

# Impulsive Buying Among Youth : A Dominating Component of Compulsive Buying Behavior

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## Abstract

**Purpose :** Impulsive buying is an outcome of external stimuli, whereas compulsive buying is a response to negative internal feelings, and jointly, they constitute compulsive buying behavior (CBB). The current study was conducted to find the dominant component of compulsive buying among youth.

**Design/Methodology/Approach :** The Richmond Scale applied for data collection was found to discriminate between compulsive buying behavior and normal buying behavior. CBB was found in 169 of 469 youngsters (college students). SPSS 26.0 was used to do automatic regression to determine the best predictor of CBB among kids.

**Findings :** The study discovered that buying undesirable and unplanned items were the best predictor of compulsive shopping behavior. Overall, impulsive behavior predicted compulsive buying behavior more strongly among young people. However, there was no variation in the compulsive buying scores among youth with CBB based on age or gender.

**Implications :** As CBB is largely present among youth and is mainly triggered by impulsive buying tendencies, policymakers should formulate policies to curb the promotion of harmful products at the point of purchase.

**Originality Value :** The current study focused on the compulsive purchasing habits of developing-country youngsters. Its novelty resided in the results, which imply that impulsive purchasing is a significant component of compulsive purchasing behavior.

**Keywords :** compulsive buying behavior, impulsive buying, unplanned buying, consumer psychology, conspicuous consumption, compensatory consumption

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The economic theory of consumption finds price as a primary factor behind consumption, where income and substitution effects play a crucial role in increasing or decreasing consumption. Gradually, we understood that consumers purchase to meet their needs and wants. The consumer also buys to demonstrate achievement, power, and self-worth to society. Howard and Sheth (1969) depicted an input–output model to rationalize human behavior while purchasing, and the Nicosia and Mayer (1976) model suggests a sequence of consumer purchases based on consumer–firm interaction. These models consider buyers rational, who display set behavioral patterns when they receive internal and external stimuli.

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Unfortunately, this pattern is not solely responsible for consumer buying. The dynamic nature of the consumer and external environment has forced us to think beyond the assumption of a consumer being a rational entity. As a result, highlighting noticeable characteristics in product offerings may benefit both merchants and consumers (Singh et al., 2023). Addiction, conspicuous consumption, self-gifting, impulse purchases, and compulsive shopping are all examples of compensatory consumption. Compulsive buying behavior (CBB) is a strong desire to buy a product or service even when unnecessary (Ninan et al., 2000). Purchasing stuff to alleviate concern about not having the same is an obsession. A purchase like this provides a short sense of contentment and gratification. Purchases are impulsive and cannot be deemed valid when evaluating product advantages.

Moreover, CBB begins during adolescence or earlier twenties (Black, 2007; Brougham et al., 2011). India is a country of youth, with 19.1% of the population falling in the age group of 15–24 years (Government of India, 2011). On the other hand, CBB is dangerous, as high CBB is associated with high debt (Achtziger et al., 2015). Most CBB studies have been undertaken in industrialized countries, with little research on CBB among young in India or other developing countries. As a result, it is critical first to understand the incidence of CBB among Indian youth and the impact of demographic characteristics on young pupils suffering from CBB.

Secondly, we are interested in finding the dominating dimension that creates CBB among youth. Many scales find impulsive buying behavior as one of the dimensions of CBB. Repeat purchases, preoccupied with buying, and inability to control purchase desire could be another construct responsible for the CBB. Impulsive and compulsive buying seem similar, but both are a separate issue. External stimuli influence impulsive buying, while compulsive buying is because of deprivation, anxiety, and unhappiness (Verplanken & Sato, 2011). Impulsive buying is common as many people consider it unplanned, but we should not consider impulsive buying as unplanned buying only (Xiao & Nicholson, 2013). Unplanned buying might be accidental, but impulsive buying is a sudden need to acquire (Shoham & Makovec Brenčič, 2003). Impulsive purchasing can result in both positive and negative behavioral outcomes, such as satisfaction, regret, and guilt. Regret is neither helpful for the company nor its customers. It may result in brand switching and poor word of mouth regarding current items (Sánchez-García & Currás-Pérez, 2011). A compulsive buyer is an impulsive shopper who buys in excess regularly or exhibits obsessive buying behavior. Compulsive buying begins with a customer's perceived emptiness, which prompts them to shop; later, the customer begins making impulsive purchases, eventually becoming a habit or compulsion (Sohn & Choi, 2014).

