THE IMPACT OF LONGEVITY ON OLDER CONSUMER NEEDS: IMPLICATIONS FOR BUSINESS

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ABSTRACT

The main objective of this study was to investigate the impact of longevity amongst the elderly on their consumer needs and how business should cater for these specific needs. The study focuses on the perception of senior citizens with regards to businesses’ recognition of, and catering for these needs. Five specific daily needs were investigated viz. clothing, food, cosmetic, entertainment and health needs. A qualitative study was executed with five separate focus group interviews, involving 20 senior respondents (aged 60+ years) in each group. A semi-structured interview guide led the discussions; all responses were tape-recorded and data were content analyzed. Summary tables reflected the main themes emerging from the interviews. Results were structured according to five assumptions deduced from available literature. These assumptions were examined, based on responses from participants.

Results suggest that there is ample room for business to improve their catering for clothing, food, cosmetic and health needs of elderly consumers. Businesses’ should enhance training of salespeople serving elderly consumers specific needs in the areas mentioned above. However, more research is needed to verify these findings.

INTRODUCTION

Global businesses would not think of ignoring China. Nearly all the Fortune 500 companies have a presence in China. Flooding into new markets makes sense, especially one with 1.4 billion people. So, if this is true, why aren’t more businesses targeting people aged 50–plus? The mature consumer market is a global market, nearly the size of China, and it is entirely new in the sense that people this age have never had so much spending power, staying power and ambition (Kadlec, 2016). According to Joseph Coughlin, director of MIT AgeLab, people older than 50 are in control of 70% of the USA’s disposable income (Coughlin, 2016). In South Africa approximately 5.3 million residents are older than 55 years and an estimated 40% of this cohort is affluent, living in metropolitan areas (Rousseau & Venter, 2014).

Many of these retired elders pursue an active lifestyle by doing volunteering work at an NGO, starting a small business, mentoring new employees in a business or taking enrichment courses. Many remain socially active, want to look and feel great and will spend large proportions of their income to get the experience of living a meaningful life as senior citizens. Laura Carstensen, director of the Stanford Center on Longevity stated that 29% of Americans aged between 65 and 69 still work for pay and the trend continues implying a sustainable quality of life for senior citizens (Carstensen, 2016). Sara Rix refers to age-friendly careers and state that many open-
minded companies see older workers as experienced, loyal, dependable, excelling with customers and able to use good judgement (Rix 2016). In South Africa, many retired and elderly people occupy jobs such as nursing, caretaking at retirement homes, security officers, work supervisors and consultants. The reason for such post-retirement jobs could be the increased cost of living, lower income levels, inflation and dis-saving amongst many households. John Loos (2016), states that in the absence of any improvement in the slow economic growth in the country, it would seem the current thinking of many around retirement age, being between 60 and 65, is outdated. Given South Africa's ageing multiracial population, many of the older age cohorts will have to work longer, something in many instances, already happening, given the skills shortages amongst the younger age cohorts (Loos 2016).

The purpose of the research reported here is to determine the impact of longevity for businesses in South Africa as consumers live longer due to better healthcare and an active lifestyle. Within a specific sample, the research problem is an evaluation of the impact of longevity on elderly consumer's needs.

The longevity paradigm is based on two major factors namely genetics and environmental conditions. Living longer is a blessing but how to fund the extra years has emerged as a global conundrum, one that cannot be solved with current pension systems (Kadlec, 2016) The longevity paradigm from a business perspective, not only involves what you can sell to seniors, but also how you can attract them to your workforce. McKinsey in Kadlec notes that 60% of the world’s population lives in countries with fertility rates, below the replacement rate, suggesting the likelihood of a shrinking labour force (Kadlec, 2016). In South Africa, there is currently a serious shortage of skilled labour in the farming community, engineering profession, health services (doctors and nurses) and other areas such as mechanics and plumbers. Companies with flexible employment policies and a supportive organizational culture, can help to address this skills shortage problem. Age-neutral hiring and promotion, lifelong learning opportunities, health and pension contributions as well as financial-wellness programmes, can go a long way to stabilize an ageing population in a country. Elderly people are often vulnerable to stereotype threat when they perform memory, cognitive or physical tasks. Research (Lamont, Swift & Abrams, 2015) has shown that negative stereotypes, not facts, do the damage. However, exposure to positive stereotypes about their social group, often lead people to achieving better performance, for instance, when telling senior citizens that businesses needs their purchasing power, values their contribution to the work force and the economy of the country (Barber & Mather, 2012).

The purpose of this study however, is limited to addressing the consumer needs of elderly citizens (60+years) in South Africa for specific products such as clothing, food, cosmetics, entertainment and health products. This age group was selected as most research on elderly consumers regard 60+ as a cut off point for studying this segment of the market. (Meneely, Stugnell & Burns, 2009; Rousseau & Venter, 2014; Stats SA profiles, 2014; 2017). Furthermore, many organizations view 60 as the retirement age when employees are compelled to retire. More specifically, the study focuses on the perception (views and experiences) of senior citizens with regards to businesses’ recognition of and catering for these special needs, often required on a daily base. Perceptions influence consumers buying behavior. This is especially important amongst senior citizens as they have considerable experience of dealing with various businesses over time. Joshi (2016) prioritized needs of the elderly in terms of finance, housing, health care, dietary, nursing and social. These needs however, represent broad categories and could not all be included in the limited scope of the present study. To structure the format of this investigation, general assumptions or statements were set, based on the appropriate literature discussions.

