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Course: Professional Doctorate in Counselling Psychology

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Submitted: November 2020

Portfolio Title: Gamblers' Experience of the Workplace and Assimilative Therapeutic Integration

A Portfolio for The Completion Of The Professional Doctorate in Counselling Psychology

Dedicated to The Grandfather I Never Met

Acknowledgments

I would like to thank all the people who contributed to my journey in becoming who I am and completing this piece of work. First of all, I would like to thank my supervisor, Dr Jacqui Farrants, who I have been blessed to have as a mentor and a supervisor. She has been next to me always offering her guidance in the easy, the hard and the hardest times that we faced during the completion of this project.

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Finally, I would like to thank my family and fiancée, who have been next to me always and offered their emotional support unconditionally during the whole journey of my becoming a counselling psychologist.

Declaration

I hereby declare that the work presented in this portfolio is my own. It has been developed under the supervision of Dr. Jacqui Farrants. Apart from her assistance any other assistance or inspiration drawn from elsewhere has been referenced appropriately within the portfolio.

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**THE FOLLOWING PARTS OF THIS THESIS HAS BEEN
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Preface

This project is part of the completion of the Professional Doctorate in Counselling Psychology as delivered by City, University of London. Its primary focus is to explore how individuals who face difficulties with gambling experience the workplace. This chapter outlines the sections of the portfolio, beginning with how it was assembled and developed, followed by a presentation of the links between the various sections of the portfolio. The preface concludes with a reflective statement concerning my personal experience in putting this piece of work together as well as what it meant for me.

1. Sections of The Portfolio

Section 1: The first section of the portfolio presents the research study of the project. The research aims at examining how individuals who experience difficulties with gambling experienced their workplaces.

Section 2: The second section of the portfolio is a discussion of a clinical case study. This case study involves my work with a client who faced difficulties with gambling. The study consists of the examination of several aspects of my professional counselling practice with this specific client working in my capacity of trainee counselling psychologist.

Section 3: The third and final section of the portfolio is a publishable format of my research study written for a specific journal. The journal focuses on various topics around recovery, empowerment, rehabilitation and peer support with interest in employment as well. The article focuses on the stigma and shame the participants faced in their respective workplaces.

2. Reflective Statement About the Assembly of the Project

During my upbringing, I was continuously listening to stories of my grandfather and the addicted gambler he was. I never met him. My grandfather had a very successful business and possessed a significant amount of land, but he lost everything due to his gambling habit, leaving the family in debt. My family thinks that he passed-away due to cancer that was exacerbated from the sadness attributed to gambling losses. His passing-away caused a chain of events that impacted my life. First of all, his death caused a great deal of sadness to

my mother, which led to my premature birth. Since then, during my whole life, I would hear about the amount of money that my grandfather spent in betting, roulettes, blackjack and poker and since then I was always reminded of the things that he lost due to his gambling behaviour.

Moreover, my grandmother would also always discourage me not to even play cards with my friends. Additionally, she would always tell me about the trips abroad and in Greece that she made with my grandfather and how all this luxurious and pleasant lifestyle would befall to pieces due to gambling.

Following this many years later, I started my career as a trainee psychologist and gained entry into the Professional Doctorate in Counselling Psychology. At first, I did not even think that there were specialist clinics in the United Kingdom offering treatment to individuals with problematic gambling behaviour and I was not even aware that gambling addiction was regarded as a disorder. When I came across the placement list provided by the University, immediately a specialist clinic for gambling caught my eye and stirred up interest. I immediately sought to have a placement there, even though my research interests were personality disorders. It appears that I was curious about the treatment of Gambling. By practising in the special clinic for gambling as a trainee counselling psychologist, I always felt like I was getting closer to the grandfather I never met. For me it felt like I was getting to know him a little bit better and day by day I considered that I was learning more about his gambling identity. So, I must admit I have a genuine interest in helping individuals with gambling addiction to achieve abstinence. Also, when in treatment with someone for gambling addiction, I always had in my mind the devastating experience of these individuals' families, something that I experienced second-hand myself.

Furthermore, another reason for choosing the subject mentioned below is that there is limited research around gambling. I, myself, do believe originally that gambling is often not considered a severe difficulty for individuals. However, during my practise in the specialist clinic and while conducting the literature review for this project, I realised that Problem Gambling is having severe adverse effects on individuals' mental health. In extreme conditions, it can lead them even to take away their own lives as well as negatively impact on the mental health of the gambler's significant others. Furthermore, the diagnostic criteria suggest that individuals who have difficulty with gambling have also troubled interpersonal relationships. Considering the above, I must admit that my family history as well as experiencing gambling first-hand through my practice, added to my feeling pressured for to complete my work successfully. It created a lot of anxiety on me that I managed through supervision and personal therapy. On the other hand, I consider that this pressure once

managed, proved to become a creative one filling me with determination and passion for succeeding and becoming better in what I am doing in life.

My father is a corporate trainer and coach, who has never gambled in his life. I would always hear stories from him about team-building exercises, sales training and many more. Hearing about these intrigued me even further to learn as much as possible about the workplace, which is where we spend a significant portion of our day. Evidently, my father's experiences and the gambling history of my family were the stimuli that sparked my interest in conducting research in the specific area.

Incentivised by these two stimuli and while volunteering in the specialist clinic as a trainee counselling psychologist, I observed that individuals who were exposed to a supportive work environment had better treatment outcomes. So, apart from the sentimental effect gambling and the workplace had on me, my observations made me realise that there are opportunities for further research into the topic. Thus, I concluded in studying 'How people who experience problems with gambling experience the workplace: An Interpretative Phenomenological Analysis Study'. This area of study includes the theme of gambling and the workplace theme, both of which have had a profound influence on me and constitute a strong motive to learn as much as possible about their interrelationships.

Before choosing this subject of study, I must admit I had other subjects that were appealing to me, but all of them failed at the stage of recruitment. Recruitment was the most challenging part of this research. For example, the subjects 'How people who suffer from borderline personality disorder experience the workplace: An interpretative phenomenological analysis study' also had a sentimental value for me as I have a dear friend of mine with this diagnosis. I dropped this subject because despite my consistent effort to recruit participants I was unsuccessful.

Hence, this is how I concluded to the present subject of study. My curiosity, my family and the practical side of things led me to be passionately occupied with this study, enjoy the whole journey and learn as much as possible. I genuinely believe that this subject will help me become a better counselling psychologist. I gave this project all my attention, even though struggling with recruitment initially made me willing to switch to another topic once again. I am convinced now that my findings will 'bear fruit' and assist many people and clinicians with helping others.

3.Links Between Sections

Gambling and the workplace were common central themes that link all the parts together. The research part of the project aims at examining the experiences of individuals of the workplace. The individual participants of the research considered themselves having difficulties with gambling. Additionally, the case study focuses on the application of an integrative therapeutic approach for the treatment of an individual, who was facing challenges due to gambling in a clinic that specialised in the treatment of Gambling Disorder and gambling difficulties and who was also unemployed. Finally, the publishable article is for the journal of 'Mental Health and Social Inclusion' and it is a shorter publishable version of the research focusing on the stigma and shame that the individuals who faced difficulties with gambling experienced in the workplace.

Finally, Cognitive Behavioural Therapy (CBT) was also another observable theme across the sections of the portfolio as the case study demonstrates the usage of third wave CBT models and their integration for the treatment of the individual client. CBT was included in the theoretical framework that influenced the research project and thus the publishable article.

4.Reflexions on Professional Realisations

Even though Cognitive Behavioural Therapy was one of the themes of this project and usually adopts a positivist stance, I believe that the interviews with the participants, the client case study and focusing the research on individual experiences demonstrate to the reader the humanistic principles that inform counselling psychology throughout the portfolio. The lived experiences of gambling and the workplace of the participants were at the epicentre of the research.

This project assisted in my development as a future Counselling Psychologist and helped me clarify the ethical boundaries of the profession. I practised being open, which is also a stance aligned with Counselling Psychology values. Another realisation that I made was the importance of patience. Everyone and everything need their time, while I also made friends with the conviction that 'Everything happens for a reason'. On another note, I believe that as individuals and professionals, we always have to change, develop and adapt in a never-ending

process of continuous growth. My experiences throughout the completion of this project, the challenges and intricacies and my commitment to come to a successful end helped me develop a growth mindset, be proactive and persevering.

The process was of importance, as I believed that it enhanced my reflective capabilities. Furthermore, I gained significant knowledge about gambling difficulties and also, I understood in depth how individuals with gambling difficulties experience the workplace. Also, I consider that this knowledge will contribute to my effectiveness as a therapist. Apart, from the development, it was a brilliant and inspiring process, but it was not without its challenges. Finally, these challenges are the ones that helped me go the extra mile and develop as a professional and a person further.

Section 1: The Research Study

Title: How People Who Experience Problems with Gambling Experience the Workplace: An Interpretative Phenomenological Analysis Study

Abstract

This study explores how individuals who consider themselves to be having difficulties with gambling experienced their respective workplaces. Clinical implications emerging from this examination of the participants' experiences are proposed to potentially utilise the workplace as a point of reference to inform or enhance current treatment methods.

Six adult individuals participated, having work experience and considering themselves having currently or formerly difficulties with gambling while being employed for at least six months. Data were collected in a semi-structured interview with each participant during which they shared their experiences.

The Interpretative Phenomenological Analysis was used to explore the data, focusing on the participants' experiences. Following data transcription and analysis, three superordinate themes with several respective subordinate themes emerged. The first superordinate theme, termed as 'The Bluff', examines gambling-related experiences of the participants. The second superordinate theme termed as 'The Three S's' explores how the participants experienced certain private emotions or phenomena. The final superordinate theme termed as 'The Experience of Self' explores how the participants experienced themselves in the workplace as a result of their gambling.

1.0 Introduction and Scope of The Literature Review

This part critically reviews existing literature on the difficulties people with mental health disorders and especially people with gambling difficulties face in their workplace. This review aims at identifying research gaps, regarding people with gambling difficulties and the problems emerging from this habit, concerning their employment.

The first part of the review provides background information and explains the implications of the study conducted. A discussion of various topics follows, introducing the reader to the history of gambling as a phenomenon, followed by the history of gambling as a disorder. Then the topics Employment and Addiction, Gambling and Employment and Workplace Interventions are discussed. The rationale for the importance of the research is provided followed by a brief reflection explaining the reasons why this topic is chosen for investigation. For the critical literature review, research articles were used with no time constraints and retrieved from various search engines, such as Google Scholar, Psychinfo, ProQuest, Emerald Insight and the City University of London Library. The themes investigated were Mental Health Disorders and Employment, Problem Gambling and Employment, and Interventions that integrate employment.

1.1 Introduction

Gambling is a phenomenon that traces back thousands of years (McMillen, 1996). For instance, there is evidence of gambling in the Chinese culture that goes as far back as four thousand years. Gambling takes many forms influenced by societal factors. McMillen (1996) distinguishes gambling from other social risk-taking behaviours and refers to this behaviour as staking money or an object of financial value on the uncertain outcome of a future event.

The Diagnostic and Statistical Manual of Mental Health Disorders (DSM) included pathological gambling as a disorder without testing (Reily & Smith, 2013). In the fourth edition of the DSM, Pathological Gambling was revisited, reflecting its similarity to substance abuse.

In the fifth edition of the DSM, gambling was included in the category termed as Substance-Related and Addictive Disorders and renamed as Gambling Disorder (Reilly & Smith, 2013). According to the diagnostic criteria, individuals with Gambling Disorder demonstrate a problematic gambling behaviour that is persistent as well as recurrent and leads individuals to experience clinically significant impairment or distress in their daily lives. Furthermore, symptoms include the need to practice gambling with higher amounts of money to achieve the desired excitement or in the Gambling slang 'Buzz'. Individuals with Gambling Disorder appear to be restless or irritable when attempting to mediate or stop their gambling behaviour completely. Those with this presentation have made repeated unsuccessful efforts in the past to reduce their gambling behaviours or cease them.

Moreover, individuals with this difficulty are often preoccupied with gambling and use it to alleviate distress. Another behaviour of this presentation is to 'chase down loses', as this condition is known in the Gambling slang. Furthermore, individuals usually lie or conceal the extent of their gambling involvement. People with gambling disorder usually have jeopardized or lost significant relationships or jobs or other opportunities because of their gambling addiction. Finally, these individuals rely on others as a source of funds to deal with difficult financial situations caused by their gambling behaviour.

Besides the DSM – V suggestions, there is a line that separates what is considered to be Gambling Disorder and Recreational Gambling. Fong, Reid and Pahrani (2012) suggested that an individual who gambles recreationally may be engaging in such behaviour for many hours many times per week. They provide an example of an individual who is a retired physician aged 60 and engages with poker five times a week for five hours each session. On the other hand, in their example, the individual who is a recreational gambler does not increase the limits of his gambling for an extended period and does not stay in the casino for more time than planned. Furthermore, the physician being a recreational gambler ensures that he has time for his family as well as physical exercise, he is financially comfortable, and his family are aware of his gambling-related activity. Thus, comparing the researchers' suggestions of recreational gambling with the recommendations of the DSM- V, there are observable differences. As mentioned above, a difference is that the family of the recreational gambler are aware of the individual's engagement with gambling. In addition, his relationship with his family is not jeopardised.

Since the study involves the workplace as well, it should be mentioned that according to the Universal Declaration of Human Rights, Article 23.1, individuals are entitled to work in conditions of freedom, dignity and security. Besides, people should not be socially excluded and should be given equal opportunities to work, be productive and provide for their families and societies. According to the World Health Organization (2000), people who have mental health issues should not be deprived of these rights. On the other hand, their chances of being offered employment are limited. This situation could be attributed to the mental health issues they have, which are one of the three leading causes of disability (Gabriel & Liimatainen, 2000).

Furthermore, the International Labour Organisation (ILO) sets labour standards, develops policies and devises programs, whose aim is to promote decent work for all people. According to ILO's principles, Article 159 (1983) on the vocational rehabilitation and employment of disabled persons (including people considered to have mental health disorders), workers with

disabilities should be offered equal treatment regarding employment. According to the convention, a disabled person is a person who has lower prospects of securing and retaining jobs and advancing in suitable employment, due to mental or physical impairment (Gabriel & Liimatainen, 2000). However, mental ill-health persists as a barrier to paid employment. As reported in the factsheet of the Confederation N.H.S (2009), 2.3 million people having a mental health issue are on benefits or out of work in the UK.

Furthermore, mental health issues are the primary reason to claim health-related benefits, accounting for approximately 42 percent of the claims (Confederation N.H.S, 2009). Also, only a mere 7.9 percent of adults (aged 18-69), who receive secondary mental health services, “and on the Care Programme Approach, were known to be in paid employment at the time of their last review” (Confederation, N.H.S, 2009, p.3). A primary reason for such a low paid employment rate is the reluctance of employers to offer employment to people with mental health issues, with only 25 percent offering employment. In comparison, 62 percent would offer employment to people with a physical condition (Confederation, N.H.S, 2009). More recent data show that the rate of common mental health problems among people aged 16-64 and in full-time employment was 14.1 percent regarding, compared to 28.8 percent of unemployed or looking for a job and 33.1 percent among the economically inactive (Edwards, Goldie, Elliott, Breedvelt, Chakkalackal & Foye, 2016). Bipolar disorder incidents, for example, account for 3.9 percent among the unemployed and 4.3 percent among the economically inactive, as opposed to only 1.9 percent among the employed (Edwards et al., 2016). These data prove that tackling mental health-related unemployment must be at the top of the agenda for all stakeholders involved in mental health care in the UK. Further measures preventing stigmatization should be implemented, providing help to people with mental health issues and enabling them to seek and retain employment.

The prevalence of Gambling Disorder in the UK population is less than 1 percent (Conolly, Davies, Fuller, Heinze & Wardel, 2018). In the United States, it was suggested that 0.5 percent of the population had received a diagnosis of Gambling Disorder. Moreover, it has been recommended that genetic, as well as environmental factors, contribute to the development of Gambling Disorder. Furthermore, some gamblers often go without recognition as well as treatment within various clinical settings. Gambling Disorder sometimes shares comorbidity with other psychiatric disorders. There are behavioural interventions employed for the treatment of Gambling Disorder such as Cognitive Behavioural Therapy and motivational interviewing as well as Gamblers Anonymous groups. There does not exist a formal indication of pharmacological therapy (Potenza, Balodis, Derevensky, Grant, Petry, Verdejo – Garcia & Yip, 2019). On the other hand, in a study conducted by Ward, Smith & Bowden – Jones (2018)

examining the potential application of an opioid antagonist named naltrexone it was suggested that the medication has the potential of reducing the cravings of the individuals who used it.

In a study examining the social factors of gambling Orford, Wardle, Griffiths & Sproston (2010) suggested that drawing data from the 2007 gambling prevalence study in the UK it was suggested that those whose work involves having a routine or a semi routine had the largest number of gamblers. Moreover, it was suggested that the small employers and those classified as own account workers as well as those involved in lower supervisory and technical occupational groups that scored the highest in Problem Gambling questionnaires. Additionally, Conolly et al. (2018) in the gambling prevalence study of the United Kingdom that was conducted in 2016 it was reported that according to the economic activity the most individuals who gamble can be observed among those who are in employment or training. On another note, the researchers suggested that the most Problem Gamblers were observed amongst those who were unemployed. Binde and Romild (2020) conducted a study investigating the risk of problem gambling among different professional groups. The study investigated the Swedish population and suggested that building and workers of construction who did not have a specific stable workplace scored the highest. The second highest elevated levels among different gambling variables were scored by vehicle drives and those conducting monotonous manual indoor work.

Furthermore, the number of people in the U.K. with gambling difficulties has been found to be on the increase since there is a higher availability in the opportunities that individuals have to gamble (Griffiths, 2009). To deal with Problem Gamblers, the United Kingdom government spends as much as 1.2 billion pounds annually. Welfare, as well as employment departments, alone, carry a high proportion of this cost, amounting to 40 – 160 million pounds a year (CNWL NHS, 2019). Studies, such as the one conducted by Hing, Russell, Gainsbury & Nuske (2016), suggested that gamblers faced a significant amount of public stigma, which in turn had negative effects on their mental health and the use of healthcare services. Some of these difficulties that gamblers experienced are also present in the workplace, with gamblers running the risk of being fired once their employers become aware of their gambling struggles (Thompson & Schwer, 2005). Thus, it would still be essential to see how gamblers experience their workplaces and the extent to which they come across the difficulties that Hing et al. (2016) and Schwer et al. (2003) suggested. It would also be essential to explore the extent to which these difficulties either promote or demote gambling activities in the workplace. Today, with the availability and easy access to online gambling, the opportunities for exposure to gambling in the workplace have significantly increased. Gamblers can connect online, through their computers, smartphones, or tablets during their breaks as well as during working hours.

For example, Griffiths (2009) maintained that there is a significant number of people gambling using the internet in the workplace.

As a consequence, their performance may be notably affected by increased levels of stress, reduced concentration on their duties and possible criminal behaviours, like stealing money to pay for gambling or cover their debts. Specifically, Leonard (2014) suggested that problem gamblers who often struggle with debt as well as financial problems run an increased risk of stealing and embezzling in the workplace. He also purported that individuals with this presentation often tend to be more distracted as well as stressed at work leading to productivity as well as safety issues. Moreover, he claimed that employers in the U.S. often fire people who struggle with gambling. Furthermore, a qualitative study by Binde (2016) examined gambling-related embezzlement in the workplace. In their research, they concluded that the criminology theory of white-collar crime usefully complemented psychological theories of problem gambling. Their conclusions accentuated that the use of environmental and psychological factors is crucial for understanding the progression of severe gambling problems. Hing and Breen (2006) investigated gaming venue employees to identify factors that encourage or discourage gambling among them. Some of the groups of factors found are the frequent interaction with gamblers, frequent exposure to gambling, influence of fellow employees, influence of management, workplace stress, working shift work, and frequent exposure to gambling marketing and promotions. On the other hand, they found a significant number of reasons why gambling among gaming venue staff is discouraged. This research was conducted more than ten years ago, and it did not examine the broad experience of problem gamblers in the workplace. Also, it was conducted in a country other than the United Kingdom, in particular, Australia. On another note, Ciccarelli, Griffiths, Nigro & Consenza (2017) conducted research and suggested that individuals who gamble pathologically reported that they considered gambling to alleviate negative emotional states such as stress. Additionally, in another study conducted by Maniaci, Goudriaan, Cannizzaro & van Holst in 2018 it was suggested that individuals found to be pathological gamblers for more prolonged periods were considered to have decreased levels of cortisol, which is a substance that is known to affect stress (Sherman & Mehta, 2020). This finding according to the literature suggests that the participants have decreased levels of cortisol due to their prolonged exposure which altered their system (Maniaci et al., 2018)

Apart from the aforementioned difficulties, it was suggested by Estevez, Jauregui, Lopez, Lopez – Gonzalez & Griffiths in 2019 that gambling also has consequences for the families of the individuals who gamble. In their study, the researchers concluded that the family members of individuals diagnosed with problem gambling demonstrated higher levels of anxiety and

depression, difficulties in emotion regulation and maladaptive coping strategies, when compared with control groups. Finally, they suggested the need for the family members of the individuals who suffer from Gambling Disorder to be included in the protocols for treatment.

The DSM – V suggests that Gambling Disorder is a mental health problem. Furthermore, the Confederation, N.H.S (2011) suggested that mental health disorders are a barrier to paid employment as according to 2009 figures, 2.3 million people in the United Kingdom, are unemployed and on benefits. In addition to the costs incurred to the government, a drawback is that the labour market is losing talented individuals as often employees with this presentation can be extremely valuable to an organisation since they tend to be highly analytical as well as dynamic, traits which are considered to be highly prized by employers in today's dynamic and highly complex business environment. To this end, Leonard (2014) suggests that the treatment offered to these individuals can be highly effective, and the recovery rate is 75 percent.

The workplace plays an important role in health promotion (MacDonald, Csiernik, Durand, Rylett & Wild, 2006). Assisting individuals with gambling difficulties so that they will not be excluded from the workplace should involve a joint collaboration between both treatment specialists and managers. By examining the experience of these individuals in the UK workplace, current treatments could be enhanced by utilising the workplace as a means of support and rehabilitation since gamblers who are in employment spend a majority of their time working. While therapists can provide treatment, managers have to be skilled at assisting peers who have difficulties with gambling through proper training in tailored interventions and familiarity with policy implementation. A recent qualitative study by Rafi, Ivanova, Rozental, Lindfors & Carlbring (2019) examined the experiences of managers and HR officers with a Workplace Oriented Problem Gambling Prevention Program. The study found that participants were insufficiently trained and unfamiliar with available interventions or policies. Hence, there is a need to provide expert guidance to managers and HR officers so that they are better informed about the difficulties gamblers face in the workplace and take appropriate measures with the assistance of therapists or other specialists dealing with addictive behaviours.

The proposed study provides useful insights into these difficulties as they are experienced in the contemporary workplace from the side of the gamblers. This, in turn, will lead to an enrichment of current knowledge and enhancement of therapeutic practice to foster more effective integration of gamblers in the workplace, increase retention rates and ensure talented individuals with this presentation will be able to apply their talents, reaching high-performance

standards. More implications and relevance to counselling psychology are presented in the relevant section of the review.

The project was not restricted only to participants who had received a diagnosis of Gambling Disorder. Individuals who considered themselves as having difficulties with gambling participated. The findings will thus help readers to get a better and broader 'picture' of some common struggles that these individuals face.

1.2 Employment and Addiction

According to the fifth edition of the DSM, if an individual meets certain criteria, they can be considered to receive a diagnosis of Gambling Disorder and this is included in the addictive disorders group. Hence, discussing available research about employment and addiction in the literature review was thought to be relevant. Considering addiction and employment, in an article about addiction and recovery, Radcliffe and Tompkins (2016) suggested that it is widely recognised by clinicians that for individuals to overcome their addiction it is required for them to have access to a range of support services and treatment. They also suggested that by providing individuals who struggle with substances with opportunities of continued harm – reduction focused employment, development of individual and community level recovery capital was observed. This could have similar implications for gambling addiction. On the other hand, gambling may not be considered by some people as harmful as substance abuse. Furthermore, they suggested that there are limited opportunities for those individuals and that stigma is making it difficult for them to pursue mainstream employment. This study also underpins the importance for the public to be informed about addiction struggles in an attempt to reduce the stigma and allow for the individuals who struggle with addiction to have the opportunity for a mainstream work helping them both financially, socially and mentally. On the other hand, one could argue that the finance gained from this employment should be controlled, considering that gambling and substance abuse require funds by individuals to engage in such behaviours. Controlling one's finances is an essential step recommended in the treatment of gambling addiction (Blaszczynski (2010). Having access to money can enhance an individual's ability to gamble. Furthermore, it is argued that individuals who struggle with addiction are usually trapped in work that is low paid, part-time and sporadic, providing little in terms of information and resources needed to develop social capital in diverse social groups (Putnam, 2000). On the other hand, this research was conducted many years ago, so it would be essential to view what opportunities individuals with this presentation have

nowadays. Finally, Radcliffe and Tompkins (2016) further argue that it is of utmost importance for clinicians rather than focusing on individuals to recover to focus on facilitating the development of abstinence using social relationships and to give to the individuals who struggle opportunities in social clubs, religious organisations and more rewarding work. On the other hand, the researchers did not propose a combination of both. It has been established that current treatments are effective and offering work to individuals with addictions should be offered.

In contrast, Richardson & Epp (2016) suggest that the link between substance misuse and work is quite complex and that returning to work could be a 'Double-Edged Sword' as it can affect recovering individuals either positively or negatively. They further suggest that because substance misuse disorders can be complex, it is essential that the interventions aiming at assisting these individuals include a broader framework within their returning to work or sustaining their employment. Such an enhancement to treatment could either be abstinence or non – abstinence focused and the goal for any occupational or vocational rehabilitative interventions should focus on the improved functionality of the individuals and based on the service users' individual capacity, motivation as well as opportunity. Here it could be argued that if there is no need for an abstinence-focused approach, it is not clarified how individuals can have improved functionality if they do not achieve abstinence. For example, Ersöğütçü & Karakaş (2016) suggested that individuals with substance abuse have medium social functioning. On the other hand, Bolek, Yargic & Ekinci (2016) suggested that abstinence is not the only goal for drug addiction treatment modalities and innovative modalities focus on the improvement of the physical and mental health as well as social and personal functionality.

Henderson, Hawke, Chaim, & Network (2017) investigated youth individuals who are not currently in employment or training or attending an education programme in Canada. Their results suggested that individuals with these circumstances are at a higher risk of having psychosocial and financial difficulties. Furthermore, they concluded that these individuals, even though they have gender differences, are more likely to endorse crime behaviours and substance misuse. From this research, it could be potentially insinuated that individuals who are not employed are more likely to develop an addiction than those who are in employment.

Furthermore, Penzenstadler, Khazaal and Fleury (2020) argued that new models for community – based outreach treatment have been developed for the recovery of individuals who struggle with Substance Use Disorders (SUD). They also signify the importance of apart from offering an evidence-based clinical treatment to these individuals the service providers need to have the ability to adapt to those individuals' needs. An illustrative example of this

which offers good and successful results are the 'supported employment' programmes which have been included in the models of mental health services. Having established the importance of employment in addictions as a preventing method and as an enhancement of current treatments, it is important to further explore the literature regarding gambling and employment.

1.3 Gambling and Employment

After underpinning the importance of employment in addictions, it would be of importance to see how gambling affects employment and vice versa. Nower (2003) suggested that commercial gaming is considered to be an industry that is thriving and increasing in popularity. Unfortunately, this development is also associated with increased opportunities for individuals to gamble in the workplace via the internet. The researcher also suggested that money is the most compelling force that drives individuals with this presentation, and it is not a surprise that the first drawback that gamblers face is financial loss. Nower (2003) further suggested that the prevalence of gambling disorder by comparing several populations ranges between 1 – 5 percent of the population. It is most common for youth, people in treatment and prisoners to adopt a gambling disorder. The rates of individuals with a diagnosis could be skewed due to the stigma that surrounds gambling. Hing et al. (2016) further suggested that apart from the financial difficulties gamblers do commonly experience public stigma and stereotyping. Furthermore, they suggested that Problem Gamblers have to cope by hiding their gambling difficulty due to the social rejection that they experience. A lot of these difficulties as well it is argued by Schwer, Thompson & Nakamuro (2003) that they are experienced by gamblers in the workplace, and they also face the uncertainty that depending on their employer it is common for gamblers to be fired from their workplaces when they disclose their difficulty.

Additionally, there are further difficulties as suggested by the literature that individuals who classify themselves as gamblers face, but they are not only restricted to their workplace experience. For instance, Mckee and colleagues (2005) suggested that unemployed individuals had lower physical as well as psychological well-being compared to other employed individuals. Additionally, Jauregui, Estevez & Urbiola in 2016 conducted research examining several difficulties that individuals termed as Problem Gamblers faced. Such difficulties were found to be emotion regulation, having comorbid difficulties with substances such as drug and alcohol abuse as well as demonstrating anxious and depressive symptomatology. Additionally, Churchill & Farrell (2018) reported a positive association between gambling and depression. Another difficulty would be stigma. Miller & Thomas in

2017 conducted a research and found gambling to be associated with stereotyping as well as stigma. Furthermore, research conducted by Zhang, Yang, Guo, Cheok, Wong & Kandasami in 2018 and by Brown & Russel (2020) in Singapore and Australia suggest that individuals who had a gambling episode or their gambling was considered to be problematic considered stigma to be a barrier in seeking treatment. The study conducted by Miller & Thomas (2017) further suggested that the negative stereotypes which usually have been found to be criticising the personal responsibility of individuals who gamble led them to experience shame. In another study conducted by Schlagintweit, Thompson, Goldstein & Stewart (2017) it was suggested that there is a strong positive association between gambling and shame. A qualitative study conducted many years ago by Downs & Woolrich (2010) examined the impact that gambling as well as having a debt had on family and the work-life of individuals. Their results suggested that individuals classified as problem gamblers reported behaving with more aggression and were more short-tempered. More recently, Maniaci, Picone, Holst, Bolloni, Scardina & Cannizzaro in 2017 suggested that individuals who had a diagnosis of pathological gambling demonstrated having higher levels of anger. Some of the difficulties presented above might not necessarily be directly influence the experience of gamblers in the workplace.

In addition, one must consider that due to technological advancements, gambling is easier to access by just utilising a smartphone (Bonnaire, 2012). For example, Griffiths (2009) suggested that there is a significant number of people gambling using the internet in the workplace. But on the other hand, it might not be feasible for some individuals to gamble while at work due to the nature of their profession. Considering the nature of some occupations some common features might be shared like for example investment banking and gambling. Moreover, Leonard (2014) suggested that problem gamblers often are at an increased risk of being fired. This could also add to the stress they face as they might have to completely hide their difficulties in the workplace. Leonard further suggested that gamblers have a tendency to be distracted as well as stressed at work. This affects their productivity and may put their safety at risk in several occupations where safety is of utmost concern.

Additionally, Bonnaire (2012) suggested that with the advances in technology there are added ways that an individual has access to gambling, such as smartphones, internet and interactive television. He suggests that these new means have contributed to the swift increase in internet gambling activity. On the other hand, he suggested that a few empirical studies have examined the psychosocial effects of gambling utilising the internet. He further argued that there is insufficient evidence to suggest that internet gambling is more likely to contribute to increased gambling activity than other methods. However, there are numerous factors that make internet

gambling a seductive and addictive endeavour. Specifically, Bonnaire (2012) identified ten factors, namely anonymity, convenience, escape, dissociation/immersion, accessibility, event frequency, interactivity, disinhibition, simulation, and associability. Furthermore, he suggested that internet environments provide their users with short – term comfort, excitement and/or distraction. He further argued that this ease of access has brought gambling not only in the home environment but also in the workplace environment. A major concern is that these factors, along with the increase in the opportunities that an individual has to gamble could be the causality of the potential rise in the number of individuals with gambling addiction. Thus, gambling is highly affected by the technological advances that have been made in the past years. Bonnaire (2012) further suggested that online poker is one of the fastest-growing forms of online gambling and also that poker gamers are more likely than other individuals to play more frequently and for longer periods of time. In addition, he suggested that online poker might be producing other types of individual problem gamblers who are most affected by the loss of time rather than loss of money. Finally, the author urges for safeguards to be put in place for vulnerable populations, such as adolescents and the development of social responsibility tools. On the other hand, this research was conducted several years ago and did not take into consideration the technological applications available today. These applications can help individuals who want to restrict themselves from gambling to take the necessary measures to achieve abstinence.

