

GAMBLING AND AFFECTED OTHERS ACCESSING SOCIAL SUPPORT

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An exploratory study of the impacts of gambling on affected others accessing a social service

Jason Landon, Elizabeth Grayson, and Amanda Roberts

¹ Department of Psychology, Auckland University of Technology, Auckland, New Zealand, ²
School of Psychology, University of Lincoln, Lincoln, United Kingdom

Corresponding author:

Jason Landon

Department of Psychology

Faculty of Health & Environmental Sciences

Auckland University of Technology

90 Akoranga Drive, Northcote

Auckland 1142,

NEW ZEALAND

jason.landon@aut.ac.nz, +64 9 9219999 extension 7894.

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Abstract

Problem gambling affects many people beyond the problem gambler themselves. Help-seeking is relatively rare among affected others, especially those in lower socioeconomic communities. However, these affected others are sometimes in contact with other support agencies. The present research interviewed 10 people seeking support through a social agency who reported being affected by someone else's gambling. Data from semi-structured interviews were analysed using an inductive descriptive approach to identify three themes: 1) This is ugly; 2) It affects everything; and 3) I just do it by myself. The results highlight the normality of harmful gambling across generations, the lack of any positive aspects to gambling for affected others, and the impacts on families and children. Specific gambling-related help seeking remains rare, however the opportunity to provide support, information and advice on approaches to coping to affected others as they contact social services is highlighted.

Keywords: problem gambling; affected others; help seeking; social support; coping; qualitative

Affected others accessing a community social service

It is well accepted that harmful gambling can impact many people beyond the gambler themselves. Estimates suggest seven or more people in addition to the gambler are adversely affected (Productivity Commission, 2010). The impacts on affected others (AOs) are broad, and include financial issues, mental health impacts and reduced quality of life (Dickson-Swift, James, & Kippen, 2005; Holdsworth, Nuske, Tiyce, & Hing, 2013; Kalishuk, Nowatzki, Cardwell, Klein, & Solowoniuk, 2006), relationship issues and interpersonal conflict (Dickson-Swift et al., 2005; Dowling, Smith, & Thomas, 2009; Hodgins Shead, & Makarchuk, 2007a; Holdsworth et al., 2013; Kalischuk, 2010), and general confusion around how to address or manage the issues. Research has generally focused on intimate partners or children of problem gamblers (e.g., Holdsworth et al., 2013; Patford, 2008; 2009), and most often those who have specifically sought professional support for the problem gambling (e.g., Hodgins et al, 2007a; Hodgins, Toneatto, Makarchuk, Skinner, & Vincent, 2007b; Rodda, Lubman, Dowling & McCann, 2013) or those responding to recruitment advertisements (e.g., Dickson-Swift et al., 2005; Holdsworth et al., 2013).

Free and confidential problem gambling treatment services are available nationwide in New Zealand both for gamblers, and family or AOs. Estimates suggest that 0.7% (23,504) of New Zealand adults are current problem gamblers, and a further 1.8% (60,440) are moderate risk gamblers (Abbott, Bellringer, Garrett, & Mundy-McPherson, 2014). In the year between July 2014 and June 2015 problem gambling services in New Zealand assisted 6,784 gambler clients and 5,957 family/AO clients. Thus, in the context of prevalence rates, help seeking by those affected by gambling remains low in New Zealand, similar to other jurisdictions (Slutske,

2006). Research in New Zealand has suggested multiple barriers to help seeking, but pride, shame and denial are the most commonly cited by problem gamblers not seeking help (Pulford, Bellringer, Abbott, Clarke, Hodgins, & Williams, 2009). Similar results have been reported in a qualitative study of AOs who had sought help for a gambling problem (Hing, Tiyce, Holdsworth, & Nuske, 2013). More recently research has confirmed that people with gambling problems perceive severe stigma both from others and themselves (Hing, Nuske, Gainsbury & Russell, 2016). Secrecy was the main coping mechanism reported, and this combined with shame hindered disclosure and help-seeking (Hing et al., 2016).

Given the range of harms caused by problem gambling, and the inequitable harm experienced in low SES communities (e.g., Abbott et al., 2014), those seeking social support from community agencies are more likely to be affected by harmful gambling. As a response to this, some social agencies in New Zealand such as The Salvation Army Community Ministries routinely screen clients presenting for social support for whether they are affected by someone else's gambling. When clients report they are affected by someone's gambling details of free and confidential problem gambling services are provided. Informally, these clients seldom access problem gambling services, and only intermittently have contact with the community social services.