LITERATURE REVIEW

The term longevity is defined as long life or the length of a person’s life and various factors may contribute to an individual's longevity such as gender, genetics, access to healthcare, hygiene, diet, nutrition, exercise, lifestyle and crime rates (CIA World Factbook, 2010). In developing countries such as South Africa, the life expectancy ranges from 32 to 80 years. Life expectancy at birth of the South African population of 56,5 million people, were 61,2
years for males and 67.7 for females in 2017 and according to statisticians, continues to rise (Stats SA profiles, 2017). This is mainly due to the expansion of health programs by government, related to combating of HIV AIDS and TB. The government is presently focusing on addressing non-communicable disease such as heart disease, diabetes and tuberculosis, particularly amongst those aged 65 and above.

Statistics South Africa states that the percentage of the population aged 60 years and above, rose from 7.1% in 1996 to 8.0% in 2017. Presently, almost 5 million people in South Africa, in all population groups, are over the age of 60 (Stats SA profiles, 2017).

A cut off point of 60 years for respondents participating in the present study was set. It was previously established by the author that most of the institutions sampled (i.e. old age homes, retirement villages) catered for residents in the age bracket 60+ years.

The term business can be viewed as the activity of buying and selling commodities, products or services. Broadly a business pertains to commercial, financial and industrial activity (Business definitions of business, 2009). For the aim of this study businesses’ is narrowly referred to a specific field of selling goods and services to elderly consumers. Rousseau and Venter (2014) observed in a study on mall shopping behaviour of elderly consumers, that the latter had specific needs and preferences for products and services. Elderly shoppers wanted high quality products at good prices in easy-to-open packages with easy-to-read labels, especially with regards to nutrition and health products. Patrick Dixon (2008) echoes these sentiments. He states that many patrons eating in European restaurants are over 50, yet very few 50- year old patrons are able to read a menu by candlelight without reading glasses. The small print on the menus’ is usually designed by younger people in print shops, not for senior citizens.

It has also been established that older people have both time and money but are also more careful about spending than many younger people. They are less easily impressed by the latest fashion, are interested in how long things last, value for money, and are unlikely to be rushed into a decision (Dixon, 2008; Rousseau et al 2014). It is therefore important for marketers to focus not only on younger people when promoting goods and services based on the assumption as these models are perceived to be “cool” but also to use older people to get the message right. Older sales people often are more experienced and can better identify with a client’s needs, irrespective of the clients’ age.

Clothing needs for the elderly. As people grow older their figures are changing. Some retailers are today focusing on elderly apparel. Elderly clothing is a line of clothing that is both age appropriate, easy to wear and easy to care for (Buck & Buck 2016). As people age, it becomes more difficult to move, stretch, bend and twist, making the process of dressing a bit of a challenge at times. Some companies are realizing this and design clothes for seniors to look good, feel good and make clothes that help keep the wearer as independent as possible, for as long as possible. These companies realize that loss of independence in the daily task of dressing, can be very difficult for aging people and therefore place their dignity in the forefront of their designs (Buck & Buck, 2016).

Adaptive clothing is engineered to meet the needs of individuals with limited mobility. It refers to any clothing and footwear designed specifically for seniors, the elderly who need assistance in dressing. Many elderly customers look for skid-resistant footwear with anti-slip soles to protect them against falling. People suffering from Arthritis need shoes that are easily adjustable for width to accommodate swelling (Silvert’s, 2016). Senior citizens, unfamiliar with adaptive clothing, often buy oversized shoes, tops and pants to assist with dressing difficulties. However, such oversized clothing can cause discomfort and pain. Buying for instance, oversized footwear to accommodate swelling, can be especially dangerous, as the likelihood of injury from falling, increases significantly, when people wear shoes that are too long. In South Africa, the footwear-industry no longer manufactures half sizes in shoes, which limits consumers’ choice of shoe size.

Rousseau et al (2014) mentioned that retailers in South Africa often ignore the needs of the mature market, because they target consumers in their teens and early adulthood. These authors found that mature shoppers’ expectations exceeded their experiences in shopping malls, suggesting among others, that...
they often struggle to find products suitable for their needs. Visser and Du Preez (1998) echoed these sentiments in earlier research by stating that apparel retail and manufacturing businesses, should increasingly focus on the needs of mature consumers, to sustain continued growth. From the above, it can be postulated that the specific clothing needs of senior citizens are not adequately catered for in South Africa. The following assumption was formulated to address this issue.

A1 Retail business should focus on clothing needs of elderly consumers in South Africa

Food needs: Seniors are a diverse group of consumers who highly value their daily dining experiences, partly because diet is an important component of maintaining proper health, but also, because food and dining experiences have a positive impact on the quality of life of elderly populations. However, there is a serious lack of knowledge on the topic of senior citizens food preferences (Roberts, 2002; Cowan, Gilligan and Cavey, 1997; McKie, 1999; Costa and Jongen, 2010). A study conducted in the Netherlands by Van der Zanden, Van Kleef, De Wijk and Van Trijp (2014), found that elderly consumers were predominantly skeptical about functional food, due to a lack of nutritional knowledge. The authors suggest that medical advice could be an important facilitator, to overcome barriers to purchasing and consuming protein-enriched food. In South Africa, where obesity is becoming a serious problem amongst the population, proper education in health food preferences, is needed. Statistics from the SA Medical Research Council show that 70% of adult women over the age of 35 were overweight and that black women were exposed to the greatest risk of obesity (Van Heerden, 2015).

