

Inclusive products in the home

Challenges and
opportunities for
older consumers,
product designers
and retailers

Tom Pokinko
Christine Hemphill
Abi Turner

July 2021

In partnership with:

open inclusion

TRAJECTORY

About us

Centre for Ageing Better

The UK's population is undergoing a massive age shift. In less than 20 years, one in four people will be over 65.

The fact that many of us are living longer is a great achievement. But unless radical action is taken by government, business and others in society, millions of us risk missing out on enjoying those extra years.

At the Centre for Ageing Better we want everyone to enjoy later life. We create change in policy and practice informed by evidence and work with partners across England to improve employment, housing, health and communities.

We are a charitable foundation, funded by The National Lottery Community Fund, and part of the government's What Works Network.

Open Inclusion

Open Inclusion is an inclusive research, design and innovation agency based in the UK. We provide valuable insights to help inform organisations, innovators and designers by providing rich qualitative understanding of consumer perspectives, needs and preferences, as well as market scale and value.

The cornerstone of our qualitative research capability is our inclusive research panel of over 500 individuals spread across the UK who represent various experiences of disability and increasing age.

Open's panel was used in this project to provide participants for a five-part consumer research programme. Our researchers (in partnership with Trajectory and Ageing Better) designed and conducted a consumer survey, in-home visits, accompanied shopping visits and focus groups that informed this report.

Open also works with many retailers and was able to engage with relevant businesses to better understand retailer perspectives of inclusive design in kitchen and bathroom products, fittings and fixtures. This report focuses on the consumer insights.

Trajectory Partnership

Trajectory is an insight and foresight agency based in the UK, specialising in strategic research investigation and consultancy.

Much of our work is focused on understanding the needs, motivations and behaviours of older consumers in a wide range of markets from financial services to holidays and leisure.

We have particular experience in face-to-face and in-home interviewing of older consumers. Trajectory researchers assisted the Open Inclusion team in all aspects of the research included in this report.

Acknowledgements

Thanks to our advisory panel for their support on this project. These included: Sheila Mackintosh from the University of West England Bristol; Ed Warner, CEO of Motionspot; Emeritus Professor Sheila Peace from The Open University; Dr. Chris McGinley from the Helen Hamlyn School of Design, Royal College of Art; Fiona Jarvis, Founder of Blue Badge Style; Dr. Lynne Corner from VOICE; Elspeth Darby from the Disability Unit in Cabinet Office and Samantha Sen from Revo.

Special thanks also to Ed Warner of Motionspot and Richard Ash from John Lewis who provided retailer perspectives from the early stages of this research.

Disclaimer: The products mentioned in this report are being used as illustrative examples. We are not endorsing or promoting these products, and there are alternatives that exist in the market.

Contents

Executive Summary and Recommendations	6
Preface: Definition of inclusive design	8
Introduction	10
1 Methodology	12
2 Consumer attitudes and behaviour	14
2.1 Changes to the kitchen and bathroom	14
2.2 Factors affecting decisions to purchase new products	23
3. Product design	30
3.1 The difficulty of identifying inclusive design	30
3.2 A common language of inclusive design	33
3.3 Pricing	36
3.4 Implications for product design	38
4 Retail: in-store	39
4.1 Customer experience	39
4.2 Implications for in-store retailers	49
5 Retail: Online	52
5.1 Customer experience	52
5.2 Implications for online retailers	60
6. Model for change	61
Conclusion	63
Appendix	
A: Detailed methodology	65
B: Sample demographics	68
C: References	73

Executive summary

The Centre for Ageing Better commissioned Open Inclusion and Trajectory Partnership to conduct research into how well the market is serving adults aged 50 and over to remain independent in their own homes by providing mainstream products for kitchens and bathrooms suitable for use by everyone, whatever their ability – i.e. ‘inclusive products’. The research explored what consumers are looking for and what steps product designers, manufacturers and retailers could take to meet their needs as well as possible.

Our research with adults aged 50 and over found that many individuals do not want to think about their abilities declining and often put off making changes to their kitchens and bathrooms until change is ‘forced’ upon them. A number of participants in our research made do with improvised ‘hack’ solutions, even when suitable products, fixtures or fittings were available. This was sometimes because of cost, but was frequently through a lack of awareness. Participants in our research tended to think of products designed to support their changing needs as ‘medicalised’ and ugly, whereas there were often mainstream products that could support them to live well at home for longer without the perceived attached stigma.

Good inclusive products are easy-to-use, aesthetically pleasing and affordable.

Our research found that everyday products in the home, if well-designed, have the potential to support individuals to remain more confident and safely independent in their own homes for longer. However, there appears to be a gap in the market with a number of older adults in our research not accessing the products they need to live well at home.

Recommendations

Our research suggests that manufacturers and retailers could benefit by increasing the availability and desirability of everyday inclusive products. They can play an important role at each stage of the customer journey, from designing and procuring products that are more suitable for varying needs, to increasing consumer awareness of such products through helpful labelling (online and offline) and knowledgeable customer service that supports consumers to make thoughtful purchasing decisions. Developing a common language and understanding of inclusive design to make it more identifiable to consumers will be part of the solution.

The over 50s consumer market is large, valuable and growing. To address it with better design solutions requires manufacturers, designers and retailers to work more closely with consumers of all ages and abilities to identify needs that are not being well met by products today. Not all required changes will be substantial. Often tweaking existing products, such as adding a narrower spout to a mainstream kettle, changing the size of controls or visual indicators or introducing easier to open doors to a fridge freezer can make a product much more suitable to a new and significant group of consumers.

Our work with consumers also indicates that designers, manufacturers and retailers should understand and improve the end-to-end product experience for consumers, from selection, reading and understanding packaging through to buying, transporting, unpackaging, set-up, use, cleaning, storage, maintenance/repairs and disposal.

‘Age-inclusive’ marketing could be used to emphasise how inclusive products benefit everyone regardless of age or disability, with aspirational marketing approaches employed to position inclusive products and features as smarter, more adaptable solutions for those planning for the future or wanting flexibility today.

Through improved positioning of current inclusively designed products – and an increased supply of novel age-inclusive designs – consumers could be better supported to remain in their homes in later life. Their desire for this could potentially fuel demand for new product categories and associated services, and increase sales revenues, loyalty and brand advocacy for those who step into this significant market gap.

Preface: Definition of inclusive design

Mainstream and easy-to-use

In this report, we adopt the British Standards Institute's 2005 definition of inclusive design as mainstream/non-adapted design in line with the definition set out in the University of Cambridge's Inclusive Design Toolkit:

'The design of mainstream products and/or services that are accessible to, and usable by, as many people as reasonably possible without the need for special adaptation or specialised design'.

Inclusive products:

- are easy-to-use, recognising and supporting people's varying and changing degrees of ability including mobility, dexterity, vision, hearing, cognitive and long-term health
- can be used by the majority of the population without specific adaptation

Examples of mainstream, inclusive products range from 'easy-grip' can openers to fixtures and fittings that people can install as part of ongoing home maintenance or specific home improvements (for example, lever taps, low counters and pull-down cupboards). In all cases, products are:

- available in mainstream retailers
- created with clear consideration of the needs of the majority of the population and varying degrees of ability



Figure 1 Mainstream

HotCup with adjustable tray,
manual stop option

Image source: Breville: Hot Water
Dispensers, n.d.: [https://www.breville.co.uk/
breakfast/hot-water-dispensers/hotcup-with-
adjustable-tray-manual-stop-option/VKT124-
01.html#](https://www.breville.co.uk/breakfast/hot-water-dispensers/hotcup-with-adjustable-tray-manual-stop-option/VKT124-01.html#)



Figure 2 Specialist

Universal Kettle Tipper

Image source: Complete Care Shop:
Kettle Tipper, n.d.: [https://www.
completecareshop.co.uk/kitchen-aids/kettle-
tippers/universal-kettle-tipper](https://www.completecareshop.co.uk/kitchen-aids/kettle-tippers/universal-kettle-tipper)

Easy-to-use products

The Breville Hot Cup illustrated above (Figure 1) fits this definition. It has been marketed as a universal product and can be found in mainstream stores such as Argos and Currys. By contrast, the Universal Kettle Tipper (Figure 2) has been marketed as a specialist ‘kitchen aid’ and can be found primarily on specialist retailer websites. Both products have been designed to support people to pour hot water easily.

Introduction

This project explored the suitability of kitchen and bathroom products, fixtures and fittings for over 50s.

We spend most of our later lives living in our own homes and most older adults want to live independently in their current home for as long as possible (Lloyd, 2015). While many of us remain healthy and strong well into older ages, we are more likely to experience a decline in our physical strength and mobility and to find home-based day-to-day tasks more difficult as we age. Whereas only 8% of children are disabled, 45% of pension-aged adults are disabled (Department for Work and Pensions, 2018).

However, the majority of UK housing stock is not suitable, adaptable or accessible for people in later life (Centre for Ageing Better, 2018). Given that most of the homes we will be living in by 2050 are already built (Boardman et al, 2005), and homes where the oldest person is aged over 85 are now the fastest growing household type (ONS, 2018), the adaptability of our home environments is critical. We will require products and fittings that can be updated or minor renovations to better suit our changing needs, enabling us to live independently, confidently and safely for longer at home.

Kitchens and bathrooms are frequently used areas where over 50s can encounter significant issues and hazards if the design of the environment and the products within them do not meet their changing needs.

The overall goal of this research was to understand, for the over 50s and in relation to kitchens and bathrooms:

- how often people make changes to their home and the scale of those changes
- how people identify, find and purchase products, fixtures and fittings that best meet their needs
- factors that influence purchase decisions and whether there is a demand for inclusive products
- how effectively over 50s feel their needs are being met by the current retail market
- how product designers can improve the goods they offer
- how retailers can bridge gaps in knowledge and awareness of inclusive products

Older buyers dominate the consumer market and are fast becoming the largest consumer group with the greatest spending power in the UK.

The number of people in the UK aged 60 and over is forecast to rise by 32% by 2038 and those 75 and older are expected to rise by 57% relative to a total population growth of just 8% over the same period (ONS, 2019).

If ranked among sovereign nations, the European Union Silver Economy (the economy of the population over 50) would currently be the third largest economy in the world, behind only the USA and China (Technopolis Group and Oxford Economics, 2018).

By 2040, older households are expected to spend £550 billion a year in the UK (63% of total spending). This is £221 billion more than projected spending by younger households (ILC UK, 2019).

Considering the size and spending power of older consumers in the UK, we aim in this report to illustrate some of the considerations and principles that organisations who wish to better serve the needs of this growing market would benefit from understanding.

COVID-19

Most of the research for this project was conducted before the COVID-19 pandemic struck, but at the time of writing much of the world's population continues to face serious health, economic and social upheaval. We have yet to understand fully the long-term effects on the preferences and needs of older adults.

In this report, we consider changes that are already apparent or still emerging which impact both older consumers and retailers. We expect changes to continue and more trends to be understood and evidenced over time.

In the current context, consumers have had more time in their homes to reflect on their unmet or poorly met needs through the lockdown (Open Inclusion, 2020). They will likely continue doing so well past the easing of government restrictions, depending on their needs for interaction, general health and other underlying needs (Busby, 2020).

1. Methodology

A sequential study supplemented by a representative poll

Open Inclusion and Trajectory Partnership conducted research on kitchens and bathrooms with older adults (aged 50 to 84) between December 2019 and April 2020.

The research conducted by Open Inclusion and Trajectory Partnership comprised a five-part consumer market research programme where each phase built on the next:

- Literature review/market analysis that explored existing evidence, research and good practice examples on inclusive products used at home.
- A small-scale online survey using SurveyMonkey of 100 participants drawn from Open Inclusion’s UK-wide panel that explored attitudes towards ageing, homes and ageing-related changes to the home. Accessible alternate versions and the option to complete by phone were provided for some participants.
- In-home visits with nine households (11 participants) about the layout and products in their kitchens and bathrooms and the adaptations that had been made to them. In a few cases, the participant was joined by their partner, who often acted as their carer and whose thoughts and experiences fed into the research findings.
- Accompanied shopping visits with nine participants, exploring their retail experiences and motivations. These were conducted either in-store or online.
- Three online focus groups with a total of 19 participants (including those who took part in earlier research and new participants). The focus groups sought to understand practical changes retailers could make to help improve knowledge about, and customer experience around, inclusive products.

Participants came from a range of household compositions, with a mix of socio-economic status and ethnic backgrounds. They had different experiences of disability and long-term health conditions: some identified as disabled, others had significant accessibility needs but did not identify as disabled. We also included a small number of people who did not report any accessibility needs. The majority of the face-to-face research was held in and around London, although the survey included participants from across the UK.

Further details on the research methodology employed and participant demographics can be found in the appendices.

Since most findings presented in this report are based on research with a relatively small total sample size of 120 adults aged 50 and over, the findings should not be viewed as representative or definitive. Nevertheless, the detailed insights gathered from written, verbal and observed consumer feedback suggest important trends that this report seeks to illuminate.

This project was also supplemented by a face-to-face poll conducted by Ipsos MORI on behalf of Centre for Ageing Better (2020) that surveyed a nationally representative sample of 912 adults aged 50 years or older across Great Britain between 21 February and 12 March 2020.

2. Consumer attitudes and behaviour

2.1 Changes to the kitchen and bathroom

Experience of making changes

A number of adults aged 50 and over in our research (or people acting on their behalf such as family members or landlords) had made changes to their home and were planning further changes.

Half the people (52%) in our small-scale survey had made significant physical, structural or layout changes to their current kitchen, either by themselves or through their family or landlord. Three in five (59%) had made these changes to their current bathroom. Most of these changes – including changes to layout, taps, flooring and lighting (Figure 3 and Figure 4) – had been made in the past five years.

Figure 3 Top five physical, structural or layout changes to the kitchen made by over 50s consumers, their family or their landlord.

