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“Double trouble”: The lived experience of problem and pathological gambling in later life

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Abstract

Objective: The objective of this phenomenological qualitative study was to explore the lived experience of older adults who engage in problem or pathological gambling.

Method and sample: Older adults who gambled were recruited and were administered two gambling screens to ensure that they met the criteria for problem or pathological gambling. Eleven problem-pathological gamblers were identified and contributed their narratives via in-depth interviews about their experiences of problem or pathological gambling.

Results: Several themes arising from the interviews were similar to patterns identified with younger gamblers, yet distinct patterns emerged. Some older gamblers gamble as an opportunity to break away and escape from traditional roles and go to extreme measures to continue their gambling while hiding it from

significant others.

Conclusion: Despite research suggesting few seniors encounter problems with gambling, this qualitative study suggests that gambling can have devastating consequences. Older adults may have lessened ability and time to recover from these consequences or from hitting bottom. Key words: gambling, narrative, older adults, problem-pathological gambling, phenomenology, aged

Introduction

In recent years, older Canadians who gamble have increasingly caught the attention of the media due to a growing awareness of the tremendous market that seniors pose for the gaming industry. For example, a December 17, 2000, issue of the *Ottawa Citizen* ran a typical story on seniors and gambling, stating, “With carefully pitched offers of free food, transportation and a cozy social environment, gambling is growing among seniors while gaming addictions trail not far behind.” Similarly, an addictions counsellor was recently quoted in an on-line casino newsletter describing casinos as “a sea of grey” ([Casino Gambling News, 2000](#)). Indeed, many casinos are aggressively marketing gambling to seniors, realizing that seniors have increased time to engage in leisure activities and increasingly find gambling an enjoyable, social, and exciting pastime ([Hope & Havir, 2000](#); [McNeilly & Burke, 2000, 2001](#); [Morgan Research, 1997](#); [Munro, Cox-Bishop, McVey, & Munro, 2003](#); [Savoie, 2001](#)).

Recent studies support the perception that seniors are largely responsible for the upsurge in gambling and the number of legalized gambling venues. [McNeilly and Burke \(2001\)](#) reported that in 49 adult communities surveyed in the U.S., gambling ranked the highest among all social activities of older adults and 16% of seniors went on day trips to local gambling casinos on more than a monthly basis. A recent Canadian study ([Hirsch, 2000](#)) found that 67.8% of seniors polled had gambled within the previous year, and an Australian study ([Morgan Research, 1997](#)) found even higher rates, with 86% of older adults surveyed reporting gambling in the previous year.

Interestingly, these growing numbers of older gamblers appear to have different motivations for gambling than their younger counterparts. [Hope and Havir's \(2000\)](#) study of older adult gamblers revealed that the primary reason for gaming was not the gambling action. Instead, gambling for gambling's sake ranked as only the third reason, behind the pursuit of a pleasurable social activity (first reason) and the food (second reason) ([Hope & Havir, 2000](#)). In the same vein, a study of 478 older adult women conducted by [Tarras, Singh, and Mouffakir \(2000\)](#) found, through examination of this group's expenditures, that their casino visits are balanced between gambling and non-gambling activities such as eating. However,

[Bazargan, Bazargan, and Akanda \(2000\)](#) also found that a small portion of older adults gamble because of stressful life situations such as change in residence, serious financial difficulties, marital separations, death of a spouse, and arguments with friends or significant others. In these incidences, the older adult's motivation to gamble is not so much the pleasurable social activity but the escape from current life stressors ([McCown & Chamberlain, 2000](#)).

Given that some older persons are gambling as an escape or to cope with stress, it is not surprising that some of them may encounter difficulties with problem or pathological gambling ([Morgan Research, 1997](#); [Wiebe, 2002](#)). Yet, traditionally, the research literature has suggested that older persons show lower rates of problem or pathological gambling than younger persons ([National Research Council, 1999](#); [Shaffer, Hall, and Vander Bilt, 1997](#)). For example, in a recent Canadian study of 5000 older adults, the Addictions Foundation of Manitoba found that only 1.6% of the sample were gambling at problem levels, and a further 1.2% were gambling at probable pathological levels ([Wiebe & Kolesar, 2000](#)). These results are similar to an Alberta study, finding rates among seniors of problem gambling at 1.4% and of probable pathological gambling at 0.4% ([Hirsch, 2000](#)), and a U.S. study, finding rates among seniors of pathological gambling at 0.4% ([National Research Opinion Center, 1999](#)).

