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TRAVEL BY PEOPLE WITH PHYSICAL DISABILITIES: A DIFFUSION STUDY FOCUSED ON OPINION LEADERSHIP

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Community, Agriculture, Recreation, Resource Studies

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TRAVEL BY PEOPLE WITH PHYSICAL DISABILITIES: A DIFFUSION STUDY FOCUSED ON OPINION LEADERSHIP

By

Annette Marie Rummel

A DISSERTATION

Submitted to
Michigan State University
in partial fulfillment of the requirements
for the degree of

DOCTOR OF PHILOSOPHY

Department of Community, Agriculture, Recreation, and Resource Studies

2008

ABSTRACT

TRAVEL BY PEOPLE WITH PHYSICAL DISABILITIES: A DIFFUSION STUDY FOCUSED ON OPINION LEADERSHIP

By

Annette Marie Rummel

Travel and tourism is a \$1.3 trillion industry in the United States. Effective tourism marketers recognize that identification and customer conversion of untapped market segments is tantamount to successful tourism marketing efforts. Of the United States traveling public, 21 million adults with disabilities travel for pleasure representing a significant market segment. Diffusion of innovation theory research has shown that some people function as opinion leaders serving to accelerate the diffusion of products, goods or services and participate at the highest levels of word of mouth interpersonal communications events influencing the selection of tourism products. Understanding the characteristics of disabled traveler opinion leaders serves to provide marketers with additional tools to apply within tourism industry marketing strategic plans and for developers and planners to build accessible facilities and infrastructure.

The objectives of this study were: 1.) to identify of opinion leadership within the disabled traveler population, 2.) to explore tourism information needs as they exist in this population, 3.) determine the extent to which various travel information sources are likely to be employed for travel planning, and 4.) to identify characteristics of and differences between the general population and the disabled traveler. Data were collected in a mail survey. A total of 578 usable questionnaires were collected (an achieved 24% response rate).

Each objective was met. Identification of opinion leadership within the disabled sample occurred at a rate of 58%. Opinion leaders receive necessary information when making hotel reservations and when inquiring about disability services, but indicated that they do not receive necessary disability service information when using 800 numbers, through web sites or when making airline reservations. Interestingly, even with the indication that they do not receive the necessary disability service information from the web; the disabled sample indicated the web and electronic media as their travel information sources of choice for travel planning. A disturbing finding was the disparity between household income levels between the groups, with the disabled population lagging far behind.

In addition to these study objectives, additional findings pertain to preferred trip length, geographic location of travel destinations, travel and repeat travel behavior, travel party composition and the self perception of travel experience and travel skill. Severity level of opinion leader's disability and how this influenced travel behavior is also included in the study.

From these results, tourism marketing product intervention program could be developed to aide in development of programs and strategies to expand services to this underserved market and to train opinion leaders to influence their followers to select a particular tourism destination and hospitality services.

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DEDICATION

This dissertation and my doctoral program are dedicated to my husband, William Gallagher Rummel, and our daughters, Elizabeth Loraine Rummel and Sarah Caroline Rummel. Thank you for everything good in my life.

"It is never too late to be what you might have been."

George Elliot

ACKNOWLEDGEMENTS

I wish to acknowledge the teachers at Delta College who helped me understand how to learn, the professors at Northwood University who inspired me to achieve, my Rochester Institute of Technology partner in crime - Dr. Tracy Weber. I will remember with fondness the way we made our way though our Master's program. I am grateful to my mentors Dr. Dick Marechi, who made me promise to complete my Ph.D. in tourism; Dr. Jim Jacobs, who pushed me to THINK differently, and to MICRONY, who demonstrated selfless team success. Thanks are extended to Dr. Joseph Fridgen for supporting my admittance to MSU and to Dr. Donald Holecek, whom I've had the privilege of working with for more than two decades. To Dr. Christine Vogt I wish to extend my grateful appreciation for her willingness to serve as my committee Chairperson. Dr. Vogt pushed me to a higher level of performance. To Dr. James Dearing who introduced me to Diffusion Theory. I will forever be grateful to Paige Schneider for her willingness to help, support and teach me during my most difficult time at MSU. Thanks also to my two helpful Bulgarian kids Sergy Kalnish and Asen Marchev. To my father and mother, Leo Charles and Marilyn Lucille (Roberts) Eckenswiller, who blessed and encouraged all their children to achieve. I do miss you both. To my sisters Veronica, JoAnn and Mardi who motivated me to persevere. To my brothers Bill and Doug who each taught me very important life lessons. To my brother-inlaw State Representative Ken Horn and sister-in-law Alana, I am so proud to have you both in our family. Thank you to my mother and father-in-law, Bill and Mary Ann Rummel and sisters and brothers-in-law Cari, Mike, Sue, Jon and Martha with whom I've been blessed.

Loving thanks are extended to my husband Willy and children Elizabeth & Sarah who endured the trials and tribulations of my education, to whom this effort is dedicated. Ultimately I give thanks to the Father, Son & Holy Spirit, only through whom all things are possible.

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CHAPTER 1

INTRODUCTION

If asked to select one industry that makes a substantial impact on the economy of the United States odds are most people would not readily identify the tourism industry. However, travel and tourism is a \$1.3 trillion industry in the United States (Travel Industry of America, 2007). Travel and tourism generates \$100 billion in tax revenue for local, state, and federal government (Travel Industry of America, 2005).

From the United States tourism industry perspective, private and public organizations invest enormous amount of money in advertising, promotional efforts and in purchasing products and services to host this \$1.3 trillion dollar demand. Effective tourism marketers are aware that people are different and desire diverse types of tourism experiences (Selin, 1994). With this understanding, the tourism industry has increasingly segmented customers when developing marketing strategies (Cha, McCleary & Uysal, 1995; Gartner, 1996; Goeldner & Ritchie, 2003; Hsu & Lee, 2002; Loker & Perdue, 1992; MacKay, Andereck & Vogt, 2002; Mo, Havitz & Howard, 1994). Market segmentation is a process that identifies small and specialized markets that eventually build into a larger customer base (Shani & Chalasani, 1992). One such market is the physically disabled traveler.

The U.S. Census (2000) reported 49.7 million people with some type of long lasting condition or disability. These people represented 19% of the 257.2 million people who were aged five and older in the civilian non-institutionalized population (or nearly one in five). Within this population, they found that, of the 49.7 million people with some type of long lasting condition or disability, 21.2 million possessed a disability

limiting basic walking, climbing stairs, reaching, lifting or carrying objects; already representing a significant customer base. The U.S. Census (2000) also reported disability rising with age. The profile of the largest aging population segment is the baby boomers, identified as being independent, outgoing and possessing the most money of all population age segments (Dychtwald, 1999). Since 60% to 70% of those classified as disabled in the United States are 65 and older, to gain an understanding of the elderly would be beneficial (AARP, 2007; Burnett & Paul, 1996, Phillips & Sternhal, 1977). The population of the United States is aging, and the number of persons with disabilities is growing at a steady pace; therefore, it is becoming increasingly difficult to overlook this potentially desirable market segment (AARP, 2007; Burnett & Baker, 2001; Dychtwald, 1999).

The following legal mandates protect the disabled with regards to recreation and tourism: the Social Security Act, 1936; Vocational Rehabilitation Act, 1963; PL 88-29 Nationwide Outdoor Recreation Plan, 1963; Education for Handicapped Children Act, 1967; PL 90-480 Architectural Barriers Act, 1968; PL 91-517 Developmental Disabilities Services and Facilities Construction Act, 1971; PL 93-112 Rehabilitation Act of 1973; PL 93-516 Rehabilitation Act Amendment of 1974; PL94-142 Education of All Handicapped Children Act, 1975; PL99-457 Education of the Handicapped Act Amendment, 1986 and the ADA (American with Disabilities Act, 1990) which provided the mechanism for litigation. These laws require businesses and organizations to invest in designing, retro-fitting or remodeling infrastructure to address the needs of the often marginalized or largely ignored people with disabilities population. Tourism industry members are not exempt from compliance. Tourism facilities serve the public and many

have made sizeable investments to update infrastructure, purchased specialized equipment, and implemented policies to accommodate the various needs of people with disabilities. Faced with large mandates and voluntary investment, many tourism industry members wish to understand how they will realize a return on their investments; or further, profit from these actions. Hence, developing marketing strategies targeted at this population for which product and infrastructure investments have been made appear to be necessary and prudent.

An early step in tourism marketing is the division of potential markets based upon meaningful market segments (Cha, McCleary & Uysal, 1995; Gartner, 1996; Goeldner & Ritchie, 2003; Hsu & Lee, 2002; Loker & Perdue, 1992; Mo, Havitz & Howard, 1994; Sung, Morrison & O'Leary, 2000). Market segmentation assumes segment heterogeneity (Gartner, 1996). When provided with product choices, people within a segment may act homogeneously or in a similar manner. Heterogeneity may be established by applying person specific variables (e.g., geographic, demographic), situational variables such as types of products purchased while vacationing versus those made while at home, or as a result of interaction of the two (Kotler, 1991). To capture product heterogeneity, organizations can introduce new products to their product mix. However, to segment a market, three conditions must be met. First, each segment member must possess one trait linking them together, which is not present for non-members. Second, each must be large enough for marketing purposes or to be potentially profitable to pursue. Finally, marketing access to the segment must be achievable through practicable means such as social networks, the media or by direct contact (Gartner, 1996).

The disability market fulfills these three criteria as demonstrated by the following: First, although the severity of disabilities and their implications for behavior are diverse, disabled people share some level of limitation (Burnett, 1991; Burnett & Paul, 1996; Klippel, Sweeny & Sweeny, 1974; Schiffman, 1971). Second, according to the AARP (2007), the disabled traveler market segment is growing, making it an attractive market and a potentially profitable new market segment for tourism suppliers interested in diversifying and capitalizing on the mandates required by the ADA (1990). Finally, access to this segment is possible through affinity organizations (e.g. National Association for Persons with Disabilities, the American Association for the Physically Disabled, Paralyzed Veterans of America); through the internet (e.g. The Disabled Traveler, The Open Doors Organization); via magazines (e.g. New Mobility, Disability Books); and by way of traditional electronic media.

Understanding the destination selection process of the disabled traveler segment would be an important first step in forecasting this consumer's behavior, as well as providing a basis for better decision-making regarding investments into community infrastructure, business facilities and services. "Numerous studies have examined the types of sources used and the level of information usage within a travel decision context. These studies have shown direct experience and advice from family, friends, and relatives (interpersonal communication) as a preferred and highly used information source, in contrast to advertisements and articles found in mass media formats (e.g., newspaper, magazine, radio, television)" (Vogt, 1993, page 1).

A theory of communications, Diffusion of Innovations, casts a special focus on interpersonal communications within social systems (Gatignon & Robertson, 1985).

Within diffusion theory, the role of opinion leader has been found to mediate mass media effects (Rogers, 2005). Opinion leaders are information seekers (Troncalli & Thompson. 1972). Further, opinion leadership has been positively associated with cosmopoliteness where information from outside the immediate environment appears to be important (Katz & Lazarsfeld, 1955; Lazarsfeld, Berelson & Gaudet, 1948; Lionberger, 1953; Rogers, 2005). Product interest, media exposure and competence have also been found to be positively associated with opinion leadership (Coleman, Katz & Menzel, 1957; Gatignon & Robertson, 1985; Myers & Robertson, 1972; Nicosia, 1964). Opinion leaders' innovativeness has been shown to be a function of the group's norm; where group norms favor innovativeness, the relationship will tend to be positive (Coleman, Katz & Menzel, 1957: Lionberger, 1953: Menzel, 1960: Myers & Robertson, 1972: Wilkening, 1952). Opinion leaders have been identified as receiving the greatest number of sociometric choices are involved in the largest number of social networks, and are identified by others as sought out for advice (Kotler & Armstrong, 2006; Rogers, 2005). Thus, gaining an understanding of interpersonal communications, opinion leadership and personal experience roles in the disabled traveler's travel destination selection process may be important in serving and benefiting from this market segment.

Identification of opinion leadership is also thought to be a critical determinant of word of mouth communication and interpersonal influence affecting the diffusion of new products, concepts, and services (King & Summers, 1970). Opinion leaders drive trends, influence mass opinion and, most importantly, sell a great many products (Kotler & Armstrong, 2006).

Diffusion studies have been accomplished in the areas of agricultural innovations (Ryan & Gross, 1943), medical practices (Kelly et al., 1991; Kelly et al., 1997), technological advancements (Braun, 2003), media (Reardon & Rogers, 1988), marketing (Arndt, 1967) and politics (Mohr, 1969). Use of this theory in the area of travel and tourism and the identification of opinion leaders, who are key to interpersonal influence affecting diffusion of a new products, however has been limited (Goldsmith, Flynn & Bonn, 1994; Rossello, Aguilo & Riera, 2005; Sahadev & Islam, 2005; Shorter-Judson, 2000; Troncalli & Thompson, 1972).

It is accepted throughout the tourism literature that word of mouth advertising is a powerful marketing tool (Bieger & Laesser, 2004; Goldsmith et al., 1994; Haywood, 1989; Hsu, Kang & Lam, 2006; Lindberg-Repo, 1999; Money & Crotts, 2003; Murphy, 2000; Vogt & Kaplanidou, 2003) and the most critical determinant of an area's economic tourism health (Gartner, 1996). According to Haywood (1989) popular services such as travel and food seem to generate significantly more word of mouth than do experiences of more mundane products. Opinion leaders have been identified as individuals who exert considerable personal influence and from whom others seek word of mouth advice (Arndt, 1967; Reynolds & Darden, 1971). However, identification of opinion leaders within the disabled traveler market segments of the tourism industry has yet to take place.

STATEMENT OF THE PROBLEM AND RESEARCH QUESTIONS

This study focuses on the identification of opinion leaders and measures opinion leadership in travel planning and decision-making by people with disabilities. This study fills two gap areas within the literature: lack of use of Diffusion of Innovations Theory

with specific focus on identification of opinion leaders in the disabled traveler population and the role opinion leadership plays in travel decision-making by persons with disabilities.

To test this phenomenon within the people with disabilities sample, the investigator will incorporate trait and individual difference variables in the study instrument to identify opinion leaders. Pre-trip and travel decision-making by people with physical disabilities was examined using the Diffusion of Innovations Theory (Rogers, 2005), with a focus on the role of the opinion leader.

Specifically, opinion leadership's existence within the physically disabled traveler population was identified, tourism information needs as they exist in this context were explored and the extent to which various information sources are likely to be employed in a vacation planning context were described.

The identification of opinion leader information sources used and detection of patterns of pre-trip information sources employed in travel decision-making by persons with disabilities involves addressing the following questions: 1. Can the opinion leader be identified within the tourism market segment of persons with disabilities? 2. If opinion leaders are identified, can use patterns of pre-trip information sources be identified? 3. Does length of time a person lives with a disability affect vacation participation levels?

4. Does opinion leadership affect where and when persons with disabilities vacation? 5. Does opinion leadership affect self consideration pertaining to travel? 6. Does opinion leadership affect the number of vacations taken? 7. Does classification of disability affect vacation participation levels? 8. To what extent are the sources likely to be

employed in trip planning? 9. Does opinion leadership affect the number of trip planning, mass media, electronic and print media sources used in vacation planning? And, 10. can a tourism product intervention program be developed to educate opinion leaders to influence their followers to adopt a particular tourism destination?

PURPOSE OF THE STUDY

The purpose of the study was to examine how the tourism industry may capitalize on their ADA and voluntary compliance investments, diversify and extend their client base and satisfy an under-served market segment; persons with disabilities. From an academic perspective, scholars follow an intellectual paradigm in a research field enabling the pursuit of a coherent set of research directions. This paradigm imposes and standardizes a set of assumptions and conceptual biases difficult to recognize and overcome. Past Diffusion of Innovations research was expanded by searching for different objectives and providing directions new to Diffusion of Innovations Theory. Using Diffusion of Innovations Theory (Rogers, 2005) as the theoretical framework, this study examined the persons with disabilities population and opinion leadership's influence on pre-trip travel decision-making.

DELIMITATIONS

This study was delimited to the following:

Those individuals who are members of the American Association of
 People with Disabilities, who reside in the Great Lakes States of

Michigan, Ohio, Indiana and Illinois, not the entire population of physically disabled persons in the United States.

- Self-reported attitudes and behaviors related to day-long vacations and overnight travel to tourism destinations within the past 12 months.
- Survey instrument interaction and information assimilation associated with their responses.

LIMITATIONS

This study was limited in the following ways:

- Lack of control for bias factors between exposure to word of mouth and acceptance of the word of mouth recommendation.
- Failure to ascertain a precise time of pre-trip decision-making.
- Findings that are reflective of respondents from the selected group and may not be representative of other physically disabled travelers or individuals.
- Participant's recall of specific interactions and information used for decision making process potentially being less than perfect.
- The degree to which the study instrument is reliable and valid.
- The ability of the study participants to comprehend and respond utilizing the survey mechanism.

ASSUMPTIONS

This study assumed the following:

- Opinion leaders exist; participate in travel, search for information and use this information in trip planning.
- American Association of People with Disabilities membership list will
 provide for physically disabled adults able to complete the study.
- The variables selected will accurately reflect consumer characteristics of the physically disabled traveler and the general population.
- The Diffusion of Innovations Theory is a sound and appropriate theory to apply to the physically disabled traveler market segment.

DEFINITION OF TERMS

<u>Cosmopoliteness:</u> the degree to which an individual is oriented outside of a social system (Rogers, 2005).

<u>Diffusion of innovations:</u> the study of how, why, and at what rate new products, ideas and technology spread through cultures (Rogers, 2005).

Interpersonal communication: the channels through which two or more people communicate directly, including face to face, person to audience, over the telephone/communication technologies (i.e., e-mail, chat rooms, blogs), or mail (Kotler & Armstrong, 2006)

Media rich information source: the information sources focused on communication of news, information or topical subjects (Burnett & Paul, 1996).

Non-opinion leader: an individual who seeks out advice from others when making purchase decisions (Flynn, Goldsmith & Eastman, 1996).

Opinion leader: an individual member of a social stratum likely to influence other persons in their immediate environment (Katz & Lazarsfeld, 1955).

Opinion leadership: when individuals attempt to influence the purchasing behavior of other consumers in specific product fields (Flynn, Goldsmith & Eastman, 1996).

Physically disabled: an individual with a physical impairment that substantially limits one or more activities of life at a given point in time (http://www.usdoj.gov/crt/ada/).

<u>Travel contacts:</u> number of contacts who exchanged travel information (Troncalli & Thompson, 1972).

<u>Travel experience:</u> experience with traveling throughout the Midwest, United States and internationally (Vogt & Fesenmaier, 1998)

<u>Travel life cycle:</u> the birth to death changes over time in the life of the physically disabled person's travel activities (Zimmerman, 1982).

<u>Trip planning:</u> the degree and timing the respondent confirms details pertaining to trips (Vogt & Fesenmaier, 1998).

<u>Tourism specific information sources:</u> information sources used in pre-travel planning (Vogt & Fesenmaier, 1998).

Word of mouth (WOM): the passing of information by verbal means, especially recommendations, but also general information, in an informal, person-to-person manner, rather than by mass media, advertising, organized publication, or traditional marketing. Word of mouth is typically considered a spoken communication, although web dialogue, such as blogs, message boards and emails are often now included in the definition (Solomon, 2007).

ORGANIZATION OF THE DISSERTATION

Following this introductory chapter, Chapter 1, this dissertation provides four additional chapters in the examination of people with disabilities and opinion leadership. Chapter 2, review of the literature, first discusses market segmentation and identifies the conditions to be met to segment a market. Within Chapter 2, the market segmentation discussion is followed by a description of Diffusion of Innovations Theory and the role of opinion leadership within the theory, discussion of travel life cycle concept, travel decision-making and travel planning behavior, travel specific interpersonal communication information source use, travel specific trip planning information source use, mass media source use as it relates to the people with disabilities market segment and concludes with a description of hypotheses to tested and the conceptual model. The theoretic underpinnings along with the proposed hypotheses addressed within this study are presented. Chapter 3 contains details regarding the methodologies applied toward instrumentation development, sample design, survey administration and sample size.

This is followed by a description of the selection of participants, survey administration and the mail survey response rate. Sources of survey error are then discussed. The chapter concludes with a description of the samples drawn for this study. Chapter 4 is divided into four sections. The demographic profile of the survey participants is described in section one. Results for all study participants' travel proclivity are highlighted in section two. The physically disabled sample travel information is the focus of section three and results of the hypotheses testing are presented in section four. The summary, discussion of key results and implications resulting from this study are presented in Chapter 5. Limitations of the findings, followed by future research opportunities are also conferred. The study concludes with final comments pertaining to the study topic.

CHAPTER 2

REVIEW OF THE LITERATURE

This chapter is divided into seven sections. The first six sections are based upon previous research from a variety of bodies of literature. Each of these sections provides an overview and discussion pertaining to past research. The final section introduces the proposed hypothesis to be tested and conceptual model. This chapter's seven sections include: market segmentation; opinion leadership; travel life cycle; travel decision-making and travel planning; travel specific interpersonal communication information source use and travel specific trip planning information source use; mass media source use; and proposed hypotheses and conceptual model.

MARKET SEGMENTATION

The division of potential markets based upon meaningful market segments is an early step in the tourism marketing process (Cha et al., 1995; Gartner, 1996; Goeldner & Ritchie, 2003; Hsu & Lee, 2002; Loker & Perdue, 1992; Mo, Havitz & Howard, 1994; Sung et al., 2000). Additionally, market segmentation assumes across segment heterogeneity (Gartner, 1996). However, when provided with specific product choices, people within a segment will often act homogeneously. To create product heterogeneity, organizations can introduce new products to their product mix. Heterogeneity may be introduced by applying targeted segment specific variables (e.g., geographic, demographic, psychographic), situational variables such as types of products purchased while vacationing versus those made while at home, or as a result of interaction of the two (Kotler, 1991). However, to segment a market, three conditions must be met. First,

individual segment member's must possess at least one trait linking them together, not present for non-members. Second, the segment must be large enough for marketing purposes or to be potentially profitable. Finally, access to the segment must be achievable through targeted marketing (Gartner, 1996).

