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## Practitioner Profile: An Interview with April Benson, Ph.D.

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## Practitioner Profile

### An Interview with April Benson, Ph.D.

*Dr. April Lane Benson is a nationally known psychologist specializing in the study and treatment of compulsive buying disorder. Dr. Benson is the editor of "I Shop, Therefore I Am: Compulsive Buying and the Search for Self" (2000), the first book in English for mental health professionals about compulsive buying disorder. Her second book, "To Buy or Not to Buy: Why We Overshop and How to Stop" (2008) presents the Stopping Overshopping model of treatment. A pilot randomized controlled trial on the efficacy of this treatment model was recently published in the Journal of Groups in Addiction & Recovery. Maintaining a private practice in New York City and a comprehensive website, [www.shopaholicnomore.com](http://www.shopaholicnomore.com), Dr. Benson also trains therapists and is frequently quoted and interviewed in print, radio, and television media.*



#### **Q. Define what you do professionally.**

A. My professional life is quite varied, which is part of what makes it so fulfilling. A large part of my mission is to provide overshoppers and their loved ones with effective help and to support them in their ongoing recovery work. To that end, I have a private practice for individuals and small groups. Over the course of a decade, I developed a comprehensive evidence-based treatment program and am in the process of creating a text messaging program to provide additional support.

I work with spouses, siblings, parents, and other loved ones to help them understand compulsive buying disorder and to know how, when, and whether to intervene with the overshopper. Sometimes I work with the compulsive buying client and a loved one together, and at other times, I work with the overshopping client individually and a colleague does conjoint work with a parent or spouse, or does couples work.

Training therapists and related professionals, financial counselors, financial planners, financial educators, and professional organizers is an extremely important

component of my professional life. That training sometimes takes the form of free teleseminars that I offer through Stopping Overshopping, LLC, teleclasses that I give through other organizations, and presentations at professional conferences. Several book chapters that I've written also provide training to professionals.

Far too few therapists are trained to work effectively with compulsive buyers to meet the demand, which is only increasing as compulsive buying is coming further and further out of the closet.

To raise public awareness about overshopping and the dangers of overconsumption, I maintain a comprehensive website. On the site is information about self-help, professional help, therapist training, a press kit, and a blog, which includes posts for friends and family, book reviews, research and news, and tips for tracking spending. Additionally, I contribute to media coverage about compulsive buying by doing interviews for print publications, and appearing as a guest on radio and television. I've also appeared in a documentary film, "What Would Jesus Buy?" Because compulsive buying is considered "the smiled-upon" addiction because consumption fuels our economy, it remains a hard sell.

**Q. What activities encompass your professional responsibilities?**

A. I began studying compulsive buying disorder and working with compulsive buyers in the mid-1990s. My study of this problem introduced me to the literature on compulsive buying disorder, which was quite scarce at that time. Since I knew compulsive buying disorder to be quite prevalent, I decided to read everything I could find about compulsive buying and augment the literature by editing a book which would introduce mental health and other professionals to everything we knew at the time about this problem, with contributions from the fields of sociology, consumer behavior, marketing, community education, psychology, and psychiatry.

Following the publication of *I Shop, Therefore I Am: Compulsive Buying and the Search for Self*, I began getting calls and emails from compulsive buyers, their loved ones, their therapists, and sometimes even their lawyers, and became known as someone who specialized in working with compulsive buyers. Over the next five years, I developed a treatment program, using techniques that had proven effective when I had worked with people with eating disorders and incorporated other tools and strategies that had proven efficacy in helping people with other addictions.

I've used the program "Stopping Overshopping" (published as *To Buy or Not to Buy: Why We Overshop and How to Stop* in 2008) with individuals and groups for the last nine years. It is a 12-week experience that teaches specific skills, tools, and strategies that help compulsive buyers break the cycle that leads to compulsive buying and develop the capacity to lead a richer life in the process. A detailed description of the model can be found in Benson & Eisenach (2013).

As I came to see changes, sometimes small, often enormous, in my own clients and the clients of the therapists who I trained, I decided that it was time to test the model

empirically and see if my subjective experience of its efficacy would be confirmed by objective measures. In 2010, we embarked on a pilot randomized controlled trial that compared the efficacy of this model with a waiting-list control group. Results showed significant improvement on all compulsive buying measures. In fact, scores improved from levels solidly in the compulsive buying range to scores that were solidly in the normal buying range. The amount of money and time spent, and the number of compulsive shopping episodes, were also significantly reduced. All these improvements were well-maintained at six-month follow-up (Benson, Eisenach, Abrams & van Stolk-Cooke, 2014).

### **Q. What led you to your professional calling?**

A. By the time I was eleven or twelve it was painfully obvious that not everyone shopped like my mother and I did. Sometimes I'd come along when my friends' mothers would take them to buy clothes. Usually these mother-daughter dyads negotiated this rite of passage respectfully, if not altogether joyfully. In our case, within minutes of our entering the store the climate between us became icy as one garment after another was rejected.

Growing up during the Depression, my mother was rarely able to buy the kind of clothes she coveted, the kind worn by the girls "on the right side of the tracks." Even though my family had the financial resources that would have allowed my mother to buy herself more expensive clothes than she did, both for herself and for me, my mother's have-not identity hadn't changed very much.

