

Trauma and Gambling A Scoping Review of Qualitative Research

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Article abstract

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Trauma and Gambling: A Scoping Review of Qualitative Research

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Abstract: Both gambling-related problems and trauma have long been associated with substantial costs for individuals, their families, and society. Existing reviews of research on the relationship between trauma and gambling have thus far been limited to quantitative work. A scoping review of published peer-reviewed qualitative research was conducted to synthesize existing research concerning the relationship between trauma and gambling. Relevant articles were identified through database searches in Ovid MEDLINE, APA PsycNET, PubMed, Scopus, PTSDpubs, and through hand sorting methods. English and French articles that comprised original qualitative research with results exploring the relationship between trauma and gambling were included. A total of 22 articles published between 2007 and 2022 were included in this review. Four major themes emerged during the narrative and thematic synthesis of the articles: (1) gambling as a consequence of trauma, (2) trauma as a consequence of gambling behavior, (3) cyclical relationship of trauma and gambling, and (4) healing from trauma and gambling-related harms. Future research would benefit from the use of qualitative methods in exploring the complex relationships between trauma and gambling.

Keywords: Gambling, trauma, post-traumatic stress disorder (PTSD), gambling disorder (GD), gambling harm, traumatic stress, review, qualitative

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Introduction

Both gambling-related problems and trauma have long been associated with substantial costs for individuals, their families, and society (Bisson & Andrew, 2007; Holdsworth & Tiyce, 2012; MacDonald et al., 2004; Najavits et al., 1997; Ouimette & Brown, 2002; Shaffer & Korn, 2002; Williams et al., 2011). Gambling and trauma are both pervasive throughout society and can lead to substantial issues including gambling disorder (GD) and post-traumatic stress disorder (PTSD) within a minority of individuals (Calado & Griffiths, 2016; Atwoli et al., 2015; Benjet et al., 2016; Kessler et al., 2017).

High rates of trauma, abuse, and childhood maltreatment have been reported within samples of individuals with GD (Afifi et al., 2010; Echeburúa et al., 2011; Hodgins et al., 2010; Kausch et al., 2006; Lane et al., 2016; Petry et al., 2005; Sharma & Sacco, 2015). It is also known that those who experience early life stressors, particularly trauma and adverse childhood experiences, are at an elevated risk for the development of psychopathology, including GD, later in life (Brydges et al., 2015; Hodgins et al., 2012). Problems related to gambling also have the potential to lead to trauma, as it

is well established that the effects of GD are far-reaching. For example, gambling-related problems can lead to or exacerbate situations of intimate partner violence (IPV) and child abuse and neglect (Banks & Waters, 2022; Hing O'Mullan, Nuske, et al., 2021). The associations between trauma and gambling have led some to hypothesize that there may be a complex, cyclical relationship at play (e.g., Green et al., 2017).

Mounting evidence and calls for increased attention to this intersection of mental health disorders have led to the publication of recent review articles on the topic of trauma and gambling (Dowling et al., 2016; Lane et al., 2016; Moore & Grubbs, 2021). While two of these review articles focused on specific types of trauma (IPV and child maltreatment), the most recent examined the relationship between trauma, PTSD, and GD more broadly (Moore & Grubbs, 2021). Findings from this review concluded that trauma and PTSD are consistently related to GD, and that trauma, and in particular severity of PTSD symptoms, can influence the severity of both GD and subclinical levels of GD (Moore & Grubbs, 2021). While generally comprehensive in their overview of the quantitative literature to date

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concerning knowledge about the relationship between trauma/PTSD and gambling/GD, this recent review article, along with the others mentioned above, explicitly chose to exclude qualitative studies. Qualitative studies involve empirical research that looks beyond numbers. Qualitative methods are incredibly diverse, ranging from surveys to interviews, archival research to ethnography, analysis of legal cases to visual and acoustic research. They enable a deeper understanding of human experiences through the lens of the research participant and through streams of inquiry related to “how” and “why” questions that cannot easily be explored quantitatively (Cassidy, Pisac & Lousouarn, 2013; Polkinghorne, 2005). They have the potential to further inform our existing knowledge about the relationship between gambling and trauma. This review aims to respond to this gap by scoping and consolidating existing qualitative research on the relationship between trauma and gambling to: 1) complement recent quantitative findings, 2) contribute to the effort to create a more complete picture of this complex relationship, and 3) make recommendations for future research in this area.

Methods

A scoping review of published peer-reviewed research articles was conducted to synthesize the existing research evidence concerning the relationship between trauma and gambling. Scoping reviews aim to map key concepts underpinning a research area (Arksey & O'Malley, 2005), especially for topics that have not yet been comprehensively reviewed. The scoping review method facilitates visualization of the range of material or results, summarization, and dissemination of findings to a wide range of stakeholders. To conduct this scoping review, we followed recommendations by Arksey and O'Malley (2005) and PRISMA (Tricco et al., 2018).

Search Strategy

Relevant articles were identified by searching the following databases on June 9, 2022: Ovid MEDLINE, APA PsycNET, PubMed, Scopus, and PTSDpubs. Searches were performed with no language or publication date restrictions. Search terms were subjected to standardized procedures with truncation of the search term allowing for the search of plurals and other suffixes. All databases were searched using the inclusion terms *trauma** and *gambl** and *qualitative/focus group*/interview*/ethnograph*/semi structured/phenomenolog** and exclusion terms *tbi* and *traumatic brain injury*. Databases and search terms were chosen based on the primary objective of the scoping review with consideration given to recent review articles focused on qualitative research. A detailed breakdown of the syntax used for the searches for each database is available upon request from the authors.

Selection of Articles

Two authors (EM and PV) independently reviewed the titles and abstracts of retrieved publications and selected relevant articles for possible inclusion (<2% interrater disagreement). Full texts of the remaining articles were then independently reviewed by the same two authors (0% interrater disagreement). To meet inclusion criteria, retained articles had to: 1) include results exploring the relationship between trauma² and gambling, 2) be in English or French, and 3) comprise original qualitative research. Hand sorting was then completed by reviewing reference lists from included studies and via forward citation tracking.