Eating out in restaurants and coffee shops, is an important way of spending leisure time for elderly consumers, visiting shopping malls. Older consumers are “experience driven” and socializing with peers, form an important part of their lifestyle (Rousseau et al 2014; Myers and Lumbers, 2008). It is thus important for restaurant owners, to cater for the specific pallet of senior patrons. Kadlec (2016) states that menus that feature anchovies, blue cheese and other strong flavours, can break through faltering taste buds, and attract senior patrons to their restaurants and coffee shops. Nutritionally, bedtime snacks can also help them sleep better.

Meneely, Strugnell and Burns (2009) found that older people face a range of positive and negative experiences, when accessing food at retail stores in Ireland. Positive factors included the variety and choice of food products available, when shopping for food, whereas negative factors included physical access problems, in terms of store choice, such as transport and dependence on others. The authors conclude that contemporary retailers are not fulfilling all the needs of this age group. These findings were supported by the research in Port Elizabeth by Rousseau et al(2014).

It is doubtful whether the hospitality and retail industry in South Africa, is catering sufficiently for the needs of senior consumers, when it comes to food preferences. The following assumption was thus formulated to further investigate this general statement.

A2 Retail business should focus on the food needs of elderly consumers in South Africa

Cosmetics needs: Skin health is a prominent priority for elderly consumers. Seniors are generally more susceptible to skin infections and skin disease, due to the changes that take place to the skin, as people age. The skin becomes less supple, thinner and dryer. It injures and heals more slowly. As a result, seniors are more prone to skin problems (Skin Cancer Foundation, 2016). Cosmetics, generally defined as care substances used to enhance the appearance of the human body, involves a subset of products, specifically designed for skincare protection. Such products include cleansing and skin-care creams, applied to the face or any other parts of the body, exposed to harmful sun rays. Many manufacturers distinguish between decorative and care cosmetics. As many elderly people suffer from dry skin, due to natural changes in skin that occur with age, moisturizes and lotions are used to hydrate the skin, and help retain moisture. Desai (2014), found that quality, was the most important factor for all ages, when buying cosmetics in a study, performed in Kolhapur, India.

A large component of the cosmetic industry, however, focuses on make-up or decorative substances, to enhance the appearance of the
human body. Facial creams, lipsticks, eye and facial make-up, are used by all ages of customers. Apart from basic skin care, many elderly consumers also use make-up cosmetics, to maintain a dignified appearance as they grow older and become less attractive. Because the cosmetic industry is a multi-billion business worldwide, it needs regulation to protect consumers against harmful products. In South Africa, the cosmetic industry is estimated to contribute R25 billion to the economy, without considering the informal sector (SA News, 2011). With an increasingly ageing population, this figure will grow, as the need for cosmetics and skin care expands.

South Africa is a dry country with harsh climate. Sun-exposure during the summer months is severe. During winter months the air is very dry, especially up-country. Due to climate change, consumers are becoming more aware of skin health and the prevention of serious skin conditions. There are various popular magazines, promoting various cosmetic products, to prevent premature ageing. One such magazine is called "Longevity". Unfortunately, these magazines focus mainly on the youth and middle-aged readers. The elderly market is often neglected, despite this cohort of customers’ needs for special skin and facial care products. Examples are prevention of dermatitis, characterized by dry itchy skin, cancerous skin growths, and viral skin disorders, such as shingles. Amongst the black communities, more needs to be done to educate disadvantaged elderly consumers, in the use of safe cosmetics for skin health, and protection against harmful sun rays.

Based on the above discussion the following assumption was set for further investigation.

A3 Retail business should focus on the cosmetic needs of older consumers in South Africa

Entertainment needs. Older people need familiar surroundings, and people around them, and hence prefer staying at home in old age. Their living room is such a surrounding and for many. Radio and TV entertainment is a lifeline to the outside world. Many are trapped by loneliness and fear, that the outside world is mean and devoid of compassion. Older people in South Africa, although a vulnerable group, are not regarded as a priority. Family structures are changing, and older persons can no longer rely on their children, for care and support. South Africa is also a country of many cultures, and great diversity. It is also a country that has a rapidly ageing population, due to a drop in the birthrate, and people living to a greater age. As the number of seniors increase, so also will their diversity in terms of culture, lifestyle, health, education, income and entertainment. All forms of electronic and printed media (radio, TV, newspapers) represent a primary gratification for the ageing audience in the sense of being involved in the world, acquiring information and being entertained, as a way of passing time (Reid 2016). In South-Africa, where SAARF (South African Advertising Research Foundation) measures radio listening and TV audiences, it is estimated that more than 30-million listeners tune in to a range of radio programming where all the country’s 11 official languages get airtime (SAInfo, 2012). According to the SAARF, South Africans spend an average of three-and-half hours, daily listening to the radio. Of those, one can assume that a large proportion is elderly listeners. In South Africa, the official TV stations of the SABC (channels 1, 2 and 3) have an audience of over 30 million viewers, with a coverage percentage of the population (penetration) averaging 91% (About Us; SABC, 2014) Research shows that TV viewing does increase after the age of 55, although all media usage, including television decreases amongst the oldest members of society (Reid 2016). In the USA, radio listenership is estimated at 93% of the population which exceeds TV viewership at 85% (News Generation 2015).

