags to wheelchairs. The clips must be purchased as an add-on to make the regular handbags adaptive.	6%–18% (depending on the price of the bag)	February 2018
Anthropologie	Anthro Adaptive Style	A collection of adaptive clothing pieces designed with features that make them easier for universal wear, such as magnetic closures, easy-access zippers, and patch pockets.	None	June 2024
Tommy Hilfiger	Tommy Adaptive	An extensive line of adaptive fashion products (e.g., shirts, jeans, and jackets), including products with easy closures (e.g., magnetic zippers and buttons) and seated wear (i.e., fashion items for wheelchair users).	Not applicable ^b	January 2017
Pottery Barn	Accessible Home	A line of 150+ ADA-compliant furniture pieces (e.g., desks, dining tables, vanity sinks).	Not applicable ^b	July 2022
JanSport	Adaptive Collection	Adaptive backpacks with easy-to-adjust straps, smooth and secure zippers, and special extra compartments.	Not applicable ^b	January 2023

^aOur Open Science Framework repository features screenshots of the product pages and the prices for the adaptive innovations and non-adaptive reference products used to compute the price premiums for the adaptive innovations. All prices were collected in January 2025.

^bThe overlap between the adaptive product lines at Pottery Barn and JanSport and their non-adaptive products was minimal. For Tommy Adaptive, there were no direct matches with non-adaptive products. Yet, the prices of the products in the Tommy Adaptive line were directionally lower than those of similar non-adaptive products.

stringent standards when they evaluate firms that target people with disabilities. Despite the higher costs often inherent in designing and producing innovative features and materials, we hypothesize that consumers expect firms to charge lower or no price premiums for innovations targeting consumers with disabilities than for innovations targeting other segments. Building on research on disability stereotypes (Nario-Redmond 2019) and the theory of vulnerability-based morality (Dijker 2014), we propose that people feel pity toward

consumers with disabilities as these are stereotypically perceived as vulnerable and dependent. The experience of pity, in turn, triggers concern for the well-being of this segment, which, in a marketplace setting, manifests as judging conventional marketing strategies like charging premium prices for innovations as less acceptable.

Across nine studies and six [supplementary studies](#) with hypothetical and consequential choices, we demonstrate that a price premium typically deemed acceptable for an innovative product is judged as less acceptable

when consumers have a disability. Our research demonstrates that pity is central to this double standard and can also explain differences *across* disabilities. We also explore how these perceptions affect downstream consumer behaviors and potential strategies for firms to serve consumers with disabilities without backlash from the mass market.

Our research makes three contributions. First, whereas extant work on marketplace morality shows that the perceived fairness of marketing and pricing strategies varies as a function of *firm* characteristics (e.g., firm size; Yang and Aggarwal 2019), product *category* (e.g., categories guided by communal norms; McGraw, Schwartz, and Tetlock 2012), and *product* features (e.g., whether a product eliminates vs. reduces symptoms; Isaac 2023), our investigation of consumer disabilities highlights how *which consumers* a company targets also affects the scope of acceptable marketing strategies. This finding speaks to earlier conceptual (Xia, Monroe, and Cox 2004) and analytical work (Cohen, Elmachoub, and Lei 2022) hinting at the potential importance of customer characteristics for fairness judgments. Second, we establish the role of pity as a marketplace-prevalent affective reaction, offering the first empirical test of Dijkster's (2014) theory of vulnerability-based morality about how feelings like pity shape the evaluation of third parties (e.g., brands) that are perceived to impact the well-being of pitied targets (i.e., consumers with disabilities). We suggest that pity is a common affective state that is understudied in marketing despite its importance across contexts (for a recent exception, see van der Sluis et al. 2025), including charitable donations and customer–employee interactions. Third, we contribute to an emerging research stream on barriers to marketplace accessibility (Grewal and van der Sluis 2024) by spotlighting the heterogeneity captured under the “disability” label. We document significant heterogeneity in people's inferences about the lived experiences of more than 100 different disabilities. Doing so is an important first step to unpack how the specific features and characteristics of different disabilities shape others' perceptions and treatment of these individuals. Taken together, our research provides insights for companies interested in making their assortment more accessible and strategies to avoid negative reactions from their broader potential customer base.

CONCEPTUAL DEVELOPMENT

To thrive, companies need consumers and other stakeholders to perceive their strategies and actions as fair, that is, “reasonable, acceptable, or just” (Xia et al. 2004, 1). Perceiving a company to employ unacceptable strategies can lead to negative reactions, including reduced patronage (Mohan et al. 2018), moral outrage (McGraw et al. 2012), and boycotting (Grégoire, Laufer, and Tripp 2010). This research focuses on the perceived

fairness of firms' pricing strategies for launching novel, innovative products. A principal motivation for companies to invest in, develop, and bring innovations to market is to enhance current cash flow levels and accelerate future growth by charging a price premium compared to existing products (e.g., Ahlstrom 2010; Kumar, Scheer, and Kotler 2000; Tang, Zhang, and Peng 2021). Innovations that offer novel and meaningful benefits for consumers allow firms to charge higher prices to improve margins (Varadarajan 2009). To the extent that these innovations are costly to design, develop, and bring to the market, innovations may also *require* higher prices for the company to expect a profit. However, consumers often have moral objections to too high prices (Kahneman, Knetsch, and Thaler 1986a, 1986b; Xia et al. 2004) and, more generally, closely scrutinize pricing strategies that might be deemed inappropriate (e.g., Bertini and Gourville 2012; Campbell and Winterich 2018; Lee and Winterich 2023).

There is thus a tension between the incentives that a firm faces when it chooses whether to invest in innovation and the reactions that consumers may have to how an innovation is marketed and to its price in particular. In this article, we propose and demonstrate that this tension is particularly strong for innovations that target consumers with disabilities. On the one hand, many adaptive product innovations require significant price premiums compared to relevant reference products to be commercially viable. On the other hand, as we argue below, consumers may expect firms to charge lower price premiums for adaptive (vs. non-adaptive) innovations.

Price Fairness, Innovations, and Consumer Characteristics

Previous research is silent, or at best not explicit, about whether consumers' characteristics, such as disability status, may influence third parties' judgments of the price fairness of an innovative product. The dual entitlement principle postulates that consumers are entitled to a reference price and companies are entitled to a reference profit (Kahneman et al. 1986a, 1986b) and that a pricing strategy is differently acceptable as a function of (1) the reference transaction, (2) the outcome to the firm and the buyer, and (3) the reason for the firm's action. Applying these principles to the context of price premiums for new products with meaningful benefits compared to existing products suggests that consumers may be relatively accepting of higher prices. First, the more innovative a product is perceived to be compared to existing products, the more acceptable higher prices for new products are, as innovativeness lowers the similarity to the reference transaction (i.e., earlier versions of the product without the innovation or other substitutes; Kuester et al. 2015). Second, higher prices for new products are more acceptable if new

features or technologies create value for consumers, such as greater convenience (Kumar et al. 2000). Finally, unlike cases of price-gouging (Kahneman et al. 1986b), price premiums for innovations have clearer cost-based rationales (e.g., offsetting the research and development expenditures), which should make them comparatively acceptable and attenuate negative reactions (Bolton and Alba 2006; Bolton, Warlop, and Alba 2003). Despite these insights, this theory is silent about whether price fairness depends on the characteristics of the people paying the price.

Besides the basic tenets of the dual entitlement principle, past research has drawn on Fiske's relational models theory (Fiske 1991, 1992) to identify several contextual factors that might influence the acceptability of conventional marketing strategies. For example, charging higher prices for products that produce greater benefits to consumers (i.e., are more innovative) is less acceptable for organizations that are communal in nature (e.g., religious organizations) or firms that are active in categories viewed as sacred or essential, such as the pharmaceutical industry (McGraw et al. 2012). Similarly, even within the same essential industry (i.e., the pharmaceutical industry), consumers expect drug manufacturers to offer a novel, more innovative product (i.e., a medicine that eliminates disease symptoms) at lower prices than a comparatively less innovative new product (i.e., a medicine merely reducing disease symptoms; Isaac 2023). Similar to dual entitlement, this stream of research is also silent about whether the characteristics of the target market shape perceptions of price fairness and the fairness of price for innovations in particular.

In the following, we argue that consumers may use different standards to evaluate a firm's pricing strategies for an innovative product. Our central proposition is that price premiums are less acceptable when the innovation is targeting, or is perceived as targeting, disabled consumers.

Disability Matters in Judgment of Price Fairness

We propose that consumers attend to the characteristics of the target market when evaluating the acceptability of a firm's pricing strategies for innovations. Specifically, we argue that consumers perceive price premiums to be comparatively less acceptable when firms target people with disabilities because the prevailing disability stereotypes trigger pity for these consumers. We also expect that not all disabilities are created equal; instead, these negative reactions should be more pronounced for the disabilities that evoke the most pity.

People with disabilities are often perceived as vulnerable, helpless, and dependent (Fiske et al. 2002). For example, Nario-Redmond (2010) found that "dependent"

was one of the most frequently listed trait words in a free-response listing task wherein participants were asked to describe men and women with disabilities. In contrast, people without disabilities were hardly ever described as "dependent" in the same study and were frequently characterized as "independent." As job seekers, people with disabilities often encounter pity from hiring managers due to unfavorable stereotypes portraying them as incompetent (Lyons et al. 2017). Similarly, research on ableism suggests that observers treat visible disability markers (e.g., a white cane used by people who are blind or have low vision) as "implied petitions for aid" (Nario-Redmond, Kemerling, and Silverman 2019, 738). Observers tend to offer more assistance than requested by people with disabilities (i.e., so-called overaccommodation; Duggan et al. 2011). Though perceptions of vulnerability and neediness are often inaccurate, they are widespread and contribute to people's tendencies to mispredict the affective experience of being disabled as holistically negative. This produces the so-called "disability paradox" (e.g., Ubel, Loewenstein, and Jepson 2005a; Ubel et al. 2005b), describing people's inclinations to excessively weigh the salient negative features of being disabled and overlook the more mundane and positive features of the lives of people with disabilities. Thus, people view the lives of those with disabilities as uniformly bad, leading to strong downward social comparisons.

