



# Differences in gambling problem severity and gambling and health/functioning characteristics among Asian-American and Caucasian high-school students

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## ABSTRACT

Studies of Asian-American adults have found high estimates of problematic gambling. However, little is known about gambling behaviors and associated measures among Asian-American adolescents. This study examined gambling perceptions and behaviors and health/functioning characteristics stratified by problem-gambling severity and Asian-American and Caucasian race using cross-sectional survey data of 121 Asian-American and 1659 Caucasian high-school students. Asian-American and Caucasian adolescents significantly differed on problem-gambling severity, with Asian-American adolescents more often reporting not gambling (24.8% vs. 16.4%), but when they did report gambling, they showed higher levels of at-risk/problem gambling (30.6% vs. 26.4%). Parental approval or disapproval of adolescent gambling also significantly differed between races, with Asian-American adolescents more likely to perceive both parental disapproval (50.0% vs. 38.2%) and approval (19.3% vs. 9.6%) of gambling. Asian-American adolescents were also more likely to express concern about gambling among close family members (25.2% vs. 11.6%). Among Asian-American adolescents, stronger associations were observed between at-risk/problem gambling and smoking cigarettes (interaction odds ratio=12.6). In summary, differences in problem-gambling severity and gambling perceptions indicate possible cultural differences in familial attitudes towards gambling. Stronger links between cigarette smoking and risky/problematic gambling amongst Asian-American adolescents suggest that prevention and treatment efforts targeting youth addictions consider cultural differences.

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## 1. Introduction

High rates of gambling and gambling-related problems exist among adolescents (Barnes et al., 2009; Committee on the Social and Economic Impact of Pathological Gambling, 1999; Fisher, 1999; Molde et al., 2009; Shaffer et al., 1999; Volberg et al., 2010; Welte et al., 2008; Yip et al., 2011). An early meta-analysis of gambling studies in North America estimated that 3.2–8.4% of youth experience past-year gambling problems (Shaffer et al., 1999). While gambling is often considered as an adult behavior, the prevalence

of pathological gambling among adolescents is about three times that reported for adults (Committee on the Social and Economic Impact of Pathological Gambling, 1999; Shaffer et al., 1999).

Onset of gambling prior to adulthood has been associated with social, psychiatric, and substance use problems in adulthood (Burge et al., 2006; Lynch et al., 2004). Both problematic and recreational gambling have been linked to adverse mental health and social functioning in adolescence, with associations observed with poor school performance, drug use, and difficulties with mood and aggression (Lloyd et al., 2010; Yip et al., 2011). Therefore, development of targeted and effective education programs, prevention initiatives, and treatment efforts relating to youth gambling is important from public and mental health perspectives.

Most studies on gambling have been conducted in Western countries, involving predominantly Caucasian participants. Available

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evidence from adults suggests that problem gambling may be more prevalent among racial/ethnic minority groups (Barry et al., 2011a, 2011b; Fisher, 1999; Kessler et al., 2008; National Opinion Research Center, 1999). A 2001–2002 U.S. national survey found prevalence rates of disordered gambling among African-American (2.2%) and Native- and Asian-American adults combined (2.3%) to be higher than that of Caucasian adults (1.2%; Alegria et al., 2009). Amongst callers to a gambling helpline, Asian-American adults with gambling problems were more likely than Caucasian adults to report gambling-related suicidality and non-strategic gambling problems and less likely to report alcohol-use problems (Barry et al., 2009). Amongst university students, Asian-American students more frequently exhibited pathological gambling (12.5%) compared to African-American, Native-American, and Caucasian students (4–5%; Lesieur et al., 1991). A recent study of Chinese-American high-school students in California estimated past-year prevalence of problem gambling to be 10.9% (Chiu and Woo, 2012). These studies suggest that more research is needed to understand gambling-related attitudes and behaviors amongst Asian-American youth.

The few studies of U.S. youth have found that similar to adults, members of certain racial/ethnic minority groups appear more likely to gamble and exhibit gambling-related problems than Caucasian youth (Goldstein et al., 2009; Raylu and Oei, 2004; Stinchfield, 2000; Westphal et al., 2000). However, studies on gambling of Asian-American adolescents have shown mixed findings, with some studies reporting that Asian-American students gamble less frequently than other racial/ethnic minority youth (Stinchfield et al., 1997; Welte et al., 2008), which have led some researchers to argue that Asian-American gambling is a stereotype not supported by research. However, others have found that Asian-American youth are more likely to engage in problematic gambling compared to non-Asian-American youth (Chiu and Woo, 2012; Forrest and McHale, 2011; Moore and Ohtsuka, 2001; Westphal et al., 2000), leading to the claim that Asian-American youth constitute a group susceptible to risky gambling behaviors. Similarly, British (Moore and Ohtsuka, 2001) and Australian (Forrest and McHale, 2011) studies have found higher rates of problematic gambling among adolescents from Asian descent compared to those from Anglo-Europeans backgrounds.