Existing literature finds impulsive buying as a component and precursor of CBB, but no study talks about its strength or impact as a component of CBB. Moreover, within each component of impulsive and compulsive buying, which variable dominates, the CBB is also a significant gap to explore through this research. Studies on CBB are on the spur after 2012, and it is an essential factor in consumer well-being, societal marketing, and mindfulness purchases. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5), widely used by mental health professionals, does not currently include compulsive buying disorder as a distinct diagnostic category. However, a majority of research shows a convergence of CBB toward addiction. Therefore, research on CBB is in demand and valuable for ethical marketing and policy making. Knowing about the specific variable which triggers and creates CBB will help marketers, policymakers, and consumers to minimize CBB, especially among the youth.

Therefore, the current study has been sequenced as (a) a strong review of literature, showing the impact of demography on CBB and finding the difference between impulsive and compulsive buying, (b) finding the prevalence of CBB among youth, (c) later finding the dominating dimension of CBB among the youth suffering from the same, (d) conclusion, (e), and managerial implications.

## **Review of Literature**

The review is in two parts – First, the prevalence of CBB among youth and the impact of demography (age and

gender) on the CBB, and second, showing the difference between impulsive buying and compulsive buying and further displaying impulsive buying as a dimension of the compulsive buying.

### **Prevalence of CBB Among Youth**

CBB affects a large number of people and is harmful to both individuals and society (Gwin et al., 2005). CBB was found to be 7%, 8.9%, 9%, 10%, 15%, and 17% in various studies conducted by authors (Dittmar, 2005; Koran et al., 2006; Kwak et al., 2004; Ridgway et al., 2008; Roberts & Jones, 2001; Yurchisin & Johnson, 2004). As a result, CBB may have a lesser impact on our culture. The CBB has negative long-term repercussions because compulsive purchasers face economic and psychological issues such as excessive credit card debt, low savings, sadness, anxiety, frustration, low self-esteem, and interpersonal conflict (Otero-López & Pol, 2013).

Youth could be compassionate buyers (Mishra & Kar, 2023), which may make them compulsive buyers (CB) in their late teens and early twenties (Mitchell et al., 2006), which is more prevalent in the young population. In Brazil, most people affected by CBB belong to the 14 to 25-year age group strata (Modesto Veludo-de-Oliveira et al., 2014). In a CBB estimated prevalence study conducted by Maraz et al. (2016), the prevalence rate of CB was 4.9% in the adult population. In the same study, the prevalence rate of CB was 8.3% from the sample collected from university students. Further analysis states that age does not have any effect on CBB. In only one study, older students had more CBB than younger undergraduates. However, in research conducted by Koran et al. (2006), CB had a significantly lower mean age ( $M = 39.7$  years,  $SD = 15.7$ ) than other respondents. Also, progressive age retards the probability of impulse buying. Table 1 illustrates the frequency of CBB among young with an average age of less than 25 years/age interval (18–30) in various nations. Cases of CBB among kids range from 6% to 57.6%, according to this study. Our first hypothesis can be:

✎ **H01** : Age will have no significant effect on the strength of CBB among youth.

✎ **Ha1** : Age significantly affects the strength of CBB among youth.

Mueller et al. (2007) studied the gender influencing compulsive buying behaviors. Clinical surveys suggest that CBs are predominantly women (Achtziger et al., 2015; Black, 2007; Dittmar, 2005; Kilbourne &

**Table 1. The Prevalence of CBB Among Youth**

<b>Country</b>	<b>Sample Mean Age Considered (Less than 25) or Interval (18–30)</b>	<b>% of CBB Case</b>	<b>Study</b>
Taiwan	20.8	29.8	Wang & Yang (2008)
USA	22.6	20	Harnish & Bridges (2015)
	20	14.7	Yurchisin & Johnson (2004)
China	21.7	6.7	Li et al. (2014)
Turkey & Greece	23.2	10.3	Unger et al. (2014)
France	20.2	16	Duroy et al. (2014)
Canada	19.7	21.8	MacLaren & Best (2010)
Korea	(52% were) 20–30	57.6	Jung & Yi (2014)
Australia	17–29	36.8	Phau & Woo (2008)
Range of CBB in percentage		50.9	

