U N I K A S S E L V E R S I T 'A' T

Master Thesis Exposé

Cross-cultural differences in applying retail therapy in Germany and Ukraine

Economic Behavior and Governance
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TABLE OF CONTENTS

Title	p.1
Abstract	p.2
Keywords	p.2
Background	p.2
Purpose	p.2
Methodology	p.3
Abbreviations	p.3
1. Introduction.	p.4-5
Literature review	p.6-18
2. Theoretical background	
2.1. Essence of retail therapy and its characteristics.	p.19-21
2.2. Impact of cultural background on the motive's differences	p.22-23
2.3. Related concepts and distinction from related concepts	p.23-25
2.4. Investigation of individuals' identity with different level of oniomania	p.26-27
3. Methodology	
3.1. Research question.	p.27-29
3.2. Development of the hypothesis.	p.30-33
3.2.1. Data analysis and survey	p.34
3.2.2. Motives and social norms in retail therapy usage in Germany and Ukraine	p.34-35
4. Plan of work	p.36
References.	p.36-40

ABSTRACT

Title: Cross-cultural differences in applying retail therapy in Germany and Ukraine

Keywords: shopping, shopaholism, retail therapy, behavioral control, compulsive behavior, culture, personal control.

Background: The objective of this study is to define whether the culture plays a significant role in retail therapy on the example of Germany and Ukraine. The paramountcy of chosen topic is that in a condition of psychological dependence people have a temptation to distract from particular unpleasant experiences and for a while to drown in the world of illusory pleasure. People cease to control themselves and try to distract from the problems indulging in unlimited consumption. Enormous potential exists in studying an individual's behavior as they apply different behavior models and have diverse personalities.

Commonly, psychological dependence may arise because of any stressful situation or a problem. In order to avoid the problem and responsibility to find a solution, people often are looking for appropriate way to alter and can find it by consumption process. However, studies demonstrated that it has both a positive and negative effect. From one side, it is a positive method of self-medicating depression, from another side, this kind of behavior shows an affect for compulsive buyers, who experienced bad mood and can be addicted to shopping.

There are known many types of behavioral deviations, which are not approved by society – addictions, aggression and criminal behavior. However, experts of different profile, studying similar problems could not find definite answer to a question concerning the reasons of such behavior and how to counteract it. Frequently such behavior is known as behavior deviation. Absence of effulgent events in life, monotony of days when there is nothing intriguing, shortage of incipient impressions and positive emotions – it causes in person desire something to change. In that case shopping is pleasant occupation which brings satisfaction. People want to fulfill the emptiness making inexpedient shopping decisions.

Retail therapy is considered to be a strategy to improve the mood condition and moreover, it has durable positive impacts on mood. Turned out to be an important factor that retail therapy has positive benefits, unlike purchase was planned or unplanned.

Purpose: to explore the cultural differences in applying shopping therapy and consumption concepts in Germany and Ukraine, using a Five-Factor Model of Personality (FFMP), Hofstede Six-dimension model (6 DM) and the theory of planned behavior with its determinants of intention: attitude, subjective norm and perceived behavioral control. In five-factor model was applied human personalities, such as openness to experience, conscientiousness, extraversion/introversion, emotional stability/neuroticism. Hofstede model is a quantitative and comparable approach in order to measure the cultural aspects as power distance, uncertainty avoidance, individualism/collectivism, masculinity/femininity, uncertainty avoidance index, long-term orientation/short-term normative orientation, indulgence/restraint.

Methodology: all the required data will be collected through an online survey in Ukraine and Germany. With a help of literature review organize all the theories and investigate the theory acceptance on two different cultures. Measuring the compulsive behavior scale in Germany and Ukraine it will be identified unappropriated type of consumer behavior.

Abbreviations

6 DM	Six-dimension Model
ANOVA	analysis of variance
CBS	compulsive buyers scale

COL collectivism

HSV hedonic shopping value

IDV individualism

IVR indulgence versus restraint

FEM femininity

FFMP Five Factor Model of Personality

LTO long-term orientation

MAS masculinity

PDI power distance index SNA semantic network analysis

STO short-term normative orientation
UAI uncertainty avoidance index
USV utilitarian shopping value

Introduction

Nowadays shops and supermarkets are filled the variety of goods capable to satisfy any need of the modern person (Decker, Kroll, Meißner & Wagner, 2015). As to Wagner (2011), it is possible to buy the necessary thing, without leaving the house by means of the websites or by phone. A variety, novelty, multifunctionality, ingenious design and prestige of goods entice consumers, inducing to do all incipient purchases (Parwoll 2011 & Wagner, 2011). As practice shows, the things often bought are not essentiality. Moreover, the person cannot utilize them in general (Dmitrieva, 2012). However, during the purchase activity the feeling of power and happiness may appear by a compulsive buyer. For instance, goal-oriented shoppers may have acquired all the information needed to make a choice, however, an investigation process may initiate to purchase (Wendy, 2003). According to numerous researchers, usually shopping has its strategies, where the hedonic goals helps to accomplish mood-alleviating process, self-gratification aspect (Arnold & Reynolds, 2012; Wendy 2003; Atalay & Meloy 2011; Faber & Christenson, 1996).

Near thirty years ago, P. Slater described dependence on expenditure of money that calls addiction to wealth (Slater P. 1980). Recent evidences suggest that shopaholism as a retail therapy is more used to be a female addiction (Scherhorn, Reisch & Raab, 1990). Schehorn (1990) mentions that in modern world women have a role of emotional decision maker subject that are cultivating a quiet and sensitive way when dealing with stress situations. The author points out that women have inclination to think in a certain way where shopping remains as a hidden activity. Nevertheless, it should not be ignored the fact that the men are not an exception and may belong to the group of addictive buyers. Previous studies have reported that the association with loss of control is noticed by addictive buying that considered to be in most of the cases as impulsive behavior (Faber, O'Gninn & Krych, 1987).

The dependence on expenditure of money is shown as repeated and insuperable desire to make huge number of necessary and unnecessary purchases. In the interval of time between shopping increase tension, which can be weakened only by purchasing next item, as a result, appears the sense of guilt. Thus, by shopaholics can be observed all the range of negative emotions. However, positive emotions up to euphoria can be observed while purchasing (Miltenberger, Redlin, Crosby, Stickney, Mitchell, Wonderlich, Faber & Smyth, 2003).

In recent years, the problem of deviant behavior becomes noticeably relevant. There are new forms of deviation, one of which is the shopaholism. "Shopaholism" is a medical term for a compulsive buying and consist of insuperable passion to purchases (Sharma, Narang, Rajender & Bhatia, 2009). By an ordinary person in most of the cases purchases are caused by needed goods, in contrast shopaholic does not pay attention to functionality and necessity of bought and, additionally, the process of shopping becomes more important than the result. With every second purchase the desire increases sharply and the quantity purchased cannot be sufficient (Orlova, 2007).

Kraepelin (1915) was the first to define the problem of compulsive buying of "oniomania" or "buying mania" that has uncontrollable and impulsive nature. Oniomania as a term comes from Greek "onios" - for sale and "mania" – insanity (Sharma, Narang, Rajender & Bhatia, 2009). In addition, it has a meaning of persuasive desire to carry out purchases in the quantities that are transcending the limits. Rash expenditure and impulsive purchases lead to earnest consequences such as formation of debts, the family conflicts, commits of crimes with the purpose to solve financial problems. The researchers distinguish the symptoms of oniomania as persuasive desire to make as much purchases as possible. In case of impossibility to make a purchase shopaholics have a bad mood condition and an aggressive spirit (Swan-Kremeier, Mitchell & Faber, 2005).

