

Exploring the effects of a materialistic lifestyle on mental health

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ABSTRACT

Objective: Materialism focuses on goals and values that subscribe to acquiring items. Lower materialism was found to be associated with increased happiness and decreased depressive symptoms. This study aims to explore the effects of materialistic lifestyle on mental health.

Method: The research question driving this study asks, how does living a materialistic lifestyle impact an individual's mental health? The study is made up of 555 females and 31 males. Participants completed a demographic questionnaire, the Material Values Scale (created by Richins and Dawson in 1992), and the Medical Outcomes Study (MOS) 20-Item Short-Form Health Survey (SF-20; created by Stewart and colleagues in 1988).

Results: A hierarchical multiple regression was found that materialistic values are a statistically significant predictor of mental health.

Conclusion: Limitations of the study, implications for clinical practice, and future directions are discussed. We conclude that our hypothesis was supported; living a materialistic lifestyle negatively impacts an individual's mental health.

Keywords: Marriage and Family Therapy, Materialism, Mental Health, Overconsumption, Clinical Practice

1. Introduction

Defining materialism as a value is consistent with the notion that materialism reflects the importance a person places on possessions and their acquisition as a necessary or desirable form of conduct to reach desired end states, including happiness" (Richins & Dawson, 1990). For years now, materialism has been a topic of attention to consumer researchers (Baker et al., 2013). Lower materialism was found to be associated with increased happiness and decreased depressive symptoms (Muñiz-Velázquez et al., 2017). There are various physical and

mental health consequences linked to living a materialistic lifestyle.

Various problems and negative effects regarding materialism have been discussed in the literature, such as causes and costs of materialism, the behaviors and personality traits of materialists, and moral considerations (Richins & Dawson, 1992). Materialism has been associated with low levels of gratitude, empathy, as well as additional occurrences of conflict in relationships (Belk, 1985; McCullough et al., 2002; Puente-Diaz & Cavazos Arroyo, 2014). Materialism is considered to be a psychological state that is fostered in one's early years (Baker et al., 2013;

Moschis, 2017; Richins & Chaplin, 2015; Rindfleisch et al., 1997). Mental health costs stemming from compulsive consumption aligns with humanistic psychologists such as Fromm (1976), Maslow (1956), and Rogers (1961) whose work state that chasing ambitions based on extrinsic rewards, the conditional approval of other people, and “having” rather than of “being” divert individuals from the meaningful facets of life as well as potential lead to psychological pain (Nickerson et al., 2003). In further showcasing significance to this topic, various research studies showed negative effects on mental health derived from materialism and overconsumption, some extremely harmful.

The significance placed on material items are expected to lead to different cognitive, affective, and behavioral outcomes (Kasser, 2016; Puente-Díaz & Cavazos-Arroyo, 2019). Actually, some neurological studies have been done to examine the relationship between acquisitiveness cognitive processes and personality to begin exploring the reasons why some of us over consume and find it challenging to discard items (Wang et al., 2012). Wang et al. (2017) studied the relationship between materialism and mental health to understand the impacts of dispositional mindfulness and if it would moderate the effects of these relationships. A sample of 533 college students completed the Material Values Scale, Mindful Attention Awareness Scale, Symptom Checklist 90, and Social Desirability Scale. Results of this study showcased that mindfulness exercised a significant moderating effect. In fact, greater materialism predicted poorer mental health outcomes in individuals with low and medium levels of mindfulness. Unfortunately, the impact of materialism on mental health was not significant in individuals with high mindfulness levels. Therefore, mindfulness may be very helpful in safeguarding harmful effects of materialism (Wang et al., 2017). Martin et al. (2019) argued that research has shown how values of materialism change with age during adulthood. The researchers hypothesized that changes as individuals age are entrenched in changes in self-uncertainty; various measures of self-uncertainty were used to provide substantiation for this claim. Results of this study displayed that changes in materialism cannot be rationalized by age-related differences in socio-demographic variables. Additionally, changes in self-uncertainty offer a better explanation for changes in materialism than age-related alterations in self-esteem (Martin et al., 2019).

