

**EXPLORING THE LIVED EXPERIENCES
OF SOUTH AFRICAN MALADAPTIVE GAMBLERS**

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Maladaptive Gamblers

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Maladaptive Gamblers**

by

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DECLARATION

I, *Charnel Tennant (student number: 204026695)* hereby declare that the *article* for *MA Clinical Psychology* to be awarded is my own work and that it has not previously been submitted for assessment or completion of any postgraduate qualification to another University or for another qualification.

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ABSTRACT

For many individuals, gambling is regarded as a recreational activity, a socially encompassed pastime. For the individuals who partook in the present study, gambling is an Achilles heel at which the individuals were hopelessly at the mercy of. Initially a 'fun' activity, gambling emerged as an activity that provided both an aspect of enjoyment and escapism. Later, as the behaviour increased, interpersonal and intrapersonal consequences emerged; which eventually led participants to take action and break free from the activity once experienced as recreational and now as a "monster".

The aim of the study was to explore the lived experience of six South African individuals who met the criteria for a gambling disorder. Both a phenomenological approach and ecological perspective were used to elicit the essence of this particular phenomenon as experienced by the participants. Purposive sampling procedures were implemented. Data was collected through the use of a biographical questionnaire and individual, open ended conversations with six gamblers. The data was processed and analysed according to qualitative data processing and analysis procedures. Due to the gap in qualitative research in this particular area, specifically in the South African context, this research study has the potential to create a better understanding of the lived experience of gambling addiction through the shared experiences of participants.

Key words: gambling, lived experience, phenomenological, problem gambling, qualitative.

INTRODUCTION

The gambling industry in South Africa is rapidly expanding as evidenced by the thirty seven operating casinos and continuing growth of the non-casino market being fuelled by limited payout machines (PricewaterhouseCoopers, 2013). With the increase in gambling, comes a consequent increase in maladaptive gambling¹ behaviour. The aim of this study was to explore and describe the lived experiences of individuals with a gambling disorder. The phenomenon was explored in order to enhance the understanding of maladaptive gambling behaviour by investigating the subjective descriptions and meanings that participants attributed to gambling. Furthermore, the study aimed to identify common patterns that emerge between the participants with regards to the lived experience of a gambling addiction. The present study is a timely response to the lack of qualitative research exploring the experience of problem and pathological gambling in South Africa.

GAMBLING IN SOUTH AFRICA

Gambling activity in South Africa was for the most part banned or restricted from as early as 1673, with the Gambling Act (Act no. 55 of 1965) officially banning all forms except betting on horse racing. As time progressed, the licensing of establishments occurred. The 1970s brought with it casino operations to several areas of the country (Lotter, in Rule & Sibanyoni, 2000). The National Gambling Act (Act no. 33 of 1996) later authorised several casino licences across South Africa's nine provinces. In addition, the National Gambling Act saw the establishment of the National Gambling Board. In response to the concerns regarding the socio-economic impact of gambling, the National Gambling Act of 2004 was introduced; this legislation sought to deal with new and existing forms of gambling activities; enabling provisions for the future amendment of the legislation. Currently, these amendments seek revision and adjustment to accommodate the changing needs of the population and technological advancements.

¹Terms such as problem gambling, maladaptive gambling, pathological gambling, excessive gambling and gambling disorder will be used interchangeably.

DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS REVISION

In 1980, *Pathological Gambling* was included in the Diagnostic and Statistical Manual of Mental Disorders [DSM] as a Disorder of Impulse Control Not Otherwise Specified (American Psychiatric Association [APA], 1994). As the DSM sought revision, the fourth edition of the text continued to regard the phenomenon as *Pathological Gambling* (APA, 2000).

In the current revision of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (APA, 2013), the phenomenon is regarded as *Gambling Disorder*. The disorder is no longer classified as an Impulse Control Disorder Not Otherwise Specified, but rather included in the Substance-Related and Addictive Disorders category under Non-Substance Related Disorder (APA, 2013). Thus, current revision of the DSM allows for diagnostic specificity of episodic versus persistent symptoms, early or sustained remission and severity indicators. Furthermore, criterion eight which refers to committing illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling has been removed from the current revision. This criterion was noted to be the least often endorsed (Blanco, Hasin, Petry, Stinson & Grant; in Petry, 2010). Individuals are now required to meet four (or more) of the criteria within a twelve month period to be diagnosed with a gambling disorder, whereas in the previous revision individuals were required to meet five (or more) in an unspecified duration of time.

THEORETICAL FRAMEWORK

Bronfenbrenner's (1979) ecological model of human development was chosen to serve as a framework for the study as it portrays the impact of wider environmental influences upon an individual's development of maladaptive gambling behaviour. The micro-, meso-, exo-, macro- and chronosystem (Bronfenbrenner, 1986) are hypothesised to impact upon the development and maintenance of maladaptive gambling behaviour. For example, considering the microsystem level of intrapersonal interactions, *personality* may play a role in the dynamic understanding of gambling.