These stereotypes and downward social comparisons make people likely to feel pity for people with disabilities (e.g., Fiske et al. 2002; O'Brien et al. 2018; van der Sluis et al. 2025). Pity is an other-focused, moral emotion that arises in response to perceiving worse-off, seemingly inferior others as suffering and vulnerable (e.g., Dijker 2001). It is important to note that there are various other terms to describe related affective reactions to others' suffering (e.g., sympathy, empathic concern). Although people often use these terms interchangeably (Florian, Mikulincer, and Hirschberger 1999), pity appears more accurately to describe the responses based on the persistent downward social comparisons of people with disabilities (e.g., Lazarus 1991, 287–289). It is an ambivalent emotion that entails perceiving the target (i.e., people with disabilities) as being lower in status while also approaching them with paternalistic positivity (Fiske, Cuddy, and Glick 2007). Although there are few empirical examinations of the triggers and consequences of pity in marketing and social psychology alike, Dijker's (2014, 2018) theory of vulnerability-based morality outlines how pity evokes a care mechanism guiding how people interact with pitied targets. Specifically, cues signaling the vulnerability of a social target (e.g., consumers with disabilities) may trigger a care mechanism that, once activated, increases people's sensitivity to the well-being of those perceived as vulnerable. People with disabilities are a prototypical

vulnerable group in this model, given that they are typically not blamed for their plight (i.e., attributing their state to external causes; [Dijker 2014](#)). Importantly, pity may also increase people's sensitivity to the actions of third parties (e.g., firms) that directly impact the well-being of the pitied others. Building on this theory of vulnerability-based morality ([Dijker 2014](#)), we propose that pity shifts consumers' expectations for firm conduct when launching innovations. Whereas price premiums for innovative products are acceptable in interactions with mass-market consumers, consistent with dual entitlement principles and guided by market-pricing norms, the pity-driven concerns about the welfare of disabled consumers lead mass-market consumers to expect those (adaptive) innovations at lower, more accessible prices.

In sum, we propose that charging premium prices for innovations is less acceptable when the firm targets consumers with disabilities compared to the mass market, and that pity explains the relationship between the target market (i.e., consumers with disabilities vs. mass-market consumers) and the acceptability of the firm's strategy. Given consumers' well-documented preferences for interacting with companies using fair and acceptable strategies ([Campbell and Winterich 2018](#); [McGraw et al. 2012](#)), we also expect these acceptability judgments to affect brand attitudes and choices.

Additional Processes. Another prevailing stereotype about people with disabilities, given the challenges they face in the labor market (e.g., [Bonaccio et al. 2020](#); [Tomba, Samosh, and Santuzzi 2022](#)), is that they lack financial means (e.g., due to their limited labor market participation) and are disproportionately dependent on welfare support ([Bakker 2022](#)). Consequently, people might dislike premium prices for innovations targeting people with disabilities, not because disability evokes pity but because it seems unacceptable to charge higher prices to consumers who happen to be poorer. Additionally, research on the stereotype content model suggests that the poor are perceived as warm but incompetent ([Durante, Tablante, and Fiske 2017](#)). While ambivalent, such an appraisal tends to elicit sympathetic responses ([Fiske et al. 2007](#)). Thus, in all studies that explore the process, we control for perceptions of wealth and demonstrate the effects of pity above and beyond wealth. Finally, to address the concern that the negative reactions toward premium pricing strategies might be caused by the perceived need for adaptive products, we used different product categories (e.g., sneakers, furniture, watches) and replicated our findings for hedonic products (i.e., gaming controllers).

OVERVIEW OF STUDIES

We report nine studies (eight preregistered) plus six [supplementary studies](#) (four preregistered; [web appendix B1–B6](#)) exploring variations in consumers' reactions to firms' strategies when launching innovative products as a function of *whom* the firm is targeting. Studies 1A–1D establish, across different product categories and outcome measures, that charging premium prices is less acceptable when firms target consumers with disabilities compared to mass-market consumers. Specifically, study 1A demonstrates that charging higher prices for innovative products is less acceptable when firms target consumers with disabilities (vs. mass-market consumers). Study 1B conceptually replicates this effect by eliciting fair prices for (adaptive) innovations. Study 1C shows, using an incentive-compatible measure, that the lower acceptability of premium prices when targeting people with disabilities can negatively affect brand choice. Finally, study 1D documents another downstream outcome of targeting consumers with disabilities (vs. consumers without disabilities) with premium-priced innovations: support for a petition calling on the company to reduce prices. Study 2 shows that these reactions are contingent on adaptive innovations demanding a comparative financial sacrifice from people with disabilities. People's objections to adaptive innovations are not due to companies targeting consumers with disabilities per se, but to charging premium prices when launching adaptive innovations. Studies 3A and 3B demonstrate the role of pity in shaping acceptability judgments of premium pricing for adaptive (vs. non-adaptive) innovations and show how pity reactions can vary across disability types. Study 3A provides mediation evidence that feelings of pity toward people with disabilities explain the effect above and beyond attributions of low wealth. Study 3B leverages an exhaustive list of 102 disabilities from the U.S. Department of Labor to examine how laypeople's inferences about the lived experiences of consumers with disabilities are related to their evaluation of a firm's pricing strategy. We show that variations in pity *across* disabilities, but not perceived wealth, are related to the acceptability of a price premium for adaptive innovations. Our final studies (studies 4A and 4B) explore different potential interventions that could attenuate or mitigate the effect of targeting consumers with disabilities. Study 4A demonstrates that our effect is not eliminated when firms justify higher prices based on higher costs. Finally, study 4B explores whether companies can recover the higher costs of developing adaptive innovations by "socializing" the costs of these new products. Specifically, we demonstrate that charging *all* consumers higher prices (e.g., +10%) is *more (less)* acceptable than charging a price premium (e.g., +30%) only from the focal target market when launching

products for consumers *with* (*without*) disabilities. All stimuli, data, and analysis syntax are available on the Open Science Framework: <https://osf.io/h7ast>

STUDY 1A: PRICE PREMIUMS ARE LESS ACCEPTABLE WHEN INNOVATIONS TARGET PEOPLE WITH DISABILITIES

Study 1A tested our prediction that price premiums are less acceptable for innovations that target consumers with disabilities (vs. mass-market consumers). We also explore whether this effect is robust across different categories. This study was preregistered: <https://aspredicted.org/fbqg-jk2j.pdf>.

Method

We recruited 801 U.S.-based participants from Prolific (48.9% female, $M_{\text{age}} = 40.1$). Participants read a scenario of a company developing an innovative technology framed as offering a benefit, making the product easier to use for consumers (e.g., sneakers that can be worn without using hands, furniture that can be adjusted to different physical needs). We randomly assigned participants to one condition in a 2 (target market: mass market vs. consumers with disabilities) $\times$ 4 (product replicate: watches, clothing, furniture, sneakers) between-subjects design, which varied the market the company was targeting and the product it produced. Participants learned that the brand decided to charge a 30% price premium for the new product with the innovative technology compared to the products without it. We selected a 30% price premium based on the pricing strategies of the few pioneering companies bringing adaptive innovations to the marketplace (table 1). Our dependent variable was the acceptability of the firm's pricing strategy, for which we averaged three seven-point items (i.e., fair/acceptable/ethical, $\alpha = 0.94$). Finally, participants reported their age and gender, and completed an attention check concerning the brand's pricing strategy. In line with our preregistration, we report all analyses on the full sample (without excluding the participants who failed attention checks) in the article. For this and all subsequent studies, we report results in the subsample that correctly recalled the pricing strategy in web appendix A.

Results and Discussion

A two-way ANOVA revealed a main effect of the target market, such that charging a price premium was significantly less acceptable when the target market was people with disabilities ($M = 3.17$, $SD = 1.58$) versus the mass market ($M = 4.15$, $SD = 1.45$; $F(1, 793) = 86.11$, $p < .001$, $\eta_p^2 = 0.098$). The interaction between the target

market and product replicates was not significant ($F(3, 793) = 1.10$, $p > .34$), and the effect of target market was significant for each replicate ($ps < .001$; figure 1).

The results of study 1A provide support for our prediction that the acceptability of price premiums for innovations depends on whom the company is targeting. Across different product categories, innovations, and ways of describing disabilities (e.g., unspecified physical disability, missing limbs), higher prices for innovations were considered less acceptable when the target market is consumers with disabilities. Additionally, we show that this effect emerges across different product categories (e.g., varying in whether they are necessary for the target market).

STUDY 1B: PEOPLE THINK CONSUMERS WITH DISABILITIES SHOULD PAY LESS

To ensure that the distaste for a price premium while targeting consumers with disabilities is not specific to the amounts we selected for our first study, we changed the design and dependent variable in study 1B. Instead of presenting a price premium, we asked participants to indicate an acceptable price for an innovative product. We predicted that the acceptable price for the innovative product would be lower when the target market was consumers with disabilities. This study was preregistered: <https://aspredicted.org/h6m3-bmj2.pdf>.

