

## **Consequences of pathological gambling on the gambler and his spouse**

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### **Abstract**

The consequences of pathological gambling negatively impact many aspects of the life of both the gambler and his relatives. This exploratory study compared the gambler's perceptions of the consequences of gambling in his life and in the life of his spouse with the perceptions that his spouse had of the same consequences. Seven couples, each including a male pathological gambler, participated in the study. Members of each couple individually completed the questionnaire. The descriptive analyses showed that each member of the couple mentioned, in addition to the financial consequences, different consequences stemming from the gambling behaviour of the gambler. The analyses revealed that the spouse perceived the consequences she experienced, as well as those experienced by the gambler, as more severe than the gambler perceived them. This paper discusses how each member of a couple that includes a pathological gambler differs in their perception of harm related to gambling.

**Keywords:** pathological gambler, spouse, consequences of gambling, treatment

### **Introduction**

Even if the majority of people gamble without experiencing problems or negative consequences, some become pathological gamblers. For these individuals, excessive gambling will become persistent and progressive and can create an irresistible urge to risk money. Gambling will then jeopardize their personal, family, and professional life (American Psychiatric Association, 1996).

Unfortunately, for each pathological gambler, there are at least 10 people affected by the negative consequences associated with disordered gambling (Ladouceur, 1993). It is therefore not surprising that the wife, or partner, is affected by the repercussions of her husband's gambling behaviour (Ciarrocchi & Reinert, 1993).

Dissatisfied couples show differences in their attitudes toward communication, their availability to help the partner, and their way of resolving problems (Pléchaty, 1987). These couples also tend to perceive their spouse more negatively than an outside observer

would (Halford, Keefer, & Osgarby, 2002) and to perceive their own intentions more positively than their spouse would (Waldinger & Schulz, 2006). The fact that pathological gamblers' marital relationships are characterized by a high level of dissatisfaction (Hudak, Varghese, & Politzer, 1989), which often results in many conflicts (Steinberg, 1993), could indicate that spouses share different perceptions on many aspects of their lives.

No studies have yet examined the differences in the perception of problems between the wife or spouse and the pathological gambler. This study will compare the differences between the spouse and the pathological gambler's estimation of the negative consequences that gambling has had in their life. It is expected that the intensity of the consequences will be perceived differently by the pathological gambler and his spouse. The types of consequences reported by each member of the couples will also be explored.

## **Method**

### ***Inclusion criteria***

Both members of all the couples in the study were 21 years of age or older and were involved in a heterosexual relationship. The pathological gambler was the husband or male partner.

### ***Participants***

The couples were recruited from three treatment facilities for pathological gamblers and at Gamblers Anonymous (GA) meetings. The study was conducted in the province of Québec (Canada) from January 9 to April 3, 2007.

Eleven gamblers and nine spouses completed the questionnaires. However, only 16 individuals could be matched as couples: On one occasion, only the pathological gambler returned the questionnaire. One of the eight couples was excluded because the gambler (GA member) did not meet the criteria for pathological gambling. The study was therefore conducted with seven couples, among which one of the gamblers was recruited in a GA meeting and the six other gamblers were recruited from professional treatment facilities. All pathological gamblers had a score of 5 or more on the South Oaks Gambling Screen (SOGS;  $M = 12.3$ ,  $SD = 3.8$ ) and none of the spouses had a gambling problem ( $M = 1.0$ ,  $SD = 1.5$ ).

The couples held a stable relationship for an average of 4 years ( $M = 4.24$ ,  $SD = 4.86$ ). The average age of the men was 42.0 years ( $SD = 11.0$ ) and the average age of the women was 40.4 years ( $SD = 8.8$ ). The majority of the pathological gamblers (6/7) did not have a high school diploma, and three of the spouses held a college degree or higher. Five pathological gamblers and two spouses were working full time, and the majority of the pathological gamblers (4/7) and the spouses (5/7) had an annual personal income ranging between \$20,000 and \$40,000 CDN. Table 1 shows the socio-demographic characteristics of the participants.

