

Gambling – fun, glamorous, seedy, addictive, destructive?

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Gambling is one of the lesser-acknowledged addictions. I want to share what I've learned since working as a therapist for GamCare over the last two years and introduce you to this largely mis-understood and marginalised client-group.

Much like drug and alcohol use, gambling carries two images. Like any prejudice, both serve as barriers to the truth: the glamorous dinner-jacket James Bond casino kind, and the seedy raincoat Andy Capp grimy bookies type. For me, entering my first day's training, the second was stronger. By the end of that day and subsequently evidenced during two years' work, I've learned that compulsive/addictive gambling crosses all boundaries of social 'status' as well as gender. And, like abuse of all kinds, happens in the home, in secret, as well as outside. TV advertising and online gambling is on the increase.

Also, like alcohol, tobacco and prescription drugs, gambling is a massive industry, a source of tax and hence just as much promoted as regulated.

Yet, gambling as a 'problem' has a far lower profile. Is this because it's a behavioural rather than substance addiction? In part, perhaps. Yet OCD and eating disorders of all kinds have regular media coverage (even though the underlying distress that drives these behaviours generally remains overlooked). So what is it about gambling?

My work with clients, to date amounting to approximately 400 hours (GamCare fund up to twenty-six sessions), has helped me make sense of this conundrum. My first question was what had *my* prejudice served? This was easy: behind it lay fear. And before meeting my first client, I was nervous. All I had were details of age (mid-50's), and gender (male). As soon as I opened my door, he turned into a person and simultaneously I reconnected with my self, a human being about to work with another human being whose behaviour was causing severe problems, both to himself and his family. My endeavour was to help him find out 'why' he gambled, what he did this for, to the extent of threatening all aspects of safety: home, work, relationship: what was the pay-off when financially at least he was bound to lose, and knew it?

This is the quest that starts in each assessment session by checking out the ten DSM-IV criteria. 'Pathological gambling' was recognised as a psychiatric disorder and included in DSM IV in 1994. Individuals need to meet five of ten criteria to be termed 'pathological' (and so qualify for GamCare funding). These are named as Preoccupation, Tolerance (need to gamble with increasing amounts), Withdrawal (restless/irritable when attempting to stop or cut down), Escape (gambles to escape problems or dysphoric moods), Chasing (after losing, returning to get even), Lying, Loss of Control (made repeated unsuccessful attempts to control behaviour), Illegal Acts, Risked Significant Relationship, Bailout (relied on others to provide money).

Despite being recognised by the American Psychiatric Association, my personal belief as to why it's taking so long to receive public acknowledgement is that these addicts don't find their way directly to doctors' surgeries. Even though many do indirectly, presenting with depression, symptoms are rarely linked to gambling since the patients themselves have yet to make the link, intense *shame* maintaining internal silence as well as fuelling external judgment that says 'if you want to stop, just stop'. Failure to control behaviour earns little compassion.

Form-filling in the first session is a helpful way in, enabling my client to disclose facts – about size of debt, extent of lying, cost to relationships – that enable me to sense the depth of underlying needs that he *or she* is attempting to fix. Another misconception: gambling is predominantly a male activity. Fewer women come forward precisely because this generalisation increases their shame. My ratio of work is 8:1 (As to age, 20's and 50's-60's is most common; I see fewer clients in their 30's and 40's.)

With regard to attempting to fill emptiness, fix unaddressed pain and evade relationship, gambling is no different from any other addiction: escaping in ways that reinforce splitting, shame and self-berating that pumps up energy to try again,

over and over again, moving further away from resolution, increasing desperation. Gambling is so obvious: what clearer signpost to devastating losses?

‘I gamble to win,’ says one client, as we start to explore the question ‘why’. Of course, he wants to have more. More what, though? Week by week, we explore what money means, what having more means, in terms of image. My client may or may not connect wanting more to moments of lack in his young life – at least the ones he’s aware of and already told me when I took background history.

The more I discover about clients’ relationship with money, the clearer it becomes that the self-defeating cycle relates to self-worth. I’ve come to realise that clients are as addicted to losing as winning; often I hear about the impossibility of keeping money once won, or earned. This makes sense: if a client’s self-value is ‘nil’, to have a wadge of notes is excruciating; to be ‘congruent’ with this belief, it must be got rid of. If not gambled away, this often means handing it over to parents or partner, delegating responsibility. The TA model of Adult/Parent/Child is helpful here.

