Journal Information Journal ID (publisher-id): jgi ISSN: 1910-7595 Publisher: Centre for Addiction and Mental Health Article Information © 1999-2005 The Centre for Addiction and Mental Health Received Day: 1 Month: 12 Year: 2003 Accepted Day: 26 Month: 8 Year: 2004 Publication date: March 2005 Publisher Id: jgi.2005.13.6 DOI: 10.4309/jgi.2005.13.6

The experience of living with a problem gambler: Spouses and partners speak out

V. A. Dickson-Swift	Affiliation: La Trobe University, Bendigo, Victoria, Australia. E-mail: V.Dickson-Swift@latrobe.edu.au
E. L. James	Affiliation: La Trobe University, Bendigo, Victoria, Australia.
S. Kippen	Affiliation: La Trobe University, Bendigo, Victoria, Australia.
	[This article prints out to about 22 pages.]

For correspondence: Virginia Dickson-Swift, Lecturer in Public Health, La Trobe University, P.O. Box 199, Bendigo, Victoria 3552 Australia. URL: <u>http://www.latrobe.edu.au/she/staff/publichealth/dickson-swift.html</u>, e-mail: V.Dickson-Swift@latrobe.edu.au Acknowledgements: Thanks to the BreakEven Team from Community Health Bendigo for their interest and assistance, and to the research participants.

Contributors: This research was part of an honours degree in public health for the first author (VDS). EJ and SK were involved throughout the project in a supervisory capacity and all authors were involved in the writing of the final draft.

Competing interests: None declared.

Ethical approval: Granted by La Trobe University Bendigo Ethics Committee HREC number A055/00 approved on March 21 2000 for the project "The experience of living with a problem gambler: Spouses and partners speak out."

Funding: This research was not funded.

Virginia Dickson-Swift is a lecturer in public health at La Trobe University. Her teaching areas include health policy, sociology, qualitative research methods, and public health principles. Her research interests include gambling, ethics, and qualitative methodologies. Dr. Erica James is a public health epidemiologist with training in health promotion and epidemiology. She is currently a senior lecturer in public health research at La Trobe University. Her main research interest is in the use of research findings to inform public health practice and policy. Erica has conducted research on a number of topics in a range of settings, including schools, hospitals, workplaces, and general practice clinics.

Sandra Kippen is a lecturer in public health at La Trobe University. Her teaching areas are sociology, qualitative research methods, communication, and ethics. Her research to date has been in the areas of occupational health and safety and mental illness, as well as the history of health and illness.

Abstract

Whilst gambling provides a source of enjoyment and entertainment for many people, it can be a source of hardship for others. The problems associated with gambling have been extensively studied with gamblers; however very few studies have been specifically undertaken to identify the impact that gambling has on spouses, partners, and family members.

This qualitative study provided an opportunity for some partners and spouses of people affected by problem gambling to identify the outcomes that gambling had on their lives. It identified that excessive gambling has a number of significant effects on financial security, family relationships, and physical and emotional health.

Problem gambling is a major social health problem that is negatively impacting the lives of many people in our community. Interventions that are designed to deal with problem gambling need to go beyond the gambler and consider those other people in their lives who are often overlooked.

Introduction

Gambling has long been a distinctive feature of Australian society (<u>Charlton, 1987</u>). Australians have had ready access to a wide variety of legal gambling pursuits, and gambling taxes have financed many essential services and boosted economic activity (<u>Productivity Commission, 1999</u>; Victorian Casino and Gaming Authority, 1999). However, the last 20 years have seen a major change in gambling with rapid growth in the gaming industry. There are now new forms of gaming including casinos and electronic gaming machines (EGMs), also referred to as poker machines or "pokies" and available in all states in Australia. This has resulted in an increased availability of, and access to, many different forms of gambling in the community. The 1990s have been marked by a major rise in expenditure in Victoria attributable to the introduction of EGMs to the state (<u>Jackson, Thomason, Ryan, &</u> <u>Smith, 1997</u>).

Gambling continues to be undertaken by many people as a legitimate leisure pursuit, with recent Australian and American epidemiological data suggesting that 80–90% of adults gamble at one time in their lives (Dickerson, Baron, Hong, & Cottrell, 1996; Volberg, 1996). Australians are now considered to be the heaviest gamblers in the world, with the average spending per head rising 35 per cent between 1994–95 and 1997–98 (Jackson et al., 1997; Jackson et al., 1998). Recent studies in Australia and New Zealand estimate that problem gambling affects one to two per cent of the adult population (Abbott & Volberg, 1992; Dickerson, Baron, Hong, & Cottrell, 1996; Dickerson, McMillen, Hallebone, Volberg, & Woolley, 1997). The latest estimate of the prevalence of problem gambling in Australia is that 2.3 per cent of the adult population (330,000) have significant gambling problems, with 140,000 experiencing severe problems (Productivity Commission, 1999). These estimates, combined with the increase in gambling outlets, have the potential to impact on the lives of many gamblers and on the lives of their spouses, partners, and other family members.