Table 1  
*Socio-demographic characteristics of the participants*

	Pathological gamblers ( <i>n</i> = 7)	Wives/Spouses ( <i>n</i> = 7)
Average age (years)	<i>M</i> = 42.0 ( <i>SD</i> = 11.0)	<i>M</i> = 40.4 ( <i>SD</i> = 8.8)
Education		
Elementary and high school	6	4
College	0	2
University	1	1
Employment		
Full-time job	5	2
Part-time job	1	0
Student	0	1
Social welfare/Leave of absence	1	3
Other	0	1
Annual income (\$CDN)		
<\$20,000	2	2
\$20,000 to \$40,000	4	5
\$40,000 to \$60,000	1	0
Probable pathological gamblers	7	0

### **Procedure**

**Treatment facilities:** A counsellor from the treatment facility introduced the study to the pathological gambler when he first requested help. The spouse was contacted by the counsellor after receiving approval from the gambler to do so. The questionnaire was mailed to the spouse while the pathological gambler completed it at the treatment facility (about 20 min to complete). Both questionnaires were returned by mail to the research team.

**Gamblers Anonymous:** At the beginning of the meeting, a research assistant explained the goal of the study and gave each person a flyer containing the phone number to call if he wished to participate. Interested participants had to call and leave their name and phone number on the research group's answering machine. The questionnaires were mailed separately to each member of the couples who agreed to participate. They were asked to complete the questionnaire individually and to return it by mail to the research team.

### ***Instruments***

Two different questionnaires<sup>1</sup> were used. One was for the pathological gambler, and the other for the spouse. However, both questionnaires had the same content, except that the questions were formulated either for the spouse or for the gambler. For example, the pathological gambler was asked, "How was your spouse affected by your gambling habits?" whereas the spouse was asked, "How were you affected by the gambling habits of your husband or partner?"

The questionnaire evaluated the following dimensions: (a) respondent's gambling habits, (b) amount of money and time spent gambling, (c) satisfaction with their marital relationship, and (d) consequences of gambling habits on their life and on the life of their spouse. Four open-ended questions were used to identify the consequences that pathological gamblers and their spouses associated with the gamblers' gambling behaviour. Those answers were coded and classified before being analyzed. The last part of the questionnaire evaluated the intensity with which the pathological gambler and his spouse evaluated how they were affected by nine types of consequences that the literature usually associates with gambling. The intensity of each of the nine types of consequences was evaluated using Likert scales ranging from 0 (*does not correspond at all*) to 10 (*totally corresponds*). The nine types of consequences were psychological well-being, social life, physical health, alcohol or drug consumption, problems at work, reduction in the time dedicated to leisure activities, reduction in the time dedicated to family, marital problems, and increased personal debts.

The gambling behaviour was evaluated using the SOGS (Lesieur & Blume, 1987), which contains 20 items used to screen for pathological gambling. A score of 2 or less indicates that the person does not have a gambling problem, while a score of 3 or 4 indicates that the person gambles at an at-risk level, and a score of 5 and above indicates that the person is a probable pathological gambler.

## **Results**

### ***Identification of the consequences associated with gambling***

The pathological gamblers' and spouses' answers to the open-ended questions showed that the financial consequences were the most frequently reported consequences by both the pathological gamblers (5/7) and the spouses (5/7) as being associated with gambling. More spouses (5/7) than pathological gamblers (2/7) reported that gambling had negative consequences on the pathological gambler's social life: Spouses reported an increase in the number of fights that the gambler had with relatives, his tendency to isolate himself, and not being able to go out because of a lack of money. On the other hand, a decrease in the gambler's psychological well-being was reported more often by gamblers (6/7) than by spouses (3/7). More specifically, the pathological gamblers reported symptoms such as stress, depression, feelings of guilt, and suicidal ideation.

### ***Intensity of the consequences associated with gambling***

The intensity with which each of the nine types of negative consequences affected the pathological gamblers' and their spouses' lives were evaluated using a Likert scale ranging from 0 (*does not correspond at all*) to 10 (*totally corresponds*). The signed-rank test of Wilcoxon, a non-parametric analysis for paired samples, was used to compare the size and the direction of the differences within paired results. The analysis was therefore used to compare the difference in the intensity reported within each couple. The signed-rank test of Wilcoxon was chosen because our small sample size could not guarantee that the basic postulates to run a parametric analysis would be respected.