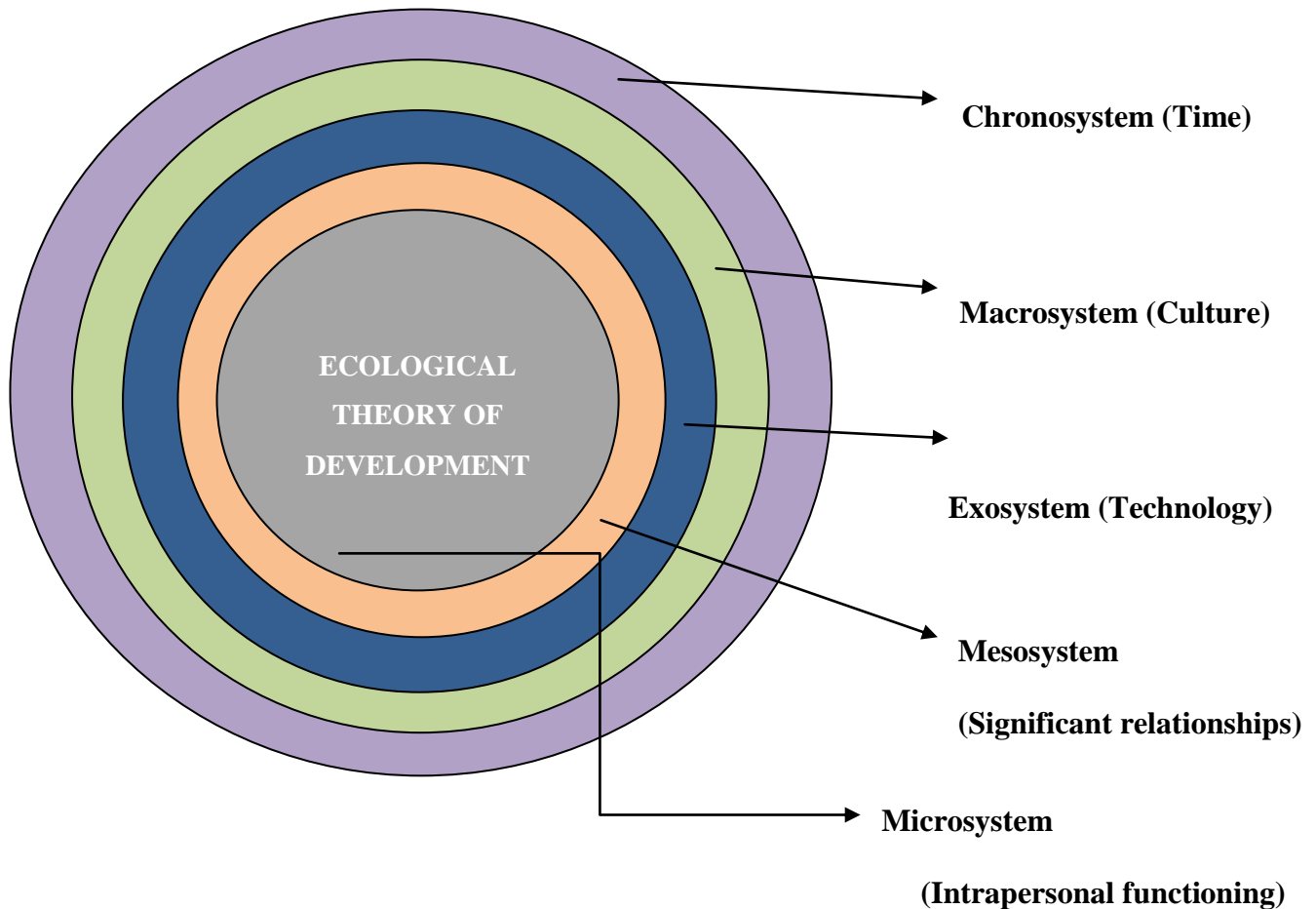
Personality traits such as sensation seeking and risk taking behaviour may be considered to be seen at the roots of the phenomenon of maladaptive gambling (Hardoon & Derevensky, 2002; Raylu & Oei, 2002). Further on the mesosystem level, interactions occurring between the individual and significant others are noted. Authors have found that the presence of one's peers or family members may have an impact upon gambling behaviour (Dowling, Jackson, Thomas & Frydenberg, 2010; Hardoon & Dervensky, 2001). An example of this would be the acceptance or non-acceptance of gambling related behaviour. The findings of this study suggest that through social interaction, all participants were introduced to gambling. As such, social introduction highlights acceptance of gambling related behaviour.

Further influences take place on the exosystem level; influences which are not directly connected to the individual but which have the potential to impact upon gambling behaviour. Griffiths and Wood (2000) highlight the possible negative impact of new technological advances to gambling activities. Furthermore, the advertising of these advances through the media promulgate the view that gambling is a glamorous social activity in which an individual may win enormous amounts of money.

Macrosystemic influences (Bronfenbrenner, 1986) encompass overarching institutional patterns displayed by the culture or subculture and have the potential to impact upon gambling behaviour. Raylu and Oei (2004) emphasize the influence of cultural beliefs and values upon gambling patterns or behaviours. Individuals from a community may be more or less likely to be exposed to and initiate gambling practices as their cultural beliefs dictate approval or disapproval of such behaviour.

Lastly, the chronosystem (Bronfenbrenner, 1986) accounts for transitions over the life course and includes historical and generational experiences which may impact upon gambling behaviour. The chronosystem encompasses both internal elements (e.g. physiological changes that occur with aging) and external elements (e.g. death of a significant other) and the impact of these elements upon maladaptive gambling behaviour.

Figure 1: Bronfenbrenner's Ecological Influences upon Gambling



Taking into account the microsystem, mesosystem, exosystem, macrosystem and chronosystem, Bronfenbrenner (1972; 1979; 1986) has accordingly proposed that these five independent 'systems' operate together to influence the development of an individual (Berk, 2006). It is evident that influences upon the individual's gambling behaviour extends from intrapersonal dynamics to interpersonal influences and further extends to that which the individual is not directly affiliated with, such as the media, regulatory policies, culture and time.

RESEARCH DESIGN AND METHODOLOGY

Research Design and Analysis

A qualitative, phenomenological approach was utilized to gain an understanding of the lived experiences of a sample of South African maladaptive gamblers. As the intent of the study was to understand the experience of problem gamblers, a qualitative methodological approach seemed appropriate. Phenomenology focuses on the conscious experience of the individual subject, therefore it is deemed appropriate in understanding how individuals fall into addictive patterns of gambling behaviour. An 'unstructured conversational' format was utilized and organised around the area of interest, '*what is your experience of gambling?*' All qualitative interview transcripts (N=6 problem gamblers), were analysed using a phenomenological analysis of the themes, and underlying meaning of the lived experience of gambling and was cross checked by means of independent coding.

Participants and Sampling

An article published in a local newspaper (Port Elizabeth, Eastern Cape, South Africa) allowed possible participants to initiate contact with the researcher. The article included the title of the study, a description of the investigation as well as the need for a sample. A biographical questionnaire was handed to each participant at an individual meeting. Thereafter, the researcher contracted with consenting participants. Of the seven potential participants, six individuals met the criteria for Pathological Gambling (APA, 2000) and were 18 years or older. All six out of seven possible participants were willing to be interviewed and partook in individual, face-to-face, interviews.

Non-probability sampling methods were utilized, focusing on the relevance of the sample in relation to the research (Neuman, 2003). Purposive sampling allowed for the utilization of predetermined criteria as participants were chosen in accordance with their relevance to the research question. The size of the research sample was six participants.

Data Collection and Procedure

A Biographical Questionnaire was used to obtain information from each participant regarding their eligibility for inclusion in the present study. Eligibility required that the participants be eighteen years or older as the legal age for gambling in South Africa is eighteen years (National Gambling Board, 2009). The first language of the participant was thereafter identified.

Language preference was relevant to the study in order to determine the need for a translator in the conversation process. It was determined that each participant was over the age of eighteen and had a preference to speak English within the conversation process. As the study was conducted prior to the publication of the DSM V (American Psychiatric Association, 2013), the DSM-IV-TR (American Psychiatric Association, 2000) criteria for pathological gambling (PG) was used to confirm that the participants were appropriate. Once participants were identified, data collection continued through the use of individual, open-ended conversations. One conversation per participant took place. Participants were given the opportunity to describe their experience fully, giving first person reports of their gambling experience. The interviews were recorded with an auditory apparatus as the conversations were later transcribed in order to work with the content that was acquired.