**Table 2. The Prevalence of CBB Between Male and Female**

Country	CBB Male %	CBB Female %	Key Findings	Limitations in Sampling	Study
USA	5.5 (44 of 800)	6.0 (90 of 1501)	Women are more CB than men, but this difference is minimal.	Over sample size of women	Koran et al. (2006)
	NA	20	Irrational behavior predicts compulsive buying of women.	The sample was drawn from women only	Harnish & Bridges (2015)
	3	27	Women classified as CB were more likely to be single.	Over sample size of women	Harnish & Bridges (2016)
Romania (Europe)	4	6	Women are high on CBD in online purchases.	Over sample size of women	Bighiu et al. (2015)

LaForge, 2010; Neuner et al., 2005). Females are much more likely to become CB than men, but not all surveys have found significant differences in buying tendencies between males and females (Koran et al., 2006). Previous studies have yielded interesting results on gender-based factors related to CB. Dittmar et al. (2004) reported emotion- and identity-related shopping dimensions as more important for women than men. Dittmar (2005) found that women scored higher than men as CB. The female-to-male ratio of less severe cases of CBB is more in favor of females along with the very severe cases of CBB (Maccarrone-Eaglen & Schofield, 2017). An early attempt to study the relationship between gender and impulse purchases in India failed to establish any significant relationship (Jain et al., 2018), while another study in India proposed no significant relationship between income and impulse buying (Sen & Nayak, 2019).

Therefore, our second and third hypotheses can be :

- ↪ **H02** : Gender will have no significant effect on the strength of CBB among youth.
- ↪ **Ha2** : Gender significantly affects the strength of CBB among youth.
- ↪ **H03** : Age and gender interaction will not affect the strength of CBB among youth.
- ↪ **Ha3** : Age and gender interaction will affect the strength of CBB among youth.

### ***Impulsive and Compulsive Buying***

Obsessive-compulsive spectrum disorder theory considers obsessive compulsion and impulse control disorder as the elements of compulsive buying (Hollander & Allen, 2006). Impulse control disorder (Shoham & Makovec Brenčič, 2003) can fall under rational purchase behavior, as it reacts to external stimuli. Impulse purchases can result from a transient emotional state (Koles et al., 2018). Consumer spending self-control could be a factor among youth responsible for impulse purchases (Jain et al., 2018); whereas, CBB considers an inner urge to buy along with dependency on shopping (Achtziger et al., 2015) and repetitive purchases (Ridgway et al., 2008) that may end up in buying unwanted or unnecessary products (Dodd et al., 2005; Williams & Grisham, 2012). Impulsive buying may be an initial phase of CBB (Hollander & Allen, 2006), and when it gets more substantial, it converts into CBB. An impulse purchase is attached indirectly to CBB, identified as a lack of control over spending (Baumeister, 2002). However, CBB comprises both obsessive and impulsive qualities demonstrated

while purchasing unnecessary things (Ninan et al., 2000), although which dimension is the dominant component of CBB is debatable. One recent study conducted in the Hyderabad region during the COVID-19 pandemic discovered that perceived risk, which was previously thought to limit consumer impulse buying, paradoxically appeared to facilitate consumer impulse buying during the infamous global pandemic (Sen, 2022).

In research conducted by Shoham and Makovec Brenčič (2003), CBB was considered an impulsive buying problem. Kwak et al. (2004) found CBB as a compulsive problem. People affected intensely by CBB are highly dependent on buying components compulsively. At the same time, the less afflicted have a higher degree of impulsiveness (Rodriguez-Villarino et al., 2006).