Although many of today’s elderly are housebound by health or limited resources, and therefore dependent on printed and electronic media, as a main source of entertainment, countless others are highly mobile and active. For those, community activities, is a major source of entertainment. They are members of clubs, churches, NGO’s or other social groups and find their involvement stimulating. Live music and variety show, as well as attendance at sporting events, and travelling, are also major sources of entertainment.

There are several tour operators in South Africa, that cater to the special needs and interests of senior citizens. The country is an ideal holiday destination for senior travellers, as it has an excellent infrastructure and modern medical facilities. The country is large and diverse, in
terms of its geographical areas, landscapes, people, cultures, places of interest, wildlife and cities. Tours are planned, to ensure that guests not only see, but experience the country (Zeiler, 2015). Many attractions and facilities in South Africa, also offer reduced entry fees or rates, for senior citizens upon proof of identity.

Other friendly entertainment facilities for older citizens include cinemas, concerts and retail stores, offering discounts to senior patrons. The ‘gaming industry’, is also particularly accommodating to senior citizens, who like to gamble at casinos, by offering special concessions to them. From the above, incomplete overview, it seems that the entertainment needs of senior citizens are adequately met. Therefore, the following assumption was set for further verification.

A4 Retail business adequately meets the entertainment needs of older consumers in South Africa

Health needs: Access to appropriate healthcare is one of the key issues determining whether an older person can remain active within his/her community. Health is the most important requirement, when it comes to elderly needs. With advancing age, the body tends to slow down and becomes less efficient. Elderly people are prone to a few age-related health issues such as ‘arthritis, eyesight and hearing deficiencies.’ regular medical check-ups’, can help prevent serious health problems.

In South Africa, there are 28 organizations caring for the needs of the elderly, according to the SA Older Persons Forum (SAOPF, 2016). The role of the forum is to promote the rights and dignity of older persons, consult and advise government, and raise public awareness of the special needs of the elderly, particularly their housing and health needs. Presently 4.42 million (8%) South Africans, are 60 years or older. In his budget speech in February 2016, the Minister of Economic Affairs raised the disability and care dependency grants for elderly citizens substantially (Age in Action, 2016). One of the most important prevention measures of health care is nutritious food. Meals-on-Wheels is a community service for the aged, helping the elderly to maintain a healthy diet in their sunset years, by providing a meal delivery service to old aged and private homes, in disadvantaged communities.

Another branch of the Health Ageing Society of Africa is Dementia South Africa. This society manages and cares for dementia and Alzheimer’s patients, through training of family and friends to nurse these patients. It also contributes to research on the Alzheimer’s disease through donations from its members (Gallagher 2012). Due to loneliness, many older people living on their own suffer from poor mental health. They tend to become depressed and lose interest in their surroundings. Church organizations in the country, help to draw these people out of their homes and get them involved in community activities. The ACVV are one such NGO. Others include gatherings such as Club 65 and Seniors Dating (SAOPF 2016).

There are also other companies focusing on the healthcare needs of elderly consumers. One such company specializes in mobility of older and disabled persons (Healthcare & Mobility 2016). This company specializes in products that help older people remain independent in their homes by providing adjustable beds, riser and recliner chairs, bath lifts and aids as well as mobility scooters. Unfortunately, many less affluent, older persons, cannot afford these amenities. Currently, the public health sector is under pressure to deliver services to 80% of the population while the private sector, (medical schemes) run largely on commercial lines, caters to the middle- and higher-income older patients (Healthcare in South Africa 2012).

Rural people bear the greatest burden of poor health care, because they bear the greatest burden of poverty, according to David Harrison (Harrison, 1997). There are 4200 public health facilities in South Africa with the state contributing about 40% of all expenditure on health. Despite this statistic, rural public health facilities are facing a shortfall of thousands of doctors. State hospitals and clinics in rural areas don’t only have to treat HIV Aids, TB, malaria and cholera patients, but also older people who often don’t get proper home care in over-crowed dwellings (Taylor 2012). From the above, it seems that health facilities for the poorer section of older citizens, especially in the rural areas, experience the greatest need for healthcare. Consequently, the following assumption was set for further investigation.

A5 Private medical schemes and public health facilities needs to pay more attention to the healthcare of older people in South-Africa
METHODOLOGY

The study followed a qualitative non-experimental design that used focus group interviews. Malhotra (2010), states that focus groups are interviews with small samples, conducted in natural, semi-structured ways, to gain insight and understanding of consumers' perceptions, preferences and behaviour towards a product or service. Focus groups give an in-depth view of the way people narrate and justify their behaviour. This is especially useful in an exploratory study (Kerlinger & Lee 2000).

Sample

For this study five focused groups were used and were comprised of twenty respondents per group. All the respondents were between 60 and 75 years. A non-probability purposive sample was used in the study, drawn from retirement villages, old age homes, church communities and NGOs catering for the needs of senior citizens in Port Elizabeth. Income levels varied between R10-R20,000 monthly. All the respondents participated in the study, on a voluntary basis. Ethics approval was gained from the Nelson Mandela University’s research committee for the design and conduct of the research. An interview guide was constructed by the author, consisting of open-ended questions, to examine the five assumptions derived from the literature review. The questions posed in the interviews was based on previous research by Rousseau and Venter (2016); Joshi (2016).

