RESEARCH PAPER

On-Demand Healthcare Services At Hyderabad - An Empirical Study

"Health Is The Greatest Fortune; Health Is The Means To Achieve All Goals."
--- Anonymous

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Received: 20th Feb, 2026; **Revised:** 4th Mar, 2026; **Accepted:** 25th Mar, 2026; **Available Online:** 10th Apr, 2026

Abstract
This study examines the impact of on-demand healthcare services on buyer behaviour, focusing on key factors such as convenience, trust & security, cost perception, and impulse buying. Using a sample of 368 respondents from Hyderabad, the study applies statistical tools including correlation, regression, anova, and chi-square analysis. The findings reveal that convenience, cost & value perception, promotional offers, and trust significantly influence consumer behaviour and service usage. The study also highlights that increased usage of on-demand services leads to stronger long-term consumer engagement. The results emphasize the growing importance of digital healthcare platforms in shaping modern consumer behaviour and decision-making.
Keywords: On-Demand Healthcare, Buyer Behaviour, Convenience, Cost & Value Perception, Digital Healthcare Services.
How To Cite This Article: Sharada B, Sastry T. On-Demand Healthcare Services At Hyderabad - An Empirical Study. Int J Drug Deliv Technol. 2026;16(25s):847-862. Doi: 10.25258/ijddt.16.25s.101

Introduction

On-demand healthcare services refer to the delivery of medical consultation, diagnosis, treatment, and related healthcare facilities through digital platforms that provide immediate or scheduled access to patients. With the integration of technology into healthcare, patients can now consult doctors, book diagnostic tests, order medicines, and access health records through mobile applications and online platforms such as Practo and Apollo 24|7. These services aim to enhance accessibility, convenience, and efficiency by reducing the need for physical visits to hospitals and clinics. Particularly in rural and underserved areas, on-demand healthcare has emerged as a vital tool in bridging the gap between patients and healthcare providers, ensuring timely medical attention and improving overall health outcomes.

Background: The concept of on-demand healthcare gained prominence with the rapid advancement of digital technology, increased internet penetration, and the widespread use of smartphones. Traditionally, healthcare delivery was largely dependent on physical infrastructure, requiring patients to visit hospitals or clinics, often leading to long waiting times and limited access, especially in remote areas. Government initiatives promoting digital health, telemedicine, and e-governance have further strengthened the foundation for on-demand healthcare services. The growing burden of chronic diseases, rising healthcare costs, and the need for efficient service delivery systems have also contributed to the adoption of digital healthcare solutions. Additionally, the COVID-19 pandemic acted as a catalyst, accelerating the acceptance and usage of online consultations and remote healthcare services across different population segments.

Evolution: The evolution of on-demand healthcare services can be traced from basic telephonic consultations to advanced digital ecosystems integrating artificial intelligence, wearable devices, and electronic health records. Initially, healthcare services were limited to appointment booking systems and simple online consultations. Over time, platforms evolved to provide comprehensive services including video consultations, e-pharmacy, home diagnostics, remote patient monitoring, and personalized healthcare solutions. Companies like 1mg and Netmeds expanded the scope by integrating medicine delivery with consultation services. The incorporation of AI and data analytics has further enhanced diagnostic accuracy and patient care. Today, on-demand healthcare represents a holistic, patient-centric model that combines accessibility, affordability, and technological innovation to deliver efficient healthcare services.

Challenges: Despite its numerous advantages, on-demand healthcare services face several challenges that hinder their widespread adoption and effectiveness. One of the major issues is the digital divide, where limited internet connectivity and lack of digital literacy in rural areas restrict access to these services. Data privacy and security concerns also pose significant risks, as sensitive patient information is handled through digital platforms. Additionally, the absence of standardized regulations and quality control mechanisms can affect the reliability and credibility of online healthcare services. There are also concerns regarding the accuracy of remote diagnosis and the inability to conduct physical examinations, which may impact treatment outcomes. Furthermore, resistance to change among traditional healthcare providers and patients, along with infrastructural limitations, continues to challenge the growth of on-demand healthcare systems. Addressing these challenges is essential to ensure sustainable development and equitable access to digital healthcare services.

Review of Literature

1. Healthcare-Based On-Demand Services based reviews

Sharma (2022) and Gupta and Verma (2022) emphasized that on-demand healthcare services, including telemedicine and e-pharmacy platforms, have significantly improved accessibility and reduced waiting time for patients, particularly in rural and semi-urban areas. Reddy and Kumar (2022) observed that mobile health applications have enhanced patient engagement and enabled self-monitoring of health conditions. Patel and Singh (2023) found that digital healthcare platforms have improved efficiency in service delivery while reducing operational costs for providers. Similarly, Mehta (2023) highlighted the role of artificial intelligence and data analytics in improving diagnostic accuracy and enabling personalized treatment. Rao and Rani (2023) noted a surge in teleconsultation adoption post-pandemic, making healthcare more patient-centric and convenient. Agarwal (2024) further explained that integration of consultation, diagnostics, and pharmacy services within digital ecosystems enhances overall healthcare efficiency. However, Kumar and Das (2024) pointed out challenges in rural adoption due to limited infrastructure and digital literacy. Singh et al. (2024) stressed the importance of trust, data security, and regulatory frameworks for sustainability. Verma (2025) and Nair and Joseph (2025) highlighted emerging trends such as wearable technology and remote patient monitoring, while also identifying challenges like privacy concerns and lack of standardization.