Guttentag, Harrigan, & Smith (2012) suggested that individuals involved in the gambling industry show high rates of problem gambling. The authors investigated casino employees and their gambling behaviours in Ontario. Their results suggested that the gambling behaviours of the employees were observed to be related to several workplace influences such as exposure to gambling as well as employment variables such as length of employment. In addition, the rates of the employees reporting having problem gambling were over than three thirds greater compared to the general population. These gambling rates were explained by employees who experienced an increase in their gambling after starting employment and employees who were drawn to their jobs because of their prior gambling involvement. Finally, the authors suggested that the findings underpin the unique factors that were associated with problem gambling between gambling industry employees.

Hing and Breen (2006) by investigating gaming venue employees suggested various factors that encourage or discourage gambling among them. The frequent interaction with gamblers, frequent exposure to gambling, influence of fellow employees, influence of management, workplace stress, working shift work, frequent exposure to gambling marketing and promotions were some of those factors. In contrast, they suggested a significant number of

reasons why gambling among gaming venue staff is discouraged. The research was conducted more than ten years ago in another country and did not examine the general experience of problem gamblers in the workplace. Further research, therefore, could be possible to examine gambling behaviours among gaming venue employees in the United Kingdom. Furthermore, Hing & Gainsbury (2013) in a study conducted among individuals employed in the gambling workforce investigated the protective as well as the risk factors that these employees face in their industries. The researchers suggested that it is essential for the gambling industry to have a stable and healthy workforce, but individuals who work in the gambling industry have very high problem gambling rates. Their study identified five risk factors, namely workplace motivators, influence of colleagues, workplace triggers, limited social economic opportunities, and familiarity and interest in gambling. On the other hand, only two protective factors were identified, which were 'exposure to gambling losses' and 'problems and influence of colleagues.' Furthermore, encouragement to address a gambling problem was also observed to provide a protective factor for the workforce while the opposite was observed by discouragement to address such a problem. This research was essential as it could propose healthier practices to protect individuals who are employed in gaming venues. On the other hand, the two studies presented above involved individuals who were employed in the gambling industry. These individuals have gambling stimuli daily when they are engaging in their workplace, so the findings suggested that this nature of work increased their gambling behaviours instead of having a positive effect on them. It would be essential to examine other individuals who are employed in other professions or even professionals who are employed in venues which are considered by the norm to be similar to gambling.

Wong & Lam (2013) suggested that various occupational stressors for gaming venue employees were identified to be responsible for causing these employees to be at a higher risk of developing gambling problems. The researchers investigated the work stress and gambling among casino employees in Macau China. Their results revealed seven types of workplace stressors, while most participants were aware of the hazards of work stress on their health. The participants further experienced physical as well as psychological strains despite the various methods that they employed to alleviate their job stress. Many participants suggested that in order to 'unwind' they resorted to gambling behaviour after their shifts. Indeed, this research identifies that job stress is one of the most prominent risks that lead gaming venue employees to engage with gambling behaviours. However, since the research presented above is about people employed in the gambling industry alone, more research is needed to confirm that job stress is a predictor of gambling behaviour by investigating other occupations with added stressors.

LaPlante, Gray, LaBrie, Kleschinsky and Shaffer (2012) suggested that individuals who are employed in gaming venues have added personal health risk. This is due to their direct contact with individual customers who are engaging in various risk activities like gambling. The researchers argued about the importance of preparing these employees to cope with those risks as being a public health imperative. In a research conducted, the investigators suggested that by having the employees take part in the 'Play Responsibly' initiative, they observed that their responsible gambling concepts increased. Furthermore, this initiative was also observed to be assisting in the formulation of new knowledge but was not so effective at correcting the pre-training beliefs of the participants. Additionally, this study was conducted among gaming venue employees therefore it only assisted in expanding the knowledge of this specific occupational group. It would be essential to figure what else could be done to motivate those individuals or aid them to sustain their abstinence. This could be achieved by having for example either policies of no gambling staff or enhancing the wages of gaming venue workers so that they abstain from engaging in gambling behaviours.

It is suggested that gambling is a worldwide phenomenon and that for the majority of individuals engaging in such behaviour it causes minor or no problems. On the other hand, it is suggested that there are others whose gambling behaviours have become a pathology. Problem gambling is more prevalent among men, people who are considered to have a disability and receiving pensions for this reason, less educated individuals and people who are not married or cohabiting. It is thus suggested that a high level of education as well as being employed are factors that have a protective effect on individuals with problem gambling behaviours. Apart from the protective factors, literature suggests that it would be of importance to research more and understand the factors that attract and maintain men in gambling environments, compared to women, who are not so prone to engage in gambling behaviours (Ekholm, Eiberg, Davidsen, Holst, Larsen & Juel, 2014). This research is more extensive in scope than the previous research studies discussed since it involved individuals from various professions, underpinning the importance of education and employment against gambling in a broader work context.

Leonard (2014) suggested that problem gamblers who often struggle with debt as well as financial problems are at an increased risk of thieving and embezzling in the workplace. Similarly, Binde (2016) suggested that it is typical for people who experience severe gambling problems to spend all their available money on gambling. To ensure funds to gamble, they may turn to borrowing, often from loan sharks, selling personal property or finding other means. He also suggested that gamblers are also prone to committing economic crimes. Binde (2016) investigated gambling-related embezzlement in the workplace, an illegal act with

negative effects on both the victim and the perpetrator. His results suggested that gambling-related embezzlement often builds up in a specific characteristic sequence. This sequence is shaped by processes during which the thoughts and emotions of the gambler interact systemically with the monetary losses that were caused by gambling and the opportunity that exists in the workplaces to embezzle money. He further suggested that the white-collar criminological theory was useful in complementing psychological theories of problem gambling. Thus, this research might imply that severe problem gamblers who are working are more prone to engage in white-collar crime further underpinning the negative impact that the workplace has on individuals engaging with gambling. During the same year, Binde conducted another investigation about responding and preventing gambling embezzlement in the workplace. He suggested that problem gambling can cause individuals to experience psychiatric symptoms as well as psychosomatic ones and lead to increased inefficiency to work and absenteeism. His results suggested that important preventative measures to respond to gambling harm in the workplace could be policies relating to substance use and gambling, raising awareness of problem gambling, paying attention to gambling-related harm, having control functions in the workplace and having appropriate responses to harmful gambling as well as rehabilitation. Finally, he concluded that it is important for workplaces to have a greater role in the universal as well as selective and indicated prevention of problem gambling.

In 2017, Binde suggested that it was well established that individuals considered to have severe gambling difficulties can be led to committing economic crimes. During this year he conducted another study investigating embezzlement by problem gamblers in the workplace. His results suggested that embezzlement by problem gamblers can occur mainly in all branches of the economy, where employees have access to money. He further suggested that the amounts of embezzled money can be extremely while embezzlement may last several years. A variance across professional categories was observed with bank managers being at the top as they were observed to have embezzled larger amounts of money when compared to others and for longer periods. Bank managers were also the hardest to detect. Finally, he suggested that even though the Swedish authorities reported approximately have one case of embezzlement per month, this number is likely to be at least ten times higher. Thus, it could be argued that more professions prone to embezzlement have to be identified so for companies and society to take measures to reduce its impact.

1.4 Workplace Interventions

In addition to understanding the impact mental health disorders have on the workplace, providing evidence of the benefits of integrating employment is within the scope of this review. For example, Wallace et al. (1999) designed a module aimed to teach fundamental workplace skills to persons with serious mental illness, after identifying a limitation in a previous study which used Integrated Placement Support (IPS). IPS provided individuals with mental health disorders with more hours of work and higher income. On the other hand, it was identified that outcomes mirrored the inaccuracies and that the accuracy of the implementation of the services had a great variation. From this, it could be inferred that the implementation of the IPS was not consistent, suggesting that there might be other factors that could have altered the results. Furthermore, supported employment showed no advantage over traditional vocational rehabilitation services in helping the workers to retain their jobs. Thus, the researchers designed a module, and in a pilot study, they suggested that the individuals who participated managed to keep their jobs for the full nine months of the course and that was the longest employed period for four out of five participants. Other participants who were unemployed before the study managed to secure employment and kept their jobs for several months (follow – up period of the study). They also suggested that the second group had fewer days of employment and average number of hours worked. It must be noted that this study was conducted almost two decades ago. Furthermore, it was not targeted to a specific participant pool who suffer from a specific mental health disorder. Thus, it would be essential to conduct the study counterbalancing for these limitations. Moreover, Drake and his colleagues (1999) evaluated the effectiveness of two different vocational services, which were aimed at assisting people with mental health disorders. The first was IPS, in which inside the mental health centre the participants could get support from employment specialists and the second was Enhanced Vocational Rehabilitation (EVR), in which rehabilitation agencies offered stepwise vocational services. It was suggested that participants in the IPS program had more opportunities for being competitively employed and secure at least twenty hours of employment per week in competitive jobs. On the other hand, the EVR group had higher levels of participation in sheltered employment. The improvements in the total earnings of the participants, job satisfaction as well as the non – vocational outcomes were similar for the two groups. Finally, even though the study was conducted many years ago and the IPS was more effective compared to other interventions and the article highlights the fact that with the right help people who suffer from mental health disorders can secure employment and enjoy its benefits while being satisfied. Furthermore, Kitchener et al. (2004) investigated whether mental health first aid training could benefit the mental health literacy of the participants. It was suggested that the participants improved both their literacy and their own mental health. However, this study did not examine a specific population considered to have a specific mental health disorder. Black et al. (2009) conducted an exploratory study for BPD and their findings

suggested that gender and employment can have an influence on symptom change. This study and its large sample size highlight the importance of employment for people with BPD as the former can influence the symptoms of the disorder. Since there are benefits, further research needs to be conducted on the problems that people with addiction face in their employment or why they are unemployed.

Modini, Tan, Brinchmann, Wang, Killackey, Glozier, & Harvey (2016) investigated the effectiveness of IPS across different international settings and economic conditions for individuals with a diagnosis of severe mental illness. Their results suggested that IPS was deemed as an effective intervention across a variety of settings and economic conditions and as an intervention it was found to be more than twice as likely to lead to competitive employment in comparison with traditional vocational rehabilitation.

In addition, Silverman, Holtyn & Morrison (2016) argue about the potential therapeutic utility that employment might have in treating drug addiction. The authors suggested that in this intervention individuals with a history of drug addiction are hired and paid to work. Furthermore, the users of these interventions are required to provide urine samples regularly to promote their abstinence from the various substances that they might be using for recreational purposes. This allows them access to a workplace and gives them the maximum amount of pay they can get. The authors also suggested that the literature has proven that those interventions are effective in promoting and maintaining abstinence from various substances such as cocaine or alcohol. These interventions have also proven to be effective for former drug users and their adherence to anti – addiction medication, such as naltrexone. The authors also suggested that three models are viable to be used when maintaining an employment-based reinforcement when treating individuals with addictions. The first one is a social business model, the second a cooperative employer model and the third a wage supplement model. In the social business model, for example, individuals during the first phase of the intervention are hired to work in a social workplace and in order for them to maintain this employment they need to adhere in their abstinence. A similar thing was implemented in the cooperating community intervention but with community employers. In the wage supplement model again, individuals who maintain abstinence are given wage supplements as the name of the intervention suggests, subject to them maintaining community employment. It would be essential to see what effects these interventions would have in gambling addiction as the authors underpin the effectiveness of these interventions in the treatment of drug addiction.

In the same year, Walton and Hall (2016) conducted a literature review in an attempt to investigate the effects of employment interventions on the treatment outcomes of individuals. The researchers suggested that employment for many individuals who wish to recover from their addiction is an important goal. They also suggested that employment has protective factors against relapse for individuals in addiction recovery. They also underpin that the literature is mostly concerned with the effects of employment on individuals who suffer from mental illness and little is known about the effects on substance use disorders. Their research signified a positive relationship between employment interventions and treatment outcomes for individuals who try to abstain from using substances. They also underpinned with the research the importance of employment as a measure of relapse prevention and enhancing current treatment possibilities and addiction treatment settings.

In addition, Fiabane, Ferraris, Ranalletti, Conti, Giorgi, Ottonello & Argentero (2016) conducted a follow up exploratory study to investigate the results of social intervention and employment treatments in young individuals with substance dependence. The researchers argued that substance dependence problems are considered to be a relevant issue for a considerable proportion of the working population. They furthermore suggested that substance dependence difficulties have a huge health as well as occupational cost. However, not much research is concerned with the return to work after addiction rehabilitation. At a follow – up a large proportion of the sample was still employed and reported positive perceptions regarding the psychosocial work environment and about the mental as well as physical health and the stabilisation of the change. The researchers also identified work ability, work engagement and absence of desire as the three factors that influence the job satisfaction of these individuals. The results further suggested that many of them after some years of their rehabilitation program still sustained their employment and reported positive levels of individual and organisational well – being. Finally, the researchers suggested that work was not perceived as an added stressor but as a behaviour that serves individuals with its protective factors in the overall health, personal identity and social integration of the population mentioned above.

In another study Sinakhone, Hunter & Jason (2017) investigated the employment experiences of women in recovery from substance abuse. The researchers suggested that in general women living in metropolitan areas experience lower rates of employment and employment participation compared to men. Similarly, even though women face challenges in the labour market, things are significantly harder for women who have a history of substance abuse in obtaining stable and viable employment opportunities. They further argue that no research so far has explored the employment experiences of women in recovery from substance use

addiction. The researchers concluded that employment was observed to be important to women, who undergo substance abuse recovery, not only as a means of financial support for them but also as a priority in life priority. Furthermore, they observed that employment scheduling practices, low – level position and lack of employment support had an impact on their recovery. Finally, their findings underpinned the importance of employment support services along with employer education and more flexible policies for women, who are currently in recovery.

Sherba, Coxe, Gersper & Linley (2018) in a qualitative research with over 800 participants investigated the experiences of individuals accessing substance abuse treatment and the employment services offered by them. Furthermore, they included in their investigation the needs that treatment agencies have and the barriers as well as the perspectives of both the facilitators and users of their employment services. The researchers suggested that employment can be a challenge for individuals with substance abuse disorders. Only a quarter of the participants suggested that they are currently employed and more than a half of those registering themselves as unemployed suggested that their unemployment status was a consequence of their substance use. Moreover, the researchers highlighted that treatment providers suggested several barriers when implementing employment services, such as the need for an array of resources, an increased funding for supportive employment programs and staff appropriate employment services falling outside of their practice scope. Finally, they underpinned the importance of having an informed policy and for treatment services to invest their resources in providing employment within substance abuse treatment settings.

Moreover, Rafi, Ivanova, Rozental, Lindfors & Carlbring (2019) suggested that employment and especially the workplace can play a crucial role in health promotion. This is due to the ability of the workplace to reach out to many individuals, if we consider the amount of time people spend in their workplaces and the amount of individuals employed. For this reason, Workplace Health Promotion Programmes were implemented to cover a variety of issues. It is also suggested that they are essential tools and they promote good public health. It is further suggested that research around Workplace Health Promotion Programmes has mainly focused on specific interventions as well as factors relating to the implementation of this type of intervention in general. The implementation mainly focuses on the opinions of both the employer and the employee as well as the needs that they have regarding the Workplace Health Promotion Programmes. On the other hand, the effectiveness of this type of interventions is bearing mixed results depended upon the program implemented and the target that they are trying to meet. With the quality of those interventions receiving criticism and their effectiveness varying, there are also unresolved issues as to what makes them effective as

well as how employees themselves perceive them. The most important role to successfully implement those interventions rests with the middle management of firms, who are the link between employees and senior management and as such need more support, knowledge, and information on this issue. Although these interventions have been widely endorsed, there is no evidence of implementation in targeting gambling difficulties and preventing them. Rafi and his colleagues (2019) tried to close this 'gap' in literature. In a qualitative research they conducted, they examined the experiences of individuals taking part in a program for problem gambling prevention in the workplace. The participants were managers as well as HR officers. The results suggested that the participants in general appreciated the presentation of cases and facts and the general knowledge provided by these interventions. On the other hand, the participants suggested that they would benefit more from tailored interventions, more support in the policy implementation and follow- ups on the results. This recent research did not look at the direct experiences of the individuals who have difficulties with gambling at all but only those trained to implement these prevention strategies. But the research examined one prevention programme and raised effective questions as to what could be done when the individual is already facing difficulties with gambling and they are currently under employment. Having already established the importance of employment and its benefits on mental health disorders and addictions, it would be important to conduct research viewing the employment experiences of individuals who face difficulties with gambling and are or were employed. Finally, the focus should not only be on gaming venue employees but also on individuals who face difficulties with gambling and are occupied professionally in various workplaces.

1.5 Relevance to Counselling Psychology & Rationale

Research examining the experiences of individuals who struggle with gambling and are currently in employment is relevant to counselling psychology and also crucial to be conducted for various direct and indirect reasons. One reason is the fact that counselling psychologists are already involved in the treatment of Problem Gambling and the prevention of such difficulty. This qualitative research will provide them with more information as no research has yet to directly examine the experiences of gamblers who are occupied professionally apart from individuals who are employed in the gambling venues.

Furthermore, it is known that many individuals who gamble are often at a higher risk of being fired from the workplace and also individuals considered to have mental health disorders currently face high unemployment rates as presented in the literature review. The research conducted by examining the experiences of the gamblers themselves will enrich the knowledge of counsellors about the struggles facing individuals who gamble in the workplace.

In turn, counsellors can advise employers accordingly, raising their awareness of the extent and sources of the problem and thus mitigate their reluctance to provide employment or their preference to fire individuals who gamble rather than support them. In addition, it will better equip the counsellors to assist their gambler clients to seek employment and or retain professional occupation by tackling and educating them for the common problems that individuals who gamble face in the workplace beforehand or currently in employment. Counsellors serve their clients by providing them with a service. So, a research investigating the experiences of individuals who gamble and are employed could help counsellors to be better informed as to what struggles are gamblers facing, how they feel and exactly what help they need. This will help counsellors act more swiftly in treatment and target specific aspects of employment that will assist individuals with gambling difficulties faster thus cutting down the costs that already exist. Finally, as suggested in the literature review, there are heavy costs associated with the treatment of gambling, which could also be even heavier considering that several gamblers are unemployed.

Thus, the aforementioned have the potential of boosting the effectiveness of counselling treatments. Counsellors will also aid them to be more informed when consulting HR officers and employers to form better psychologically informed policies and procedures that will prevent gambling in the workplace or assist individuals who gamble already and are employed as the data of this research are directly drawn from the individuals who have suffered due to their gambling difficulties. While conducting this literature review it seems that there was minimal research examining the experiences of individuals who gamble and are employed in the UK and research has mostly focused on gaming venue employees.

Buchanan, McMullin, Baxley & Weinstock (2020) suggested that gambling alters the experience of stress that individuals have. For example, their study suggested that gambling can be used as a means to avoid stress, it can act as a stressor and that it alters the reaction that individuals have on stress. Counselling psychologists around the globe are highly concerned with the 'fight' against stress, as it has many implications on both the physical and mental health of individuals. Consequently, any information available to clinicians about the workplace stressors of individuals who are engaging in gambling behaviours will be of significant help in their attempt to educate their clients to cope with those stressors and thus alleviating their stress.

As suggested in the literature review, individuals who gamble are at a higher risk of thieving and embezzling money from their workplace committing what is termed as 'white collar crimes'. The process that leads individuals to act in such ways is building up slowly due to the

difficulties they face. By examining the experiences and most importantly the effect of gambling on employees, clinicians will be able to assist with the prevention of such unlawful acts that impact on both employees and employers, through the implementation of effective treatment of gamblers in the workplace.

Furthermore, as suggested by Hing et al. (2016) gamblers usually experience stigma and stereotyping. This could be considered an added stressor for them and may make gamblers more hesitant in disclosing their difficulties or even asking for help in the workplace. On the other hand, this was suggested more than 20 years ago. So, by examining the experiences of gamblers we will be able to see if stigma around gambling might still exist in the workplace and also clinicians will also be in a better place to consult individuals around stigma and spread the knowledge around gambling raising the awareness of counselling psychology, employers and managers in the UK about gambling.

1.6 Theoretical Background

Several attempts have been made to conceptualise theoretically gambling. Among these, Cognitive Behavioural Therapy (CBT) ranks among the most prominent methods of therapy that have been established empirically for gambling difficulties (Kouimtsidis, Reynolds, Drummond, Davis & Tarrier, 2007). CBT is also considered one of the most effective treatment methods against problematic gambling (Delfabbro & King, 2015). The Cognitive aspect, drawing from the work of depression and anxiety, stems from the proposition that the various erroneous and dysfunctional beliefs are the ones that preserve the problematic behaviour. Furthermore, it is believed commonly in addiction and CBT that these beliefs are 'irrational' in their nature. In problematic gambling behaviour it is supported that the individuals with these behaviours are intrinsically irrational themselves if they continue to engage in gambling. There is a body of evidence from studies supporting the fact that problem gamblers make many statements that indicate their false understanding of the various gambling games. Furthermore, CBT theorists suggest that individuals who gamble have many biases, such as an illusion of controlling the outcome (Delfabbro & King, 2015). Looking at the behavioural aspect of things Griffiths (1990), behaviourists suggested that pathological gambling is a maladaptive learned behaviour. Furthermore, it is suggested in behavioural theory that if such a behaviour is learned it can also be unlearned. This project has taken into account both behavioural and cognitive theories of gambling as they are the most modern theoretical conceptualisations of problematic gambling behaviour.

Furthermore, psychoanalytic theories have considered excessive gambling to be a pathological condition. It was suggested that very few psychoanalytic theorists have distinguished between what is considered to be normal or social gambling and pathological gambling. As a consequence, most theorists of this school of thought viewed any manifestations of gambling in the same way as a 'neurotic' behaviour. It was considered by psychoanalysts that gambling is a mental disease that is caused by the individual having intense feelings of inferiority and inadequacy. In psychoanalytic theory it is also assumed that individuals who gamble are often unaware of their true motivations to engage in such behaviours. In addition, another assumption of psychoanalytic theorists and the Freudian School is that the passion that some individuals have for gambling stems from an archaic sense that humans have of guilt. Moreover, other assumptions of psychoanalysis are that sexual desires and Oedipal structures are present even in childhood and that all psychological illnesses and neuroses are directly linked to a childhood trauma that an individual had experienced. This is how gamblers are conceptualised by psychoanalytic theories. More recently, psychodynamic theories suggested that the individual gambler is not aware of the gambling process as it takes place unconsciously (Aasved, 2002). Thus, it could be surmised that problem gamblers have an unknown desire to lose and that gambling serves as a relieve to psychic guilt (Griffiths,1990). Finally, those psychoanalytic suggestions were presented many years ago and psychoanalysis has given birth to psychodynamic therapy that even though draws from its predecessor it focuses on the fact that gambling is an unconscious process.

Physiological theories of gambling underpin that subjective excitement and arousal on a physiological level serve as motivating factors. Furthermore, differences between individuals in their autonomic/cortical arousability while interacting with various irregular schedules of reinforcement have been proposed to be important factors that can determine the pathogenesis of problematic gambling engagement. Additionally, physiological theorists observed in individuals with problem gamblers mood disturbances as well as cross addictions and gambling serving as a protective factor (Defence) against depression as well as anxiety. This is important as the role of endorphins has been suggested to be linked with mood disturbances and the psychiatric addictive process. It was suggested that this is how gambling is maintained, through the euphorogenic and or reward-transmitting properties of endorphins. These suggestions are in accordance with the principles of operant as well as classical conditioning (Blaszczynski, Winter, & McConaghy,1986). So, it could be argued that according to the physiological perspective there is an inherent predisposition of biological nature to individuals who gamble (Griffiths, 1990). On the other hand, these suggestions by Blaszczynski, Winter & McConaghy (1986) about the physiological conceptualisation of

gambling were posed many years ago and while researching they came into the conclusion that different kinds of gamblers do exist. A drawback of these implications is that technology has advanced tremendously since then and replicating the same research today could bear different results.

Another theory about the conceptualisation of gambling is the one of personality theorists. They insinuated that there might be a 'gambling personality'. This is a trait-cluster and leads individuals to be habitual or have compulsions to satisfy for risk (Griffiths, 1990). Kim & Grant (2001) attempted to compare Obsessive Compulsive Disorder Traits of Personality and Problem Gambling ones. Their results concluded that individuals with Problem Gambling Disorder showed greater novelty seeking, impulsiveness and extravagance, less anticipatory worry, fear of uncertainty, and harm avoidance. Their results signify that the personality traits of gamblers are different to those of OCD individuals and control groups in the study.

One more therapeutic conceptualisation of gambling is that one suggested by Peseschkian (2012) one of the pioneers of Positive Psychotherapy also known as Differentiation Analysis. He suggested that addictions including gambling have a function for the individuals who engage with them. He theorised that individuals possess four escape areas namely Contact (relationships), Achievement (Work), Fantasy and Body/senses. Peseschkian (2012) suggested that gambling as an addiction serves the individual engaging with it as it provides a necessary escape into Fantasy.

Finally, it seems that it is difficult for only one theory to cover all the aspects of gambling and as Griffiths (1990) suggested the best attempts are those who adopt an eclectic approach. Thus, in this project several theories were considered when conceptualising gambling.

Thus, the aim of the present research is to investigate how individuals who consider themselves as having difficulties with gambling experience their respective workplaces. This research question will potentially provide more essential information and answer further questions such as how the individuals who consider themselves as having difficulties with gambling experience their relationships with their colleagues. Finally, another aim is to investigate through the participants' suggestions what potential interventions could be utilised in an attempt to potentially utilise the workplace as a means or supplement of current treatment methods.

1.7 Reflexivity

Reviewing the literature, I observed that most research about gambling is treating gambling as a disorder and in most research conducted only individuals receiving a diagnosis of Gambling Disorder are considered. As suggested above in the preface considering that the gambling theme is of value to me due to my family history it made me sad to consider that my grandfather could have been one of the individuals who evidently had a difficulty with gambling but never received a diagnosis of gambling disorder. This last statement took a lot of time and reflection for me to understand and be able to admit. Also limited amount of research is concerned with the impact of gambling in the workplace. Also, the workplace interventions that exist to aid gamblers or prevent gambling are limited as well.

While conducting this literature review, I felt that there is much more to learn about the topics of gambling as well as the workplace. I had a few preoccupations that existed due to my practicing in the specialist clinic such as that all of the individuals who would be gambling would face difficulties in the workplace. This was counterbalanced by engaging in this learning process of the literature review and also in supervision. My supervisor reminded me about my assumptions so that I can keep them at 'bay'. Furthermore, this literature review in a sense 'opened my eyes' as I found myself not considering in depth the holistic assistance that individuals with gambling difficulties might need. As a volunteer trainee counselling psychologist, I had only a few sessions to assist individuals to achieve abstinence from gambling and depending on the individual there just might not have been enough time to aid him/her with any other difficulties that might exist, such as stress.

Furthermore, I must admit that this process of conducting the literature review even though enlightening it was also a daunting process and an anxiety-provoking one. I was always afraid that I might not find enough literature on gambling and how I will be able to produce a literature review that is of good quality and quantity. My fear was only met with surprise as at the end I had to lower significantly the word count of my literature review and keep it more focused than it was. I have to say that this was not a good tactic to be so focused on the word count and not the content. On the other hand, as I was writing this piece of the project my passion to develop and learn more about gambling has only augmented.

I felt that there was a gap for me to consider and gain more knowledge on. Thus, reviewing the literature, having an interest in gambling and in the workplace and all of the above led me to consider conducting a research with the aforementioned aims, with a goal in viewing the experiences of individuals using a qualitative methodology. Thus, I concluded in conducting a study aiming to examine how individuals who experience difficulties with gambling experience the workplace.

2.0 Methodology

2.1 Purpose of the Study and Research Question

The purpose of this Interpretative Phenomenological Analysis (IPA) study was to generate further knowledge regarding the experiences of people who experience problems with gambling) in the workplace. A further aim was to contribute towards understanding the employability challenges facing people with gambling difficulties and gather information that could lead to an intervention. The following research questions were addressed:

How do people who experience difficulties with gambling experience the workplace?

Considering that the workplace is a social setting, how do they interact with other colleagues and what are the difficulties, if any, they experience?

2.2 Rationale for the Qualitative Study

Qualitative research is concerned with gathering, examining, illustrating and interpreting data (Smith, Flowers & Larkin, 2009 as seen in Williamson, 2013). With small participant pools, it draws data from the personal and social experiences of participants; hence it focuses on the meaning of them. Compared to quantitative research, which is more focused on causal relationships, qualitative research is all about the quality of the experience (Pietkiewicz & Smith, 2014 as seen in Williamson, 2013). It focuses on producing rich descriptive accounts of researched phenomena, as opposed to quantitative research which is more concerned with how many times, how often or the size of associations between two entities (Pietkiewicz & Smith, 2014). Qualitative research takes into consideration the interpretations of both the participant and the researcher, while analysing a phenomenon.

A qualitative research was deemed appropriate since it places emphasis on 'discovery' rather than 'confirmation' (Nelson & Quintana, 2005), also allowing for a holistic approach to be implemented when gathering and analysing data. Smith et al (2009) suggested that semi - structured qualitative interviews give the opportunity to the participants to explore their experiences while at the same time honouring their status as having the experiential expertise for the phenomenon explored. As also stated, qualitative methods allow for participants and

the researcher to discover new underlying meanings, which give way for new categories to emerge as well (Willig, 2008).

Concluding, this methodology allowed for a rich analysis and exploration of how the participants experienced themselves in the workplace as well as a deeper understanding of these.

2.3 Interpretative Phenomenological Analysis

IPA was created in the mid 1990s by Jonathan Smith. As a method of research, it utilises small sample sizes and a very detailed analysis of transcripts from interviews and as Smith and Osborn (2008) argue it is different to quantitative methodology, which examines large groups or populations.

IPA is a qualitative approach focusing on the psychological aspect of how people make sense of their experiences. It is concerned with making a meaning at the level of the person in context (Smith et al., 2009). So, the focus is on what an experience means to a participant and how significant it is for them. This ideographic analysis commitment implies that the focus is on the person rather than the general.

Another method of analysis considered was Thematic Analysis (TA) used in identifying, analysing several themes and then reporting them within a data set (Braun & Clarke, 2006). Since researchers often interpret various aspects of a research topic, TA is suitable for its flexibility. Compared to IPA, there is a limited variability in how it is applied. Braun and Clarke (2006) argue that TA has been criticised for the lack of clear and concise guidelines, while it is not bound to a specific theoretical framework. IPA includes guidelines and is bound to a phenomenological epistemology, whose main focus is on giving priority to the participants' subjective experience. IPA also attempts to understand these experiences in great detail so that the phenomenon in question can be understood. Another disadvantage of TA compared to IPA is that it has limited power of interpretation when it is not used within an existing theoretical framework. It was deemed appropriate to use an existing framework so that interpretations can be made. Furthermore, TA does not allow the researcher to interpret language use of functionality of talk (Braun & Clarke, 2006). Finally, since the topic is about people's subjective experiences it was deemed appropriate to use IPA.

Another significant reason to use IPA is that its philosophy and rationale are close to the ones that Counselling Psychologists follow. Both concentrate on the people's subjective experiences and try to interpret meaning. Hence, IPA methodology was used to investigate a topic that can aid the work of Counselling Psychologists and participants facing difficulties with gambling and how this might affect their experience of the workplace.

2.4 Theoretical Underpinnings & Epistemological Standpoint

IPA uses a phenomenological viewpoint, whereby understanding the world by looking into how people experience it in certain contexts. Introduced by Husserl, it is a philosophical perspective concerned with the study of experience. Phenomenologists have different emphases and interests, such as thinking about the experience of being human, in many contexts and aspects, and also how different things matter to us and which of these constitute our universe (Smith et al., 2009). Furthermore, important is the commitment to think what our experiences of the world are and understand them. For psychologists, it is of great importance to provide them with a rich source of ideas about how to examine as well as comprehend lived experience (Smith et al., 2009).

Phenomenology is concerned with how surrounding objects are subjectively experienced by a particular person, while it is not concerned with measurements as well as objective observation. Reality is clinging on the viewpoint of the person living it. Same things or objects might mean something different for various individuals. Phenomenology allows for multiple realities swaying away from the positivist view that a single reality can be discovered. To understand the phenomena investigated, the investigator must gain insight in the subjective experiences of the participants (Shinebourne, 2011).

To have a phenomenological perspective, there is a need to disconnect from the activity at hand and attend to the taken for granted experience of it. To be phenomenological we need to self-consciously reflect on any of what we see, think, remember as well as wish. Smith et al (2009) refer to the suggestion of Husserl who argued that what is experienced by individuals on their consciousness is what constitutes a phenomenological inquiry. An experience or consciousness of something is always an experience or consciousness in phenomenological terms. The something of which we are conscious (object) may have been prompted by a real object that exists in the world or through an individual's act of memory as well as imagination (Smith et al., 2009).