Data Analysis

Giorgi (1985) highlights analysis of qualitative content in the form of reading the entire transcribed document of each person's experience of the phenomenon in order to gain a general sense of the whole statement given. Thereafter, bracketing occurs and the content is synthesized to allow consistent statements regarding the participant's experience. In the process of explicating the phenomenon, qualities are recognised and described, therefore granting every perception equal value. Non-repetitive aspects are linked thematically.

Ethical Considerations

The study was approved by relevant ethics committees and was conducted in accordance with the ethical standards of these committees. All participants were informed about the nature, goals and possible advantages of the research. Legal informed consent was granted in the form of written acknowledgment of the ethical considerations relevant to the study. Due to the sensitive nature of the research topic, the study had the potential to create psychological discomfort.

Participants were informed of this potential disadvantage and referral for individual psychological intervention was made available. None of the research participants utilized this resource. Data was thereafter gathered under the supervision of a qualified psychologist and participants' confidentiality was guaranteed.

FINDINGS AND DISCUSSION

Summary of Participant Information

The table below provides a description of the participants in terms of demographic variables. The table aims to contextualise the present study. Knowledge of each participant's biographical information may deepen the potential insight and understanding of the meanings that may be attached to maladaptive gambling behaviour. The information was gained from the biographical questionnaire, personal observation by the researcher and confirmed by each participant. The variables were included in the biographical picture of the study so as to illuminate the gender and cultural variables presented.

The table illustrates variables such as gender, age, race, language and diagnostic criteria met according to the DSM-IV-TR (APA, 2000). Such variables give rise to generalizations that may be made about the participants of the present study. Half of the participant group were female and the other half – male, most of whom were white individuals.

All of the participants spoke English, with one participant speaking both English and Afrikaans. All participants met the criteria for pathological gambling (PG) as found in the DSM-IV-TR (APA, 2000; see appendix 1). Male participants met more of the listed criteria for PG than female participants.

Table 1: Participant Description

Participant	Gender	Race	Age	Language	Inclusion criteria
1	Male	Black	29	English	9/10
2	Male	White	39	English	10/10
3	Female	White	44	English	6/10
4	Female	Coloured	60	English/Afrikaans	8/10
5	Female	White	45	English	8/10
6	Male	White	51	English	8/10

Table 2: DSM V Diagnostic Criteria for Gambling Disorder (APA, 2013)

Criteria	Description
A.	Persistent and recurrent problematic gambling behaviour leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the following in a 12 month period:
A.1	Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
A.2	Is restless or irritable when attempting to cut down or stop gambling.
A.3	Has made repeated unsuccessful efforts to control, cut back, or stop gambling.

A.4	Is often preoccupied with gambling (e.g., having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble).
A.5	Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed).
A.6	After losing money gambling, often returns another day to get even (“chasing” one’s losses).
A.7	Lies to conceal the extent of involvement with gambling.
A.8	Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling.
A.9	Relies on others to provide money to relieve desperate financial situations caused by gambling.
B	The gambling behaviour is not better explained by a manic episode.

Appendix 1 highlights the diagnostic criteria used in order to determine that the participants were indeed relevant to the research topic.

The research data is presented according to the themes and categories that emerged during the process of qualitative content analysis (Table 3). These themes and categories illustrate the aspects that emerged most frequently during the analysis of the participants' conversation with the interviewer.

Table 3: Research Themes

Main theme	Sub Theme	Category	Sub-category
Initiating factor	Social engagement		

Reason for gambling	Enjoyment	Aspect of winning	
	Escape		
Description of behaviour	Increase in gambling		
	Lack of control	Play back winnings Craving	Chasing losses
	Psychological effects	Depersonalisation	Loss of time
		Cognitive processes	Rationalisations Fantasy of winning
Consequences	Intrapersonal	Health	Anxiety Depression Substance abuse
	Interpersonal	Deceit	
	Financial implications		
Intervention	Restricting behaviour	Self-exclusion	
	Role of spirituality		
	Post addiction experience	Feelings Current perception of gambling	Positive Negative

THEME ONE: INITIATING FACTOR

Social Engagement

A number of authors have alluded to the significance of social networks and socialisation in the initiation of gambling endeavours (Neighbors, Lostutter, Crounce & Larimer, 2002; Reith & Dobbie, 2011; Tarras, Singh & Moufakkir, 2000). As the theoretical framework highlights, the presence of one's peers or family members may have an impact upon gambling behaviour (Dowling, Jackson, Thomas & Frydenberg, 2010; Hardoon & Dervensky, 2001). The findings are supported in the present study with the first emerging theme suggesting that the social aspect of gambling is initially an attracting factor for some individuals:

For me it started when I was working at the bank and friends of ours introduced me to the gambling thing...I started and I thought ooo, this is an interesting game...

... I used to come to PE (Port Elizabeth) to visit some girlfriends and go to the casino and just have a nice day...I used to love going to that place – an awesome feeling...relaxed and chilled...

THEME TWO: REASON FOR GAMBLING

To consider which form of gambling was perceived as most enjoyable, one would need to consider the activities that each participant partook in. No theme emerged for the type of gambling preferred by participants. One participant, for example, bet on horses, two others preferred slot machines, one participant preferred poker, one - roulette and another internet gambling. The commonality of predilection for the type of gambling engagement cannot be drawn from the present study as participants' preferences varied.

Lee, Lee, Bernhard and Lee (2009) found that motivations to visit a casino are likely to be different for 'probable pathological' gamblers who are more likely to seek winning, the 'some problem' group appears to be more likely to seek escape, and the 'non-problem' gamblers indicate that their

motivations to engage in gambling activities are centred around explorations of the scenery and culture in the surrounding casino area.

In the current study, participants described factors such as social engagement, perception of fun and the prospect of winning as the perceived attraction to the act of gambling. No theme emerged regarding the attraction to the gambling environment. In fact, contradictory results were found as some participants enjoyed the anonymity of the environment, whereas other participants enjoyed the social and interactive features of the gambling setting. One participant described the environment as providing him with a feeling of supremacy, stating that *you feel powerful, you feel indestructible*. However, no other participants described their experience in this manner.