Compulsive buying can be chronic and repetitive buying behavior against negative feelings to get rid of the

**Table 3. *Impulsive and Compulsive Buying on Various Dimensions***

Parameter Definition	Impulsive Buying*	Compulsive Buying**	Study
	Impulsive buying is unplanned; it is influenced by the external environment (point of purchase); the consumer makes purchase decisions on the spot, and it is derived from emotions.	Response against negative feelings through repetitive and uncontrolled buying. Inappropriate and excessive consumption is disturbing for the individual showing impulsive consumption.	Ridgway et al. (2008)**
<b>Motivation</b>	Social needs, hedonic needs or fun, and identity affirmation.	Psychological needs and emotional needs.	Hausman (2000)* Sen (2023)* Holbrook & Hirschman (1982)*
<b>Influencing Factors</b>	An inclination for quick decisions, enjoyment, thrill, instability, easy influence, low self-control, and materialism. Situational factor- Positive emotional state and social influence, store environment, promotions, information overload.	Unhappiness increases CBB. Materialism, where possessing something is a sign of self-extension. Other factors influencing CBB are anxiousness, perfectionism, low self-esteem, imagination, impulsivity, search for solid sensations, indecision, and dependence on others.	Badgaiyan & Verma (2014); Verplanken & Sato (2011); Amos et al. (2014); Podoshen & Andrzejewski (2012); Flight et al. (2012); Chen & Wang (2016); Hausman (2000); Vohs & Faber (2007)*
<b>Component</b>	Only impulse control disorder.	Impulse control disorder & Obsessive control disorder.	Ridgway et al. (2008)**
<b>Consequences</b>	Guilt, hidden ownership, confession, but later cognitive process results in rationalization. Lower financial risk, lower debt. At times, positive experiences may be a source of gratification.	When action is not conceptualized, there are severe, negative, and detrimental emotional, societal, and financial consequences.	Black et al. (2012)** Bashar et al. (2012); David Clarke & Mortimer (2013); Flight et al. (2012)*

**Note.** Citations with \* and \*\* are for impulsive buying and compulsive buying, respectively.



same (Weinstein et al., 2015). Compulsive buying means a high emotional state (Bashar et al., 2012). A sudden process pushes a customer to go for repeat and instant purchases without thinking (Sharma et al., 2010). Impulsive purchases can happen temporarily due to low effort (Holbrook & Hirschman, 1982). Customers' post-purchase cognitive thinking aids in developing strategies against such impulsive buying (Amos et al., 2014). It was found that 67% of CBs were suffering from OCD (obsessive-compulsive disorder), and 96% were suffering from impulse-control disorder (ICD) (Christenson et al., 1994). While defining and measuring compulsive buying behavior, there is an overlap between OCD and ICD. Table 3 represents impulsive buying and compulsive buying in various dimensions.

The preceding reviews provide us with one additional hypothesis:

✎ **H04 :** There is no significant difference in the impact of impulsive buying and obsessive-compulsive buying dimension of youth with CBB.

✎ **Ha4 :** There is a significant difference in the impact of impulsive buying and obsessive-compulsive buying dimension of youth with CBB.

## Methodology

### *Choice of Scale and Questionnaire Used*

None of the existing CBB assessments assess both impulse control (lack of impulse control) and CBB (repetitive buying and concern with buying) (Ridgway et al., 2008). CBB measures concentrating primarily on impulsive buying behavior were developed by Valence et al. (1988) and Christenson et al. (1994). Only Monahan et al. (1996) developed a CBB scale based on obsessive-compulsive disorder that did not include impulsive buying behavior. To accomplish our research objectives, we require a scale that measures ICD and OCD as dimensions. Many scales have included CBB repercussions as a measurement component, which may be appropriate for analyzing post-purchase detrimental behavior of the customer with CBB but should not be utilized for CBB detection (Ridgway et al., 2008).

The Richmond Scale, developed by Ridgway et al. (2008), measures CBB by including both obsessive-compulsive and impulse control dimensions while excluding consequence effect and income-related items. In our research, we want to find the contribution of impulse and compulsive buying in CBB. Therefore, the Richmond Scale to identify CBB among Indian youth may be useful to us. Lam et al. (2018) revised six Richmond Scale statements to make them more error-free and understandable. The questionnaire uses six items on a 7-point scale: three associated with impulsive behavior and three related to compulsive buying (Lam et al., 2018; Ridgway et al., 2008). The questionnaire also collected data on demographic aspects such as gender, age (interval), and area (hometown).

### *Sampling Technique, Data Collection, and CBB Screening*

Data were collected using purposive or judgmental sampling techniques. We purposefully classified age in two intervals: 18–21 and 22–25 years. The undergraduate and post-graduate college or university-going students of Northern and Central India were requested to complete the questionnaire using Google and physical form from January 1, 2022, to March 30, 2022. Out of 508 responses, 469 were complete, and 39 had missing values and were not considered fit for the research work.

