

**Extended Summary**

# Interpretative Phenomenological Analysis of the Gambling Experiences of Problematic Gamblers\*

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## Abstract

Gambling disorders are psychological problems that are typically less investigated than substance use disorders; however, gambling-related issues are a concern for many individuals in society. Previous studies have revealed various psychological and external triggers to affect gambling. Lack of control, depression, relationship troubles, and decreased performance in work or school all have been reported to be associated with gambling problems. The current study aims to examine subjective evaluations of those engaging in gambling, from their first participation to the addiction phase and beyond. This study has been designed as a qualitative research. Three individuals diagnosed with gambling disorders have been interviewed using a semi-structured questionnaire, and the data have been analyzed using the method interpretative phenomenological analysis (IPA). The study's findings reveal eight superordinate themes (i.e., early onset, internal triggers of gambling, external triggers of gambling, loss of control, psychological impairment, social-life issues, hiding, and reclaiming control) and their subthemes. Some particular common processes (e.g., loss of control, chasing the loss) have been found to be associated with gambling-related problems. In addition, each participant has made different progress in terms of coping with their gambling disorders. The participants' subjective gambling experiences have revealed the multidimensional and dynamic aspects of gambling problems.

## Keywords

Gambling • Problem gambling • Gambling addiction • Qualitative research • Interpretative phenomenological analysis

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People participate in gambling activities with the expectation of gaining something more valuable than what they invest (Wilber & Potenza, 2006). Sports betting, horse racing, online betting, card games, and slot machines are some of the most popular forms of gambling. Aside from some up-to-date digital tools such as Forex (Foreign Exchange Market), Bitcoin may arguably be considered as a gambling activity. These markets and other betting sites may quite easily reach communities by advertising. However, the possible harms due to gambling are often ignored by societies, authorities, and organizations.

For some participants, gambling activities are often a form of entertainment or way of socializing. In the case of recreational gamblers, gambling participation occurs with the purpose of testing one's luck with a small amount of money (Choong, Loo, & Ng, 2014). On the other hand, the frequency and intensity of gambling participation for some gamblers increases over time, and in this case one might lose control over one's gambling (Ladouceur & Gaboury, 1988). Loss of control over gambling, spending more time than planned, and being unable to stop gambling have been characterized as pathological/problem gambling or gambling addiction in the literature (Lesieur & Blume, 1987; Nower & Blaszczynski, 2010).

Gambling problems are typically less investigated compared to substance use disorders; however problematic gambling is a concern for many individuals in society. Previous findings have revealed that individuals with gambling problems experience more financial, interpersonal, psychological, performance, and legal issues compared to those without gambling problems (Namrata & Oei, 2009).

Some different factors are considered effective in maintaining gambling behaviors, despite its potential harms. According to previous findings, monetary is considered one of the strongest motivational determinants for gambling (Nower & Blaszczynski, 2010). Amusement/excitement, socialization, and avoidance motivations are also associated with gambling (Arcan & Karanci, 2014). On the other hand, investigating the cognitive errors related to gambling is important. Toneatto (1999), for example, suggested individual perceptions about controlling the results of gambling (by superstitious habits or using lucky numbers, etc.) represent an erroneous belief that one can predict gambling results. In this way, gambling-related cognitive errors encourage participants to maintain their gambling behaviors.

In summary, gambling problems are associated with various factors and providing comprehensive insight into the problems individuals experience is important. Therefore, the present study has adopted a phenomenological approach for investigating the personal harms caused by gambling, the feelings/thoughts regarding gambling, the evolution of change, and so on based on the different literature findings mentioned above.

## Purpose

Qualitative research methods contribute to the current understanding of the nature and evolution of gambling problems by enabling individuals to address their own gambling experiences. For example, a previous qualitative study found family support to be an important factor in the process of recovering from gambling addiction (Choong et al., 2014). Another qualitative gambling study in Korea indicated loneliness and isolation to have critical roles in female gambling and women gamblers to gamble in order to escape the negative emotions related to loneliness (Kim, Kim, & Dickerson, 2016). Such findings provided a comprehensive knowledge about the unmeasured or yet unmeasurable aspects of gambling. Therefore, in the present study, it was aimed to examine the subjective evaluations of the development and evolution of the gambling from first participation to addiction phase and also to analyze the emotions, thoughts, interpersonal relations and other experiences of problematic gamblers with interpretative phenomenological analysis method.

## Method

Interpretative phenomenological analysis (IPA) is a phenomenological method where providing direct access to participants' internal processes is agreed to be difficult (Willig, 2013). Smith and Osborn (2004) describe IPA as "The participants are trying to make sense of their world; the researcher is trying to make sense of the participants trying to make sense of their world."

According to the explanations of Smith et al.'s (1999) IPA treats the person as a cognitive, linguistic, emotional, and physical entity by assuming a link between people's verbal expressions and their thoughts and emotional states. Accordingly, people may find expressing their thoughts and feelings difficult, and in some cases may have their own reasons for not being open. A researcher who applies IPA interprets the mental and emotional processes of the participants based on their statements. As a consequence in this method, the results of the phenomenological analysis are always an interpretation of the participant's experiences (Smith & Osborn, 2004).