Another phenomenological perspective is that the person is embodied in the world in a particular context which includes culture, society and history (Shinebourne, 2011). Larkin et al (2006) suggest that the person is an individual in a certain context, who is included in the world and linked with certain phenomena. They further suggest that the focus of IPA is on how the individual relates to and engages with the latter. Data are considered to be the perceptions of participants of the investigated phenomena. This is what the researcher needs to engage with (Willig, 2008).

Phenomenological inquiry is an interpretative process. According to Heidegger, to describe a phenomenon, it has to be interpreted. Hermeneutics is a prerequisite to phenomenology. The process of revealing and making manifest what may potentially be hidden is a question of interpretation. Shinebourne (2011) refers to Heidegger's suggestion of the concept of logos. In his point of view, logos is discourse which is a human capacity allowing people to communicate with each other. It could be said that it is already contextualised in being in the world. Every experience is already brought into context by previous experience. Therefore, it is not presuppositionless (Shinebourne, 2011).

Researchers have to understand and make sense of the participants' experiences. This is termed double hermeneutics as the participant tries to make sense of their own experience and the researcher is trying to make sense of how the participant made sense of it (Smith, 2004). The access for the researcher to the participants' experiences is the participants' accounts of these and the researchers' own fore – conception. This is a challenge, as they need to understand how the latter may influence the research. This could potentially be a setback to interpretation (Shinebourne, 2011). These fore-conceptions may not be recognisable when analysing the transcripts or the researcher might only know them. The latter are constantly revised and changing during interpretation (Shinebourne, 2011). From the above, it may be said that this process is dynamic and iterative. In the hermeneutic circle, there is an interplay between the different parts and the whole as well as between the interpreter and the object that is being interpreted.

Another theoretical underpinning of IPA is idiography. Idiographic knowledge is termed as knowledge about unique events, entities and trends (Shinebourne, 2011). The unit of the study is constituted by the individual's engagement with the phenomena for the researchers. There is a clear link here with the case – studies and idiographic psychology. It is suggested by Smith (2004) that a detailed analysis of a single case can be justified when an individual is able to present a rich or compelling one. These details can also shed light to a shared commonality as they also give us significant aspects of a shared humanity. This idiographic commitment of

IPA focuses on an examination of particular instances in detail, in single or group case studies. There is a need to examine carefully each case and move and discover similarities and potential differences across a variety of cases. Finally, detailed accounts of patterns of meaning have to be produced as well as reflections on this shared experience.

According to Campbell et al (1987), epistemology relates to how people see the world and provides philosophical foundations that facilitate decisions about the competence and legitimacy of knowledge (Chesnay, 2014). IPA aims to examine the subjective experiences of people, hence the suitability of its use in this study.

The critical realist position was adopted. It suggests that the different experiences and events are real to the human beings despite the social constructions that they consist of. It further suggests that it is not possible to examine or understand this reality factually or see it as a singularity (Archer et al., 2013). Willig (2001) suggested that it can be of use for someone to assume what they think about the new information. This assumption has to be considered in a spectrum containing two ends. On one, there is a need for realism and on the other relativism. IPA has an interpretative aspect, and interpretation is often affected by the biases of an individual since it is almost impossible for a human being to be completely unbiased. Insight from this study was gained by how each one of the six participants experienced their own reality. According to Willig (2008), critical realism is in contrast to direct realism and naïve. Critical realism suggests that life is complex and requires interpretation because it cannot be known directly. Finally, as per Eatough and Smith (2006) suggestion, there is neither a clear nor mediated window into the life experiences of participants. So, to enable understanding of their experiences, there is a need for interpretation.

This study aimed to explore how participants who experience difficulties with gambling subjectively experience work. How these participants experience gambling in a context of work includes wider social as well as psychological and cultural life factors. These experiences are significant outside of the interviews that took place and extend to their whole work environment. Considering the above, it is highly unlikely to get an objectively valid picture of the participants. Their understandings could be perceived as interpretations of their experiences, which is in line with Crastnopol (2006), who suggested that it is not possible to speak of what ourselves are and it is only possible to describe how we experience ourselves.

2.5 Epistemological Reflections

The critical realist position was adopted as it aligns with my beliefs and personality. Through my studies in Counselling Psychology, I concluded that everyone experiences their reality differently. Many of my clients have had the same or similar experiences but they all lived in their own reality and gave a different input on them and how they were influenced by them. Furthermore, while in placement and attempting to assist individuals with gambling difficulties, I understood that even though there were commonalities each gambler experienced gambling quite differently with some of my clients utilizing gambling as an escape from work.

To know this reality and achieve knowledge, we need to attempt to interpret it. When in therapy, someone can have the perspective of an outsider upon their lived experiences and give their input. It is almost like stepping back from those experiences. In therapy the interpretation is a beautiful 'dance' that two perceptions clash together, and true exploration can be achieved.

During my studies and when doing this research, I was greatly influenced by the different modalities I studied, which in a personal sense create different ways to view the world of individuals. I was greatly influenced by psychodynamic psychotherapy, which, commonly to IPA, attempts to have an interpretative nature even though the therapeutic modality adopts a specific psychodynamic lens. In contrast, IPA aims to bracket external lenses and understand the phenomenon from the participant point of view and what meaning they make about this phenomenon. The different modalities suggest that each person experiences their reality differently. This can happen even if the clients have similar experiences, like gambling. Finally, it is impossible when attempting this interpretation to be completely unbiased. Each person holds the 'luggage' of their experiences and their memories. This notion of critical realism gave me the freedom that I need as a person. I value freedom a lot and as well as being given the opportunity to interact with this research and acknowledge my biases and experiences, without trying to leave my self 'outside' of the research.

2.6 Sampling and Participants

Six people, five males and one female who volunteered and suggested that they face, or they faced gambling difficulties previously, were recruited for the study. The selection of the sample met the IPA guidelines concerning examination of the subjective experiences of people, hence the inclusion of participants who perceived themselves as having gambling difficulties, which could be part of their reality or subjective experience. This raised questions regarding homogeneity of the sample as there might be differences when comparing individuals who hold a diagnosis of Gambling Disorder and other individuals who think that they have

difficulties with gambling; however, IPA is not concerned with comparisons but with subjective experiences (Smith et al., 2009). If someone perceives himself/herself as having gambling difficulties and believes that this defines them it is part of their experience and this could have an impact on how they experience the workplace.

Table 1
Participant Demographics and Approximate Time Spent Gambling and Abstinence Time

Pseudonym	Gender	Age	Occupation (Current or Previous)	Time Spent Gambling (Approx. Years)	Time in Remission (Approx. Years)
1. Jane	Female	Forties	Project Manager	15	5
2. Tom	Male	Thirties	Recruiter	10	5
3. John	Male	Mid Forties	Various Sectors	15	10
4. Mark	Male	Fifties	Truck Driver	20	10
5. Jim	Male	Fifties	Finance	20	15
6. Pete	Male	Mid Thirties	Various Sectors	10	5

Also, IPA is considered to be flexible in terms of the number of participants included in a study. Smith et al (2009) argue that to achieve a similarity and or difference in the data development across a sample, a significant number of participants is required allowing for a more in-depth analysis of each case. The inclusion of six participants meets the criteria set by them allowing for the collection of enough data and information.

Participants with at least six months of work experience were included since it was assumed that in this minimum timeframe, they would have gathered sufficient experiences to share in order to fulfil the needs of this study. These six months did not necessarily need to be in continuous employment but also across different ones with a gap in between as long as in total they had worked for six months. It did not matter if individuals were currently employed as long as they had worked in the past for six months and wished to share their experiences

of the workplace. Individuals who faced other mental health issues were not excluded from the study apart from individuals who were at risk towards themselves or others. All of the individuals were based in the UK and were required to have access to a stable internet connection, and an online communication platform such as Zoom and Google Meet. The participants did have the option to attend an interview in person if they wished.

The participants were asked to perform a telephone screening interview. In this interview researcher and participant engaged in a telephone meeting where one got to know the other. The participants were asked directly if they consider themselves to be at risk to ensure their safety during the interview. They were also encouraged to ask any questions they had and the researcher to the best of his ability attempted to answer their queries. Finally, in this screening interview the researcher and the participant agreed about the time of the interview and the platform that would be used since all the participants asked for the interviews to be conducted online. This allowed for participants from different parts of the United Kingdom to participate without having to travel, while it also made a few participants feel more comfortable as they were interviewed in their private spaces.

2.7 Recruitment

Participants were recruited through social media, such as Twitter and Redditt. The recruitment advert for the research was published in the aforementioned social media. The participants registered their interest to take part in the study either by messaging or emailing the researcher. All the participants received via email the participant information sheet and had the chance to discuss it with the researcher. The aims of the research were explained thoroughly, and no deception was used. Also, any other queries by the participants were addressed.

2.8 Procedure

For data gathering, six semi – structured interviews were conducted by the researcher. All interviews were conducted online using platforms with video – call capabilities. The participants received a £20 compensation for their time spent in the study in Amazon Vouchers. The time was arranged according to the convenience of both parties. Smith and Osborn (2008) suggest that semi–structured interviews give the opportunity to participants to express themselves freely since the interview format can be altered, thus allowing for the exploration of new or unanticipated issues. All participants were asked to give their informed

consent prior to the actual interview. The information and the consent form for the study were sent to the participants via email to complete by themselves and send them back to the researcher.

In addition to the pre-interview screening for any distress described previously, demographics questions were asked about gender, age and time spent working. If their distress levels were high or they had concerns about their safety, appropriate measures were taken such as suggesting to them to contact their GPs or to admit themselves to the A&E. No participant suggested any current risk.

The interview schedule included several open-ended questions. The questions were designed to allow space for exploration of the participants' experiences of their workplace and to make them feel as free as possible to express themselves and give the researcher sufficient number of experiences. The participants were asked about what motivated them to take part in the study, about their experience of gambling, how they conceptualise gambling, how they experience the workplace as being gamblers, about their relationship with their colleagues, about a typical day at work when being a gambler, how has gambling gotten in the way of their career progression, if gambling had any positive effects and finally what they would ask if they were in the position of the researcher. Finally, a pilot interview was conducted in an attempt to see the flow of the questions and reflect about their quality.

Upon receiving responses, the researcher asked subsequent questions so that mutual exploration could be achieved. Participants gave various responses to the set questions, allowing the researcher to have a more active role in the interviews. On average, the interviews lasted fifty to sixty minutes each. After each interview, ten to fifteen minutes were needed for each participant for debrief.

All collected data in the audio recordings and transcripts were kept securely in a password protected computer.

2.9 Ethical Considerations

The study obtained ethical approval from City, University of London Ethical Committee. For the purposes of this research, the British Psychological Society Code of Ethics and Conduct (2009 & 2017) as well as the Health Care Profession Council Guidance on Conduct and Ethics for Students (2016) and British Psychological Society Code of Human Research Ethics 2nd Edition (2014) were considered.

As stated above, the contributors were asked for their informed consent to take part and to be audio recorded during the interview. The aims, process and scope of the research were explained beforehand. No deception was needed. Additionally, all the participants were advised of their right to stop the interview if they wanted for any reason. Both parties had an electronic copy of the consent form. Every material relevant to the research was kept locked in a password protected computer and the participants were informed on when the research data would be destroyed.

Interviews were recorded using an audio device suggested by City, University of London that provides minimum encryption. Only one file of each audio recording was kept in the password protected computer.

To ensure the anonymity of the participants all of them were assigned unique Pseudonym and all materials for the research were filed under this. If they wished to withdraw from the process at any point they were allowed to do so by informing the researcher.

To ensure the participants' safety they were screened for distress levels before the interview. In the telephone screening interview, they were asked directly if they considered themselves to be at risk. If risk would be uncovered participants could not take part in the study and were prompted to contact their GPs or their therapeutic service. This was set in place to counterbalance for any risks and ensure that the clients are not severely distressed prior to the interview. However, this measure was not required for any of the participants who took part in the study. Furthermore, in case of any risk at the time of the interview the researcher provided the participants with contact numbers to the Samaritans and advised them to contact their GP. Finally, all the participants were informed that in case of distress they can withdraw from the study without being penalised in any way.

Concluding, participants were debriefed when the interview ended and given the contact specifics of the researcher and supervisor in case they wished to ask further questions. At the debrief, they were given the opportunity to state if they held any objections towards continuing to participate or if they held any objections for the research that might have emerged during the interviews.

2.10 Analytical Strategy

One of the most important guidelines are set by Smith et al (2009) on how to analyse the transcripts using IPA. The general guideline given is to move from a rich data set to interpretation. Below are the steps followed, as set by Smith et al (2009).

As suggested, it is important for the researcher to familiarise himself with the data so that he is engaging to what is being brought in the interviews. After transcribing the data, the researcher listened to the interviews again paying attention to the tone of voice and how everything was said. The emerging thoughts of the researcher were transferred to a diary and reflected upon. This took place for each individual interview both after its conduction and transcription.

Afterwards, each transcript was explored and read three times, each time focusing on a different aspect. The three aspects examined were linguistic, conceptual and descriptive (Smith et al., 2009).

The focus of the linguistic aspect was on creating comments on how the participants use the language to describe their experiences. These comments assisted the researcher to inform the newly surfaced understandings of the experience that the participants had. They also formed a plethora of questions to explore again by looking back into the transcript.

The conceptual aspect aimed at identifying interesting aspects of the accounts and questions that emerged from the lived experiences of the participants. The focus was on how the researcher conceptualised the experiences reported by the participants.

The final aspect examined was the descriptive, through which the researcher's knowledge and influence were left aside and with this to highlight what matters for the participants.

Next, the aim was to identify the several themes that emerged. These themes were the focus of analysis and significant effort was put at this stage to bear in mind the whole text. Here, the researcher hoped to bring something new at the end of the analysis and give 'life' to the hermeneutic circle. At this stage again, the researcher had in mind his personal biases and influences. When a rich number of themes emerged connections across the various themes were sought. One of the processes that the researcher enjoyed was to get all the themes and try to see them from afar (Smith et al., 2009). With this process they were grouped into different chunks. Then, a table containing these groups and where in the transcript they appeared was created. Here supervision was beneficial for the researcher as these were discussed with the supervisor.

It was difficult for the researcher to control his own assumptions, expectations as well as presumptions for the bracketing that took place. This was counterbalanced by keeping a reflective diary, which was discussed regularly with the supervisor. The themes were also a topic of discussion with the supervisor as well as with fellow colleagues. Finally, it was acknowledged that no matter the counterbalance methods described previously, the process involves interpretation and the double hermeneutic notion.

These stages were followed for each transcript individually. When all of them had been analysed, the themes were considered once again; this time by seeing how they reoccur in the different texts (Smith et al., 2009). These larger themes are termed as master themes (Willig, 2001). Finally, a diagram indicating how the different themes were grouped under master themes was constructed.

2.11 Validity/ Evaluation

To validate and evaluate the emergence of the several themes some participants were selected randomly and with their consent they were asked to be contacted again after the themes were analysed. This was put in place to cross-reference the chunks of themes with them to see how close the interpretation of the researcher was with their subjective experiences and for validity and evaluation purposes. Finally, all the themes were discussed thoroughly with the researcher's supervisor and colleagues so that at least the researcher's biases were acknowledged as far as this was possible.

2.12 Methodological Reflexivity

The IPA method fulfils the need for freedom while at the same time it respects the participants' experiences and reality. It was a struggle to keep my biases, wants, needs and predispositions out of this research. This methodology only requires you to acknowledge them and see how they may have an impact on the research while doing your best to keep those biases as I like to say 'silent'.

Apart from the diary that I kept during the whole time the research was taking place, I had regular meetings and discussions with my supervisor who wasn't there as an instructor but as a very valuable guide and always giving me 'food for thought', allowing my personality and reflections to be incorporated in this study. I believe that it is fair to accept the subjective experience of both parties in the process.

After consulting with the diary some notes were made outlining how my thoughts and feelings influenced the whole process. These were discussed both with the supervisor and my personal therapist. I must admit here that I was anxious about making a false interpretation that's were therapy and supervision on the whole project was of assistance as I had my supervisor reminding me of the IPA guidelines and their suggestions and my therapist helping me to cope with the anxiety.

Finally, the analytic process although seemed in the beginning daunting was a joyful process in the end as reading each transcript again and again allowed me to discover something new that I might not have realised before. One of the most important things for me was the respect I had for the participants, and the methodology of choice it feels that it allows for this respect to be demonstrated to the participants as it gives 'voice' to their realities and their experiences.

2.13 Personal Reflexivity

One of the reasons for choosing this research method is that I consider that even though you cannot generalise on the results, it allows for personalities and uniqueness to emerge. It allows for the participants to narrate their subjective experiences and then it provides me the researcher with freedom to interpret those experiences and bracket them into themes. Choosing the right themes was a highly anxiety-provoking task. I wanted to do right by the participants and use their data to the best of my ability so as to assist others through this research as well. They opened their worlds to me, I had to do my best. It was a creative pressure, I believe. The reasons for studying gambling and the workplace can be found in the literature review. This methodology as well provided freedom to the participants as well to focus their experience and at a given time share whatever they believe that it is relevant.

On this point I must admit here that I was scared of conducting a Qualitative research on such a large scale. I was not terrified of conducting the analysis. More specifically I was scared about recruitment. I was in a country foreign to my own, with no connections. Participants were very hard to find. I had a tremendous 'thirst' to conduct research so I can obtain my Doctoral degree. Unfortunately, recruitment was not an enjoyable process for me and was quite daunting as I spent almost one and a half year changing research subjects to ensure that I can have the necessary participants to conduct a study. The first subject that I chose to research had to do with the workplace experiences of individuals who suffered from Borderline Personality Disorder. After failing to recruit participants for a long time I thought of switching my research subject investigating how individuals who suffered from psychosis experienced the workplace. Successfully recruiting participants and conducting a few interviews, I felt there

was something not quite right for me. Unfortunately, I did not have had any experience of working with individuals suffering from psychosis and even though I had found a few participants it was very hard to find more. During this time, I was on placement, in a specialist clinic dedicated to the assistance of individuals who want to achieve abstinence from gambling. Thus, thinking that I will have support in recruiting the participants as well as that I will have a lot of practical experience around gambling treatment by the end of this project I thought of switching one last time concluding on the research topic presented in this portfolio. It later on appeared that gambling research was something that I avoided. Before gaining enough experience in the specialist clinic, it was almost as if I did not consider this subject worth investigating. It is evident today that my work at the clinic quickly changed this thought that I had, leading me to passionately engage in this topic. Even though recruiting and concluding on a research subject was a daunting process, I ended up researching a highly interesting topic that I really enjoyed, which also had a meaning for me and is linked with my family history. Thus, the topic that I was avoiding ended up being something that I want to become a specialist on and assist as many individuals facing gambling difficulties as I can fulfil my goal as a future professional counselling psychologist. The only common aspect of each research subject was the workplace. The workplace was the common ground for each one of the subjects that I attempted to recruit. In the beginning the research subject was Borderline Personality Disorder and the Workplace, then it was the same for Bipolar Disorder, then for Psychosis Spectrum Disorders and finally it concluded in gambling and the workplace. One of the reasons for conducting this research was that it is something that has never been conducted before and many clients of mine complained about the fact that they could not sustain jobs. The topic is of sentimental value to me as already discussed and was addressed with the aim to at least acknowledge my biases. IPA acknowledges that it is useful for biases to be acknowledged and for the impact they have on the research to be explored but these cannot be eradicated.

An acknowledgement here would be the hope that this research will bear some 'fruit' and it is going to aid the population who has difficulties with gambling. After all, this research was dedicated to them, hence was conducted with extreme passion and hope.

As a professional from the beginning of my career, I was fascinated by the complexity and the challenge that people with gambling difficulties are accompanied with. I believe that there are many therapists that do not want to work with this population. Especially in Greece, they are considered a 'hard' population to work with and this assumption was evident by discussions I had with therapists in Greece.

Finally, acknowledging these beliefs and biases it is believed that they had a positive impact on the study as I was motivated to fulfil it, learn more by the subjective experiences of the participants and aid them with regards to their work however possible.

3.0 Analysis Chapter

The presentation of gambling in the workplace is analysed in the context of three inter-related Superordinate Themes emerging from the overarching theme. These themes provide insights into the phenomena experienced by the participants in the workplace due to their gambling difficulty. Emphasis is placed on how the participants perceived their experiences of gambling in their respective workplaces.

The over-arching theme is “How people who experience problems with gambling experience the workplace.” The emerging Superordinate themes are:

1. ‘The Bluff’
2. ‘The three S’s’
3. ‘The Experience of Self’

The diagram below demonstrates the subthemes of each of the three Superordinate themes as well as the relationships among them. Each subtheme will be presented in the analysis of the Superordinate themes.

Figure 1
Superordinate and Subordinate Themes



Finally, at this point it must be noted that several names of the themes have been used in their metaphorical sense in an attempt to encapsulate what the participants were suggesting about their lived experience. For example, the first superordinate theme has been termed 'The Bluff' but it does not investigate the experience of gamblers bluffing. Instead, it investigates the gambling related experiences such as being 'lured' to engage with gambling. Finally, some subthemes have been named using direct quotes of the participants as it was thought that the participants words either literally or metaphorically have the potential to describe what the theme investigated.

3.1 Superordinate Theme One: 'The Bluff'

This Superordinate Theme examines all the gambling-related experiences the participants had and how these might have influenced their experience of their workplace. The first sub-theme, termed 'Another World', as its title suggests, further explores how the participants

experienced themselves, entering a different world while gambling and not being focused on their work. Furthermore, the second subtheme examines how the participants encouraged or discouraged other employees in their workplace to gamble. Finally, the third subtheme, termed 'the ongoing lure of gambling', examines how the participants were 'lured' by gambling. The final sub-theme is about how the participants engaged in concealment behaviours such as lying so as to achieve their goals, like keeping their gambling-related activity a secret. 'The bluff' is considered to be the start as the themes analysed in this superordinate theme are gambling related behaviours or experiences that could potentially lead the participants experience the themes analysed in the other two superordinate themes. To provide an example, an individual who is lying about his gambling could be led to experience stress and shame followed by change in their temperament and even depression.

3.1.1 Subtheme One: 'Another World'

This theme examines the phenomenon of feeling like being in 'another world' as experienced and described by the participants. The participants seemed almost like being oblivious to their surroundings, including the workplace, when gambling. The subtheme examines the experience of participants while physically at work or its indirect impact on their work.

One of the participants, with the pseudonym Jane, working as a project manager described that she was in a state of "trance" when gambling; yet it looks as if she were not in such a state of "trance" when at the workplace. However, her experience of being in and out of this 'trance' seemed to have had an overall impact on her mental state.

As Jane Commented:

Um....I think for me in the workplace, it obviously affected me as the time went on, because I found gambling to put me in a complete and utter trance... You are completely lost in all train of thought in everything you are in that moment and I suppose like one that's on a drug possibly. That's how I could describe like being in a cult. So, I think what happens you're in that trance for so long and particularly with women or whoever, it's a hidden addiction. So, you're jumping from that night-time, or daytime trance to all of a sudden waking up being a mother. And because you're juggling so much, your mind is all over the place. respective of how you on the outside. Yeah, internally, you've spent so many hours almost like a zombie after machine, you know, or in a casino. You know, flashing lights going on the machine, and you realise that it's been like a drug. So, in the morning you have to get up quickly but that

doesn't mean that I was in a trance at work. It meant going from a trance to normality back to a trance, which had an enormous effect eventually my mental state of mind and I felt completely out of it. (Lines 74 – 110)

With the passage of time, Jane seemed to be experiencing the effects of gambling like being in a state of 'trance'. This impactful experience of being in "another world" seemed obvious to Jane. Jane described this feeling of trance as being a member of a cult or a drug addict. She also appears to consider her gambling a 'hidden addiction' she had to keep secret especially from other women and rest of encounters. She even described that she felt like a "zombie". Additionally, it seems that the flashlights from the machines or the ones in the casino are blamed by Jane for contributing to her experience of being in a 'trance'. This state appeared to have caused Jane to be losing her 'train of thought. She seemed to feel the experience of gambling as if she were sedated and when she woke-up she had to assume the role that she was called upon to play at that moment. She cited the example of assuming her role as a mother; she would, in other words, resume the state of what she considered normality. It also looked as if Jane had been experiencing this 'trance feeling' over extended periods of time as she suggested that she had been in that state for 'so long'. Irrespective of how she was on the outside, Jane asserted that she described her internal experience. Particularly, she seemed to experience that this trance would provoke confusion as her mind would 'be all over the place'. It appeared as if Jane would have her world on the pause and then she would have to 'run' to catch up with what was happening. She appeared to recognize that going in and out of this state seemed to have had an impact on her mental state. Jane looked as if she experienced an alteration in her state of mind as she was 'feeling out of it'. Although she looked as if she were not in a trance while at work, she appeared to insinuate that this impacted her mental state in the workplace as she stated that "in the workplace, it obviously affected me".

Tom, working in the recruitment sector, described feeling like being 'on cloud nine' which depended on the outcome, winning or losing, of his gambling habit.

As Tom Commented:

...because I was still beating myself up and still you know, angry about the money I'd lost... where again, if I had gambled the night before, I couldn't do enough of it and I couldn't help people enough and I was on cloud nine. I was. Yeah, I mean, my beach was always dictated by what happened the night before. (Lines 108 – 111)

Tom seemed to be angry for losing money and appeared to adopt a punitive attitude towards himself stating that he “was still beating himself up”. He also acknowledged that he couldn’t engage enough with gambling the night before work as he suggested that “I couldn’t do enough of it”. Because of thinking about his losses, he seemed unable to help his colleagues or co-workers at work the following day as it appears that if he lost, he would be preoccupied by thinking about this outcome, or if he won, he would be on ‘cloud nine’. Dependent on whether he won or lost the night before, he suggested, metaphorically, that he would be like a ‘beach’, implying that he would probably be turbulent if he lost money the day before or calm if he won. It seemed that his gambling habit interfered with his work as it appears that during work no matter the outcome his thinking would be in the outcome of the night before almost like being in the ‘gambling world’ mentally.

John, working across various sectors, experienced his mind not being focused on his work but elsewhere since he was preoccupied with the consequences of his gambling habit instead.

As John Commented:

I suppose because I'm just so wrapped up in inaudible.... so, consumed in how I'm going to deal with things, my mind's preoccupied it is elsewhere. It's not and I'm not in the job. You know, I'm totally just consumed in how I'm going to deal with consequences of my gambling and things like that. So, I'm just yet detached from yeah, I don't know, and things of productivity obviously it has a knock-on effect, a snowball effect, because if I'm not, if my productivity is not good, then it's going to get the attention of the managers and the management and things like that. (Lines 146 – 154)

John seemed to have been experiencing gambling as something that had him ‘wrapped up’. He might be suggesting that he was suffocating as he felt consumed by it. He acknowledged the fact that his mind was ‘somewhere else’, as if he were ‘in another world’. He acknowledged that being “elsewhere” distanced him from his work as he confirmed that it “detached” him, rendering him unable to concentrate on his work. Although physically at work, he confirmed that his mind was not. Instead of being preoccupied with his work, he appeared to be thinking of how he would cope with the consequences of his gambling. This preoccupation was impactful on his work as it rendered him less productive. John seemed to experience a ‘snowball effect’- as if his difficulties at work due to gambling are slowly getting bigger and bigger. He appeared to feel threatened as he attested that his lowered productivity might draw the attention of the management.

Mark, working as a driver, described that when being in the bookmakers he felt like being in a different world.

As Mark Commented:

So, I went to the bookies and sort of yeah and once I went into the bookies, I was in a different world I could switch off from anything that was going on at that time whether it was an argument or stress or.... inaudible... a good day. Lift up to the bookies was a different world we use, like an open door and in some ways if you don't get some, it was just it was just a different world. (Lines 53 – 58)

No matter what Mark would encounter during his day at work, like being a stressful day or whether he was involved in an argument, when crossing the open doors of a bookmaker's premises, he seemed to immediately experience it like being in 'another world'. It appeared as if being in the bookmakers would give the opportunity to Mark to 'switch off' from anything that happened during the day, erasing his thoughts. Finally, it appeared that he likened himself to a machine as he could "switch off", thus eliminating all thoughts, even good ones along with the ones that troubled him.

Concluding, all participants shared the same feeling of being in 'another world' when gambling or as a consequence of gambling when in their respective workplaces. Each one of them described this feeling in different ways, such as being in a state of trance, in the clouds, being wrapped-up or being elsewhere. It appears that this experience of being in 'another world' would prevent participants from focusing at work. Jane, on the other hand, who experienced this 'trance' state only when gambling, attested that alternating from this state of being in 'another world' to 'normality' had an impact on her 'mental state' which consequently affected her work. For some of the participants, the intensity of their feelings seemed to depend also on the outcome of their gambling, specifically whether they gained or lost money while gambling the night before or were 'consumed' thinking about the consequences of their gambling habit. Furthermore, all of the participants, although only explicitly stated by one, seemed to oscillate between this 'alternate world' and reality with different lived experiences for each one of them. Finally, it could be said that this phenomenon of being in 'another' world impacts their work as they become 'detached' from it.

3.1.2 Subordinate Theme Two: 'Encouraging Others to Gamble in The Workplace'

This theme examines the phenomenon of individuals who gamble encouraging in their own way others at work to gamble. Every participant who engaged in this behaviour did so for their own reasons and in different ways.

Tom holding a manager position in his workplace talks about running incentives for others using gambling means.

As Tom Commented:

I don't think I did. I mean like, I would sometimes you know, gambling 'spilled' into my work so, you know I would often run incentives you know for the sales for to the more deals and whatever and if there was any way I could build that into. Gambling then I would you know I type I would run a thing you know for the Grand National or the champion Gold Cup you know if someone who books the mixings fees in that week, I would give them 100 pounds to have it there. So, always encouraging other people you know, exciting new idea in my mind, I was like, well, that would really motivate me I'd love on you know, I'd love a 100 quid of that almost encouraging them to gamble by rewarding them, you know with that, which probably didn't want to date but that was the that was often incentive that I was offering people. (589 – 598)

Tom seems to talk about a behaviour that he engaged with that he did not want as he suggested 'didn't want to date'. It could be said that Tom talking about gambling and work in this manner using a metaphor of a natural phenomenon 'spilled into' my work was like Tom experienced the expansion of his gambling at work as something natural that would happen and could not be stopped. It is as if gambling would invade his work. This expansion would involve Tom running gambling themed incentives to his colleagues to motivate them to perform better at work. He would be on the lookout for organisations taking bets for big sports events so that he could run the gambling event at work. He seems to have used his 'gamblers mind' and what would motivate him and was something that he loved. It was as if Tom would 'read' into his colleagues' minds thinking what they would like to do or how they would be motivated further. Finally, Tom seems to have experienced ambivalent feelings for this new idea that he had as he experienced excitement on the one hand but as suggested in the beginning, he seems to not want to have set up such events for his colleagues.

Jim, also having a senior position, instead of running incentives like Tom would act as a bookmaker for his colleagues in his workplace.

As Jim Commented:

... there were times where my image in the workplace was significantly improved, because I'd suddenly pop up and I'll be the bookie and I would take bets from people in huge amounts, you know, like a, I give people five to two in 50,000 quid on the outcome of a football tournament. You know, and people, you know, in that kind of testosterone environment that actually does it doesn't do your image, any harm at all. I mean, as it turned out, I want I collected the 50,000 because the team didn't win, but and the nature of the nature share all of the beast is that you funnily enough, you taught I mean, we talk about your wins and you don't talk about your losses you know? And so, people knew that I like to bet for sure. And it wasn't because in the in the middle days my reputation of the workplace was so good that just added to my added to the aura around me if you like we said fed my ego. I guess it fed, subconsciously fed my ego. I wasn't really conscious of it, conscious of it at the time, but I can see it, you can see it now. (Lines 294 – 309)

Jim seems to have been enjoying betting. For this reason and having the necessary funds to do so was acting like a 'bookie' for his colleagues and would accept bets, encouraging his colleagues to gamble with him. This had the participant experiencing an almost magical enhancement of his 'gravitas' as he suggested 'added to the aura around me'. This act seems to have been on a few occasions profitable for Jim who on the other hand seems to experience ambivalence as he acknowledges that in his experience gamblers seem to not consider their losses counting only their wins. Furthermore, it appears that he metaphorically equated gambling with a 'beast' that has a malicious 'nature' which is putting 'blinds' on people who gamble filtering out their losses. On another note, Jim suggested that it seems that acting as a bookmaker would feed his ego. But at the time he seems to have been experiencing uncertainty around his motivation to act in such a way as this was not experienced clearly by Jim but only subconsciously. Nowadays though he seems to be able to acknowledge how he acted and what this behaviour offered.

