

The quality of sexual life and personality of men addicted to gambling

Witold Tomasz¹, Robert Kowalczyk¹, Zbigniew Lew-Starowicz²

¹The Department of Sexology, the Andrzej Frycz Modrzewski Krakow University

²The Department of Medical Sexology and Psychotherapy, the Centre of Postgraduate Medical Education in Warsaw

Abstract

Introduction: In Poland, every second Pole declares that he participated in this type of activity at least once. Addiction affects many other forms of human activity including sexuality. The aim of this research is to determine a connection of the quality of sexual life, undertaken sexual activity and personality traits with gambling addiction.

Material and methods: there were 95 adult male gamblers included in the research. The research group comprised 50 men addicted to gambling, the control group consisted of 45 non-dependent men. The research was conducted by means of: the NEO-Five Factor Inventory, the Sexual Quality of Life-Male questionnaire and the Changes in Sexual Functioning Questionnaire-Male.

Results: a negative, statistically significant connection between the intensification of gambling addiction and undertaken sexual activity ($p = 0.026$) and a general tendency of the decrease in sexual life along with the increase in addiction ($p = 0.017$) were determined. Also, a significant statistically positive connection between the intensification of a neuroticism feature and a tendency to gambling addiction ($p = 0.003$) was demonstrated. Additionally, the research results show that the increase in obtained results at the level of gambling addiction corresponded to lower obtained results at the level of conscientiousness ($p = 0.001$) and agreeableness ($p = 0.002$).

Conclusions: men addicted to gambling are characterised by a low level of the intensification of agreeableness and conscientiousness features in comparison to non-dependent people. There is a statistically significant connection between elevated neuroticism and a tendency to gambling addiction. The quality of sexual life in people addicted to gambling decreases along with the increase in the intensification of addiction.

Key words: pathological gambling, sexual behaviours of pathological gamblers, personality correlates of pathological gambling

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Introduction

Pathological gambling is a form of addiction conditioned multi-factorially [1]. Commonness and generalised access to this form of activity cause the necessity to examine this issue and gather valuable information which can improve therapy and constitute guidelines in preventive actions. Despite legal restrictions, there is relatively easy access to e.g. points with slot machi-

nes [2]. In the CBOS research report from 2011, every second Pole declared participation in gambling games ($n = 1189$) [3]. According to CBOS, 3.7% of Poles gamble in a way which can lead to addiction. In this form of activity, men definitely prevail, where one out of five exhibits symptoms of addiction (20.4%) [4]. With regard to elaborations highlighting the coexistence of pathological gambling with other mental disorders, conducting research concerning common functioning patterns in psychological and social areas of people addicted to gambling seems reasonable. In the subject literature, there are studies concerning more frequent coexistence of gambling addiction in people addicted to alcohol and drugs than in people outside these groups [5, 6].

Adres do korespondencji: Zbigniew Lew-Starowicz
 The Department of Medical Sexology
 and Psychotherapy the Centre
 of Postgraduate Medical Education in Warsaw
 e-mail: centrum@lew-starowicz.pl

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For example, as Petry et al. [7] state, 73.2% of pathological gamblers meet the criteria of alcohol addiction, and 38.1% meet the criteria of drug addiction [7]. Pathological gamblers meet also criteria of at least one anxiety disorder [7] and it is noted that at least personality disorders occur in 93% of cases [8]. Problem gamblers meet the criteria of antisocial personality disorders six-fold more often than non-gaming people [9]. There are relatively few reports on the connection of pathological gambling with the topic of sexuality. It is assumed that gambling can result in increased undertaking of risky sexual behaviours, which can be due to the gamblers' tendency to irrational thinking and their increased undertaking of risk [10]. Particularly, this problem concerns men addicted to gambling [11]. The aim of this research is to determine a connection of the quality of sexual life, undertaken sexual activity and personality traits with gambling addiction.

