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The Role of Moral Deficiency in Moral Consumption Behavior - The Implicit and Explicit Approaches: An Empirical Study from Indonesia*

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Abstract

This research aims to investigate the relationship between moral deficiency and moral consumption. Consumers' moral values cannot be separated from their consumption activities. In other words, consumers' spending preferences may be an expression of their beliefs about what is right and wrong. A less explored concept within moral consumption behavior theory is 'moral deficiency'. To the best of our knowledge, this is the first research effort to integrate green purchasing and religious purchasing under the banner of moral consumption behavior. There are two studies: Study 1 aimed to measure the moral deficiency of participants through moral scenarios (implicit) and then test its relationship with the green purchase and religious purchase, two proxies of moral consumption. A total of 121 universities were chosen via the nonprobability sampling method. To improve the results of the prior study, Study 2 aimed to measure the moral deficiency of participants through moral deficiency self-report (explicit) and then test its effects on green purchase and religious purchase. A total of 208 participants from the general public were recruited via the nonprobability sampling method. The findings of the two studies suggest that participants with high moral deficiency showed more intention to engage in moral consumption behavior.

Keywords: Moral Deficiency, Moral Consumption, Green Purchase, Religious Purchase

JEL Classification Code: D11, M31, O35, Q01, Z12

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1. Introduction

Ecological catastrophes that occurred in the past two decades called for moral behaviors from global citizens. Morality or the idea of good and evil, right and wrong, is a complex topic partly because it varies across cultures (Haidt et al., 1993). Hu et al. (2014) argued that moral self-ideal drove consumers to obtain moral-symbolic products to achieve self-synergy or improve the self. Similarly, according to Yaprak and Prince (2019), moral consumption is the manifestation of the moral self. In other words, the greater the identification of the moral self, the greater the predisposition towards moral actions or choices. Moreover, previous studies have associated moral consumption with green consumption (Perera et al., 2018; Karimzadeh et al., 2019; Yaprak & Prince, 2019; Chairy & Syahrivar, 2020; Pham, 2020; Sharma & Lal, 2020) and religious consumption (Wenell, 2009; Lam & Liu, 2011; Syahrivar, 2021; Syahrivar et al., 2021).

A less explored concept within moral consumption behavior theory is 'moral deficiency'. When moral transgression occurs, a person may engage in compensatory behavior to achieve a moral equilibrium. For instance, an experimental study by Hu et al. (2014) among students demonstrates how recalling one's past behaviors that harmed the environment leads to green dining intention. A previous study by Pham (2020) found that moral-self-identity was a positive predictor of organic food products intention. Previous studies have also linked workplace moral hazard to information asymmetry and undisclosed risk-taking actions for profit (Purwono et al., 2019; Akhtar & Saleem, 2021), both of which can be mitigated through pro-social behavior such as corporate social responsibility (Chen et al., 2020; Pinto & Allui, 2020). According to Schwabe et al. (2018), recalling previous wrongdoings may motivate consumers to engage in moral consumption.

This research aims to investigate the relationship between moral deficiency and moral consumption, represented by green and religious purchases. To the best of our knowledge, this is the first research effort to integrate green and religious purchases under a larger concept called 'moral consumption' and test their relationship with a less explored and sensitive concept called 'moral deficiency'. This research employed both implicit (i.e. moral dilemma-induced scenario) and explicit (i.e. self-reports) approaches to measure moral deficiency more accurately. The findings of this research are expected to refine the moral consumption behavior theory.

2. Literature Review

2.1. Moral Deficiency and Moral Consumption

The words 'morality' and 'ethics' have been used interchangeably in previous studies (Haidt et al., 1993; Vitell & Muncy, 2005; Gregory-Smith et al., 2013; Karčić, 2015; Septiari et al., 2020; Sharma & Lal, 2020). According to Haidt et al. (1993), there are three ways to approach morality: ethics of autonomy (harms, rights, and justice), ethics of community (duty, respect, and obedience towards authority), and ethics of divinity (spiritual purity).