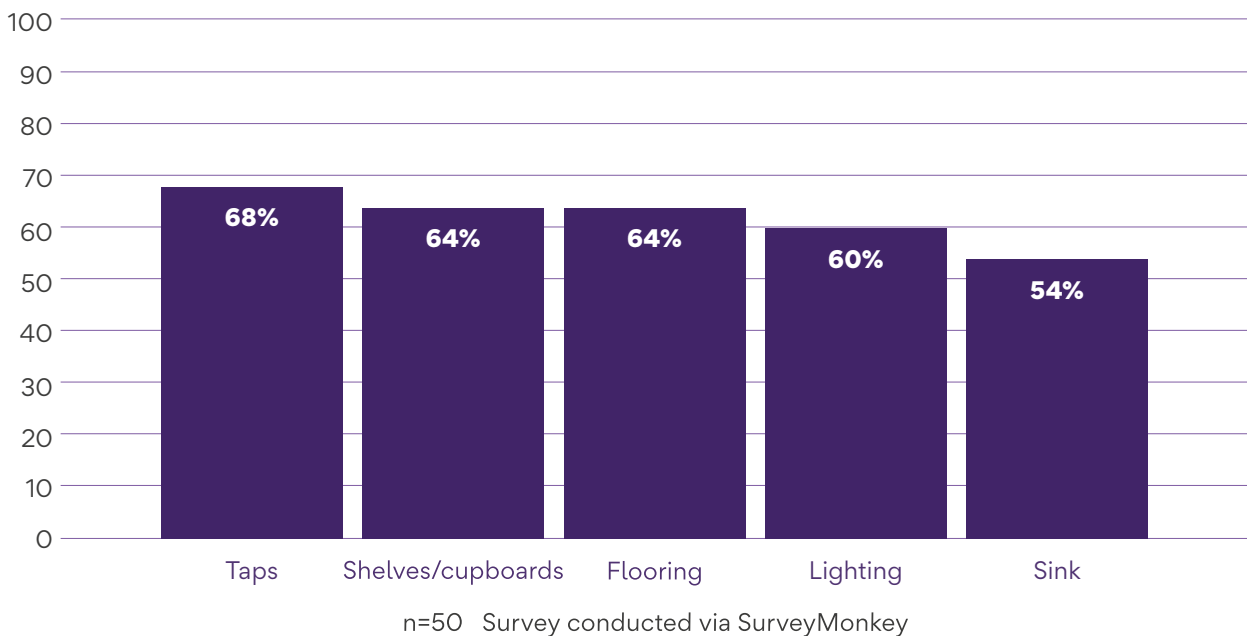
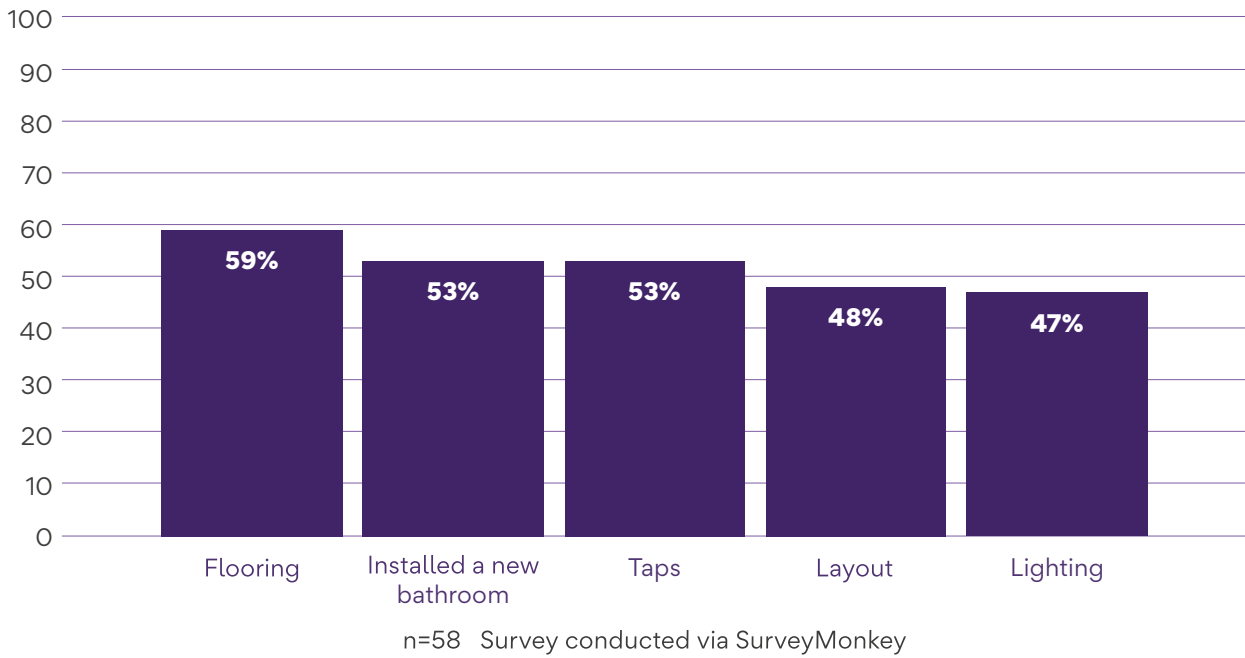
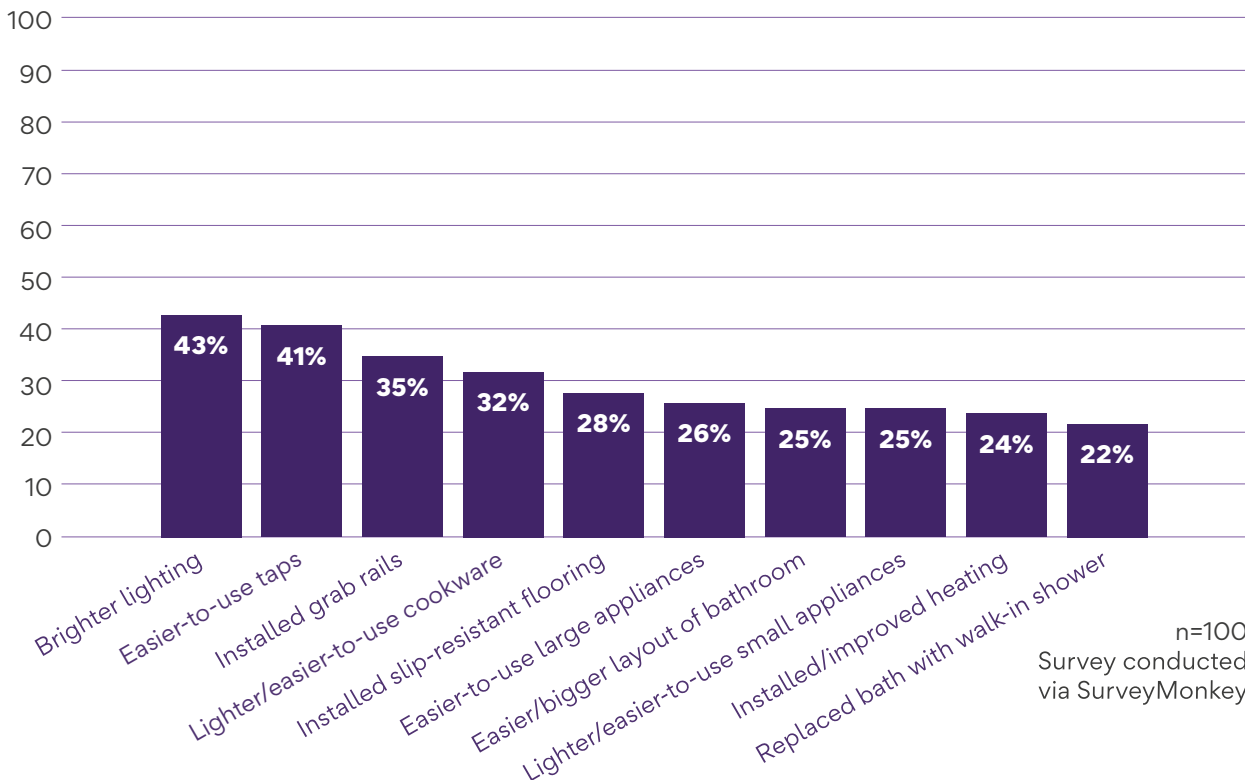


Figure 4 Top five physical, structural or layout changes to the bathroom made by over 50s consumers, their family or their landlord.



A number of these changes were intended to help in the home. Brighter lighting and easier-to-use taps were the most popular changes people made (over 40% of respondents installed these), along with lighter or easier-to-use cookware (see Figure 5).

Figure 5 Top ten products purchased or installed by consumers to help them in their home.



Specialist adaptations such as shower seats and grab rails were also common changes noted in our research. In a few cases, we learned that these changes found universal appeal by people who did not necessarily ‘need’ them. For example, during one in-home visit, we learned that the 82-year-old homeowner installed a chair in her walk-in shower because she thought she might need it in the future. Her son now regularly uses it when he comes to stay, not because he needs it but because ‘he’s lazy’ and it is convenient for him.

Of those survey participants who had not yet made changes, about two-thirds expected to carry out improvements to their kitchen (61%) or bathroom (65%) in the next five years. Common planned-for kitchen changes included installing new cupboards, counters, flooring and changing the layout. Common planned-for bathroom changes included replacing the bath with a shower and changing flooring.

Desire to remain in one’s home

Among our research participants, many individuals had the deep-rooted desire to remain living in their current home for as long as possible. However, this desire was not always linked in individuals’ minds with making changes to their homes.

During our home visits, seven of the nine households we visited expressed a strong desire to remain in their home. This was especially important for visually impaired households, as memorising new layouts could be challenging.

“I want to be carried out of here in a box...” (woman in her late seventies, home visit)

“I’m desperate not to move from here.” (man in his late sixties, home visit)

“I’m determined to stay here and feel safe.” (woman in her seventies, home visit)

Responses from the small-scale survey and those that participated in our qualitative research indicated that many adults wanted to make their home safer and more comfortable. However, our home visits revealed that this was still largely reactive rather than proactive. Instead of planning ahead, many individuals preferred to take things as they found them:

“I’m going to roll with the punches – you don’t know what will be thrown at you in 20 years.” (blind man with dyslexia in his early sixties, home visit)

For many individuals who participated in our home visits, it appeared difficult to recognise barriers in their home that, if removed, would better support their goal of living in their home to the end of their life.

Lack of planning ahead

A number of participants in our research did not want to think about their abilities declining or what others might think of them as they get 'old'. In our small-scale survey, while the majority (59%) felt neutral – i.e. neither negative or positive about getting older, a quarter (27%) said they felt 'negative' or 'very negative' about getting older. When asked how often, in a typical week, they thought about getting older, 21% of survey participants said 'never.'

Although our qualitative research identified some groups of individuals that are more receptive to planning for the future and thinking about their needs when renovating their home or purchasing products, fixtures or fittings, the majority of participants did not seem to consider their possible future needs.

A key barrier our research identified to planning ahead was the fact that many people felt uncertain about their future selves and how their needs may change. For example, most over 50s who participated in our home visits expected to continue making smaller changes to their home and the products within them as and when they needed to. This approach limits proactive purchasing for many. As products and renovations last into the future, not considering how personal needs may change will likely reduce how useful solutions are to households over time. Additionally, this situation can have negative cost impacts. For example, someone might redo their bathroom with a new bath only to find two years later they cannot easily get into it anymore.

Just over one-third (36%) of respondents in our small-scale survey were actively planning for changes as they got older, but over half (54%) had thought about how they will manage in their home in the future but had not made any plans. 10% of the sample had not thought about it at all. Most participants in our qualitative research limited how far they thought ahead to around five to ten years maximum. Anything more (ten to 20 years) was 'too far into the future'.

According to the nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better) commissioned by the Centre for Ageing Better as a part of this project, two-thirds (67%) of people aged 50 and over do not think they will need to change anything in the home in the next five to ten years to make it easier for them to personally to use as they grow older. This is consistent with independent research conducted by Care & Repair England and BMG Research (2017) with 481 UK residents aged 55 and over, showing that over half (55%) do not expect to have to adapt their home.

Some of our qualitative research participants displayed a strong positive bias about ageing which impacted their willingness to plan. This may be a form of 'optimism bias', in which people tend to underestimate the probability of negative events and overestimate the probability of positive events occurring to them in the future (Sharot, 2011).

“My mum got in/out of the bath for years and didn’t have any help [in the form of any specific adaptations or loss of independence] so why should I [make any adaptations]?” (woman in her seventies, home visit)

Case study one: two households

Rick (early sixties, vision impaired and dyslexic) lives with his partner in a house with more than one storey. Rick used to be a plumber before getting a significant visual impairment a decade ago. He finds it hard to guess what he may need in five to ten years’ time. In the past five years, he and his partner have only changed the lighting in their kitchen and do not anticipate making any other changes. His uncertainty about his own future needs is a major barrier to change. He prefers to ‘roll with the punches’ and see what comes.

By contrast, **Peggy** (early eighties, no stated access needs) is a positive planner. She lives on her own and enjoys a comfortable cushion of savings. Peggy often plans ahead and thinks about her future needs. She has trusted builders and decorators that she often turns to, and recently refitted her bathroom including adding a foldable seat fixed to the shower wall, which her grandson uses ‘just because he’s lazy.’ She is planning on tackling her kitchen next. She isn’t significantly cost constrained in her selection of products or adaptations.

Not knowing what options are out there

Many over 50s that participated in our qualitative research did not know what products existed to support their existing and changing needs and felt a lack of available expertise, especially when it came to larger, more expensive purchases.

The first thing most participants thought about in relation to enabling them to live independently at home were adapted products found in specialist retailers – especially larger adaptations such as stairlifts, grab rails and shower seats. However, most specialist products are based primarily on function rather than aesthetics, with the result that such products are not appropriately positioned for everyone.

General products that can help address less dramatic needs (e.g. by being easy-to-access, adjust, maintain), appeared to be less familiar. They often failed to be noted by research participants when discussing changes to the home. Yet, once recognised for their beneficial features, they appealed to these older consumers. There appears therefore to be much potential for mainstream products to meet the latent demand, but a lack of consumer awareness is causing a market failure.

‘Forced’ to change

In many cases when changes did happen, they were triggered by no longer being able to do something or products no longer working. For many of our research participants, changes were made to accommodate product or person-based needs (e.g. can’t get into the bath, can’t reach top shelf, oven has broken). At this point in time, there may be some consideration of future needs, but it is not guaranteed.

Responses from our small-scale survey and qualitative research identified key factors that triggered planning, including personal (or a household member’s) ill health or disability and seeing how others (parents, friends) coped in their homes as they got older. Examples include:

- when helping parents with increasing needs make changes to their home
- when having younger family members come visit
- when planning major renovations/purchases that may last a long time
- after accidents or a significant rapid decline in health or ability

Households with disabilities and wealthier households

In our qualitative research we found that consumers over 50 with long-term disabilities and wealthier households were often more receptive to planning for the future and thinking about their needs when purchasing products.

In the case of over 50s consumers with permanent disabilities, this is perhaps because they have already overcome the psychological barrier of adapting to changing cognitive, sensory or physical requirements. Their experience with solutions that better supported their specific needs seemed to increase their interest in, and willingness to consider, additional inclusive solutions. This conclusion is supported by the findings from the nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better, 2020):

- 43% of poll respondents think about their future needs (eyesight, hearing, mobility, etc.) when buying items for the home (that is, fixtures, fittings, appliances, furniture and smaller objects in their home). This increases to 53% amongst respondents who currently experience difficulties.¹
- Overall 20% think they will need to make changes to features or adaptations that make it easier to use the bathroom or kitchen. This increases to 29% amongst those who experience difficulties.

¹ Footnote: Respondents were asked if they had difficulties with a list of given items. These included: mobility (moving about); lifting, carrying or moving objects; manual dexterity (using your hands to carry out everyday tasks); communication (speech, hearing or eyesight); memory or ability to concentrate, learn or understand; your physical co-ordination (e.g. balance); other health problem or disability and also including options ‘none of these’; ‘don’t know’ and ‘prefer not to say’. Base: All adults aged 50 or over in GB with any capability difficulties (n= 455)

Many qualitative research participants with disabilities had a more positive outlook towards future planning than those without disabilities. For example, a visually impaired home visit participant who began losing his sight in his forties showed the researchers his hot water dispenser, which he had used daily over the past few years as an alternative to a kettle to prevent his cup from overflowing with boiling water. Over time, he has gradually implemented new practices and ways of doing things and had a positive attitude towards ageing and making changes to the home.

Similarly, we found wealthier households were less restricted to make changes they needed and found desirable as a larger part of the market was within reach for them. Our home visits revealed that wealthier participants were able to adapt their homes as and when they wanted to, more easily and in tune with both their functional and aesthetic preferences. They were capable of doing so independently without council or other external support (and associated product or value restrictions). The result was more comfortable and satisfying living situations, as the items selected provided the additional functionality required without the same loss of personal appeal.

‘Hack’ solutions

During our home visits we noticed that when products were no longer able to effectively fulfil an individual’s needs, many adults developed do-it-yourself ‘hacks’ to address user need gaps. Examples of innovations we witnessed during our home visits included:

- using elastic and hair bands around objects to differentiate products, e.g. shampoo from conditioner (Figure 6), or to identify the older sour cream to use first
- sticking larger labels on spices (Figure 7)
- attaching bump-ons or Blu-Tack on knives to help identify sharp edges to stop cuts
- sticking black and yellow hazard tape along the lip of drawers to show they’re open (not self-closing)

Figure 6 Using elastic bands to differentiate between bottles.

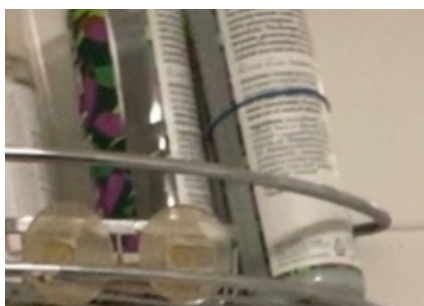


Figure 7 Attaching larger text labels onto products.



While some of these solutions are ingenious, quite often hacks are implemented where other alternatives would have been safer. During our home visits, we observed a number of dangerous hacks including:

- utilising old furniture such as unsteady wooden stools to get in and out of the bath. In some cases, people ignored step ladders despite owning them because ‘this is quicker’
- using a (folding) dining room chair to stand on in order to get objects out of tall cupboards
- using knives to lift out Tupperware containers on high shelves (Figure 8)
- a blind person using her own finger rather than a sensor to ensure hot drinks do not overflow when pouring them. This person had a level monitor purchased from the RNIB but found the sound it emitted was quite startling and was surprised to hear about a different type of kettle (such as a Breville HotCup) that could support her.

While many of these hacks are used by people of all ages (such as using a folding chair to reach objects in high cupboards), the likelihood that they can result in injury will be higher for individuals who may face other challenges, for example around their dexterity or mobility.

The reasons our research participants settled on hacks were varied, ranging from concerns over aesthetics and price to a lack of awareness about what products existed in the market that could meet their needs (particularly inclusive products). Many participants told us they could not justify spending more on a product when their existing product or hack would do. The convenience of not having to look for solutions or travel to stores factored in as well.

“The one I have now, it sort of hurts to use... but it’s brief [the period of using it]... I’d need to get to the point of spending £20.” (woman in her late seventies, accompanied shopping visit)

“This [hack using knife to open cupboard] is quicker than getting out the steps.” (woman in her fifties, home visit)

Figure 8 Research participant using a knife to reach items high up on the shelf.