By means of its systematic nature and detailed structure, IPA has increasingly attracted the interest of researchers in the psychological sciences in recent years (Smith & Osborn, 2004). Likewise, IPA has been considered as the ideal method for this study because it aims to address how participants make sense of their personal experiences.

## Study Group

IPA studies typically use the method of criterion sampling for organizing a study group. In this method, participants are assigned to the study according to a predetermined criterion of importance (Smith & Osborn, 2004, 2007). Therefore, the

study group consists of individuals who share particular experiences. The present study group has been assigned using criterion sampling and consists of three adult males experiencing problematic gambling. The first predetermined criterion for the sample is the condition of having been diagnosed with gambling addiction/disordered gambling or problematic/pathological/at-risk gambling by at least one professional specializing in clinical psychology or psychiatry. The second criterion is being older than 18. The demographics and gambling patterns of the participants are presented in Table 1.

Table 1  
*Participants' Demographics and Gambling Habits*

	1. Participant	2. Participant	3. Participant
Age	30	29	34
Educational status	PhD candidate	Bachelor degree	Master's student
Occupation	Public officer	Accountant	Financial advisor
Marital status	Married	Married	Married
Time since diagnosis of gambling disorder	3 years	4 weeks	20 weeks
Gambling frequency (present)	Hasn't gambled for 2.5 years except New Year's lotteries	Gambles everyday	Used to gamble 10 times a week, now once a week.
Treatment method	Psychopharmacological treatment	Psychodynamic Therapy	Cognitive Behavioral Therapy
Most frequent form of gambling activity	Forex (Foreign Exchange) investments	Sports betting	Sports betting
Age when gambling began	14-15	17	18
Monthly income	5,500 TL	8,000 TL	30,000 TL
The largest amount of money spent on gambling	20,000 TL	10,000 TL	250,000 TL
Total amount of money spent on gambling	50,000 TL	30,000 TL	500,000 TL

### Data Collection Tool

In this study, a semi-structured interview form has been designed for examining participants' data regarding their gambling experiences. The questions have been designed to address when the participants first gambled, their feelings and experiences during and/or after developing gambling problems, and the psychological and social implications of their gambling problems. Items from the South Oaks Gambling Screen (Lesieur & Blume, 1987), Five-Factor Gambling Motives Scale (Lee et al., 2007), and Gambling-Related Cognitions Scale (Raylu & Oei, 2004) have been used to formulate parts of the questions. Other parts of the questions have been formulated based on the content from previous qualitative research on gambling problems (Choong et al., 2014; Kim et al., 2016).

### Analysis

This study has adopted the following steps proposed by Smith and Osborn (2004) during the interpretative phenomenological analysis of the data:

**I. Looking for themes in the first case.** The text of the speech is read several times and the left-hand margin is used to note remarkable and meaningful expressions. In the first stage of the analysis, re-reading the transcript carefully and becoming as familiar as possible with the subject are important. The first notes here are converted to themes that mirror the original quality of the text.

**II. Connecting the themes.** The themes have been listed on a sheet of paper, and the links between the themes have been examined. While some themes cluster together, others may emerge as high-level concepts. [Smith and Osborn \(2007\)](#) described this process as “Imagine a magnet with some of the themes pulling others in and helping to make sense of them.”

**III. Continuing the analysis with other cases.** The themes acquired when analyzing the first case can be used to guide the analyses of the next cases (The first participant is Case I, the second participant is Case II, and the third participant is Case III in this study). In this way, it is possible to be aware of which themes come from the previous data and to find answers that express them more in subsequent data and to define what is new and different.

**IV. Writing up.** In this last step, the themes are presented, explained, and transferred into a narrative account. A table of themes is created that represents the participants’ responses and includes verbal statements taken from the transcripts to support the theme.

## Results

By following the analysis steps from [Smith and Osborn \(2004\)](#), the coding procedure regarding the psychological content of the case reveals eight superordinate themes. The superordinate themes, subthemes, and the participants’ related statements are shown in Table 2.