The disability market fulfills these three criteria as demonstrated by the following. First, physically disabled people share some level of limitation (Burnett & Paul, 1996). Second, the physically disabled traveler market segment is growing (AARP, 1990), making it an attractive market and a potentially profitable new market segment for tourism suppliers interested in diversifying and capitalizing on the mandates required by the ADA (1990). Finally, access to this segment is possible through affinity organizations (i.e., National Association for Persons with Disabilities, the American Association for the Physically Disabled, Paralyzed Veterans of America); through the internet (i.e., The Disabled Traveler, the Open Doors Organization); by magazines (i.e., New Mobility, Disability Books); and by way of traditional electronic media.

OPINION LEADERSHIP

A theory of communications, Diffusion of Innovations, casts a special focus on interpersonal communications within social systems (Gatignon & Robertson, 1985). Within Diffusion of Innovations Theory, the role of opinion leader has been found to mediate mass media effects (Rogers, 2005). Opinion leaders are information seekers (Troncalli & Thompson, 1972). Additionally, individual inclinations for relying on mass media and opinion leadership have been measured (Gatignon & Robertson, 1985). Opinion leadership has been positively associated with cosmopoliteness where

information from outside the immediate environment appears to be important (Katz & Lazarsfeld, 1955; Lionberger, 1953). Product interest, media exposure and competence have also been found to be positively associated with opinion leadership (Coleman, Katz & Menzel, 1957; Myers & Robertson, 1972; Nicosia, 1964). Opinion leaders' innovativeness has been shown to be a function of the group's norm: where group norms favor innovativeness, the relationship will tend to be positive (Coleman, Katz & Menzel, 1957; Lionberger, 1953; Menzel, 1960; Myers & Robertson, 1972; Wilkening, 1952). Opinion leaders have been identified as receiving the greatest number of sociometric choices, are involved in the largest number of social networks and are identified by others as sought out for advice (Kotler & Armstrong, 2006; Rogers, 2005). Thus, gaining an understanding of interpersonal communications, opinion leadership and personal experience roles in the physically disabled traveler's travel destination selection process may be important in serving and benefiting from market segmentation.

Identification of opinion leadership is also thought to be a critical determinant of word of mouth communication and interpersonal influence affecting the diffusion of new products, concepts, and services (King & Summers, 1970). Opinion leaders drive trends, influence mass opinion, and most importantly, sell a great many products (Kotler & Armstrong, 2006; Rogers, 2005).

Diffusion studies have been accomplished in the areas of agricultural innovations (Ryan & Gross, 1943), in medical practices (Kelly et al., 1991; Kelly et al., 1997), technological advancements (Braun, 2003), media (Reardon et al., 1988), marketing (Arndt, 1967) and politics (Mohr, 1969). Use of this theory in the area of travel and tourism and the identification of opinion leaders, who are key to interpersonal influence

affecting diffusion of a new products, however has been limited (Goldsmith, Flynn & Bonn, 1994; Rossello, Aguilo & Riera, 2005; Sahadev & Islam, 2005; Shorter-Judson, 2000; Troncalli & Thompson, 1972). It is accepted throughout tourism literature that word of mouth advertising is a powerful marketing tool (Bieger & Laesser, 2004; Goldsmith, Flynn & Bonn, 1994; Haywood, 1989; Hsu, Kang & Lam, 2006; Linddberg-Repo, 1999; Money & Crotts, 2002; Murphy, 2000; Vogt & Kaplanidou, 2003) and the most critical determinant of an area's economic tourism health (Gartner, 1996).

According to Haywood (1989) popular services such as travel and food seem to generate significantly more word of mouth than do experiences of more mundane products.

Opinion leaders have been identified as individuals who exert considerable personal influence and who others seek word of mouth advice from (Arndt, 1967; Reynolds & Darden, 1971). However, identification of opinion leaders within the physically disabled traveler market segments of the tourism industry has yet to take place.

TRAVEL LIFE CYCLE

The process of human behavior changing over a life-time is captured in the life-cycle concept. This concept describes the birth-to-death series of stages that transpire in the life of an individual or family. Rural sociologists were among the earliest users of the concept of life-cycle changes. Family spending and changes in farming activities associated with changes in family size and composition were the earliest concept characteristics identified (Loomis, 1936; Miner, 1938; Sorokin, Zimmerman & Galpin, 1931). This concept was leveraged by marketing specialists, economists and consumer behaviorists (Ghez & Becker, 1975; Lansing & Morgan, 1955). Demographers, using vast databases, have documented life-cycle timing regularities and length of life-cycle

stages (Glick & Norton, 1977). A study incorporating an exchange of research contributions from other disciplines contributed to a life-cycle pattern identification study within leisure (Rapaport, Rapaport & Strelitz, 1975). The destination evolution model developed by Butler (1980) is widely used from the perspective of the tourist area time oriented cycle of development.

Tourism destination life-cycle modeling studies have progressed in areas such as event tourism (Wong, 2000); been applied to economic development discussions (Plog, 2001); examined across time horizons and between generations (Opperman, 1995) and examined using stochastic multivariable modeling through regression expression (Karplus & Krakover, 2005) and found to be valid. The individual life-cycle concept as a tool for travel research was further developed by Zimmerman (1982). Zimmerman (1982) compared trip-making by life-cycle stages; finding two components that contributed - household structure (relationships among household members) and age of household members.

TRAVEL DECISION-MAKING TRAVEL PLANNING

Understanding the destination selection process is an important first step in forecasting consumer behavior, as well as providing a basis for better decision-making regarding investments into community infrastructure, business facilities, marketing plans and promotional materials. An abundance of studies on tourist information search behavior exist including studies on; sources used and level of information usage within a travel decision context (Bieger & Laesser, 2004; Cai, Feng & Breiter, 2004; Chen & Gursoy, 2000; Fodness & Murray, 1997; Gitelson & Crompton, 1983; MacKay,

Andereck & Vogt, 2002; Mittal, 1995; Nolan, 1976; Rao, Thomas & Javalgi, 1992; Um & Crompton, 1990; Vogt & Fesenmaier, 1998; Vogt, Fesenmaier & MacKay, 1993).
"Studies have shown direct experience and advice from family, friends, and relatives (interpersonal communication) is a preferred and highly used information source, in contrast to advertisements and articles found in mass media formats (i.e., newspaper, magazine, radio, television" (Vogt, 1993, page 1). Information search has been found to be "a dynamic process wherein individuals use various amounts and types of information sources in response to internal and external contingencies to facilitate travel planning and largely focus on information channels" (Cai et al., 2004). Within the physically disabled sector of the traveling public, Israeli (2002) reported physically disabled persons use a different rule-based system for evaluating tourist sites; a non-compensatory procedure, which eliminates alternatives, followed by a compensatory model to trade off attributes; adding to their evaluation process. Woodside and Etzel (1980) reported disabled people participate in careful planning before making trips.

TRAVEL SPECIFIC INTERPERSONAL COMMUNICATION INFORMATION SOURCE USE

Marketers have paid attention to the topic of opinion leadership for many years and have expressed the importance of this concept in marketing of products, goods and services (Rogers, 2005). Advice from family, friends, and relatives (interpersonal communication) is a preferred and highly used information source (Arndt, 1967; Haywood, 1989; Reynolds & Darden 1971; Rogers, 2005; Vogt et al., 1993). Communication through information sources perceived as important is central to attracting visitors to a destination. According to Troncalli and Thompson (1972),

;			
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understanding information sources perceived as important is essential to securing visitors to certain geographic areas or specific travel locations. The vacation travel opinion leader and the information sources visualized by this individual as being important for both awareness and evaluative information would be valuable information for marketers to understand (Darden and Troncalli, 1972). To gain an understanding of travel related interpersonal communication information sources and how this information is used could aid the marketer in the development of marketing strategies to elevate the volume of these interpersonal communication events with the goal of increasing conversion of visits to their product.

TRIP PLANNING INFORMATION SOURCE USE

Within the general population, travel decision making has been one of the most comprehensively studied areas in tourism (Fesenmaier, Ricci, Schaumlechner, Wober and Zanella, 2003; Sirakaya and Woodside, 2005) as has tourist information search behavior on sources used and level of information usage within a travel decision context (Bieger & Laesser, 2004; Cai et al., 2004; Chen & Gursoy, 2000; Fodness & Murray, 1997; Gitelson & Crompton, 1983; MacKay et al., 2002; Mittal, 1995; Nolan, 1976; Rao et al., 1992; Stewart and Vogt, 1999; Um & Crompton, 1990; Vogt & Fesenmaier, 1998; Vogt et al., 1993). Traditionally, research on touristic information sources has often assumed individuals seek touristic information for destination selection purposes (Um & Crompton, 1990), however studies have shown that not everyone who gathers information intends to travel or use this information in making a destination choice (Vogt & Fesenmaier, 1998). According to Vogt and Fesenmaier (1998), expanding the view of the tourism information search process from a strict marketing context into a broader

communication one could help explain the factors which influence the use of communications as they relate to recreation and tourism experiences. Unlike studies in the general population, travel decision and tourist information search behavior has not been studied extensively in the area of physically disabled tourism; let alone expanding from the strict marketing context into a broader communication context. Beginning at the expanded approach level could jumpstart the research process, allowing a more broad perspective of the information sources use by the physically disabled traveler. This could permit marketers to develop their information sources to stimulate these additional uses and capitalize on potential powerful marketing approaches at no additional expense.

MASS MEDIA SOURCE USE

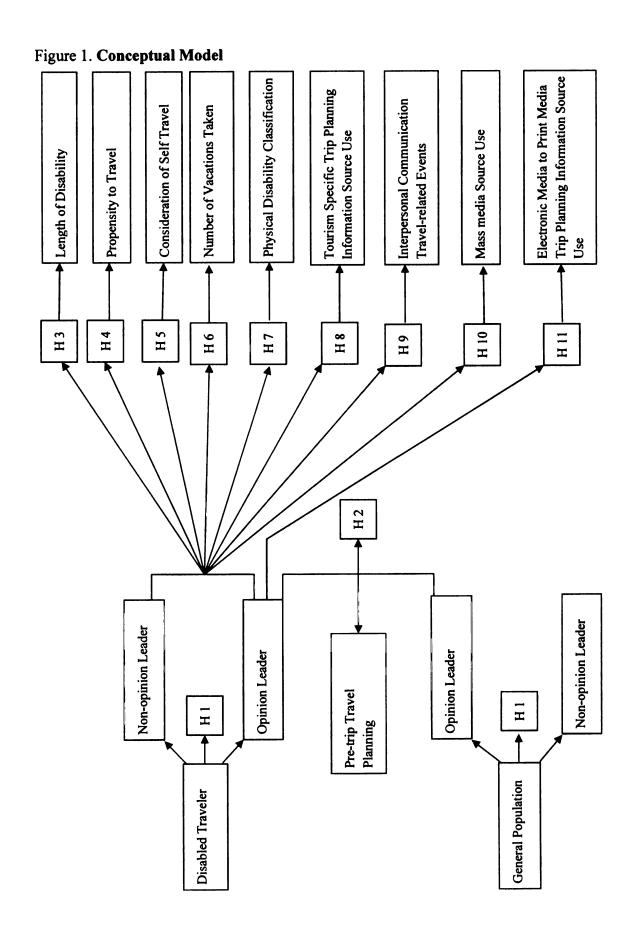
Burnett and Paul (1996) noted that communication needs of the physically disabled have yet to be recognized by advertisers. Further, Burnett and Paul (1996) noted that individuals who have disabilities use information differently than those who do not. Schmitt and Moody (1994) noted that physically disabled persons use mass media as a means to verify their position in society and as a personal decision-making tool. However, empirical research of the physically disabled consumer remains scarce. Studies that have focused on the physically disabled consumer have imported theories from geriatrics, socialization/re-socialization and alienation theories as the underpinning of their efforts. In the area of geriatric study associated with the physically disabled population, the U.S. Census (2000) reported disability rises with age and the largest aging population segment is the baby boomer population, identified as being independent, outgoing and possessing the most money of all population segments (Dychtwald, 1999).

AARP (2007) reported the population of the United States is aging and the number of

persons with disabilities is growing at a steady pace. Of the individuals classified as disabled, 60% to 70% are age 65 and older, (AARP, 2007; Burnett & Paul, 1996). Kraus and Stoddard (1989) found less than 10% of the currently disabled were born with their disability and as a result needed to re-socialize post disability occurrence. Additionally, Moschis, Mather, and Smith (1993) studied the role of age-targeted marketing by testing exposure frequencies with mass media and personal sources. Moschis et al. (1993) reported a greater likelihood of product awareness and consequently product acceptance as a result of mass media and personal source recommendations. The goal of advertisers should be to recognize the needs of the physically disabled traveler, develop strategies to reach this population, and select media vehicles that enhance the physically disabled consumers' ability to shop or buy.

PROPOSED HYPOTHESIS AND CONCEPTUAL MODEL

According to the Diffusion of Innovations Theory (Rogers, 2005), a social system may be identified as individuals engaged in joint problem solving to accomplish a common goal. Within this system, individuals may be distinguished from other members of the system by their behavior. Opinion leaders distinguish themselves by the degree to which they are able to influence other individuals' attitudes or overt behavior informally (Valente & Davis, 1999). These past findings were tested with a disability sample through hypotheses one, four, five, six, and eight within this study (Figure 1).



According to Zimmermann (1982), one facet of tourism's temporal dimension is a period event. A period event refers to annual changes and/or specific events that influence tourism behavior. Less than 10% of currently disabled people were born with their disability and re-socialization would be necessary in response to changes resulting from the disability (Kraus & Stoddard, 1989). This claim was examined in the disability sample through the investigation of hypotheses three and seven.

Reynolds and Darden (1971), Rogers (2005) and Summers (1970) identified that persons recognized as opinion leaders tend to be more active in seeking interpersonal communications about products in which they are interested, and are almost always more exposed to particular types of communication channels that are relevant to their product and/or service interest. These claims were examined in the disability sample through hypothesis nine.

According to Rogers (2005), opinion leaders have greater exposure to mass media than followers. This finding was examined in the disability sample through investigation of hypothesis ten.

According to Vogt and Fesenmaier (1998) expanding the view of the tourism information search process from a strict marketing context into a broader communication one could help explain the factors which influence the use of communications as they relate to recreation and tourism experiences. This finding was examined in the disability market segment through hypotheses two and eleven.

Overall, this study tested the following eleven hypotheses as shown in Figure 1:

- H1: The percentage of opinion leaders in the physically disabled traveler market segment is greater than the percentage in the general traveler market segment.
- H2: Physically disabled traveler opinion leaders will indicate stronger levels of pre-trip planning activities than general traveler opinion leaders.
- H3: Physically disabled traveler opinion leaders will have been physically disabled for a longer period of time than physically disabled traveler non-opinion leaders.
- H4: Physically disabled traveler opinion leaders will report a higher perceived propensity to travel for vacations or leisure than physically disabled traveler nonopinion leaders.
- H5: Physically disabled traveler opinion leaders will report a higher perceived travel skill level than physically disabled traveler non-opinion leaders.
- H6: Physically disabled traveler opinion leaders will take a greater number of day-long, short overnight and long overnight vacations than physically disabled traveler non-opinion leaders.
- H7: The classification of physical disability may be a factor in the number of daylong, short overnight and long overnight vacations participated in by physically disabled traveler opinion leaders and physically disabled traveler non-opinion leaders.
- H8: Physically disabled traveler opinion leaders will more likely use tourism specific trip planning information sources than physically disabled traveler nonopinion leaders.

- H9: Physically disabled traveler opinion leaders will record higher numbers of interpersonal communication events about travel than physically disabled traveler non-opinion leaders.
- H10: Physically disabled traveler opinion leaders will use a greater number of mass media sources in their trip planning than physically disabled traveler nonopinion leaders.
- H11: Physically disabled traveler opinion leaders will place greater importance on the use of electronic media information sources than print media information sources when planning a vacation.

In summary, chapter two provides a review of the literature focusing on market segmentation, opinion leadership, travel life cycle, travel decision-making and planning, travel specific interpersonal communication information source use and in travel decisions specific trip planning information source use, and mass media source use. It was from this literature that past findings were tested between and within the samples through the guidance of the hypotheses.

CHAPTER 3

METHODOLOGY

The focus of this study was on the identification of opinion leaders within the physically disabled traveler market segments of the tourism industry and the pre-trip information sources people with disabilities rely upon in their decision-making process. Specifically, opinion leaders' existence or level within the physically disabled sample was identified; tourism information needs as they exist in this context were explored; and the extent to which various information sources were likely to be employed were described.

The methodology used in the study included the following steps: (a) instrumentation, (b) sampling design and survey administration, (c) sample size, (d) selection of participants, (e) survey administration, (f) mail survey response rate, (g) description of the sample; and (h) statistical tests and analyses.

INSTRUMENTATION

To meet the study objectives, a thorough review of opinion leadership measurement scales was conducted. Opinion leadership was measured applying Childers' (1986) Opinion Leadership Scale. The Opinion Leadership Scale, originally developed by King and Summers (1970), refined as recommended by Childers (1986) and Flynn, Goldsmith and Eastman (1994), was used to identify opinion leadership within the physically disabled and general samples. This revised Opinion Leadership Scale contains six items adaptable to different product categories was modified to fit

tourism and the disability segment (i.e., the use of vacation travel as the product category of study).

The Opinion Leadership Scale was operationalized on a five-point response format. Item scores were summed to form a range of 6 to 30. Originally this scale was developed by modifying an already existing self-designating measure of opinion leadership (Rogers, 1961; Rogers & Cartano, 1962). The modification omitted the word "new" to remove bias in favor of innovators. Childers' (1986) Opinion Leadership Scale offers several estimates of reliability and validity if the revised scale is used. These include internal consistency reliability estimate of 0.83 as well as an average item-to-total correlation of 0.62 and adequate levels of unidimensionality via structural equation modeling. Jamrozy, Backman and Backman (1996) applied the scale in a nature-based tourism context included an internal consistency reliability estimate of .88, a mean total sum score for the scale was 19.5, sd = 5.64. The Opinion Leadership Scale applied to vacation travel (Table 1) showed similar internal consistency reliability estimates and unidimensional structure as found by Childers (1986) and Jamrozy et al. (1996). The applied scale used in this vacation travel study included an internal consistency reliability estimate of 0.87, a mean total sum score of 18.66, sd = 5.22.

Table 1. Travel Opinion Leadership Scale Mean Scores

Opinion Leadership Measurement Items	Scale Text	Mean	SD
How often do you talk to your	Scale Text	IVICALI	<u> 3D</u>
friends and neighbors about vacation travel?	Never to Very Often	3.26 ^a	1.04
When you talk to your friends and	Give very little information		
family about vacation travel do you?	to Give a great deal of information	3.52	1.10
In the past 12 months, how many			
friends and family have you told about vacation destinations?	Told no one to Told 16 or more people	2.91	1.22
Compared with your friends and family, how likely are you to be	Not at all likely to be asked to Very likely to be		
asked about vacation travel?	asked	2.98	1.17
In discussions of vacation travel, which of the following happens most?	Your friends and family tell you about travel to You tell your friends and family about travel	2.90	1.06
Overall in all of your discussions with friends and family about	Not used as a source of advice to Often used as	2.75	
travel are you?	a source of advice	3.08	1.15
Overall opinion leadership score			
(Mean)		18.66	5.23
Cronbach's Alpha		.87	

^a all items were measured on a 5-point scale

Finally, a battery of scales covering the various travel experience, information seeking, and trip planning related to travel decision-making processes (Burnett & Paul, 1996; Vogt & Fesenmaier, 1998) were employed. These various travel measurement scales were chosen because they have been validated and found to be reliable instruments. Diffusion of information through response recollection of pre-trip information gathering for any leisure travel experience occurring in the past 12 months was examined.

SAMPLING DESIGN

The methods applied in the determination of sample size, participant selection and the survey administration process followed were outlined in this section. The study

^b n=578

sample size was established based upon a desired response rate goal and study funding limitations. Selection of participants within the physically disabled population posed a challenge due to privacy issues, population vulnerability issues and the fragmented nature of the people with disabilities population. This was overcome by the identification of the American Association of Persons with Disabilities organization and the voluntary, confidential use of their list of members who reside in Michigan, Ohio, Indiana and Illinois. Survey administration included the development of the study instrument, post card, final non-response bias survey instrument and a description of the steps taken to yield the highest response rate possible.

SAMPLE SIZE

The total study sample (N = 2,400) was comprised of a physically disabled sample study group and a general sample study group. The physically disabled sample study sample (N = 1,200) was randomly selected from the Michigan, Ohio, Indiana and Illinois American Associated of the Physically Disabled membership list. This group was labeled the disability sample study group and served as the experimental group within this study. The general sample study group was purchased from Survey Sampling International, a recognized organization for supplying study quality lists. The general sample study group was randomly drawn from a Michigan, Ohio, Indiana and Illinois data base list (N=1,200). The general sample served as the control group within this study. All respondent indicating a disability were removed from the general sample and moved to the disabled sample. Previous diffusion studies have identified the existence of opinion leaders within the general population, but no previous studies had identified opinion leadership within the physically disabled population. This control group was

needed to test the diffusion theory of opinion leadership within the physically disabled population. These numbers were selected to produce an estimated 400 completed surveys, with the disability group expected to reply approximately 10% higher than the general public. Due to the budget limitations of this privately-funded study, the sample size of 2,400 was considered sufficient.

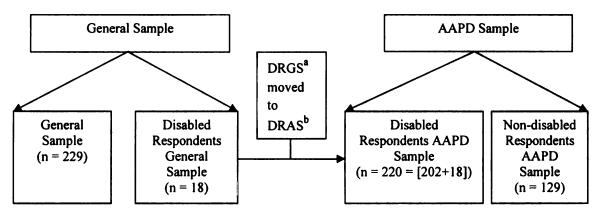
SELECTION OF PARTICIPANTS

Identification of opinion leaders within the physically disabled traveler sample was the primary interest of this study. For this reason, a disability group, the American Association of Persons with Disabilities (AAPD) was identified. The geographic area of Michigan, Ohio, Indiana and Illinois was selected by the study sponsor as the primary geographic area of interest. Every member of the AAPD residing in Michigan, Ohio, Indiana and Illinois possessed an equal chance of being randomly selected. A general sample list originating from the same geographic area, Michigan, Ohio, Indiana and Illinois was purchased from Survey Sampling Incorporated, a mail list company. Residents in the identified geographic area of Michigan, Ohio, Indiana and Illinois possessed an equal chance of being randomly selected.