We propose five broad issues in moral deficiency-related consumption activities: The first is environmentally harmful consumption, such as wasting on electricity and water, consuming from non-environmental friendly products and food waste (Deumling et al., 2019; Ma et al., 2019; Van Geffen et al., 2020). The second is wildlife harmful consumption, such as consuming endangered animals and hunting for sport (Good et al., 2019; Hsiao, 2020). The third is bodily and mentally harmful consumption, such as alcohol and drug abuse and religious malpractice (Nobakht & Yngvar Dale, 2018; Adhikari et al., 2019; Waters, 2019; Syahrivar, 2021). The fourth is business harmful consumption, such as piracy, illegal downloads/sharing of copyright materials, counterfeit luxuries, and undisclosed risk-taking activities for profits

(Komarova Loureiro et al., 2016; Chen et al., 2018; Purwono et al., 2019; Chen et al., 2020; Pinto & Allui, 2020; Akhtar & Saleem, 2021). Lastly is person-related harmful consumption, such as the exploitations of women, children, and the disadvantaged in informal sectors (Deb et al., 2020; Etambakonga & Roloff, 2020; Steele & Hernandez-Salazar, 2020).

Moral deficiency usually requires a mechanism by which the 'sinners' attempt to alleviate, rationalize, justify or balance out through some forms of compensatory behavior. According to moral equilibrium theory, people constantly compare their ideal (moral) self with what they actually do; when immoral behaviors exceed the moral-self, one seeks to compensate it through moral actions, just enough to bring the self and the act to a psychological equilibrium point (Hu et al., 2014; Lee & Gino, 2018). Moral actions can be manifested as preferences toward moral products, such as green products and religious products. Previous research suggests that consumers may associate green products with religious or spiritual values (Chairy & Syahrivar, 2020; Genoveva & Syahrivar, 2020).

According to Azevedo (2020), chasing happiness and well-being through consumption, sometimes known as "consumerism," will only result in hedonic pleasure or short-term benefits. When the hedonic pleasure was gone, consumers would be dissatisfied, which would fuel their shopping frenzy even more. In this research, we argue that morality is an important factor in consumer activities, such as green and religious purchasing. Consumer morality is defined as a set of rules, ideals, and guidelines that apply to all stages of consumer decision-making: acquisition, consumption, and disposal.

Taylor and Noseworthy (2020) found that when 208 students were exposed to extreme product inconsistency or expectancy violations (e.g. belief versus evidence), they attempted to confirm their ethical convictions by making environmentally friendly consumption decisions. Previous research also suggests that religious goods consumption is related to consumer moral beliefs (Wenell, 2009; Lam & Liu, 2011; Syahrivar, 2021; Syahrivar et al., 2021). In a way, though not always, religious consumption can be seen as a mechanism by which transgressors attempt to alleviate their moral defects. Therefore, we propose the following hypothesis:

H1: People with high moral deficiency (versus low) have more intention to purchase green products.

H2: People with high moral deficiency (versus low) have more intention to purchase religious products.

The theoretical framework of this research is presented in Figure 1.

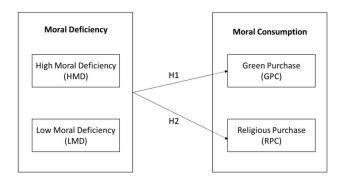


Figure 1: Theoretical Framework

3. Challenges in Measuring Morality

Previous studies have addressed the morality of participants implicitly (Kujala & Pietiläinen, 2007; Hayley & Zinkiewicz, 2013; Hu et al., 2014; Schwabe et al., 2018; Lim et al., 2019; Jamison et al., 2020), explicitly (Schwitzgebel & Rust, 2014; Zhu et al., 2015; Martin & Tao-Peng, 2017; Luan & Chen, 2020; Septiari et al., 2020) or a combination of both (Francis et al., 2019). The implicit approach to measuring morality is typically accomplished through moral dilemma-induced scenarios and past (im) moral behavior recollection. Meanwhile, the explicit approach to measuring morality is accomplished through self-reports. Various researchers in the moral behavior area have noted the challenges of measuring morality, particularly via self-reports, due to the effects of social desirability (Crane, 1999; Strohminger et al., 2014; Ryan et al., 2020). Admitting that we are not better at measuring this concept, thus we combined both the implicit and the explicit approaches to test our hypotheses. Unlike most researchers, who began their positions as neutral investigators of their participants' morality, we were more interested in addressing the real issue, which was 'moral deficiency,' and thus our measurements were designed in such a way that they accurately reflected this concept.