Method

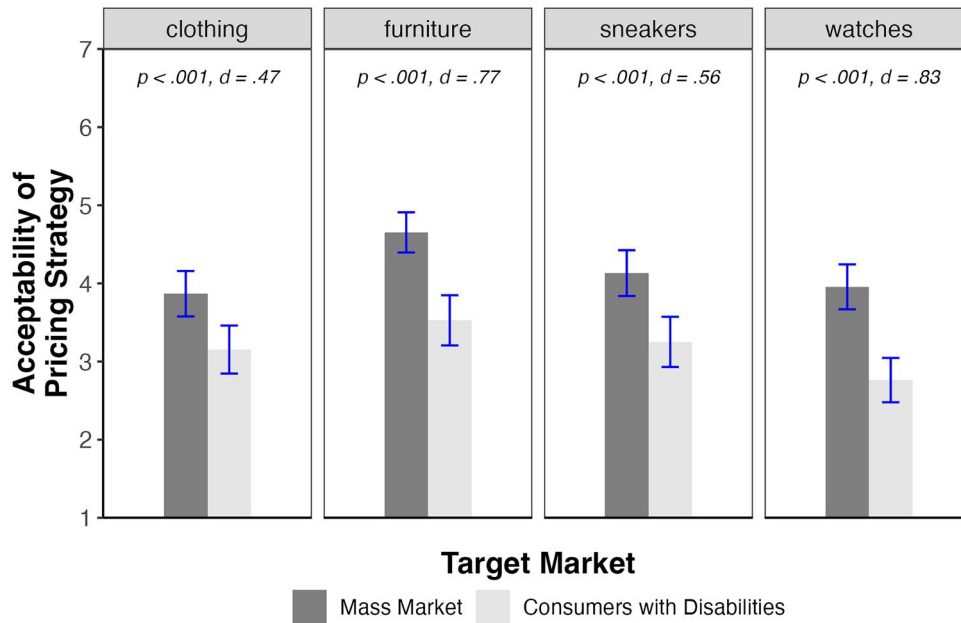
We recruited 601 U.S.-based participants from Prolific (48.9% female, $M_{\text{age}} = 39.4$). In a between-subjects design, participants were randomly assigned to read about a company that had developed a new sneaker offering hands-free entry, reducing the time for "customers with disabilities" (disability condition) or "customers" (mass market condition) to put on their shoes by half. Participants indicated an acceptable price premium for the sneakers with the new technology compared to the model without the technology, using a single 13-point item with 5% increments ranging from -30% to +30% with 0% (same price) as the scale's midpoint.

Results and Discussion

As predicted, customers with disabilities were expected to pay significantly lower prices ($M = 7.18\%$, $SD = 12.15\%$) than mass-market customers ($M = 9.86\%$, $SD = 9.47\%$, $t(599) = 3.01$, $p = .003$, $d = 0.25$). These findings demonstrate that when companies target consumers with disabilities, consumers expect them to charge lower prices. This effect emerged even though the benefits of the innovative product are potentially greater, in absolute terms,

FIGURE 1

PRICE PREMIUMS FOR INNOVATIONS ARE LESS ACCEPTABLE WHEN TARGETED AT CONSUMERS WITH DISABILITIES



NOTE— $N = 801$. The graph displays the means and the 95% confidence interval as error bars.

for consumers with disabilities who might not be able to use their hands compared to mass-market consumers who typically can.

STUDY 1C: EFFECTS ON BRAND CHOICE

Study 1C aims to replicate the result that a price premium is perceived as less acceptable when the innovation targets consumers with disabilities and also explores whether employing this strategy adversely affects brand choice. We employ an incentive-compatible design to demonstrate that acceptability judgments influence brand choice. To test this, we used our furniture scenario from study 1A. All participants learned about a company launching an innovative product at a premium price. In addition to measuring acceptability judgments, we asked participants to choose between two gift cards. We predict that participants will be less likely to choose the gift card of the focal brand when it targets consumers with disabilities. This study was preregistered: <https://aspredicted.org/pdj3-9c3n.pdf>.

Method

We recruited 995 U.S.-based participants from Prolific (47.8% female, $M_{\text{age}} = 36.2$). In a between-subjects design, participants read about Pottery Barn's

development of a new line of furniture that could be adjusted to suit the needs of customers with "different heights and weights" (mass market condition) or "physical disabilities" (disability condition). Participants also learned that the brand priced its new furniture line 40% higher than similar products without the innovative technology. We used the same acceptability scale as in study 1A ($\alpha = 0.92$). Participants also chose which \$100 gift card they preferred to receive between Pottery Barn and an alternative furniture brand (Crate & Barrel). We truthfully reported to participants that we would randomly select one participant to send them the gift card they chose. Finally, participants reported their age, gender, and completed an attention check about the brand's pricing strategy.

Results and Discussion

Replicating study 1A, participants rated the acceptability of Pottery Barn's pricing strategy significantly lower in the disability condition ($M = 3.24$, $SD = 1.45$) compared to the mass market condition ($M = 3.95$, $SD = 1.33$, $t(993) = 8.14$, $p < .001$, $d = 0.52$). Importantly, participants were also significantly less likely to choose the gift card from Pottery Barn in the disability condition compared to the mass market condition (44.6% vs. 51.7%; $\chi^2(1) = 5.05$, $p = .025$, *Cramér's V*

= 0.07). As an exploratory analysis, we used 10,000 bootstrap replications to explore whether acceptability judgments mediated the effect of the target market (0 = mass market, 1 = consumers with disabilities) on choice. We found that the indirect effect was significant ($a \times b = -0.05$, $SE = 0.01$, 95% $CI = -0.07$ to -0.03). Using a consequential choice between gift cards, study 1C demonstrates that charging a price premium when launching innovations explicitly framed as targeting consumers with disabilities can affect not only fairness perceptions but also brand choice.

STUDY 1D: SIGNING A PETITION

Study 1D examines another downstream behavioral consequence of consumers' concerns about the firm's pricing strategy: whether they click on a link to sign a petition calling on the company to reduce the prices of the new product. Importantly, in study 1D, we do not prompt participants *explicitly* about the acceptability of the firm's pricing strategy. Compared to studies 1A–1C, this study also compares two target segments that are more precisely identified and differ only in the mention of their disability. Specifically, we focus on gaming controllers and compare innovations for “hardcore gamers” to “hardcore gamers with disabilities.” We predict that participants will be more inclined to click on the petition link when the product is marketed toward hardcore gamers with disabilities (vs. hardcore gamers). This study was preregistered: <https://aspredicted.org/3k8z-sc58.pdf>.

Method

We recruited 606 U.S.-based participants from Prolific (48.7% female, $M_{age} = 38.7$). Using a between-subjects design, participants read about a new gaming controller called “PlayFlex” (adapted from Sony's Project Leonardo materials), designed either for hardcore gamers or hardcore gamers with physical disabilities. The controller helps users play more easily, comfortably, and for longer periods. The scenario also stated that the PlayFlex controller is priced 50% higher than standard controllers without the innovative technology. After reading the scenario, participants answered an open-ended filler question about PlayFlex's target market (“Who was the target market of the previously described innovation (i.e., PlayFlex)?”) and completed an attention check on the firm's pricing strategy (“How does the price of PlayFlex compare to that of standard controllers on the market?”).

Next, we measured our dependent variable by telling participants about a recent petition on Change.org requesting a price reduction for PlayFlex. We provided a link to the petition and measured participants' actual

clicking behavior. No incentive was offered for clicking the petition link, and participants could proceed with the survey regardless of their choice. Finally, participants reported their age and gender.

Results and Discussion

As expected, participants clicked on the petition link almost twice as much when the target market was hardcore gamers with disabilities (26.1%) compared to when the target market was hardcore gamers (13.3%; $\chi^2(1) = 15.65$, $p < .001$, Cramér's $V = 0.16$). Thus, study 1D demonstrates another downstream outcome of the concerns about the firm's pricing strategy: their support for a petition calling on the firm to change their pricing. The effect in study 1D emerged despite not explicitly prompting participants to consider the acceptability of the firm's pricing strategy. Importantly, we also replicate our effect in a purely hedonic product category, gaming, attesting to the robustness of our core effect across categories characterized by different levels of necessity.

STUDY 2: TARGETING PEOPLE WITH DISABILITIES IS NOT DISTASTEFUL PER SE

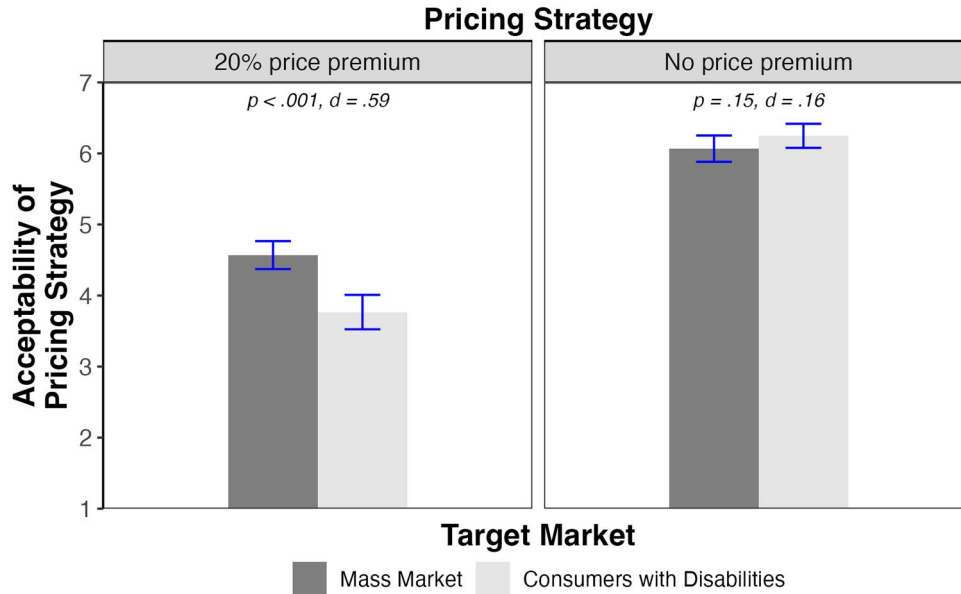
Study 2 tests whether consumers are averse to employing a price premium for products targeting consumers with disabilities or to the mere act of targeting consumers with disabilities. Recent research suggests that consumers might react negatively to companies selling identity-based products referencing marginalized or stigmatized identities (Du et al. 2025; Kim et al. 2023) or targeting certain demographic groups compared to advertising broadly (Shaddy, Friedman, and Toubia 2025). Yet, our account predicts that the negative reactions to companies launching innovations targeted at people with disabilities only emerge when these innovations are more expensive than the reference products. This study was preregistered: <https://aspredicted.org/m4xt-jx5j.pdf>.

