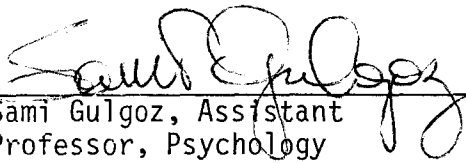
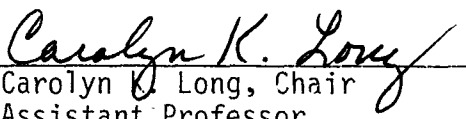


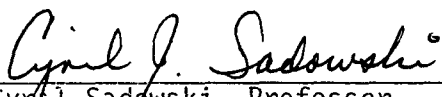
ON-SITE EVALUATION OF MOOD CHANGE
AND ATTITUDES IN SHOPPERS

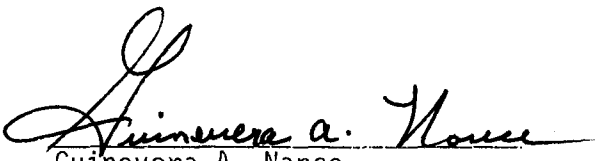
John Gordon Capps

Certificate of Approval:


Sami Gulgoz, Assistant
Professor, Psychology


Carolyn K. Long, Chair
Assistant Professor
Psychology


Cyril Sadowski, Professor
Psychology


Guinevera A. Nance
Director
Graduate Studies

**ON-SITE EVALUATION OF MOOD CHANGE
AND ATTITUDES IN SHOPPERS**

John Gordon Capps

A Thesis

Submitted to

the Graduate Faculty of

Auburn University at Montgomery

in Partial Fulfillment of the

Requirements for the

Degree of

Master of Science

Montgomery, Alabama

December 17, 1991

VITA

John Gordon Capps, son of Huey Horace-Gordon and Dorothy (Whitcomb) Capps, was born February 1, 1956, in Selma, Alabama. He graduated from John T. Morgan Academy, Selma, in 1974. In August, 1974, he entered the University of Alabama and received the degree of Bachelor of Arts (English) in August, 1978. For the next twelve years he was involved first in sales and later in owning and managing a retail business. He changed career goals and entered graduate school at Auburn University at Montgomery, in September, 1989. He married Katherine Herring in April, 1983. They have one son, John-Eric.

THESIS ABSTRACT
ON-SITE EVALUATION OF MOOD CHANGE
AND ATTITUDES IN SHOPPERS

John Gordon Capps

Master of Science, December 17, 1991
(B.A., University of Alabama, 1978)

52 Typed Pages

Directed by Carolyn K. Long

The desire for an elevation in mood as an initiating component for individuals experiencing problems with compulsive shopping was explored. Subjects were 126 individuals ranging in ages from 19 to 65 years. Approximately one-third of the subjects were male and two-thirds were female. A mood adjective checklist was used to evaluate mood states of shoppers before and after entering a large shopping mall. Using a median split analysis, subjects' were divided into four groups: those entering and exiting the mall in a high mood state; those entering in a high mood state and exiting in a low mood state; those entering and exiting in a low mood state; and those entering in a low mood state and exiting in a high mood state. The groups were compared on responses to questions concerning possible addiction to shopping. Results indicated that those experiencing an elevation in mood did not have significantly higher mean responses to addiction related questions.

TABLE OF CONTENTS

LIST OF TABLES.....vii

I. INTRODUCTION.....1

Defining Addiction
 Impulse, Compulsion or Addiction
 Personality Characteristics Related to Addiction
 A Desire to Elevate Mood
 Negative Consequences of Shopping Addiction
 An Unaddressed Addiction
 A Review of the Research
 The Present Study

II. METHOD.....17

Subjects
 Materials
 Procedure

III. RESULTS.....20

IV. DISCUSSION.....24

REFERENCES.....28

APPENDIX.....30

LIST OF TABLES

1. Percent of Group Members in Age, Sex, and Marital Status Categories.....	22
2. Group Means for Questions Concerning Shopping Frequency, Time Spent, and Importance in Life.....	24
3. Group Means for Questions Concerning Amount Spent and Number of Unplanned Purchases.....	25
4. Group Means for Questions Concerning Use of Charge Cards, Number of Charge Cards, and Payment of Charge Cards.....	26
5. Group Means for Questions Concerning Problems from Shopping Including: Guilt, Overspending, Resolutions to Curb Buying, Financial Problems, and Viewing Excessive Shopping as a Problem.....	28
6. Group Means for Cluster of Questions Concerning Problems Related to Shopping.....	29
7. Follow-up Survey Questions.....	30

I. INTRODUCTION

Major organizations such as the Consumer Credit Counseling Service (CCCS) have been established because of the magnitude of the problem that individuals have with overspending. The CCCS stated that in 1990, they were operating 500 offices and had given counseling to over 390,000 families who were having problems managing their spending (Roberts, 1991). Self-help organizations such as Spendmenders and Shopaholics Anonymous have arisen to aid those experiencing the problem. Despite this apparent evidence of a severe problem, academic researchers have shown little interest in the area (e.g., O'Guinn & Faber, 1989; Faber & O'Guinn, 1988; Glatt & Cook, 1987; Winestine, 1985; Natarajan & Goff, 1991).

The idea that excessive spending or shopping may be an addiction is not new. It has received considerable coverage in the popular media, appearing in everything from television talk shows (e.g., Donahue, June, 1991) to women's magazines (e.g., Glamour, April, 1986). However, the amount of serious research devoted to determining if excessive shopping actually is an addiction is quite small.

How do we account for the fact that this potentially addictive behavior receives wide acknowledgement in our culture but so little serious study? Among the problems hindering research in this area is

the confusion over exactly what is meant by the term addiction in the classification shopping addiction. By addiction, do we mean that the behavior is compulsive? Is impulsivity a characteristic of this addiction? Is dependency on a substance or chemical necessary for the individual to be considered addicted? These questions and the significant lack of empirical research dealing with the problem all need to be addressed. This thesis proposes to address these questions of addiction in relation to excessive shopping and provide empirical evidence to suggest that excessive shopping can indeed be an addiction under a broad conceptualization of addiction.

Defining Addiction

The fact that there is ambiguity in the term addiction is well known. In an unpublished paper by Long (1990) comparing major definitions of the term addiction, it was discovered that the only areas in agreement were that, "some behavior must (a) be repetitive, (b) be identified as excessive, and (c) result in some psychological, physical or social problem." (p. 2). This diversity of definitions of addiction evolved as different researchers dealt with various specific excessive behaviors as separate disorders. Yet, "there is an emerging body of research and speculation hypothesizing that 'addiction' may serve as a unifying concept to explain and treat many different forms of behavioral excess." (Long, 1990, p. 1). Because "...most definitions of addiction began as definitions of alcohol addiction," (Long, 1990, p. 1), most researchers continue to ascribe

to the standard definitions of addiction based on chemical dependence such as Chaplin's (1985) in the Dictionary of Psychology which states that an addiction is, "the state of being physically dependent upon a drug. In general, addiction implies increased tolerance to a drug, physical and psychological dependence, and withdrawal symptoms when administration of the drug is stopped." (p. 11). In clinical practice addiction is diagnosed based on four features: "(1) preoccupation with the drugs; (2) tolerance; (3) dependency; and (4) debilitation of social and psychological function." (Willerman and Cohen, 1990, p. 509). Researchers limiting themselves to these definitions restrict the idea of addiction to physical dependency on a drug. Thus some researchers believe that non-chemical compulsions, such as compulsive gambling or gambling addiction, should not be included because they do not conform to this definition. (Rachlin, 1990).