As soon as I was old enough I got a small clothing allowance, which I supplemented first with baby-sitting money, then with summer job earnings. I did almost all my clothes shopping on my own, rather than do another take of the same bad scene that neither my mother nor I wanted to replay. The frenzied and repetitive buying and returning of clothes, though, was the telltale sign of an identity still very much in flux and the first clue that I was having some shopping problems of my own.

I first happened into Charivari in 1973, the store where I shopped for over twenty years. In the beginning, the clothes seemed too expensive, too dressy, and too old for me, but I kept going back searching for something. With the help of the store's three-way mirror, I started to find it. While it had always seemed like a fluke when I thought I looked good or was told that I did, in the gleam of that reflecting pool, I began to see what I really looked like and who I really was.

By the time the store closed in 1994, I had thought a great deal about shopping and I'd developed notions about what the shopping process was really about; both shopping gone good and shopping gone bad. "Shopping gone good" is shopping undertaken mindfully, as an expression of self-definition, self-expression, creativity, and sometimes,



even healing, as it had been for me at my favorite store. This shopping had no serious aftershocks. “Shopping gone bad” was shopping undertaken as an attempt to repair mood, avoid dealing with something, an attempt to buy love, express anger, or belong to an appearance-obsessed society, among other reasons. This shopping became a straitjacket that often led to serious negative consequences.

For the fifteen years prior to developing a specialty in working with compulsive buyers, I’d been working with people with eating disorders. Very often I’d hear clients tell me about their shopping behavior. Often they were seriously overbuying in an attempt to cover up their negative feelings about their bodies and their lives, to bridge the gap between how they saw themselves and how they’d like to be seen.

My growing interest in deconstructing and reconstructing what the shopping process was all about, combined with my interest in my own overshopping history and that of clients who were using shopping in a self-defeating attempt to transform themselves into some thinner, newer, better version of themselves, became a powerful motivator to begin a serious study of compulsive buying and its treatment, which has continued to fascinate and challenge me for over twenty years.

**Q. How are you compensated?**

A. The bulk of my income is made through private practice; the remainder comes from the sale of books and journals, the Stop the Shopping Insanity program, speaking fees, training fees, fees for group telecoaching, and fees paid for one-time events.

**Q. Do you work alone or do you have a team? Please explain.**

A. For the past ten years at least, I’ve employed college students who are majoring in psychology and interested in this area of study to help me in a variety of ways, from reviewing literature to website maintenance. In addition, I also work on an ongoing basis with a consultant who helps me to develop offerings and market them effectively. One of the therapists that I’ve trained has joined the team and she leads many of the telecoaching groups. Two research assistants helped design and conduct the outcome study and a statistician evaluated the results; all were co-authors of the journal article. I’ve worked with other colleagues who are co-authors on papers and book chapters and am working with a psychologist who specializes in digital interventions on the text messaging project.

**Q. What theoretical framework guides your work when dealing with clients and/or conducting research?**

A. As a psychologist trained in psychodynamic psychotherapy and psychoanalysis, my work is certainly informed by that framework. However, I came to see in my work with eating disordered clients that more targeted, structured, concrete skills, tools, and strategies improved outcomes considerably. As I developed the Stopping Overshopping Program, I used techniques that had proven efficacy either with clients with eating disorders or with people who had other addictive and personality problems. The program integrates aspects

of psychodynamic psychotherapy, cognitive and dialectical behavior therapy, psycho-education, motivational interviewing, acceptance and commitment therapy, and mindfulness.

**Q. What needs to happen so that 10 years from now we can say that financial therapy is a respected field of study?**



A. Comprehensive financial therapy textbooks are beginning to appear and one hopes they are used in more and more courses for financial educators, counselors, and mental health professionals, on both undergraduate and graduate levels.

Financial therapists need to make presentations at relevant conferences to expose more professionals who work with clients with psychological problems that are reflected in their money behavior to the variety of methods that are being employed successfully to help such clients.

Much research needs to be done for the field of financial therapy to gain the kind of credibility that would make it highly respected. For example, one important research study would be to use a sample of clients with similar psychologically-based financial issues, and compare a group getting financial therapy, with a group getting no therapy, and one or two groups getting another type of therapy, as to their relative efficacy. Teasing out the factors that make financial therapy effective is also a valuable research direction.

**Q. What benefits can the Financial Therapy Association provide to others doing work that is similar to your professional activities?**

A. The Financial Therapy Association could provide telecourses and live trainings for people who want to help compulsive buyers, feature professionals who are working successfully with this population at their conference, and help therapists and related professionals interested in this field to find each other through providing networking opportunities in some of the larger cities in the United States. Polling the FTA membership and then providing a list of professionals who are working in this particular area within the broader financial therapy field would be enormously useful. In addition, perhaps the Financial Therapy Association could provide grants to fund research in this area.

**Q. If others are interested in finding out more about you personally and professionally, where can they obtain this information?**

A. There is a great deal of information about me personally and professionally on my website [www.shopaholicnomore.com](http://www.shopaholicnomore.com) and in my writings, which are listed on my online resume. There are video clips of me working with clients, links to some of my teleclasses

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and podcasts, and a comprehensive description of what we offer to clients, family members, and therapists. Reviews of my books are available both on the website and on Amazon.com. My email address is aprilbensonphd@gmail.com and I can be reached by phone at 1 (212) 799-3793.

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