Data Extraction and Synthesis

Once the full text screening was complete, the authors (EM, PV, and BH) extracted data into a spreadsheet using categories drawn from the Standards for Reporting Qualitative Research (SRQR) critical appraisal checklist (i.e., title, abstract, authors, year of publication, country or region of study, purpose and/or research question(s), qualitative approach, sample characteristics, methods/study design, relevant themes, ethics statements; O'Brien et al., 2014).

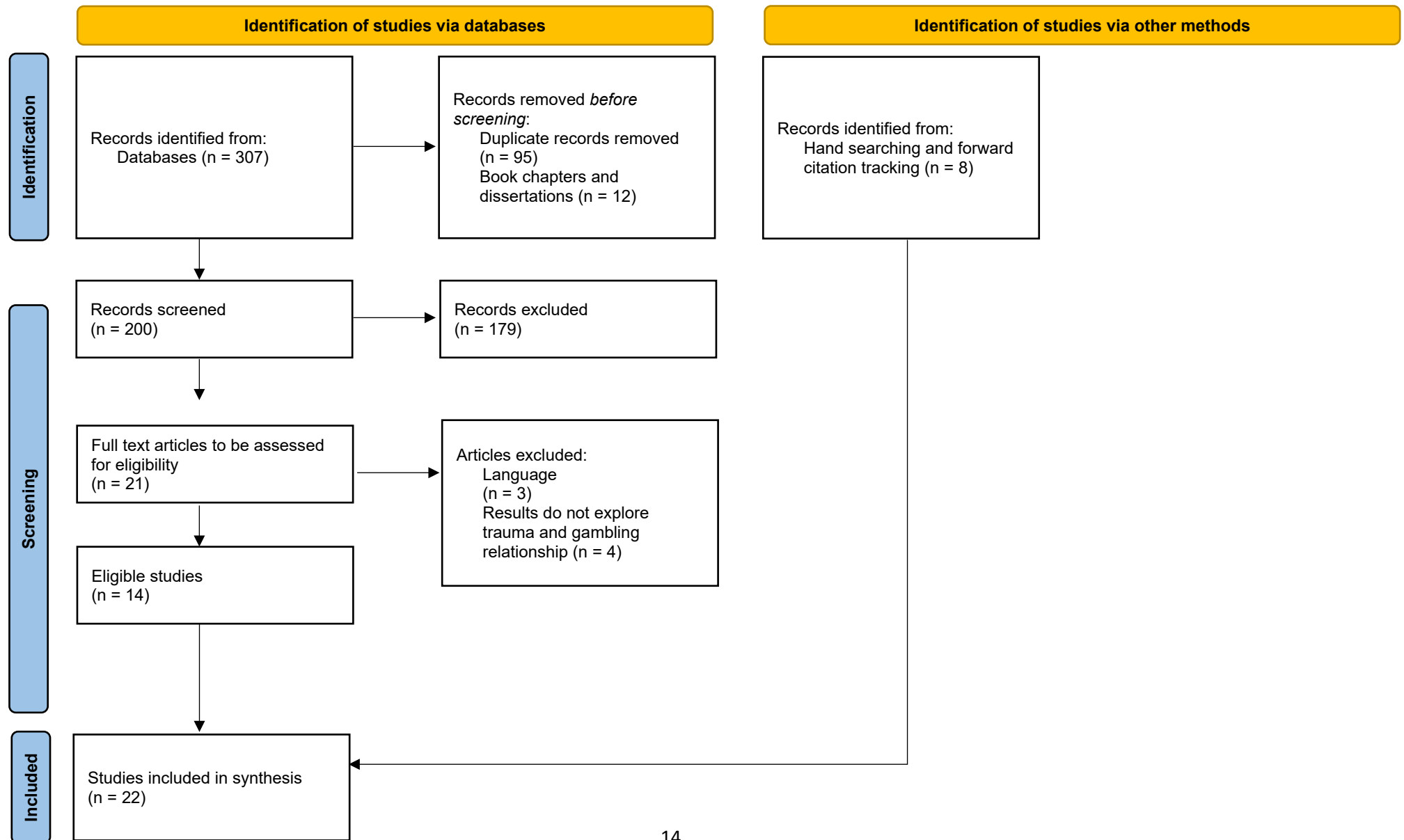
To summarize findings, a narrative synthesis was then undertaken by the authors (EM and PV). Guided by the objective of exploring the relationship between trauma and gambling, eligible articles were read carefully by each author and potential themes were listed for each. Once identified, a thematic coding was performed across each of the articles and four prominent themes emerged. Each study was then reviewed again to extract relevant results and related verbatim quotes for each of the themes (Atkins et al., 2008; Wardle, 2019). Narrative syntheses like these have been previously conducted within gambling literature (e.g., Wardle, 2019).

Results

A full breakdown of the article identification and selection procedure for this review is outlined in Figure 1. A total of 307 articles were identified through the database searches. Following the removal of duplicates, as well as non-peer reviewed book chapters and theses, 200 references remained. A further 179 were excluded based on title and abstract. Full texts for the remaining 21 articles were retrieved. After full text review, 14 articles remained. As a result of forward citation tracking and hand searching (in relevant journals and each article's full text including bibliography), an additional 8 articles were added. A total of 22 articles published between 2007 and 2022 were included in this review.

² Trauma was defined in accordance with the 28 potentially traumatic events outlined in the Canadian Forces Supplement of the Canadian Community Health Survey (Statistics Canada, 2003).

