

Building Understanding of the Domain of Consumer Vulnerability

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Consumer vulnerability is a sometimes misunderstood or misused concept that is equated erroneously with demographic characteristics, stigmatization, consumer protection, unmet needs, discrimination, or disadvantage. This article seeks to clarify the boundaries for what is and what is not consumer vulnerability. By explicating the key themes of consumer vulnerability from previous studies in the consumer research and marketing literatures, the authors build a definition and model to explain that consumer vulnerability is multidimensional, context specific, and does not have to be enduring. The authors clarify that multiple and simultaneous internal and external factors contribute to consumer experiences of vulnerability. They conclude by proposing some ways the consumer-driven definition of consumer vulnerability can be implemented into research and policy decisions. Most important, their implementation focuses on treating consumers as they wish to be treated, not as well-meaning others think they should be treated, and on directing policy toward facilitating individual empowerment.

Keywords: *consumer vulnerability; consumer protection; consumer welfare; control; self-concept; public policy and marketing*

Vul'ner'a'ble adj 1: capable of being wounded; susceptible of wounds or external injuries; as, a vulnerable body. 2: Liable to injury; subject to be affected injuriously; assailable; as, a vulnerable reputation.

Vul'ner'a'bil'i'ty \ n 1: The quality or state of being vulnerable; vulnerableness—related words breakability, crushability, fragility, frailty, incapability, incompetence, soft spot, susceptibility, unfitness, unqualifiedness, unsuitability, weak link

—www.webster-dictionary.net2004

Marketing and consumer behavior researchers have pondered important social issues such as how homeless consumers meet their daily needs (Hill and Stamey 1990); whether the Americans with Disabilities Act serves consumers'

interests (Kaufman-Scarborough and Baker 2005); how consumers in a poor, rural community experience health care delivery (Lee, Ozanne, and Hill 1999); and how persuasion attempts affect consumers who are older (Moschis 1992) or younger (Martin and Gentry 1997). Often, within the contexts of these studies, consumer vulnerability to marketplace interactions and to the consumption of marketing messages and products has surfaced as an important social concern.

The *consumer vulnerability* concept provides a unifying label for a variety of studies focusing on the social consequences of consumption for different populations in a wide range of marketing contexts. Despite the unifying nature of the label, the field lacks consensus as to what exactly *consumer vulnerability* refers. For instance, Smith and Cooper-Martin (1997) lamented that “consumer vulnerability has not been researched extensively . . . [and it] is inadequately understood” (p. 4). Similarly, Ringold (1995) noted that a definition of vulnerability has been “somewhat illusive” (p. 584). Because of this lack of clarity, heretofore consumer vulnerability has been equated to *who* experiences vulnerability, with the implication that some categories of people, because of membership in a defined class, are *always* vulnerable.

Because all people may experience vulnerability as they face difficult situations in their lives, such as the death of a loved one (Gentry et al. 1995), defining vulnerability on the basis of *who* experiences it lacks clarity. Moreover, defining vulnerability on the basis of *who* experiences it may create discrepancies between what Smith and Cooper-Martin (1997) referred to as actual and perceived vulnerability. Actual vulnerability occurs when vulnerability is, in fact, experienced and only can be understood by listening to and observing the experiences of the consumer. Perceived vulnerability occurs when others believe a person is vulnerable, but he or she may not agree or may not be. Perceived vulnerability is a misconception that occurs when individuals project onto others what

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it is like to walk in their shoes. It is actual vulnerability that should be addressed by public policy makers and marketers. It is the misconception of what constitutes real vulnerability that muddies the waters.

This article seeks to provide clarity to the somewhat nebulous concept of consumer vulnerability by specifying the boundaries for what is and what is not consumer vulnerability and by developing a consumer-driven definition of vulnerability. In doing so, we provide an integrative review of the existing literature, suggest a consumer-driven definition and conceptual model, and propose some ways that such an understanding can be implemented into research and policy decisions.

PREVIOUS CONCEPTUALIZATIONS OF VULNERABLE CONSUMERS AND CONSUMER VULNERABILITY

Many marketing and consumer-behavior scholars desire to make consumer behavior research relevant to public policy by exploring consumer vulnerability. Examples include investigations of groups on the basis of visible characteristics of individuals (e.g., ethnicity, age, sex), states of mind (e.g., cognitive capacity, grief), and states of body (e.g., addiction, disabilities), which are not necessarily mutually exclusive categories. Often studies discuss *who* is vulnerable without providing a precise definition of vulnerability itself. Such an approach is generally consistent with how the courts define vulnerability. For instance, Morgan, Schuler, and Stoltman (1995) found that the courts generally define vulnerable consumers as those “whose idiosyncratic sensitivities have contributed to their product-related injuries” (p. 267). Drawing on product liability cases in the United States spanning more than one hundred years, Morgan, Schuler, and Stoltman (1995) suggested a consumer-situation typology of vulnerable consumers that includes four consumer groups (physical sensitivity, physical competency, mental competency, and sophistication level) and five situational alternatives (material environment, decision maker, consumption interval, usage definition, and temporary conditions). This typology illustrates that consumer vulnerability arises from the *interaction* of a person and all of his or her personal characteristics with a consumption situation.

Often, researchers have used similar definitions, if given at all, to those used in public policy and litigation. Ringold (1995) defined vulnerable consumers as individuals who have “diminished capacity to understand the role of advertising, product effects, or both” (p. 584). She notes the demographic characteristics typically associated with diminished capacity are young people, women, and racial and ethnic groups. Smith and Cooper-Martin (1997) built on previous research to develop their definition of who vulnerable consumers are: “those who are more susceptible to economic, physical, or psychological harm in, or as a result of, economic

transactions because of characteristics that limit their ability to maximize their utility and well-being” (p. 4). They operationalized vulnerable consumers as “a demographic characteristic generally perceived to limit the consumer’s ability to maximize utility and well-being in economic transactions” (p. 6). In this case, the demographic characteristics associated with vulnerability were race and education.