Thus, little is known about those that are affected by someone else's gambling who do not make contact with formal gambling services. This is particularly the case with very vulnerable populations such as those seeking support from community agencies or the homeless. Recent research with homeless populations has confirmed elevated rates of problem gambling (Sharman, Dreyer, Aitken, Clark & Bowden-Jones, 2015) and a low awareness of gambling as a health issue and support services that are available for gambling (Sharman,

Dreyer, Clark, & Bowden-Jones, 2016). Therefore, there is a need for exploratory research around the impacts of gambling on gamblers and AOs in a range of vulnerable groups. In New Zealand problem gambling risk is elevated among Māori (the indigenous people of New Zealand) and Pacific populations (Abbott et al., 2014) and those populations are also over-represented in lower socio-economic communities.

Relative to problem gambling prevalence, both groups are underrepresented in help seekers in New Zealand, and even more so in family AO help seekers. At first glance this seems inconsistent with the collective nature of these ethnicities and their collective cultural beliefs (e.g., Fairburn-Dunlop & Makisi, 2003; Shore, 1982; Tamasese, Peturu, & Waldegrave, 1997; Walker, 2004) as a simple conclusion might be the expectation of increased help-seeking from concerned others. However there are complexities around support seeking and provision in these groups (e.g., Perese, 2009, Walker, 2004), and more generally barriers to both gamblers and concerned AOs seeking help for gambling issues (Hing et al., 2013; Pulford et al., 2009). For Māori specifically, Walker (2004) outlined the importance of exploring issues in the context of the wider whānau (family). For Māori the centrality of the whānau and community is often inconsistent with the general focus of health services on individuals (e.g., Metge, 1995; Walker, 2004).

Thus, the present research is an exploratory qualitative study of AOs accessing community social support via The Salvation Army Community Ministry in South Auckland for issues other than gambling. The focus was on the impacts of gambling on them and their families, and the approaches they used to coping with any negative effects. This population has transient, intermittent contact with social agencies so little is known about the impacts of gambling on them, and they are unlikely to be aware that gambling is a health issue with free

and confidential services available. Clients accessing the service are largely of Māori and Pacific ethnicity due to its location in South Auckland where Māori and Pacific peoples are overrepresented. Given the nature of these client and their needs, short exploratory interviews were conducted on site after their consultation with a social worker.

Method

Participants

Ten participants took part and are referred to by gender appropriate pseudonyms to protect their identities. The participants were recruited as they presented for social support and routine screening identified them as being affected by someone else's gambling. The affected other screening simply asked whether they were or are being affected by someone else's gambling, the nature of the effects, and what support might be helpful to them. The Lie/Bet questionnaire (Johnson, Hammer, Nora, Tan, Eistenstein, & Englehart, 1988) was also administered with supplementary questions around possible additional support.

The interviewer was on site for once a week for two hours across three weeks in June and July 2016. In that timeframe fifteen consecutive potential participants that had answered yes to being affected by someone else's gambling were invited to participate with five declining. Those that declined all cited other commitments. Through June and July 2016 300 clients were interviewed by The Salvation Army Community Ministry in South Auckland, with 122 (41%) screening positive for being affected by gambling (119 by someone else's gambling and three their own). These data were consistent with the overall 2016 figures in which 41% (880 of 2170 clients) screened for gambling harm.

Demographic details of the participants are provided in Table 1, eight of the 10 participants were female and nine of 10 identified their ethnicity as New Zealand Māori (7 solely, and 2 mixed). Five of the participants cited multiple gamblers affecting them, and most were close family members. Three of the participants indicated that they had been gamblers in the past.

Procedure

Interviews were conducted immediately after the participant's session with a social worker as consultation suggested that booking interviews for later dates be ineffective given the generally unpredictable and transient nature of clients' engagement with services. Semi-structured interviews were undertaken which focused on the participants experiences of gambling (See Appendix 1). An interview schedule was developed to guide the process, and both positive and negative experiences of gambling were explored. Five broad questions were the focus: interviews commenced with a general question about the place of gambling in the participants' families and the effects of their identified other(s) gambling on the participant and their family. In both these cases positive and negative aspects were asked about. The interviews then focused on the participants' approaches to coping and support needs.