Improved psychological well-being was found to be a positive outcome of the consumption of experiences versus

the consumption of materialistic goods (Muñiz-Velázquez et al., 2017). Materialism has been propositioned to be a predictor of subjective well-being (Puente-Díaz & Cavazos-Arroyo, 2019). However, just because a person believes something will contribute positively to their health does not actually mean it will occur. Polak and McCullough (2006) insinuated that gratitude could potentially be a substitute to materialism since it is supposed to have the opposite effect on subjective well-being (Polak & McCullough, 2006; Puente-Díaz & Cavazos-Arroyo, 2019). It would be difficult to speak to the relevance and vitality of the mental health consequences of materialism without discussing hoarding, happiness, anxiety, depression, insecurity, traumatic stress, and social isolation.

1.1. Hoarding

“Hoarding can be defined as having three components 1) the acquiring of and failure to discard a large number of possessions that appear to be useless or of limited value, 2) living spaces sufficiently cluttered so that the clutter precludes activities for which those spaces were designed, and 3) significant impairment in functioning or distress caused by the hoarding” (Steketee & Frost, 2006). Studies have shown that lower rates of marriage and higher rates of divorce exist between hoarding couples, thus, exposing potential issues within these relationships (Steketee & Frost, 2003; Tolin et al., 2008). Furthermore, individuals who compulsively hoard hold more emotional attachments to their belongings when compared to people who do not hoard (Steketee & Frost, 2007). In fact, these individuals appear to have extremely sentimental attachments to items that are deemed meaningless (Steketee & Frost, 2006). Therefore, the literature shows that hoarding is considered problematic to emotional attachment as well as romantic relationships.

1.2. Happiness

Richins and Dawson (1992) extensively documented that the definition and measurement of materialism is the link concerning the attainment of material goods and the person’s end objective of being happy (Richins & Dawson, 1992). In actuality, materialistic individuals tend to be less happy as well as less satisfied with their lives versus individuals who are less materialistic individuals (Dittmar et al., 2014; Martin et al., 2019). Individuals who report higher engagement in materialism are not as happy as individuals who report lower engagement in materialism (Tsang et al., 2014). Researchers have argued that materialism and the quest for items is not

the cause but the outcome of dissatisfaction; further, that the desire to possess derives from insecurities or profound dissatisfaction with one's self and one's life (Richins & Dawson, 1992). Wang et al. (2019) found that consumption had strong negative effects on happiness (Wang et al., 2019). Makant (2010) found that happiness cannot stem from material items as it is something that cannot be bought or sold (Makant, 2010). Millburn and Nicodemus (2014) developed what they called, 'The Consumption Continuum,' which means when people give too much meaning to the stuff they purchase, they will then think it will bring them happiness. Millburn and Nicodemus (2015) further explain how this method sets people up for failure (Millburn & Nicodemus, 2014, 2015).

1.3. Anxiety and Depression

A meta-analysis was conducted to explore the relationship between materialism and signs of mental health such as individual affect, anxiety, and depression (Dittmar et al., 2014; Wang et al., 2017). This relationship could be damaged by specific demographics (age and sex) and social (economic growth and inequality) factors (Dittmar et al., 2014; Wang et al., 2017). Research indicates that compulsive buyers experience significant anxiety, a lack of pleasure or enjoyment in their lives, and utilize substances to cope with anxiety, as well as other forms of addiction (Harnish et al., 2019). Additionally, a study found that lower self-efficacy and higher social anxiety may contribute to materialistic individuals being more vulnerable to smartphone addiction (Lee et al., 2018).