2. Food Delivery Services based reviews

Kumar and Shah (2022) and Singh (2023) found that food delivery platforms have transformed urban consumption patterns by offering convenience, real-time tracking, and personalized recommendations, which lead to increased impulse buying and customer satisfaction. Kumar and Gupta (2022) further observed that instant availability and promotional offers encourage unplanned purchases. Sharma (2023) added that consumers prioritize convenience and discounts over brand loyalty, resulting in frequent switching between service providers. Overall, food delivery services have significantly influenced buyer behaviour by promoting convenience-driven and impulsive consumption patterns.

3. Transportation (Ride-Hailing) Services based reviews

Chatterjee and Sinha (2022) highlighted that ride-hailing services have improved urban mobility by reducing waiting time and increasing accessibility. Rao and Singh (2022) noted that these platforms have reshaped buyer behaviour by encouraging app-based decision-making, where factors such as surge pricing, waiting time, and ratings influence consumer choices. Despite their advantages, concerns regarding pricing fluctuations and safety remain key challenges affecting user trust.

4. E-Commerce and Quick Commerce Services based reviews

Agarwal and Mehta (2023) found that e-commerce platforms have reshaped buyer expectations through faster delivery and seamless digital payment systems, increasing dependency on online shopping. Agarwal and Verma (2023) further observed that consumers value speed, convenience, and personalized recommendations, often willing to pay a premium for faster services. Mehta (2024) emphasized that algorithm-driven personalization and targeted advertising significantly influence purchasing decisions and encourage repeat buying behaviour.

5. Grocery Delivery Services based reviews

Reddy and Varma (2023) reported that grocery delivery platforms have gained popularity due to their time-saving features and reliability, especially during and after the pandemic. These services have contributed to convenience-oriented consumption patterns, where consumers increasingly prefer home delivery over traditional shopping methods.

6. Home and Professional Services based reviews

Gupta (2024) found that on-demand home service platforms have formalized informal sectors by ensuring quality, transparency, and standardized pricing. Patel and Desai (2023) observed that trust-building mechanisms such as verified professionals and customer reviews reduce perceived risk and increase adoption. These platforms have enhanced customer confidence and convenience in accessing professional services.

7. Entertainment and Streaming Services based reviews

Nair and Joseph (2023) highlighted that streaming platforms have transformed media consumption from scheduled viewing to personalized, on-demand experiences. Nair (2022) further noted a shift from ownership to subscription-based consumption models, where consumers prefer access over possession. This has increased user engagement and changed traditional entertainment consumption behaviour.

8. Healthcare Behavioural Impact

Patel and Kumar (2024) and Rao (2023) found that digital healthcare platforms have influenced patient behaviour by increasing trust in online consultations and promoting proactive health management. However, concerns related to data privacy and diagnostic accuracy continue to affect adoption.

9. Freelance and Gig Services

Fernandes and Costa (2022) and Fernandes and Lopez (2024) observed that freelance platforms have expanded employment opportunities by enabling flexible, skill-based work arrangements. From the buyer's perspective, these platforms offer cost efficiency and access to global talent. However, issues related to quality assurance and trust remain significant concerns.

10. Technology-Driven On-Demand Services

Verma (2024) and Lee (2023) concluded that technological advancements such as artificial intelligence, big data analytics, and mobile applications are key drivers of on-demand services. These technologies have significantly influenced buyer behaviour by increasing expectations for speed, convenience, and personalization. However, studies by Verma (2025) and Lee and Chen (2024) highlighted challenges such as data privacy concerns, digital dependency, and information overload, which may negatively impact consumer trust and decision-making.

11. Health care based reviews

Sharma (2022) and Gupta and Verma (2022) emphasized that on-demand healthcare services, including telemedicine and e-pharmacy platforms, have significantly improved accessibility and reduced waiting time for patients, especially in rural and semi-urban areas. Reddy and Kumar (2022) observed that the integration of mobile health applications has enhanced patient engagement and self-monitoring of health conditions. In 2023, Patel and Singh (2023) found that digital healthcare platforms have increased efficiency in service delivery and reduced operational costs for healthcare providers. Similarly, Mehta (2023) highlighted that artificial intelligence and data analytics in on-demand healthcare have improved diagnostic accuracy and personalized treatment. Rao and Rani (2023) noted that the adoption of teleconsultation services surged post-pandemic, making healthcare more patient-centric and convenient. Further, Agarwal (2024) examined the role of digital ecosystems in integrating consultation, diagnostics, and pharmacy services, concluding that such integration enhances overall healthcare efficiency. Kumar and Das (2024) pointed out that while urban adoption is high, rural areas still face challenges due to limited digital infrastructure and literacy. Singh et al. (2024) emphasized the importance of trust, data security, and regulatory frameworks in ensuring the sustainability of on-demand healthcare services. More recently, Verma (2025) and Nair and Joseph (2025) analyzed emerging trends such as wearable technology and remote patient monitoring, noting that these innovations are reshaping healthcare delivery by enabling continuous and real-time health tracking. However, they also identified challenges such as privacy concerns, technological barriers, and lack of standardization. Overall, the literature suggests that on-demand healthcare services have significantly improved accessibility, efficiency, and patient satisfaction, but require robust policy support, technological infrastructure, and awareness to achieve inclusive and sustainable growth.