There are a number of definitions for problem gambling. The Australian Institute for Gambling Research offers the following:

Problem gambling refers to the situation in which a person's gambling activity gives rise to harm to the individual player, and/or his or her family, and may extend into the community (<u>Dickerson et al., 1997</u>, p.2).

This definition is used for this paper, as it emphasises that problem gambling has the potential to negatively impact on gamblers and their families.

This article presents the results from a qualitative study undertaken in a large regional town in Victoria. It highlights a number of issues raised by partners and spouses of problem gamblers.

Literature review

There is a scarcity of literature available on the needs of the gamblers' spouses and partners. The little research that does exist suggests that spouses and partners suffer a range of problems related to their partners' gambling.

Families can be seriously disrupted by problem gambling. They may experience difficulties, such as emotional distress from arguments and uncertainty, financial problems, and health problems (<u>Heineman, 1994</u>; <u>Lesieur & Rosenthal, 1991</u>; <u>Volberg, 1994</u>). The burden of problem gambling is borne chiefly by the family

(<u>Berman & Siegel, 1992; Lesieur, 1998</u>), adversely affecting spouses, partners and other family members (<u>Abbott, Cramer, & Sherrets, 1995; Darbyshire, Oster, &</u> <u>Carrig, 2001; Ladouceur, Bopisvert, Loranger, & Sylvain, 1994</u>). Some of the problems identified are poor communication, inadequate conflict resolution, and ineffective parenting (<u>Ciarrocchi & Hohmann, 1989; Lorenz & Shuttlesworth, 1983;</u> Lorenz & Yaffee, 1988).

Spouses of problem gamblers often reported physical and emotional problems similar to those of the gambler (<u>Dickerson, 1995</u>). These include sleeping problems and a wide range of stress-related physical problems. Others reported high levels of depressive symptoms (<u>Bergh & Kuhlhorn, 1994</u>), and suicide attempts by spouses and partners of problem gamblers are reported to be three times that of the general population (<u>Gaudia, 1987</u>; Lorenz & Yaffee, 1988). As well as the constant stress of living under threat of the above, medical costs associated with illness may exacerbate both health and financial problems. Lack of money can impact on purchasing power for food, medical treatments, and other essentials (<u>Lorenz & Yaffee, 1988</u>).

Lying and deceit are common among gamblers, and the impact this has on the family is marked. Constant lying and deceit may result in marital tension where the reported conflicts include money problems, loan defaults, repossession of property, and the resulting lack of money for everyday necessities (Blume, 1988). Lying can erode trust in a relationship, which can, in turn, gives rise to many other problems including anger, violence, depression, suicidal thoughts, and alcohol abuse (Lorenz & Yaffee, 1988). Partners often feel fearful of the gambler concealing debts, are scared of the loss of financial security, and also report feelings of guilt, self blame, emotional stress, and physical tension (Lorenz & Yaffee, 1988; Lorenz & Shuttlesworth, 1983). They live with the constant threat of being harassed by bill collectors and creditors (Berman & Siegel, 1992; Blume, 1988; Lorenz & Yaffee, 1988). Problem gamblers, their spouses and family members may also feel outcast from their community, friends, and families due to the shame associated with problem gambling. This has a direct effect on the ability of the spouses and partners to participate fully in community and family life.

People with gambling problems have reported engaging in illegal behaviours to finance gambling (Bergh & Kuhlhorn 1994; Blaszczynski & McConaghy, 1994; Ladouceur et al., 1994). The crimes committed included fraud, embezzlement, theft, and forgery. Committing crimes to finance gambling could increase the risk of being incarcerated, which would obviously impact on the spouse or partner and the family.

Another of the most obvious impacts of problem gambling is the economic cost. Gambling can have devastating financial effects on families (<u>Bergh & Kuhlhorn,</u> <u>1994; Dickerson, Allcock, Blaszczynski, Nicholls, Williams, & Maddern, 1996;</u> <u>Gaudia, 1987; Lorenz & Yaffee, 1988</u>), including inability to pay mortgages and utility bills, and a lack of money for food. Problem gambling can undermine the family's financial situation and thereby jeopardise the physical and emotional health of the members.

