

# Identifying Compulsive Buyers among Credit Card Users of Karachi, Using the Compulsive Buying Scale

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## Abstract

*Compulsive buying is one of the negative consumer behaviors. It is repetitive, consistent buying that is a behavioral addiction. It is related to poor self-esteem, psychological disorders like depression and OCD, and leads to personal, familial and financial problems. This research aims at identifying people suffering from this disorder to facilitate future research in developing a construct valid for Pakistan, using an internationally validated and globally used test — the Compulsive Buying Scale (CBS)—a seven item Likert scale based test developed and validated by Faber and O’Guinn. The research has identified 35 compulsive buyers in a sample of 170 respondents. The research confirms that young people are more prone to be compulsive buyers. Compulsive buying is found to be more common among men as compared to women, probably due to their being primary earners and spenders. Marital status is also linked to compulsive buying as more people, who are single, classify as compulsive buyers.*

**Keywords:** *Compulsive buying, shopaholism, oniomania, compulsive buying scale, compulsive buying disorder.*

## 1. Introduction

### 1.1 Background Study

Buying can turn out to be thrilling experience for shoppers. Sometimes people indulge in going for shopping for retail therapy which ends up in an addiction where the goal is not the product at hand but buying itself (Loudon and Bitta, 1993, p. 648). However, when shopping goes out of hand, it results in a disorder called the compulsive buying disorder (CBD). Compulsive buying is repetitive, impulsive and excessive buying that leads to personal and familial distress and financial repercussions (Lejoyeux et al., 1999).

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## **1.2 Research Problem**

To understand compulsive buying and finding out people who are susceptible to the disorder, we need to find the extent of the problem and those suffering from the compulsive buying disorder.

## **1.3 Study Objective**

There has been no formal study in this area in Pakistan with an internationally validated tool; the research objective is to find, from a sample, cases that can be categorized as compulsive buyers. This sample will assist in developing a research base of people exhibiting detrimental consumer behavior and aid in further research in developing causal relationships in the context of Pakistan.

## **1.4 Research Methodology**

Researchers have developed a battery of scales and tests to assess the prevalence and severity of shopping compulsions (Albrecht et al., 2007). The main test is the compulsive buying scale (CBS) to identify a person having compulsive buying disorder. The tool, developed and validated ( $\alpha=0.95$ ) by Faber and O'Guinn (1992), has been used by key researchers (Koran et al., 2006; Roberts, 1998), with the permission of the second author.

This research is exploratory and qualitative in nature. Secondary data is collected through books, published research reports and journals and the internet. Apart from an interview on credit cards, primary research was conducted based on surveys.

### **1.4.1 Research Instrument**

A close-ended questionnaire having eight questions was the research instrument. The eighth question was the Faber & O' Guinn's CBS. It is a Likert based seven-item scale based on opinions on credit payments and spending habits. The only change was adding the word 'excessive' in the CBS item 2(a) to clarify that amount of spending was actually too much and not too little spending.

### **1.4.2 Sampling Plan**

The sampling plan was prepared through selecting a sample size of 200 credit card users in Karachi to be surveyed through non-probability, non-proportional quota sampling using both snowballing and judgement-based sampling. The questionnaires were distributed after screening potential respondents through a verbal qualifier; only credit card holders were given the questionnaire, which was necessary since the CBS (developed in a developed country) assumes all adults hold credit cards and includes two items (2c and 2f) in the CBS related to credit card bill payments and maintaining a bank account. The sampling frame is

cross-sectional demographically.

Data from psychiatrists and psychologists was not collected. Getting help is yet to find acceptability and people are reluctant to consult psychiatrists and psychologists for 'shopaholism' which seems more frivolous than schizophrenia or depression; that the data from the psychologists and psychiatrists would be subject to confidentiality; and if data were available, it would not be usable due to difference in research intentions, and non-standardized response expectation.

### **1.5 Limitations of the Study**

Results of a research are as dependable as the tool used; any errors associated with the instrument used will lead to errors in the results. Since no corroboration from psychologists or any other psychological test was done, single-source error is expected. The sample size is small, and no data of credit card holders is available. Finally, effect of physical limitation and funding is also a limitation.