Moschis (2017) studied materialism and compulsive consumption from a social and behavioral sciences perspective by acknowledging maladaptive patterns that cause such behaviors (Moschis, 2017). Compulsive buyers experience increased social anxiety, alienation, and lowered self-esteem versus non-compulsive buyers. Additionally, compulsive buyers may compulsively shop with the goal of enhancing their social relationships (Harnish et al., 2019; Valence et al., 1988). Materialism was found to be linked to self-reported happiness and depression (Muñiz-Velázquez et al., 2017). An article's results showed that individuals who place greater value on wealth, status, and material possessions have an increased likelihood of becoming depressed or antisocial (Bauer et al., 2012). It is expected in society that an increase in income will coincide with a reciprocal increase in subjective well-being, however, it was found that negative psychological consequences, such as

anxiety, depression, lower self-esteem, and life dissatisfaction were typically the costs of desiring financial success (Nickerson et al., 2003). Similarly, a study found that having a better financial situation and attending counseling were predictors of better reported physical health (Cappetto & Tadros, 2022).

1.4. Insecurity & Traumatic Stress

The American society endorses materialism despite unintended effects such as impaired self-esteem (Chaplin et al., 2014), insecurity (Richins & Chaplin, 2015) and stress (Rindfleisch et al., 1997). It is assumed that these negative, unintended effects can be relieved by attaining and valuing material possessions. A noted key positive predictor of materialism in the literature is an amplified feeling of insecurity (Howell et al., 2012; Maslow, 1954). Additionally, when people experience existential insecurity, it is possible they may become even more materialistic in order to cope and circumvent self-awareness (Howell et al., 2012; Rindfleisch et al., 1997). Minimalism has been shown to reduce stress and increase happiness (Millburn & Nicodemus, 2015). The gratification that comes from shopping does not offset posttraumatic distress. In fact, maladaptive shopping behaviors rise alongside the level of traumatic exposure (Somer & Ruvio, 2014). Further, materialism has shown to have a negative effect by making traumatic events worse (Ruvio et al., 2014). More research is needed to validate that materialism is a risk factor for coping with traumatic stress (Somer & Ruvio, 2014).

1.5. Social Isolation

Research has validated various negative effects of materialism, such as loneliness (Pieters, 2013), anxiety, stress, and depression (Kasser & Ryan, 1993, 1996; Wang et al., 2017). Materialism has been revealed to employ an unfavorable consequence on such aspects of mental health, particularly, social isolation (Pieters, 2013). Social support and relationship quality are vital to an individual's sense of self and identity, particularly due to the quality of their social relationships having an effect on both their emotional and physical health (Harnish et al., 2019; Suls & Wallston, 2008). People recounted being lonely preceding a buying episode (Faber & O'Guinn, 1992). Researchers have recommended that extra attention be given to create social support networks of compulsive buyers (Harnish et al., 2019). Additionally, these social supports may be a safeguard against the social anxiety experienced by

compulsive buyers as well as aid in decreasing feelings of anhedonia and practice of substances to control social anxiety (Harnish et al., 2019). Somer and Ruvio (2014) found that very materialistic individuals seek more support from objects than humans in reference to coping (Somer & Ruvio, 2014). Therefore, this may be contributing to their overall feelings of social isolation. It was found that the emotion of 'awe' may reduce feelings of loneliness as well as aid in overcoming materialistic tendencies (Kaplan-Oz & Miller, 2017).

2. Methods

2.1. Study design and Participant

The total participants in the study includes 586 individuals. The sample in terms of gender consists of n= 555 females and n= 31 males. Thus, the vast majority of the sample (94.4%) consists of females. Five hundred and one participants are White or Caucasian, 8 are Black or African American, 34 Hispanic, 22 Asian, and 21 Other race/Multi-racial. Participants must be age 18 and over and must be in a romantic relationship. Inclusion criteria additionally required individuals to speak English and be in a romantic relationship.