There are few studies conducted in Australia and overseas that directly examine the effects of gambling on spouses or partners. The majority of the published studies relate to gamblers and the impacts their gambling has on their own lives. A client analysis of new clients presenting to the BreakEven/Gamblers Help gambling counselling service in Victoria between 1 July 1997 and 30 June 1998 showed that almost half (44.8 %) of the 3,149 clients registered had one or more dependent children (Jackson et al., 1999). Whilst the majority of clients accessing BreakEven services are people reporting problems with their own gambling, many other people seek assistance from BreakEven due to problems arising from the impact of another person's gambling (Jackson, Thomas, & Holt, 2002). Problem gambling activity can have a number of pervasive and harmful impacts on people's lives, and these problems are reported in Table 1. The fact that over three quarters (78.2%) of problem gamblers with dependent children attending BreakEven report five or more of these behaviours suggests that gambling has becoming very problematic, with obvious consequences for both the gambler and other family members.

Partners of problem gamblers report higher rates of interpersonal and family issues than those reported by the gamblers themselves. This highlights that gambling creates a number of problems, not only for the gambler but also for the partners and children of those presenting for counselling.

Qualitative research methods have rarely been employed in gambling research despite their ability to give insight into the real problems faced by gamblers and their partners and families. In light of this gap in gambling research, the study described here qualitatively examines spouses' and partners' experiences of living with a problem gambler, explaining in depth the impact of problem gambling on spouses and/or partners.

Method

In order to be eligible for inclusion in this study, the participants had to be a partner or a spouse of a problem gambler and be willing to participate in one in-depth interview about their experiences. Recruitment methods included advertisements in local newspapers, and in flyers distributed through local BreakEven gambling counselling services and placed in community health centres.

Five women and two men ranging in age from 35 to 65 years responded to the advertisement and took part in an individual interview. The main forms of gambling

undertaken by their partners were horse racing and pokies, with pokies being the most popular and the main source of gambling problems for five out of the seven participants. The length of the relationships with the problem gamblers ranged from 1 year to 35 years, whilst the length of gambling ranged from 2 years to 15 years. One of the participants was currently undergoing counselling with the local BreakEven service. All of the participants lived in the same regional Australian town, and all came from households whose combined income was less than \$40,000 per annum. Four of the partners were living with the gambler at the time of the study, with the remaining three having been either divorced or separated in the previous two years. All of those who were living with their partners had told the gambler that they would be taking part in the study.

Data was collected through individual interviews held in a range of venues that were convenient for the participants. The venues chosen included the participants' homes, interview rooms at a local community health centre, and a local café. All of the interviews were conducted by the first author and were audiotaped. The interview schedule was based on topics identified in the literature and further developed through informal discussions with a number of people attending gambling forums in the local town. The topics for discussion included financial, relationship, emotional, and physical health impacts of gambling on the spouse or partner.

The data from the interviews were analysed using the method of analysis presented by <u>Miles & Huberman (1994</u>, p. 318). The first author transcribed all of the interview tapes, which enabled preliminary analysis to begin. After completion of transcription, data reduction was conducted to develop a coding framework (<u>Strauss & Corbin, 1990</u>). A number of codes were developed for the main themes that emerged from the data. Reliability and validity issues were addressed by the use of audit trails throughout the research process (<u>Grbich, 1999</u>).

Ethical approval was granted for this study from LaTrobe University Bendigo Human Research Ethics Committee. Due to the sensitive and sometimes emotional aspects of problem gambling, the interviewer had information available regarding services and agencies within the local town that were available for those requiring assistance.

Results

Those who took part in the interviews expressed their thoughts, feelings, and opinions on the impact that their partner's gambling had on their lives. The major themes reported below include quotes taken directly from the interviews. These are presented in the participant's own words.

Availability of gambling

All of those whose partners gambled on poker machines advised that their partners began to experience problems with their gambling behaviour after the machines were introduced to the town. Most of the participants felt that the accessibility of poker machines had a direct relationship with the development of gambling problems in their partners.

Things were okay before those machines came to town, she used to take a lottery ticket every week but nothing like this.

I think that it's too easy; he can go into the club anytime he likes, and they even give out food and drinks just to keep them there.

Impacts on the relationship

Many of the participants felt that their partner's gambling had negatively impacted on their relationship. Three of the relationships had ended, either through separation or through divorce, whilst the other four participants had remained in relationships with their gambling partners. The reasons expressed for remaining in the relationship varied from love for the gambler to believing that there was nowhere else to go. One of the participants expressed her frustration with her inability to leave her partner.