Figure 1. Flow diagram showing inclusion and exclusion strategies



A summary of the articles included in the review are presented in Table 1 (i.e., authors, year of publication, country, sample characteristics, data collection method, objectives). Articles mainly originated from Australia ($n = 10$, 46%) and Canada ($n = 9$, 41%), with the few remaining originating from Scotland and the United Kingdom ($n = 3$, 13%). The earliest article was published in 2007, with a notable increase in the number of articles published starting in 2019. Although 22 articles were retained, examination of ethics statements provided within each article revealed that samples were drawn from 17 independent studies. Studies included a range of participants from one to 169. Most of the studies used in-depth interviews (including one case study) as their primary methodology and one article also used focus groups. Certain studies focused on specific populations: six studies focused on women (Hagen et al., 2013; Nixon, Evans, et al., 2013; Nixon, Solowoniuk, et al., 2013; Nuske et al., 2016; Banks & Waters, 2022; Hing, Mainey,

et al., 2022; Hing, Nuske, Breen, et al., 2021; Hing, O'Mullan, Breen, et al., 2021; Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021), one focused on individuals who gambled on electronic gambling/gaming machines (EGMs) and problem gambling counsellors (Thomas et al., 2009), one focused on women who gambled on EGMs (Nuske et al., 2016), one focused on men with histories of problems relating to gambling and housing instability/homelessness (Hamilton-Wright et al., 2016), three focused on immigrants (Lee et al., 2007; Luo, 2020a, 2020b), one focused on individuals who gamble and their family members (Grant Kalischuk, 2010), and three focused on Indigenous populations (Hagen et al., 2013; Hing et al., 2012; MacLean et al., 2019). A minority of the studies' objectives ($n = 4$, 24%) were specifically focused on exploring the relationship between trauma and gambling.

Table 1. Summary of Articles included in the Review

Authors (Year)	Country	Participants	Data Collection Methods	Purpose and/or Research Question(s)
Banks & Waters (2022)	UK	26 intimate partners, female	Semi-structured interviews	To advance understanding of the lived experience of victims of IPV in relationships where there is a gambling disorder.
Grant Kalischuk (2010)	Canada	37 problem gamblers and their family members (47 interviews total from 22 families)	Interviews	To present conceptual and theoretical explanations about the impact problem gambling has on families, both individually and collectively. Research question: "How does problem gambling impact the family?"
Hagen et al. (2013)	Canada	7 Aboriginal women	Interviews	To describe the personal experiences of social trauma and gambling problems.
Hamilton-Wright et al. (2016)	Canada	5 Community men with histories of PG and housing instability / homelessness	Semi-structured interviews	To explore youth experiences of gambling behaviour through the reflections of men who experienced problem gambling in adulthood and who were clients of a community-based agency which provides a range of services for homeless and marginally housed clients in a large urban centre.
Hing et al. (2012)	Australia	169 Indigenous Australians	Individual and small group interviews	To develop gambling involvement profiles.
Hing, O'Mullan, Nuske, et al. (2021)	Australia	48 female victims of IPV linked to a male partner's gambling; and 24 female victims of IPV linked to their own gambling; 39 service practitioners (SPs) from 25 organizations across Australia, including domestic violence, gambling, financial counselling, women's health, and culturally specific support services.	Interviews	To examine how problem gambling interacts with gendered drivers of IPV against women to exacerbate this violence. Research questions: 1. "How does male partner violence interact with the male partner's gambling?" 2. "How does male partner violence interact with the female partner's gambling?" 3. "What is the role of gendered drivers of IPV in gambling-related IPV against women?" 4. "How might gambling exacerbate IPV against women?"

Hing, O'Mullan, Breen, Nuske & Mainey (2022)	Australia	30 women with lived experience of gambling-related IPV perpetrated by a current or previous male partner.	Unstructured interviews	To explore how gambling by a male partner contributes to intimate partner violence (IPV) against women.
Hing, Nuske, Breen, O'Mullan, Mainey & Thomas (2022)	Australia	18 women with lived experience of economic abuse perpetrated by a male partner with a gambling problem	Interviews	To explore the interaction between problem gambling and economic abuse, and how this economic abuse is reinforced by other forms of intimate partner violence (IPV) and underpinned by gendered drivers of violence against women.
Hing, Mainey, O'Mullan, Nuske, Greer, Thomas, & Breen (2022)	Australia	24 women victimised by IPV and all experienced problems relating to the gambling on electronic gaming machines (EGMs).	Interviews	To explore women's gambling in response to IPV victimisation by drawing on their lived experience. Research questions: (1) "What is the nature of the relationship between gambling and IPV when women gamble in response to IPV victimisation?" (2) "How does IPV victimisation contribute to women's gambling?" (3) "Why are gambling venues attractive as 'safe spaces' for women victims of IPV?"
Holdsworth et al. (2015)	Canada	40 (20 recreational gamblers; 20 people experiencing gambling problems)	Interviews	To explore how gambling involvement and gambling-related problems may be affected by significant life events, psychological co-morbidities and related social factors.
Lee et al. (2007)	Canada	4 Chinese Canadian pathological gamblers	Semi-structured interviews	Two research questions guided this study: (1) "What are the pre-immigration experiences of a cohort of four Chinese Canadian pathological gamblers?" (2) "What are the possible links of these experiences to the development of pathological gambling some 30 years after immigration?"
Luo (2020a)	Canada	15 adult Chinese Canadian gamblers	Semi-structured interviews	To explore gambling behaviors in older Asian-Canadian adults and intervention strategies for this group of gamblers in a central Canadian city. Interview questions included "When did you start gambling? How did you start it? What happened to you and your significant others, in your community, country, and society before and around that time?"
Luo (2020b)	Canada	18 older Filipino Canadian gamblers	Semi-structured interviews	To answer the following questions: (1) "How have life-course factors (lifelong development, human agency, historical time and place, timing, and linked lives) affected older Filipino gamblers in terms of their perceptions, motivations, gambling actions, and help-seeking patterns?" (2) "What can social workers do to support older gamblers with a minority cultural background?"
MacLean (2019)	Australia	50 Aboriginal people who had personal experience of gambling, had been affected by another person's gambling, or had professional experience working with gamblers	Interviews	Describe experiences of gambling to develop an understanding of the social practice of gambling in two regional Aboriginal communities in the Australian state of Victoria.
Nixon, Evans, et al. (2013)	Canada	6 women gamblers	Interviews	To illustrate the relationship between trauma and the development problem and pathological gambling by investigating the lived experiences of six women who self-report having a history of trauma and problem with gambling.