## **2. Compulsive Buying**

### **2.1 Defining Compulsive Buying**

The proposed diagnostics for compulsive buying are preoccupation with buying, irresistible urge to buy unnecessary items or more than needed; shopping for longer time, distress due to financial, social and professional cost, and the inability to stop (McElroy et al., 1994).

### **2.2 Popular Incidence of Compulsive Buying**

Princess Diana, Jacqueline Onassis, Imelda Marcos and Sir Elton John have been shopaholics. Idioms like 'When the going gets tough, the tough go shopping', 'Born to shop', and 'Shop till you drop' are common-use English phrases. Prevalence of shopaholism in the developed countries has given rise to the term 'affluenza' which is consumerism spreading like an influenza epidemic in the affluent. Spenders Anonymous, Shopaholics Anonymous Stopping Overshopping and Debtors Anonymous are organizations that, on the lines of Alcoholics Anonymous, provide guidance to compulsive shoppers for dealing with their problems.

### **2.3 Academic Research on Compulsive Buying**

In academic research, compulsive buying disorder is not a new phenomenon as Black (1996, 2007) notes that the compulsive shopping syndrome was first called 'oniomania'—a disorder affecting impulse control—by German psychologist Kraepelin in 1915 and later mentioned by Bleuler in his 1930 book *Textbook of Psychiatry* as an impulse control issue like pyromania.

Some researchers maintain that compulsive buying is an impulse disorder (Kuzma & Black, 2006; Hollander & Allen, 2006) as it is currently labeled as an 'impulsive control disorder not otherwise specified' (ICD-NOS) in *Diagnostic and Statistical Manual IV*. Albrecht et al. (2007), on the other hand, consider it as a substance or behavioral addiction spectrum disorder. Most consider it as a member of obsessive-compulsive spectrum (Hollander & Allen, 2006; Koran et al., 2006). Latest literature suggests that should be considered as an 'impulsive-compulsive buying disorder' (ICBD) — the failure to resist the impulse to shop and repetitive shopping to alleviate negative feelings (Dell'Osso et al., 2008) —and treated as an impulsive-compulsive disorder.

Wu (2006) differentiates compulsive buying from impulsive buying defining latter as a spur-of-the-minute buying usually due to product placements in retail outlets and point-of-purchase adverts/ materials, while compulsive buying is more premeditated. What also differentiates compulsive from impulsive or excessive buying is the fact that compulsive buyers are excessive buyers but they buy usually for the purpose of alleviation of negative effects, and that compulsive buying is consistent over time.

The American Psychiatric Association (APA) acknowledges the existence of 'oniomania' and is reportedly considering it to be added to *Diagnostic and Statistical Manual IV*, which is to appear in 2011, as 'a behavioral addiction though not as a psychiatric disorder' (Bower, 2006). Although Dell'Osso et al. (2008) report that the *Diagnostic and Statistical Manual V* taskforce will treat impulsive-compulsive buying disorder (ICBD) as a subtype of impulsive control disorder (ICD), which would come under the obsessive-compulsive spectrum, combining all the views of researchers.

## **2.4 Worldwide Prevalence of Compulsive Buying**

Most of the surveys conducted so far have used the CBS as the tool for identification of compulsive buyers. Most studies conducted have been in the US (Koran et al., 2006; Roberts, 1998), France (Lejoyeux et al., 1999), Germany (Neuner et al., 2005), Israel (Shoham & Brenčič, 2003) and South Korea (Kwak et al., 2003) making compulsive buying an area of study in maturing consumer societies or rapidly developing countries. Some studies have also been conducted cross-culturally (Mueller et al., 2007). In the US, various studies arrived at different prevalence figures: 1.8% to 8% (Faber & O'Guinn, 1992) and 5.8% (Koran et al., 2006) of the population.

