**HSH105 Assessment Task 3: Written Assessment**

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Unit Submitted for: HSH105 - Understanding Families and Health Student ID: 221147552

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**Author Declaration**

I, Michael Alford, declare that I am the sole author of the following work submitted as part of the assessment in HPS203/773. Particularly, I have not colluded with other students in the completion of this work; I have not duplicated work of my peers or from sources such as books, journal articles,

or websites without adaptation and due citation; and I have not contracted a

third-party to complete any component of this assessment on my behalf. I acknowledge that any of these activities would constitute Academic Misconduct as defined by Regulation 4.1(2) of Deakin University and may consequently attract penalties as defined in Schedule A: Penalties for Student Academic Misconduct.

**Introduction**

*You need to include an introduction (approximately 100 words) that includes a brief statement to set the context and identifies what your assessment will cover in terms of the overview of the challenge/issue, the health impacts, the influence of other settings families engage with and recommendations. This acts to 'signpost' to your reader what content will follow in your response.*

**Overview of the challenge / Issue**

Across the population in Australia, it was found that 1% of all Australians had participated in problem gambling in 2018 (Australian Institute of Health and Welfare, 2021). This assessment of gambling data was measured by the Australian Institute of He­­alth and Welfare using the Problem Gambling Severity Index (PGSI). Participants scoring between 8 – 27 in this test were identified as problem gamblers. The social costs of gambling addiction can be high when it comes to individuals, but they do not affect only the individual. It has been found that a person with a severe gambling addiction can negatively impact up to 6 others in their immediate and extended family. While problem gambling can have a range of negative social impacts on both the individual and families, the most significant of these harms impacts relationships (24.9%), physical health (20.6%), and emotional or psychological health (18.6%).

**Health Impacts of Gambling**

There are many documented health impacts of problem gambling and gambling addiction (Victorian Responsible Gambling Foundation, 2019), however, some significant examples include relationship difficulties, physical health impacts, emotional or psychological distress, and financial problems.

The impacts of problem gambling on relationships at the family level can be significant, with effects felt by all family members. Spouses can be most typically effected by problem gambling as a source of disagreement, and through the neglect of responsibilities within the family. The neglect of family responsibilities as a primary source of conflict within a partnership, due to the isolation and self-sacrifice needed for a partner to pick up the slack of a parent who is absorbed in gambling activity outside the family. The burden of sole responsibility for the family while a partner is engaged with gambling, places an uneven responsibility on the responsible parent, meaning that neglect may extend to the children as well as the remaining partner in a gambler’s absence.

Some of the physical health impacts of problem gambling or addiction can include anxiety and depression, and a reduction in the duration and quality of sleep reduction (Victorian Responsible Gambling Foundation, 2019). The primary physical symptoms linked with problem gambling have been identified as reduced sleep as a result of worry, stress, depression and anxiety disorders. People directly affected by problem gambling are commonly likely to overuse health care and engage in repeat visits to their doctor. The statistics on this topic also suggest that problem gamblers are at much higher risk of being diagnosed with a depression or anxiety disorders. Links have also been found between problem gambling and the prevalence of tobacco and alcohol overuse, as well as further illicit substances.

The Victorian Responsible Gambling Foundation (2019) has found that there are significant emotional impacts to problem gamblers centring around self-perception and disrupted feelings of self-worth. Some of the early warning signs experienced by people with gambling addiction are feelings of anger and hopelessness, which can quickly develop into failure, vulnerability, worthlessness and extreme distress. These emotional disturbances have also been reported as impacting the gambler’s immediate family as well as the gambler.

Financial difficulties have also been highlighted as problematic for those at high risk of gambling addiction, and are the fourth most common problem experienced by the individual and their families (Victorian Responsible Gambling Foundation., 2019). Financial problems can extend into multiple areas of the family’s day to day life including recreational activities (the family suddenly not being able to afford them), as well as more serious events such as grocery shopping, medication and educational needs for children at school. Some individuals have also been reported to go as far as losing their houses or having to file for bankruptcy.