The AAPD membership responses in this study revealed non-physically disabled people holding memberships within the organization. This information was not understood prior to a random sample being drawn from the AAPD membership list. The decision was made to forgo use of the AAPD non-physically disabled sample participants. This action was taken in order to ensure that survey response information obtained from AAPD members came from persons who live with a disability.

Additionally, the removal of the AAPD non-disabled sample from the study analysis acts to reduce bias that could have been introduced as a result of the differences highlighted above (i.e., age of the sample participants being younger and high household incomes reported). Figure 2 provides a visual representation of the general sample and the AAPD sample and how sample participants were assigned within this study.

Figure 2. Study Respondent Assigned Groups



- a. Disabled respondents general sample
- b. Disabled respondents AAPD sample

SURVEY ADMINISTRATION

A cover letter (Appendix A) was written for the physically disabled sample that requested any physically disabled person; over the age of 18; and who had vacation traveled within the past 12 months, to complete the survey. A different letter (Appendix A) was used for the general population requesting that a person; over the age of 18; and who had vacation traveled within the past 12 months, to complete the survey. A comparison of the general study sample to the physically disabled study sample was expected to reveal the effects of the experimental stimulus (Babbie, 2004); the similarities associated with opinion leadership and differences from being a person with a

disability. As suggested by Dillman (2000), incentives/gifts increase the response rate.

As an incentive for completing the survey, participants were informed that their name would be placed in a drawing for a two day-long vacation package to Frankenmuth,

Michigan - a popular Great Lakes State destination. This drawing occurred on September 1, 2007, and the winner was survey number 699.

A four-page self-administered questionnaire was employed (Appendix B for a copy of the survey instrument). Page one of the instrument featured a graphic of a globe with a variety of people in various life situations (i.e., a mother with stroller, a small child, an adult carrying a small child, a person in a wheel chair, a female with two young children, a male hiker). The survey instrument was printed on white, 8.5 inch by 11.0 inch paper for the physically disabled sample and on beige, 8.5 inch by 11.0 inch paper for the general sample. On May 1, 2007, each survey participant (1,200 – AAPD members and 1,200-General Sample members) were sent a personalized letter using a mail merge. This letter communicated vacation planning behavior as the focus for the study. It also included directions for completing the survey. The letter, survey instrument and a pre-addressed and postage paid envelope were folded and sent by first class U.S. mail on May 1, 2007. Each survey received a survey code number in order to track returned surveys on the master list (Table 2).

Table 2. Study Response Rate

Study samples	Overall Sample	Bad Address Undeliverable	Deceased	Dementia Institutionalized	Total Capable of Response	Response rate Unadjusted
AAPD Disabled &						
Non-disabled Sample	1,200	(129)	(6)	(1)	1,064	336
General Sample	1,200	(58)	0	0	1,142	250
Total	2,400	(187)	(6)	(1)	2,206	586

a: adjustments shown in Figure 2 and Table 3.

A postcard was developed to thank study participants for returning the survey in a timely manner and to serve as a reminder to those who had not yet responded to please take the time to respond (refer to Appendix C for specimen). The postcard was printed on green 4.25 inches by 5.5 inch paper and was sent on May 11, 2007 by U.S. first-class mail. Any survey, as referenced by the survey code number and returned prior to May 11, 2007 was removed prior to the May 11, 2007 postcard mailing.

On May 29, 2007, a third mailing was sent to all study participants who had not yet responded. The survey instrument was printed on white, 8.5 inch by 11.0 inch paper for the physically disabled study and on beige, 8.5 inch by 11.0 inch paper for the general sample. On May 29, 2007, each survey participant who had not yet responded was sent a personalized letter that provided a description of the study focus: vacation planning behavior and directions for completing the survey. The letter, survey instrument and a pre-addressed, postage paid envelope were sent by first class U.S. mail on May 29, 2007 (refer to Appendix D for specimen).

On June 30, 2007, a final non-response contact was made with 200 (100 general sample and 100 physically disabled sample) participants who were randomly selected

from the pool of non-respondents. These 200 people received an 8.5 inch by 11 inch letter printed on official Michigan State University, Department of Community, Agriculture, Recreation and Resource Studies letterhead. This letter included a final request for response and included six duplicate questions from the original survey instrument and one non-response bias questions. The six questions asked if the person had vacation traveled in the past 12 months and what information sources they consider most useful. The modified Opinion Leadership Scale was also duplicated within this letter along with a physical disability status question. The non-response letter asked for comments regarding travel and asked why they had not responded to earlier survey requests. This final mailing also provided an opportunity for survey respondents to comment regarding their non-response status to identify any non-response bias that may exist (Appendix E for a copy of the non-response questionnaire). To track returned surveys on the master list, each survey received a survey code number.

The results of this mailing produced fourteen responses (seven from the physically disabled sample and seven from the general sample). Two of the responses from the physically disabled sample indicated recipients cannot travel due to their disability. Two responses from the general sample indicating recipients do not travel. Four non-response instruments were returned completely blank (three from the physically disabled sample and one from the general sample). The two instruments received from the physically disabled respondents indicated both were opinion leaders, who had traveled in the past twelve months and considered the internet, friends and travel agents the three most useful vacation planning information sources. Each indicated health-

related reasons for not responding earlier. Of the seven instruments returned by the physically disabled sample, two were returned from opinion leaders (29%).

Of the four non-response bias instruments received from the general respondents, one indicated that they had no knowledge of Michigan State University and therefore did not respond, one indicated that they did not respond as a result of the instrument originating from Michigan State University and one indicated they possess too many job responsibilities and that travel was not a priority. The fourth responded that they do travel, consider the internet, travel agents and friends as the most useful vacation planning information sources and were identified as an opinion leader. No reason was provided as to why they had not responded earlier.

These non-response answers were useful to understand why individuals are unlikely to complete a questionnaire. Unfortunately the 14 returned instruments were too few in number to complete any analytical biases calculations.

After all the surveys were keyed, then a validity check for physically disabled respondents occurred in both samples. Respondents, whom self-identified as non-physically disabled were removed from the physically disabled study sample and assigned to the AAPD non-disabled sample (n = 123). Within the General sample, persons who identified themselves as physically disabled were assigned to the physically disabled study sample (n = 18). The three sample segments were general sample (n = 229), physically disabled sample (n = 220) and the AAPD non-physically disabled sample (n = 129); for a total study sample of (n = 578). The anticipated response rate

(n=840) was not generated by the survey instrument. The total study response rate (n=578) was much lower than expected based upon the processes followed.

For the purposes of this study, the AAPD non-physically disabled sample was not used for analysis (Table 3). The decision to forgo use of the AAPD non-physically disabled sample participants was made in order to ensure that survey response information obtained from AAPD members came from persons who live with a disability.

Table 3. Sample Respondents Organized by Disability

Response Rate (continued) AAPD Separated into Non- disabled and Disabled Sample	Response Rate	Cannot travel Due to Disability	Does Not Travel	Returned Blank	Disabled Removed From General Sample and Added to Disabled Sample	Adjusted Response
AAPD non-disabled	129	0	0	0	0	129
Disabled	207	(2)	0	(3)	18	220
sub-total	336					
General sample	250	0	(2)	(1)	(18)	229
Total	586	(2)	(2)	(4)	0	578

MAIL SURVEY RESPONSE RATE

To ensure the highest achievable response rates, Dillman's (2000) Tailored

Design Method was followed for implementing the mail survey. The Dillman procedure
has proven to significantly improve response rates.

SOURCES OF SURVEY ERROR

The methodology used to conduct this study may have introduced survey error in the data collected by way of the following (Dillman, 2000):

Sampling error may have occurred by surveying only a sample not the entire population and the precision of this sample's responses to estimate the entire population.

Coverage error was controlled for to the extent that the list providers included all the members of the population and those members all had the equal chance of being selected for the study.

Measurement error may have occurred based upon proper wording of questions and the respondent's ability or willingness to answer the questions accurately, precisely or the ability to compare their response to others in the study.

Non-response error may have occurred by way of respondents to the survey providing answers to questions that were different from the individuals who did not respond. To address non-response bias, a survey was mailed to 100 randomly selected AAPD member non-respondents and 100 randomly selected general sample non-respondents. Unfortunately the 14 returned instruments were too few in number to complete any analytical biases calculations.

DESCRIPTION OF THE SAMPLE

The general sample survey subjects were obtained through a purchased list from Survey Sampling International LLC (SSI), founded in 1977. This organization self

describes its services as the premier global provider of sampling solutions. For this study, SSI provided access to a random sample of resident's contact names, addresses, city, state, zip code and plus four in Michigan, Ohio, Indiana and Illinois. The population characteristics for all residents of Michigan, Ohio, Indiana and Illinois were supplied by SSI. Due to random selection from this population, these characteristics differ from the general sample data presented later in this study.

Table 4 was organized to highlight differences between the SSI general population characteristics and the AAPD disabled and non-disabled membership sample. Differences between the samples could be a source of bias. Since the AAPD organization does not possess population characteristics for their membership, responses from this study instrument were used to complete the comparison with the general population characteristics provided by SSI.

When considering the information provided by SSI, the general population can be characterized as 55% between the ages of 35 and 64 years of age, with 28% reporting to be 34 years of age or younger. Fifty percent of the general population reported generating an annual household income of \$40,000 or less with 66% reporting no children residing in the household.

Table 4. Population Characteristics Comparison of General Sample and Physically

Disabled Sample

	General Population	Physically Disabled Sample	Non-Physically Disabled Sample
	Sample (SSI) ^a	(AAPD)	(AAPD)
Age in years			
18-19	0.0%	0.5%	0.8%
20-24	9.7	2.3	2.3
25-34	18.3	8.2	11.6
35-44	19.6	13.6	15.5
45-54	20.2	24.5	27.9
55-64	14.7	31.8	27.1
65-74	8.9	12.3	12.4
75-84	6.0	4.5	1.6
85+	2.6	2.3	0.8
All Ages	100%	100%	100%
Income			
\$20,000 or less	23.3%	23.8%	2.7%
\$20,001-\$40,000	26.7	22.2	17.8
\$40,001-\$60,000	20.7	12.7	11.6
\$60,001-\$79,999	12.3	19.0	22.3
\$80,000 and more	17.0	22.2	45.6
Total	100%	100%	100%
Children in household			
Yes	33.9%	20.8%	29.8%
No	66.1	79.2	70.2
Total	100%	100%	100%

a: SSI did not indicate Non-responses

The physically disabled sample study participants were obtained from the American Association of People with Disabilities (AAPD), established on July 25, 1995. The American Association of People with Disabilities is self described as the largest national non-profit cross-disability membership organization in the United States, dedicated to ensure economic self-sufficiency and political empowerment for the more

SSI listed data on ages 0 - 19. No one under age 20 from the general sample participated in this tourism study

SSI listed household income in the following categories: \$0-9,999;

^{\$10,000-14,999;\$15,000-24,999;\$25,000-34,999;}

^{\$35,000-49,999;\$50,000-74,999;\$75,000-99,999;}

^{\$100,000-149,999;\$150,000-199,999;\$200,000-249,999;\$250,000+}

SSI income category data were adjusted and estimated to fit the tourism study categories

than 56 million Americans with disabilities. For the purposes of this study, a random sample of members from Michigan, Ohio, Indiana and Illinois was secured from the AAPD.

The physically disabled sample can be described as somewhat older. Over half of the physically disabled sample reported they were 55 years and older. The physically disabled sample reported annual household income of \$40,000 or less at a frequency of 46% and reported no children residing in the household at a rate of 79%. The AAPD non-disabled population can be characterized as somewhat younger with 71% reporting between the ages of 35 and 64 years of age, with 15% reporting to be 34 years of age or younger. The AAPD non-disabled sample reported generating the highest annual household income with 68% reporting household income of \$60,000 or more and 70% reporting no children residing in the household.

The removal of the AAPD non-disabled sample from the study analysis acts to reduce bias that could have been introduced as a result of the differences highlighted above (i.e., age of the sample participants being younger and high household incomes reported). Bias could be introduced as a result of the physically disabled sample reporting a slightly older participation base.

STATISTICAL TESTS AND ANALYSIS

Eleven research hypotheses were addressed in this study. These research questions generated primarily categorical and interval data. Use of cross-tabulations, chi-square statistics, independent samples *t* tests, paired samples *t* tests and a variety of descriptive statistics were recommended for use by Alreck and Settle (2004), Babbie

(2004), and Howell (2002), with data the survey instrument generated. The level of significance for tests were based on an alpha of <.05.

SUMMARY

The methodology applied to this study was introduced in Chapter 3. A study instrument was developed based on a thorough review of relevant literature and tested scales ensuring adequate estimates of reliability and validity throughout the instrument.

After development, the primary modified Opinion Leadership Scale was tested for validity and found to show similar internal consistency reliability estimates and unidimensional structure as applied in past studies. Sampling design was based on the Tailored Design Method developed by Dillman (2000). Sample size was 2,400, with 1,200 originating from a purchased randomly selected list of general population residents from Michigan, Ohio, Indiana and Illinois. The other 1,200 samples originated from the membership of the American Association of People with Disabilities who reside in Michigan, Ohio, Indiana and Illinois. This sample was also randomly selected.

Survey administration followed a multi-step process. Step one was the personalized cover letters communicating an incentive that was sent to each sample. Letter one was written for the physically disabled sample and requested that the physically disabled person, over the age of 18 and vacationed in the past 12 months complete the survey. The letter written for and sent to the general population also requested that a person over the age of 18 who had vacationed in the past 12 months complete the survey. A four page self-administered questionnaire (white for the

physically disabled sample and beige for the general public) was employed. A self-addressed and postage paid envelope also accompanied this original mailing.

Step two was a reminder post card thanking the participant for completing and returning the survey. The third step was a mailing that included a letter, survey instrument and self-addressed and postage paid envelope which was sent to non-respondents.

Step four was a final non-response contact made with 200 (100 physically disabled sample and 100 general sample) participants. These participants received a letter requesting a response with the Opinion Leadership Scale presented in the same format as on the original survey instrument. These participants were also provided the opportunity to comment regarding their non-response status and report any non-response bias. The number of responses was too small to draw any conclusions about potential non-response bias.

After keying the results, a validity check for physically disabled respondents resulted in removing 18 persons from the general population and assigning them to the physically disabled population. Additionally, AAPD non-disabled members were removed from the AAPD disabled members to create a separate sample group. For the purposes of this study, the AAPD non-disabled sample was not used for hypotheses analysis. The decision to forgo use of the AAPD non-physically disabled sample participants was made in order to ensure that survey response information obtained from AAPD members came from persons who live with a disability. Additionally, the removal of the AAPD non-disabled sample from the study analysis acts to reduce bias that could

have been introduced as a result of the differences highlighted above (i.e., age of the sample participants being younger and high household incomes reported).

Survey error that may have occurred while administering this study included but may not be limited to surveying only samples and not the entire population, coverage error, measurement error and non-response error. The general sample may be characterized as more than 50% between the ages of 35 and 64 years of age, annual household income of \$40,000 or less and over 60% reporting no children residing in the household. The disabled sample can be described as somewhat older with 70% being between the ages of 35 and 64 years of age and reporting an annual household income of \$40,000 or less by more than 40% of the sample respondents. Additionally, the physically disabled sample reported no children residing in the household at a rate of nearly 80%. The AAPD non-disabled population can be characterized as somewhat younger reporting over 70% being between the ages of 35 and 64 years of age and household income of \$60,000 with 70% reporting no children reside in the household. Eleven hypotheses were addressed generating primarily categorical and interval data. Cross-tabulations, chi-square statistics, independent samples t tests, paired samples t tests and a variety of descriptive statistics were used to address the study questions.

CHAPTER 4

RESULTS

This chapter is divided into four sections. The demographic profiles of all survey participants are described in section one. Results for the study participant's travel proclivity are highlighted in section two. Results for the general sample, physically disabled sample and AAPD non-disabled sample are presented in the first portion of section two. Participant's travel activities over the past 12 months are addressed first, followed by the number of day-long, short overnight and long overnight vacations participated in during this time period. Section two closes with general, physically disabled and AAPD non-disabled sample participant's recollection of a recent, memorable vacation trip taken in recent years. Areas identified include the month and year of their recent memorable trip. Next, participants were asked to identify the geographic location of the destination visited and if they had visited the destination before. Participants were then asked who was in their travel party, the geographic location of travel destination classified as Midwest, United States and international and a travel self assessment.

Section three focuses on the physically disabled sample travel proclivity. Self-categorization of disability severity level by opinion leadership classification is communicated first in this section. This is followed by the age and number of years study participants have lived with their disability. A series of tests applied to the physically disabled sample travel characteristics and travel self assessments follows.

Section three concludes with the physically disabled person's ratings of hospitality services. Results of the studies hypotheses testing are included in section four.

Respondents, self-identified as non-disabled, were removed from the physically disabled study sample and assigned to the AAPD non-disabled sample (n = 123). Within the general sample, persons who identified themselves as physically disabled were assigned to the physically disabled study sample (n = 18). Therefore, the three survey segments are general sample (n=229), physically disabled sample (n=220) and the AAPD non-disabled sample (n=129); for a total study sample of (n=578). The intent of this study is to understand the physically disabled traveler. The general sample was not the primary focus of the study. However, the general sample was important to compare the physically disabled population to gain an understanding of similarities and differences and test the level of information activities. The AAPD non-disabled sample was not used for analysis, but a demographic description and their propensity for travel is included for descriptive purposes.

DEMOGRAPHICS

Table 5 shows the gender distribution of the three samples. Males were represented at a greater level in the general sample (64.2%), females were represented at a greater level in both the physically disabled sample (58.6%) and the AAPD non-disabled sample (67.4%).

Table 5. Gender

		Physically	AAPD	
	General	Disabled	Non-disabled	
Gender	Sample	Sample	Sample	Total
Female	82 (35.8%)	129 (58.6%)	87 (67.4%)	298 (51.6%)
Male	147 (64.2)	91 (41.4)	42 (32.6)	280 (48.4)
Total	229 (100%)	220 (100%)	129 (100%)	578 (100%)

In all three samples, the most common age range reported was 50 to 59 years old. General sample participants reported 50 to 59 years (28.2%), followed by 60 to 69 years (19.9%), as shown in Table 6. For the physically disabled sample, participants reported 50 to 59 years old (33.3%) most frequently, followed by 60 to 69 years old (21.1%) and in the AAPD non-disabled sample, participants reported 50 to 59 years old (32.8%) most frequently, followed by 40 to 49 years old (18.9%).

Table 6. Age

	General	Physically Disabled	AAPD Non-disabled	
Age Ranges	Sample	Sample	Sample	Total
20 - 29 years	8 (3.7%)	14 (6.6%)	10 (8.2%)	32 (5.8%)
30 - 39 years	30 (13.9)	24 (11.3)	20 (16.4)	74 (13.4)
40 - 49 years	39 (18.1)	36 (16.9)	23 (18.9)	98 (17.8)
50 - 59 years	61 (28.2)	71 (33.3)	40 (32.8)	172 (31.2)
60 - 69 years	43 (19.9)	45 (21.1)	21 (17.2)	109 (19.8)
70 - 79 years	27 (12.5)	19 (8.9)	7 (5.7)	53 (9.6)
80 years and over	8 (3.7)	4 (1.9)	1 (0.8)	13 (2.4)
Total	216 (100%)	213 (100%)	122 (100%)	551 (100%)

As shown in Table 7, when asked to report the highest level of education obtained, the general sample reported a college degree was most frequently obtained (26.5%) followed by some college education obtained (22.8%).

For the physically disabled sample, obtaining an advanced degree or a college degree occurred at the same frequency (28.8%). The AAPD non-disabled sample reported obtaining an advanced degree most frequently (47.2%).

Table 7. Education

		Physically	AAPD	
III a de la conta CE torretion	General	Disabled	Non-disabled	T-4-1
Highest Level of Education	Sample	Sample	Sample	Total
Less than high school graduate	3 (1.4%)	5 (2.3%)	0 (0.0%)	8 (1.4%)
High school graduate	43 (20.0)	25 (11.6)	5 (4.1)	73 (13.2)
Technical school	16 (7.4)	2 (0.9)	0 (0.0)	18 (3.3)
Some college	49 (22.8)	44 (20.5)	14 (11.4)	107 (19.3)
College degree	57 (26.5)	62 (28.8)	23 (18.7)	142 (25.7)
Some graduate school	11 (5.1)	15 (7.0)	23 (18.7)	49 (8.9)
Advanced degree	36 (16.7)	62 (28.8)	58 (47.2)	156 (28.2)
Total	215 (100%)	215 (100%)	123 (100%)	553 (100%)

Almost three-quarters (72.0%) of the general sample and less than half (48.1%) of the physically disabled sample were currently married, as seen in Table 8. One-quarter (25.7%) of the physically disabled sample reported to have never been married and 9% reported being widowed (8.9%). Two-thirds (66.4%) of the AAPD non-disabled sample were married.

Table 8. Marital Status

Marital Status	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
Married	157 (72.0%)	103 (48.1%)	83 (66.4%)	343 (61.6%)
Never married	19 (8.7)	55 (25.7)	19 (15.2)	93 (16.7)
Divorced or separated	30 (13.8)	37 (17.3)	14 (11.2)	81 (14.5)
Widowed	12 (5.5)	19 (8.9)	9 (7.2)	40 (7.2)
Total	218 (100%)	214 (100%)	125 (100%)	557 (100%)

One-quarter (25.9%) of the general sample reported a household income of \$40,000 to \$59,999 with household income of \$60,000 to \$79,999 reported at the next most frequent level (22.9%), as shown in Table 9. Within the physically disabled sample, study participants reported household income of \$20,000 and less most frequently

(23.8%) with household income of \$20,000 to \$39,999 reported at the next most frequent level (22.2%). One-third (31.3%) of the AAPD non-disabled sample reported household income greater than \$100,000 and reported household income of \$60,000 to \$79,999 at the next most frequent level (22.3%).