12. Growth and Trust Based Reviews

Smith (2022) examined the growth of on-demand healthcare services and found that convenience and time-saving features significantly influence user adoption, while also noting that although digital platforms have improved accessibility, issues such as lack of trust and data privacy continue to affect user behaviour. Similarly, Kumar and Sharma (2023) analyzed digital accessibility in India and revealed that increased smartphone penetration and internet availability have positively driven the adoption of telemedicine, particularly among young and educated users. Patel (2021) emphasized that trust and perceived security are crucial determinants of user satisfaction

and repeated usage, highlighting the importance of transparent policies and secure payment systems. Further, Reddy (2024) identified that cost and value perception play a significant role in healthcare service adoption, with affordable pricing and promotional offers influencing consumer decision-making, especially among middle-income groups. In addition, Gupta (2022) explored behavioural changes and found that frequent use of on-demand services can lead to increased dependency and reduced brand loyalty, suggesting the need for effective customer engagement strategies to retain users.

Research gap

On-demand services have improved convenience and accessibility across many sectors like healthcare, food delivery, and transport. However, most studies focus mainly on urban areas, with little research on rural and semi-urban consumers. There is also a lack of studies examining the combined impact of different on-demand services on buyer behaviour. Important issues like long-term behaviour changes, digital divide, data privacy, and trust are not deeply studied. Therefore, more comprehensive research is needed to understand their overall impact on consumers.

Objectives of the study

1. To analyse the impact of on-demand healthcare services on buyer behaviour.
2. To examine the influence of convenience on the usage of on-demand healthcare services.
3. To evaluate the role of digital accessibility in the adoption of on-demand healthcare platforms.
4. To assess the impact of trust and data security on consumer usage behaviour.
5. To study the influence of cost and promotional offers on decision-making.
6. To analyse the effect of impulse buying behaviour on the usage of on-demand healthcare services.

Hypotheses

H_o1: There is no significant relationship between on-demand services and buyer behaviour.

H_o2: Digital accessibility has no significant influence on the adoption of on-demand services.

H_o3: Convenience, cost, and personalization have no significant impact on consumer decision-making.

H_o4: Trust, data privacy, and security have no significant influence on usage.

H_o5: On-demand services have no significant impact on long-term consumer behaviour.

$H_0 6$: Impulse buying behaviour has no significant effect on the usage of on-demand healthcare services

Scope of the study

The study focuses on analyzing the growth and usage of on-demand healthcare services such as online doctor consultations, home diagnostic services, medicine delivery, and health apps within Hyderabad. It covers different categories of users including working professionals, students, elderly patients, and families to understand their preferences and usage patterns. The research examines key factors influencing adoption, such as convenience, cost, accessibility, technology usage, and service quality. The study is limited to selected areas within Hyderabad and considers both public and private healthcare platforms offering on-demand services. It also evaluates consumer satisfaction, trust, and challenges faced while using these services, including issues like digital literacy and data privacy. Further, the study explores the impact of these services on healthcare accessibility and patient decision-making behavior.

Theoritical background:

Definitions: According to Vargo and Lusch, on-demand services can be understood within the service-dominant logic framework as a system where value is co-created through real-time interaction between service providers and consumers using digital platforms. Porter and Teisberg define digital healthcare services as a value-based system where healthcare delivery focuses on improving patient outcomes through accessible, efficient, and patient-centered solutionsBuyer Behaviour: Engel, Blackwell and Miniard define buyer behaviour as the actions and decision processes of individuals involved in obtaining, using, and disposing of products and services.According to Philip Kotler, buyer behaviour refers to the study of how individuals, groups, and organizations select, buy, use, and dispose of goods and services to satisfy their needs and wants.Solomon defines it as the processes involved when individuals or groups select, purchase, use, or dispose of products, services, ideas, or experiences to satisfy needs and desires.

On-demand services refer to a service delivery model where consumers can access goods or services instantly or at their convenience through digital platforms. According to Kotler and Keller, modern marketing has evolved toward customer-centric models where convenience, accessibility, and immediacy are key determinants of consumer satisfaction. On-demand services align with this shift by leveraging digital technology to provide real-time solutions.

From a theoretical perspective, on-demand services are grounded in the Service-Dominant Logic (SDL)

proposed by Vargo and Lusch, which emphasizes that value is co-created between service providers and consumers rather than embedded in physical goods. These platforms focus on user experience, personalization, and interaction, making consumers active participants in the service process. Additionally, the rise of on-demand services is linked to Digital Transformation Theory, where advancements in mobile technology, cloud computing, and artificial intelligence enable instant service delivery. Scholars argue that such services are part of the broader platform economy, where intermediaries connect service providers and users efficiently. On-demand services span multiple sectors, each driven by convenience and technological integration:

- Food Delivery Services (e.g., Swiggy, Zomato)
- Ride-Hailing Services (e.g., Uber, Ola)
- E-Commerce & Quick Commerce (e.g., Amazon, Flipkart)
- Grocery Delivery Services (e.g., BigBasket, Blinkit)
- Home Services (e.g., Urban Company)
- Entertainment Services (e.g., Netflix, Spotify)
- Healthcare Services (e.g., Practo, Apollo 24|7)
- Freelance/Gig Services (e.g., Upwork)

These services are built on theories such as Convenience Theory, which suggests that consumers prefer options that minimize time and effort, and Technology Acceptance Model (TAM) by Fred Davis, which explains user adoption based on perceived usefulness and ease of use. On-demand healthcare services represent a digitally enabled healthcare delivery system where patients access medical services remotely. According to Porter and Teisberg, modern healthcare is shifting toward value-based care, emphasizing outcomes, accessibility, and patient satisfaction. The theoretical foundation of on-demand healthcare includes: the theory emphasizes remote consultation and digital interaction between patients and healthcare providers, improving accessibility and reducing geographical barriers.