Procedure

Acting as moderator for the focus group interviews the author first explained the purpose of the interviews and asked permission to make audio recordings of the discussions, to ensure accuracy of respondents’ views. Thereafter, respondents completed an ethical consent form. This form explained that the respondents could leave the interview at any stage if they felt uncomfortable about any questions, he asked requesting information or about the discussion in general.

The interview commenced with an opening question asking respondents to describe briefly what came to mind when they thought about the word “senior citizen”. The question intended to capture an overall experience they may have had, being an elderly person. The question also served as an unfreezing statement, putting participants at ease and creating a non-threatening environment. This question was followed by a series of open-ended questions, relating to each of the stated propositions.

For clothing needs the following questions were posed. “Do you think elderly people have specific clothing needs to suit their changing figures?” “What would these needs entail?” “Do you believe that retail outlets cater sufficiently for elderly customers clothing needs?” What suggestions can you make to address these issues?” Regarding food needs questions relating to restaurant menus were posed. Examples included the following. “How important is your dietary requirements when eating out at restaurants?” “Do you think visiting restaurants and coffee shops is an important leisure time activity for seniors?” “Are elderly people generally more careful about their eating and drinking habits?” “Do you think caterers ignore elderly guests’ food needs when preparing menus for social events?”

Accessing older consumers cosmetic needs the following questions were asked. “What are your views on elderly people being more prone to skin problems?” “What are your views on cosmetics as a preventative measure for skin care?” “Do you think South Africans are sufficiently protected against harmful cosmetic products?” “How aware do you think South Africans are of extreme climate conditions in the country?” As for entertainment needs of senior citizens, the following general questions were asked. “How important is entertainment as a means of passing time for elderly persons?” “Do you regard the electronic media (radio and TV) as important forms of entertainment for elderly persons?” “Do you think that tour operators caters’ sufficiently for the need of senior citizens?” “How important do you think it is for retired people to get involved in community activities?” “Do you think large crowds put elderly people off attending concerts and sport events?”

With regards to health needs the following questions were posed. “What are your views on the state healthcare facilities in South Africa?” “Do you think that private healthcare is affordable for most South Africans?” “What, in your opinion, is the most important factor to maintain sustainable health in ones’ later life?” “Do you think companies care enough for the
The impact of longevity on older consumer needs: implications for business

elderly by assisting them with aids such as hand rails on steps, anti-slip floors to enhance their mobility and protect them against accidents, when they enter their business premises?" Do you believe that elderly citizens are a group of neglected people in South Africa?" Do you think that elderly members in rural communities need more healthcare facilities and assistance?"

The interviews lasted approximately one to one-and-a-half hour. The moderator used his discretion to terminate the interview when respondents became tired and lost concentration and interest, but only after all questions in the interview guide, was posed. All the responses were tape recorded and subsequently transcribed.

Data analysis

Data analysis from the focus group interviews comprised content analysis of each focus group session. This yielded about 200 pages of transcripts. During the process, two independent reviewers, both qualified industrial psychologists identified themes for each question. They then categorized these themes into meaningful groups of concern, ideas, attitudes and feelings. Once these categories had been established, they divided the content of the interviews into the categories for further comparison. A discussion of discrepancies between the reviewers’ individual categories followed until they reached consensus (Cooper & Schindler 2006; Strauss & Corbin. 1990). This procedure was followed to establish quality assurance of the data analysis and to avoid any biased views that may have emerged from the moderators’ audio recordings.

Trustworthiness in qualitative research is essential to obtain valid empirical results (Silverman 2010). The author therefore aimed to obtain trustworthiness of the results portrayed in the summary tables presented below, by inviting a third expert in content analysis to check the themes established by the first two reviewers, thereby testing the credibility of the thematic analyses. This was by the third reviewer re-reading the data to ensure the validity of the themes as well as the re-coded data, where necessary.

<table>
<thead>
<tr>
<th>Concept</th>
<th>Frequency mentioned*</th>
<th>Illustrative comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retired</td>
<td>20</td>
<td>&quot;Starting a new life&quot;, &quot;freedom&quot;, &quot; huge adjustments&quot;</td>
</tr>
<tr>
<td>Pensioner</td>
<td>45</td>
<td>&quot;Limited finances&quot;</td>
</tr>
<tr>
<td>Old</td>
<td>50</td>
<td>&quot;Health decline&quot;, &quot;accessibility to services&quot;, &quot;amenities of life difficult to obtain&quot;</td>
</tr>
<tr>
<td>Dependent</td>
<td>30</td>
<td>&quot;Need assistance from others for transport&quot;, &quot;taxation&quot;, &quot;payment of bills&quot;, &quot;health care&quot;</td>
</tr>
<tr>
<td>Unsafe feeling</td>
<td>60</td>
<td>&quot;Elderly people are targets for robbery&quot;</td>
</tr>
<tr>
<td>Ignored</td>
<td>10</td>
<td>&quot;Elderly people are ignored/neglected by society&quot;</td>
</tr>
</tbody>
</table>

n=100 (total respondents in five groups) * Multiple responses possible by respondents per group.