4. Pre-research

The pre-research aimed to select the best scenario for moral deficiency. In total, there were three scenarios that we adapted from the previous works by Kujala and Pietiläinen (2007) and Jamison et al. (2020). The scenarios had three contexts: sport, work, and shopping (see Table 1).

We recruited participants from President University, Indonesia, via the University's internal academic system. The participation was voluntary, meaning no incentives were offered before and after the completion of the survey. We managed to gather 124 participants from (undergraduate and graduate) students and staff (e.g. lecturers, academic staff)

of the University. Our participants were mostly non-worker (79%) female (68.5%) who were between 17 to 30-year-old (85.5%) and had college degrees (98%). In terms of religions, the majority were Muslims (49.2%).

Participants were then asked to read the 3 hypothetical moral deficiency scenarios. Following the work of Hayley and Zinkiewicz (2013), to estimate their moral valence, participants were asked to rate their mood with 5-point Likert Scale (1 = depressed; 5 = happy) and their moral self-appraisal with a 5-point Likert Scale (1 = ashamed; 5 = proud) after reading each scenario. The descriptive statistics and internal validity of each scenario are shown in Table 2. Based on the results, scenario 3 involving shopping context generates the highest correlation and internal validity among items (i.e. mood and moral self-appraisal), thus we selected this scenario.

5. Study 1 (Implicit Approach)

Study 1 aimed to test the relationship between a moral deficiency and moral consumption as represented by religious and green purchases. We argued that morally deficient people were more inclined toward moral consumption.

5.1. Designs and Procedure

Study 1 employed scenario-based stimulus to implicitly measure the moral deficiency of participants. Participants were asked to read scenario 3. To estimate their moral valence, the participants were asked to rate their mood with 5-point Likert Scale (1 = depressed, 5 = happy) and their moral self-appraisal with 5-point Likert Scale (1 = ashamed, 5 = proud). Following completion of the manipulation task, participants were asked whether they were likely to purchase green and religious products now: "How likely are you to buy green (religious) products right now if they are offered at a reasonable price?" which they must rate on a 5-point Likert scale (1 = very unlikely, 5 = very likely).

5.2. Participants

In Study 1, 121 participants (male = 38, female = 83) from President University, Indonesia, were selected via the University's internal academic system. We employed the nonprobability sampling method to collect the data. The participation was voluntary, meaning no incentives were offered before and after the completion of the survey.

5.3. Results

Scenario 3 was quite effective to bring down the moods of the participants (MOD3; M = 2.810, S.D. = 0.9514) and lower their moral self-appraisal (SPR; Mean = 2.512,