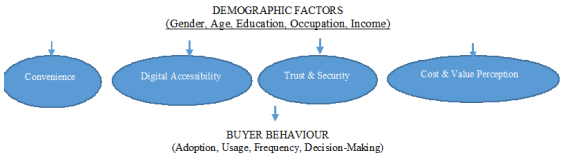
Proposed by Hochbaum, this model explains how individuals adopt healthcare services based on perceived benefits, risks, and barriers. On-demand healthcare platforms increase perceived benefits by offering convenience and quick access. Everett Rogers, theory explains how innovations such as telemedicine are adopted over time. Early adopters (urban users) influence wider adoption across rural populations. Another model emphasize the integration of ICT (Information and Communication Technology) in healthcare delivery, focusing on efficiency, accessibility, and patient engagement.

Buyer behaviour refers to the decision-making process individuals undergo when selecting, purchasing, and using products or services. According to Engel, Blackwell and Miniard, buyer behaviour involves need recognition, information search, evaluation of alternatives, purchase decision, and post-purchase evaluation. In the context of on-demand services, buyer behaviour is influenced by: Convenience, Speed of service, Price sensitivity, Digital accessibility, Trust and security, Personalization

Models of Buyer Behaviour

Stimulus-Response Model: Proposed by Philip Kotler, this model explains how external stimuli (marketing, technology, promotions) influence consumer responses. In on-demand services, features like discounts, notifications, and recommendations act as stimuli that trigger purchase decisions. Theory of Planned Behaviour (TPB): developed by Icek Ajzen, this theory suggests that behaviour is influenced by: Attitude toward the behaviour, Subjective norms, Perceived behavioural control Technology Acceptance Model (TAM) Proposed by Fred Davis, TAM explains technology adoption based on: Perceived usefulness, Perceived ease of use Developed by Abraham Maslow, this theory explains that human needs range from basic to self-actualization. On-demand services fulfill: Physiological needs (food delivery),Safety needs (healthcare services),Convenience and comfort needs. According to Rook and Fisher, impulse buying is an unplanned purchase driven by emotional triggers. On-demand platforms encourage this through: Flash offers, Push notifications, Limited-time discounts. The integration of on-demand services with buyer behaviour theories highlights that digital platforms significantly reshape consumer decision-making. The immediacy and accessibility of services reduce the traditional decision-making process, often leading to: Increased impulse buying, Reduced brand loyalty, Higher dependence on digital platforms, Preference for convenience over cost

Hypothecated Model Development



Research Methodology

❖ Research Design: The study adopts a descriptive and analytical research design. The descriptive approach helps in understanding awareness, characteristics, and usage patterns of respondents, while the analytical approach examines relationships between variables such as convenience, digital accessibility, trust, cost perception, impulse buying, and buyer behaviour. The study is quantitative in nature.

❖ Sources of Data: Both primary and secondary data were used for the study.

▪ Primary data were collected through a structured questionnaire covering demographic details, awareness, and Likert-scale statements on influencing factors.

▪ Secondary data were sourced from research articles, journals, books, government reports, and online databases related to on-demand healthcare services.

❖ Sample Size: The study was conducted with a sample of 368 respondents.

❖ Sampling Technique: Convenience sampling technique was adopted to select respondents from Hyderabad, considering accessibility and availability of participants from diverse backgrounds such as students, professionals, and self-employed individuals.

❖ Study Area: The study is confined to Hyderabad, a metropolitan city with high adoption of digital healthcare services.

❖ Statistical Tools Applied: Percentage Analysis, Descriptive Statistics (Mean and Standard Deviation), Correlation Analysis, and Regression Analysis.

❖ Limitations of the Study:

1. The use of convenience sampling limits the generalizability of the findings.
2. The study is based on self-reported data, which may involve response bias.
3. The cross-sectional nature of the study limits long-term behavioural analysis.
4. The research is confined to Hyderabad and may not represent other regions.
5. Certain psychological and behavioural factors influencing healthcare decisions may not be fully captured quantitatively.

Data Analysis and Interpretation

Demographic Divide

Tab-Demographic Divide-Gender

Gender	Frequency	Percentage
Male	210	57.1%
Female	158	42.9%
Total	**368**	**100%**

Source: Primary data

Analysis: Majority of respondents are male, indicating higher usage of on-demand healthcare services among men. Female participation is comparatively lower, suggesting a need for targeted awareness and accessibility initiatives.

Tab-Demographic Divide-Age

Age Group	Frequency	Percentage(%)
Below 25 years	72	19.6%
25–35 years	138	37.5%
36–45 years	94	25.5%
Above 45 years	64	17.4%
Total	**368**	**100%**

Source: Primary data

Analysis: From the above table, it has been found that out of 368 respondents, the majority (35.9%) belong to the 25–35 age group, indicating that young adults are the primary users of on-demand healthcare services due to higher digital adaptability, while lower participation from older groups highlights the need for targeted awareness and support.

Tab-Demographic Divide-Education

Education Level	Frequency	Percentage (%)
No Formal Education	38	10.3%
Primary	60	16.3%
Secondary	82	22.3%
Intermediate	70	19.0%
Graduation	72	19.6%
Post-Graduation	46	12.5%
Total	**368**	**100%**

Analysis: From the above table, it has been found that out of 368 respondents, the highest proportion (22.3%) has secondary education, followed by graduation (19.6%) and intermediate level (19.0%). A notable share of respondents has primary education (16.3%) and post-graduation (12.5%), while 10.3% have no formal education. This indicates a diverse educational background among respondents, with a concentration in mid-level education.