A cumulative score of 25 and above on the Richmond Scale indicates CBB. A total of 169 youths displayed CBB, and 300 had normal behavior. Observed data (in percentage) shows that 36% of youth suffered from CBB.

**Table 4. The Prevalence of CBB Across Age and Gender**

Buying Behaviour	Age		Gender	
	18–21	22–25	Male	Female
(Frequency, Percentage)	(341, 72.7%)	(128, 27.3%)	(227, 48.4%)	(242, 51.6%)
<b>CBB (169, 36%)</b>	121 26% of the total valid sample size (469) have CBB. 35% of 18–21 age (341) have CBB. 72% of total CBB cases (169).	48 10% of the total valid sample size (469) have CBB. 37.5% of 22–25 age (128) have CBB. 28% of total CBB cases (169).	73 16% of the total valid sample size (469) have CBB. 32% of males (227) have CBB. 43% of total CBB cases (169).	96 20% of the total valid sample size (469) have CBB. 40% of females (242) have CBB. 57% of total CBB cases (169).
<b>Normal (300, 64%)</b>	220 47% of the total valid sample size (469) have normal behavior. 65% of 18–25 age (341) have normal behavior. 73% of total normal cases (300).	80 17% of the total valid sample size (469) have normal behavior. 62.5% of 22–25 age (128) have normal behavior. 27% of total normal cases (300)	154 33% of the total valid sample size (469) have normal behavior. 68% of males (227) have normal behavior. 51% of total normal cases (300).	146 31% of the total valid sample size (469) have normal behavior. 60% of females (242) have normal behavior. 49% of total normal cases (300).

**Table 5. Descriptive Value of the Variables Defining CBB**

Items	All cases (N = 469)			
	Mean	Std. Deviation	Skewness	Kurtosis
I have unopened stuff in my closet.	3.79	2.028	.073	–1.226
Other people may think that I am a shopaholic.	4.20	1.894	–.185	–.983
Shopping is almost my whole life.	3.58	1.893	.212	–1.065
I think I am an impulsive consumer.	3.84	1.638	.002	–.637
I buy unwanted stuff.	3.20	1.905	.480	–.909
I buy things without planning.	3.80	2.104	.144	–1.328

Most of them were females. Across age, collected data were slightly biased toward the 18–21 years age group. However, in each age class, the percentage difference of CBB is not very high. Table 4 represents the demographic classification of CBB and normal behavior cases.

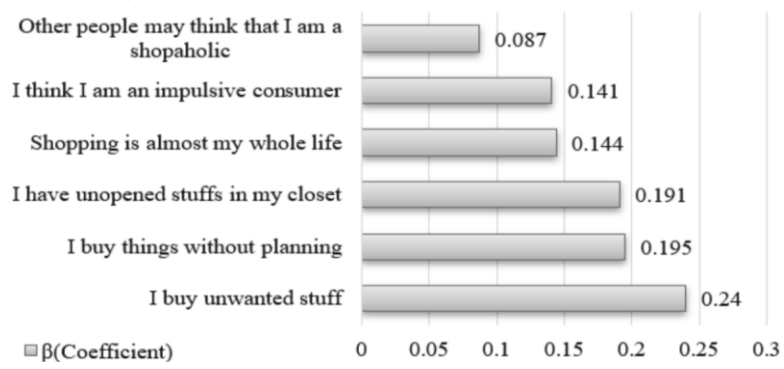
Table 5 also includes the data's mean, standard deviation, skewness, and kurtosis ( $N = 469$ ). All variables are within the acceptable skewness (–1 to +1) and kurtosis (–3 to +3) ranges.