I had no financial support, I would have got nothing from the house because we were owing so much on it and as this friend said to me, "Well at least your kids have got a roof over their head" ... so I stayed.

Some participants who had stayed with their gambling partners raised concerns for the future of the relationship. They felt a sense of foreboding, and pondered their own futures if they stayed in the relationship.

You think to yourself if this person is a problem gambler where does that take the relationship in the future?

They acknowledged that they sometimes felt that it would be much less stressful to end the relationship.

Sometimes I think that it would be better if I just left, took the kids and got out. I don't love him anymore.

Loss of trust emerged as a very significant theme. Many of the participants identified dealing with loss of trust as the most difficult aspect of the gambling. They felt that with the trust gone, it was difficult to maintain a relationship. Even the four participants who had maintained their relationship with the gamblers felt that the trust that had been lost in the relationship could never be restored.

I still cannot trust him, I find myself still searching through his pockets

and I think he is still hiding things from me. I will never ever trust him.

I just despise him, we haven't really had a relationship for years, I haven't trusted him for 13 years and I will never recover from that.

Associated with loss and trust were lying and deceit. Instances of lying and dishonest behaviour, including lying to get money from people, were described by spouses. Some participants expressed their anger and frustration over the fact that nobody else seemed to see through the lies and deceit.

I lost most of my friends; he embarrassed me by borrowing money from friends and lying about what I needed it for. People must have thought I was an idiot.

He had given the bank all these excuses, that I was sick. He'd also been borrowing money from his mother for years. I don't know what stories he told her. He used to borrow from her every week; he told her we needed new shoes for the kids...

Loss of respect was identified by a number of the partners as an outcome of gambling, with many reporting personal loss of respect for their gambling partner.

I think I was in a state of shock when I really knew what he was doing. How can you respect a man who has children and doesn't care about supplying for their needs?

All of the lying, the excuses, I've heard them all over the years to the point where I have no respect for him—I don't believe anything he tells me anymore.

Taking responsibility

Partners and spouses spoke of acting as a "gatekeeper" for the money. Four of the gamblers had voluntarily handed over all access to money to the partner in an attempt to control their gambling; however, three partners had been forced to take responsibility by courts and financial planners. For some of the partners, taking responsibility for bill payments and daily living expenses included having to deal with policemen, sheriffs, bank managers, and other creditors on a regular basis.

I got very friendly with all the policemen in [town]—I think I knew every one of them because they were on my door every second night wanting to repossess this, that, and the other.

The phone was always ringing with the credit company wanting to talk to him; he would never take the calls, and I would have to lie to them for him. Gamblers were often described by their partners as being quite childlike.

Well, she's at me all the time-she's got to be like a little kid.

He is like a child getting up to mischief, always looking for new ways to get money.

They did not want to take responsibility for their actions, instead expecting their partners to take control of their lives and their finances for them. One man equated his wife's nagging for money to that of "a kid in a lolly shop."

Making sacrifices

All participants spoke of going without things because of their partner's gambling, even to the extent that their sacrifices were often necessary to put food on the table. There was a sense of resignation that making sacrifices was part of their lives, and they expressed frustration over not being able to buy anything for themselves. They saw this as very unfair to them as they were going without whilst the gambler was not.

I wish I had a bit of money and I could go and buy something for myself.

I feel that I am always the one who is missing out on things; I try to make sure that there is enough for the kids but there is never anything left for me.

Financial impacts

All of the participants felt that gambling had a major negative impact on their financial situations. All spoke of being under significant pressure to meet daily living expenses due to their partner's gambling losses. Many of the participants expressed that they had been unable to purchase food for themselves and their families as a result of gambling. Others resorted to eating poor quality food and surviving on soups made from leftovers.

...we used to eat stuff that was barely fit for human consumption—stuff that had been sitting in the fridge for two weeks, and the cheapest food available, old stuff, stuff I wouldn't give to a dog I loved.

Mortgage and rent payments presented considerable difficulty for a number of participants, with many of them wrongly having believed that their mortgage and rent payments were being made. Some had no idea of the extent of the indebtedness of their gambling partner. This realisation was often accompanied by feelings of hopelessness and despair.

Many participants also expressed difficulties in meeting other household and living expenses like utilities, school fees, and car registration.

The electricity, gas, and phone used to get shut off regularly, and then we'd have no heating, no hot water and nothing to cook on. No school fees paid, the kids were embarrassed.

Impact on health

Participants reported suffering from a variety of physical and emotional health problems as a result of their partners' gambling activity. Six reported at least one problem with their physical health that they felt had been caused or exacerbated by the gambling. These problems included insomnia, headaches and stomach upsets.