However, the delineation of older adults as problem-pathological gamblers is in its early infancy ([Petry, 2002](#)), and actual rates of problem and pathological gambling among seniors could be higher than the initial studies suggest. This is due not only to possible underreporting by seniors because of the potentially shameful aspects of gambling ([Hirsch, 2000](#)) but also to the fact that some of the questions on commonly used gambling screens (such as those related to work) do not always apply to older persons.

Furthermore, at least two studies have reported considerably higher rates of problem or pathological gambling among older adult gamblers: [Bazargan et al. \(2000\)](#) found that 17% of a sample of older gamblers were heavy or pathological gamblers and [McNeilly & Burke \(2000\)](#) found that 4.2% of 308 older adult gamblers were problem gamblers and 2.6% were probable pathological gamblers.

Relatively little is known about older gamblers who meet the criteria for problem or pathological gambling. In one of the few studies on older pathological gamblers, [Petry \(2002\)](#) found, not surprisingly, that older pathological gamblers had less problems with family obligations, marital problems, legal problems, and drug problems compared to their younger pathological gambling cohorts. Reflective of gender demographics in older persons is that female older adults made up the majority of the pathological gamblers in Petry's study and spent the most money and the highest percentage of their income gambling. Very interestingly, 89% of the female pathological older adult gamblers in Petry's study reported that they did not

begin regular gambling until casinos became legalized in Connecticut (the study's location) in 1992.

In general, much research remains to be undertaken with respect to older adults experiencing difficulty with problem or pathological gambling. In particular, it has been noted ([Hirsch, 2000](#); [Munro et al., 2003](#)) that there is a particular lack of *qualitative* research exploring the experience of problem and pathological gambling in later life. The purpose of this study is to address this gap by examining how and why seniors develop gambling problems and successfully recover from them.

Method

Research design

A phenomenological approach was utilized in order to understand older adults' lived experience of gambling. The aim of the phenomenological approach is to “understand a phenomenon by having the data speak for itself” ([Osborne, 1990](#), p. 81), or, in this particular case, to understand, as intentional objects, the themes of gambling in the context of research participants' lived experiences ([Heidegger, 1962](#); [Osborne, 1990](#); [Van Manen, 1984, 1990](#)). [Van Manen \(1984\)](#) described phenomenological research as the study of lived experience in which the essence or nature of an experience has been adequately described in language so that the description reawakens or shows us the lived meaning or significance of the experience in a fuller or deeper manner. [Van Manen \(1984\)](#) saw actual phenomenological research as a dynamic interplay in which we turn to a phenomenon of serious interest, investigate the experience as we live it rather than as we conceptualize it, reflect on the essential themes that characterize the phenomenon, and, finally, describe the phenomenon.

Because the intent of the study was to understand older adults' experience of problem gambling, phenomenology, with its focus on the individual's subjective experience and perceptions and on the meaning of a phenomenon ([Osborne, 1994](#); [Tesch, 1990](#)), seemed the ideal qualitative research methodological approach. While ethnography describes and analyzes practices and beliefs of cultures and communities ([Mertens, 1998](#)), this research attempted to illuminate the unique addictive processes and experiences of gambling in the lives of older adult individuals, given the possible life circumstances that separate older gamblers from other populations of gamblers, such as the loss of work life, the experience of boredom and social isolation, the loss of self-esteem, and a corresponding vulnerability to the attractions of casino life. Because phenomenology focuses on the conscious experience of the individual subject ([Osborne, 1994](#)), it is an ideal way to understand how people, despite their good intentions, fall into the addictive process of gambling. For example, as discussed later in the themes section, older adult problem gamblers can consciously attempt

to win back losses by gambling more, oblivious to the fact that in most cases they are merely magnifying their losses. A phenomenological approach allows the subjective experience, self-talk, and meaning-making of this experience of chasing losses to be described and understood.

Rather than a schedule of interview research questions, a narrative method for interviewing was used to give a natural chronological story structure to the interview ([Cochrane, 1985](#); [1986](#)). In these narratives, research participants described their lived experience of gambling starting from the beginning of their gambling careers and as they progressed over time. Key experiences and turning points were identified during the interview and participants were encouraged to expand on these themes. All qualitative interview transcripts ($N = 11$ problem-pathological gamblers) were analyzed using a phenomenological analysis of the themes of the lived experience of gambling ([Osborne, 1990](#); [Van Manen, 1990](#)). Essential to this type of research is reflection on the essential themes that characterize the phenomenon ([Osborne, 1990](#); [Van Manen, 1984, 1990](#)).

