



Experimental analysis of the relationship between depressed mood and compulsive buying

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ARTICLE INFO

Article history:

Received 25 January 2012

Received in revised form

19 October 2012

Accepted 24 October 2012

Keywords:

Compulsive buying

Oniomania

Impulse control disorders

Obsessive compulsive spectrum disorders

Memory

ABSTRACT

Background and objectives: Compulsive buying is a serious but understudied problem, where individuals are unable to resist or control their buying behaviour, leading to substantial social and financial problems. To date there has been a lack of experimental research into the disorder.

Methods: The relationship between mood and compulsive buying was examined in compulsive buyers ($N = 18$) and non-clinical controls ($N = 17$), using experimental information-processing paradigms. In study 1, it was expected that, if buying behaviours function as a coping strategy for depressed mood, then an induction of depressed mood would lead to an enhanced memory for appealing consumer-objects in compulsive buyers, but not controls. In study 2, we examined the association between emotional and functional constructs and consumer items. It was expected that compulsive buyers would show stronger semantic relationships and thus better episodic memory for object–emotion pairs, relative to object–function pairs, for appealing items.

Results: Unexpectedly, in study 1 the memory-facilitating effect of depressed mood was evident among control participants and absent among compulsive buyers. In study 2, compulsive buyers showed a lesser association of undesirable objects with positive emotional concepts than did non-clinical controls, and compulsive buyers were found to more strongly associate all consumer items with emotional concepts than with concepts of function.

Limitations: Key limitations were low power and possible floor effects due to error frequency data.

Conclusion: These findings provide insights into the processes underlying CB phenomena, in particular supporting the role of mood in compulsive buying.

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1. Introduction

Compulsive buying (CB) is a serious and common psychological problem associated with marital conflict, bankruptcy, theft, embezzlement and even suicide attempts (Christenson et al., 1994). Three core features are generally agreed to characterise CB: (a) subjectively irresistible urges to buy; (b) loss of control over buying behaviour; and (c) continued compulsive buying behaviour despite adverse consequences (Dittmar, 2005a). Estimates of the prevalence of CB in the US have ranged between 1.8% and 8.1% of the general population depending on the cut-off used (Faber & O'Guinn, 1992). Onset is typically between the ages of 18 and 30 (Black, 1996; Dittmar, 2005a), and with around 90% of compulsive

buyers being female in clinical samples, although a community-based prevalence study has suggested that compulsive buying may be prevalent in similar rates in males and females (Koran, Faber, Aboujaoude, Large, & Serpe, 2006).

Kyrios, Frost, and Steketee (2004) have developed a cognitive-behavioural model of compulsive buying (for a compatible model, see Kellett & Bolton, 2009). The model emphasizes domains such as maladaptive attachments to objects, specific cognitions about the uniqueness of, and responsibility for, desired objects, and self construals (Frost, Kyrios, McCarthy, & Mathews, 2007). Compulsive buyers exhibit concerns about the potential loss of opportunities “to get a bargain” or to purchase an object with particular desired characteristics and, despite perceptions that purchased objects are essential, they often remain unused after being purchased (Kyrios et al., 2004). For example, Kyrios, Moulding, Arnold, and Ciorciari (submitted for publication) found that beliefs about the utility of items – that items are uniquely able help the individual improve their lives – such as “This item is so unique that there is nothing

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else like it in the world”, “If I buy this, people will find me more attractive”, and “This item will make me feel better” – were strongly related to buying symptoms in a student and community sample ($N = 240$) over-and-above mood and other variables implicated in social models of buying (e.g., materialistic values).

CB operates in a negative cycle with depression, with buying episodes operating to relieve negative mood in the short-term, but in the long term the lack of satisfaction from consumer objects and negative consequences of buying episodes serve to perpetuate depression. Kyrios et al. (2004) found moderate correlations between CB and depression symptoms, consistent with the beliefs identified in their model that buying will serve to alleviate negative mood or improve self-worth. They also found that compulsive buyers believed that objects could compensate for negative emotions, even when controlling for depressed mood *per se*. Faber and Christenson (1996) found approximately 25% of normal buyers indicated that buying alters their mood, compared to 96% of compulsive buyers. More directly, Miltenberger et al. (2003) found that inflated pre-buying self-ratings of depression dropped significantly during buying episodes but increased again post-purchase.