In the last few decades there have been attempts to examine the similarities in the behavior of individuals excessively engaged in different dependency behaviors, both chemical and non-chemical (Jacobs, 1986, Peele, 1977, 1979, 1985; Orford, 1985). The proponents of these newer theories of addiction have challenged the biologically biased definitions (Peele, 1977, 1985). Orford (1985) has examined similarities in many diverse addictive behaviors such as excessive eating, excessive drinking, excessive sexuality, excessive drug use, and excessive gambling. He found that, "there exists a range of appetitive activities which can become excessive. These

include eating, heterosexual activity, and gambling. Although these activities appear very different, the experiences of those who are excessive are similar in many respects."(p. 319). Orford (1985), chose to use the term "excessive appetites" to address these behavioral excesses rather than use the more restrictive term "addictions". Peele (1977), another researcher attempting to identify commonalities among the different excessive behaviors states that, "an addiction is any compulsive activity or involvement which decreases a person's ability to deal with other aspects of his life to the point where that activity or involvement comprises the dominant source of emotional reinforcement and identity for that person." (p. 103). These views of addiction expand earlier concepts and allow for the possibility of addiction to any activity whether it involves drugs or not. Others such as Bradshaw (1988) subscribe to this broader view of the term addiction. He cites the expansive definition the World Health Organization (WHO) has adopted. The WHO defines compulsive/ addictive behavior as "a pathological relationship to any mood-altering experience that has life-damaging consequences." (p. 89).

Impulse, Compulsion or Addiction

With this new trend toward combining the study of the various excessive behaviors in an attempt to discover similarities among them, there is a sometimes confusing overlap in the terms used to describe those problem behaviors. Both the WHO and the Peele

definitions of addiction encompass both the terms "addictive" and "compulsive". In general, it has become common practice to interchange or combine the two, as Jacobs (1986) includes both compulsive gambling and drug addiction in his general theory of addictions.

Salzman (1981) has stated that some aspects of compulsive personality are associated with various forms of addiction. In the Concise Encyclopedia of Psychology (1987) the addictive process is described as creating in the individual "an overpowering desire or need for a substance, object, action or interaction, fantasy, and/or milieu that produces a psychophysiologic 'high.' This desire or need is repetitive, impulsive, and compulsive in nature." Definitions such as this introduce the characteristic of impulsivity as part of the addiction. Some researchers, such as O'Guinn and Faber (1989) characterize compulsive buying as an impulse control disorder. They state, "for most people, buying is a normal and routine part of everyday life. For compulsive buyers, the inability to control an overpowering impulse to buy pervades their lives and results in significant and sometimes severe consequences." (p. 147). O'Guinn and Faber (1989) go on to state that impulse buying is generally considered to be acute whereas compulsive buying is chronic. However, compulsive buyers may begin as impulse purchasers and, through positive reinforcement, evolve into compulsive shoppers over time. Kruger (1988) defines compulsive shopping as "...an impulse disorder which consists of an overpowering urge to buy items,

especially clothing, usually in a pattern of 'shopping binges'." (p. 574).

This intermingling of the terms "addiction", "compulsion", and "impulse disorder", has caused some researchers to simply avoid them by using other expressions such as "excessive appetites" (e.g., Orford, 1985) or "habitual behaviors" (e.g., Walker & Lidz, 1983) to identify these behavior disorders. Others, such as Natarajan and Goff (1991), have addressed this complicated problem of commonalities of meaning head on. They state that there are, "three difficulties when 'impulse' or 'impulsive' is used to define/measure compulsive buying, or when compulsive buying is seen solely as an impulse control disorder (regardless of the use of impulse or impulsive in the definition)." (p. 310). First, they review five sample definitions of compulsion, demonstrating that the word impulse isn't used as part of the definition. Next, they point to inconsistency in a cited Faber and O'Guinn (1988, p. 99) comment that, "people who are impulsively driven to consume, cannot control this behavior, and seem to buy in order to escape from other problems.". This, they say, "will be contradictory because by definition, an impulse occurs suddenly without any prior thought, planning or events." (p. 311). Thus an individual could not plan to act impulsively to relieve himself from his problems. Finally, Natarajan and Goff (1991) state, "even if the use of impulses to define compulsive buying is accepted, the fact that impulses do not always have to be irresistible (Goldenson, 1984; Rook, 1987) necessitates qualifying

the impulses figuring in any definition of compulsive buying. Incorporation of unqualified impulses only negates the significance of the use of 'uncontrollable' or 'great difficulty in controlling' to characterize compulsive buying." (p. 311).

In addressing the first of these reasons for disallowing the use of impulse disorder in conjunction with compulsive buying, it should be noted that definitions in psychology cannot always encompass all features of a behavior due to the intangible nature of behavior itself. Just as the standard definition of addiction involves substance or chemical abuse and dependency (Chaplin, 1985), the current trend of defining addiction now includes any activity or sensation that becomes all important, to the exclusion of all others in an individual's life (Peele, 1985). Thus a complete and final definition of a human behavior is an elusive proposition at best.

In Nataraajan and Goff's (1991) second objection they address a seemingly contradictory statement by Faber and O'Guinn (1988) that the compulsive buyer engages in the behavior as an escape from problems. However, if the compulsion is an impulse control disorder, it should be sudden and unplanned rather than a conscious activity engaged in for a specific purpose (i.e., to escape from one's problems). A possible explanation offered for this apparent contradiction is that the individual may purposefully engage in the buying behavior in order to experience pleasure and release from day to day problems, but it is the impulsive component of the disorder that causes the individual to overspend and purchase unintended

items. Impulsivity makes the individual act without any reflection or sense of control (Chaplin, 1985) and, "the consumer is more likely to feel out-of-control when buying impulsively than when making contemplative purchases." (Rook, 1987, p. 191). Walker and Lidz (1983) point out that compulsive behaviors are acceptable behaviors which are labeled abusive or excessive when they are "out of control". Thus while an impulse may be unplanned and sudden as Natarajan and Goff (1991) point out, it may be a component of the compulsive buying behavior which is stimulated by the shopping environment and activates the buyer for an out of control spending spree.

In addition, Rook (1987) states that giving in to the impulse to buy makes the purchaser feel a stronger high and he quotes some respondents as reporting that the impulse or, "sudden urge to buy something as 'exciting,' 'thrilling,' or 'wild'." (p. 194). This gives rise to the possibility that the impulse aspect of the compulsion actually increases the pleasure derived from the buying behavior. This pleasure component is an important part of the reason for the existence of the compulsion (O'Guinn & Faber, 1989).

Finally, in regard to Natarajan and Goff's (1991) third "difficulty" with the incorporation of impulsivity in discussions of compulsive buying, they conclude that an impulse does not always have to be irresistible and therefore this confounds the fact that a compulsive buyer is "uncontrollable or has great difficulty in controlling his behavior" (p. 391). While there may be exceptions to

the irresistibility of an impulse, Rook (1987), who is cited by Nataraajan and Goff (1991) to support this contention, himself defines impulse buying as a, "powerful and persistent urge to buy something immediately.". Rook (1987) then quotes the results of a study in which, "Almost a third of the sample (31 percent) volunteered that the buying impulse makes them feel compelled to purchase something.". These statements suggest that the buyer often feels that the urge is in fact irresistible.