<table>
<thead>
<tr>
<th>Concept/Theme</th>
<th>Explanation of theme</th>
<th>Illustrative comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insufficient Assortment</td>
<td>Number/variety of stores</td>
<td>&quot;Insufficient clothing stores catering for elderly needs&quot;, &quot;Comfortable underwear&quot;/&quot;garments for elderly limited&quot;</td>
</tr>
<tr>
<td>Obtaining appropriate sizes</td>
<td>Limited footwear</td>
<td>&quot;Broad fitting&quot; / &quot;half-sizes shoes scarce&quot;, &quot;Green-Cross health shoes costly&quot;, &quot;Comfort shoes for elderly rare&quot;</td>
</tr>
<tr>
<td>Factories not catering for local human anthropometry</td>
<td>S.A. manufactured apparel/footwear scarce</td>
<td>&quot;Many S.A. clothing factories suffer due to cheap imports&quot;, &quot;Local citizens have different body shapes/length/features&quot;</td>
</tr>
<tr>
<td>Design of stores too elaborate</td>
<td>Speciality stores</td>
<td>&quot;Exclusive stores for mature shopper are available&quot; &quot;stocking larger numbers&quot; (Miladys/Penny Koelen) &quot;but expensive&quot;</td>
</tr>
<tr>
<td>Fitting room un suitable for elderly</td>
<td>Lack of assistance</td>
<td>&quot;Elderly people need support when fitting clothing in stores&quot;, &quot;Need benches/clothe-hangers/railings to avoid slipping/falling while using fitting room&quot;</td>
</tr>
<tr>
<td>Patience needed</td>
<td>Impatience of staff</td>
<td>&quot;Sales assistants are hasty when serving elderly customers&quot;</td>
</tr>
</tbody>
</table>
RESULTS

Table 1 summarizes important concepts derived from respondents to the open-ended questions relating to their associations with the term “senior citizen”. The most outstanding comments showed that elderly people felt unsafe in society due to their advanced age and targets for criminals. Due to limited income they also felt dependent on others for life chores and healthcare. Apart from these decidedly negative associations some respondents however made positive comments such as freedom, independent, ample time, courteous, co-operative, service preference.

Results summarized in Table 2 shows in order of importance the most outstanding comments made by respondents on clothing and footwear for senior citizens. A noticeable feature was that there is insufficient assortment of clothing and footwear items available for seniors. Fashion clothes focused on young/middle aged clients while older customers found it difficult to obtain conservative, suitable dress with long sleeves and high collars. Clothing and footwear factories also ignored elderly consumers’ needs for comfortable apparel. Many respondents blamed cheap imports from China for small and inappropriate designs. Regarding in-store service, respondents held the opinion that “shop -attendants” were not always helpful and empathetic when serving elderly customers. On the positive side some respondents did mention “speciality stores”, catering for mature customers but they were generally expensive. Others mentioned that elegant styles were available if one were willing to search around.

The above results suggest that assumption 1 stating that “retail business should focus on clothing needs of the elderly” can be provisionally accepted.

Table 3 shows results (in order of importance) obtained regarding respondents’ food needs. General comments suggest that senior citizens should be vigilant regarding their eating and drinking habits. Individual health conditions affect ones’ dietary preferences. Elderly people are inclined to put on weight easily due to passivity. Soft drinks with gas are bad for digestion. Fruit drinks and rooibos tea is preferable. Alcoholic drinks need to be consumed moderately. Elderly people enjoy visiting restaurants and coffee shops. Most eating places do cater for senior citizens as they are regarded as valuable patrons. However, menus provide too much meat and less salads or vegetables. Many elderly patrons also cannot afford to eat out. Food packaging caters for large families, single, older persons need small containers. Spicy foods can be harmful for the elderly.

Although most of the comments made by respondents regarding food needs of senior citizens revolved around their preferences and vigilance of unhealthy foods for their age, they did agree that most restaurants do cater for their food requirements.

Assumption 2 stating that “retail business should focus on the food needs of elderly consumers” can therefore partially be accepted.

Skin care is a priority for senior citizens due to their aging skin. Elderly people are more susceptible to dermatology diseases due to the

### TABLE 3: FOOD NEEDS OF SENIOR CITIZENS

<table>
<thead>
<tr>
<th>Concept/Theme</th>
<th>Explanation of theme</th>
<th>Illustrative comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly must be alert</td>
<td>Must be vigilant regarding their diet</td>
<td>“Elderly must eat/drink moderately”. “Consider health, especially diabetics”. “Weight/cholesterol is important”</td>
</tr>
<tr>
<td>Avoidance of spicy food</td>
<td>Allergic to spicy foods</td>
<td>“Chili in food is bad for digestion”. “Rich, creamy-food is dangerous for heart”?/”heartburn”/”acidification”</td>
</tr>
<tr>
<td>Restaurants not catering for elderly needs</td>
<td>Menus unbalanced</td>
<td>“Too much meat”/”no or limited vegetables/salads”. “Smaller portions must be available for elderly”. “Most restaurants however do cater for elderly patrons dietary requests”</td>
</tr>
<tr>
<td>Alcohol/Caffeine limitation</td>
<td>Excessive intake dangerous for liver/kidneys</td>
<td>“Drink de-caffeine beverages” (cool -drinks/ rooibos tea). “Stay away from hard liquor, fortified drinks”. “Consume table wine moderately with meals”.</td>
</tr>
<tr>
<td>Affordability of food</td>
<td>Fruits, vegetables, meat expensive</td>
<td>“Elderly people find it hard to be able to buy healthy food due to limited income”.</td>
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</table>
African hush climatic conditions. Cosmetic products provide essential preventative measures for thinning, dry skin and facial wrinkles. They should be used daily. They are, however costly and excluded from medical aid. Day creams are important as they contain Vitamin-D. Good quality moisturizing products should preferably need doctors’ prescription as they can be harmful to the skin and cause allergic reactions. Often people ignore the small print and warnings on tubs and tubes. Customers should be aware of risks involved in purchasing un-prescribed cosmetics. Some respondents mentioned that skin care should start at an early by age avoiding lengthy sun-bathing during summer seasons. Everybody agreed that cosmetics can be helpful in delaying skin deterioration and preventing skin diseases. Elderly people should drink more water to prevent dry skin. Soap can be very harmful for sensitive skin.