There are several important reasons to focus on gambling problems among Asian-American youth. Asian Americans constitute one of the fastest growing racial minority groups in the U.S. (U.S. Census Bureau, 2007). High rates of pathological gambling have been found among Asian-American adults contrary to the model minority myth that Asian Americans are problem-free (Fong and Tsuang, 2007). Gambling is often seen as a form of entertainment (Loo et al., 2008), and various marketing strategies have specifically targeted Asian groups (Chen, 2011; Dyal et al., 2009), which has led some to term Asian culture as “gambling-permissive.” (Kim, 2012).

If Asian-American youth grow up in households that share more permissible attitudes toward gambling and where parents may also engage in frequent gambling behaviors, Asian-American youth may also be at particular risk for gambling problems (Delfabbro and Thrupp, 2003; Vachon et al., 2004). According to the social learning theory, gambling behaviors and values of adolescents can be imitated or learned through vicarious learning or modeling from their family (Brown, 1987; Gupta and Derevensky, 1997). Adolescent perceptions of their environment are an important predictor for involvement in their actual behaviors, including gambling (e.g., Felsher et al., 2003; Hardoon et al., 2004; Wickwire et al., 2007). Compelling evidence shows that adolescents' reports of parents such as parental problematic gambling behaviors (Gupta and Derevensky, 1997) and pro-gambling attitudes by parents is associated with their gambling behaviors (Delfabbro and Thrupp, 2003). Hence, Asian-American adolescent perceptions of familial and peer gambling warrant study.

## 1.1. Aims

We aimed to examine gambling behaviors and associated health, functioning, and risk behaviors among Asian-American and Caucasian high-school students. Our aim was to assess the association between at-risk/problem gambling (ARPG) and Asian American race in the adolescent sample. Based on previous adult and adolescent studies discussed above, we posed two opposing hypotheses: (1) Asian-American high-school adolescents would be more likely than Caucasian adolescents to exhibit ARPG based on DSM-IV criteria and (2) ARPG between Asian-American and Caucasian adolescents would not differ. We also examined whether cultural differences existed in adolescent gambling behavior. Specifically, we hypothesized that Asian-American adolescents would be more likely than Caucasian adolescents to endorse parental approval of gambling and concerns about close family members gambling. We also explored the relationship between ARPG and alcohol use to assess whether findings observed among Asian-American adults relating gambling problems with non-strategic gambling and less alcohol-use problems (Barry et al., 2009) would be present amongst Asian-American youth.

## 2. Methods

### 2.1. Recruitment and study procedures

Data were derived from a survey of high-school students (grades 9–12); recruitment and study procedure have been described previously (Potenza et al., 2011; Schepis et al., 2008; Yip et al., 2011). In brief, all public 4-year high schools in Connecticut were invited to participate. After obtaining permission from School Boards and/or school system superintendents, the survey was administered in 10 schools. These schools represent each of the three tiers of the state's district reference groups (DRGs). DRGs are groupings of school based on the socioeconomic status of the families in the school district. Thus, sampling from each of the three tiers of the DRGs creates a more socioeconomically representative sample.

Passive consent procedures were used to obtain consent from parents. Specifically, letters were sent through the school to parents informing them about the study and outlining the procedure by which they could deny permission for their child to participate in the survey. If no message was received from a parent, parental permission was assumed. All study procedures were approved by the participating schools and by the institutional review board of the Yale University School of Medicine.

Each school was visited on a single day by the research staff who explained the voluntary, anonymous, and confidential nature of the study and administered to all students willing to participate.

### 2.2. Measures

#### 2.2.1. Demographic characteristics

Demographic characteristics such as gender, school grade and grade average were assessed. Participant's race was assessed by asking, “What is your racial background?” The choices included, “African American/Black,” “White/Caucasian,” “Asian,” and “Other.” Family structure was also assessed by asking whether the participant lived with “one parent,” “two parents,” or “other” (“foster family,” “grandparents,” “other relatives,” and “other”).

#### 2.2.2. Gambling perceptions

Gambling perceptions held by family and peers, as reported by participants, were assessed regardless of participants' gambling behaviors. Participants reported whether their parents would approve or disapprove of their gambling (parental perception of gambling) and the responses were grouped into three categories: “disapprove” (combining “strongly disapprove” and “disapprove”), “approve” (combining “strongly approve” and “approve”) and “neither approve nor disapprove.” Perception of problematic family gambling was assessed with the question, “Has the gambling of a close family member caused you worry or concern?” The responses were dichotomized to “yes/no.” Perception of peer gambling was assessed with the question, “How many of your peers do you think gamble too much?” The responses were dichotomized to “none” and “1 or more.” Feeling peer pressure to gamble was assessed with a dichotomous response, “never” and “once or more.”

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