## Analysis and Results

The internal consistency of the questionnaire was tested by using Cronbach's alpha. The coefficient of  $\alpha$  of the data collected on the Richmond Scale, including impulsive and compulsive constructs, has come out to be 0.791, which is acceptable. Analysis of variance is applied to test the construct validity of the scale. Levene's statistic accepts the null hypothesis of equality of variance ( $p$ -value 0.162). The difference between the average of the two youth

**Table 6. ANOVA to Find the Scale-Discriminating Ability**

The mean of CB	31
The mean of normal buyers	17.61
F - statistics	795.83
p-value	0.00

**Figure 1.  $\beta$ (Coefficient) of Predictive Variables Explaining CBB****Table 7. Cross-Tabulation of Youth with CBB Across Age and Gender and Two-Way ANOVA**

Dependent Variable : Calculated CBB Value					Levene's Test of Equality of Error Variance		
Age	Gender	Mean	Std. Deviation	N		Levene's Statistic	Sig.
18-21	Female	31.16	4.227	67	Based on mean	2.568	.056
	Male	30.19	4.066	54	Based on median	1.265	.288
	Total	30.73	4.167	121	F-test for Heteroskedasticity		
22-25	Female	31.79	5.564	29	F-statistics	Sig.	
	Male	31.00	4.738	19	3.644	0.058	
	Total	31.48	5.215	48	Test of between-subject effects	F	Sig.
Total	Female	31.35	4.650	96	Age	0.858	0.356
	Male	30.40	4.232	73	Gender	1.292	0.257
	Total	30.94	4.486	169	Age*Gender	0.014	0.905

groups with CBB and expected behavior is significant. Therefore, the CBB scale used for this research shows discriminating ability (see Table 6). The difference between the mean value of impulsive and compulsive buying on the Z-test for the youth with CBB is significant ( $p$ -value 0.010). We can conclude that young people suffering from CBB largely distinguish between impulsive and compulsive buying. As a result, the null hypothesis, H04, is rejected, but its alternative hypothesis, Ha4, is accepted.

An automatic linear regression model using SPSS 26.0 is used to find the predictive impact of impulsive and compulsive buying in explaining compulsive buying behavior. The cumulative effect of impulsive buying is more ( $\beta = 0.55, p = .00$ ) than the cumulative effect of compulsive buying ( $\beta = 0.45, p = .00$ ) in explaining variance in compulsive buying behavior. Further, impulsive buying behavior variables explain CBB more. Buying unwanted stuff and buying things without planning is mainly causing CBB among youth. Other people think I am a shopaholic, which explains the minute variance in CBB among youth. All characteristics of impulsive and compulsive buying addressed in this study have a substantial link with CBB (see Figure 1 for coefficient).



Levene's test accepts the null hypothesis of equality of variance between tested groups (age and gender). Therefore, data are suitable for the two-way ANOVA. A two-way analysis of variance suggests no significant relationship between the two age groups across the gender and the interaction between age and gender (see Table 7). Therefore, null hypotheses H01, H02, and H03 are accepted.

## Discussion

Cases of compulsive buying (36%) among youth in India are more than most of the earlier studies done in different parts of the world across different age groups. However, in the current study, CBB cases are less than the range of other studies conducted on the youth (average age less than 25 years) worldwide (refer to Table 1). It suggests high variations in the CBB cases among the youth population in the world. Descriptive statistics indicate more CBB cases in females (57%) than males (43%). However, the mean difference in the strength of CBB across genders is insignificant. Similarly, the percentage of CBB cases is higher among the (18–21) years of age group than the (22–25) years of age group, but the mean difference in the strength of CBB is not significant across ages. Hence, we can determine that age and gender may influence the number of cases falling under CBB, but the strength of CBB does not vary across the same.

The Richmond Scale used in the study can discriminate effectively between CBB (CBB = 169, 36%) and normal behavior cases (normal cases = 300, 54%). The impulsive buying component explains more variance in the CBB than the compulsive buying component. High scores of youths on the Richmond Scale (25 and above) change significantly and positively for all the predictive variables considered in the selected scale.

The changes in CBB scores of 24%, 19.5%, and 14.1% are related to one unit shift in buying undesired goods, buying without forethought, and impulsive buying, respectively. All of these factors contribute to impulsive purchasing behavior. On the other hand, 19.1%, 14.9%, and 8.7% of the change in the CBB score are due to one unit change in the response given by the customers with CBB against the statements like – “I have unopened stuff in my closet,” “Shopping is my whole life,” and “Other people may think that I am a shopaholic person,” respectively. All these variables are part of compulsive buying. Therefore, impulsive buying behaviour has a high weightage in explaining CBB over compulsive buying.