Upon receiving IRB approval, invitations to participate in the study were sent via social media such as Facebook, Instagram, and LinkedIn. Informed consent was obtained from all individual participants included in the study. Participants were asked to complete an online survey which prompted participants with the informed consent form. After completing the informed consent, participants were directed to complete the study surveys. First, a demographic questionnaire appeared then the Material Values Scale (MVS), subsequently, the Medical Outcomes Study (MOS) 20-Item Short-Form Health Survey (SF-20). Additionally, there was an incentive offered to participate in this study, four \$25 visa gift cards were awarded. The winners were randomly selected and contacted via email.

2.2. Measures

2.2.1. Demographic Survey

Gender. "What is your gender?" The choices were 0 = male, 1 = female, 2= other gender.

Race/ Ethnicity. "What is your race/ ethnicity?" Answer options: 1 White or Caucasian, 2 Black or African American, 3 Hispanic 4 Asian, 5 Other Race/ Multi-racial.

Relationship Status. "Are you currently in a romantic relationship?" The answer choices were 0= no and 1= yes.

Relationship Length. "How long have you been in your current romantic relationship?" The answer choices were 1= Less than one year, 2= One to five years, 3= Five to ten years, 4= Ten years or more.

Childhood Family Financial Status. "Do you believe you and your family were financially well-off during childhood?" The answer choices were 0= no and 1= yes.

Current Financial Status. "Do you believe you are currently financially well-off?" The answer choices were 0= no and 1= yes.

Previous Counseling. "Have you ever been to individual, couple, or family counseling? Answer options were 0= no and 1= yes.

2.2.2. Material Value Scale (MVS) Short Form

The MVS measures materialism in individuals by means of three distinctive dimensions: success, centrality, and happiness (Richins & Dawson, 1992). The measurement's subscales were explained as, "the centrality of possessions and their acquisition in a person's life (i.e., material centrality), the belief that possessions and their acquisition are essential to one's happiness and life satisfaction (i.e., material happiness), and the use of possessions in judging the success of others and oneself (i.e., material success)" (van der Meulen et al., 2018). The scale selected for the present study was The Material Value Scale (MVS) Short Form (Richins, 2004), the condensed nine-item measure of materialistic values which was revised and constructed from The Material Values Scale (MVS) created by Richins and Dawson (1992). "The scales possess acceptable levels of reliability, and their dimensional characteristics are superior to those of the 18-item scale" (Richins, 2004).

2.2.3. Medical Outcomes Study (MOS) 20-Item Short-Form Health Survey (SF-20)

The SF-20 has been used to measure quality of life and has been assessed for applicability to clinical practice and clinical trial settings (Holmes et al., 1996). The SF-20 measures health through six spheres: six questions on physical functioning, two questions on role functioning, one question on social functioning, five questions on mental health, five questions on health perceptions, and one question on pain (Stewart et al., 1988). The smaller subset of these items borrowed from its longer form of measures have met the criteria for acceptability, reliability, and validity in a

general population (Stewart et al., 1988). The mental health subscale is representative of four major mental health dimensions: anxiety, depression, loss of behavioral-emotional control, and psychological well-being (Veit & Ware, 1983).

2.3. Data Analysis

The data analysis plan consisted of data cleaning, screening, and analysis procedures. SurveyMonkey, was utilized to collect data. The researcher minimized potential risks by informing participants in the informed consent they can withdraw their participation at any time for any reason. In addition, the participants were debriefed at the end of the survey and if any emotional distress is caused or experienced, participants were encouraged to contact their local crisis center to obtain mental health treatment and follow-up, as well as referrals in their area, if they reported and/or requested services. The researcher eliminated surveys with missing information. Frequencies and descriptive statistics were calculated as well as bivariate statistics, such as correlations, were conducted to better understand the relationship between variables. Multiple t-tests and ANOVAS were analyzed followed by a hierarchical linear regression. A hierarchical multiple regression was conducted to answer the research question: Is there an impact between living a materialistic lifestyle and an individual’s mental health? IBM SPSS Statistics version 26 was utilized to complete the statistical analysis.