Caplin (2005) reported a European Union study of May 2001 that found 33% of consumers showing an addictive or unnecessary consumption. Other studies related to compulsive buying in the European Union include Germany (Scherhorn et al., 1990) where prevalence was found at 25%. Dr. Michael Kyrios reports prevalence at 12% in Australia (Christopher, 2007).

In Asia, the only studies were reported from Korea where it was found that the CBS has a lower but significant validity than in the developed countries due to cultural differences (Kwak et al., 2003). Although psychologists have conducted no formal survey in India, they report accidental discovery of co-morbidity with other psychological problems ('Shopaholics beware! You may be an oniomaniac', 2008).

## **2.5 Compulsive Buying: Reasons and Correlations**

Multiple reasons have been given for the rise in compulsive shopping. Some of the major causes are: availability of guilt-free credit (Futuruelle, 2003), glamorous lifestyle of the rich (Schor, 2000), a block against negative emotions (Garland et al., 2002), power and prestige (Roberts and Jones, 2001), discrepancy between ideal and actual self (Dittmar et al., 1996), a society supporting conspicuous consumption (Watchel, 2003), advertising (Bennet, 2005), self-medication (Watchel, 2003), past emotional or material deprivation (Varma, 2007), boredom, loneliness and age factor as young people are more prone to engage in compulsive buying (d'Astous, Maltais & Roberge, 1990), and depression (Gaston, 2007).

Demographic factors like education, social class, marital status or urbaneness do not seem to be related to compulsive buying (Friese, 2000), nor is the astrological sign of the compulsive buyer (Kwak et al., 2000). With rising incomes and shopping becoming a favorite pastime, more addictive shoppers will be seen (Scherhorn et al., 1990). Kuzma and Black (2006) report low income people as compulsive buyers too.

Earlier research considered compulsive buying as a disorder afflicting women more (Benson, 2000; Roberts, 1998). However, according to the prevalence study by Koran et al. (2006), compulsive shopping prevalence was at 5.5% for men and 6% for women, showing nominal difference. The initial higher incidence reported in women is found to be a representative heuristic; women tend to spend more time/ effort in shopping due to familial role and are more willing to share their guilt (Kuzma and Black, 2006). Also, men classify themselves as collectors not shopaholics (Black, 2007; Koran et al., 2006).

Credit card use has been associated with a rise in compulsive buying (d'Astous, 1990; Futuruelle, 2003; Roberts, 1989) leading to mounting debts and bankruptcies (Roberts & Jones, 2001). This is offset by people believing they deserve to spend (Varma, 2007) and even the incremental costs of interest do not dissuade people from compulsive spending.

Households in the US with credit card balances have an average balance up by 15% in the previous three years (Bucks et al., 2006). The debt of a US household is \$23,000, excluding home mortgages, for compulsive buyers (Marshall, 2008; Zivalich, 2006). Since the US economy drives the global economy, this in turn is reflected all over the world (Gurumurthy, 2007; Vohs & Faber, 2007).

### 3. Compulsive Buying in Pakistan

Widespread credit card usage and debt is being reported in Pakistan. Average outstanding per credit card has increased from nearly Rs. 16,500 (\$275) in 2002 to Rs. 22,000 (\$367) in 2006 (State Bank of Pakistan Annual Report FY06, pp. 65), an increase of 34% in four years. No data is available on the number of credit card users in the metropolitan city of Karachi. However, it was reported in an interview that half of credit card consumers are in Karachi alone (Wajid, 2008).

### 4. Compulsive Buyers in Credit Card Users in Karachi

#### 4.1 Results

Of the sample of 200 questionnaires (25 women and 175 men), 181 were returned (90.5% response rate). Of the ones received back, 11 were deemed as faulty under scrutiny, since the last question which was based on the CBS was not answered correctly, leaving 170 questionnaires. Data was fed into MS Excel for graphs and tabulations. Scores were tabulated using the scoring equation with the CBS to see whether a respondent qualifies to be a compulsive buyer. As per CBS, a score equal or below -1.34 deems a person compulsive buyer. The authors of the scale chose -1.34 as the threshold score on the CBS, which showed the score that was two standard deviations from the mean. However, only five cases (prevalence of 3%) are observed below two standard deviations from mean in the current sample. The authors chose to follow original researches, and keep the cut off point at CBS score of -1.34 or below, for classification as a compulsive buyer; area on the right of the positively skewed distribution (-1.34 and less) shows compulsive buyers in Figure 1.

