



A qualitative investigation of problem gambling as an escape-based coping strategy

Richard T. A. Wood* and Mark D. Griffiths

International Gaming Research Unit, Division of Psychology, Nottingham
Trent University, UK

Background. There has been a small but growing body, of largely quantitative research, that has examined problem gambling in the context of poor coping skills. These studies suggest that gambling may be used as an alternative method of coping that some will use to distract themselves from having to deal with problems in their lives.

Objectives. To examine the role that gambling plays in the lives of problem gamblers and the extent to which it may be used as a means of coping.

Design. Fifty problem gamblers, ranging in age from 18 to 63 years, with an average age of 39 years, were interviewed. The focus of the interview was upon the participant's accounts of how their gambling problem had developed and the role that gambling played in their lives. A structured grounded theory approach was utilized.

Results. Following the selective coding process, 'gambling to escape' was identified as the core category. This state was achieved through 'mood modification', involving fantasies, dissociation and/or changes in arousal. For some problem gamblers seeking mood modification was their primary motivation. For others mood modification was sought as a means to cope with one or two other psychological and/or psychosocial states consisting of 'filling the void' and/or 'avoiding problems'. Two other factors sometimes influenced the need to gamble, either directly through 'control beliefs' or through 'cognitive regret'.

Conclusions. Escape was the prime characteristic of the gambling experience that facilitated the continuation of problem gambling among the interviewed participants. In relation to these findings, the implications for prevention, intervention, treatment and future research are discussed.

To date, there has been a general lack of established psychological theories in relation to the causes of problem gambling. One theory that attempted to account for the development of addictions, and specifically problem gambling, is Jacobs' *General Theory of Addictions* (1986). Jacobs suggested that addictive behaviour patterns occur when people use a substance or activity to alter their arousal levels such that they can

*Correspondence should be addressed to Richard T. A. Wood, International Gaming Research Unit, Division of Psychology, Nottingham Trent University, Nottingham, UK (e-mail: info@GamingResearch.co.uk).

escape from the reality of their existence. In this way the activity that is undertaken or experienced is not so much the cause of the problem but instead a symptom of the problem.

Jacobs (1986) suggested that most people occasionally use substances and/or activities to control mood states (e.g. alcohol, coffee, sport, shopping, chocolate, etc.) whereas the problem gambler may come to rely on gambling to maintain their desired mood state/arousal levels. Therefore, if the problem gambler uses gambling to block out certain negative thoughts and feelings in their lives, then it seems feasible they will engage in the behaviour at an increased frequency. Further support for the *General Theory of Addictions* can be found in earlier research which identified that drug addiction is often positively correlated with low self-regard and rejection by others (Milkman, Weiner, & Sunderwirth, 1987), although it should be noted that these factors could be caused by, rather than a cause of, the addiction.

More recently, Blaszczynski and Nower (2002) postulated a pathway model of the determinants of problem gambling based upon a series of clinical observations with problem gamblers and through integration with the literature. They argued that there are common influences that affect all problem gamblers, such as availability and access, classical and operant conditioning reinforcements, arousal effects and biased cognitive schemas. However, they suggested that there are three distinct pathways into problem gambling, representing three primary motivating forces that drive different problem gamblers to gamble. The first of these, behaviourally conditioned problem gamblers, are not pathologically disturbed, but instead gamble excessively as a result of poor decision-making strategies and bad judgments. Any features such as preoccupation with gambling, chasing, depression, anxiety and related substance abuse are seen as the consequence, not the cause of their excessive gambling. These gamblers are usually motivated to seek and attend treatment, and re-establish controlled levels of gambling post-treatment.

The second group, emotionally vulnerable problem gamblers, are characterized by a predisposition to be emotionally susceptible. This group use gambling as a means of modifying mood states and/or to meet specific psychological needs. These gamblers display higher levels of pre-morbid psychopathology including depression, anxiety, substance dependence and deficits in coping or managing stress. They tend to engage in avoidant or passive aggressive behaviour, and use gambling as a means of emotional relief through dissociation and mood modification. The psychological dysfunction in these gamblers makes them more resistant to treatment and not suitable to permit controlled gambling. Treatment must focus the underlying vulnerabilities as well as the gambling behaviour.

The third group, 'antisocial impulsivist' problem gamblers, have biological dysfunctions, either neurological or neurochemical. They also possess similar psychosocial vulnerabilities as the pathway two gamblers. However, they are characterized by antisocial personality disorder and impulsivity (Steel & Blaszczynski, 1996), and/or attention-deficit disorders (Rugle & Melamed, 1993). It is argued that these gamblers have a propensity to seek out rewarding activities (such as gambling) in order to receive stimulation. They tend to be clinically impulsive and display a broad range of problems independent of their gambling. These problems include substance abuse, low tolerance for boredom, sensation seeking, criminal acts, poor relationship skills, family history of antisocial behaviour and alcoholism. Gambling usually begins at an early age, has a rapid onset and occurs in binges. These gamblers are less motivated to seek treatment, have poor compliance rates and respond poorly to all interventions.

All three subgroups are affected by environmental variables, conditioning effects and cognitive processes. However, in terms of treatment intervention each subgroup will have specific needs.

Gambling as a coping strategy

There has been a small but growing body of related research that has examined problem gambling in the context of poor coping skills. Marget, Gupta, and Derevensky (1999) and Nower, Derevensky, and Gupta (2004) reported that adolescent problem gamblers in their studies employed maladaptive coping styles. Both these studies suggested that gambling may be used as an alternative method of coping that some will use to distract themselves from having to deal with problems in their lives. Consequently, when the gambling behaviour ceases, the person is faced with the prospect of dealing with those re-occurring problems. The problem gambler may realize that playing these activities provides relief from dealing with daily problems and, consequently, the behaviour is likely to be repeated frequently.