Case study two: Helen

'Helen' (late fifties) lives with her family in a house with more than one floor. She has modest savings but a low weekly income due to not working much on account of mobility/dexterity disabilities and a mental health condition. Helen uses sticks/crutches rather than a wheelchair, and patiently makes her way up and down stairs in her home, one careful step at a time. She is adamantly against adapted products and thinks buying a grab rail for her bathroom would be akin to 'admitting defeat to decrepitude.'

Helen has a strong desire for independence but is a reluctant planner. She uses a lot of hack solutions, some of them quite dangerous. In addition to a dislike of adaptations, she also complains that the age of her house stops her making any serious renovations. However, she does not see how using a wooden rickety clothes horse to get in and out of the bath can be dangerous to her.

In general, Helen is not very aware about the products, fixtures and fittings currently on the market which could help her. Price is another big deterrent for her. In her view, 'everything beautiful is expensive.' Quoting a line from the Dylan Thomas poem, Helen vows to 'rage against the dying of the light,' relying on rickety stools and wooden towel rails rather than products designed to accommodate her changing needs.

2.2 Factors affecting decisions to purchase new products

Ease-of-use

Improving ease-of-use, leading to greater independence, was cited by many of our research participants as one of the most important factors affecting decisions to purchase new products for the kitchen or bathroom. For example, from our small-scale survey:

- Three-quarters (76%) of survey participants who had physical, structural or layout changes made to their current kitchen, did so in order to make it easier for them to use, and this applied to nearly as many respondents (68%) in relation to their bathroom.
- 14% reported making changes to their kitchen to make it easier for someone else they live with to use, and 10% in the case of the bathroom.
- About two in five wanted a new look and feel for their kitchen (43%) or bathroom (42%).
- A little more than one in three (36%) wanted to feel safer in their bathroom.

Disruption

Among our research participants, choices about products, fixtures and fittings were weighed up against hassle to the individual, including how easy or expensive they are to install, and how disruptive this would be (practically and emotionally). The level of ease (or disruption) was considered across the whole customer journey. It is therefore not sufficient for a home product simply to be functional and good value. It also needs to be relatively easy to deliver to the right place in the home, to unpack once there, to get fitted and set up, to learn how to use, as well as to clean and maintain over time.

“That looks useful. I live on my own, but I would be worrying about installing it.”
(woman in her early sixties with mobility impairment and dyslexia, focus group)

“The shelf would also have to add the fitting charge – so that really adds to the cost.” (woman in her early seventies, focus group)

Some individuals expressed a concern around only being able to make changes once (due to the cost and effort entailed), resulting in increased pressure to ensure they get it right.

“I cannot bear the thought of the disruption... it is more about having to move everything out, the hassle of all the work, inconvenience...”
(woman in her seventies, survey participant)

Aesthetics

Our in-home visits and focus groups highlighted the degree to which poor product aesthetics discouraged purchase despite clear functional benefits (e.g. improved safety). Our consumer research also showed that shoppers often make important initial assumptions about ease-of-use, value for money and suitability based solely on how a product looks.

For example, during a product showcase in our focus group, many older participants told us they would be put off buying a product because of how it looked even if it solved a specific need. An example of this was demonstrated with a wire pull-down shelf, which is especially useful in small spaces to bring high up items in kitchen cupboards down to a more reachable level.

One participant in her late seventies, who has arthritis in her hands and knees and whom we observed using an unsteady wooden ladder to reach items high up in her kitchen cupboard, said she would not buy the pull-down shelf because she disliked the utilitarian look. This view was echoed by other participants including a woman in her fifties with no stated accessibility needs who was thinking of making changes to her kitchen. She uses a breadknife hack to pull items off the top shelf but similarly disliked the look of the pull-down shelf and said she would not buy it.

Affordability

Price is one of the crucial factors in decision-making when it comes to home changes.

Most over 50s consumers in our research, whatever their financial situation, tended to look for products that were good value for money – and in addition to upfront product costs, also considered the further costs of installing (or using help) to get the product set up and working.

Throughout our research, participants identified cost (both perceived and actual) as a key barrier to purchasing inclusive products. The difference in price was especially significant when enhanced features of products (e.g. lightweight, provides audible feedback) were not well understood or valued by consumers.

“Everything that looks nice seems to be out of budget. Something pleasing to look at is just too expensive... so I am left with ugly or expensive.”
(Male in his sixties, accompanied shopping visit)

Many felt a sense of inequality within the market relative to income, with a number of research participants commenting that products aimed at them were unfairly priced higher than standard products of equal quality.

“Everything [that is inclusively designed] is twice the price and not on sale. We’re a captive audience!” (man in his late sixties with mobility impairment, home visit)

“For us older or disabled people, products to help us are expensive”. (woman in her early sixties with mobility impairment and dyslexia, focus group)

Individuals who felt financially constrained were also reluctant to make big decisions about changing their kitchen or bathroom.

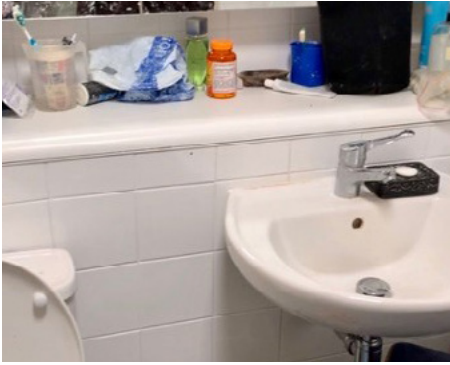
“We can only afford to do it once – so it needs to be done properly... I don’t trust builders and [retailers names] only fit things for your existing layout. There’s no one you can go to for advice to plan for the long term...” (blind woman in her fifties speaking about a change she’s been planning to do for the past four years, home visit)

Three examples that highlight how finances have impacted on three different households’ experiences of making changes to their home are presented below.

Figure 9 Three examples of how finances can impact capability to plan.



An 82-year-old, relatively well-off participant, was able to make incremental changes to her home to accommodate her changing needs as and when she needed them.



A 61-year-old (vision impaired participant), living in a housing co-operative, installed new lighting, toilet, basin and taps in her bathroom to 'make it easier for me to use' and to 'stop a leak' that had affected three floors below. She would like a complete kitchen refurbishment 'at some point' but is unable to alter her home anymore because she does not own it and has a low income.



A 50-year-old (mobility impaired participant) who lives in council accommodation has an occupational therapist who helped him choose a shower seat for his home when he could no longer do without it. He dislikes the look of it and thinks all specialist products shown to him are 'ugly'. He cannot afford to pay a premium on what is offered for less 'medical-looking' products.

We also noted that some participants in our qualitative research did not want fixtures because they were worried that they might impact the future value of their home. This concern would be reduced if fixtures and fittings were designed to be more aesthetically and universally appealing.

Case study three: Fatima

'Fatima' (mid fifties, blind) lives with her family in a house with more than one storey. She has wanted to install a wet room and a new kitchen for the last four years. Because of her vision impairment, 'everything needs to work tactilely'; however, she doesn't know who to ask for advice and, as she points out, 'we can only afford to do it once.' So she keeps putting it off.

Despite her household income being quite high (one of the highest in our study), she and her partner are also paying off a mortgage, putting their children through school, and paying a cleaner for support with cleaning and other household matters every week.

The financial implications translate to more pressure to 'make the right decision'. She's not sure where to turn to get the expert advice she needs. She and her partner still feel vulnerable when faced with the prospect of an expensive and complex bathroom and kitchen refit. She just wants to be able to talk to a retailer or designer who understands her additional needs to help her finally make these changes.

Stigma

Stigma can be a barrier to making changes in the kitchen or bathroom when a need arises due to health or changed ability.

For example, one home visit participant in his fifties with a mobility impairment was reluctant to accept that his bathroom needed to be adapted. He had refused any changes to the bathroom until his wife could no longer get him into and out of the bath.

Products perceived as ‘medical’ because of poor aesthetics were often shunned. Perception of others seeing such items in their home was also key deterrent for some.

“I refuse to admit I may need help. I am not that old!” (woman in her late fifties, survey participant)

“I am not ready to do this yet.” (man in his early fifties, survey participant)

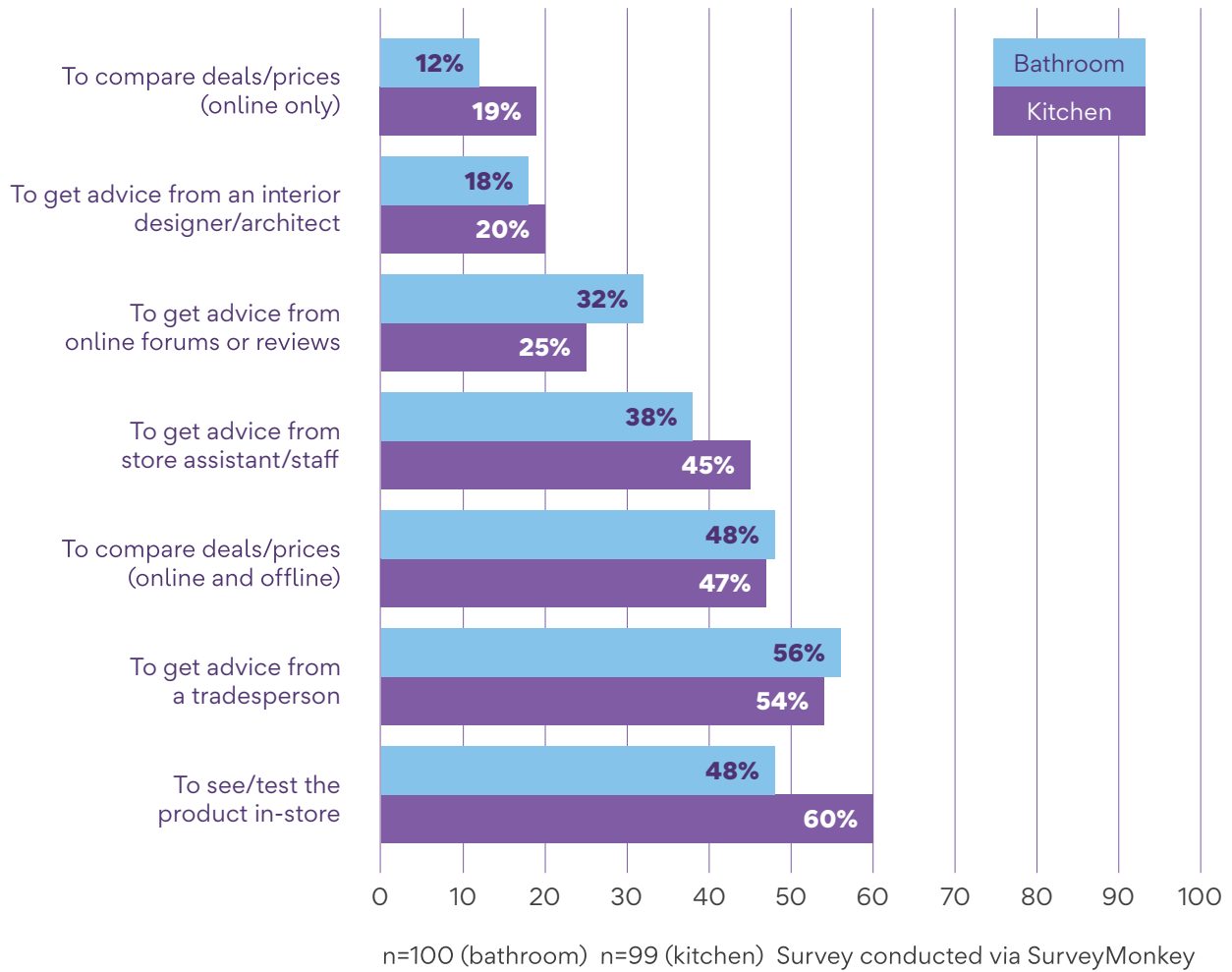
Generally, stigma seemed to be a particular challenge before needs-based changes were considered for the first time. Qualitative research participants with longer term disabilities were more used to finding things that worked for them to support their specific needs. Although they wanted the same aesthetic, cost and functional balance as those without disabilities, stronger needs often trumped pride as a barrier. The stigma of making changes was less powerful to them than the stigma about not being able to live self-sufficiently.

The cost to personal pride could be lowered through a better range of appealing and affordable options that address changing needs (i.e. items that are desirable, not merely needed and then quickly hidden out of sight when friends come around).

Getting advice

Among participants in our small-scale survey, getting advice from tradespeople was crucial when making physical, structural and layout changes. Survey respondents also felt it was important to be able to inspect products in-store.

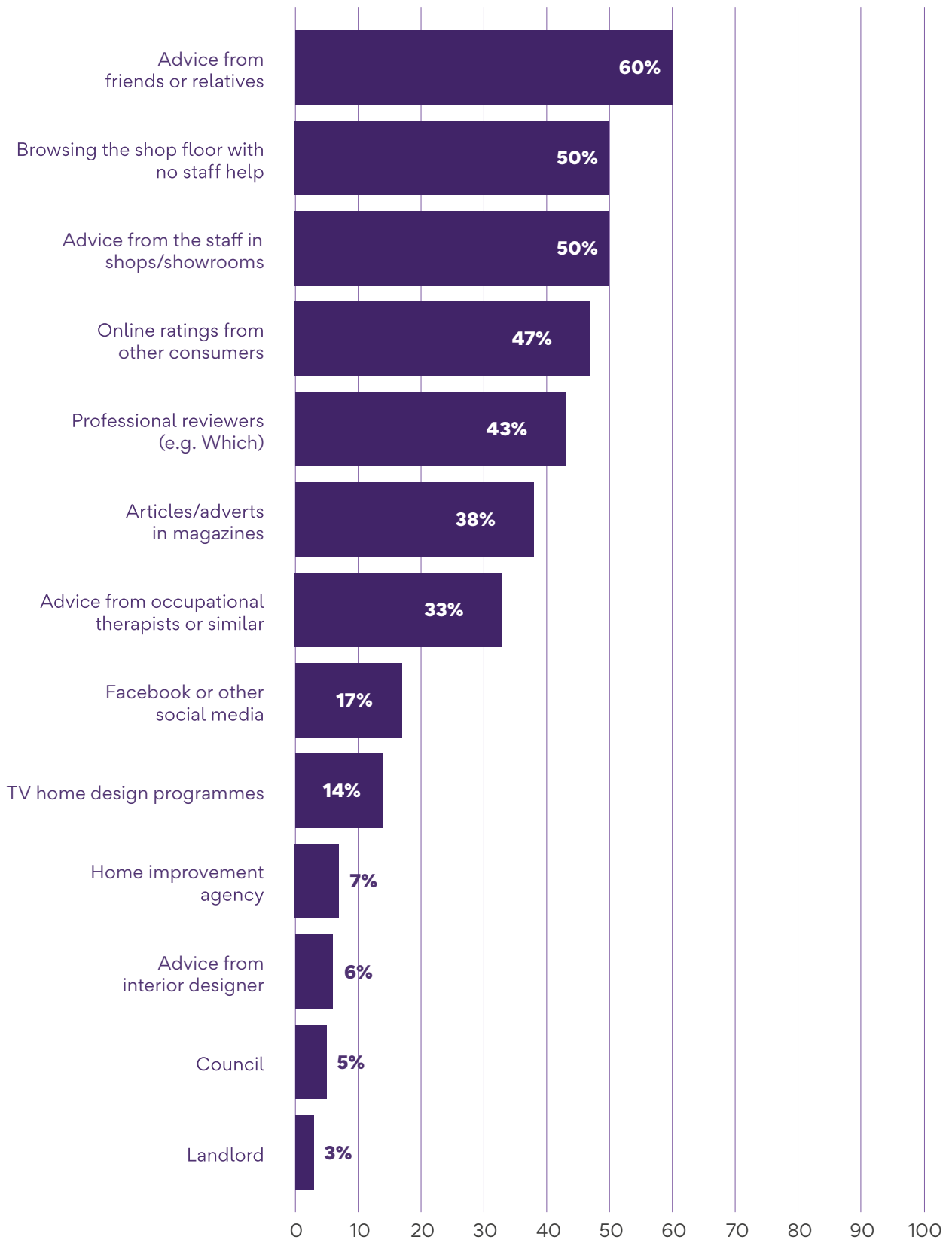
Figure 10 Most important factors considered by over 50s consumers when making major changes to the kitchen or bathroom



Our survey participants used a number of routes and touch points to identify which products were right for them, including retailers, online reviews and friends and family. The top ways our survey participants chose to identify home fixtures and products that met their needs (Figure 11) were through:

- advice from friends or relatives (60%)
- browsing the shop floor with no staff help (50%)
- advice from staff in shops, showrooms (50%)

Figure 11 How respondents identified home fixtures and products that met their needs.



n=98 Survey conducted via SurveyMonkey

3. Product design

3.1 The difficulty of identifying inclusive design

Generally, when our research participants became aware of their changing needs and accepted that they would like to find a solution that works better for them, they rarely knew how to identify what products were easy-to-use and inclusive.