Participants

Older adult participants had to be at least 65 years of age and were recruited through ads in local newspapers, notices at casinos and senior centres, and information booths at casinos. Interested participants were offered \$30 for their participation. Recruitment of problem-pathological gamblers proved to be difficult, probably largely due to some of the potential embarrassment and shame associated with identifying as a problem gambler.

Subjects were determined as being either problem or probable pathological gamblers through a combination of the results of the two gambling screens. After three months of recruiting subjects, a total of 24 participants agreed to participate in the study and the initial screening. In the end, a total of 11 participants met the screening criteria for problem or probable pathological gamblers and agreed to be interviewed. All participants were over 65, with 9 females and 2 males being interviewed.

Ethical considerations

The entire research protocol was reviewed and approved by a University Research Ethics Board, and participant confidentiality was assured by the use of pseudonym initials selected by the research participants for the transcription of interviews.

Data collection

Use of gambling screening tools

Two gambling screens were used with participants: the South Oaks Gambling

Screen (SOGS) and the NORC DSM Screen for Gambling Problems (NODS). With the SOGS ([Lesieur & Blume, 1987](#)), a score of three to five represents problem gambling, and scores of five or more represent probable pathological gambling. Our participants all had scores of three or higher, with an average of 7.63. The NODS ([Gerstein et al., 1999](#)) was devised by the National Opinion Research Center for the 1999 National Survey of Gambling Behavior. The NODS classifies respondents as low risk (gamblers with no adverse affects), at risk (gamblers meeting one or two of the criteria), problem (three or four of the criteria), and pathological (five or more criteria). Our 11 participants averaged 5.27 for the NODS “lifetime” score. The score for the last year was not used as a few of the older adults were now in recovery for their gambling addiction. However, all participants met the criteria for lifetime problem gambler with a score of three or more.

Phenomenological interviews

The 11 participants identified as being either problem or probable pathological gamblers participated in an in-depth audio-taped interview, lasting between 40 and 80 minutes, exploring their lived experience of gambling as seniors. As opposed to a predetermined schedule of research questions, a narrative method was used to give a natural chronological story structure to the interviews ([Cochrane, 1985; 1986](#)). Research participants were, however, invited to describe their lived experience of gambling from the beginning of their gambling, and the progression of their gambling over time, including pivotal events and turning points.

Results

Description of data analysis procedures

An analytical procedure outlined by [Osborne \(1990\)](#) was used to conduct the thematic analysis of the data. The researchers read and familiarized themselves with each interview transcription. Each research participant's interview was then reduced to simple paraphrases or surface themes. From these surface themes, higher-order clusters of themes were made within each interview. Following this, the researchers drew out the themes that were common across interviews to highlight the shared structures of the experience of gambling.

Interview themes

Escaping and being on your own

Casino and electronic gaming appeared in many cases to have provided older adults, particularly women, with the opportunity to go beyond the traditional roles of caring and sacrifice for others. For example, P.M. spoke of her gambling this way: “When you're here (gambling) ... you're more or less on your own and nobody can control you—we always helped our kids a lot, so I didn't feel like I should just

scrimp and save any more!” Another woman, T.L., described her gambling as a welcome relief from years of having to commit to her family: “I raised a family all by myself, done all these things ... I've had to follow all these rules and I've had to commit myself, always, always, always, I'm not doing it any more, I am retired.” Similarly, M.M. acknowledged, “You don't do it every day, but you do it occasionally, and I have to admit that it is fun to stay up until three ... and be bad for change!”

Gambling appeared to provide an escape from the reality of current life problems for many seniors. T.L. explained this as follows:

It's an escape, it's an escape, and I think a person has to make some changes to get out of that situation.... It's just been a nice escape for me, so even though it causes me grief at times it's an escape from reality .

M.M. reiterated this idea of gambling as an escape, even going so far as to call it her “fairy world” and “little hideaway.” She explained why her gambling became so problematic for her in later life:

I think that's the basic reason, is to get away from reality, just go to a fairy world.... Yeah, it's an escape, wherever your mind blanks out, you don't think about it.... That's it, your little hideaway, on that chair.