Method

We recruited 601 U.S.-based participants from Prolific (49.1% female, $M_{age} = 39.6$). The study used a 2 (target market: consumers with disabilities vs. mass-market consumers) $\times$ 2 (pricing strategy: 20% price premium vs. no price premium) between-subjects design. We used the sneaker scenario from study 1A, but additionally manipulated whether the brand priced the innovative sneaker at the same price as its non-innovative counterpart or at a 20% price premium. Participants rated the acceptability of the brand's pricing strategy ($\alpha = 0.96$)

FIGURE 2

TARGETING CONSUMERS WITH DISABILITIES IS NOT DISTASTEFUL PER SE



NOTE— $N = 601$. The graph displays the means and the 95% confidence interval as error bars.

on the same scale as in study 1A. Finally, we collected demographics and a pricing strategy attention check.

Results and Discussion

A two-way ANOVA revealed significant main effects of the target market ($F(1, 597) = 9.44, p = .002, \eta_p^2 = 0.02$) and pricing strategy ($F(1, 597) = 386.91, p < .001, \eta_p^2 = 0.39$), as well as the predicted target market $\times$ pricing strategy interaction ($F(1, 597) = 23.61, p < .001, \eta_p^2 = 0.04$). As shown in figure 2, in the price premium condition, participants rated the company's strategy as significantly less acceptable when it targeted consumers with disabilities ($M = 3.77, SD = 1.50$) than when it targeted the mass market ($M = 4.57, SD = 1.22, t(298) = 5.09, p < .001, d = 0.59$). As predicted, we did not find this pattern in the no price premium condition ($t(299) = 1.43, p > .15, d = 0.16$). If anything, the company's pricing strategy was (directionally) rated as more acceptable when it targeted consumers with disabilities ($M = 6.25, SD = 1.06$) than when it targeted the mass market ($M = 6.07, SD = 1.14$). The findings of study 2 suggest that consumers do not find targeting consumers with disabilities distasteful or unacceptable per se.

STUDY 3A: THE MEDIATING ROLE OF PITY

Why do consumers find price premiums unacceptable for innovations that target consumers with disabilities? As outlined in our theorizing, we predict that disabilities trigger greater feelings of pity, which in turn make people resistant to strategies that appear to reduce the welfare of pitied consumers. Study 3A provides mediation evidence consistent with this process while controlling for wealth inferences about people with disabilities. This study was preregistered: <https://aspredicted.org/q9xb-vxgy.pdf>.

Method

We recruited 399 U.S.-based participants from Prolific (49.1% female, $M_{age} = 36.5$). We used the same between-subjects design (consumers with disabilities vs. mass market), scenario, and acceptability measure ($\alpha = 0.93$) as study 2. Additionally, participants indicated how much pity they felt toward the target segment on three items (pity/sorrow/sympathy, 1 = not at all; 7 = a lot; $\alpha = 0.89$) adapted from Lyons et al. (2017). We also measured participants' inferences about the comparative wealth of the targeted customers on a single item (-3 = much less than average; 0 = average; $+3$ = much

more than average). Finally, participants reported their age and gender and answered an attention check about the brand's pricing strategy.

Results and Discussion

Replicating previous studies, the firm's pricing strategy was rated as less acceptable when the firm targeted people with disabilities ($M = 3.53$, $SD = 1.58$) than when it targeted the mass market ($M = 4.65$, $SD = 1.33$, $t(397) = 7.71$, $p < .001$, $d = 0.77$). Next, we tested for mediation: target market (0 = mass market, 1 = consumers with disabilities) was a significant predictor of pity ($b = 1.27$, $SE = 0.16$, $t(397) = 8.03$, $p < .001$), which, in turn, was a significant predictor of acceptability judgments ($b = -0.28$, $SE = 0.04$, $t(396) = 6.31$, $p < .001$). Our estimation of the indirect effect using 10,000 bootstrap replications produced a significant indirect effect of the target market on acceptability judgments via pity ($a \times b = -0.35$, $SE = 0.08$, 95% CI = -0.52 to -0.21). Importantly, this indirect effect remained significant when we controlled for wealth inferences ($a \times b = -0.32$, $SE = 0.08$, 95% CI = -0.49 to -0.18). Wealth also mediated the effect of target market on acceptability judgments ($a \times b = -0.20$, $SE = 0.07$, 95% CI = -0.34 to -0.08) as consumers with disabilities were perceived to be significantly poorer ($M = 3.52$, $SD = 1.24$) than mass-market consumers ($M = 4.42$, $SD = 1.10$, $t(397) = 7.68$, $d = 0.77$) and these wealth inferences in turn predicted acceptability judgments ($b = 0.22$, $SE = 0.06$, $t(395) = 3.72$, $p < .001$).

These results suggest that pity is an important factor explaining people's aversion to price premiums for innovations addressing the needs of people with disabilities. To provide additional process evidence, we conducted two [supplementary studies](#). [Supplementary study 1](#) (see [web appendix B1](#) for full details) replicated study 3A using a different wealth measure. The results in [Supplementary study 1](#) were qualitatively identical to study 3A. [Supplementary study 2](#) ([web appendix B2](#)) employed a moderation-of-process approach focusing on a *single* consumer (rather than on consumer segments as in our main studies). Doing so allowed us to experimentally fix the wealth of the targeted consumer while also introducing a new experimental factor related to our focal pity process. Specifically, we manipulated the presence of information about the target being particularly low in warmth, which has been linked to reducing pity for social targets ([Dijker 2014](#); [Fiske et al. 2002](#)). We found evidence for moderated mediation of providing (vs. not providing) low warmth information for pity with a significant index of moderated mediation ($IMM = 0.28$, $SE = 0.10$, 95% CI = 0.11 to 0.50): the indirect effect of disability status via pity on acceptability judgments was significantly smaller when the low

warmth information was present ($a \times b = -0.15$, $SE = 0.06$, 95% CI = -0.30 to -0.04) than when it was absent ($a \times b = -0.43$, $SE = 0.11$, 95% CI = -0.67 to -0.23 ; see [web appendix B2](#) for full details).

STUDY 3B: VARIATION IN PITY ACROSS (MANY) DISABILITIES IS RELATED TO THE ACCEPTABILITY OF FIRMS' PRICING STRATEGIES

To provide further evidence for the importance of pity in driving acceptability judgments, study 3B exploits the heterogeneity subsumed under the disability label. Disability is a broad umbrella term that encompasses diverse lived experiences of different kinds (e.g., [Paterson and Hughes 1999](#); [Santuzzi and Waltz 2016](#)). Study 3B tests whether variations in pity *across* different disabilities are associated with the acceptability of price premiums for innovations, while controlling for potential differences in perceived wealth.

Method

We recruited 2,520 U.S.-based participants from Prolific (56.4% female, $M_{\text{age}} = 38.0$). To build a comprehensive list of disabilities, we used the "A to Z of Disabilities and Accommodations" webpage of the Job Accommodation Network (JAN). The JAN's list, a service provided by the United States Department of Labor's Office of Disability Employment Policy, offers information for employers and individuals to determine effective accommodations and comply with the ADA. Our study features all 102 disabilities included on the A-to-Z list. It is important to note that the JAN's A to Z list also features various forms of neurodiversity and conditions (e.g., pregnancy) that most lay people would typically not consider a disability. However, as we did not have any strong theoretical rationale for determining which conditions to exclude, we decided to be as comprehensive as possible and included all 102 disabilities.² For expositional clarity, we will refer to all conditions featured on the A-to-Z list as disabilities. The list covers a wide variety of disabilities, including sensory disabilities, physical impairments, and chronic illnesses.

Study 3B used a 3 (rating type; between-subjects) $\times$ 5 (disability; within-subjects) mixed design. We randomly assigned participants (between-subjects) to rate either (1) the acceptability of a price premium for an innovation, (2) their feelings of pity toward the targeted consumers, or (3) the perceived wealth of the targeted

2 The JAN list has one duplicate disability (i.e., the Chronic Fatigue Syndrome is featured as "Chronic Fatigue Syndrome/Myalgic Encephalomyelitis" and "Myalgic Encephalomyelitis/Chronic Fatigue Syndrome"). We retained both versions of the disability in our final sample.

consumers. Each participant provided ratings for 5 randomly selected disabilities, drawn from the full list of 102 disabilities. Participants saw each disability on a separate screen. For each disability, we first presented a brief definition that we generated via ChatGPT (e.g., “Cerebral Palsy: A group of disorders that affect movement and muscle tone or posture caused by damage to the immature, developing brain.”) and double-checked for consistency with the original definition on the JAN list.

Depending on the rating condition, participants rated acceptability, pity, or wealth. We measured the acceptability of charging a price premium with a single item (e.g., “A company is targeting consumers with Cerebral Palsy with a specific product tailored to their needs. The company charges a price premium for this new innovative product. In particular, it charges 30% more compared to the regular version of this product. How acceptable do you find this pricing strategy?”; 1 = Extremely unacceptable, 7 = Extremely acceptable). We measured pity with a single item: “Think about a typical person experiencing the following: Cerebral Palsy [including definition].” To what extent does thinking about this person make you feel pity? (1 = Not at all, 7 = Very much). Perceived wealth was also measured with a single item (“Think about a typical person experiencing the following: Cerebral Palsy [including definition]. How rich do you think this person is compared to the average person?”; -3 = Much poorer than average, 0 = About average, +3 = Much richer than average). Finally, participants reported their age and gender. We aggregated all data to the level of disability (i.e., our final N is 102). All definitions are available in the data file for study 3B on our OSF repository. Thus, approximately 40 participants rated the acceptability of price premiums, feelings of pity, and perceived wealth for each disability.