In a previous study, Gupta and Derevensky (2001) in another survey of adolescent gamblers found that non-gamblers and social gamblers tended to exhibit task-orientated coping styles. Task-orientated coping is considered to be a positive, adaptive form of coping with difficulties whereas the at-risk and problem gamblers exhibited more emotion-focused coping styles. Emotion-focused coping is considered to be a more negative (ineffective) coping style. Furthermore, Wood, Gupta, Derevensky, and Griffiths (2004) found that adolescent problem gamblers reported high levels of perceived excitement, relaxation, and feelings of escape while engaged in gambling, compared with normal players. Problem gamblers were also more likely to report experiencing various states of dissociation while engaged in gambling (e.g. going into a trance-like state, losing track of time, etc.). Scannell, Quirk, Smith, Maddern, and Dickerson (2000), in an examination of adult female poker machine players, in Australia found very similar results.

All of these studies suggest that problem gamblers may use gambling as a means of coping with everyday stresses. That is to say, they cope by using gambling as a means of altering their arousal levels and mood states, sometimes to the point whereby they can escape from their everyday lives and/or problems. Either, they use gambling to reduce arousal and induce relaxation, or they use gambling to increase arousal and provide stimulation. Either way, the gambling behaviour may become relied upon as a coping strategy.

To date, there has been a distinct lack of qualitative research that has examined problem gambling in the context of talking to and understanding problem gamblers themselves. The majority of the research has been concerned with either correlational survey-based studies using large generalized samples and small problem gambler samples, or experimental laboratory-based simulation studies. However, there have been few studies that have attempted to understand problem gambling by actually talking to a variety of problem gamblers including both males and females, those in treatment, those in recovery and those who have not received any kind of treatment. The present study aimed to examine the role that gambling plays in the lives of problem gamblers and the extent to which it may be used as a means of coping. It was speculated that problem gamblers may depend on gambling behaviour in place of other more healthy coping strategies. Furthermore, problem gamblers have the added worry of

dealing with the outcomes of their excessive gambling behaviour, in terms of the emotional, financial and social consequences.

Method

Participants

Fifty problem gamblers ranging in age from 18 to 63 years, with an average age of 39 years, were interviewed ($SD = 10.75$ years). Forty-three participants were male and seven were female (see Table 1 for a breakdown of participants' age, gender and type of gambling engaged in). Of the participants, 25 were interviewed face-to-face, 20 by telephone and 5 using e-mail. Participants came from all over the UK including Bristol, London, South Wales, Birmingham, Nottingham, Manchester, Glasgow, Dundee, Cheltenham, Bolton, Essex, and one participant who had emigrated to Australia. The majority of the participants were recruited through advertising the study on the *GamCare* website, the *International Gaming Research Unit (IGRU)* website (at Nottingham Trent University) and through letters sent to local newspapers. A residential treatment organization (Gordon House Association) agreed to provide access to participants and 10 of their residential problem gamblers across their two national centres volunteered to be interviewed. This was approximately one-third of their current number of clients. Four participants reported past drug or alcohol addictions including, heroin, cocaine and alcohol, from which they had subsequently recovered. Approximately one-third of participants reported that they had used recreational drugs occasionally.

Participants defined themselves as problem gamblers on the basis that their gambling behaviour was, or had, caused them significant problems. The study did not employ a diagnostic gambling screen as the authors were interested in the participants' perceptions of their problem. We would argue that that if they believed that they had a problem then it is highly likely that they actually did. Furthermore, as we also wanted to talk to people who had recovered from a gambling problem a gambling screen would have been inappropriate for those people. With the exception of two participants who had just begun to develop problems, all of the participants interviewed had experienced severe gambling problems over a period of many years. While the majority of participants had experienced some sort of treatment (e.g. Gamblers Anonymous or counselling) at some point, most were not currently in treatment. Only four participants could be considered as reformed gamblers, and had not in fact gambled for several years. All names used in the text and appendix are pseudonyms.

Design and analysis

Author perspective

The authors' approach to the data acknowledged the existence of identifiable psychological constructs while, at the same time, considered that all such constructs are open to interpretation and reinterpretation. Such an approach may best be described as that of post-positivism, or more specifically, critical realism. Both of the authors are white males in their mid- to late thirties, and are experienced researchers in the field of gambling studies. We have previously carried out many studies concerning gambling and problem gambling behaviour utilizing a wide range of both quantitative and qualitative methods. We would also describe ourselves as pro-responsible gambling, that

Table 1. Basic demographic details of study participants ($N = 50$)

Pseudonym	Age	Gender	Types of gambling
Jack	40	M	Fruit machines, dogs, horses
Mick	44	M	Fruit machines, horses, dogs, scratchcards
Ralph	41	M	Casino, blackjack
Kirsty	38	F	On-line fruit machines, on-line bingo, off-line bingo
Pete	32	M	Off-course betting
Sean	29	M	Off-course betting
Ben	34	M	Horses, dogs, football
Rob	55	M	Casino poker, blackjack
John	50	M	Horses, dogs, football
Stew	27	M	Fruit machines, bookmakers
June	41	F	Off-course betting
Keat	30	M	Casino, roulette, blackjack, poker
Liz	53	F	Casino, roulette, blackjack, baccarat
Tom	31	M	Fixed-odds betting terminals, horses, dogs, fruit machines
Helen	26	F	Horses and football
Brian	35	M	Fruit machines, fixed-odds betting terminals, Internet casino (poker, roulette, fruit machines)
David	41	M	Horses, football
John	39	M	Racetrack horses
Albrecht	34	M	Fruit machines, casino blackjack, Internet casino
Basil	29	M	Off-course betting
Lee	43	M	Fruit machines, casino
Mick	44	M	Off-course betting
Tyrone	22	M	Off-course betting
Fred	63	M	Off-course betting, casino
Kevin	48	M	Football, horses
Steve	47	M	Off-course betting, casino blackjack
Bill	44	M	Casino blackjack, bookmakers
Ian	49	M	Off-course and on-course betting
Doug	28	M	Casino poker, roulette, off-course betting, stock market, Internet sports betting
Ken	56	M	Off-course betting
Ray	29	M	Fruit machines
Keith	52	M	Off-course betting
Simon	31	M	Casino, roulette, blackjack, poker
Jeff	37	M	Casino roulette, blackjack
Val	46	F	Casino blackjack, fruit machines, bingo
Ed	18	M	Fixed-odds betting terminals, casino roulette, horses, dogs, fruit machines
Alice	53	F	On-line Keno, slot machines
Carol-Anne	50	F	On-line poker, casino blackjack
Tim	58	M	Off-course betting
Graham	48	M	On-line poker
Adrian	43	M	Horses, fruit machines
Don	38	M	Fruit machines
Ray	44	M	Off-course betting
Bob2	34	M	Off-course betting, fruit machines
Gavin	52	M	Casino, roulette, fruit machines
Trevor	28	M	Horses, dogs