P.M. suffered the loss of her husband, and gambling became her avenue of escape:

I went with him for about five years and then he died suddenly of an aneurysm. He was fifty-one, and then I guessed I was pretty depressed and lonely and you know, it was one place that you could just be away.

C.A. described how gambling could even help you forget about the physical losses associated with aging: “I know I'm losing in the long run ... but I use it as a recreation vehicle.... I want to forget about my arthritis in my hands.”

In addition to providing an escape, pathological gambling could also provide a way for seniors to isolate themselves when they feel depressed or solitary. C.F. described this well:

I don't go there [the casino] to meet people; I don't go there because I know somebody there that's gambling, I don't do that. I just go there, just sit in a corner, just leave me alone, just don't talk to me, I want to be by myself.

Feeling good through a big win

Winning can be experienced by older pathological gamblers as a powerful ego-booster and keeps them addicted to gambling, as they try to recreate the magical feelings of the big win. O.L. described this magic :

It's the sound, it's the carrying it, if I win big I put it in my pants pockets, not my purse and I go straight to my vehicle and ah, a couple of times, like you know, when I won that twenty-five hundred, I actually let some young supervisors walk me to my vehicle.

M.A. had a similar way of describing this: “ I feel good ... I generally don't win that much, but it's something wonderful now and then, where I have won four or five hundred dollars, that's great.” C.A ., an older gentleman with gambling problems, described how these early big wins initially “hooked” him into gambling and began his problems:

Well one day I just said “let's go to the casino,” you know, just for the heck of it. I'd never been in there, and I'd walked by the stupid place for years and years without ever going in. So I went in, and won \$1000! So I'm thinking by golly, and then a couple of weeks later I won \$2700! So I figured I'm doing a bang-up job ... and that's how it all started.

Experiencing a big win appears to both begin, and revitalize, the gambling process for older pathological gamblers. H.J. describes her surprise with not only winning a large amount but *being* a winner:

Well, they told me I got the big win for the day, so I got kind of excited. But then they told me “no—you got the big win for today—you're the only winner.” I won ninety-four hundred dollars! I couldn't believe it!

Some older gamblers, however, had the insight to realize that such big wins could have a darker side—a side that kept drawing them back to gambling. As M.M. relayed, with a serious expression on her face, “I have occasionally won twenty-seven hundred from only playing three loonies, and I said, ‘Oh my God, I shouldn't have done this ... because now we'll be gambling again.’”

The emotional roller coaster ride

Older adult problem gamblers can get carried away by the gambling action—one moment they are up, the next they come hurtling down again. Due to the unpredictability of the gaming action, the problem gambler becomes caught in a veritable roller coaster ride of emotions. H.J. described his own gambling ups and downs : “In horse racing you are either down in the depths, because you had a bad day, or else you're exhilarated ... there's hardly any in between.” The highs of the roller coaster can indeed be sweet and exciting, as O.L. explains:

In the casino it seems you can win or lose a lot more money, and I think it's the excitement in the casino, when you cash out it's the excitement of all the quarters or all the dollars falling in the pot.

However, older problem gamblers also described the dreaded lows that quickly follow the highs of the roller coaster ride of gambling. B.B. experienced it this way: "It's just such a big fast flip-flop ... first, it's real excitement and then, BANG! ... real depression." T.L.'s experience with depression mirrors this: " You can quickly become very depressed and angry, all sorts of things and I'm too ashamed to admit to my family that I gamble as much as I do." Similarly, B.B. reported being in and out of depression, often voicing her anger and depression to the actual machines she was playing:

You know, I was on so much medication, and it kept on getting worse . Eventually, however, in my case, I'd just get real mad. In my case, I've even started yelling at the machines! You know, " Why the hell aren't you paying me??!!" 'Cause you know, the machine next to me would be paying out....

As gambling expenditures increase, the values and belief systems of the older gamblers become jeopardized, subsequently triggering guilt and self-loathing. M.A., for example, told how his gambling problems were in conflict with his Christian beliefs: "My son doesn't say much of anything about my gambling even though we're fairly close.... I might not sound like it, but I am a very strong Christian, so sometimes I have some guilty feelings there." Similarly, O.L. remarked how her behaviour was at odds with what she believed she should do:

Later you're disappointed with yourself, because you work so hard to keep your bills paid up, then, your charge card is up, you know darn well that maybe the last two hundred dollars you spent on gambling should have went towards paying off that card.