Literature review:

Author/ Year	Title	Publicatio n	Content	Hypotheses (discussing between supported and not supported ones)	Method (experiment, survey)
Rick S.I., Pereira B., Burson K.A (2014)	The benefits of retail therapy: Making purchase decisions reduces residual sadness	Journal of Consumer Psycholog y 24, 3 373–380	Retail therapy is considered too negatively, however, shopping can support to alleviate residual sadness, except that shopping reduce personal control over one's environment. Shopping is probable to alleviate sadness but not anger. Having a free choice and variety of options give an autonomy by selecting their individual desire. It is considered that real shopping can help to alleviate residual sadness	Making shopping decisions improve to build up personal control over one's environment. Consequently, it can facilitate to alleviate residual sadness. Making shopping decisions facilitates to alleviate anger. Consequently, raising control over one's environment should be more effective against sadness than anger. It is more probable to affect sadness than anger through direct manipulation over one's environment.	An online study with 100 adults was done for a small payment. Firstly, a baseline of currently emotional state has been done. Secondly, the next baseline measure was made in order to observe the influence of a 3-minute film "The Champ" that included a tragic moment. The participants were randomly selected to a Choosing or Browsing condition. Choosers were told to imagine buying from 12 products some items for 100\$ by placing that in a shopping card. Browsers were told to judge which 4 products would be useful for travelling and put them in a shopping basket. In the experiment have participated 147 people. The baseline of emotions in the beginning is a starting point. Afterwards the participants in the sadness condition watched the short video from "The Champ" and the participants with anger condition watched a short video from "Cry Freedom". The players were told that they would be given 5\$ in order to buy one of the three offered products or buying nothing and trading in the spending budget for 1\$ cash. The number of participants is 301. Initial emotional state was measured. Participants in the sadness condition watched the video from "The Champ", in the anger condition — "My bodyguard" and in neutral condition —

					2-minutes video from National Geographic about coral reefs. Participants had to describe first, the situation where they didn't have a control over environment and second, a case when they had a control over a situation.
Baumeister, R. F., & Heatherton, T. F. (1996)	Self-regulation failure: An overview	Psycholog ical Inquiry, 7, 1–15.	Self-regulation involves undesirable inner conflict challenging wishes and uncertainty. Capabilities of self- control are significant sphere of long-term personal differences.	It is assumed that people are exhausted late in the evening, therefore self-regulation should be unsuccessful, and the fatigue hypothesis is a prove. In order to understand the self-regulation failure there are some meaningful aspects of a strength model of self-regulation. Suppression of behavior and actions reflects self-control of the people. Moreover, these kind of people represents of self-regulatory deficits in legal and illegal actions. For instance, once typical criminal made an illegal behavior later can make it twice, is given to spend money impulsively, has a drug abuse etc. The self-regulatory failure happens more often when having an exhaustion or stress. The review made the authors reject the model that self-regulatory failure is normally because of overwhelming desire.	Three main reasons of misregulation were examined: control misunderstood contingencies, quixotic efforts to control the uncontrollable, giving too much priority to affect regulation. Control misunderstood contingencies includes wrong ideas about the on-going situations. Under the influence of false assumption, emotional distress self-regulation leads to undesirable consequences. Unreasonable optimism may generate consistency of useless efforts that rise the particular costs, for instance, time and money. Influence of misregulation appears when the people assume incorrectly the ways of improving the mood and get rid of depression. According to Nathanson (1982) study, useless constancy often is established by false expectations. Moreover, educated people with futile persistence had less probability to make the same mistake. Quixotic efforts are out of potential control. It is a fact that the mood state cannot be altered directly just by the will. However, if the people try to change it directly, they are likely to have a failure and this misfortune can make them feel worse. Research made

					by Wegner et al. (1987) demonstrated that thoughts' suppression is partly successful, and they create strong vulnerability for undesirable thoughts. The third pattern includes focusing the self-regulation efforts on inappropriate part of a problem. Choosing the wrong decision, the problem will not be solved.
Troy Higgins E. (1997)	Beyond pleasure and pain	American Psycholog ist, 52 (12), 1280– 1300	Regulatory focus theory has two approaches: promotion focus, that is focused on the success and prevention focus that has a method of avoiding negative consequences.	The hedonic principle implies that people experience pleasure when self-regulation works, and they experience pain when it doesn't. The hypothesis of Higgins proposes that strength of self-regulation might moderate the intensity of people's positive and negative emotions.	Self-regulatory principles of approachavoidance orientation were combined — regulatory anticipation, reference and focus. Regulatory anticipation: determines between pleasure/ avoidance of getting "A" and pain of not getting or receiving less "A". Regulatory reference: characterized acquiring the wished "A" as a reference point and avoidance of getting unwanted less than "A" as a reference point. Regulatory focus: differentiate between promotion-focus approach and prevention-focus. It concerns achievement of acquiring "A" / failure of receiving less than "A" between avoidance of getting "A"/danger of getting less than "A".
Arnold M. J., Reynolds K. E. (2009)	Affect and Retail Shopping Behavior: Understanding the Role of Mood Regulation and Regulatory Focus	Journal of Retailing 85 (3), 308–320	Points of importance in mood regulation can play a double effect in understanding of shopping value The center of attraction in promotion and prevention are	Persons with a promotion focus are approach oriented, precise about appearance of positive or negative results. Prevention oriented individuals are precise about appearance of negative outcomes and normally are avoidance motivated. The hypothesis of Arnold and Raynolds are the following: having a negative mood high promotion-oriented people	The experiment was conducted with 79 undergraduate students that must respond for 2 several studies. Study 1 – "Life events study" measures promotion and prevention focus followed by mood induction. Participants had a task to recall a situation from their high school years, to express the feelings from the past and write it down.

directly and indirectly related to HSV (hedonic shopping value) and USV (utilitarian shopping value). As to the hedonic perspective, people try to support positive mood and avoid negative. While from the instrumental perspective people are looking for a positive accomplishment and avoiding negative events (Tamir 2005). Having a negative mood, they have a goal to improve their mood for the better, and having a positive mood are trying to preserve it. As to Higgins (1997), the difference is possible to understand better with a help of regulatory focus theory (prevention and promotion focusses).

will think of positive memories, then the people with low promotion focus. The authors assume there is no difference by people with high and low prevention focus.

They consider that promotion focus will have a positive effect on mood monitoring, mood clarity and mood repair.

Prevention focus can be negative related to the mood monitoring, is not related to the mood repair while positively related to the mood clarity.

The authors assume that promotion focus will have a positive effect on hedonic and utilitarian shopping value. Prevention focus is considered not be related to the hedonic shopping value, while having a positive effect on the utilitarian shopping value.

It is hypothesized that mood monitoring, mood clarity and mood repair will be positively related to hedonic shopping value and negatively related to utilitarian shopping value.

Positive effect of word of mouth is expected to be in both hedonic and utilitarian shopping value.

Study 2 – "Cognitive style study" was given to explore the influence on individual's memory using different cognitive styles. Design of another study method asked the participants to remember about the last retail store they visited and had shopping and to acknowledge the items that represent hedonic and utilitarian shopping value.

Atalay, A. S., & Meloy, M. G. (2011)	Retail therapy: A strategic effort to improve mood.	Psycholog y & Marketing 28(6), 638-660.	Unplanned or planned shopping shows positive effect in retail therapy.	People having a bad mood are supposed to make unplanned gratifications in order to improve the mood. It is considered to be a great strategy to change the mood by consuming of unplanned items. Spontaneous purchasing to repair a bad mood will not lead to the feelings of regret. Hypothesis of the next study investigates the unplanned shopping when having a bad mood, but participants are given the aim of not reacting on the instinct.	Participants – 220 adult shoppers. Every person made a list of expected purchases for today and finalized with a short questionnaire. After shopping participants made a list of actual acquisitions in order to control the unplanned purchases. Study 2 contained multiple parts. First part contains the tasks to test the student's mood. Afterwards in different conditions ("resistant" and "no goal") they were asked to read the articles. Second part had a word search puzzle task that was made to intensify the conditions "restrain yourself" or "no goal".
Kang, M., & Johnson, K. K. (2011).	Retail therapy: Scale development	Clothing and Textiles Research Journal, 29(1), 3-19.	Classification of retail therapy as mood-alleviative consumption behavior and compensatory consumption behavior. Compulsive buying has common characteristics with Retail therapy. Compensatory consumption has a wide structure, where the mood-alleviative consumption is a model.	Consumption compensatory approach seems as a larger construct that includes more behavior (compulsive buying, impulsive buying, hedonic shopping) where the people have psychological weakness and shopping is considered as a compensatory resource. Another approach is mood-alleviative that represents the individuals who go shopping to repair their mood. Researchers found that impulse buying seem to be a great strategy for distemper. Chang (2004) explains hedonic shopping studies as the way to divert the thoughts from boredom. The authors argue that retail therapy is related but different construct from the other shopping behaviors. Yurchisin et al. (2008) enquire into the influence of life status changes and negative	The scale development was made with a help of Churchill's method and has three stages: initial scale item generation, scale purification and scale validation. During the initial scale was measured a shopping to repair the mood that consist of pre-therapy, during and post-therapy. In pre-therapy stage were included 20 different items. Shopping consist of purchasing and browsing without buying anything. The scale was made up with durable items through the Internet, magazines and stores. The other 15 items were designed to estimate uncommon benefits of shopping where individuals chose shopping instead other activities. The last group of 8 items represented the post-therapy results and measured the efficiency of retail therapy. The construction of test results included: gratification shopping, mood repair, hedonic