Table 1. (Continued)

Pseudonym	Age	Gender	Types of gambling
Frank	55	M	Casino games, roulette, blackjack
Jim	22	M	Fruit machines
Alan	31	M	Horses, dogs, fruit machines
Justin	26	M	Bookmakers

is we accept that gambling is a legitimate leisure activity but it also has the potential to be problematic for some individuals, and as such should be carefully monitored and controlled by both legislators and the gambling industry.

Methodology

A structured grounded theory approach (Strauss & Corbin, 1990) was utilized. A basic interview guide was developed to ensure that certain areas were covered, as identified in the psychological literature, and was additionally informed through the authors' previous research experience with problem gamblers. No pre-scripted questions, probes or prompts were used in the study. As the analysis developed, so the interview guide was amended to follow up emerging concepts with each subsequent participant, both in a confirmatory capacity, and in order to look for exceptions. As well as handwritten notes on the transcripts, field notes of emerging themes and concepts were taken throughout the research process to maximize the dependability of the data analysis (Charmaz, 1996). Concepts were arranged chronologically to enable processes to emerge, after which the data were subject to open coding. As the interviews progressed, themes identified by one participant after another were introduced into subsequent interviews to enable theoretical sampling.

Conceptual relationships were assembled through a process of axial coding whereby initial categories were linked to subcategories along the lines of their properties and dimensions. The final theory emerged through the selective coding process in which the final categories were integrated and refined, in order to provide a more complete and detailed explanation. Theory was then confirmed, extended and crystallized through replicating the analytical process on further samples until theoretical saturation was achieved (after 24 cases). Once theoretical saturation had been achieved, further interviews ($N = 26$) were carried out in a confirmatory capacity, and to examine possible exceptions. Category development was verified between the authors, both through regular iterative discussions at the interview stage, and through inter-coder agreement during the analysis of the transcripts. This approach ensured a high level of inter-coder reliability and helped to enhance the process and the validity of theory generation.

Procedure

All the participants were interviewed once for between 45 and 90 minutes by the first author. The focus of the interview was upon the participant's account of how their gambling problem had developed and the role that gambling played in their lives. The questioning process also developed organically as theory emerged from the data. The interview began by the researcher asking the participant to tell them about their story of

when and how they first began gambling, how their problem developed and where they were now. Typically, little prompting was needed as participants were keen to explain their situation in great detail. Those participants who had been through some therapy were familiar with discussing their problems, whereas those who had not often expressed relief at the opportunity to tell someone about their situation. Face-to-face interviews were either conducted in the participant's own home, at the first author's university office or at the participant's place of treatment. The remaining interviews were conducted by telephone or e-mail. Forty interviews were recorded on cassette tape and then transcribed, while the remainder were recorded by taking notes ($N = 5$) or via e-mail ($N = 5$). Those that were interviewed by e-mail generally gave shorter responses to interviewer questions than those interviewed face-to-face. However, there was no difference in the type of response content. Five participants did not want their interviews recorded but were happy for the interviewer to take immediate retrospective notes. Ethical approval was given for all stages of the study by the authors' departmental Ethics Committee.

Results

Following the selective coding process, the Core Category (Strauss & Corbin, 1990) was identified as 'gambling to escape'. This state was achieved through 'mood modification', involving fantasies, dissociation, and/or changes in arousal. For some problem gamblers seeking mood modification was their primary motivation for engaging in gambling. For others, mood modification was sought as a means to cope with one or two other psychological and/or psychosocial states consisting of 'filling the void' and/or 'avoiding problems'. Two other factors sometimes influenced the need to gamble, either directly through 'control beliefs', or through 'cognitive regret' and a need to escape from them, again through mood modification. Each of these will be discussed in more detail below, using textual examples from the interviews. Given the volume of data collected, the quotes chosen were felt by the authors to be the most poignant and to exemplify the final categories best.

Gambling to escape

Escape served as the central reason to continue gambling despite the realization, by all but four of the participants, that further gambling would not solve their long-term problems. Gambling was undertaken for the experience that it provided, and the ability that it had to enable the person to block out their problems while engaged in the behaviour. All the participants made reference to gambling as an escape, either directly or indirectly. Those who had been in some kind of therapy (though not always) and/or had been a problem gambler for many years were more consciously aware that they gambled as a means of escape. The term escape was offered freely by a number of participants as an explanation for their behaviour, and the interviewer took great care not to lead subsequent participants to respond in further accordance. Typical comments included:

Gambling was an escape for me. It was an escape from the life that gambling had caused me. In the end gambling was the only escape I could escape from gambling. Does that make sense? The things that make people portrayed in a certain way and the shit I got myself into, the only place I felt comfortable was in a betting shop. (Ben, age 34)