I am an insomniac. I haven't slept properly for years. I think about things when I should be asleep, and I have nightmares about not having enough money.

Three participants felt that stress was a major contributing factor to their ill health. It was felt that the stress of the gambling, combined with the worry of never having enough money, had physical manifestations such as migraines. Others spoke of resorting to self-destructive behaviours like overeating, drinking, and smoking as a way to deal with the daily stresses of trying to make ends meet.

Gambling had impacted on a number of the participants' ability to access preventive health care and medication. One older man who had undergone significant heart surgery undertook a process of rationing his medication after periods of heavy gambling by his wife.

I've stretched out and gone without tablets or only had one every second day, which I shouldn't because I've had a triple bypass and you have to keep taking your medication. But I've had to if I can't afford it.

One other participant reported that she and her children had often made sacrifices with their health due to their inability to afford preventive health care and medication. She expressed considerable frustration in not being able to afford simple pain relief for sick children, and sacrificing her own dental health for the sake of her children.

I never went to the dentist in ten years, because the kids had to go and we could not afford for both me and them to go.

Most of the participants felt that their emotional health had suffered due to their partner's gambling. Some spoke of depression, feelings of loss and paranoia.

I was permanently scared of answering the door or the telephone in

case it was the police coming to take something. A lot of the time the kids were sent to answer the door and tell them that we were not home; sometimes we even hid. I was always afraid of the police, to the point where I always thought that they were looking for me.

I feel depressed most of the time, there is no money for anything, I have no friends left.

I wouldn't tell anyone about the gambling...I just coped alone until it all got too much for me, I was just defeated and I didn't even have the energy to cry.

Guilt and self-blame

Partners often blamed themselves for their partner's gambling, whilst recognising that this type of self-blaming was sometimes irrational and emotionally damaging. Some reported feelings of guilt, that maybe it was their fault that the partner was gambling, or that they had somehow pushed the person into gambling.

If she's gambling I sort of feel like it's my fault because I haven't stopped her.

Isolation

Some participants spoke of feeling lonely and isolated from their family, their friends, and their partners. For those whose relationships had broken down, the isolation was expressed in a physical and emotional sense. Many felt isolated because they had not told family or friends of their partner's gambling. Some of the gamblers had borrowed money from friends and family by lying about its uses, which increased the feelings of isolation for many of the partners.

It really damaged my relationship with my sister and the rest of the family. I felt like an outcast at times, like they blamed me for not being able to stop him.

Well, I didn't see people while I was with him; we had no friends left he had made sure of that.

Three participants felt that they had withdrawn from social life due to their inability to pay for social activities. For some the gambling had led to a complete breakdown in family relationships, leaving some partners with no social support network.

We never went out together anymore; I was scared that it would end up at the pokies...it always did and then there would be an argument. I would want to go home and he would want to keep gambling. A few participants reported feeling isolated because their partners were not around. They often felt that the gamblers did not spend enough time with them or their families. Two people spoke about the gamblers being absent from the house for hours on end, sometimes using excuses to cover up how they had spent their time away from the house.

He stayed out some nights—he didn't come home until 6 o'clock in the morning... he was never there for me or the kids

Discussion

Problem gambling has been described as an "extremely incapacitating disorder that often results in failure to maintain financial solvency or provide basic support for oneself and one's family" (American Psychiatric Association, 1980, p. 324). It has been acknowledged that problem gambling has a number of significant effects on the lives of the spouse or partner as well as on the gambler (American Psychiatric Association, 1995). Some of the characteristic problems that arise from gambling behaviour include,

...extensive indebtedness and consequent default on debts and other financial responsibilities, disrupted family relationships, inattention to work and financially motivated illegal activities to pay for gambling (<u>American Psychiatric Association, 1980</u>, p. 324).

A combination of the effects listed above has been found in this study. They include financial problems, health problems, and problems with relationships. All of the participants reported that gambling had adversely affected their lives and impaired their ability to do many things that other people take for granted.

More than half the participants in this study felt that the availability of gambling opportunities, and in particular the availability of pokies or EGMs, had a direct relationship with their partner's gambling problems. Although this evidence is purely a perception of the spouses and partners involved in this study, availability has previously been linked with increases in the number of people for whom gambling has become a problem (Volberg, 1994; Jackson et al., 1998; VCGA, 1997).

