

Shopper's Paradise Lost:

Shopping by Elderly Adults in the Age of Big Box Businesses

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ABSTRACT

The United States is undergoing significant societal changes, between the graying of the population and economic shifts that result in the dominance of big box businesses and an overall evolution in our shopping culture. How population aging and economic restructuring affect older consumers needs further exploration. Therefore, this study seeks to understand the shopping experiences of older adults. A purposive sample of twenty older adults were interviewed regarding general factors that affect them as they shop, and specific issues that they contend with in their everyday shopping. Qualitative analysis of the data revealed five major themes: access, mobility, lifestyle, economics and perceptions of change. These findings confirmed and elaborated on previous research, as well as suggested potential future inquiry. The findings additionally indicate areas in which older consumers could be better served by local businesses, for example, in the provision of customer service, and as related to stores' physical features.

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INTRODUCTION

The United States is undergoing a transformation; as in other industrialized countries, the nation is experiencing an aging population due to changes in fertility and mortality rates, and improved health care, lifestyles and opportunities. The resulting increase in longevity is impacting our society in a variety of ways, which will become clearer as the leading edge of the baby boom generation comes of retirement age in the next several years. At the same time, the American economy has transformed from one based on manufacturing to one based on service provision. This economic change has been marked an increase of “big box” stores, an attendant decrease in mom-and-pop shops, and increasing technologization of shopping. Small towns and rural communities have had to deal with such structural changes as well as larger cities.

Within such a structural framework, this study seeks to understand the needs and lifestyles of older adults in regard to one of the most basic of everyday life functions: shopping. A relatively modest amount of research has been conducted on the shopping experiences of elderly consumers, especially as we have entered the new century and in the context of the two previously mentioned social phenomena, population aging and economic restructuring. It is therefore important to understand how an instrumental activity of daily living such as household shopping is performed and what factors affect the performance.

Elders in the Oneonta, New York area were interviewed for this research, which was guided by such questions as what general factors affect our older consumers as they shop, and what specific issues do elders contend with in contemporary shopping culture. Oneonta is known primarily for its college-age population, but is also home to an increasing number of retirees. Additionally, economic and retail changes are evident in Oneonta, which has recently gained a

Wal-Mart and Home Depot, has a downtown area consisting mostly of eateries and bars, and has most of its retail shopping concentrated just off the main interstate exit.

BACKGROUND

Since the early 1970s the American economy has been characterized by a transition from an emphasis away from manufacturing and toward service and knowledge industries (Scott, 2002). This has been due to a combination of improved manufacturing technologies, increased concentration of corporate players, and outsourcing of manufacturing to facilities outside of the United States (Harrison & Bluestone, 1988; Sassen, 2002), and has been accompanied by a similar concentration in retail shopping outlets.

Although much of the media attention addresses the impact on cities, particularly center city neighborhoods, rural communities have suffered many of the same effects (Ames & Ellsworth, 1997; Beaulieu & Mulkey, 1995; Fitchen, 1991; Mattson, 1997). Among rural communities, economic security has been uneven (Lyson & Falk, 1993). In general, the less “rural” a community was, the better opportunities available to it for economic investment and population growth (Thomas, 2003). For instance, communities near interstate highways have been more capable of attracting new investment and people than those at a greater distance from expressways (Lichter & Fuguitt, 1980). Rural communities with ready access to a major city have traditionally fared best (Aronoff, 1997). Not surprisingly, larger rural towns typically grew faster than their smaller neighbors (Brown et al, 1996). In the smallest villages, so many economic functions have been lost that they ceased to exist as independent economic communities (Thomas, 1999).

Rural communities have employed numerous strategies for coping with such profound social and economic changes. Communities near metropolitan areas often try to attract urban corporations by marketing their urban proximity and rural character (Aronoff, 1997). In other cases, rural communities have responded by attempting to attract urban tourists, though with varying degrees of success (Matsuoka & Benson, 1996).

