Consumer normalcy: Understanding the value of shopping through narratives of consumers with visual impairments

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Abstract

This paper extends our understanding of the symbolic and experiential value of shopping. By exploring the narratives of consumers with visual impairments, consumer normalcy is shown to be an important value of shopping implicit in discussions of shopping experiences. The informants often achieve consumer normalcy, which they reveal consists of four dimensions: participating or being-in-the-marketplace (I am here), achieving distinction through the marketplace (I am me), demonstrating competence and control (I am in control), and being perceived as an equal in the marketplace (I belong). The consumer normalcy construct reveals to readers how shopping experiences contribute to identity and the tension between acceptance by others and individual agency. Reality differs between informants, but their collective realities inform how consumers realize their self and consumption aspirations by shopping.

Keywords: Consumer normalcy; Marketplace; Shopping; Disability; Consumer vulnerability

It is generally accepted that shopping in terms of physical visits to retail venues, and therefore active participation in the marketplace, offers tangible and intangible benefits to consumers (Sandikci and Holt 1998; Zeithaml 1988). Empirical work in the positivist tradition has demonstrated two distinct factors in shopping motive typologies: hedonic and utilitarian (Babin et al. 1994), also referred to as recreational and economic (Bellenger et al. 1977). "Being-in-the-marketplace," having the immediate experience of a marketing venue, recently has emerged as another important benefit of shopping (Sherry 1998, p. 9; see also Chin 1998; Sandikci and Holt 1998; Sherry 1990). That is, in addition to shopping to solve problems or for pleasure, postmodern researchers recognize shoppers are motivated to co-create, with marketers and designers, an experience that is desirable, just for the sake of it (Sherry 1990).

The extant literature informs an understanding of the symbolic meanings derived from retail shopping. Yet, how shopping affirms a person’s identity or place in society has received scant attention, but seems fundamental to the study of the symbolic value of shopping. Consumers use the outcome of shopping (commodities and special possessions) to extend the self (Belk 1988) and that process of self-extension is predicated on the assumption that people are able to generate and acquire possessions for themselves (Pavia 1993). Just as products set the stage for roles consumers perform (Solomon 1983), the retail servicescape sets the stage for the roles a shopper performs (Solomon et al. 1992; Bitner 1992). Consumers learn through socialization the appropriate signs, behaviors, and language which should be displayed in their shopper role; and the appropriate use of knowledge in their shopper role is an important aspect of their identity development and maintenance (Pedalozza 1994). In the marketplace, consumers can try on identities as readily as they can try on clothes, and yet marketers do not understand how consumers value shopping with respect to its role in their process of self-definition.

Most discussions on the value of shopping have been developed within populations of primarily middle-class, able-bodied, Caucasian consumers (for an exception see Chin 1998). However, a variety of scholars in the marketing field have argued that exploring the lived-world of consumers in different subcultural groups may yield unique insights into consumer behavior (e.g., Chin 1998; Hill 2002; Hill and Stamey 1990; Kates and Belk 2001; Pedalozza 1994). There

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is no a priori reason to believe that shopping behavior and its value in a given subculture is different per se, but there is reason to believe that shopping behavior and its value may be more salient.

In the case of the present research, marketers almost always assume consumers will use some type of visual information in the shopping environment to serve themselves: They will look for the price on a can of peas, choose coordinating pieces of clothing for a wardrobe, or signal a waiter as he passes. In addition, with the exception of goods withCreedence attributes, consumers are presumed to evaluate their marketplace encounters with some amount of visual information. (Is this product the one I wanted? Does this color look good on me? Is the amount shown on the deposit slip right or wrong?) That is, the implied presumption behind most exchanges and much of the marketing and retailing literatures is that consumers acquire and use visual information to participate in marketplace encounters and make consumption choices. When retail stores are designed, the assumed state of affairs is that consumers are sighted and visually attuned to labels, colors, lighting, point-of-purchase displays, point-of-sale information, and merchandising. These visuals, like images in advertisements, provide a symbolic system that is assumed to be cognitively processed by consumers as they move through the shopping environment (see, e.g., Scott 1994).

Nearly one in five consumers in the United States has a mental and/or physical disability, making people with disabilities the single largest minority group at nearly 50 million (Waldrop and Stern 2003). Of these, about four in 100 have a sensory disability of sight or hearing (Waldrop and Stern 2003). Visual impairments range from severe (no light vision) to some visual stimulation, yet still being considered legally blind. Many legally blind people are impaired to the degree that reading signs and other printed materials and/or distinguishing landmarks and faces is difficult, if not impossible.

Given the nature and design of most marketplace activities, a consumer with a visual impairment may have to make accommodations to shop. For example, a consumer with a visual impairment may have to arrange for transportation to and from the marketplace and may want to request assistance from a service provider, paid reader, friend, or family member once he/she arrives. That is, the marketplace imposes a number of substantial barriers to shopping for a consumer with visual impairments. These barriers certainly can be and are overcome by using a variety of adaptive responses to the marketplace (Baker et al. 2001), but why is it worth the effort to shop?

It is not at all surprising that consumers with visual impairments would want to shop; after all, shopping is part of the everyday life of consumers (Miller et al. 1998; Underhill 1999). Little has been written inside the marketing literature about how consumers shop to create and maintain their identities or about how consumers with visual impairments perceive and respond to the marketplace. The purpose of this paper is to develop an understanding of the symbolic and experiential value of shopping that is implicit in the narratives of consumers with visual impairments by showing how specific individuals personalize the shopping experience to create and manage their identities.

The paper contributes to the literature in three primary ways. First, it extends our understanding of the value of shopping, yielding a perspective about identity that is not apparent in other empirical investigations on the value of shopping. Second, it explores the retail servicescape as a public space, and investigates how successful that public space is in providing the benefits desired by consumers with visual impairments. Third, the Americans with Disabilities Act of 1990 mandates that people with disabilities be given access to public accommodations and services, and this paper helps the reader understand in part why the legislation was implemented.

The paper begins with a brief review of the literature that documents the importance of shopping to individuals and to consumer culture. Next, an existential-phenomenological study, designed to help the reader empathetically understand the particular narratives of informants who have visual impairments, is described. After providing an interpretation of a symbolic value of shopping missing from the literature, namely consumer normalcy, implications for theory and retailing practices and policies are offered.

Background

Shopping in everyday life

Shopping is an important ritual in the everyday lives of consumers (McCracken 1988a). That is, shopping rituals constitute a normal, everyday activity (Miller et al. 1998). Shopping is a “...social action, interaction and experience which increasingly structures the everyday practices of urban people” (Falk and Campbell 1997, pp. 1–2) and may well be the driving factor in modern life (Miller et al. 1998).