During our focus groups with consumers aged 50 to 84, we discussed a number of inclusive products for the kitchen and bathroom. The products we considered included utensils such as an easy-to-use food chopper, small electric goods such as a lightweight hairdryer, kitchen and bathroom fittings such as a pull-down wire shelf and soft backlight mirror and whitegoods such as a voice-controlled washing machine.

We first asked participants for their initial impressions based on the images/descriptions of products ('what words do you think of when you see the following?') and next discussed the inclusive features of each product, for example, the easy-to-grasp/turn controls and voice control features on the Bosch washing machine via a service called Home Connect.

Across our focus groups, apart from the OXO range, there were no other brands that were particularly known as being specifically easy-to-use or inclusively designed. Most focus group participants did not recognise the inclusive features of products discussed, nor did they know products with such inclusive capabilities existed on the market. Similarly, in our accompanied shopping visits, most participants could not easily identify products, fixtures or fittings that would be particularly easy for them to use at a number of mainstream retailers.

Our qualitative research showed that consumers over 50 consider aesthetics carefully when purchasing products. Our focus group participants:

- Used how a product looks to make assumptions quickly about value, complexity and quality – and also in rare cases about ease-of-use.
- Read product names to help them understand their usefulness, so when this was not meaningful it did not help (e.g. wab275gb washing machine).
- Recognised trusted brands and used this to predict their quality, value and degree of 'ease-of-use'.

At first glance, most participants failed to realise the products discussed had inclusive features. This was the case even with more recognisable products such as the Dyson hairdryer. No focus group participants realised the Dyson featured a lightweight construction and efficient motor which reduced drying time (and therefore the time you need to hold it). Similarly, none knew about the smart functions of the Bosch washing machine, and only a few spotted its easy-grip, easy-turn knob.

Once focus group participants were told about these features, and heard positive experiences had by other older shoppers in the focus group with related products, they were much more interested in purchasing the products shown. In some cases, participants commented that if they had only known such products existed, they would have bought them instead of their most recent purchases.

“I couldn’t tell it was special... and now that you’ve told me about those features, I’m impressed!” (woman in her fifties, who is a carer for her husband with mobility needs speaking about the Bosch washing machine, focus group)

Participants in the research felt inclusive design was relevant to everyone, young and old, and should be a feature of mainstream products and fixtures/fittings for the home. Despite this, not all participants saw sufficient value in some of the products shown to want to buy them. Some of the reasons were:

- Lower ‘acceptance of needs’ and therefore reduced expectations of the value the products would offer them. Some people were happy to rely on dangerous hacks.
- Assumptions that the products were expensive due to the way they looked.
- Some products, fixtures or fittings being perceived as complex to install or use.
- Concern about load-bearing walls/structure for products with grab rail functionality.

These observations highlight the fact that some consumers require more information about inclusive products to assess their value and impact, such as how to use, install and maintain them. In separate research carried out by Ipsos MORI, a nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better, 2020) found that 59% of those 50 and over agree that, in the future, they would benefit from retailers giving them advice about products that might help them if their needs change as they grow older.

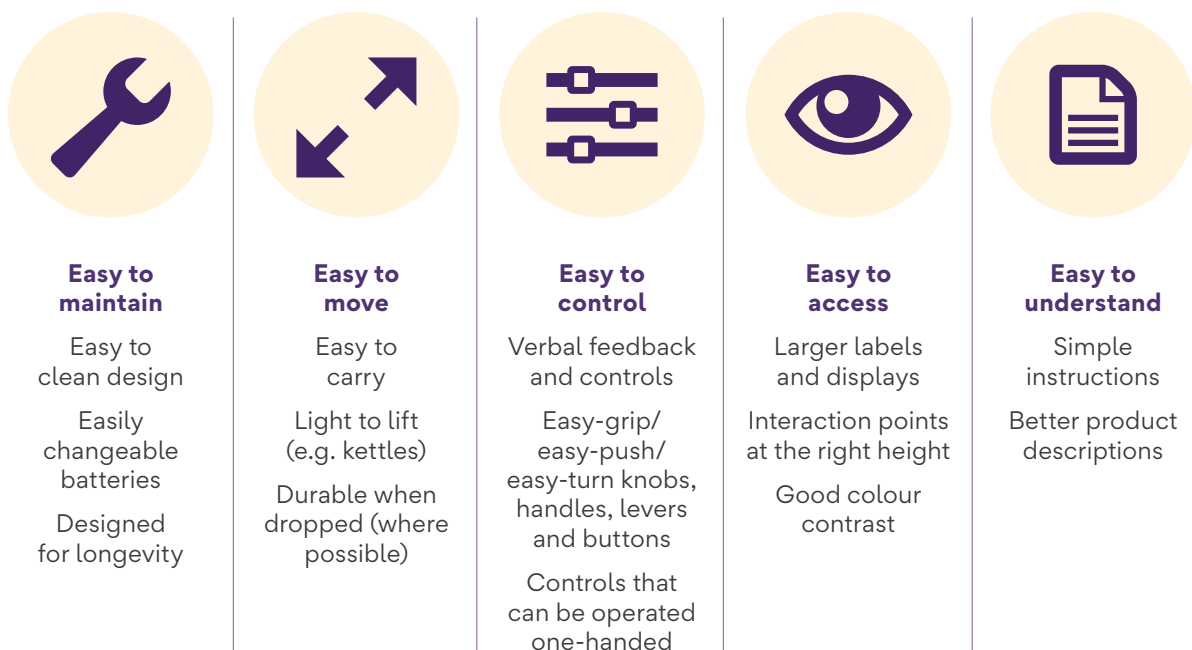
Two key opportunity areas emerge:

- Better marketing, messaging and labelling is needed to help consumers over 50 find products that are well designed for their diverse and changing needs.
- More products are needed that are better designed for use by everyone, recognising varying needs and abilities. The expectation of finding suitable products is still fairly low.

Desirable features

Our home visits and accompanied shopping visits have revealed that small changes to mainstream product features can play a role in improving people’s home lives. Individuals have spoken and unspoken current and future needs which they are often unaware of themselves, so it is up to product designers to do the work to meet consumers varying needs. Figure 12 shows some examples of features participants articulated they needed (and some we perceived) during our research.

Figure 12 Examples of inclusive features consumers wanted to see considered in the design of home products.



“They’ve obviously done their homework.” (woman in her late fifties with limited mobility/dexterity talking about a Hoover washing machine that could be solely operated one-handed, accompanied shopping visit)

“You can’t miss the cup or overfill it... It was really just plug and play. You just lift it off, fill it up... it’s just wonderful.” (blind man with dyslexia in his early sixties speaking about his Breville hot water dispenser, home visit).

3.2 A common language of inclusive design

Across our qualitative research, participants looking for products to address their changing needs primarily considered specialist adaptations, whose aesthetic appeal and associated stigma with frailty and decline often resulted in them delaying making the necessary changes to their home.

One of the strengths of mainstream inclusive products is that they are not marketed as specialised or ‘adapted’ products. They are simply good and easy-to-use for all, widening their potential market appeal. An example of this is demonstrated by the 1999 Ford Focus, which was designed in consideration of the needs of as many customers as possible (University of Cambridge Inclusive Design Toolkit: Other case studies, n.d.)

Ford Focus Case Study

When designing the Ford Focus, designers were encouraged to wear ‘Third Age Suits’ that stimulated the effects of ageing to better understand – and design for – the needs of older drivers (Keates and Clarkson, 2004).

This resulted in a number of innovative features being developed, including heater controls with prominent, varied sized knobs to help drivers easily grip and distinguish between controls without taking their eyes off the road, as well as a combination of door size and seat height that made the car easier to get into and out of (Figure 13) (Keates and Clarkson, 2004; University of Cambridge Inclusive Design Toolkit: Other case studies, n.d.).

The features developed made it easier for older drivers to operate and drive the Focus and did not negatively impact the experience of younger drivers, with many of the features introduced of benefit to all. The car was never marketed to a specific age group and is regularly one of the bestselling cars in the UK (Keates and Clarkson, 2004).

Figure 13 Ford Focus distribution controls.



Image source: University of Cambridge Inclusive Design Toolkit: Other case studies, n.d.: http://www.inclusivedesigntoolkit.com/case_studies/case_studies.html

Our research suggests that we do not yet have a common language for talking about inclusive design. The term is in many ways a technical term that makes little sense to anyone who is not a design specialist. Many older consumers we spoke to initially associated ‘inclusive design’ with adaptations and specialised, expensive products. The term is also used inconsistently across retailers and even by designers themselves. That being said, many participants in our small-scale survey did understand inclusive design to mean ‘designed/suitable for all’ including those with disabilities (Figure 14).

Figure 14 Perceptions of inclusive design.



When we explained to focus group participants the concept of mainstream inclusive products (products that are accessible to, and usable by, as many people as possible without the need for special adaptation), everyone agreed this was a good thing. However, the range of interpretations above suggests that clearer terminology is needed to ensure a common understanding. Some examples of contradictory views held by consumers include:

- ‘designed for all abilities’ versus ‘designed for disabilities’
- ‘regular looking equipment for all’ versus ‘adapted to my needs’
- ‘it’s a good deal’ versus ‘expensive and hard to find’

Popular suggestions by focus group participants for phrases describing mainstream inclusive products included:

- universal
- user friendly
- easy
- simplicity
- accessible
- make life easier
- adaptable

‘Ageless’ and aspirational marketing

Only two in five (40%) of the 50s and over in the nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better, 2020) agreed that, when thinking about home products (that is, fixtures, fittings, appliances, furniture and smaller objects in your home), retailers of home products understand the needs of people their age.

Marketing products specifically for older age groups can be a deterrent for those who do not yet perceive themselves as ‘older’ or want products specifically for the ‘older consumer’.

In the accompanied shopping visits, many participants wanted to see terms like ‘usable for families’, ‘for all’, ‘inclusive’, ‘universal’ or ‘flexible’. In our focus groups, participants mentioned how certain products (like an easy-to-use food chopper) would be good for people with temporary impairments (broken arm, recovering from an operation, etc.), or safe for use with young children in the home. Inclusive products were considered relevant to everyone, young and old, and it was felt that they should be positioned as mainstream but with marked additional design features or functionality.

“That chopper would be good for children too.” (woman in her late fifties, with limited mobility/dexterity, focus group)

The principal message is not about decline and necessity, but rather about making life better by making it easier for all.

Some marketing terms our qualitative research participants responded positively to included ‘age-friendly design’, ‘easy-to-use’ and ‘for everyone’. Most also wanted products to avoid using the word ‘disabled’ or have connotations to disability. For example, they preferred to emphasise a ‘wet room’ rather than saying they have an ‘accessible shower.’ However, further testing is needed to confirm trends in terminology/labelling. More specific terms saying in what way the product is easier to use, such as ‘light-to-hold’, ‘large, easy-to-turn controls’ or ‘easy-pour’ were also suggested as helpful for individuals to align to their specific needs.

“I’m just anti the term disabled... it’s like I’m not as important as someone who’s not.” (man in his late sixties with mobility impairment who uses a Pinterest page to save shower renovation ideas, accompanied shopping visit)

Emphasising how inclusive products are ‘better for all’ across generations (parents, grandparents, grandchildren) can help overcome associations with decline.

Kitemarks

A number of individuals who participated in our focus groups also liked the idea of a kitemark or logo indicating that a product had been tested and found to be suitable for consumers of varying ages and abilities. This could help to reassure them, it was pointed out, but would need to be from a trusted, independent source, such as British Standards or Which?

“ [Accreditation would be] Brilliant! At least I knew they had looked at some things and thought about it... more likely to be suitable for me and more confidence.” (blind woman in her fifties, focus group)

3.3 Pricing

Many inclusive products have extra or improved features – for example, washing machines with auditory functions, hairdryers with proprietary technology to reduce weight and improve efficiency or a structurally strengthened towel rail that doubles as a grab rail. This can result in increased purchase costs, as often inclusive products are also the result of many hours of research and development.

However, we are also seeing some low-cost design solutions that better account for people’s varied needs from mainstream retailers such as IKEA with their ThisAbles range of products.

IKEA Case Study

IKEA’s ThisAbles project was launched with non-profit organisations Milbat and Access Israel to support people with additional needs to enjoy the quality of life provided by IKEA products. It created a new line of products to bridge gaps between existing IKEA products and the additional needs of disabled people. Examples include the ‘EASYHANDLE’ that can be attached to IKEA cupboards to make them easy to open without the use of fingers (for example with the forearm) and the ‘FRIENDLY ZIPPER’ that can be attached to a traditional zipper to make it easier to grip. Some designs from this project can now independently printed using a 3D printer (ThisAbles, n.d.).

Such efforts actively strive to understand and incorporate diverse and changing customer needs in design requirements. The solutions themselves are often quite simple and not vastly different from what was originally designed. Consumers, particularly those with different needs related to ageing or disability can provide insights that stimulate this innovation. What is great design for some is good design for many.

The example of the Ford Focus earlier in this section illustrates that inclusive products need not be expensive. Indeed, both new or on the second-hand market, the Focus was always priced very competitively. Similarly, inclusive products such as the BT Freestyle 7xx series phone (Figure 15) are priced on par with other phones but pack in more inclusive features, designed to improve ease-of-use in a number of ways, for example through large comfortable keys, high contrast features and a larger call indicator light, making it easier to see the phone ringing.

Since its launch in 2008, sales of BT's Freestyle phone have increased by 20% and its inclusive design has helped to minimise product returns, improving profitability despite higher manufacturing costs for the phone itself (University of Cambridge Inclusive Design Toolkit: Other case studies, n.d.).

Figure 15 BT Freestyle phone with easy-to-dial keys, easy-read display and easy-to-hear dial tone.



Image source: University of Cambridge Inclusive Design Toolkit: Other case studies, n.d.: http://www.inclusivedesigntoolkit.com/case_studies/case_studies.html

When designed well, such products can result in lower service demands and stronger brand advocacy and loyalty. For example, both OXO and Dyson enjoy strong brand recognition and customer loyalty despite initial higher costs of entry.

3.4 Implications for product design

Based on our research, products that support people with varied and changing needs are currently seen either as a compromise between aesthetics and function or an expensive luxury. However, this need not be the case. There is a clear, valuable and growing opportunity for designers, manufacturers and retailers to invest in better meeting the needs of older consumers.

There are significant benefits available, particularly to early adopters who design well for the broader population, to potentially expand their consumer base, loyalty and associated revenues significantly. By developing a deeper understanding of the needs and barriers of over 50s consumers that impact purchasing – such as pride, optimism bias and uncertainty about the future – retailers can harness the growing market opportunity and support not only older consumers but those of all ages to identify better products that work for them, now and in the future.

Our research has also reinforced the need for retailers to embed inclusion in the end-to-end consumer journey, from purchase through to delivery, set-up/ installation and returns. Inclusivity should consider broader elements such as ease of transporting products and fixtures home, unboxing or setting items up ready for use, learning how to use or control them, cleaning or maintaining them, and returning them if needed.

Designers and manufacturers should be conducting regular user research with over 50s consumers. A consumer feedback loop would enable them to continually make changes to products, fixtures and fittings to improve customer experience and outcomes.

To stimulate this market, one idea would be to create an Inclusive Design in the Home awards programme to help raise consumer and retailer awareness. Well designed solutions could be shared more broadly to signal current ‘leading practice’ for others to follow.

4. Retail: in-store

4.1 Customer experience

Our qualitative research found that over 50s consumers tend to think there are insufficient products designed for people's changing needs available in-stores. This appears to be a combination of both product and marketing gaps.

Advice

Our research identified that older consumers often look to retailers to learn about mainstream inclusive products and how they can help them to improve their confidence about product suitability, satisfaction and ultimately purchase. In our qualitative research, participants tended to want retailers to explain the value ('general and inclusive usefulness') of products. This could be based on a current or potential future need to help justify any additional cost.

In our small-scale survey, we found (Figure 16 and 17) that:

- Half (49%) said that advice from a retailer about home products that could make it easier to carry out everyday activities now would make them more likely to buy such products. Only 17% felt it would not.
- Over two in five (43%) said that if retailers told them that certain home products could help them be more independent in later life, they would be more likely to buy such products. Only 15% felt it would not.

The same survey revealed that peer-to-peer advocacy is even stronger than retailer advice, with consumers being more likely to purchase such products if the advice came from someone/somewhere else, suggesting there is more work to be done by retailers to position themselves as trusted and knowledgeable sellers of inclusive products.

Figure 16 Whether or not respondents would purchase products if they were advised that they could make it easier to carry out everyday activities.