Some conceptualizations of vulnerability focus on characteristics or limitations within the individual, while others focus on external conditions and/or some interaction between internal and external factors. For example, Hill (2001b) observed that vulnerability for people who are poor is created by external factors including the lack of access to goods and services, and Peñaloza (1995) found that vulnerability for consumers with immigrant status comes from internal factors including language ability, literacy, experience in the marketplace, and consumer goals and external factors including stigmatization, subordination, and segregation in the marketplace.

KEY THEMES IN CONSUMER VULNERABILITY RESEARCH

We now turn to the previous literature to determine the key themes of consumer vulnerability research with the purpose of ultimately providing a more comprehensive and consumer-driven definition and model. A review of research on or related to consumer vulnerability reveals some common themes, including the factors that increase the likelihood of vulnerability, consumer experiences of vulnerability, and consumer responses to vulnerability. In this section, attention is focused on these key themes.

Factors That Increase the Likelihood of Vulnerability

Looking across studies provides evidence that both internal and external factors contribute to consumer vulnerability. Internal factors that contribute to vulnerability can be further divided into individual characteristics (e.g., self-concept) and individual states (e.g., motivation).

Individual characteristics. In terms of individual characteristics, Moschis (1992) distinguished between biophysical and psychosocial models. The biophysical model incorporates biological and physiological aspects of the individual, whereas the psychosocial incorporates psychological reasons for behavior (e.g., cognitive age, fear) and sociological reasons (e.g., patterns of contact) as important factors in explaining consumer responses. He noted that explaining consumer behavior, in particular that of older consumers, by looking only at biophysical *or* psychosocial characteristics provides an incomplete picture and inadequate explanation of consumer experience.

Biophysical characteristics such as addiction (Hirschman 1992), chronological age (Laczniak, Muehling, and Carlson 1995; Langenderfer and Shimp 2001; Moschis 1992), disability (Baker, Stephens, and Hill 2001; Kaufman-Scarborough 2000, 2001), gender (Hill and Dhanda 1999), health (Moschis 1992), race/ethnicity (Bristor, Gravois-Lee, and Hunt 1995), and cognitive deficiencies (Adkins and Ozanne 2005; Lee and Soberon-Ferrer 1997) have been linked to consumer vulnerability. There is no empirical proof that biophysical characteristics of individuals (age, ethnicity, disability) should be the sole basis on which to define consumer vulnerability. For instance, Moschis (1992) and Ringold (1995) found no empirical support for identifying vulnerability on the basis of age (in the case of the former) or on the basis of sex or ethnic and racial group (in the case of the latter).

Biophysical characteristics are sometimes associated with a consumer's ability to recognize and protect one's self from persuasion attempts (Laczniak, Muehling, and Carlson 1995) and the ability to understand the implications of marketing messages (Laczniak and Murphy 1993; Rittenburg and Parasarathy 1997). Sometimes these biophysical characteristics are used to advance the "dumb consumer model" (Calfee and Ringold 1992), which posits sellers can deceive consumers and consumers are helpless to resist. At other times, populations with these biophysical characteristics are used to advance the notion of a "smart consumer model" (Calfee and Ringold 1992), where the consumers recognize that sellers are trying to stimulate a purchase and they are active agents in their own consumption decisions. Calfee and Ringold (1992) believe in the "smart consumer model" more than its alternative, but the alternative does allow for the possibility that there may be times when consumers truly are unable to be "smart."

Psychosocial characteristics such as self-concept (Pavia and Mason 2004; Stephens, Hill, and Hanson 1994), social perceptions of appearance (Martin and Gentry 1997; Richins 1991), socioeconomic status (Hill 2001b; Hill and Stamey 1990; Shultz 1997), perceived skills (Baker, Stephens, and Hill 2001), resource assets (Lee, Ozanne, and Hill 1999), acculturation (Peñaloza 1995), fear of being victimized (Blair and Hyatt 1995), perceived health (Luce and Kahn 1999), and social isolation (Hill 1991; McGhee 1983; Moschis 1992) have been linked to vulnerability. These psychosocial characteristics affect how consumers experience, respond to, and interpret marketing messages and contexts. For example, for consumers with visual impairments, whether the amount of independence desired in marketplace situations is achieved or not depends on the consumer's perceived adaptation skills (e.g., ability to navigate a store alone) and perceived costs of requesting and receiving assistance, perhaps in relation to emotional costs of asking for help (Baker, Stephens, and Hill 2001). As this example shows, how an individual frames an experience affects whether and/or to what extent vulnerabil-

ity is experienced. Of course, there are cross-cultural differences in how life experiences are framed that affect the interpretation of vulnerability. Gentry et al. (1994, 1995) found that people in grief in the United States were consumed by their emotions, experienced a loss of identity, and were unable to function normally, thus experiencing vulnerability. In contrast, Bonsu and Belk (2003) noted that there is less vulnerability with members of the Asante culture when a loved one dies, as the survivors are happy for the dead.

Individual states. Individual states of consumers, including grief, transition, and motivation, also may affect one's experience and behavior within a consumption context (e.g., selling attempt, retail exchange, etc.). All people face the death of loved ones on occasion and encounter grief-related vulnerability (Gentry et al. 1994, 1995). The disorientation experienced usually creates desires for decision avoidance and may make one more susceptible to fraud. One does not return immediately to "normal" but is gradually able to construct a new identity. During the liminal period, vulnerability is quite high, and people have little desire and ability to act in their best interests. In most cases, it does not lead to a state of enduring vulnerability.