Nixon, Solowoniuk, et al. (2013)	Canada	1 woman problem gambler	Interview (case study)	To examine the phenomenon of pathological gambling and addiction from the perspective of writer and teacher A.H Almaas.
Nuske et al. (2016)	Australia	20 (11 recreational gamblers and 9 problem gamblers); Women, EGMs players	Interviews	To examine significant life events and social connections that encourage some women to gamble.
O'Mullan et al. (2021)	Australia	24 Women who both gambled and experienced IPV and who had previously engaged with a support service regarding IPV or gambling	Interviews	To provide insights into how problem gambling contributes to IPV towards women when the violence is linked to the woman's gambling. Research question: "How does gambling by a female partner interact with violence from her male partner?"
Reith & Dobbie (2012)	Scotland	50 problem and recreational gamblers	Interviews	To explore the ways that individuals experience recovery from gambling problems.
Reith & Dobbie (2013)	Scotland	50 problem and recreational gamblers	Interviews	To provide a qualitative understanding of behaviour change over time and to move beyond the level of individual explanation to explore the social processes involved in gambling behaviour change.
Saugeres et al. (2014)	Australia	48 problem gamblers	Interviews	To explore the ways in which early family influences may contribute to problematic gambling in adulthood.
Thomas et al. (2009)	Australia	13 self-defined electronic gambling/gaming machine (EGM) problem gamblers; 6 problem gambling counsellors	In-depth, semi-structured interviews	To develop a theoretical model of EGM problem gambling.

Key Themes

The following four major themes emerged during the analysis of the article findings: 1) gambling as a consequence of trauma, 2) trauma as a consequence of gambling behavior, 3) cyclical relationship of trauma and gambling, and 4) healing from trauma and gambling-related harms.

Theme 1: Gambling as a Consequence of Trauma

Overwhelmingly, the articles included in this scoping review focused on the development and perpetuation of gambling-related problems after trauma (Grant Kalischuk, 2010; Hagen et al., 2013; Hamilton-Wright et al., 2016; Hing et al., 2012; Holdsworth et al., 2015; Lee et al., 2007; Luo, 2020a, 2020b; Nixon, Evans, et al., 2013; Nixon, Solowoniuk, et al., 2013; Nuske et al., 2016; Reith & Dobbie, 2013; Saugeres et al., 2014; Thomas et al., 2009; Hing, Mainey, O'Mullan, et al., 2022; Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021). Traumatic experiences described within text were often related to abuse, neglect, and death of a loved one. Within childhood, one participant described how "I hated my Dad a lot. He had been an alcoholic for the longest time. I had vivid memories from childhood how he scolded my Mom and me" (Lee et al., 2007, p. 38) and "My dad beat me, many, many times when he was drunk" (Lee et al., 2007, p. 41). Another participant described how, later in life, "There

are some horrific, in terms of lifestyle, there's a lot of suicide; there's a lot of death, a lot of failing health around the place" (Hing et al., 2012, p. 225).

Articles explored how problems began to develop, for example in response to an abusive relationship situation (e.g., Hing, Mainey, O'Mullan, et al., 2022). Within one article a participant described how trauma "drove them to gambling" (Luo, 2020b, p. 10), perhaps best literally exemplified by a verbatim quote found within another article in which a participant describes:

My brother passed away. He meant a lot to me; he was my mentor... I didn't know what to do. So I said to my nephew 'come with me, let's go for a ride.' He said 'where are we going?' I said 'just for a ride.' So we ended up at the casino and I gambled all night then all day, then all weekend, and that is when my gambling started (Grant Kalischuk, 2010, p. 10).

Thus, for some, trauma was the trigger for the onset of gambling which quickly led to problems, while for others traumatic experiences intensified, in frequency and severity, existing gambling practices. Within the articles specifically related to IPV, the authors discuss how increases in the violence that women faced gave way to increases in gambling which quickly led to harmful levels (e.g., Hing, Mainey, O'Mullan, et al., 2022;

Hing, O'Mullan, Nuske, et al., 2021). Beyond IPV, a participant described how "My eldest daughter committed suicide; it would be 10 years ago in a couple of months, and that was what I think triggered the gambling problem that I had" (Nuske et al., 2016, p. 17). Another participant described:

I found out my daughter was actually born with a problem in her foot, but we had not found out how serious it would be. Mostly, I wasn't coping with that well, so my gambling increased ... gambling just took my mind off things (Holdsworth et al., 2015, p. 265).

One article went further, hypothesizing that "The presence of trauma was a necessary but not sufficient precursor to the development of problem gambling" (Grant Kalischuk, 2010, p. 11). This piece examined the relationship as involving a more complex combination of past traumatic experiences or "unresolved losses" with a more recent event that sparked problems related to gambling (Grant Kalischuk, 2010, p. 9). For example, one participant explained "An instant trigger was feeling the pain of loss, the death of my three year old daughter" (Grant Kalischuk, 2010, p. 11).

One article also noted a reduction in gambling for participants in certain circumstances (Reith & Dobbie, 2013):

Male: I have lost my sisters in the last eight years, three sisters... It was just three weeks after that [the final death] that I had my heart attack and [the doctors] said have you had any dramatic ... experiences? I said yes I lost my sister and the very closest friend she could have on the same night. I mean what's the odds? Nobody expected that, to die the two of them. That had a great impact on my life, that shook me. That shook me bad.

Interviewer: have the three bereavements affected your gambling activity each time?

Male: Yeah. ... when my last sister died I said I mustn't let this affect me because of the first two. But again, I stopped gambling for a month, or six weeks (Reith & Dobbie, 2013, pp. 382-383).

Many articles discussed motivations, highlighting how problem gambling manifests because of an individual attempt to cope with trauma, even referring to gambling as a "feeling regulator" (Nixon, Evans, et al., 2013, p. 229). For example, in one article, a participant explained "It's all about changing the way you feel, it's all about not wanting to deal with things that are painful. I think to me, that has been my experience" (Nixon, Evans, et al., 2013, p. 223).

In multiple instances, participants described how they sought specific emotional outcomes from their

gambling, and here it is interesting to note a separation into two main categories: 1) seeking an absence of feeling and 2) seeking to feel something different. Within the first category participants sought an absence of feeling, wishing to escape, wanting to forget or "zone out," seeking "oblivion through gambling," or relief/respite from "loneliness, pain and trauma," wanting to "soothe" and "numb" themselves (e.g., Grant Kalischuk, 2010; Hing et al., 2012; Hing, Mainey, O'Mullan, et al., 2022; Hing, O'Mullan, Nuske, et al., 2021; Lee et al., 2007; Nixon, Evans, et al., 2013; Nixon, Solowoni et al., 2013; Nuske et al., 2016). For example:

I believe probably for most people, it is a sense of escape. They sit in front of something and the rest of the world doesn't exist any longer, so therefore the rest of their problems don't exist either. That's what happened (Grant Kalischuk, 2010, p. 10).