3. Findings and Results

The data were cleaned by methods of deletion, recoding, and creating sum scores. First, missing data were accounted

for. The raw sample size was n= 690. Due to various surveys left blank or incomplete, the researcher deleted those from the data (n= 98). Additionally, participants that indicated no to the question, “are you currently in a romantic relationship” were deleted due to the previously stated inclusion criteria (n= 4). Deletion of unfinished surveys and unfitting criteria resulted in n= 588 participants. The survey asked participants to select a gender, two individuals identified as other which would indicate a non-binary gender. The data from these two participants had to be removed due to low representation. The final total participants were n= 586. Following the deletion of unusable data, items were recoded so that the Likert scale scores would all be in the same direction. Covariates did not need to be recoded. For the mental health questions, numbers 7, 9, and 11 were recoded for scoring to be kept continuous in terms of direction. After items were recoded to be in the same direction, sum scores were calculated per scale. Sum scores add up all the item scores in a scale.

The total number of participants in the study is 586. For relationship length, 72 individuals reported being in a relationship for less than one year, 198 individuals reported one to five years, 138 six to ten years, and 178 eleven years or more. As for childhood finances, 258 people believed they were not financially well-off during childhood and 328 thought they were financially well-off during childhood. For current finances, 171 believed they were not currently financially well- off and 328 thought they were currently financially well- off. In terms of previous counseling experience, 198 individuals reported ‘no’ they have not been to individual, couple, or family counseling and 388 reported ‘yes’ they have attended. See Table 1 for frequencies of the study’s variables.

Table 1

Frequencies of Covariates (n = 586)

Variable		Frequency	Percent
Gender	Male	31	5.3
	Female	555	94.7
Race	White or Caucasian	501	85.5
	Black or African American	8	1.4
	Hispanic	34	5.8
	Asian	22	3.8
	Other race/ Multi-racial	21	3.6
Relationship Length	Less than one year	72	12.3
	One to five years	198	33.8
	Six to ten years	138	23.5
	Eleven years or more	178	30.4
Childhood Finances	no	258	44.0
	yes	328	56.0

Findings from the correlation analyses indicated there is a statistically significant positive correlation between materialist values and mental health, ($r(584) = .184, p = .000$). Correlation analyses indicated there is a statistically significant negative correlation between physical and mental health, ($r(584) = -.113, p = .006$). There is a statistically significant negative correlation between mental health and relational satisfaction ($r(584) = -.113, p = .006$). Prior to running multivariate analyses, the researcher ran preliminary analyses, including correlations, independent samples t-tests, and one-way ANOVAs. These analyses were conducted to examine the relationships between the variables within the study and the results from these analyses informed which of the covariates were to be included into the hierarchical multiple regression. Relationship length was the only covariate that was statistically significant with mental health ($F(3, 582) = 8.869, p = .000$).

The researchers hypothesized that there will be an impact between living a materialistic lifestyle and an individual's mental health. Preliminary analyses yielded the usage of just one covariate: due to being statistically significant in the preliminary analyses- relationship length. The control variable, relational length was included in Step 1, the MVS was included in Step 2 of the model, and mental health was included as the dependent variable. Results from Model 1 indicated relationship length is a significant predictor of mental health and explains 4.3% of the variance. The final regression model was statistically significant ($F(2, 583) = 19.829, p = .000$). The R^2 for the final model was .064 explaining 6.4% of the variance in mental health predicted by the control variables and materialist values. Both relationship length ($t = -4.310; p = .000$) and MVS ($t = 3.554; p = .000$) were statistically significant predictors in the final model. Results from the regression can be seen on [Table 2](#).

