

Does Self-Compassion Facilitate or Prevent Problem Gambling?

Summary Report for the Manitoba Gambling Research Program

Investigator:

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Research Priority:

Explore what risk and protective factors (e.g. behavioural, psychological, cultural/social, environmental, health, demographic, etc.) influence the movement back and forth between no risk and problem gambling risk levels and examine the resulting implications for prevention, harm minimization and/or treatment of gambling problems.

Significance

Self-compassion is the tendency to respond to one's own mistakes and shortcomings with kindness rather than criticism. Self-compassionate individuals: (a) regard their mistakes with acceptance and non-judgment, (b) maintain a balanced perspective and avoid dwelling excessively on their mistakes, and (c) understand that everyone makes mistakes. Although self-compassion is known to be adaptive in coping with past mistakes, no research has examined its influence on risky decision-making in advance. An open and understanding disposition toward anticipated losses could either facilitate or prevent further development of problem gambling, and the direction of this relationship may depend on the severity of individuals' problem gambling.

Research Questions

Across 5 studies, the present research aimed to examine (a) how self-compassion relates to risky decision-making in a gambling context, and (b) whether this relationship depends on the severity of problem gambling across individuals.

Methodology

These studies involved testing student and non-student participants (total N = 725), in laboratory and field settings, using correlational and experimental research designs, and multiple gambling tasks. These features of the research designs help to ensure that the findings are reliable, replicable, and appropriately generalized. All of the present studies used one of two previously validated gambling tasks to assess risky decision-making: The Iowa Gambling Task (Bechara, Damasio, Gamasio, & Anderson, 1994), or the Balloon Analog Risk Task (Lejuez, Read, Kahler, et al., 2002). By pre-measuring self-compassion and the severity of participants' problem gambling, using standard questionnaires, the present studies could compare the relationship of self-compassion to gambling decisions among participants with no problem gambling, vs. those with low-level or more severe problem gambling. Study 1 provided the

initial test of these relationships in a lab setting with an undergraduate sample. Two follow-up studies sought to replicate and extend Study 1, in a field setting with a community sample (Study 2), and in a lab setting examining self-compassion both as an experimental and as a measured independent variable (Study 3). Studies 4 and 5 focused on individuals at higher risk of problem gambling. Within this subgroup, these studies further attempted to vary the level (Study 4) and quality (Study 5) of motivation toward the gambling task, using experimental manipulations in the immediate gambling situation. The aim of these studies was to determine whether the relationship of self-compassion to gambling decisions, among those at risk, further depended on these motivational conditions.

Key Findings

The findings can be summarized across the studies with three broad observations about self-compassion and problem gambling: First, self-compassion has little or no relationship to gambling decisions by those with no signs of problem gambling already. Second, higher self-compassion is associated with taking more gambling risks among undergraduates with some risk for problem gambling. Third, higher self-compassion was associated with taking fewer gambling risks among casino patrons with low-level or more severe problem gambling. In comparison with undergraduates, these casino patrons represented a broader age range, higher frequency of severe problem gambling, and location in a typical setting for gambling activity. These factors may be considered as potential moderators of the relationship between self-compassion and gambling decisions in future research.

Conclusions and Implications

These findings have both theoretical and practical implications: Notably, the findings do not support the possibility that high self-compassion exerts a protective influence against the development of problem gambling in the general population, or that increased self-compassion should be considered an intervention target for primary or secondary prevention of problem gambling, particularly among young people or undergraduates. The findings do support the possibility that self-compassion may be used strategically in combination with other techniques both to enhance clinical assessment of problem gambling, and to provide social-environmental conditions for gambling that protect individuals from gambling-related harm.



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