They described how the EGM acted as a distraction, how it allowed them to tune into something and thus tune out their problems:

I like the mesmerizing feeling of just sitting there, blanking out concerned with nothing other than that thing spinning around, it takes me away from my problems, and it calms my mind, brings my mind back to a focus, a focal point (Thomas et al., 2009, p. 102).

It was like a relief to watch the things spin around and you'd think about that, instead of thinking about anything else ... the anxiety just quietly dissipates ... oh I got two little Indian fellas and I've won something, and that was refreshing from everything else that was going on. It was relief and a distraction (Hing, Mainey, O'Mullan, et al., 2022, p. 8).

Moreover, as one participant explained, the behaviour was not necessarily about winning:

I can't remember trying to win. It always just seemed like it was a place I could go and hide from the world, and I didn't have to do anything or talk to anybody or just soulless... You were in a lonely void (Nixon, Evans, et al., 2013 p. 225).

Within the second category participants described how gambling, and often specifically winning, provided alternative feelings of pleasure, control, security, increased self-worth (e.g., feeling like somebody), enjoyment, exhilaration, and hope for a way out of their current situation (e.g., Grant Kalischuk, 2010; Hagen et al., 2013; Hamilton-Wright et al., 2016; Hing, Mainey, O'Mullan, et al., 2022; Nixon, Evans, et al., 2013; Nixon, Solowoni et al., 2013). For example, in one study a participant explained:

Well, it makes the time go by fast, instead of dragging. It helps to block everything else that's going on in my life out of me. You know, like all that family stuff from the past, it kinda totally disappears, because you go into your own little world . . . you actually feel a higher emotion . . . you feel better (Hagen et al., 2013, p. 362).

Both types of emotional outcomes that participants reported seeking from gambling involved a certain separation from everyday life, from trauma, from pain. These two types of emotional outcomes can be seen intertwined in the following quote:

There's an element of *hope*. And even if it lets you down, it's no different to everything else that lets you down; but that's still got the odds with it. And also, yeah, the rhythmic *escape*, the *sense of purpose*. Like, I'm practically contributing to my life, because I could win, and I could drastically change my situation (Hing, Mainey, O'Mullan, et al., 2022, p. 9).

Some participants went further, describing how the feelings that they associated with their gambling contributed to the development of gambling problems. As one explained:

I had my mum with cancer who I was nursing. That was a significant time. My mother passed away 11 years ago, but I nursed her for 6 years. That's when the gambling was prominent. I was out of control. Gambling was an escape, and I spent lots of money (Holdsworth et al., 2015, p. 264).

Within another article, a participant describes this unravelling:

When the abuse started that's when I used it [gambling] as an escape, and that's when the real addiction took over, like, the lack of control (Hing, O'Mullan, Nuske, et al., 2021, p. 10).

Within the IPV literature, the notion of "escape" was also further nuanced to specifically relate not only to *psychological* escape from IPV as seen within other literature above, but the additional motivation of *physical* escape from the abuse. Women turned to gambling venues as a haven in which to seek refuge during periods of increased violence (Hing, Mainey, O'Mullan, et al., 2022). Gambling venues were a particularly important contributor to these women's gambling practices, as one of the few physically safe spaces that these women could frequent given the increased isolation from friends and family as a result of their abusive relationship.

I was actually using the pokies as an escape from the domestic violence. So, when the violence and the emotional abuse would erupt, I would leave the house, because I had no friends or family around me. So, I would actually go the pokies and that's where I would stay. I was never coming home. I didn't want to be at home (Hing, Mainey, O'Mullan, et al., 2022, p. 8).

Theme 2: Trauma as a Consequence of Gambling Behavior

A secondary focus of the articles was the trauma that manifested as a result of gambling problems (Grant Kalischuk, 2010; Hagen et al., 2013; Hing et al., 2012; Nixon, Evans, et al., 2013; Nixon, Solowoniuk, et al., 2013; Reith & Dobbie, 2012; Thomas et al., 2009; Banks & Waters, 2022; Hing, Mainey, O'Mullan, et al., 2022; Hing, Nuske, Breen, et al., 2021; Hing, O'Mullan, Breen, et al., 2021; Hing, O'Mullan, Nuske, et al., 2021; MacLean, Maltzahn, Thomas, et al., 2019; O'Mullan et al., 2021). This included violence in the home (e.g., IPV [including sexual assault] and child abuse) and child neglect. Harm could be directed towards others, but also themselves; "people can get that desperate, suicide is an option" (Hing et al., 2012, p. 226). As one participant explained:

I gambled anytime I could get away. ... I think the most I ever lost was 2200 dollars in a day. I didn't have that money; it was money I'd borrowed . . . It just absolutely drove me nuts to lose that money. I couldn't stand losing that money and come hell or high water I had to get it back . . . I remember walking across the street through the park going, I am just in the gutter, I am going to die. I wanted to die (Hagen et al., 2013, p. 364).

Another was even more introspective:

It was affecting my family and me. I think when you start thinking about suicide, when you attempt it, when you plan it, I think that is when you have to think seriously about what is happening in your life and how gambling is affecting you (Grant Kalischuk, 2010, p. 13).

Gambling itself was described as becoming a source of trauma in such accounts. As one participant said: "Part of my gambling was to annihilate myself... the gambling, which at first was so attractive just turned into a nightmare of self-abuse" (Nixon, Solowoniuk, et al., 2013, p. 134).

Reith and Dobbie (2012) go one step further, to discuss how when gambling becomes traumatic it can lead to "rock bottom," which in turn can lead to a break in the cycle of trauma and gambling. As one participant put it:

I had nothing. It wasn't as if I had any more to lose. The only thing I had to worry about was:

who was going to bury me. That was my only worry. I had two options, because I had nothing else around me. I either just went away and laid down underneath a bridge somewhere, or I did something about it, that was my only two options. That was it in a nutshell (Reith & Dobbie, 2012, p. 516).