It is clear from the above that assumption 3 stating that “retail business should focus on the cosmetic needs of elderly consumers” can provisionally be accepted as most respondents agreed with this statement.

For older consumers, the radio (RSG) and TV are important entertainment sources because they counter loneliness and fulfil a need for companionship. Interactive radio provides an opportunity for participating in discussions and stimulating the brain. Special TV license rates were for pensioners were also proposed by the participants. Reading fulfills a need for passing time and has education value. For elderly people who are still mobile outings to shopping malls, coffee shops, libraries, movies and theatre are important sources of entertainment. Special rates are offered at certain days/times for pensioners at shops/ movie houses/ theatres. For those who can afford it and who are still healthy, travelling and visiting foreign countries, is also an important form of entertainment and has educational value.

Senior citizens sought to maintain a healthy lifestyle through various hobbies and regular exercise. Dancing clubs, visits to gymnasiu...
cycling and walking fulfilled such needs. Keeping pets can also fulfil needs for companionship. Special interests such as restoration of furniture, vintage cars, woodwork, handcraft, knitting, baking and gardening are all mind stimulating activities.

Responses relating to entertainment needs of seniors focused primarily on how elderly people should involve themselves in time consuming activities to remain a healthy lifestyle. It also revealed how entertainment businesses' assist senior citizens in pursuing these activities by providing discounts and special rates for events and excursions. It seemed from these comments that these concessions did not go unnoticed and were appreciated. Therefore, the assumption regarding "retail business adequately meets the entertainment needs of elderly consumers" can be provisionally accepted.

Almost all the participants in the focus groups mentioned that in general there were not enough hospitals and medical clinics in the country to fulfil in the needs of the older people. They were however, sympathetic to doctors and medical staff who were perceived to be over worked. Facilities at clinics which most participants visited regularly, were poor, and many patients had to stand in long queues, waiting for treatment. Some respondents however, were also realistic in the sense that they mentioned that healthcare cannot be provided free by the state and every citizen has a responsibility to take care of their own health. Suggestions were, however made for discounts to senior citizens for medicine and treatment of chronic diseases. Many participants also mentioned the lack of accommodation for the growing number of older people in old age homes. These institutions needed more subsidies by government and more of these facilities need to be built.

From the above lively discussion on health-care facilities for senior citizens in South Africa it can be assumed that participants held strong opinions on current shortcomings and how they can be improved. These opinions were based on their general perceptions and not necessarily on personal experiences. Based on these findings assumption 5 stating that "private medical schemes and public health facilities needs to pay more attention to healthcare of older people in South Africa" suggests provisional acceptance.

Table 7 show suggestions by respondents, made for businesses that caters for the special needs of senior citizens. Respondents felt that more could be done to accommodate the ageing health conditions of older customers such as the fact that they cannot stand for long periods of time and therefore need special exit points to avoid long queues. More chairs/benches should be available for disabled waiting patrons. Banks and insurance companies should provide special rates and discounts for pensioners with limited income and spend most of their time at home. It was also suggested that security at OTM's and parking lots be upgraded to prevent older customers from being targeted by criminals. Wider shopping aisles and passages

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<tr>
<td>Too few Hospitals</td>
<td>Insufficient state/ private hospitals</td>
<td>&quot;Doctors in hospitals are over worked&quot;. &quot;Hospital facilities are deteriorating due to lack of upkeep/ overcrowding&quot;.</td>
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<tr>
<td>Not obtaining medication in clinics</td>
<td>Lack of medical clinics in rural/urban areas</td>
<td>&quot;More mobile clinics&quot;. &quot;Improved seating arrangements&quot;. &quot;More wheel chairs available&quot;. &quot;Safer toilet facilities at clinics&quot;. &quot;More nurses at clinics&quot;.</td>
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<tr>
<td>Few Retirement villages</td>
<td>Shortage of old age homes/retirement villages</td>
<td>&quot;People live longer&quot;. &quot;Authorities cannot keep up with the demand for elderly accommodation&quot;. &quot;More government subsidies for old age homes&quot;.</td>
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<tr>
<td>Poor patient care</td>
<td>Over-crowding patients cause poor treatment</td>
<td>&quot;Elderly patients have to stand in long lines waiting for hours&quot;. &quot;Waiting lists for treatment too long&quot;. &quot;Generation gap causes neglect of elderly patients&quot;. &quot;No empathy&quot;.</td>
</tr>
<tr>
<td>Discounts unavailable</td>
<td>Medicine/treatment</td>
<td>&quot;Higher pensions/interest rates&quot;. &quot;Discounts for elderly medical treatment&quot;. &quot;Medicine for chronicle illness&quot;.</td>
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in shops would also be welcomed. Rest rooms in public places need hand rails, grab handles and anti-slippery floors to avoid falling. Public transport needs also be extended to cater for older people without cars or suspended driving-licenses.