Table 9. Household Income

	General	Physically Disabled	AAPD Non-disabled	
Household Income	Sample	Sample	Sample	Total
Less than \$20,000	9 (4.5%)	45 (23.8%)	3 (2.7%)	57 (11.4%)
\$20,000 to \$39,999	27 (13.4)	42 (22.2)	20 (17.9)	89 (17.7)
\$40,000 to \$59,999	52 (25.9)	24 (12.7)	13 (11.6)	89 (17.7)
\$60,000 to \$79,999	46 (22.9)	36 (19.0)	25 (22.3)	107 (21.3)
\$80,000 to \$99,999	26 (12.9)	12 (6.3)	16 (14.3)	54 (10.8)
\$100,000 or greater	41 (20.4)	30 (15.9)	35 (31.3)	106 (21.1)
Total	201 (100%)	189 (100%)	112 (100%)	502 (100%)

Table 10 shows that nearly three-quarters (72.6%) of the general sample reported no children of 19 years of age or under residing in the household. Three-quarters (79.2%) of the physically disabled sample had no children 19 years of age or under residing in the household. Seven out of ten of the AAPD non-disabled sample participants' reported no children in the household (70.2%).

Table 10. Children in Household

Children in Household	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
Yes	60 (27.4%)	45 (20.8%)	37 (29.8%)	142 (25.4%)
No	159 (72.6)	171 (79.2)	87 (70.2)	417 (74.6)
Total	219 (100%)	216 (100%)	124 (100%)	559 (100%)

The general sample may be summarized as primarily male (64.2%), age between 50 and 59 years old (28.2%), with a college degree (26.5%), household income between \$40,000 and \$59,999 (25.9%), married (72.0%), and no children in the household under 19 years of age (72.6%), a summary of results is shown in Table 11.

Table 11. Overview of Demographic Results

Table 11. Overview of D	cinogre		Physically	AAPD	
_		General	Disabled	Non-disabled	
Overview	n	Sample	Sample	Sample	Total
Gender	578				
Female		35.8%	58.6%	67.4%	51.6%
Male		64.2	41.4	32.6	48.4
Age	551				
20 – 29		3.7	6.6	8.2	5.8
30 – 39		13.9	11.3	16.4	13.4
40 – 49		18.1	16.9	18.9	17.8
50 – 59		28.2	33.3	32.8	31.2
60 – 69		19.9	21.1	17.2	19.8
70 – 79		12.5	8.9	5.7	9.6
80 years and over		3.7	1.9	.8	2.4
Highest Education Attained	553				
Less than high school		1.4	2.3	.0	1.4
High school graduate/GED		20.0	11.6	4.1	13.2
Technical school		7.4	.9	.0	3.3
Some college (no degree)		22.8	20.5	11.4	19.3
College degree		26.5	28.8	18.7	25.7
Some graduate school		5.1	7.0	18.7	8.9
Advanced degree		16.7	28.8	47.2	28.2
2006 Household Income	502				
Less than \$20,000		4.5	23.8	2.7	11.4
\$20,000 to \$39,999		13.4	22.2	17.9	17.7
\$40,000 to \$59,999		25.9	12.7	11.6	17.7
\$60,000 to \$79,999		22.9	19.0	22.3	21.3
\$80,000 to \$99,999		12.9	6.3	14.3	10.8
\$100,000 and greater		20.4	15.9	31.3	21.1
Marital Status	557				
Married		72.0	48.1	66.4	61.6
Never married		8.7	25.7	15.2	16.7
Divorced or separated		13.8	17.3	11.2	14.5
Widowed		5.5	8.9	7.2	7.2
Children in Household	559				
Yes		27.4	20.8	29.8	25.4
No		72.6	79.2	70.2	74.6

The physically disabled sample may be summarized as primarily female (58.6%), between age 50 and 59 (33.3%), with a college or advanced degree (46.6%), household

income between \$20,000 and less (23.8%), never married (25.7%), and no children in the household under 19 years of age (79.2%). Results are presented in Table 11.

The AAPD non-disabled sample may be summarized as primarily female (67.4%), age 50 - 59 (32.8%), with an advanced degree (47.2%), household income greater than \$100,000 (31.3%), married (66.4%), and no children in the household under 19 years of age (70.2%). Results are shown in Table 11.

TRAVEL PROCLIVITY

Results for the general, physically disabled and AAPD non-disabled samples are highlighted in the first portion of the section. Study participants were asked to recall travel activities over the past 12 months. Specifically, the general, physically disabled and AAPD non-disabled sample participants were asked to address the number of daylong, short overnight and long overnight vacations they participated in during this time period.

The general, physically disabled and AAPD non-disabled sample participants were then asked to recall a recent, memorable vacation trip taken in recent years. The first areas identified are the month and year of their recent memorable trip. Next, participants were asked to identify the geographic location of the destination visited and if they had visited the destination before. Participants were then asked who was in their travel party, geographic location of travel destination, classified as Midwest, United States and international, and travel self assessment.

Since the intent of this study was to understand the physically disabled traveler, the focus of the section turns to the results specific to the physically disabled non-opinion

leader and opinion leader study sample. The physically disabled sample was asked to self-classify the level of their physical disability, communicate the age that they became physically disabled and asked to identify the number of years they have lived with their disability. The next area to be addressed was the physically disabled non-opinion leaders and opinion leader's proclivity to travel for vacation or leisure purposes. This section concludes with the physically disabled non-opinion leaders and opinion leaders rating of disability services.

The general, physically disabled and AAPD non-disabled samples were asked how many day-long vacations that they have taken in the past 12 months. Table 12 shows the greatest number of general sample participants reported taking no day-long vacations in the past 12 months (44.1%) with one to five day-long vacation taken reported with the next greatest frequency (41.5%). The physically disabled sample reported taking no day-long vacations at the greatest frequency (43.2%). This was followed by physically disabled sample participation in one to five day-long vacations at the next most frequent rate (40.0%). The AAPD non-disabled sample participants reported not participating in day-long vacations at the highest rate (41.1%) with participation in one – five day-long vacations at the next most frequent level (39.5%).

Table 12. Number of Day-long Vacations Taken in Past 12 Months

Number of Day- long Vacations	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
0	101 (44.1%)	95 (43.2%)	53 (41.1%)	246 (43.1%)
1 – 5	95 (41.5)	88 (40.0)	51 (39.5)	234 (40.5)
6 – 11	18 (7.9)	22 (10.0)	18 (14.0)	58 (10.0)
12 – 16	9 (3.9)	7 (3.2)	4 (3.1)	20 (3.5)
17 – 20	2 (0.9)	3 (1.4)	2 (1.6)	7 (1.2)
21 and greater	4 (1.7)	5 (2.3)	1 (0.8)	10 (1.7)
Total	229 (100%)	220 (100%)	129 (100%)	578 (100%)

The general, physically disabled and AAPD non-disabled sample were asked how many short overnight (2 to 4 days in length) vacations that they have taken in the past 12 months. As seen in Table 13, the greatest number of general sample participants reported taking one to five short overnight vacations in the past 12 months (56.3%) with taking no short overnight vacations at the next greatest frequency (30.1%). The physically disabled sample reported taking one to five short overnight vacations at the greatest frequency (53.2%) followed by no short overnight vacations (33.2%). The AAPD non-disabled sample participants reported one to five short overnight vacations in the past 12 months at the highest rate (68.2%) followed by no short overnight vacations taken (19.4%).

Table 13. Number of Short Overnight Vacations Taken in Past 12 Months

		Physically	AAPD	
Number of Short	General	Disabled	Non-disabled	
Overnight Vacations	Sample	Sample	Sample	Total
0	69 (30.1%)	73 (33.2%)	25 (19.4%)	167 (28.9%)
1 - 5	129 (56.3)	117 (53.2)	88 (68.2)	334 (57.8)
6 - 11	26 (11.4)	20 (9.1)	14 (10.9)	60 (10.4)
12 – 16	2 (0.9)	3 (1.4)	2 (1.6)	7 (1.2)
17 – 20	1 (0.4)	5 (2.3)	0 (0.0)	6 (1.0)
21 and greater	2 (0.9)	2 (0.9)	0 (0.0)	4 (0.7)
Total	229 (100%)	220 (100%)	129 (100%)	578 (100%)

The general, physically disabled and AAPD non-disabled samples were asked how many long overnight (five or more days in length) vacations that they have taken in the past 12 months. As seen in Table 14, the greatest number of general sample participants reported taking one to five long overnight vacations in the past 12 months (42.4%), with no long overnight vacation taken reported with the next greatest frequency (39.3%). The physically disabled sample reported taking no long overnight vacations at the greatest frequency (49.1%). This was followed by the physically disabled sample participation in one to five long overnight vacations at the next most frequent rate

(38.2%). The AAPD non-disabled sample participants reported taking one to five long overnight vacations at the greatest rate (51.2%) and taking no long overnight vacations in the past 12 months at a rate of (30.2%).

Table 14. Number of Long Overnight Vacations Taken in Past 12 Months

		Physically	AAPD	
Number of Long Overnight	General	Disabled	Non-disabled	
Vacations	Sample	Sample	Sample	Total
0	90 (39.3%)	108 (49.1%)	39 (30.2%)	237 (41.0%)
1 – 5	97 (42.4)	84 (38.2)	66 (51.2)	247 (42.7)
6 – 11	26 (11.4)	22 (10.0)	18 (14.0)	66 (11.4)
12 – 16	13 (5.7)	3 (1.4)	2 (1.6)	18 (3.1)
17 – 20	1 (0.4)	2 (0.9)	3 (2.3)	6 (1.0)
21 and greater	2 (0.9)	1 (0.5)	1 (0.8)	4 (0.7)
Total	229 (100%)	220 (100%)	129 (100%)	578 (100%)

The general, physically disabled and AAPD non-disabled sample participants were asked to recall a recent, memorable vacation trip taken in recent years. The first area identified was to report on the month of their recent memorable trip, as shown in Table 15. The general sample identified July as the most frequent month for travel (13.2%) with September identified as the next most frequent month for travel (11.7%). The physically disabled sample identified July as the most frequent month for travel (18.6%) followed by August (11.9%). The AAPD non-disabled sample reported at July was the most frequently identified month for travel (16.5%) closely followed by August (13.2%).

Table 15. Trip Month of Recent Memorable Trip

		Physically	AAPD	
	General	Disabled	Non-disabled	
Most Recent Trip Month	Sample	Sample	Sample	Total
January	5 (2.4%)	9 (4.6%)	0 (0.0%)	14 (2.7%)
February	13 (6.3)	7 (3.6)	6 (5.0)	26 (5.0)
March	18 (8.8)	16 (8.2)	7 (5.8)	41 (7.9)
April	23 (11.2)	16 (8.2)	19 (15.7)	58 (11.2)
May	19 (9.3)	10 (5.2)	12 (9.9)	41 (7.9)
June	19 (9.3)	20 (10.3)	13 (10.7)	52 (10.0)
July	27 (13.2)	36 (18.6)	20 (16.5)	83 (16.0)
August	23 (11.2)	23 (11.9)	16 (13.2)	62 (11.9)
September	24 (11.7)	12 (6.2)	11 (9.1)	47 (9.0)
October	11 (5.4)	21 (10.8)	5 (4.1)	37 (7.1)
November	8 (3.9)	13 (6.7)	4 (3.3)	25 (4.8)
December	15 (7.3)	11 (5.7)	8 (6.6)	34 (6.5)
Total	205 (100%)	194 (100%)	121 (100%)	520 (100%)

The general, physically disabled and AAPD non-disabled sample participants were asked to recall a recent, memorable vacation trip taken in recent years. Table 16 provides information regarding the year of a recent memorable trip. All three samples identified 2006 or 2007 as the time period of their memorable trip with frequencies reported by the general sample (56.7%), the physically disabled sample (52.5%) and AAPD non-disabled sample reporting (68.3%).

Table 16. Trip Year of Recent Memorable Trip

Most Recent Trip Year	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
2006 - 2007	118 (56.7%)	104 (52.5%)	84 (68.3%)	306 (57.8%)
2000 - 2005	77 (37.0)	76 (38.4)	31 (25.2)	184 (34.8)
1990 – 1999	8 (3.8)	11 (5.6)	6 (4.9)	25 (4.7)
1980 – 1989	2 (1.0)	5 (2.5)	2 (1.6)	9 (1.7)
1979 and prior	3 (1.4)	2 (1.0)	0 (0.0)	5 (0.9)
Total	208 (100%)	198 (100%)	123 (100%)	529 (100%)

Table 17 provides information regarding the geographic location of their most memorable trip destination visited. Responses were coded into five distinct categories.

The categories include states of the survey (Michigan, Ohio, Indiana and Illinois), other United States (states not in the survey area), Canada, Mexico and all other international countries (not including Canada and Mexico). The general sample identified other United States as the location of their memorable trip destination (61.5%) with all other international destination locations as the next most frequently reported destination (18.0%). The physically disabled sample identified other United States as the location of their memorable trip destination (71.2%) followed by the states of the survey as the location of their memorable trip destination (11.1%). The AAPD non-disabled sample reported other United States as the location of their memorable trip destination (54.8%) with all other international as their next most memorable trip destination (21.8%).

Table 17. Geographic Location of Recent Memorable Trip Destination Visited

Geographic Location of the Destination Visited	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
States of survey ^a	25 (12.2%)	22 (11.1%)	14 (11.3%)	61 (11.6%)
Other US States ^b	126 (61.5)	141 (71.2)	68 (54.8)	335 (63.6)
Canada	5 (2.4)	6 (3.0)	7 (5.6)	18 (3.4)
Mexico	12 (5.9)	8 (4.0)	8 (6.5)	28 (5.3)
All other international				
countries ^c	37 (18.0)	21 (10.6)	27 (21.8)	85 (16.1)
Total	205 (100%)	198 (100%)	124 (100%)	527 (100%)

a: Includes responses from Michigan, Ohio, Indiana and Illinois

Referring to the memorable vacation trip, sample participants were asked; Prior to this trip, had you visited this destination before? As shown in Table 18, over 50% of both the general sample (52.6%) and the physically disabled sample (54.5%) responded that they had visited the destination prior to their most recent memorable vacation. The AAPD non-disabled sample reported nearly a 50% split in yes/no responses.

b: Includes all United States not included in states of survey

C: Includes all international countries except for Canada and Mexico

Table 18. Visited Destination Before Recent Memorable Trip

With IR state R 6	General	Physically Disabled	AAPD Non-disabled	Tabl
Visited Destination Before	Sample	Sample	Sample	Total
Yes	111 (52.6%)	109 (54.5%)	61 (49.6%)	281 (52.6%)
No	100 (47.4)	91 (45.5)	62 (50.4)	253 (47.4)
Total	211 (100%)	200 (100%)	123 (100%)	534 (100%)

Continuing to refer to the memorable vacation trip, the general, physically disabled and AAPD non-disabled sample participants were asked to describe their travel party composition, see Table 19. All three samples reported that over 50% of each sample had traveled with family; with the general sample reporting (66.8%), the physically disabled sample (59.3%) and the AAPD non-disabled sample (62.1%). Travel parties consisting of friends followed with the general sample reporting (14.2%) and the physically disabled sample (15.2%), however the AAPD non-disabled sample reported travel with friends (12.9%) and travel alone (12.1%) at nearly the same rate.

Table 19. Travel Party Composition for the Recent Memorable Trip

Travel Party	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
Family	141 (66.8%)	121 (59.3%)	77 (62.1%)	339 (62.9%)
Friends	30 (14.2)	31 (15.2)	16 (12.9)	77 (14.3)
Tour group	2 (0.9)	6 (2.9)	3 (2.4)	11 (2.0)
Yourself	15 (7.1)	20 (9.8)	15 (12.1)	50 (9.3)
Family and friends	15 (7.1)	20 (9.8)	9 (7.3)	44 (8.2)
Family, friends and tour				
group	2 (0.9)	3 (1.5)	1 (0.8)	6 (1.1)
Family and tour group	2 (0.9)	0 (0.0)	2 (1.6)	4 (0.7)
Friends and tour group	4 (1.9)	3 (1.5)	1 (0.8)	8 (1.5)
Total	211 (100%)	204 (100%)	124 (100%)	539 (100%)

Travel proclivity results for the three samples are summarized in Table 20. The general sample can be characterized as follows; in the past 12 months 56% participated in 1 to 5 short overnight vacations and 42% took 1 to 5 long overnight vacations. July was preferred by 13% of the general sample as the month for travel.

A majority of the general sample (57%), recalled a memorable trip that took place in 2006 or 2007. For 62% of the general population, this memorable trip took place within the United States, but outside of the states of Michigan, Ohio, Indiana or Illinois with 53% having visited the destination before. The general population reported traveling with family most frequently, (67%) as seen in Table 20.

Table 20. Overview of Travel Proclivity Results

Table 20. Overview of	ravei P	rochvity Resu	Physically	AAPD	
Travel Proclivity in Past		General	Disabled	Non-disabled	
Twelve Months	n	Sample	Sample	Sample	Total
Day-long Vacations Past Twelve Months	578				
0		44.1%	43.2%	41.1%	43.1%
1-5		41.5	40.0	39.5	40.5
6 – 11		7.9	10.0	14.0	10.0
12 – 16		3.9	3.2	3.1	3.5
17 – 20	•	.9	1.4	1.6	1.2
21 and greater		1.7	2.3	.8	1.7
Short Overnight					
Vacations Past Twelve Months	578				
0		30.1	33.2	19.4	28.9
1-5		56.3	53.2	68.2	57.8
6 – 11		11.4	9.1	10.9	10.4
12 – 16		.9	1.4	1.6	1.2
17 – 20		.4	2.3	.0	1.0
21 and greater		.9	.9	.0	0.7
Long Overnight					
Vacations Past	570				
Twelve Months	578		40.4	20.2	
0		39.3	49.1	30.2	41.0
1 – 2		42.4	38.2	51.2	42.7
3 – 4		11.4	10.0	14.0	11.4
5 – 10		5.7	1.4	1.6	3.1
11 – 15		.4	.9	2.3	1.0
16 and greater		.9	.5	.8	0.7
Trip Month in Past Twelve Months	520				
January		2.4	4.6	.0	2.7
February		6.3	3.6	5.0	5.0
March		8.8	8.2	5.8	7.9
April		11.2	8.2	15.7	11.2
May		9.3	5.2	9.9	7.9
June		9.3	10.3	10.7	10.0
July		13.2	18.6	16.5	16.0
August		11.2	11.9	13.2	11.9
September		11.7	6.2	9.1	9.0
October		5.4	10.8	4.1	7.1
November		3.9	6.7	3.3	4.8
December		7.3	15.7	6.6	6.5

Table 20 (continued). Travel Proclivity Overview Past Twelve Months

Travel Proclivity Past Twelve Months Continued	n	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	Total
Most Recent Trip Year	529				
2006 – 2007		56.7	52.5	68.3	57.8%
2000 – 2005		37.0	38.4	25.2	34.8
1990 – 1999		3.8	5.6	4.9	4.7
1980 – 1989		1.0	2.5	1.6	1.7
1979 and prior		1.4	1.0	.0	0.9
Most Recent Trip Geographic Location Destination Visited	527				
States of survey		12.2	11.1	11.3	11.6
Other US States		61.5	71.2	54.8	63.6
Canada		2.4	3.0	5.6	3.4
Mexico		5.9	4.0	6.5	5.3
All other international countries		18.0	10.6	21.8	16.1
Most Recent Trip Visited Destination Before	534				
Yes		52.6	54.5	49.6	52.6
No		47.4	45.5	50.4	47.4
Most Recent Trip Travel Party	539				
Family		66.8	59.3	62.1	62.9
Friends		14.2	15.2	12.9	14.3
Tour group		.9	2.9	2.4	2.0
Yourself		7.1	9.8	12.1	9.3
Family and friends		7.1	9.8	7.3	8.2
Family, friends and tour group		.9	1.5	.8	1.1
Family and tour group		.9	.0	1.6	0.7
Friends and tour group		1.9	1.5	.8	1.5

The physically disabled sample can be characterized as follows; 53% participated in 1 to 5 short overnight vacations. Almost half of physically disabled sample members took no long overnight vacations. July was the month 19% of the physically disabled sample indicated as the preferred travel month. The most memorable trip recalled occurred in 2006 or 2007 as reported by 53% of the physically disabled sample. This most memorable trip took place within the United States, but did not include a visit to

Michigan, Ohio, Indiana or Illinois as reported by 71% of the physically disabled sample. The physically disabled sample reported at a rate of 55% that they had visited the destination before prior to their most memorable visit and 59% reported traveling with family, as seen in Table 20.

The AAPD non-disabled sample can be characterized as follows; in the past 12 months 68% participated in 1 to 5 short overnight vacations and 51% took 1 to 5 long overnight vacations. July was preferred by 17% of the AAPD non-disabled sample as the month for travel. A majority of the AAPD non-disabled sample (68%) recalled a memorable trip that occurred in 2006 or 2007. For 55% of the AAPD non-disabled sample, this memorable trip took place within the United States, but did not include a visit to Michigan, Ohio, Indiana or Illinois. Half of the AAPD non-disabled sample reported having not visited the destination before and 62% reported that they had traveled with family, as seen in Table 20.

PERCEIVED TRAVEL EXPERIENCE

The general, physically disabled and AAPD non-disabled samples were asked to identify their level of agreement with the statements: "I travel a lot in the Midwest"; "I travel a lot in the United States" and, "I travel a lot internationally." Their level of agreement for their perceived travel behavior was based on a five-point scale; with one being strongly disagree, 3 neutral, to 5 strongly agree. An ANOVA was computed comparing the level of agreement score for each of the statements across the three samples.

The item, "Midwest Vacation Experience" showed no significant difference among the sample groups (F(2, 575) = 2.96, p > .05). These results are presented in Table 21.