Shopping provides the opportunity for individuals to engage in self-construction, where one’s self is changed because of a shopping experience (Crawford 1992; Falk and Campbell 1997; Sandikci and Holt 1998). That is, the shopping experience may fundamentally change the way an individual thinks about himself/herself and his/her capabilities in the marketplace and as a person (Crawford 1992; Sandikci and Holt 1998). For example, a person can examine products and see what they might like to buy at some point; through this process, they realize who they are and who they might become (Crawford 1992). Or, a person, such as someone in grief, may use shopping as a form of therapy to help reassemble a sense of self (Gentry et al. 1995). Thus, the marketplace, and all of the consumer behaviors that occur within the marketplace, help to formulate a person’s identity, that is, who I think I am and how I think others view and judge me (Solomon 1983).

Shopping also affords consumers with the opportunity for social interaction, which helps achieve social integration and...
creates feelings of community (Hewer and Campbell 1997). In fact, it may be true that to be part of a community, one must be able to shop. As consumers shop, they are engaged in producing a self-image, which other members of the shopping community interpret (Sandikci and Holt 1998). Thus, shoppers go through shopping encounters constrained by the image that they want others to have of them (see e.g., Goffman 1971). Furthermore, a person’s view of him/herself may depend upon and, in fact, be created by acceptable uses of rituals (Goffman 1959), including shopping rituals. When I can choose my own products and when I can pay for my own merchandise (because marketers seem to suggest I should), then who I am is acceptable to me and to others.

**Normalcy in everyday life**

Every culture has a set of conventional standards, or norms, which are used to determine what is normal or different (Goffman 1963). It is normal for people to define and understand themselves and each other through their material possessions (Belk 1988; Crawford 1992; Kleine and Baker 2004; Kleine et al. 1995). These possessions become part of the self through self-extension as consumers exert control and mastery over possessions (Belk 1988). It is not just the possession of the material goods that is important to one’s identity, it also the ability to generate and acquire these possessions on one’s own that form the basis of one’s identity (Pavia 1993). In other words, for identity to be reflected in possessions, consumers have to be able to interact with and/or acquire possessions, and the place where much of that shopping (interaction and/or exchange) occurs is the retail servicescape, a very public place.

If shopping is indeed a normal, everyday activity (Miller et al. 1998), then not shopping is the opposite—not normal or different. But what is normal? Erving Goffman’s body of work, much of which focuses on how individuals struggle to be something different than their official identities (Battershill 1990), provides a conceptual foundation for understanding at least a portion of what normal or acceptable means. According to Goffman (1971, p. 239), when something is normal, the world around it, interprets it as “natural” and as “nothing out of the ordinary.” In other words, normalcy is a perception; it is “sensed” (p. 239). When something is not normal, it is perceived as inconsistent with the way things are supposed to be. For example, a person who does not shop for him/herself may be sensed as not normal, especially if that person has not chosen to avoid shopping, which some people, in fact, do.

People who have an attribute that is perceived as unusual, uncommon, or undesirable may wish to live like any other person and be accepted for who they really are (Goffman 1963). Ritual activities (including shopping activities) are viewed as potential performances for showing others that they are normal and what they are capable of doing (Goffman 1971). If these people are not able to demonstrate otherwise, they may not be able to appear as normal as they want others to believe they are (Birenbaum and Sagarin 1973; Goffman 1963, 1971). “The normal appearances that they are concerned with are not normal appearances for them but normal appearances of them” (Goffman 1971, p. 259 *italics in original*). In other words, they want their appearance to be seen as normal (expected); and, if one’s appearance is normal, then one is a member of the in-group (Goffman 1963). If one is a member of the in-group of shoppers, then one is anticipated, accepted, and viewed as a natural part of the marketplace.

**Method**

**Approach**

Because of a desire to understand the informants’ retail experiences and concerns, this research was guided by an existential-phenomenological philosophy (Thompson et al. 1989; Valle and King 1978). This approach focuses on developing an understanding of life experiences from the individual informants’ perspectives rather than from a third person perspective. The depth interview method allowed insight into the retail experiences of consumers with visual impairments and the ways that consumers with visual impairments might or might not experience a different reality from sighted consumers, who are typically recruited as research participants. In addition, it helped gain an understanding of the differences between consumers with visual impairments. As one would expect, the interview texts clearly demonstrate that not all informants have the same needs and concerns in the marketplace.

**Interviews**

Interviews were conducted in three cities with populations of between 100,000 and 600,000 people in the Midwest and South. Twenty-one individuals with varying levels of visual impairments volunteered to participate and provided accounts of their interactions with the marketplace, including store/service personnel, other customers, and the more general retail environment. About half of the informants were contacted through a state agency that provides services for individuals with visual impairments. Prior to each interview, the informants were told that the purpose of the study was to gain an understanding of their perceptions of their shopping experiences. The informants, whose names have been changed to preserve anonymity, are legally blind; however, some have low vision capabilities in that they can see “big blobs,” some light, and read text with significant magnification. The informants ranged in age from 20s to 80s, two were blind since birth, two used guide dogs, some were employed in positions such as college professor, telephone operator, rehabilitation counselor, and vendor, while others were students, retired, homemakers, or classified themselves as unemployed. Table 1 presents a profile of each informant.
Table 1  
Profile of informants