Apart from these suggestions there was also a lot of appreciation for what businesses are presently doing to make life for senior citizens easier. Respondents referred to courteousness, respect, friendliness and patience of business attendants when serving older clients. These results support those of Bailey (2015) who stressed the importance of hiring salespeople meticulously for serving elderly customers and showing respect towards them. In many instances, respondents stated that they did experience preferential service, especially from government institutions.

### DISCUSSION AND CONTRIBUTION

The results portrayed in the above tables clearly demonstrate that older consumers are observant and attentive customers and patients. They are very alert to the services they receive from businesses such as shops, hospitals, clinics, financial and public institutions. They have years of experience as consumers, know their consumer rights and know when they are taken for a ride. They demand the same standard of quality service that younger clients receive and are not unwilling to voice their dissatisfaction with inferior performance.

In many instances senior citizens enjoy a measure of mobility allowing them to visit shopping malls, shop around for best prices and good value for money. They have ample time on hand to compare prices and share consumer knowledge with fellow peer groups. They are valuable patrons of restaurants, cinemas and other entertainment centres. The comments made during the interviews clearly show that older consumers are well informed customers and are willing to share their experiences with others. They are also willing to make suggestions for improvements where needed.

The fact that people in future will live longer due to improved healthcare and lifestyle, emphasize the need for further research on the longevity paradigm and its impact on businesses, geared to serve older consumer’s needs. The tentative findings portrayed in this study may serve as a basis for extended research in this area. In terms of the problem statement the fact that older consumers in future will live longer implies that their needs will become more prominent and that business would therefore no longer be able to ignore them.

### CONCLUSION

The purpose of this preliminary investigation was to determine the impact of longevity for businesses in South Africa. The study was motivated by the ageing population in this country. This cohort of the population can no

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<tr>
<td>Alertness to elderly’s age.</td>
<td>Awareness of frailness of elderly people</td>
<td>“Special pay-points, check-out tills and queues for elderly”. “Benches/ chairs for waiting elderly clients”. “Patience when staff is consulting elderly customers”.</td>
</tr>
<tr>
<td>Banks/Insurance should care for elderly’s financial limitations.</td>
<td>Discounts for pensioners.</td>
<td>“More affordable insurance for elderly”. “Special interest rates for pensioners”, “lower bank costs”.</td>
</tr>
<tr>
<td>Security needs of elderly.</td>
<td>Safety in shopping malls/ business districts</td>
<td>“Need security guards at OTM’s, under cover parking facilities, in-store passages, building entrances”. “Width of in-store aisles too narrow for shopping trollies”.</td>
</tr>
<tr>
<td>Public transport needs of elderly.</td>
<td>Regular reliable safe buses. Large time tables at bus stops.</td>
<td>“Elderly clients need to stand in long lines waiting for busses”. “Buses need lower boarding suspension for wheel-chairs, anti-slip rubber step-on entrances and comfortable seating”.</td>
</tr>
<tr>
<td>Rest room needs of elderly in public places.</td>
<td>Catering for elderly needs.</td>
<td>“Rest rooms in shopping malls need hand rails, toilet handles”. “Hotel bathrooms need lower anti-slippery bath tubs’/showers’ and brighter illumination in rooms”</td>
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longer be ignored by business due to their increasing purchasing power (Rousseau & Venter, 2014). The study adopted a qualitative approach that was better suited to its exploratory nature. Five focus group interviews were conducted involving 100 senior citizens from various old age homes and retirement villages in Port Elizabeth. Based on a literature review, five general statements or assumptions were formulated for further investigation. These assumptions related to businesses’ catering for the special clothing, food and beverages needs of senior citizens as well as their special needs for cosmetics, entertainment and healthcare.

Preliminary results suggest that in all these areas of special needs, there was room for improvement. The only exception was entertainment needs where respondents expressed satisfaction with what was presently available. Regarding perceptions and views on apparel ranges for senior citizens as well as cuisine options, cosmetics and healthcare choices, more alternatives were required to suit older customers’ needs. All five assumptions were provisionally accepted although in the case of assumption two (relating to food needs), no clear pattern emerged. These findings can now form a basis for formulating specific propositions for further investigation in a quantitative study, involving surveys with a larger, more representative sample. Surveys can be conducted by means of short questionnaires distributed at old age homes and retirement villages as well as follow-up focus group interviews with respondents, unable to complete questionnaires.

As this study was only a preliminary investigation, care should be taken in generalizing the results. The sample was small, suggesting follow-up research. As is the case in many focus group interviews, participants often respond negatively, viewing the sessions as opportunities to express their frustrations and dissatisfaction with the topics under discussion. On the other hand, it also provides an opportunity to make positive comments and suggestions for improvements. Such an opportunity was given to respondents in this study. Table 7 provides valuable comments for businesses, serious about catering for the special needs of senior citizens in the country. Results from the table suggest that there is ample room for improvement according to responses captured from participants in the study. Business should enhance training of salespeople serving elderly customers by focusing on their special needs and preferences. Business should furthermore convey a message that serving older consumers and providing quality service to them are important to their business strategy.

REFERENCES