The results showed that four of the seven couples perceived the intensity of the consequences that gambling had on the pathological gambler significantly differently ( $p < 0.05$ ). In three of the four couples, the spouse evaluated the consequences that the gambler had to face as being more intense than what the gambler himself estimated. When looking to the intensity of the consequences that gambling had on the spouses, the results showed that three of the seven couples perceived the intensity significantly differently ( $p < 0.05$ ). Only one pathological gambler perceived the consequences that his spouse had to face as being more intense than what his spouse reported.

By using the differences in the intensity between the gamblers and the spouses, we noticed that psychological well-being was the consequence category for which the gambler and the spouse presented the largest positive difference: The gambler estimated the consequences that gambling had on his and his spouse's psychological well-being as having been more intense than what the spouse estimated. The other important differences in the intensity of the consequences for the gambler were found in the consumption of alcohol and drugs, personal debts, and problems at work. Only this last category was evaluated as having been more intense by the gambler than by his spouse. On the other hand, besides psychological well-being, the two largest differences in the intensity of the consequences that the spouse had to face because of gambling were found in the increase in personal debts and a decrease in the time dedicated to leisure activities. The spouse estimated that those two consequences had been more intense than what the gambler estimated. See Tables 2 and 3 for the detailed results.

Table 2

*Differences between gambler and spouse scores, reported for each couple, concerning the consequences that gambling had in the pathological gambler's life*

	Couples' differences (rank)						
	Couple A	Couple B	Couple C	Couple D	Couple E	Couple F	Couple G
Psychological well-being	3 (6)	-2 (-1.5)	3 (8.5)	5 (5.5)	1 (2)	3 (3.5)	-1 (-2)
Social life	-1 (-1.5)	-5 (4.5)	2 (5)	4 (3.5)	-1 (-2)	1 (1.5)	0
Physical health	-2 (-4)	-3 (-3)	-3 (-8.5)	5 (5.5)	-4 (-5)	1 (1.5)	-1 (-2)
Alcohol/Drug problems	0	0	-2 (-5)	3 (1.5)	-10 (-6)	0	-2 (-5)
Problems at work	2 (-4)	-5 (-4.5)	-2 (-5)	0	-3 (-4)	0	-2 (-5)
↓ Leisure time or activities	2 (-4)	-2 (-1.5)	-1 (-1.5)	0	0	3 (3.5)	-1 (-2)
↓ Time dedicated to family	2 (4)	-6 (-6.5)	1 (1.5)	4 (3.5)	0	0	0
Marital problems	-1 (-1.5)	-6 (-6.5)	-2 (-5)	3 (1.5)	-1 (-2)	0	0
↑ Personal debts	4 (7)	-10 (-8)	-2 (-5)	0	0	0	-2 (-5)
Total of the positive ranks (T+)	21	4.5	15	21	2	10	0
Total of the negative ranks (T-)	7	31.5	31.5	0	19	0	21
<i>p</i> value	0.148	0.039*	0.180	0.016*	0.047*	0.063	0.016*

*Note.* A negative sign (-) indicates that the intensity was perceived more intensely by the spouse than by the pathological gambler. A difference of 0 is not ranked and not used in the statistic.

\* Indicates a significant difference.

**Table 3**  
*Differences between gambler and spouse scores, reported for each couple, concerning the consequences that gambling had in the pathological gambler's spouse's life*