Given the participants' were interviewed as they sought support from a social service and were not pre-booked, the interviews were short, lasting approximately 20-30 minutes, and only basic demographic information was collected. Participants were free to stop at any stage, and were thanked for their time with a supermarket voucher. The research was approved by the authors' institutional ethics committee (approval number 16/171).

Analysis

The data were analysed using a thematic analysis (Aronson, 1994). The analysis was descriptive (Sandelowski, 2000) and inductive (Gibbs, 2007; Saldana 2016) given the exploratory nature of the research. The approach was adopted as it can be largely independent of any epistemological framework (Braun & Clarke, 2006) and thus involve minimal interpretation as the objective was to summarise and present the participants' experiences as they described them (Sandelowski, 2000).

The data were organized into themes using the analytic steps outlined by Braun and Clarke (2006). Briefly, the steps moved from familiarization via reading, re-reading and annotating the transcripts, through generating initial codes, developing and modifying them in the context of the entire dataset. Finally, initial themes with similar codes were identified and refined for presentation. Throughout, the software package NVIVO v.10 (QSR International, 2013) used to support the organization, coding and identification of themes. Direct quotes were used, where possible, as theme titles to emphasize the content of each theme.

Results

Three superordinate themes, one with sub-themes, were identified in the data: 1) "This is ugly"; 2) "It affects everything" (Sub-themes: Financial impacts; Intimate relationships; Family relationships; Psychological impacts); 3) "(I) just do it all by myself".

This is ugly.

This theme highlights the universally negative discussion from participants around the impact of gambling on their lives. None of the participants described positive aspects of

gambling, while frustration, anger and sadness were all common. Two participants used the adjective 'ugly' to describe the situation.

“It wasn't until I got older to understand the situation and I thought 'oh this is ugly'”

(Huhana)

Several noted how the gambler themselves often seemed less affected than the participants, or that the gamblers seemed unaware of the broader impacts of their gambling.

“I'm just sick of them going through the same thing and bringing me down as well”

(Barbara)

The participants all discussed inter-generational aspects of harmful gambling in their families, however the inter-generational aspects were varied. Five argued that harmful gambling was passed down across generations.

“It's just come down through the generations ... I call them hard core gamblers. The whole family” (Eric)

“I can't help but feel that it's come down through generations like you know a bad habit” (Huhana)

Early experiences were recounted that the participants cited as influence in their own gambling.

“As I started growing up I just see where she was going ... I would (be allowed to) put in some money. I'd put in like \$2 and think ten bucks was the massivest (sic) win ... so it started off little” (Georgia)

Similarly, non-gamblers cited familial influences for their non-gambling behaviour, often this was because of the effects they had seen in their family.

“It put me off when I was 14 ... it’s a lot of money oh thousands over all these years”

(Eric)

“What turned me off gambling was just watching my grandmother lash out” (Huhana)

Several participants cited gambling behaviour as being established in family culture, to the point where individual responsibility was diminished.

“I don’t blame her (sister) for that because that’s what my mother used to do when she was younger ... even my grandmother” (Huhana)

It’s just the way things are. The norm I’d say” (Eric)

Several went further to describe the obsessive like features of some gambling behaviour.

“She’s obsessed with the machines” (Jackie)

“Oh but the pokies on the mind. Pokies on the mind” (Colin)

Several participants explicitly mentioned the addictive like qualities of gambling.

Several went further and explicitly mentioned addiction, or cited similarities with drug issues and cravings.

“It’s like a drug sort of thing. Like an addiction” (Iris)

“It’s always that winning that’s kind of like biting at them all the time” (Colin)

Participants described a frustration or helplessness around difficulties addressing the gambling issues with the gambler.

“You try and tell her that’s not right for her and before I know it I’m getting my head bitten off” (Huhana)

They also described frustration around dishonesty in the gamblers’ behaviour and the efforts they perceived were wasted in trying to support them.

“A lot of my family members have been here and they have been to the Salvation Army and City Mission. But I just think it’s a waste of time ... a waste of time for Salvation Army to help them. They say they haven’t been back gambling but I see that they have been” (Barbara)

“We are all trying to help you but you don’t want help. You can’t stop someone who doesn’t want to stop” (Faye)

It affects everything.

The participants described effects of the gamblers’ behaviour in many aspects of their lives.

“Yeah it affects everything and you’re sitting there trying to smile in front of your kids and carry on. It just drains you” (Faye)

While there was agreement on these wide ranging impacts, most of the discussion focused on four specific areas of their lives: financial impacts, intimate relationships, family/social relationships, psychological impacts. In all these areas the participants frequently expressed a degree of frustration and/or sadness when describing the impacts.