Table 1: Moral Deficiency Scenarios

Contexts	Scenarios
Sport	Please imagine You were playing badminton at a famous badminton club, at least two or three times a week. You were the best player in the badminton club, but not good enough to play in the professional badminton tournament. Your badminton club held an annual badminton tournament, which sometimes attracted famous badminton players who needed to warm up before a professional badminton tournament. The first prize was 50 million Rupiah, and the prize for the runner-up (who played in the final but lost) was 25 million Rupiah. This year, a professional badminton player named Taufik agreed to play in a tournament organized by your badminton club. You and Taufik quickly advanced to the final round. Of course, you wanted to win, but you realized that there was a very small chance of winning against a professional badminton player. The tradition at your badminton club was that the two finalists would meet for dinner at the club restaurant before competing the next morning. While you were getting dressed for dinner, you suddenly remembered reading an online news story that Taufik was allergic to soybeans. You also remembered that the pudding served at the badminton club restaurant contained soybeans. You think, 'If Taufik tastes the pudding, he will probably have a stomach ache and won't be able to sleep tonight. Then I will have a chance to win.' When dinner arrived, Taufik ordered the food menu first. After having the main course, the waiter asked him if he preferred the club restaurant's signature pudding or the Italian chocolate cake. Taufik did not know that the pudding contained soybeans. Before Taufik makes a choice, you suggested that Taufik tried the restaurant's signature pudding. Taufik ordered it and had a stomach ache as you would expect. The next morning, you won the badminton tournament.
Work	Please imagine you were a CEO in an international company. Your company would receive a large order from abroad if you, as CEO of the company, agreed to charge a mark-up for the order and transferred the money, through an intermediary, to the Swiss bank account, indicated by the customer. When you analyzed this request, you concluded that there was no risk of being caught. You judged this large order would guarantee a half-year projected profit for the company. You then decided to comply with the customer's request. On another occasion Due to the weak financial situation of the company, you as CEO felt the need to lay off some employees. There was an employee you disliked despite doing very well in the company. You thought that this was a golden opportunity to fire him. You fired the employee the next day on the pretext of the
Shopping	company's financial situation. Please imagine You were a student participating in a study tour in Jakarta, Indonesia. On the second day of the tour, you had free time in the afternoon to visit interesting places in Jakarta, the capital of Indonesia, and shop for branded goods. You decided to go to a famous shopping center in West Jakarta. You visited a well-known boutique shop and found the bag you had wanted. The price, however, was very expensive, around IDR 5 million. While you were shopping, a stranger noticed that you liked the bag. He calmly approached you and shared information regarding high-quality counterfeit bags if you went to a traditional market that was quite close to where you were currently shopping. The foreigner said that the counterfeit would be much cheaper than the original bag, but it looked identical. You decided to go to the market and saw for yourself if the information provided by the stranger was correct. There you found the counterfeit bag that looked identical to the original bag you saw in the boutique shop. Moreover, it only cost IDR 250 thousand, or 5% of the original's price. You realized that the boutique shop would lose its revenue if you decided to buy the counterfeit. After considering the price and quality, you decided to buy the counterfeit bag.

Moral Scenarios		N	Min	Max	Mean	S.D.	ρ	α
Sport	MOD1	124	1	5	2.218	0.8607	0.626**	0.768
	SPR1	124	1	5	1.435	0.7886		
Work	MOD2	124	1	4	2.121	0.8024	0.656**	0.790
	SPR2	124	1	5	1.815	0.8776		
Shopping	MOD3	124	1	5	3.000	0.9370	0.733**	0.843
	SPR3	124	1	5	2.613	1.0415		

Table 2: Descriptive Statistics and Internal Validity

MOD: Mood; SPR: Moral Self-Appraisal; N: Number of participants; Min: Minimum; Max: Maximum; S.D.: Standard Deviation; ρ : Pearson's correlation; **: Correlation is significant at the 0.01 level (2-tailed); α : Cronbach's Alpha.

S.D. = 1.0576). The results show that the internal validity of two items is 'reliable' ($\alpha = 0.877$; see Taber, 2018) and the correlation is high and significant (ρ 0.782, p < 0.01). Meanwhile, the internal validity between green purchase (GPC; M = 4.463, S.D. = 0.6588) and religious purchase (RPC; M = 4.298, S.D. = 0.6788), the two proxies of moral consumption, are 'moderate' ($\alpha = 0.624$) and their correlation is moderate and significant (ρ 0.454, p < 0.01).

We conducted a median-split of an average score of mood (MOD3) and moral self-appraisal (SPR3) and assigned participants into two groups: low moral deficiency or LMD (N = 58; M = 1.8488; S.D. = 0.52321) and high moral deficiency or HMD (N = 63; M = 3.4127, S.D = 0.54284). We then carried out an independent t-test analysis to compare the means of the two groups. Participants in high moral deficiency (HMD; M = 4.571, S.D. = 0.4988) condition shows higher intention to purchase green products (GPC) compared to participants in low moral deficiency condition (LMD; M = 4.345, S.D. = 0.7848) and the mean difference between the two groups is barely significant $(M_{\text{HMD} \times \text{GPC-LMD} \times \text{GPC}} = 0.226, \text{ t-test } 0.058 > 0.05)$. Participants in high moral deficiency condition (HMD; M = 4.476, S.D. = 0.6440) also shows higher intention to purchase religious products (RPC) compared to participants in low moral deficiency condition (LMD; M = 4.103, S.D. = 0.6673) and the mean difference between the two groups is statistically significant ($M_{\text{HMD} \times_{\text{rRPC}}-\text{LMD} \times \text{RPC}} = 0.373$, t-test .002 < 0.05). In general, participants in high moral deficiency group (HMD; M = 4.524, S.D. = 0.4730) shows higher intention to engage in moral consumption (MC) compared to participants in low moral deficiency condition (LMD; M = 4.224, S.D. = 0.6295) and the mean difference is statistically significant $(M_{\rm HMD \times MC-LMD \times MC} = 0.3, t\text{-test }.003 < 0.05).$

The differences of RPC and GPC between the two groups (LMD vs HMD) are shown in Figure 2.

