Full length article

Therapeutic benefits of dining out, traveling, and drinking: Coping strategies for lonely consumers to improve their mood

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1. Introduction

Social interaction is one of the most fundamental and innate motivations driving human needs (Baumeister and Leary, 1995). In modern societies, however, many people have reported that they are increasingly socially isolated and lonely (Wang et al., 2012). Loneliness is a painful, subjective feeling of social isolation that is growing more prevalent (Wenger and Burholt, 2004). Under these circumstances, consumer researchers have begun to recognize the growing population of consumers who are lonely and their particular consumption needs (Wang et al., 2012; Mead et al., 2010). Since loneliness threatens an individual’s psychological well-being and quality of life, consumers attempt to cope with their negative moods via compensatory consumption (Yurchisin et al., 2006; DeWall and Baumeister, 2006; Holbrook and Gardner, 2000). Compensatory consumption, or retail therapy, describes “when an individual feels a need, lack, or desire which they cannot satisfy with a primary fulfillment so they use purchasing behavior as an alternative means of fulfillment” (Woodruff-Burton, 1998, p. 301). When individuals are experiencing feelings of loneliness, consumers strategically engage in consumption in order to repair or alleviate psychological deficiencies such as loneliness (Baumeister et al., 2005; Yurchisin et al., 2006; Atalay and Meloy, 2011). Previous studies have suggested that experience based consumption (e.g. meals at restaurants or vacations) can lead to greater subjective well-being and happiness than material purchases (e.g. clothes, jewelry, and gadgets) (Carter and Gilovich, 2010; Van Boven and Gilovich, 2003). Even though research on compensatory consumption has gained attention in the retailing literature, little research has addressed the benefits of dining out, traveling, and drinking alcohol for an individual’s mood (Chen and Petrick, 2013). Accordingly, the therapeutic benefits of hospitality and tourism services deserve attention.

Thus, this study examined how loneliness triggers people to engage with hospitality and tourism services as a way to alleviate bad moods. More specifically, we focused on the underlying psychological benefits associated with hospitality and tourism services. Given that escaping stressful environments is one of the most important motivations for engaging in tourism experiences (Mannell and Iso-Ahola, 1987), the benefits of taking a vacation, such as helping recover from negative feelings of loneliness, have been identified. Consumers’ negative affective states influence travel motivations and intentions (Jang et al., 2009). For example, travel experiences can provide various benefits, including relieving stress (Chen et al., 2016) and enhancing perceived health (Strauss-Blasche et al., 2002), family and other relationships
Loneliness refers to the subjective unpleasant feeling that occurs when an individual’s social relationships are deficient in either quality or quantity (Peplau and Perlman, 1982; Wang et al., 2013). With the dramatic changes that have occurred in the structure of household arrangements, people in modern societies often suffer from loneliness. This unpleasant feeling can affect one’s quality of life, cause depression, or even lead to physical illnesses (Hawkley and Cacioppo, 2007; Sorkin et al., 2002). When the basic need for social interaction is not met, people reinforce their efforts to seek substitutes or a way to compensate (Ryan and Deci, 2000). To alter such feelings of loneliness, people may embrace coping behaviors (Perlman and Peplau, 1982; Pieters, 2013). Coping refers to any action or behavior that enables an individual to handle difficult situations, solve problems, or reduce negative moods (Lazarus and Folkman, 1984). Gronmo (1988) observed that when people are faced with adverse states (e.g., loneliness) they are motivated to cope by engaging in compensatory behaviors (e.g., shopping and eating). Hence, negative moods can trigger people to actively employ a variety of coping strategies (Billings and Moos, 1981). Different coping strategies can be used to reduce or repair adverse moods (Lazarus and Folkman, 1984). Lazarus and Folkman (1984) among others, categorized ‘dining out,’ ‘traveling,’ and ‘drinking alcohol’ as known emotion-focused strategies. Emotion-focused strategies are actions or behaviors directed at regulating one’s emotions, such as avoiding a situation or engaging in activities to get one’s mind off a problem. That is, bad moods (loneliness) are compensated for by engaging in potentially uplifting activities or distracting oneself from negative events. Hospitality and tourism services such as dining out or traveling are representative mood-regulatory devices. Based on this notion, this study proposed that lonely consumers (compared to non-lonely consumers) are more actively engaged in compensatory consumption, such as dining out, traveling, or drinking alcohol.