Jane, on the other hand, when being asked whether hearing other individuals at work sharing their stories, she would act in a different way compared to the aforementioned participants trying to secretly prevent other women from experiencing more harm from gambling.

As Jane Commented:

Okay, so a couple of times with anyone that would be a lot younger than me if I was working on a premise where there could be hundreds of people.... Yeah, I think mine was more about I knew the impact it was having on me at this stage. The last few years asked, the more and more people gambling going out on nights out. I wanted to secretly prevent them from getting into more harm. So, at that time, I was still in the midst of my gambling using my own

experience to try and prevent those girls from hitting the place that I had, which is very odd.
(Lines 485 – 512)

As suggested above, Jane would be acting in an opposite way from the other two participants. Jane being able to empathise with others seems that she wanted to attempt to prevent others from gambling covertly. Acting in this way left Jane experiencing strange feelings as she suggested 'which is very odd'. Her motivation around this act was that she did not want other people to reach her own position and more specifically because Jane in this excerpt seems to equate gambling with harm, as if gambling immediately is harmful, and as she does not suggest that she wanted to prevent them from getting into more gambling, but into more harm. Her own experience around gambling appears to have been helpful in performing this task but still Jane suggested that it was an 'odd' experience to go through.

Concluding, except for one of the participants who seemed to find odd her willingness to prevent others from gambling, the remaining encouraged others to gamble in the workplace. A number of explanations were given by them, such as offering incentives through gambling or enhancing ego status by being seen as the bookie in the workplace. It seems that for the participants who encouraged others to gamble in the workplace, this attitude was meant to serve their own need for enhancement of their position in the eyes of their colleagues; yet, it appears that they have second thoughts about the extent to which this attitude is appropriate.

3.1.3 Subordinate Theme Three: 'The Ongoing Lure of Gambling'

Several participants, each in their own unique way, experienced a sort of lure that was keeping them engaged with gambling and having them seemingly disregard work. Furthermore, for each one of them the lure that kept them engaged with gambling seems to have had an impact on their work. A sense of repetitive interference of gambling with work and other aspects of life that also had an impact on the individual participant's workplace that was also hard to escape from could be observed through the participants' suggestions.

In her role as project manager, Jane seems to suggest that she experienced an ongoing cycle between work and gambling that was due to finding emails containing free money to use in online gambling means.

As Jane Commented:

I'd you know, go and sit maybe in a coffee shop, grab a coffee with my phone in my bag so no one could see it and check my emails and say oh, well I've just got a bonus from them....

And then you've gone Gosh! Right until the last second that you have to go back and meet them. And now you're racing, anxiety increases because you're running late to meet them.... And then it would start I would think to myself, Oh, I've got three emails with free bonuses. Why don't I try my luck and see if I can turn that into money? (Lines 378 - 399)

Jane here seems to be talking about the ongoing lure of gambling. It appears that the emails containing bonuses would keep her engaged with gambling even during work hours. It also appears that those emails would surprise Jane. After engaging with this 'Lure' Jane seems to have been still surprised but for another reason, that is the amount of time spent gambling during her lunch break. It also looks like that this realisation would have her experience negative emotions like anxiety as she had to rush back to her work and meet her colleagues. This experience would be repeating itself as when she would receive more emails with bonuses it appears that Jane would not take into consideration her previous anxiety- provoking experience as she would further try her luck and see if she could win money from those bonuses.

Jim, working in the finance sector, also seems to have experienced the ongoing lure of gambling but unlike Jane it appears to be in his internal thoughts instead of external factors like emails containing free bonuses.

As Jim Commented:

But there would be very little work that went on in the afternoon. And then I would then it would roll on to I mean, there's always an evening racing in the summer, obviously. And then there's, there's US racing, you know, running well into the night. And then so I can, depending on how I got on well, I see wasn't really debating whether I won or lost if I won, I thought that I can carry on winning. And if I lost, I think, Okay, well, I'm going to win it back. So, it would just keep me here would keep me keep me playing. And you know, at its worst I find the internet roulette, you know... (Lines 383 - 392)

Jim while describing his daily routine at work seems to have experienced the 'Lure'. As suggested above, unlike Jane, Jim appears to have encountered it as a strong internal thought: 'I thought that I can carry on winning'. It looks like Jim experienced a 'hope to win' that could surpass everything else. Even if Jim would lose while gambling the thought described above seems to have been embedded in him like there was no other option as at some point, he would win the money lost back. It is as if Jim was unable to do anything about it, almost like encountering a 'force' that would keep him playing. Finally, this thought seems to have been 'alive' for Jim every season of the year as there were always opportunities for

him to gamble and also it appears to have been strengthened when he discovered the availability of roulette online.

Unlike Jim, John was working in various sectors. For him, the 'Lure' that he experienced was something that gambling provided him with.

As John Commented:

So back then, yeah, it did something for me. It provided with excitement. It provided me with an escape. It provided me with hope of getting myself out of the economic situation I was in, so it was my way out. (Lines 55-58) Yeah. I've always struggled to hold down and maintain employment and gambling has been a big part of reasons why I've been struggling to hold down jobs because I've gone through this horrible nasty cycle of, of having this serious gambling issue. And I get paid and paydays being the most vulnerable pivot point for me. And often, more often than not, I'll get paid out with gambling urges and cravings, I'll succumb to those cravings and urges, I'll spend all my money out not pay my rent or not buy any food, and I have to get, I'd have to somehow survive for another week, two weeks a month, however, long survive that month whilst maintaining a job. (Lines 80 - 88)

John seems to have experienced gambling as doing something of importance to him, providing him with excitement. Furthermore, it also appears that in gambling John experienced hope and 'a way out'. It seems that John considered that gambling provided him with an escape the economic situation he was experiencing. In addition, he appears to have been experiencing the lure also in a 'nasty cycle' which started with him getting paid at work. Being at his most vulnerable when paid, it is as if John's salary created gambling cravings and urges. It appears that the urges and hope John experienced were an irresistible combination that would lure him into more gambling and lead him to negate basic survival needs. Finally, it appears that John had to cope with the aforementioned while maintaining his job at the same time.

Mark, who was working as a truck driver, explains that gambling was a priority over work and unlike others it appears that for him, his work triggered the lure of gambling.

As Mark Commented:

I think you don't always find an excuse; you always convince yourself that you want to have a bet. So, whatever has happened during the day, when you get up in the morning and you always have an excuse to gamble whenever you're on a good day or a bad day. (Lines 378 - 384) during work, ...inaudible... Particularly busy day in work, then I get frustrated because

I know I'd be struggling to find time to get back and my priority was to gamble so that was a bigger priority than work. So, with the job I did depending on where I was I got stressed trying to find somewhere to park and get my bets on especially in the early days where online gambling wasn't about I needed to put the back down so I be running at work doing deliveries because I had to find some of the bets and if I can find a bookies, I get majorly stressed because I think I was losing out on potentially winning money because I wanted to have my bets. (Lines 449 - 458) ...But like you said, it's the vulnerability is the fact that the job before you many years, makes you lonely. And so, I wanted a change of change of lifestyle. (Lines 592 - 594)

Mark explains that he experienced strong emotions of loneliness and he considered that this experience was making him vulnerable. Thus, it was as if he were 'lured' by gambling as it provided him with hope to change his lifestyle and as it seemed a necessary company, almost as if gambling would be his friend. It looks like his work was perceived as an obstacle towards his goal as he suggested that he would get frustrated in busy workdays and he would always do his job in a hurry so that he could give himself the opportunity to gamble otherwise he would be 'losing out on potentially winning money'. Thus, for Mark, gambling would be a bigger priority over work as he would be preoccupied with gambling or engaging with it during work hours.

In conclusion, for all participants, the lure of gambling seems to have had an impact on their work in various ways. For one, the lure was experienced from the continuous feed of emails with gambling possibilities that fully absorbed break time, while for another it seems that the need to win preoccupied him during work. Also, the income from work seemed to be the source for securing funds for gambling, while for another participant gambling seemed to be the source of hope to change lifestyle and overcome the feelings of loneliness the current job generated.

3.1.4 Subordinate Theme Four: 'Concealment'

Most of the participants, everyone for their own reasons around gambling seem to have been engaging with certain behaviours such as lying to conceal their gambling related activity. Engaging in such a behaviour seems to have altered the participants experience of the workplace.

Mark seems to consider that lying became a second nature to him, blurring the line between the truth and lying.

As Mark Commented:

I mean, I think with the compulsive lying and I think it's just he just, it comes naturally I think, I think you forget, I think you get to the stage where you don't even know what the truth from a lie is because you slice so much because it might protect yourself from a ...inaudible... problems or things you've been doing so I mean, my addiction is quite visible. (Lines 171 - 177)

Mark perceived that his gambling habit was obvious thus he admitted that he adopted lying to shield himself from potential problems that might arise in his workplace as a result of his habit that he suggested was “quite visible”. This concealment of his gambling behaviour would allow him to protect himself, as he attested ‘protect yourself’, probably from the consequences of his colleagues finding out his involvement with gambling. Lying looks like that it became a necessity for him as he described it as “compulsive”. Most likely because of the many times he had engaged in lying he attested that he confused lies and the truth since he, confirming that his memory failed him, seemed that he could not distinguish the truth from a lie. He also suggested that he believed it was easy to do, he could do it quickly and that he was good at it since he acknowledged that “it comes naturally”.

When being asked about the causality of the deterioration of his relationship with his colleagues Pete seemed to attribute it to his constant lying.

As Pete Commented:

And it's mainly came from just a constant lying. That's the thing that gambling addiction does seem more than anything is making a lie. And they just got first of all, they, they got annoyed by the fact that I kept asking for money. They then got annoyed by the fact that I was lying about my gambling, they then got annoyed that their money was being affected. And then the last thing was when they realised that money, I was spending their money that was like the final straw for them. (Lines 464 - 471)

Pete suggested that lying and gambling were entwined. He seemed to engage in continuous lying as he “constantly lied” most likely to extract money from the people he worked with. He appeared to be aware of the fact that the people at his work were annoyed both with his repeatedly asking for more money and his lying about his gambling habit. It appears as if he would also lie in an attempt to conceal his gambling involvement similarly to Mark. It seems that the moment they found out that their money was affected as a result of his gambling, they had reached their limits, as implied through the phrase “like the final straw for them”.

Jane seemed to address a two-fold notion of lying: to herself and to her clients to make time to satisfy her gambling habit.

As Jane Commented:

So, the pressure of gambling became too much. But I wasn't addressing it. I was just living a lie on the outside. So that is the biggest problem I find is because it's a hidden thing. There's nobody who will understand what's going on with her (Lines 210 - 213)...And I would phone that client and lie and say something's come up. Unfortunately, I've got to cancel. So, this was a huge impact. And I would end up going home and thinking right, I'll carry on because I'm winning (Lines 447 - 450).

Jane seemed to address the issue of lying to herself as she seemed oblivious to her gambling habit expressing it through the phrase "I was just living a lie". She suggested that this was "the biggest problem". One of the biggest difficulties seems to have been the fact that she could not share her gambling and she had to lie about it as she suggested 'it's a hidden thing'. She had to conceal her gambling related activity. On another account, she seemed to admit that she employed lying to cancel her appointments with clients so that she could perpetuate her gambling habit. Her lying to clients to allocate the time that she would have spent with them to satisfy her gambling habit she confirmed had a huge impact on her work. She seemed to leave work and go home to gamble on the pretext that she was winning to rationalize her cancellations. In hindsight, she might be using the pretext of winning to continue gambling which could be associated with what she said at the beginning of the excerpt about lying to herself.

Tom confirmed that the pretext of gambling to win is a lie.

As Tom Commented:

Possibly like the research element you know; you are looking at someone's CV yeah generally I think in some ways the kick-off because for me always it for me winning a bear never really gave me it's a lie. (Lines 532 - 535)

Tom seemed to acknowledge that he was gambling to win, which he attested was a lie. He likens his search for success encapsulated in the phrase "winning a bear" to what a researcher is seeking or to what someone looking into a CV for specific information is searching. Additionally, it was as if gambling would reward, this 'research' that Tom would conduct, with a lie, almost as if gambling was a physical entity that could give him something.

Concluding, lying seems to have been experienced by all participants, mainly as a means to conceal to others their difficulties with gambling or gambling involvement. Additionally, lying about gambling seems to be a way to seek financial help from colleagues. Furthermore, lying to clients to avoid meetings and thus create spare time to gamble was cited by one of the participants showing the magnitude of its impact on professional interactions. Finally, gambling would be experienced as almost a physical entity that would repay the participant with 'lies' thus the participant would potentially experience gambling as an inner lie.

3.2 Superordinate Theme Two: 'The Three S's'

This theme examines how the participants experienced 'stress', 'stigma' and 'shame'. Moreover, in this theme it will be explored how the participants experienced the aforementioned in their respective workplaces. The phenomena examined are subjective ones as they are mostly private feelings that the participants kept to themselves; they did not share them either with their colleagues or employers in their respective workplaces. Each subtheme contributes to the experience that the participants underwent at their workplace because of their gambling habit. This Superordinate theme is intertwined with the phenomena examined in the first Superordinate theme, the former could potentially lead the participants to experience stigma, stress and shame. All of those private feelings examined in this Superordinate theme could potentially lead the participants experiencing the themes analysed in the third and final Superordinate theme and vice versa.

3.2.1 Subordinate Theme One: 'Stigma'

This subtheme examines the phenomenon of gamblers being stigmatised in the workplace. It seems that the three participants that shared their experiences about this phenomenon lived it in their own unique way. Even though not all participants spoke about stigma directly, it was deemed to be an important part of the experience that individuals with gambling difficulties faced in the workplace.

When Jane was asked why she would be reluctant to share the difficulties she was facing with her colleagues, she suggested that it was especially her colleagues the ones who would stigmatise her in the workplace.

As Jane Commented:

With everybody and colleagues especially obviously, it's a shame, there is a big stigma attached to gambling. And I think particularly as a mother, you know, I think the height of my gambling, you can't comprehend yourself that you need help and that you are a gambler. (Lines 262 – 266)

It appears that Jane would have experienced a lot of stigma especially in her workplace as she suggested 'big stigma attached' and perhaps a burden that was attributed to this. From this it could also be said that, by Jane's experience, gambling would have something 'glued' with it, being stigma, like the one would not go without the other. She seems to be speaking with certainty and as if it were evident that her colleagues would be stigmatising individuals with gambling difficulties in the workplace. This was signified by her choice of words like 'especially obviously'. It looks as if Jane considered this stigma bad and sad and it seems that she would think that this should not happen as she suggested 'it's a shame'. On a similar note, it appears that Jane experienced more stigma because of being a mother. Also, she reflected that when she had this experience, she could not understand that she was a gambler and that she needed help.

Similarly, to Jane, John being asked almost the same question suggested also that stigma was 'attached' to gambling, but unlike Jane he recalls trying two different 'policies' around his disclosure: feeling free to share his gambling behaviour and being more cautious. The first 'policy' seems to have been accompanied with stigma.

As John Commented:

So understanding that actually, there's probably some consequence, some negative consequence with being too free with his early disclosing too early with and being too free with disclosure because of the stigma attached to it and unintended consequences, and probably I wanted, I didn't want people to judge me or I didn't want the information of being a gambler to influence people's treatment or how they felt about me or how they saw me. (Lines 469 – 475)

Though what John suggested is as if he paid a price, like almost being punished for being too free to disclose and also doing so very quickly with individuals as he suggested 'negative consequence'. John seems to have regretted this as this behaviour was 'repaid' with stigma. Through the way he shares his experiences it looks like John was not intending for

this to happen and he was not aware of the stigma around people who engage with gambling as he suggested 'unintended consequences'. Similarly, with Jane, it is as if gambling is always accompanied by stigma for John as well. Finally, it is as if John would feel that the stigma of gambling would overshadow everything else, as it would make his colleagues predisposed towards him and have them adopt a more judgemental behaviour, alter their treatment towards him, and change the way they felt around him if they were aware of his gambling related activity.

Unlike the other two participants, Mark seems to adopt a more rational stance towards stigma almost like explaining why gamblers are stigmatised.

As Mark Commented:

Ehm....the stigma these days with gambling addiction... I mean, I think with the compulsive lying and I think it's just he just, it comes naturally I think.... but I mean, it was it was there for everyone to see but Yeah, the lies which would be constantly been just to try and find a way of being able to go into betting shops or you get phone calls from work, really saying, where are you or what you're doing and things like that, and I'd be in the bookies, I'd walk out of the shop because I wouldn't want them to hear the horse race, you know something going on sick it will get where I was I'd be standing outside the road. So, in a shock, wave forward, things like that. So just trying to cover your tracks going and it's just not for people not to understand where you are. (Lines 171 – 188)

As suggested above, Mark by stating 'it comes naturally I think' it is as if he provides us with a rationale for gambling addicts resorting to lying to avoid being stigmatised. However, it seems that stigma is unavoidable as the rationale he provides is that the 'compulsive lying' was evident for other individuals to observe. Mark seems to have been behaving in this manner constantly. Despite the rationale that he provides us with it seems that Mark as a result of this stigma would feel almost like a criminal as he had to 'cover his tracks'. Mark seems to have an ambivalent experience about this behaviour as, on the one hand, this lying would help him by not allowing others at work to know where he is and probably not understand what he is doing. Almost like trying to avoid being stigmatised. But on the other hand, Mark adopts a critical tone towards this behaviour as he calls it 'sick'.

Examining this phenomenon, it could be suggested that the participants faced stigma in the workplace either as a result of their disclosing to other individuals at work their gambling or trying to hide it by lying about their activities. Whether through disclosure or lying, they all

seem to concur that stigmatisation by others in the workplace is the direct consequence of their gambling.

3.2.2 Subordinate Theme Two: 'Stress'

This theme aims to examine the phenomenon of the participants experiencing stress due to their gambling related activity. Furthermore, how stress might have altered the experience of the participants at the workplace might be sought.

Jane seems to acknowledge stress as a 'force' that would keep her going.

As Jane Commented:

I feel very low, I'd probably be more emotional and maybe more irritable and then it finally hits your health hits everything you break and feel exhausted for a couple of weeks, but you get back again and you start doing this a bit now I suppose like people that work ridiculous hours you burn out. You've got the stress; it is what keeps you going. (Lines 157 – 161)

Gambling seemed to have both an emotional and a physical impact on her performance in the workplace. She appeared to acknowledge that her emotional distress caused her physical impairment. She suggested that she became more sensitive and thus probably more vulnerable as she confirmed that she turned "more emotional". She also communicated the increased distress and tension that she experienced as she became "more irritable". These negative feelings led her to "break", as she confirmed, describing her physical exhaustion. To communicate her experience, she likened herself to people that burn out, due to long hours of work, who recover after taking a break. Finally, she conveyed that stress for her acted as a motivation, a drive which "keeps her going".

John seems to experience a lot of stress which was attributed to the consequences of his gambling related activity.

As John Commented:

And so, I suppose after a few months, the combination of things external to me within the work environment as well as, the consequences of actually gambling and not paying my rent and not buying the food and the stress of dealing with those consequences, whilst needing to attend work in order to not have money, there's lots of stress there. There's lots of stress. There's, there's a lot of worry there's a lot of despondency (Lines 130 – 137)

The source of stress for John appeared to be his losses in gambling which brought about his inability to pay for his living expenses such as food and rent. However, he seemed to specify that he experienced stress at work, which was provoked from external factors, implying his gambling habit. He also appeared to confirm that his gambling habit necessitated to attend work, insinuating that this was his source of income. He attempted to communicate the magnitude of stress he experienced through the repetition of the phrase “lots of stress”. He also seemed to recognize that stress was accompanied by “worry” and the loss of hope and courage as he felt “despondent”.

Pete seems to be able to distinguish that it wasn't work providing him with stress but rather gambling causing stress within his own workplace.

As Pete Commented:

Ehm...To be honest, no, I don't think so. I don't, I never thought that work ever provided me with that much stress. To be honest, the gambling caused stress within work. But that was because of the gambling. I never thought that work cause me stress that I then had to go and gamble. (Lines 547 – 551)

Pete seemed to differentiate between the stress provoked from the work itself and the stress that he experienced at work because of gambling although he is not certain as he stated, “I don't think so”. He also seemed to acknowledge that he did not experience stress at work which could be used as an excuse to gamble so as to alleviate it.

Jim seems to have experienced stress making him feel unwell and having repercussions at his health which then led to absenteeism in order to be able to cope.

As Jim Commented:

Well take time off either through, actually, I mean, it would mean I was increasingly stressed out and depressed at this point. So, I was physically unwell. And so, did take the I did take time off because of my ill health. But that was very much attributed to that the stress around my financial situation. But I would, you know, it would always be if I was at work, I would spend three or four hours of the eight nine hour working day out of the office minimum doing gambling related activity. (Lines 235 – 242)

Jim as well as other participants seemed to acknowledge that the source of stress that he experienced at work was due to his financial ‘tightness’. He appeared to acknowledge as Jane

did that the stress, he experienced had an impact on his physical health as he felt “unwell”. This seemed to result in his absenteeism as he needed to take time off work. He also seemed to confess that he spent time out of the office gambling which could augment his stress related experience.

Mark seems to have experienced stress getting worse when he was concerned with money.

As Mark Commented:

massively so I mean, stress.... inaudible... So I mean, stress will get worse as equals in money. So, you get depressed and anxious, and you start chasing your losses and so you be that... So yeah, it's I mean bosses picked up and things like that... and I'm still chasing money then so I think once you once you close the work colleagues is quite evident that I was gambling and stressed. (Lines 434 – 444)

Like other participants, Mark also seemed to experience the negative impact of gambling at work through stress. In an attempt to quantify the extent of stress he experienced he described it as “massive”. He appeared to liken the increased experience of stress as consummate “in money”. On that occasion he might refer to the loss of money or as he later attested seeking money. He associated the causes of stress with the constant search for money probably to meet his financial obligations or to gamble. The repetition of the word “chasing” indicates the intensity of the feelings he experienced as he stated, “chasing your losses” and “chasing money”. Another cause of stress at work seemed to emerge from being reprimanded by bosses as he mentioned “bosses picked up”. Finally, he acknowledged that the time that stress culminated was after work when he went gambling which he brought to his workplace. The feelings that stress provoked appear to be distress and anxiety.

Stress at work appears to be experienced differently by the participants. Although they all attribute stress to gambling, how this feeling is experienced seems to vary. For one participant, the impact is both emotional and physical, while for another it relates to the financial impact of losing money on the ability to pay for living expenses. Stress seems also to be a driving force to keep one going while for another working seems to be a necessity to secure income to make ends meet. This appears to be a cause of high levels of stress as the higher the losses from gambling the higher the worry and feeling of a grim future. On another note, stress from gambling is differentiated from stress from work for one participant, who makes this distinction; However, for the rest of the participants there seems to be a direct connection between gambling and stress experienced at work for the reasons described above as well as the

reprimanding by bosses. Finally, distress, anxiety, and impact on physical health seem to be shared by almost all participants.

3.2.3 Subordinate Theme Three: 'Shame'

This theme examines how the participants as employees seemingly experienced shame at work due to their gambling related behaviour.

One of the biggest impacts of gambling for Jane in the workplace was the fact that she was experiencing shame to share her gambling habit with her colleagues at work.

As Jane Commented:

And that was the biggest impact that gambling had. It was hidden, it was the shame of it not being able to tell anyone, wearing a mask. Whereas I think if someone knew that example, you have stress in your life, or you had a grievance, or you were grieving from dead, people would be able to sometimes have a bit of leeway. She's tired, she needs time off of work. She's a bit more irritable, but when nobody knows... (Lines 194 – 200)

Jane seems to believe that the greatest impact that gambling had on her in the workplace was the shame that she experienced which rendered her unable to share with others, and probably her colleagues, her gambling habit. It looks as if it were a need of hers for others to be able to understand her and even maybe excuse her. She also appears to believe that the others would be more lenient towards her as she likens it to the grief that death would bring. She maintains that as when grieving people are laxer, had they known they would give her freedom to move. By making this comparison Jane looks as if she were experiencing unfairness. Furthermore, she seems to be regretful of the fact that she had to conceal her gambling habit. It also looks like she had to almost be a different person, wearing a 'facade' when engaging with other people to protect herself from experiencing shame.

John seems to have been feeling very ashamed of experiencing a gambling problem.

As John Commented:

So yeah, I I've gone through I've gone through periods of where I've felt very ashamed of having a gambling problem and you know, feeling really crap and, and all of that and being probably ostracised, or being mocked or having a piss taken out of me through to being cautious about who I tell it, and who I'm who I'm open with it that my gambling keeping it secret and keep hiding it away from me. (Lines 433 – 439)

John seemed to experience shame for his gambling habit, as he confessed that he was 'ashamed of having a gambling problem'. He acknowledged feeling degraded, "crap" as he stated. He also acknowledged that he would be unwanted and rejected by others or even made fun of had they known his gambling habit. He confessed that this would anger him as he attested of "having a piss". He proceeded by accepting that he should be careful who he would share his gambling habit with but most importantly he seemed to acknowledge that he was keeping it secret from himself. Probably this could indicate his denial in accepting his gambling problem himself.

Tom similarly to Jane seems to have been ashamed to share with everyone at work his gambling related activity.

As Tom Commented:

So, if I was to tell everyone you know, I would definitely be ashamed of doing so but also embarrassed because you know, it's quite an aspirational, you know, (Confidential Industry) is all about trying to earn more money and you know, be the best and have more money and, you know, you know, I've had the same car for seven years because. I've been in debt, we've got blend and not got a new car and You know people would you know turn up and the new (Car Brand) and new (Car Brand) and you know they say you know why you still come you've still got you know that car since 2012 you know, I used to I would I always make excuses you know to split our you know, just laugh it off or I'm just saving or you know, I don't need I don't need a flashy car that dadadadadada. So, I always make excuses, but the reality is people obviously knew that something was right, because how come people in it less money than their boss? We're driving better cars than their boss. How come? They were going on better holidays than him what does he do with all this money? So, it's a shame aspect of you know, it's just embarrassed to tell people apart from the same certain very close people that I trust. (Lines 258 – 276)

Tom was ashamed and embarrassed for having to reveal his gambling habit. He seemed to feel distressed with the fact that people understood that something was wrong. He seemed to feel uncomfortable having the same car since 2012 while his employees at work have better cars and enjoy better holidays than him. Being the boss, he acknowledged that they could comprehend that he earned more money thus he could have enjoyed a better lifestyle. To evade the questions and embarrassing situations he would either make fun of the situation or come up with excuses, such as that he was saving. The way that he reacted seemed to reveal that he felt uncomfortable with both the questions and the fact that he could not lead the

luxurious life that he could afford with the money he earned. He also appeared to make an effort to communicate his plight of shame and embarrassment through the repetition of the word “you know” probably in an effort to make the interviewer empathize with him. Overall, he looked as if he felt uncomfortable with the image his employees shaped about him and the ‘scenarios’ that they devised of what he did with the money.

Pete seems to experience embarrassment and shame because of his close friends and colleagues taking action to make sure that he does not gamble at work.

As Pete Commented:

Ehm... I think I understood it but I was also quite embarrassed and ashamed really that I was at the time I was 25-26 the fact that my best friends had to change the password on stuff because they didn't trust me was quite embarrassing. (Lines 516 – 519)

Pete seemed to feel ashamed because at the age of 25-26 his gambling habit was revealed, and his best friends seem to take action to prevent him from accessing the computer, changing the password. The fact that they did not trust him seem to cause him negative feelings of embarrassment.

In conclusion, shame seems to have been experienced by most participants; yet, in different ways. Shame could be attributed to the inability to share with colleagues the gambling habit, while for others for revealing it. In the latter case, it seems that shame resulted from not being able to live the luxurious life one wanted or from the treatment of colleagues who were being cautious and alert to ensure that the participant’s habit will not interfere with their work.

3.3 Superordinate Theme Three: ‘The Experience of Self’

This super theme examines how the participants experienced themselves as a result of their gambling. More specifically, the experience under exploration relates to the workplace. The participants seemed to be experiencing being ‘Short Tempered’, ‘Depressed’ or using their experience in ‘Helping Others’ to protect them from gambling. Furthermore, it appears as if the participants would experience themselves differently around others a phenomenon which is explored under the subtheme termed as ‘Experience of Self with Others’. All of the aforementioned sub themes appear to be experiences that could be externalised to others in the workplace. It also appears that they are linked with the Super Theme Two Sub Themes as it looks as if stigma in the workplace paired with stress and shame due to gambling could have possibly led the participants experiencing themselves as the sub themes of super theme

three examine. Finally, these experiences also could have been responsible in motivating or aiding the participants to help others who are gamblers and are employed.

3.3.1 Subordinate Theme One: Short Tempered

The first subtheme within “Experience of self” is “short tempered”. This sub theme captures one of the reactions participants experience in the workplace, which is demonstrated by their losing control and being angered because of their gambling habit. The irritability they demonstrate at work is evidenced through their responses about their feelings and how they perceive their behaviour towards others.

Jane admits that her gambling habit makes her more “snappy” and less tolerant in the workplace, thus turning her into an unreasonable person.

As Jane Commented:

So, like anything one that stressed without talking about it, it will have an impact on personally. That that was a very big thing. You know, I find that I'd be snappier. I'd be short, shorter tempered, then it would make me more of an unreasonable person, which I always was and as a manager, I was always considered a fair person able to communicate and Listen, clearly, I became less tolerant. (Lines 173 – 178)

Jane acknowledged that her gambling habit made her feel stressed, although she did not verbally express her feelings. She also admitted that she turned increasingly short tempered as she stated that she became “snappier”. She appeared to recognize the repercussions of her short temperedness. She stated that although she is unreasonable, her gambling habit and ensuing short temperedness resulted in her becoming “more of an unreasonable person”. She described herself as being fair, communicative and a good listener, however, she attested that her short temperedness made her less tolerant in her workplace. So, it could be said that her qualities as a person were altered because of her short temperedness.

Tom acknowledged that winning or losing in gambling impacted his mood.

As Tom Commented:

Ummm.... It I mean, for a start there would be a lot of time to I would gamble at work. We've heard that men checking football scores, check in bets in play betting in play, you know, on my phone out work at my desk, but definitely, it definitely had a negative impact Generally on my mood, so I, if I had lost money the night before, I would be in a worse mood with people

and probably shorter and more temperamental with people the day after. If I had a big win the night before I was everyone's best friend, and it would be great. So, it definitely impacted my you know, my day-to-day mood because that was generally just generally always dictated by whether I won or lost with my gambling. (Lines 69 – 79)

Tom as the rest of the participants admitted being short tempered because of his gambling habit. He described how winning or losing the night before because of gambling impacted his mood and insinuated that this determined his relationships with people the following day. He acknowledged that when losing he would be more “temperamental” with people while when winning he would be in a good mood and feeling nice as well as this had an impact on the way he viewed people stating that he would be “everyone’s best friend”. He described that his relationships with people at work depended on his losing or winning the night before in his gambling. He also admitted gambling at work. He seemed to check whether the interviewer was aware that people who gamble check scores or bets while at work. He seemed to acknowledge that this was not appropriate behaviour.

Mark, like the rest of the participants, acknowledged his short temperedness in the workplace adding the dimension of physical aggression that he experienced although refraining from engaging in conflict with others.

As Mark Commented:

100% Yeah, very short fused very physically aggressive. A minute. I've never personally gone to fight to anybody over it was definitely I think because you're not going to dive in unlocked, I think you just do you live it ...inaudible.... affected your personality. So yeah it's a little bit like that. (Lines 311 – 315)

Mark explicitly acknowledged getting short tempered as he stated that he got “short fused” because of his gambling habit. He also appeared to recognize the physical repercussions of his gambling habit as he admitted getting physically aggressive although he explained that he did not engage in open conflict with others. To ascertain how lively his short temperedness and aggression is he specifically stated, “you live it”. He also attested that this did not last long as he confirmed that it lasted “a minute”, indicating the short period of time that these feelings lasted. However, he admitted the impact of this on his personality.

John seemed to associate short-temperedness with the unhappiness he experienced

John Commented:

Yeah. So, on the basis that, you know, I'm gambling all the time and I'm going for this horrible long lesson cycle of getting paid and spending all the money and you know, it can often lead to feeling really depressed and ...inaudible... depressed and miserable and, and short tempered, perhaps short tempered and just not happy... (Lines 178 – 182)

John also seemed to experience short temperedness although he is not certain that was the feeling he experienced. He appeared to associate short temperedness with unhappiness. He admitted that this cycle of working, earning money, gambling and losing money and all over again provoked a series of negative feelings, involving misery, depression which finally led to short temperedness. However, he is not certain that it was short temperedness as he stated, “perhaps short temperedness”. It could be that his negative feelings of misery and depression led to short temperedness at work.