<table>
<thead>
<tr>
<th>Name</th>
<th>Gender</th>
<th>Age</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alice</td>
<td>Female</td>
<td>30s</td>
<td>Married; phone operator; lost sight 10+ years ago; no vision</td>
</tr>
<tr>
<td>Arlene</td>
<td>Female</td>
<td>30s</td>
<td>Married; expecting a child; runs a convenience store in an office building; blind; 10+ years; no vision</td>
</tr>
<tr>
<td>Ben</td>
<td>Male</td>
<td>50s</td>
<td>Married; rehabilitation counselor for people with visual impairments; lost sight 15+ years ago; no vision</td>
</tr>
<tr>
<td>Bonnie</td>
<td>Female</td>
<td>70s</td>
<td>Widow; grown children; losing sight for 10+ years; low vision</td>
</tr>
<tr>
<td>Carla</td>
<td>Female</td>
<td>50s</td>
<td>Married; grown children; co-owner of a restaurant; losing sight for 3 years; low vision</td>
</tr>
<tr>
<td>Denise</td>
<td>Female</td>
<td>20s</td>
<td>Single; student; losing sight for 10 years; low vision; guide dog</td>
</tr>
<tr>
<td>Elsie</td>
<td>Female</td>
<td>60s</td>
<td>Widow; homemaker; losing sight for 5 years; low vision</td>
</tr>
<tr>
<td>Hal</td>
<td>Male</td>
<td>30s</td>
<td>Married with children; tenured social sciences professor; lost sight 15+ years ago; no vision</td>
</tr>
<tr>
<td>Jim</td>
<td>Male</td>
<td>40s</td>
<td>Married with children; vendor; slowly losing sight over last several years; low vision</td>
</tr>
<tr>
<td>Karen</td>
<td>Female</td>
<td>30s</td>
<td>Married; rehabilitation counselor for people with visual impairments; blind from diabetes about 8 years; no vision; interviewed twice; former student of author</td>
</tr>
<tr>
<td>Ken</td>
<td>Male</td>
<td>50s</td>
<td>Married with child; tenured social sciences professor; blind since birth; no vision; guide dog</td>
</tr>
<tr>
<td>Len</td>
<td>Male</td>
<td>40s</td>
<td>Married; vendor; lost sight 13 years ago; no vision</td>
</tr>
<tr>
<td>Lila</td>
<td>Female</td>
<td>70s</td>
<td>Widow; retired; losing sight for 15+ years; low vision</td>
</tr>
<tr>
<td>Linda</td>
<td>Female</td>
<td>30s</td>
<td>Married with children; low student; blind since birth</td>
</tr>
<tr>
<td>Lucille</td>
<td>Female</td>
<td>30s</td>
<td>Married with children; out-of-home sales; homemaker; losing sight; low vision</td>
</tr>
<tr>
<td>Myra</td>
<td>Female</td>
<td>30s</td>
<td>Recently divorced; children; unemployed; just began losing sight; low vision</td>
</tr>
<tr>
<td>Nancy</td>
<td>Female</td>
<td>40s</td>
<td>Married; does computer work; losing sight from a degenerative eye disease; low vision</td>
</tr>
<tr>
<td>Naomi</td>
<td>Female</td>
<td>70s</td>
<td>Widow with children and grandchildren; retired cosmetic sales person; losing sight for 10 years; low vision</td>
</tr>
<tr>
<td>Ruth</td>
<td>Female</td>
<td>80s</td>
<td>Widow; retired encyclopedia sales rep; losing sight for 10 years; low vision</td>
</tr>
<tr>
<td>Sam</td>
<td>Male</td>
<td>40s</td>
<td>Married; rehabilitation counselor for people with visual impairments; lost sight 20+ years ago; no vision</td>
</tr>
<tr>
<td>Violet</td>
<td>Female</td>
<td>70s</td>
<td>Widow with children and grandchildren; homemaker; losing sight for 5+ years; low vision</td>
</tr>
</tbody>
</table>

Asterisks (*), (**), (***): denote married couples; names are pseudonyms.

The interviews were conducted in the informants’ homes (primarily) or offices and lasted from 45 to 90 min, with an average of slightly over 1 hr. One informant, “Karen,” served as a conduit to over half of the informants, was interviewed twice, and allowed the author to spend multiple days with her as she worked, traveled to clients’ homes, ate at restaurants, and visited a mall. The interviews were tape recorded and transcribed verbatim.

Consistent with interviewing techniques discussed by Thompson et al. (1989), conversations unfolded around topics that informants thought were relevant. That is, emergent dialogue was a characteristic of the interview process. Each interview began with the informant telling a little about him/herself and he/she was asked to remember an experience in a retail or service setting that stood out, either because it was extremely positive or extremely negative. This represented the “grand tour” question designed to create dialogue without focusing on any particular research question (McCracken 1988b; Thompson 1997). Probes with different kinds of retail and service settings (e.g., restaurants, hotels, banks, hair salons/barbers, transportation services, medical providers, discount stores, department stores) and different kinds of affective states (e.g., comfortable/uncomfortable, stressful/relaxing, positive/negative, friendly/not helpful) were used to stimulate conversations. This kept the informants’ discussions at the experience level, versus the abstract level (Thompson and Haytko 1997). Informants were not specifically queried regarding shopping motivations; thus, their remarks on this topic were not subject to framing by the researcher or rationalizations on the part of the interviewee (McCracken 1988b).

Analysis

As the texts were read, an important story related to the value of shopping implicit in the informants’ narratives began to emerge. Thus, shopping value became the orienting conceptual framework for reading the texts. From there, two types of analyses were employed: analysis focused on a particular informant and analysis between informants.
Each interview was read and the reasons for participation implicit in different shopping encounters described by the informants were listed. This intracase analysis focused on individual life experiences and how a particular informant personalized and adapted to his/her shopping experiences (i.e., the existential part of the method). Statements from the notes include such things as “wants to shop because always has shopped,” “try-
ing to be independent” “wants to be treated like everyone else,” and so forth. Next, interscase analysis was done to look for common story lines or themes. More specifically, this interscase analysis looked across the individual narratives to draw out the common story between informants (the “structure of the experience” as in its phenomenology) (Thompson 1997; Thompson et al. 1989).

The common story line that emerged from the informants’ interviews, and which offers a unique understanding on the value of shopping, is summarized in the following description, implicit across narratives:

Everyone shops. I want to be accepted like everyone else that shops, but I also need you to recognize me as an individual, who has unique needs. I belong here. You think it is okay that I am here. Yes, I can do and do do things on my own. I shop. I dress. I am a competent person in control of my consumer behavior.

This story line guided the interpretation of the data. The reasons for shopping that had been documented, including the representative quotes, were re-read with a particular focus on what was recognized as similar to Goffman’s (1963, 1971) notion of normalcy. Attention became focused on consumer normalcy, a concept not previously discussed in the retailing literature, which was indicated by a desire to be both accepted for whom one is by others and acceptable to one’s self. This reading and re-reading, combined with a focus on the literature, allowed understanding of the informants’ worldviews and set aside the researcher’s expectations (Thompson 1997; Thompson et al. 1989). This hermeneutic process also helped make the different dimensions of consumer normalcy provided in the accounts become salient.

Findings

The narratives of these consumers reveal a value of shopping missing in the marketing, retailing, and consumer research literatures. Informants put themselves in the retail environment to achieve consumer normalcy. Consumer normalcy reflects how identity is constructed and maintained in part through shopping and is defined as a desire to live like other consumers, be accepted as other consumers are, and be acceptable to one’s self in consumption contexts. The textual data reveal that consumer normalcy consists of four dimensions—participating or being-in-the-marketplace, achieving distinction through the marketplace, demonstrating competence and control, and being perceived as an equal in the marketplace.

Participating in or being-in-the-marketplace: “I am here”

Participating in or being-in-the-marketplace is a desire to participate in the co-creation of a shopping experience with marketers and/or other customers. At perhaps the simplest level, consumer normalcy consists of experiencing the pleasures the marketplace presents and performing the role of shopper. Many informants articulated the sense of excitement that being in a store holds, as this informant, who had recently lost her sight, relates.