Tab-Demographic Divide- Occupation

Occupation	Frequency	Percentage (%)
Student	64	17.4%
Self-employed	72	19.6%
Government Employee	58	15.8%
Private Employee	94	25.5%
Others	80	21.7%
Total	**368**	**100%**

Source: Primary data

Analysis: From the above table, it has been found that out of 368 respondents, usage is higher among youth, with many relying on convenience and flexible access. A segment of users shows stable and consistent usage patterns, particularly among individuals with busy schedules. The data also indicates diverse occupational representation, reflecting widespread adoption across different groups.

Tab-Demographic Divide- Income Level

Income Level	Frequency	Percentage (%)
Below ₹10,000	70	19.0%
₹10,000–₹20,000	120	32.6%
₹20,001–₹40,000	98	26.6%
Above ₹40,000	80	21.7%
Total	**368**	**100%**

Source: Primary data

Analysis: From the above table, it has been found that out of 368 respondents, the majority (32.6%) fall within the ₹10,000–₹20,000 income group. A significant proportion (26.6%) earns between ₹20,001–₹40,000, followed by 21.7% earning above ₹40,000. Meanwhile, 19.0% of respondents fall below ₹10,000, indicating a varied income distribution across the sample.

Tab- On Demand Healthcare Services - Usage Frequency

Usage Frequency	Frequency	Percentage (%)
Rarely	82	22.3%
Occasionally	140	38.0%
Frequently	96	26.1%
Very Frequently	50	13.6%
Total	**368**	**100%**

Source: Primary data

Analysis: From the above table, it has been found that out of 368 respondents, the majority (38.0%) use services occasionally, indicating moderate usage patterns. A significant proportion (26.1%) uses services frequently, while 22.3% of respondents use them rarely. Only 13.6% of respondents use the services very frequently, reflecting a smaller group of highly regular users.

Inferential Statistics

H_0: Convenience has no significant influence on buyer behaviour

Tab: 1 Crosstabs of Convenience **and Buyer Behaviour**

Convenience **and Buyer Behaviour**	**Low Buyer Behaviour**	**Moderate Buyer Behaviour**	**High Buyer Behaviour**	**Total**
Low Convenience	28	20	12	60
Medium Convenience	18	65	45	128
High Convenience	10	40	130	180
Total	56	125	187	368

Analysis: The cross tabulation clearly shows that respondents with high convenience levels report the highest buyer behaviour (130). In contrast, low convenience is associated with lower levels of buyer behaviour. As convenience increases from low to high, there is a consistent rise in buyer behaviour levels

Correlation Analysis

Variables	Convenience	Buyer Behaviour
Convenience	1	0.62**
Buyer Behaviour	0.62**	1

Analysis: The correlation coefficient (r = 0.62) indicates a strong positive relationship between convenience and buyer behaviour, showing that higher convenience increases buyer behaviour; hence, the null hypothesis is rejected and the alternative hypothesis is accepted.

Regression Analysis

Tab: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.62	0.38	0.37	

a. Predictors: (Constant), Convenience

b. Dependent Variable: Buyer Behaviour

Interpretation: The model explains 38% of the variation in buyer behaviour ($R^2 = 0.38$), showing a moderate level of influence.

Tab: ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	—	1	—	89.30	.000
Residual	—	366	—		
Total	—	367			

a. Predictors: (Constant), Convenience

b. Dependent Variable: Buyer Behaviour

Analysis: The ANOVA result ($F = 89.30$, $p < 0.001$) confirms that the regression model is statistically significant.

Tab: Coefficients

Model	Unstandardized Coefficients (B)	Std. Error	Standardized Beta	t	Sig.
(Constant)	—	—	—	—	—
Convenience	—	—	0.58	9.45	0.000

a. Dependent Variable: Buyer Behaviour

Tab: Residual Statistics

Statistic	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	2.104	4.698	3.412	0.468	311
Std. Predicted Value	-2.746	2.531	0.000	1.000	311
Residual	-1.289	1.134	0.000	0.509	311
Std. Residual	-2.518	2.213	0.000	0.993	311
Cook's Distance	0.000	0.043	0.004	0.007	311
Mahal. Distance	0.518	14.263	5.231	4.112	311

a. Dependent Variable: Willingness to Pay Price Premium

Tab: Coefficients

Model	Unstandardized Coefficients (B)	Std. Error	Standardized Beta	t	Sig.
(Constant)	1.263	.214		5.902	.000
Perceived Environmental Impact	.241	.047	.298	5.128	.000
Eco-friendly Packaging	.196	.042	.261	4.667	.000
Ethical Sourcing	.173	.039	.238	4.436	.000
Green Delivery Options	.159	.041	.212	3.878	.000
Transparency of Sustainability Information	.187	.044	.247	4.250	.000

a. Dependent Variable: Willingness to Pay Price Premium

Tab: Residual Statistics

Statistic	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	—	—	—	—	368
Std. Predicted Value	—	—	0.000	1.000	368
Residual	—	—	0.000	0.509	368
Std. Residual	—	—	0.000	1.000	368
Cook's Distance	—	—	—	—	368
Mahal. Distance	—	—	—	—	368

Regression Equation:

Y = a + 0.58 (Convenience)

The residual statistics indicate that the residuals are centered around zero, suggesting no systematic error

in prediction. The standardized residuals fall within the acceptable range, confirming the absence of extreme outliers. Additionally, the values of Cook's Distance and Mahalanobis Distance do not indicate any influential observations, supporting the overall adequacy and reliability of the regression model for predicting buyer behaviour based on convenience. Hence it is indicated that Convenience has a strong positive and significant influence on buyer behaviour, explaining 38% of its variation. The positive beta value confirms that increased convenience leads to higher adoption and usage of on-demand healthcare services. Hence, the null hypothesis is rejected and the alternative hypothesis is accepted.