Nataraajan and Goff (1991) later state that an individual is not supposed to derive pleasure or release from a compulsion, but one does from an impulse. However, the fact that those individuals labeling themselves compulsive buyers in O'Guinn and Faber's (1989) study do indeed, "derive greater pleasure from shopping and buying than members of a general sample of consumers.", gives Nataraajan and Goff (1991) cause to allow that a subset of excessive spenders, termed compulsive buyers, may be individuals with impulse control disorders. In their own research toward redefining compulsive buying, Nataraajan and Goff (1991) used items from the MMPI Psychasthenia scale to assess the compulsivity trait in excessive buyers. They report that, "The compulsivity trait score correlated significantly with the respondent finding buying to be exciting and greatly exhilarating, and experiencing feelings of a sudden rush or emotional high." (p. 320).

Nataraajan and Goff (1991) also did an empirical study utilizing the MacAndrew Scale (MAC) of the MMPI to determine whether or not

buying could have addictive components. While their study did show addictive propensity correlated significantly with several aspects of compulsive buying, there is disagreement over the validity of this type of use of the MAC Scale (Lang, 1983). The MAC Scale was originally designed to differentiate between male alcoholic outpatients and nonalcoholic psychiatric outpatients rather than function as an instrument of detection of individuals susceptible to addiction (MacAndrew, 1965). However, the scale later came to be widely used as an instrument to predict addiction, although MacAndrew (1979) himself reported its inadequacies and indicated the need for a more efficient instrument for recognizing potential for substance abuse. Thus far, studies involving the use of the MAC Scale and other MMPI scales have been inconclusive in establishing an addictive personality profile that would be predictive of these behavioral disorders (Kagan, 1987; Lang, 1983). Lang (1983) states that, "In short, these scales reveal no consistent picture of either a unique alcoholic or a general addictive personality." (p. 198).

Personality Characteristics Related to Addiction

There do appear to be several similar traits exhibited in many individuals with existing addiction problems. Among the principle characteristics that are associated with many addictions such as alcohol and drug dependency are depression and anxiety, generally resulting from low self-esteem (Cox, 1985; Peele, 1985). Although most researchers agree that depression is highly correlated with

addictions such as alcoholism, it is not known whether it is a cause or effect of the drug dependence (Nathan, 1988; Sutker, Brantley, & Allain, 1980). In his studies of gambling addiction, Jacobs (1986) has argued that the characteristics of an anxious or depressed state and a sense of inferiority or low self-esteem are essential aspects of the addictive personality. Both Jacobs (1986) and Peele (1977; 1985) state that the addictive behavior in which the addict engages is initially begun to relieve a stressful state of anxiety or depression. Carr (1974) has reported that compulsive behavior also occurs in order to reduce anxiety. One aspect of the behavior of compulsive shoppers may be that they are attempting to improve their low self-esteem and lift themselves out of depression or reduce their anxiety (Krueger, 1988; Digiulio & Janosik, 1982; Glatt & Cook, 1987; O'Guinn & Faber, 1989; Tauber, 1972). These findings concerning compulsive shoppers are in agreement with the reported emotional states and motivations of alcoholics and other addicts. (Cox, 1985; Jacobs, 1986; Peele, 1985).

Another commonly reported characteristic of the addicted individual is the experience of guilt and depression with recognition of the pathological dependency on the substance or experience (Peele, 1977); O'Guinn & Faber, 1989). Compulsive shoppers have reported experiences of depression and guilt after succumbing to the impulse to buy (Glatt & Cook, 1987; Krueger, 1988; O'Guinn & Faber, 1989; Natarajan and Goff (1991). In early stages of the addiction the individual often feels in control and defenses like denial and

repression are prevalent (Fischer, 1973). When dependency is acknowledged, the desire to escape the ensuing depression causes the individual once again to engage in the addictive behavior and thereby strengthens it (Peele, 1979).

A Desire to Elevate Mood

Lang (1983) states, "A number of authors (Marlatt, 1980; Miller 1980) have noted that a distinguishing feature of addictive behaviors is that they all involve some form of immediate gratification or pleasure but are accompanied by longer term adverse consequences. The short-term gratification may be referred to as a 'high,' a 'rush,' a 'trip,' a 'release,' a 'relief,' or any of a variety of terms that describe an alteration of one's state of consciousness or affect." (p. 160). Studies have confirmed that shopping is viewed as a pleasurable experience (Dawson, Bloch, & Ridgway; Hallesworth, 1988) and that when shoppers engage in impulsive shopping it is exciting (Rook, 1987). Respondents to Rook's (1987) study stated, "Giving in to the impulse and buying makes them "...feel 'good,' 'happy,' 'satisfied,' 'light,' wonderful,' or 'high.' Some who had been feeling 'down' added it would make them feel better." (p. 195). Compulsive shoppers also have been found to get greater joy than regular shoppers and an emotional lift (Dawson et al., 1990; O'Guinn & Faber, 1989; Nataraajan and Goff, 1991). In Glatt and Cook's (1987) case study of a young woman with "pathological spending" problems, they relate, "She described a thrill or 'high' which she

felt when purchasing new goods but this would be followed by depression and guilt." (p.1257). These features of shopping, especially impulsive and compulsive shopping, would qualify it as a mood-altering experience, an important aspect of the WHO definition of addictive behavior and Peele's (1985) theoretical position.

Negative Consequences of Shopping Addiction

Often alcoholics or gambling addicts will pursue their addiction to the detriment of themselves and their personal relationships (Willerman & Cohen, 1990). Rook (1987) cites a study where "over 80 percent of the sample indicated that they had incurred some kind of problem... Fifty-six percent of those respondents who reported negative consequences said they had experienced financial problems as a result of their impulse buying." (p. 196). Krueger (1988) states that "the loss of control over the impulse to buy more than is needed or can be afforded--even children's medical needs are often sacrificed--is followed by depression, disillusionment, shame, and guilt." (p. 574). Glatt and Cook (1987) describe a case study in which the patient's overspending, "...continued despite the considerable psycho-social damage to herself and her family." (p. 1257). O'Guinn and Faber (1989) state that compulsive buyers accumulate huge debts which often lead to emotional problems in the family, including arguments and threats of separation or divorce.

An Unaddressed Addiction

All of these studies suggest aspects of excessive shopping that exhibit characteristics commonly ascribed to other addictive disorders. Yet the problem of shopping addiction remains largely unaddressed. When O'Guinn and Faber (1989) conducted their study, they noted that among the women surveyed, the concept of compulsive buying as a disorder was, "so secretive, unaddressed, and unlabeled (it) gave rise to informants' belief that this behavior was particularly aberrant and deviant." Peele (1977) has noted that the, "degree of social acceptability" decides, in part, what type of drug or activity the individual will become addicted to and shopping is certainly one of the most acceptable and seemingly innocuous activities in our society.