**Table 1: Descriptive Statistics of Scores on CBS**

Mean	0.437	Standard Deviation	1.838	Range	8.48
Standard Error	0.141	Sample Variance	3.377	Minimum	-4.87
Median	0.865	Kurtosis	-0.259	Maximum	3.61
Mode	3.610	Skewness	-0.546	Count	170

Table 1 shows that the mode to the left of mean is showing fewer respondents in the compulsive buying region.

**Figure 1: Compulsive Buying Scale**

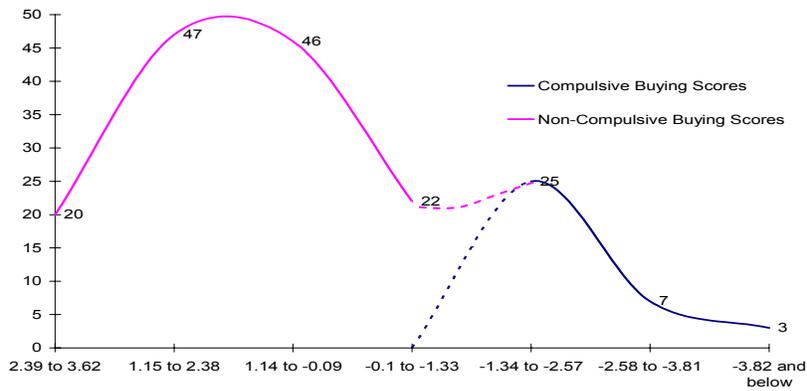
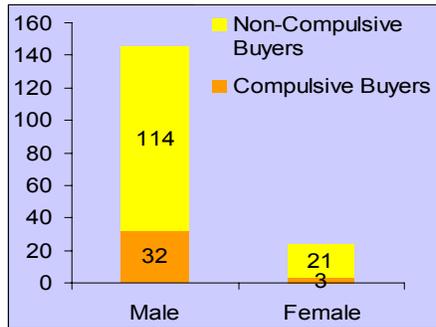


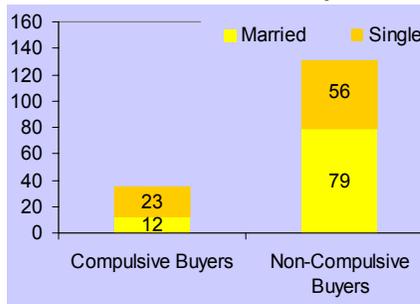
Figure 1 gives the spread of scores for compulsive and non-compulsive buying scores, if we break the distribution into two distributions: one each for compulsive buyers and non-compulsive buyers.

**Figure 2: Gender and Compulsive Buying**



Looking at compulsive buyers and comparing them with non-compulsive buying, the researchers find that 12.5% women while 22% men were compulsive buyers (Figure 2).

**Figure 3: Marital Status and Compulsive Buying**



Nearly two-thirds of compulsive buyers are single; more non-compulsive buyers are married (Figure 3)

**Figure 4: Age and Compulsive Buying**



17.5% compulsive buyers are students, 82.5% are working. No respondent identified self as homemakers, probably due to the reason that credit card consumers are usually working individuals. The students/unemployed are supplementary credit card users. Based on those who declared their ages, 63% of compulsive buyers are 30 years or younger (Figure 4)

## 5. Conclusion

The study confirms that there are compulsive buyers in Pakistan as 35 people out of 170 have been positively identified as suffering from the compulsive buying disorder. This gives us a prevalence of 20.6%. Prevalence in Pakistan is higher as compared to US or Australia, as was seen in Section 2.4. However, this figure could be higher since credit card requirement overlooks the bulk of the shopping done in Pakistan, reportedly 95% of overall shopping, which is done without credit cards.