	Couples' differences (rank)						
	Couple A	Couple B	Couple C	Couple D	Couple E	Couple F	Couple G
Psychological well-being	-3 (-1.5)	3 (4.5)	3 (2.5)	5 (8)	-3 (-5)	0	0
Social life	-3 (-1.5)	2 (1.5)	1 (1)	3 (4.5)	-7 (-9)	0	-3 (-5)
Physical health	-4 (-3.5)	3 (4.5)	3 (2.5)	3 (4.5)	-1 (-1)	0	-1 (-2)
Alcohol/Drug problems	0	0	5 (4)	4 (6.5)	-6 (-8)	0	-1 (-2)
Problems at work	-7 (-5.5)	3 (4.5)	0	0	-3 (-5)	0	0
↓ Leisure time or activities	-9 (-7)	3 (4.5)	0	-2 (-3)	-3 (-5)	-1 (1)	-3 (-5)
↓ Time dedicated to family	0	0	0	4 (6.5)	-5 (-7)	0	0
Marital problems	4 (3.5)	2 (1.5)	-6 (-5.5)	-1 (-1.5)	-2 (-2.5)	0	1 (2)
↑ Personal debts	-7 (-5.5)	0	-6 (-5.5)	-1 (-1.5)	-2 (-2.5)	0	-3 (-5)
Total of the positive ranks (T+)	3.5	21	10	30	0	1	2
Total of the negative ranks (T-)	17.5	0	11	6	68	0	19
<i>p</i> value	0.344	0.016*	0.50	0.055	0.000*	-----	0.046*

*Note.* A negative sign (-) indicates that the intensity was perceived more intensely by the spouse than by the pathological gambler. A difference of 0 is not ranked and not used in the statistic.

\* Indicates a significant difference.

### **Marital satisfaction**

Even though three pathological gamblers and two spouses mentioned having had some marital problems because of the gambler's gambling habit, only three spouses (no pathological gamblers) reported not being satisfied with their marital relationship. For the majority of the couples, their level of satisfaction varied from neutral to extremely satisfied.

## Discussion

The goal of this exploratory study was to compare the perceptions that pathological gamblers had concerning the consequences of their gambling activities in relation to their spouses' perceptions of the same consequences. We hypothesized that the intensity of the consequences would be perceived differently by the pathological gambler and his spouse. This hypothesis was partially confirmed because four of the seven couples estimated the intensity of the consequences for the gambler significantly differently, and three of the seven couples estimated the intensity of the consequences for the spouse significantly differently. It is noteworthy that on almost all occasions, the spouse, rather than the gambler, was the one who estimated the consequences as being more intense.

Both members of the couples agreed that the financial problems they had to face were caused by gambling. In addition, the results showed that, besides the financial problems, pathological gamblers and their spouses did not perceive the same consequences. In fact, the negative impact on the pathological gambler's social life was reported more often by the spouse than by the gambler, whereas the consequences on the psychological well-being of the pathological gambler were reported more often by the gambler himself rather than by his spouse.

Pathological gamblers who took part in this study were mainly gamblers assessed at the beginning of their treatment. It is possible that the months preceding their therapy were dedicated mainly to gambling. During that time of intense gambling, the pathological gamblers could have significantly reduced the quality of their communication with their wife or partner and therefore successfully hidden their distress. The reduced communication between spouses could also have contributed to the fact that the spouse felt neglected and consequently could have made her feel the social consequences of gambling more intensely.

Contrary to what Hudak and his colleagues (1989) noticed, few participants (pathological gamblers and spouses) said that they were dissatisfied with their relationship. This result was surprising because, according to these authors, the marital relationship of couples with one pathological gambler is usually characterized by a high level of dissatisfaction. Is it possible that seeking treatment had a positive impact on the marital relationship? By seeking treatment, the wife or partner might have perceived a possible solution to their problems and manifestations of willingness on the part of the pathological gambler.

The main limitation of this study is the small sample size. Despite this limitation, this study is the first to examine the potential differences in the perception of the negative consequences of excessive gambling on both members of a couple. A better understanding of these differences would help to improve the way we intervene with pathological gamblers in order to better help couples in which one member has a gambling problem.

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RL: In collaboration with FF and PMF, he helped conceptualise the study and elaborate the best methodology to assess all goals. He also contributed by revising the last few drafts of the paper and providing his gambling research expertise to improve the scientific value of the paper.

PB, MB and LP: In collaboration with all authors, they helped in the fine-tuning of the methodology. They established contacts with treatment facilities and GA Groups, coordinated the study, and substantially contributed to the interpretation of the data before writing the first versions of the paper.

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<sup>1</sup>A copy of the questionnaire is available upon request.