(Gambling) was definitely an escape where I could just forget, all it was it was just me and the next hand. Nothing else mattered. Not the family, not my husband, nothing. Nothing mattered. (Carol-Anne, age 50)

(Gambling) is an escape from reality. Because when you're gambling you don't think of anything else. You totally blank all your problems or any body else's around you. You don't give a thought for anybody. (Mick, age 44)

Mood modification

Mood modification was the means by which escape was achieved. This usually involved some form of dissociation from reality that was achieved through either altering arousal levels and/or engaging in a fantasy of being a successful gambler who would be able to pay off all their debts and be respected. For some the buzz of gambling served to alter their arousal levels to a point where they experienced a psychological high. The high could be experienced as either stimulating or relaxing. These two opposing states were often two sides of the same coin in that a buzz could be perceived as relaxing by filling time, avoiding boredom and/or shifting focus away from life's problems, or the problems that had been created by their gambling behaviour (e.g. increased debt and social conflict). In this way, the buzz could provide relief from the uncomfortable state that arose from an unpleasant reality.

However, for some the buzz (in itself) was the main goal of their gambling behaviour, one that was likened to the high of taking certain drugs. To them, this was their primary addiction. The preoccupation with gambling, even when not gambling, allowed the participants to escape into another reality and/or block out negative thoughts. A vicious circle was perpetuated whereby gambling to gain an escape from negative mood states created further problems and reinforced the need to escape further (through more gambling).

It's the kick, it's the buzz, it's the initial high. Every time, with gambling, every time those (slot machine) reels are turning your adrenalin is rushing because you're waiting for them to drop on a winning line. You just keep going, I mean the amount of money that I put in and then I won again I'd put it straight back in. I'd say, 'right I'll stop at 50 (pounds)', but I couldn't stop. (Kirsty, age 38)

I would go in and see what was on. And if there was a dog race or a horse race just going off, I'd not even look at the form, I'd just go and bet on it. Just to get that buzz as soon as possible. Because its something that has been building up for a while. (Tom, age 31)

Frequently, the gambling behaviour became part of a fantasy that worked on two levels. First, the gambler believed that gambling would provide the solution to their growing financial difficulties. Second (and simultaneously), the fantasy of winning, and being a winner, further motivated them to continue gambling. However, at this stage their gambling was no longer about actually winning money but was more about achieving the fantasy, or dissociative state, that took them away from their problems.

Many of the participants in the later stages of their gambling addiction acknowledged that they realized they gambled for the experience rather than to try and win money (i.e. playing *with* money rather than for it). This is in contrast to participants who in earlier stages of their addiction frequently reported that winning money would be the way that they would get themselves out of the financial difficulties they were in.

I'm obviously not stupid, and in the early days of playing the fruit machines you didn't even get cash, you got tokens. So how could you possibly win money? The tokens had to go back in there. I don't think it really was about money. I think it was something else I got out of there. (Brian, age 35)

You are always looking or thinking that you're always going to get a big win to sort everything out and stuff like that. That is always in the back of my mind anyway. It didn't become about the money. It just became about gambling, just the whole thing of gambling. (Tyrone, age 22)

I was aware that I had a problem. I was aware that I had a habit. I'm not quite sure how I could fix it. Maybe a big win would help to solve it all. Big enough for me to wake up and say, right, that's it. (Rob, age 55)

In addition to the need for mood modification, some gamblers also reported that gambling was influenced by two other needs that both ultimately led to a need for mood modification through gambling and consequently escape. These were 'filling the void' and 'avoiding problems'. These are outlined in more detail in the following sections.

Filling the void

This refers to fulfilling a gap in the person's life either through alleviating boredom or through providing a means of socializing that was otherwise missing from their lives. Many of the gamblers reported that gambling was their only available social outlet, even though other gamblers were sometimes seen as acquaintances rather than friends. In many cases, existing friends were lost, usually due to unpaid loans, and the social void outside of gambling widened.

I'm in a situation now where I've got spare time and I've got so much of a void to fill (David, age 41)

(I was) very bored . . . That's why I go to (gamble). If I'm not in work and I'm sitting in my house and I look at the clock and its about 1 o'clock I think, 'Sod it I'm going to go to bingo'. (Val, age 46)

One of the things from my point of view I don't want to stop (gambling). (It) is my only social thing . . . I enjoy gardening but you don't garden at night do you? (Liz, age 53)

Out of my search/quest for something which was missing in my life and looking back now, I can see there was this massive hole. I was trying to fill all this with the gambling. (Bill, age 44)

For some the void was a need for approval from others to gain some kind of attention and respect by being a successful gambler.

I think a lot of (my gambling) was (because) I like to be the centre of attention. If somebody said to me, 'Go jump off that bridge' I'd do it. Not necessarily because I wanted to but I'd perhaps find I'd gain popularity with people. (David, age 41)

When I win, there are a select few people that I let know let know that I gambled, and that I won . . . Maybe every now and then, I would say I've just won £700. Everyone's having Chinese tonight for the shift, that kind of thing I would do. I can be quite, it's not quite big headed, but I guess I like the acknowledgment that I've actually won. I've never thought about that before but that's actually true. (John, age 39)

It sounds silly now but back then I would have said . . . it was an impressive thing. It was definitely a bit of a, I'm trying to think of the word, not celebrity, do you know what I mean? A bit of status. (Val, age 46)

Avoiding problems and responsibilities

Many of the participants reported that they would gamble most heavily when they were experiencing some kind of problem, conflict or stress in their lives. Increased gambling frequently created more problems to deal with, such as financial debts and further conflict with partners and relatives. Participants were trapped in a cycle whereby gambling created problems, but at the same time, gambling created the solution by allowing them to dissociate and forget those problems. The avoidance of problems through increased gambling also helped the person to deal with the growing guilt and shame as others began to realize, and be affected by, the consequences of those problems. Many of the gamblers reported that they found it difficult to open up and talk to others to discuss their situation, and instead, found themselves retreating into a fantasy world. In this way the gambler maintained a state of denial about the extent of their problems. They could see no logical way out of their situation other than to continue gambling.