Guilt, in turn, is accompanied in several pathological gamblers by chronic worrying and remorse. P.L. acknowledged this:

After a while, I started sitting back and thought and thought for hours and hours, that probably this year, (kind of reason why I phoned you) is that, I maybe lost four thousand dollars this year—and all this finally started to really worry me.

P.M. also felt both guilty and worried about her gambling behaviours:

You hate yourself; we always helped our kids so I shouldn't feel guilty because they're all well off.... So I shouldn't feel guilty but I do. I then start to really worry about what happens if something happens to one of

them—and then I kick myself! I should have given each of them twenty thousand dollars at least. [Sigh] Instead, I pissed it all away.

Double trouble: Extended play to recoup losses or to keep winning

Participants spoke often of the intense chaos generated by attempts to recoup losses and remain in control of their lives. M.A. affirmed that chasing losses was intense:

Sometimes when the machine doesn't win and I have some money left I go to the blackjack table and I am able to recover what I lost from the machine ... instead of putting the money back in the bank, I will go back to another machine and see if I can make it talk—then you start getting in *double trouble* [emphasis].

T.L. was also seduced into chasing losses:

You can lose five or six hundred dollars and you start thinking to yourself: “it *has* to pay out ... it *has* to pay out. “ Then you starting thinking that maybe you should just quit. But then another part of you kicks in and you start thinking, “No, no, no quitting now, pretty soon it will start paying!” Do you see how crazy it gets!?

O.L. descended into this same “craziness” to recoup her losses:

There was nothing I needed to go home for ... ah, I didn't have to, you know, prepare a meal, and I just wanted to win back my money.... That machine got my hundred dollars and I'm going to get it back! But pretty soon that machine's got two hundred dollars.

This urge to recover losses can become so pronounced that people may gamble for extended periods, with complete loss of any sense of time. M.M. acknowledged that this was the case for her: “Sometimes we are there from ten o'clock in the morning until three o'clock in the morning.” Similarly, older problem gamblers could lose track of not only how much they were gambling during a day but even how much they were gambling during a week. As C.F. stated, “I'd kind of lose track of the days ... like last week I think I went back for three days in a row because I am on a winning streak.” M.A. also noted this:

Sometimes I look at a month, and I'd realize I played seventeen times this month. Oh my God, I'll say, I'd better quit—look what I have done, I've lost at least seven hundred dollars this month ... but of course, I couldn't quit.

With some participants, this “double trouble” of playing to recoup losses or keep

winning led to unusual or obsessive behaviour. B.B. described this kind of behaviour with relation to the machines she would play:

You didn't ever let anybody get your machine. You could leave it for minutes to get some money, but you had to *run* and get money ... or sometimes you came back and somebody else got it [the VLT machine]. I would tell them that was my machine I just left, you don't take it! By the end of the night if I put a thousand dollars in it [the machine], and walked away and never got anything, you had to be back at ten o'clock in the morning, right when they opened, to get the same machine ... otherwise, somebody might get "my" money!

S.J. described similar thinking and behaviour:

I got kind of crazy and kept thinking it [the VLT machine] was going to pay off, so I couldn't leave it for someone else . I'd wait and wait for it to pay out until I couldn't take it any more....I'd turn my chair backwards on it [the machine] and take my coins and run to the ladies' room and come back as fast as I could. Sometimes I just seem to be glued to it.

Attempting to regulate or cut back on gambling

Many problem gamblers in this study reported phases of trying to regulate or cut down their gambling. For example, one participant would occasionally keep track of the amount of gambling on a computer, while another used a notebook. M.A., in contrast, tried to develop a schedule:

I would say other than a Wednesday night ... I have been keeping to about twice on the weekend, maybe Saturday, Sunday afternoon, or Friday night, and Saturday afternoon, something like that.... I still go, and when you run into a streak of bad luck, that's when I cut down a bit, or say I'm only going to play regular cards, or I'll fold cards for awhile.

Yet such attempts to regulate gambling often seemed short-lived and often left the older problem gambler frustrated and yearning to play more. P.L. described it this way: "I have gone up to two or three weeks and completely stayed away, but then I get that big urge to play." O.L. had a similar experience:

I don't have very many more years to sock a little bit away, ah, you know, then I get quite mad at myself and then I'll stay away for quite awhile, and then I'll say 'I've been good,' and before I know it, I'll be back.