Changes in family structures, such as divorce, also create identity instability and stress for individuals. Recently divorced individuals may use consumption as a coping mechanism to try on new identities to find themselves, perhaps even consuming illicit drugs or spending beyond their means (McAlexander, Schouten, and Roberts 1993; Rindfleisch, Burroughs, and Denton 1997). Grief, divorce, and any number of other individual states (mood, severe stress) have the potential to hinder an individual's ability to control his or her situations or respond in a manner that is positive for the self.

External conditions. Hill and Stamey (1990) help dispel the myth that people who are homeless are responsible for their circumstances. Although internal characteristics may contribute to homelessness, external factors such as structural or societal problems, which are beyond the control of the individuals, also contribute to their situations. A variety of external factors may affect the everyday lives of consumers that are beyond their control including stigmatization and repression; the distribution of resources; physical elements; logistical elements; and other environmental conditions such as economic, social, and political upheaval or violence. These external factors contribute to imbalances of power in exchange relationships that disfavor consumers.

Stigmatization, repression, and discrimination contribute to consumer vulnerability (Hill 1995; Peñaloza 1995). Groups may be singled out on the basis of age, gender, race, class, education, religion, sexual orientation, ethnicity, income, residence, physical appearance, physical abilities, and so forth. For instance, gender inequity is prevalent throughout the world, but its magnitude is greater in different regions of the world. Greater gender inequity is related to less access

to health care, education, and income, which contributes to experiences of vulnerability for women (Hill and Dhanda 1999). In some cases, stigmatization is socially acceptable, as when standards of acceptability are portrayed in the mass media controlled by the dominant social group (Ozanne, Hill, and Wright 1998). These standards influence the way in which groups of people are viewed and indeed influence the way in which people in these groups view their own lives. For instance, impoverished consumers are influenced by the materialism they view in the media (Hill 2002b).

Policy makers recognize that consumer vulnerability can occur because of discrimination, but policy is fairly clear that vulnerability arises because of discrimination and not incompetence. That is, discrimination is attributed to personal characteristics; vulnerability is attributed to discrimination (i.e., the person does not cause his or her vulnerability). Certainly, civil rights legislation arose at least in part because individuals' behavioral freedoms in the marketplace were denied. For instance, the civil rights movement, and eventually the Civil Rights Act of 1964, was sparked by Rosa Parks who refused to give up her seat on a bus and by college students who were denied service at F. W. Woolworth's lunch counter (Harris, Henderson, and Williams 2005). Similarly, the Americans with Disabilities Act of 1990 was fueled in part by consumer frustrations with accessibility to the marketplace (Baker and Kaufman-Scarborough 2001). In instances where vulnerability is related to discrimination, public policy indicates a person is not vulnerable because he is black and/or has a disability; he is vulnerable because of factors beyond his control (e.g., the way other people treat his blackness and/or his disability).

How resources (e.g., health care, education) are distributed across society contribute to the experience of vulnerability (Alwitt 1996). Vulnerability may arise from lack of access to health care (Franzak, Smith, and Desch 1995; Scammon, Li, and Williams 1995), lack of access to retail facilities (Baker and Kaufman-Scarborough 2001), or lack of access to quality, affordable products (Hill 2001a). Lack of access to retail facilities may contribute to consumers' perceptions of living less than a "normal" life, such as for consumers with visual impairments (Baker, forthcoming), and lack of access to affordable products, such as for consumers who are poor, may contribute to their paying more for fewer and lower quality products (Andreassen 1976; Caplovitz 1963; Hill 2001a). Geographic barriers because of housing patterns create "structural vulnerability" for Blacks and Hispanics who pay more for less selection than those shopping outside their neighborhood (Crockett and Wallendorf 2005). Structural conditions seem to be one of the many external components that contribute to the more general concept of consumer vulnerability.

Physical and logistical elements of the marketplace may also contribute to consumer vulnerability. Retail stores often are not designed sufficiently for people with physical disabili-

ties, and/or the retail store design may signal to a consumer with a disability that he or she needs to be accompanied by an able-bodied shopper (Kaufman-Scarborough 2001). Logistical elements also may contribute to vulnerability, such as when bus routes do not go to where consumers with visual impairments would like to go (Baker, Stephens, and Hill 2001).

Research contexts have helped to illuminate other environmental factors that contribute to vulnerability as well. During the Depression, the desperation and vulnerability of consumers was rooted in the shortage of jobs (Hill, Hirschman, and Bauman 1996). The vulnerability for consumers in war-torn countries is anchored in the disruption of agricultural production and distribution (Shultz 1997). The vulnerability of juvenile delinquents arises in part because of the violence they witness on a daily basis and because they lack support from their communities, schools, and families (Ozanne, Hill, and Wright 1998). Vulnerability may also come from others' attempts to use violence or the threat of death to exert control over a person or a group of people. Men who engage in domestic violence contribute to the vulnerability of their partners when they attempt to strip them of their autonomy and identity, while at the same time controlling many of the household resources (Stephens, Hill, and Gentry 2005). Similarly, prisoners at Buchenwald concentration camp were not allowed to have access to consumer goods, in part so that they would all look the same and be stripped of their identities (Hirschman and Hill 2000).

Consumer Experiences of Vulnerability

Most explorations of consumer vulnerability address lack of personal control as a primary part of the experience of consumer vulnerability. When consumers are engaged in behaviors that they wish to engage in, their behavior is voluntary and under their control. Thus, voluntary is optimal interaction (Csikszentmihalyi 1978). When consumers are unable to control their attention, behavior, or emotions, then their responses are beyond their control, aversive, and part of their experience of vulnerability (Csikszentmihalyi 1978).