One possible explanation for the absence of research on what appears to be a serious problem is that shopping addiction, as a wide ranging problem, may be relatively new. Previously, spending sprees were limited by the need for cash to make purchases. Although third party credit cards have been available since 1949, it wasn't until BankAmericard (later Visa), that large numbers of the general public had access to this new form of installment credit (Mandell, 1990). With "plastic money" the potential shopping addict now had something to facilitate the addiction. Rook (1987) stated that charge cards have helped make it easier than ever for people to engage in impulse buying. O'Guinn and Faber (1989) found that compulsive buyers have more charge cards than other buyers and that they are less likely to

pay them off each month and more likely to be within \$100.00 of the limit. Hirschman (1979) surveyed shoppers and showed that persons with a credit card make larger dollar purchases than those paying in cash. In a series of experiments involving credit card stimuli, Feinberg (1986) demonstrated that individuals increased the magnitude of their spending when credit cards were involved. Because charge cards are viewed as such a crucial part of the problem in overspending, one of the first things that clients in CCCS programs must agree to is to cut up their credit cards (Roberts, 1991).

A Review of the Research

Credit cards seem to play a major role in facilitating a shopping addiction. The relative recency of their availability to the general public may have escalated the number experiencing this disorder and therefore account for the paucity of research in the area. The few research studies that have been done are in two areas. Primarily literature in business-oriented research journals such as Journal of Consumer Research and Journal of Marketing have examined the dynamics of shopping behaviors and habits to determine the reasons that individuals shop so that marketing techniques can be designed to intercept that shopper (e.g., Tauber, 1972). The small amount of psychodynamic research in the area, has been limited to individual case studies of women who have gone into therapy with problems of compulsive spending (Kruger, 1988; Glatt & Cook, 1987) or studies designed around interviews with individuals currently seeking

help with their spending problems in counseling or self-help groups (O'Guinn & Faber, 1989). Nataraajan and Goff (1991) do report studies involving mail surveys and questionnaires responded to by marketing students. However, there seems to be no research involving actual on site before and after surveys with a large group of shoppers, in a shopping setting, specifically investigating possible addictive behavior characteristics.

The Present Study

This study was undertaken to provide a more comprehensive look at shopping behavior by surveying shoppers at a large shopping mall before and after they engage in the buying behavior and again three days later. The survey questions were designed to investigate shoppers' moods prior to and subsequent to engaging in the act of shopping. In addition, frequency of shopping, the importance of shopping as an activity in their lives, what they purchased, whether or not they tend to overspend when shopping, whether they charged or paid cash, and their opinions and attitudes concerning their shopping activities were surveyed. It was expected that in certain shoppers, very pronounced mood alterations would occur as a result of shopping behavior. Mood elevation has been shown to be a major motivation of addicts (Lang, 1983). By analyzing the subset of shoppers with the highest mood elevations and their other reported behaviors, this study expected to show that they would report the same characteristics of mood change as other addicted individuals and thus

excessive shopping should be considered an addiction under the broader use of that term. It was assumed that there is a subset of shoppers for which the following are true: (1) they engage in the activity to elevate their mood, experiencing a significant positive mood change when shopping; (2) they rate shopping as a major activity in their lives and report a high frequency of engaging in the activity; (3) they spend much more when shopping than originally intended, usually unplanned; (4) they are more likely to use credit cards for their purchases and thus credit cards function as facilitators for excessive shopping; and that, (5) after sufficient time for the mood elevation to subside, they report guilt or depression over their spending behavior. It was also predicted that the responses of this subset of shoppers reporting the highest mood elevation would be significantly different from the responses of other shoppers.

II. METHOD

Subjects

One hundred and eighty-three shoppers participated in the survey. Those solicited and who agreed to participate were volunteers who were over 19 years of age. Of the 183 entry surveys completed, three surveys were eliminated because the shoppers were actually exiting, not entering the mall. An additional 51 surveys had to be eliminated because the subjects failed to return and fill out the exit survey. Of the remaining 129 subjects which had both entry and exit surveys completed, an additional three were eliminated because they were incomplete or could not be interpreted. The remaining 126 subjects completed entry and exit surveys, which were used in the data analysis. Of these, fifty-eight subjects gave permission for the follow-up telephone survey. Fifty-four of these subjects were contacted and completed the telephone survey.

Of the 126 subjects, 34% were male and 66% were female. Twenty-four percent fell in the age range of 19 to 24, 31% were between 25 and 35, 34% were between 36 and 45, and 11% were from age 46 to over 65 years of age. Fifty-one percent of the subjects were married and 49% percent single, divorced, or separated. The average family size was three.

Materials

A two-part, Likert-type questionnaire was used (see Appendix). The survey included a section of 12 questions dealing with mood. This section was based on Nowlis's (Nowlis, 1965) concept of mood adjective checklists. The adjectives chosen were from studies by Nowlis (1965), Meddis (1972), Ryman, Biersner, and Rocco (1974), and Hendrick and Lilly (1970) and were based on mood adjectives with high factor loading in these studies. The set contained three adjectives measuring anxiety (anxious, tense, nervous), three adjectives measuring depression (depressed, blue, low), three adjectives measuring elation (elated, pleased, satisfied), and three adjectives measuring freedom from anxiety (confident, calm, carefree). Two of these sets of mood adjectives, anxiety and depression, measured negative affect and two, freedom from anxiety and elation, measured positive affect. The remainder of the questions on the surveys concerned spending, frequency of shopping, use of charge cards in purchasing and self-evaluation of shopping behaviors.

Procedure

Testing occurred at the largest shopping mall in the state, during the morning and afternoon. A table for administering the surveys was set up outside one of the major department stores. Free soft drinks and candy were used as incentives for individuals to participate.

A survey was given to each subject. The survey was composed of an initial set of 12 questions concerning their current mood, followed by demographic questions, and questions relating to the shopping, the significance of shopping as an activity, and general shopping frequency. A total of 20 questions were included on the entry survey. After the entry survey was completed, shoppers were given a disk with a number which was copied on the top of their questionnaire. When the subjects exited the mall to return to their cars, they returned the disk and completed the exit survey. The exit survey included a duplicate set of 12 mood descriptive adjectives and questions about their spending, use of charge cards, and subjective opinions of their own shopping behavior. The exit survey had a total of 26 questions to be completed.

On the exit survey, subjects were asked if they could be contacted by phone in three days to answer questions for the follow-up survey. The subjects were assured that all responses were confidential and that their names and phone numbers would be destroyed after the survey was completed.

The subjects who agreed were contacted by phone three days after completion of the entry and exit surveys. They were asked four follow-up questions that dealt with satisfaction of purchases made on the day of the survey, regret over purchased items, problems resulting from shopping behavior, and frequency of shopping since the initial survey.

III. RESULTS

Responses to all of the 12 mood adjective questions on the entry survey were combined to yield a more reliable measure of the subjects' mood. Internal consistency was evaluated using a coefficient alpha which resulted in $\alpha = .73$. Scores from the mood section of the entry survey were then compared with scores from the exit survey. This comparison resulted in responses which indicated a positive mood shift or a negative mood shift. A median split on the entry and exit mood scales was employed to determine whether the subject entered and exited in a positive mood (high) or a negative mood (low). The subjects were assigned to one of four groups based on their entry and exit moods. These groups were: high entry / high exit (H/H), low entry / low exit (L/L), high entry / low exit (H/L), and low entry / high exit (L/H).

There were 44 subjects in the H/H group, 45 in the L/L group, 18 in the H/L group, and 19 in the L/H group. Ages were concentrated between 25 and 45 years old in all groups, although there was a large number of subjects in the 19 to 24 age group also. Each group was compromised of approximately two-thirds females and one-third males. The exception was the H/L group which had a larger percentage of males than the other groups. The percentage of those married ranged from 44% for the H/L group to 58% for the L/H group (see Table 1).