Enjoyment

Several authors suggest a significant relationship between sensation seeking behaviour and regular gambling behaviour (McDaniel & Zuckerman, 2003; Raylu & Oei, 2002; Rickwood, Blaszczynski, Delfabbro, Dowling & Heading, 2010). Participants in McDaniel and Zuckerman's (2003) study experienced gambling as a means to reinforce positive emotions through engagement with the enjoyable practice. Neighbors, Larimer, Geisner and Knee's (2006) research complements McDaniel and Zuckerman's by suggesting that individuals seek excitement and positive emotions from gambling. In the present study it was established that enjoyment, winning and 'escape' were motives to engage in gambling activities:

... When it started it is more of the fun thing...

... We were with friends, and we would just go there and enjoy yourself...

Aspect of Winning

Gambling represents an opportunity to win money – especially the prospect of winning large sums of money. Bulwer (2006) suggests that the more wins experienced, the greater the comfort that is felt in

the possibility of a next win. Bulwer (2006) further explored the aspect of winning and money and stated that the more frequently players gamble, the less they value the win or the money that accompanies the win. Money starts to lose its personal or universal value. In the present study it was noted that one participant acknowledged the value of money and the concept of money when experiencing maladaptive gambling behaviour. The participant described winning up to R60, 000 yet would not stop gambling. The participant stated that a 'normal' person would be able to walk away whereas an addicted person would not walk away, they would continue to gamble with the money that they had won. The participant sheds light into the aspect of control over the gambling behaviour and her inability to regulate her gambling conduct. In their own words, the participants account for this experience:

... This is an interesting game, because I started to get a little bit of money... It is just that thrill of the high; the anticipation of something good happening.

I was probably at the age of about 16. I started going to the race course, but is small money... I used to win money and he (participant's father) used to win fortunes, hundreds of thousands and obviously that planted a bit of a seed. I thought to myself, well yeah, it looks quite easy... What does get you hooked is when you have your first big win...

One participant was introduced to gambling by his father and highlights the notion of acceptance and approval of gambling activities (Delfabbro & Thrupp, 2003). The gambling behaviour of fathers may be regarded as a particular risk factor for children developing gambling problems in the future (Dowling, Jackson, Thomas, & Frydenberg, 2010), as it suggests that it is approved of or acceptable to model behaviour observed by one's family member/s (Raylu & Oei, 2002).

Winning and the enjoyment of the gambling environment elicited a positive physiological arousal in two participants. Although no theme emerged regarding the physiological arousal experienced by participants, the present researcher is of the opinion that these experiences encompassed part of the

two participants' phenomenological experience. 'Bubbles in the blood', 'dizziness' and an 'adrenalin rush' experienced by the two participants suggest that increased arousal contributed to the positive experience whilst gambling:

It's so exciting, like bubbles in my blood... that is how exciting it is...

When you get in there, it's almost like you cannot get to the machine faster, you can't wait... you almost start shaking... you actually feel dizzy! You know when you just want something big, it's like...like adrenalin, you got this huge adrenalin rush and it puts you on a complete high...

From a neuropsychological perspective, Coventry and Hudson (2001) found a significant difference in heart rate levels experienced by people who won during play versus those who lost. For those who won, heart rate levels were much higher than those of losers.

As gambling disordered individuals have been described as sensation-seekers in previous research (Coventry & Brown, 2006; Raylu & Oei, 2002; Zuckerman & Kuhlman, 2000 in Park, 2007), it appears that gamblers are attracted to the element of winning in some degree for the physiological sensation/s experienced.

Escapism

Blaszczynski and Nower (2002) described an '*emotionally vulnerable gambler*' as an individual whose gambling behaviour is largely motivated by a desire to regulate dysphoric mood states and/or to meet specific psychological needs (Blaszczynski, 2010). These individuals may experience difficulty in regulating external stress, and may use gambling as a means in which to escape from life stressors. Sharpe (2002) cogently argues that when individuals gamble as a reason to break away from life stressors, the individual may interpret the gambling activity as increased arousal.

Lightsey and Husley (2002) hypothesise that individuals who use effective coping strategies when dealing with stress are less likely to gamble when stressed.

Conversely, it may be considered that gamblers' who exhibit ineffective coping strategies, are more likely to gamble in light of experiencing stressful events/situations. Similar findings were reported in the present study, and the concept of 'escapism' was experienced by participants:

...I usually went there to forget about all stress...You go in there and there is some good music playing, people having drinks and cocktails and um, "this is lovely", you just switch off to the outside world and it is great not to worry about everything you know to worry about.

... You just want to get away from everything...from all the problems that you have at home... Last December I relapsed. My daughter was out of the country and she was supposed to come for the holiday. I did not see her for three and a half years so I was really looking forward to it. She could not come... I would go and sit there...to get over it...

THEME THREE: DESCRIPTION OF BEHAVIOUR

Increase in gambling behaviour

Gambling behaviour has the potential to develop into maladaptive or problematic behaviour when there is a preoccupation with gambling (APA, 2013; Delfabbro, 2013). Interestingly, the preoccupation with gambling can be considered to be experienced as a means to serve a purpose in the participants' understanding of their experience. For example, one participant describes boredom or failed plans as initially leading that participant to consider gambling as a means to fill their time, which progressed to excuses being made in order to gamble:

I gambled every day, sometimes more than once a day. I would make all excuses to go gambling... The next time you've got some time free or you get bored, or something doesn't work out, you go gambling. Eventually you actually push everything else aside and go gambling...

I would start frequenting the casinos... in the beginning I would go like once a month, or every second month... I would even go at night during the week, it became worse that I would go with some of my colleagues during the work time...

Lack of Control

Problematic gambling behaviour is noted when an individual has made repeated unsuccessful efforts to control the gambling behaviour (APA, 2013; O'Connor & Dickerson, 2003; Raylu & Oei, 2004). Similar findings emerged in the present study as participants experienced a lack of control over their gambling behaviour:

... All of a sudden, slowly but surely I found myself wanting to go back and go back... I was so desperate just to go back, I would drive all the way to P.E. which is an hour drive, and drive all the way back in the middle of the night. I mean, anything could have happened to me... by the time you realise that you have a problem it will be away or you will just hit a jackpot but it is never about that; there's something that brings you there... I lack control...

... I would tell myself, no... I'm actually not going to gamble today... and my car would arrive... it is so beyond my control...

Lack of control may suggest that participants experience being powerless over their gambling behaviour. Experiencing 'not being strong enough' to stay away and finding that other areas of their lives are controllable, suggests that participants experienced gambling as their 'Achilles heel', a debilitating weakness despite overall strength in other areas of life.

Craving

Potenza (2001) found that the gambling urges of problem gamblers activate the same region of the brain as does substance or chemical dependence. Goldstein and Volkow (2002) suggest that the urge to gamble and poor response inhibition is similar to that of addiction models.