That control is an integral part of consumer vulnerability is not surprising when one considers that consumption can add meaning to consumers' lives (Belk 1988), although the meaning that is added depends a great deal on consumers' abilities to control their surroundings (Miller 1987). When consumers experience vulnerability, some experiences may be too overwhelming to control on one's own (Hill 2001a). For example, Hill and Stephens (1997) noted that "feelings of loss of control over their consumer lives may dominate the existence of the poor" (p. 34). People who live in poverty, including people who are homeless, have found the "descent into poverty as something that is beyond their control" (Hill 2001a, 372). These people do not necessarily believe they are blameless, but they are caught up in circumstances in the environment that they may be unable to control. In other

words, they cannot control the movement into the role of being an impoverished consumer.

Although people are or may become impoverished, they are not out of control in every experience of their lives (Hill and Stamey 1990). For instance, the homeless consumers Hill and Stamey (1990) discussed were not without need, but they met some of their needs by scavenging, finding nontraditional forms of employment, or developing social ties within the homeless community. Consider also the Appalachian poor consumers Lee, Ozanne, and Hill (1999) discussed. The experience of vulnerability in health care for these consumers was clearly tied to service providers being insensitive to their needs and abilities. These consumers were treated as “disempowered victims” and were unable to control their surroundings, thus contributing to their lack of control, which defines their experience of vulnerability (Lee, Ozanne, and Hill 1999).

Lack of control in consumption encounters is not an experience afforded only to consumers who are impoverished. When women face breast cancer and its treatment, their sense of control and order is lost (Pavia and Mason 2004). The behaviors of consumers who face addiction exceed their “ability to control them through reason and willpower” (Hirschman 1992, 158). When women are faced with a choice of abortion, their biggest regret after the decision is finalized, regardless of the decision, has to do with capitulating to the wishes of others, that is, not being able to make decisions for themselves (Patterson, Hill, and Maloy 1995). Consumers who are older are often faced with situations over which they have little control (e.g., health); this lack of control contributes to their experience of vulnerability (Moschis 2000). People with disabilities on whom unsought assistance is imposed in the marketplace are not able to obtain the independence they desire. Their inability to control the environment defines the vulnerability experienced (Baker, Stephens, and Hill 2001).

When a culture places a premium on an individual’s ability to control his or her environment, as American culture does, and the consumer internalizes this desire for control, not being able to control the environment is an unwelcome reminder of the frailties of the individual and indeed of humanity. This reminder and the lack of control contribute to the experience of consumer vulnerability.

Consumer Responses to Vulnerability

Coping mechanisms to deal with vulnerability. Consumers who experience vulnerability are not just passive recipients of bad things that come their way. Instead, they use a variety of coping strategies to deal with their vulnerability including cognitive, emotional, and behavioral coping strategies (Heckhausen and Schulz 1995), which may also include acts of consumer resistance where consumers freely express their consumer agency (Peñaloza and Price 1993). However, when circumstances become too overwhelming and there is

no way out, learned helplessness may develop (Seligman 1975).

Cognitive and emotional strategies for coping may include disattaching, distancing, fantasy, and other general attempts to regulate emotions. Disattaching occurs when a person severs emotional bonds with something tying them to the vulnerable situation, perhaps including a significant portion of one’s identity. Many women who are abused by their partners have difficulty leaving their abuser because the process of disattaching from home, objects, economic resources, and safety is perhaps as painful as the abuse itself (Stephens, Hill, and Gentry 2005).

Distancing involves a differentiation between one’s self and others in similar circumstances. Hill and Stephens (1997) found that women on welfare often say and believe that they are not like “typical” welfare recipients. Distancing may also involve an interpretation of one’s self as separate from negative depictions as when African American collectors collect grotesque, stereotypical black advertising memorabilia. Even though collectors want to own and display the items within their own collections, the collectors may distance themselves from the objects by framing the objects as not of me but about me (Baker, Motley, and Henderson 2004).

Fantasy, which is divorced from the current reality of a consumer’s circumstances, may also be used as a coping strategy as it is for homeless children who adapt to being homeless by using their toys to fight the “forces of evil” and by picturing themselves in a more stable life that is similar to how they perceive “rich kids” live (Hill 1992; see also Hill and Stephens 1997). Similarly, victims of domestic abuse may imagine themselves as living a different life (Stephens, Hill, and Gentry 2005).

People also cope by using general attempts to cope with emotions or cognitions. When consumers who are older experience stress because of health, they may focus on regulating their emotions, since they believe they cannot do anything to control their situation (Moschis 2000). Similarly, when consumers with visual impairments perceive inequality in a marketplace experience, they may attempt to work through the experience by framing their response as a chance to educate others on their actual abilities (Baker, forthcoming).

Consumers engage in a variety of behavioral coping strategies, such as controlling potentially harmful behaviors, shedding one’s self of reminders of an experience, seeking social support, or even engaging in deception. At various stages of breast cancer recovery, women may attempt to cope by doing things, including controlling their diets to reduce the chances of a recurrence of cancer, or, once the cancer is believed to be gone, they may dispose of their “cancer clothes” (Pavia and Mason 2004). Many consumers seek social support in times of vulnerability. Consumers in grief may use commercial services as a form of social support (Goodwin and Gentry 1997). People experiencing homeless-

ness may seek social support from homeless shelters and the people who run them (Hill 1991) or may become members of homeless communities where members share their resources (Hill and Stamey 1990). Another type of equally adaptive type of solution may be to engage in social deception as when a consumer uses humor, flirtation, or imitation to cope with or cover for his or her illiteracy (Adkins and Ozanne 2005).

