Addictive Behaviors 89 (2019) 156–162

Contents lists available at ScienceDirect

Addictive Behaviors

journal homepage: www.elsevier.com/locate/addictbeh

Short Communication

The steamy mirror of adolescent gamblers: Mentalization, impulsivity, and time horizon

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HIGHLIGHTS

- The study first investigates the role of impairment in mentalization in gambling disorder.
- We analyzed the interplay among mentalizing, impulsivity, and time perspective on gambling.
- Four hundred and ten late adolescents participated in the study.
- Gender, impulsivity, present orientation horizon, and poor mentalization predicted gambling.
- Path analysis explored the relationships among variables contributing to gambling severity.

ARTICLE INFO

Keywords:
Gambling
Adolescents
Mentalization
Reflective function
Impulsivity
Time perspective

ABSTRACT

This study aimed to first investigate the role that general impairment in mentalization plays in gambling disorder and to analyze the interplay among mentalizing, impulsivity, and time perspective in adolescent gambling. Four hundred and ten late adolescents took part in the study. Participants were administered the South Oaks Gambling Screen Revised for Adolescents (SOGS-RA), the Reflective Functioning Questionnaire (RFQ-8), the Functional and Dysfunctional Impulsivity Scale (FDIS), and the 14-item Consideration of Future Consequences scale (CFC-14). The results showed that male adolescents are far more likely at-risk/problem gamblers than female adolescents. Furthermore, data indicated that the higher the gambling severity, the higher the dysfunctional impulsivity and the shorter the time horizon. Linear regression analysis showed that impairments in mentalizing represent a significant predictor of gambling severity. Finally, to clarify if dysfunctional impulsivity was on the path from uncertain mentalizing to gambling severity or if mentalizing was the mediator of the impact of functional impulsivity on gambling severity, data were submitted to path analysis. Results indicated that deficit in mentalizing has a direct effect on gambling severity and mediates the association between dysfunctional impulsivity and gambling involvement. The relation between gambling severity and RFQ-8 scores suggests that general impairment in mentalizing plays a key role in adolescent problematic gambling.

1. Introduction

Gambling has become one of the most frequently reported addictive behaviors among adolescents (Secades-Villa, Martínez-Loredo, Grande-Gosende, & Fernández-Hermida, 2016). Mainly due to the rapid expansion of legalized gambling opportunities and the emergence of new form of gambling, including video games with loot boxes, gambling prevalence will predictably increase further in the near future (Calado, Alexandre, & Griffiths, 2017; Delfabbro, King, & Derevensky, 2016). In this alarming scenario, adolescent involvement in gambling activities is of particular concern, since some risk factors for disordered gambling are so manifest during adolescence, that adolescence per se may be regarded as a risk factor for the onset and the development of gambling addiction (Cosenza & Nigro, 2015; for a review, see Nigro, Cosenza, & Ciccarelli, 2017). Besides, several studies have highlighted that, ceteris paribus, severe gambling-related difficulties in adulthood stem from early gambling problems (Cosenza, Baldassarre, Matarazzo, & Nigro, 2014; Gupta & Derevensky, 2014; Volberg, Gupta, Griffiths, Olason, & Delfabbro, 2010).

Along with cognitive distortions (for a review, see Taylor, Parker, Keefer, Kloosterman, & Summerfeldt, 2014), propensity toward impulsivity represents one of the strongest candidate for problematic gambling (MacKillop et al., 2014). Prospective investigations have found that high impulsivity during early adolescence predicts later

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https://doi.org/10.1016/j.addbeh.2018.10.002
Received 17 July 2018; Received in revised form 6 September 2018; Accepted 1 October 2018
Available online 06 October 2018
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gambling problems (Secades-Villa et al., 2016).

Impulsivity describes a constellation of heterogeneous traits or behavioral dispositions including the inability to take into account the future consequences of current behavior. Acting without considering future consequences has been regarded as one of the potential determinants of impulsive behaviors (Whiteside, Lynam, Miller, & Reynolds, 2005; see also Sharma, Kohl, Morgan, & Clark, 2013), since impulsive individuals tend to be more oriented toward the immediate than the future (Baumann & Odum, 2012; Daugherty & Brase, 2010). In addition, some studies supported the existence of a positive association between problematic gambling and shortened time horizon, i.e. to think about and plan the future (Hodgins & Engel, 2002), among both adults (MacLaren, Fugelsang, Harrigan, & Dixon, 2012) and adolescents (Cosenza, Griffiths, Nigro, & Ciccarelli, 2017; Cosenza & Nigro, 2015; Nigro et al., 2017). Recently, Noël, Saeremans, Kornreich, Jaafari, and D'Argembeau (2017) have demonstrated that problematic gambling is associated with reduced ability to imagine future events.

Both acting impulsively and being inattentive to the future represent a dangerous breeding ground for disordered gambling. This "myopia for the future" (Bechara, 2003) of problematic gamblers results also in poor decision-making under uncertainty (for review, see Wiehler & Peters, 2015). Two recent studies on affective decision-making among adolescents (Ciccarelli, Griffiths, Nigro, & Cosenza, 2016; Nigro & Cosenza, 2016) have demonstrated that young gamblers perform worse than nongamblers on the Iowa Gambling Task (IGT; Bechara, Damasio, Damasio, & Anderson, 1994) and do not show improvement of performance over time.