Table 21. Perceptions of Travel by Geographic Location of Destination

Geographic Location of Travel Destination	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	F-Ratio	р
Midwest	3.32 ^a (1.3 ^b)	3.33 (1.3)	3.64 (1.2)	2.96	.053 ^c
United States	3.24 (1.2)	3.36 (1.2)	3.43 (1.2)	1.85	.158
International	2.23 (1.34)	2.01 (1.4)	2.22 (1.3)	1.85	.158

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

Table 21 shows the response for the statement; "I travel a lot in the United States." The item "I travel a lot in the United States" showed no significant difference among the samples (F(2, 575) = 1.85, p > .05).

Table 21 also shows the response for the statement; "I travel a lot internationally." The item "I travel a lot internationally" showed no significant difference among the samples (F(2, 575) = 1.85, p > .05).

The general, physically disabled and AAPD non-disabled samples were asked to identify their level of agreement with the statements: "I consider myself a well-traveled person"; and, "I consider myself a skilled traveler." Level of agreement for their perceived travel experience was based on a five-point scale; with one being strongly disagree, 3 neutral, to 5 strongly agree. An ANOVA was computed comparing the level of agreement score for each of the statements across the three samples. With regard to

b: Standard deviation

c: Significance at p < .05

both statements and all three samples, each reported their level of agreement or disagreement as neutral or average. Specifics regarding the analysis follow.

The item, "I consider myself a well-traveled person" showed no significant difference among the sample groups (F(2, 575) = 1.82, p > .05). These results are presented in Table 22.

Table 22. Perceived Self Assessment for Travel

Travel Self Assessment	General Sample	Physically Disabled Sample	AAPD Non-disabled Sample	F	р
Well-traveled	2.76 ^a (1.2 ^b)	2.77 (1.3)	3.00 (1.1)	1.82	.163 ^c
Skilled traveler	2.90 (1.2)	2.95 (1.3)	3.21 (1.1)	2.78	.063

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

The item, "I consider myself a skilled traveler" showed no significant difference among the sample groups (F(2, 575) = 2.78, p > .05). These results are presented in Table 22.

PHYSICALLY DISABLED SAMPLE TRAVEL PROCLIVITY

The premise of this study is to understand the physically disabled traveler therefore; the general and AAPD non-disabled sample will not be used for analysis within this section. The following information will provide research findings specific to the physically disabled sample. Since this study centers on the identification of opinion leadership within the physically disabled sample, the results are differentiated as physically disabled sample non-opinion leaders and physically disabled sample opinion leaders. To identify the presence of opinion leadership in this research, the Opinion

b: Standard deviation

c: Significance at p < .05

Leadership Scale authored by Childers (1986) was applied. This scale was modified to fit tourism by Jamrozy et al. (1996) where the scale was applied in a nature-based tourism context, this study applies the Opinion Leadership Scale to the disability segment as it pertains to vacation travel planning. When tested by Childers (1986), the Opinion Leadership Scale included internal consistency reliability estimate of 0.83, an average item-to-total correlation of 0.62 and adequate testing of unidimensionality via structural equation modeling.

Jamrozy et al. (1996) modified the Childers (1986) scale and applied the scale in nature-based tourism context. When tested, the Jamrozy et al. (1996) modified scale included an internal consistency reliability estimate of 0.88; a mean total sum score for the scale was 19.5 and a standard deviation of 5.64.

The Opinion Leadership Scale as applied within this study to the disability segment and applied to vacation travel planning showed similar internal consistency reliability estimates and unidimensional structure as found by Childers (1986) and Jamrozy et al. (1996). The Opinion Leadership Scale applied in this study reported an internal consistency reliability estimate of 0.87; a mean total sum score of 18.66 and a standard deviation of 5.22.

The Opinion Leadership Scale was operationalized on a five-point response format. A mean score was calculated by adding up the responses (scale 1 to 5) on the six items that form the Opinion Leadership Scale (range of 6 to 30). The mean score of 18.66 on the Opinion Leadership Scale segmented the opinion leader from the non-opinion leader, following the approach used in Jamrozy et al. (1996). Descriptive

statistics on the Opinion Leadership Scale is presented in Table 1. Within the physically disabled sample 58% of study participants were identified as opinion leaders with 42% being identified as non-opinion leaders.

The physically disabled sample participant's self-categorization of disability severity level by opinion leadership classification was presented in section three. This is followed by the age and number of years physically disabled that study participants have lived with their disability. A series of tests applied to the physically disabled sample travel characteristics and travel self assessments follows. Section three concludes with the physically disabled person's ratings of hospitality services.

Physically disabled sample study participants were asked to classify their disability as severe, moderate or minor. Severe (47.0%) and moderate disabilities (47.0%) were most common among the physically disabled sample non-opinion leaders with only a few reporting minor disabilities, as shown in Table 23. Among the physically disabled opinion leader sample, moderate disabilities (55.3%) were more common than severe (43.9%), however, the difference between the two classifications was not significant ($X^2 = 4.9$, p > .05)

Table 23. Classification of Physical Disability

Classification	Physically Disabled Non-opinion Leader	Physically Disabled Opinion Leader	m . 1	X ²	
of disability	Sample	Sample	Total	(df = 2)	p
Severe	39 (47.0%)	50 (43.9%)	45.2%		
Moderate	39 (47.0)	63 (55.3)	51.8		
Minor	5 (6.0)	1 (0.1)	3.0		
Total	83 (100%)	114 (100%)	197 (100%)	4.92	.09 ^a

a: Significance at p < .05

Physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked to identify the age when they became physically disabled, see Table 24. Birth to 12 years of age was the most common response by the physically disabled sample non-opinion leader (26.2%), with ages 50 to 59 being reported at the next greatest frequency (16.7%). Birth to 12 years of age was also the most common response by the physically disabled sample opinion leader (27.4%). Age 13 to 19 was the next most frequent age reported by the physically disabled sample opinion leader (15.9%).

Table 24. Age Became Physically Disabled

	Physically Disabled Non-opinion Leader	Physically Disabled Opinion Leader	
Age Range Physically Disabled	Sample	Sample	Total
Birth ^a – 12	22 (26.2%)	31 (27.4%)	53 (26.9%)
13 – 19	8 (9.5)	18 (15.9)	26 (13.2)
20 – 29	15 (6.0)	14 (12.4)	29 (14.7)
30 – 39	7 (8.3)	17 (15.0)	24 (12.2)
40 – 49	7 (8.3)	16 (14.2)	23 (11.7)
50 – 59	14 (16.7)	9 (8.0)	23 (11.7)
60 – 69	7 (8.3)	6 (5.3)	13 (6.6)
70 – 79	4 (4.8)	1 (0.9)	5 (2.5)
80 – 89	0 (0.0)	1 (0.9)	1 (0.5)
Total	84 (100%)	113 (100%)	197 (100%)

a: According to resocialization theory (Kraus & Stoddard, 1989) 10% of currently physically disabled people were born with their disability. This study sample's frequency of participants born with a disability is slightly higher (13.7%) n=27.

Physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked to identify the number of years they have lived with their disability. As shown in Table 25, physically disabled sample non-opinion leaders reported most frequently that they have lived with their disability for 1 to 12 years (34.2%) with 30 to 39 years reported next most frequently (19%). The physically

disabled sample opinion leader also reported at the highest level that they have lived with their disability for 1 to 12 years (28.8%), with ages 20 to 29 being reported at the next greatest frequency (22.5%).

Table 25. Number of Years Lived with Disability

Years Lived with Disability	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	Total
1 – 12	27 (34.2%)	32 (28.8%)	59 (31.1%)
13 – 19	10 (12.7)	18 (16.2)	28 (14.7)
20 – 29	12 (15.2)	25 (22.5)	37 (19.5)
30 – 39	15 (19.0)	13 (11.7)	28 (14.7)
40 – 49	3 (3.8)	5 (4.5)	8 (4.2)
50 – 59	6 (7.6)	12 (10.8)	18 (9.5)
60 – 69	5 (6.3)	6 (5.4)	11 (5.8)
70 – 79	1 (1.3)	0 (0.0)	1 (0.5)
Total	79 (Ì00%)	111 (100%)	190 (100%)

The physically disabled sample non-opinion leaders and the physically disabled sample opinion leaders were asked to recall a recent, memorable vacation trip taken in recent years, results are presented in Table 26. Travel behavior results are presented to provide information specific to the physically disabled traveler's memorable vacation trip taken in recent years and are not represented in the hypotheses tests. Other travel variables specific to the physically disabled traveler non-opinion leaders and opinion leader (i.e., rate of travel) are included in hypotheses tests. The first area identified was to report on the month of their recent most memorable trip. The physically disabled sample non-opinion leaders identified July as the most frequent month for travel (16.4%) with June and August immediately following reporting the next most frequent months of travel (13.7%). Physically disabled sample opinion leaders also identified July as the most frequent month for travel (19.8%) with August and October as the next most frequent months of travel (10.7%).

Table 26. Recent Trip - Month Preferred for Physically Disabled Sample

	Physically		
	Disabled	Physically	
	Non-opinion	Disabled	
	Leader	Opinion Leader	
Most Recent Trip Month	Sample	Sample	Total
January	4 (5.5%)	5 (4.1%)	9 (4.6%)
February	3 (4.1)	4 (3.3)	7 (3.6)
March	8 (11.0)	8 (6.6)	16 (8.2)
April	5 (6.8)	11 (9.1)	16 (8.2)
May	4 (5.5)	6 (5.0)	10 (5.2)
June	10 (13.7)	10 (8.3)	20 (10.3)
July	12 (16.4)	24 (19.8)	36 (18.6)
August	10 (13.7)	13 (10.7)	23 (11.9)
September	2 (2.7)	10 (8.3)	12 (6.2)
October	8 (11.0)	13 (10.7)	21 (10.8)
November	3 (4.1)	10 (8.3)	13 (6.7)
December	4 (5.5)	7 (5.8)	11 (5.7)
Total	73 (100%)	121 (100%)	194 (100%)

The physically disabled sample non-opinion leaders and opinion leaders were asked to recall a recent, memorable vacation trip taken in recent years. Table 27 provides information regarding the year of their recent most memorable trip. The physically disabled sample non-opinion leaders identified the years 2000 to 2005 most frequently (48.0%), with 2006 at a reported rate (32.0%) and 2004 (14.7%). Whereas, the physically disabled sample opinion leaders identified 2006 most frequently (44.7%) followed by the years 2000 to 2005 (32.5%).

Table 27. Recent Trip Year for Physically Disabled Sample

Most Recent Trip	Physically Disabled	Physically Disabled	
Year- Physically	Non-opinion Leader	Opinion Leader	
disabled	Sample	Sample	Total
2007	5 (6.7%)	20 (16.3%)	25 (12.6%)
2006	24 (32.0)	55 (44.7)	79 (39.9)
2000 – 2005	36 (48.0)	40 (32.5)	76 (38.4)
1990 – 1999	7 (9.3)	4 (3.3)	11 (5.6)
1980 – 1989	2 (2.7)	3 (2.4)	5 (2.5)
1979 and prior	1 (1.3)	1 (0.8)	2 (1.0)
Total	75 (100%)	123 (100%)	198 (100%)

The physically disabled sample non-opinion leaders and the physically disabled sample opinion leaders were asked to recall a memorable vacation trip taken in recent years. Table 28 provides information regarding the geographic location of the destination visited of their memorable trip. The physically disabled sample non-opinion leaders identified the other United States as the location of their memorable trip destination (73.0%) with all other international destination locations as the next most frequently reported destination (10.8%). The physically disabled sample opinion leaders also identified other United States as the location of their most memorable trip destination (70.2%) followed by the states of the survey as the location of their memorable trip destination (13.7%). All other international destinations was the third most frequent in responses for physically disabled sample opinion leaders (10.5%). The prevalence of the international destinations in frequency of visitation is of interest. This is especially of interest due to the geographic proximity of Canada to the states of Michigan, Ohio, Indiana and Illinois where this study was focused. As presented in Table 28, Canada was the least mentioned geographic location of destination visited by the physically disabled sample.

Table 28. Geographic Location of Destination Visited Physically Disabled

	Physically		
	Disabled	Physically	
	Non-opinion	Disabled	
Geographic Location of the	Leader	Opinion	
Destination Visited	Sample	Leader Sample	Total
States of survey	5 (6.8%)	17 (13.7%)	22 (11.1%)
Other US States	54 (73.0)	87 (70.2)	141 (71.2)
Canada	3 (4.1)	3 (2.4)	6 (3.0)
Mexico	4 (5.4)	4 (3.2)	8 (4.0)
All other international countries	8 (10.8)	13 (10.5)	21 (10.6)
Total	74 (100%)	124 (100%)	198 (100%)

Referring to the memorable vacation trip, physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked whether they had visited the destination prior to their visit. Table 29 shows that over 50% of both the physically disabled sample non-opinion leaders (54.7%) and physically disabled sample opinion leaders (54.4%) reported that they had visited the destination prior to their most recent memorable vacation.

Table 29. Visited Destination Before Physically Disabled Sample

Visited Destination Before	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	Total
Yes	41 (54.7%)	68 (54.4%)	109 (54.5%)
No	34 (45.3)	57 (45.6)	91 (45.5)
Total	75 (100%)	125 (100%)	200 (100%)

The physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked to describe their travel party composition on the memorable vacation trip. Results are presented in Table 30. The physically disabled sample non-opinion leaders reported traveling with family nearly two-thirds of the time (65.4%) with physically disabled sample opinion leaders reporting travel with family over half the time (55.6%). However, both sample groups atypically reported no evidence of traveling with family and tour groups. Physically disabled sample non-opinion leaders reported no activity of traveling with friends and tour groups, with physically disabled sample opinion leaders reporting only slight participation (2.4%) in traveling with friends and tour groups.

Table 30. Travel Party Composition Physically Disabled Sample

	Physically		
	Disabled	Physically	
	Non-opinion	Disabled	
	Leader	Opinion Leader	
Travel Party	Sample	Sample	Total
Family	51 (65.4%)	70 (55.6%)	121 (59.3%)
Friends	7 (9.0)	24 (19.0)	31 (15.2)
Tour group	3 (3.8)	3 (2.4)	6 (2.9)
Yourself	8 (10.3)	12 (9.5)	20 (9.8)
Family and friends	8 (10.3)	12 (9.5)	20 (9.8)
Family, friends and tour group	1 (1.3)	2 (1.6)	3 (1.5)
Family and tour group	0 (0.0)	0 (0.0)	0 (0.0)
Friends and tour group	0 (0.0)	3 (2.4)	3 (1.5)
Total	78 (100%)	126 (100%)	204 (100%)

Table 31 shows results of independent-samples t tests comparing service ratings by physically disabled sample non-opinion leaders and physically disabled sample opinion leaders. Study participants were asked to express their level of agreement with the following statement; "I receive necessary disability services information when making hotel reservations." Physically disabled sample opinion leaders gave a higher rating for receipt of necessary disability services information when making hotel reservations (mean = 3.24) than physically disabled sample non-opinion leaders (mean = 2.75). There was a significant difference between the means of the two groups (t (218) = 2.776, p < .05).

Table 31. Disability Service and Information Ratings

Disability service and information rating	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
I receive necessary disability services information when making hotel reservations	2.75 ^a (1.4 ^b)	3.24(1.3)	2.776	.006 ^c
I am understood when asking questions regarding disability services	3.05 (1.3)	3.48 (1.3)	2.456	.015
I receive necessary disability services travel information when calling 800 numbers	2.54 (1.1)	2.73 (1.2)	1.199	.232
I receive necessary disability services travel information	` ,	, ,		
through web sites I receive necessary disability services information when	2.65 (1.2)	2.68 (1.2)	.169	.866
making airline reservations	2.89 (1.3)	3.13 (1.3)	1.314	.190

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

Study participants were asked to rate their level of agreement with the statements; "I am understood when asking questions regarding disability services." Physically disabled sample opinion leaders gave a higher rating (mean = 3.48) than physically disabled sample non-opinion leaders (mean = 3.05). The independent-samples t test comparing the mean scores identified a significant difference between the means of the two groups (t (218) = 2.257, p < .05), see Table 31.

The statements; "I receive necessary disability services travel information when calling 800 numbers"; "I receive necessary disability services travel information through web sites" and "I receive necessary disability services information when making airline reservations" were rated similarly opinion leaders and non-opinion leader groups.

Results are shown in Table 31. Each of these results shows disagreement with these statements.

b: Standard deviation

c: Significance at p < .05

Physically disabled sample non-opinion leaders may be characterized as living with a severe or moderate disability (47.0%). Over one-quarter of physically disabled sample non-opinion leaders have been physically disabled since birth (26.2%). Physically disabled sample non-opinion leaders reported at a rate of 34% they have lived with the disability for 1 to 12 years. July was identified as their most recent trip month (16.4%) with this trip being taken between 2000 and 2005 (48.0%), in the United States not including Michigan, Ohio, Indiana and Illinois (73.0%). Physically disabled sample non-opinion leaders reported having visited the destination prior to this trip at a rate of (54.7%) and traveled with family members (65.4%). This information is presented in Table 32.

Table 32. Overview Disability Sample Travel Proclivity

Table 32. Overview Disab	ility Sa	Physically Disabled	ty
		Sample	Physically Disabled Sample
Travel Proclivity Overview	n	Non-opinion Leader	Opinion Leader
Classification of disability	197		
Severe		47.0%	43.9%
Moderate		47.0	55.3
Minor		6.0	0.1
Age Became Physically Disabled	197		
Birth – 12		26.2	27.4
13 – 19		9.5	15.9
20 – 29		6.0	12.4
30 – 39		8.3	15.0
40 – 49		8.3	14.2
50 – 59		16.7	8.0
60 – 69		8.3	5.3
70 – 79		4.8	0.9
80 – 89		0.0	0.9
Years Lived with Disability	190		
1 – 12		34.2	28.8
13 – 19		12.7	16.2
20 – 29		15.2	22.5
30 – 39		19.0	11.7
40 – 49		3.8	4.5
50 – 59		7.6	10.8
60 – 69		6.3	5.4
70 – 79		1.3	0.0
Most Recent Trip Month	194		
January		5.5	4.1
February		4.1	3.3
March		11.0	6.6
April		6.8	9.1
May		5.5	5.0
June		13.7	8.3
July		16.4	19.8
August		13.7	10.7
September		2.7	8.3
October		11.0	10.7
November		4.1	8.3
December		5.5	5.8

Table 32 (continued). Overview of Disability Sample Travel Proclivity

Table 32 (continued). Ov	<u> </u>	Physically Disabled	. iavoi i i oonvity
		Sample	Physically Disabled Sample
Travel Proclivity Overview	n	Non-opinion Leader	Opinion Leader
Most Recent Trip Year-	100		
Physically Disabled	198	4.5	16.2
2007		6.7	16.3
2006		32.0	44.7
2000 – 2005		48.0	32.5
1990 – 1999		9.3	3.3
1980 – 1989		2.7	2.4
1979 and prior		1.3	0.8
Geographic Location of the Destination Visited	198		
States of survey		6.8	13.7
Other US States		73.0	70.2
Canada		4.1	2.4
Mexico		5.4	3.2
All other international countries		10.8	10.5
Visited Destination Before	200		
Yes		54.7	54.4
No		45.3	45.6
Travel Party	204		
Family		65.4	55.6
Friends		9.0	19.0
Tour group		3.8	2.4
Yourself		10.3	9.5
Family and friends		10.3	9.5
Family, friends and tour group		1.3	1.6
Family and tour group		0.0	0.0
Friends and tour group		0.0	2.4

Physically disabled sample opinion leaders may be characterized as living with a moderate disability at a rate of (55.3%). Over one-quarter reported being physically disabled since birth (27.4%). Physically disabled sample opinion leaders reported they have lived with the disability for 1 to 12 (28.8%). July was reported as the preferred trip moth for their most recent trip (19.8%), with this trip taken in 2006 or 2007 (44.7%), in the United States but not including Michigan, Ohio, Indiana and Illinois (70.2%). Physically disabled sample opinion leaders reporting having visited the destination before

(54.4%) and reported traveling with family (55.6%). These results are shown in Table 32.

HYPOTHESES TESTING

Childers (1986) authored the Opinion Leadership Scale to identify the presence of opinion leaders. The scale was modified for use in tourism research by Jamrozy et al. (1996) where the scale was applied in a nature-based tourism context. The Opinion Leadership Scale was applied to the disability segment as it pertains to vacation travel planning. The Opinion Leadership Scale, as tested by Childers (1986), included internal consistency reliability estimate of 0.83, an average item-to-total correlation of 0.62 and adequate testing of unidimensionality via structural equation modeling. After the scale was modified by Jamrozy et al. (1996), and applied to nature-based tourism, the applied scale in the nature-based tourism context included an internal consistency reliability estimate of 0.88; a mean total sum score for the scale was 19.5 and a standard deviation of 5.64. The Opinion Leadership Scale as applied within this study to the disability segment and applied to vacation travel planning showed similar internal consistency reliability estimates and unidimensional structure as found by Childers (1986) and Jamrozy et al. (1996). The Opinion Leadership Scale applied in this study reported an internal consistency reliability estimate of 0.87; a mean total sum score of 18.66 and a standard deviation of 5.22.

The Opinion Leadership Scale was operationalized on a five-point response format. A mean score was calculated by adding up the responses (scale 1 to 5) on six items that form the Opinion Leadership Scale (range of 6 to 30). The mean score of

18.66 on the Opinion Leadership Scale segmented the opinion leader from the non-opinion leader, following the approach used in Jamrozy et al. (1996). All respondents were used to determine the mean split of opinion leaders and non-opinion leaders. Cronbach's alpha is an unbiased estimate of the generalizability or a measure of how well the sum score on the selected items captured the expected score in the entire domain is heterogeneous. Rule of thumb is 0.70 or higher for accepted use

Hypothesis 1 states the percentage of opinion leaders in the physically disabled traveler market segment is greater than the percentage in the general traveler market segment. The mean score on the Opinion Leadership Scale divided opinion leaders from non-opinion leaders. An independent-samples t test was calculated comparing the mean score of subjects from the general sample identified as opinion leaders to the mean score of physically disabled sample members identified as opinion leaders, see Table 33. A significant difference was identified between the means of the two groups (t (447) = 2.041, p<.05). This finding was opposite from the finding supposed by hypothesis one. Opinion leadership traits were stronger in the general sample (19.0) than the physically disabled sample (17.9) contrary to the hypothesized relationship. Opinion leadership is thought to be a critical determinant of word of mouth communication and interpersonal influence affecting the diffusion of new products, concepts, and services. Additionally, opinion leadership drives trends, influence mass opinion and, most importantly, sells a great many products. H1; "The percentage of opinion leaders in the physically disabled traveler market segment is greater than the percentage in the general traveler market segment." was not supported by the data, however the identification of opinion leaders

within the physically disabled sample is an important first step in understanding this market niche.