Communities that have survived economically have done so because they typically have a high degree of inshopping – residents tend to shop in their local community. This relationship is a dynamic one as inshopping by local residents can aid retailers in providing consumers with a diverse array of goods and services that satisfies residents, leading to more inshopping (Miller & Kean, 1997; Miller, Kim & Schofield-Tomschin, 1998). Similarly, residents dissatisfied with local retail choices are more likely to shop outside the community (Miller & Kean, 1997) – a pattern called outshopping. As with inshopping, the relationship between community attachment and outshopping behavior is also dynamic: low community attachment begets outshopping which in turn results in less community attachment. Similar trends are evident in Otsego County as well (Thomas, Mansky, Frimer & Natale, 2002). All these economic and community factors have differential effects on elderly residents of rural communities, particularly in terms of mobility, accessibility, transportation and finance. In many cases, elderly shoppers in rural areas reflect the larger trends found among the elderly.

As might be expected, prior research indicates that socioeconomic status plays a large factor in consumer behavior of the elderly, with higher status elders likely to have more disposable income than their poorer neighbors (Abdel-Ghany & Sharpe, 1997; Lee, Hanna, Mok & Wang, 1997; Paulin & Duly, 2002). The relationship between socioeconomic status and shopping is very apparent in purchases related to apparel and leisure and travel expenditures. For

elder homeowners, a significant portion of their discretionary income is spent on house-related items (Abdel-Ghany & Sharpe, 1997; Jackson, 1992; Paulin & Duly, 2002). Socioeconomic status may also play a role in perceptions of shopping activities. Lawther (1980) found that among older consumers, those with the lowest level of education and income held less positive perceptions of their shopping experiences.

Transportation to and from shopping areas is particularly important for the aging population, as “lack of automobile ownership presumably limits mobility, and thus may affect other expenditures” (Paulin & Duly, 2002, p. 38). Rural areas often do not have public transportation services available that would limit where one would shop as well.

The elderly shopper places importance on quality of service and product, often more so than on cost (Greenberg & Lumpkin, 1983). In delineating reasons for negative evaluations by older adults of shopping experiences and customer service, Taylor (1990) puts forth three factors: recollection by elders of excellent service in the “good old days,” a lack of understanding and sensitivity on the part of young personnel, and failure of older adults to make known their complaints. The elderly consumer is more apt to show loyalty to a particular store or business, particularly if the store meets their needs and has friendly, courteous employees (Harris & Stevenson, 1982; Hogge et al, 1988; Lumpkin, Greenberg & Goldstucker, 1985; Miller & Kim, 1999; Oates, Schufeldt & Vaught, 1996; Paulin & Duly, 2002). The personal interaction aspect of shopping is a major concern of elderly shoppers (Greenberg & Lumpkin, 1983).

In addition to the service and interaction involved in shopping, there are other concerns for elderly consumers, especially as related to physical and spatial aspects of shopping. Research finds elders stressing such problematic areas in their shopping experience as selection, packaging and the shopping environment. For example, the older consumer prefers merchandise to be

displayed and packaged with clear labels and tags, easy to remove caps on medicine and smaller quantities of basic necessities, particularly in food products (Oates et al, 1996; “Reaching out,” 2000; Sherman, 1985). Underhill (1996) stresses that store displays and product presentations need to take into account the age-related physical changes that older adults experience, taking steps to compensate for some of the difficulties identified by older adults.

Underhill (1996) also emphasizes that a store’s physical features may be more important for older shoppers than its product selection. He offers strategies for various businesses that involve comfortable seating, waiting area design, educating staff and providing specialty assistance aimed at the older consumer. In an early study of food shopping among elderly consumers, Mason and Bearden (1979) found environmental issues for older adults, such as store temperature, handling carts and needing sitting/rest areas. In terms of accessibility, the older shopper wants ease and convenience in finding items in stores (Oates et al, 1996; “Reaching out,” 2000). Shelf height, particularly in big box type stores, distance from parking lot to the store itself and maneuverability within the store are concerns.

