UNDERSTANDING PROBLEM GAMBLING

Currently, there is no widely accepted causal explanation or single theoretical model that adequately accounts for why individuals develop a gambling problem. Here is a brief summary of some of the more common models of gambling.

Addiction Models
The most common model of problem gambling is the addiction model. This model proposes that problem gamblers are addicted to gambling just like individuals with a drug and alcohol addiction. According to this model gamblers are thought to experience tolerance (the need to bet more and more in order to obtain the same excitement), cravings (a strong physiological desire to gamble), and also withdrawal symptoms (anxiety, physiological symptoms) if they do not gamble. Contributing to this model is data suggesting that problem gamblers also have high rates of substance use and alcohol dependence, which has lead to the common perception that gamblers are “prone to addiction”.

Despite the widespread usage of the notion that gambling is an addiction, the view of problem gambling as a bona fide physiological addiction is rejected by most Australian researchers (Walker, 1992). This is due to many problems with this model including the fact that gamblers do not display an identifiable physiological process, which accounts for the proposed addiction.

Learning / Behavioural Models
The idea behind learning models of gambling is that people become “conditioned” or “learn” the habit of gambling as a consequence of the rewards (or reinforcements) obtained through gambling. This theory is based on early experimental work with animals and is known as operant or classical conditioning. A positive reinforcement schedules that provide a reward such as financial gain intermittently (like during gambling) are known to produce a greater persistence in the behavior even once the rewards of this behavior are stopped. Negative reinforcement can also occur when gambling provides a temporary distraction or escape from a negative emotional state. The act of gambling and associated emotions such as excitement and physiological arousal becomes associated with external gambling cues such as gambling venues, specific times, certain sounds and smells, and also internal gambling cues such as various mood states and cognitions. These processes help to explain why gambling behavior persists despite the individual experiencing negative and harmful consequences from their gambling.

Although learning theories may help explain aspects of the acquisition and maintenance of gambling, they cannot explain why most people only gamble recreationally or why some individuals develop significant gambling problems whereas others do not.

Cognitive Models
The cognitive approach to gambling assumes that people hold faulty beliefs in relation to their understanding of the odds of gambling, the concept of randomness, and skilled versus chance-determined events. Due to these faulty beliefs and assumptions, individuals over-estimate the extent to which they can predict and influence outcomes based upon their own
knowledge and skills, which leads to a subjective expectation of success that is higher than the objective odds would dictate. Common cognitive biases include the gamblers fallacy (losses interpreted that a win is imminent), probability bias (incorrect beliefs about randomness which inflates beliefs in relation to winning), magnified gambling skill (overrated their ability to win despite persistent losing and various superstitious rituals (e.g. praying, acting on hunches) which they believe increase the likelihood of winning.

**Escape Model**
Gamblers often say, “I gamble to escape from unpleasant aspects of my life”. There may well be some truth to the assertion that gambling does provide an escape, perhaps from arguments at home or other problems in the gambler’s life. However, if the main motivation for gambling were to escape from one’s problems, then it would make sense that the gambler would prolong each gambling session as long as possible. For example, this means individuals who play poker machines would bet the least amount of money and only bet on one line per spin in order to prolong the gambling experience. However, this does not fit with the experiences of gamblers who frequently places maximum bets and often chooses the maximum number of spins. Therefore, it is unlikely that escape is the primary motivation for gambling.

**Pathways Model**
Blaszczynski and Nower (2002) developed the Pathways Model on the assumption that pathological gamblers could be subtyped according to their underlying motivation for gambling. According to this model, there are three primary subgroups of gamblers: behaviourally conditioned gamblers (conditioning and cognitive processes are primary), emotionally vulnerable gamblers (affective disturbances, poor coping skills, dealing with painful emotional experiences, social isolation and low self esteem act to exacerbate the effect of the conditioning and cognitive processes), and biologically-based impulsive gamblers (genetic and neurochemical factors contribute to impulsivity and need for stimulation). It is assumed that all subtypes manifest similar symptoms and signs but that there are important distinguishing features across these subtypes of gamblers.

References