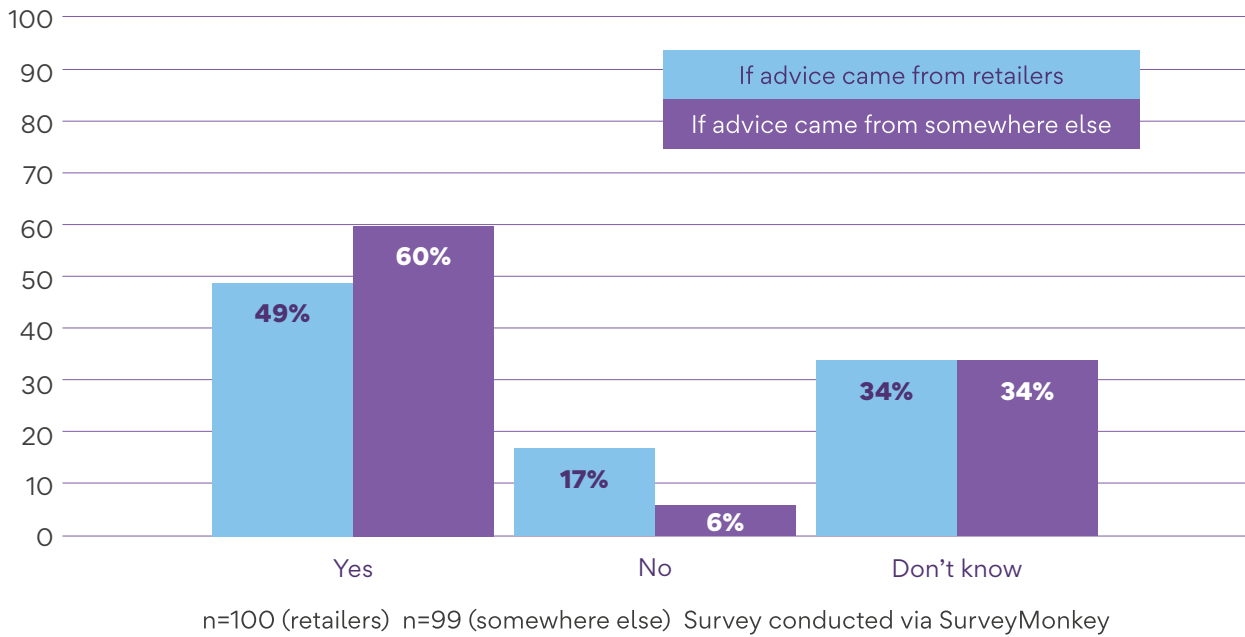
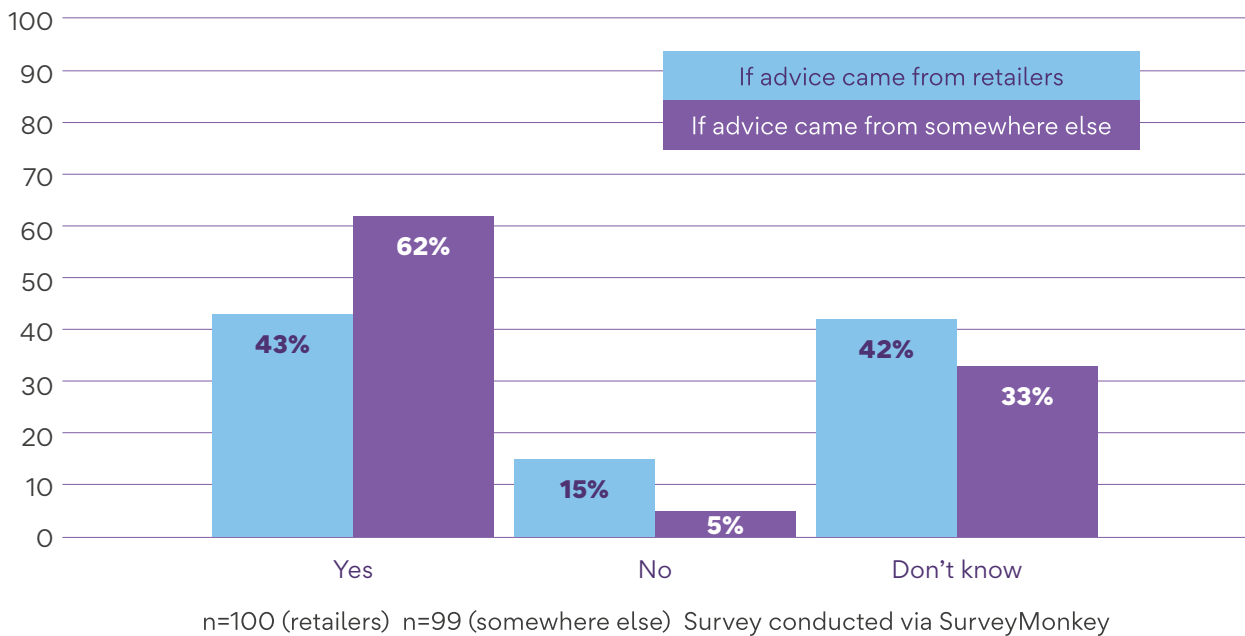


Figure 17 Whether or not respondents would purchase products if they were advised they could help them be more independent in later life.



The provision of more information from retailers about which products could best support their needs now and in the future is supported by the nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better, 2020) which showed that less than a third (30%) of those 50 and over agreed that high

street retailers provided enough information to consumers about products that could help with their changing needs as they grow older. Only one in five (22%) disagreed there aren't enough products designed for people's changing needs as they grow older, available on the high street.

The nationally representative poll (Ipsos MORI on behalf of Centre for Ageing Better, 2020) also asked respondents to what extent, if at all, they would trust each of nine different items to provide good advice on products that could help them with their changing needs as they get older. In descending order of trusting these a "great deal" or "a fair amount", these were healthcare professionals e.g. GP, nurse, pharmacist, etc. (90%), social care professionals e.g. social workers, social care workers (77%), charities e.g. Citizen advice, Age UK, etc. (75%), retailers specialising in these type of products (71%), consumer organisations e.g. Which? expert reviews, etc. (65%), tradespeople e.g. plumber, builder, etc. (55%), mainstream retailers that are typically available in the high street (49%), magazines e.g. The People's friend, Men/Women Health, Good Housekeeping, Hello! etc. (33%), and finally social media e.g. Facebook, Instagram, Twitter, etc. (19%).

Brands

Shoppers participating in our research frequently used brand names to help them predict value, and often recognised trusted product brands. In the focus groups we saw specific product categories being associated with specific brands (e.g. Dyson – vacuum; OXO – peelers; Bosch – washing machine) as a result of more inclusive design. These often elicited positive responses linked to future planning.

On the other hand, none of the consumers we engaged with directly said a retailer or brand inspired them to think ahead or changed their mind about a purchase.

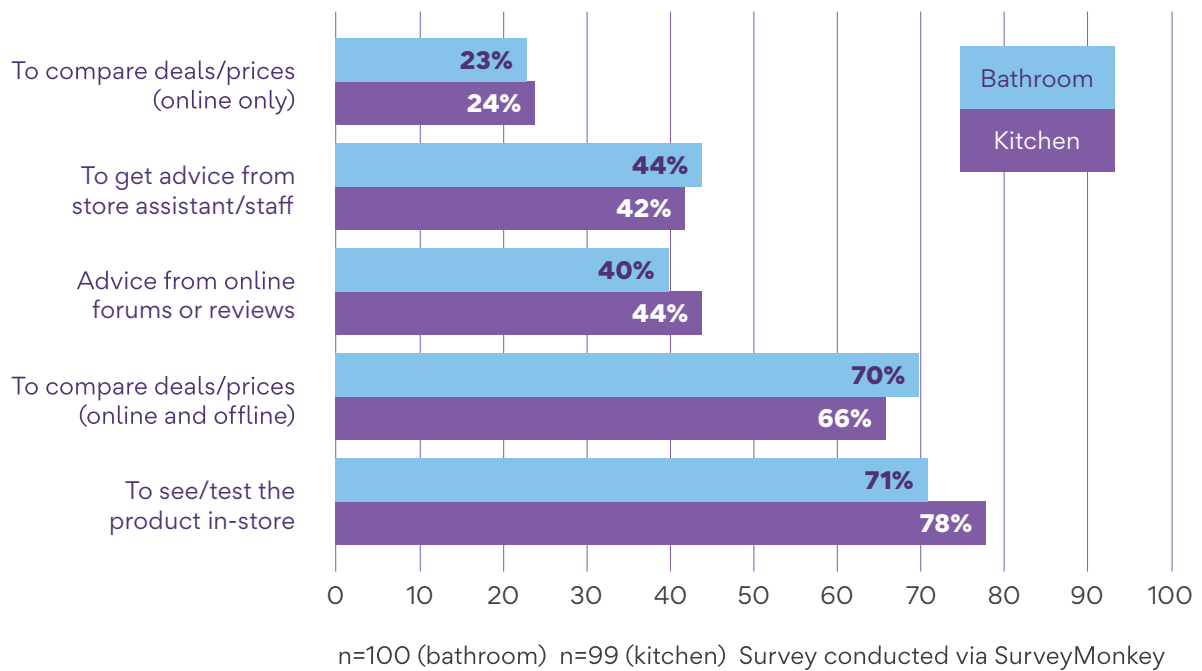
Physical inspection

Our accompanied shopping visits revealed the main reason many shoppers still wanted to go in-store was to interact with products, fixtures or fittings to assess their ease-of-use and whether they are fit for purpose.

Our research participants often wanted to physically test, see, touch and feel a full range of products (without packaging) to help make an informed choice (Figure 18). This was especially the case for bigger, more expensive purchases.

According to the results of our small-scale survey, seeing and testing products in-store was one of the most important factors for consumers aged 50 and over when planning to buy kitchen and bathroom products, fixtures and fittings. Being able to physically interact with products is especially necessary when considering ease-of-use. Subtle differences between products can bring about significant usability improvements (for example, narrow kettle spouts for easy pouring); however, these differences are hard to identify in pictures alone.

Figure 18 Most important factors considered by over 50s shoppers when buying products, devices or tools for the kitchen or bathroom.



During the accompanied shopping visits (which took place both in-store and online in participants homes), we observed participants filtering products by visually scanning them to judge factors like perceived ease-of-use. Some examples of contextual information that our participants sought included:

- how easy the product is to use
- how functional it is (e.g. does the shower caddy hold conditioner and shampoo?)
- how to install the product (to understand if they need help).
Some did not believe company claims of 'easy DIY installation'
- weight (individual feel or in useful terms, e.g. compared with...)
- for products with a digital screen, whether the screen was large and clear enough to display information perceptibly for the user
- type of power source and battery needs, ongoing replacement requirements and running costs

Placing products at eye level and in areas where customers can interact with them or providing adjustable displays that bring products within better view and reach, could positively impact the purchasing experience for older customers.

“It’s very helpful to be able to see that it probably wouldn’t be the right tool for me.” (woman in her late seventies, accompanied shopping visit)

Packaging and labelling

In-store experiences can prevent important home purchase decisions for consumers over 50, as revealed through our accompanied shopping visits, and a number of discussions had during home visits.

On the whole, shopping at mainstream retailers was a positive experience; however, many research participants could not easily identify mainstream products that met their needs. For example, poor vision and dexterity may result in the need for displays and controls that are easy to see and manipulate, but some consumers may not be fully comfortable expressing or identifying this need when purchasing products.

During our accompanied shopping visits, participants found that products were often inaccessible either because of thick packaging (often needing to be opened with scissors) or due to being out of reach high up on store shelves or in the back of the warehouse (Figures 19 and 20). This interfered with the ability of participants to touch the products and understand their inclusive features including ergonomic advantages, interfaces, weight, portability/ foldability and so on.

Our research noted that few well-designed inclusive products formed part of in-store displays in a way that encouraged consumers to appreciate their functional benefits. A lack of clearly marked product information as part of in-store displays or on the product packaging further prevented our research participants from identifying suitable products. During our accompanied shopping visits, we observed that, apart from the OXO range, product information on packaging was often difficult to read for participants due to small font sizes or an inaccessible combination of type and background colour. While prices and names were read by all participants, other important information relating to product size and features were often unreadable due to small text or poor colour contrast.

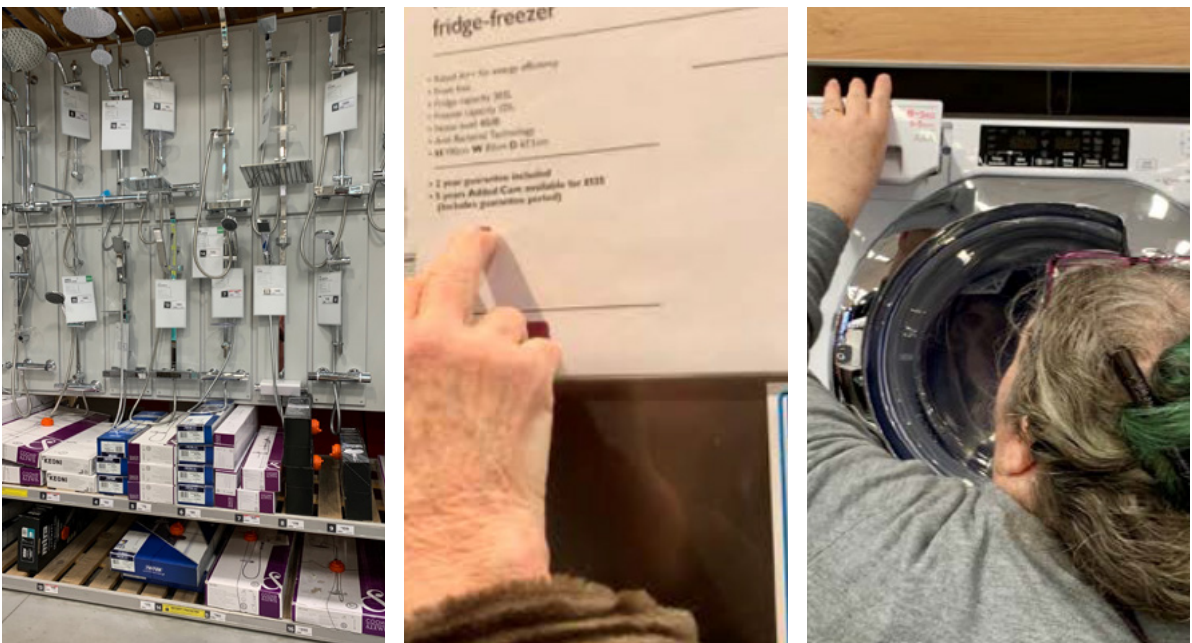
In some stores, prices were difficult to match up to items because labels were on store shelves rather than on the products themselves. It was not always clear which prices related to which products, especially to customers with some degree of sight loss. Sometimes staff had to help.

Retail: in store

Figure 19 Packaging could make it difficult for participants over 50 to identify products that met their needs.



Figure 20 Product placement and inaccessible labels could also make it challenging for participants over 50 to understand the benefits and features of products.



“I really need to look... feel... try before I buy.” (vision impaired man in his sixties, accompanied shopping visit)

“I want to know how you use it... what bits lift off, seeing and touching the dials in action.” (woman in her late fifties with limited mobility/dexterity who felt products were too high to interact with, accompanied shopping visit)

“Some products I would have to see if they work for me. Take a washing machine... I need a button to open the door, not a lever. The experience is important.” (woman in her early fifties with chronic pain and vision impairment, focus group)

Wayfinding and locating products

Product location and grouping are also important. In some stores, accessories (such as grab rails, bathmats) were stored on shelves well away from the other bathroom products. Our research participants told us that this could hamper them finding suitable products with ease or making confident purchase decisions.

Store signs (both their content and where they are placed) and layouts of stores can also confuse consumers, making it hard for them to locate products, fixtures or fittings, or compare them with each other.

Shoppers often expected kitchen and bathroom products to be grouped together by location (e.g. all kitchen units, accessories and kitchen products in one place and not split across floors; the same for bathrooms). For some, putting products in different locations made product comparison in different departments/on different floors challenging – for example, comparing gas stove lighters with candle lighters, or stools with other seating options. This could discourage purchasing.

IKEA was mentioned as an example of a retailer that makes wayfinding easy. However, we are aware that by forcing a one-way flow, IKEA could challenge other consumers in different ways.

“It’s a little confusing. In IKEA, there is a way of directing you through the store. Not here... I feel lost and think I’m going to have to ask.” (woman in her eighties, accompanied shopping visit)

“I like that things are on display as little rooms – it really helps to imagine what could be.” (woman in her late seventies who often visits IKEA with her friends as a ‘day out’, accompanied shopping visit)

Figure 21 Some research participants found store layouts confusing due to unclear signage and products not being grouped together, making finding products more difficult.