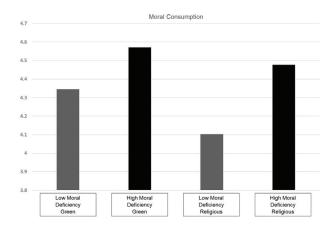


Figure 2: Moral Consumption in low moral deficiency versus high moral deficiency groups (implicit approach)

6. Study 2 (Explicit Approach)

In Study 1, we barely proved that the mean difference of GPC between the two groups (HMD vs LMD) was statistically different (*p* 0.058 > 0.05), thus we attempted to prove this relationship via Study 2. While Study 1 implicitly measured moral deficiency through a moral scenario, Study 2 attempted to explicitly measure moral deficiency and then test its relationship with green and religious purchases, two proxies of moral consumption. To accomplish this task, we developed our moral deficiency scale (15 items) based on the previous works by Burkett and White (1974), Svensson et al. (2010), and Ward and King (2018). To minimize social desirability bias (Nederhof, 1985), instead of asking their levels of agreements (e.g. disagree to agree), we inquired the frequency/intensity of each moral deficiency item (e.g. never to always) based on their personal experiences.

The pre-research of the 15 item-scale shows a high internal validity (see Table 3).

The internal validity between green purchase (GPC; M = 2.25; S.D. = 1.037) and religious purchase (RPC; M = 2.42; S.D. = 1.156) are moderate ($\alpha = .776$) and their correlation is also moderate and significant (ρ 0.638, p < 0.01).

6.1. Participants

In Study 2, 208 participants (male = 110, female = 98) from the general public were selected via the University's internal recruitment process. We employed the nonprobability sampling method to collect the data. The participation was voluntary, meaning no incentives were offered before and after the completion of the survey. Participants were told that their profiles were anonymous. As a consequence, unlike Study 1, we did not collect the data that could pinpoint their identities, such as their email address. Moreover, the general public was recruited in Study 2 to improve the external validity of Study 1.

6.2. Procedure

Participants were asked to fill in the moral deficiency (MD) scale and then were assigned into two groups: High Moral Deficiency (HMD; N = 110, M = 2.37,

S.D. = 0.512) and Low Moral Deficiency (LMD; N = 98, M = 1.34, S.D. = 0.180). Following completion of the self-report task, participants were asked their likelihood to purchase green and religious products now: "How likely are you to buy green (religious) products right now if they are offered at a reasonable price?" to which they must respond to a 5-point Likert scale (1 = very unlikely, 5 = very likely).

6.3. Results

The results show that the green purchase intention (GPC) of participants in high moral deficiency group (HMD; M=2.85, S.D. = 0.921) is higher compared to participants in low moral deficiency group (LMD; M=1.57, S.D. = 0.689) and the mean difference between the two groups is statistically significant ($M_{\rm HMDGPC-LMDGPC}=1.28$, t-test 0.000 < 0.05). Similarly, the religious purchase intention (RPC) of participants in high moral deficiency group (HMD; M=3.02, S.D. = 1.004) is higher compared to participants in low moral deficiency group (LMD; M=1.76, S.D. = 0.931) and the mean difference is statistically significant ($M_{\rm HMDRPC-LMDRPC}=1.26$, t-test .000 < 0.05). The difference between the groups, both in the context of GPC and RPC, is illustrated in Figure 3.