Beyond self-harm, certain articles explored domestic violence as a consequence of gambling practices. Within these articles, abuse was linked with gambling losses (both the victim's and the perpetrator's), a need to fund gambling practices, and a desire to silence criticisms regarding gambling expenditure (e.g., Hing, O'Mullan, Nuske, et al., 2021).

Within situations where women were the partner who gambled, increases in abuse within the relationship, including physical violence, were linked to their starting gambling (e.g., Hing, Mainey, O'Mullan, et al., 2022) and to their associated losses (e.g., Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021):

He said, "Did you lose it all?" ... and he just gave me a hell of a hiding with this walking stick ... He broke it into three pieces over my back and the back of my legs (Hing, O'Mullan, Nuske, et al., 2021, p. 14).

When IPV was described in association with the perpetrator's gambling, a participant describes how her abusive partner would use violence to extract money for gambling:

He would be wanting my money and any money that I had, and he would be quite physically or verbally aggressive towards me, shouting, swearing. I mean never physically punching me, but pinning me up against a wall and stamping on my feet and things like that, it was domestic abuse and it was just because I wouldn't give him money (Banks & Waters, 2022, p. 7).

On other occasions, IPV was related to the perpetrator's gambling losses, as one participant details:

He tried to throw me out of a moving car one day when he lost a race ... he lost his temper, and he started banging the steering wheel in frustration. And when I said, you know, 'Please, come on, it's only a horse race', of course it became my fault ... I had two terrified boys in the back... So every time he lost a race, every time he had a bad day, a bad day of losses was always a bad day for us, and it was always mum's fault (Hing, Nuske, Breen, et al., 2021, p. 174).

Other articles discussed child abuse and neglect, with one interviewee describing how parents would put their need to gamble above their family's welfare:

...When they are losing they've got no food in the cupboards so they're starving, don't have food before they go to school. [The parents] know all that but they still want to go gamble. They've seen the bad side and they've seen the good side when they win cause they get things. But most of the time they've got nothing (MacLean et al., 2019, p. 1337).

In another article, a mother describes instances of abuse towards her children as a way to coerce and extract money for gambling:

If he wasn't getting his own way ... he wanted some money he would road rage with us in the car ... to terrify the kids ... screaming ... be trying to attack the kids to get at me (Hing, O'Mullan, Breen, et al., 2021, p. 91).

Theme 3: Cyclical Relationship of Trauma and Gambling

While the majority of articles included in this review either addressed one or both of the above themes separately, a few specifically examined a potential cyclical relationship between trauma and gambling: in other words, how trauma can lead to and perpetuate problematic gambling behaviors which can, in turn, lead to more trauma (Grant Kalischuk, 2010; Hagen et al., 2013; Nixon, Evans, et al., 2013; Nixon, Solowoniuk, et al., 2013; Hing, Mainey, O'Mullan, et al., 2022; Hing, O'Mullan, Breen, et al., 2021; Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021). For example, one participant explains this cycle:

Gambling changes your mood. Like, you don't have to think about it anymore, the past ... it's nice, not to think about what happened or what's happening, to just stay away from troubles ... but in the end, of course, the machines takes your money [sic]. Then you have more trouble, and feel worse (Hagen et al., 2013, p. 362).

Nixon, Evans, et al.'s (2013) thematic analysis also demonstrates how trauma contributes to the development and perpetuation of problem gambling, with participants:

...progressing through a series of experienced stages involving the development of the not good enough self, seduction & intoxication with gambling, opening the doorway to oblivion through gambling, trauma and the ties that bind, and culminating in gambling becoming trauma (p. 214).

Within the IPV articles that explored the complex bi-directional relationship of gambling and trauma (e.g., Hing, Nuske, Breen, et al., 2021; Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021), some participants associated an escalation in violence with gambling-related problems, with one participant describing: "the gambling is so interwoven with domestic violence, it's inseparable" (Hing, O'Mullan, Nuske, et al., 2021, p. 9).

Specific to the temporal sequence, one woman describes how it becomes an ongoing pattern of behavior, a cycle of gambling and IPV, specifically how abuse might lead to seeking a safe space within a gambling venue, leading to increased gambling, which in turn led to more instances of IPV:

The main reason we started arguing was because I was gambling ... I know that there were several factors why it [the violence] happened, but he solely blames it on the gambling ... Once we were full on fighting, no matter what the reason, I started using the gambling as an outlet to get away from him, as an escape (Hing, Mainey, O'Mullan, et al., 2022, p. 7).

This was also true when the perpetrator was the one gambling. As one participant described, as gambling intensified, so did the cycle of violence to which it was linked:

The longer the relationship went on the worse it got ... financial ... emotional, verbal, psychological ... physical ... the gambling ... dishonesty, shifting blame to me, disappearing for hours ... at the pokies ... it just creates a cycle ... of domestic violence ... they'd apologise and promise to change ... and then you're sort of walking on eggshells ... things explode again ... I unfortunately could not see it (Hing, O'Mullan, Breen, et al., 2022, p. 94).

Theme 4: Healing from Trauma and Gambling-Related Harms

Certain articles addressed the process of recovery from both trauma and gambling (Grant Kalischuk, 2010; Hagen et al., 2013; Nixon, Solowoniuk, et al., 2013; O'Mullan et al., 2021). Here, articles demonstrated that recovery from gambling disorder was dependent on people healing their trauma. As an individual in treatment describes:

When it [gambling] is happening, you are too shocked to feel anything about it, and because I wasn't connected to any of my feelings, you know you kind of just blindly move on from thing to another. It took recapturing the moment, the pain and hurt of being violated. I think there was some humiliation and shame there as well ... because when if you are exposed to violence ... you get a core belief there, and it's hard to get

out of it, because it keeps going around and around ... so we did small groups, and we got to write a letter to whoever we wanted to. So I wrote a letter to John about all his abuse. It was pretty heavy, and I read it out to everybody. That was pretty healing, me getting there (Hagen et al., 2013, p. 365).