Results and Discussion

As shown in figure 3, there was substantial variation in feelings of pity as a function of the disability that people considered ($M = 5.07$, $SD = 0.78$, range = 3.15 to 6.48). For example, some of the disabilities on the JAN list, such as obesity and body odor, score very low on pity, whereas others, like cancer and fetal alcohol syndrome, score very high. As expected, there was a strong negative correlation between pity and the acceptability of a price premium ($r(100) = -.053$, $p < .001$). Next, we regressed the acceptability of charging a price premium on pity and perceived wealth. As predicted, the effect of pity was negative and significant ($b = -0.26$, $SE = 0.05$, $t(99) = 5.47$, $p < .001$). Thus, the more pity a disability evokes, the more unacceptable it is for firms to charge a price premium. Notably, the effect of perceived wealth

was close to zero and non-significant ($b = -0.06$, $SE = 0.11$, $t(99) = 0.53$, $p > .59$).

Study 3B introduces a new stimulus sampling paradigm to explore the heterogeneity of lived experiences subsumed under the “disability” label. We document significant variations in the extent to which different disabilities evoke pity. The results suggest that not all disabilities are created equal in the eyes of observers. Rather, the more pity a disability evokes, the lower the acceptability of premium pricing strategies. One factor that might have contributed to variation in pity across disabilities is onset controllability or the degree to which targets are seen as responsible for the onset of their disability (Jones et al. 1984). Specifically, an inspection of the distribution of disabilities across the pity spectrum suggests that disabilities perceived as onset-controllable elicited less pity (Dijker and Raeijmaekers 1999; Schwarzer and Weiner 1991; Weiner, Perry, and Magnusson 1988). Study 3B also suggests that pity is relatively more strongly associated with reactions to firm strategies, as the relationship between wealth inferences and acceptability judgments ($r(100) = 0.26$, $p < .01$) was substantially smaller than the pity-acceptability relationship and became non-significant when entering both variables as predictors.

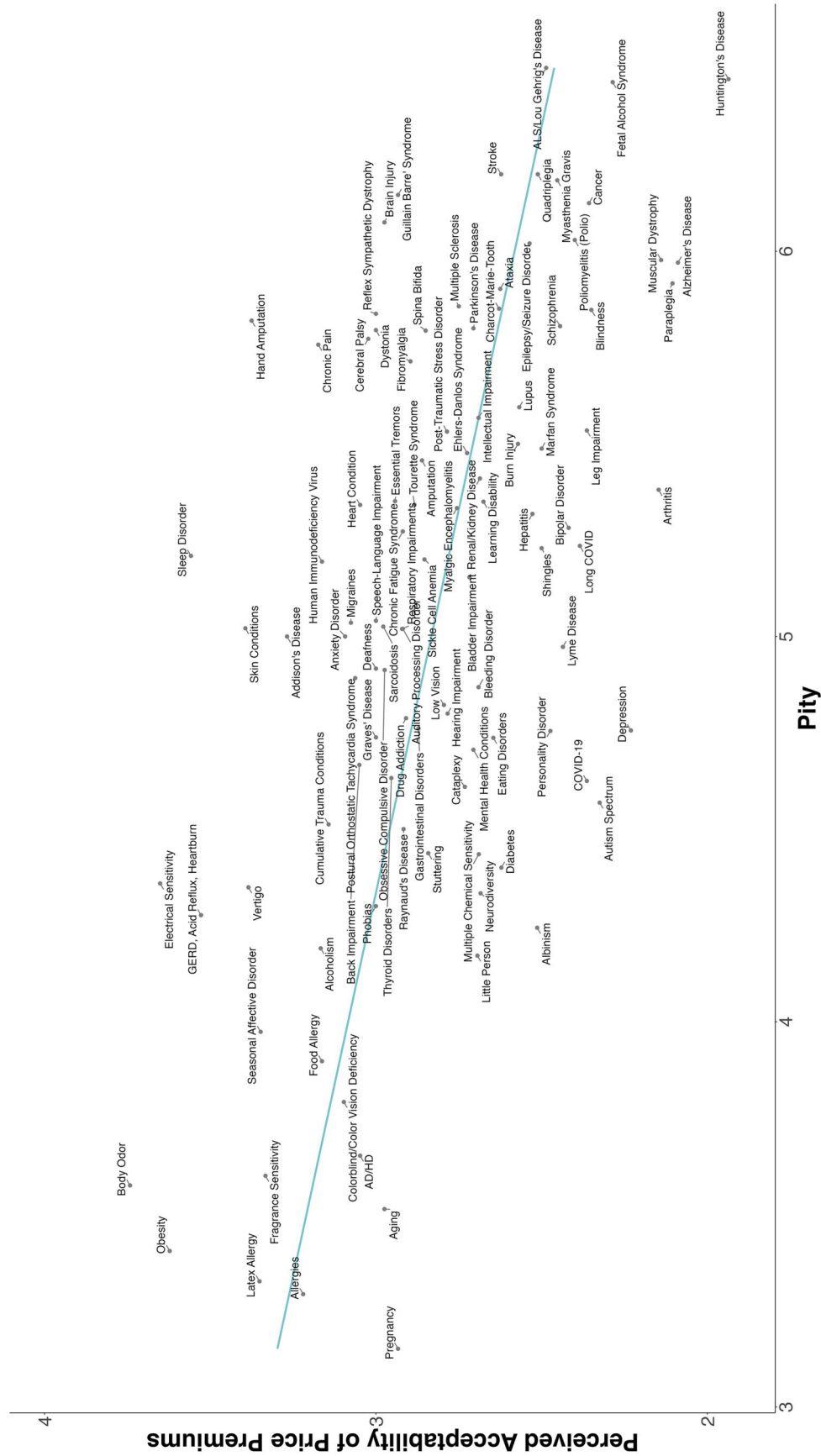
STUDY 4A: COST JUSTIFICATIONS DO NOT ELIMINATE THE EFFECT

The goal of study 4A was to explore the robustness of our effect and process in situations where firms provide explicit cost justifications (e.g., the increased cost of producing adaptive products). Our pity mechanism makes no prediction about a potentially moderating role of cost justification. However, highlighting higher costs may plausibly make it more acceptable for companies to raise prices (e.g., Bolton and Alba 2006; Bolton et al. 2003), which would be practically important to learn. This study was preregistered: <https://aspredicted.org/hkjt-7tjn.pdf>.

Method

We recruited 802 U.S.-based participants from Prolific (47.9% female, $M_{\text{age}} = 38.2$). This study used a 2 (target market: consumers with disabilities vs. mass market) $\times$ 2 (cost information: present vs. absent) between-subjects design. Study 4A used the same scenario as study 2. In the cost information present condition, participants were told that the costs for producing the new sneakers were significantly higher due to “more expensive raw materials, greater supply chain complexity, and extensive research and development expenditures” and thus to “maintain the same profit margin as for the sneakers without the EasyEntry™ technology” Atoms needed “to

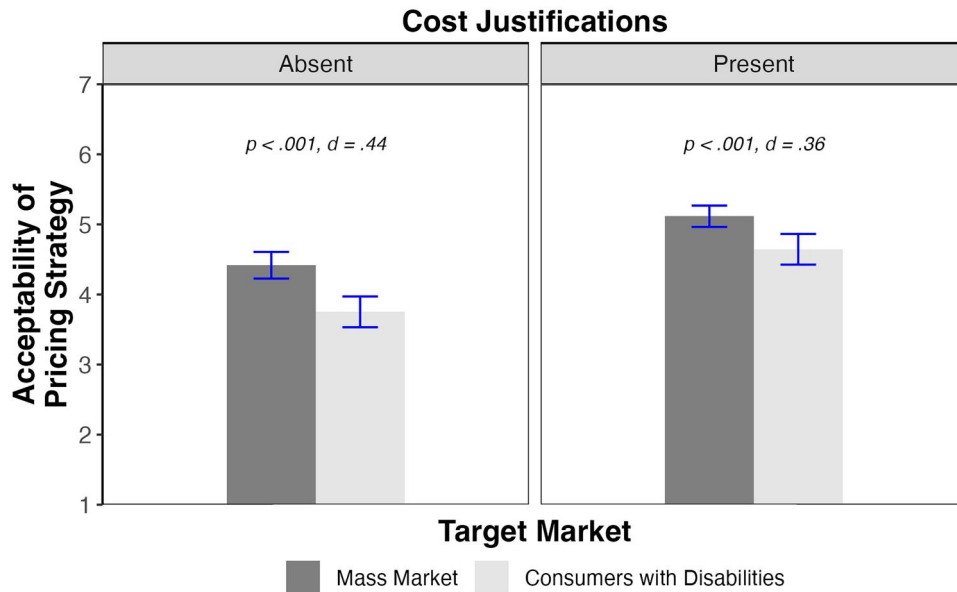
FIGURE 3
PRICE PREMIUMS FOR INNOVATIONS ARE LESS ACCEPTABLE WHEN A DISABILITY EVOKES MORE PITY



NOTE—The graph shows the means for acceptability judgments and pity of 102 disabilities based on 2,520 participants.