Table 3: Moral Deficiency Scale

No	Items	Measure	α (N = 227)	α (N = 100)
1	I take advantage of people who are inferior or younger than me.	5-point	0.900	0.821
2	I cheat to get ahead.	Likert Scale (1 = Never;		
3	I attempt to get around the law to get what I want.	5 = Always)		
4	I tell others that rules are meant to be broken.			
5	I use dishonest ways to achieve my goals.			
6	I say bad or vulgar words when provoked.			
7	I manipulate people to get what I want.			
8	I purposefully take or keep things that do not belong to me.			
9	I use things without the owner's permission.			
10	I tell lies to obtain someone's favor.			
11	I damage public properties.			
12	I download copyrighted materials illegally (e.g. movies, songs, documents, etc.).			
13	I waste natural resources, including water and electricity.			
14	I purchase counterfeit products.			
15	I actively benefit from illegal activities (e.g. gambling, selling counterfeits, etc.).			

 $[\]alpha$ = Cronbach's Alpha.

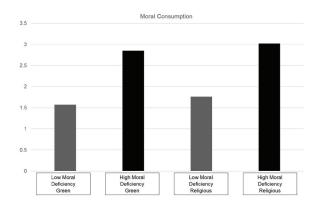


Figure 3: Moral Consumption in low moral deficiency versus high moral deficiency groups (explicit approach)

7. Discussion and Conclusion

Through Study 2 (explicit approach), we were able to successfully replicate the results of Study 1 (implicit approach). While in Study 1, the statistical Mean difference of green purchase (GPC) in high versus low moral deficiency groups was barely significant (p 0.058 > 0.05), Study 2 successfully demonstrated that participants in the two groups had different GPC intentions (p 0.000 < 0.05). Participants with high moral deficiency (HMD) had a higher intention to purchase green products than participants with low moral deficiency (LMD), proving H1. The findings add a weight of evidence to the previous studies, such as Pham (2020) and Taylor and Noseworthy (2020), suggesting that moral-self and moral threats compel people to engage in pro-social and environmentally friendly consumption as a part of moral self-regulation.

Both Study 1 and 2 successfully demonstrated that participants with HMD have a higher intention to purchase religious products (RPC), thus proving H2. The findings of this study made parallel with the previous studies, such as Wenell (2009), Lam and Liu (2011), and Syahrivar et al. (2021), suggesting that religious consumption is driven by moral concerns and is a form of compensatory behavior against self-deficits.

Our research offers several theoretical contributions: first, to the best of our knowledge, this is the first research effort to integrate green consumption and religious consumption under a larger concept called 'moral consumption'. Products that are considered green may also be perceived as religious or spiritual by consumers because of their moral symbolism (Chairy & Syahrivar, 2020; Genoveva & Syahrivar, 2020). We have shown that the two concepts were correlated, giving a pathway for future research to test them simultaneously. Second, we introduce a new construct called 'moral deficiency'. Whereas previous

studies sought to measure morality in the general sense, our study was straightforward in that it primarily tested participants' perceived moral deficits. In this research, we were more interested to demonstrate how an increase in moral deficiency could lead to increased purchases of moral-thematic products. In this effort, we have developed our methods and a measurement scale and proven that they are reliable in measuring this sensitive concept. Third, our research provides empirical evidence on the relationship between moral deficiency and moral consumption, particularly religious consumption. Fourth, our research contributes to compensatory consumption theory by linking moral consumption with perceived moral deficiency. Lastly, moral consumption as a concept, especially in the context of Indonesian consumers, is still less explored; therefore, our findings fill in the population gap in this research area. As stated previously, challenges in measuring morality often hinder more research in this area.

We would like to admit several limitations in our research. First, just like previous researchers in this area, we would not pretend that the results of our study were immune to the effects of social desirability. Nevertheless, we have attempted to minimize this problem by measuring the variable of interest (i.e. moral deficiency) by using implicit and explicit approaches. Second, our moral deficiency scale might be affected by the effects of social desirability. For instance, in Study 2, the scale generated relatively low mean values, especially for HMD, but was still sufficient to differentiate our participants into two groups and test their relationships with moral consumption. Nevertheless, this outcome is not unexpected; previous researchers, such as Crane (1999), criticized the use of selfreports to assess ethics or morality. Future research may retest our scale. Lastly, we found that the mean values of GPC and RPC in Study 2 were much lower than in Study 1. This could be the result of different sampling segments (i.e. student vs general population) or the complete anonymous in Study 2 (i.e. participants' email addresses were not asked or recorded).

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