Financial impacts.

All participants described substantial financial issues as a result of gambling in their family. These were in the context of all participants being resident in low socioeconomic neighborhoods.

“She (grandmother) sold the home. I had to move to mum’s because I had nowhere else to stay. She sold it for 180 grand. That was gone in a few months. (Jackie)

“What your baby gonna end up on a mattress or the ground ‘cos you’re gone and the casino has taken all your furniture to pay for all your bills? (Barbara)

“(I) used to think someone was taking our furniture but really it’s just my mum selling it I suppose for money because of her addiction” (Jackie)

A large amount of frustration and distress was evident when discussing significant family assets being lost as with Jackie’s situation, but beyond that most participants described the gambler spending most of their wages or income support on gambling.

“I’d say about 60% of his (father’s) pay would go on horses ... it’s just a waste of money ... they can waste up to \$500 a night. It’s a lot of money oh thousands over all these years” (Eric)

All participants reported that the gamblers in their lives repeatedly attempted to borrow money. Beyond that some reported the gamblers engaging in more deviant behaviours to address the financial impacts.

“... what pisses me off is when the use their kids to ask for money... and I’ll ask the kids what does mummy need it for what does daddy need it for? And they’ll tell me they got to go to the machine to win us some more money Aunty”. (Barbara)

“My sister took my car and tried to sell it to one of my mates...I’ve had them trying to get loans and using me as guarantor without me knowing”. (Eric)

“They’ve (gambling family member) been in my house saw all what was in my house and took it”. (Barbara)

Intimate relationships.

Both participants who had ex-partners who were gamblers experienced physical and/or verbal abuse. Both discussed their partners abandoning them for their gambling pursuits at various stages, and identified gambling as a precursor to arguments and sometimes violence.

“That’s how a lot of arguments started then um violence towards me ... when it got really bad he put me in the ICU (Intensive Care Unit)” (Di)

Again, both participants discussed the impacts on children, and the importance of their children in maintaining the relationship.

“I just managed because of the kids, I think; it was the kids that kept me going and kept me strong” (Di)

However, both relationships were unstable, following a cyclical pattern.

“He’ll (ex-partner) come back with shopping for the kids and then the kids are happy then back to the same thing again ... I left him here but my kids were crying for their dad and then he’s on the phone crying to them and it made it worse, so I brought them back”. (Faye)

“This is the fourth time I’ve left him but I’ve always gone back to him”. (Di)

Whilst not directly affected, another participant reported that six of his siblings’ relationships had ended with gambling issues being a central factor.

“Well like my sisters’ and four of my brothers’ marriages fell apart because they spent all the money like pawned stuff off and all that” (Eric)

Family relationships.

A broad range of impacts on immediate and more extended family was discussed. The impacts on families were frequently described in terms of their effects on children. All 10 participants expressed concern about the welfare of their children, or the children of a family member or friend.

“I’m just worried about my mokos (mokopuna - grandchildren)...the way she (daughter) treats those kids, I don’t like it”. (Aroha).

Nine of the 10 participants described instances of child abuse or neglect that they associated with gambling. This was most commonly children being left unattended while the gambler gambled (five cases) and one participant reported his sister leaving her children with him for three days. Where violence was discussed, it was often from their own childhood.

“My nana would give me a hiding, she got you know lost her temper...I did get a few donks from my grandmother for no reason” (Huhana)

And long-term consequences were mentioned.

“I have flashbacks and understanding now I used to think she didn’t care about us because she used to spend our money, didn’t feed us...and I think about it now”. (Jackie)

One participant described a violent environment she linked to gambling that her grandchildren were currently in, and her attempts to intervene.

“He (daughter’s partner) treats my moko like shit...my daughter lives next door to me and I used to hear my moko cry and I’d go running over kicking the door...nana he hit me...I said don’t you ever hit my moko like that in the head” (Aroha)

Additional concern was frequently expressed surrounding children missing out on necessities.

“I’ve got to go out and find food and do everything like that...’cos we’ve got no money...my kids had nothing in the house”. (Faye)

“Every week I was going to (a food bank) to get food parcels for the kids” (Di)

There are times when she hasn’t had any money and she’s used all her money at the pokies and I’m stuck with her children ‘cos she can’t afford to feed them”. (Huhana)

Broader familial impacts were highlighted by the extreme case of the participant whose grandmother sold the family home, the effects on the extended family were profound as the home was a focal point for family life.