FIGURE 4

PROVIDING COST JUSTIFICATIONS FOR PREMIUM PRICING DOES NOT ELIMINATE THE EFFECT



NOTE— $N = 802$. The graph displays the means and the 95% confidence interval as error bars.

charge a higher price for the new model.” We used the same acceptability measure ($\alpha = 0.94$) as in study 2. Participants also responded to measures of pity ($\alpha = 0.87$) and perceived wealth from study 3A, and completed a manipulation check about perceived cost. Finally, participants reported their demographics and completed an attention check question about the brand’s pricing strategy.

Results and Discussion

We first checked whether the cost justification manipulation made the increased costs for the brand more salient. A two-way ANOVA only showed a significant effect of the cost justification manipulation ($F(1, 798) = 26.39, p < .001, \eta_p^2 = 0.03$), while neither the effect of target market nor the interaction was significant (both $ps > .11$). Participants perceived the costs of the new product as higher when the cost justifications were provided ($M = 1.52, SD = 0.77$) than when they were not ($M = 1.22, SD = 0.86, t(800) = 5.11, p < .001, d = 0.36$).

As shown in figure 4, a two-way ANOVA showed significant main effects of the target market ($F(1, 798) = 32.08, p < .001, \eta_p^2 = 0.04$) and cost justifications ($F(1, 798) = 60.82, p < .001, \eta_p^2 = 0.07$). Replicating previous studies, acceptability was lower when the target market was consumers with disabilities ($M = 4.22, SD = 1.60$) than when it was mass-market consumers ($M = 4.76,$

$SD = 1.25, t(800) = 5.30, p < .001, d = 0.37$). In line with past research, acceptability was also higher when the cost justifications were present ($M = 4.87, SD = 1.36$) than when they were not ($M = 4.11, SD = 1.47, t(800) = 7.54, p < .001, d = 0.53$). However, the interaction between target market and cost justifications was not significant ($F(1, 798) = 0.67, p > .41, \eta_p^2 < 0.001$). Next, we tested for mediation: target market ($-0.5 =$ mass market, $0.5 =$ consumers with disabilities) was a significant predictor of pity ($b = 1.03, SE = 0.11, t(798) = 9.52, p < .001$), which, in turn, was a significant predictor of acceptability judgments ($b = -0.23, SE = 0.03, t(799) = 7.25, p < .001$). Our estimation of the indirect effect using 10,000 bootstrap replications produced a significant indirect effect of the target market on acceptability judgments via pity both when cost justifications were present ($a \times b = -0.27, SE = 0.06, 95\% CI = -0.39$ to -0.17) and when they were absent ($a \times b = -0.21, SE = 0.05, 95\% CI = -0.31$ to -0.12). Consequently, a moderated mediation analysis produced a non-significant index of moderated mediation ($IMM = -0.06, SE = 0.05, 95\% CI = -0.16$ to 0.04). Controlling for wealth inferences did not alter the significance of these patterns (i.e., cost justifications present: $a \times b = -0.25, SE = 0.05, 95\% CI = -0.36$ to -0.15 vs. absent: $a \times b = -0.19, SE = 0.05, 95\% CI = -0.29$ to -0.11). Wealth also mediated the effect of target market on acceptability judgments.

Consumers with disabilities were perceived to be significantly poorer ($M = 3.68$, $SD = 1.30$) than mass-market consumers ($M = 4.58$, $SD = 1.15$, $t(800) = 10.29$, $p < .001$, $d = 0.73$), and these wealth inferences in turn predicted acceptability judgments ($b = 0.14$, $SE = 0.04$, $t(798) = 3.57$, $p < .001$). However, contrary to our results for pity, the index of moderated mediation was significant for wealth ($IMM = -0.08$, $SE = 0.03$, 95% CI = -0.15 to -0.02). Specifically, we found that when cost justifications were present, the indirect effect via wealth was significantly more negative ($a \times b = -0.17$, $SE = 0.06$, 95% CI = -0.28 to -0.06), than when the cost justifications were absent ($a \times b = -0.09$, $SE = 0.03$, 95% CI = -0.17 to -0.03).

These results further support the central role of pity in explaining reactions to price premiums for adaptive products. Study 4A also demonstrates that justifying price premiums with costs does not eliminate our focal effect. We also conducted a follow-up study (Supplementary study 3, see web appendix B3) that uses a different operationalization of cost justifications for price premiums to ensure the robustness of these patterns: specifically, in addition to the increased cost due to the innovation, we also highlighted that these premiums are necessary to allow the company to continue offering adaptive products. Yet, as in study 4A, the interaction between target market and cost justifications was not significant. Altogether, these results support the notion that even when explicitly told that an innovative adaptive product costs more to produce, consumers find it less acceptable to increase prices for innovations that target consumers with disabilities compared to the mass market.

STUDY 4B: PRICE PREMIUMS ARE ACCEPTABLE WHEN COSTS ARE SOCIALIZED

Given that cost justifications did not attenuate the negative mass market reactions, our final study tested an alternative strategy that firms may consider for launching adaptive innovations in a commercially viable manner. Specifically, we explored whether socializing the costs of innovations (i.e., increasing prices for *all* consumers) would mitigate negative reactions when launching adaptive innovations. Importantly, such a strategy might increase the commercial viability of serving consumers with disabilities. When companies socialize the costs of innovations, they distribute the burden of paying more to all consumers, rather than charging a price premium only from a narrower target market (e.g., consumers with disabilities). This study was preregistered: <https://aspredicted.org/5vz4-hj45.pdf>.

Method

We recruited 602 UK-based participants from Prolific (49.3% female, $M_{age} = 40.1$). This study used a 2 (target market: hardcore gamers with physical disabilities vs. hardcore gamers) $\times$ 2 (pricing strategy: premium prices for target market vs. socialized price premium) between-subjects design. Adapted from our scenario from study 1D, participants read about a new (adaptive) gaming controller called “PlayFlex” designed either for hardcore gamers or hardcore gamers with physical disabilities, offering the benefits described in study 1D. The scenario also described that the company producing the PlayFlex controller considered two pricing strategies to launch the (adaptive) innovation profitably. The two pricing strategies were either (1) pricing the PlayFlex controller 30% higher than standard controllers (i.e., only the target market would pay a price premium, just like in our other studies) or (2) increasing the price of *all* their controllers by 10% (i.e., socializing the costs of the innovation). Participants were told that both strategies would produce the same profit for the company. Next, participants rated the acceptability of the brand’s pricing strategy using our standard items ($\alpha = 0.95$). Finally, participants filled out an attention check asking them to choose the price premium chosen by the company, and they reported their age and gender.

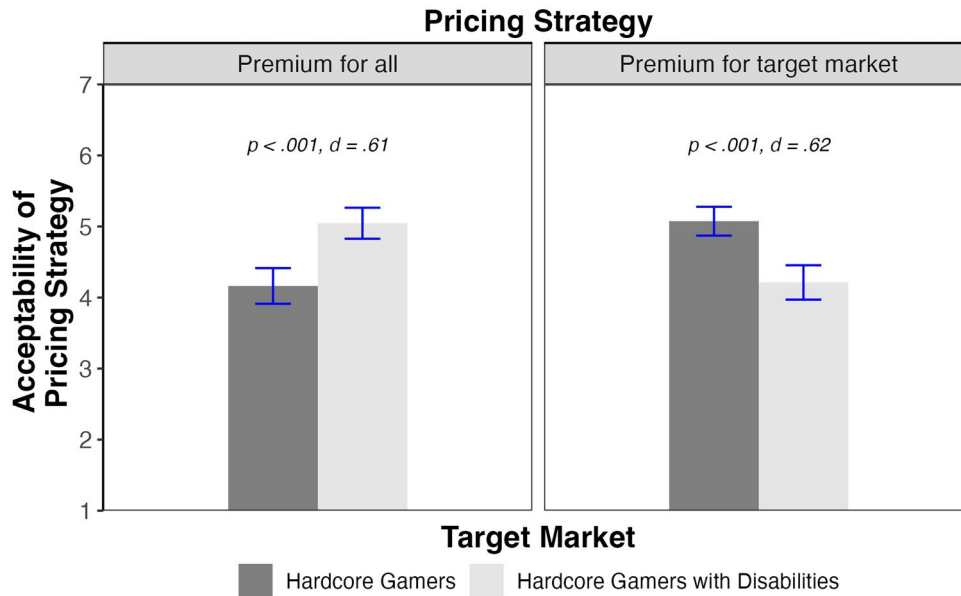
Results and Discussion

As shown in figure 5, a two-way ANOVA only produced the predicted significant interaction between the target market and pricing strategy ($F(1, 598) = 56.92$, $p < .001$, $\eta_p^2 = 0.09$). Neither main effect was significant: target market ($F(1, 598) = 0.01$, $p > .90$, $\eta_p^2 < 0.01$) and pricing strategy ($F(1, 598) = 0.11$, $p > .73$, $\eta_p^2 < 0.01$). Replicating previous studies, when *only* the target segment of the innovation alone paid a price premium, acceptability was lower when the target market was hardcore gamers with physical disabilities ($M = 4.21$, $SD = 1.50$) than when it was hardcore gamers ($M = 5.07$, $SD = 1.28$, $t(303) = 5.41$, $p < .001$, $d = 0.62$). In contrast, the pattern was reversed when the costs of the innovations were socialized (i.e., *all* consumers paid 10% more). Specifically, we found that acceptability was *higher* when the target market was gamers with physical disabilities ($M = 5.05$, $SD = 1.36$) than when it was hardcore gamers ($M = 4.16$, $SD = 1.53$, $t(295) = 5.26$, $p < .001$, $d = 0.61$).

Put differently, these patterns suggest that while socializing the extra costs of the innovation *increased* the acceptability of the firm’s pricing strategy when targeting consumers *with* disabilities ($M = 5.05$, $SD = 1.36$ vs. $M = 4.21$, $SD = 1.49$, $t(299) = 5.06$, $p < .001$, $d = 0.58$), it *decreased* the acceptability of the firm’s pricing strategy when targeting consumers *without* disabilities ($M = 4.16$,

FIGURE 5

DIFFERENTIAL EFFECTS OF SOCIALIZING THE COSTS OF INNOVATIONS



NOTE— $N = 602$. The graph displays the means and the 95% confidence interval as error bars.