Hiding, lying, borrowing, and stealing to continue gambling

Participants also described a process where, as their gambling became more and more out of control, they increased their efforts to hide their gambling from significant others. C.F. described her experience of this: “Sometimes right at ten o'clock I would need to go gamble, if I didn't have to work, I would lie to my husband, and tell him that I have to clean some more houses.” P.M. also tried to hide her gambling from her daughter: “I would park beside the Salvation Army, and tell her and pretend that I am doing volunteer work there, but my daughter finally checked a couple of times.”

One study participant, B.B., felt so burdened by her gambling behaviour that she went to extravagant means to conceal it from others:

Like lots of times I would stay out, I would sleep in the car, until he (my husband) went to work and then I would go in the house to bed. 'Cause I was scared and this would go on for months, sometimes I would even drive around the country until he wasn't in the house when I would be there.... Many nights I slept in the car so I wouldn't have to face him about where I'd been.

Eventually, some participants had lost so much control of gambling expenditures that they would begin to borrow or steal to continue to chase “the big win.” B.B. described how this happened to her:

At first, I starting begging my kids, because even though they were going to school, they were also working part-time—so I asked them to lend me the money.... You know, that's something you just don't do—and we've been broke before but never did anything like this. Later on, I frauded the bank, and they were actually good to me!

M.M. also described problems with banks, who she claimed “never asked a thing,” because she was a “nice little old lady.” She put it this way:

At first, you get a loan from the bank to cover it, and then before you know it you're in really big trouble.... Then you go mortgage the house you have paid off, and that's how I ended up where I am at now.

P.M. too, lost her house to pay for her gambling habit: “ Well I sold my house, and the price of my house is gone.... I used to be pretty well off at one time.”

Clinging to hope: “There's always that chance”

Even when they claimed they knew logically that their “chase” was hopeless, many participants described still clinging to the faint hope of winning the big jackpot. O.L. describes this:

It's the, it's the chance, because they have a lot of um, what do they call those ah, they have big jackpots, there is three machines that are connected all over Alberta.... So you know, ah, I've seen that jackpot up to like, nine hundred and some thousand, ah, you know, so there's always the chance that you'll win, and I keep playing.

T.L. had also reached the hopelessness phase of his gambling, yet continued to wager more and more for that one final win that would “save” him:

I keep going back.... I was just thinking, if I won that great big progressive thing, it was up to a hundred and seventy thousand the other day, and I thought if I could win that hundred and seventy thousand, I could pay off my debts, pay off my house, buy a new car, buy all new furniture.

Hitting bottom: Putting the brakes on gambling

For a few participants, a point came when the feverish gambling finally ended in a process of “hitting bottom” or “putting the brakes on.” For participants, this process happened in different ways. For P.M., hitting bottom was simply having nowhere else to go for money: “Well when you run out of money you pretty well have to put the brakes on.... I realized I had no more to live on, and that I was in big trouble.” For T.L., rock bottom also coincided with completely running out of money: “I didn't have enough money to pay the rent and so I went down to the bank and said, ‘Has this cheque been cashed or has this cheque been cashed?’—but I knew the game was over.” For B.B., hitting bottom was accompanied by a brush with suicide:

I was feeling weird, feeling that I was so far in debt, I was having problems with the bank, I actually did let go of the wheel for five seconds and a semi was coming up ... and I said to myself, ‘wake up! ... you won't waste your life because of this.’

Seeking help

Four study participants had actually sought help for their gambling problems. B.B. had seen an advertisement for a 1-800 gambling help number, and gathered the courage to both phone and tell her husband about her gambling: “... so I phoned the 1-800 number and they told me when the meetings were, so I sat down and told him, but I told him you need to come with me.” C.F. also attested to how the first experience of seeking help was fraught with fear and anxiety:

So my first meeting I was terrified, and I bawled more than anything. But you know, when I walked in there—and it was the most, I had the feeling—I felt like I knew some people in there really well, and they knew me.

Another older pathological gambler who got help by attending Gamblers Anonymous described a similar experience of his first few meetings: “ It was just not me in there, there are a lot of people out there like me, and if I was going to get help, I had to stick with it.”

Other participants found Gamblers Anonymous less than helpful. T.L. explained her experience:

I tried to go back to GA and it was the same thing, a personality thing.... You can phone the number, which is what I did about four years ago, I went to a couple of meetings, but I ah, found them like I said, it was so smoky and I found it degrading, let's put it that way.