Some forms of coping are indicative of fighting suppression and stigmatization, which may be experienced in the marketplace. Such behaviors are labeled *consumer resistance* (e.g., Peñaloza and Price 1993). Immigrant consumers resist stigmatization in the marketplace by refusing to use and buy particular products (Peñaloza 1995); lesbian and gay consumers resist marginalization by freely expressing their identities in ritual acts of consumption, including parades and festivals (Kates and Belk 2001); prisoners at concentration camps are denied consumption opportunities, but they create their own anyway (e.g., play performances) (Hirschman and Hill 2000); and African American collectors of black memorabilia transform grotesque representations into something more pleasing to the self (Baker, Motley, and Henderson 2004). These types of behaviors are important because they help consumers reaffirm their self-significance and place in society.

Consumers are continuously vigilant about future opportunities, but sadly, one's circumstances may become too overwhelming to cope with in any positive way, perhaps leading to learned helplessness, where an individual's motivation, emotion, and cognitive processes are uncontrollable (Seligman 1975). This is not an adaptive strategy used by many consumers, because often there is a way out; however, sometimes people living in poverty may believe there is absolutely nothing that can make their experiences better, and they adapt by developing learned helplessness (Hill and Stephens 1997). Similarly, consumers who struggle with controlling their addictions may feel desperate and helpless, which may lead to learned helplessness (Hirschman 1992). Learned helplessness is related to low to nonexistent self-worth and a belief that one does not have a place in society.

The types of coping strategies used, and a consumer's success at using them, ultimately affect how consumers view themselves and how they believe others perceive them. Thus, responses to situations of vulnerability have implications on the self, the focus of the next section.

Implications for the self. Experiences of consumer vulnerability are closely tied to self-perceptions of one's competence in handling a consumption situation, acceptance in society, and security of the self as well as its extensions (i.e., possessions, pets, family members). How an individual copes with an experience is related to present and future self-concept, the psychosocial characteristic discussed previously. (The terms *self-identity*, *self-concept*, and *self-perception* are used interchangeably here as was done in

Stephens, Hill, and Gentry [2005] and Terry, Hogg, and White [2000].)

Consumers are required to call upon the resources at their disposal to work through the situations with which they are presented in their daily lives. They expend resources in an array of tasks each day including grocery shopping, meal preparation, getting dressed, or reading a newspaper. The control and competence they display in the performance of these tasks is tied to their self-perceptions and ultimately helps to demonstrate why experiences of vulnerability are contextually bound. When older consumers believe they do not perform competently in certain situations, their self-confidence may be downgraded and their self-perceptions tarnished (Moschis 1992).

Consumers make judgments about how well they are relating to others and/or accepted by others. Negative judgments can diminish self-perceptions, while positive perceptions enhance the self. When consumers do not see themselves portrayed positively in the mass media, they may come to believe that people like them lack acceptance in society, which can negatively affect self-esteem (Bristor, Gravois-Lee, and Hunt 1995). In contrast, when consumers feel like they are accepted, such as a retailer who understands the tastes of a consumer with a visual impairment, this contributes to a more positive perception of self, or at the very least not a lessened one (Baker, forthcoming). The mass media, servicescapes, other customers, and their own past experiences provide consumers with some sense of what is "normal." When consumers have ideas about what is "normal," they can anchor their own behaviors in these notions to resist potential threats to their self (Adkins and Ozanne 2005; Baker, forthcoming).

The perceived security of the self, as well as its self-extensions (pets, family, possessions), can contribute to the vulnerability of consumers. The death of a loved one in American culture reminds survivors of the tenuous nature of life and represents identity loss for the survivor (Gentry and Goodwin 1996). Even in a culture where death is celebrated (e.g., the Asante culture in Africa), identity transformations, facilitated by conspicuous consumption, occur for both the deceased and his or her survivors (Bonsu and Belk 2003). Self-transformation may also occur through symbolic contamination to the extended self, as when an individual experiences an involuntary and unwelcome attack on the self or its extensions. Loss of possessions to natural or man-made disasters, theft, and domestic partner abuse represent instances of symbolic contamination that diminish one's identity (e.g., Belk 1988; Sayre 1994; Sivasdas and Venkatesh 1995; Stephens, Hill, and Gentry 2005).

Experiences of vulnerability can affect present and future perceptions of self. When women face breast cancer, their thoughts of a future self are seriously threatened and their self-concept is disrupted (Pavia and Mason 2004); and for people living in poverty, uncertainties in the present make future prosperity questionable (Hill 2001a). Such experi-

ences for these consumers bring a sharp focus on the present and a focus on figuring out how to manage the present to maintain the self.

Consumers are amazingly resilient, and they are able to cope with experiences of vulnerability and become “whole” again; consumption often plays a role in this process. Consumption can empower the self (Ger 1997) and facilitate the process of “becoming someone” again (Pavia and Mason 2004). Lesbian and gay consumers participate in collective acts of resistance to construct an authentic identity (Kates and Belk 2001); and captors at a concentration camp created their own hedonic, spiritual, and intellectual consumption experiences to resist being “consumed” by their captors and to help them maintain their sense of self (Hirschman and Hill 2000).

Self-transformation is intertwined and perhaps indistinguishable from consumer vulnerability. When consumers experience vulnerability, their self-concept is literally in jeopardy. Their perceived competence, their perceived acceptance in this world, their security, and/or their perceptions of future potential are affected by consumption contexts that make them vulnerable.

A CONSUMER-DRIVEN DEFINITION AND MODEL OF CONSUMER VULNERABILITY

What Consumer Vulnerability Is

Based on these key themes in the literature, the following definition of consumer vulnerability is offered:

Consumer vulnerability is a state of powerlessness that arises from an imbalance in marketplace interactions or from the consumption of marketing messages and products. It occurs when control is not in an individual's hands, creating a dependence on external factors (e.g., marketers) to create fairness in the marketplace. The actual vulnerability arises from the *interaction* of individual states, individual characteristics, and external conditions within a context where consumption goals may be hindered and the experience affects personal and social perceptions of self.