Pete, like John, appeared to admit that his short-temperedness stemmed from his memory of losing in his gambling sessions.

As Pete Commented:

Especially if I, if I was losing by gambling, I vividly remember the sessions, then being I myself being quite snappy with the children quite, you know, I'd really take exception. And I'd be quite strict. There was a lot of times as well thinking about it now when I would actually be betting on my phone during lessons, which is I've never actually thought about that until this conversation now, but I'm vividly remember doing that quite a lot when I had a certain debt to pay by the end of the day, and I was at the school day, the only way of doing it, I thought was by gambling to win the money. (Lines 178 – 182)

Pete's gambling habit seemed to lead him to experience short temperedness at work. He admitted that the vivid memory of losing money led him to being short tempered “snappy” as he states with the children he was coaching. He seemed to realise his condition and be regretful of it as he admitted that he objected to this kind of behaviour stating, “I'd really take exception”. He admitted that the negative feelings he acquired from losing money made him strict with children. In hindsight he recognized that gambling interfered with his work, realising this during the conversation with the interviewer. He acknowledged that he adopted this behaviour because of the debts he incurred because of gambling. He considered that the only way of making money was through gambling. It may be that the fact that he gambled to win money to pay for his debts could be an excuse for perpetuating his gambling habit.

The experience of self-due to gambling in the workplace seemed to be inextricably entwined

with feelings of short temperedness, stemming from their gambling and the consequences, such as incurring debt. The feeling of short temperedness seemed to be intense and recognizable by all five participants. The role of the interviewer is pronounced as one of the participants recognized that this conversation with the interviewer stimulated his realization that his gambling habit intervened in his work. He attested that his urge to gamble led him to place bets while working.

3.3.2 Subordinate Theme Two: 'Depressed'

The subtheme of depression seemed to stem from the stress attributed to the financial problems that participants encountered because of their gambling habit. This impacted the experience at the workplace as most of them acknowledged or insinuated experiencing distress of being uncovered. All of them acknowledged how depression from gambling impacted them personally, specifically on the way they perceived themselves. In one case stress and the ensuing depression led to experience sickness which resulted in the inability of the participants to meet their work obligations. It is worth mentioning at this stage that being depressed is also used as a clinical term and more specifically as a clinical diagnosis. This external lens was not used in this study and how the participants experienced themselves being in such a state was examined. Furthermore, it was used as a word by several of the participants. Thus, the word 'depression' was chosen to name this theme not referring to the medical diagnosis of Major Depressive Disorder (APA, 2013) but how it is commonly used in parlance meaning feeling down, flat or sad. How the participants experienced this phenomenon and what it meant for them is investigated in this theme.

John seems to suggest that depression stems from the stress and worry from gambling

As John Commented:

And so, I suppose after a few months, the combination of things external to me within the work environment as well as, as well as the consequences of actually gambling and not paying my rent and not buying the food and the stress of dealing with those consequences, whilst needing to whilst needing to attend work in order to not have money, there's lots of stress there. There's lots of stress. There's, there's a lot of worry there's a lot of despondency. There's a lot of depression. There's a lot of feeling really bad about myself. So, self-esteem issues. Yeah, just general feeling flat and my motivation just really declines and Here I am, this has been a real big cycle really big cycle of mine. So yeah, I think after a period I just forget I become so deflated and just demotivated (Lines 130 – 142)

John acknowledged how he felt and experienced depression, which was caused by various emotions and because of the combination of factors unrelated to him at work but also because of the stress related to his stressful financial condition stemming from his gambling habit. The idea of the interconnection among stress, worry and depression indicates the prevalent tension that he demonstrates because of gambling. The repetitive language he employed demonstrated the intensity of his feelings. For example, he stated, “there’s lots of stress there” followed by “There’s lots of stress” and “There’s a lot of worry”, demonstrating the acuteness of the experience of negative feelings. The quantified language “a lot of” referring to depression, “lots” referring to stress “really, really” referring to how bad he felt about himself also authenticated the potency of the negative feelings that he retained from gambling and its financial consequences. It seemed that stress and depression resulted in a plurality of repercussions. Firstly, he acknowledged experiencing low self-esteem as well as being entrapped in a vicious circle of demotivation not specifying whether it is demotivation to work or a general feeling of abandonment, because of the problems due to gambling. He also attested to the necessity to attend work as his gambling could not provide for his necessities. The vicious circle he finds himself in is characterised as “mine”. This could refer to his assuming responsibility as it could be him who created it, or it could refer to the fact that it concerned only him. His entrapment in this vicious circle could be interpreted as admission of loss of control as his worry, depression and stress led to his lack of motivation at work, as well as disclosing his loss of confidence and optimism expressed through the participle “deflated”. The poor image he had for himself resulting in from stress and depression are disclosed through low self-esteem which he experienced. This also led him to experiencing a sense of emotionlessness by stating that he “[feels] flat. The acknowledgement of what is happening to him may be an indication of a sense of self-consciousness evoking an understanding of his difficult condition. Overall, the exaggerated, repetitive language he employed along with the self-accusatory tone he adopted appeared to be an effort to communicate the extent of his plight and the negative feelings he experienced.

For Jane the initial positive feelings from gambling were very quickly substituted for negative ones.

As Jane Commented:

I've split from my partner. I was a single mother with a very young child and found it very difficult work wise to work in the city with a young child and carry on. And so, I ended up doing some consultancy work from home. And literally my first night was going with a friend which I never thought I'd do to a bingo hall, where I won substantial amount of money on the first

night. It was recreational. But it turned very quickly to almost a form of self-harm when I was low and depressed and been pretty lousy. (Lines 20 – 27)

Jane started by explaining her personal circumstances, especially her separation from her partner which rendered her unable to work in a city with a young child, which, in turn, led her to work as a consultant from home. She seemed to recall the first time she went out with a friend and engaged in gambling, focusing on the positive feelings she underwent because she won a lot of money. Here, positive feelings could be associated with the positive outcome of gambling, that is winning money. Yet, she acknowledged that these feelings were very quickly replaced by very negative ones. She confessed that her gambling habit was a “form of self-harm” which might suggest that gambling might be a means of imposing herself some sort of punishment for something. She appeared to explicitly accuse herself for the negative feelings that she retained from gambling with the use of the word self-harm. She demonstrated a sense of self-consciousness not attempting to blame her negative feelings from her gambling habit to something or someone else. Overall, she recognised that feeling awful, along with her feeling down and depressed was an imposition of self-harm on herself.

Depression for Mark is associated with the stress that gamblers undergo chasing after money and the concern that their boss might understand.

As Mark Commented:

Massively so I mean, stress.... inaudible... So I mean, stress will get worse as equals in money. So, you get depressed and anxious, and you start chasing your losses and so you be that. So yeah, it's I mean bosses picked up and things like that. You mean I mean especially if you're around the around the bosses I was fortunately said but for many years I was out on the road so you could cover up cover serve a lot a lot of ways but sometimes I've done jobs where I've been I've been sort off mostly office based by I used to run the bar once and I'm still chasing money then so I think once you once you close the work colleagues is quite evident that I was gambling and stressed. (Lines 434 – 444)

Mark comprehended that stress and depression stemmed from chasing losses. He also acknowledged the negative feelings and discomfort he experienced because his bosses would understand that the cause of stress was his gambling habit. He shared with the interviewer his personal circumstances highlighting that because of the nature of his job he covered his gambling habit as he worked on the road, insinuating that this was less stressful, but he attested, on the other hand, that on other occasions like when he was asked to run a bar his stress was obvious to his working environment. He also confirmed that upon closing a job it

was not long before his colleagues realised his experiencing stress and its relation to his gambling habit. Overall, he admitted that stress and depression were related to losing money as most of the participants did but he added the dimension of his boss uncovering his gambling habit which could be described as a fear that brought about stress.

Jim also acknowledged that stress and depression were a result of his financial worries like the rest of the participants.

As Jim Commented:

Well take time off either Through, actually, I mean, it would mean I was increasingly stressed out and depressed at this point. So, I was physically unwell. And so, did take the I did take time off because of my ill health. But that was very much attributed to that the stress around my financial situation. But I would, you know, I would always be if I was at work, I would spend three or four hours of the eight nine hour working day out of the office minimum doing gambling related activity. (Researcher: Mhm) But absenteeism you know, they would never be surprised if I rang in to say that I was sick because, well, they knew I was sick. Well, they just didn't know how sick I was and what was really causing it. (Lines 235 – 245)

Jim's session was particularly illuminative of the physical impact depression can cause as he attested that his stress and ensuing depression resulted from the financial difficulties, he encountered from his gambling habit. This affected him physically rendering him unwell and therefore unable to go to work. He acknowledged that at his work nobody was surprised at his calling and saying that he was sick and would not go to work, yet he confirmed that they knew neither the intensity of his illness nor the cause of it. He also admitted that when at work he would spend three to four hours out of the office dealing with gambling activities. This might have contributed to his stress and ensuing depression because of the possibility of uncovering his gambling activity during work. Overall, Jim like the rest of the participants acknowledged that his financial situation because of gambling caused him to be stressed and depressed and this had an impact on his work due to absenteeism.

Overall, most of the participants seemed to concur that stress and worry over their financial problems due to gambling resulted in depression. Some of them appeared to concede that their stress and depression resulted from the possibility of being uncovered at their work either by their boss or colleagues. Others demonstrated that depression impacted their personality making them experience low self-esteem. One of the participants acknowledged that depression negatively impacted his health causing his absenteeism. Depression appeared to have a negative impact on the workplace.

3.3.3 Subordinate Theme Three: Helping Others

This theme examines the phenomenon of the participants who were either formerly or currently gambling, helping other gamblers in the workplace. Most of the participants would offer a 'helping hand' or advice to other individuals who had difficulties with gambling. Everyone would do so for their own reason and in their own way. Finally, it seems that most of the participants enjoyed the benefits that this experience offered to them.

Jane when giving a detailed explanation about how she helped others with gambling difficulties in the workplace experienced strange feelings.

As Jane Commented:

Okay, so a couple of times with anyone that would be a lot younger than me if I was working on a premise where there could be hundreds of people.... But they will openly say, for example, 21-year-old girl would say, Oh, my gosh, I gambled, you know, and I've lost all my rent money. There were times I'd even help out financially, because I would feel so bad for them. But I found myself at that point, knowing that I was a gambler, obviously, and almost trying to prevent them and saying, you know what, the best thing you could do is stop now, although I wasn't it was almost like I'd accepted. I'm now in so deep. This is a 21-year-old that could stop right now, which is bizarre, but I would actually advise, oddly enough... And I would say, you know what you will manage, because you're getting paid when and we will talk openly. And then I would maybe say what you need to do is just be tight on this tight on that I'd be really quite detailed with them and say to them, but the best thing you could do is actually block yourself now. You know, and don't do this don't but I wasn't doing it for myself. And some of these girls and young guys say to me, thank you so much. You know, I'm so glad we had that chat. Strange. (Lines 485 – 522)

When working on the premises Jane reported that she would be approached a couple of times by younger men and women who would open up to her about their gambling. She seems to have been experiencing compassion for them as she suggested 'I would feel so bad for them'. On the one hand, it seems that Jane would have accepted at this point that she was a gambler but on the other hand it is as if she 'surrendered' herself to gambling, feeling almost incapable of trying to get out of the situation that she was in as she suggested 'I'd accepted. I'm now in so deep'. She gives the impression of almost being in a 'deep' place of gambling and she cannot get out. But it was never too late for those young individuals who entrusted her to help them. Jane would feel for those young women and she would try to prevent them from reaching this 'deep place'. Using her own experience, she would offer financial aid, advice

and would attempt to motivate those individuals to achieve the aforementioned. Even though they would be grateful for the help that they received, Jane would then experience strange feelings like being surprised for being able to help others but being unable to listen to her own advice and help herself. Finally, this experience of Jane would be mainly encountered in her own place of work.

John after achieving abstinence from gambling he would use his own experience like Jane to help the recovery of others. John would not do this in his workplace when being a gambler, but he would turn up to be employed in the gambling sector helping other gamblers and 'shining the light'.

As John Commented:

It had taught me the same question about how I feel about it today when I'm not gambling, I'm doing really well in recovery and you know I've got career working within the gambling sector You know, I'm very open about it. Everyone knows I am a gambler, but I've had a history of gambling problems that's no comfortable with that. Now that's part of how I'm recognised I'm in more work well because of that experience now there is there was a slightly different conversation to be had if I were to have a gambling lapse. And there would be there would be fear there. We see why I'm working the gambling sector You know, I'm, I'm shining the light on other people that you know, yes, you can overcome gambling and work hard and have a great life. (Lines 599 – 611)

John doing very well in recovery used his experience of being a gambler to be employed in the gambling sector where he would help other people achieving abstinence. It seems that for him to be able to do that he had to be very open about his gambling experience and overcome the fact that he was not comfortable with his gambling history. It seems that now John's identity is one with helping others who face gambling difficulties as he suggested 'Now that's part of how I'm recognised'. The way he describes his current experience is as if he found his 'niche' in helping others using his experience. On the other hand, he seems to experience fear about the possibility of him lapsing and acknowledge that if this were to happen things would be quite different. It looks as if John is afraid that gambling might take away those better working conditions that he has created for himself. On the other hand, the way he makes his suggestions is like he does not seem disheartened, he seems quite ambitious, and he is willing to take a risk in order to help others 'overcome gambling and work hard and have a great life'.

Similarly, to John, Jim has used his gambling experience to help athletes overcome their gambling.

As Jim Commented:

Yes, it is now. Yeah. Well, it's incredibly rewarding. I tell you this incredibly well. And one of the areas I work for is a clinic that helps elite athletes and sports professionals with all manner of it with issues around addiction. And I go in there specifically to help those that have problems with gambling. And within the field of sports, where people can get paid significant amounts of money, if I tell my story because I did earn significant amounts of money and just points out where I got to as a result of my gambling addiction. It puts me on the same page as people that earn money all be you know, I mean, I am my money in finance, they earn their money in sport, but they understand that from the money side of it, we're all wearing the same bracket. And we and they can go the same way as I did if they decide not to try to stop. So that's a powerful starting point for me to be able to work with people. (Lines 470 – 483)

Jim seems to experience having a powerful starting point when specifically helping athletes who gamble. He considers that he had been in the same situation with them as he suggested 'all wearing the same bracket'. Jim can relate and appeal to those individuals as he considered that they both had some common ground, being earning a lot of money. It is as if Jim would be feeling as a 'guide' helping these individuals to choose another 'path' and not end up in the same way that he did. He is sharing his own gambling story reflecting upon the negative impact of gambling on him. It looks like Jim would feel bad for the situation that he got himself into but by making the right choices these people have a chance to decide to change which seems to be pinpointed as of being important by Jim as he suggested 'if they decide not try to stop'. It is as if his decisions around gambling are to be avoided by them. It's all about them deciding to stop if they want to be helped. Finally, Jim seems to be empowered and motivated by engaging with others in this way and it is a very rewarding experience for him which he feels quite confident about.

Tom even though not helping others in a work context or as a profession he utilised other means to do so.

As Tom Commented:

And I'm actually finding that I've set up the (Confidential Name) thing on Twitter, which is how you contacted me, and I always find by doing that, so helping me because it's given me something to sort of focus on instead of gambling. (Lines 15 – 18)

Using the social media Tom manages to help others. Engaging with others who need help seems to have helped Tom himself. One thing that he seems to experience is that his focus

has altered. On the other hand, he seems to be slightly unsure about this as he suggested 'sort of'. Probably some of the people that he would be assisting using these means could have been employed and experiencing the workplace in their own unique way.

In conclusion, the participants have helped others deal with their gambling difficulties in different ways. Also, their experiences vary with regards to emotions raised as well as the context within which they offered their help. With regards to context, help was given to colleagues in the workplace or by working in gambling settings or by becoming an "influencer" through the social media. Concerning emotional experiences, for one participant showing empathy to other gamblers at work was the driver towards offering help. At the same time, her difficulty dealing with her own problem came as a surprise as she could help others but not herself. Another participant found fruitful ground to offer help by working in a gambling setting, which means that his experiences as a gambler "qualified" him to advise and help others. While not directly mentioned by the participant, it could be that his current job in a gambling setting fulfils a compelling purpose for him to actively contribute to "fighting" against this addiction. On another note, the opportunities offered by the social media to reach out for a larger group of people with gambling difficulties that one of the participants is using seems to be worthy of further exploration as regards the power of influencers on people. Overall, helping others seems to be an effective way for the participants to also help themselves to deal with their own difficulties.

3.3.4 Subordinate Theme Four: Experience of Self with Others

This theme examines how the participants experienced themselves with others in the workplace. The participants observed change in themselves for their own unique reasons and most of them seem to adopt a negative stance towards this change, especially when interacting with others.

John seems to have experienced himself as not being the nicest person to be around with other people in the workplace as he alleged.

As John Commented:

Yeah. So, on the basis that, you know, I'm gambling all the time and I'm going for this horrible long lesson cycle of getting paid and spending all the money and you know, it can often lead to feeling really depressed and ...inaudible... depressed and miserable and, and short

tempered, perhaps short tempered and just not happy and just probably not the nicest person to be around. (Lines 178 – 183)

John talks as if he experienced a 'chain reaction' of events and behaviours that would be happening repeatedly. It seems that John did not want to experience this negative 'chain' as he considered it 'horrible'. All would start with him spending all his salary gambling, experiencing in consequence different emotions, such as depression and misery. Moving further along the 'chain', John would experience himself in a different way around others and finally it appears that he considered that as a colleague he was 'not the nicest person to be around' as he specifically suggested. On the other hand, by John suggesting 'probably', it seems that he experienced uncertainty around this realisation. Finally, it appears as if John was being punished for this behaviour as he equates this 'chain' with like learning a 'lesson'.

Similarly, to John, Tom seems to have experienced himself as 'not being the nicest person to be around', as he also explicitly suggested.

As Tom Commented:

I was still beating myself up and still you know, angry about the money I'd lost. If people would come to me for advice or help. Am I going to send them away or tell them I do not have enough time Umm...? essentially just not always the nicest person to be around. It's just there was no patience. There's no tolerance. (Lines 104 – 108)

Tom seems to have been hard towards himself as he suggested that 'I was still beating myself up' and this was happening for some time. Furthermore, Tom experienced anger about the money he lost gambling. All of this seems to have made him to behave in a different manner with people at work as he seems to want to send away people who would approach him for advice, by using different reasons to do so. All of this would be a result of him experiencing himself as less patient and less tolerant. Because of this Tom ultimately experienced himself as not being the nicest person to be around. Finally, by him suggesting 'not always' it appears that Tom did not experience the above every time but only in some occasions.

Jane seems to have been experiencing gambling having a big impact at her work and she considered herself at times to be an unreasonable person.

As Jane Commented:

That that was a very big thing. You know, I find that I'd be snappier. I'd be short, shorter tempered, then it would make me more of an unreasonable person, which I always was and

as a manager, I was always considered a fair person able to communicate and listen, clearly, I became less tolerant. Okay, there was a big impact on everything to do with work. (Lines 174 – 179)

Jane was making a sort of comparison between herself being affected by gambling and herself not being affected by it. It seems that when she would be gambling, she would experience herself with others in a different way. She suggested a variety of different observations that she made for herself such as being less tolerant with others. It looks like she would be behaving with others in an opposite way when affected by gambling. It seems that all of this was experienced strongly by Jane as she suggested 'That was a very big thing'. It looks as if the impact of gambling on the aforementioned was great and it seems that it is was mostly experienced at work, as she suggested 'big impact on everything to do with work'. All of the above seem to have left Jane experiencing herself as a more of an unreasonable person with others. Finally, it seems that Jane was confident about experiencing this as she suggested 'clearly'.

Mark experienced himself as being bad and frustrating at work especially when looking for opportunities to gamble.

As Mark Commented:

So, if I missed out on horse racing, which again wasn't a very often because I would, they said I would make time I would take diversions and head for places and things that are trying to find bookies so but if I if I made sure that if I didn't get my horse race on during the afternoon during work, then I would be finding somewhere need in the least get the football bets on doing so. But yeah, my, when I'd be bad, I'd be very frustrating at work. (Lines 471 – 478)

Mark seems to have adopted different methods to ensure that he would be able to gamble while at work such as taking diversions. It appears that his need to give himself an opportunity to gamble would lead him to act in such a way as it was suggested that not often Mark would miss an opportunity to place a bet on a horse race. It seems that the horse races would be a preference for Mark as if he missed an opportunity to place a bet on a horse race he would want to at 'least' bet on football matches. All of this would leave Mark experiencing himself as being quite bad at work and more specifically 'very frustrating'. Finally, all of this seems to not have been experienced very often by Mark as he appears to have been giving himself the opportunity to gamble when needed.

Concluding, the participants attested to experiencing themselves in negative ways when they are around with others at work. Not being the nicest person was an experienced condition shared by most of them; however, they attached different connotations to this feeling, which was the outcome of their gambling and the implications on their behaviour. While two of them referred directly to the experience of not being nice to others, the other two specified this behaviour by saying they were bad, frustrating or unreasonable. Whatever the description they used for their behaviour, there seems to have been a direct association between gambling in the workplace and the negative impact it had on the experience of themselves with others. Also, they all recognised these behaviours as being present and felt regret that may have led to desire for self-punishment as the case was for one of them.

3.4 Analysis Reflexivity

It was nice to see the biggest part of my portfolio taking form. I really enjoyed this process of analysing and reflecting upon my hard to gather data. So, I do not overwhelm myself I would set daily and weekly targets to meet for writing up the analysis of the project. It was a long and tiring process. While writing this piece memories about stories that I was told of my grandfather would come in mind. He passed away many years ago, but I felt that there are many similarities to the stories I have heard and to what the participants disclosed in their interviews. It was a strange feeling that I cannot really explain. It was neither sadness neither happiness. What motivated me highly was to do right by the participants and do my best to serve them and other gamblers who will benefit from this portfolio. I must admit that this added to my anxiety to push myself for more. I felt like I had a responsibility to do this analysis very well. I had to perform well for my family's sake for the grandfather that I never met.

This analysis was also written during the COVID – 19 lockdowns so it also served as a much-needed delightful company and occupation. Meeting targets and the time spent daily to fulfil this task was really enjoyable. The extra time that I had also gave me the opportunity to reflect upon my own biases about gambling. I have worked in the past for some years in a gambling related therapy setting as a trainee counselling psychologist. So, I thought that I already knew much. But the truth is that this was quite different than doing therapy. Outside of the protocols and by just talking with those people aided me to gain much more knowledge. I realised that there is much more to learn. So, a feeling of gratitude fills me up for having those people sharing their stories and teaching me through those so many things. The practical experience assisted me as well to have a good starting point and have already developed a keen eye for this research analysis. On the other hand, several biases were formed due to the practical experience that I had which were addressed in supervision to ensure the objectivity of the analysis.

As I said above the whole process was stressful, anxiety provoking and thus tiring. To counterbalance this and to make sure that the data are not affected in any way I made sure to follow a self-care routine. This included having a regular relaxation practice which provided my body with much needed rest in between the write up and meditation that gave my brain a much 'needed' breathing space. There were times that I felt overwhelmed by the quantity of the data, but I made sure to take some distance and some time off the process so that I don't do sloppy work. Also, I encountered situations where I was angry because I was trying to squeeze my mind to consider what the participant was saying in a deep level and could not. This anger was addressed in my own personal therapy.

In addition, I always thought of myself as impatient. But writing this up and seeing how conveniently I gave myself time for this process I learned that I have patience and that I can commit myself. Finally, Personal therapy was crucial to help me with this and setting up daily and weekly goals.

4.0 Discussion

In this study an examination of how individuals with a difficulty in gambling experienced their respective workplaces was carried out. The results revealed various implications among participants, which is indicative of the complexity of the relationship between gambling difficulties and workplace experiences. Through the participants' experiences it seemed that gambling did indeed alter to a varied extent the experience that they had of their workplaces. Even though at the time of the qualitative study most of the participants had achieved abstinence from gambling, they vividly remembered their past experiences when they had a difficulty with gambling. Most of the participants seemed to experience that they were engaging in a variety of gambling related behaviours, such as lying, to hide their gambling, and encouraging others to gamble in the workplace. Furthermore, they experienced themselves as being in another world when gambling and most of them were lured by gambling in their own unique ways. All of the aforementioned had affected the way the participants experienced their workplaces. Additionally, the participants seemed to experience a variety of private emotions that they kept to themselves mostly such as stress and shame which also had effects on their experience of the workplace. Moreover, some of the participants seemed to experience stigma in their workplace as a result of their difficulties with gambling. Furthermore, it seems that gambling altered how the participants experienced themselves in the workplace as they reported being short-tempered, not being the nicest people to be around and experiencing in their own way what is commonly described in clinical terms as being depressed. On the other hand, some participants used their experience of

gambling and the difficulties they faced to prevent others from gambling either professionally or even before they achieved abstinence, while still facing difficulties with gambling.

In the following chapter there will be a discussion of each subordinate theme, with their respective superordinate themes as headings, in relation to the existing literature. Thus, the first four Subordinate themes of the first Superordinate Theme termed 'The Bluff' will be presented and followed by the three Subordinate themes of the second Superordinate Theme termed 'The three S's'. Then the last four Subordinate Themes included in the last Superordinate Theme termed 'Experience of Self' will follow. The chapter will conclude presenting some clinical implications and implications for further research as well as some reflections of the limitations of the present study.

4.1 Superordinate Theme One: 'The Bluff'

The participants reported various experiences within this theme, and it aimed to examine all the gambling related phenomena that the participants experienced and how these have potentially altered their experience of the workplace.

Most of them experienced themselves like being in another world when gambling. This other world was either experienced as a trance, a drug or as a means of detachment from the real world and an opportunity to 'switch off' from a daily experience. Others were completely preoccupied with the outcome of the previous night's gambling and could not stay focused at work as a consequence. One participant reported that this preoccupation with gambling during work lowered his productivity. It was almost as if he were in a gambling world the other day at work. Overall, it was as if the participants were dissociating themselves at or after work because of their gambling-related activity.

A similar finding was reported by Derevensky and Gupta (2000) even though the participants were adolescents, and it was conducted more than 10 years ago. Nevertheless, they suggested that adolescent individuals would be experiencing numerous dissociative behaviours such as escaping to other worlds which were accompanied often with alter egos. A grounded theory study conducted by Wood and Griffiths (2007) investigated gambling used by individuals as a strategic behaviour to cope. Even though the focus of the research was on how gambling could serve as an escape, their findings suggested that the participants experienced retreating to alternate worlds that were gambling related. In a study by Hing &

Breen (2007) of a sample of employees in gaming venues, it was reported that the atmosphere in the gaming venues would create hype and get people excited about winning. These findings are supported by one participant in the present study, who described her experience in the gambling premises as perpetuating her feeling of being in 'Another World'.

A research conducted by Oakes, Pols, Lawn & Battersby (2020) examined the state of mind of individuals who were characterised as electronic gaming machine problem gamblers. Their state of mind was termed as the 'zone' by them, suggesting that they felt like being in an altered state of awareness. This state was aiding the participants with negative emotions by providing them with relief. This is similar to what the participants of the present study described as being in another world, which allowed them to switch off from everything they encountered in their day. Another similarity found was their difficulty to recall experiences while being in this 'Zone'. It was reported that getting out of this 'Another World' would be like waking up suddenly from almost being asleep. Difficulties with the participants' attention and awareness were found, while their cognitive functions were also reportedly affected. These findings are similar to what the participants in the present study suggested of being preoccupied with gambling while being in their workplace the following day. On another note the study conducted by the researchers had a different focus being the 'Zone' while the present research was more concerned with the workplace.

Concluding, even though the research compared with the research at hand had a different focus and one of them a different participant pool, similar findings were observed. It appears that dissociating to other worlds was a common theme across all the research. It appears that similarities can be observed even though experiencing 'Another World' through gambling was termed in a different way in some of the research presented. Apart from the similarities presented above the participants of the present study mentioned that due to this experience of like being in 'Another World' they would be experiencing a loss of their train of thought at work and impact their mental state. Furthermore, it was suggested that even though this 'Another World' would be experienced one participant experienced her gambling as a hidden addiction. Finally, the aforementioned theme was experienced by just thinking about last night's losses and it would be experienced as distancing the participants from their work as per their suggestions.

It could be suggested that some of the participants attempted to create a 'gambling world' in their respective workplace, as they encouraged their colleagues to gamble, which gave rise to the second subtheme. Among them, were individuals holding managerial positions in their workplace and would attempt to use gambling for their colleagues as an incentive. This

behaviour provided the participants with an ego boost and one participant specifically reported that acting as a bookmaker was beneficial to his 'Aura'. Furthermore, it seems that there was uncertainty about acting in such a way across the participants. On the other hand, one participant acted in a different way in her workplace compared to others as she attempted, while being a gambler herself, to secretly discourage other individuals to gamble.

This phenomenon has not been widely researched in other qualitative research concerning gambling and the workplace. Specifically, in this research only two participants seem to have encouraged in their own way and for their own reasons others to gamble in the workplace while one would attempt to act in the opposite way. Interestingly enough two of the participants of the study held managerial positions. It might be the case that the position of the individual at the workplace could play a significant role in either encouraging or discouraging employees to gamble. A relevant study by Hing & Breen (2007) investigated from a manager's perspective factors that encourage or discourage gambling amongst employees. Using content analysis and a large participant pool of gaming venue employees, the researchers reported that they identified as a risk factor the 'Staff hearing more for wins than loses' and seeing individuals winning can create a hope for winning. None of the participants in the present study reported similar experiences. One of the risk factors that Hing & Breen (2007) identified, concerning 'Influence of Fellow Employees on Employee Gambling', is the possibility that when employees see the majority of their colleagues gambling after work they might attempt to gamble as well. Furthermore, the researchers examined the risk factor of employees being influenced by their managers as well as other policies and practices in the gaming venue workplace. In this risk factor they included the managers being gamblers themselves and setting an example for the others. This is similar to what two of the participants experienced being managers themselves. Also, the two researchers suggested about the 'gambling culture' of the venue which is similar to what one of the participants of the present study suggested as it appeared that gambling was an acceptable behaviour in his workplace. On the other hand, there was one participant who acted in the opposite way as she tried to discourage other individuals. This finding is in agreement with Hing & Breen (2007) research suggesting that a protective factor discouraging gambling in the workplace could be the employees themselves offering advice and support to each other to abstain from gambling. More recently, Hing & Gainsbury (2013) conducted a quantitative research examining the protective and risk factors for gambling problems in the workplace. This research as well was targeted to gaming venue employees. Their results suggested that one risk factor is the encouragement that the colleagues can give to one another.

Concluding, despite limited available secondary evidence regarding the encouragement of others to gamble in the workplace, the findings of the present study are consistent with the evidence found with the two studies mentioned above. Similar suggestions were made even though the researchers used as a comparison different participant pools from the present study. It is worth mentioning that the participants of the present study were from various professions, ages and places of the United Kingdom, while the research compared was conducted specifically in Queensland Australia, and since similar findings were reported it could be suggested that the results might not have been affected by cultural factors, but further research is required in order to confirm this suggestion. Apart from the aforementioned the participants who would encourage others to gamble in the workplace would be experiencing ambivalent feelings feeding their ego on the one hand and uncertainty around their motivation to engage in such an encouragement while another participant who would act in the opposite way discouraging others would attempt to still keep her gambling a secret. Some points to consider here, linking the two subthemes together namely 'Encouraging Others to Gamble in The Workplace' and 'Another World' would be whether individuals who are gambling are trying to transfer this another world experienced in their respective workplaces and if indeed the position of the individual who gambles determines if they are going to encourage or discourage other colleagues to gamble.

Furthermore, despite some participants 'luring' other colleagues to gamble, most of the participants experienced in various unique ways an 'Ongoing Lure of Gambling'. This is the third subtheme examined in the present research. The participants reported being lured into gambling by emails and advertisements that contained free bonuses, having positive thoughts about winning and feeling excited to gamble which either happened during work hours or had effects on the experience of employment of the participants. In addition, they reported a strong sense of hope to either escape from their current financial situation or lifestyle. Also, the 'lure' presented itself for the participants as cravings and urges. Moreover, one participant suggested that due to the nature of his profession he felt lonely and gambling provided him with much needed company. Nevertheless, not all of the participants experiencing the 'lure' would attempt to encourage or discourage other colleagues to gamble.