Table 1
Percent of Group Members in Age, Sex,
and Marital Status Categories

		Age					
Group	n	19-24	25-35	36-45	45-55	56-65	Over 65
H/H	44	20%	32%	34%	7%	5%	2%
L/L	45	33%	18%	31%	9%	7%	2%
H/L	18	17%	50%	22%	11%	0%	0%
L/H	19	26%	26%	48%	0%	0%	0%

		Sex	
Group	n	Male	Female
H/H	44	36%	64%
L/L	45	31%	69%
H/L	18	44%	56%
L/H	19	28%	72%

		Marital Status			
Group	n	Married	Single	Separated	Divorced
H/H	44	52%	30%	2%	16%
L/L	45	45%	34%	5%	16%
H/L	18	44%	50%	0%	6%
L/H	19	58%	37%	0%	5%

Those subjects who entered in a low mood state and exited in a high mood state were expected to show significant differences between their responses and those of the other three groups. One-way ANOVAs were performed on responses to all survey questions. It was predicted that subjects in the L/H group would engage in shopping to elevate mood. Analysis of responses to question (13b) on the exit survey, which concerned shopping as a method of alleviating depression, showed no significant differences among any of the groups, $F(3, 122) = 1.72, p > .05$. The means for the four groups are shown in Table 2.

The next prediction was that shopping would rank as a major activity in the lives of the L/H group and that they would report a high frequency of engaging in the activity. Table 2 shows the means for the four questions (17a, 18a, 20a, and 4c) dealing with shopping frequency and question (19a) concerning preference for shopping.

Significant differences among the four groups were found only for the question concerning shopping since the survey, $F(3, 55) = 3.228, p < .05$. In this instance those in the H/H group were more likely to report shopping since the day of the survey. A post hoc Fisher test showed that the H/H group was significantly different from both the L/L and H/L group. The L/H group was not significantly different from the other groups. In addition, the L/H group was not significantly different from other groups on the question concerning the "importance of shopping".

Table 2
Group Means for Questions Concerning Shopping Frequency,
Time Spent, and Importance in Life

Question	Groups			
	H/H	L/L	H/L	L/H
(13b) Depressed				
M	2.59	2.87	2.22	2.74
SD	0.97	1.04	1.22	1.10
(17a) Last time went shopping				
M	3.51	3.07	2.61	2.63
SD	1.75	1.34	1.65	1.57
(18a) Frequency shopping nonessentials				
M	1.41	1.76	1.44	1.63
SD	0.82	0.93	0.78	0.90
(19a) Preference for shopping (1-10 scale)				
M	5.19	6.14	5.78	5.95
SD	2.46	2.52	2.51	3.01
(20a) Hours spent shopping per week				
M	3.21	3.54	2.78	5.63
SD	2.64	3.52	1.67	7.12
(4c) Shopping since the survey				
M	1.91	1.55	1.50	1.60
SD	0.29	0.51	0.55	0.55

Note. The letters (a), (b), and (c) refer to the survey (entry), (exit), and (follow-up) in which that question appeared.

No significant differences were found among groups regarding their responses to spending expectations and unplanned purchases. Table 3 indicates that those subjects in the L/H group tended to report having actually spent more than they planned, but they recorded the fewest number of unplanned purchases. The other three groups tended to overestimate their expected spending.

Table 3
Group Means for Questions Concerning Amount Spent and
Number of Unplanned Purchases

Question	Groups			
	H/H	L/L	H/L	L/H
(19b) Amount planned to spend				
<u>M</u>	3.24	3.29	3.78	2.72
<u>SD</u>	2.00	2.17	2.46	1.84
(20b) Amount actually spent				
<u>M</u>	2.85	2.76	3.17	2.83
<u>SD</u>	1.62	1.71	1.54	1.58
(22b) Number of unplanned purchases				
<u>M</u>	1.00	1.14	0.62	0.60
<u>SD</u>	1.93	3.04	0.87	0.99

Note. The letter (b) following the question number refers to the exit survey.

Credit cards can function as spending facilitators and thus those in the L/H group were predicted to have more of them and be more likely to use them to make purchases. The number, use, and payment of credit cards was investigated with questions (21b), (23b), and (24b). Table 4 shows that those in the H/H group reported having the greatest number of cards, while those in the L/H group were slightly more likely to charge the items purchased rather than pay cash.

Table 4

Group Means for Questions Concerning Use of Charge Cards,
Number of Charge Cards, and Payment of Charge Cards

Question	Groups			
	H/H	L/L	H/L	L/H
(21b) Number of charge cards held				
<u>M</u>	4.22	3.33	3.94	3.33
<u>SD</u>	4.59	2.46	4.91	2.40
(23b) Purchase with charge cards (1) or cash (2)				
<u>M</u>	1.73	1.63	1.47	1.46
<u>SD</u>	0.76	0.73	0.52	0.52
(24b) Payoff charge cards each month				
<u>M</u>	2.22	2.84	3.47	2.82
<u>SD</u>	1.25	1.42	1.36	1.51

Note. The letter (b) following the question number refers to the exit survey.

The differences among means for these questions were not significant except for the differences in means related to paying off charge cards, $F(3, 102) = 3.202, p < .05$. Those in the H/L group reported being the least likely to pay off their charge cards on time each month and a Fisher post hoc test showed differences to be significant between the H/L group and the H/H group which reported being the most likely to pay off charge cards on time.

If excessive shopping were viewed as an addiction, it was predicted that those who went shopping to experience the elevation in mood, the L/H group, would also experience problems common to reports of other addicts such as guilt and financial problems resulting from their behavior. Questions 14b to 18b collectively dealt with problems characteristic of people reporting other types of addictions such as guilt (14b), financial problems (17b), acknowledgement of a problem (18b) and unsuccessful resolutions to quit (16b), and a compulsion to engage in the behavior even when the consequences could be adverse (15b). Table 5 shows the means for each of these questions. Differences among the four groups were determined using one-way ANOVAs.

Significant differences among groups were found for question (14b) concerning guilt, $F(3, 122) = 2.951, p < .05$, and question (17b) concerning financial problems, $F(3, 121) = 2.725, p < .05$. Fisher post hoc tests indicated that the H/H group reported significantly lower guilt than those in the H/L group and those in

the L/L group. Also, the H/H group had significantly fewer financial problems than the H/L group.

Table 5 Group Means for Questions Concerning Problems from Shopping Including: Guilt, Overspending, Resolutions to Curb Buying, Financial Problems, and Viewing Excessive Shopping as a Problem

Question	Groups			
	H/H	L/L	H/L	L/H
(14b) Guilt				
<u>M</u>	2.50	3.18	3.17	2.95
<u>SD</u>	0.85	1.25	1.30	1.39
(15b) Overspending				
<u>M</u>	2.21	2.56	2.67	2.58
<u>SD</u>	0.77	1.06	1.24	0.90
(16b) Resolutions				
<u>M</u>	1.98	2.18	2.61	2.21
<u>SD</u>	1.17	1.00	1.46	1.03
(17b) Financial problems				
<u>M</u>	1.61	1.96	2.33	1.84
<u>SD</u>	0.84	0.89	1.19	0.96
(18b) A life problem				
<u>M</u>	1.28	1.49	1.65	1.50
<u>SD</u>	0.59	0.82	0.86	0.71

Note. The letter (b) refers to the exit survey.

