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Problem gambling and family violence strongly linked: new study

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Over half the people presenting at gambling counseling services in Victoria, South Australia and Tasmania reported family violence in the previous 12 months, according to a new study.

Led by the Problem Gambling Research and Treatment Centre (PGRTC) at the University of Melbourne, with researchers from Monash and Flinders Universities, the study screened 120 help-seeking family members of problem gamblers in clinical services for both family violence and problem gambling.

Fifty three per cent of participants reported some form of family violence in the past 12 months. Victimization was experienced by 44 per cent of those participants, and was most likely to be an outcome of gamblers' anger brought on by immediate gambling losses and frustration.

Conversely, the perpetration of family violence was more likely to occur as a reaction to deeply-rooted and accumulated anger and mistrust, with 33 per cent of participants who reported family violence reporting perpetration. Twenty two per cent reported both victimisation and perpetration.

Parents, current and ex-partners were most likely to be both perpetrators and victims of family violence. Of the participants who were interviewed in depth, most reported that problematic gambling generally preceded the family violence.

Chief Investigator Professor Alun Jackson said the participants who reported being both a victim and a perpetrator of family violence were of particular concern.

“This behaviour can indicate displaced violence where, for example a problem gambler mother is victimised by a partner or ex-partner and in turn becomes violent with other family members, typically children,” he explained. “This is in addition to the child abuse caused directly by a violent problem gambling parent or relative.”

Professor Jackson said previous studies have focused on violence between partners.

“This study shows we need to go beyond looking just at intimate partner violence, to understand the intergenerational effects and design appropriate family-based interventions,” he said.