



# Self-medication and pleasure seeking as dichotomous motivations underlying behavioral disorders <sup>☆</sup>

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## ABSTRACT

Social concern is increasing about the perceived negative effects from consuming a number of legal products including gambling, alcohol, and food. This study uses data from a clinic treating gambling and other behavioral disorders to test the theory that different motivations may exist in the consumption of legal products that harm health and well-being. Pathological consumers whose goal is self-medication are more likely to have correlated consumption disorders (e.g., other substance dependencies) than those whose goal is pure pleasure. Self-medicators demonstrate a positive correlation between the severity of their consumption problems and having other substance dependencies. This finding suggests that gambling and other substance dependencies are means of self-medication to one category of pathological gamblers. Furthermore, because self-medicators can more easily substitute among different problem consumptions (e.g., switch from gambling to illicit drugs) for the same goal, they are less likely than pleasure seekers to commit crimes to facilitate their gambling. The possible predictors of motivation types and their implications are further discussed.

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## 1. Introduction

Popular and normal acts of consumption can be threats to individuals' health and well-being. For example, negative consumption effects associate with food (Patton, Selzer, Coffey, Carlin, & Wolfe, 1999; Prentice, 2001), alcohol (Pennock & Kerr, 2005), shopping (O'Guinn & Faber, 1989; Rook, 1987), gambling (Blaszczynski & Nower, 2002), driving automobiles (Insurance Information Institute, 2008), and prescription drugs (Goldsworthy, Schwartz, & Mayhorn, 2008).

Marketing practices can be drivers in creating and popularizing consumption that result in negative effects. Research into advertising (Wansink & Ray, 1996), promotions (Ailawadi & Neslin, 1998) and health claims and nutritional information (Kozup, Creyer, & Burton, 2003) generally shows some positive influence on consumption behaviors. Marketing can influence consumers by manipulating affect or emotions (e.g., Mick & DeMoss, 1990), mood (Andrade, 2005; Wansink, Cheney, & Chan, 2003), and a combination of the nature of the product and the consumer's affective state (Garg, Wansink, & Inman, 2007).

However, marketing and psycho-social research generally neglects investigations into consumer motivation (Bagozzi & Dholkia, 1999).

The limited research into consumer behavior resulting in negative effects generally characterizes these behaviors as consequences of failed self-control (e.g., Faber, Christenson, De Zwaan, & Mitchell, 1995; O'Guinn & Faber, 1989). To date, conceptualizations of the existence of different pathways or motivations that lead to repeated acts of behavior resulting in negative effects (Blaszczynski & Nower, 2002; Hirschman, 1992; Hoch & Loewenstein, 1991) lack empirical support.

This study distinguishes between two types of dysfunctional consumptions, on the basis of primary motivations, namely, pure pleasure seeking versus self-medication. Pure pleasure seeking leads to narrowly focused consumption interests (e.g., less likelihood of substituting gambling for substance use) and more social complications (e.g., committing crime to facilitate gambling), whereas the goal of self-medication leads to a wider variety of consumption alternatives (e.g., pathological gamblers are more likely to have one or more other substance dependencies) but fewer social complications (e.g., lower rates of crime to facilitate gambling).

## 2. Theoretical development

The current study adopts a psychiatric term—pathological behavior—to refer to dysfunctional or maladaptive consumption that leads to psychosocial consequences: personal, financial, professional, and legal (American Psychiatric Association, 1994). In the literature, the terms pathological, addictive, and compulsive appear interchangeably, and although these constructs have subtle differences, distinguishing between them is beyond the scope of this research (for relevant discussions, see

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Blaszczynski & Nower, 2002). Hence, this study uses the term pathological behavior for consistency with the APA definition.

Fields as diverse as biology, neurology, psychology, and economics provide various explanations for pathological consumption (e.g., Becker & Murphy, 1988; Marlatt, Baer, Donovan, & Kivlahan, 1988). Studies provide evidence supporting and refuting each conceptual model of pathological behavior, giving rise to the argument that multiple pathways might exist that lead to the development of pathological behaviors (Marlatt et al., 1988).

Hirschman (1992) integrates different theories of consumption disorders (Hoch & Loewenstein, 1991; Rook, 1987) to create a conceptual model that categorizes illicit drug users as being either distressed or sociopathic. Distressed illicit drug users generally are depressed and stressed, and strive to escape from a negative emotional state by using consumption behaviors as a form of medication. For this type of compulsive consumer, what they desire “is not conceived as the seeking of hedonic pleasure, but rather the reduction of dysphoria or emotional distress” (Hirschman, 1992, p. 159). Thus, compulsive consumption to these individuals becomes a means to achieving a higher-level or alternative end-state, a better mood or a (temporary) escape from distress.

In contrast, the immediate gratification or impulse that sociopathic users of illicit drugs feel from an illicit drug drives them. When these consumers find something (in this case, an illicit drug) that provides the sought-after pleasure, they pursue this sought-after pleasure relentlessly (Hirschman, 1992). Therefore, for pure pleasure seekers, the pleasure they derive from a form of compulsive consumption is more likely to be the exact end-state that they are striving for.