“She sold that and it sort of like it broke up the family...because that house everyone would go there for Christmas (and) New Years, that was the place to be, everyone was at Nan’s...but when she sold the house (there) was no family bond anymore...so the family started slipping apart...now it’s not really a family anymore” (Huhana)

One participant has a contentious relationship with her in-laws as they blame her for her marital break-up rather than acknowledging the role of her ex-partner’s gambling

“I kick him out then everyone’s yelling oh you just do it all the time” (Faye)

Another highlighted conflict among siblings which was related to their mother’s gambling.

“We used to fight a lot too amongst my brother and sister; we all [were] angry and unhappy...mum always used to go all the time” (Jackie)

Psychological impacts.

All participants describe varying degrees of stress, sadness, regret, worry and anger about the effects gambling had on them and their family. As was highlighted earlier, much of this centred on the impacts of gambling on children, but personal impacts were highlighted too.

“It is sad to see your family go through it”. (Barbara)

“My brother and sister used to fight, I think we were all angry and unhappy plus mum always used to go all the time...when she got money”. (Faye)

Some participants reported coping better, and stress or depression reducing with time, however this was not always the case.

“I just can’t sleep, everything just keeps going around...I went to the doctor and they gave me sleeping pills ‘cos I just kept getting headaches and I couldn’t sleep” (Faye)

In some cases the distress was a result of earlier impacts of a parents’ gambling on them

“I used to think she (mother) didn’t care about us because she used to spend our money, didn’t feed us...and I think about it now. I was one of those kids who couldn’t read and write yeah I wasn’t focused...I just worried about whose going to look after us yeah it was stressful actually”. (Jackie)

Much of the stress and worry described was attributed to worrying about children affected by gambling. But in some cases it was attributed to concern about the safety and welfare of elderly vulnerable family members who had gambling issues.

“She’s (grandmother) hardly ever home and now she’s like 75 and she still plays cards...she takes herself through the cold and then I start worrying about her ‘cos she’s like my mum she brought me up really”. (Huhana)

(I) just do it all by myself

The participants were asked about how they coped with the impacts of someone else’s gambling on them and their family. Two participants reported seeing a social worker specifically about issues related to someone else’s gambling, and one (Di) accessed support from a woman’s refuge, but the proximal reason for that was the severe physical abuse she was experiencing. Most reported not accessing any form of formal support for the impacts of gambling, when they did access formal support it was not for gambling issues as such, rather for emergency support such as food parcels to deal with an immediate crisis.

“Just do it all by myself like I go to people for help because I haven’t got anything to feed the kids” (Faye).

Once again children were cited as a central motivator for accessing support, and also a motivation for accessing internal resources to cope.

“I don’t know I just managed, everyone asks me how did you cope? I just managed because of the kids”. (Di)

For the most part this was indicative of the experiences of participants, they found a way to cope and generally this involved focusing on the importance of their children, or any children adversely affected by the gambling.

“I’ve even bought a cell phone for my nephew to ring me ... if you need Aunty you ring Aunty ... Mum and Dad gone you ring Aunty I’ll come and pick you up” (Barbara)

Despite the profound effects on them as outlined here, all 10 participants described efforts to help the gamblers or their families. This support ranged from loans, childcare, meals, homewares, and accommodation.

“I take her kids on holidays and try and feed them. I still do it. When I first met them they were skinny as”. (Jackie)

“they get shitty at me because they want money but I won’t give them money. I never did I would always go and buy things though”. (Barbara)

Helping behaviours were persisted with but in some cases participants became so affected by the ongoing distress that they began actively avoiding the gambler to protect themselves and their family.

“I try to avoid them a lot of the time it always leads to them asking me for money or if they can borrow my car”. (Eric)

For several participants this general avoidance progressed to completely cutting people out of their lives. One participant had to evict her gambling boarder, two permanently

separated from their gambling partner's, and two eventually cut off extended family members who continued to gamble harmfully and have impacts on them and their family.