				emotions on retail therapy. So that to test the hypothesis the researchers elaborate a scale of compensatory consumption behavior, implicating apparel products.	consumption, utilitarian shopping value, compulsive buying, dysfunctional spending, post-purchase guilt.
Lichtenstein, D. R., Bloch, P. H., Black, W. C., Ridgway, N. M., & Netermeyer, R. G. (1993)	Price perceptions and consumer shopping behavior	Journal of Marketing Research, 30(2), 234-245	Price consciousness is negatively related to retail therapy and the consumers are looking to pay less. Positive role of price - level of the price is positively related with product quality. Consumers see high prices more enthusiastically by the reason of product quality and therefore are ready to pay extra costs. This kind of behavior calls price seeking behavior. Negative role of price - level of the price to which purchaser concentrates just on paying small price.	In order to determine the prognostic validity of price-related constructs, hypotheses are as follows: 1. Low price search outside the store - advised that in case the initial suggestion was negative the perception of price should be related positively and consumers should look for the lower price, while having a positive perception the people should associate it with negative one and tend to pay less. 2. Generic products purchases – suggests that negative role of the price perception should be connected positively with generic products purchase, considering that positive role should be related negatively 3. Price recall – offer positive role of price perception to be related negatively, while the people with negative role of price perception should be concerned positively. 4. Sale and Coupon responsive behavior. As far as coupons and sales serve as a sign to reduced prices, the author assumes a negative connection between price perception in its positive role and sale with coupons promotions.	The scales were established for price mavenism, price consciousness, prestige sensitivity and sale proneness. Nine marketing students were trained in order to interest consumers and gather a data. After getting a bill the shoppers were asked for a price they paid. For those who obtained less than four items price recall included the number of nonmeat or nonproduce items bought. Some consumers couldn't recall even approximate price (Dickson 1990). The participants were asked whether they looked through the weekly advertisement before going shopping or not. Finally, the responders were given eight coupons to a local bakery and a survey that hey had to make at home. The responses were measured with two depended variables — response about looking at weekly advertisement and another one response to the seven-place scale item given by the magazine "Consumer Reports". By measuring scores of price recall, the authors used price recall accuracy and price recall ability. Sale responsive behavior was measured by three indicators: purchased products because of the advertisement; sum of money

Eunju K., Eunha C., Sangah S., Pekka M. (2015)	Exploring SNS as a consumer tool for retail therapy: explicating semantic networks of "shopping makes me happy (unhappy)" as a new product development method	Journal of Global Scholars of Marketing Science: Bridging Asia and the World, 25(1), 37- 48	Having high level of irritation there is more possibility to change the mood through the shopping. SNA (semantic network analysis) examined and proved that shoppers experiencing therapeutic satisfaction through the shopping.	Contemporary lifestyle of customers is making shopping to alleviate negative feeling. Retail therapy was examined from compensatory consumption and moodalleviative approaches. Compensatory consumption scientists considered shopping as form of reward for mental weakness. Consuming is so called mood-regulatory mechanism. Because of anger, fear and kind of depression people are more concentrated on short-term purposes to getaway their stress. Moreover, it was noticed an impulsive and risk-oriented behavior by distressed individuals.	spent on the products on sale; the whole amount of money that was possible to economize seeing the acquiring products on sale. Twitter is considered as an informational portal that consists of relevant information about personal judgments, different opinions and positions. Therefore, the research consists of data from Korean and English tweets that included word "shopping" with reference to mood-alleviation. The analysis was conducted with a help of Korean Guljabi program that shows the repetition of words. Lastly, the authors established a network graph via NodeXL.
Tauber, E.M. (1972)	Why do people shop?	Journal of Marketing 36 (4), 46- 49.	The author suggests that the peoples' motives for shopping not always just buying the products. Regularly, the motives expect to have a satisfaction after the purchasing.	Hypothesized shopping motives: personal motives, social motives and impulsive shopping. Personal motives include role playing element, diversion, self-gratification, learning about new trends, physical activity and sensory stimulation. Roleplaying aspect demonstrates the activities as a part of the position in society (mother, housewife, student). Thus, a grocery shopping is normally activity of housewives.	In the experiment participated 30 people. Respondents had to think of their recent shopping and what did they do during the shopping. The author categorizes the responses for personal and social shopping motives.

Diversion factor suggests shopping as an opportunity of spare time, good example are indoor shopping malls. Self-gratification component is a representor of retail therapy. In the depressed state people are going to buy something for themselves in order to alleviate low spirit and have a utility of the buying process.

As to Rich and Portis, shoppers in New York and Cleveland could get an inspiration while shopping. The latest fashion news and trends bring interest for the people. Moreover, such research can be made with as well as without purchase.

Shopping in malls considers as a physical activity for some of the people. Sensory stimulation plays a vital role for the shoppers. Consumers most of the time have an influence of merchandise, sound and smell in the shops. Social motives of shopping provide an external experience and social interaction with the people with similar interest. In contrast to this, pleasure of bargaining with a seller can bring a feeling of satisfaction in case of buyer's win in this competition. Impulsive shopping indicates that not all the customers behavior is expected. They can buy or enter the particular shop on impulse. The author supposes that likelihood of making purchases on impulse has increased over the time.

Faber R. J., Christenson G.A. (1996)	In the mood to buy: differences in the mood states experienced by compulsive buyers and other consumers	Psycholog y and Marketing , Vol. 13(8)803- 819	Compulsive buying behavior considers as a way of self-medicating depression. Buyers in this case are intent to lift an undesirable mood state.	Sentence-research task showed the different results between compulsive and non-compulsive buyers. Compulsive buyers being in an unpleasant condition tend to make a purchase. Contrary, non-compulsive consumers tend to go shopping when they need it. Elliot (1994) checked the role of buying in recovering the mood condition by compulsive buyers using 4-item and scores for the compulsive buying. Feedback from compulsive buyers shown that often they feel positive directly after shopping that later leads the people to do it over again. Observing frequency of compulsive buyer's different emotions have been used a German Addictive Buying Indicator. A positive correlation was found between compulsive buyers and feeling of negative emotions. According to Elliot (1994), purchasing is the way to adjust the sad mood condition. The scientists explored that mood condition have an affect on consumer's behavior. It was found that self-gifting happens in a reason of personal success. The other studies demonstrate that not just shopping but watching TV as well alleviates boredom. McErloy at al. (1994) suppose depression, bulimia nervosa, compulsive	For the participation the authors used newspaper advertisements to engage compulsive consumers who cannot control their impulse to buy something and general consumers. The researchers have used compulsive buyers scale (CBS) in order to identify the individuals. Based on the results indicators has shown that women are the most compulsive buyers and they tend to have young age.

				buying may be types of affect spectrum disorders. Individuals are using this kind of behavior to overcome their dissatisfactory feeling. After a while using a shopping method as a self-medication key for temporal satisfaction, compulsive buyer's mood condition becomes more negative (guilt, depression).	
Garg N., Lerner J.S. (2013)	Sadness and consumption	Journal of Consumer Psycholog y 23 (1), 106-113	Sadness has a great influence on a consumption behavior that causes to pay, eat more than normally.	Combination of over-consumption and sadness may form a negative circulating behavior. According to the emotion research (Keltner et al. 1993), where sadness is in the center of loss and helplessness topic, compensatory consumption does not always make the effect of sadness, because it was found to be resilient. As to the Cryder et al. (2008) self-focus is a mediator of sadness' effect on enthusiasm to pay. But the author supports the idea that helplessness relates to the issue of control. Garg et al. (2013) hypothesize that incidental sadness will increase consumption of a hedonic food. The second hypothesis assumes that choosing between gift or receive a present will influence consumption for the depressed feeling. The authors tried to convince that loss and helplessness are the sadness' effect on consumption.	In the experiment were involved 104 undergraduate people from the US university for participation in exchange for extra course credit. According to Garg et al. (2007), the formula was: A 2 (emotion: sad, neutral) ×2 (choice of gift: baseline [simple endowment], high control). The study had 2 tasks: emotion induction and a story reading. The participants had a brown bag on their desks. Baseline condition instructed half the members to open the brown box where was a chocolate Godiva, token of appreciation for their participation. Emotion induction: the authors manipulated discrete, specific sad conditions. Primarily, they asked participants in the sadness state to define the situations that make them sad. Secondly, the participants had to detail a situation that have made them feel downhearted. Control manipulation: participants who received the chocolate box had to continue with "Study 2". As an appreciation for