Gambling is a great fill in for making you forget about everything that is maybe going on in your life . . . Where you can put the blinkers on, focus on a fruit machine, just forget about everything. (Jack, age 40)

If you're very emotionally cut off you just choose not to deal with what's going on, and the easiest way to do that is in another world. Gambling is another world . . . It's a way of losing touch with reality. (Basil, age 29)

I've done a lot of things I'm truly ashamed of. I've tried to take my life twice. I've really upset a lot of people. But there's also (things) apart from the gambling and the winning. There's also me living with the sort of guilt of it on a day-to-day basis. Sometimes, to forget that (feeling) I will gamble. I'll go and hide and run away. (David, age 41)

When I was gambling I was safe because while I was gambling no-one can contact me. No-one knew I was there. Whoever was ringing up . . . letters could not get to me. So that was my safe haven from everything. (Tyrone, age 22)

Control beliefs

This related to a belief in a system or insider information that would eventually lead to financial success. For some participants there was an eventual realization that the system did not work, and gambling for them was then about trying to forget their problems. However, several participants remained convinced that the reason the system had not made them any money so far was that they did not have the self-control to stick with it. Instead, they believed that by getting 'carried away' they deviated from the system and undermined its effectiveness.

Belief in luck sometimes increased the gamblers feeling of control, such as having lucky numbers, lucky pens and by avoiding unlucky people or places. Control beliefs could also (sometimes) lead directly back into problem gambling behaviour without involving a need to modify mood through gambling. For example, a strong belief in a winning system did not necessarily have to involve a fantasy of being a big winner but

could instead be seen by the gambler as a pragmatic way to recoup losses or even to actually make money. Although, over time the realization that the system is not working becomes apparent. When this occurred, the gambler then continued gambling to avoid the negative mood states caused by the mounting financial and/or other related problems.

I was extremely knowledgeable and a racing encyclopaedia if you like. I'd even studied the bloodlines (of horses). I'd explored every system. Decided (eventually) that systems didn't work. Sometimes they do in the short term. You get deeper and deeper in. I tried everything, absolutely everything. (Ian, age 49)

You've gone in with a strategy. You've gone in with some discipline but somewhere along the line you've forgotten that and are totally absorbed. The reason has gone by this stage. (Rob, age 55)

People say that I am lucky and when I have had big wins, people say 'I don't know how you do it, you're a lucky guy'. A lot of people tell me that. I incorporate that in my scheme, I incorporate it and it sticks and I think I am a lucky guy. (John, age 39)

When it comes to gambling I will always back a horse that is number 9, beginning with the letter F. Now there's absolutely no rhyme or reason for that. I think because I once did some survey, and it was Chinese numbers and it basically said, do all this series of birthday, add them all up and divide by this, blah, blah, blah and that is your Chinese lucky number. I came back with the number 9. It must have been the first horse I ever say that won at number 9, after I do this survey, turns out it begins with the letter F, and ever since then, 30 years whenever, I've seen a horse that begins with No.9 F I've always backed it, irrespective of its prize. (Jack, age 40)

Cognitive regret and chasing

All of the gamblers reported that they had at some point chased their losses to try and win back their money. This tended to happen early on in the problem-gambling cycle and quickly made matters worse. The cognitive regret of losing money motivated them to continue, often with the belief that their luck would eventually change. This usually led to larger and larger bets in order to try and pay off the mounting debts. This aspect was also directly related to 'avoiding problems' as chasing behaviour was a means by which they could continue gambling to avoid dealing with the reality of their problems. For some, chasing led directly to a need to modify mood to escape.

Chasing was the only factor that was independently influenced by the outcome of gambling separate from the outcome of escape, although the outcome of chasing could influence the need to escape. Chasing behaviour could lead directly back to further problem gambling if the gambler was not gambling to avoid problems or to modify mood states, but instead was trying just to win back money. This could happen in the early stages of problem gambling when losses were still relatively small.

You start out and then you think, 'Well something is going wrong there' and you're just trying to get your own money back. (Ken, age 56)

Whenever I'd got access to money, I was OK because I was happily gambling away. It's self-delusion. You just think that the next bet is the one that will bring it all back, going to start your winning run . . . The losses it seemed were only temporary. I could get it back. What I didn't realise was that it was already totally out of control. (Ian, aged 49)

I thought 'Well I know I'm going to get some money on such and such a day. If I can find a couple of winners I'll have it all back'. (Keith, age 52)

In the back of my mind there's something still telling me that because you've lost so much money, you're going to eventually win money to compensate that and put the world right. In reality I suppose it's not going to happen. It's difficult when you've got money in your hands and gambling shops around the corner, to actually believe that. (John, age 39)

A grounded theory of problem gambling as an escape

The core concept of the emergent theory presented here is the (conscious or unconscious) need to achieve escape from negative mood states through gambling behaviour. Figure 1 demonstrates the links between gambling as an escape from negative mood states and the relationship to avoiding problems and responsibilities, filling the void, cognitive regret and beliefs surrounding control. It shows how problem gambling works functionally as an escape-based coping strategy. It is proposed that problem gambling behaviour is maintained through an ongoing desire to escape a negative mood state (A) that is altered through gambling behaviour leading to a temporary escape from that mood state.