Table 33. Opinion Leadership

	General Sample	Physically Disabled Sample	t	р
Opinion leadership	19.0 ^a (5.5 ^b)	17.9 (5.2)	2.041	.042 ^c

a: Mean score all items based on a range of 6 to 30 by adding responses for 6 questions on Likert-style scale with 1 being least likely to 5 very likely

Hypothesis 2 states that physically disabled traveler opinion leaders will indicate a stronger level of pre-trip planning activities than general sample opinion leaders. Table 34 shows results for three statements testing pre-trip planning. These statements include; "I plan my entire trip well in advance" (t (447) = 0.74, p > .05); "I plan most of my vacations before I leave and then fill in the details after I arrive" (t (447) = 0.27, p > .05) and "I plan most of my vacation once I reach my destination" (t (447) = 0.08, p > .05) all showed no significant difference between the two samples. See Table 34 for the results of each statement. Hypothesis 2 was not supported by study results.

Table 34. Pre-trip Planning Activities for Physically Disabled Sample

	General Sample	Physically Disabled Sample Opinion		
	Opinion Leaders	Leaders		p
I plan my entire trip well in advance	3.5 ^a (1.2 ^b)	3.6 (1.3)	.74	.459 ^c
I plan most of my vacations before I leave and then fill in the details after I arrive	3.2 (1.2)	3.3 (1.3)	.27	.788
I plan most of my vacation once I reach my destination	2.1 (1.1)	2.1 (1.2)	.08	.936

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

b: Standard deviation

c: Significance at p < .05

b: Standard deviation

c: Significance at p < .05

Hypothesis 3 states that physically disabled traveler opinion leaders will have been physically disabled for a longer period of time than physically disabled traveler non-opinion leaders. As reported in Table 35, an independent-samples t test was calculated. These two groups showed no significant difference (t (188) = .127, p > .05). Hypothesis 3 was not supported by these findings.

Table 35. Years Physically Disabled

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	Р
Total number of years physically disabled	25.3 ^a (19.3 ^b)	25.0 (17.5)	.127_	. 8 99 ^c

a: Mean

Hypothesis 4 states that opinion leaders will report a higher perceived propensity to travel for vacations or leisure than non-opinion leaders. Table 36 shows results of independent-samples t tests comparing Midwest travel experience ratings by physically disabled sample non-opinion leaders and physically disabled sample opinion leaders. Study participants were asked to express their level of agreement with the following statement; "I have traveled a lot in the Midwest." Physically disabled sample opinion leaders reported a higher agreement rating (mean = 3.24) than physically disabled sample non-opinion leaders (mean = 3.04). There was a significant difference between the means of the two groups (t (218) = 2.84, p < .05).

b: Standard deviation

c: Significance at p < .05

Table 36. Propensity to Travel for Vacation or Leisure

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
I have traveled a lot in the Midwest	3.04 ^a (1.2 ^b)	3.54 (1.4)	2.84	.005 ^c
I have traveled a lot in the United States	2.93 (1.2)	3.67 (1.2)	4.55	.000
I have traveled a lot internationally	1.82 (1.2)	2.15 (1.5)	1.83	.069

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

Study participants were asked to express their level of agreement with the following statement; "I have traveled a lot in the United States." Physically disabled sample opinion leaders gave a higher agreement rating with this statement (mean = 3.67) than physically disabled sample non-opinion leaders, who tended to disagree with the statement, (mean = 2.93), see Table 36 for results. The difference between the means of the two groups was significant (t (218) = 4.55, p < .05).

Also shown in Table 36, physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked to express their level of agreement with the following statement; "I have traveled a lot internationally." Both segments disagreed with this statement. The physically disabled sample opinion leaders provided a higher rating, but still reported their disagreement with the statement (mean = 2.15) as did the physically disabled sample non-opinion leaders (mean = 1.82). There was not a significant difference between the means of the two groups (t (218) = 1.83, p > .05). Hypothesis 4 was supported by these findings.

Hypothesis 5 states that opinion leaders will report a higher perceived travel skill level than non-opinion leaders. Table 37 shows results of independent-samples *t* tests

b: Standard deviation

c: Significance at p < .05

comparing physically disabled sample non-opinion leaders and physically disabled sample opinion leaders in perceived travel skill level. Study participants were asked to express their level of agreement with the following statement; "I consider myself a well-traveled person." Physically disabled sample opinion leaders gave a higher agreement rating (mean = 3.05) than physically disabled sample non-opinion leaders who responded with disagreement with the statement (mean = 2.39). There was a significant difference between the means of the two groups (t (218) = 3.73, p < .05).

Table 37. Consideration of Self Relating to Travel

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
I consider myself a well-traveled person	2.39 ^a (1.2 ^b)	3.05 (1.3)	3.73	.000 ^c
I consider myself a skilled traveler	2.64 (1.2)	3.17 (1.3)	3.02	.003

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

Physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were then asked to express their level of agreement with the following statement; "I consider myself a skilled traveler." Results are also presented in Table 37. The physically disabled sample opinion leaders provided a higher rating, but still reported themselves as neutral regarding the statement (mean = 3.17) as did the physically disabled sample non-opinion leaders (mean = 2.64). There was a significant difference between the means of the two groups (t (218) = 3.02, p < .05). Hypothesis 5 was supported by these findings.

Hypothesis 6 states that opinion leaders will take a greater number of day-long, short overnight and long overnight vacations than non-opinion leaders. The physically

b: Standard deviation

c: Significance at p < .05

disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked how many day-long vacations that they have taken in the past 12 months. As seen in Table 38 where categorical data are reported in a chi-square test, the greatest number of physically disabled sample non-opinion leaders reported taking no day-long vacations in the past 12 months (56.5%) with 1 to 2 day-long vacations taken reported with the next greatest frequency (21.7%). The physically disabled sample opinion leader reported taking no day-long vacations at the greatest frequency (33.6%) with participation in five or more vacations at the next most frequent rate (30.5%).

Table 38. Number of Day-long Vacations Taken by the Physically Disabled Sample in the Past Twelve Months

Number of Day- long Vacations	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X^2 (df = 4)	р
0	52 (56.5%)	43 (33.6%)		
1 - 2	20 (21.7)	29 (22.7)		
3 - 4	9 (9.8)	16 (13.3)		
5 or more	11 (12.0)	39 (30.5)		
Total	92 (100%)	128 (100%)	15.162	.002 ^a

a: Significance at p < .05

Table 39 also shows a significant difference identified by an independent samples t test between physically disabled sample non-opinion leaders and opinion leaders and their level of reported participation in day-long vacations as ratio data. Opinion leaders display a higher participation level for day-long vacation activity (mean = 2.55) than physically disabled sample non-opinion leaders (mean = 1.84). The difference between the means of the two groups was significant (t (218) = 3.86, p < .05).

Table 39. Average Number of Day-long Vacations Taken by the Physically Disabled Sample

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
Number of Day-long Vacations	1.84 ^a (1.21 ^b)	2.55 (1.46)	3.857	.000 ^c

a: Mean

b: Standard deviation

c: Significance at p < .05

The physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked how many short overnight vacations they have taken in the past 12 months. As seen in Table 40, where categorical data are reported in a chi-square test, the greatest number of physically disabled sample non-opinion leaders reported taking no short overnight vacations in the past 12 months (47.8%), with participating in 1 to 2 short overnight vacations taken at the next greatest frequency (31.5%). The physically disabled sample opinion leaders reported taking 1 to 2 overnight vacations at the greatest frequency (26.6%). This was followed by participation in 3 to 4 short overnight vacations taken reported at the next most frequent rate (25.8%). Nearly three-quarters of the physically disabled sample opinion leaders participated in short overnight vacations as compared with the physically disabled sample non-opinion leaders at a rate of just over 50%.

Table 40. Number of Short Overnight Vacations Taken by the Physically Disabled Sample in Past Twelve Months

Number of Short Overnight	Physically Disabled Non-opinion Leader	Physically Disabled Opinion Leader	X ²	_
Vacations	Sample	Sample	(df = 5)	р
0	44 (47.8%)	29 (22.7%)		
1 – 2	29 (31.5)	34 (26.6)		
3 – 4	13 (14.1)	33 (25.8)		
5 or more	6 (6.5)	32 (25.0)		
Total	92 (100%)	128 (100%)	24.736	.000 ^a

a: Significance at p < .05

Table 41 shows a significant difference identified by an independent samples t test between physically disabled sample non-opinion leaders and opinion leaders and their level of participation in short overnight vacations. Opinion leaders display a higher participation level for short overnight vacation activity (mean = 3.56) than physically disabled sample non-opinion leaders (mean = 2.21). The difference between the means of the two groups was significant (t (218) = 5.60, p < .05).

Table 41. Average Number of Short Overnight Vacations by the Physically Disabled Sample

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
Short Overnight Vacations	2.21 ^a (1.53 ^b)	3.56 (1.93)	5.598	.000°

a: Mean

The physically disabled sample non-opinion leaders and physically disabled sample opinion leaders were asked how many long overnight vacations they have taken in the past 12 months. As seen in Table 42, where categorical data are reported in a chi-square test, the greatest number of physically disabled sample non-opinion leaders reported taking no long overnight vacations in the past 12 months (71.7%), with 1-2 long overnight vacation taken reported with the next greatest frequency (23.9%). The

b: Standard deviation

c: Significance at p < .05

physically disabled sample opinion leaders also reported 1 to 2 long overnight vacations (48.4%) at the greatest frequency. This was followed by taking no long overnight vacations (32.8%). Over two-thirds of the physically disabled sample opinion leaders were shown to participate in long overnight vacations as opposed to physically disabled sample non-opinion leaders at less than one-third.

Table 42. Number of Long Overnight Vacations Taken by the Physically Disabled Sample in Past Twelve Months

Number of Long Overnight Vacations	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X^{2} (df = 5)	р
0	66 (71.7%)	42 (32.8%)		
1 – 2	22 (23.9)	62 (48.4)		
3 - 4	3 (3.3)	19 (14.8)		
5 or more	1 (1.1)	5 (3.9)		
Total	92 (100%)	128 (100%)	33.695	.000ª

a: Significance at p < .05

Table 43 shows a significant difference identified by an independent samples t test between physically disabled sample non-opinion leaders and opinion leaders and their level of participation in long overnight vacations. Opinion leaders display a higher participation level for long overnight vacation activity (mean = 2.41) than physically disabled sample non-opinion leaders (mean = 1.47). The difference between the means of the two groups was significant (t (218) = 5.60, p < .05).

Table 43. Average Number of Long Overnight Vacations by Physically Disabled Sample

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	p
Long overnight vacations	1.47 ^a (.93 ^b)	2.41 (1.40)	5.602	.000°

a: Mean

b: Standard deviation

c: Significance at p < .05

Hypothesis 6 was supported by these findings.

Hypothesis 7 states that the classification of physical disability may be a factor in the number of day-long, short overnight and long overnight vacations taken by physically disabled non-opinion leaders and opinion leaders. Results for severe and moderate have been shown. However, due to the low number of cases, no minor disability results could be calculated.

Results presented in Table 44, where categorical data are reported in a chi-square text with level of disability as a third variable, shows no day-long vacations taken in the past 12 months reported at the highest frequency rate by severely physically disabled non-opinion leaders (59.0%). Opinion leaders however reported five or more numbers of day-long vacations taken at a rate of (38.0%) for those who self-classified as severely physically disabled. Within the moderately physically disabled classification, physically disabled non-opinion leaders (59.0%) and opinion leaders (36.5%) reported taking no day-long vacations at the highest frequency. Nearly 60% of the non-opinion leaders who classified their disability as severe or moderate indicated they did not take any day-long vacations. However, in the case of opinion leaders the opposite was true. Seventy percent of opinion leaders who self-classified as possessing a severe disability indicated taking day-long vacations and over 60% who self-classified as possessing a moderate disability take day-long vacations. Few physically disabled sample cases classified their disability as minor (n = 6); therefore, this information was not shown.

Table 44: Number of Day-long Vacations by Disability Levels

Number of Day-long	Classification of Disability	Savara	Madanata
Vacations	Classification of Disability	Severe	Moderate
0	Non-opinion Leader	23 (59.0%)	23 (59.0%)
	Opinion Leader	15 (30.0)	23 (36.5)
1 – 2	Non-opinion Leader	8 (20.5)	7 (17.9)
	Opinion Leader	11 (22.0)	15 (23.8)
3 – 4	Non-opinion Leader	3 (7.7)	5 (12.8)
	Opinion Leader	5 (10.0)	10 (15.9)
5 and greater	Non-opinion Leader	5 (12.8)	4 (10.3)
	Opinion Leader	19 (38.0)	15 (23.8)
Total	Non-opinion Leader	39 (100%)	39 (100%)
	Opinion Leader	50 (100%)	63 (100%)
$X^2(df=3)$		9.612	5.608
p		.022	.132 ^a

a: Significance at p < .05

Results presented in Table 45, where categorical data are reported in a chi-square text with level of disability as a third variable, shows no short overnight vacations taken in the past 12 months reported at the highest frequency rate by severely physically disabled non-opinion leaders (59.0%). Opinion leaders however reported 3 to 4 and five or more numbers of short overnight vacations taken at a rate of (30.0%) for those who self-classified as severely physically disabled. In the moderate disability classification, physically disabled non-opinion leaders reported (41.0%) no short overnight vacations taken. Moderately physically disabled opinion leaders reported participation in 1 to 2 short overnight vacations at a rate of (28.6%). More than three-quarters of the severely physically disabled and over 70% of the moderately physically disabled opinion leaders reported participating in one or more short overnight vacations in the past 12 months. Thirty percent of the severely physically disabled opinion leaders and 19% of the moderately physically disabled opinion leaders reported taking five or more short

overnight vacations in the past 12 months. Only a few physically disabled sample cases (n = 6) classifying their disability as minor. As a result, this data was not presented.

Table 45. Number of Short Overnight Vacations Taken Physically Disabled Sample

Number of Short Overnight			
Vacations	Classification of Disability	Severe	Moderate
0	Non-opinion Leader	23 (59.0%)	16 (41.0%)
	Opinion Leader	11 (22.0)	17 (27.0)
1 – 2	Non-opinion Leader	11 (28.2)	14 (35.9)
	Opinion Leader	9 (18.0)	18 (28.6)
3 - 4	Non-opinion Leader	5 (12.8)	6 (15.4)
	Opinion Leader	15 (30.0)	16 (25.4)
5 and greater	Non-opinion Leader	0 (0.0)	3 (7.7)
	Opinion Leader	15 (30.0)	12 (19.0)
Total	Non-opinion Leader	39 (100%)	39 (100%)
	Opinion Leader	50 (100%)	63 (100%)
$X^2(df=3)$		23.434	5.112
p		.000	.164 ^a

a: Significance at p < .05

Results presented in Table 46, where categorical data are reported in a chi-square text with level of disability as a third variable, shows no long overnight vacations taken in the past 12 months reported at the highest frequency rate by the physically disabled non-opinion leaders who self-classified as severely physically disabled (74.4%). The physically disabled opinion leaders, who self-classified as severely physically disabled, indicated 1 to 2 long overnight vacations (52.0%) in the past 12 months. Within the moderately physically disabled classification, physically disabled non-opinion leaders (69.2%) reported taking no long overnight vacations. The physically disabled sample opinion leaders (49.2%) reported 1 to 2 long overnight vacations. Too few physically disabled non-opinion and opinion leaders classified their disability as minor (n = 6); therefore, this information has not been presented.

Table 46. Number of Long Overnight Vacations Taken Physically Disabled Sample

Number of Long Overnight			
Vacations	Classification of Disability	Severe	Moderate
0	Non-opinion Leader	29 (74.4%)	27 (69.2%)
•	Opinion Leader	13 (26.0)	23 (36.5)
1 - 2	Non-opinion Leader	9 (23.1)	10 (25.6)
	Opinion Leader	16 (52.0)	31 (49.2)
3 - 4	Non-opinion Leader	0 (0.0)	2 (5.1)
	Opinion Leader	8 (16.0)	8 (12.7)
5 and greater	Non-opinion Leader	1 (2.6)	0 (0.0)
	Opinion Leader	3 (6.0)	1 (1.6)
Total	Non-opinion Leader	39 (100%)	39 (100%)
	Opinion Leader	50 (100%)	63 (100%)
$X^2(df=3)$		22.334	10.617
p		.000	.014 ^a

a: Significance at p < .05

As shown in Table 47, physically disabled sample opinion leaders who self-classified as severely physically disabled participated in significantly more day-long, short and long overnight vacations than did non-opinion leaders. Within the moderately physically disabled classification, significant differences were also identified in day-long, short and long overnight vacations taken. Since so few study participants self-classified as possessing a minor disability, these results were not shown.

Table 47. Physically Disabled Classification and Average Number of Vacations Types Taken

	n	Vacation Type	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
Severe	89	Day-long	2.28 ^a (1.8 ^b)	3.60 ^a (2.2 ^b)	3.210	.002 ^c
	89	Short Overnight	1.82 (1.2)	3.84 (2.0)	4.832	.000
	89	Long Overnight	1.46 (1.0)	2.60 (1.5)	2.141	.000
Moderate	102	Day-long	2.21 (1.7)	3.06 (2.0)	.244	.030
	102	Short Overnight	2.31 (1.5)	3.25 (1.9)	2.648	.007
	102	Long Overnight	1.44 (.8)	2.22 (1.3)	2.018	.000

a: Mean number of vacations

Hypothesis 7 that the classification of physical disability may be a factor in the number of day-long, short overnight and long overnight vacations participated in by physically disabled non-opinion leaders and opinion leaders was supported to the extent that for severely and moderately physically disabled persons the hypothesis was accepted. However, due to the low number of cases, the hypothesis could not include support for participants living with a minor disability.

Hypothesis 8 states opinion leaders in the physically disabled traveler sample will more likely use tourism specific trip planning information sources than non-opinion leaders in the physically disabled traveler sample. Specific trip planning information sources tested were internet sites and selected travel information sources. Trip planning internet sites included Expedia.com, Hotwire.com, Travelocity.com, Orbitz.com and

b: Standard deviation

c: Significance at p < .05

Hotels.com. Trip planning information sources included brochures from state tourism offices, brochures from local attractions, guidebooks, highway welcome centers, Chamber of Commerce, Convention & Visitors Bureau, picture books, travel agents and motor club publications. Each item was measured on a Likert type scale with 1 not important to 5 very important. Additionally, study participants were provided with the option do not use. Trip planning internet site information will be presented first followed by trip planning information source use.

Study participants were asked to recall a memorable trip and the trip planning resources used to plan the leisure experience. Respondents were first segmented by trip planning internet sites use or do not use. Results for internet sites use or do not use for physically disabled non-opinion leaders and physically disabled opinion leaders are presented in Table 48. Table 48 shows that physically disabled traveler opinion leaders were more likely to use internet sites than physically disabled traveler non-opinion leaders showing support for hypothesis 8.

Table 48. Trip Planning Internet Sites Use by the Physically Disabled Sample

Internet sites	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X ² (df = 1)	р
Do not use internet sites	40 (43.5%)	28 (21.9%)		
Use internet sites	52 (56.5)	100 (78.1)		
Total	92 (100%)	128 (100%)	11.698	.001ª

a: Significance at p < .05

The next application used was to determine, for those who use internet sites, the number of sites used and was there a significant difference in the number used. Use difference did not show significance.

For those who use trip planning internet sites; a *t*-test calculated the importance of using trip planning internet sites by physically disabled sample non-opinion leaders and physically disabled sample opinion leaders. Results presented in Table 49 show that physically disabled sample opinion leaders consider trip planning internet sites more important sources for information than physically disabled sample non-opinion leaders, with the exception of Travelocity which did not result in a significant difference.

Table 49. Importance of Trip Planning Internet Sites to the Physically Disabled in Trip Planning

· ····································	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
Expedia	2.5 ^a (1.4) ^b	3.0 (1.6)	1.994	.048 ^c
Hotels	2.1 (1.2)	3.0 (1.5)	3.705	.000
Hotwire	1.9 (1.1)	2.4 (1.5)	2.604	.010
Orbitz	2.2 (1.2)	2.9 (1.6)	3.044	.003
Travelocity	2.7 (1.5)	3.1 (1.5)	1.648	.101

a: Mean based on a five-point Likert-style scale with 1 being not important to 5 very important

Study participants were segmented by trip planning sources use or do not use.

Trip planning sources include brochures from local attractions, brochures from the State, chambers of commerce, convention and visitors bureaus, guidebooks, highway welcome centers, motorclub publications, picture books and travel agents. The results for trip

b: Standard deviation

c: Significance at p < .05

planning information source use or do not use for physically disabled sample non-opinion leaders and physically disabled sample opinion leaders are presented in Table 50. Table 50 shows that physically disabled sample opinion leaders are more likely to use trip planning sources than physically disabled sample non-opinion leaders showing further support for hypothesis 8.