The shopping experience for elders may be a social activity in addition to being a consumer activity. The shopping trip itself may be a social or leisure activity or the trip is combined with other social visits (Miller & Kim, 1999; Rosel, 2001; Smith, 1984, 1991). Graham et al (1991), in examining the use of shopping centers by elders as places of social exchange, found that two-thirds of the sample showed some degree of malingering behavior; in other words, going to shopping centers was a leisure activity and a place for sociability, whether active or passive. Miller et al (1998) suggest that for rural communities, shopping as a consumer activity is embedded in the social networks of the communities. Respondents in their study who had higher levels of social activity expressed stronger intentions to shop locally. Also, older

adults were more satisfied with their communities and had much higher levels of inshopping than middle-aged adults. It is likely that previously mentioned factors, such as transportation, physical limitations and socioeconomic status also play a role in such findings, as higher levels of inshopping have also been identified among urban elders as well, with accessibility arising as an issue (Smith, 1984, 1989).

Life events that affect the social networks of older adults, such as widowhood and retirement, have been shown to also affect consumer behavior and attitudes. Lawther's (1980) research demonstrated that those currently experiencing such role transitions experienced more marketplace dissatisfaction and more frequent consumer problems, and held less positive perceptions of shopping activities, particularly among widowed persons.

Elderly consumers are a distinct market, as indicated by past research (Lumpkin, 1984). Though similar in many ways to younger shoppers, elderly shoppers, particularly those living in rural areas, have issues of mobility, accessibility, availability and convenience to deal with. And as Smith (1988) notes, though distinctive as a consumer segment, elders among themselves have a wide variety of attitudes, needs and behaviors, which are associated with their various social, physical and geographic characteristics. Therefore, it is important to study shopping patterns in various markets to understand what it is the elderly consumer is looking for. Specifically, we need to determine problem areas the elderly shopper faces so as to better serve their needs.

METHOD

Sample and Data

For the current study, a purposive sample of twenty elderly Oneonta area residents was enlisted. The sample was drawn by recruiting participants, aged 60 and older, at three different

sites offering services to the elderly: a congregate meal site, an independent living retirement community, and a government housing complex for low-income elderly persons. Recruiters at each site explained the purpose of the study and took names and phone numbers from willing participants. The subjects were later contacted by interviewers to establish a date and time for the interview.

Data was collected by trained interviewers who encouraged respondents to discuss topics of importance to themselves or other household members, as related to their shopping experiences, particularly in buying food, clothing and general household items. Each interview began with the collection of demographic variables (including self-reported health) and then proceeded through a series of open-ended questions probing the respondent's past and present experiences with issues related to shopping, including mobility issues, size of the stores, and proximity to appropriate retail outlets.

Information on the demographic characteristics of each participant related to age, race, marital status, education, career, health, and residence was entered into SPSS. Basic descriptive statistical techniques were applied to produce frequencies and averages for several of the characteristics. This provided a descriptive overview of the sample. The interview data was subjected to qualitative analysis. Open coding of the interview notes involved marking key words and phrases. Thematic analysis pulled out meaningful themes, patterns and topics from the responses; recurring themes were identified and relevant pieces of text that related to various themes were categorized. Contrasts were also identified, indicating points at which there were differences in the responses.

Participants & Setting

The twenty participants ranged in age from 60 to 87. The majority were female (14 out of 20), and white (19 out of 20). Just over half of the participants (11 out of 20) were still married, and the rest were single, encompassing never married (4 participants), divorced (2 participants) and widowed statuses (3 participants). All had at least a high school education, and felt that their health was fair or good.

The participants were all residents of the Oneonta, New York area. Oneonta is a small city in the northern Catskill Mountains with a 2000 population of 13,292 (U. S. Census, 2004). It is the central city of the Oneonta Micropolitan Area (2000 population: 61,676), which consists of the city, surrounding suburban-style communities, and largely rural Otsego county (U. S. Census, 2004). Due to the influences of two colleges and a hospital, Oneonta is home to a large number of highly educated individuals who moved to the area in order to work in these institutions. Over one third of the county's population live either in the city or in contiguously urbanized areas corridors leading from the city through bordering townships. The county's population as a whole is aging, with the average age 37.1 years and fifteen percent of the county population over age 65. The population, almost entirely white (95.8%), is primarily stratified along socioeconomic and spatial boundaries.