Mood modification is experienced when gambling, through a variety of processes including dissociation, achieving a high (the buzz) or through fantasy. For some problem gamblers, and particularly those seeking the buzz (a high), the mood-modifying properties of the gambling experience are enough (in themselves) for them to continue their pattern of gambling behaviour. For others, mood modification may also be sought to fulfil a number of other functions. Filling the void (B) refers to the feeling that something is missing in the participant's life, such as a lack of social activity outside of

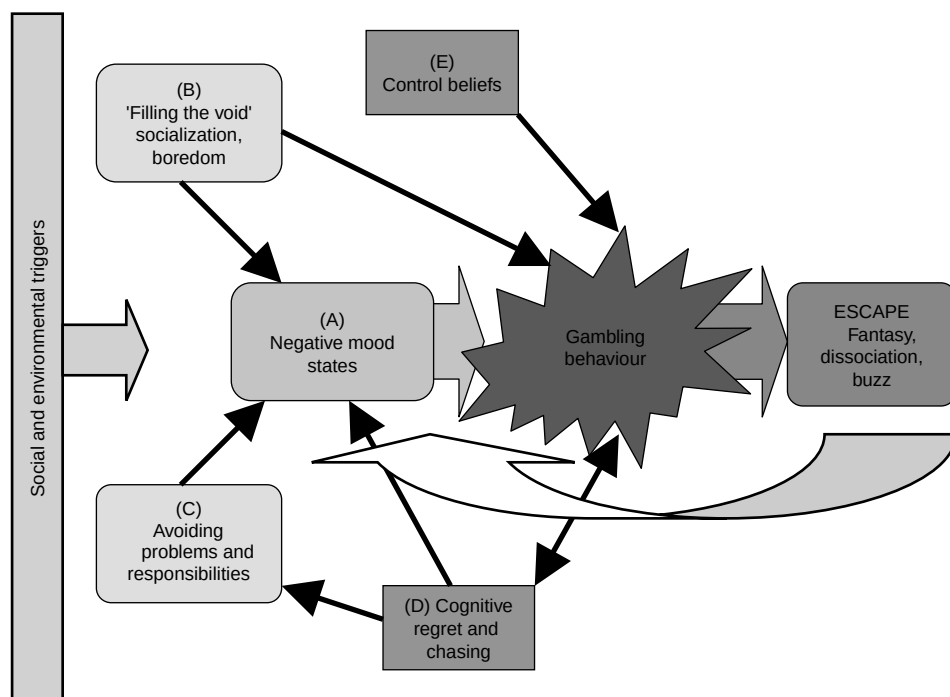


Figure 1. Diagrammatic representation of problem gambling as an escape-based coping strategy.

gambling, but it can also refer to a sense of boredom with their life. The void is subsequently filled by either modifying mood through gambling (e.g. indulging in fantasy, receiving attention and/or receiving a hit) or through the social function that the gambling activity provides.

Negative mood states can also be caused by having more problems and responsibilities than the gambler can manage (C), again, resulting in a negative mood state and the desire to escape from it. Other influences upon the gambler can come through the cognitive regret of losing money (D) increasing their problems (e.g. further debt) and leading either directly to destructive gambling behaviour (i.e. chasing) or to a need to modify negative mood states.

Beliefs about control (E) were important to gamblers who believed in a system that would enable them to win, or those with increased feelings of control through a belief in luck (e.g. lucky numbers). Control beliefs can either lead directly to gambling behaviour or may feed into a need to modify mood through the fantasy of being a success. The outcome of escape achieved by gambling rapidly subsides leading to further negative mood states. The gambler becomes trapped in a vicious circle whereby gambling provides the means by which to escape (temporarily) from those negative states, rather than seeking alternative coping strategies to deal more effectively with those states.

Discussion

This study presents a grounded theory analysis of the personal accounts of participants, who were, or who had been, problem gamblers. Central to this theory was the concept of gambling being used as a coping strategy to achieve escape from negative mood states. The findings of this qualitative study provide a theory that both supports, and helps explain in more depth, findings from previous psychometrically derived correlational data. The motivations that drove the need to escape were identified as mood modification needs, filling the void and avoiding problems. In addition to these, control beliefs and cognitive regret also influenced the desire for continued gambling. The gamblers became reliant on the psychological escape that was achieved through gambling, and was used as the means by which the gamblers coped with their problem. However, at the same time, it also perpetuated their problem.

The other features identified could be viewed as contributing to the need to escape, and varied among the participants. For some gamblers there appeared to be a primary motivation in the need to escape. However, it was also the case that other gamblers were motivated by a combination of factors. Furthermore, it appeared that the relative importance of these motivations changed over time depending upon fluctuating factors, such as level of debt, or length of time as a problem gambler. For example, filling a social void may be the primary motivation at the start of the problem-gambling behaviour. However, over time the primary motivation may switch to avoiding problems, caused by increasing financial concerns. In this way the theory is a fluid representation of the problem gamblers' motivations and coping strategies.

It was clear that escape was the prime characteristic of the gambling experience which facilitated the continuation of problem gambling among the interviewed participants. This supports, and further explains, previous correlational findings, that problem gamblers use gambling as an emotion-focused coping strategy (Gupta & Derevensky, 2001; Marget *et al.*, 1999; Nower *et al.*, 2004; Scannell *et al.*, 2000; Wood *et al.*, 2004). Similarly, the study provides further support for the theory that problem

gamblers use gambling as a means of managing their emotions (Ricketts & Macaskill, 2003, 2004).

Despite being a heterogeneous group, the characteristic need to escape was the single most prominent feature of the research data. However, all of the types of problem gambling were the ones in which people can gamble continuously if they so wish (e.g. slot machines, fixed odds betting terminals, horse racing, etc.) rather than discontinuous forms (e.g. bi-weekly lottery, football pools, etc.), and confirms the speculations of researchers who have studied the structural characteristics of gambling (see Griffiths, 1993; Parke & Griffiths, 2006).