2. Literature review

2.1. Loneliness and compensatory consumption

Loneliness refers to the subjective unpleasant feeling that occurs when an individual’s social relationships are deficient in either quality or quantity (Peplau and Perlman, 1982; Wang et al., 2013). With the dramatic changes that have occurred in the structure of household arrangements, people in modern societies often suffer from loneliness. This unpleasant feeling can affect one’s quality of life, cause depression, or even lead to physical illnesses (Hawkley and Cacioppo, 2007; Sorkin et al., 2002). When the basic need for social interaction is not met, people reinforce their efforts to seek substitutes or a way to compensate (Ryan and Deci, 2000). To alter such feelings of loneliness, people may embrace coping behaviors (Perlman and Peplau, 1982; Pieters, 2013). Coping refers to any action or behavior that enables an individual to handle difficult situations, solve problems, or reduce negative moods (Lazarus and Folkman, 1984). Gronmo (1988) observed that when people are faced with adverse states (e.g., loneliness) they are motivated to cope by engaging in compensatory behaviors (e.g., shopping and eating). Hence, negative moods can trigger people to actively employ a variety of coping strategies (Billings and Moos, 1981). Different coping strategies can be used to reduce or repair adverse moods (Lazarus and Folkman, 1984). Lazarus and Folkman (1984) among others, categorized ‘dining out,’ ‘traveling,’ and ‘drinking alcohol’ as known emotion-focused strategies. Emotion-focused strategies are actions or behaviors directed at regulating one’s emotions, such as avoiding a situation or engaging in activities to get one’s mind off a problem. That is, bad moods (loneliness) are compensated for by engaging in potentially uplifting activities or distracting oneself from negative events. Hospitality and tourism services such as dining out or traveling are representative mood-regulatory devices. Based on this notion, this study proposed that lonely consumers (compared to non-lonely consumers) are more actively engaged in compensatory consumption, such as dining out, traveling, or drinking alcohol.

2.2. Age-related differences in compensatory consumption

Loneliness is a subjective experience and is not always correlated with the quantity of social relationships a person has. People can feel lonely in a crowd and be alone without feeling lonely. Further, feelings of loneliness can emerge across adult life. Although older adults represent a growing segment of socially isolated individuals, loneliness is also rising in young adults (Hawkley and Cacioppo, 2007). Hawkley and Cacioppo (2007) provided evidence of age-related differences in associations between loneliness and coping behaviors.

As people age, they face more constraints on their daily activities, defined as “the perceived or experienced reasons which prohibit an individual from leisure activity engagement” (Hawkins et al., 1999). For instance, declining health, reduced income, or loss of a partner can cause people to stop participating in a variety of leisure activities including walking, dining out, traveling, and visiting family and friends (Iso-Ahola et al., 1994). Evidence supports that aging-related constraints have an impact on consumer behaviors, such as traveling (Kazemini et al., 2013) and the likelihood of eating out (Jang et al., 2007). Further, researchers have used socioemotional selectivity theory to better understand and explain leisure activities and aging (Carstensen, 1992). According to this theory, as people age they tend to reduce their social activities and focus on a few select activities to compensate for their reduced resources (Genoe and Singleton, 2006). Ultimately, these constraints decrease seniors’ activity levels compared with their younger counterparts.

Even though seniors’ engagement in activities often declines, continuity theory supports a relationship between aging and leisure activity in difficulty times. Since activities can provide opportunities for generating positive feelings, particularly during stressful or difficult
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