Tavares, Zilberman, Hodgins and El-Guebaly (2005) found that the gambling disordered subjects in their study had stronger cravings than that of alcoholic dependent subjects. It was found in the current study that participants experienced such cravings; terms such as ‘*pull*’, ‘*urge*’, ‘*craving*’ and ‘*hunger*’ for gambling were elicited:

... You constantly have to fight that and it's not fightable. You do whatever you can, but you can't put a patch on your arm that will take the draw away...

... You get that urge; you have to go back... Sometimes I would get up, or I am busy or I am somewhere and then it starts; I would like to go and gamble.

... Behind it is a hungry feeling - like you want to eat eat eat eat eat eat and you don't want to stop eating... You go insane if you don't go and play...

The criteria for a gambling disorder (APA, 2000; APA 2013) reflects a failure to resist the urge to gamble and feelings of restlessness when not able to gamble. In the present study it was noted that a physiological reaction was experienced by participants. The ‘*urge*’ that participants experienced resembles that of the craving and withdrawal experienced when not gambling. The experience of one participant who describes the desire as a ‘*hunger*’ encompasses the elements of a natural desire that needs to be met at any cost. This would suggest an insatiable quest to gamble that is not fulfilled.

Playing back Winnings

Bulwer (2006) and Rizeanu (2012) have highlighted the thought processing of gamblers. The more wins experienced, the greater the comfort is felt in the possibility of a next win. From the conversations had with participants, it was observed that the value of money had lost its traditional value and the focus moved to the possibility of a win rather than the monetary compensation gained from the win. As one participant stated “*...the money thing is very secondary...*” .

It is interesting to note that participants describe 'chasing losses' (to be explored below) however money is secondary, this appears contradictory in nature.

Participants described a process of winning and the decision to continue gambling despite winning large sums of money:

... I wouldn't declare big losses... the money thing is very secondary really... because sometimes you have a big win and you think: 'Ah, thank God!', and it's not because it covers the loss. It means I can actually gamble for another hour...

I am going to win more, so then you start playing a lot...this is the point when you start losing a lot...as soon as you win a little bit, you play that thing away as well...

...Even if I won the money I would win like one thousand or two thousand or so I will, you know, just keep on playing, playing until there is absolutely nothing left.

Chasing Losses

Chasing behaviour has been described by Lesieur and Rosenthal (1991) as the most significant step in the development of maladaptive gambling behaviour. Several authors regard the phenomenon as a means of returning to the venture to regain financial losses (Blaszczynski, 2010; Rizeanu, 2012; Rugle, 2004). Findings in the present study highlight the concept of chasing losses:

... You end up going back to try and get your money back, it's like a process... If you have it, the more you win, the more you bet because you become greedy... You may go home with nothing at all.

I was chasing figure, I was chasing figure all the time...

I started spending more and more money... If I had lost before I would say, "ag I have won", um, I actually reached the stage when I had lost... then it became worse that I would lose money and not win the money back again and I had to take more and more of my money...

Psychological Effects

Depersonalisation

Depersonalisation is experienced by certain gamblers (Jacobs, 1986; McCormick, 2009). Individuals who experience a higher degree of gambling involvement are more likely to experience higher levels of dissociative experiences (McCormick, 2009). This is evidenced in the experiences of a number of participants in the present study:

... You absolutely lose yourself... There's no time, the entertainment is there. It's horrifying... Oh, it's fantastic when you are there but when you come out and you realise what you have done, and you wasted so much time, you think, what the hell did I do?

... You are a totally different person...

... It's your body, just, you're not there... you are not yourself...

One participant experienced dissociative phenomena when gambling, suggesting increased frequency of involvement:

... I actually felt like I am two different people...

Problem gamblers may experience the phenomenon of dissociation on a continuum from depersonalisation to the experience of dissociation. Considering the notion of depersonalisation, it was a commonly experienced phenomenon by participants, with one participant describing their experience as likened to that of dissociation.

Loss of Time

Both Naish (2001) and Delfabbro, Lahn and Grabosky (2006) suggest a 'narrowing of attention' whilst gambling, which could impair the monitoring of time (in McCormick, 2009). The experience

of 'loss of time' signifies increased attention and involvement in an activity that an individual is partaking in:

... It's like the world stands still there; I mean I couldn't believe when I look at my watch...

... I walked in here at 10am in the morning and realize it's 3 o'clock in the morning, the next day...

... There's no time involved there. There are no clocks. You've got to look at your watch, but you forget about time. Time is not an issue there at all...

There is considerable overlap when considering the element of time and the experience of depersonalisation. Participants described long durations of gambling that may not have been planned. One participant described how he started gambling at 10am and continued to gamble until 3am the following morning. When considering the time lapse, the participant had gambled for 17 hours continuously and had not acknowledged the amount of time that had lapsed since the initiation of the gambling behaviour.

Cognitive Processes

Participants shared the experience of rationalising their behaviour through strategies including blaming others, normalising the behaviour or minimizing the severity of their gambling behaviour. Furthermore, participants experienced the fantasy of winning as a cognitive process that rationalised repeated behaviour.

Rationalising behaviour

Lambos and Delfabbro (2007) highlight erroneous information processing evidenced in irrational beliefs and rationalisation of the behaviour of gamblers. Rizeanu (2012) elaborates upon this by stating that those that experience problem gambling tend to display denial and rationalise their gambling related behaviour while viewing their situation as temporary.

Participants of the present study experienced a degree of minimisation in personal responsibility for their behaviour. Interestingly, an external locus of control may be considered to be present when taking into account the minimisation of personal responsibility for their actions. The present study supports previous findings by acknowledging that some gamblers rationalise their gambling related behaviour:

... I used to say to myself that if I haven't lost money, well I don't have a problem...

...I always said other people play sports. I don't play sports, I don't smoke, I don't drink. Let me use that money for that (gambling)...

... I didn't have a career, I was working part time and it is different... it is different when you build your career, to build a life, you got a family and you get addicted. It's a different process...

The participant repeated this statement, not exploring the difference he perceived between himself and other gamblers. The participant shared that the experience is different as he did not have a family or career at that stage and is studying and working part time.

This may indicate that the participant viewed his gambling behaviour as less problematic as he did not have significant commitments to family or work at this stage of his life.

Fantasy of Winning

The theoretical framework alludes to exosystemic influences that contribute to gambling behaviour, such as that of advertising winning great sums of money. Nixon, Solowoniuk, Hagen and Williams (2005) found that some gamblers cling onto the 'hopes of a big win'. Shead and Hodgins (2009) consider the monetary reward expectancies as one aspect that facilitates gambling behaviour. In the present study participants too experienced fantasizing about the win, about what they would do with the money that would be won:

You always say to yourself, I just want to hit that big one, pay everybody and sit back, relax and carry on living... You plan your whole week on the money you are going to have today.