Oneonta is the largest urban agglomeration for a distance of at least 50 miles in any direction, and as a result has been the principal site of outside investment in the region. A commercial strip on the south side of Oneonta includes a small enclosed shopping mall, a Wal-Mart, some small shopping plazas, auto dealerships, and office space. Since 1990, this commercial strip has become dominant over two other suburban commercial areas that have been in decline. The impact of these trends has been a general decline in small locally owned

businesses in lieu of large “big box” businesses increasingly concentrated along a single retail strip. In addition, as not only the Oneonta market has become spatially concentrated along a single suburban strip, retail decline in the surrounding counties has forced residents for dozens of miles in any direction to shop in this one area, creating traffic congestion of a kind that was unknown in previous generations.

FINDINGS

Five major themes emerged from analysis of the data, as related to shopping in the lives of the elder participants: access, mobility, lifestyle, economics and perceptions of change.

Access: “[There are] not enough stores for the west side residents of Oneonta.”

Access as a theme encompasses where participants shop and how they get to places to shop, including whether or not they are accompanied by anyone else. As for places to shop, the major chains and mall located within Oneonta were frequently mentioned by the participants. Where they went specifically depended on factors such as convenience (either the closest stores, or the easiest to get to by bus), products (selection, quality) and prices (perception of cost in terms of quality, generally lower prices for particular products, advertised sales). A few expressed that they felt there was a lack of stores, particularly in terms of convenient places to shop, as revealed, for example, in the above quote.

Most felt that access to stores was fairly easy, with only traffic problems occasionally occurring; those who took the bus had more convenience issues, such as restrictions on when they can go shopping due to the bus schedule. The majority of participants still owned and drove a car, with 15 out of the 20 stating that they drove their cars to go shopping. Three participants

used the public bus system to get around for their shopping trips, while one participant who lived in an independent living retirement community used the community's van to get to stores.

Of the 11 participants who were currently married, 8 regularly go shopping with their spouses, particularly grocery shopping, with the husband typically driving. Of the remaining two, one woman sometimes brings her husband, and one woman usually goes by herself because her husband rushes her. For those participants who are not married, they usually go shopping alone. However, for those who use public transportation and live in the government housing for elderly, several residents often will go shopping at the same time.

Access could also include shopping by catalog, television or Internet. While the Internet is increasingly an option for shopping, only one participant in this sample mentioned using such an option as a means of access; she sometimes bought clothing online. However, 25 percent of the participants mentioned purchasing from catalogs, such as the JC Penney's catalog.

Mobility: "I have to go through the whole store to get a few simple things."

In this study, *mobility* involves negotiation of a store environment, both physically and socially, such as assistance by store personnel (i.e. customer service). However, managing the environment during a shopping trip actually begins before entering the store. One participant felt that there was not enough parking for seniors (meaning parking close to the store); while another said that she purposely parked towards the back of a lot, for more exercise.

Once in a store, participants expressed a range of opinions regarding the ease with which they are able to navigate through the building. The variation depended in part on the physical capabilities of the participants. A participant in a wheelchair thought that he could pretty well get up and down the aisles in the stores he frequented, but felt there still could be improvements in

wheelchair accessibility. Another participant used the motorized carts offered in one of the local grocery stores, and also found it easy enough to get around the building, but had difficulties seeing items and reading prices on higher shelves. The inaccessibility of items up too high was an issue reported by four participants. One participant worked out a system with his wife, where she retrieved items on low shelves, and he got everything that was up high, as he had better reach than her.