Therefore, some findings suggest that individuals with CB may deliberately use buying episodes as a dysfunctional method of regulating negative emotions. However, it has not yet been shown that experimentally manipulating mood state has an impact on buying behaviour and associated information processing. One difficulty in such experimental research is that it is difficult to establish a controlled experimental environment in which to examine the influence of modulating negative affect on CB. An alternative approach is to establish the relationship between mood and CB by examining information processing. If the “compensation hypothesis” is correct, then compulsive buyers should associate consumer objects with emotional concepts. That is, the expectation that purchasing consumer items will serve to compensate for unpleasant emotions should lead to individuals with CB having a stronger semantic relationship between emotional concepts and consumer items. Experimentally demonstrating the existence of such associations among individuals with CB, which significantly differ from the associations of non-buyers, would be strong evidence in support of the compensation hypothesis. This hypothesis was examined in two studies using participants with CB and non-clinical control participants.

2. Study one

In study one, we aimed to investigate the link between negative mood and buying through examining the effect of a negative or neutral mood induction on recognition memory for idiosyncratically desired vs. non-desired items. Items primed in working memory can lead to a “pop-out” effect in visual search tasks for stimuli that match some or all elements of the memory prime (Soto, Humphries & Heinke, 2006). Therefore, if depressed mood is associated with CB, it will trigger buying-related mental processes and activate these in working memory, effectively “priming” the participant to attend to buying-related stimuli. An induced depressed mood should lead to direct attention to items perceived to be able to compensate for depressed mood, but not to items with no perceived compensatory role. This, in turn, would lead to superior engagement and, therefore, recognition of these items by people who meet CB criteria, of the CB-related items (items subjectively perceived as appealing) presented in the memory task.

In this study, individuals with compulsive buying and non-clinical (NC) controls were exposed to a depressed or neutral mood induction, prior to being asked to memorise a sequence of subjectively attractive and unattractive consumer items. They were then shown the items along with distractor items, and asked to

identify which had been shown previously. For the compulsive buyers but not the control group, highly-ranked items, which should be more associated with mood-relieving effects, were expected to be attended to more readily in the memory task when these associations are primed by mood state (i.e., in the depressed mood group). Consequently, it was hypothesised that CB participants but not non-clinical controls would make fewer errors when asked to recognise high-ranked items in the depressed mood state relative to the neutral mood state, after the general effect of mood was accounted for. These effects were expected for miss errors and not false positives, due to the effects of facilitation being limited to the association between aroused emotion and the co-occurrence of an event (Kazui et al., 2000).

2.1. Method

2.1.1. Participants

Participants undertook both study 1 and 2, and were recruited via advertisements placed around universities, public libraries and notice boards, and through responses to media publicity including newspaper articles and television and radio interviews. Interested participants completed an initial screening questionnaire to determine suitability (approximately 200 screening questionnaires were distributed, $N = 85$ returned). Additional measures were also given that are detailed in a larger questionnaire-based study detailed elsewhere (Kyrios, Moulding, & Zabel, submitted for publication), before participants were invited to participate in the experimental studies. Participants received AUD\$20 reimbursement of travel costs. To qualify for the CB group, individuals had to obtain scores on the Compulsive Buying Scale below a threshold of -1.34 , identified by Faber and O’Guinn (1992) as the cut-off for compulsive buying; and they had to endorse at least one of two screening questions, “I am a compulsive shopper (or ‘addicted’ to shopping)” or “Currently experiencing problems due to excessive buying” (6 participants excluded for meeting only one of two criteria). Individuals who did not meet either of these criteria were invited to participate in the control group. In addition, individuals classified as compulsive buyers were required to be below the threshold for mania and borderline personality disorder and to be below the extremely high-range for depression on the measures described below (overall 17 participants met one or more of these exclusion criteria). No participants included in the study reported significant psychiatric history besides prior treatment for depression or anxiety disorders. Overall, 35 participants were invited to participate in the CB group and 27 in the NC group. Of these, a final sample of 35 participants (28 female) participated in the experimental tasks, with eighteen in the control group and 17 in the compulsive buyer group. One participant in the CB group was excluded from Study 2 due to a computer malfunction. The groups did not differ on gender, being single, age, or education (see Table 1).

2.1.2. Questionnaires

2.1.2.1. Altman Self-Rating Mania Scale (AMS; Altman, Hedeker, Peterson, & Davis, 1997). A 5-item self-rating scale of the severity of manic symptoms. The scale has satisfactory reliability and validity.

2.1.2.2. Borderline Screening Measure (BSM; Hyler et al., 1989). A 9-item scale measuring borderline personality tendencies. The PDQ-4 is a widely used reliable and valid measure.

2.1.2.3. Compulsive Buying Scale (CBS; Faber & O’Guinn, 1989). A well-validated 7-item screening measure for CB that has demonstrated good reliability and validity (Faber & O’Guinn, 1989,

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