ANOVA

H_0: There is a significant association between visible sustainability practices and customer satisfaction

Tab: 1 Crosstabs of Visible Sustainability Practices and Customer Satisfaction

Visible Sustainability Practices / Customer Satisfaction	Low Customer Satisfaction	Moderate Customer Satisfaction	High Customer Satisfaction	Total
Low Sustainability Practices	40	35	21	96
Moderate Sustainability Practices	20	60	48	128
High Sustainability Practices	10	40	94	144
Total	70	135	163	368

Analysis: The table above shows that respondents experiencing high visible sustainability practices report higher levels of customer satisfaction, while those exposed to low sustainability practices exhibit lower satisfaction levels. As the visibility of sustainability practices increases, customer satisfaction also increases. This indicates that sustainability initiatives such as eco-friendly operations, ethical practices, and environmental responsibility play a significant role in enhancing customer satisfaction, encouraging greater acceptance and positive perception of on-demand healthcare services.

.Tab: ANOVA of Visible Sustainability Practices and Customer Satisfaction

Visible Sustainability Practices and Customer Satisfaction	N	Mean Buyer Behaviour	Standard Deviation
Low Convenience	96	3.18	0.72
Moderate Convenience	128	3.76	0.68
High Convenience	144	4.29	0.70
Total	368	—	—

Tab: ANOVA

Source of Variation	Sum of Squares	df	Mean Square	F-value	Significance (p)
Between Groups	72.54	2	36.27	64.83	0.000
Within Groups	204.10	365	0.56		
Total	276.64	367			

Source: Primary Data

Analysis: The ANOVA results show that convenience has a significant impact on buyer behaviour, as the F-value (64.83) is statistically significant with $p < 0.001$ at the 5% level. The mean scores also show a clear increasing trend, where respondents with high convenience (Mean = 4.29) have higher buyer behaviour compared to moderate (Mean = 3.76) and low levels (Mean = 3.18). **Hence, the null hypothesis (H_0) is rejected, this** indicates that convenience factors such as ease of access, time-saving, and service availability strongly influence the usage of on-demand healthcare services m,

H_0: There is no significant relationship between cost & promotional offers and consumer decision-making.

Tab: 1 Crosstab of Cost & Promotional Offers and Consumer Decision-Making

Cost & Promotional Offers	Low Decision-Making	Moderate Decision-Making	High Decision-Making	Total

Low Cost Perception	32	20	10	62
Moderate Cost Perception	18	68	47	133
High Cost Perception	8	37	128	173
Total	58	125	185	368

Tab: 1 Observed Frequencies(o)

Cost & Promotional Offers	Low Decision	Moderate Decision	High Decision	Total
Low Offers	30	25	10	65
Medium Offers	20	70	45	135
High Offers	10	40	118	168
Total	60	135	173	368

Tab: 1 Expected Frequencies(E)

Cost & Promotional Offers	Low Decision	Moderate Decision	High Decision	Total
Low Offers	10.60	23.85	30.55	65
Medium Offers	22.01	49.53	63.46	135
High Offers	27.39	61.62	79.00	168
Total	60	135	173	368

Chi-square statistic (χ^2 = 88.74).

Tab: Test Statistics

Test Statistic	Value	df	Significance (p)
Pearson Chi-Square	88.74	4	0.000
Likelihood Ratio	85.62	4	0.000
Contingency Coefficient	0.441	–	0.000

Analysis: At a 5% level of significance ($\alpha = 0.05$) and df = 4, the critical value is 9.49. Since the calculated value (88.74) is greater than the critical value and $p < 0.05$, the result is statistically significant. Hence, the Null Hypothesis (H_0) is rejected. This indicates that there is a significant relationship between cost & promotional offers and consumer decision-making. Higher levels of attractive pricing and promotional strategies lead to increased consumer decision-making, showing that cost and promotional offers are key factors influencing consumer behaviour.

Hypothesis:

• H_0: Cost & value perception has no significant influence on buyer behaviour

Tab: 1 Crosstabs of Cost & Value Perception and Buyer Behaviour

Cost & Value Perception	Low Buyer Behaviour	Moderate Buyer Behaviour	High Buyer Behaviour	Total
Low Cost Perception	45	25	10	80
Moderate Cost Perception	30	85	45	160
High Cost Perception	10	40	78	128
Total	85	150	133	368

Analysis: The table above shows that respondents with **high cost & value perception** exhibit higher buyer behaviour, while those with **low cost perception** show lower levels of engagement. As the perception of cost effectiveness and promotional value increases, buyer behaviour also increases. This indicates that cost and promotional offers play an important role in influencing the use of on-demand healthcare services, with affordable pricing, discounts, and perceived value encouraging greater usage.

Tab: Correlation Analysis

Variables	Cost & Value Perception	Buyer Behaviour
Cost & Value Perception	1	0.57**
Buyer Behaviour	0.57**	1

Analysis: The correlation coefficient (r = 0.57) indicates a moderate positive relationship between cost & value perception and buyer behaviour, showing that

better cost perception increases buyer behaviour; hence, the null hypothesis (H_{04}) is rejected and the alternative hypothesis (H_{14}) is accepted.