This definition of consumer vulnerability focuses on the experience of consumer vulnerability; it does not say who is vulnerable, because everyone has the potential to be. Consumer vulnerability is multidimensional in nature (see also Peñaloza 1995) and occurs when a person is powerless, out of control, and dependent in a consumption situation that has negative ramifications on one's identity. Consumer vulnerability may occur when a consumer is unable to accomplish his or her goals in a consumption situation because of being powerless, out of control, and so forth. Consumer vulnerability may also occur when a person is so disoriented that he or she has no consumer goals in the short run. A consumption goal can be as simple as buying a carton of milk. If making that purchase is important to the consumer and something

internally or externally impedes that purchase, then the consumer may experience vulnerability.

What Consumer Vulnerability Is Not

Consumer vulnerability is not the same thing as unmet needs. A mother with a screaming toddler in the grocery store would certainly like her child to be quiet, and she is most likely experiencing stress, but she is not necessarily vulnerable in that consumption situation. Other factors also would have to play a contributing role.

Consumer vulnerability is also not the same thing as a protected consumer or consumer protection. Members of protected consumer groups (gays and lesbians, racial and ethnic minorities, people with disabilities) certainly experience vulnerability, as do all consumers, but just because a person has a characteristic that places him or her in a protected class, it does not mean that he or she is necessarily vulnerable in all situations.

Consumer vulnerability is not the same thing as discrimination or prejudice, where distinctions are made on characteristics other than individual merit. Discrimination is neither necessary nor sufficient for consumer vulnerability to be experienced, although it could be part of why vulnerability is experienced.

Consumer vulnerability is not the same thing as stigmatization, where specific characteristics are a sign of disease or disgrace. Stigmatization is neither necessary nor sufficient for consumer vulnerability to be experienced, although it could be one of any multitude of reasons why vulnerability might be experienced.

Consumer vulnerability is not the same thing as disadvantage. “Disadvantaged consumers” are those “who are particularly handicapped in achieving adequate value for their consumer dollar in the urban marketplace because of their severely restricted incomes, their minority racial status, their old age, and/or their difficulties with the language” (Andreasen 1975, 6). This definition of who disadvantaged consumers are interprets disadvantage as attributable to personal characteristics. This definition asserts that certain personal characteristics indicate a lessened state, perhaps providing a reason for that lessened state to continue, and does not recognize the power of individual agency. Vulnerability is not the same thing as disadvantage because vulnerability occurs when barriers prohibit control and prevent freedom of choice, whereas disadvantage is ascribed to different consumer groups. The consumer vulnerability concept appears to be more robust than the disadvantage concept as norms can (and do) change over time.

A Model of Consumer Vulnerability

To conceptualize the experience of consumer vulnerability, a model that summarizes the previous discussion and case study evidence is offered (Figure 1). The model identifies that individual characteristics, individual states, and external con-