Material and methods

Sample

In the research, there were 95 men occupied with gambling which consisted in mainly gaming on slot machines. Men were divided into the research group and control group by means of the South Oaks Gambling Screen (SOGS), a gambling addiction questionnaire. The research group comprised 50 men meeting the criteria of gambling addiction, they were in the age range between 19 and 65 years old ($x = 42.4$; $SD = 14.5$). The control group comprised 45 men who were non-dependent, did not meet the criteria of gambling addiction, were in the age range between 24 and 62 years old ($x = 42.4$; $SD = 14.5$).

Procedure

All examined people filled in questionnaires anonymously and on their own, in the case of uncertainty, questions were explained. The examined people were selected from a games room and a casino. About 90% of respondents agreed to take part in the research. Men who refused to participate in the research explained that by the lack of sexual life.

Measures

By means of the South Oaks Gambling Screen (SOGS) questionnaire we are not only able to distinguish between a pathological gambler and non-pathological gambler, but also during the analysis of separate questions, we can identify different levels of this addiction intensification, along with distinguishing the clinical group from non-clinical pathological gamblers. Such information is provided by a group of eleven

discriminatory questions. The questionnaire was used in this work to divide a population into people addicted belonging to the research group and a non-dependent population belonging to the control group. The questionnaire consists of 20 diagnostic questions and 6 additional ones. Questions concern, among others: types of undertaken gambling activities, frequency of playing gambling games, material consequences, a degree of the sense of subjective control over gambling gaming. The evaluation scale: 0 pts — no problems with gambling, 1–4 pts — minor problems with gambling, 5 and more pts — a probably pathological gambler [12].

A Polish adaptation of the personality inventory NEO Five-Factor Inventory-revised [13] was used in the research. This tool serves to diagnose personality traits included in the five-factor model, referred to as the Big Five Model. It comprises 60 items divided into five basic dimensions: *neuroticism*, *extraversion*, *openness to experiences*, *agreeableness* and *conscientiousness*, each of them consists of 12 questions based on a five-point Likert scale, where responses begin with "strongly disagree" (0) to "strongly agree" (4) [14].

A Polish version of the Sexual Quality of Life-Male (SQoL-M) questionnaire [15], comprises 11 items, where each of them presents a question about thoughts and feelings related to sexual life. Sexual life is understood as a physical activity in the sexual sphere and emotional bond with a partner. Sexual activity includes all actions which may lead to sexual arousal or sexual pleasure, e.g. intercourse, caresses, foreplay, self- and partner masturbation, oral and anal sex. Responses consist of 6-point statements from "completely agree" to "completely disagree" [15].

A Polish version of the Changes in Sexual Functioning questionnaire (CSFQ-M) originally created by Keller et al. [16]. This questionnaire consists of 14 questions, of which questions No.: 10, 14 constitute items with reverse scoring. This scoring is based on a point scale from 1 to 5 for a given statement. Sample responses are "no pleasure", "extreme pleasure" and "never", "every day". In the calculation of results of the complete change in sexual functioning, all obtained points for separate questions are added.

Data analysis

The same calculation procedure was conducted for all obtained results. The concordance of researched distributions with the normal distribution was checked by means of Kolmogorov–Smirnov and Shapiro-Wilk tests, distributions concordant with the normal distribution were checked by homogeneity of variance using the Levene's test. For homogeneous variances and

distributions concordant with the normal distribution, tests T were applied in order to compare groups, if the distribution deviated from the normal distribution, Mann-Whitney tests were applied. Statistical significance was assumed at the level $p < 0.05$, a link between variables was checked by means of the Spearman correlation coefficient.

Ethics

The research was conducted in accordance with ethical principles of psychological researching. All participants of the research became acquainted with its aim and agreed to participate in the research.