## Conclusion

The world has observed many developments in the consumption patterns of human beings. Knowledge regarding consumption behavior is of high use for marketers and consumers. Marketers are trying to persuade customers to buy their products or services. In this process, they create many promotional campaigns that directly or indirectly entice customers. The impact of these promotional campaigns may be different for different customers. These external stimuli may create an impulse buying situation. When this process is combined with clients who are anxious, unhappy, or obsessed, they are likely to repeat their impulse buying behavior and become compulsive buyers. A thorough literature evaluation shows that impulsive and compulsive buying are distinct notions. However, such activities, when combined, result in obsessive purchasing behavior. The current study reveals that impulse buying dominates the youth's CBB development. However, both components under investigation considerably explain CBB.

## Managerial Implications

The prevalence of CBB among Indian youth is higher than in many other nations. The Richmond Scale can discriminate between CBB and normal behavior. There is no difference in the strength of CBB across age and

gender. Therefore, once youths develop CBB traits, they will display similar compulsive buying patterns across age and gender. However, descriptive statistics reveal that girls are more likely than males to develop CBB. The findings are consistent with previous gender-based CBB research (see Table 2). CBB also begins in adolescence and is highest in the late teens and twenties (Mitchell et al., 2006), consistent with our descriptive statistics findings.

Youth with CBBs in India are more impulsive buyers than CBs. Hence, we can infer that impulsive buying is prevalent among youth. These results are consistent with the study done by Liao et al. (2009). Unplanned purchases can be (not always, based on Stern's 1962 classification) a part of impulsive buying. Ridgway included unplanned purchases as one of the variables determining impulsive buying, which also acts as one of the constructs to measure CBB. Unplanned purchase is creating significant variances in the CBB in our sample. As a result, unexpected purchasing can be a dominant component in predicting CBB through impulsive purchasing. Purchases made on the spur of the moment are less likely to be planned. It contradicts one of the findings of the Stern classification, which confirms un-planned impulsive buyers as one of the buyer categories. When unplanned buying merges with buying unwanted stuff (variable of impulsive buying), it creates more variations in CBB. We can say that point-of-purchase is an external stimulus to entice young buyers. Packaged food, alcoholic beverages, cigarettes, tobacco, and many more companies promote their products at point-of-purchase. Policymakers should understand that youth may purchase unplanned and unwanted, harmful, addictive, and unhealthy products. This behavior, when repeated, could become compulsive and spoil our youth.

## **Limitations of the Study and Scope for Future Research**

The responses were restricted to Northern India only. The study should include more data from other parts of India. The Ridgway (Richmond) Scale is the only one that describes CBB based on impulsive and compulsive buying. As a result, there is no way to test the scale's comparative effectiveness. The sample collected is slightly skewed toward the 18–21 age range. There should be more responses from people aged 22–25. This study did not include any product/service selection questions. As a result, this study does not link CBB and normal behavior to products/services. Following this research, a comparative examination of normal behavior and CBB across impulsive and compulsive buying should be conducted. For consumers with normal purchasing behavior, the distinction between the impulsive and compulsive criteria can be investigated further. The current study could use new demographic characteristics such as income, profession, family size, and social class. The comparative efficiency of several CBB scales can be examined and compared.

## **Authors' Contribution**

Dr. Rohit Singh Tomar skilfully conceptualized the idea, drawing from well-grounded theory and developing a comprehensive research design. Collaborating with Dr. Vivek Singh Tomar, they meticulously planned the research methodology and conducted the necessary analytical calculations. Dr. Deepika Tomar diligently identified and extracted pertinent studies on the topic, incorporating key elements into the literature review section. This process greatly facilitated the development of a robust questionnaire design and precise scale measurements. Dr. Rohit Singh Tomar and Dr. Vivek Singh Tomar implemented the research, ensuring the accuracy and validity of the numerical results obtained. Dr. Deepika Tomar transcribed the research's conclusions, implications, and scope, synthesizing the key findings. All authors contributed valuable feedback throughout the research process, which was instrumental in refining the manuscript's theory, methodology, analysis, and overall content.

## Conflict of Interest

The authors certify that they have no affiliations with or involvement in any organization or entity with any financial or non-financial interest in the subject matter or materials discussed in this manuscript.

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