Derevensky, Skar, Gupta and Messerlian (2010) investigated empirically the impact advertisements have on gambling attitude and behaviours. The study was focused on adolescents. Their results reported similar findings with what one of the participants of the present research commented about advertisements, as the researchers suggested that a large majority of their participants were exposed to a form of gambling advertisements either on the internet or the television. Instead of receiving emails with free bonuses their participants

perceived these advertisements as suggesting that winning money through gambling is easy and that there are high chances of winning as well. Interestingly enough, the majority of their participants suggested having awareness around gambling pitfalls and adopting a dismissive stance around these advertisements, but a large proportion of the participants were prompted to engage in gambling related activity. The researchers concluded that the advertisements do not necessarily serve as 'luring' new adolescents into gambling but rather preserving the individuals who already gamble. Similar findings were reported by one participant of the research at hand as she would be prompted to gamble by advertisements containing free bonuses, as she considered herself being a gambler at that point. Despite some similarity in the findings, differences are observed. For instance, the participant of the present study would receive free money to gamble, a variable not examined in the previous research, which was also focused on adolescents.

A study investigating the activity of the brain during cocaine and gambling cravings using functional Magnetic Resonance Imaging (fMRI) assessed 103 participants while observing videos demonstrating cocaine consumption or gambling behaviour as well as sad scenarios. In this study, it was suggested that individuals who were identified as Problem Gamblers demonstrated a strong activation of their dorsal ventromedial prefrontal cortex (mPFC) while observing a video stimulus demonstrating gambling activity (Kober, Lacadie, Wexler, Malison, Sinha & Potenza, 2016). Euston, Gruber, and MacNaughton (2012) suggested that the mPFC is responsible for the individuals' decision-making processes. These suggestions might have been experienced by the participants of the present study. Also, Kober et al. (2016) suggested that the videos observed increased the urges and cravings of the participants. Finally, this is similar to what the participants suggested of having urges and cravings to gamble but not necessarily while watching gambling related videos, but by seeing advertisements or having internal thoughts about winning.

Concluding the urges and cravings of gambling have been supported by neurological observations and findings but in response to a video stimulus while the participants of the present study did not seem to need a video stimulus to experience cravings and urges. Another study on adolescent gambling seems to have concluded that the advertisements are utilised more to 'lure' and trigger individuals who already gamble which was similar to what the participants of the present study described. Even though the research compared had a different participant pool, similar findings were observed. Finally, the two researches compared did not have as a focus the workplace.

Even though some participants would encourage or discourage other colleagues to gamble in the workplace, which could indicate to their colleagues that they are gamblers themselves, experienced being 'lured' by gambling agents or internal thoughts, and experienced alternate worlds by gambling that provided one participant with being able to 'switch off' and others experiencing visible consequences to their ability to work most of them would utilise lying to hide their gambling in the workplace. One participant reported that as a result of excessive lying he would start having difficulty distinguishing between the truth and a lie. Another participant would be lying to secure income for gambling. Another participant would be lying to get away from work so that she could have the opportunity to gamble. Finally, another participant reported experiencing a big 'lie' internally as he thought that he was gambling to win, which reflecting back he thought that it was a lie.

Considering Gambling Disorder for the latest edition of the Diagnostic and Statistical Manual of Mental Health Disorders V (DSM – V) (American Psychiatric Association, 2013), a research was conducted examining the Gambling Disorder (replacing former name, Problem Gambling) prevalence as well as the characteristics that accompany it and the validity of the diagnostic criteria. The researchers in one of their criteria included behaviours of individuals who lie about their gambling related acts (Rennert, Denis Peer, Lynch, Gelernter and Kranzler, 2014; Whiting, Hoff & Potenza, 2018). Even though the DSM - V is a clinical manual suggesting symptoms and clinical diagnoses and is presented as an external lens, the participants of the research at hand reported as well engaging in lying behaviours about their gambling. It is worth mentioning that for the present study the participants gave more information about the nature and the purpose of lying about their gambling and not for clinical reasons. They were individuals who considered themselves to be having difficulties with gambling, so they did were necessarily labelled as having Gambling Disorder.

Since lying about one's gambling is classified as a symptom of Gambling Disorder extended research has been conducted mainly examining the prevalence of gambling on a specific population. An indicative study is by Gallaway, Fink, Sampson, Cohen, Tamburrino, Liberzon, Calabrese & Galea (2019) who examined the prevalence of problematic gambling amongst a cohort of the United States military. Furthermore, other authors have reported that it is typical for individuals who consider having difficulties with gambling to engage in lying to their peers or even family members about their gambling (Hunt & Blaszczynski, 2019).

Concluding, lying about gambling as a clinical symptom has been extensively examined. The findings are in agreement with the findings of the present study, which investigated individuals' experiences of gambling and the workplace. None of the studies utilised in this excerpt had a

specific interest for the workplace but nonetheless similar findings were noted as the ones with the workplace. Finally, from the present study it seems that most participants suggested utilising lying mostly as behaviour to keep their gambling a secret.

4.2 Superordinate Theme Two: 'The three S's'

The first Superordinate Theme 'The Bluff' seems to have led the participants experiencing emotions and phenomena which seem to be experienced as private such as stigma, stress and shame. Again, the aim here was to examine how the aforementioned were experienced in the workplace.

In addition, it was suggested that the participants experienced stigma due to having multiple roles, such as being a mother, working and gambling, and as a consequence of the disclosure of their gambling difficulties in the workplace. It was further suggested by the participants that stigma would be overshadowing the characteristics of their personality as well as who they are as individuals and that in certain occasions it would come naturally in the workplace as people who gamble lie to shield their gambling.

Hing et al. (2016) concluded that individuals who gamble face public stigma and this is affecting their mental health as well as how they use their healthcare services. This is in line with what the participants of the present study suggested about experiencing stigma. A study conducted in Singapore, suggested that stigma is a barrier to individuals, who have had a gambling episode, in seeking treatment. Specifically, 20.8% of their participants suggested experiencing stigma (Zhang, Yang, Guo, Cheok, Wong & Kandasami, 2018). Likewise, in a study conducted in Australia it was suggested that stigma is a barrier to individuals in seeking treatment for their gambling difficulties. The researchers in Australia specifically suggested that even though gambling is an acceptable act in Australia, when it becomes problematic for the individual then it is considered differently and is met with stereotypes as well as stigma (Brown & Russell, 2020). When the researchers made suggestions about problematic gambling they meant individuals who meet the criteria of diagnosis of Gambling Disorder as suggested in the DSM – V manual (APA, 2013). Even though the present research had a different focus and a different population compared to the literature presented above, the participants suggested experiencing stigma. This was a similar finding to what the literature presented.

Lopez - Gonzales, Estevez, and Griffiths (2019) conducted a study which investigated if positive social perception accompanied with the lower stigma associated with sports betting

could be a problem. By creating focus groups to draw data and then using thematic analysis to analyse the data the researchers concluded on two main themes emerging. These themes suggested the lack of negative tone towards sports betting while concluded on the presence of a positive tone that could be classifying sports betting as a harmless behaviour. Their study, examining the possibility of the workplace as acting as an environment where sports betting is normalised, suggested that this is something that their participants encountered as a result of social normalisation. These findings seem to be different compared to the stigma the participants experienced because of their gambling. On the other hand, when examining the other theme 'Encouraging others to gamble in the workplace' there is the occasion of two participants who reported that in their workplace they were rewarded because of condoning betting and acting as a bookmaker, by having their ego boosted. From their suggestions it appears as if betting specifically would be an acceptable behaviour. It could be said that in this scenario there are conflicting findings as there are a few participants who experienced stigma because of their gambling while others because of accepting bets from their colleagues they had improved their image in the workplace. Considering that and the research of Lopez - Gonzales et al. (2019) it appears as if sports betting is almost like a habit that is differentiated from gambling. Questions are raised considering as well that only a few of the participants experienced stigma in the workplace because of their gambling.

Comparing the results with other research, it appears that the type of gambling an individual engages in plays a role in the stigma that a person will encounter as betting on sports, as reported by previous research, seems to be socially more acceptable in the workplace, while other forms of gambling seem to receive more stigma. Additionally, considering previous research it seems that social stigma around gambling could lead to the classification of individuals as problem gamblers while other individuals who bet on sports even if this causes difficulties in their lives do not seem to receive such a classification from others or treated in a different manner. Further research is needed though to investigate thoroughly this claim. On another note, the participants of the present study suggested experiencing like being overshadowed as human beings for their gambling due to stigma while having multiple roles seems to have been experienced as adding to it. It could potentially be suggested that the gambling phenomena experienced in the first superordinate theme could potentially lead the participants of the present study to experience stigma.

Another theme examined was the experience of stress. The participants reported experiencing stress attributed to their gambling and this caused certain difficulties at their respective workplace. Furthermore, the participants of the present research, reported experiencing burn-out as a result of their gambling and stress as a motivating factor to keep them going.

Furthermore, they suggested that the stress experienced at work was mainly caused by external factors, such as gambling. Finally, most of the participants seemed to experience gambling-related stress at work because of the financial implications of gambling.

In a study conducted comparing individuals who have been classified as Problem Gamblers and healthy controls, it was suggested that people who gamble pathologically reported their expectations of gambling relieving negative emotional states such as stress (Hing et al. 2016; Ciccarelli, Griffiths, Nigro & Consenza, 2017). Even though a similar finding was reported by a participant in another theme that gambling provided an escape from daily positive or negative encounters, most of the participants, when making suggestions about their experiences of stress, suggested that gambling would cause them to experience stress at work. This seemingly different finding could potentially be attributed to the different focus of the study conducted by Ciccarelli and her colleagues (2017) who investigated how various factors are considered for Gambling Disorder, such as decision making, cognitive distortions and emotional factors. The present study examined the general experience of the workplace. Also, the participants of the 2017 study were individuals with a diagnosis of Gambling Disorder while most of the participants of the present study had achieved abstinence from gambling by the time of the interviews.

Another study conducted by Maniaci, Goudriaan, Cannizzaro & van Holst in 2018 examined the effect that the Trier Social Stress Test had on cortisol as well as on the interbeat cardiac rhythm in relation to impulsivity. The participants were individual male gamblers who had received a diagnosis of Pathological Gambling and were compared with healthy control groups. The results suggested a negative correlation between the baseline cortisol levels and the duration of pathological gambling. These results dictated that the individuals who had been diagnosed with pathological gambling disorder longer were found to have lower baseline cortisol levels (Maniaci et al. 2018). Sherman and Mehta (2020) suggested a relationship between high cortisol levels and stress. This finding could be different from the findings of this research even though the duration of the gambling experience of the participants was not measured or examined. On the other hand, the difference could be attributed to the fact that the participants of the 2018 study had received a diagnosis of Gambling Disorder, while the participants of the present study self – acknowledged that they had difficulties with their gambling behaviour. Finally, there seems to be a relationship between gambling and stress, and as Maniaci et al. (2018) suggested a negative correlation between pathological gambling and stress.

In a more recent study, conducted by Catherine, Matthew, Min and Francis in 2019, it was suggested that individuals who demonstrate high levels of work stress could be led to experiencing burn-out and as a result to experience dysregulation. Furthermore, the researchers suggested that individuals might utilise gambling as a means to escape from these negative experiences. This is also different from what the participants of the present study reported, who also suggested experiencing gambling as an activity that is increasing stress in their workplace.

The majority of the participants of the present study reported experiencing stress in their workplace that was attributed to their gambling related activity. It is worth considering that most of the research investigating the relationship between gambling and stress treated gambling as a clinical diagnosis like Gambling Disorder, thus adopting an external lens. Even though in the present research some of the participants could potentially meet the diagnostic criteria to receive a diagnosis of Gambling Disorder since the focus was the experience that these individuals had in the workplace this external lens was not considered as I considered that having this external lens would preoccupy me as a researcher when analysing the data as well as in this discussion. Thus, not utilising this lens as well as not limiting the participants to only those who have received a diagnosis could be considered to be differentiating the present study from the research compared as investigating populations that even though have loads of similarities they also could potentially have important differences. Individuals who have not been diagnosed but still consider themselves as having difficulties with gambling were not investigated. All of the research considered suggests a relationship between gambling and stress. It could be considered that stigma could lead the participants of the present study to experience stress. On another note they did not explicitly mention that stigma would cause them to experience stress, but it was rather mostly linked to their gambling related activity. Nevertheless, higher levels of having awareness of stigma as well as stigma application have been found to be associated with increased stress, decreased overall physical health as well as decreased health care satisfaction (Boyle & Fearon, 2018).

The participants reported several experiences within the phenomenon of shame. It could be suggested that stress and stigma about gambling could lead the participants of the present study to experience shame. Even though not explicitly suggested some participants were not letting their colleagues to be aware of their gambling related activity due to feeling ashamed and one participant suggested feeling distressed and uncomfortable by the fact that his colleagues could see that something was 'wrong' with him. Moreover, one participant suggested that the shame and not being able to share her experience with her colleagues was experienced by her as the biggest impact of gambling. Most of the participants reported being

ashamed because of their gambling related activity. Finally, another participant experienced gambling related shame at work when his colleagues and friends lost their trust in him for learning about his gambling habits.

Schlagintweit, Thompson, Goldstein & Stewart (2017) suggested that shame has a strong positive association with Problem Gambling. This was a similar suggestion with the present study, as many of the participants experienced shame at work attributed to their gambling behaviour. Furthermore, Schlagintweit et al. (2017) suggested that shame is also associated with what are considered to be maladaptive coping strategies. Their study aimed to investigate if coping motives that are not adaptive for gambling can potentially mediate the relationship between shame and gambling problems. Their results suggested that shame can contribute to problem gambling. This was observed as a result of utilising gambling to cope with negative affect. Finally, this finding was not reported by the participants of the present study apart from one participant who experienced shame suggested that he utilised gambling as an escape.

Miller & Thomas (2017) suggested that gambling is associated with stigma as well as stereotyping. Their research findings suggested that these negative stereotypes which are usually criticising the personal responsibility of those who gamble, led gamblers to experience shame. Finally, even though the researchers had a more specific focus on their study linking stereotyping of gambling with stigma and as consequence individuals who gamble, feeling shame, both the 2017 study and the present study suggested that the individuals who had gambling difficulties experienced shame.

Mondolfi (2017) conducted a non – experimental study examining and comparing shame levels and gambling levels. Participants who had received a diagnosis related to gambling took part in the study. The results of the research suggested that individuals who reported having higher levels of gambling experienced higher levels of shame while as the gambling levels dropped the participants experienced lower levels of shame when comparing the two groups. Similarly, to the previous study compared even though Mondolfi's (2017) study had a specific focus shame was associated with gambling which is similar to what the participants of the present study reported. Finally, the present study did not measure the levels that the individual participants gambled but only their experiences.

Concluding, the participants of the present study reported experiencing shame at work because of their gambling related activity. Even though most of the research compared with the present research, specifically investigated shame and not the experience that individuals

with gambling difficulties faced in the workplace a relationship between gambling activity and shame was suggested.

4.3 Superordinate Theme Three: 'The Experience of Self'

All of the aforementioned superordinate themes as well as subordinate themes could lead individuals experiencing an alternative self, due to gambling and in the workplace. Those past experiences could lead them to become 'Short Tempered', 'Depressed', 'Not the Nicest Person to Be Around' and using their own experience in 'Helping Others'.

The participants reported experiencing themselves as being short tempered in their workplace as a result of their gambling related activity. Specifically, they suggested being increasingly short tempered and snappier at work while this phenomenon was experienced at work as being dependent on the gambling outcome of the night before work. Losing money seems to have made the participants experience this phenomenon, while one participant reported becoming physically aggressive.

Not enough research has considered short – tempered experiences of self as a result of the individual's gambling behaviour. Downs & Woolrich (2010) examined the impact that gambling and having a debt has on family as well as on work life. Examining this subject qualitatively the researchers suggested that acts like aggression and short-temperedness were reported as behaviours of many individuals who were classified as problem gamblers. Both the present research and the Downs & Woolrich (2010) research had a similar focus of the workplace and work & family life respectively and reported similar findings. Finally, both researches suggested that individuals who gamble reported experiencing short – temperedness.

A more recent study conducted in 2019 by Jehangir investigated the psychological, social as well as physical effects of gaming addiction and specifically what is termed as Internet Gaming Disorder. In his study a large percentage of the participants suggested that they felt short – tempered while gaming. This was a contradictory suggestion to the present research where the participants did not suggest being short-tempered while in the process of gambling but mainly the day after engaging with it being at work. Also, in the present study the participants suggested being short-tempered as a result of their gambling debt but not while in the actual act of gambling. Even though the 2019 study's focus was gaming addiction King, Gainsbury, Delfabbro, Hing and Arbarbanel (2015) suggested that gambling and gaming are sharing similar features. These similarities exist both in a structural and an aesthetic level.

Concluding there seems to be limited research considering experience of short – temperedness. The present study reported participants experiencing themselves being short – tempered in the workplace mostly the day after engaging with gambling. Other research reported participants experiencing being short – tempered while in the act of gaming. Another research which considered the effects of gambling debt in the family and work life reported similar findings of their participants experiencing short – temperedness. Being short – tempered in the workplace seems to have had participants experiencing several repercussions. For example, one participant suggested experiencing herself as an ‘unreasonable person’ because of her being short-tempered as well as less tolerant of her workplace. Another participant as well reported being led to being physically aggressive which led him to be investigated and being ‘fired’ from his work while another one equated his short – temperedness with being unhappy.

Considering that the aforementioned themes, being gambling behaviours or gambling induced experiences as suggested by the participants it was considered that they could lead an individual to experience depression without having a clinical diagnosis. Thus, the next theme examined how the participants experienced being depressed because of their gambling, and how this might have influenced their experience of the workplace. Even though depression is used as a clinical term the aim was to examine how the participants experienced it themselves. The participants experienced depression and as a consequence had several implications on their workplace as they reported experiencing differences in their relationships with their colleagues and also lower self-esteem. Finally, the participants reported experiencing being depressed mainly because of the financial difficulties that gambling caused them to have. For example, one participant suggested that he experienced being depressed because of chasing his losses and another participant for having financial difficulties.

A study conducted by Jauregui, Estevez and Urbiola (2016) examined several difficulties in individuals who have been classified as Problem Gamblers. The difficulties examined were emotion regulation, drug and alcohol abuse and anxious as well as depressive symptomatology. Even though the researchers treated depression as a symptomatology and the participants of their research had received a diagnosis of Problem Gambling the results suggested similar findings. Specifically, individuals who had a diagnosis of Problem Gambling, compared to individuals who did not, demonstrated more depression. This is similar to what the participants experienced in the present study. Finally, individuals in the research conducted suggested experiencing depression, which is commonly a term used in the medical model, but the external lens of being a clinical diagnosis was not utilised. The focus was how

the participants experienced being depressed without looking to meet certain diagnostic criteria or treating it as a symptomatology.

Churchill and Farrell (2018) conducted research investigating the impact of gambling on depression. Their results suggested that there was a positive association between gambling and depression. Even though they treated depression as a clinical condition while measuring gambling behaviour quantitatively they reported similar findings with the present study. Indeed, a number of participants experienced feeling depressed at work and generally in their lives because of their gambling related activity. Finally, Churchill and Farrell (2018) also suggested that individuals who gamble online are at a greater risk of demonstrating mental health risk.

Concluding, even though the researches compared with the present study had different goals, treating gambling and depression as a clinical symptomatology and were not specifically targeted to the workplace, similar findings of gambling being linked with depression were suggested as the participants of the present research experienced themselves as being depressed.

Moreover, gambling having altered the experience that the individual participants had of the workplace, it could be suggested that some of them could potentially want to aid others using their experience in an attempt to prevent them from experiencing the same. Thus, this theme examined how the participants experienced in the workplace the phenomenon of helping other gamblers who faced difficulties. The participants reported helping other individuals in the workplace who would disclose their gambling difficulty to them. This was conducted mainly by providing other individuals with advice using their own experience. A participant suggested acting in such a way at her workplace while other participants after having achieved abstinence from gambling would do so as a profession. Finally, a participant would aim to help other gamblers by utilising his former gambling experience in the social media.

There is no evidence of research examining how the participants who faced difficulties with gambling have helped other gamblers in the workplace or have used their past gambling experience to help other individuals who gamble achieve abstinence or prevent them from doing so and offering their help in a professional capacity. On another note, research concerning treatment outcomes of engaging in Gamblers Anonymous (GA) meetings could be suggested to be similar to individuals who gamble helping other gamblers achieve abstinence. Gamblers Anonymous are 12 – step groups that are often self – help and peer – support groups. Not much research has been conducted in GA as one important factor of the

group is anonymity, so it is hard for researchers and non – gamblers to engage with (Jim Rogers, 2019).

Conducting a research in an Alcoholics Anonymous (AA) Group John Francis Kelly, Molly Magill, & Robert Lauren Stout (2009) reported that such groups can aid in promoting self – efficacy, coping skills and motivation by assisting people develop supportive and pro-social networks. Even though having the same principles there are slight differences between AA and GA meetings (Rogers, 2019). Some of those findings of Kelly et al. (2009) seem to be identical to what the participants reported such as by helping others enhancing their motivation. Rogers (2019) conducted a qualitative study examining GA in the United Kingdom. In his results it was suggested that having experience of gambling gives the individuals who attend a thorough insight into the nature of the difficulties that gambling can cause but he argued that there are drawbacks. Such are the individuals not having the necessary knowledge or skillset to deal with a range of comorbid conditions that can occur in such meetings.

Lyn Evans & Paul Delfaboro (2005) acknowledging that in Australia a small proportion of individuals with gambling difficulties seek help aimed to examine what motivates individuals to seek help and what barriers they faced. Their results suggested that the motivators were mostly crisis driven while barriers were shame, denial, lack of knowledge and dislike of treatment agencies. Nerilee Hing, Margaret Tyice, Louise Holdsworth and Elaine Nuske (2013) conducted a similar research for the concerned significant others of individuals with problem gambling aiming to examine the barriers and the motivators of seeking assistance. Their results reported similar findings especially for the barriers. Shame seems to have been a barrier also identified in both researches conducted.

Concluding the phenomenon of having former or current gamblers working and using their experience to aid other individuals who face gambling difficulties has not been researched before. It seems that one of the current available treatment methods involves individuals who were formerly gamblers aiding others who face similar difficulties, and this is almost similar to what the individuals of the research at hand reported experiencing helping others using their experience. Considering former research in the barriers that individuals who gamble face in seeking treatment could give us more information on how the experiences of individuals who formerly or currently gamble in aiding individuals with gambling difficulties could potentially be utilised in overcoming those barriers. The implications of this finding are discussed in more detail in the clinical implication part of the discussion.

The final subtheme examined how the participants experienced themselves with others in the workplace. It was also focused on when the participants would be gambling. Many of the participants experienced themselves in a different manner in the workplace with some suggesting 'not being the nicest person to be around'. Others reported being angry in the workplace, less patient and tolerant and one participant reported experiencing himself as being quite bad at work, frustrating and being an unreasonable person.

Maniaci, Picone, Holst, Bolloni, Scardina & Cannizzaro (2017) suggested that pathological gamblers demonstrated higher levels of anger. Even though the research compared had a different goal and did not examine the workplace and also involved participants who were classified as problem gamblers this is similar to the finding of the present study of a participant experiencing himself as being angrier at work because of gambling. Even though this is similar to being short – tempered there is a 'thin' line that separates being angry and being short – tempered. The former focuses on becoming angry easily and not necessarily being in an angry state. Thus, being short – tempered was conceptualised as the experience of someone becoming angry easily thus, it is a manifestation of the underlying emotion of anger.

It could be potentially suggested that losing patience could be experienced by individuals with gambling difficulties. This is suggested as GA meetings seem to have an emphasis on the patience of individuals who attend their meetings (Schuler, Ferentzy, Turner, Skinner, Mclsaac, Ziegler & Matheson, 2016) and in the present study participants reported being less patient.

In addition, Brunborg, Hanss, Mentzoni, Molde & Pallesen (2016) suggested that individuals who gamble scored higher on neuroticism and lower on conscientiousness and agreeableness. Using the Mini – International Personality Item Pool, the researchers suggested that individuals who gamble could have differences in the aforementioned personality traits with individuals who do not gamble. This could be similar to what the participants experienced of their personalities changing in the workplace because of gambling.

Similar findings were reported across various research, even though the focus was not on the workplace. It appears that former research has suggested that individuals who gamble report differences in personality traits such as neuroticism, conscientiousness and agreeableness while the participants in the present study suggested that gambling altered the way they experienced themselves in the workplace. Furthermore, participants in the present study reported experiencing anger in their workplace because of gambling while research compared suggested that individuals classified as pathological gamblers demonstrated higher levels of

anger. Finally, most of the research compared classified individuals as being Problem Gamblers while the participants of the research at hand considered themselves as having difficulties with gambling.

Concluding by the participants experiencing themselves as being short – tempered, depressed and ‘not the nicest person to be around’ it seems to have aided the participants experiencing their relationships with others in a different way in the workplace, making them experience unhappiness, inability to meet work obligations, lowered their self – esteem and negatively affecting their overall health leading them to need to engage with absenteeism according to what they suggested. Finally, helping others to achieve abstinence provided participants with novel job opportunities while it seems that it aided them experience having purpose as well as helping the participants as they suggested dealing with their own difficulties.

5.0 Clinical Implications

The implications suggested below have taken into consideration the suggestion of Rafi et al. (2019) that the workplace is an important health promotion environment as it has the ability to address many individuals at the same time. On the other hand, it might be costly to address all the workplaces at once. Considering the prevalence according to occupational groups it would be essential to target professional populations that are at a higher risk of developing difficulties with gambling. For example, it would be essential to target the implications in the three occupational groups that are at a higher risk of developing gambling difficulties as per the suggestions of Binde et al. (2020) being construction workers, individuals with no stable workplaces, vehicle drivers and individuals who do work that is considered monotonous indoor work.

5.1 Education Around Gambling

By reviewing the participant interviews, the analysis and the discussion, the first clinical implication that I could identify would be to educate individuals in the workplaces around gambling. By doing so, many difficulties could be potentially overcome, such as explaining the physiology behind gambling to individuals in the workplace, using plain language so that it is understood. This knowledge could contribute to potentially reducing stigma around gambling while other former gamblers could share their story in an attempt to educate the employees of a company. Even though gambling only has effects on a small proportion of a company staff it would be essential to involve all employees in the educational intervention as it could also have preventative effects. Additionally, many individuals who struggle with gambling are

not recognised (Potenza, Balodis, Derevensky, Grant, Petry, Verdejo – Garcia & Yip, 2019). Also, there is a large percentage of individuals in the UK who have gambled at least once the past year according to the report prepared for the gambling commission published in 2018 (Conolly, Davies, Fuller, Heinze & Wardel, 2018). Potentially, stigma and stereotyping could be reduced, managers could be discouraging employees to gamble at the workplace or be ready to refer individuals who are spotted to face difficulties with gambling at the appropriate services. Also, an educational intervention would potentially aid individuals with gambling difficulties themselves, as the literature suggests that individuals who gamble are more prone to having erroneous beliefs about randomness and chance without having a difference on their knowledge of objective odds (Delfabbro, Lambos, King & Puglies, 2009).

Delfabbro et al. (2009), even though their focus was on schools, concluded on the importance of them having different and specialised strategies in delivering the necessary material and for the appropriate population. This will allow individuals in schools, to be able to make an informed decision about choosing to gamble as per the researchers' suggestions. Thus, considering the clinical implication about the need of educating the workplace around gambling and according to Delfabbro et al. (2009) suggestions about schools the population of the workplace receiving the necessary material should be considered. In another research, Keen, Anjoul & Blaszczyński (2019) the researchers proposed another theoretical framework, which recommended advancements such as applying a developmental as well as a cognitive framework of problem gambling improving engagement. Another recommendation of the researchers, was to attempt to expose the misconceptions of problem gambling, teaching new complex information such as maths involving statistics and finally using computer assisted methods to assist in the visualisation as well as make simulations. This would be essential considering the fact that some of the participants seemed to be experiencing themselves being more engaged with gambling rather than work.

Ellison, Vale & Ladouceur (2017), taking into consideration that erroneous beliefs around an individuals' outcomes and abilities are considered to contribute in the maintenance as well as the development of gambling behaviours conducted a research comparing individuals who gamble and had an educational intervention condition with controls who had an alternative intervention. Their results suggested that the educational intervention was crucial in reducing the aforementioned beliefs and it was most effective in individuals who demonstrated severe gambling behaviours.

This educational implication to address even further people could also be delivered in the form of a wider campaign. For example, Tong, Hung, Lei & Wu (2018) investigated the

effectiveness of a 'Responsible Gambling' campaign in the Macao population. Their results suggested that the promotion of such responsible gambling practice has the potential of reducing gambling problems. So, educating individuals around responsible gambling practices and around gambling in general altogether in the form of a wider campaign could help reduce the difficulties that individuals experience with gambling. On another note, this needs to be researched further to confirm the effectiveness of such a campaign.

Concluding, even though the research presented here did not have a focus of the workplace and mostly education around gambling in schools was presented, the same educational methods to inform individuals around gambling could be utilised in the workplace. Finally, seeing the participants of the research suggesting and reporting stigma and along with encouraging others to gamble in the workplace, an educational intervention around gambling in the workplace could assist in combating those difficulties in employment.

5.2 New Coping Methods

Considering what Schlagintweit et al. (2017), suggested about gamblers experiencing more shame and shame being associated with maladaptive coping strategies, and the participants of the research at hand suggesting experiencing shame because of their gambling behaviour at the workplace, it could be suggested that teaching individuals in the workplace new coping strategies, individual gamblers could be benefited, as well as those who choose to use gambling as a coping method.

An intervention that could be promoted in treatment services as well as in workplaces is the Dual – Focused Schema Therapy. Even though commonly used for individuals who suffer from personality disorders and addiction, it involves teaching individuals new coping methods as well as coping with cravings. The individuals engage in individual therapy as well as skills training. Even though this modality has showed high dropout rates from treatment the researchers argued that the treatment setting that the model was implemented needs to be taken into consideration as it might have affected the results (Kienast, Stoffers, Bermpohl & Lieb, 2014). Thus, considering what the model has to offer, and applying it for individuals who face difficulties with gambling, it could potentially be used to aid individuals in the workplace, as it specifically seems to target coping methods. This suggestion though will need specially trained professionals that some companies might not be able to afford, and some others might not wish to invest in it. On the other hand, having this treatment method available in treatment services and informing employers about its availability could aid individuals who are employed

and are facing difficulties with their gambling and especially those who utilise gambling as a coping method.

Teaching mindfulness could be an effective alternative coping strategy for individuals who are facing the risk of relapsing (Marlatt & Donovan, 2005). In another study conducted in individuals who had gambling difficulties it was suggested that the individuals managed to learn how to use mindfulness techniques in an attempt to improve their ability to cope, their self-control as well as their ability to calm themselves down and experienced having more control over their gambling behaviour (Chen, Jindani, Perry & Turner, 2014). Considering the fact that the participants of the study reported experiencing stress, Mindful Breathing, could potentially aid individuals who gamble cope with distressful situations or lower their stress levels.

Concluding, there seems to be a need to teach individuals who face difficulties with gambling and are employed new coping strategies, in an attempt to assist them with their experience of shame as well as the maladaptive coping strategies that seems to be associated (Schlagintweit et al., 2017). Dual – Focused Schema therapy could have applications on the workplace for individuals who face gambling difficulties, as one focus of the modality is to teach new coping strategies to the individual. Finally, mindfulness could be used as an alternative coping strategy for gamblers (Marlatt & Donovan, 2005) and Chet et al. (2014) demonstrated that it could be effective, thus mindfulness could be taught to individuals who gamble and are employed.

5.3 Regulation

Having worked with many individuals who struggle with gambling and verifying in the research at hand, as well as in other research compared, that individuals with gambling difficulties experience being short – tempered and angry and some even being led to be aggressive when their work is not allowing for much time to gamble, or due to their debt or losses, it could be said that teaching individuals who gamble emotional regulation skills would be useful.

Considering as well that shame has an association with gambling and also that gambling is often used for coping with negative affect (Schlagintweit et al., 2017), as well as the participants of the present research experiencing shame because of their gambling, it would be useful to incorporate emotional regulation skills training for individuals with gambling difficulties and for workers who might be at a higher risk of developing a gambling habit due to them experiencing negative affect. Also, shame would be an important emotion to be able

to regulate as Miller & Thomas (2017) suggested that stigma and stereotyping can lead individuals to experience shame and Brown & Russell (2020) suggested that stigma is considered to be a barrier for individuals in seeking treatment. So, it could be suggested that being able to regulate an emotion such as shame it would be of importance for individuals with gambling difficulties who are working as well.