My feeling was, when I walked through the door I said, ‘I am here. This is great!’ . . . I was like a kid in a candy store. I had some money in my pocket, and I just had to find the right candy and that was it! [Bonnie]

Bonnie’s first trip to the store after she lost her sight held the same thrill and excitement for her that Sherry (1990) relates for flea market patrons. But, for Bonnie, the excitement goes beyond the thrill of the chase or taking in the experience, it also has to do with proving to herself that she still exists and can participate as a shopper, as she reflects when she says, “I am here.”

Bonnie has always been a shopper, so much so that she has fantasized about being locked in a store over night. I used to have a fantasy of getting locked up in [a store] and that was ten floors of department store. And I said I hope they close the doors and they don’t know I am here. And then when I get tired, I will go to the mattress department and take a nap and then wake up in the morning after a good night in bed! But now, when I am free to do that [no longer working], I don’t do it. And I still try to push myself to go shopping. [Bonnie]

Though she has lost her sight, she still has the same fantasies. She pushes herself to go shopping, because to not go shopping would be letting go of her dreams, and a piece of her identity. The ritual act of shopping is an important role performance (Solomon et al. 1985), and Bonnie needs to act out her part of the script.

Being in retail establishments allows one to be a participant in a normal activity of everyday life, but getting there is not always easy because of transportation difficulties. However, when given the choice, most informants would rather go to a store than have someone else (family member, friend, or service provider) shop for them.

They [my neighbors] said, ‘Do you want us to buy your groceries and bring them, or do you want to go?’ And I said, ‘I want to go.’ I always have gone. I make a list and go to the grocery store and I buy all these things. But I have friends, and they never get to go to the grocery store. Their husbands go and pick out the groceries. They bring them home and
I think they are missing a lot. [What do you mean missing a lot?] In not getting to go to the store. I want to go to the grocery store. [What do you like about going there?] Well, we talk on the way as we go, I just like it. [Naomi]

By being-in-the-marketplace, Naomi is maintaining her shopper role, that is, being the one to get the groceries. Naomi is preserving her identity as a shopper who actively participates in her shopping experiences, rather than passively surrendering to her disability. Tauber (1972) suggests that one type of personal satisfaction from shopping is the opportunity to enact a socially prescribed role. Not only is Naomi’s role a social prescription as Tauber suggests, but her role as shopper also contributes to feelings of completeness as an individual. Indeed Naomi seems to regard her friends that avoid shopping (and their role as a shopper) as living a less than complete life. Going to the store is not just about coming home with the groceries: it is also about experiencing the social interaction of shopping, picking out goods, and achieving self-completion in the marketplace.

Beyond the sensory pleasure and the desire to fulfill one’s role as a shopper, some informants, particularly the older ones, say they want to be in public places, to relieve feelings of isolation.

I prefer going to the grocery store myself . . . I used to depend on people to bring me things and they would find things they thought were better, and it might have been better for them, but it wasn’t better for me . . . I find that I have been getting to like my own company. I am a charming person. [But] I think a little bit of me is too much. I need to get out and circulate. I find it an unhealthy habit to be alone. I am just intelligent enough to know that psychologically, when you start wanting to just be by yourself, you’re cracking up when all is said and done . . . I could stay eight hours in a grocery store. I wouldn’t mind. I used to do it when I was sighted. [Bonnie]

Bonnie knows she is not alone when she is shopping. Though she may not talk directly to the other shoppers and most retail employees, she experiences the marketplace as a “communal meeting place” (Sandikci and Holt 1998, p. 323). Bonnie, like other consumers, uses shopping as a way to address a negative affect (i.e., loneliness), as shopping is seen as a social activity (Forman and Sriram 1991) and as a form of social support (Kang and Gulday 1996). This social activity may be an end in itself to some (Sandikci and Holt 1998, p. 324), but to Bonnie, it also relieves her loneliness and verifies that she is normal. For Bonnie being alone, at least too much of the time, is not normal; whereas, being-in-the-marketplace is a way for her to verify to herself that she is normal and her identity is intact; she is not “cracking up.” When people, like Bonnie, are actively involved, they are ensuring that their minds are functioning and they are situated in the present (Langer 2000).

Although most forcefully expressed by female informants, particularly Bonnie and Naomi, all informants generally regard being-in-the-marketplace as a personal imperative.

Active participation in the retail environment provides hedonic and therapeutic value to the informants. Shopping provides a venue for the informants to continue consumer roles and consumption dreams. I am here. I am normal.

Achieving distinction: “I am me”

Consumers actively seek to distinguish themselves from others through possessions and experiences (Belk 1988; Celsi et al. 1993). All of the informants in one way or another discussed the importance of maintaining or achieving some level of individuality. Paradoxically, to achieve that distinction, their distinction must be recognized as within some normal range, thus acceptable. Most importantly, they want that distinction to come from their personal tastes, not their blindness.

A couple of weeks ago I was in [a department store] with [Alice], the one you were talking with, I was in the [Mall] shopping with her and we went into [a department store] looking for some jeans for her and this lady came up to me and said how did the pants you got work out with the sequined top? I am like, oh my gosh she remembers. [I. So did having her remember that make you feel any differently about the store?] Well in a way, not that I spend hours upon hours thinking about this, but in a way you are wondering, did they remember us because we can’t see. I mean, when people come in there with canes and what not, they are going to stand out more than your average sighted person is. So you are wondering, it makes you wonder sometimes why they remembered you. Did they remember just because you are blind or did they remember because of what you bought? [Lucille]

Lucille was thrilled that the store employee had remembered what she bought the last time she was in, and this made her feel comfortable in the store. She hopes her distinction came from their interaction and her choices, but in a moment of self-consciousness, she questions what part of their previous encounter helped the woman remember her. She knows that she stands out because she is blind, but she wants to stand out because of her individuality, not because of a category. When people are appreciated for who they are, then they are normal (Guffman 1971).

Many informants read signals in the marketplace that suggest discomfort on the part of retail establishments to serve consumers with visual impairments.

This is kind of a joke around in the blind community. There are a few restaurants for example that have a quote unquote “blind table.” That is usually the first one in the door. And again, this shows that they are uncomfortable, how to get the blind patrons back to some other seating . . . and who knows why they want you out of the way, because you are considered to be unsightly, a little bit, or you need more attention, so it cuts down on bothering other people in the restaurant, because these people need more attention. [Ben]
Ben knows that he is not like all people who are blind, and when he is seated at what he perceives as "the blind table," his distinction comes from being blind. He, as well as other informants who talk about this experience, goes to a restaurant because he wants to enjoy himself and have his consumer needs met, not because he wants to be treated differently because of his blindness. Sure, he might need some accommodation, but he does not want to be treated differently because of it. This practice may seem normal to restaurant managers, but it does not seem normal to the informants. In this type of situation, the informants are recognized as disabled first, instead of as customers with unique needs. They are distinguished by their disability, not by a deeper understanding of who they are.