“It's bringing me down and my family. So I kind of shut them out so they've stopped coming to me for help ... I can't tell them how to spend their money you know ... if they want to spend it on abandoning their kids when they are hungry they're crying ... someone else can fall for their crap ... I don't want to know later on that they're spending the money I gave them on gambling ... they got to learn on their own. Grown arse adults they should learn”. (Barbara)

Discussion

A large proportion of gambling related harm remains hidden. Help-seeking for gambling problems, both by gamblers and affected others, remains relatively low in the context of prevalence figures and related estimates of the number of others likely to be affected. The present research highlights the widespread and profound impacts harmful gambling can have on affected others. It also shows there is an opportunity to initiate conversations and provide support, even if transient, to groups of people severely affected by harmful gambling. Despite the severe consequences to them and the families, the participants were unlikely to seek any formal or informal support specifically for the gambling impacts affecting them. In contrast, they were often providing financial and practical support to the gamblers and more often affected children (Perese, 2009).

Previous research has identified shame to oneself or one's family, not seeing gambling as problematic, and wanting to solve the problem without formal help (Pulford et al., 2009) as barriers to help seeking in New Zealand help seeking and non-help seeking gamblers, and

similar psychological barriers have been identified elsewhere (e.g., Evans & Delfabbro, 2005; Hodgins & el-Guebaly, 2000; Rockloff & Schofield, 2004). The present research is novel in that people affected by gambling that are seeking, ostensibly, unrelated support were interviewed. Given the approach the sample was small, but it included a broader range of affected others than has been the case in related research (e.g., Dickson-Swift et al., 2005; Dowling, et al., 2009; Hodgins et al., 2007a; 2007b; Holdsworth et al., 2013; Kalischuk, 2010; Patford, 2008; 2009; Rodda et al., 2013), and whilst not representative it should be stressed that across a calendar year 41% of people screened in this agency reported being affected by someone's gambling. The participants described patterns of ingrained harmful gambling and its consequences across and within generations in their families. Despite the recognition of the ongoing problems, the behaviours seemed to have become normalized to an extent, and the participants were hesitant to discuss them within their family, often because of a likely aversive response, or worse.

A key issue explicit in many of the effects and behaviours discussed was the effects on children. The participants all reported stress and concern around the impacts of gambling on children, along with their own efforts to ameliorate the impacts on the children. Familial shame was hinted at, and has been discussed previously in a study of Samoan gambling (Perese, 2009). Perese reported families providing support to the gambler, including financial support, while keeping the problems private. In this largely Māori cohort related behaviours were evident, but largely directed towards supporting affected children. Despite significant issues with the adults who were gambling, substantial ongoing efforts were made to ensure the affected children could get support when needed. Some of the gamblers attempted to manipulate this situation by using their children to request financial support. This tactical use of children to secure financial

support was viewed very negatively by the participants, and caused additional stress, frustration and anger with resulting impacts on family relationships.

Given the substantial barriers it remains unlikely that affected others such as those in the present study will seek specific gambling-related support. Pulford et al., (2009) noted that even among help-seeking gamblers in their study, barriers to help-seeking were seldom identified without prompting. While the participants here were acutely aware of the issues and the impacts on them and their families, the general approach remained to cope and provide support as best they could. Given their relatively disadvantaged backgrounds they face a range of issues (without being prompted, alcohol, drugs, and violence were all mentioned by participants) and whilst it is clear gambling is amongst them, they remain busy coping with their day-to-day lives. The key point to note is that there is contact with health and social services, thus an important focus remains how to provide appropriate support, advice, and information to those affected.

Previous research has identified notions of wanting to resolve problems without help as being a prevalent view (e.g., Hodgins et al., 2000; Pulford et al., 2009) and the present participants' descriptions were consistent with this. The present results suggest a more passive but culturally appropriate form of support available through non-gambling agencies following screening could be potentially useful. These approaches would focus on self-help strategies and general advice or support, while being acutely aware of some potential risks around safety and interpersonal violence mentioned here and established in the literature (Dowling et al., 2016).

This specific localized approach could be coupled with broader attempts to normalize discussions around harmful gambling and its effects. The importance of children again is perhaps key here, at least in the present context. The present participants were mostly of Māori

ethnicity and the centrality of whānau to Māori is widely recognized. Whether the importance of children generalises to broader samples is a question for future research, but it is difficult to envisage it not being a widely held view. Continued efforts to de-stigmatize, or perhaps legitimize, problem gambling and more pertinently help seeking. Legitimizing concern over harmful gambling and its impacts on children and families might also stimulate productive discussions and further help or support seeking by affected others.