$SD = 1.53$ vs. $M = 5.07$, $SD = 1.28$, $t(299) = 5.62$, $p < .001$, $d = 0.65$).

Study 4B suggests that socializing the costs of adaptive innovations might be a promising strategy for companies to serve people with disabilities in a commercially viable manner. This approach is promising for companies as it offers a path to balance concerns about economic viability and perceived fairness. By charging a price premium from all consumers, companies can recoup their research and development costs while still serving consumers with disabilities with adaptive innovations. Although we did not test this empirically in study 4B, it is also possible that mass-market consumers may feel a sense of pride in their role in subsidizing adaptive innovations, which could contribute to the acceptability of this pricing strategy. A potential limitation of study 4B is that we did not explore whether the higher acceptability for socializing the costs of the adaptive innovation would also increase the choice of the now more expensive non-adaptive products among mass-market consumers. Interestingly, we found that for non-adaptive innovations, socializing the costs of the innovation backfired, as consumers rated the acceptability of this strategy *lower* than charging a price premium only to the focal target segment. One potential explanation for this full reversal is that the mass-market consumers in this study (i.e., hardcore gamers) might evoke

specific associations that reduce consumers' willingness to subsidize them.

GENERAL DISCUSSION

This research uncovers a customer-based barrier for firms interested in bringing adaptive innovations to the market. Across nine studies using field, correlational, and experimental data, we find that consumers are less accepting of firms charging price premiums for adaptive versus non-adaptive innovations, even if firms incur higher costs for these products. The target market of adaptive innovations, consumers with disabilities, tends to evoke pity, which makes premium prices comparatively objectionable. Consistent with this mechanism, variations in pity across different disabilities are associated with the acceptability of launching adaptive innovations at premium prices. Paradoxically, these concerns by mass-market consumers might make marketplaces less accessible to people with disabilities as they may disincentivize companies to target this segment.

Theoretical Contributions

Our findings contribute to a better theoretical understanding of the factors that shape price fairness perceptions and marketplace accessibility. First and foremost, we extend work on firm- and product-related

determinants of price fairness (e.g., company type, product benefits, justifications for price changes) by highlighting the critical importance of *who* the company is targeting. Specifically, we demonstrated—across measures, settings, and product categories—that charging premium prices for innovations is viewed as less acceptable when these are (perceived as) targeting consumers with disabilities. This finding speaks to earlier conceptual work emphasizing the potential role of consumer characteristics in price fairness judgments (e.g., Heyman and Mellers 2008; Xia et al. 2004). Importantly, while other research has suggested more generalized negative effects from targeting stigmatized consumer identities (e.g., Du et al. 2025; Kim et al. 2023), we find that consumers specifically object to offering adaptive innovations at premium prices rather than launching innovations that target consumers with disabilities *per se* (study 2).

Second, we qualify earlier results suggesting that higher prices for new products are more acceptable when the similarity to the reference transaction is lower (Kuester et al. 2015). From a pure dual entitlement perspective, targeting a quite distinct new segment (i.e., consumers with disabilities) should reduce the similarity between the innovative adaptive product and the reference transaction (i.e., the earlier mass-market version of the product) and thus make price premiums more acceptable. Instead, the reactions we document to companies targeting people with disabilities, even in discretionary product categories (e.g., gaming controllers), seem more aligned with consumers' reactions to pricing in sacred product categories such as lifesaving drugs (e.g., Isaac 2023; Samper and Schwartz 2013). When it comes to adaptive innovations, consumers seem to similarly prioritize broader access via lower prices over allowing firms to capture the value of their innovations via premium prices. The findings of study 4B suggest that consumers may prefer prices to be uniformly higher across *all* consumers, rather than higher only for those who specifically benefit from adaptive innovations.

Third, our work adds to the nascent literature on stigma, firms' diversity, equity, and inclusion efforts, and marketplace accessibility by identifying the crucial role of pity in driving consumers' aversion to premium pricing for adaptive innovations. Leveraging research on ableism and disability stereotypes, our work offers a first empirical test of Dijker's (2014) theory of vulnerability-based morality. Specifically, we demonstrate that the degree to which targeted customers evoke pity constrains the corridor of acceptable firm strategies in the eyes of observers. While potentially benevolent in nature, such reactions might undermine the welfare of the pitied target market by discouraging companies from developing adaptive innovations. Notably, this secondary effect is unlikely to be anticipated by laypeople with simplified mental models of

welfare (Bhattacharjee, Dana, and Baron 2017; McCaffery and Baron 2006), who focus on immediately salient determinants (like the harm caused by paying a premium) and neglect indirect but potentially larger effects (i.e., the benefits of adaptive products that are only produced because of the possibility to charge a premium). By demonstrating that pity also shapes reactions to *third parties* (i.e., firms) based on how they approach the pitied target, our research complements recent work by van der Sluis et al. (2025) on how pity influences how consumers treat consumers with disabilities. Similar to their findings at the individual level in a gift-giving context, we uncover how pity may contribute to suboptimal outcomes at the market level. The negative reactions to companies charging price premiums for adaptive innovations may not accurately reflect the target market's preferences. Arguably, from a market efficiency perspective, it would be more desirable for consumers with disabilities to have the option to purchase expensive adaptive solutions than to have no options in a category.

We hope that our investigation motivates a more thorough exploration of how pity, a common affective response to the suffering and vulnerability of others (Weiner et al. 1988), shapes consumer reactions beyond price fairness judgments, such as donations and other prosocial behaviors (Lantos et al. 2020). Future research could also more explicitly test the degree to which downward social comparisons (see also O'Brien et al. 2018) are necessary for these effects to emerge. Notably, variations in pity across stigmatized groups also offer a novel explanation for why pricing strategies that disadvantage certain consumer groups do not elicit much moral outrage or backlash against firms. For example, in a field experiment with a catalog retailer, Anderson and Simester (2008) explored reactions to premium prices for larger sizes of women's apparel. Their central finding was that the premium price strategy negatively affected sales of the focal higher-priced larger sizes (i.e., 4X and 5X). However, charging these premium prices for larger sizes did not suppress the demand for the regular-priced "mass-market products" (i.e., XL, 1X, 2X, and 3X). Our research offers an interpretation for these findings: obesity, the reason why consumers would have to select premium-priced large sizes at the catalog retailer, evoked the fourth-lowest levels of pity among all 102 disabilities we tested in study 3B.

Finally, our research contributes to unpacking the complexity contained within the "disability" label. Despite their sheer numbers, consumers with disabilities have received limited attention within the broader context of research on diversity and inclusion in marketing (for a recent review, see Arsel, Crockett, and Scott 2022). Our research demonstrates the importance of exploring the heterogeneity within the "disability" label. Specifically, study 3B introduces a stimulus-sampling paradigm that sheds light on significant variations in people's inferences about the lived experiences of a

comprehensive list comprising more than 100 diverse disabilities. This exploration represents a crucial initial step toward understanding how specific features and characteristics of diverse disabilities influence the perceptions and treatment of these consumers. Within the context of our research question, disability severity and onset controllability appear to be important in shaping different reactions across disabilities. Our paradigm offers ample opportunities to explore which other characteristics of theoretical interest (e.g., concealability or disruptiveness; Jones et al. 1984) may explain reactions to different disabilities and other potentially stigmatizing conditions (Goffman 1963; Lamberton 2019; Zhang et al. 2021).

Implications for Practice

Our research provides several insights for companies aiming to enhance the accessibility of their offerings and develop strategies to mitigate negative reactions from a broader mass-market audience. First and foremost, our research highlights the unique nature of the adaptive product market. Our findings underscore the critical role of target market characteristics, particularly disability status, in shaping consumers' perceptions of price fairness for innovative products. While consumers typically accept firms charging premium prices for regular (non-adaptive) innovations, they are averse to using premium pricing strategies when companies bring much-needed innovations targeted at consumers with disabilities to market. One damning implication of our research could even be that for-profit companies do not pursue this large target segment using conventional commercial go-to-market strategies like premium pricing.

However, there might be strategies available for brands to market adaptive innovations to avoid backlash against price premiums, which might be necessary for these products to be commercially viable. Specifically, we found in study 4B that socializing the costs of adaptive innovations might be a promising strategy to serve this neglected segment in a commercially viable fashion without evoking backlash from the broader consumer base. This strategy might lead to higher purchases from *all* consumers due to potential halo effects from perceiving the company as more moral and inclusive (see also Khan et al. 2025), but at the same time, it is unclear how it would play out in a competitive marketplace with lower-price alternatives.

Another strategy to mitigate negative reactions could be to emphasize the perspectives of consumers with disabilities. Doing so may help mass-market consumers appreciate the unique advantages that adaptive products offer despite their high price. There might be more possibilities. Some pioneering brands discussed in the introduction, most notably Tommy Hilfiger and Pottery Barn, appear to

rely on strategic obfuscation (see Allender et al. 2021). This entails the usage of meaningless cosmetic differentiation to increase the difficulty of comparing adaptive innovations and existing mass-market products. For example, almost no product in Tommy's Adaptive line has an *exact* mass-market equivalent. Although potentially promising, strategic obfuscation might not always shield brands from negative consumer reactions, as evidenced in our Pottery Barn TikTok pilot study.

Nike seemingly employs another related strategy to prevent backlash: deemphasizing the adaptive potential of products. For example, consumers have to scroll to the very end of the product page for its Go FlyEase sneaker to learn that this model is particularly suitable for people with disabilities and this information is not made very salient ("With a heel that pivots open for a totally hands-free entry, they're *great for people with limited mobility*—or anyone who wants a quicker way to get going."). Such strategies might limit the potential for consumer outrage over premium prices for adaptive innovations. At the same time, they also place significant search costs on consumers with disabilities who already struggle to find offerings that meet their needs (see Business Disability Forum 2022).