*...You live in a fantasy world. You create a scenario in your head: with this ten grand I am going to win 100. Ya, ya, I am going to pay the house for three months, I will pay my car finished and I will still have another 50 000 to have another *punt (play) in the week...*

THEME FOUR: CONSEQUENCES

Intrapersonal Consequences

Those that have gambled excessively over a period of time, tend to experience consequences as a result of their behaviour. For example, problem gamblers display poor physical health (Delfabbro & LeCouteur, 2009). Lorrains, Cowlshaw and Thomas (2011) determined that problem and pathological gamblers experience high rates of comorbid psychiatric disorders. These authors found that the highest mean prevalence along with pathological gambling, was noted in nicotine dependence (60.1%), substance use disorder (57.5%), mood disorders – unspecified (37.9%) and anxiety disorders - unspecified (37.4%).

Desai and Potenza (2008) similarly noted such a relationship with lifetime maladaptive gamblers experiencing one or more comorbid psychiatric conditions such as anxiety, depression and substance abuse. The findings of the present study complement the above mentioned findings as participants in the present study experienced anxiety, low mood/sense of depression and substance abuse as a result of their gambling behaviour.

Anxiety

Several authors acknowledge comorbid anxiety experienced with a gambling disorder (Desai and Potenza, 2008; Gee, Covertry and Birkenhead, 2005; Lorrains, Cowlshaw & Thomas, 2011; and

Rizeanu, 2012). The findings of the present study suggest that some participants experienced anxiety associated with the consequences of their gambling behaviour.

Although diagnosis was not relevant to the present study, it is significant to note the extent to which participants experienced the phenomenon:

... You feel sick; totally... you actually get so sick that the whole body goes into a pins and needles type thing...

...I would wake up and go gamble right through until 6 o'clock. When its half past 6 I would rush home, change and get the kids to school. Un-slept, done like that for ages. I was like burned out...

... I suffer terribly with anxiety...I often get panic attacks...

Sense of Depression

Ralyu and Oei (2002) found that depression is linked to pathological gambling; however, it is not known whether depression is a result or cause of pathological gambling. Dannewitz and Weatherly (2007) found evidence that depression was not associated with gambling in a sample of depressed and non-depressed subjects.

Kessler, Hwang, LaBrie, Petukhova, Sampsons, Winters, et.al., (2008) further suggest that those that experience a gambling disorder are four times more likely than those who do not, to suffer from a mood disorder. Depression, suicidal ideation, attempts and completed suicides are more common in pathological gamblers than in the general population (George & Murali, 2005).

The theme titled *Sense of Depression* emerged as participants described a depressed or 'low' mood that they had experienced as a result of their gambling engagement. The severity of this sense of depression varied amongst participants:

I didn't eat, that's how bad it was... When I looked again, I was - I just had a huge breakdown, um, I actually did think of ending my life once or twice because it all over-consumed me, I was just, I wasn't going anywhere. My life wasn't going forward; it was just a huge heart break...

At the end of the day I will get all of my money and go and gamble. I will walk home because I do not have money for transport... I can't buy things for the next day. The next two or three weeks I felt like I was dying, but like it's a long slow process of dying. ...maybe tomorrow I will win a lot again. At the end of the day, you find out that it is ten years of nothing; just waiting...no meaning...my life had no meaning...

South African related statistics have found a clear relationship between depression and excessive gambling behaviour with up to 42% of respondents of one study reporting mild depression (Nzimandu, Louw, Mannya, Bodasing & Ludin, 2010). It is evident that some participants in the present study experienced varying degrees of depression as a result of gambling. One participant experienced victim mentality and mental pain: *It's sore. It takes a long time before you can get away from it... It does take away everything that you really think you are.* A loss of identity and sense of 'self' was indicated here.

Substance Abuse

Nzimandu, Louw, Mannya, Bodasing and Ludin (2010), report that 18% of problem gamblers in South Africa are at risk for comorbid alcohol abuse. Petry, Stinson and Grant (2005) further identified that the most prevalent co-morbid addiction is that of gambling and alcohol abuse.

Findings from the present study complement previous research in the area of substance abuse as a comorbid concern. Two participants experienced alcohol abuse and another participant abused prescription medication:

With alcohol or whatever; I would often sit on the race day, have a few drinks, now once you have had a few drinks you know you will get confident...But now the horse gets beat but now you want to drink to forget about that. Next day, same thing happens...

... I went to the doctor and he put me on medication and then I got addicted to the medication... I got addicted to the medication and gambling.

I think I drank too much because it's, that not a good feeling of losing a lot of money. It's not... cause at the end of the day I was drinking a lot...At some stage we lost almost thirty grand and yet we would go drink ourselves like fools...You wake up and don't remember...

Interpersonal Consequences

Problem gambling can have significant negative effects upon interpersonal relationships. Many problem gamblers report intimate relationship and family difficulties (Dowling, Smith, & Thomas, 2009).

Ferland, Fournier, Ladoucer, Brochu, Bouchard and Paquet (2008) conducted an explorative study and determined that on almost all occasions, the spouse, rather than the gambler displayed concerns regarding the consequences of their partner's gambling. The theme of negative relationship consequences emerged in the present study:

I had small children. I was wasting time, missing soccer matches, leaving kids waiting at school...

My divorce happened all because of the gambling...

My wife hated that I used to go there... It is a big punishment for her...She was like- like a nervous wreck...I was very cruel to my wife in that way...

This is a general theme as no specific negative relational factors emerged. Manipulation, disappointing family members and bankrupting other people were some of the negative relational consequences that emerged from the conversations with participants.

Deceit

Sobrun-Maharaj, Rossen and Wong (2012) highlight conflict and neglect as encompassing elements in excessive gambling. Deceit and dishonesty emerged as a factor in relational conflict and neglect:

I am a very manipulative person. I mean gamblers are liars and manipulators... I would start an argument so that I can storm out of the house... I would create all sorts of reasons. I was very manipulative – all to go and gamble...

I never used to tell my husband when I had lost; I would tell him when I would win. I would not tell him every time I had been to the casino. I was lying... A few days later – “I know when you have been to the casinos, because you are smelling of smoke and you are not smoking” ...

Bronfenbrenner (1979) argued that any understanding of human development must consider the context in which the individual functions. According to this relational approach, deceit and the consequent impact on significant relationships could create a state of perpetual change in the relationships that participants have with significant others in their lives.