‘I gamble for the excitement,’ says another client. Hope of winning rockets to life-death arousal: chemical addiction is present for gamblers too, which makes going ‘cold turkey’ a process of withdrawal. Of course, there are wins, just enough (the industry is clever this way) to keep punters coming back. But coming back means losing, which is untenable when winning equates to filling a void left by unmet nurturing needs and to gaining some sense of identity that depends entirely on external success. Hence chasing losses, hence losses escalating, the cycle becoming entrenched.

‘It’s as if I’m two people. I know I’ll end up losing; but I can’t stop myself.’

‘Yep, I get it,’ I reply. ‘Willpower isn’t enough, is it? All the reasoning in the world that says ‘don’t’ isn’t enough to stop this other part of you.’ And I do get it. The man or woman I sit with is lost, empty inside, disconnected internally and hence from the wider world. Understanding the process of splitting, together with non-judgemental empathy and compassionate witness are the gifts I can bring to the work, and also protect me from becoming lost in my clients’ inner conflicts.

‘Can you tell me more about when you gamble, the moments just before, what’s been happening?’ I ask. It’s crucial to identify triggers, to help put preventative measures in place; once the urge has taken hold, it’s too late.

‘It’s when I’m bored’ is a regular answer.

‘Tell me about feeling bored.’ I’m interested in boredom; somewhere beneath the dullness, the lack of interests, the hopelessness, there’ll be life,

emotions, fear probably, rage almost certainly. Affect connected to stories of neglect, of bullying at school, of abuse at home, has been numbed by repetitive 'displacement activity'. Being 'in the zone' gives respite from all the 'shit stuff'. I also get a sense of the need for power (beating a machine, cracking a system, working out odds), to compensate for powerlessness that lies at the heart of unresolved trauma which, I've discovered, underlies gambling as much as any other abusive and/or addictive behaviour – hence the splitting.

What to do with all this awareness? My urge to fix and frustration when my suggestions (tempted momentarily to slip into 'Rescuer' mode) are met with 'Yes, but...' can be strong. I only have six months. I need to go easy on myself, own the counter-transference, recognise limits. Therapist self-care is paramount.

Together we might explore a relationship with a particular machine, if slots are her 'thing'; this often reveals gripes about Mum or Dad. Gambling on-line, as easy to access as chocolate in the cupboard, might lead to identifying loneliness, inner desolation. Lying to a partner can develop into exploring betrayal, self-betrayal included. Step by step, we move closer to identifying emotions attached to the narratives.

My earlier trauma training with Babette Rothschild is proving invaluable, together with my own therapeutic work: I know the importance of resources. As a client cuts down or gives up his or her barrier against pain, emotions will surface. Safety and containment is paramount. Work includes recognising signs of overwhelm, by fear, rage or sorrow; applying brakes; assessing risk of suicide. Attention not only to pain but every other aspect of vitality a client has been defending against is integral. Coaxing out a deeply hidden creative spirit requires infinite patience. The moment when a client discovers a talent, passion or joy is always celebratory.

When someone leaves after just a couple of sessions or misses more and more appointments and fades away, I sense that connecting with another human being, especially one who cares, is just too painful. He or she is likely to continue fending off human relationship by opting for another method. The ones who stay step by step come to know themselves better, to grow some compassion and start replacing self-destructive behaviour with self-care. By the time we say goodbye, this healing cycle may be firmly established, tentatively in place, or still just a concept. Some clients find additional support from Gamblers Anonymous, some from other sources. Maintaining self-care involves asking for and receiving help when necessary, means risking honesty and intimacy – with self and significant others.

As I continue working with gamblers, or sometimes with the partner of one (GamCare also provides funding for this support), I'm increasingly drawn to the similarities

between compulsive gambling and compulsive sexual behaviours. Both are fed by provision on the internet, both indicate insatiable hunger for attachment and equal mistrust of intimacy. I'm looking forward to working with this closely-related client group.

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GamCare is a registered charity founded in 1997. It operates a national helpline and internet based netline. For information visit www.gamcare.org.uk

For Gamblers Anonymous visit www.gamblersanonymous.org.uk

Further Reading:

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For further information please visit www.jbcounselling.co.uk and www.boardingconcern.co.uk