Table 50. Use of Trip Planning Sources by the Physically Disabled Sample

Trip planning sources	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X ² (df = 1)	р
Do not use trip planning sources	17 (18.5%)	5 (3.9%)		
Use trip planning sources	75 (81.5)	123 (96.1)		
Total	92 (100%)	128 (100%)	12.629	.000ª

a: Significance at p < .05

The next application determine, for those who use trip planning sources, how many trip planning sources physically disabled sample opinion leaders and physically disabled sample non-opinion leaders used. Frequencies and percentages of trip planning sources used are illustrated in Table 51. These two groups just produced a significant difference (t (196) = 1.970, p = .05). Hypothesis 9 was further supported by these findings. Results presented in Table 51 show that physically disabled sample opinion leaders are more likely to use a greater number of trip planning information sources than physically disabled sample non-opinion leaders.

Table 51. Number of Trip Planning Sources Used by the Physically Disabled Sample

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	р
1	10 (13.5%)	6 (4.9%)		
2	4 (5.3)	6 (4.9)		
3	9 (12.0)	12 (9.8)		
4	4 (5.3)	9 (7.3)		
5	4 (5.3)	7 (5.7)		
6	6 (8.0)	8 (6.5)		
7	5 (6.7)	5 (4.1)		
8	7 (9.3)	12 (9.8)		
9	26 (34.7)	58 (47.2)		
Trip planning sources used (mean)	5.9 ^b (3.0 ^c)	6.7 (2.7)	1.970	.05 ^d

a: Trip planning sources include nine variables: brochures from state tourism offices, brochures from local attractions, guidebooks, highway welcome centers, chamber of commerce, convention & visitors bureau, picture books, travel agents and motor club publications

Table 52 shows higher mean scores in the importance of each of the trip planning information source options. Opinion leaders showed significantly higher mean importance scores in six of the nine options presented. Hypothesis 9 was further supported by these findings.

b: Mean

c: Standard deviation

d: Significance at p < .05

Table 52. Importance of Trip Planning Information Sources by the Physically Disabled

Sample

Sample	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	ı	р
Brochures from local attractions	2.6 ^a (1.3 ^b)	3.3 (1.3)	3.579	.000 ^c
Brochures from the state	2.7 (1.4)	3.1 (1.4)	1.722	.087
Chambers of commerce	2.0 (1.1)	2.4 (1.4)	2.408	.017
Convention & visitors bureaus	2.2 (1.2)	2.6 (1.4)	2.505	.013
Guidebooks	2.7 (1.4)	3.6 (1.4)	4.356	.000
Highway welcome centers	2.5 (1.3)	2.9 (1.5)	1.822	.070
Motorclub publications	2.6 (1.4)	3.1 (1.6)	2.260	.025
Picture books	2.1 (1.2)	2.4 (1.3)	1.925	.056
Travel agents	2.3 (1.3)	2.8 (1.5)	2.465	.015

a: Mean based on a five-point Likert-style scale with 1 being not important to 5 very important

Opinion leaders in the physically disabled sample rated internet sites and travel information sources as more important when planning for trips than physically disabled sample non-opinion leaders. Hypothesis 8 was supported by this empirical evidence.

Hypothesis 9 states that opinion leaders in the physically disabled traveler sample will record higher numbers of interpersonal communication events about travel than non-opinion leaders in the physically disabled sample. To test hypothesis 9 independent-samples t tests comparing mean scores of the physically disabled sample non-opinion leaders and the physically disabled sample opinion leaders were employed. Two items

b: Standard deviation

c: Significance at p < .05

were used to measure interpersonal communication events: (1) the number of persons asked for travel information over the past 12 months, and (2) the number of persons who asked the respondent for travel information over the past 12 months.

Physically disabled sample opinion leaders asked for travel advice significantly more than physically disabled sample non-opinion leaders, (t (218) = 6.896, p < .05), see Table 53 for findings.

Table 53. Interpersonal Communication Events by the Physically Disabled Sample

	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	t	
Number of persons you asked information or recommendations from when planning your vacation	1.7 ^a (2.6 ^b)	4.8 (3.9)	6.896	.000°
Number of persons who asked you about vacation information when planning	1.8 (3.6)	5.1 (4.9)		
their travel vacation	1.8 (3.0)	3.1 (4.9)	5.734	.000

a: Mean score with each item measured on a ratio scale. Ranges of these distributions were 20 and 24, respectively. Both distributions were negatively skewed with modes of 3 and 2, respectively.

The t test results for number of persons who asked the respondent for travel information is shown in Table 53. Physically disabled travel opinion leaders were asked for travel information more times than the physically disabled non-opinion leader group, (t (218) = 5.734, p < .05); supporting hypothesis 9.

Hypothesis 10 states that opinion leaders in the physically disabled sample will use a greater number of mass media sources in their trip planning than physically disabled sample non-opinion leaders. Mass media information sources included ten newspapers. Newspapers included; *The New York Times, USA Today, Wall Street Journal, Detroit Free Press/Detroit News, Chicago Tribune, Indianapolis Star*, any Ohio

b: Standard deviation

c: Significance at p < .05

metro news, any local newspaper, any newspaper travel section, and any newspaper food section. Mass media also includes radio, television, magazine articles and magazine advertisements. Additionally, mass media included the following twelve magazines titles; AARP Magazine, Reader's Digest, Better Homes & Gardens, Good Housekeeping, Midwest Living, Ladies Home Journal, Woman's Day, Family Circle, TV Guide, Modern Maturity, National Geographic, other travel magazines. The result for newspapers use is presented first. This is followed by radio, television, magazine articles and advertisements and concludes with the results of the magazine title tests.

The results for newspapers use/do not use for physically disabled sample nonopinion leaders and physically disabled sample opinion leaders are presented in Table 54.

Table 54 shows that physically disabled sample opinion leaders showed a propensity to
use newspapers for trip planning. However, the number of physically disabled sample
opinion leaders compared to the number of physically disabled sample non-opinion
leaders was not significantly different.

Table 54. Use of Newspapers by the Physically Disabled Sample

Newspapers	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X^2 (df = 1)	p
Do not use Newspapers	34 (37.0%)	44 (34.4%)		
Use newspapers	58 (63.0)	84 (65.6)		
Total	92 (100%)	128 (100%)	.156	.693 ^a

a: Significance at p < .05

Next, the results for radio use, television use and magazine use were tested.

Participants scored each of these information sources the same. Radio use or do not use

for physically disabled sample non-opinion leaders and physically disabled sample opinion leaders are presented in Table 55. Table 55 shows that significantly more physically disabled sample opinion leaders use radio sources as an important trip planning information source than physically disabled sample non-opinion leaders.

Table 55. Use of Radio by the Physically Disabled Sample

Radio	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X ² (df = 1)	р
Do not use Radio	31 (33.7%)	20 (15.6%)		
Use Radio	61 (66.3)	108 (84.4)		
Total	92 (100%)	128 (100%)	9.815	.002 ^a

a: Significance at p < .05

Next, the results for television use or do not use for physically disabled sample non-opinion leaders and physically disabled sample opinion leaders are presented in Table 56. Table 56 shows that physically disabled sample opinion leaders were significantly more likely to use television as a source of travel information than physically disabled sample non-opinion leaders.

Table 56. Use of Television by the Physically Disabled Sample

Television	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X ² (df = 1)	р
Do not use Television	31 (33.7%)	20 (15.6%)		
Use Television	61 (66.3)	108 (84.4)		
Total	92 (100%)	128 (100%)	9.815	.002ª

a: Significance at p < .05

Next, the results for magazine titles use/do not use for physically disabled sample non-opinion leaders and physically disabled sample opinion leaders are presented in Table 57. Table 57 shows that physically disabled sample opinion leaders displayed a propensity to use specific magazine titles as trip planning sources; however, this use between groups, was not significant.

Table 57. Use of Magazine Titles by the Physically Disabled Sample

Magazines	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X^2 (df = 1)	р
Do not use Magazines	33 (35.9%)	36 (28.1%)		
Use Magazines	59 (64.1)	92 (71.9)		
Total	92 (100%)	128 (100%)	1.491	.222ª

a: Significance at p < .05

Table 58 shows the results for magazine articles used as mass media sources in trip planning. Table 58 shows that physically disabled sample opinion leaders were significantly more likely to use magazine articles as a source of travel information than physically disabled sample non-opinion leaders.

Table 58. Use of Magazine Articles by the Physically Disabled Sample

Magazine Articles	Physically Disabled Non-opinion Leader Sample	Physically Disabled Opinion Leader Sample	X ² (df = 1)	р
Do not use Magazine Articles	31 (33.7%)	20 (15.6%)		
Use Magazine Articles	61 (66.3)	108 (84.4)		
Total	92 (100%)	128 (100%)	9.815	.002ª

a: Significance at p < .05

Three of the mass media areas; radio, television and magazine articles, showed significantly higher use reported by physically disabled sample opinion leaders. These results support hypothesis 10.

Additionally within the study, respondents were provided the opportunity to identify other magazines used while planning vacations. Respondents provided an additional 133 specific magazine titles they use. Although motorclub publications (i.e., AAA) was offered as an option within the twelve magazine titles/section of the study, AAA Magazine was mentioned the greatest number of times (n = 23) in the open-ended question. This may indicate that respondents did not understand the reference to the publication within the options provided. It may also indicate that AAA publications are an important resource to the physically disabled sample. Conde Nast Traveler was mentioned at the next highest level (n = 8), followed by Budget Travel (n = 7). A complete list of magazines mentioned is included in Appendix F.

Hypothesis 11 states that physically disabled sample opinion leaders will place greater importance on the use of electronic media information sources than print media information sources. Electronic media sources include internet sources (internet, e-mail,

web blogs or blogs, chat rooms, social networking sites and trip planning internet sites; Expedia, Hotwire, Travelocity, Orbitz and Hotels.com), radio and television. Print media information sources include magazine articles - advertisements, newspapers (New York Times, USA Today, Wall Street Journal, Detroit Free Press/Detroit News, Chicago Tribune, Indianapolis Star, any Ohio metro news, any local newspaper, travel section, and food section), and magazines (AARP Magazine, Reader's Digest, Better Homes & Gardens, Good Housekeeping, Midwest Living, Ladies Home Journal, Woman's Day, Family Circle, TV Guide, Modern Maturity, National Geographic, other travel magazines).

The use of electronic media as an information source for travel offers benefits such as ease of access to information; ease of information sharing through social networks and allows for conveniences when making reservations. The intent of this investigation was to establish if electronic media as an information source for travel by the physically disabled opinion leader is leveraged at a higher level than print media information sources. The hypothesis was based on the physically disabled sample heightened physical challenges, the availability of access to electronic media sources and past research that suggests that opinion leaders seek out information at a high level and use emerging technologies channels (Rogers, 2005).

The survey instrument requested participants to indicate the importance of information sources when planning vacations on a five-point scale (1 not important to 5 very important). Using the results received from the physically disabled sample opinion leaders, a paired samples *t*-test was calculated to test the importance of electronic media information sources and print media information sources when planning a vacation.

Results presented in Table 59 show that physically disabled sample opinion leaders indicated the importance of electronic media information sources at a significantly higher mean score than print media information sources when vacation planning (t (22) = 3.269, p < .05). Hypothesis 11 is supported by these findings.

Table 59. Importance of Electronic Media Information Sources and Print Media Information Sources in Vacation Planning by Physically Disabled Opinion Leaders

	Electronic Media Information Sources	Print Media Information Sources	T	р
Physically disabled opinion leaders Physically disabled non-	2.6 ^a (.8 ^b)	1.9 (.7)	3.269	.007 ^c
opinion leaders	2.2 (.7)	1.6 (.6)	3.917	.002

a: Mean based on a five-point Likert-style scale with 1 being strongly disagree to 5 strongly agree

An additional comparison not included in hypothesis 11, but that may be of interest is also presented in Table 59. The importance of electronic media information sources and print media information sources used in vacation planning by physically disabled sample non-opinion leaders indicate the importance of electronic media information sources at a significantly higher mean score than print media information sources when vacation planning (t (22) = 3.917, p < .05).

SUMMARY

This chapter was divided into four sections. Section one described the demographic profile of all survey participants and section two highlighted results for study participant's travel proclivity. Since the purpose of this study is to understand the physically disabled traveler market segment, section three drew the specific focus on the

b: Standard deviation

c: Significance at p < .05

physically disabled sample's travel proclivity and section four providing results for the study's hypotheses tests.

Table 60 provides an overview of the areas of study, the authors of past studies with theories identified from where study questions were drawn then modified for use within a tourism context, and the results of hypotheses testing.

Table 60. Overview of Hypotheses Testing, Theories and Areas of Study

Table ou. Overvie	w of Hypotheses Testing, Theories and A	reas of Study	
			Support or
			Non-support
			for Original
	Hypotheses Restated as Actual Findings	Theory/Author ^a	Hypotheses
	H ¹ :The percentage of OL ^a in the physically		
	disabled traveler market segment is	Diffusion of	
Opinion	greater than the percentage in the	Innovations	
leadership	general traveler market segment.	(Rogers, 2005)	NS ^c
	H ⁴ : DOL ^d reported a higher perceived	Diffusion of	
	propensity to travel for vacations or	Innovations	
	leisure than DNOL ^e	(Rogers, 2005)	sf
	icisaic dian DNOL	Diffusion of	3
	H ⁵ : DOL reported higher perceived	Innovations	
	travel skill levels than DNOL		s
		(Rogers, 2005)	3
	H ⁶ : DOL took a greater number of day,	Diffusion of	
	short overnight and long overnight	Innovations	
	vacations than DNOL	(Rogers, 2005)	S
	H ⁷ : Classification of physical disability	D:00	
	factors into the number of day,	Diffusion of	
	short overnight and long overnight	Innovations	
	vacations taken by DOL and DNOL	(Rogers, 2005)	S
	H ⁸ : DOL used more tourism specific trip	Diffusion of	
	planning information sources than	Innovations	
	DNOL	(Rogers, 2005)	S
	H ⁹ : DOL recorded higher numbers of	Diffusion of	
	interpersonal communication events	Innovations	
	about travel than DNOL	(Rogers, 2005)	S
		Disability and	
		Resocialization	
	H ³ : Length on time physically disabled does	(Zimmermann,	<u> </u>
Travel life cycle	not differ between DOL and DNOL	1982)	NS
		Trip Planning	
		Information	
Travel decision-	H ² : DOL did not indicate stronger levels	Source Use	
making	of pre-trip planning activities than	(Vogt &	
travel		Fesenmaier,	
planning	GS ^g	1998)	NS
		Travel Specific	
		Trip Planning	
		Information	
Travel specific		Source Use	
trip planning	H ¹¹ : DOL placed greater importance on	(Vogt &	
information	electronic media than print media	Fesenmaier,	
source use	for vacation planning	1998)	s

Table 60 (continued). Overview of Hypotheses Testing, Theories and Areas of Study

	Hypotheses Restated as Actual Findings	Theory/Author	Support or Non-support for Original Hypotheses
Mass media source use	H ¹⁰ : DOL used greater numbers of mass media sources in their trip planning than DNOL	Mass Media Source Use (Burnett & Paul, 1996)	S

- a: Theory and author discussion found on pages 37 to 42
- b: OL = Opinion leaders
- c: NS = Not supported
- d: DOL = Physically disabled traveler opinion leader
- e: DNOL = Physically disabled traveler non-opinion leader
- f: S = Supported
- g: GS = General sample opinion leader

CHAPTER 5

SUMMARY, DISCUSSION AND IMPLICATIONS

Identification of trip planning behaviors and information source use by physically disabled travelers was investigated. Determinants to address variations in trip planning behaviors and information sources use were also studied. Opinion leadership and non-opinion leadership as they relate to travel decision-making, travel planning, travel specific interpersonal communications, information source use, travel specific trip planning information source use, mass media and electronic media sources used were examined. The research hypothesis that opinion leaders exist within the physically disabled travel market and opinion leadership affects trip planning behaviors was partially or fully supported. Evidence that links changes in patterns of trip planning behaviors and information sources used with opinion leadership is offered.

The subsequent section presents the summary of key results highlighting the study's most salient findings. These findings are systematized according to the concept presentation within the study. This is followed by a discussion of the limitations of these findings, future research recommendations and concludes with final comments.

KEY RESULTS AND IMPLICATIONS

The initial step of hypothesis testing was to identify the existence of opinion leaders and measure opinion leadership in travel planning and decision-making by people with disabilities. To test this hypothesis trait and individual difference variables were incorporated and integrated under the Theory of Diffusion (Rogers, 2005).

Past studies have not isolated whether opinion leaders are born or evolve into people who influence others in the adoption of innovations. However, past studies have defined certain traits used to identify the opinion leader within a social stratum (Flynn et al., 1996; Katz & Lazarsfeld, 1955; Rogers, 2005).

Opinion leaders, thought to play a critical role in of word of mouth advertising, communication and interpersonal influence that affects the diffusion of new products, concepts, and services (Rogers, 2005), were identified in this study's physically disabled sample. Results showed opinion leaders were found at a greater level in the general sample than in the physically disabled sample. This may indicate that members of general sample participate in a stronger social network when making travel decisions. However, the identification of opinion leaders within the physically disabled sample is an important first step in understanding this market niche and understanding the dynamics of the physically disabled traveler social network.

The premise of this study was to understand the physically disabled traveler therefore; the following information will provide research findings specific to the physically disabled sample. Physically disabled sample opinion leaders reported travel in the Midwest and within the Unites States at a greater level than physically disabled sample non-opinion leaders. International travel between and within opinion leaders and non-opinion leaders were reported at similar levels. These results indicate that air travel poses unique challenges for persons with disabilities. This may have contributed to lower ratings for the level of international travel.

Physically disabled sample opinion leaders rated significantly higher than nonopinion leaders in reporting consideration of self relating to travel. Although, opinion
leaders reported a significantly higher rating, it must be noted opinion leader's self rating
was neutral when asked if they considered themselves well-travelled and skilled at travel.
This neutral rating may suggest a lack of confidence in the physically disabled traveler's
travel experience and prowess. The development of accurate and easy to access
disability-specific travel resources may act to inform these people, help elevate their
confidence level and result in more confident participation in travel.

Opinion leaders reported significantly higher participation in day-long, short overnight and long overnight vacations taken in the past 12 months than non-opinion leaders. Opinion leaders also recorded significantly higher numbers of interpersonal communication events relating to travel than non-opinion leaders. These findings follow with findings of past diffusion studies where opinion leaders are information seekers (Troncalli & Thompson, 1972), have been positively associated with cosmopoliteness (Katz & Lazarsfeld, 1955), innovativeness as a function of the group's norm (Coleman et al., 1957; Lionberger, 1953; Menzel, 1960; Myers & Robertson, 1972; Wilkening, 1952), and they drive trends, influence mass opinion and sell a great many products (Kotler & Armstrong, 2006).

According to the findings of this study, disability severity level and opinion leadership factors into the number of and length of vacation participation. Physically disabled sample opinion leaders who self-classified as severely physically disabled participated in significantly more day-long, short and long overnight vacations than did non-opinion leaders. Moderately physically disabled opinion leaders and non-opinion

leaders showed no significant difference in day-long vacation participation levels, however opinion leaders showed significance in short and long overnight vacations taken. Additionally, findings of this study showed that the length of time a person has lived with a disability does not play a role in opinion leadership, nor does the age at which the person became physically disabled. These findings support the innovativeness associated with opinion leadership (Rogers, 2005). Furthermore, opinion leaders have been identified as individuals who exert considerable personal influence and whom others seek word of mouth advice (Arndt, 1967; Reynolds & Darden, 1971). Marketers interested in gaining a share of the physically disabled traveler market would be wise to consider a strategy to attract opinion leaders from the disability market as customers, thus expanding their opportunity to also gain non-opinion leaders. Consideration of disability level, length of time the person has lived with the disability or upon the age that the person became physically disabled does not appear to be as relevant.

Opinion leaders were shown to use trip planning information sources more frequently than non-opinion leaders when planning their vacation travel. Conversely, mass media sources did not show significant use differences between opinion leaders and non-opinion leaders within the physically disabled sample. Comparisons between electronic media sources and print media sources shows that both the physically disabled sample non-opinion leaders and the physically disabled sample opinion leaders demonstrate significantly higher use numbers for electronic media sources than for print media sources and that physically disabled sample opinion leaders demonstrate the highest use in both electronic and print. Marketers seeking to attract the physically disabled traveler market should consider the addition of disability specific information

and photographs to trip planning, using both electronic and print media sources. Use of web logs, blogs, face book, etc. provide new avenues for the customer to spread product information grounded in experiences. Focus on these as opportunistic mechanisms, share disability services information and highlight destination amenities specifically designed to support visitation by a person with disabilities.

LIMITATIONS OF THE FINDINGS

Limitations to the findings of this study are present. The data set was limited to responses provided at a single moment in time. A longitudinal study may provide more prolific and robust data results (i.e., a longitudinal study to identify the physically disabled traveler's changes in travel behavior, service needs or travel desires over time or to study the broad physically disabled traveler generational cohort and identify variance patterns over time.)

The data set for physically disabled persons was limited to those individuals who sought membership with the American Association of the Physically Disabled and also reside in Michigan, Ohio, Indiana and Illinois. This group of physically disabled individuals may not be representative of physically disabled persons in general or generalizable to other geographic areas. Moreover, physical ability to complete the survey, for example those with "major" disabilities, may have been a concern for the study: however, response rates for both samples (general person sample and physically disabled person sample) were similar.

The physically disabled sample afforded mostly severely and moderately physically disabled persons. Persons with minor disabilities appeared not to be members

of the American Association of the Physically Disabled. It is anticipated that individuals with minor disabilities are more able to travel, thus physically disabled persons travel statistics presented here are most likely lower than the full physically disabled population.

This study attempted to create a situation whereby respondents were asked to recall travel planning resources used, travel related communications and past behaviors and activities participated in when planning vacations. This study is limited to participant's ability to accurately recall this information.

Finally, a limitation of the study was the measurement of the variables. The scale used to measure opinion leadership was adopted from Childers (1986), pertaining to retail product purchases and therefore limited to this intended format. Additionally within this scale, the approach of using the mean score to differentiate opinion leaders from non-opinion leaders served as a limitation.