The informants are not only grouped with others who are blind, as in the "blind table," but several indicated they also are grouped in the broader category of people with disabilities with practices that present unexpected barriers to participation in the marketplace, as Linda explains.

One thing I don’t like is a lot of times they have accessible dressing room reserved for people that are in wheel chairs and sometimes because it’s handicapped accessible they want me to use it. Well, I don’t want to use it. First of all, it never has a chair and it’s huge so you have all the space you need but there’s no chair. So I think they have those for people in wheel chairs but it’s not for me. It’s actually less convenient for me . . . One time [I got] this big dressing room and they said I couldn’t use another one because I was a blind person. And that made me really mad so I said I’m not going to try anything on then. [Linda]

In this instance, she wanted the dressing room attendant to recognize her as an individual and attempt to understand her needs and the attendant clearly did not do that. In contrast, Linda also relates:

I had a clerk at [department store] last fall who helped me pick out some suits. I tried some on and she’d say ‘nope, that’s horrible.’ And I’m going to trust someone if she tells me that because she’s not there only to sell a suit, she’s telling what color looks better on you, or what doesn’t look good. And that kind of thing makes me trust a person . . . You know in a department store that everything you try on does not look great and if you are trying stuff on and they’re always saying ‘oh wow, that really looks great.’ I’m not going to trust them at all. [Linda]

In this situation, the retail employee took the time to see Linda as an individual. The employee recognized that Linda would understand that not everything looks good on her. By contrasting Linda’s two consumer experiences, one sees that in the first instance her distinction in the marketplace came from her disability and in the second instance her distinction came from being recognized as a person who has unique desires, and is also a smart woman. In the first instance, the retail person views her as disabled first, and in the second instance, the retail employee views her as a person with unique needs and wants first.

It is normal to define one’s uniqueness and self through consumption and experiences (Belk 1988; Celsi et al. 1993; Pavia 1993). However, when distinction occurs through a disability (a stigma in Goffman terms), then identity is spoiled (Goffman 1963), and the individual has to struggle for acceptance. Conversely, when distinction occurs through recognition of being a unique person, then acceptance occurs and normalcy is achieved. Consumers can make choices that are within some range of acceptability, and at the same time these choices can be considered creative or unique (Tepper 1997).

That is, one can be unique (non-conforming) and acceptable (conforming) all at the same time. The reality is that it is normal to be one’s self. The informants clearly struggle with wanting to receive distinction in the marketplace for who they really are, and not for an individual characteristic, that is, blindness. I am me. I am normal.

Displaying competence: “I am in control”

It is commonly accepted that humans desire to act in ways that will result in important outcomes and know the situation when they are not able to act to accomplish their goals (Heckhausen and Schulz 1995; White 1959). People want to control important outcomes, and they can achieve that by controlling their external worlds (e.g., doing something to produce an outcome, making a choice) or by controlling the way situation is interpreted within the self. When an individual controls the external world, he/she exerts primary control and when an individual controls his/her interpretation of a situation, he/she exerts secondary control (Heckhausen and Schulz 1995). The informants are like all people, as even those who are relatively homebound desire control over their consumption activities.

Like if I’m at the store, that’s fine if they think a tomato looks good, but I still touch it, I want to feel it and see how firm it is. I want to know because I know when I’m going to eat it . . . And if something is ripe, like a banana, I know if I’m going to eat it that day as compared to next week. So it’s important to me to know what’s going on. [Karen]

While Karen appreciates the perceptions of others, she clearly wants to exert primary control over the acquisition of her consumer goods. She takes responsibility for meeting her own needs and, at the most fundamental level, choosing her own produce at the grocery store helps her accomplish that. Primary control can be achieved through any number of strategies in the grocery store. The strategies the informants choose depend on their perceived skills, individual preferences, and the time they have to complete the shopping task. When I go shopping on my own usually I will ask for assistance because you know I mean some of the things I can find but it is just too time consuming for me to go around and
try and figure out what stuff is. Now I do normally ask the individual assisting me to hand the things to me so I can look at it before it goes in the basket. [Sam]

Sam can read some store signage and package labels; however, it takes him a significant amount of time to do so. Thus, he will often ask for assistance in the store, but he still likes to be active in the process. Sam, like several other informants who use this strategy, wants the items on his grocery list handed to him and then he puts the things in his cart. This strategy lets Sam know that he has what he wants, but at a more abstract level, it allows him to maintain control while completing the shopping task.

Multiple mini-encounters in retail experiences provide situations where control can be established (or not).

[What does independence mean?] To be able to follow the hostess to the table without needing special assistance, which working with a dog works very well. Also, being able to read the menu and have current availability of prices and items, so that like anyone who is in there, I can make an informed decision about what I want to eat. And you know, being able to deal with the check and the tip and the finances at the end of the meal and then get back out on the street without needing a lot of assistance, maybe I could say, only needing minimal assistance. It gives me a feeling of independence. [Ken]

Ken, “like anyone who is in there” wants to be in control and active in his own choices. Control often requires action, but it also may include cognition and choice (Heckhausen and Schulz 1995). Having a Braille menu so that he is knowledgeable about his choices, paying the bill, and getting in and out of the restaurant with only “minimal assistance” help Ken maintain control and achieve independence. He recognizes he needs some assistance that is different than what a sighted customer needs, but he wants to define what type of assistance he receives, because he knows he is capable of consuming much like any other person. “Normal appearances are what the individual has come with time and practice to learn that he can cope with easefully” (Goffman 1971, pp. 258–259). Ken can experience consumer normalcy if some accommodations are available and he is allowed to define the assistance he needs in his consumption experiences.

Several informants described situations when they could not maintain the control they desired, such as when service providers attempted to help them without asking what they needed.

Sometimes when you are walking to your table [in a restaurant], people will try to get you to take their arm or something, but I don’t like to do that because I like to try to remember where I’m going. If someone will just talk to me then I’ll just walk behind them or if it’s real noisy I can walk ahead of them if they just say ‘turn left here’ or whatever. . . . It comes down to really being in control of yourself and knowing what you’re doing and not expecting other people to do things for you that you can do yourself. . . . It [control] has to do with self-respect and pride hopefully. And I don’t want to be seen as, I mean I want to be seen as a person who happens to be blind. [Linda]

Linda, like the other informants, wants to be recognized as an individual. She wants service providers to see her not as a blind person, but as a person who happens to be blind. She wants to define the assistance she needs (if any) and she needs to be in control. She does not expect others to do things for her that she can do herself.