Results

The analysis included mainly the verification of hypotheses concerning the occurrence of a statistically significant connection between the intensification and occurrence of personality traits in accordance with the concept of Big Five in men addicted to gambling. Statistically significant differences between the research group and control group were demonstrated on the basis of the collected research material. They concerned conscientiousness ($p = 0.042$) and the agreeableness trait ($p = 0.013$). Lower average specific values were for the research group. The results are presented in Table 1.

The next stage of verification consisted in the analysis of results obtained by means of the SOGS test and the NEO Five-Factor Inventory, within which the connection between the intensification of gambling addiction and personality traits was checked. In the undertaken statistical analysis, a significant statistically positive connection between the intensification of the neuroticism feature and a tendency to gambling addiction ($p = 0.003$) was demonstrated. It was also demonstrated that the increase in obtained results at the level of gambling addiction corresponded to lower obtained results at the level of conscientiousness ($p = 0.001$) and agreeableness ($p = 0.002$). The results for all personality traits of the inventory are presented in Table 2.

In terms of the quality of sexual life, men obtained high results not differing between groups in a statistically significant way ($p = 0.472$), while the analysis of the

results obtained in the Sexual Quality of Life-Male questionnaire for the group of men addicted to gambling indicated a negative statistically significant connection between variables SOGS and SQoL-M ($p = 0.017$). The result is presented in Table 3 and Figure 1.

Along with the intensification of gambling addiction, a decrease in the quality of sexual life ($p = 0.017$) is observed. However, it should be noted that the results obtained by respondents reflect a general tendency to reduced quality of sexual life along with the increase in the intensification of gambling addiction, rather than the level itself which was in the range indicating the good and high quality of sexual life.

Within the sexual activity research by means of the CSFQ-M test, statistically significant differences ($p = 0.108$) were not demonstrated between the control group and research group. These results are presented in Table 4. Both groups obtained results from the periphery of norms for the Changes in Sexual Functioning

Table 2. Results of the correlation/regression analysis between results obtained in SOGS and NEO FFI

		SOGS
SOGS — no. of points	rho	1.000
	p (two-sided)	.
	N	95
Neuroticism	Correlation coefficient	.302
	p (two-sided)	.003
	N	95
Extraversion	rho	-.116
	p (two-sided)	.264
	N	95
Openness to new experiences	rho	.015
	Significance (two-sided)	.888
	N	95
Conscientiousness	rho	-.337
	Significance (two-sided)	.001
	N	95
Agreeableness	rho	-.307
	Significance (two-sided)	.002
	N	95

Table 1. Statistics for separate groups for conscientiousness and agreeableness (n = 95) traits

	Group	N	M	SD	SE
Conscientiousness	research	50	29.84	7.857	1.111
	control	45	33.04	7.249	1.081
Agreeableness	research	50	25.84	6.476	.916
	control	45	28.93	5.327	.794

Questionnaire-Male. It is worth noting that the results obtained by the research group are characterised by a slightly lower mean and lower borderline results.

Having analysed the results obtained in the research group, a negative statistically significant connection between variables SOGS and CSFQ-M ($p = 0.026$) was demonstrated. A clear connection between the decrease in undertaking sexual activity corresponding to the increase in the intensification of gambling addiction can be observed (Tab. 5, Fig. 2).

Discussion

The conducted research indicates that men addicted to gambling obtained statistically lower results for the variable of conscientiousness. This may

suggest that these men are characterised by lower perseverance and motivation in goal-oriented actions, a tendency to give up on tasks before their accomplishment and a lower degree of organisation than non-dependent people. Lower statistically significant results for the agreeableness scale may indicate that people addicted to gambling can have a lowered level of trust towards other people, low sensitivity to feelings and needs of others and be characterised by egocentrism. More often than non-dependent people, they can perceive other people as a source of risk, treat them as potential winners in gambling games and try to manipulate others in order to obtain financial gain for the continuation of the undertaken gambling activity. Along with the increase in addiction, the intensification of these personality traits can be observed. This can

Table 3. Results of the correlation/regression analysis between variables SOGS and SQoL-M in the research group (n = 50)