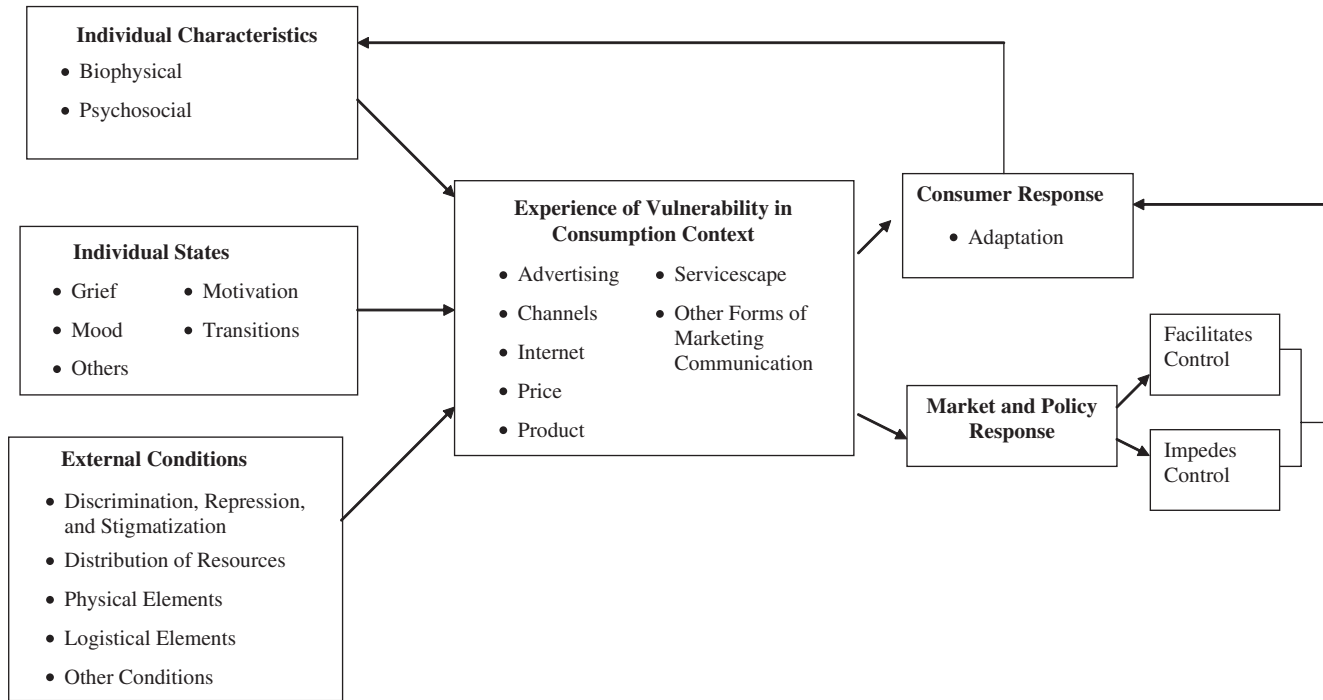


FIGURE 1 CONCEPTUAL MODEL TO DEFINE CONSUMER VULNERABILITY

ditions contribute to a consumer’s experience in a consumption context. The individual characteristics that may contribute to how a consumption context is experienced include biophysical characteristics (e.g., addiction, age, appearance, functional ability, gender, health, race/ethnicity, sexual orientation) and psychosocial characteristics (e.g., cognitive capacity, cognitive development, felt ethnicity, education/learning, self-concept, socioeconomic status). A variety of individual states may also contribute to how a consumption context is experienced, including grief, mobility, mood, life transitions (e.g., acculturation, divorce), motivation and goals, as well as others. In addition, a variety of external factors beyond a person’s immediate control may contribute to a consumption experience: discrimination, repression, and stigmatization; the distribution of resources; physical elements; logistical elements; and other environmental conditions.

When a person experiences a consumption context, he or she may or may not experience consumer vulnerability. When consumer vulnerability is experienced, what are the potential consequences? Consumer vulnerability results in at least two potential outcomes: (1) it elicits some type of a response from the consumer that illustrates his or her adaptation to the experience, including positive behavioral and emotional coping strategies, or more rarely learned helplessness and feelings of dehumanization, and (2) it elicits some type of market or policy response that has the potential to

either facilitate or impede individual agency and control in future encounters, feeding back into the experience of consumer vulnerability. These individual and market responses have a feedback loop demonstrating the impact on how a person perceives himself or herself and his or her abilities, an individual characteristic that feeds into subsequent consumption encounters. This feedback loop is representative of the social consequences of marketing actions, which is why marketing and consumer behavior researchers became interested in consumer vulnerability in the first place.

One of the contributions of this model is that it shows consumers are not just passive recipients of what the marketplace offers to them; they bring their own resources to the table to make an effect on their environment (Lee, Ozanne, and Hill 1999). Policy responses may facilitate or impede control experienced by consumers (Kaufman-Scarborough and Baker 2005). Responses by both the individual, whether he or she is aware of his or her responses or not, and public policies can affect how a person views himself or herself (Hill and Stamey 1990).

Like the Morgan, Schuler, and Stoltman (1995) typology, this model has a strong focus on situations and recognizes that an individual’s personal characteristics may contribute to vulnerability; however, this model is more macro in scope and has six fundamental differences from the Morgan, Schuler, and Stoltman typology. First, this model encompasses a broader range of personal characteristics, including

psychosocial characteristics such as self-concept, acculturation, and social isolation. Second, this model includes individual states such as grief and motivation. Third, a broader range of external conditions are recognized as contributors to vulnerability, including discrimination, repression, stigmatization, and the distribution of resources. Fourth, the Morgan, Schuler, and Stoltman typology explored consumer vulnerability in the context of product consumption; the present model includes a variety of other consumption contexts including advertising and the retail servicescape. Fifth, this model illustrates the consumer, market, and policy responses to vulnerability, including the subsequent impact on an individual's perceived control and self-perceptions (i.e., the social consequences of marketing). Finally, the Morgan, Schuler, and Stoltman typology is derived from the courts' interpretation of consumer vulnerability, while this model is developed from studies in the marketing and consumer research literatures, thus benefiting from the use of multiple methods, including ethnography, phenomenology, experimentation, survey research, and other types of secondary data analysis, including historical research and national survey databases.

DISCUSSION

This article provides clarity to the concept of consumer vulnerability by specifying its boundaries and by developing a consumer-driven definition, based primarily on studies in the marketing and consumer behavior literatures. The perspective recognizes the dynamic nature of consumer vulnerability and provides insights for public policy efforts designed to move the consumer from situational vulnerability to "normalcy," as defined in his or her own terms.

No one chooses to experience vulnerability. Yet all of us, on occasion, will experience vulnerability, whether it is related to repression or stigmatization experienced in the marketplace, to disorientation associated with the loss of a loved one or something else essential to one's identity (such as a job, a residence, or a treasured possession), to feeling overwhelmed by too many distractions in one's overly busy life, or to the opposite, the lack of interesting stimuli encountered by people who are lonely or isolated. For the most part, vulnerability is a short-run phenomenon that does not become an equilibrium state.

This view of vulnerability has strong emphasis on situations; consumers experience vulnerability in situations where they lack control and experience an imbalance in the exchange process. This situation is compounded by multiple factors including personal characteristics (e.g., self-concept); personal states (e.g., transition); external conditions (e.g., the distribution of resources); and a host of contextual factors such as price, assortment, lighting, music, and service provider interaction. Unfortunately, all of us may face conditions where we are incapable of (or uninterested in) protecting our-

selves from the occurrence of intentional or unintentional inequities in marketplace transactions. However, most people cope with these conditions, especially if social support is provided. Public policy efforts should focus on the availability of support and should not provide incentives to maintain the vulnerable state any longer than necessary.

Consumer vulnerability is closely tied to identity and transformation. At least in American culture, consumers have a strong desire for control over all aspects of their lives. When they cannot control their situations, they may believe (or think others believe) they are incompetent, weak, or less than human. At some point, they will wish to take control over their lives so that they may be "normal" again. Public policy should focus on empowering consumers and facilitate the movement away from vulnerability.