Rucker D.D.	Desire to	Journal of	The researchers	Taking into consideration that low	taking part, half of the members in the high- control condition were instructed to open the brown bag and to choose one of the two presents – chocolate or ballpoint pan. The author's prediction of invariance in consumption in baseline and neutral versus high control will validate the differences in hedonicity (choose of chocolate, that is more expensive then pan). All the participants were asked to an event narrative and to rate it on 7 point-scale. The goal of the task was to give a chance and time to consume M&Ms and water during the task. Then was presented a sad story. In the assessing process was important to find the reaction of the participants on the both stories and how interesting it was. Afterwards members of the test were given a questionnaire about the time they had last time a meal, how much hungry they had, whether they try to control their food consumption during the test, frequency of chocolate consumption, whether they would love to keep a present they had or would like to give it to somebody and whether they find a chocolate Godiva a luxury chocolate brand. Finally, they were asked to write down the emotions they had when writing about autobiographical situation. Experiment had mixed-model design with
Galinsky A.D. (2008)	Acquire: Powerlessness and	consumer research,	analyses the impact of power on compensatory behavior.	power is an unpleasant psychological state, people will look for compensation of powerlessness feelings. Comparable to aversive state, high status is	dependent (power) and independent variables (willingness to pay). Participants observed the picture and label of products

	Compensatory			considered to be a sign and a resource of	and expressed their willingness to pay. Data
	Consumption			power.	were analyzed using ANOVA.
				The authors hypothesize that consuming	
				a status-related products work as an	
				aspect to restore a sense of power. As a	
				result, consumers with low power may	
				wish to get the luxury products that	
				naturally means status by others.	
				Therefore, if consumers are in a low	
				power state, they are ready to pay for	
				the status-related products. However,	
				powerlessness will not affect their wish	
				to consume products associated with	
				low status.	
				Consumers in a low state of power	
				should indicate a higher rate to pay if it	
				has high status, but there should be	
				small difference when the same product	
				does not have a high status.	
				Another hypothesis is that people with	
				low power will pay for a high status	
				product in order to increase their sense	
				of power.	
Kunieda Y.	Effects of	Conferenc	Positive and negative	The author hypothesizes that total time	The participants were divided into two
(2014)	Emotions on	e Paper	emotions	of web-site viewing have influence on	groups: comprising working men and
	Consumer		considerably affect	consumers' feelings.	women.
	Behavior		consumer	By consumers with low-involvement	The questionnaire was conducted using
	during Online		satisfaction.	feelings, negative emotions are induced.	Likert scale.
	Service			Likewise, consumers with high-	ANOVA (analysis of variance) was
	Purchasing			involvement – positive feelings.	designed for the effects of the variables.
				Another assumption is that online	
				purchasing elicit higher satisfaction.	

2.1. Essence of retail therapy and its characteristics

In psychology exists a known phenomenon, according to which majority of the decisions made by the person is caused by relevant emotional state. A generally acknowledged view of retail therapy is defined as well shopping therapy. Inman (2009) holds the view that a priori random purchase that person buys spontaneously is relevant to retail therapy.

The problem of deviant behavior has interdisciplinary character and numerous of experts as doctors, psychologists, teachers and social workers have a great interest in it. The researchers find especially difficult to compare the differences between deviant behavior and social norms, since the limits of norm are absolutely conditional there is no person whose characteristics fit to all the indicators (Harasymiv, 2016) The shopaholism is one of manifestations of a behavioral deviation. Shopaholism or oniomania is a persuasive desire to carry out rash purchases in large amount. Only recently, shopaholism drew attention of scientists as a vital problem of nowadays. As a matter of fact, shopping is an integral component of modern person's life. At the same time, considering satisfaction of consumer requirements, shopping becomes also a substitute of social communication, self-expression and self-affirmation (Swan-Kremeier, Mitchell & Faber, 2005).

Shopping is an obvious therapeutic way to elevate mood, that makes consumers satisfied and delighted (Scherhorn, Reisch, Raab, 1990). Mood-regulation actions are oriented towards mood repair process. According to Baumeister (2000), people tend to control self-regulation goals, as well as thoughts, emotions, impulses and performance. Generally, as the occasions changes, priorities modifies too. Depression makes an extreme influence on people's behavior so that the long-term goals and self-control are ignored and short-term goals become a priority (Tice, 2001). Moreover, bad mood leads to loss of self-control.

As to P. Slater, shopaholism is considered as a disease and described as an addiction to wealth. Similarly, Faber and O'Guinn (1987) characterized shopping as a chronic, repeated implementation of purchases, which becomes primary answer to the negative events and feelings. In order to determine the main symptoms inherent in shopaholics, Faber and O'Guinn offered exact criteria, which help to make a diagnosis. First criteria, there is a concern in purchases or sudden rushes something to buy that are felt as insuperable, compulsive and nonsense. Second criteria, there are purchases of unnecessary things or time spent on shopping takes much more time, than it was planned. The third one shows concern in purchases, sudden rushes to buy is shown as a stress, inadequate waste of time, financial problems and moreover, it becomes a crucial impediment in everyday life and in the professional sphere. The final criteria describes extremely addiction to shopping not only in the time of having a mania (Slater, 1980).

In medico-biological aspect, the passion to purchases has a scientific explanation. The American neurophysiologists established that the positive emotions got from shopping are caused by a dopamine – chemical compound, which is produced by a brain of the individual and have not only a physical influences but also emotional health of the person. Dopamin's emissions happen from anticipation of the moment of

something new and exited. Moreover, a level of dopamine connected with a forefeeling of something pleasant, rather than with the fact of purchased item. Under those circumstances, many people prefer exactly the process of choosing the product, than the buying (Tovstonuk, 2014).

Sociological justification lies in impossibility of problem solving of inherent Ukrainian society tradition to fight against consequences. Such fight leads to big losses: moral, physical, financial. Deprivation of dependence does not mean full healing yet. Unfortunately, the destructive character of addictive behavior is not taken into consideration, which includes aspiration to withdrawal from reality. Giving up one addiction, another one can appear. Within pedagogical approach, it is possible to note that scientists created an approximate portrait of the average shopaholic: these are mostly women of young or middle age, uncertain, lonely, and in general unhappy. As to the psychological aspect of a problem, those who have shopping dependence cannot understand what happens in fact. Misunderstanding, inability to find a way out and powerlessness of undesirable actions lead the person to a depression. The professional experts often try to treat the person for a depression, which is only the concomitant state (Tovstonuk, 2014).

The problem of dependence emergence consist not only that often addictions damage health, but additionally, that no dependence is capable to solve problems and really to distract the person from those requirements, which cannot be satisfied. As a result, people gets sense of shame for the behavior that cannot be controlled, and the feeling of shortage something does not disappear. Feeling this discomfort people tries to muffle the dependence more and more, plunging into it more and more deeply. As a result, it becomes a vicious circle - the dependence creates problems from which the person hides in the same dependence. In the study of Scherhorn et al. (1990) was found that shopaholics buying spontaneously has almost the largest percentage with unplanned one 80% and 72% respectively.

Psychological features of retail therapy include emotional rise by purchasing ordinary items, desire for sudden acquisition of unplanned purchase earlier, excessively feelings of guilt due to making unnecessary purchases, passion for spending money regardless of income size, available savings, existence of financial crises, a habit of constantly borrowing money. Sadness is associated with perceived deficiency and exactly shopping can help to alter the low spirits (Rick, Pereira & Burson, 2014).

Attachment and formation of incrementing magnetization to make purchases turn out to be dependent on a number of initial and acquired attitude, which are connected with personal problems and characteristic features of shopping addicts. Shopping, like other addictions, begins with attachment, with a strong emotional fixation on the act of making a purchase.