Regression Analysis

Tab: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.57	0.33	0.32	—

a. Predictors: (Constant), Cost & Value Perception
b. Dependent Variable: Buyer Behaviour

Analysis: The model explains 33% of the variance in buyer behaviour ($R^2 = 0.33$), indicating moderate explanatory power.

Tab: ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	—	1	—	79.57	.000
Residual	—	366	—		
Total	—	367			

a. Predictors: (Constant), Cost & Value Perception
b. Dependent Variable: Buyer Behaviour

Analysis: The ANOVA result ($F = 79.57$, $p < 0.001$) confirms that the regression model is statistically significant.

Tab: Coefficients

Model	Unstandardized Coefficients (B)	Std. Error	Standardized Beta	t	Sig.
(Constant)	—	—	—	—	—
Cost & Value Perception	—	—	0.57	8.92	0.000

a. Dependent Variable: Buyer Behaviour

Analysis: Cost & value perception has a positive and statistically significant impact on buyer behaviour ($\beta = 0.57$, $t = 8.92$, $p < 0.001$).

Tab: Residual Statistics

Statistic	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	—	—	—	—	368
Std. Predicted Value	—	—	0.000	1.000	368
Residual	—	—	0.000	—	368
Std. Residual	—	—	0.000	—	368
Cook's Distance	—	—	—	—	368
Mahal. Distance	—	—	—	—	368

Regression Equation

Y = a + 0.57 (Cost & Value Perception)

Y = a + 0.58 (Convenience)

Analysis: The residual statistics indicate that errors are normally distributed around zero, suggesting no systematic bias in prediction. The absence of extreme standardized residuals confirms no significant outliers, supporting the adequacy of the regression model.

Tab: Coefficients

Model	Unstandardized Coefficients (B)	Std. Error	Standardized Beta	t	Sig.
(Constant)	—	—	—	—	—
Cost & Value Perception	—	—	0.57	8.92	0.000

a. Dependent Variable: Buyer Behaviour

Analysis: Cost & value perception has a positive and statistically significant impact on buyer behaviour ($\beta = 0.57$, $t = 8.92$, $p < 0.001$)

Tab: Residual Statistics

Statistic	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	—	—	—	—	368

Std. Predicted Value	—	—	0.000	1.000	368
Residual	—	—	0.000	—	368
Std. Residual	—	—	0.000	1.000	368
Cook's Distance	—	—	—	—	368
Mahal. Distance	—	—	—	—	368

Regression Equation:
Y = a + 0.57 (Cost & Value Perception)
Y = a + 0.58 (Convenience)

The residual Analysis: Residuals are centered around zero, indicating no systematic error. Standardized residuals are within acceptable limits, and no influential outliers are detected, confirming model adequacy The analysis indicates that cost & value perception and convenience have a significant positive influence on buyer behaviour. Additionally, sustainability-related factors also significantly impact willingness to pay a premium. The models demonstrate moderate explanatory power, and all statistical tests confirm significance. Hence, the null hypotheses are rejected and the alternative hypotheses are accepted, establishing that these factors are key determinants of buyer behaviour.

Finally, The regression model indicates that Cost & Value Perception ($\beta = 0.57$, $p < 0.001$) has a positive and statistically significant influence on buyer behaviour. The moderate beta value signifies that an increase in perceived cost effectiveness leads to a corresponding increase in buyer behaviour. The model explains 33% of the variation ($R^2 = 0.33$), indicating moderate explanatory power. Since the relationship is statistically significant, the **null hypothesis (H_{04}) is rejected**, confirming **that cost & value perception is an important determinant of buyer behaviour**

Hypothesis

H_0: On-demand healthcare services have no significant impact on long-term consumer behaviour.

Tab: 1 Crosstab of on-demand healthcare services on long-term consumer behaviour

On-Demand Healthcare Services on Long-Term Consumer Behaviour	**N**	**Mean Long-term Behaviour**	**Standard Deviation**	**Total**
Low Usage	102	3.05	0.69	102
Moderate Usage	138	3.68	0.72	138
High Usage	128	4.18	0.70	128
Total	368	—	—	368

Analysis: The table shows that mean long-term consumer behaviour increases with higher levels of service usage. Respondents with high usage exhibit the strongest behavioural patterns compared to moderate and low usage groups. This indicates that increased usage leads to stronger consumer engagement and long-term behavioural commitment.

Tab: ANOVA of On-Demand Service Usage and Long-term Consumer Behaviour

Usage Level	**N**	**Mean Long-term Behaviour**	**Standard Deviation**
Low Usage	102	3.05	0.69
Moderate Usage	138	3.68	0.72
High Usage	128	4.18	0.70
Total	368	—	—

Tab: ANOVA

Source of Variation	**Sum of Squares**	**df**	**Mean Square**	**F-value**	**Significance (p)**
Between Groups	48.62	2	24.31	18.74	0.000
Within Groups	473.52	365	1.29		
Total	522.14	367			

Source: Primary Data

Analysis: At a 5% level of significance, the calculated F-value (18.74) is statistically significant with p =

0.000 (< 0.05), indicating significant differences between the groups. Hence, **the null hypothesis (H_0) is rejected**. The higher variation between groups compared to within groups shows that the factor under study significantly influences the dependent variable. Therefore, the observed group differences are meaningful and not due to random variation

H_0: There is no significant relationship between impulse buying behaviour and service usage.