In accordance with Jacob's (1986) *General Theory of Addictions*, it was found that the problem gamblers interviewed used gambling as a means by which to alter their mood states to the point whereby they could escape from the reality of their existence and/or associated problems. The study found that this was achieved through either experiencing increased arousal levels (the buzz) and/or indulging in fantasies of winning and being successful. In a small number of cases, this appeared to be experienced as a form of dissociation. For some gamblers the high of the buzz was enough to maintain their gambling behaviour in a continuous cycle. Highs were experienced while gambling, which then subsided into a contrasting low and the resulting mood state was then modified through more gambling (and so on). These motivations to gamble appear to directly map on to the 'antisocial impulsivist' problem gamblers subgroup identified in the pathways model of gambling (Blaszczynski & Nower, 2002). It also supports findings that individuals can paradoxically use the same activities and/or substances to achieve different mood-modifying effects (Griffiths, 2005). However, it should be noted that the pathway model was based on clinical observations and that the findings here are based on non-clinical interviews. The findings reported are therefore indicative as there was no attempt during the interviews to carry out in-depth assessment to place individuals within a specific pathway.

For other problem gamblers in the study, the arousal of gambling was secondary to the need to fill a void in their lives created by either boredom or a lack of social interaction. For these gamblers the escape was a more conscious strategy to avoid the negative mood states created by a perceived void in their lives. These gamblers appear to equate to the 'emotionally vulnerable problem gamblers' identified in the pathways model of gambling (Blaszczynski & Nower, 2002). For some, filling the void was not so much an escape from a negative mood state as much as a conscious decision to gamble in order to socialize. Ultimately, the resulting gambling behaviour created problems that were avoided through further gambling, and again, resulted in a perpetuating cycle of behaviour. The mood-modifying properties of gambling were used as a means of avoiding gambling problems and/or responsibilities that led to a negative mood state.

Gambling could also be used as a coping strategy for dealing with all manner of everyday problems and responsibilities (e.g. domestic conflict, being a parent, etc.). Avoiding non-gambling problems through gambling behaviour ultimately led to further problems that were caused by the gambling behaviour (e.g. increased debt, further domestic conflict). In this respect, the problem gambler appears to, again, be an 'emotionally vulnerable problem gambler'. However, it should be recognized that problem gambling usually creates serious financial problems and often contributes to social and domestic conflict. In this way, all of the problem gamblers in the study used gambling as a means of avoiding the problems created by the gambling activity itself, again, through the experience of escape. Therefore, while all the gamblers in the present study could be classified as emotionally disturbed, it is not possible to ascertain

if this was caused by, or a cause of, the problem gambling. Therefore, while a need for arousal may be a primary motivation for only some problem gamblers, gambling to escape problems was also a secondary motivation for all.

Control beliefs related to problem gamblers who believed they had some control over the gambling outcome through the use of a strategy or belief in luck. These particular beliefs could lead directly to problem gambling behaviour based on the belief that it would create money. This appears to support the pathways category of 'behaviourally conditioned problem gamblers'. However, once the gambling behaviour became problematic the experience of gambling was (again) utilized in an attempt to escape the negative consequences (and mood state) that the behaviour had created. At this later stage, the gambler again resembles the 'emotionally vulnerable problem gamblers' of the pathways model.

Finally, in some problem gamblers, the cognitive regret at losing money resulted in chasing behaviour. Sometimes, this was a direct and immediate response to losing, and through this route a pattern of repeated gambling could quickly manifest. This was another of the routes by which the transition from social gambler to problem gambler could take place. However, cognitive regret could also result in a negative mood state either as a direct consequence or through a need to avoid the problems that the chasing had created. In this way, both the control beliefs and the cognitive regret/chasing behaviour identified in the study, map on to the 'behaviourally conditioned problem gamblers' identified in the pathways model (Blaszczynski & Nower, 2002). The present theory supports the pathways model as an explanation for the different routes into problem gambling behaviour, and emphasizes that problem gamblers are not a homogeneous group. However, the present study also provides an explanation for how problem gambling behaviour is maintained, and outlines how motivations can change over time.

Strengths and limitations of the study and further research

The study presents a detailed conceptual account of the problem gambling experience from the participants' own perspectives. However, the participants who responded to this study recognized that they had a gambling problem and were motivated enough to take part (i.e. they were a self-selected sample). Those problem gamblers who had not yet realized they have a problem or who did not want to take part, may have exhibited very different characteristics. Further research in this area would be useful, but would also be extremely difficult, if not impossible, to achieve. We cannot force people to take part in studies such as this, only encourage them. Similarly, if someone does not yet admit to themselves that they have a problem, then to what extent will they be either willing to talk about it, or provide meaningful insights as to why they gamble as they do? In the same way that treatment will only work if the patient is willing to accept it, so research may also be constrained. Furthermore, given the methodology used in this study, there was always the potential for recall biases, poor memory and/or the potential for gamblers to reinterpret retrospective data on the basis of post-morbid experience. However, most participants were currently problem gamblers and accounts did not vary in any depth between those who had ceased gambling and those who had not. The only evident difference was that those who had only recently accepted that they had a problem did not have as much insight about their behaviour as did those who had experienced a problem for some time.

One limitation of this study was that it involved only 50 participants, although, for a qualitative study of this kind it is quite a large sample. By surveying much larger numbers of the general population it would be possible to include a number of problem gamblers. However, such studies only provide correlational information about the possible causes of problem gambling, and the actual numbers of problem gamblers that can be identified are typically quite small (for a quantitative study). For example, Sproston, Erens, and Orford (2000) conducted a large-scale survey with a randomly selected sample from the general population ($N = 7680$). The study identified that between 0.6 and 0.8% of the sample could be classified as problem gamblers. Taking their highest Figure (0.8%) this equates to 62 problem gamblers who filled out their questionnaire. In contrast, the strength of the present study is that it intensively interviewed 50 problem gamblers for approximately 1 hour each, providing rich and detailed accounts. The participants in this study were not constrained by pre-scripted and mostly closed ended questions (as with a questionnaire), but were free to report the most salient aspects of their gambling problem. Furthermore, the interviewer was able to clarify and follow up any areas that were not entirely clear, or that warranted further investigation. Consequently, it is doubtful that any further useful information could be gained, in this particular area, by conducting another large-scale survey, although, future prevalence studies may wish to consider the findings of the present study when constructing items for a questionnaire.