Half of the participants reported that the physical layout of a store impacted them. The participant who complained, “I have to go through the whole store to get a few simple things,” referred to the common marketing strategy of placing staples in the back of stores, such as milk. Others noted that in large stores there are usually benches only in the front of the store, but there is nowhere else to sit and rest in between aisles and in other parts of stores. Close proximity of racks and other clutter can make getting around a clothing store challenging, especially for those who have more limited physical mobility. The participants who rated themselves in good health mentioned fewer problems with maneuvering and clutter. One participant reported some difficulty after a shopping trip, as she takes a special public bus for those with disabilities, and is limited in how much she can buy and carry at one time.

Customer service was commented on by some participants. As one woman noted, she cannot always do things by herself and she will ask for help if she needs it at a store, but the problem may be finding that help. Another woman perceived that there are fewer clerks available now to assist her, with technology taking over part of that role; she would prefer to ask a clerk for personal service rather than hunt down an electronic price scanner. Overall, grocery store personnel were perceived as being friendly, helpful and knowing their customers, whereas the major local discount chain had mixed reviews. One participant had trouble finding staff at a

particular store for assistance, and another claimed that the personnel there were unpleasant and un-helpful. Other participants, however, reported that the staff were very helpful.

Lifestyle: “I go to be around people... [It’s] good to get up and walk around.”

Lifestyle is another dimension of the shopping experience that emerged from the interviews, which includes social and behavioral aspects of shopping. Five participants talked about shopping as a social activity. Two couples enjoyed window shopping and browsing in stores for something to do together. One widow, quoted above, reported that she goes shopping every Saturday mainly as something to do, because she cannot really afford to buy very much. The physical activity benefit was also referenced by the previously mentioned participant who purposely parked further away when shopping, for exercise.

Integrating health behavior with shopping extended beyond exercise to also include medical and nutritional issues, as indicated by 40 percent of the participants. A few mentioned that they have particular places where they get their prescriptions filled, because they like the service better. Two participants had diabetes, managed in part by diet, and thus affecting their grocery shopping behavior. As one put it, “[I am] more alert on what I buy, especially since I have diabetes. I look at labels and the content of what I am buying.” Others with various medical conditions, and those who are just trying to be more healthy, also reported checking labels when grocery shopping. Another participant noted that he and his wife “want to buy the best health product at the best price,” for their overall health. The balancing of costs and other concerns such as health was very much an issue for most of the participants.

Economics: “We have to limit ourselves to what we can get because of the prices.”

Economics are naturally an element of shopping that concerns people of all ages, and certainly for these elderly participants, many of whom are on fixed incomes. For at least one participant, the cost of getting to stores, due to the need for taking public transportation for people with health/disabling conditions, was seen as too steep. For this participant and others in lower socioeconomic ranks, their fixed budget allows little for shopping; bills such as rent, utilities and health insurance take up the better part of their monthly income, and the amount left for shopping mainly is used for food and personal/household necessities. Two participants received food stamps, which alleviated the difficulty somewhat. Even among those participants on less restrictive budgets, six ate at congregate meal sites in part to reduce their food costs.

A widespread perception among participants was that prices in stores had greatly increased, and many items are “too expensive” now – about half mentioned this. One participant felt that the limited incomes of elders should be taken into account by retailers, as reflected in his statement above. Several participants reported buying some items at different stores because of better prices, e.g. milk bought at one place, and meat bought at another. Almost half stated they looked for the cheapest store to purchase medications.

Due to a heightened sensitivity to cost, 60 percent of the participants reported specific strategies to find bargains and receive the best value for their money. They paid close attention to sales, with ads and flyers being thoroughly perused by most. Two participants pointedly said they took advantage of buy-one-get-one-free deals as much as possible. For another participant, sale dates influenced when she went shopping, and she would change her usual shopping day if sales were to begin on another day. A few others brought up cutting coupons to save money. Most did price comparisons among various stores, typically for staples such as milk or meat.

Perceptions of Change: “I would walk down to the corner store...Had a store on every corner.”

Finally, participants revealed their *Perceptions of Change* over time in their shopping experiences, in terms both of changes with age and life situations, and changes over historical time, with the evolution of various retail industries and shopping culture. As mentioned previously, eight participants stated being more health conscious now than when they were younger, which has affected how they shop (e.g. checking labels) and what they bought. Half of the participants stated they cooked much less and in general bought smaller quantities now, since they no longer had big families to care for. In addition, participants were making fewer trips to the stores, as 25 percent acknowledged shopping more frequently in the past, going everyday or a few times a week as opposed to the now standard once-a-week shopping.