Seating and rest areas

In addition to the challenges of finding products and making their way around the store, older consumers often also need to manage energy levels, particularly if they have disabilities or long-term health conditions. During our accompanied shopping visits, participants often leant on displays and wanted to sit down and rest while navigating the store. There were rarely seats or rest areas available.

Being unable to rest easily puts many older consumers off in-store shopping. Our participants leant against displays when seating was not available, while others sat on display products including toilets, seats and beds. This can be a safety hazard if customers rest on items that are not as robust as they appear at first glance. On one occasion, a 59-year-old shopper nearly fell over when a display cabinet she leant on moved. Some participants also complained about a lack of toilets in-stores, while others found limited space in aisles made moving around even more challenging, particularly if they had low vision or mobility difficulties.

“They just want you in and out and don’t really care. No toilets either!”

(man in his late sixties with mobility impairment who mostly shops online and carefully chooses his outings due to his needs, accompanied shopping visit)

“When you’re walking around a lot, you get tired.”

(woman in her early seventies, accompanied shopping visit)

“One doesn’t see chairs very often...”

(woman in her late seventies, accompanied shopping visit)

Figure 22 From left: 82-year-old using a display chair. 79-year-old sitting on display toilet. 79-year-old leaning against sink countertop. 59-year-old leaning against product display cabinet.



Help from staff

Our accompanied shopping visits and focus groups demonstrated that over 50s consumers often look to sales staff to help them identify what products are right for them to improve purchase confidence and avoid purchases they may regret later. Many consumers over 50 have unspoken needs that influence whether or not they can use a product and would benefit from support to articulate these needs more confidently and easily. Adult children also often purchase on behalf of their parents, whose needs may be hidden or unknown/unacknowledged to them. For retailers, assuming these inclusive features may be of interest to a broader base of consumers may increase effective product selection and purchase value for many.

In most cases, standards of customer service amongst shop floor staff was high. Retail staff often tried to fill information gaps that emerged from limited product descriptions. However, they generally lacked sufficient awareness about the range of potential needs of older customers, how to help customers express those needs, or the knowledge of which products would best address their needs, now and in the future.

During our accompanied shopping visits, staff were generally enthusiastic and wishing to be helpful, but lacked awareness of the breadth of over 50s' consumer needs, despite many staff being over 50 themselves. We believe there is a strong opportunity to train staff about inclusive needs as well as product features relevant to the older market. The key is to engage with older customers more fully to explore relevant current needs, considerations for the future, and the wider context – such as others who also use the space.

“There’s a skill in asking what a person is really looking for – most were very helpful but not prepared to explore.” (woman in her eighties, accompanied shopping visit)

“Staff are willing and give you time but there is a deeper dimension of dialogue, curiosity. This is not commonplace. The training doesn’t exist.” (woman in her late seventies, focus group)

In the accompanied shopping visits, many older shoppers found staff lacked knowledge or the right level of empathy to help them. We witnessed staff:

- Insufficiently exploring shoppers' needs and home context before suggesting products.
- Not understanding the impact of poor eyesight, hearing or dexterity on the ability to use products.
- Unaware of how to present information to shoppers with different needs (e.g. showing information on a digital screen with small text and low contrast to a vision impaired customer).
- Providing unreasonable hacks as workarounds (e.g. we witnessed one shop assistant suggesting an elderly customer use a dishwasher funnel and stand on a chair to fill a water dispenser with a plastic bottle. Another shop assistant at a well-known high street retailer suggested a customer use a cable tie to secure an unstable folding chair so that it did not fold/collapse in use).
- Suggesting shoppers purchase online or visit other stores if products were not displayed.

In some stores, staff could be hard to find. Many shoppers had questions about features and product suitability but could not find staff to ask. Incidentally, many of those who were successful at finding staff found those who were themselves over 50 without expressly seeking them out.

While our accompanied shopping visits highlighted that older staff also need training to better understand the diverse needs of older or disabled customers and how their needs could potentially impact the types of products that work well for them, there is also an opportunity for retailers to learn from the lived experience of staff with diverse needs to improve how and what advice is given to customers to support purchase decisions.

This reinforces the value of a diverse workforce. Some retailers such as B&Q actively employ older workers and have found that this could positively impact the shopping experience.

B&Q Case Study

In the late 1980s after realising that sales staff did not reflect the diversity of its customers, B&Q trialled staffing one of its stores with staff solely over 50 (note, this would be illegal now) and found that this produced 18% higher profits with six times lower staff turnover (CIPD and Healthy Working Lives, 2012). The company now offer a number of benefits that help it manage, develop and retain older workers, such as operating without a retirement age, providing flexible retirement options and offering flexible working to everyone, irrespective of age, length of service or caring responsibilities (CIPD and Healthy Working Lives, 2012).

4.2 Implications for in-store retailers

This research suggests the following implications for in-store retailers:

- **Support customers to access products in-store.** Placing products at eye level and in areas where customers can interact with them or providing adjustable displays that can bring products within reach could positively impact the purchasing experience for many older customers. Consider sample displays and mini-showrooms where products can be experienced up close and in context. Where space prohibits products being shown in this way, improve labelling to highlight easy-to-use features clearly.
- **Create logical groupings of products to reflect how customers shop.** For example, participants from our research suggested grouping kitchen and bathroom products together by location (e.g. all kitchen units, accessories and kitchen products in one place and not split across floors) could potentially support with product comparison. Retailers should work with their customers to develop intuitive store layouts.

- **Provide areas for relief and positive sensory experiences.** Older customers often take their time when browsing in-store and want to rest or lean against objects to help manage energy. Consider how cafes and toilets, as well as lighting and music further improve the in-store customer experience for older users. For example, providing a relatively calm sound environment (keeping music to a minimum and having clear store announcements) is particularly important for autistic or hearing impaired customers.
- **Connect products to a network of support where possible.** Aligned service providers such as trusted builders, call-centre support staff or repair people can assist consumers who need them. All these elements impact overall consumer value by removing points of current customer difficulty and frustration.
- **Improve staff training to support customers of all ages and abilities.** There is a strong opportunity to train staff about inclusive needs as well as product features relevant to the older market. This includes staff over 50. There is also a real opportunity for retail staff to help prompt discussions around future needs by asking questions such as how long the customer expects to be using a product or living with a specific change.

Figure 23 Examples of areas retailers could look to improve to make the retail experience more inclusive of people of all ages and abilities.

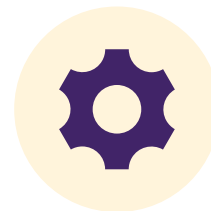


Simplify the store layout

Work with customers to design shop floor layouts/product groupings based on how people shop

Create wider aisles that enable individuals to walk around easily, regardless of whether or not they have a pram, wheelchair or mobility aid

Aid in-store navigation by having large, clear ceiling signs or maps



Improve infrastructure

Reduce effort by having lighter/automated doors

Ensure display tables are anchored down to ensure people aren't at risk of falling if they lean on them

Provide easy access to toilets and cafés



Provide areas for relief and positive sensory experiences

Provide chairs or usable displays to give people moments to rest

Provide sufficient lighting without too much glare. This is particularly important for vision impaired and autistic shoppers

Provide a relatively calm environment, keeping music to a minimum, with clear store announcements. This is particularly important for autistic and hearing impaired shoppers



Improve access to products

Provide tester products (with no packaging) to allow people to see/touch/feel products to assess ease-of-use in-store

Where possible, display products in a way that customers can easily interact with them e.g. at waist/eye level

Consider the diverse needs of shoppers when designing packaging and establishing returns processes



Improve customer service training

Improve training so staff are more aware of diverse needs and can offer more product information, advice and empathy when engaging with customers

Existing personal shopping/interior design services provided by retailers could also be improved to support customers to find products, fixtures and fittings that best meet their needs



Focus on benefits to all

Use marketing approaches that focus on ease-of-use as an aspirational lifestyle choice to encourage people to consider their needs, now and in the future and plan ahead

Use intergenerational/age-neutral marketing to reinforce the benefits of inclusive products to people of all ages and abilities

Make inclusive functionality clearer in product labelling, marketing and display

5. Retail: Online

5.1 Customer experience

The growing importance of online

Shopping has become increasingly multichannel. Among our research participants, relatively few adults purchased products solely online or in-store, especially for larger or more important purchases. There are many varying and personal mixes of digital and physical engagement across each part of the customer journey – from recognition of current and future needs through to acceptance, knowledge-gathering, capacity planning, purchase and post-purchase support. This shift to multichannel shopping experiences will likely be reinforced by the COVID-19 pandemic. More consumers of all ages, including those over 50, are going online, both to browse and purchase across more consumer categories than they did prior to lockdown (McKinsey & Company, 2020 and Open Inclusion, 2020).

Whether or not online journeys take on even more importance post-COVID-19 remains to be seen. We anticipate many customers will continue to want to touch/feel products prior to buying them; however, our focus groups showed that customers over 50 were interested in simple-to-use online search tools and even augmented reality apps that promised to help them envision how products might fit in their home and operate in real life. This, combined with robust post-purchase support, might effectively replace in-store journeys for some.

Our small-scale survey and qualitative research showed widespread use of online browsing/shopping by older consumers, especially when coupled with in-store visits before or after the online journey. This is likely due to the increased convenience and flexibility of online shopping, especially considering many older shoppers have accessibility needs that restrict physical journeys.

During the accompanied shopping visits, we observed that online search terms and browsing habits (which often preceded a trip to the physical store) showed consumers over 50 frequently browse with a store already in mind (e.g. B&Q, John Lewis). This finding was reinforced in the focus groups.

The few people who told us they would buy products exclusively online said they would ask their friends or family on social media for recommendations or turn to a comparison/advice site like Which? to help get a steer on what to buy.

“I wouldn’t trust myself online that I’d have it right.” (woman in her eighties, focus group)

“It would daunt me, buying online. I like that I can go into store... they have more accountability rather than faceless online.” (woman in her late seventies, focus group)

“I’d go to Which?... They sometimes give an overview if something is hard to use or not.” (woman in her early sixties with limited mobility/dexterity, focus group)

Case study four: Omar

‘Omar’ (late sixties) lives alone in a two-storey house. He has a modest retirement income and employs a professional carer to help him with daily tasks including cooking and cleaning. Omar has bad arthritis, which makes standing and walking difficult, though his condition fluctuates depending on the day. Climbing stairs, stooping/kneeling, dressing and bathing can all be painful and fatiguing for Omar without his carer’s help.

Despite (or perhaps because of) his access limitations, Omar was our only research participant who felt completely confident shopping entirely online. His enthusiasm was infectious – however, he also seemed to be far less picky. For example, he did not mind if a couch was a little uncomfortable.

Omar is highly driven by the way products look online and keeps carefully curated Pinterest boards on his iPad of home products that interest him. Price is a secondary factor. He uses his Pinterest boards to help him understand what he likes/dislikes and what options to discuss with his Local Authority, with whom he negotiates heavily.

Omar told us he values both aesthetics and functionality; however, buying a sofa purely on looks (not caring if it’s comfortable) implies he values looks over function. He has bought sofas and even fridge freezers entirely online. He has a very strong opinion on utilitarian products versus ones that are beautifully designed, but the cost gap for him is significant and he is always negotiating a better price.

Case study five: Ruby

‘Ruby’ (late fifties) rents a house with her husband in a rural area. She’s thinking of making kitchen changes in the near future, having just installed a new bathroom to help her husband access the bath. She has no stated accessibility needs; however, her husband has mobility and mental health needs. The couple have very good access to an accommodating occupational therapist.

Ruby does not consider herself to have an impairment as such, but she struggles to reach the top shelves in cupboards, resorting to dangerous hacks. For example, she often uses a bread knife to pull down an ice cream container of spices. Practically, Ruby’s needs are significantly less than her husband’s and so renovations or adapted products will almost always be focussed primarily on improving her husband’s quality of life rather than her own.

Ruby enjoys browsing retailer websites online, but her search skills are not very good. While there are many innovative products that she would benefit from, she is unable to find them on her own. It can take her hours of searching, often getting distracted and going down ‘rabbit holes,’ to find what she wants.

She typically drives to the store with her husband, who waits in the car as she goes inside to learn more about and experience products. This is a time-consuming process for Ruby and is often coupled with a period of convincing her husband to go along with the changes she is planning. He is very reluctant to acknowledge his access needs and does not want to think about it until he has no choice.

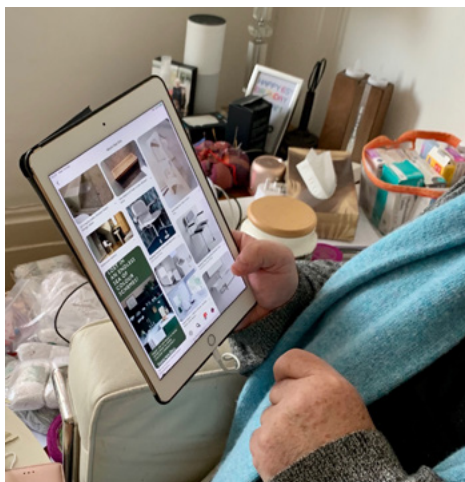
Product search

The online searching process was challenging for many qualitative research participants who struggled to find relevant products using a search engine or filtering fields on retailer websites.

We observed during our home visits and accompanied shopping visits that the initial search for many shoppers was chaotic. Terms such as ‘Wi-Fi controlled thermostat’ and ‘moveable showerhead’ were chosen at random depending on how well people could articulate what they were looking for, leading to many attempts to refine search terms. Many customers also found that product groupings on retailer websites often relied on technical terms that caused further confusion (e.g. ‘smart shower,’ ‘high rise kit,’ ‘exposed mixers’). This meant online searches were based on trial and error and could be very time consuming.

Those who were more confident online often used Google images as a way of initially filtering products rather than a search tool within a site. They used image search like a proxy catalogue and ‘matched up’ images to preconceived ideas (Figure 24). Only then were the ‘merits’ and perceivable features of different products weighed up visually.

Figure 24 64-year-old male showing how he uses a Pinterest board to gather ideas for his wet room renovation.



On the whole, the consumers we observed shopping online used various sites in combination to view products and better understand their features. For example, when searching for a NEST thermostat, one consumer (who did not know the name of the product he was searching for) searched Amazon, eBay, Screw-fix, the NEST website and finally YouTube. Because each site had slightly different information and wording, this multi-pronged approach often caused confusion about whether specific needs would be met by the product, which usually resulted in a trip to the local store.

“In the last month, I’ve attempted to find a washing machine with accessibility features [easy to open doors, easy loading and loud enough tones indicating the end of a cycle]. Actively looked for it and couldn’t find it.” (woman in her early fifties with chronic pain and vision impairment, focus group)

Online descriptions and images

Product descriptions are particularly important when purchasing online only, and many consumers we worked with felt that descriptions were insufficient or difficult to understand.

Our focus groups and accompanied shopping visits revealed that people often make assumptions about a product by the way it looks. They view images online (and zoom in where possible/appropriate – Figure 25) to help them make an initial judgement about ease-of-use. Online images were often seen as being too small and not detailed enough for older customers. For example, one consumer searching for a refrigerator wanted to see pictures of the fridge with items on the shelves to get a sense of the shelf height and depth. She also wondered if she would be able to open the fridge door, make out the controls and fill up the water holder.

Figure 25 Participants often wanted to zoom in on images to understand a product's ease-of-use.



Accessibility blockers and other factors

In addition to the above challenges, participants (particularly those with vision impairments) also found some retailer websites hard to use due to poor digital accessibility. We witnessed cookie overlays blocking blind screen reader users from accessing retailer websites as well as images on websites lacking alternative text, making them impossible for screen readers to read out meaningful descriptions to blind and low-vision shoppers. In one instance, a low-vision shopper using Siri on his iPad found that searching for a thermostat became a one-hour task of ‘looking for a needle in a haystack’ due to the number of accessibility barriers.

Many online shoppers did not find product returns easy to understand or execute due to access issues. This influenced their shopping decisions and product choices. Typical challenges we heard about included the difficulty of re-packaging products and getting to a post office. This created a significant barrier for some older shoppers, especially those with mobility and dexterity impairments.

“I’d like a courier to collect.” (male in his sixties, accompanied shopping visit)

“I have to be doubly sure on what I’m buying.” (male in his early sixties speaking about buying online, accompanied shopping visit)

Filtering options

Many shoppers also found it challenging to use filtering options provided on retailer websites to help them identify products that best suited their needs.

A number of participants tried to filter by terms such as ‘easy-to-use,’ ‘voice-controlled,’ ‘ovens with knobs,’ ‘large display’ and ‘easy latch’ with mixed results. Websites were often not coded for accessibility, which made filtering hard for those using assistive technologies or requiring other access considerations to have been met.

