Introduction

The first classification of the pathological gambling was made in 1980 in the Diagnostic and Statistical Manual of Mental Disorders [1] as an “Impulse Control Disorder” based on the experience of Dr. Robert Cluster and other mental care professionals.

The next pathological gambling classification was made in 2000 in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition [2] as part of “Impulse-Control Disorders Not Elsewhere Classified”, where was emphasized the common elements with substance addiction.

In the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders [3] the pathological gambling was included in the chapter “Non-Substance-Related Disorder” and classified as “Gambling Disorder.” Another new element was provided by the time period on which an individual displays the symptoms specific to the gambling disorder, i.e. 12 months, as defined in the Diagnostic Criteria [3] for gambling disorders.

“Persistent and recurrent problematic gambling behaviors leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the following in a 12-month period”.

Furthermore, the severity level is established depending on the number of criteria endorsed:

- Mild: 4-5 criteria met.
- Moderate: 6-7 criteria met.
- Severe: 8-9 criteria met.

Moreover, it is specified that the gambling disorder is associated with “some specific medical diagnoses” and “high rates of co-morbidity with other mental disorders” [3].
Survey on the Incidence of Gambling in Romania

Romania is at the lower limit of the European average, that is to say 0.5%–2% problem gamblers of the total population over 18 years, according to the most recent survey carried out by GfK Romania [4]. This means that 0.6% of the total population over 18 years has gambled beyond the limit of entertainment in comparison with the European average ranging between 0.5%–2%.

The study conducted by GfK Romania showed the following data [4]

- 15% of the total population over 18 years gambled at least once in the last 12 months such as online gambling, offline sports betting, slot machines, lottery, scratch cards or cards;
- Romanians who play on weekly basis are generally young men, aged between 18 and 24 years old, single, coming from urban areas
- Most of them gamble for pleasure, but also to earn money or valuables
- Those who gamble to earn money or valuables may be tempted to spend more money than initially proposed and further driven by the desire to recover the amounts lost.

According to the aforementioned survey, Romanian gamblers may be divided into two categories, as follows [4]

1. Occasional gamblers: 25% of Romanian adult men gambled at least once in the last 12 months, while in the same period women were 7%; the occasional gamblers are mainly living in small towns, having up to 30,000 inhabitants, where the entertainment possibilities are limited.
2. Regular gamblers, who gamble at least once a week and are mainly young men, with an average income of 2,500 lei per month, aged between 18 and 24 years old, single, at an upper secondary education level, coming from urban areas and representing 32% of total number of gamblers.

Predominantly, the gamblers with a weekly frequency gamble or bet for amusement and to earn money or other valuables. In compliance with the results of the abovementioned survey, the incidence of problem gamblers in Romania with over 18 years of age is 0.6% [4].

Method Of Phycotherapeutic Intervention

The first step that a person should take in order to change the problematic gambling behaviour is to accept that he/she needs help. A person suffering from a gambling disorder shall need more than a psychotherapist, but also the support of this/her entire surrounding family and friends.

In this respect, we have developed a cognitive-behavioral approach with the following key tasks: assessment and formulation; psycho-education; cognitive restructuring; problem-solving training; assertiveness skills training; relapse prevention [5]. In a study conducted to a number of 119 subjects who joined the Responsible Gambling Project in Romania we concluded that after the application of the proposed psychotherapy program, 74.6% of the participants who completed the program no longer fulfilled the diagnostic criteria for pathological gambling and were reclassified as problem gamblers; also, the results were consistent at the 3 month follow-up [6].

The psychotherapeutic intervention aims to enhance the adaptive and coping behavior of the gamblers by keeping the gambling in the area of healthy recreational activities involving low or affordable financial and personal risks.

Furthermore, a range of prevention programs should support the psychotherapeutic intervention as such prevention programs have lowered the rates of individuals requiring treatment for mental health problems [7].

Conclusions

There were a very few studies conducted in Romania in this respect and generally in the Eastern European countries.

Consequently, this study is welcome for all the organizations involved in the programs for responsible gaming in Romania. Such organizations will be able to benefit from the expertise of clinicians, of those who already have been working on this kind of programs in many other countries.

Even if the survey carried out by GfK Romania showed that Romania is at the lower limit of the European average, the gambling disorders still remain an important public health issue, associated with high rates of psychiatric co-morbidity.

Responsible Gambling Project in Romania has launched the following set of ethical principles which should underlie the activity of all the gambling organizers [8].

1. Promote your business as a means of entertainment, not as a method to earn money.
2. Earmark human resources in order to generate and involve the company in social responsibility and client protection actions. Provide a budget in this respect.
3. Train your employees permanently on the latest practices related to the assurance of a responsible relation of the client with the gambling.
4. Provide to the client limited services and facilities associated with gambling that might encourage the excessive gambling.
5. Inform permanently and openly the clients on the dangers involved by the excessive gambling and on how the gambling problems are treated.
6. Make sure that you identify the problem gamblers on due time and correctly.

7. Take immediate action when you have identified a problem gambler.

8. If necessary, cooperate with the gambler’s family in order to help the problem gambler more efficiently.

9. Make sure that the access of minors into the gambling halls is strictly forbidden.

10. Seek permanently the partnership with the relevant authorities and the voluntary participation to the actions aiming the social responsibility.

The National Comorbidity Study Replication indicates that 74% of cases where the individual with gambling disorder meets criteria for another lifetime disorder, at least one other such disorder began at an earlier age than the gambling disorder [9]. In a study conducted in Romania we concluded that Romanian compulsive gamblers showed a depressed disorder in 76.46% of the cases, an average level of anxiety in 64.71% of the cases and a personality disorder in 44.5% of the cases [10,11]. Therefore, the individuals suffering from gambling disorder should initially undergo psychotherapy for other associated disorders and subsequently undergo psychotherapeutic intervention for pathological gambling.

As severe gambling problems have been shown to originate during childhood and adolescence, the specialists consider that young people must be informed about the steps that can lead to form pathological game of chance: fun, excitement, obsession, naivety, wrong choices; highlighting and decay [12]. A study conducted in Romania on a total number of 180 participants concluded that the impulsivity level is higher in the clinical group (diagnosed pathological gamblers) than in the control group and this high level of impulsivity, most of the times, represents a risk factor in maintaining gambling disorder and in the occurrence of relapse [13].

Responsible gambling represents an informed choice on the probability of winning, a form of entertainment and relaxation in low risk situations; it promotes a gambler’s state of well-being [14].

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