Another change for three of the married women involved shopping accompaniment. They did all the shopping when younger and still do, but their husbands now tag along, especially for grocery shopping. The women still make most of the decisions as to what to buy, while their husbands walk around or go get coffee.

There were contrasting views as to whether the shopping experience in general was more difficult now than when they were younger. Twenty percent of the participants reported that shopping was “a hassle” now. Factors which contributed to this assessment included disabilities (e.g. vision loss, difficulty walking), a lack of transportation, and having less money/fixed incomes in old age. However, another 25 percent of the participants reported that shopping when they were younger was more difficult. These participants cited financially tight times while raising their families, and with less money, they needed more for their families. They had to be more resourceful in feeding their families, for example, growing their own vegetables.

The most positive change over historical time as cited by participants has been the increase in selection and available choices. Just over 25 percent of the participants felt that within stores, there are more options than in the past. Three other commonly cited changes were negative: cost, convenience, and loss of stores. Several participants stated that prices have increased such that things cost too much today, as compared to relative cost in the past. One fifth also felt that stores were more conveniently located in the past, remembering how they could easily walk to stores. Finally, a few expressed dismay over the recent loss of stores in the area.

DISCUSSION & CONCLUSION

The themes discussed in the context of this study are not altogether surprising, as previous research in other places has revealed similar issues. For example, issues concerning customer service, transportation, physical features of stores, and shopping as a social activity have all been addressed, with similar findings, in earlier studies. This research has confirmed and elaborated on these types of concerns.

A couple issues will also require more attention in future research. One theme that deserves further exploration is the connection between shopping and health behavior (e.g. physical activity and diet). This is an aspect of health lifestyles, an area that is garnering increased attention of academics and the public in postindustrial society. Another aspect of our postindustrial society is the increased reliance on the Internet. Although only one participant referred to online shopping, it is likely that future studies will need to look more closely at the role of the Internet and online shopping for older consumers. Patel and Peach (2003) assert that, while not playing a significant role in online expenditures currently, older buyers can be expected to account for almost 25 percent of online retail spending as soon as 2007.

Older adults in Oneonta have certain advantages over their counterparts in other small communities, in terms of getting to and from local stores, and this is likely a function of community size. Compared to other rural places, Oneonta is large enough to attract businesses that are of use to elderly consumers in the area. This has resulted in a considerably level of inshopping for local residents, and thus seniors are free to spend their time on other pursuits. Oneonta's relatively small size compared to other cities likewise results in fewer traffic problems than elsewhere, although congestion was mentioned by elders as a concern.

Local businesses that are more accommodating of elders' concerns and needs will likely benefit, as suggested by this and earlier research (Graham et al, 1991; Miller & Kim, 1999, Underhill, 1996). For instance, placement of benches and other rest areas throughout stores (not just in the front) can aid older adults shopping in those establishments and, in the process, invite the continued patronage of these customers. Likewise, lowering store shelves and making help in the store more easily available, perhaps through the use of store phones or call buttons, can also be useful for elderly patrons.

Older shoppers did mention that drive time and a relative lack of options are also issues. This has to do with the restructuring of the local economy in line with similar changes elsewhere: increased concentration of retail outlets, especially in "big box" stores; a spatial concentration of retail in the southern corridor; and fewer but larger retail outlets. As noted, these findings reflect macro level changes in the overall economy.

The general findings seem to indicate that local businesses are doing relatively well at meeting the needs of senior citizens. However, as with all matters of importance, there is always room for improvement. As noted by Miller et al (1998), the number and purchasing power of older adults, which can only be expected to increase on both counts, offers opportunities to rural

and small community businesses. Local businesses can improve, with consideration of how the elder cohort may change in the years to come, as well as recognizing the heterogeneity of this segment of the population.

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