Such an intervention to teach individuals emotional regulation could potentially be the Dialectical Behavioural Therapy (DBT) emotional regulation skills training. Alireza Azizi, Boriali & Golzari (2010) conducted a research investigating the effectiveness of emotion regulation skills training based on DBT as well as Cognitive Therapy. The researchers wanted to see if those interventions could improve emotional regulation, distress tolerance and prevent individuals who were considered to be addicts. Their results suggested that those interventions were more effective than naltrexone in enhancing individuals' emotional regulation. Thus, it could potentially be a viable intervention to use in individuals who experience difficulties with gambling and are employed. Even though the DBT process skills training has demonstrated not having significant improvements on the gambling behaviours of individuals it significantly aided them to lower their psychological distress, mindfulness as well as distress tolerance (Christensen, Dowling, Jackson, Brown, Russo, Francis & Unemoto, 2013). Thus, considering the emotional difficulties that the participants of the present research suggested and the effectiveness of DBT skills training in lowering psychological distress as suggested by Christensen et al. (2013) it would be an intervention that could be considered or made available to the public so that employers can refer their employees who face difficulties with gambling.

The participants of the research also suggested experiencing, depression. This term even though is rigorously used by medicine and thus could be suggested as being an external lens to the research at hand, but it was utilised as a term as the participants themselves uniquely suggested experiencing such as mood state in their own way, which was not linked with any tools to measure, but plain experience. Having these results as well as comparing them with the research of Jauregui et al. (2016) and Churchill & Farrell (2018) who all suggest a link between gambling and depression, it would be of importance to aid individuals who gamble with their experiencing depression being a clinical diagnosis or just an experience. This will potentially aid them as individuals and as workers. It was suggested by a research conducted in 2015 that individuals who exhibit depressive symptoms are less likely to be able to secure employment and that they increase work loss days which are posing significant costs to the economy (Peng, Meyerhoefer & Zuvekas, 2015). Even though most of this research treat

depression as a clinical diagnosis and not as an experience it would be of importance to assist gamblers in the workplace to regulate such an experience.

5.4 Having Individuals Who Have Achieved Abstinence Consulting Others

Considering what Evans & Delfaboro (2005) suggested about individuals with gambling difficulties disliking treatment agencies, another clinical implication could be suggested here. Individuals with gambling experience having successfully managed to achieve abstinence could aid other individuals who currently face difficulties with gambling. Even though the research conducted in 2005 took place many years ago and nowadays individuals might not dislike treatment agencies, the participants of the present research suggested that they successfully help or helped other individuals. Thus, it could be suggested that clinicians could employ such individuals with experience to consult others as a supplement of treatment and as a means of avoiding the dislike of the treatment agencies that could potentially keep people who require their aid away from them. Furthermore, considering that another important barrier for seeking aid was stigma (Brown & Russell, 2020). Thus, individuals who might potentially be experts by experience and currently enjoying abstinence can aid treatment agencies in becoming friendlier to the population and at personal level individuals in overcoming the stigma barrier to seeking treatment.

Concluding having individuals who could potentially be able to 'show the way' to others could potentially assist in overcoming barriers in seeking treatment such as dislike of treatment agencies as well as stigma. Having former gamblers consulting treatment agencies and not only in Gamblers Anonymous Meetings could be considered.

6.0 Quality of The Research

According to Yardley (2000) there are several characteristics to be taken into consideration that determine a good qualitative research. The four characteristics proposed by her were kept in mind and addressed at the research. In this section I will briefly discuss how her suggestions were addressed throughout this research.

The first characteristic was termed as 'Sensitivity to Context' according to the author. Sensitivity to the context of the research was ensured by considering a topic that I had practical experience on. Working in an NHS clinic specialising in the treatment of gambling I got a lot of practical experience needed to have an increased awareness around the sensitive and ethical issues around gambling and also workplace issues since many of the individuals who

sought the clinics services were employed. Apart from this I also attempted to the best of my ability to conduct a rigorous research to further understand and gain more knowledge on the aforementioned. These also ensured that I am also aware around the different sociocultural UK themes that emerged in the research.

The second characteristic was termed by Yardley (2000) as 'Commitment and Rigour'. As suggested above thorough literature review, collection and analysis of data and adherence to the methodology guidelines ensured that I engaged in depth with the topic. Apart from this the utilisation of supervision ensured that another individual with more experience around the methodology that I used would consult and provide much guidance whenever needed without overshadowing me.

The third characteristic is termed by Yardley (2000) as 'Transparency and Coherence'. This is demonstrated by the clear fit with theory as well as the methodology implemented throughout this research. Furthermore, I attempted to ensure that my arguments were presented in a clear manner so for this reason I had my project proofread several times and special interest was shown to the arguments presented. Additionally, I sincerely stated all the thoughts, feelings and aspirations that I had for the research on the reflective parts of the project in an attempt to be transparent. Finally, the hope was to allow the individual reading the project to be able to understand the position that I was coming from.

The final characteristic is termed by Yardley (2000) as 'Impact and Importance'. This was a key goal I would say of the whole project. The participants by giving their time by sharing their experiences provided the researcher with depth data despite having six participants. Furthermore, always in the back of my head I was thinking how the research findings could potentially produce clinical implication aiding the field of gambling treatment as well as supporting workers with gambling difficulties. Finally, the hope of this project is to be published into relevant workplace journals that are psychologically informed.

7.0 Limitations & Future Research

A limitation of the research was that it was conducted on a small scale. This was counterbalanced though by rigorously conducting a deep analysis and then thinking thoroughly the results as to compare them with other research and suggest some clinical implications. Some special thanks need to be given to the participants for being open and providing such a quality of data. It takes courage to be so open to a complete stranger and assist in such a research by sharing your personal experience.

For example, one major theme seeing being researched widely is the impact of stigma that individuals who gamble face in their lives. On the other hand, only a few of the participants of the research suggested experiencing stigma. It was deemed as an important phenomenon though to include in this research and analyse. Also, most of the participants of the research suggested keeping their gambling a secret so this could potentially have altered their experience of stigma. So, it would be of importance to conduct another novel research that will clarify this question raised.

Another limitation of this research was the fact that there was no gender balance. Unfortunately, only one female participant was recruited for the research. The data from the participants and the analysis could have been different if the present study had gender balance. On the other hand, from my experience most of the individuals who gamble are males and in my placement at the National Problem Gambling Clinic that involved more than one year's client work I have not seen a single female client for therapy for gambling. So, on another note I am grateful for this one female participant who shared her experiences for the research. This research would need to be conducted again by having a more balanced participant pool.

Something else that I would like to share as a thought here was the fact that even though it was not a goal of the research all of the participants at the time of the interviews had achieved abstinence from gambling. Conducting the research with individuals who are currently gambling and are at the same time employed could produce different results. It would be interesting to conduct such a research.

One more theme that raised further questions was the one termed as 'Helping Others'. Searching the literature, I could not find something similar apart from Gamblers Anonymous Meetings which are one of the main treatment methods for gambling. Having individuals with past gambling experience advising others to achieve abstinence would be something that could be potentially researched further as it could potentially solve some difficulties that individuals might have. Even though the notion of the 'wounded healer' meaning an individual with personal experience on illness and or trauma who uses the learning that they got to aid others (Jackson, 2001) has been researched it would be essential to see the effectiveness and its application on problem gambling.

Finally, another significant difficulty encountered in the present research was with the term used for the theme 'Depressed'. Depression is a term commonly used as a clinical diagnosis,

so the present research could be criticised as adopting an external lens. On the other hand, for the present research the participants suggested having this experience and used the same terminology without necessarily implying having a clinical diagnosis of depression rather just experiencing this specific mood state because of their gambling at their respective workplaces.

8.0 Reflections on Learnings and Impact of Self on The Research

As I have suggested on a previous reflection I have heard a lot of stories about gambling as my grandfather was a gambler and also when my grandmother would go with him she would also gamble herself. I have heard all the fun but also all the grim experiences that gambling caused. Also, I have experienced growing up all the negative effects that the gambling behaviour of my grandfather had on everyone else around him being my mother and my grandmother who had to work very hard for many years to pay the debt that he left behind when he passed away. Thus, this experience must somehow have affected me when conducting the research. This is the effect of me on the research as a person having my personal experiences. On another note, I have engaged in helping others achieve abstinence from gambling working as a trainee counselling psychologist and have also experienced through others being gamblers the impact that gambling can have on the gambler himself or herself. Having this identity of the trainee and by experiencing through others all the negative effects that gambling can cause in the beginning I structured the interviews asking the participants if they experienced these negative consequences. To counterbalance this, I reviewed the interview schedule with my supervisor and agreed on more neutral questions to be asked not negatively preoccupied.

Apart from having some personal and trainee experience on working with gambling, involving the workplace was another endeavour of mine. This new parameter for me to gambling aided me as an outsider to the research keep my curiosity Another fact that aided this curiosity and always keeps me curious about gambling is that I have never engaged with gambling myself. So, the only experience that I have is through others being family, friends or clients.

While I conducted this research I also thought about my own addiction. When starting this research, I was addicted to cigarettes. It filled me with anxiety and sometimes felt as an imposter helping people to overcome addiction or doing a research with an aim to provide some clinical implications around gambling while being heavily addicted to smoking myself. So, by having this experience I believe that it allowed me to be more empathic and more understanding of the participants who experienced having a negative habit. On another note being very afraid to quit smoking and seeing all the participants of the research having

achieved abstinence from gambling, and enjoying their lives, it motivated me to overcome my fear and utilise my knowledge to overcome my own addiction.

I have learnt a lot about gambling by doing this piece of work. I learned through this process that individuals who gamble face a lot of shame for their gambling and also that they experience a lot of stigma from others. These can be experienced in the workplace. Facing so many difficulties as reported by the participants in the workplace as I was writing up this research I thought that the workplace being a place where an individual spends a significant amount of the time of their day it could be a place where gambling could be addressed for the individuals. I also learned that gambling could be 'another world' for many individuals and hearing from several of the participants being completely absorbed by it this intrigued me. Also, I learned that hope and a single positive thought about gambling can lead an individual to be 'lured' by gambling. Also, many gamblers have the ability to utilise their experience to help others achieve abstinence or prevent them from gambling and they seem to be very happy to engage in something like this that some of the participants did it on a professional level. Finally, and most importantly I saw that there are individuals who consider that they have gambling difficulties but have not received a diagnosis of gambling but still face important difficulties as the participants of the present research suggested experiencing. For them no difference is made by having a diagnosis or not.

I have also learned a lot about being an employee and the workplace in general. There are some habits that will make it hard for individuals to work as they can absorb them in full when they engage with them. This researched motivated me further to want to dedicate my career in becoming a specialist for the matters of the workplace and learn more. It is a personal goal of mine to be able to work as an inhouse counselling psychologist for organisation in the future when I qualify. Furthermore, I learned that the climate in the workplace is very important. As beings we influence each other in many ways. We can be influenced even to gamble. Seeing your manager running a gambling event at work and seeing every colleague wanting to engage could potentially intrigue many people to gamble. Most importantly I saw that adopting a non-critical stance in the workplace can aid many individuals who face difficulties to share them. Not being able to share their difficulty about gambling at the workplace was the most difficult aspect of gambling for one participant. Thus, cultivating an environment that allows people to ask for help without being stigmatised is very important.

9.0 Conclusion

Despite having achieved abstinence from gambling for a long period of time the participants seem to vividly remember their experiences to share them in the interviews conducted. Various themes emerged from the participants' suggestions. It could be said that as per the participants' words gambling altered the experience of their employment and the workplace and on many occasions caused some difficulties such as provoking negative emotions at work, altering the experience of self at work and feeling almost like living in another world during work. It also seems from the participants experiences and suggestions they could use their gambling experience to aid others to achieve abstinence from gambling. Additionally, the participants mentioned experiencing a lot of stress as a result of the financial implications that gambling caused them. The participants also suggested having difficulties with their workplace relationships due to the implications of gambling and in a few occasions reported that the relationships with colleagues and friends, and other significant individuals would end because of gambling. Another suggestion of the research according to the participants was the fact that they experienced stigma as well as shame and this did not allow the participants to share their gambling with colleagues as well as the participants employed various methods in an attempt to 'shield' their gambling and keep it a secret in the workplace such as lying. Not being able to share your difficulties at work seems to have altered the experience of the workplace of the individuals and as the participants mentioned causing negative emotions such as feeling depressed. The findings of this research suggest some new and some similar as well as different findings when compared to the literature and also some clinical implications were raised in an attempt to aid clinicians work. One of the most important suggestions of the research was the need to educate the workplaces about gambling difficulties. Many of the negative experiences that the participants experienced could have been avoided by educating people in the workplace and it would potentially assist in the reduction of stigma and shame experienced by gamblers in the workplace. Finally, all the participants, managed to achieve abstinence, and some of them nowadays, utilise their past experience to consult and aid others.

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11.0 Appendices

11.1 Appendix 1 Telephone Screening Interview Questions

Telephone Screening Interview Questions

Date: 15/11/2019

Version 1

Do you consider yourself having a difficulty with Gambling?

Have you received or are you receiving any help with treatment for Gambling?

Have you worked or are you currently working?

If yes for how long?

Do you consider yourself to be at risk?

Do you require any additional information about the research? Do you have any further questions?

11.2 Appendix 2 Semi – Structured Interview Schedule Questions

Date: 15/11/2019

Version 1

Interview Schedule

How would you describe your general experience of the Workplace?

What is or was your relationship with your colleagues?

How did you experience your gambling struggles in the workplace?

What was a typical day at work?

How do you think that gambling has affected your work?

Can you tell me a bit about your gambling difficulties?

Are you aware of having urges to gamble while at work? Are there any specific times or triggers?

What kind of support did you receive for gambling?

11.3 Appendix 3 Recruitment Flyer



15/11/2019

Version 1

**Department of *Psychology*
City, University of London**

**PARTICIPANTS NEEDED FOR
RESEARCH IN *GAMBLING AND THE WORKPLACE***

We are looking for volunteers to take part in a study of
**How Do People who Experience Problems with Gambling Experience
the Workplace: An Interpretative Phenomenological Analysis Study**

As a participant in this study, you would be asked to: Take part in an anonymised study that involves a short 15 – 20-minute telephone interview allowing you to ask any questions and make sure that you meet the criteria to take part in the study followed by a formal interview (approximately 1 hour) that will allow you to share your experiences of the workplace. You will receive £20 in Amazon Vouchers for your time and travel expenses.

For more information about this study, or to volunteer for this study,
please contact:

Researcher: Panagiotis Karagiannis

[REDACTED]
Research Supervisor: Dr Jacqui Farrants

[REDACTED]
Psychology Department

at
[REDACTED]

This study has been reviewed by, and received ethics clearance
through City, University of London Ethics Committee.

If you would like to complain about any aspect of the study, please contact the Secretary to the Senate Research Ethics Committee on [REDACTED] or via email: [REDACTED].
City, University of London is the data controller for the personal data collected for this research project. If you have any data protection concerns about this research project, please contact City's Information Compliance Team at dataprotection@city.ac.uk



Title of study: How Do People Who Experience Problems With Gambling Experience The Workplace: An Interpretative Phenomenological Analysis Study

We would like to invite you to take part in a research study. Before you decide whether you would like to take part it is important that you understand why the research is being done and what it would involve for you. Please take the time to read the following information carefully and discuss it with others if you wish. Please feel free to ask us if there is anything that is not clear or if you would like more information.

What is the purpose of the study?

The study aims to explore the experiences that people who regard themselves as having problems with gambling have in the workplace. This study is undertaken for the purposes of the Professional Doctorate in Counselling Psychology.

Why have you been invited?

We are looking to include in this study people who perceive themselves as having problems with gambling and believe they have significant workplace experience.

Do you have to take part?

Participating in this study is voluntary; it is entirely up to you if you wish to participate in part or all of it. If you decide to participate, you will be asked to sign a consent form. Furthermore, if at the interview stage of the study you find any questions distressing, taking too much time to answer, being too personal or for any other reason, you can choose not to answer them or withdraw at any point without having to explain the reasons for your withdrawal. There is no penalty for withdrawing.

What will happen if you take part?

You will be asked to participate in 1 short phone interview to confirm that you meet the inclusion criteria, receive more details about the study and ask any questions about it.

The telephone call will last approximately 15 – 20 minutes

You will be invited to take part in a confidential semi – structured interview that will allow you to share your workplace experiences. After obtaining your consent the whole interview session will be audio recorded.

The interview will be approximately one-hour long.

The research approach used will allow you to share your experiences freely. Then all the data will be transcribed and analyzed by the researcher.

The interviews will take place at City, University of London or Gamcare premises.

You will receive 20 pounds for your travel expenses and your time.

The expected period for the interviews is June 2019 – September 2019.

What are the possible disadvantages and risks of taking part?

As complete confidentiality is ensured there are no risks of information disclosure. The only risk that might arise is if you become distressed. In this unlikely event you will receive information on what you could do if such an issue arises. However, as previously stated, you can withdraw from the study at any point.

What are the possible benefits of taking part?

This research will aid people who perceive themselves as having problems with gambling. Aiming to explore and reflect on their experiences in the workplace. As a result, this will provide clinicians and consultants with more information to assist them in helping clients and to work towards improving employability for people who have such difficulties.

Expenses and Payments

You will receive 20 pounds for your travel expenses and time spent for the whole process of the research.

Will your taking part in the study be kept confidential?

The information will only be accessed by the researcher and the research supervisor before anonymizing the data.

The digital audio recordings will be kept confidential and in the transcripts all names will be replaced by pseudonyms and any other identifying information will be removed.

The only reason for confidentiality to be broken would be if the researcher was concerned that a participant was potentially at risk to themselves or others, according to the British Psychological Society and Health Care Professions Council Guidelines on Confidentiality. If such a case arises then the researcher will be obliged to inform the supervisor and appropriate bodies to ensure safety and, where possible, would inform the participant of his intended actions beforehand.

Data records will be stored securely and destroyed after 10 years.

If the project is abandoned before completion, all of the data collected will be destroyed

What will happen to the results of the research study?

The results will be written in publishable format. In case of any future publications the anonymity of all participants will still be honoured. I will be also happy to provide you with a summary of the final results if you wish.

What will happen if you don't want to carry on with the study?

You can withdraw from the study at any time if you wish up until the analysis of the data and all data collected up to that time will be destroyed or deleted.

Data privacy statement

This information will be held by City as data controller and processed for the following purpose:

City, University of London is the sponsor and the data controller of this study based in the United Kingdom. This means that we are responsible for looking after your information and using it properly. The legal basis under which your data will be processed is City's public task.

Public Task: The Legal basis for processing your personal data will be that this research is a task in the public interest, that is City, University of London considers the lawful basis for processing personal data to fall under Article 6(1)(e) if GDPR (public task) as the processing of research participant data is necessary for learning and teaching purposes and all research with human participants by staff and students has to be scrutinised and approved by one of City's Research Ethics Committees.

I understand that the following special category data will be collected and retained as part of this research study: data concerning mental health.

City considers the processing of special category personal data will fall under: Article 9(2)(g) of the GDPR as the processing of special category data has to be for the public interest in order to receive research ethics approval and occurs on the basis of law that is, inter alia, proportionate to the aim pursued and protects the rights of data subjects and also under Article 9(2)(a) of the GDPR as the provision of these personal data is completely voluntary.

Your right to access, change or move your information are limited, as we need to manage your information in a specific way in order for the research to be reliable and accurate. To safeguard your rights, we will use the minimum personal-identifiable information possible (for further information please see <https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/lawful-basis-for-processing/public-task/>).

City will use your name and contact details to contact you about the research study as necessary. If you wish to receive the results of the study, your contact details will also be kept for this purpose. The only people at City who will have access to your identifiable information will be Mr Panagiotis Karagiannis (Researcher) and Dr Jacqui Farrants (Research Supervisor). City will keep identifiable information about you from this study for 10 years after the study has finished.

You can find out more about how City handles data by visiting www.city.ac.uk/city-information/legal. If you are concerned about how we have processed your personal data, you can contact the Information Commissioner's Office (IOC) <https://ico.org.uk/>.

What if there is a problem?

11.5 Appendix 5 Debrief Information Sheet



How Do People Who Experience Problems with Gambling Experience the Workplace: An Interpretative Phenomenological Analysis Study

Further Information for After the Completion Of The Study

Thank you for taking part in this study. Now that it's finished we'd like to tell you a bit more about it.

This study aims to explore how people who perceive themselves as having problems with gambling experience their workplace. The experiences you have shared during the interviews will be analysed and interpreted and provide clinicians and consultants with more information to assist them in helping clients and to work towards improving employability for this group.

If you have any questions or concerns, please discuss this with the researcher; he will be happy to assist you. Below you can find some sources for help.

We hope you found the study interesting. If you have any other questions please do not hesitate to contact us at the following email addresses:

Panagiotis Karagiannis: [REDACTED]

Dr Jacqui Farrants: [REDACTED]

Sources for Help

Gamcare: www.gamcare.org.uk (Tel: 0808 8020 133)

National Problem Gambling Clinic: www.cnwl.nhs.uk/cnwl-national-problem-gambling-clinic
(Tel: [020 7381 7722](tel:02073817722))

Ethics approval code: *ETH 1920 - 0874*

11.6 Appendix 6 Participant Consent Form



Study Number: 1

Participant Identification Number for this Trial:

Title of Study: How Do People Who Experience Problems With Gambling

Experience The Workplace: An Interpretative Phenomenological Analysis

Study

Name of Researcher: Panagiotis Karagiannis

Please initial box

1.	<p>I agree to take part in the above City, University of London research project. I have had the project explained to me, and I have read the participant information sheet (version 1), which I may keep for my records. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.</p> <p>I understand this will involve: being interviewed by the researcher being asked about my experiences in the workplace allowing the interview to be audiotaped</p>	
2.	<p>This information will be held and processed for the following purpose(s):</p> <p>To fulfil the research purpose and contribute to the expansion of the information available within psychological research into the experience of the workplace for those who regard themselves as having a problem with gambling.</p>	

	<p>I understand that any information I provide is confidential, and that no information that could lead to the identification of any individual will be disclosed in any reports on the project, or to any other party. No identifiable personal data will be published. The identifiable data will not be shared with any other organisation.</p> <p>I understand that some direct quotes of what I say will be used in support of the research (Not ones that might lead to my Identification)</p>	
3.	<p>I understand that my participation is voluntary, that I can choose not to participate in part or all of the project, and that I can withdraw at any stage of the project up until the data are analysed without being penalized or disadvantaged in any way.</p>	
4.	<p>Public Task: The legal basis for processing your personal data will be that this research is a task in the public interest, that is City, University of London considers the lawful basis for processing personal data to fall under Article 6(1)(e) of GDPR (public task) as the processing of research participant data is necessary for learning and teaching purposes and all research with human participants by staff and students has to be scrutinised and approved by one of City's Research Ethics Committees.</p> <p>I understand that the following special category data will be collected and retained as part of this research study: data concerning mental health.</p> <p>City considers the processing of special category personal data will fall under: Article 9(2)(g) of the GDPR as the processing of special category data has to be for the public interest in order to receive research ethics approval and occurs on the basis of law that is, inter alia, proportionate to the aim pursued and protects the rights of data subjects and also under Article 9(2)(a) of the GDPR as the provision of these personal data is completely voluntary.</p>	

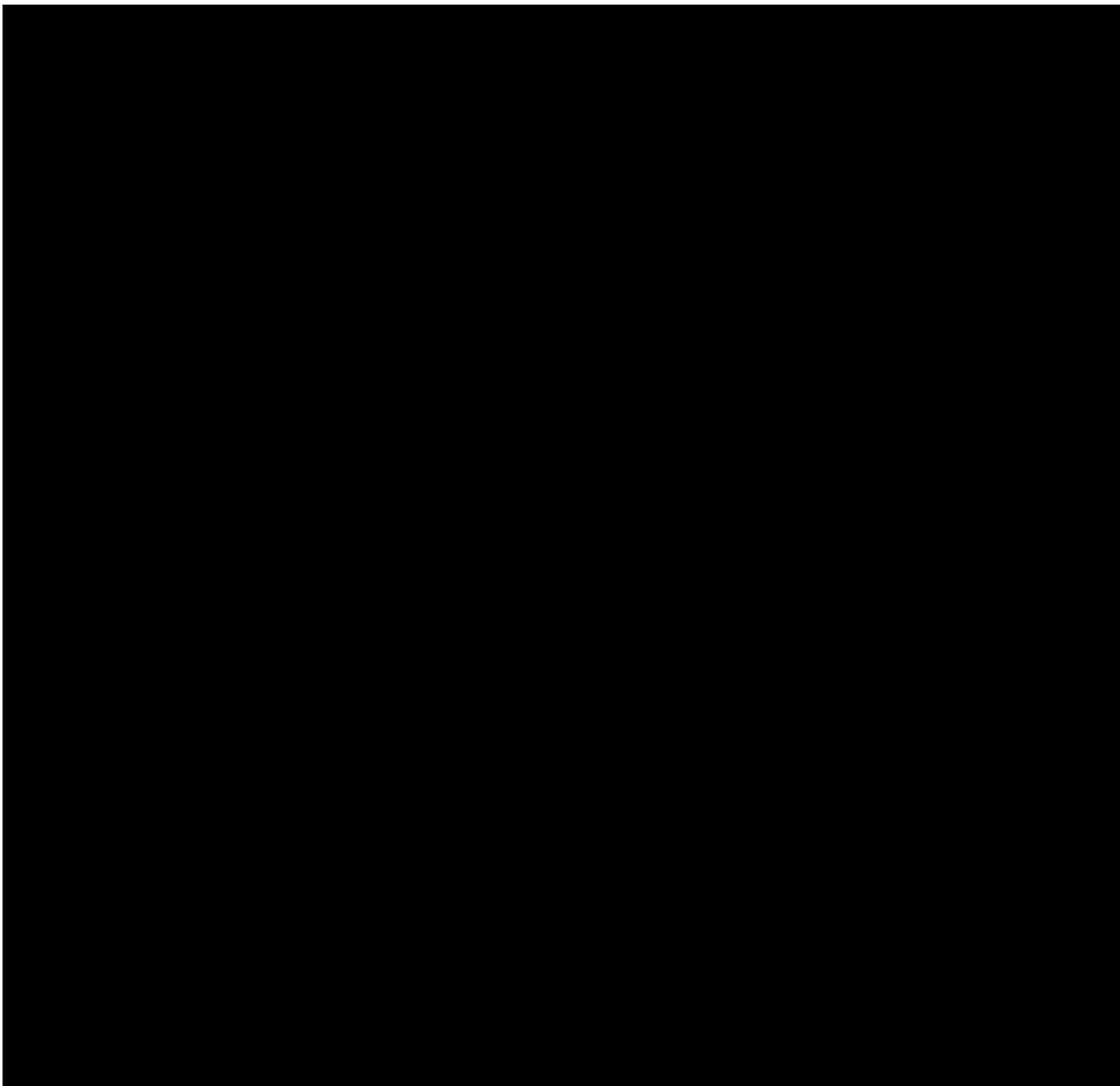
6.	I understand that the information collected about me will be used to support other research in the future and may be shared anonymously with other researchers.	
7.	I agree to take part in the above study.	

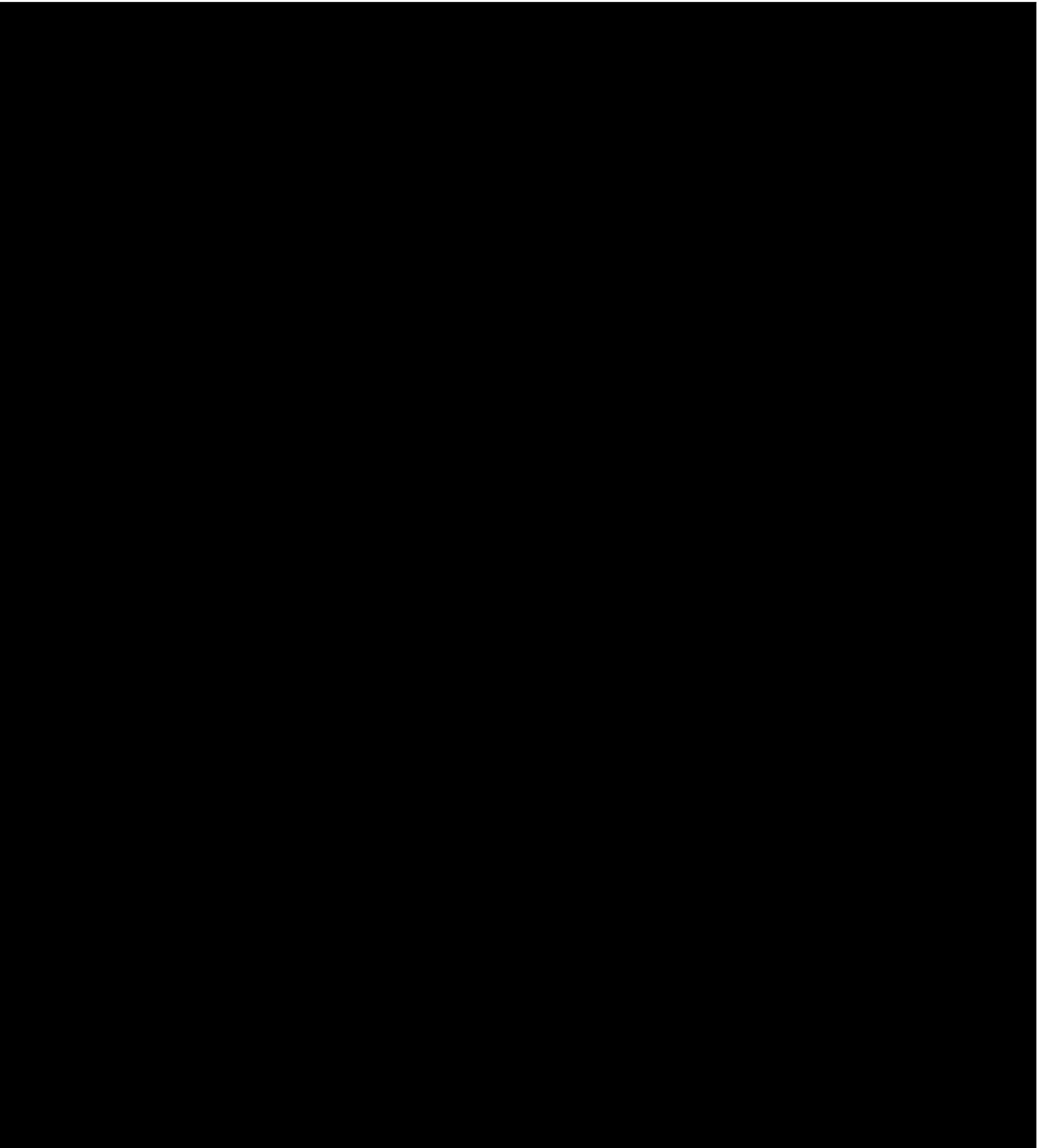
Name of Participant Signature Date

Name of Researcher Signature Date

When completed, 1 copy for participant; 1 copy for researcher file.