Recovering from a gambling compulsion can be attempted in many ways: some try treatment, some try to control their gambling, others try Gamblers Anonymous, while others quit cold turkey. M.M. tried another avenue: “I went to a hypnotist, it cost me three hundred dollars, and I stayed away for eight months.”

Discussion

Our findings, drawn from the lived experience of older adult problem and pathological gamblers, appear to be similar to previous research that suggests that there is a need for greater awareness and examination of the growing number of adults who venture into casinos ([Bazargan et al., 2000](#); [Fessler, 1996](#); [Glazer, 1998](#); [Gosker, 1999](#); [Grant, Kim, & Brown, 2001](#); [McNeilly & Burke, 2000, 2001](#); [Morgan Research, 1997](#); [Munro et al., 2003](#); [Petry, 2002](#); [Wiebe, 2002](#)). This examination found that gaming is not always a risk-free pastime for older adult gamblers and that their behaviours not only posed financial risks but led to psychological and social dysfunction.

Through a phenomenological approach to understanding the lived experience of eleven representatives we compiled nine themes that appear to have manifested themselves during problem and pathological levels of gaming. One interesting theme, which many of the female gamblers verbalized, was that gambling was an avenue to break away from traditional and stereotypical roles. It appears that gambling began as a novelty for some older adults, but over a period of time this novelty, whereby one seeks to integrate oneself into a different lifestyle, ended up having serious social, psychological, and financial costs.

What we found particularly interesting was that older adult gamblers didn't deny having a gambling problem themselves but went to extravagant means to hide it from family and friends. Also interesting was the extent to which older adult gamblers experienced guilt and shame from concealing their gaming. Raised during the Great Depression or shortly thereafter, the older adults in our study

disclosed that they had been conditioned to hold saving money and being thrifty in great esteem.

Some similarities among our gambling themes have also been found in adult problem and pathological gambling studies, such as chasing losses, failed attempts to cut down or regulate gambling, binge gambling, gambling to escape current life stressors, entering into illegal acts to continue to gamble, and hitting bottom ([McCown & Chamberlain, 2000](#); [Mok & Hraba, 1991](#); National Research Center, 1991; [Petry, 2002](#); [Shaffer et al., 1997](#)). In spite of these similarities, there is a stark difference between the older adult's ability to recover from hitting bottom and the resulting health complications, psychological and social impairment, and financial ruin that may follow. As well, older adults are a proud group of individuals whose merit in life is tied to a strong sense of self-reliance in an age where our society isolates and marginalizes them ([McNeilly & Burke, 2000, 2001](#); [Mok & Hraba, 1991](#)). As a result, as evidenced by our research participants, when gambling ends and older adults hit rock bottom, they are reluctant to seek treatment and are left to deal with financial debt, social impairment, and psychological maladies by themselves, which only perpetuates their guilt, depression, and loneliness and sometimes leads to extreme behaviours such as fraud, theft, and even suicide attempts.

Overall, it appears that this new populace of problem-pathological older adult gamblers is a hybrid of sorts. This hybrid has characteristics of the younger problem-pathological gambler, yet it carries with it characteristics that may pose a greater threat to the older adult, such as a reluctance to seek help for problem gambling and having less time to recover from psychological, social, and financial ruin. Given that a greater percentage of the population is on the brink of retirement age, and as casino style gaming becomes more socially acceptable along with its increasing availability, it appears that this new hybrid of older adult problem gambler may continue to rise. Therefore, it is important that future research on gambling among older adults employ both phenomenological and quantitative approaches so that we can be better prepared to understand the detrimental influence that gambling has on older adults during and after problem-pathological gambling. It also seems important, given the vulnerability of older adults to problem gambling and their reluctance to seek help for their gambling addiction issues, that prevention programs be researched and implemented both for individuals on the brink of retirement age and for those already retired.

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Tables

Table 1

Gambling screening scores by participant

Problem or probable pathological gamblers ($N = 11$)

Participants (m = male) (f = female)	SOGS (lifetime)	NORC-DSM-IV (lifetime)
1. H.J. (m)	5	5
2. P.L. (m)	4	4
3. M.A. (f)	8	3
4. C.F. (f)	3	3
5. O.L. (f)	12	7
6. B.B. (f)	14	11
7. C.A. (f)	4	3
8. M.M. (f)	9	5
9. T.L. (f)	6	6
10. P.M. (f)	8	7
11. S.J. (f)	11	4
Total mean scores	7.63	5.27