All the participants in this study reported that their partner's gambling had impacted significantly on their relationships. Some of the relationships had broken down, resulting in separation and divorce. Divorce and relationship breakdown are commonly reported by-products of problem gambling. It has been estimated that there are around 1600 gambling-related divorces and 1600 gambling-related separations in Australia annually (Productivity Commission, 1999, p. 191). The cost of these separations and divorces, coupled with other costs of emotional

distress and tension that problem gambling imposes on gamblers and their families, have been estimated to be at least \$1.8 billion per year (<u>Productivity</u> <u>Commission, 1999</u>, p. 91).

The participants reported that the loss of trust was of significant importance, and it often came about through a series of lies and dishonest behaviour. Lying has been previously identified as a significant issue for spouses (Blaszczynski, Walker, Sagris, & Dickerson, 1999; Heinmann, 1987; Jackson et al., 1998; Lorenz & Shuttlesworth, 1983; Productivity Commission, 1999). Blaszczynski et al. (1999, p. 11) summarise by saying, "repeated deceit, lying and broken promises undermine any sense of trust a spouse may have in the gambler."

Another important issue to emerge from the interviews was a sense of the spouses having to take responsibility for many aspects of their partner's lives. <u>Steinberg</u> (1993, p. 159) similarly found that "...when a gambler is "unavailable" and takes little responsibility for parenting and household management the spouse often assumes these responsibilities." Some of the participants in the current study felt that their gambling partners were very immature, and often needed to be treated like children. These childlike behaviours have also been reported by <u>Steinberg</u> (1993, p. 159) when he stated that "...often the spouse comes to view the gambler as immature, irresponsible, almost like another child."

Some of the participants in this study expressed strong feelings of guilt and blame. They sometimes felt guilty over their inability to stop the gambler. These feelings have previously been identified by spouses of problem gamblers, with recognition that they can create a great deal of stress in the spouse (Lorenz & Yaffee, 1988; Heineman, 1987).

The participants in this study spoke of a number of financial impacts that problem gambling had on their daily lives. For some it was an inability to provide proper food and medical care for themselves and their families; for others it was an inability to meet everyday financial responsibilities, including food and clothing. These problems can be directly related to gambling and have been reported in a number of studies in the past (Boreham, Dickerson, & Harley, 1996; Bergh & Kuhlhorn, 1994; Lorenz & Shuttlesworth, 1983; Lorenz & Yaffee, 1988).

The participants related many physical and mental health problems that they felt were either caused or exacerbated by their partner's gambling. They spoke of headaches, insomnia, and stomach upsets. These findings are consistent with those reported in previous studies of gambling and its effect on spouses (Lorenz & Yaffee, 1988; Lorenz & Shuttelsworth, 1983). There is a lack of documented evidence regarding the impact of problem gambling on the health and well-being of spouses of problem gamblers and their families in the Australian context. It is "...commonly accepted that many gamblers or members of their families may seek

assistance from health workers without identifying gambling as a problem" (<u>Aimes, 1999</u>, p. vi).

It is also difficult to estimate the health costs of gambling-related problems. Currently there is no Medicare item for "problem gambling," which means that the claims presented by general practitioners and private providers (like psychiatrists) give no indication of when people are seeking help for health problems related to gambling (<u>Aimes, 1999</u>, p. vii).

Limitations and strengths of the research

The chosen methodology and the accompanying small sample may have affected the generalisability of the results. However, as this study was undertaken to describe the experience and to gain an understanding of living with a problem gambler, rather than attempting to generalise the findings to the wider community, the chosen methods were appropriate and preferable.

The participants in this study may have had some unique characteristics which could differentiate them from a wider population of spouses and partners of problem gamblers. The participants were all living in one regional town in country Victoria, and were all from households with a similar level of income. Different themes may have emerged with participants from other smaller rural areas, larger metropolitan areas, or from a sample with higher incomes.

This study was carried out in a regional centre in Victoria, Australia. Most of the other gambling research completed in Australia has been undertaken in metropolitan areas. By choosing a regional area it was possible to gain an understanding of the issues in a non-metropolitan area, thus providing a comparison to those studies undertaken in metropolitan areas. This also ensures that health and social policy is appropriately evidence-based for communities outside metropolitan centres.

Conclusion

In this study the spouses and partners have identified that problem gambling raises significant issues in their lives and those of their families. Their lives are often difficult; many feel isolated, ashamed, and embarrassed due to their partner's gambling. Some of their relationships are ruined or very shaky, and gambling affects their ability to trust their partners. Many of them have very limited financial resources, and make a number of sacrifices to maintain their lives and the lives of their families. The partners suffered from a wide range of physical and emotional health problems attributable to their partner's gambling. They often feel isolated from their friends, families, and other support networks.