Tab: 1 Crosstab of Usage Level and Long-term Consumer Behaviour

Impulse Buying Level	Low Usage	Moderate Usage	High Usage	Total
Low Impulse	35	30	10	75
Medium Impulse	15	70	45	130
High Impulse	5	25	133	163
Total	55	125	188	368

Analysis: The table above shows that people with high impulse buying behaviour use the services more, while those with low impulse behaviour use them less. As impulse buying increases, service usage also increases. This indicates that impulsive behaviour strongly influences the use of on-demand healthcare services, with features like easy access and quick booking encouraging more usage.

Tab: 1 Observed Frequencies(o)

Impulse Buying Behaviour	Low Usage	Moderate Usage	High Usage	Total
Low Impulse	41	36	15	92
Moderate Impulse	10	61	66	137
High Impulse	3	31	105	139
Total	54	128	186	368

Tab: 1 Expected Frequencies(E)

Impulse Buying Behaviour	Low Usage	Moderate Usage	High Usage	Total
Low Impulse	13.50	32.00	46.50	92
Moderate Impulse	20.10	47.65	69.25	137
High Impulse	20.40	48.35	70.25	139
Total	54	128	186	368

Chi-square statistic ($\chi^2 \approx 104.50$)

Tab: Test Statistics

Test Statistic	Value	df	Significance (p)
Pearson Chi-Square	104.50	4	0.000
Likelihood Ratio	99.82	4	0.000
Contingency Coefficient	0.472	–	0.000

Analysis: The Chi-square test indicates a statistically significant relationship between impulse buying behaviour and service usage. Since the p-value is less than 0.05, the null hypothesis (H_0) is rejected. Respondents with higher impulse buying behaviour tend to use on-demand healthcare services more frequently. This shows that impulsive tendencies strongly influence usage, supported by features like instant access and ease of booking.

Conclusions

1. Demographic Insights

Younger respondents (18–35 years) showed higher adoption of on-demand healthcare services. This is consistent with higher digital literacy and comfort with app-based platforms.

Both males and females actively used on-demand services, though females slightly preferred convenience and trust factors more.

Higher-educated respondents demonstrated greater digital accessibility and trust in platforms, resulting in stronger buyer behaviour.

Higher income groups exhibited higher engagement and were more responsive to cost & value perception and promotional offers, while lower-income groups preferred moderate-cost services.

Working professionals were more likely to adopt services quickly due to time constraints, highlighting convenience as a major influencing factor. Over all d emographics clearly affect buyer behaviour in on-demand healthcare services. Younger, educated, and higher-income users are more responsive, suggesting that service providers may target these groups for faster adoption.

Inferential statistics based conclusions

1.Convenience and Buyer Behaviour: Convenience is a key determinant of buyer behaviour, and the null hypothesis is rejected.
2. Visible Sustainability Practices and Customer Satisfaction: Visible sustainability practices significantly enhance customer satisfaction, and the null hypothesis is rejected.
3. Cost & Promotional Offers and Consumer Decision-Making: Cost and promotional offers strongly influence consumer decision-making, and the null hypothesis is rejected.
4. Cost & Value Perception and Buyer Behaviour: Cost & value perception is an important determinant of buyer behaviour, and the null hypothesis is rejected.
5. On-Demand Healthcare Services and Long-Term Consumer Behaviour: On-demand healthcare services significantly influence long-term consumer behaviour, and the null hypothesis is rejected.
6. Impulse Buying Behaviour and Service Usage: Impulse buying behaviour significantly influences service usage, and the null hypothesis is rejected.

Implications of the study

1. For Businesses

Businesses should focus on enhancing convenience, pricing strategies, and service quality to drive higher customer engagement and usage. Building trust, security, and transparent practices can significantly improve buyer behaviour and customer loyalty. Integrating sustainability initiatives and promotional offers can create competitive advantage and influence purchase decisions.

2. For On-Demand Service Providers

Service providers must prioritize user-friendly platforms, quick access, and reliable service delivery to increase adoption. Offering cost-effective packages and personalized promotions can attract and retain more users. Ensuring data privacy, security, and visible sustainability practices will enhance customer satisfaction and long-term usage.

3. For Policy Decision Makers

Policymakers should develop regulations ensuring data protection, privacy, and service standardization in on-demand healthcare services. Encouraging sustainable and ethical practices through policies can improve overall service quality and consumer trust. Supporting digital infrastructure and accessibility can promote wider adoption of on-demand services across different population groups.

4. Implications for Literature

The study contributes to existing literature by highlighting key determinants like convenience, cost perception, and trust in on-demand healthcare services. It provides empirical evidence using multiple statistical techniques (correlation, regression, ANOVA, Chi-square). The findings open avenues for future research on behavioural and technological factors influencing digital service adoption.

Scope for future research

Future research can focus on expanding the study with a larger and more diverse sample across urban and rural areas to improve generalizability. It can also compare different demographic groups such as age, income, education, and occupation to better understand variations in buyer behaviour. Additionally, incorporating variables like technology adoption, digital literacy, and user experience can provide deeper insights into consumer decision-making. Comparative studies across various on-demand sectors such as healthcare, food delivery, and e-commerce can further highlight behavioural differences and similarities. Finally, the use of advanced statistical techniques like structural equation modeling (SEM) or longitudinal analysis can offer more comprehensive and dynamic insights into evolving consumer behaviour patterns.

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