Financial Consequences

Morasco, Weinstock, Ledgerwood and Petry (2007) state that the most frequently reported negative consequence of gambling, is money. The primary financial problem that gamblers face is debt, which often leads to bankruptcy (Delfabbro & LeCouteur, 2009; Grant, Schreiber, Odlaug, & Kim, 2010).

Severe financial consequences emerged as a theme in the current study:

... I had to go to the bank and uh, uh, lie to get some of my investments...

I can't get a bond because of all my black listing's... I have got to rent, I cannot finance a vehicle but I can buy cars cash...

... I would win R200 000 today, next week Tuesday/Wednesday I wouldn't have money to put petrol in my car, all gone...I have lost houses, I lost businesses... I landed up being arrested for it, but not being jailed. They gave me the opportunity to pay the money back...

THEME FIVE: INTERVENTION

Participants expressively shared the experience of restricting gambling behaviour. Some participants self-excluded themselves from the casino environment. Two participants described an instant decision to self-exclude themselves. It was noted that the role of religion emerged as a factor that supported self exclusion for many participants. Furthermore, this theme depicts a change in participants' perception towards gambling.

Self-exclusion

Ligthelm and Jonkheid (2009) found that 70% of females and 56% of male South African gamblers abstained or restricted themselves from gambling. The results of the present study found that all of the females and two out of three male participants excluded themselves from the casino environment. Nelson, Kleschinsky, LaBrie, Kaplan and Shaffer (2010) concluded that most gamblers that excluded themselves for life; reduced their gambling and had significantly fewer gambling-related problems. The following was expressed by participants:

I phoned my aunt and I said "I need your help" ...she came to the house and asked "what is it"? I said "I need you to come with me... I am completely addicted to gambling, it's a major problem and I need you to come with me to the casino" ... We got out of the car and then I walked in and started shaking, it is horrible... They interviewed me... I told them everything... I banned myself for life... I signed the paper work so I'm not allowed to gamble anywhere around South Africa...

... I banned myself for a year, and then it is too much... I banned myself in May... for life...

... I self-excluded myself from the casino many times...since then it is the third year that I have not been to the casino...

The findings suggest that some participants banned themselves and thereafter did not gamble while other participants banned themselves several times. One participant displayed a process of contemplation in changing her gambling behaviour. The participant read stories and articles of individuals that had stopped gambling and it appeared that Prochaska and Di'Clemente's (1982) *Contemplation Stage* of the Transtheroretical Model of Change was activated. The participant thereafter made a conscious decision to ban herself from the casino environment for life.

Role of Spirituality

Piedmont (2001) suggests that a large body of evidence indicates that personal religiosity serves to reduce various forms of prescribed activity. As much as religion may play a role in the promotion of gambling behaviour, it may also give people strength to recover from problem gambling (Clarke, Tse, Abbott, Townsend, Kingi & Manaia, 2006). Spiritually emerged as a factor that influenced participants gambling behaviour in a manner that reduces or restricts the behaviour:

... Talking to Him.. asking Him.. praying for this uh, uh problem to go away...I am clear with God because I've repented.

I still remember a lady in the casino. I went in there and she sat there and said 'this is not a place of prayer; this is not a place of prayer'. She was hitting it and she said, 'this is not a place of prayer, I shouldn't be here'. I still thought, why does she say that? You know... but she is talking to me as much as herself...

You stand there and pray, "Lord, please help me", I need the money now, because I am losing too much money. But, of course, God's not even in that place...I want to be serious with my Christian

walk to God... I promised Him I won't do it... Thank goodness I have gone back strongly on my faith to build myself up...

... I actually prayed a lot, I really prayed a lot about it and I started going to cell group...

Several participants described their intervention as revolving around themes of repenting and 'giving up to a higher power'. This may have provided participants with a source of support in overcoming their maladaptive gambling behaviour.

Post addiction experience

A phenomenological approach enabled the participants to reflect upon their post addiction experience.

Positive thoughts

There was a change in perception for each participant – gambling was no longer the fun recreational activity they first thought it to be. Each participant described how they felt about gambling and their experience of addiction. Participants described the feelings associated with the post-addiction experience as an achievement that they were able to be proud of. In their own words, participants stated:

Feeling of accomplishment...

...It's nice to be honest, finally...

...I feel cleansed...

Positive feelings such as pride, relief, experience of accomplishment and feeling cleansed may indicate that participants experience a reprieve from gambling – a time to be honest and detach from the tangled ropes of the maladaptive behaviour.

Negative thoughts

As each participant conversed about the experience, they shared the negative feelings associated with the experience of maladaptive gambling behaviour:

...I judge myself very heavily... I get angry at myself... and then you feel ten times worse than you are...I am so scared of failing again, that's always at the back of my mind...

...the feeling is self-loathing...

I don't actually like to think about it too often, because it's quite icky...

The findings suggest both internal and external responses to the aftermath of problem gambling. One participant shared that they felt 'icky', when being asked what 'icky' felt like the participant repeated that they did not like to think about it. This response suggests that perhaps some participants are more comfortable than others when discussing the negative feelings or emotions that are intertwined with the phenomenon of a gambling addiction.

Current Perception of Gambling

Van Manen (1990) describes phenomenological research as the study of lived experience in which the essence of an experience has been adequately described in language so that the description re-awakens the lived meaning or significance of the experience in a fuller or deeper manner. This section, focusing on the perception of gambling re-awakens the lived meaning of the experience by participants.

Participants described gambling in a different light than originally expressed. Originally, participants had portrayed gambling as a fun social activity. Later on in the conversations, the experience of gambling had been described in a negative light, reflecting the depth of the participants' change in perception. Participants reflected a raw emotional connectedness to the experience as a whole.

The words below reflect the magnitude of the change in perception, one in which the participants described in their own words. In generalising the post-addiction experience for the participant group as a whole, the researcher extracted a core concept from discussions and in so doing, attempted to demonstrate the changed perception toward gambling:

...Like a big deep dark hole...

...Dirty, dark secret...

...My dark side...

...It's like a monster...

It is the opinion of the researcher that a change in perception occurred. Participants' response toward the aftermath of their gambling behaviour displayed acknowledgment of the significant consequences of their gambling addiction.

SUMMARY OF FINDINGS

The findings of this study have been presented according to the key themes that have emerged through the conversations with participants. The findings illustrate the participants' experience of gambling. The discussion of the findings emphasise a recreationally 'fun' attraction to the activity of gambling, highlighting the influence that media may play upon one's decision to gamble.

Emphasis is placed on the need to gamble to experience excitement while simultaneously escaping life stressors. Participants expressed the craving and urge to gamble which was evident as their gambling behaviour progressed. Thus, for a brief moment, the findings create a clinical impression of a gambling disorder; the willingness to continue gambling while enduring periods of psychological discomfort in order to obtain the positive outcomes such as excitement and escape from stressors that may be causing psychological discomfort.