During our focus groups, we explored ways consumers over 50 could filter products to help find those that met their needs best. Suggestions by participants included:

- filtering by a kitemark
- filtering by high level statement such as ‘easy-to-use’ or ‘for everyone’
- filtering according to design features specifically helpful to those with impairments, such as: voice controls, large labels and displays, easy-grip, wider handles and low access (e.g. cupboards)

Generally, a desire for improved filtering/search options centred on ease of use and other practical considerations. For example, things consumers wanted to know before buying a fridge included:

- Is it easy to clean?
- Does it beep to indicate if the door has been left open or if temperature needs setting?
- Are doors light enough so they are easy to open?

Things consumers wanted to know before buying a kettle:

- Does it hold enough cups for the whole family?
- Can I lift it when it’s full?
- How fast does it boil?
- Does it have a narrow spout to help direct the water during pouring?

Our focus groups also identified ways in which kitchen and bathroom design services could be improved. Ideas included home consultations (for those that do not already offer this), and tips and advice on how to future-proof your home and maximise small spaces.

Augmented reality

Our research revealed an interesting opportunity for augmented reality (AR) to help bridge the physical/digital retailing gap. AR could help consumers envision and judge how products, fixtures or fittings might look and fit into the existing spaces in their home. Further extensions of this concept (such as full virtual reality experiences) could help enable consumers to interact with objects and spaces virtually, e.g. seeing themselves ‘within’ entirely new bathrooms and kitchens.

3D rendering may also make other elements (such as interior compartments/spaces, spout shapes and sizes of controls relative to other controls) easier to understand. Crucially, in a post-COVID-19 world, such technologies may be even more important to help bridge gaps between the online and offline experience.

Focus group participants of all ages (even those over 75) were very positive about AR as a way to help them buy products or make changes to their homes online. Many stressed such technology needed to be simple to use because it looked intimidating. Some were concerned about their privacy. But on the whole, when we demonstrated an AR tool on a retailer’s website to help users envision a new product within their own home, focus group participants welcomed the idea and said it would be a useful feature when trying to find/choose home products online. How effective this would be in reality would ultimately need to be tested.

“It would [be useful] once I got used to it... Placing a fridge freezer in my kitchen.”
(woman in her eighties, focus group)

“Yes, it would be useful. I have a narrow corridor – I measured the space, but I hadn’t measured the gap opposite, which was a problem getting it into position.” (woman in her early fifties with chronic pain and vision impairment, focus group)

Case study six: Olivia

‘Olivia’ (late seventies) has arthritis in her hands and knees, making stooping and kneeling difficult. She uses a walking stick and wears a hearing aid every day. She is a member of a housing co-operative. Over the past 20 years she has been living on her own in a ground floor flat in the centre of London.

Olivia has not made any changes to her home yet, but is considering purchasing various products for her bathroom including a collapsible electrically-controlled bath seat (arranged through social services), a mixer tap and flexible shower hose, and various electric devices for personal care such as foot files, razors and toothbrushes. Such devices would need to be easy-to-use given her arthritis.

She says she would cover the cost of unexpected expenses using her savings; however, the price of inclusive products are a detractor for her. As a result, she does not invest in them despite acknowledging a need. For example, over the years she has come to know and trust the OXO brand for their easy-to-use products; however, she finds them too expensive. Despite acknowledging that cutting food has become a problem for her, she says she simply ‘cooks less’ nowadays rather than investing in one of their knives.

Ultimately, Olivia says her bathroom is suitable for conversion to a disabled-accessible wet room but at present ‘I am loath to allow the disruption this would entail, so I’m interested in other easier options.’

Shopping depends largely on availability, but online browsing on her computer has become more important to her given her mobility needs. This does not sit well with her. She says she ‘hates’ going online and misses interacting with people. She particularly likes the bustle and friendly chit chat found in many small businesses. She’d like to support local shops more, which tend not to have many online offers.

Olivia is not tech savvy and takes a long time browsing the internet. She says she does not want to buy a new fridge/freezer online because, on account of her arthritis, she would need to know if she had the strength to open the door. She would also like to reach in and test how easy or difficult it might be to put something (like a jug of water) inside. Finally, she’d need to be able to see the display controls in a real-world environment (e.g. under LED lighting). At the very least, she would like to see online images of the fridge with items on the shelves to give her a sense of shelf height and depth.

Despite these limitations and her general dislike of technology, she was intrigued by augmented reality when it was demonstrated in the focus group. She liked that AR could help her experience a new product (like a fridge/freezer) in the context of her own home. She would need AR to be easy-to-use, but finds it ‘interesting,’ particularly if it could be combined with expert advice to help her make decisions. ‘Give me knowledge,’ she said.

5.2 Implications for online retailers

This research suggests the following implications for online retailers:

- **Facilitate online search for inclusive products by improving search filters on retailer websites and apps:** High-level filters that over 50s in our research speculated they may use online included ‘easy-to-use’ and ‘for everyone’. More specific terms such as ‘easy-to-maintain,’ ‘easy controls,’ ‘voice-controlled’ could also be useful narrower filters.
- **Expand online descriptions to include ease-of-use and other important factors:** Providing information regarding ease-of-use, transport or fitting requirements and maintenance could support customers to identify products that best suit their needs. Testimonials from customers of all ages and abilities were also suggested by research participants.
- **Test or enhance online tools customers can use to improve purchase confidence:** Providing the ability to zoom in closely to see key relevant features such as controls and placing standard items in or around the product to give a better sense of scale (e.g. items on fridge shelves) are some quick wins retailers could apply. Our research revealed an interesting opportunity for emerging technologies such as augmented reality to help bridge the physical/digital retailing gap.
- **Ensure retailer websites are accessible:** At a minimum have online channels audited to WCAG (web content accessibility guidelines) standards. Cognitive, sensory and physical diversity should be taken into consideration in visual designs, user interactions and content, with inclusive usability testing run with older and disabled users. Websites must work well with assistive technologies and operating systems or in-app/browser adaptations that disabled consumers may need or prefer. Work towards ensuring all media provides alternatives such as captions for sound or text alternatives for images.

Ideas and approaches listed above should be designed and tested with consumers of all ages and abilities to ensure they effectively appeal to customer needs. Even hearing from a small number of consumers can yield rich and valuable insights. Testing with customers should be done early and often.

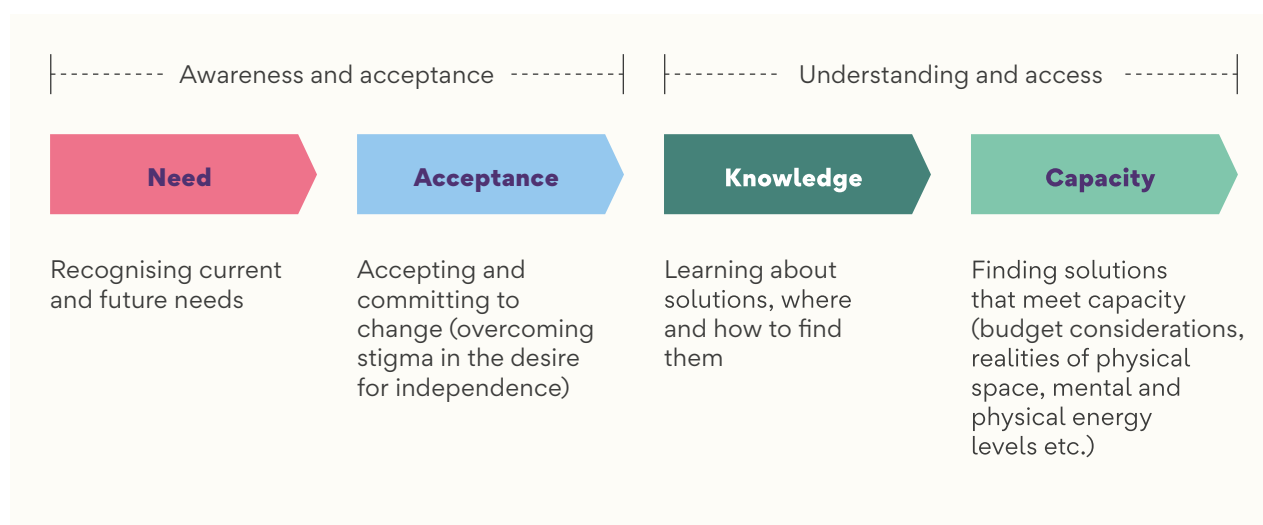
6. Model for change

Through our research, we have identified four key stages in the customer journey (Figure 26) that helped to drive changes in the kitchen and bathroom among our research participants:

- acknowledging a personal need
- acceptance that there could be a better way to meet that need
- gathering knowledge about potential solutions
- finding the capacity to buy and install

These four stages are divided into two sub-categories: awareness and acceptance and understanding and access.

Figure 26 Four-stage model for change.



Action by consumers first depends on them recognising current and future needs. Often, they recognise needs only when they are forced to by something going wrong.

Although each stage is dependent on consumers having gone through the previous steps, this is not necessarily a single-direction process. For example, sometimes people recognise a need and accept that they would like to make a change. However, when they go and look for products that may solve the need, they may be put off by high cost, lack of aesthetic appeal or their ability to find

something suitable and easy-to-use to meet their need well. They may then go through the acceptance stage again and would need to feel that there are different or better solutions available to trigger looking again.

Our research suggests that product designers, manufacturers and retailers have a part to play to support consumers along this journey.

Examples of how consumers could be supported through stages one and two, awareness and acceptance:

- Using more aspirational marketing and offering more affordable products: The cost to personal pride could be lowered through a better range of appealing and affordable options that address changing needs and more aspirational marketing around these.
- Leveraging key transitional moments that inspire thinking about future needs. Retailers can tap into these ‘triggers’ by offering quality, mainstream, aesthetically pleasing, inclusive products that challenge and dispel the ‘ugly’ or ‘expensive’ perspectives that prevail.
- Establishing a common, ageless language around inclusive design such as ‘age-friendly design’, ‘easy-to-use’ and ‘for everyone.’ Highlighting inclusive features of products universally, such as ‘easy-to-clean’, ‘light’, ‘easy-grip’ can also support people to identify which products best suit their needs.

Examples of how consumers could be supported through stages three and four, gathering knowledge and committing to action:

- Ensuring at least some of the inclusive features of mainstream products are evident and understandable ‘at a glance’ – either visually or in the product name and description.
- Exploring the potential role of kitemarks or logos to strengthen trust.
- Building inclusivity into the manufacturing and procurement process early to drive down costs and widen the potential market for inclusive home products.

Applying some of these recommendations could help to better meet the needs of not only older consumers, but consumers of all ages.

Conclusion

Inclusive products, fixtures and fittings in the kitchen and bathroom can improve people's lives, supporting them to maintain independence and enjoyment in the home, and protecting them from unnecessary harm. Good inclusive design is easy-to-use for a diverse range of users, aesthetically pleasing and affordable.

Although the majority of findings presented in this report are based on a relatively small sample size and should therefore not be viewed as representative or definitive, the detailed insights gathered from our work with consumers suggests important trends and areas of consideration in what we believe will be an area of increasing societal and commercial importance.

Our research indicates that a range of influencers can support consumers to better recognise and accept their current or future needs and start the search for better solutions:

- **Retailers:** Consumer retailers can provide better information to customers about 'easy-to-use' and inclusive products, fixtures and fittings. This should not be provided only to consumers who have distinguishable needs. Many consumers find it hard to describe their needs or have not considered how their needs may change in the future. This additional information should be built into all channels, including in-store and online product descriptions and retail staff knowledge.
- **Manufacturers:** Product designers and manufactures can make information about their inclusively designed products, fixtures and fittings clearer and easier to understand by consumers and retailers through labelling, advertising and marketing.
- **Industry professionals:** Professionals such as interior designers, home improvement agencies, architects and other tradespeople should develop their skills and knowledge around varied consumer needs to be able to better advise on what products, fixtures or fittings may be suitable for people making changes to their home. They can also help build services that reduce the negative impact and disruption of change in the home. These professionals could be supported by information and training provided by the various relevant industry associations.
- **Consumer information providers:** Independent product reviewers and online or in-print kitchen and bathroom design publishers can feature additional information on 'easy-to-use' and inclusive features and their benefits to consumers of all ages.

Conclusion

- **Advocacy groups:** Charities or specific advocacy organisations can keep informed of the changing range of products and services that are suitable for their constituents' needs. They could build awareness and call out leading practice, possibly through awards or other recognition that helps build interest in inclusive design and its benefits.
- **Government:** Government, particularly at the local level, can help support people with financial and/or practical support and build awareness of solutions available in mainstream markets to support people. They can also build research evidence and support consumer awareness campaigns on the inter-generational benefits of inclusive housing.

From the supply side, designing, manufacturing and retailing a broader range of inclusive products is important to address the current perceived trade-off between either very expensive products or those that are functional but undesirable.

The market for inclusive products is large, valuable and growing. To address it with better design solutions requires manufacturers to work more closely with consumers of all ages and abilities to identify needs that are not being well met by products today. Not all required changes will be substantial. Often tweaking existing products can make a product much more suitable to a new and significant group of consumers.

In addition, the purchasing journey can be significantly improved for consumers over 50, both online and in-store, by ensuring the shopping experience is accessible for people of all abilities and by improving the ways in which consumers can identify and interact with products.

This presents an important business opportunity. People over 50 are a growing market with an unmet demand for products that will help them to live independently for longer. This is likely to be more pronounced now due to the COVID-19 pandemic.

Retailers have an opportunity to better meet the needs of this consumer group. We believe that the most important change a manufacturer or retailer could make is to incorporate regular consumer insight and feedback into product design and retailing. In the shorter term for a retailer, this could valuably include defining relevant product considerations, sales and service approaches, labelling, filtering and product positioning, and desired marketing approaches.

Through improved positioning of current inclusively designed products – and an increased supply of novel age-inclusive designs – over 50s can be well supported to remain in their homes in later life. Their desire for this could potentially fuel demand for new product categories and associated services, and increase sales revenues, loyalty and brand advocacy for those who step into this significant market gap.

Appendix A:

Detailed methodology

The research comprised a five-part consumer market research programme conducted by Open Inclusion and Trajectory Partnership where each phase built on the next.

1. Literature review/market analysis

The literature review explored existing evidence, research and good practice examples in the inclusive products in the home space. We focused our research on kitchens and bathrooms – areas of the home where daily essential activities take place including preparing food, washing and bathing. These areas also reflect important accessibility and usability demands around ease of use, convenience and safety.

2. Small-scale/illustrative survey (n=100)

The survey questionnaire was completed by 100 members of Open Inclusion's UK-wide panel from 13 December 2019 to 9 January 2020 using SurveyMonkey. Accessible alternate versions and the option to complete by phone interview were provided for some participants.

The survey took on average 30 to 40 minutes to complete and consisted of nine sections:

1. About you
2. Changes to your kitchen
3. Changes to your bathroom
4. Why you select certain products for your home
5. Planning for changes to your home because you're getting older
6. Inclusively designed products, fixtures or fittings
7. Your buying and browsing habits
8. About your needs
9. About your home and your living situation

Please note, most of the graphs displayed in the report have had the ‘Something else’/ ‘Other’ and ‘I don’t know’ responses removed. The ‘Something else’/ ‘Other’ columns may duplicate some answers, but this did not impact the response percentages listed throughout this report in any significant way. The results listed in the graphs are exact values as received from survey respondents.

3. Home visits (n=11)

The themes outlined in this document emerged over the course of 11 interviews during nine home visits which took place between 28 January and 5 February 2020.

Interviews were attended by two researchers; one in the role of interview moderator – also responsible for filming the participant and their home – and one in the role of note-taker, writing detailed notes about the home visit as it progressed, while contributing with impromptu questions as and when they arose. Each interview was attended by one researcher from Open Inclusion and one from Trajectory. Each research pair had one male and one female researcher.

Participants were interviewed in their home, with a specific focus on the layout and products in kitchens and bathrooms and the adaptations that have been made to them. In a few cases, the participant was joined by their partner, who often acted as their carer and whose thoughts and experiences fed into the research findings.

4. Accompanied shopping visits (n=9)

To build on the survey and home visit findings, we carried out nine accompanied shopping visits between 17 and 28 February 2020. This included a mix of in-store and online shopping at high street stores. Three participants conducted fully online shops at retailers’ websites.

Accompanied shopping visits were attended by two researchers; one in the role of interview moderator – also responsible for filming the participant in-store or while they were browsing store websites at home – and one in the role of note-taker, writing detailed notes and contributing with impromptu questions as and when they arose. Each interview was attended by one researcher from Open Inclusion and one from Trajectory. Each research pair had one male and one female researcher.

Those participants who had taken part in the home visits were asked questions in relation to their needs and research themes identified during the home visit.

5. Focus groups (n=19)

Three focus groups were held on 31 March 2020 via Zoom – one in the morning, one at midday and one in the afternoon. Each focus group lasted two hours, and each covered a different age group:

- morning group: 50 to 59
- midday group: 60 to 74
- afternoon group: 75 and over

All participants that had taken part in the home visits and the accompanied shopping visits participated in the focus groups, as well as other research participants who completed our online survey in December 2019/January 2020.