Table 2

Summary of Hierarchical Multiple Regression Examining Association between MVS and Mental Health (n = 586)

Variable	Model 1			Model 2		
	B	SE B	β	B	SE B	β
Block 1						
Relationship Length	-.437	.085	-.208	-.371	.086	-.177
Block 2						
MVS				.056	.016	.146

4. Discussion and Conclusion

The results displayed that the hypothesis was supported that living a materialistic lifestyle negatively impacts an individual's mental health. This finding aligns with past research that states materialism has been linked to lower levels of mental and emotional health (Belk, 1985; McCullough et al., 2002; Puente-Diaz & Cavazos Arroyo, 2014). Additionally, prior research has stated that engaging in experiences is significantly linked with psychological well-being, more so than having material goods (Muñiz-Velázquez et al., 2017). Therefore, it is important to note that living a materialistic lifestyle may decrease an individual's mental health. It is important that individuals understand the negative effects of living a materialistic lifestyle as the mental health impacts can be extremely detrimental.

4.1. Minimalism

Minimalism is “a tool to eliminate life's excess, focus on the essentials, and find happiness, fulfillment, and freedom” (Millburn & Nicodemus, 2015). Minimalism involves decluttering as well as owning fewer material items (Millburn & Nicodemus, 2015). Owning less has been found to save money and time and stand for a radical, anti-capitalist movement (Rodriguez, 2018; Ugglá, 2019). Minimalist experts Joshua Fields Millburn and Ryan Nicodemus wrote the book, *Minimalism: Live a Meaningful Life*, which discusses the journey of two best friends at 30 years old making major life changes to improve their life satisfaction. “The point is that minimalism is a tool to help you achieve freedom” (Millburn & Nicodemus, 2015). They explained that minimalism causes people to get rid of some things to then make room for life's most important things. These important things in life are identified as: health, relationships, passion, growth, and contribution. The book

explains how they were able to discover their true passions by quitting their high paying jobs and simplifying their lives. Authors discussed how their previous lifestyles led to consequences such as debt, depression, and discontent. Authors also emphasize that people should tolerate, accept, respect, and appreciate. They go on to say that if one does these things, their relationships will be more positive, and they will gain a deeper understanding of people. The main focus was to showcase that minimalism is a lifestyle choice and minimalists search for happiness not through things but through actual life itself (Millburn & Nicodemus, 2015).

Additionally, Havrilesky (2019) wrote a series of essays that incline people to reject society's concept of 'enough' and rather, personally define it. She also addresses the 'broken' American culture which she claims could be attributed to the dream of the consistent pursuit of the 'bigger and better.' Further, she stated, "not only do modern consumer choices rarely bring us long-term satisfaction, but they're exhausting. It takes a lot of energy to recognize which signifiers will place you in the dreadful almost-past with the know-nothings who are not always moving forward, always casting off and acquiring more, always focused on what comes next" (Havrilesky, 2019).

Ugglá (2019) studied the main concepts of minimalism by studying the writing of American bloggers and authors. The purpose was to gain an in-depth perspective of the ideology of a minimalistic lifestyle (Ugglá, 2019). Findings displayed that a lifestyle change was typically caused by discontent that was felt in their lives. Findings displayed that minimalism was found to be freeing and lead to autonomy. It was discussed that the formula for beginning to lead this type of lifestyle is to start with the material possessions and then proceed on to other areas in their life. Researchers also rationalized that materialism seems to be a negative outcome of an individualized society as well as the unclear center of power in social acceleration. Based on the current study's findings, living a materialistic lifestyle negatively impacts mental health. Therefore, it is encouraged to explore the potential positive effects of a minimalistic lifestyle on a person's mental health.

5. Suggestions and Limitations

There is evidence of the link between physical health and relational satisfaction (Tadros et al., 2023). Further, materialism has been shown to negatively impact both physical health and relational satisfaction (Cappetto & Tadros, 2021, 2022). Therefore, it is of no surprise that this