The participants' gambling behaviour reflects a desire to capture an element of secrecy and enjoyment. One participant fittingly describes the phenomenon as an *affair*. The secrecy of a very personal relationship between the individual and their gambling activity is suggestive of a transient emancipation. The realm of reality of the participants' life beyond gambling may disappear and as such, in that moment, anything is possible.

As the participants' view their gambling behaviour as progressing, an increase in the engagement sets in and a craving for gambling occurs through the 'urge' and 'hunger' that draws the participants' to the environment. Control subsides as participants find that in other aspects of their lives they exhibit control, gambling is however their Achilles heel. Money is won; at times large sums of money are won. Participants play with the winnings until they find that they do not have any money left. Chasing behaviour occurs in an attempt to win back that which is lost. Money is borrowed, money is spent, and money is won. Money no longer has the value that it traditionally may have held prior to fixation with gambling.

Participants find that gambling has a significant impact on many aspects of their lives.

Consequentially, participants' experience health concerns including anxiety, depression and substance abuse. The following quote drawn from a conversation with one participant describes the profundity of the experience: "*At the end of the day I will get all of my money and go and gamble. I will walk home because I do not have money for transport... I can't buy things for the next day. The next two or three weeks I felt like I was dying, but like it's a long slow process of dying. ...maybe tomorrow I will win a lot again. At the end of the day, you find out that it is ten years of nothing, just waiting...no meaning...my life had no meaning...*"

The aspect of meaning in life and the journey within it allows the researcher to consider that through gambling, a sense of safety and comfort is experienced. By experiencing comfort, enjoyment and escaping from the stressors that one may be facing further opens the door to a hypothesis that

perhaps the individual may be spending less time and effort in the world beyond gambling.

Gambling is the escape and yet gambling is the context that the participant perhaps eventually wants to escape from.

Most participants banned themselves from the environment and experienced a sense of achievement, feeling cleansed and a sense of pride in their decision. As much as the positive outcomes were expressed, participants also shared the pain that the experience had left. Embarrassment, self-loathing and resentment were experienced. Some participants highlighted the wounds beyond that which they inflicted upon themselves. Wounds such as the experience of being stigmatized by friends and family, and finding that they cannot be removed from the 'box', or the 'label' of a gambling addict.

Ultimately, personal choice was the factor that assisted participants to exclude themselves from the gambling environment. Spiritually, participants shared of their faith and how their relationship with a higher being assisted in the restrictive process. The gambling experience evoked within each participant a descriptor. This personalised descriptor illuminated each participant's discovery of how gambling had become a ritual that was regarded as *dirty, disease like, a monster, their dark side, a trap* and *a deep dark hole*. Each adjective describes the experience profoundly, demonstrating that the phenomenon had catastrophic consequences for each participant that it touched.

CONCLUSIONS AND RECOMMENDATIONS

Through a phenomenological approach, an understanding of the lived experience of six South African problem gamblers generated five broad distinctive themes, namely, initiating factors, reasons for gambling, description of the behaviour, the associated intra and interpersonal consequences and intervention. The findings of this study have highlighted overlapping and complementary findings with previous research findings.

Commonalities were found in the social introduction to gambling by friends/peers (Neighbors, Lostutter, Crouse & Larimer, 2002; Reith & Dobbie 2011; and Tarras, Singh & Moufakkir, 2000), thereafter as a reason for gambling, both enjoyment (McDaniel & Zuckerman, 2003; Neighbors, Larimer, Geisner & Knee, 2006) and escape (Blaszczynski & Nower, 2002; Lightsey & Husley, 2002; Sharpe, 2002) arose as emerging themes that complemented previous research findings. Participants experienced a lack of control that was viewed in progressively increased trips to the gambling establishments, the experience of 'craving', playing back of winnings and thereafter the chasing of losses. As with previous research (Delfabbro, 2006; Naish, 2001) participants experienced a loss of time and experienced depersonalisation and experienced rationalisations and having fantasies of winning. As behaviour progressed, negative sequelae arose.

Participants experienced health concerns in the form of anxiety, depression and substance abuse. In addition, participants experienced negative interpersonal relational consequences as a result of deception and financial difficulties. Finally, self exclusion, spirituality and a change in perception were themes that emerged from the present study. These themes provided important indicators for intervention or containment of a gambling disorder.

The findings of this study have highlighted avenues that may require further research. Firstly, the significance of religion or spirituality as a construct in the intervention process should be further explored. Secondly, the aspects of escapism, time loss and depersonalisation were found to have been experienced by most participants in the study. These topics in essence overlap and require further research. Furthermore, terminology consensus regarding excessive gambling is further required and the justification for particular terminology and implications thereof upon diagnosis.

Within the present study it was established that males had met more of the criteria for a gambling disorder than female participants. It would be beneficial to conduct further research to test the

hypothesis that males are more likely to meet a greater number of diagnostic criteria for gambling disorder than females.

It is recommended that in future revisions of the DSM, the inclusion criteria introduce that of an increase in gambling behaviour occurs. It is implied within the context of other criteria, but is not presented as a diagnostic marker for the disorder. It is further recommended that research be undertaken regarding the 'craving' experienced by gambling disordered individuals and the physiological and psychological components of the phenomenon. This symptom is not currently included in the current revision of the DSM and it may be warranted as beneficial for inclusion in future revisions if literature is accumulated to support the justification thereof.

Finally, it is recommended that a study be conducted on a larger scale, taking into account different races, cultural backgrounds and treatment needs of the participants. Phenomenological research presents a personal account of the experience or phenomenon and therefore may contribute to the development of contextually appropriate intervention and awareness programmes for problem and pathological gamblers in South Africa.

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Appendix 1: DSM-IV-TR (APA, 2000) Diagnostic criteria for Pathological Gambling

The current criteria for diagnosing a gambling disorder is presented as (A) persistent and recurrent maladaptive gambling behaviour as indicated by five (or more) of the following:

- (1) is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)
 - (2) needs to gamble with increasing amounts of money in order to achieve the desired excitement
 - (3) has repeated unsuccessful efforts to control, cut back, or stop gambling
 - (4) is restless or irritable when attempting to cut down or stop gambling
 - (5) gambles as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression)
 - (6) after losing money gambling, often returns another day to get even ('chasing' one's losses)
 - (7) lies to family members, therapist, or others to conceal the extent of involvement with gambling
 - (8) has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling
 - (9) has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
 - (10) relies on others to provide money to relieve a desperate financial situation caused by gambling
- B. The gambling behaviour is not better accounted for by a Manic Episode.