In contrast, the psychological analysis of shopping addictions finds that in most of the cases individuals have serious problems with self-esteem and a sense of isolation in the surrounding world. Unconsciously shopaholics are making the action of purchases as a tool to solve various psychological problems. With a help of shopping people feel more confident, they may increase their self-esteem. Moreover, shopping is able to relieve emotional tension, feel in a state of control over the mental state. Under those circumstances

some addicts acquire the lost or absent meaning of life (Faber & Christenson, 1996; Dmitrieva, Korolenko & Levina, 2012; Atalay & Meloy, 2011). Simultaneous shopping addiction inevitably result with reinforcement of the negative emotions that from the short-term perspective were eliminated by an obsessive implementation. In particular, under a growing burden of guilt increase as well anxiety with the development of general mental exhaustion.

It has been found that for the women under stress shopping is also a consolation factor that stimulates to alleviate sadness (Rick, Pereira & Burson, 2014). With this intention, they reward themselves for going through the negative moments in their lives. Besides, for lots of people retail therapy really helps to survive in difficult times. However, they easily acquire a dependence as the belief that shopping diminish stress is formed. Therefore, in the nearest future, if they fail, they run to the store and waste money pointless, because stressful situations depletes their self-regulatory capacities. Thus, it appears that people are more emotional and irritable, their actions are starting to get out of hand, and as a result the addiction becomes a source of new mental diseases (Baumeister & Heatherton, 1996). Pamela Roberts convinces that addiction is a way to handle the emotions. As a result shopping is a way to avoid negative emotions (Belfast Telegraph, 2019). For instance, if the individual experience sadness and other negative emotions such as anxiety, apathy or another physical or mental pressure, shopping is an excellent way to escape those unpleasant mood conditions. In the overworked state may appear a feeling to be praised. Considering buying as the most loyal source to get positive emotions, a desire to please oneself turns into a constant reaction of the psyche to stress.

It can be emphasized that the formation of consumer psychology of shopping addicted person forms at early age. Unconscious mechanisms take part in the process. Notably, desire to acquire, as all other wishes, is inherently unconscious, and may not be controlled in a rational way. In fact, a person does not know the consequences of impulsive actions and to what outcome appears in case of immeasurable shopping implementations (Dmitrieva, Korolenko & Levina, 2012). Characteristically in post-modern society shopping addicts' first place in the addictive scenario not the purchase itself, but the procedure of a visit to the shop, which occupies a central place in the content of the thinking and imagination of the addicted individual.

As to the Kohut (1977), in psychological mechanisms of shopping-addiction are involved three types of transfers: ideal, mirror and twin. The act of purchase acquired (before and at the time of its acquisition) is associated with power and force as a sense of connection and, thus, ensures the realization of the ideal transfer. For instance, approval and support from others satisfy the requirements of mirror transfer. In contrast, feeling the same with images similarity satisfy the motivations associated with double transfer.

2.2. Impact of cultural background on the motive's differences

Hofstede (2001) refers to culture as the collective programming of the mind that distinguishes the members of one group or category of people from another. Nowadays exists various definitions of culture that generally differ from each other and at the same time are alike. Culture considers more or less as ideas or actions that are typical for a certain group of people that has distinguishing aspects from cultures.

Pleasure and excitement are the most common mood states that refer to the retail therapy researches. Shopping has always been a great strategy to alter or to prolong positive mood condition (Atalay & Meloy, 2011; Faber & Christenson, 1996).

Since the consequences of retail therapy in the West, it has long been seen as a disease. Unfortunately, in Ukraine it is still considered to be a normal a passionate desire to acquire certain things.

The aim of modern society is making numerous purchases (Peshkova, Ürkmez & Wagner, 2016). The happiness model consists of the desire to earn as much money as possible and to purchase as much goods as possible. Therefore, it is one of the reasons why shopaholism is not considered as an issue. Research works show woman who buys huge amount of necessary and unnecessary things in a store, is not considered as sick. For the surrounding society, this phenomenon is normal, therefore, shopaholism is rarely recognized by doctors as a disease (Orlova, 2007).

The USSR countries as Russia, Ukraine, and Belorussia are common in culture and assumed having the same lifestyle characteristics (Kovacs, Zulauf, Ürkmez, Brockhaus & Wagner, 2016). Thus, according to Gates et al. (2009) and the Lewis model about cultural differences, it can be assumed that Ukraine belongs to the multi-active position. The fact that in Ukraine and Russia shopping is not officially recognized as a disease that is extremely dangerous, because people cannot recognize this passion in time and, accordingly, do not turn to specialists for quality help. As a result, their harmful habit is launched to such an extent that it becomes too difficult to heal from it.

The researchers hypothesize that consuming a status-related products work as an aspect to restore a sense of power. As a result, consumers with low power may wish to get the luxury products that naturally means status by others. Therefore, if consumers are in a low power state, they are ready to pay for the status-related products. However, powerlessness will not affect their wish to consume products associated with low status (Rucker & Galinsky, 2008)

Generally, the society imposes certain stereotypes of thinking (Aliyev & Wagner, 2017) about a person in accordance with his perceptions of the situation in the country or in a certain social circle (Timokhina, Ürkmez & Wagner, 2019). The studies of Wagner (2007, 2005) shows that this stereotype appeared in Soviet Union times when shortages of goods were typical. Accordion to Orlova (2007), when some goods were in short supply, people stood long queues in order to buy products in large quantities, knowing that they might not see them on the shelves for a long time.

According to the psychologists, the fear of sudden disappearance of goods still lives in the subconscious of Ukrainians. However, the shopping malls have huge amount of products and domestic goods, unconscious fear continue, nevertheless people are encouraged to buy more than they require in the farm and household. In Ukraine do not have qualified medical professionals who specialize in this kind of mental illness. Most often, shopaholics have to cope with their problem themselves and success depends on the strength of their character. Shopping can bring to the person many positive emotions (Schlobohm, Zulauf & Wagner, 2016; Wagner, 2014) and, additionally, develop resistant dependence. However, authentically shopping does not give the authentic happiness and it is happen to be a temporary supersession. Furthermore, satisfaction of emotional requirement are not occur to be full. People with higher incomes are more tend to perceive shopping as leisure, and more likely than others to make impulsive shopping (Orlova, 2007).

2.3. Related concepts and distinction from related concepts

Traditionally, it has been argued that retail therapy as a concept has various definitions (Arnold & Reynolds, 2009). The common approach of retail therapy as to Atalay and Meloy corresponds to the enhancement of positive mood as way to repair the mood statement (2011). To the extent that retail therapy has different constructs, in the literature it can be described as a shopaholism (compulsive buying), oniomania, unplanned buying, impulse buying, materialism, affect regulation.

A medical term for compulsive buying calls shopaholism (Sharma, Narang, Rajender & Bhatia, 2009). Sharma et al. (2009) demonstrated that shopaholism is an irresistible, frequent buying of items that are mostly nonsense where the main factor of their impulses are distress, comorbid psychiatric disorders, anxiety etc. It has been found that "comorbid mood disorder leads to remission of compulsive buying behavior" (Sharma, Narang, Rajender & Bhatia, 2009). While a variety of definitions of the term "retail therapy" have been suggested, one of the definitions first suggested by Kraepelin in 1924 who interpreted it as oniomania, where "onios"- for sale, "mania" – insanity. The characteristic of oniomania as one of the "reactive impulses" or "impulsive insanities" has determined Jhanjee (2010), while the other authors consider it as type of addictive behavior of the person. Signification of oniomania imply individual's position that defies common sense demonstrating the irrational behavior and strong inclination to super consumption (Orlova, 2007).

Experimentally Podlinyaev (2015) has demonstrated oniomania in his study and confirmed the inverse relationship between a person's desire for super consumption and the filling of his life with sense orientations. To a lesser extent the life is filled with a meaning, disproportionally there is an addictive behavior including irrational consumption.

Bell (2011) identifies in his research that shopping can have abstract goals that consequently lead to unplanned purchasing. Considering retail therapy as a means to regulate the mood, unplanned shopping goal as a strategy bring enormous enhancement of positive mood (Kang & Johnson, 2011). Moreover, unplanned buying is a substitute for impulsive buying that is based on unconscious motives and emotional energy.

Generally, people changes their mood by using different strategies and ways to improve a positive mood and decrease negative one. One of the most popular methods in retail shopping experiences represents usage of hedonic shopping motivation demonstrates a gratification shopping benefits (Arnold & Reynolds, 2009). There is a significant expansion of retail therapy in a modern society, especially among young generation. In accordance with Orlova (2007), one fifth of developed countries cannot resist buying a new thing. According to the experiment results, a person who is interested in shopping has an ability to think rationally decreases, and at the same time, there is a significant increase of tension in those parts of the brain that regulate emotions and pleasant feelings, so personality during purchase can experience strong excitement and euphoria.