Because retail transactions most often are defined around the assumption of being able to use visual cues, when individuals do not have vision, they may choose to depend upon service providers to provide them with information and assist them in completing the exchanges. That is, they may have to relinquish some control to receive appropriate assistance. A few, only a few, of the experiences the informants recounted (which came after much prompting) reflected situations where retail employees had tried to exploit their visual impairment, as Sam explains:

I was, you know, went to a liquor store several years ago here in [city]. [I] purchased, I think it was a six-pack of beer. I paid the man behind the counter with a twenty. It was like $3.00 for the six pack so counting the change back he says, you know ‘Three and one is four and one is five, five is ten and ten is twenty with all my change.’ And the woman in line behind said, ‘Hey did you give him all ones?’ [And he had given me all ones, though he described them as something else]. So you know I got some free beer out of the deal. I probably could have taken him to court. But, at the time, I was a little bit younger and you are just happy to get out with a free six-pack and all your money. [Sam]

Unfortunately, this retail employee believed he could short change Sam and Sam would never know. Luckily, another consumer stepped in such that Sam walked home with all his money and a “free six pack.” Still Sam believes the retail employee would have never counted the change back like that for someone who was sighted. It appears that the employee viewed and judged Sam as vulnerable and exploitable and this impacted Sam’s self-perceptions, in particular about the control he has in the marketplace. In public places, such as this retail store, consumers give special status to what Goffman (1971, p. 309) calls “stocked characters.” Because these people perform functions that determine how the consumer assigns meaning to the situation, they have the power to assist or exploit the consumer. When exploitation is perceived, then the situation is not normal (Goffman 1971).

Shopping allows the informants to be active agents in their own consumption decisions and establish their place in the marketplace (see also Chin 1998). In a few cases, articulating their needs to someone who shops for them, also allows for an acceptable level of control. When the informants are provided the opportunity to play an active role in the marketplace, they feel accepted. Their right of participation is confirmed by their demonstration of knowing what to do and say (see also Birenbaum and Sagarin 1973). Individuals,
particularly those with so-called stigmatized identities, must work especially hard to demonstrate competence (Goffman 1971). For most informants, displaying competence in the marketplace is of utmost importance; they have an "intrinsic need to deal with the environment" (Whitley 1959, p. 318). For only two informants (one who had just lost her sight and one who is in her 80s and avoids the marketplace), displaying competence in the marketplace was of little concern. However, for the other informants, who are generally able to display competence in most consumption situations (like most consumers), successful experiences in the marketplace help them recognize their potential and realize their self-aspirations.

Psychological theories of control have been couched in situations when status depends on an individual’s ability to control a situation. Often excluded in psychological studies are "everyday activities that are trivial with regard to control, such as deciding what item to select from a menu" (Heckhausen and Schulz 1995, p. 285). This theme, and the more general construct of consumer normalcy, reveals that status does, in fact, depend on being able to choose what to order on a menu and for some consumers anyway, status also depends on being able to pick a tomato at the grocery store, pay one’s bill, put groceries in one’s own cart, or arrive at one’s destination with only minimal assistance. That is, consumer status and acceptance comes from displaying competence in meeting one’s needs as a consumer.

To be normal, one has to be able to shop. Normal does not mean people have to shop. It means they have to be able to shop. In the process of shopping, they create an impression of who they are, not only by the items they choose, but also, more importantly, by their ability to generate the set of self-reflective activities and objects that symbolize themselves by themselves. I am in control. I am normal.

Perceived as an equal: “I belong”

The final dimension of consumer normalcy evident in the narratives is the desire to be perceived as ‘equal’ in the marketplace, which is consistent with a basic need for all people to feel like they belong (Goffman 1963). The informants do not need to be accepted by every individual, but they clearly want to be accepted as natural in the marketplace, most especially in their communities and the public places where their everyday lives happen.

Many informants make social comparisons between how they are treated in the marketplace and how they perceive others are viewed and judged. That is, a shopper uses elements of the retail servicescape to determine how others evaluate him/herself (Solomon 1983). The informants perceive normalcy when the interaction seems fair and equitable. Such a perspective is consistent with Goffman (1963, 1971), who suggests that if someone is viewed as normal, they are accepted and treated like everyone else, that is, equitably. Intense frustration occurs when barriers to acceptance are imposed by retail employees who do not appear to recognize a consumer with a visual impairment has a right by law to be in their establishments.

There is one place in town, a Chinese restaurant, and I met some friends, they were waiting for me, and they were not going to let me in with the dog. And I said, ‘No, I can have a dog here. It is okay. I have some papers.’ And, finally one of my friends got up and you know, he was a little upset, and he was very nice about it, but you could tell he was upset because he had been watching me go through this for five minutes. So, they finally let me sit there with my dog, but you know, it was like, you stay here, stay in this area . . . . [What is it you want most from a waiter or waitress when they help you or when they serve you? What do you want most from them?] To be treated like everybody else.

Denise felt excluded and unexpected when she had to explain her presence in the restaurant. Earlier in the interview, she indicated her guide dog made her feel more accepted by people, because people think he is cute, but clearly here, the guide dog set her apart and contributed to her lack of acceptance by at least one person. She plainly says that what she wants most is “to be treated like everyone else.” She wants to be viewed and judged as an equal to others in retail environments. She is fighting against being perceived as an ‘other’ (see also Pelayoza 1994).

The informants seek signals in retail stores that they are expected (e.g., acceptance of guide dogs, Braille menus, asking questions of what is helpful). When such signals are provided, it indicates acceptance of them as individuals and validates their place in the marketplace.

Don’t ever assume the sighted person is the one paying the bill. That is very degrading. Leave the check in the middle of the table and ask both of them how the bill is [to be paid].

Karen wants service providers to expect her to pay the bill because being expected to pay the bill means that she is a member of the community of consumers and she is like other consumers who are anticipated and accepted. Further, Karen wants to be respected for the professional woman that she is, including the economic power that she possesses. Karen, like other informants, needs service providers to understand that she has the ability to pay for her consumption needs. She does not want service providers to make assumptions about her because she is blind, she wants them to recognize her as an equal and as being in control. Similarly Kates and Belk (2001) found that gay and lesbian consumers are motivated to demonstrate economic power in hopes of personal and collective liberation.

Goffman (1971) relates the importance of interactional respect in social interaction, which would include market exchanges. A retailer that is perceived to not recognize a person with a visual impairment as a consumer is being disrespectful.
The one I don’t like is when they say, ‘What does she want?’ [to one of my friends]. I get that now and then. ... I don’t know. I just feel degraded. Why don’t they talk directly to me? I am a person, and I am there, and I could answer ... I want to be treated as if I am the client. I am a widow now. My husband died two years ago, so I have to be out on my own a lot more than I did. ... I mean if I am paying the bill, I want them to talk directly to me, instead of my friend. [Naomi]

Naomi takes the service providers action to mean that she is not normal, she is not like everyone else, and she is not a person who can make decisions for herself. This general experience that Naomi relates indicates that she has experienced at least one situation where a service provider has not recognized her as an individual and where he/she thought Naomi’s friends knew her needs better than Naomi herself. Naomi has been treated like a thing and that is dehumanizing (Goffman 1971). Naomi knows that a human being who is treated like a thing is viewed as a non-person or, at the very least, not normal. The other informants shared similar stories where either a service provider him/herself (e.g., medical doctor, purchase pal) believed he/she understood the informants’ needs better than the informants did or where a service provider assumed the people the informants were with were making their decisions for them. They are not viewed as equals in these situations (I do not belong), nor are they recognized for their individuality (I am not me).