In addition, all responses to the five questions concerning problems were combined to yield a measure of the composite "common problems of addiction" and a one-way ANOVA was performed. The results are shown in Table 6.

Table 6
Group Means for Cluster of Questions Concerning
Problems Related to Shopping

Category	Groups			
	H/H	L/L	H/L	L/H
Cluster of Questions 14b-18b				
<u>M</u>	9.61	11.36	12.50	11.11
<u>SD</u>	3.02	3.89	4.38	3.59

A significant difference among means was found, $F(3, 122) = 3.243$, $p < .05$. Fisher post hoc tests showed significant differences between the H/H group and the H/L and L/L groups. The mean of the H/H group's responses was lower than all three of the other groups with the H/L group having the highest mean response. Thus, the H/H group reported significantly fewer problems related to shopping than any of the other groups.

On the follow-up survey, there were no significant differences among means for responses to questions about "purchase satisfaction", "regret over spending", and "specific problems from shopping".

However, the H/H group did report the greatest number of problems from excessive spending. The results are shown in Table 7.

Table 7
Follow-up Survey Questions

Question	Groups			
	H/H	L/L	H/L	L/H
(1c) Satisfaction				
(1-10 scale)				
M	7.83	8.39	7.33	8.20
SD	2.53	1.71	2.50	1.48
(2c) Regret				
M	2.22	2.64	2.43	2.20
SD	0.67	0.95	1.27	0.84
(3c) Problems				
M	1.17	0.91	1.00	0.60
SD	1.11	1.11	0.82	0.89

Note: The letter (c) refers to questions on the follow-up survey.

IV. DISCUSSION

Rook (1987) reported that shoppers who consider their excessive buying a problem in their lives believe that the shopping gives them a "rush" and makes them feel better. O'Guinn and Faber (1989) and Dawson et al. (1990) have noted that compulsive shoppers get greater joy from shopping than regular shoppers and an emotional lift. Others like Glatt and Cook (1987) have presented case studies in which patients report experiencing a "high" when shopping. All of these studies suggest that the problem or compulsive shopper is motivated to a large extent by the experience of mood elevation. These studies are also based on individual case studies, surveys done with patients or students, or mail-out surveys. The present study was on-site while subjects were actually about to engage in shopping and again after shopping rather than with patients and students.

The present study failed to confirm the predictions derived from the results of these previous studies. In particular, analysis of the question, "I go shopping when I am feeling down or depressed" did not show significant differences among the groups. Neither were the responses of the L/H group to other questions related to possible addictive characteristics significantly different from other groups.

However, significant differences among the four groups were

found on five of the survey questions. The results indicated that individuals in the H/H group were significantly more likely to report shopping since the survey, paying off charge cards each month, less likely to experience guilt associated with over-spending, and less likely to report financial problems. The H/H also reported the fewest problems associated with shopping. On the other hand, those in the H/L group reported shopping less frequently, delaying in paying off charge cards, experiencing guilt and financial problems from spending, and experiencing problems from their shopping. While both of these groups enter shopping in an positive mood state, only those in the H/H group appear to be able to maintain this condition. Because shopping has been reported to be a mood elevator (e.g. Rook, 1987), those individuals entering already in a positive mood state would be expected to maintain or increase that positive mood. However, only those in the H/H group seem able to continue their positive affective state while those in the H/L group actually report shifting into a negative affective state.

One possible explanation for this disparity with previous findings is that, for many people, shopping may actually be an aversive activity which depresses mood. Shopping may be aversive because of environmental cues that promote unwanted spending behavior by the shopper such as overspending and purchasing nonessential items. One way shoppers may deal with the problem of an aversive environment could be through self-control techniques. In this case, individuals whose survey responses indicate that they enter in a

positive mood state and exit in a similar state may be exercising restraint during the shopping experience. That is, they experience the same aversive cues that all of the others do. However, they may respond to these cues with more restraint and therefore spend less. Thus, the H/H group may go shopping more frequently in an effort to maintain their restraint. By shopping more often but spending less than they expect, they reduce the impact of the aversive cues. Reducing the impact of the cues which promote overspending would make maintaining restraint more probable. This might also explain why those in the H/H group report the shortest time since shopping and report being more likely to have shopped since the survey. Similarly, the H/H group is also more likely to report a lower frequency of shopping for nonessentials and less preference for shopping. In this situation, frequency of shopping may not reflect pleasurable experience, but rather be a method of limiting the exposure to an aversive situation.

The response by those in the H/H group to question (24b) concerning "paying off charge cards by the end of the month" supports the hypothesized restraint. By paying off their charge cards rather than allowing balances to increase, they avoid the potential problems with overspending and thereby reduce problems associated with excessive credit debt. The response means of the H/H group in Table 4 are consistent with this hypothesis. The H/H group reports having the most credit cards and reports being the most likely to make

purchases in cash. Thus, although they have several charge cards, those in the H/H group are less likely to choose to use credit.

Individuals in the H/L group may react more to immediate spending cues and may not be as able to exercise restraint. Those in the H/L group reported spending more than the other groups (see Table 3). After the H/H group, the H/L group reported having the greatest number of charge cards. However, unlike the H/H group who reported being the most likely to pay cash, the H/L group reported being more likely to charge and the least likely to pay off existing charge cards each month (see Table 4). This apparent lack of financial control in the H/L group may account for the higher response means for questions in Table 5 concerning: "guilt over spending", "overspending", "unkept resolutions to curb spending", "financial problems from shopping", and "viewing shopping as a life problem". The H/L group also reported the least "satisfaction with purchase" on the follow-up survey (see Table 7). This may imply that the item was purchased more out of immediate desire than actual need. This supports the idea of less restraint for the H/L group.

Earlier studies, using only retrospective reports, have only identified shoppers who reported an elevation in mood as a result of shopping. However, this study has identified a group of shoppers who report experiencing a downward mood shift from shopping. One possible explanation for this discrepancy could be the use of an on-site survey. While those individuals in the H/L group have actually experienced a drop in mood from shopping, later they may experience

cognitive dissonance which would result in modification of their attitude seen in retrospective reports to make it appear more consistent with their own behavior (Festinger, 1957). This would explain why in previous work, shoppers reported only positive experiences. In these earlier studies, shoppers may have been unwilling to report that shopping was not a positive experience because of the problems it caused them, such as overspending. The present study employed an on-site survey which questioned the subject while actually experiencing the mood depression, perhaps before time for resolution of the conflicting attitudes.

This study not only failed to confirm the belief that compulsive shopping is a mood elevating experience, it also suggests that for many, shopping may be a mood depressing experience. In addition, the fact that previous studies have not found this may be the result of the type of surveys and the fact that cognitive dissonance may have affected some subjects, distorting their responses. The evidence in the present study suggests that, for those who entered in a positive mood, shopping was a negative experience. Those who entered in a positive mood and did not exit in a depressed mood, appear to maintain their positive affect by exhibiting restraint to control spending and reinforce their restraint by shopping more frequently while spending less. They did not exit in a positive mood due to the pleasure derived from shopping, but rather by avoiding the displeasure associated with it.

The problem of excessive or compulsive shopping continues to be

a genuine problem that is growing. However, data other than individual case studies and student surveys derived from retrospective measures need to be gathered. More empirical evidence is needed to determine if, in fact, what "shopaholics" state as the motivation for their shopping behavior and the problems resulting from it are correct or whether their studied behavior indicates it is something else. Only when this is known will effective treatment, and perhaps the ability to identify the problem in its early stage, be possible.