Shopping becomes a new kind of sport, psychotherapy, passage into certain social circles, etc. Numerous women use shopping as a means to calm down, so in any trouble they immediately rush to the store. Moreover, shopping produces a relaxing effect. A person gets pleasure from buying and then attempts to smooth out the negative impact on various life factors.

Such shopping effect is based on the positive feeling that a person once experienced by acquiring some product. Subconsciously an individual seeks to relive a pleasant feeling where the purchasing process has a goal to compensate for the accumulated negative emotions. However, usually, newly acquired purchases do not cause the expected effect. In pursuit of pleasure, person starts buying items. Therefore, as a result people make the uncontrolled purchase of unnecessary goods. Occasionally, the intention to achieve gratification in the consuming way may lead to the addiction. A person starts impulsive buying not because of product but for the purpose of experiencing pleasure. The search for ways to obtain this pleasure increases the level of adrenaline in blood. When the excitation reaches its level and the wish is received, endorphins (happiness hormones) are released in the body. When hormone levels return to the normal condition, a feeling of melancholy appears. As a matter of fact, shopping adrenalin by its nature is unconscious and may not be controlled rationally. Additionally the individual does not realize the consequence of irrational shopping behavior. Experiencing sadness and sorrow individual is encourage to

look for pleasure by a proven way – shopping (Luo, 2005; Faber & Christenson, 1996; Inman, Winer & Ferraro, 2009)

Indeed, a flow of negative behavior can be formed on the basis of two aspects sadness and over-consumption. Specifically an emotion research by Garg & Lerner (2013) illustrated sadness as a heart of helplessness. Nevertheless, sadness was investigates to be resilient, where the effect of compensatory consumption is slightest. Thus, more purchases are required to achieve the result, and meanwhile, human dissatisfaction is increasing. Recent research of Rick et al. (2014) demonstrates that sadness is identified with shortage of personal control.

Some behavior is under control of the person's will. Equally, control over emotions has a dependence of human will behavior. In contrast to this, some type of behavior cannot be controlled. For instance, a habit to smoke it is hard to give up for some people because of weak willpower.

The more behavior depends on external factors beyond the control of the person, the less it is subject to the will control. Therefore, the presence of uncontrolled factors can affect a person's performance of the intended action, and in this case, the prediction of behavior based on intentions (trends) becomes less accurate.

The studies showed that people with consumer addiction lose control of their buying behavior in stores, consume despite understanding the irrationality of their behavior. As to the personality characteristic of shopaholics, they have reduced self-esteem, are anxious about money and its spending and at the same time, shop to boost self-esteem, pleasure and symbolic problem solving. As a result, shopaholism closely related to problems of the personalities emotional sphere development.

According to another researchers, a huge variety of options provide with an opportunity to decide personal ambitions. Self-regulation aspect comprises "inner conflict challenging wishes and uncertainty" (Baumeister & Heatherton, 1996). Being a meaningful area in the long-term, self-control can have individual differences. With a self-regulating power, strong people will have a strong correlation of self-control in all spheres (Baumeister & Heatherton, 1996).

2.4. Investigation of individuals' identity with different level of oniomania

The past decade has seen the rapid development in studying phenomenon of oniomania. Investigators have examined the brain activity of women who are suffering from shop addiction. The scientists have found that during the purchase, the areas of the cerebral cortex responsible for rational thinking are completely disconnected, and on the contrary, tension increases in the departments responsible for emotional state (Makartischeva, 2007).

Oniomania is well known "shopaholism" that determine an overwhelming desire to buy something without paying attention to the necessity and consequences. According to studies, about 10-12 per cent of Europeans are subject to shopaholism, where 90 per cent of them are women. The problem begins to emerge at a young age 16-17 years old and in the acute phase moves in the age of 30 (Orlova, 2007).

The researchers have noticed that in the most of the cases shopaholism is high developed by women, mainly during periods of depression, for example, after divorce, severe separation, due to lack of attention and love. When an individual feels himself lonely and unnecessary, the bright world of shopping attracts an attention, the respect, and interest of sellers increase the mood, and the feeling of freedom of choice and the opportunity to buy anything provide with a release of adrenalin.

Makartischeva (2007) has investigated a variety of oniomania levels that may escalate.

In the beginning of the first stage person starts to feel pleasure from shopping. Therefore, in case of extra money and free time appearance, as a result a shopping trip become as a part of entertainment and enhancing ones mood. The concept of "shopping" at this stage includes visiting several stores to scout what is sold and studying magazines presenting information about various goods.

At this stage, sellers cause some inconvenience and even trouble. They are trying to ask something, learn, help make a choice, explain something, tell, etc. A person at the initial stage of shopping wants to reach isolation from the real world in which he lives through shopping.

The following second stage includes an emergence of a desire to change ones style. One relevant finding was that women believe that the mandatory component of shopping is to visit several shops in order to get sufficient information about potential items that can be bought. Moreover, with a help of directly observed goods that some abstract desire can transform into a specific object. Another point is that new outfits and accessories bring aesthetic pleasure with their beauty, unusual, some new charming notes. Changing your own image brings new pleasant impressions and soul-stirring feelings (Orlova, 2007).

At the third stage of the shopaholism development a person, considering goods spread over shelves and hung on hangers, suddenly sees something interesting and immediately recalls that in his wardrobe there is one thing that will perfectly combine with a new item. At the same time, the fact that individual has already several clothes perfectly combined with that item from the wardrobe, which suddenly the person wants to supplement. Under those circumstances it can be visible the changes in human thinking at this stage. With

the look of an attractive thing, he is no longer able to think rationally. In this case, people follow their own desires, looking for an explanation and an excuse for them.

Meanwhile there is an existence of the next stage where the disease continues to progress intensively. This can be determined by the fact that the person remains less satisfied with his choice and the existing wardrobe (Orlova, 2007). Additionally, people are used to be annoyed of everything they have and it becomes extremely difficult to satisfy oneself. At this stage, dissatisfaction with shopping leads to a sharp increase in the number of purchases, which, in the absence of space in the wardrobe, are sometimes not even unpacked.

Finally, in the last stage an individual comes a deep insight, for instance, whether there is a reason of having too many objects in wardrobe. Although it can be true that at final stage of shopaholism such questions already seem unnecessary. This continues increase dramatically until all finances run out. The fact is that a person has developed a persistent dependence on shopping. The personality has changed noticeably in addition thought activity has acquired signs of mental abnormality.

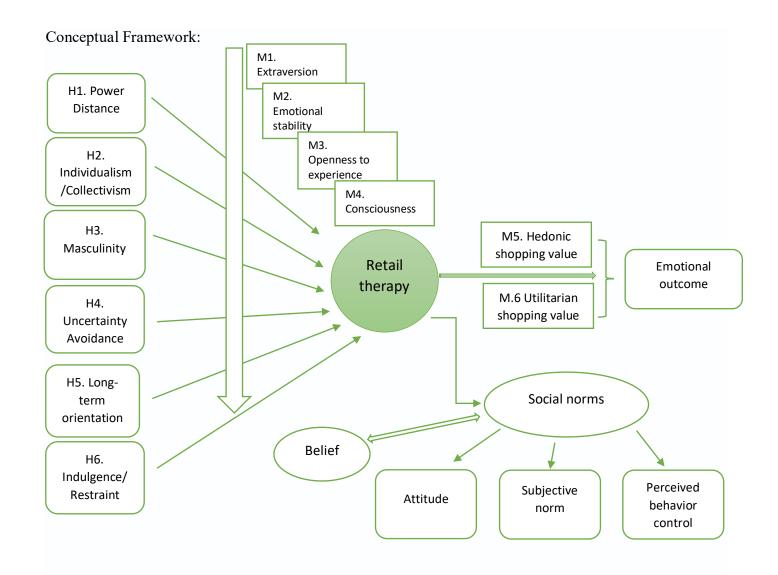
3. Methodology

3.1. Research question

Literature review of previous studies demonstrated no attempt to explore cultural differences of retail therapy. Hence, this study designs to investigate this topic with a reference to the research questions:

- 1. What are the cross-cultural differences from using retail therapy in Germany and Ukraine?
- 2. How do the retail therapy motives relate to the cultural background?
- 3. How do the retail therapy motives relate to personal characteristics?