Instead of using strategic obfuscation or deemphasizing the adaptive potential of products, firms might also consider another relatively low-cost intervention: offering filtering options in e-commerce stores, such as "adaptive" or "seated wear." Using such filters empowers consumers with disabilities to quickly identify products from a large assortment that best suit their needs. Recently, a smaller number of (online) retailers (e.g., Walmart's "Adaptive at Walmart"; Target's "Kids' Adaptive Shop") have begun offering these filtered, dedicated adaptive assortments to consumers with disabilities. Some brands, like Zalando, even offer filters for specific adaptive needs (e.g., "seated style" or "fit for prostheses").

Limitations and Future Research

Firm strategies and consumer behaviors surrounding marketplace morality and accessibility are context-dependent and evolving. Our research is limited by a reliance on North American and Western European participants, given that there is significant variation in stereotypes about people with disabilities across the globe (Nario-Redmond 2019). Thus, our results may not generalize to geographic or cultural contexts in which stereotypes about people with disabilities and the extent to which they evoke pity differ from those in our samples. Other research has documented variations in the acceptability of asymmetric pricing strategies such that consumers in collectivistic countries (vs. the individualistic countries we study) find them less acceptable (Chen et al. 2018). Such differences might further magnify our effect.

Importantly, future research might explore whether our results for (premium) pricing strategies also apply to other marketing strategies. In principle, our account suggests that any conventional pricing and distribution strategies that reduce (universal) access of pitied target consumers are likely to evoke greater scrutiny. Specifically, our findings suggest that any access-limiting strategies are likely to be perceived to threaten or reduce the well-being of the pitied target (i.e., consumers with disabilities). We explored this possibility in [Supplementary study 4](#) (see [web appendix B4](#) for full details). Building on the outrage about the initial launch of Nike's Go FlyEase sneaker in 2021, we examined whether targeting consumers with disabilities (vs. sneakerheads) shaped the acceptability of scarcity marketing tactics (see also [McGraw et al. 2012](#)). Participants learned about a brand that launched a new sneaker model featuring EasyEntry™ hands-free entry technology as a limited-edition special (1,000 pairs of sneakers), despite 10,000 consumers signing up for the waitlist before the launch. Consistent with our results for premium pricing (e.g., study 3A), the firm's strategy was judged as significantly less acceptable when targeting consumers with disabilities rather than sneakerheads ($d = 0.42$). We also found that pity mediated this effect. Future research could build on these initial findings to explicitly test whether serving pitied consumer segments invokes more communal expectations for firm–customer interactions ([McGraw et al. 2012](#)) and which firm attributes ([Henkel et al. 2018](#)) might interact with target market characteristics in shaping these expectations.

Another area for future inquiry is exploring the extent to which charging premiums for adaptive innovations might be considered price gouging. Companies are perceived as price-gouging when they sharply raise prices for necessary goods beyond the level needed to cover increased costs ([Zwolinski 2008](#)). Across studies, we sought to reduce the applicability of this price gouging account by focusing on hedonic product categories that are less likely to be considered necessary goods (e.g., gaming controllers, sneakers, watches). Yet, it is still possible that adaptive innovations are perceived as serving more fundamental needs rather than less necessary, discretionary wants compared to non-adaptive innovations. For instance, while a gaming controller may generally be seen as a hedonic good, an adaptive controller for hardcore gamers with physical disabilities might be construed as essential for meaningful engagement in gaming (i.e., more of a necessary good). In contrast, the same controller targeted at non-disabled gamers might be perceived more as a want. In general, more research is needed to unpack how characteristics of the target segment, like disability status, might shape such necessity perceptions (see also [Hagerty and Barasz 2020](#)) and, in turn, may shape acceptability judgments of firms' pricing strategies. Relatedly, consumers may rely on a

lay theory of exploitation, judging adaptive products as overpriced because they believe weak competition enables firms to extract excessive profits. While some of our evidence seems scarcely compatible with this explanation (study 1B elicited fair prices and found that mass-market consumers expect companies to charge *less* for adaptive innovations, and study 4A replicates the effect while providing additional information about constant firm margins), more work is needed to unpack the content of such lay theories as a function of target market characteristics.

Another interesting angle for future work is to explore the generalizability and limits of sensitivity to different firm strategies when targeting consumers with disabilities. While we examine a broad range of price premiums (ranging from 0% to 50%) in line with current pricing strategies (for an overview of all our stimuli and effect sizes across studies, see [web appendix C](#)), future research could examine whether there are non-linear effects in consumers' reactions to the pricing of adaptive innovations as well as potential moderators of these thresholds (e.g., firm or category characteristics). While we focused on innovative products, future research might also explore how consumers react to firms charging price premiums for purely representational products (e.g., the deaf Barbie or the Paralympic Phryge mascot for the Paris 2024 games). Our account would predict reactions to be even more negative than in our studies.

Building on our discussion of strategic obfuscation, more research is needed about the conditions under which consumers (do not) notice that firms charge price premiums for adaptive innovations. While our experimental paradigms explicitly inform participants about price premiums for adaptive innovations relative to earlier versions of the product, we explored whether people show similar reactions if they learn about the prices of different products alongside information about other product features (e.g., available colors, product pictures). Thus, in [Supplementary study 5](#) ([web appendix B5](#)), we presented participants with a selection of four products from a shoe manufacturer's assortment, including pictures, available colors (absolute) prices, and product type. Critically, the final product in the assortment was either framed as an adaptive or non-adaptive innovation, allowing for hands-free entry. This final product (\$140) commanded a price premium compared to the first three products in the assortment (\$75–\$99). Unlike our usual experimental paradigm, we did not highlight the price premium via the percentage change to examine whether participants would show similar reactions. We found that consumers perceived the brand's pricing strategy as less fair when the innovative product targeted consumers with disabilities ($M = 3.64$, $SD = 1.73$) than when it did not ($M = 4.23$, $SD = 1.46$, $t(197) = 2.57$, $p = .011$, $d = 0.36$). This suggests that the negative

reactions to charging price premiums for adaptive innovations might also emerge in more information-rich environments where price premiums are not presented as a percentage change.

Another related question is whether our effects would be attenuated or even reversed if there is competition between mass-market consumers and consumers with disabilities for a scarce, highly desirable product. Anecdotal evidence from the comments section of a TikTok video by the sneakerhead magazine Complex on an article about the outrage over Nike's limited edition 2021 launch of the Go FlyEase suggests that category involvement and competition between segments might increase the acceptability of conventional marketing strategies like premium pricing and scarcity marketing. Several posters are critical of consumers with disabilities, as exemplified in posts stating, "First come, first serve," "Stop crying," or "if [yo]u really need it pay that 700 hundred [yo]u don't need it to survive."

Finally, an interesting question for future research is how consumers react to the socialization of the costs for innovations depending on target market characteristics. Our results from study 4B suggest that mass-market consumers found it acceptable to ask *all* consumers to pay more to prevent consumers with disabilities from paying a price premium compared to the mass market. Interestingly, there are significant variations in firms' strategies regarding sharing the financial burden of providing adaptive products across their entire customer base. In the personal computers category, for example, Apple offers extremely powerful adaptive solutions for low-vision and blind consumers (e.g., VoiceOver) in all products, regardless of whether the buyer is vision-impaired or not. In contrast, Narrator, the screen reader of Microsoft's operating system, is less powerful, requiring many Windows consumers with vision loss to purchase additional adaptive solutions such as JAWS, which costs more than 1,000 USD for a home license. More research is needed to understand *when* consumers accept the socialization of costs via higher prices for themselves to improve the customer experience and welfare of historically disadvantaged consumer segments, other than consumers with disabilities. Another important related issue is whether giving voice to consumers with disabilities could be a promising strategy for firms to attenuate negative reactions to premium prices for adaptive innovations. We explored this possibility in our final [supplementary study](#) (see [web appendix B6](#) for full details). Specifically, using the gaming controller scenario, we added an additional paragraph inspired by an actual quote from a feature article in the *Hollywood Reporter* ([Shanley 2019](#)), in which a gamer with a disability expressed his acceptance of the firm's pricing strategy. We found that providing this quote significantly enhanced the acceptability of the firm's pricing

strategy ($d = 0.60$) and brand attitudes ($d = 0.40$) compared to the standard price premium condition.

In conclusion, our research unveils a novel customer-based challenge for firms introducing adaptive innovations—consumers object to charging premium prices for these costly products. Our findings highlight how target market characteristics, especially disability status, can evoke pity, which, in turn, constrains the corridor of acceptable firm pricing strategies. We hope that our investigation of many disabilities inspires future research to further explore how differences in lived experiences influence consumer judgments and choices.

DATA COLLECTION STATEMENT

The first author collected the data for studies 1A–4B and for [Supplementary studies 1–6](#) on Prolific between February 2023 and August 2025. The data for study 1A were collected in February 2023, for study 1B in March 2023, study 1C in November 2023, study 1D in November 2024, study 2 in April 2023, study 3A in April 2023, study 3B in December 2023, study 4A in September 2023, study 4B in January 2025, [Supplementary study 1](#) in January 2025, [Supplementary study 2](#) in August 2025, [Supplementary study 3](#) in November 2024, [Supplementary study 4](#) in January 2025, [Supplementary study 5](#) in May 2025, and [Supplementary study 6](#) in October 2023. The second author collected the data for the TikTok pilot study in May 2023. All authors jointly analyzed and discussed the data. The stimuli, data, and analysis syntax for all studies are available on the Open Science Framework: <https://osf.io/h7ast>.

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