11.7 Appendix 7 Example of Transcription and Coding





11.8 Appendix 8 Participant Demographics and Approximate Time Spent Gambling and Abstinence Time

Table 1
Participant Demographics and Approximate Time Spent Gambling and Abstinence Time

Pseudonym	Gender	Age	Occupation (Current or Previous)	Time Spent Gambling (Approx. Years)	Time in Remission (Approx. Years)
1. Jane	Female	Forties	Project Manager	15	5
2. Tom	Male	Thirties	Recruiter	10	5
3. John	Male	Mid Forties	Various Sectors	15	10
4. Mark	Male	Fifties	Truck Driver	20	10
5. Jim	Male	Fifties	Finance	20	15
6. Pete	Male	Mid Thirties	Various Sectors	10	5

11.9 Appendix 9 Superordinate and Subordinate Themes

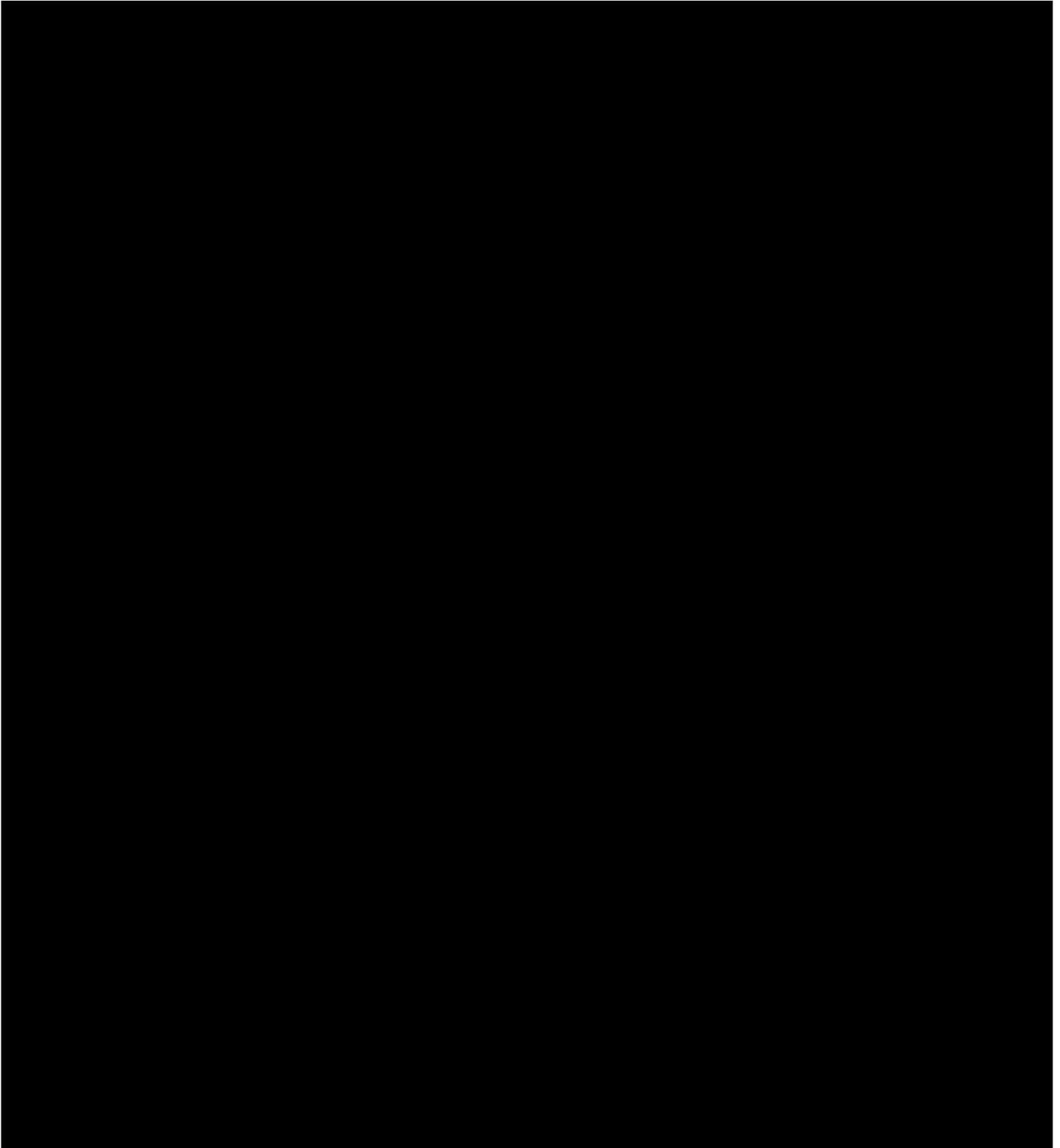
Figure 1

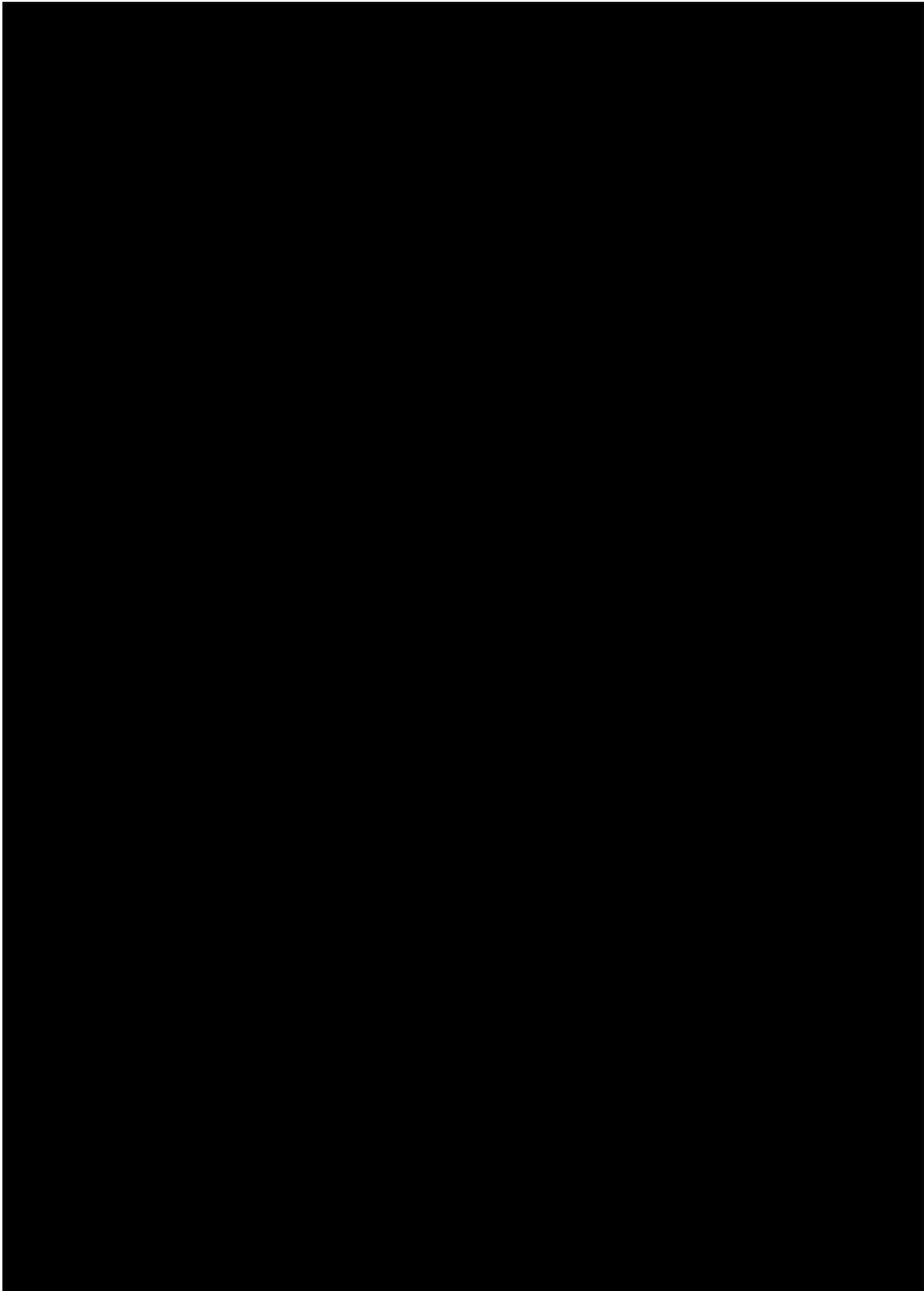


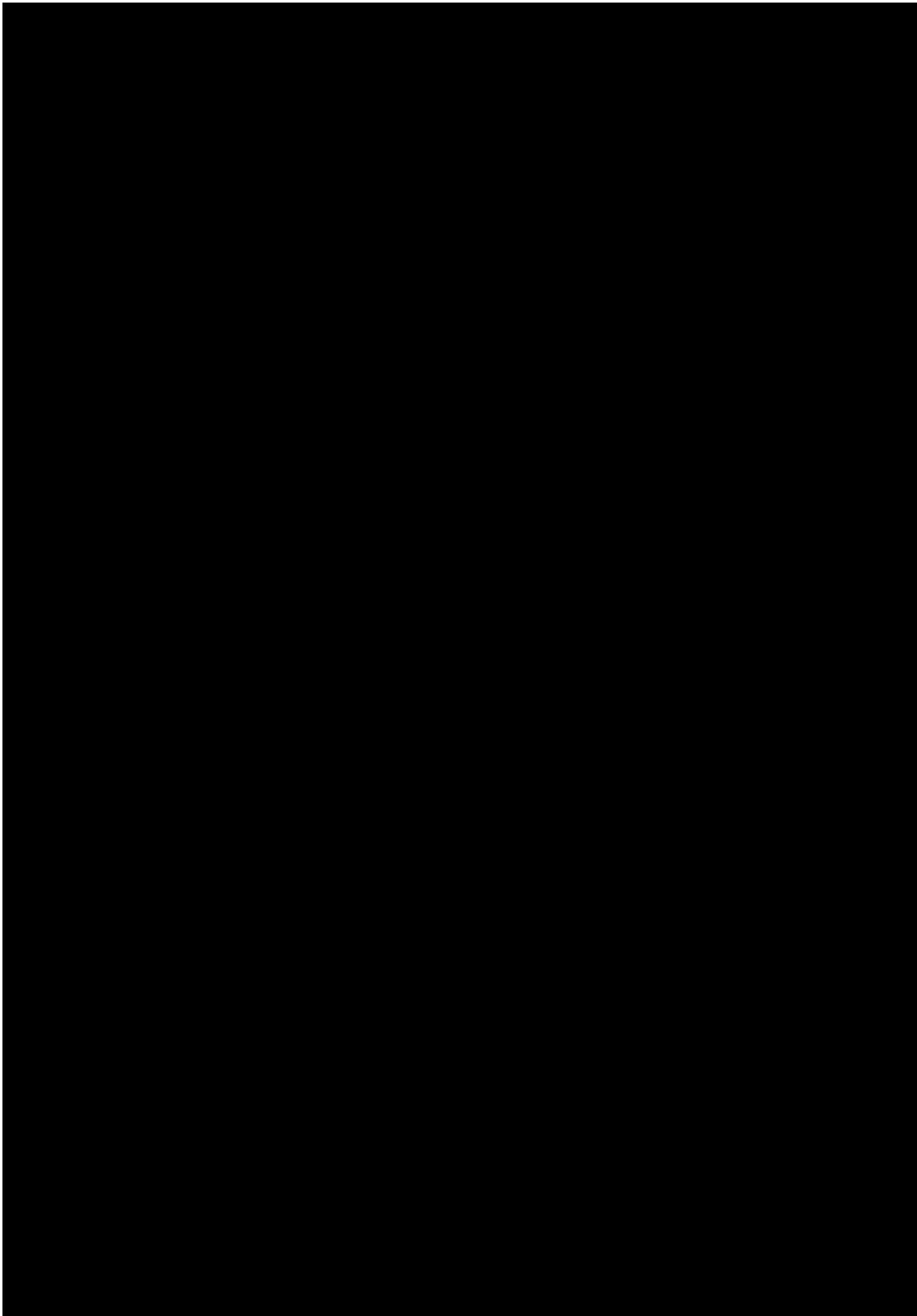
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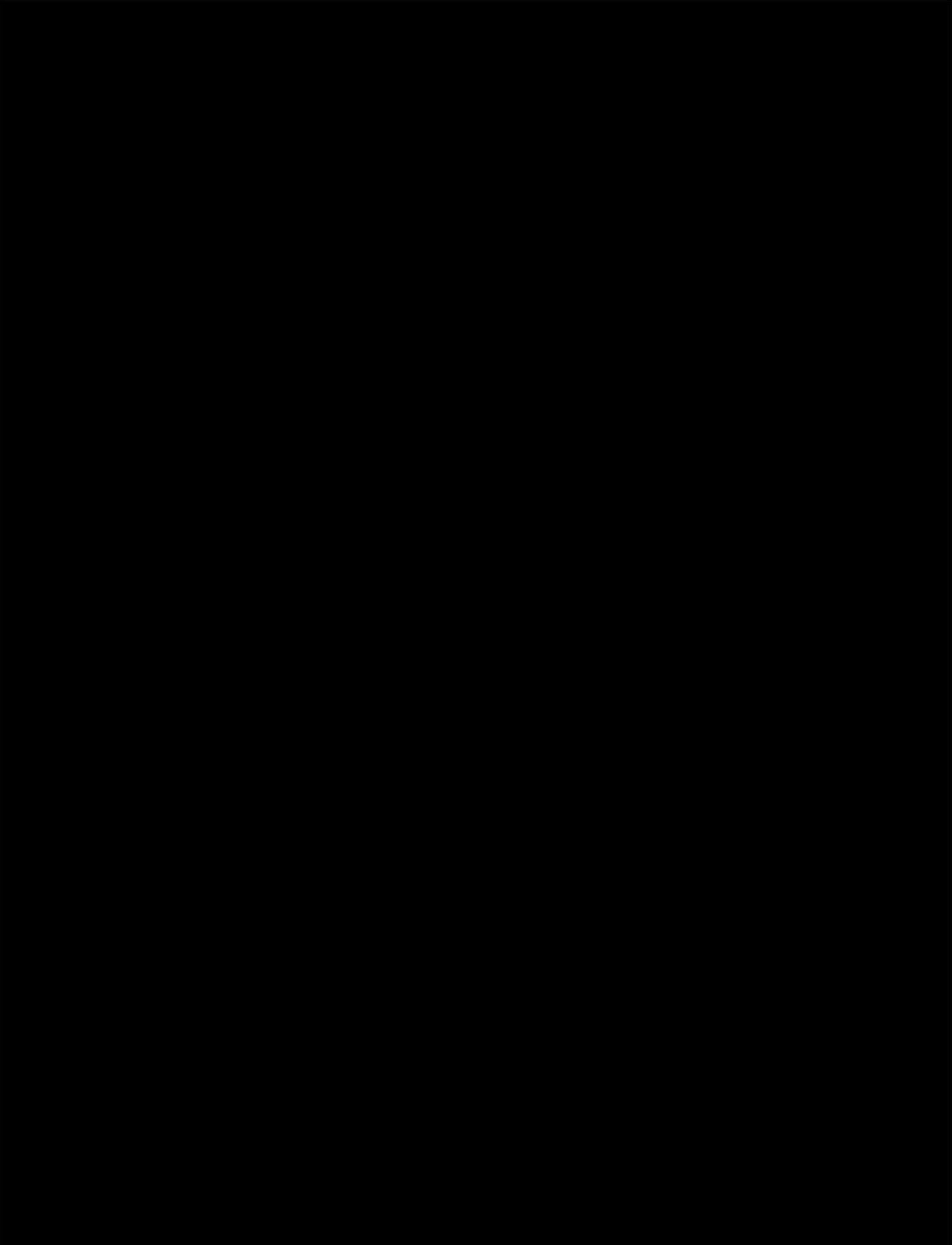
Section 2: The Case Study

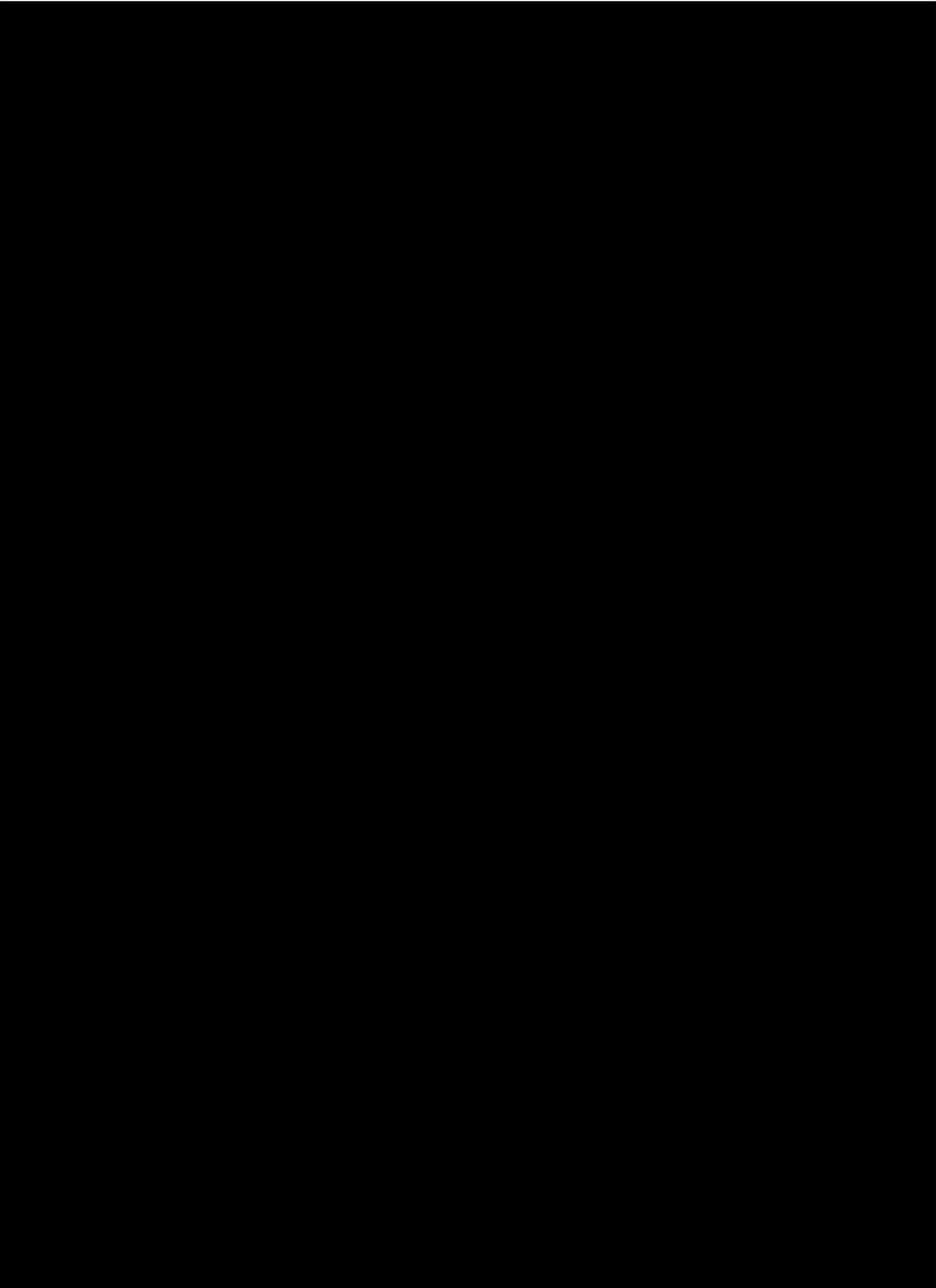
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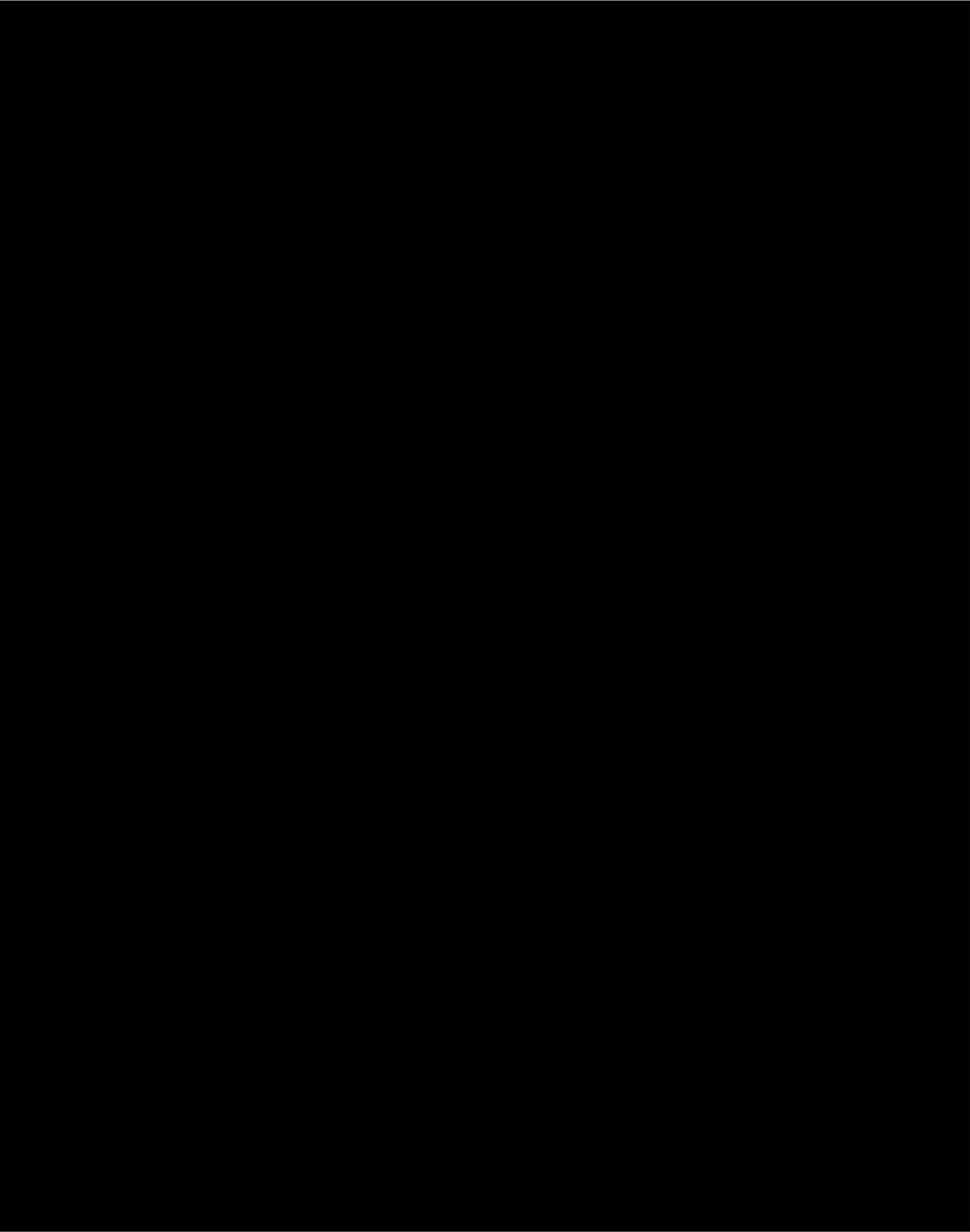


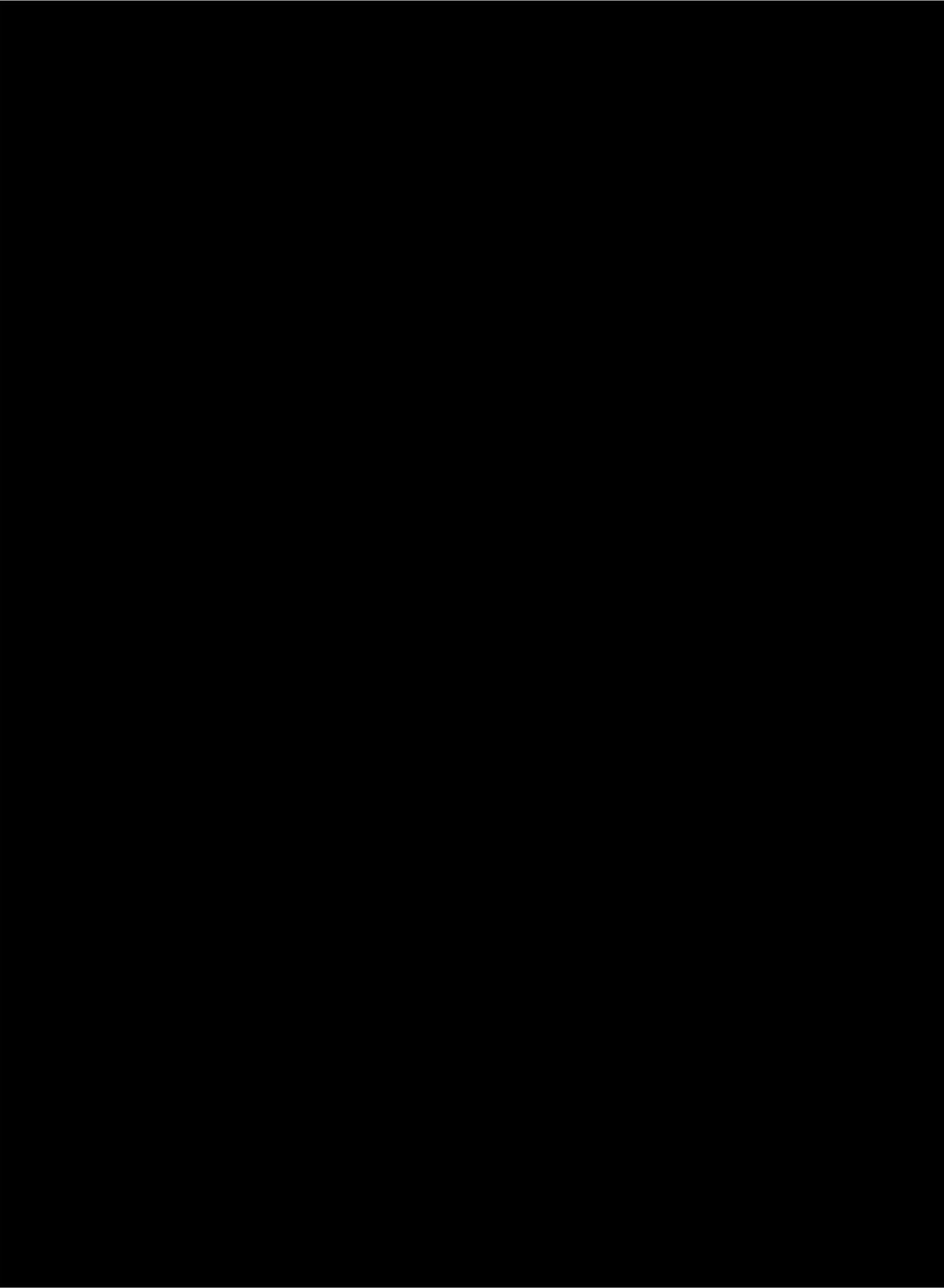


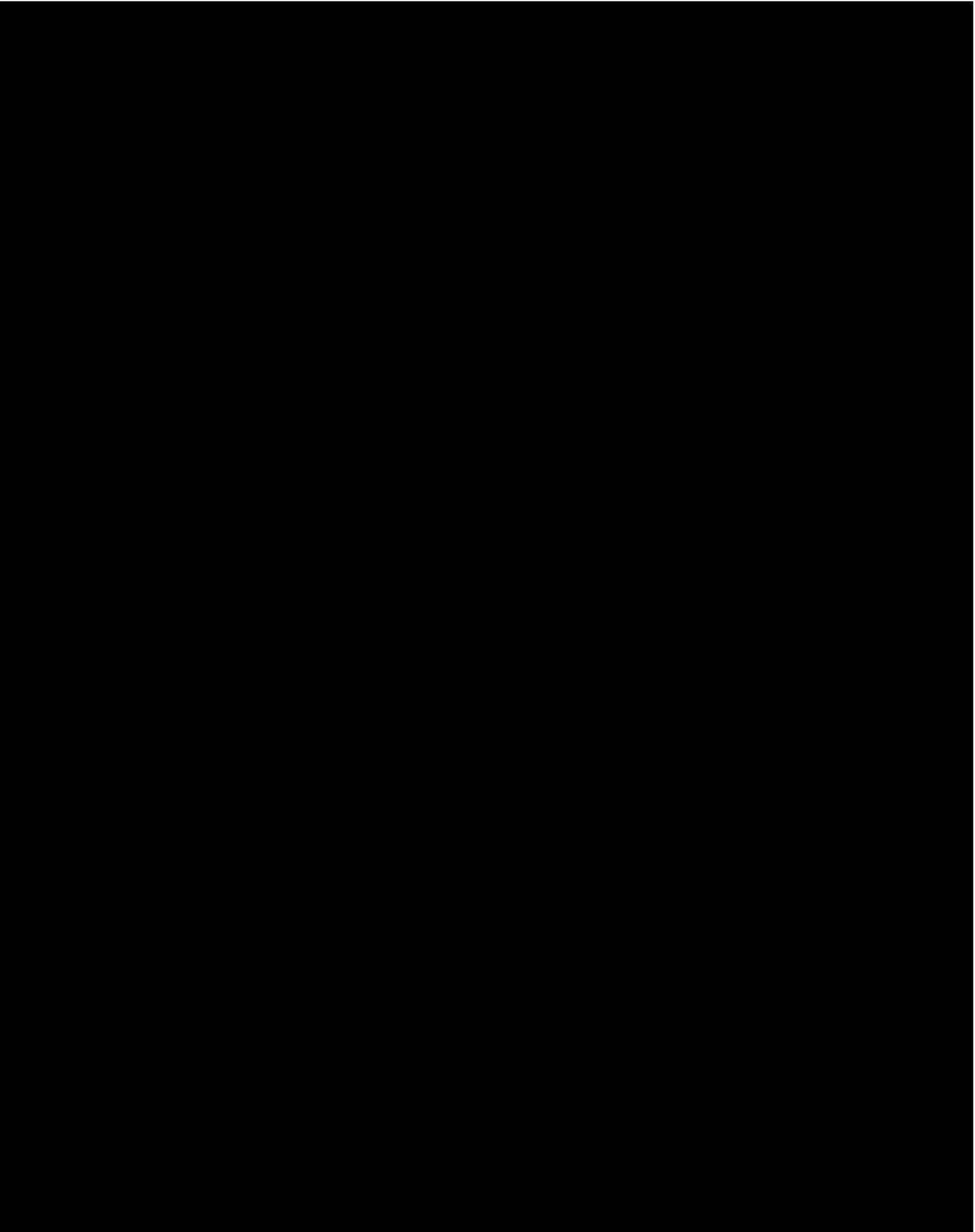


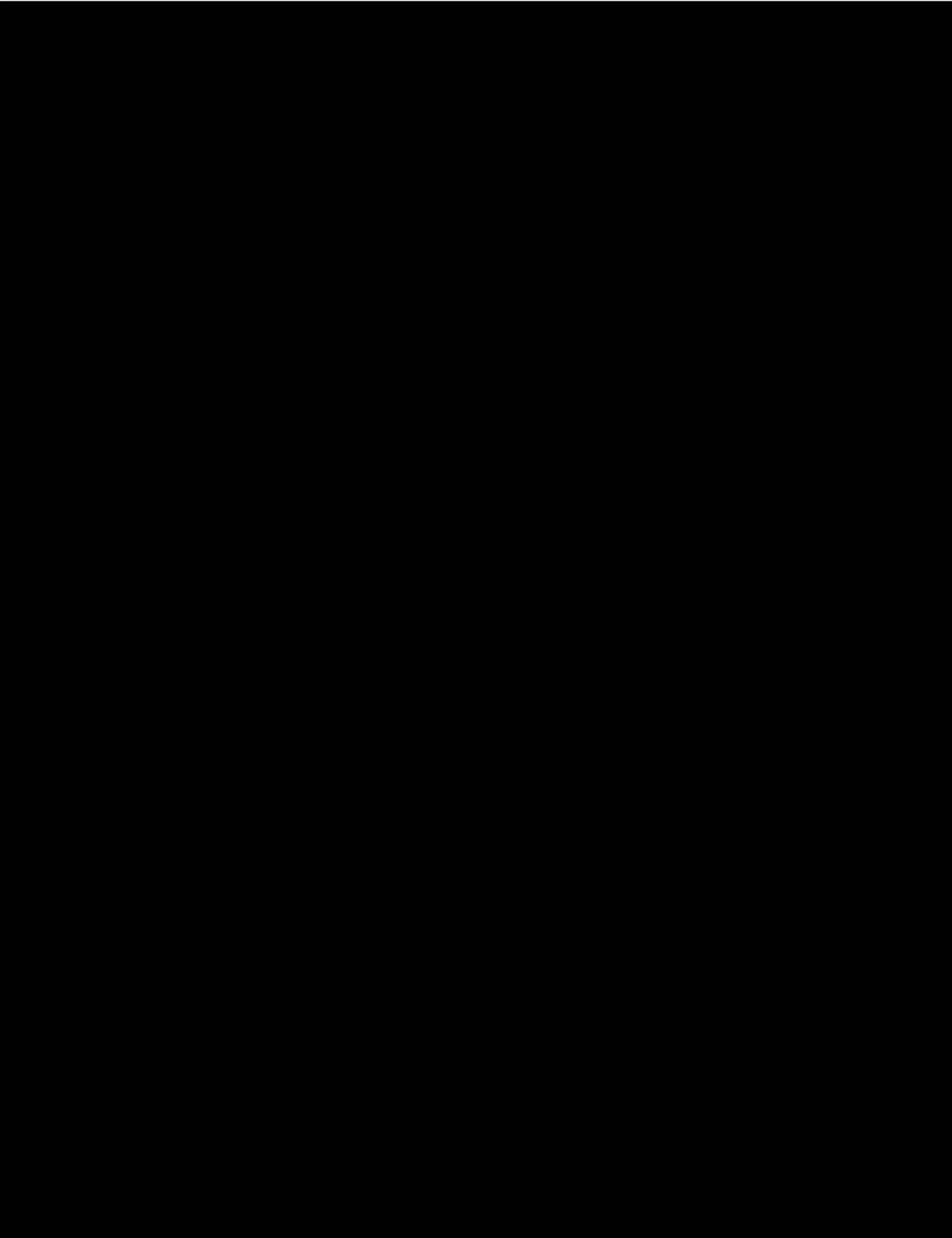












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Section 3: Publishable Article

**Title: Experiencing Shame and Stigma in the
Workplace: A Qualitative Study of Individuals with
Gambling Difficulties**