As seen in the literature reviewed in Section 2.5, the disorder usually affects younger people. This was supported by this research as 60% of compulsive buyers were found to be aged 30 years or less. While marital status did not seem related to compulsive buying as seen in Section 2.5, marital status seems relevant in this study, as two-thirds of compulsive buyers are single. Gender is relevant to our study as 22% of men as compared to 12.5% of women are compulsive buyers. This can be due to the reason that men are primary spenders, and have more financial freedom.

Nearly 16% of those who spend less than Rs. 5,000 on themselves have found to be compulsive buyers and 54% of compulsive buyers spend more than Rs. 10,000 on non-essential items. This means that the amount spent on non-essential items has little to do with compulsive buying.

Interestingly, it was also found that some working respondents marked themselves as financially dependent on parents. All students who were found to be compulsive buyers are dependent on parents, showing that liberal allowances and supplementary credit cards may also be contributing to the onset of this disorder in the young.

In the study, 29% of compulsive buyers have three or more credit cards, and 74% of compulsive buyers spend 5 % or more on their credit cards for non-essential items as compared to 66% of non-compulsive buyers, on an average. 51% of compulsive buyers often use credit cards as compared to 36% of non-compulsive buyers. 71% of compulsive buyers say that shopping on credit cards makes people overspend, as compared to 62% of non-compulsive buyers. This data shows dependency of compulsive buyers on credit cards.

54% compulsive buyers enjoy shopping often, as compared to 40% non-compulsive buyers, which means that this may be an addictive behavior. Only three out of 35 compulsive buyers rarely enjoyed shopping as compared to 20% of non-compulsive buyers.

Compulsive buyers are more than three times more likely than non-compulsive buyers to agree or strongly agree that they are prone to consuming all their money. They are five times more likely to feel that others would not approve their excessive spending habits. About their purchases they are eight times more likely to buy things they could not afford; they are 15 times more likely than non-compulsive buyers to write a cheque without knowing whether they had enough funds or not. Compulsive buyers are more likely to indulge in 'retail therapy' than non-compulsive buyers; compulsive buyers are five times more likely to feel nervous on days they did not go for shopping, and five times more likely to make minimum credit card payments than non-compulsive buyers.

The study confirms that the compulsive buying disorder, prevalent in the third world countries, has far reaching implications. In a third world country like Pakistan where half of the population is under the age of 30 (Government of Pakistan 2007, Annexure Table 12.4), this rate would go higher as young people are found to be more susceptible to compulsive buying. Widespread credit card usage and debt are being reported in Pakistan, as the average outstanding per credit card has increased 34% in four years.

To conclude, the research finds that the phenomenon is extremely important to be formally recognized due to marketing, ethical and psychological implications, and this research is the first step towards identifying this phenomenon in Pakistan. The research has identified a number of people who would serve as a test group in future research.

## **6. Recommendations**

### **6.1 Follow-up studies**

Similar studies should to be undertaken in other cities of Pakistan, even though half of credit card consumers are in Karachi alone, to assess the level of prevalence of the disorder.

## **6.2 Development or modification of current instrument**

Keeping in mind the CBS's dependency on credit cards, a tailor-made instrument needs to be developed as most of shopping is done on cash basis. This instrument needs to be based on validation with the selected group of identified compulsive buyers. It is also recommended that the original scale be modified, to identify the extent to which a compulsive buyer is suffering from the disorder.

## **6.3 Addressing limitations of this study**

Measures to downplay limitations (single source error etc.) should also to be undertaken.

## **7. Areas for Further Study**

Marketing by credit card companies, banking sector practices and marketing organizations need to be studied for ethical compliance in the Pakistani context. Negative outcomes (financial, familial) found to be associated with compulsive buying (Koran, 2006; McElroy, 1994) need to be studied further for construct development. Scope of study needs to be increased, with eventual development of a model of compulsive buying. Identification of psychographic and demographic variables, which have a causal relationship with compulsive buying, should be identified.

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