Every research that is undertaken must have a theoretical foundation in order to provide with a relevant information that has a reference to previous work in the field. A well-known quote from ancient empiristic: "I will not believe it unless I see it". So that empirical research is based more on the actual experiences than from the beliefs. Consequently, with a help of web-based questionnaire the data will be collected. The first part includes question about five-factor personality model, where only four factors are tested. The second part of the questionnaire is VSM 2013 that is used for comparing culturally influenced values of Germany and Ukraine: 24 questions consist of content six dimensions of national culture questions and another 6 questions are asked for demographic information. The third and fourth parts test the theory of planned behavior and its influence on retail therapy and questions about shopping behavior.



There are variety of methodology that researchers treated: personal interviews, telephone interview, online-survey, in-depth interview, questionnaire and others. Among the different research methods, the most practical one is online-survey.

Methodology	Advantages	Disadvantages
Mailed-questionnaire	 ✓ Access to the internet from anywhere ✓ Imposing no financial costs ✓ Immediate distribution ✓ Responses are shown-up automatically 	 ✓ Spam messages ✓ Time-costs is involved ✓ Negotiability ✓ Personal choice to make a decision ✓ Low response rates
In-depth interviews	 ✓ Extensive amount of information ✓ Better understanding of the responders and their feelings ✓ Can be adaptive to the interview conditions ✓ Detailed information 	 ✓ Time-consuming ✓ Search of the responders ✓ Competent people in the specific field ✓ Processing and clarification difficulties

Personal interviews	 ✓ Take into account the level of culture, education and competence of the responder ✓ Reaction observation ✓ Take into account honesty of the responds ✓ Individually focused interview ✓ Detailed information 	 ✓ High time-consuming ✓ Expensive ✓ Selection of the responders ✓ No dynamics of intergroup interaction ✓ Detailed information with less people ✓ Appropriate timing for the responder and interviewer
Telephone interviews	 ✓ High speed of the information received ✓ Universal method ✓ Rapid conducting ✓ Reasonable time-costs 	 ✓ Can be easily ignored especially when calling number is unknown that brings difficulties for the conducting of a needed amount of people ✓ Strict timing ✓ Absence of visual materials ✓ Minimum questions
Online-survey	 ✓ Large enrollment of respondents ✓ Openness from the respondents ✓ Accessibility ✓ Convenience ✓ Speed of the responses ✓ Low financial costs 	 ✓ Limitation of internet users ✓ Difficulties to check with the interviewer ✓ Misrepresentation ✓ Repeatedly taking-part
Questionnaire	 ✓ Opportunity to interview a large number of people in a short time ✓ Relatively low-cost method of investigation ✓ Possibility to conduct surveys among specific population groups ✓ Universal method ✓ Easy and simple treatment 	 ✓ Misunderstanding of the questions ✓ Default rates of questionnaire
Mall-intercept survey	 ✓ Easy to encourage the people in mall ✓ Relevance and practicality of the various experiments ✓ Can be done full, descriptive, and thoughtful response 	 ✓ Differentiation of personalities ✓ Short questions ✓ Need to be completed live and in a short time

3.2. Development of the hypothesis

Hofstede, Hofstede and Minkov (2010) pointed out that social anthropology broadened the belief that all societies confront the same basic problem, where only the answers distinct. The six-dimension model of national culture by Geert Hofstede has developed a specific quantitative and comparative approach to measure the aspects of cultures. Hofstede (2011) six-dimension model assumes six main aspects: power distance, uncertainty avoidance, individualism, masculinity, long-term orientation, and indulgence.

Retail therapy is perceived too negatively, however, shopping can support to alleviate residual sadness, except that shopping reduce personal control over one's environment (Rick, Pereira & Burson, 2014). Wide variety of options give people the autonomy by selecting individual preferences. Cultural categories are quite contrasting, the usage of retail therapy supposed to be distinctive. Rick (2014) considered that real shopping can help to alleviate residual sadness but not anger. Raising control over one's environment should be more effective against sadness than anger. Therefore, it can be assumed that self-control effectiveness has its impact differently. Generally, indulgence-oriented societies stands for natural human desires as enjoying life and have fun. In opposite to this, restrain-oriented people are tend to control their desires and impulses and follow strict social norms (Hofstede, 2011). According to Hofstede, Ukraine and Germany has a score of 14 and 40 respectively.

H1.1. Respectively to the individual level of indulgence of Germany and Ukraine, it is assumed that both countries tend to use retail therapy.

H1.2. According to Hofstede indulgence dimension, retail therapy will be less attractive for Germans, than for Ukrainians.

Taking into consideration that low power is an unpleasant psychological state, people will look for compensation of powerlessness feelings. Comparable to aversive state, high status is considered to be a sign and a resource of power (Rucker, 2008).

The authors hypothesize that consuming a status-related products work as an aspect to restore a sense of power. As a result, consumers with low power may wish to get the luxury products that naturally means status by others. Therefore, if consumers are in a low power state, they are ready to pay for the status-related products. However, powerlessness will not affect their wish to consume products associated with low status. Consumers in a low state of power should indicate a higher rate to pay if it has high status, but there should be small difference when the same product does not have a high status. Another assumption is that people with low power distance will pay for a high status product in order to increase their sense of power (Orlova, 2007). One of the well-known problem of human inequality - Power Distance makes a

strong affect and the final consequence determine the culture comprehension. According to Hofstede, Ukraine has a score of 92 and Germany, contrary, has a score of 35.

According to Zhang et al. (2010, p.945), power distance belief (PDB) "is the degree of power disparity that people in culture expect and accept, where the high level of PDB is associated with self-control. From other side, low-PDB cultures demonstrate no need of expressing self-control having desire of immediate gratification. Therefore, the cultures with high PDB have a stronger level of self-control and hence, reduce impulsive buying tendencies. Applying self-control in retail therapy can develop self-control muscle and, moreover, enhance it for the long-time perspective (Zhang, Winterich & Mittal, 2010).

H2. It can be assumed that people having a high power distance tend to use retail therapy more often than those with a low power distance.

Hofstede demonstrates two opposite aspects in the society where the people are integrated into two groups - individualism and collectivism. Individualism is a basic issue with its aspect of the interdependence degree of that society retains among its members. People are expected to look after themselves and their family. On the other side by collectivism, people are more integrated into sizable groups, often extended families (Hofstede, 2011). According to Hofstede, Ukraine has a score of 25 and Germany 67 in the individualism dimension.

H3. German people tend to use retail therapy more often than Ukrainians.

The role of men and women in the society is differ and based on uniqueness of emotional and gender aspects. The distribution of values between different genders is illustrated by masculinity and femininity. Masculinity dimension shows that society is motivated by achievements and success values, which starts in early ages. The recent studies demonstrated significant distinctions among the society, where the assertive one consider as masculine and the modest – feminine (Hofstede, 2010). Hofstede (p.72, 2010) pointed out that masculinity represents a focal point on "ego, money, things and work". In contrast to this, femininity stands for "relationship, people and quality of life". Scherhorn (1990) mentioned that the German Addictive Buying Indicator showed a high rate by women, then men. Recent researchers found out that symptoms of depression were lower in feminine European countries than in masculine. According to Hofstede, Ukraine and Germany, each has a score of 27 and 66 respectively.

- H4.1. The motives' impact on the retail therapy usage is moderated by age
- H4.2. The motives' impact on the retail therapy is moderated by gender

The main point of uncertainty avoidance is people's tolerance for ambiguity. Uncertainty avoidance dimension is connected with a perception of culture and the way they deal with unknown, surprising facts, which make an effect on compulsive behavior. Countries with weak uncertainty avoidance are intended to escape such unpredictable situations by strict behavior rules and lows, because of safety and security (Hofstede, 2011). In contrast to this, people with high uncertainty avoidance try to have as few rules as possible. According to Hofstede, Ukraine has a score of 95 and Germany, in contrast, has a score of 65. Azjen (1988) mentioned that in theory of planned behavior people are asked if they intend to behave in a certain way, which can show a prediction of behavior's pattern. The intention can be explained with three determinants: attitude, subjective norm and perceived behavioral control. It is assumed that consumers make a decision that maximizes their expected benefits.