FUTURE RESEARCH

The techniques used to market to people are fast changing. This study addressed one facet of marketing, the identification of opinion leaders and measured opinion leadership in travel planning and decision-making by people with disabilities. Future research could extend this study to opinion leadership within different segments of the physically disabled traveler market (e.g., activities, race/ethnicity, trip purpose, trip schedule). Additionally, this study was conducted at a time when communication mechanisms were rapidly changing. Future studies could focus more on electronic use of technology. Using the web; through intercept studies; with focus groups and using

snowballing sampling could help identify social networks specific to the physically disabled traveler market and would enrich the understanding of these persons.

The identification of opinion leadership's existence within the physically disabled traveler market is just one element in the study of diffusion theory. Understanding how new ideas and products are adopted within a social network and the roles different individuals play in the adoption process over time offers an abundance of research opportunities. Identification of the social networks found within the physically disabled traveler market, the various roles individuals play within this process and the investigation of the best practices to employ to successfully and comprehensively communicate with these social networks would be a contribution in further understanding of this market.

Research could further examine the specific travel needs and desires of the physically disabled traveler. An origin-to-destination study that identifies required services for the physically disabled traveler would be an extraordinarily helpful tool for the destination marketer and could also assist economic development officials with service gap information for their respective region. Additionally, the tourism industry rule of thumb for the average United State travel party size is 2.5 persons. Since results of this study show disabled travelers traveling with family and friends, research regarding travel party size and spending could be accomplished. This indicates that the disabled traveler market segment holds potential for both the disabled traveler and their spending and in addition the spending of individuals traveling with these individuals. This information would be very valuable to assist marketers with economic impact projects pertaining to this growing market segment.

Finally, longitudinal research on the physically disabled traveler opinion leader could be implemented to test changes over time in decision-making behavior, travel behavior, biological need changes, etc. Since research within the physically disabled traveler market segment is sparse, use of historical data to predict future behavior is limited. Advances in health care enable people to live longer and survive war induced disabilities additionally disability numbers rise with age. As a result, investments into research to further understand the currently physically disabled traveler as well as those likely to become physically disabled as a result of war or as people age could advance academic understanding of the physically disabled traveler and could help predict future behavior. Additionally, further research could provide important information to the travel industry. As travel industry members strive to serve the physically disabled traveler future research findings could deliver the information needed to develop improved goods and services for this underserved, potentially profitable and growing in size and importance market niche.

FINAL COMMENTS

According to Roger (2005) getting a new idea adopted is difficult. The theory of diffusion focuses on ascertaining the process in which an innovation is communicated through certain channels over time among the members of a social system. Opinion leadership is the degree to which an individual is able to influence other individuals' attitudes or overt behavior informally in a desired way with relative frequency. In this study, the opinion leader identified within the physically disabled sample reported higher perceived propensity to travel for vacations or leisure within the Midwest and the United States than non-opinion leaders. The opinion leader within the physically disabled

sample perceived a higher skill level, took a greater number of day-long, short overnight and long overnight vacations; and recorded a higher number of interpersonal communication events about travel than their physically disabled sample non-opinion leader counterpart. The physically disabled sample opinion leaders were more likely to use tourism specific trip planning information sources, greater numbers of mass media sources and placed a higher importance on use of electronic media information sources than were their physically disabled sample non-opinion leader cohorts.

MANAGEMENT RECOMMENDATIONS

From these results, the beginnings of a tourism product intervention program may be developed. This program could focus on disability specific information and may be focused at opinion leaders to encourage them to influence their followers and adopt the particular tourism destinations designed to meet their needs. Electronic and digital media (i.e., internet, radio, television) is the recommended mechanism for use in this communication effort. This may be accomplished by the development of web pages and digital information designed specifically for the physically disabled traveler. Accurate and detailed information regarding accessibility to attractions, restaurants, shopping and lodging facilities are desirable and could serve to stimulate conversations within the social networks of these individuals. Additionally, information regarding repair services for mobility units, sight and hearing alert mechanisms available for use and pharmacy hours of operations serve as a few examples of services, which if available, could be communicated to the physically disabled traveler by way of electronic media and could stimulate word of mouth recommendations. Electronic messages that allow for visuals

should include images of disables persons enjoying the facilities. Additionally, familiarization tours for tour operators, travel agents, press writers and identified physically disabled traveler opinion leaders could be executed. Promotional offers targeted to this market segment could be developed. A specific promotion may allow the tourism industry facility to measure the return on investment for the program and potentially justify further investments to serve this market segment.

APPENDICES

APPENDIX A

SURVEY COVERLETTER

Date
Name Address City, State Zip
Dear (Sir Name):
Michigan State University (MSU) is studying vacation planning behavior. We are interested in learning about your travel experiences. The research study will both fulfill a dissertation requirement and be shared in several venues of the tourism industry.
The survey will take 10-15 minutes to complete. You indicate your voluntary agreement to participate by completing and returning this survey. However, if you choose not to complete all or part of the questions, you will not suffer any penalty. You are free to discontinue your participation at any time. Your responses will be anonymous and your privacy will be protected to the maximum extent allowable by law. As a thank you for taking the time to complete the survey, your name will be entered in a drawing for one two-day vacation package to the Bavarian Inn Lodge in Frankenmuth Michigan.
If you have any questions about this project at any time, please call Dr. Christine Vogt, Associate Professor at MSU: (517) 432-0318 or contact her at vogtc@msu.edu. If you have any questions or concerns regarding your rights as a study participant, or are dissatisfied at any time with any aspect of this study, you may contact – anonymously, if you wish, Peter Vasilenko, Ph. D., Director of the Human Research Protection Programs (HRPP) at Michigan State University: (517) 355-2180, fax: (517) 432-4503, email: irb@msu.edu, or regular mail: 202 Olds Hall, East Lansing, MI 48824.
We greatly appreciate your cooperation!
Sincerely,

Christine A. Vogt, PhD
Michigan State University
vogtc@msu.edu

Annette Rummel, PhD Candidate
Michigan State University
rummela1@msu.edu

Enclosures: survey, postage paid envelope

APPENDIX B

SURVEY INSTRUMENT



The survey should take 10 - 15 minutes to complete. Part 1 asks about how much you travel. Part 2 asks about the resources you consult for travel information. Part 3 asks whether you discuss travel with others and how you plan your trips and the last section asks for information about your physical condition and household. If any adult person the household has a physical disability, please have them complete this survey; otherwise please complete and return the survey in the prepaid envelope.

PART 1: This section asks how much you travel for vacations or leisure.

1. Please indicate your level of agreement or disagreement with the following statements about vacation travel over your lifetime. (please circle one response for each statement)

Statement	strongly disagree		neutral		strongly agree
I have traveled a lot in the Midwest	1	2	3	4	5
I have traveled a lot in the United States	1	2	3	4	5
I have traveled a lot internationally	1	2	3	4	5
I consider myself a well-traveled person	1	2	3	4	5
I consider myself a skilled traveler	1	2	3	4	5

•	opproximately how many day vacations, short overnight vacations and long ou taken (both domestic or international)? (please use "0" if none or fill in a
	Day-long vacation (1 day or less)
	Short overnight vacation (2 or 4 days)
	Long overnight vacation (5 or more days)

3. Please recall a recent, memorable vacation trip that you took in recent years.				
a. When did you go on this trip?mo	nth	ye	ar	
b. Where did you go on this trip?		destina	ation (s)	
c. Prior to this trip, had you been to this destination before?	☐ yes	□ no		
d. Who went on this vacation trip with you? (check all that apply)		family tour group	☐ friends ☐ yourself	
PART 2: This section asks about resources you use to plan your leisure vacations.				

4. Please indicate the importance of each newspaper source when planning vacations. (please circle one response for each newspaper or check "do not use")

Newspaper	not important		somewhat important		very important	do not use
New York Times	1	2	3	4	5	
USA Today	1	2	3	4	5	
Wall Street Journal	1	2	3	4	5	
Detroit FreePress/News	1	2	3	4	5	
Chicago Tribune	1	2	3	4	5	
Indianapolis Star	1	2	3	4	5	
Any Ohio metro newspaper	1	2	3	4	5	
Any local newspaper	1	2	3	4	5	

5. Please indicate the importance of each information source when planning vacations. (please circle one response for each information source or check "do not use")

Information sources	not important		somewhat important		very impo rtant	do not use
Internet	1	2	3	4	5	
e-mail	1	2	3	4	5	
Web logs or Blogs	1	2	3	4	5	
Chat rooms	1	2	3	4	5	
Social networking sites	1	2	3	4	5	
Expedia.com	1	2	3	4	5	
Hotwire.com	1	2	3	4	5	
Travelocity.com	1	2	3	4	5	
Orbitz.com	1	2	3	4	5	
Hotels.com	1	2	3	4	5	
My past experience	1	2	3	4	5	
Well-traveled acquaintances	1	2	3	4	5	
Advice from family	1	2	3	4	5	
People with whom I work	1	2	3	4	5	
Advice from friends	1	2	3	4	5	
Previous involvement w/ similar places	1	2	3	4	5	
My travel partner's past experiences	1	2	3	4	5	
Brochures from state tourism office	1	2	3	4	5	
Brochure from local attraction	1	2	3	4	5	
Guidebooks	1	2	3	4	5	
Highway welcome centers	1	2	3	4	5	
Chambers of commerce	1	2	3	4	5	
Convention and visitors bureaus	1	2	3	4	5	

Information sources:	not important		somewhat important		very impo rtant	do not use
Picture books	1	2	3	4	5	
Travel agents	1	2	3	4	5	
Motor club publications (i.e. AAA)	1	2	3	4	5	
Radio commercials	1	2	3	4	5	
TV commercials	1	2	3	4	5	
Magazine articles	1	2	3	4	5	
Magazine advertisement	1	2	3	4	5	

6. Please indicate the importance of each magazine when planning vacations. (please circle one response for each magazine or check "do not use")

					very	
Magazines	not important		somewhat important		impo rtant	do not use
AARP Magazine	1	2	3	4	5	
Readers Digest	1	2	3	4	5	
Better Homes and Gardens	1	2	3	4	5	
Good Housekeeping	1	2	3	4	5	
Midwest Living	1	2	3	4	5	
Ladies Home Journal	1	2	3	4	5	
Women's Day	1	2	3	4	5	
Family Circle	1	2	3	4	5	
TV Guide	1	2	3	4	5	
Modern Maturity	1	2	3	4	5	
National Geographic	1	2	3	4	5	
Other travel magazines	1	2	3	4	5	
Please identify other magazine (s) for planning vacations:						

7 Diago indiago dha dha	- : C :		6.1 :1:	
7. Please indicate the three	e information source	es you find most use	iui in pianning yo	ur vacations.
1	2		3	
L				
PART 3: This section as	sks how you plan y	our vacations and	who you discuss v	acations with.
8. Please circle the number		•		or written) with friends
and family regarding vaca	ition travel. (circle	one for each stateme	nt)	
a) How often do you talk	to your friends and	l neighbors about vac	cation travel:	
never		sometimes		very often
1	2	3	4	5
b) When you talk to your	friends and family	about vacation trave	l do you:	
give very little		give some		give a great deal of
information		information		information
1	2	3	4	5
c) In the past 12 months,	how many friends	and family have you	told about vacatio	n destinations?
dald no one	told	told	told	told
told no one	1-5 people	6-10 people	11-15 people	16 or more people
1	2	3	4	5
d) Compared with your fi	riends and family, h	now likely are you to	be asked about va	cation travel?
not at all likely to be		moderately		very likely to be
asked		likely		asked
1	2	3	4	5
e) In discussions of vacat	ion travel, which o	f the following happe	ens most?	
your friends and				you tell your friends
family tell you about		even split		and family about
travel				travel
1	2	3	4	5

not used as a source of advice	sometimes			often used as a source of advice		
1	2	3	4			5
9. People plan their trips in dif statements describing how you	· ·		_			owing
		strongly		noutral		strongly
		disagree		neutral		agree
I plan my entire trip well in ad	vance	1	2	3	4	5
I plan most of my vacations be fill in the details after I arrive.		1	2	3	4	5
I plan most of my vacation one destination	•	1	2	3	4	5
10. Over the past 12 months, hor recommendations from whe 11. Over the past 12 months, how vacation information when plants	ow many persons (e.g.,	ns?friends, co-wor	_numbei kers, fai	r of people mily) asked	you ab	
PART 3: The final section as	ks questions for classif	ication purpos	es only.			
12. Are you? (please check or	ne box)					
□ female	☐ male					
13. What is your current mart	ial status? (please check	one box)				
☐ married	☐ divorced/sep	parated				
☐ never married	□ widowed					

14. In what year were you born?	year (e.g., 1959)
15. Are there children under 19 years	of age living in your household? (please check one box)
□ yes	□ no
16. Please indicate the highest level o	f education you have obtained. (please check one box)
☐ Less than High School Graduate	☐ College Degree
☐ High School Graduate	☐ Some Graduate School
☐ Technical School	☐ Advanced Degree
□ Some College	☐ Other: describe
17. Which of the following statement sources) before taxes? (please check	best describes your total annual 2006 household income (from all one box)
☐ Less than \$20,000	□ \$60,000 to \$79,999
□ \$20,000 to \$39,999	□ \$80,000 to \$99,999
□ \$40,000 to \$59,999	☐ Greater than \$100,000
18. Are you physically disabled? (ple	ease check one box)
□ no, → skip to question 20	,
yes, at what age did you become	disabled? years old
What is the nature of your disability?	
Please classify your disability.	evere

19.	Please indicate your level of agreement or disagreement with the following statements.	(check one
resp	ponse for each statement)	

Statement	strongly disagree		neutral		strongly	
					agree	
I receive necessary disability services information when making hotel reservations	1	2	3	4	5	
I am understood when asking questions regarding disability services	1	2	3	4	5	
I receive necessary disability services travel information when calling 800 numbers	1	2	3	4	5	
I receive necessary disability services travel information through web sites	1	2	3	4	5	
I receive necessary disability services information when making airline reservations	1	2	3	4	5	

20. Are there any additional comments regarding travel you would like to share? If so, please provide below:							

Thank you!

Please return to: Tourism Study, 131 Natural Resources Building, East Lansing, Michigan 48824-1222

APPENDIX C

POSTCARD

POSTCARD BACK

Hello,

Recently, we sent you a survey about vacation planning. If you have already returned the survey, thank you for your timely response. We appreciate your time and effort.

If you have not yet sent the survey back in the prepaid envelope, please take some time now to complete the survey. Your response is very important for the completion of this study, accurate representation of vacation planning decision-making and will result in recommendations to improve vacation planning information.

Once again, thank you for your help in completing this research. If you have any questions, please do not hesitate to call me at 517-432-0318 or e-mail me at vogtc@msu.edu. Thanks again for your help!

Sincerely,

Christine Vogt, Michigan State University

POSTCARD FRONT

Christine Vogt
Michigan State University
Park, Recreation and Tourism Resources
131 Natural Resources Building
East Lansing, MI 48824-1222



APPENDIX D

SURVEY REMINDER LETTER

Date

Name Address City, State Zip

Dear (Sir Name):

About three weeks ago, we wrote to you asking about your thoughts and opinions on vacation planning. As of today, we have not yet received your completed questionnaire. If you have already returned your questionnaire thank you.

We are writing you again because of the importance of your opinion in gaining an accurate picture of vacation planning behavior. Overall response has been encouraging so far. However, the accuracy of the final results depends upon you and others in the study that have yet to respond. Your response is important for accurate completion of this research study. It will also fulfill a dissertation requirement for a student at Michigan State University and will result in recommendations to improve travel information for vacationer's to the Midwest region of the United States of America.

Your participation in this study is completely voluntary and you may refuse to answer any particular questions. The survey will take 10-15 minutes to complete. You indicate your voluntary agreement to participate by completing and returning this survey. However, if you choose not to complete all or part of the questions, you will not suffer any penalty. As a thank you for taking the time to complete the survey, your name will be entered in a drawing for one two-day vacation package to the Bavarian Inn Lodge in Frankenmuth Michigan. This drawing will be held on June 15, 2007. Surveys received after that date will be accepted; however, names will not be included in the drawing.

Any questions about this project may be directed to Dr. Christine Vogt, Associate Professor at MSU: (517) 432-0318 or contact her at vogtc@msu.edu. If you have any questions or concerns regarding your rights as a study participant, or are dissatisfied at any time with any aspect of this study, you may contact – anonymously, if you wish, Peter Vasilenko, PhD, Director of the Human Research Protection Programs at MSU: (517) 355-2180, fax: (517) 432-4503, email: irb@msu.edu, or mail: 202 Olds Hall, E. Lansing, MI 48824.

We greatly appreciate your cooperation!

Christine A. Vogt, PhD

Annette Rummel, PhD Candidate

Michigan State University

Michigan State University

vogtc@msu.edu

rummela l@msu.edu

Enclosures: survey, postage paid envelope

APPENDIX E

NON RESPONSE SURVEY

Date

Name Address City, State Zip

Dear (Sir Name):

Over the past two months you were selected to receive a survey called "Travel Survey." I am writing you for a final time because we did not hear from you. To accurately understand travel activity, we need the full range of public input, including your information. Would you consider answering these few critical questions and return this letter in the prepaid envelope? Your answer will be anonymous. This will be the last contact with you.

1. Please indicate the three	information sources ve	ou find most useful in	planning your year	etions
	·			
1	2	3		
2. Please circle the number and family regarding vacati			electronic or writt	en) with friends
a) How often do you talk to	o your friends and neig	hbors about vacation	travel:	
never		sometimes		
1	2	3	4	5
b) When you talk to your f	riends and family abou	t vacation travel do ye	ou:	
give very little information		give some information		give a great deal of information
1	2	3	4	5
c) In the past 12 months, h	ow many friends and f	amily have you told a	bout vacation desti	nations?
told no one	told	told	told	told
	1-5 people	6-10 people	11-15 people	16 or more people
1	2	3	4	5
d) Compared with your frie	ends and family, how l	ikely are you to be asl	ked about vacation	travel?
not at all likely to be		moderately		very likely to
asked		be asked		
1	2	3	4	5

e) In discussions of vacation	travel, which of	the following happens most?	-	
your friends and family tell you about travel		even split		you tell your friends and family about travel
1	2	3	4	5
f) Overall in all of your discu	ssions with frien	ds and family about travel are y	ou:	
not used as a source of advice		sometimes		often used as a source of advice
1	2	3	4	5
3. Are you physically disable	ed? (please check	one box)		
\square no, \rightarrow skip to question 5.				
☐ yes, at what age did you b	pecome disabled?	years old		
What is the nature of your dis	ability?			
Please classify your disability	. 🗆 severe	□ moderate	- 1	minor

4. Please indicate your level of agreement or disagreement with the following statements. (check one response for each statement)

Statement	strongly disagree		neutral		strongly agree
I receive necessary disability services information when making hotel reservations	1	2	3	4	5
I am understood when asking questions regarding disability services	1	2	3	4	5
I receive necessary disability services travel information when calling 800 numbers	1	2	3	4	5
I receive necessary disability services travel information through web sites	1	2	3	4	5

I receive necessary disability services information when making airline reservations... 1 2 3 4 5

5. Are there any additional comments regarding travel you would like to share? If so, please provide below:				
	1			

We greatly appreciate your cooperation!

Christine A. Vogt, PhD vogtc@msu.edu

Annette Rummel, PhD Candidate rummela l@msu.edu

Enclosures: survey, postage paid envelope

APPENDIX F

MAGAZINE TITLES

- AAA
- AAA Destinations
- AAA Home + Away
- AAA Hone & Away
- AAA Magazine
- AAA Magazine
- AAA Members magazine
- AAA Tour book, Ohio hist soc
- AAA, MEA
- Airline Magazine
- Airline Magazines, Alaska Travel
- Audubon
- Auto motor, Auto week, Cars
- Backpacker
- BlueGreen
- Boater's guide, North American Hunter
- Books obtained at Travel offices
- Budget travel
- Budget Travel
- Budget Travel, Atlantic
- Budget Travel, Conde Nast
- Budget Traveler Country Living
- Budget Travel
- Camping & time share magazines
- Conde Nast
- Conde Nast, Traveler, National Geographic, AAA Magazine, Travelers
- Candle Nast. Style
- Chamber of Commerce
- Conde Nast
- Conde Nast Traveler
- Conde Nast
- Conde Nast, Travel & Leisure, Budget Travel, Regional Magazines Arizona Highway Chicago
- Cooking Light, Vanity Fair
- Cruise Books
- Cruise Books Mostly
- Cruise Magazines
- Cruise Travel
- Destination Brochures
- Disability Magazines
- Disability travel magazine
- Ebony & Essence
- Elk's Magazine
- Emerging Horizons
- Environmental Magazines/Earth watch
- Family Fun
- Far and away from AAA
- Florida & Shell
- Game & Fish outdoor, IL
- Golf
- Golf Magazines

- Golf Digest
- Gourmet, House Beautiful, France & Just about Hors
- Hawaii Magazine, Oh, FL, KY, Individual State Magazines NV, TX, etc.
- Home and away
- Home & Away, AAA
- Horse (Equine Related) APHA, AQHA
- I do not use one
- International Magazines
- Interval
- Magazine of Destination e.g., "Lake"
- magazines published by State/Provinces
- Martha Steward Living, Gold wing Road Rider Magazine
- Men's Fitness, Conde Nast Traveler
- Michigan travel magazine
- Michigan Traveler
- Motel Coupon Books
- New Mobility
- non-response
- Ohio Magazine
- Ohio Motorist
- Ohio, Over the backyard Fence
- Out Traveler
- Parachutist, Skydiving
- Pop Photo Rider (motorcycle)
- professional journals and newsletters, list serves
- Professional list serves
- Quilt Magazines
- Readers digest
- Reminis, "local"(Travelocity)
- Resort Condominiums International Endless Vacation
- Scuba; Skiing
- Sea kayaker, Canoe+ Kayak, Bicycling
- Sherman Travel & International Living
- Smithsonian, Preservation
- Sothern Living, Coastal Living
- Southern Living AMC Outdoors
- Southern Living
- Southwest Living, Traverse City, Chicago
- Trailer Life
- Travel
- Travel & Leisure
- Travel by American Express
- Travel from American Express
- Travel Leisure
- Travel Section newspaper
- Traveler

- TV Travel Channel
- University Quarterly's
- Veterans Magazines

- Virtuoso
- Where to retire

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