Given this is a qualitative project with a purposively recruited sample, the results are not without limitation, and should be generalized with caution. Given the vulnerable nature of the population investigated, the approach used had advantages over others. Noteworthy that a small percentage of clients reported their own gambling problems, both in the interviews and in the general screening. It is likely that stigma and perceived contingencies (despite assurances otherwise) in the context (the participants were seeking social and financial support) worked against disclosure of personal gambling issues. Overall possible that own gambling is under-reported, but no reason to question honesty of participants. It is noteworthy that no participants described any positive views on gambling, which is rare for those gambling, even problem gamblers (see e.g., Landon, Palmer du Preez, Page, Bellringer, Roberts, & Abbott., 2016). Finally, the sample was small and culturally specific, but representative of those experiencing harm in the community under investigation. Ideally further research would replicate this approach in other locations to investigate generality and the extent of cultural/ethnic variations influence peoples' experiences.

To conclude, understanding harms at community level is important to enhance service accessibility and availability. Whilst broader public health initiatives can generally influence awareness and help-seeking, services must be accessible and appropriate for the communities

they serve. The present participants seemed acutely aware of the problem but aside from providing support where possible and largely for children, were to a degree helpless. Active and passive provision of information and advice on gambling, coping with harms and how to approach problems is a useful step, along with developing ongoing relationships with clients and their families to facilitate more proactive support.

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Table 1

Demographic characteristics of participants

Participant	Gender	Ethnicity	Age band	Relationship to gambler(s)	Participant a gambler?
Aroha	Female	Māori	60-70	Daughter	No
Barbara	Female	Māori	40-50	Multiple unspecified family members	No
Colin	Male	Māori	50-60	Sister, friends	Yes
Di	Female	Māori/European	40-50	Ex-partner	No
Eric	Male	Māori/Pacific Island	40-50	Father, two sisters, four brothers	No
Faye	Female	Māori	30-40	Ex-partner	No
Georgia	Female	Pacific Island	30-40	Mother	Yes
Huhana	Female	Māori	40-50	Grandmother, mother, sister	No
Iris	Female	Māori	50-60	Boarder	Yes
Jackie	Female	Māori	30-40	Mother, sister, friend	No

Appendix 1. Indicative structure used to guide the interviews with participants.

For our research we have an interest in people that are affected by a person they know who is a problem gambler. Because you have said that gambling affects you we would like to chat to you about your experiences. We have a few questions in mind but what we are interested in is your experience (including feelings and opinions), so if you have things you wish to bring up please do so. If you feel uncomfortable talking about any issues, and do not want to answer a question that just tell us that you wish to pass. What you tell me won't affect you getting assistance at Salvation Army-Oasis now or in the future. I would like to record this interview on a digital voice recorder and I will make notes occasionally to assist me later, is that ok?

Indicative questions – participant led:

1. Can you tell me a bit about gambling in your family/whānau?
 - a. What sort of gambling do you and/or your family/whānau participate in?
 - b. Is gambling an important part of your family/whānau life?
 - c. What are the good things about gambling for you?
2. As you know, the questions you answered when you came to Salvation Army-Oasis indicated that you are affected by someone else's gambling.
 - a. Can you tell me how gambling has affected you and your family/whānau?
 - b. What are the positive effects?
 - i. Fun, family/whānau fun, money, winning [prompts if needed]
 - c. What are the negative effects?
 - i. Money, time, children, food, housing [prompts if needed]
3. I know that gambling can have impacts on people, and while it can be a struggle many people find ways to cope better with those effects.
 - a. Do you find you need support – if so, who do you go to?
 - i. family/whānau/friends, church, social workers, community groups [prompts if needed]
 - b. What do they offer that you find helpful?
 - i. Listening, money, childcare, food, faith [prompts if needed]
 - c. What other things do you personally do to cope with the gambling problems?
 - i. Time to self, time with children/ family/whānau, gambling, alcohol [prompts if needed]
 - d. What other support do you think would be helpful for you?
4. I know that in addition to gambling there are probably other problems in your life. How much of a problem is gambling for you?
 - a. How often do you think about it?
 - b. How often do you or your family/whānau miss out on something because of it?
 - i. Can you tell me about an example?
 - c. How often do you or your family/whānau benefit from it?
 - i. Can you tell me about an example?
5. What, if anything, would you like to change about your family/whānau's gambling?
6. Is there anything else you'd like to mention about gambling and its effects on you?

Thank you for your time today, I really appreciate you sharing your experiences with me, they are incredibly valuable, and we are very grateful.