



Moving From Social Gambling to Problem Gambling to Recovery: Contextual Factors

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RESEARCH CONTEXT

The aim of this study was to describe, interpret, analyze, and understand women's progression from social to problem gambling and their processes of recovery in order to more effectively respond to the needs of women who identify as problem gamblers. Understanding the process factors that impact women's gambling experiences highlights the potential points of service intervention and how to effectively link women to treatment services at these "critical" points. The experiences of 37 women who have recovered from problem gambling [Manitoba and Alberta] were documented. Knowledge translation will provide front line and direct service providers that serve women with practical, concrete information [workshops and manuals] aimed at gender-informed interventions for women who are, or who are at risk of, problem gambling.

RESEARCH QUESTIONS

How do women define social and problem gambling for themselves?

What are the specific contextual factors (individual, familial, cultural, community, policy, and structural) that women identify as influencing their movement from social gamblers to problem gamblers and to recovery?

How do women experience recovery from problem gambling? What can we learn about the help-seeking experiences of women who identify as problem gamblers at different points in time?

How can service providers facilitate greater help-seeking responses in women with problem gambling behaviours? What are the critical intervention points in this process?

METHODOLOGY

The conceptual framework for this project is based on the feminist and constructivist positions that women and problem gambling is an issue influenced by biological, psychological, social, cultural, and political factors. Constructivist grounded theory (Flick & Charmaz, 2017) is appropriate methodology for this study as it:

- a) views women as experts on progression from social to problem gambling,
- b) focuses on process of progression, rather than content,
- c) locates experiences of women's problem gambling and recovery in its social context,
- d) seeks to understand the meanings and actions around women's gambling and the effect on each other, and informs interventions to address the problem through data collected.

EMERGENT THEMES

ANTECEDENT FACTORS CONTEXT

Isolation or lack of connection in primary relationships

Family of origin, family of creation, partners, and children [when they moved away]. Not connected within community.

Threats to sense of safety, self and efficacy

Trauma response to overwhelming emotions and related experiences.

Accessibility to finances, places to gamble, and leisure time

Consciously structuring time to gamble, painful regarding securing money, and ensuring time away from home, and maintain secrecy of activities. Painful and calculating.

MOVING INTO PG

Taking the me time for self-care

Taking an active role in protecting one's own well-being and happiness, in particular during periods of stress. An act of wellness seeking.

Telescoping into PG

Immediate and rapid movement from social gambling activities to problem gambling, with myriad of complications and difficulties.

Secrecy

Gambling behaviours and consequences of gambling were maintained as secrets from family, social, and work networks. Extensive and elaborate efforts geared toward illusion of secret.

Escapism

The tendency to seek distraction and relief from unpleasant realities, especially by seeking entertainment or engaging in fantasy. Seeking numbing from stress.

PROBLEMATIC CONSEQUENCES OF GAMBLING

Uncovering of financial difficulties

The financial woes were noted as a wakeup call related to the severity of their gambling rather than the dissolving of their relationships. A lack of money was the catalyst for discovery.

Exposure - Being found out

Family members confronting, depressive episodes, suicide attempts and self-harming behaviours, and police involvement. External rationale for recovery rather than introspective changes.

Isolation when gambling

As part of the gambling behaviour, specifically the secrecy and shame, the women kept to themselves in the venue hence the consequential issues related to gambling were not detected. Furthermore, the isolation as gamblers did not provide the space to explore help-seeking processes with others. The women were often left with the unanswered question of what to do next.

BIG SUMMARY PICTURE

Recovery is forever

The participants realized over time that the recovery process is unique and ongoing. No happy ending. Relationships and finances can be repaired but the consequences are lifelong.

Multifaceted policies

Multifaceted policies must be put into place to highlight the potential negative consequences related to gambling and inclusive of women's experiences. This effort would require input from numerous sources, specifically levels of government, advertising sources, entertainment sites, therapeutic agencies, and professional training sites for treatment providers in order to [1] to ask about addictions and to [2] limit the suggested connections between gambling and glamour and the ability to achieve big wins. Realistic portrayal of real-life experiences and the potential risks and harms must be highlighted in advertisements and help seeking materials.

RECOVERY

External forces keep them in recovery and returning to recovery

The threat of financial ruin, marriage disintegration, rejection from family and friends as their executive function around choices made.

Recovery as a lifelong road

It's a choice every day. It is self-talk and a changing of behaviour repeatedly each day. It's checking in with their community supports and recognizing what they need to connect.

Recognition of gambling as addiction

Addictions knowledge assisted in understanding gambling issues and their multiple addictions. Self-identified as having an addictive personality.

Initial coping strategy

Problem focused when seeking out information. Contacted community resources, read gambling info, and other sources that should have been helpful.

Lack of treatment options

No connection to these women's lives, disconnect of style, options and meaningful resources. Treatments were not effective. Absence of gendered groups, mixed addiction behaviours, or modality of treatment hence not congruent with these women's lives.