		SOGS
SOGS	rho	1.000
	p (two-sided)	.
SQoL-M	N	50
	rho	-.335
	p (two-sided)	.017
	N	50

Table 5. Results of the correlation/regression analysis for SOGS and CSFQ_M_C in the research group (n = 50)

		SOGS
	rho	1.000
	p (two-sided)	.
CSFQ_M_C	N	50
	rho	-.315
	p (two-sided)	.026
	N	50

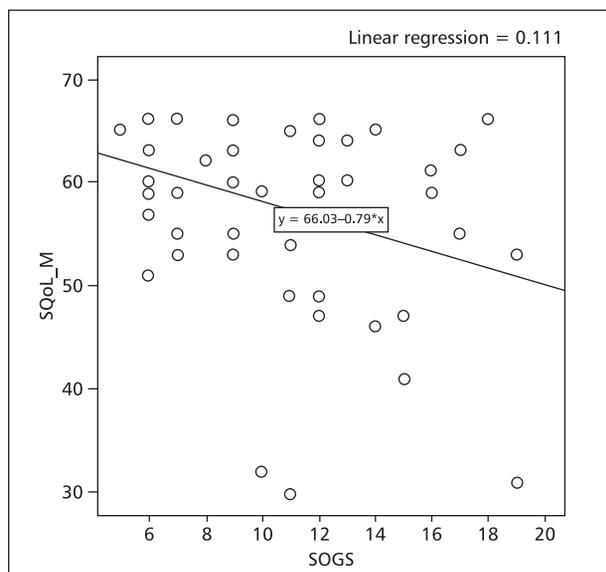


Figure 1. Results of the correlation/regression analysis for SOGS and SQoL-M in the research group (n = 50)

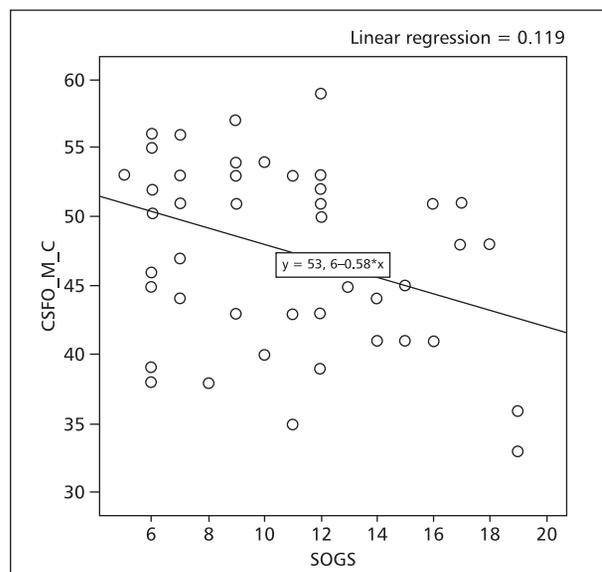


Figure 2. Results of the correlation/regression analysis for SOGS and CSFQ_M_C in the research group (n = 50)

Table 4. Statistics for separate groups for CSFQ-M (n = 95)

	Group	N	M	SD	SE
CSFQ_M_C	research	50	47.58	6.600	.933
	control	45	49.66	5.702	.860