Table 2  
List of the Themes

Superordinate themes	Subthemes (and the English translation of the statements)	Participant
EARLY ONSET	<i>'I was 18 years old when I first gambled'</i>	1, 2, 3
INTERNAL TRIGGERS FOR GAMBLING	<b>Amusement/ Excitement</b> <i>'adrenaline' 'an extreme excitement'</i>	1, 2
	<b>Desire to win</b> <i>'the ambition is to win more' 'especially when you lose too much'</i>	1, 2, 3
	<b>Avoiding daily life issues</b> <i>'I was desperate for a way-out'</i>	1
	<b>Believing that strategies help increase the odds of winning</b>	1, 2, 3
EXTERNAL TRIGGERS FOR GAMBLING	<b>Advertisements and references from others</b>	1, 2
LOSS OF CONTROL	<b>Misperception of control over gambling and excessive self-confidence</b> <i>'You have full confidence at the beginning' 'I thought I could quit any time I decided.'</i>	1, 2, 3
	<b>Vicious cycle</b>	1, 2, 3
	<b>Chasing the loss/Gambling more after losses</b> <i>'It literally became a competition after a while'</i>	1, 2, 3
PSYCHOLOGICAL IMPAIRMENT	<b>Suicidal thoughts due to negative emotions</b>	1, 2, 3
	<b>Trouble with sleeping</b>	2, 3
	<b>Withdrawal symptoms (if not gambling for a while)</b> <i>'I felt like drowning' 'I was dizzy'</i>	2, 3
SOCIAL-LIFE ISSUES	<b>Marital or familial disturbance</b> <i>'My wife and I almost broke up'</i>	1, 2
	<b>Social isolation</b> <i>'Gambling makes you lonely'</i>	1, 2, 3
	<b>Work issues</b> <i>'I couldn't focus on my work responsibilities'</i>	1, 2, 3
HIDING	<i>'My wife still doesn't know I gamble'</i>	1, 2, 3
RECLAIMING CONTROL	<b>Gaining awareness</b> <i>'I questioned what I was doing' 'I self-assessed my behaviors'</i>	2, 3
	<b>Removing the triggers</b> <i>'I blocked advertisements'</i>	2, 3
	<b>Replacing useful habits over gambling</b>	1, 2, 3
	<b>Social support</b> <i>'It's very important that someone keeps you emotionally stable'</i>	1, 2, 3

## Discussion

Although the participants had different demographic or socioeconomic characteristics, their gambling experiences had common ones. For example all participants emphasized losing control in describing gambling problems. They gambled more and more to chase their losses. Therefore, they lost control over gambling and did not realize its problematic aspects. Some participants reported aiming to chase the losses regardless of the amount, and some of them gambled more intensely to recover the large amount of losses that were extremely higher than their monthly income. These findings are consistent with previous research findings that suggest loss of control to be strongly

associated with chasing losses and gambling more intensely after losses (Coventry & Brown, 1993; James, Malley, & Tunney, 2016). Another noteworthy finding was that the participants had excessive self-confidence and control perception over gambling while experiencing gambling problems. The attitude of ‘I got the control’ which Blaszczynski and Nower (2002) described as *The Illusion of Control*, was suspending the awareness of gambling problems.

One of the most important and critical findings of the study is that the participants generally tended to hide their gambling problems from their family members or friends. In fact, previous studies have specified the tendency to hide gambling problems as a characteristic of problematic gambling (Carroll et al., 2013; Lesieur & Blume, 1987). In the present study, the first participant, who had made relatively more progress in terms of coping with gambling problems, had already shared his issues with family members; in other words, he had stopped hiding. Sharing gambling problems with the family had allowed the participant to confront his problem and seek help for coping with it. On the other hand, the second and the third participants still hide their gambling addiction from others and struggle with gambling-related issues. Based on this, the attitudes of the second and the third participants to conceal gambling problems are considered to possibly inhibit the paths for receiving essential support. Therefore, the theme of *hiding*, which was emphasized by all three participants, might be considered a risk preference related to psychological well-being.

A clinical finding of this study is that psychotherapy has had significant importance in terms of becoming aware of and coping with problematic gambling. Even though some participants had no faith in psychotherapy at the beginning, they soon realized that psychotherapy allows them to self-assess their behaviors objectively. Two participants in the study specified cognitive behavioral therapy (Petry et al., 2007), which has been suggested to be effective for treating gambling problems, and psychodynamic therapy (e.g., modified dynamic group therapy; Khantzian, Halliday, & McAuliffe, 1990), which has been found to be effective in treating substance use disorders, to be effective in coping with gambling problems. In addition, social support from family members has been found to be quite important for all participants in terms of coping with gambling problems. This finding is consistent with previous qualitative research findings that indicate the importance of family support in quitting gambling (Choong et al., 2014).

### Conclusion

This study’s findings have revealed the participants to be in different positions regarding their progress with their gambling disorder. The ability to cope with gambling problems varies depending on the frequency of gambling and duration of treatment. For example the first participant had stopped gambling 2.5 years ago

and he had treatment for gambling problems since then, while the second and the third participants were relatively new to the psychological treatment and were still gambling (at different intensities). Thus, the second and third participants were still experiencing the negative outcomes of gambling problems. Therefore, the subjective gambling experiences of the participants represent the evolution of gambling disorders from the beginning to the recovery process.

In conclusion, the particular cognitive processes and addictive behaviors related to gambling have not been assessed as fixed attitudes. On the contrary, participants who struggle with gambling problems have demonstrated the complex and dynamic processes of their experiences. Due to Smith et al. (1999) having described human beings as cognitive, linguistic, emotional, and physical entities, the study's phenomenological approach has enabled the participants to evaluate their experiences with gambling problems within the framework of their own multi-dimensional subjective system.

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