Recommendations

Further research focusing on spouses and partners of problem gamblers is recommended. A larger qualitative study could be undertaken with spouses and partners from other regional, rural, and metropolitan regions to assess whether gambling has similar impacts on people from different areas. It is also suggested that research be undertaken in another state that has had access to EGMs and other forms of gambling for more than the past few years. This would enable some predictions of future impacts to be made for Victoria. Australian research conducted outside of metropolitan centres will enable us to better understand the impact of gambling across the nation.

In light of the findings of this and other research, it is recommended that further research be conducted to calculate the cost of problem gambling to the health system, taking into account the costs for the gamblers, their spouses, partners, and other family members who may be adversely affected by gambling. It is also recommended that research be conducted to quantify the numbers of gambling-affected people accessing community support services such as emergency relief, financial support services, and other counselling services.

In terms of service provision, it is recommended that resources be directed towards the enhancement of community education packages, to raise the awareness of the possible impacts of problem gambling on partners, spouses, and other family members. We also recommend that education packages for general practitioners and other service providers, who are often the first point of contact for people who have a problem gambler in their lives, be adopted throughout Australia.

References

Abbott, D. A. Cramer, S.L. Sherrets, S. D. (1995). Pathological gambling and the family-practice implications. *Families in Society-The Journal of Contemporary Human Services*, 76 (4), 213-219.

Abbott, M. W. Volberg, R. (1992). The New Zealand National Survey of problem and pathological gambling. *Journal of Gambling Studies*, 12, 47-60.

Aimes, M. (1999). Gambling: Is it a health hazard? Paper prepared for the Department of Health and Aged Care Occasional Papers: New Series No. 2. Commonwealth of Australia, Canberra. Available: http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pubs-hfsoccocpanew2-cnt.htm

American Psychiatric Association. (1980). *Diagnostic and statistical manual of mental disorders* (3rd ed.). Washington, DC: Author.

American Psychiatric Association. (1995). *Diagnostic and statistical manual of mental disorders*. (4th ed.). Washington, DC: Author.

Bergh, C.. Kuhlhorn, E.. (1994). Social, psychological and physical consequences of pathological gambling in Sweden. *Journal of Gambling Studies*, 10 (3), 275-285.

Berman, L.. Siegel, M. E.. (1992). *Behind the 8 ball: A guide for families of gamblers*. New York: Simon & Schuster, Fireside/Parkside Books.

Blaszczynski, A.. McConaghy, N.. (1994). Criminal offences in Gamblers Anonymous and hospital treated pathological gamblers. *Journal of Gambling Studies*, 10 (2), 129-145.

Blaszczynski, A.. Walker, M.. Sagris, A.. Dickerson, M.. (1999). Psychological aspects of gambling behaviour: An Australian Psychological Society position paper. *Australian Psychologist*, 34 (1), 4-16.

Blume, S. B. (1998). Compulsive gambling and the medical model. *Journal of Gambling Behaviour*, 4, 237-247.

Boreham, P. Dickerson, M. Harley, B. (1996). What are the social costs of gambling? The case of the Queensland gaming industry. *Australian Journal of Social Issues*, 31 (4), 425-443.

Charlton, P. (1987). *Two flies up a wall: The Australian passion for gambling*. Sydney, New South Wales: Meuthen Haynes.

Ciarrocchi, J.. Hohmann, A.. (1989). The family environment of married male pathological gamblers, alcoholics and dually addicted gamblers. *Journal of Gambling Behaviour*, 5 (4), 283-291.

Darbyshire, P. Oster, C. Carrig, H. (2001). The experience of pervasive loss: Children and young people living in a family where parental gambling is a problem. *Journal of Gambling Studies*, 17 (1), 23–48.

Dickerson, M.. (1995, November 15-17). Problem gambling in Australia. In *Proceedings of the inquiry into the social impact of the extension of EGMs beyond casinos in Tasmania*. Tasmanian Council of Social Services.

Dickerson, M. Allcock, C. Blaszczynski, A. Nicholls, B. Williams, R. Maddern, R. (1996). An examination of the socio-economic effects of gambling on individuals, families and the community including research into the costs of problem gambling in NSW. Report to the Casino Community Benefit Fund, New South Wales Government.

Dickerson, M.. Baron, E.. Hong, S.. Cottrell, D.. (1996). Estimating the extent and degree of gambling related problems in the Australian population-A national survey. *Journal of Gambling Studies*, 12 (2), 161-178.

Dickerson, M.. McMillen, J.. Hallebone, E.. Volberg, T.. Woolley, R.. (1997). *Definition and incidence of problem gambling, including the socio-economic distribution of gamblers*. Melbourne, Victoria: Victorian Casino and Gaming Authority.