REFERENCES

- Bradshaw, J. (1988). Bradshaw on: The family (pp. 87-109). Deerfield Beach, Florida: Health Communications.
- Chaplin, J.P. (1985). Dictionary of psychology. New York: Dell.
- Corsini, R.J. (1987). Concise encyclopedia of psychology. Toronto: Wiley & Sons.
- Cox, W. M. (1985). Personality correlates of substance abuse. In M. Galizio & S.A. Maisto (Eds.), Determinants of substance abuse: Biological, psychological, and environmental factors (pp. 209-246). New York: Plenum Press
- Dawson, S., Bloch, P.H., & Ridgway, N.M. (1990). Shopping motives, emotional states, and retail outcomes. Journal of Retailing, 66(4), 408-427.
- DiGiulio, J.F. & Janosik, G.J. (1982). Successful partners: Credit counseling and family services. Social Casework, 63(8), 482-488.
- Faber, R.J. & O'Guinn, T.C. (1988). Compulsive consumption and credit abuse. Journal of Consumer Policy, 11, 97-109.
- Fischer, H.K. (1973). Some aspects of psychotherapy in patients with addictive personality traits. Psychosomatics, 14, 27-32.
- Festinger, L. (1957). A theory of cognitive dissonance. Evanston, Illinois: Row, Peterson.
- Feinberg, R.A. (1986). Credit cards as spending facilitating stimuli: A conditioning interpretation. Journal of Consumer Research, 13(3), 348-356.
- Glatt, M.M. & Cook, C.C.H. (1987). Pathological spending as a form of psychological dependence. British Journal of Addiction, 82, 1257-1258.
- Goldenson, R.M. (1984). Longman dictionary of psychology and psychiatry. New York: Longman.

- Miller, P.M. (1980). Theoretical and practical issues in substance abuse assessment and treatment. In W.R. Miller (ed.), The Addictive Behaviors (pp. 265-290). Oxford, England: Paragon
- Natarajan, R. & Goff, B.G. (1991). Compulsive buying: Toward a reconceptualization. Journal of Social Behavior and Personality, 6(6), 307-328.
- Nathan, P.E. (1988). The addictive personality is the behavior of the addict. Journal of Consulting and Clinical Psychology, 56(2), 183-188.
- Nowlis, V. (1965). Research with the mood adjective check list. In S.S. Tomkins & C.E. Izard (eds.), Affect, Cognition, and Personality (pp. 352-389). New York: Springer.
- O'Guinn, T.C. & Faber, R.J. (1989). Compulsive buying: A phenomenological exploration. Journal of Consumer Research, 16, 147-157.
- Orford, J. (1985). Excessive appetites: A psychological view of addictions. Chichester, Great Britain: Wiley & Sons.
- Peele, S. (1977). Redefining addiction I: Making addiction a scientifically and socially useful concept. International Journal of Health Sciences, 7(1), 103-123.
- Peele, S. (1979). Redefining addiction II: The meaning of addiction in our lives. Journal of Psychedelic Drugs, 11, 289-297.
- Peele, S. (1985). The meaning of addiction. Lexington, Ma.: Lexington.
- Rachlin, H. (1990). Why do people gamble and keep gambling despite heavy losses? Psychological Science, 1(5), 294-297.
- Roberts, C. (1991, June 4). New help arrives for people entangled by too much debt. The Birmingham News, pp. 1D, 4D.
- Rook, D.W. (1987). The buying impulse. Journal of Consumer Research, 14, 189-198.
- Ryman, D.H., Biersner, R.J., & LaRocco, J.M. (1974). Reliabilities and validities of the mood questionnaire. Psychological Reports, 35, 479-484.
- Sutker, P.B., Brantley, P.J., & Allain, A.N. (1980). MMPI Response patterns and alcohol consumption in DUI offenders. Journal of Consulting and Clinical Psychology, 48(3), 350-355.

- Hallsworth, A.G. (1988). Analysis of shoppers' attitudes. Psychological Reports, 62, 497-498.
- Hendrick, C. & Lilly, R.S. (1970). The structure of mood: A comparison between sleep deprivation and normal wakefulness conditions. Journal of Personality, 38, 453-465.
- Hirschman, E.C. (1979). Differences in consumer purchase behavior by credit card payment system. Journal of Consumer Research, 6, 58-66.
- Jacobs, D.F. (1986). A general theory of addictions: A new theoretical model. Journal of Gambling Behavior, 2(1), 15-31.
- Jacobson, G.R. (1989). A comprehensive approach to pretreatment evaluation: I. Detection, assessment, and diagnosis of alcoholism. In R.K. Hester & W.R. Miller (Eds.), Handbook of alcoholism treatment approaches (pp. 35). New York: Pergamon Press
- Kagan, D.M. (1987). Addictive personality factors. Journal of Psychology, 121(6), 533-538.
- Krueger, D.W. (1988). On compulsive shopping and spending: A psychodynamic inquiry. American Journal of Psychotherapy, 42, 574-584.
- Lang, A.R. (1983). Addictive personality: A viable construct? In P.K. Levison, D.R. Gerstein, & D.R. Maloff (Eds.), Commonalities in substance and habitual behavior. Lexington, Mass.: Lexington Books.
- Long, C.K. (1990). Theories of addiction and implications for treatment. Unpublished manuscript.
- MacAndrew, C. (1965). The differentiation of male alcoholic outpatients from nonalcoholic psychiatric outpatients by means of the MMPI. Quarterly Journal of Studies on Alcohol, 26, 238-246.
- MacAndrew, C. (1979). On the possibility of the psychometric detection of persons who are prone to the abuse of alcohol and other substances. Addictive Behaviors, 4, 11-20.
- Mandell, L. (1990). The credit card industry. Boston: Twayne.
- Meddis, R. (1972). Bipolar factors in mood adjective check lists. British Journal of Social and Clinical Psychology, 61, 178-184.

- Tauber, E.M. (1972). Why do people shop? Journal of Marketing, 36, 46-59.
- Walker, A.L. & Lidz C.W. (1983). Common features of troublesome habitual behaviors: A cultural approach. In P.K. Levison, D.R. Gerstein, & D.R. Maloff (Eds.), Commonalities in substance and habitual behavior. Lexington, Mass.: Lexington Books.
- Willerman, L. & Cohen, D.B. (1990). Psychopathology (pp. 508-534). New York: McGraw-Hill.
- Winestine, M.C. (1985). Compulsive shopping as a derivative of a childhood seduction. Psychoanalytic Quarterly, 56, 70-72.

APPENDIX

INSTRUCTIONS: THIS IS A SURVEY ABOUT SHOPPERS AND SHOPPING BEHAVIOR. IT IS CONFIDENTIAL AND ANY INFORMATION YOU PROVIDE WILL BE TREATED AS SUCH. TO PROTECT YOUR IDENTITY AND CONFIDENTIALITY, DON'T PUT ANY IDENTIFYING MARKS ON THIS PAPER. PLEASE READ EACH QUESTION CAREFULLY AND PUT A CHECK MARK IN THE APPROPRIATE BLANK (). IF THERE ARE ANY OF THE QUESTIONS THAT YOU DO NOT WISH TO ANSWER, YOU DO NOT HAVE TO. YOU MAY DISCONTINUE THIS QUESTIONNAIRE AT ANY TIME. YOUR PARTICIPATION IN THIS SURVEY IS COMPLETELY VOLUNTARY AND GREATLY APPRECIATED.