#### **Influence of other settings families engage with**

Bronfenbrenner’s Bioecological Model is a descriptive model of childhood and adolescent development, which serves to link together the various areas of influence over our development. The model focusses on the individual at the centre, with other areas of impact on the individual radiating outward. Such areas include a child’s inherent nature and qualities, home and family life, as well as external areas of influence, such as culture and neighbourhood (Sigelman et al., 2019).

The impact of problem gambling on children can effect outcomes for a child’s education and their parent’s relationship with the school or educator in the microsystem and mesosystem layers of Bronfenbrenner’s Bioecological Model. As demonstrated by Suomi et al. (2022), children often miss days at school as a result of problem gambling, with communication between parents and schools also strained. At the microsystem level, the child is exposed to financial neglect, potentially missing out on inclusive events within school such as excursions, and other activities. At the mesosystem level, communications between parents and the school may be difficult as a result of the problems going on at home, and any stigma attached to openly discussing the problem.

Looking again at the microsystem level, a child’s peer group can be affected by parental problem gambling in a number of ways (Savolainen et al., 2019). While acknowledging prior discussion around the pressures placed on children and the family’s relationship with school, Savolainen et al (2019) highlight the unintended consequence of peer related problem gambling amongst children through various digital mediums with the opportunity to gamble more prevalent than ever. This type of behaviour can be normalised within a family setting, suggesting that children raised in this environment may be at a higher risk of developing risk-taking behaviours alongside their parents privately or online. It is also suggested here that gambling communities existing online that children are potentially exposed to through online gambling, can provide an avenue for peer bonding and acceptance into social groups in place of the traditional face to face experiences of the classroom and school experience generally.

*Use Bronfenbrenner's bioecological model to* ***analyse*** *three additional settings (e.g., beyond the immediate family) (approximately 150 words per setting for a total of 450 words) that may influence a family's experience of this challenge/issue.*

#### **E. Recommended strategies to manage the challenge/issue**

*You need to* ***briefly identify*** *three clear strategies (approximately 50 words each) families could adopt to reduce the impacts of this challenge/issue.*

*These recommendations should be supported by references.*

*Strategies:*

1. *One Strategy*
2. *Two Strategy*
3. *Three Strategy*

#### **F. Conclusion**

*You should include a conclusion (approximately 100 words) that summarises the main points of your assessment. This should not introduce new concepts and does not require in-text citations (as all of the information you summarise should have already been cited in the body of your report).*

# References

Australian Institute of Health and Welfare. (2021). *Gambling in Australia*. Australian Institute of Health and Welfare. https://www.aihw.gov.au/reports/australias-welfare/gambling#harms

Savolainen, I., Sirola, A., Kaakinen, M., & Oksanen, A. (2019). Peer Group Identification as Determinant of Youth Behavior and the Role of Perceived Social Support in Problem Gambling. *Journal of Gambling Studies*, *35*(1), 15–30. https://doi.org/10.1007/s10899-018-9813-8

Sigelman, C. K., De George-Walker, L., Cunial, K., & Rider, E. A. (2019). *Life span human development* (3rd Australian and New Zealand edition). Cengage Learning Australia.

Suomi, A., Lucas, N., Dowling, N., & Delfabbro, P. (2022). Parental problem gambling and child wellbeing: Systematic review and synthesis of evidence. *Addictive Behaviours*, *126*, 107205. https://doi.org/10.1016/j.addbeh.2021.107205

Victorian Responsible Gambling Foundation. (2019, December 17). *Types of harm from gambling*. Victorian Responsible Gambling Foundation; Victorian Responsible Gambling Foundation. https://responsiblegambling.vic.gov.au/resources/gambling-victoria/gambling-harm-victoria/types-harm-gambling/