result in manifesting antisocial behaviour and, in particular, disturbances in family, friend and professional relations. Similar results in terms of lower conscientiousness and agreeableness in people addicted to gambling were obtained by Lelonek-Kuleta [17]. Moreover, it should be noted that low conscientiousness and agreeableness in the Big Five Model is characteristic of antisocial personality disorders [13]. Neuroticism as a personality trait intensifying along with the intensification of gambling addiction may be indicative of experiencing negative emotions by addicted men, a difficulty in dealing with psychological stress, a tendency to undertake escape actions and to mythologize reality [18–20]. The coexistence of intensified neuroticism with reduced agreeableness may lead to problems with self-control, erroneous direction of aggression through discharging it on slot machines and the staff of casinos and games rooms. Studies concerning the sexuality sphere did not demonstrate statistically significant differences between the research group and control group for the quality of sexual life and the undertaken activity. However, the intra-group analysis in relation to gambling addiction indicated that along with the increase in addiction the quality of sexual life decreases. The results concerning undertaking sexual activity by men addicted to gambling are on the periphery of the norm, being characterised by a lower arithmetical mean and lower borderline results in comparison to the results obtained by non-dependent people. Negative correlation occurring in the group of men addicted to gambling between the variable obtained by means of SOGS and the Changes in Sexual Functioning Questionnaire-Male may suggest a reduced willingness and need to undertake sexual activity broadly understood as an intercourse, oral, anal sex, masturbation, sexual fantasies and other forms of sexual activity. This may concern a dependent person getting used to providing specific stimulus and the type of stimulation, that is gambling. Consequently, this may not allow to obtain satisfactory pleasure from undertaking sexual activity.

Conclusions

Men addicted to gambling are characterised by a significantly low level of increased personality traits such as agreeableness and conscientiousness in comparison to non-dependent people. It was also indicated that there is a statistically significant connection between elevated neuroticism and a tendency to gambling addiction. It is characteristic of men addicted to gambling that along with the increase in gambling addiction the quality of sexual life and undertaking sexual activity decrease.

References:

1. Dzik B, Hazard W. Hazard. In: Tyska T, Hazard W. ed. *Psychologia ekonomiczna*. Gdańskie Wydawnictwo Psychologiczne, Gdańsk 2004: 567–599.
2. Tomasz W, Mirski A. Patologiczny hazard jako przykład współczesnych zagrożeń behawioralnych. *Eukrasia*. 2014; 20: 113–122.
3. CBOS. Polak w szponach hazardu. 2011.
4. CBOS. Oszacowanie rozpowszechnienia oraz identyfikacji czynników ryzyka i czynników chroniących w odniesieniu do hazardu, w tym hazardu problemowego(patologicznego) oraz innych uzależnień behawioralnych. Warszawa. 2012.
5. Lorains FK, Cowlishaw S, Thomas SA. Prevalence of comorbid disorders in problem and pathological gambling: systematic review and meta-analysis of population surveys. *Addiction*. 2011; 106(3): 490–498, doi: [10.1111/j.1360-0443.2010.03300.x](https://doi.org/10.1111/j.1360-0443.2010.03300.x), indexed in Pubmed: [21210880](https://pubmed.ncbi.nlm.nih.gov/21210880/).
6. Rush BR, Bassani DG, Urbanoski KA, et al. Influence of co-occurring mental and substance use disorders on the prevalence of problem gambling in Canada. *Addiction*. 2008; 103(11): 1847–1856, doi: [10.1111/j.1360-0443.2008.02338.x](https://doi.org/10.1111/j.1360-0443.2008.02338.x), indexed in Pubmed: [19032535](https://pubmed.ncbi.nlm.nih.gov/19032535/).
7. Petry NM, Stinson FS, Grant BF. Comorbidity of DSM-IV pathological gambling and other psychiatric disorders: results from the National Epidemiologic Survey on Alcohol and Related Conditions. *J Clin Psychiatry*. 2005; 66(5): 564–574, indexed in Pubmed: [15889941](https://pubmed.ncbi.nlm.nih.gov/15889941/).
8. Blaszczynski A, Steel Z. Personality Disorders Among Pathological Gamblers. *J Gamb Stud*. 1998; 14(1): 51–71, indexed in Pubmed: [12766434](https://pubmed.ncbi.nlm.nih.gov/12766434/).
9. Cunningham-Williams RM, Cottler LB, Compton WM, et al. Taking chances: problem gamblers and mental health disorders—results from the St. Louis Epidemiologic Catchment Area Study. *American Journal of Public Health*. 1998; 88(7): 1093–1096, doi: [10.2105/ajph.88.7.1093](https://doi.org/10.2105/ajph.88.7.1093).
10. Delfabbro PH, Winefield AH. Predictors of irrational thinking in regular slot machine gamblers. *J Psychol*. 2000; 134(2): 117–128, doi: [10.1080/00223980009600854](https://doi.org/10.1080/00223980009600854), indexed in Pubmed: [10766103](https://pubmed.ncbi.nlm.nih.gov/10766103/).
11. Douglas M, Walker C, Folk JL. The relationship between gambling behavior and binge drinking, hard drug use, and paying for sex. *UNLV Gaming Research & Review Journal*. 2010; 14(1).
12. Woronowicz BT. Hazard. Historia, zagrożenia i drogi wyjścia. Media rodzina, Poznań 2012.
13. Costa P, McCrae R. NEO PI-R professional manual. Psychological Assessment Resources, Odessa, FL 1992.
14. Zawadzki B, Strelau J, Szczepaniak P. Inwentarz osobowości NEO-FFI Costy i McCrea. Adaptacja polska. PTP, Warszawa 1997.
15. Abraham L, Symonds T, May K, et al. Psychometric validation of a sexual quality of life questionnaire for use in men with premature ejaculation or erectile dysfunction. *J Sex Med*. 2008; 5(3): 595–601, doi: [10.1111/j.1743-6109.2007.00749.x](https://doi.org/10.1111/j.1743-6109.2007.00749.x), indexed in Pubmed: [18208501](https://pubmed.ncbi.nlm.nih.gov/18208501/).
16. Keller A, McGarvey EL, Clayton AH. Reliability and construct validity of the Changes in Sexual Functioning Questionnaire short-form (CSFQ-14). *J Sex Marital Ther*. 2006; 32(1): 43–52, doi: [10.1080/00926230500232909](https://doi.org/10.1080/00926230500232909), indexed in Pubmed: [16234225](https://pubmed.ncbi.nlm.nih.gov/16234225/).
17. Lelonek-Kuleta B. Psychospołeczne korelaty uzależnienia od gry na automatach losowych. *KONFERENCJE, Alkoholizm i Narkomania*. 2011; 24(4): 374–375.
18. Pospiszyl I. Patologie społeczne. Resocjalizacja, Wydawnictwo Naukowe PWN. 2009: Warszawa.
19. Miller JD, Mackillop J, Fortune EE, et al. Personality correlates of pathological gambling derived from Big Three and Big Five personality models. *Psychiatry Res*. 2013; 206(1): 50–55, doi: [10.1016/j.psychres.2012.09.042](https://doi.org/10.1016/j.psychres.2012.09.042), indexed in Pubmed: [23078872](https://pubmed.ncbi.nlm.nih.gov/23078872/).

20. Nower L, Blaszczynski A, Gupta R, et al. A pathways model of problem and pathological gambling. *Addiction*. 2002; 97(5): 487–499, indexed in Pubmed: [12033650](https://pubmed.ncbi.nlm.nih.gov/12033650/).
21. Huang JH, Jacobs DF, Derevensky JL, et al. Gambling and health risk behaviors among U.S. college student-athletes: findings from a national study. *J Adolesc Health*. 2007; 40(5): 390–397, doi: [10.1016/j.jadohealth.2006.11.146](https://doi.org/10.1016/j.jadohealth.2006.11.146), indexed in Pubmed: [17448395](https://pubmed.ncbi.nlm.nih.gov/17448395/).
22. Samuel DB, Widiger TA. A meta-analytic review of the relationships between the five-factor model and DSM-IV-TR personality disorders: a facet level analysis. *Clin Psychol Rev*. 2008; 28(8): 1326–1342, doi: [10.1016/j.cpr.2008.07.002](https://doi.org/10.1016/j.cpr.2008.07.002), indexed in Pubmed: [18708274](https://pubmed.ncbi.nlm.nih.gov/18708274/).