Researchers and policy makers must be careful about how they define vulnerability so as to not make it more difficult for the individual to move away from the vulnerable situation or to provide subtle incentives to remain in a vulnerable condition. Projecting onto consumers what their experience is like may be harmful. A person cannot know how to treat them unless he or she asks them because he or she is not in their place. In other words, one may desire to help an individual or group of individuals greatly, but it is far more effective to help in the manner that they wish to be helped than in the manner that one wishes to help.

This focus on situations in which one is vulnerable places emphasis on a transitional perspective of the life course, rather than on a trajectory perspective. An understanding of transitions provides us with the knowledge that both exit and entry processes must be handled by the individual (Ebaugh 1988). The optimistic short-run future time orientation in U.S. society may lead us to focus on entry processes; for example, when a friend loses a loved one, we may be guilty of asking why that person just doesn't get on with his or her life. Exit processes dominate some transitions; the friend justifiably may prefer to fantasize a happier time shared with the deceased rather than to face an uncertain future, made more complex by the removal of roles performed by that loved one. Abused wives frequently return to the residences shared with their abusers; they are not seeking more domestic violence but they do want to return to the comfort of the familiar—their own space, their neighborhood, their possessions. Inertia exists to perpetuate the vulnerable state despite how unlikely it is that individuals will wish to remain vulnerable. Systematic efforts to deal with easing the entry processes, while recognizing the problems faced with exit processes, will provide far more value to society than a focus on trajectories.

The trajectory perspective is a steady-state one. Furthermore, labeling someone as a member of a particular trajectory may result in less effort being made to support that individual's efforts to transition to a different situation. Protecting an individual while he or she is in trajectory per-

ceived to be negative may serve to extend the time horizon for that trajectory. The trajectory perspective may result in the labeling of a subculture as disadvantaged. Crockett and Wallendorf (2005) vividly described the disadvantages faced by African American consumers shopping in Black Milwaukee. At the same time, they describe individuals who have moved to other neighborhoods in Milwaukee as well as some who chose to live in Black Milwaukee but shop outside it. Their informants discuss the problems associated both with exit and entry. For example, moving from Black Milwaukee to a more comfortable lifestyle was not accomplished without a sense of guilt for many, who felt that some former neighbors saw them as "turning their backs on friends." At the same time, slights were encountered when interacting with their new neighbors and new service providers as well. Such research provides much insight as to what is needed to provide consumers with a higher quality of life, as determined by them and not by some well-intentioned third party.

Future Research

The majority of empirical research in marketing and consumer behavior has focused on able-bodied, middle-class Caucasian consumers. By extending the boundaries and looking at consumers who are not necessarily part of that mainstream, although it is hard to say exactly what mainstream is any more, we have learned much about consumer resistance (Hirschman and Hill 2000; Kates and Belk 2001; Peñaloza 1995), consumer adaptation (Hill and Stamey 1990), consumption adequacy (Hill 2002a), resource assets (Lee, Ozanne, and Hill 1999), social support (Hill 1991; Goodwin and Gentry 1997), the malleability of object meaning (Baker, Motley, and Henderson 2004), consumer transitions (Gentry et al. 1994, 1995), identity transformations (Bonsu and Belk 2003; Hill 2001a), fear of victimization (Blair and Hyatt 1995), consumer normalcy as a shopping motive (Baker, forthcoming), symbolic contamination (Stephens, Hill, and Gentry 2005), and a variety of other important consumer behavior topics. The development of these concepts exemplifies the value of studying unique contexts and unique populations.

One caveat to this type of research is that readers may walk away from it believing the studies have been about the unique context or unique population (e.g., consumers with visual impairments or people in grief) and not about what these particular consumers or contexts have taught us about important concepts such as consumer independence, transition, and so forth. Also, because the research has been grounded in research related to consumer vulnerability, readers may infer that all consumers with a particular personal characteristic (e.g., visual impairment) are vulnerable all the time; this is definitely not the case. Thus, future research should explain when populations studied are and are not vulnerable and when the context studied presents individuals with vulnerabilities.

There are a variety of populations and contexts not examined to date that may provide interesting insights to further understand issues related to consumer vulnerability. Some populations might include consumers with mental illness, pregnant women, military personnel and their families, consumers who are obese, and children living in foster care; and contexts could include everything from experiences with medical professionals to the processing of advertising information on pharmaceuticals to consumption of food biotechnologies.

Concluding Remarks

Marketing and policy responses must be against discrimination, against promoting or facilitating learned helplessness, and for empowerment by assisting individuals to develop skills that foster optimal functioning and individual agency (e.g., organizations for people transitioning into visual impairment have counselors to assist them in developing skills to negotiate their environments). Public policy should be based on consumer perspectives of vulnerability, not on well-meaning third parties' evaluations of their situations. Being treated like someone else wants to be treated may well not be appreciated.

Consumer vulnerability is a condition, not a status. Although some classes of people are more likely to experience vulnerability, that does not mean that people in those classes are always vulnerable. As Hill and Stamey (1990) and Lee, Ozanne, and Hill (1999) noted, the homeless and Appalachian poor are not always vulnerable. Instead, they have developed coping strategies to negotiate their everyday lives. Certain personal characteristics, including self-esteem and cognitive ability, increase the likelihood of experiencing vulnerability. To the extent that we can identify classes of people who are likely to experience vulnerability, marketers and public policy makers are more likely to help level the playing field for whole groups of consumers.

The experience of vulnerability is a reality, but those encountering it do not wish it to be an equilibrium state. Research in social marketing that facilitates (1) the removal of barriers that prevent the movement from situational vulnerability to the preservation or reconstruction of one's identity and (2) the empowerment of consumers to make that move will go a long way toward achieving relevance to public policy. It is hoped that the integration of past efforts here will help foster and encourage more research on consumer vulnerability.

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