study found that materialism has a negative impact on mental health as well. Specifically, this study found that materialistic values are significant predictors of mental health. It has been said that the American dream is simple, just buy stuff and the happiness will come (Millburn & Nicodemus, 2014). The whole process starts so young; American children are taught that the American Dream, being infatuated with overconsumption, is crucial to success and happiness (VanderPyl, 2019). "We first-world humans have always had a conflicted relationship with our belongings" (Havrilesky, 2019). Every celebration and holiday are centered around giving and receiving material items (Havrilesky, 2019). Marriage and Family Therapists (MFTs) are urged to not only discuss the relationship with their materials, but how couples with children can mitigate these risks associated with materialistic values as found in this study. Engaging in overconsumption is something that is taught and reinforced frequently. MFTs may assist in understanding how these patterns are passed down and repeated. Further, a recent study has recommended that having conversations surrounding how materialism and finances can impact relational satisfaction (Cappetto & Tadros, 2021).

Based on the findings from this study displaying that materialistic values are a significant predictor of mental health and relational satisfaction; mindfulness is a recommended strategy for increasing mental health and relational satisfaction while decreasing materialistic values. Mindfulness is "the awareness that emerges through paying attention, on purpose, in the present moment and non-judgmentally to the unfolding of the experience moment by moment" (Kabat-Zinn, 2003). Mindfulness entails gaining knowledge to control the concentration of attention (Lynch et al., 2006). It has been found that mindfulness-based techniques are associated with healthier decision-making, awareness, acknowledgement of emotions, and increased focus (Christopher & Maris, 2010). By being mindful, people can concentrate on both their external environments and their internal experiences (Kabat-Zinn, 2003).

Mindfulness has been used in conjunction with Dialectical Behavioral Therapy (DBT) in a recent study (Finney & Tadros, 2019). Mindfulness assists with the regulation of difficult emotions (Siegel, 2014) as well as can be used to de-escalate periods of crisis in couples (Finney & Tadros, 2019). MFTs can assist clients to develop awareness of themselves and their partner. "Mindfulness is a powerful antidote to the human tendency toward automatic responding, which corporations and advertisers exploit in

the service of consumerism” (Rosenberg, 2004). Therefore, mindfulness can be used to acknowledge issues within consumerism. One being the unconscious psychological processes that advertisers hope to speak to and life dissatisfaction’s brief solution by consumption (Rosenberg, 2004).

Despite the various strengths of this study, there are limitations that must be transparently discussed. There are limitations to this study due to survey research. Survey responses were limited to those who have internet access to be able to participate. Thus, participants who do not have access to the internet based on socioeconomic status may have been excluded due to this. This may be a limitation because there may be individuals of a lower socioeconomic status that are not represented. Also, people must be able to read the English language to participate in the study. Therefore, the perspective of individuals who live in the U.S., but do not speak English were excluded. This could be a limitation by not having these perspectives reflected.

Kahneman (2011) elucidates that happiness and satisfaction are distinct constructs. He explains that happiness is a short-term experience that occurs spontaneously and is brief. Satisfaction on the other hand, is a long-term sensation, constructed over time and founded on achieving goals and building the kind of life one loves. He contests that people do not seem to want to be happy and they actually want to increase their satisfaction with themselves and with their lives which leads in entirely different directions than the augmentation of happiness (Kahneman, 2011). Thus, it is wondered how this satisfaction is achieved relationally if Kahneman’s theory is correct. Additionally, would this pursuit of satisfaction be similar if an individual is seeking this relationally? New research is needed to explore this.

Additionally, a measure to assess minimalism needs to be created to explore the potential positive effects of a minimalist lifestyle. Unfortunately, a minimalism scale has yet to exist. Additionally, there is a need for peer-reviewed, scholarly articles on minimalism and its impacts on mental health. The current findings display the need for a change in how people view their relationship with possessions as it has shown to have negative impacts on mental health. It is imperative that these findings are utilized to enhance mental health. The researchers hope these findings will help create new avenues in clinical research to benefit family systems and lead to further research on materialism’s impacts.

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Declaration of Interest

According to the authors, this article has no financial support and no conflicts of interest.

Authors’ Contributions

Both authors made substantial contributions to the research process, covering various aspects from study design to data handling and manuscript preparation.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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