Interactional respect in the retail environment also means that a person is treated like an adult, especially when he/she is an adult.

There are a lot of times when [service providers] will treat you like a little kid or they’ll talk loud, because you know, a person who is blind is also deaf. And they are like ‘HEY THE CHAIR IS OVER HERE!’ And, you are like, ‘Gosh, I’m getting out of here.’ ... I mean half the time I’m laughing because you know it’s so silly. Or otherwise I’ll just tell them ‘you know, hey I’m not deaf, I can’t see you, but you just saying you’re over here or whatever that helps.’ [Karen]

Karen, like all human beings, clearly does not want to be in situations where she feels disregarded, but as long as she perceives such behaviors are a result of ignorance, she may attempt to help the service provider understand what she needs. But, clearly Karen interprets this service provider as assuming that visual impairment equates to total impairment.

Consumers, including the informants, recognize that “observing and being observed by strangers” is part of the shopping experience (Sandikci and Holt 1998, p. 325). People, their appearance and their behaviors, are on display for others to judge (Belk and Bryce 1993; Hussain and Langer 2003). Perhaps because of their careers as counselors for people with visual impairments, Ben and Karen were the most vocal about the importance of managing public perceptions in the marketplace, but other informants also view themselves as representatives of people with visual impairments, who they hope someday will be viewed as equals in the marketplace. They seem to recognize, as Tauber (1972) suggests, the shopping experience provides an opportunity to command attention and respect.

8 [educating others] gets old. It just gets old. It’s okay in some senses. I really do believe it’s important to answer people’s questions and so forth, but sometimes, you know, maybe we [my wife and I] have stuff that we’d like to talk about, or issues we need to deal with, or sometimes we need and want our privacy as well. It’s kind of a mixed bag. [Ken]

Ken, like several other informants, views himself as an educator for people in the sighted world. He is “constrained to sustain a viable image [of himself] in the eyes of others” (Goffman 1971, pp. 185–186). When he cannot do anything to control how others view him, so that he can maintain his self-esteem, he frames the situation as a chance to educate people. This type of secondary control (Heckhausen and Schütz 1995) helps Ken, and the other informants, focus on achieving goals that are attainable. Ken might not feel accepted and expected in this situation, but if he believes that he is educating people on how competent people with visual impairments are, then maybe next time, the situation will be better.

Viewing oneself as an educator by using a secondary control strategy as an adaptive mechanism comes with a price. Ken believes that having to be on stage and educating people all of the time hampers his ability to lead a normal life when he is in public. Similarly Karen said, “You [as a blind person] have to remember that you are a role model ... and there are days when I just want to be me.” Goffman (1963) notes that stigmatized individuals, or those who are perceived as different than normal because of some characteristic they possess, often believe they have to act to be accepted as normal. Goffman (1965, pp. 122–123) also suggests that adjustments like these on the part of individuals can result in a better society, but he also acknowledges that such acting has a “false bottom” because the individual is not free to act naturally. In other words, the education that the informants engage in has long-term benefits to society in terms of acceptance for consumers with visual impairments, but it is not without costs to the individual self. In support of this notion, Hussain and Langer (2003) found that when people present a genuine picture of themselves in situations, then their self-esteem is increased, but when they pretend, the pretense does not raise their self-esteem. They further propose that presenting an inauthentic self (this is not me) to receive acceptance or praise from others can have a detrimental effect on the individual. Ken and Karen have articulated that effect above: “To belong, I cannot be ‘me’.”

Consumer self-concept, or identity, in part, is based on “a projection of how one appears to others” (Solomon 1983, p. 323). An estimate of how others view oneself, as one performs one’s role as a shopper, is made through interaction in the retail servicescape. As the interaction occurs, the shopper assigns meaning to the multiple, symbolic elements that constitute the retail servicescape. The informants want to be...
accepted and do not want to feel like they are on stage all of the time. They want to be a regular and expected part of the retail servicescape. When social cues suggest that a customer is being exploited or being treated as inferior (e.g., ascriptions of total impairment that turn visual impairment into auditory and mental impairments as well), then one feels unnatural. Conversely, when social cues indicate that one is being treated like other customers (for better or worse), one feels accepted. I belong. I am normal.

Summary of the interpretation of consumer normalcy

Consumer normalcy is achieved through being-in-the-marketplace, realizing distinction, displaying competence, and being perceived as an equal. The informants express the dimensions of consumer normalcy in varying degrees. For example, being perceived as an equal in the marketplace appears to be a greater benefit for some informants than it is for others, just as the desire for being-in-the-marketplace seems to be a greater benefit for some informants than it is for others. Additionally, the dimensions are not necessarily mutually exclusive, as each represents different aspects of the self and there are multiple layers to the self that are difficult to divide into discrete categories (Gergen 1991). However, the dimensions show how these informants define what consumer normalcy means to them in their everyday lives.

Discussion

By informing our understanding of how consumers value shopping with respect to its role in their self-definition processes, this paper contributes to previous research on the importance of experiential and symbolic consumer behaviors in identity construction and reconstruction (Belk 1988; Kozinets et al. 2004; Schouten 1991). Consumer identities are intertwined with and perhaps often inseparable from the retail servicescape. That is, consumer identity, shopping behavior, and the retail servicescape are woven together socially, making self-definition through shopping and consumption the norm.

Consumers simultaneously want to experience the pleasure of the marketplace, personalize the shopping experience to their unique desires, have control over the process, and be perceived as an equal participant in the consumption experience: they want to experience consumer normalcy by living like other consumers and having identities acceptable to themselves and others. Tension can be created in the servicescape when consumers are unable to derive these values of shopping in the marketplace. When consumers shop, they are trying on or affirming identities using the personal characteristics they use in their self-definition processes; thus, when symbolic elements in the servicescape suggest they should use alternative personal characteristics to define themselves, they feel unnatural or not normal. For example, the informants see themselves as people with visual impairments, not people defined by visual impairments. When the informants perceive others view them as like all people with disabilities or incapable of making their own choices, and when ascriptions of inferiority are indicated (e.g., assuming someone who is blind will not pay the bill), then they feel unnatural and not normal, which is the exact opposite of what they are seeking in the marketplace. When a person is labeled or evaluated as “disabled,” then the person is viewed from a single perspective (Langer and Chaonowitz 1987). In reality, there are several ways of viewing a person, which provide flexibility to the standards of optimal fit. With flexible external standards, it is more possible for the individual to experience personal control (Langer 2000).