Gaudia, R. (1987). Effects of compulsive gambling on the family. Social Work, 32 (3), 254-256.

Grbich, C.. (1999). Qualitative research in health. London: Sage.

Heineman, M. (1987). A comparison: The treatment of wives of alcoholics with the treatment of wives of pathological gamblers. *Journal of Gambling Behaviour*, 3 (1), 27-40.

Heineman, M. (1994). Compulsive gambling: Structured family intervention. *Journal of Gambling Studies*, 10 (1), 67–76.

Jackson, A. C.. Thomason, N.. Ryan, V.. Smith, S.. (1997). *Analysis of clients presenting to problem gambling services July 1995 to June 1996*. Client services analysis report no. 1. Melbourne, Victoria: Victorian Department of Human Services.

Jackson, A. C.. Thomas, S. A.. Thomason, N.. Crisp, B. R.. Smith, S.. Ho, W.. Borrell, J.. (1998). Analysis of clients presenting to problem gambling services July 1996 to June 1997. Client services analysis report no. 2. Melbourne, Victoria: Victorian Department of Human Services.

Jackson, A. C.. Thomas, S. A.. Thomason, N.. Borrell, J.. Crisp, B. R.. Ho, W.. Smith, S.. Holt, T. A.. (1999). Analysis of clients presenting to problem gambling counselling services July 1997 to June 1998. *Client and services analysis report no. 4*. Melbourne, Victoria: Victorian Department of Human Services.

Jackson, A. C.. Thomas, S. A.. Holt, T. A.. (2002). *The Victorian Problem Gambling Impact Scale: A brief introduction*. The University of Melbourne/La Trobe University Problem Gambling Research Program.

Ladouceur, R.. Bopisvert, J. M.. Loranger, M.. Sylvain, C.. (1994). Social cost of pathological gambling. *Journal of Gambling Studies*, 10 (4), 401–410.

Lesieur, H.R. (1998). Costs of treatment of pathological gambling. *Annals of the American Academy of Political and Social Science*, 556, 153-159.

Lesieur, H. R., Rosenthal, R. J., (1991). Pathological gambling: A review of the literature. *Journal of Gambling Studies*, 7, 5-40.

Lorenz, V. C.. Shuttlesworth, D.. (1983). The impact of pathological gambling on the spouse of the gambler. *Journal of Community Psychology*, 11, 67-76.

Lorenz, V. C.. Yaffee, R. A.. (1988). Pathological gambling, psychosomatic, emotional and mental differences as reported by the spouse of the gambler. *Journal of Gambling Behavior*, 4 (1), 13-26.

Miles, M. B., Huberman, A. M., (1994). *Qualitative data analysis: An expanded source book*. Newbury Park, CA: Sage.

Productivity Commission. (1999, July). *Australia's gambling industries*(draft report). Canberra, Australian Capital Territory: Author.

Steinberg, M. A. (1993). Couples treatment issues for recovering male compulsive gamblers and their partners. *Journal of Gambling Studies*, 9 (2), 153-167.

Strauss, A.. Corbin, J.. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage Publications.

Victorian Casino & Gaming Authority (VCGA). (1997). Report into the social and economic effects of EGMs on non-metropolitan communities. In collaboration with Deakin Human Services Australia (Deakin University) and the Melbourne Institute of Applied Economic and Social Research (Melbourne University)

Victorian Casino & Gaming Authority (VCGA). (1999). *Sixth survey of community gambling patterns and perceptions*. Melbourne, Victoria: Roy Morgan Research.

Volberg, R. A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. *American Journal of Public Health*, 84 (2), 237-241.

Volberg, R. A. (1996). Prevalence studies of problem gambling in the United States. *Journal of Gambling Studies*, 12 (2), 111-128.

Tables

Table 1

New clients with dependent children: Presenting problems by client status, 1997-98

Presenting problem	Problem gamblers (n=1,021)		Partners & others (n=351)		Total persons (n=1,372)	
	n	%	n	%	n	%
Gambling behaviour*	923	90.4	75	21.4	998	72.7
Interpersonal- related	563	55.1	226	64.4	798	57.5
Intrapersonal	575	56.3	159	45.3	734	53.5
Financial issues	586	57.4	123	35.0	709	51.7
Family issues	463	45.3	175	49.9	648	46.5
Leisure use issues	444	43.5	13	3.7	457	33.3
Employment & work-related issues	232	22.7	17	4.8	249	18.1
Physical symptoms	135	13.2	15	4.3	150	10.9
Legal issues	90	8.8	18	5.1	109	7.9

Keywords:

Keywords gambling

qualitative

.