FOR THE FIRST 12 QUESTIONS, THINK HOW YOU FEEL **RIGHT NOW** AND CHECK THE BLANK () NEXT TO EACH WORD THAT MOST CLOSELY DESCRIBES YOUR CURRENT MOOD.

- 1) Tense: () extremely () very much () moderately () somewhat () not at all
- 2) Confident: () extremely () very much () moderately () somewhat () not at all
- 3) Anxious: () extremely () very much () moderately () somewhat () not at all
- 4) Calm: () extremely () very much () moderately () somewhat () not at all
- 5) Nervous: () extremely () very much () moderately () somewhat () not at all
- 6) Carefree: () extremely () very much () moderately () somewhat () not at all
- 7) Low: () extremely () very much () moderately () somewhat () not at all
- 8) Elated: () extremely () very much () moderately () somewhat () not at all
- 9) Blue: () extremely () very much () moderately () somewhat () not at all
- 10) Pleased: () extremely () very much () moderately () somewhat () not at all
- 11) Depressed: () extremely () very much () moderately () somewhat () not at all
- 12) Satisfied: () extremely () very much () moderately () somewhat () not at all
- 13) Age: () 19-24, () 25-35, () 36-45, () 46-55, () 56-65, () over 65.
- 14) Sex: () Female, () Male.
- 15) Marital status: () Married, () Single, () Separated, () Divorced.
- 16) The number of people, including myself, living in my household today is _____.
- 17) The last time I went shopping was?
() Earlier today () Yesterday () Two days ago () Three days ago () Longer
- 18) I usually go shopping for items other than basic necessities:
() Less than once a week () Once a week () Twice a week
() Three times a week () Daily
- 19) On a scale of 1-10 of the most preferred activities in my life, with 1 being the least preferred and 10 being the most preferred activity, I would rate shopping a _____.
- 20) Estimate how many hours per week you spend shopping. _____.

THANK YOU FOR YOUR EARLIER HELP. AGAIN, PUT A CHECK IN THE APPROPRIATE BLANK (). AS BEFORE, PARTICIPATION IS COMPLETELY VOLUNTARY AND YOU MAY SKIP ANY QUESTION WHICH YOU DO NOT WISH TO ANSWER, HOWEVER YOUR HELP IN THIS SURVEY IS GREATLY APPRECIATED.

FOR THE FIRST 12 QUESTIONS, THINK HOW YOU FEEL **RIGHT NOW** AND CHECK THE BLANK () NEXT TO EACH WORD THAT MOST CLOSELY DESCRIBES YOUR CURRENT MOOD.

- 1) Tense: () extremely () very much () moderately () somewhat () not at all
- 2) Confident: () extremely () very much () moderately () somewhat () not at all
- 3) Anxious: () extremely () very much () moderately () somewhat () not at all
- 4) Calm: () extremely () very much () moderately () somewhat () not at all
- 5) Nervous: () extremely () very much () moderately () somewhat () not at all
- 6) Carefree: () extremely () very much () moderately () somewhat () not at all
- 7) Low: () extremely () very much () moderately () somewhat () not at all
- 8) Elated: () extremely () very much () moderately () somewhat () not at all
- 9) Blue: () extremely () very much () moderately () somewhat () not at all
- 10) Pleased: () extremely () very much () moderately () somewhat () not at all
- 11) Depressed: () extremely () very much () moderately () somewhat () not at all
- 12) Satisfied: () extremely () very much () moderately () somewhat () not at all
- 13) I go shopping when I am feeling down or depressed.
 () Never () Seldom () Sometimes () Often () Always
- 14) I feel guilty about spending too much after shopping.
 () Never () Seldom () Sometimes () Often () Always
- 15) When I am shopping, I often buy even when I know I can't afford it.
 () Never () Seldom () Sometimes () Often () Always
- 16) I have made resolutions to curb my buying only to find that I could not keep them.
 () Never () Seldom () Sometimes () Often () Always
- 17) Excessive shopping has caused me financial problems.
 () Never () Seldom () Sometimes () Often () Always
- 18) I consider shopping a problem in my life.
 () Never () Seldom () Sometimes () Often () Always

19) Today I planned to spend:

- Nothing 0 to \$25.00 \$25.00 to \$50.00
 \$50.00 to \$100.00 \$100.00 to \$200.00 \$200.00 to \$500.00
 More than \$500.00 I have done no planning regarding spending

20) Today I actually spent:

- Nothing 0 to \$25.00 \$25.00 to \$50.00
 \$50.00 to \$100.00 \$100.00 to \$200.00 \$200.00 to \$500.00
 More than \$500.00

21) I have ____ number of charge cards (not including gas cards).

22) I purchased ____ number of items today. Of these, how many were planned or intended purchases? ____

23) I charged the item(s) or paid cash . When you shop, do you usually charge or pay in cash ?

24) I pay off my charge cards at the end of each month.

- All of them Most of them Some of them Few of them None of them

25) For that item or items purchased that were unintended, I purchased them because:

- I thought it was a good buy I bought it for someone else
 I thought I needed it I bought it because I was feeling blue or low
 I felt I had to have it Other (Please explain) _____

26) I make purchases from home shopping television shows (Home Shopping Network, QVC, etc.).

- Never Seldom Sometimes Often All the time

MAY WE CALL YOU IN A COUPLE OF DAYS TO ASK YOU FOUR MORE QUESTIONS? YOU DO NOT HAVE TO GIVE US ANY INFORMATION OTHER THAN YOUR FIRST NAME AND PHONE NUMBER AND THIS INFORMATION WILL BE DESTROYED AFTER THE SURVEY IS COMPLETED. ANYTHING THAT YOU TELL US IS TREATED STRICTLY CONFIDENTIAL. YES NO

IF YES, FIRST NAME _____ PHONE NUMBER _____ .

PLEASE GIVE A CONVIENENT TIME FOR US TO CALL SO THAT WE DO NOT REACH ANOTHER MEMBER OF THE FAMILY BY MISTAKE AND POSSIBLY INCONVIENCE YOU. _____ .

THANK YOU VERY MUCH FOR YOUR PARTICIPATION IN THIS SURVEY!!!

QUESTIONS ASKED OVER THE PHONE:

- 1) On a scale of 1-10, with 1 being "wish I had never spent the money" and 10 being "very glad I made the purchases", how do you feel about the purchases you made on the day I surveyed you?

- 2) Do you typically regret purchasing nonessential items or feel like you spend too much shopping?
 Never Seldom Sometimes Often All the time
- 3) Has your shopping behavior caused you to have any of the following problems?
 (answer yes to any that apply):
 Problems in relationships with friends
 Problems in relationship with spouse (e.g. arguments over your excessive spending)
 Hiding purchases from spouse
 Lying about purchases to spouse
 Returning merchandise without ever using it
 Financial problems
 Buying merchandise you don't need or won't use, that you justify because of the good price
 Buying gifts for others long before the occasion as an excuse to get to buy something
 Other _____
- 4) Have you been shopping since the survey? Yes No. If yes, how many times were for unnecessary or nonessential items (include any times that you purchased necessary or essential items along with nonessentials)? _____