- H5.1. Strict social norms in Germany lead to the lower frequency of retail therapy behavior.
- H5.2. Less strict social norms in Ukraine lead to the higher frequency of retail therapy behavior.

According to Ajzen (1988) theory of planned behavior:

- H5.3. The more favorable the attitude with respect to retail therapy, the more intention to apply it.
- H5.4. The more unfavorable the attitude with respect to retail therapy, the less intention to apply it.
- H5.5. The more favorable subjective norm with respect to retail therapy, the more intention to apply it.
- H5.6. The more unfavorable the subjective norm with respect to retail therapy, the less intention to apply it.
- H5.7. Belief about advantage of retail therapy application make people follow it.

Long-term orientation was examined rarely by the researchers. According to Hofstede, Hofstede and Minkov (2010): "Long term orientation stands for the fostering of virtues oriented toward future rewards-in particular, perseverance and thrift. Its opposite pole, short-term orientation, stands for the fostering of values related to the past and present-in particular, respect for tradition, preservation of "face," and fulfilling social obligations" (p. 239).

- H6.1. According to Hofstede, long-term orientated people tend to use retail therapy more than those who are short-term oriented.
- *H6.2. Social norm of long-term oriented people leads to saving habits.*
- *H6.3.* Social norm of short-oriented people leads to spending habits.

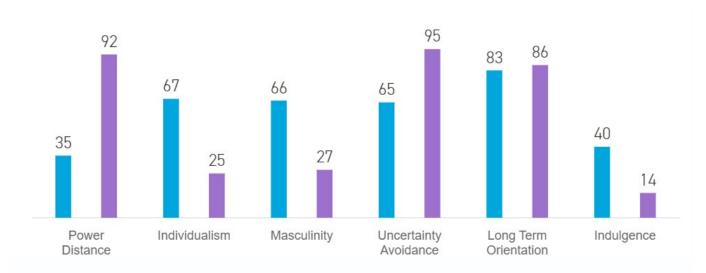


Table 1: https://www.hofstede-insights.com/country-comparison/germany,ukraine/

Compulsive behavior is influenced by different environmental and personal factors (Scherhorn, Reisch & Raab, 1990). According to Faber (1996), compulsive buying behavior considers as a way of self-medicating depression. Buyers in this case are intent to lift an undesirable mood state. As far as consumer stays long time in a grocery, there is less probability of compulsive buying behavior because of lack interest and partly enhancement of mood (Journal "Testing behavior models of grocery store shopping").

The whole assortment of characteristic adaptations (values, habits, skills) are the reflection of individual and cultural aspect (Hofstede & McCrae, 2004). With reference to Five Factor Model of Personality, extraversion is the strongest dimensions of the model that influence consumer behavior. According to Hofstede and McCrae (p.73, 2004), emotional stability score correlated with uncertainty avoidance and masculinity; extraversion showed the highest correlation with individualism and feminism; "openness to experience has the most complex relationship with cultural dimensions" and correlated with power distance, masculinity and uncertainty avoidance. Personality dimensions as extraversion, emotional stability, openness to experience may have influence on retail therapy. In fact, extraverted consumers have significant impulse to consume compulsively and above all are willing to shop in the known stores (Breazeale & Lueg, 2011).

- 6.1. Retail therapy usage depend on personal characteristic extraversion.
- 6.2. Retail therapy usage depend on personal characteristic emotional stability.
- 6.3. Retail therapy usage depend on personal characteristic openness to experience.
- 6.4. Retail therapy usage depend on personal characteristic conscientiousness.

3.2.1. Data analysis and survey

An extensive data collection set will be used as a survey instrument. The data is based on the questions that was conducted in Germany and Ukraine within target group of people who voluntary agreed to participate in the survey.

As a promotion of the survey will be used various social media such as Instagram, Facebook and Vkontakte. In order to motivate participants to take part in a questionnaire, there will be an incentive advertisement of 30 EUR Gutschein for Germany for randomly chosen participants. The largest Ukrainian online store is Rozetka, therefore the Prize Certificate from Rozetka is 500 UAH.

For the survey I will use the current currency.

Big Mac in Germany = 3,85 Euro

For 30 Euro= 7,7 Big Mac

Big Mac in Ukraine = 57 UAH

438,9 UAH (57*7,7)= 15,7 EUR

3.2.2. Motives and social norms in retail therapy usage in Germany and Ukraine

The reasons leading to the experience of "shopping syndrome" are varied: at the hormonal level - the lack of serotonin, which provides a positive emotional background of mood. At psychological level - lack of satisfactory relations with partner, children, experience of dissatisfaction with own person, insufficient professional realization; at the social level (Hartmann, Wagner & Larsen, 2015) - the lifestyle declared by modern society, the conformity of which correlates with the sufficiently high status and social success of the individual, but provokes alienation, loneliness, lack of mutual understanding (Dmitrieva, Korolenko, Levina, 2012).

The childhood of many shopaholics was under strict control of parents and subsequently after grown up they aim to make decisions themselves. This also applies to excessive money spending. Such people are pleased to realize that they can buy anything and no one can prevent them from this activity (Makartischeva, 2007).

The findings indicated that the reasons for shopping addiction also include guilt, feelings of internal failure, dissatisfaction, helplessness, depressed feelings of rage, and inability to cope with conflict situations (Faber, O'Gninn & Krych 1987; Scherhorn, Reisch & Raab 1990).

Thus, acquisitions allow the addicted people to meet the need for happiness for a short period of time. Unnecessary purchases are an inevitable pattern, the basis of the substitution effect and allow shopaholic to find comfort in the illusions. Shopping addiction involves developing a special attractive psychological state not only during the act of purchase itself, but also a pre-purchase state that includes thinking about making a purchase, planning, enjoying the details of the purchase-related and pre-purchase behavior.

Maslow considers that particularly at the moment human behavior depends on which kind of the five types of needs they have as a dominant. Each individual has needs of all five types at the same time. However, the strength of each need at some specific time depends on the individual's personal priorities. For that reason, the hierarchy depending of these priorities of needs is built (Maslow, 1954).

According to Tauber (1972), shopping motives are as follows: "Role playing, Diversion Self-gratification, Learning about new trends, Physical activity, Sensory stimulation, Social experiences outside the home, Communication with others having similar interest, Peer group attraction, Status and authority, Pleasure in bargaining, and Pleasure in bargains".

Generally, oniomania happens more often by women because of attention shortage, loneliness and inner emptiness (Pieters, 2013), necessity of being loved. Similarly, Dörner and Plog (1996) argues that loss of partner make an influence on the oniomania progress. The reasons can differ, for instance, having adrenalin desire body quickly gets used to it and begins to require large amount of it. Such people are engaged in extreme sports. In the store you can also get a dose of adrenalin - making a purchase decision and possible disappointment are micro-stress. Second reason of oniomania development is the illusion of power. The items are not bought for personal consumption as some attributes of power, including the form of the attitude of sellers to the buyer. Purchaser expect a respectful attitude, helpful treatment, praising, brand packages for purchases (Richins, 2013; Ditmar, 2007). Another illusion can serve as a deception of freedom and control over one's life. Shopping removes depression and anxiety from shopaholic, increases self-esteem and self-confidence. Contradictory to the extent that individual can afford to buy anything he wants the consumption is done impulsively with unnecessary purchases (Faber & Christenson, 1996; Beatty & Ferrell 1998; Luo, 2005). The most important point is that a customer gets a sense of freedom from shopping, even if he does not need those items.

The shopaholics are characterized with a following feature: they want to buy a certain product as long as it is in front of their eyes; it is worth diverting their attention, as they immediately forget about it. Moreover, the wondering fact of the situation is that, as a rule, the attention is distracted by the same hopelessness item (Anziferova, 1973).

4. Plan of work

Period	To do	Description of work
01.08.2019-08.09.2019	General research of literature and	Writing a literature review, first
	theories	draft of expose
09.09.2019-01.10.2019	Final version of the expose	To add and all the information
		needed, to correct all mistakes
02.10.2019-20.10.2019	Research design	Designing questionnaire and
		survey as a test version, to make
		a research model
21.10.2019-20.12.2019	Methodology, hypothesis, create	Development of methodology
	a questionnaire for the survey	and hypothesis. Creating a
		questionnaire
02.01.2020-20.12.2020	Data collection and analysis	To run a survey. To analyze the
		replies from survey, illustrate
		figures/tables
1.02.2020-28.02.2020	Completion of work	To write results, implications and
		conclusion

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