Experiential and symbolic elements in the servicescape which are not flexible and which indicate consumers are viewed from a single perspective stigmatize and repress consumers, particularly those in less powerful groups in society. The stigmatized and repressed then must be in a constant state of negotiating and fighting for their identities (see also Kozinets 2001). When external factors in the retail servicescape interact with a person’s individual characteristics (e.g., visual impairment) and/or individual states (e.g., motivation), and inhibit a consumer’s opportunity to be in the marketplace or to exert control over their consumer behavior, the consumer experiences vulnerability, and the self is literally in jeopardy (Baker et al. 2005). Thus, though the retail servicescape can enhance a consumer’s identity or help a consumer create or recreate his/her identity, it can also devalue it and contribute to consumer vulnerability. When symbolic elements of the servicescape signal certain customer types should not be there, who they are is not okay, they are incompetent, and/or they are not part of the in-group of shoppers, the servicescape communicates certain customer types are not normal. Consumers cope with threats to the self by anchoring their behaviors in their own perceptions of consumer normalcy. This coping strategy is necessary for self-preservation, and it suggests that perceptions of normalcy differ between social groups.

Being-in-the-marketplace is part of the essential ground for being in the contemporary world and when some consumers perceive they are not accepted and expected, the retail servicescape is responsible for the segmentation between various social groups as defined by physical ability, race, age, and often gender. This type of segmentation fails to recognize the ability and willingness of many consumers to acquire and consume in the retail servicescape. The outcome of this segmentation, intentional or not, is a repression of and a devaluing of the identities of certain groups of people, one of the negative consequences of marketing.

Implications for retail practices and policies

A variety of practical implications flow from this study. First, the retail servicescape communicates to customers whether they belong or not. Signals can be used to target shoppers and bring them in, but it will be their actual
experience within the store that determines whether they want to return. That is, targeting helps in the acquisition of customers, but it does not help in their retention. To be retained as customers, consumers need to perceive that retailers recognize their uniqueness, through characteristics that are important in their own self-definition process, which may not be characteristics that are more readily apparent (e.g., a visual impairment). That is, when others take the time to see the genuine or authentic self of consumers with visual impairments or other types of disabilities, they are helping to reduce the prejudice and repression that consumers with disabilities may experience (see also Langer et al. 1985).

Second, training for retail employees should include information on, and perhaps even role playing to demonstrate, why participation is important across customer types, how to recognize the uniqueness of consumers (beyond their visible demographic characteristics), how to ask questions about what type of assistance is desired so that the consumer can maintain control, and how to communicate that the shopper is expected. These informants with visual impairments indicate some relatively simple things which could be done to help shoppers achieve consumer normalcy including engaging in friendly banter to create the social aspect of shopping, asking questions about personal tastes, allowing people to define what type of service they will receive (e.g., choice of table, dressing room, or type of directional assistance), providing information in nonvisual format (e.g., Braille menu or signage), and displaying interactional respect (e.g., leaving the check in the middle of the table at a restaurant or speaking in normal tones). A key aspect of this training needs to be to educate retail employees that consumer tastes are driven by characteristics inside a person, not by characteristics that are visible to the employee. Thus, training employees how to ask questions to understand their customers’ needs, regardless of the visible characteristics of shoppers, is fundamental.

Finally, when the Americans with Disabilities Act (ADA) was signed into law in 1990, proponents celebrated it because they believed it was a step toward the inclusion of people with disabilities into mainstream society, including public accommodations (Baker and Kaufman-Scarborough 2001; Stephens and Bergman 1995). Mainstream means normal, anticipated, and expected. These findings affirm the importance of this legislation, or at the very least its intent, by demonstrating that participation in public spaces such as retail servicescapes is important to the public interest. As this research shows, shoppers with disabilities, in particular shoppers with visual impairments, want more than structural accommodations, they want to be able to participate, to be understood, and to feel like they belong. Such a perspective has been relatively absent from education materials on the ADA for retailers, which instead have tended to focus on structural accommodations (Baker and Kaufman-Scarborough 2001; Kaufman-Scarborough 1999; Kaufman-Scarborough and Baker 2005). Education should now also include information on social accommodation, such as that described above.

**Future research**

Numerous possibilities for extending and further validating the concept of consumer normalcy are apparent. In contextual inquiry, it is the framework, not the findings, that is generalizable (Schouten 1991; Peralta 1994). The consumer normalcy construct could be extended to understand the value of other consumer behaviors in other types of identity projects (Kleine and Kleine 2000), such as material possession attachment (e.g., Belk 1988; Kleine and Baker 2004; Kleine et al. 1995) or adored brands or servicescapes (e.g., Kosinets et al. 2004).

Future research into the temporal aspects of consumer normalcy is certainly warranted. Over the life course and at different times during one’s life, the need to achieve consumer normalcy likely varies. Future research should examine the role that shopping plays in identity maintenance and construction over the life course. For instance, during role transitions when the self is less stable, it may be that shopping has more of an impact on the self, and it may be during these transitions that consumers experience the greatest vulnerability. This is an empirical question worthy of investigation. Further, how individuals are socialized to understand what normalcy means has not been the particular focus here. Rather, the focus has been on what normalcy means to identity. Developing an understanding of how consumers learn what is normal would enhance the literature.

There are a variety of other subcultures that could be examined to enhance our understanding of the value of shopping. The consumer normalcy framework is a place to continue with developing a further understanding of the needs of children, teens, elderly, gay males and lesbians, ethnic/racial groups, people who are illiterate, and people with all types of disabilities in the marketplace.

By putting themselves in the marketplace, consumers with disabilities are resisting being labeled as “other.” Shopping and other forms of consumption verify to oneself and to others that one is normal, and when one is treated as not normal, then groups of people may display behaviors indicative of consumer resistance (e.g., Peralta and Price 1993). Future research that builds a theory of consumer resistance is sorely needed. Just as immigrant consumers refuse to use and buy particular products (Peralta 1995), lesbian and gay consumers freely express their identities at parades and festivals (Kates and Belk 2001), prisoners at concentration camps create their own consumption opportunities such as play performances when other consumption opportunities are denied (Hirschman and Hill 2000), and African American collectors of black memorabilia transform grotesque representations of blacks into something more pleasing to the self (Baker et al. 2004), consumers with visual impairments are working to establish their individual and collective identities in the marketplace. The fight is significant as it reaffirms their self-significance and status in the marketplace.
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