Brevers et al. (2013, 2014) have observed that poor decision-making in pathological gamblers is associated with biased metacognition. Specifically, these authors assessed metacognitions by asking participants to wager on their own decisions (post-decision wagering) and concluded that during a gambling-like task (Brevers et al., 2013), as well as a non-gambling task (Brevers et al., 2014), problem gamblers showed impaired metacognitive abilities, because they erroneously thought that they were performing much better than they actually were.

Since wagering is quintessential of gambling addiction, it may be that post-decision wagering impairment is the result of the unwillingness to consider the consequences of gambling. A recent paper on chasing losses, i.e. continuing gambling to recoup previous losses, has demonstrated that chasing affects decision-making in behavioral tasks involving money (Nigro, Ciccarelli, & Cosenza, 2018). Substantially, for problem gamblers it is more important to gaining more or recouping lost money by continuing gambling, than wondering if it wouldn't be better to give up. Indeed, evaluating rationally the quality of one's own decisions could conflict with the urge to gamble. So, it may be that in pathological gamblers only some facets of metacognition (post-decision wagering could represent only a facet of this constellation), rather than the metacognitive system in the whole, are somewhat disempowered, while on the other hand, it is possible that post decisional wagering reflects a more general impairment in mentalization.

Mentalization or reflective functioning (RF) is a form of social cognition characterized by the capacity to perceive and interpret both the self and others' behavior in terms of intentional mental states, such as thoughts, feelings, desires, wishes, goals and attitudes (Fonagy, Bateman, & Luyten, 2012). Mentalization failures have been shown to be associated with several mental disorders, including borderline and antisocial personality disorders (Fonagy et al., 2016), depression (Luyten, Fonagy, Lemma, & Target, 2012), and eating disorders (Pedersen, Poulsen, & Lunn, 2015; Skårderud, 2007; see also Fonagy et al., 2016). Furthermore, deficit in the capacity to "hold mind in mind" has been shown to be associated with substance abuse (Allen, Fonagy, & Bateman, 2008; Lecointe, Bernoussi, Masson, & Schauder, 2016; Möller, Karlgren, Sandell, Falkenström, & Philips, 2016), with gambling disorder (Lindberg, Fernie, & Spada, 2011; Spada & Roarty, 2015), as well as with other forms of out-of-control behaviors, such as sexual (Berry & Berry, 2014) and food addiction (Innamorati et al., 2017).

The aim of the present study is to first investigate the role that general impairment in mentalization plays in gambling disorder and to analyze the interplay among mentalizing, impulsivity, and time perspective in adolescent gambling.

In line with previous research (for reviews, see Delfabbro, Thomas, & Armstrong, 2018; Hing, Russell, Tolchard, & Nower, 2016; Nigro et al., 2017), it was expected that female adolescents would be less likely to report gambling-related problems than male adolescents.

Moreover, it was hypothesized that the more severe the gambling involvement is, the higher the level of dysfunctional impulsivity and the shorter the time horizon are. Finally, we hypothesized that, relative to nonproblem gamblers, at-risk and problem gamblers would show lower capacities of mentalization.

2. Materials and methods

2.1. Participants

Four hundred and eighteen late adolescents (53.2% boys) aged between 18 and 20 years (Mean age = 18.29 years; *SD* = 0.528) attending public high schools (52.9% lyceums and 47.1% technical and trade schools) in Southern Italy participated in the study.

Participants were administered the South Oaks Gambling Screen Revised for Adolescents (SOGS-RA; Winters, Stinchfield, & Fulkerson, 1993; Italian version: Colasante et al., 2013), the Reflective Functioning Questionnaire (RFQ-8; Fonagy et al., 2016), the Functional and Dysfunctional Impulsivity Scale (FDIS; Dickman, 1990), and the 14-item Consideration of Future Consequences scale (CFC-14; Joireman, Shaffer, Balliet, & Strathman, 2012; Italian validation: Nigro, Cosenza, Ciccarelli, & Joireman, 2016). The order of presentation of measures was counterbalanced. Prior to participation, all subjects provided written informed consent. The questionnaires were handed out and completed in the classroom. Administration of the instruments took approximately 20 min. The Ethics Committee of the research team's University Department approved the present study. Participants did not receive anything for participating in the study. For each paper-and pencil measure participants received detailed written instructions. Participants could ask any questions about the questionnaires, if any. Only participants attending the last year of high school were included in the sample.

2.2. Measures

The SOGS-RA consists of 12 scored items assessing gambling behavior and gambling-related problems during the past twelve months. In addition to the scored items, the SOGS-RA measures the frequency of participation in different gambling activities, the largest amount of money gambled in a day, and parental involvement in problematic gambling. Further, we asked participants to indicate the main reasons for gambling in a list of motives (Volberg, 1993). Consistent with Winters et al. (1993); Winters, Stinchfield, and Kim (1995), a score of 0–1 is indicative of "nonproblem" gambling, a score between 2 and 3 reflects an "at-risk" level of gambling, whereas a score of 4 or more is indicative of "problem gambling". The Italian version of the SOGS-RA was found to have acceptable internal reliability ($\alpha = 0.78$; Colasante et al., 2013). For the present study Cronbach's alpha was 0.76.

The RFQ-8 is an eight item self-rating questionnaire designed to measure reflective functioning. The RFQ-8 contains two subscales, tapping into different processes: *Certainty about mental states* (RFQ_C) and *Uncertainty about mental states* (RFQ_U). Low agreement on the RFQ_C scale reflects a tendency to develop excessive but inaccurate mentalizing (*hypermentalizing*), while high agreement reflects more genuine mentalizing. Similarly, very high scores on the RFQ_U indicate an almost complete lack of knowledge about mental states

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