The importance of addressing both trauma and gambling together, and not offering services in silo, is highlighted within another article where a participant describes:

The intake worker was gambling specialized, and because it was one of the things I indicated in the intake interview, they made it ... for the funding, you've got to put in a category, and my first bout of counselling was purely for the gambling, even though my gambling was specifically linked to my IPV relationship (O'Mullan et al., 2021, p. 13).

Discussion

This is the first scoping review to summarize qualitative research concerning the complex relationship between trauma and gambling. Compared to recent reviews of quantitative studies, this review demonstrates that qualitative work remains scarce within existing literature on the subject of trauma and gambling (e.g., 17 distinct qualitative studies included herein versus 74 studies in a recent review of quantitative research; Moore & Grubbs, 2021). Despite this obvious imbalance, qualitative studies offer incredibly meaningful contributions that not only align with, but elegantly extend those of recent systematic reviews of quantitative findings (Dowling et al., 2016; Lane et al., 2016; Moore & Grubbs, 2021) by providing rich narratives that allow us to draw a more complete picture of the various ways that gambling and trauma intersect. For example, as these recent reviews highlight, quantitative studies have been primarily cross-sectional, leaving authors (e.g., Moore & Grubbs, 2021) unable to draw conclusions concerning causation, or direction of the relationship between trauma and gambling. In contrast, our review of qualitative studies demonstrates how a much more in-depth exploration of the relationships between trauma and gambling, and specifically speaking directly to those affected, has the potential to overcome these issues. Allowing individuals to directly articulate their experiences gives them an opportunity to share important insight into their behavior that they alone possess and that can contribute significantly to existing literature.

Overall, our findings also demonstrate how individuals who gamble can vary in their relationships between gambling and trauma and how trauma can affect not only the onset and development of gambling but also its persistence, intensification, and diminution. Qualitative studies have focused on motivations to

gamble, cultivating a better understanding of *why* trauma might play a role in the development of problems related to gambling. Indeed, our findings illustrate how most of the work in this area has been focused on the onset of gambling and gambling-related problems after trauma. This aligns with quantitative reviews on the same or similar topics (Dowling et al., 2016; Lane et al., 2016; Moore & Grubbs, 2021) where the majority of articles included have also been focused on the development of gambling-related problems after trauma and specifically how negative childhood events are associated with later development of problem gambling. Within the qualitative literature, there has been a noteworthy recent increase in publications exploring IPV and gambling. However, given that most of these articles come from one research team and study, there is a lack of diversity in research exploring the intersections of gambling and trauma as a central focus. Literature is even more lacking when it comes to gambling as a pathway to trauma for both individuals who gamble, and those close to them, and in terms of studies focusing on gaining a deeper understanding of the complex interrelationship between trauma and gambling that can become a vicious cycle. This finding echoes a recent systematic review of childhood maltreatment and GD by Lane et al. (2016) that also highlighted the need for more research concerning the potential trauma stemming from childhood neglect as a consequence of problem gambling. Indeed, this is incredibly important, especially given that we know how harmful and pervasive the effects of trauma can be, going well beyond the individual. The cyclical effects of trauma may be hard to capture as in certain circumstances (e.g., when affecting family, or others close to the individuals who gamble), the original victim can become the perpetrator. This highlights the importance of not only speaking with those who gamble, but also those close to them to get the most complete picture of how trauma and gambling can be related. Given how stigmatizing topics such as trauma and gambling can be, gathering information from multiple sources also increases the likelihood of gaining the most complete and comprehensive knowledge possible. Findings that have prioritized this approach have also illuminated the potential for generational effects of trauma and the importance of exploring this as an avenue of research in the future (e.g., Grant Kalischuk, 2010).

Coping, specifically how gambling can be used as a form of escapism, was also a focal point within the studies that explored the onset of gambling and gambling-related problems after trauma. Traumatic events lead to emotional and physical pain, and thus individuals who gamble and who experience trauma seek a means to distance (physically and psychologically) and distract themselves or even dissociate from these experiences (Hing, Mainey, O'Mullan, et al., 2022; Nuske et al., 2016; Saugeres et al.,

2012). This aligns with the idea that individuals who gamble may exhibit maladaptive stress coping mechanisms, and that gambling can be conceptualized as a form of distraction or avoidance-focused coping (Compas et al., 2001; Hare, 2009; Saugeres et al., 2012; Thomas et al., 2009). As noted in our synthesis, within the studies included in this review, there seem to be two types of emotional outcomes sought by those who gamble, either to feel *nothing* or to feel *something different*. These two outcomes are described interchangeably at times, but future research might be warranted to further disentangle potential differences between wanting to withdraw and wanting to replace an emotion. While some have examined these topics from the perspective of those who design the machine (e.g., Schüll, 2012), there remains plenty of room for future research to explore escapism and excitement from the perspective of those who gamble and further elucidate how gambling as a maladaptive form of coping may contribute to further trauma. A few studies in this review explored how individuals who gamble progressed into a state of disordered gambling and how their gambling itself became traumatic. Qualitative findings describe how individuals find themselves "overwhelmed" by their gambling, where it begins to contribute to its own set of "significant life issues and related negative emotions" (Thomas et al., 2009, p. 100) to a point where "they simply cannot go on in the future as they have in the past" (Reith & Dobbie, 2012, p. 516). This leads to serious consequences, including domestic violence and suicidal ideation. As Reith and Dobbie (2012) describe, in these cases, individuals who gamble speak about how this progression to a place of "rock bottom" can lead to the ultimate choice (i.e., whether to live or die). Some participants also identified this moment as a turning point, where a major shift could take place in their outlook and how this new sense of self-awareness allowed them to mentally reorient themselves in a new direction towards recovery. In this way, gambling becomes "a major event in their life that changes their view of themselves and their world," which is a description of trauma offered by Nuske et al. (2016, p. 16).