### 2.1. Different motivations of pathological consumption and implications

Extending the qualitative exploration of dual consumption types in pathological consumption of illicit drugs (Hirschman, 1992), the current research investigates whether pathological consumers with different motivations will demonstrate distinctive behavior characteristics. This study draws on recent theoretical developments on goals and needs (Brendl, Markman, & Messner, 2003; Kruglanski et al., 2002) to examine potential heterogeneity in pathological consumption.

If differing motivational forces—self-medication versus pleasure-seeking—underlie the same form of pathological behavior (e.g., gambling), then differing patterns of behavior would be expected. In line with goal-systems theory (Kruglanski et al., 2002), goals might be cognitively associated with their corresponding means of attainments. Different means to the same end would facilitate one another in terms of activation strength because they are interconnected (Kruglanski et al., 2002).

Thus, for pathological gamblers whose goal is self-medication, different forms of pathological consumption (e.g., overdrinking, drug addiction, binge-eating, and pathological gambling) might be different means of achieving the same end-state (i.e., self-medication). The interconnections among different forms of consumption make them more easily substitutable (Kruglanski et al., 2002). If a pathological consumer of one behavior domain has a goal to self-medicate, he or she would be more likely to seek other forms of pathological consumption, as long as they satisfy the goal of self-medication. Thus, a positive correlation (or substitutive relation) should exist among different forms of compulsive consumption for pathological consumers whose goal is self-medication.

In contrast, consistent with characteristics outlined for sociopathic illicit drug users (Hirschman, 1992), pure pleasure-seeking consumers who have already developed a pathological preference for a particular consumption domain should be more likely to seek the specific reward derived from that particular domain. To this type of pathological consumer, the “pleasure” derived from the consumption of a particular product is the exact end state that they are seeking. Extrapolating from the research findings about the inhibiting role of focal goals on other goals (Brendl et al., 2003), pure pleasure-seeking pathological

consumers of one particular domain should devalue other forms of consumption that do not provide the same kind of hedonic experience or reward. Therefore, a negative correlation (or inhibition relation) should exist among different forms of compulsive consumption for pathological consumers whose goal is pure pleasure seeking.

The substituting versus inhibiting relationship hypothesized for the two different types of pathological consumption can have important implications for investigations of comorbid consumption. Comorbidity is a term from psychiatry that refers to the situation wherein people with an existing behavior disorder are at a much higher risk of developing other disorders. In line with motivation theory, pathological consumers who develop behavioral disorders in one domain (e.g., shopping) to escape from reality should be more likely to engage in other dysfunctional acts, such as excessive alcohol consumption, binge eating, and taking illicit drugs, as long as these complementary forms of consumption provide a similar self-medicating outcome. This condition contrasts with that of pathological consumers who develop their problem from the excitement or pleasure that they derive from a singular consumption format (e.g., shopping). These consumers are single-minded in pursuing that product-specific outcome (e.g., the overwhelming pleasure of owning something) and less likely to engage in other comorbid consumption.

Furthermore, the facilitative versus inhibitory links among different forms of pathological consumption under different motivations should also predict how changes in motivational strength in one consumption domain affect the motivational strength in the other domains. For pathological consumers whose goal is self-medication, if the strength of the motivation in one consumption domain is greater, then the motivational strength should also be greater in the other domains.

Conversely, the increased strength of a domain-specific pure pleasure-seeking goal should decrease the individual's propensity toward pathological behavior for another goal or need outside that domain. Thus, for pure pleasure seekers, the more severe their pathology in one particular domain is, the less likely they will engage in other forms of pathological consumption.

Last, the differences in motivation have implications for the costs incurred to engage in a particular pathological behavior. When the cost of engaging in one particular domain becomes extreme, goal-systems theory suggests that self-medicators are likely to shift to other consumption domains that satisfy the same goal but are less costly (see also Becker & Murphy, 1988). Thus, self-medicating pathological consumers are more likely to withdraw from a consumption domain when the cost of engaging in that domain becomes too high. For example, if pathological gamblers who gamble to self-medicate know that their behavior (gambling) is going to have potentially severe consequences, such as committing crime (and the threat of prison), they would be more likely to substitute their gambling behavior with other domains of consumption (e.g., drinking alcohol). In contrast, because the dependence on a product is domain specific in nature, pure pleasure seekers would have fewer alternatives to satisfy that particular need. Consequently, pure pleasure seekers are more motivated to facilitate a particular compulsive consumption by any means necessary, even if those means involve breaching the law.

In summary, motivation type should predict how likely pathological consumers are to commit a crime to facilitate their pathological behavior. The self-medication motivation should signal a reduced likelihood of committing crime to facilitate one particular pathological consumption behavior. Note that these predictions only relate to the likelihood to commit crime to carry out the specific consumption behavior, not the likelihood to commit crime in general.

### 3. Main hypotheses

This study develops and tests hypotheses within a particular consumption domain: gambling. The international gambling industry has

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