Although it would have been possible (to some extent) in the present study to detail how many problem gamblers behaved in particular ways (e.g. the number of gamblers that displayed cognitive regret after losing money), it would not have given an accurate conceptual picture of the motivations of the problem gamblers interviewed, and would undermine the principles of grounded theory. Such an analysis would then begin to resemble a content analysis. For example, if a different sample of 50 problem gamblers was examined, we might find that frequency of their reported motivations may appear to differ slightly from those found in the present study. The intention of the study was not to represent the frequency of how many problem gamblers are motivated in one way or another, particularly as the behaviour changed over time (e.g. for some gamblers the motivations to gamble changed over time and were not mutually exclusive).

The strength of the present study is that it identifies and details the conceptual characteristics and motivations of problem gamblers, and through a process of theoretical sampling reaches a point of theoretical saturation. That is, no new categories emerged from the data during the final stages of the analytic process. Continued analysis of new cases was additionally performed in a confirmatory capacity, and confirmed that theoretical saturation had been achieved. However, it may also be the case that there are further characteristics that were not identified in other types of gamblers that were not present in the study. More specifically, further qualitative research is needed to examine specific subgroups of gamblers who were either not present, or prominent, in the present study. For example, the average age of the participants was 39 years old and the youngest was 18 years old. Specific research with young problem gamblers is needed to develop theory regarding their unique characteristics. Similarly, further research is needed to examine problem gamblers from a variety of ethnic minorities whose gambling may also be influenced by their culture.

The first author conducted all of the interviews and tried to maintain an objective viewpoint while at the same time acknowledging the position as a researcher, which may be regarded by some as a position of power. During the interviews, participants displayed a great willingness and enthusiasm to tell their story. Frequently, interviews

went on longer than anticipated as participants went into considerable detail in recalling their experiences. Rarely, was there any need to prompt or probe, such was the level of detail given in their accounts. Many of the participants expressed a sense of relief in telling their story, and for some this was the first time that it had been told. These people had not yet sought treatment and were afraid to discuss their situation with either family or friends. Others remarked that while in treatment they had not had the opportunity to talk so freely without fear of judgment. This was not necessarily because of any failing on the part of the therapist but because they felt that the therapist would act upon what they said.

In this way, the position of therapist may have been considered more powerful than that of the researcher. Most of the participants were also white males in their late thirties, which may have helped them feel more at ease. However, the interviewer did not feel that the interviews with the female participants were any less open or genuine. The experience of listening to such detailed life accounts was immensely rewarding, and the interviewer felt privileged that participants trusted him enough to provide such a personal insight into the nature of their problems. During the interview stage, the interviewer discussed his notes and observations in some detail with both the co-author and other colleagues, in order to gain another perspective, and to ensure that he was not completely drawn into the world of the gambler.

Implications for prevention, intervention and treatment

The fact that some gamblers are socially rewarded for gambling cannot be altered directly, but more adaptive personal and social skills can be taught as responses to stressful situations (i.e. emotional antecedents) that often trigger gambling. For example, relaxation, assertion and social skills training would be obvious starting places. Furthermore, prevention plans and treatment interventions should aim to increase the gambler's contact with non-gambling peers and non-gambling activities. Such actions would help in filling the void that so many gamblers appear to experience. Also, evidence or knowledge of a gambler's own negative thoughts or feelings about gambling behaviour, irrational biases and control beliefs may provide useful cues for cognitive behaviour modification (Griffiths, 1995; Stumphauzer, 1980). In addition, therapists need to be aware that talking about the experience of gambling can, in itself, be a trigger that may momentarily increase the client's desire to gamble. This would be particularly important if their primary motivation to gamble is to achieve an altered mood state such as 'the buzz'. For some people sharing experiences with other gamblers in a group setting may not be advisable.

Many of the gamblers in the present study were very interested in finding out as much as they could about how and why gambling problems develop. In fact, several participants stated that they found the interview process had allowed them to think about issues that they had not previously considered, for example, the extent to which they gambled for the experience rather than for winning money. Information about the characteristics of problem gambling, perhaps through an on-line database, may be beneficial in helping some problem gamblers to achieve a greater understanding of their problem. Such information may also aid them in their decisions to seek treatment. For example, realization that ceasing or controlling gambling is not just about having enough willpower, but may also require the exploration of other underlying causes. Furthermore, testimonials from recovered problem gamblers would provide positive examples that recovery is possible.

A number of researchers (Gambino & Shaffer, 1979; Griffiths, 2005; Griffiths & Larkin, 2004) have made the important point that these behaviours are not completely self-developed or understood by the people themselves and should be examined more broadly. A number of the participants in this study talked of how they gambled when they got into an argument, felt depressed or were bored, and yet they believed that the only reason they gambled was to win money. Since the perceived experience of the individual can change over time, it is possible that focusing upon the self-reported factors currently maintaining the behaviour does not provide insights into the factors that led to the behaviour developing.

Finally, the findings also suggest that more should be done to enhance educational awareness of the potential dangers of gambling. However, it is questionable whether knowing the true odds has a significant effect upon dissuading people from gambling, given that some problem gamblers, as evidenced in this study, are well aware of the probabilities of winning and losing. However, for some, the belief that they are inherently lucky or different from others helps maintain their interest in gambling. Positioning gambling as an entertainment activity that can have negative consequences, if not undertaken with some caution, may be the best way to approach this. This is particularly relevant to many of the Internet gambling activities that may not be perceived in the same way as more traditional gambling activities. For example, most people are aware of the addictive potential of playing roulette in a casino, but they may not be aware of the addictive potential of playing virtual roulette on the Internet in their own home.

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