As mentioned above, within quantitative reviews there has been a strong focus on associations between trauma and gambling, with readers often cautioned to not assign any temporal sequencing to the relationships found (e.g., Moore & Grubs, 2021). Previous reviews have also shied away from drawing definitive conclusions that trauma and gambling might be related in a cyclical way. In contrast, certain qualitative studies have immersed themselves within the relationship between trauma and gambling in a way that has illuminated how this relationship can become a vicious cycle, a feedback loop:

Wherein an individual initially seeks to escape stress by gambling, the act of gambling and losing becomes a stressor, but the individual's

physiological reactivity to losses fails to reduce gambling behavior. Such a cycle may persist for years ultimately resulting in catastrophic financial losses and even suicide (Buchanan et al., 2020, p. 10).

Recent work has also focused on this bidirectional relationship (e.g., Hing, Nuske, Breen, et al., 2021; Hing, O'Mullan, Nuske, et al., 2021; O'Mullan et al., 2021). One article by Hing, Mainey, O'Mullan, et al. (2022) highlights how women experiencing IPV can seek out physical safety in gambling venues especially during hours when other public spaces are closed, but it also illustrates how spending time at gambling venues can contribute to the development of gambling problems which can contribute to a cycle of IPV victimisation. Furthermore, these situations can not only lead to and/or exacerbate IPV but potentially extend the life course of abusive relationships as gambling-fueled poverty may trap women in situations of IPV, preventing them from leaving (Hing, Mainey, O'Mullan, et al., 2022; Hing, Nuske, Breen, et al., 2021). That said, research on the cyclical relationship between gambling and trauma remains in its infancy and the need for research to focus on changing patterns of gambling over time through longitudinal, and ideally qualitative, studies of social factors impacting patterns of behavior is pressing (Reith & Dobbie, 2013; Hamilton-Wright et al., 2016).

There is also an overarching lack of geographic diversity within existing literature, a point which has also been previously noted, and that this review's findings reinforce given that most studies included took place in Canada and Australia. This lack of diversity leaves a massive cultural gap in this area of study and limits generalizability of findings, especially given that experiences of trauma and gambling are heavily imbedded within their cultural contexts. While there is obvious room for growth in this area, one strength of the existing qualitative literature is that it has demonstrated diversity in its samples with articles focusing on women and Indigenous populations, among others, and highlighted a variety of viewpoints including those of individuals who gamble, counsellors, and families affected by GD.

Our synthesis also included research on how traumatic events negatively impact the course of problem gambling (e.g., leading to GD), but it is also possible that these types of events can reduce gambling. For example, Reith and Dobbie (2013) found that personal trauma, via events such as bereavement, may result in a loss of interest in gambling for periods of time. That said, more research is needed to explore how trauma can lead to reductions in gambling behavior and different potential characteristics of resilience (e.g., strong social networks) given that a more comprehensive understanding of factors of resiliency would be incredibly useful when developing future prevention strategies (Holdsworth et al., 2015; Lee et al.,

2007). Future research is also needed on the topic of how trauma may interfere with recovery (e.g., result in relapse) when it comes to GD.

Multiple policy and intervention implications and recommendations were noted across the included studies. At a policy level, authors advocated for upstream actions aimed at reducing the incidence of social traumas over more classic downstream prevention efforts that solely targeted at-risk gambling behavior via widespread public education campaigns (Hagen et al., 2013). This mirrors recommendations for treatment that also advocated for more research on how individuals heal from both trauma and gambling-related harms and highlighted how treating either in isolation is not likely to be as effective as acknowledging the complex relationship between the two, and can indeed result in more harm (e.g., in situations when gambling disorder is a contributing factor for instances of IPV; Banks & Waters, 2022; Felsher et al., 2010; Hagen et al., 2013; O'Mullan et al., 2021). Certain studies acknowledged the importance of extensive and *continued* assessment for potential identification of trauma during treatment of GD (Lee et al., 2007). Others highlighted the importance of treating not only the individual who gambles but also educating those close to them, such as family members, on the significance of the relationship between gambling and trauma and strongly recommended integrating them within intervention programming (Grant Kalischuk, 2010; Hamilton-Wright et al., 2016). Specific multidisciplinary education concerning trauma and resilience has also been recommended for those employed within addiction treatment services, and those working with traumatized individuals and their families (Grant Kalischuk, 2010; Holdsworth et al., 2015).

Limitations

There are certain limitations that need to be taken into consideration when interpreting the results of this review. While qualitative research methods are incredibly diverse, research in the gambling field originates disproportionately from the disciplines of neuroscience, psychology, and health science (e.g., Akcayir, Nicoll, & Baxter, 2021). The field of gambling studies has also been criticized for its historical underrepresentation of qualitative research (Cassidy, Pisac, & Loussouarn, 2013; Cassidy, 2014). This presents a foundational limitation that might have been amplified by the databases and search terms selected for this scoping review in that they might have yielded a particular subset of existing empirical literature. Specifically, the databases chosen for this review are more likely to include research from fields such as medicine, psychology, and the social sciences whereas other databases would likely have yielded additional research from other fields (e.g., anthropology, law, film studies). Likewise, focusing specifically on trauma terminology, rather than more broadly including all adverse/stressful life events, likely influenced the

studies we captured with our initial search strategy. While the additional methods undertaken to identify further relevant articles for this scoping review (full text/bibliography searches, forward citation tracking) strengthened our final selection, future review articles exploring the relationship between trauma and gambling should consider broadening their conceptualizations of both trauma and qualitative methods to provide an even more complete picture of this complex relationship. Grey literature was also excluded from this review although several articles were the product of relevant information drawn from reports (Reith & Dobbie, 2012, 2013; Saugeres et al., 2014). As a review of qualitative studies, this work is also inherently limited in its synthesis and conclusions by the results that the authors chose to present within their articles. Finally, as mentioned in our discussion, existing studies lack regional diversity, and as such our synthesis remains limited in its generalizability at this time.

Conclusion

This review synthesizes, for the first time, a key set of qualitative study findings concerning the relationship between trauma and gambling. In doing so it both complements and extends existing literature reviews in a unique and important way by providing a comprehensive overview of experiences of trauma and gambling and their intersection. Our review findings demonstrate that there are still many avenues that need to be explored to better understand the complex relationship between trauma and gambling. Qualitative research can significantly contribute knowledge about this subject, and it is important to call attention to the space that remains for future research centering the voices of those affected.

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