Because of lockdown measures due to COVID-19, these sessions were run remotely via Zoom and recorded. Four participants who were not confident in using Zoom or the Internet were given dial-in details and participated by phone. Content shown on the screen was described in detail for their benefit and to support vision-impaired participants.

Each focus group was moderated by Open's Research Director, with two researchers observing and taking notes. Each session was shown the same content and followed the same protocol.

Detailed notes were taken during the sessions and summarised while referencing the recordings. Open's researchers first analysed each session separately, noting trends, points of similarity and differences before comparing the three sessions with each other to help determine commonalities and differences in views and approaches across all focus group participants.

Nationally representative face-to-face poll

The research was supplemented by a face-to-face poll conducted by Ipsos MORI on behalf of Centre for Ageing Better. Ipsos MORI surveyed a nationally representative sample of 912 adults aged 50 years or older across Great Britain. All interviews were conducted face-to-face in respondents' homes using omnibus CAPI (Computer Assisted Personal Interviewing) between 21 February and 12 March 2020. A quota sample of respondents was interviewed with quotas set by gender, age, working status, tenure and final data were weighted to the known offline population proportions of this audience for age, government office region, working status, social grade within gender, tenure and ethnicity.

Appendix B:

Sample demographics

Survey demographics (100 participants)

Spread of ages

- **21** 50-54
- **18** 55-59
- **16** 60-64
- **21** 65-69
- **15** 70-74
- **5** 75-79
- **4** 80-84

Spread of household incomes

- **28** 400-699/week
- **25** preferred not to say
- **18** 0-259/week
- **16** over 700/week
- **13** 260-399/week

72% of households would have no trouble paying an unexpected bill for £500.

- **10%** would rather not say
- **73%** would use their savings to pay for home improvements
- while **7%** would rather not say

86 identified as White, 3 Black, 2 Asian, 3 Mixed, 4 Other and 1 person preferred not to specify

Most urban

- **38** live urban
- **29** town
- **16** village
- **12** city centre
- **4** rural
- **1** preferred not to say

Most live on own or with a partner

- **38** live on their own
- **35** with a partner
- **19** with family
- **4** other
- **4** preferred not to say

Most own their home

- **57** own with no mortgage
- **13** are paying off a mortgage
- **19** rent (14 from government or housing association)
- **5** prefer not to state
- **4** other
- **2** live with a home owner who is not their spouse/partner

Spread of impairments

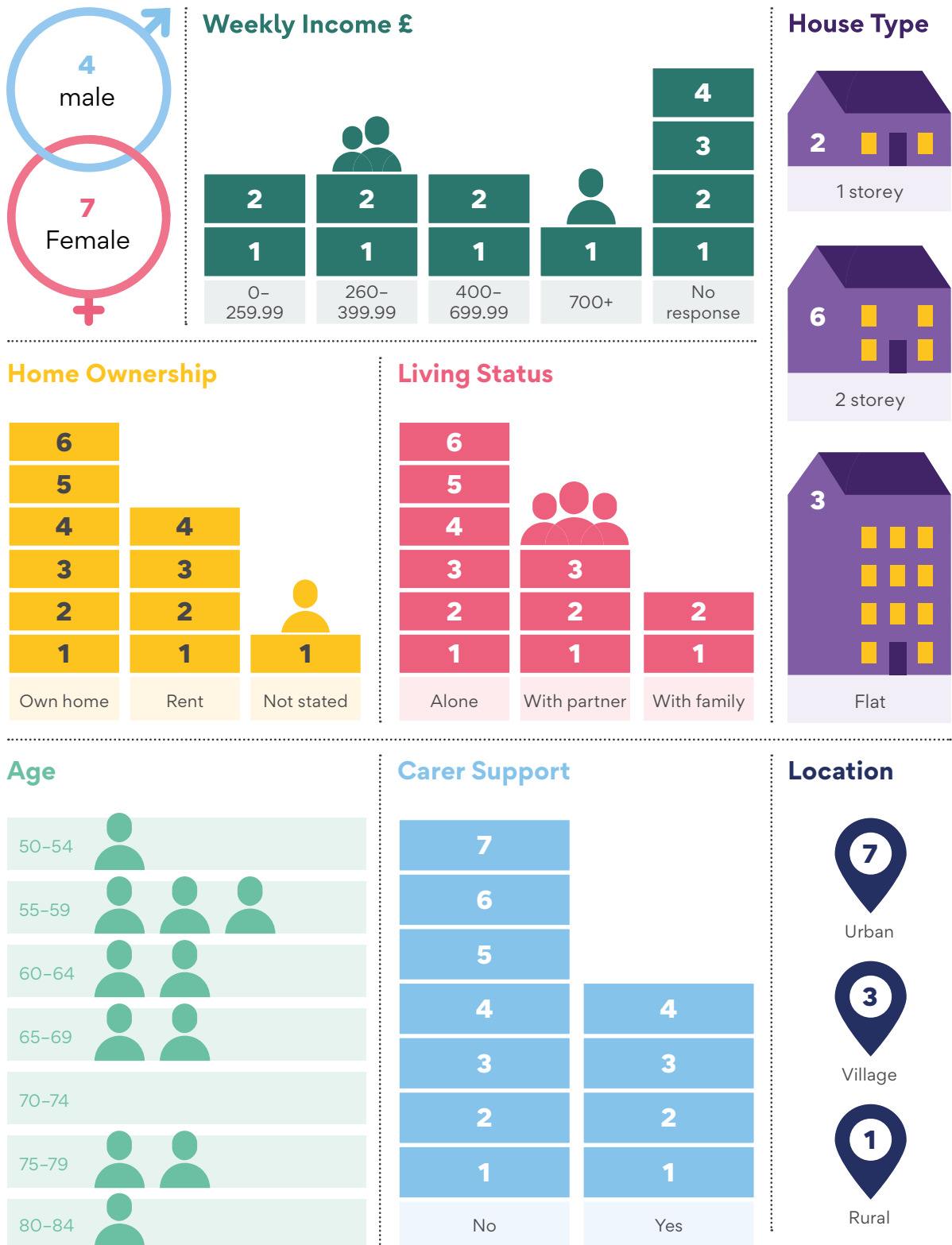
- **56** Mobility
- **51** Fatigue
- **34** Dexterity
- **34** Vision
- **23** Hearing
- **23** Memory/attention
- **24** Long term health condition
- **1** Mental health
- **3** Autism
- **22** don't consider themselves
to have long term disability
or health condition
- **1** preferred not to say

Twice as many women

- **34** Male
- **65** Female
- **1** preferred not to say

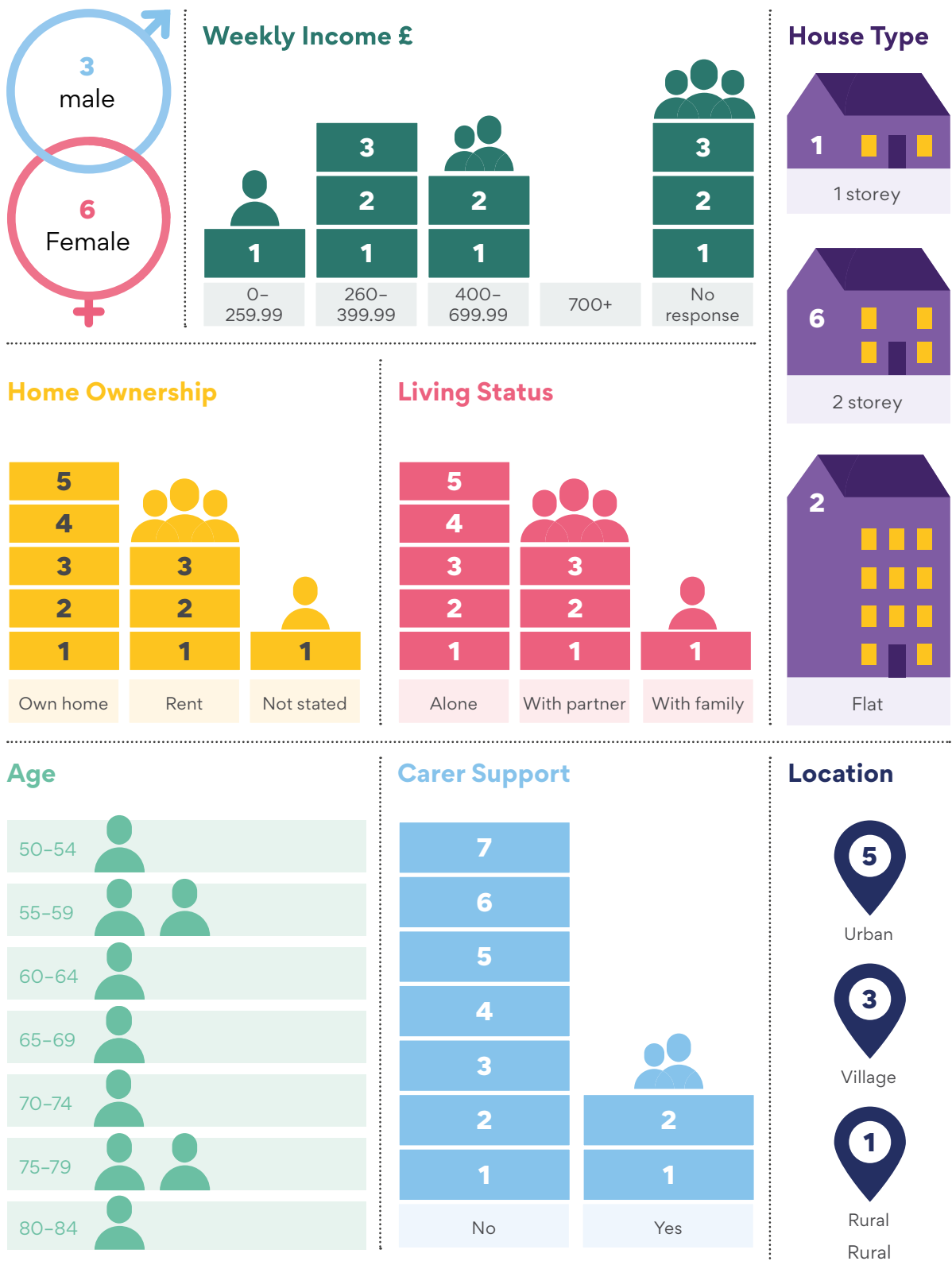
58 feel “neutral” about getting older

Home visit demographics, needs and living situation



Spread of impairments: 4 Mobility; 2 Fatigue; 3 Dexterity; 4 Vision; 2 Hearing; 1 Dyslexia; 2 Mental health; 1 who did not consider themselves to have long term disability or health condition

Accompanied shopping visit demographics, needs and living situation



Spread of impairments: 4 Mobility; 2 Fatigue; 3 Dexterity; 2 Vision; 2 Hearing; 1 Dyslexia; 2 Mental health; 3 who did not consider themselves to have long term

Focus group sample (19 participants)

The sample of focus group participants numbered 19 people

Each focus group consisted of

- **Focus Group 1:** 75 and over; 5 participants (3 female, 2 male)
- **Focus Group 2:** 60-74 years; 8 participants (6 female, 2 male)
- **Focus Group 3:** 50-69 years; 6 participants (6 female)

9 participants had taken part in either the home visit or accompanied shopping phases of research, whereas the remainder had participated in the survey phase only.

Spread of impairments

- **9** Mobility
- **2** Fatigue
- **8** Dexterity
- **5** Vision
- **2** Hearing
- **2** Memory/ attention
- **2** Dyslexia
- **2** Long term health condition
- **5** Mental health
- **5** who did not consider themselves to have long term disability or health condition

Appendix C:

References

BMG Research (2020) Housing insight: Older people preparing their homes for staying put. Available online at: www.bmgresearch.co.uk/housing-insight-older-people-preparing-homes-staying-put/

Boardman B et al (2005) 40% House. Environmental Change Institute, University of Oxford. Available online at: <https://www.eci.ox.ac.uk/research/energy/downloads/40house/40house.pdf>

Busby M (2020) 'It's very lonely': older people's fears of extended lockdown. The Guardian. Available online at: www.theguardian.com/uk-news/2020/apr/28/older-people-in-uk-anxious-about-being-put-in-longer-lockdown

Centre for Ageing Better (2018) Adapting for ageing: Good practice and innovation in home adaptations. Available online at: www.ageing-better.org.uk/sites/default/files/2018-10/Adapting-for-ageing-report.pdf

CIPD and Healthy Working Lives (2012) Managing a healthy ageing workforce – a national business imperative. A guide for employers, March 2012. Available online at: https://ec.europa.eu/eip/ageing/library/managing-healthy-ageing-workforce-national-business-imperative_en

Department for Work and Pensions (2018) Family Resources survey: financial year 2016/17. Available online at: <https://www.gov.uk/government/statistics/family-resources-survey-financial-year-201617>

ILC UK (2019) Maximising the Longevity Dividend. Available online at: <https://ilcuk.org.uk/maximising-the-longevity-dividend/>

Ipsos MORI on behalf of Centre for Ageing Better (2020) Ipsos MORI surveyed a nationally representative sample of 912 adults aged 50 years or older across Great Britain. All interviews were conducted face-to-face in respondents' homes using omnibus CAPI (Computer Assisted Personal Interviewing) between 21 February and 12 March 2020. Further information can be found in the Detailed Methodology.

Keates S Clarkson J (2004) Countering design exclusion: An introduction to inclusive design. Springer-Verlag London Ltd. Available online: <https://link.springer.com/book/10.1007%2F978-1-4471-0013-3>

Lloyd J and Parry W (2015) Older Owners: research on the lives, aspirations and housing outcomes of older homeowners in the UK. Strategic Society Centre, London. Available online at: <https://strategicsociety.org.uk/wp-content/uploads/2015/10/Older-Owners.pdf>

McKinsey & Company (2020) Consumer sentiment and behavior continue to reflect the uncertainty of the COVID-19 crisis. COVID-19 Consumer Pulse surveys, conducted globally between June 15 and June 21, 2020. Available online at: <https://www.mckinsey.com/business-functions/marketing-and-sales/our-insights/a-global-view-of-how-consumer-behavior-is-changing-amid-covid-19#>

Office for National Statistics (2018) National population projections: 2018-based. Available online at: www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/nationalpopulationprojections/2018based

Office for National Statistics (2019) Principal projection – UK population in age groups. Available online at: <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/tablea11principalprojectionuksummary>

Open Inclusion (2020) Unpublished COVID-19 Diary study research, April-May 2020.

Sharot T (2011) The optimism bias. *Current Biology*, Vol.21(23), R941-R945.

Technopolis Group and Oxford Economics (2018) The Silver Economy. European Commission. Available online at: <https://ec.europa.eu/digital-single-market/en/news/silver-economy-study-how-stimulate-economy-hundreds-millions-euros-year>

ThisAbles (n.d.) available online at: <https://thisables.com/en/about/>

University of Cambridge (n.d.) Inclusive Design Toolkit: Other case studies. Available online at: www.inclusivedesigntoolkit.com/case_studies/case_studies.html

University of Cambridge (n.d.) Inclusive Design Toolkit: What is Inclusive Design? Available from: www.inclusivedesigntoolkit.com/whatis/whatis.html

Image sources:

- Figure 1: HotCup with adjustable tray, manual stop option (n.d.) Breville: Hot Water Dispensers. Available from: <https://www.breville.co.uk/breakfast/hot-water-dispensers/hotcup-with-adjustable-tray-manual-stop-option/VKT124-01.html>
- Figure 2: Universal Kettle Tipper (n.d.) Complete Care Shop: Kettle Tippers. Available from: <https://www.completecareshop.co.uk/kitchen-aids/kettle-tippers/universal-kettle-tipper>
- Figure 13: Ford Focus distribution controls (n.d.) University of Cambridge Inclusive Design Toolkit: Other case studies. Available from: http://www.inclusivedesigntoolkit.com/case_studies/case_studies.html
- Figure 15: BT Freestyle phone with easy-to-dial keys, easy-read display and easy-to-hear dial tone (n.d.): University of Cambridge Inclusive Design Toolkit: Other case studies. Available from: http://www.inclusivedesigntoolkit.com/case_studies/case_studies.html

Let's take action today for all our tomorrows.
Let's make ageing better.



This report is part of our work on Safe and accessible homes and is freely available at ageing-better.org.uk

Reproduction of the findings of this report by third parties is permitted. We ask that you notify us of planned usage at digital@ageing-better.org.uk

The Centre for Ageing Better creates change in policy and practice informed by evidence and works with partners across England to improve employment, housing, health and communities. Ageing Better is a charitable foundation, funded by The National Lottery Community Fund.

