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# Gambling-related harm as experienced by UK Armed Forces veterans and affected others: a thematic framework analysis

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► Additional supplemental material is published online only. To view, please visit the journal online (<https://doi.org/10.1136/military-2025-003028>).

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Received 9 April 2025

Accepted 11 July 2025

## ABSTRACT

**Introduction** Despite recognition of increased gambling vulnerability among military veterans, qualitative understanding of veterans' lived experiences of gambling harms, including impacts on family members, remains limited. This study explores the gambling histories, service-related influences, psychosocial impacts and support-seeking behaviours of UK veterans and their affected family members.

**Methods** Thematic framework analysis was conducted on semistructured interviews with six male veterans and three female family members recruited through social media and support settings. Participants were screened using the Problem Gambling Severity Index to confirm severity of gambling-related harm.

**Results** Four primary themes were identified: gambling histories and trajectories, the role of the Armed Forces in gambling behaviour, psychosocial and financial impacts, and barriers and motivations for seeking support. Veterans' gambling trajectories varied, with military life often seen to normalise gambling behaviours through accessibility, social reinforcement and stress-related coping mechanisms. Severe financial distress, relationship breakdowns, mental health issues and compromised trust characterised gambling's psychosocial impacts. Key barriers to seeking support included stigma, pride, denial and insufficient tailored services. Conversely, family interventions and personal crises were crucial motivators driving veterans towards recovery.

**Conclusions** This study highlights the profound and complex impacts of gambling-related harm among UK veterans and their families, emphasising military cultural factors and significant psychosocial consequences. Effective interventions must address both individual gambling behaviours and broader family dynamics. Greater availability of veteran-specific support services and stigma reduction could improve help-seeking. Future research should incorporate diverse samples, including female veterans and male family members, to enhance generalisability and intervention efficacy.

## INTRODUCTION

Gambling can have profound and far-reaching consequences on individuals and their communities. Gambling-related harm extends beyond financial losses to include effects on mental and physical health, employment, relationships and, in severe cases, criminal activity.<sup>1,2</sup> While gambling is often perceived as an individual pursuit, research suggests that its impact extends to affected others; family members and close associates, who may

## WHAT IS ALREADY KNOWN ON THIS TOPIC

⇒ Military veterans are at heightened risk for gambling-related harm due to service-related stress, trauma and cultural influences.

## WHAT THIS STUDY ADDS

⇒ This study provides qualitative insights into UK veterans' gambling trajectories, the specific role of military culture, and detailed psychosocial impacts experienced by affected families. It highlights critical barriers and motivations for seeking support, underscoring the complex interplay between individual, familial and institutional factors.

## HOW THIS STUDY MIGHT AFFECT RESEARCH, PRACTICE OR POLICY

⇒ Findings emphasise the need for targeted interventions addressing military-specific factors and family dynamics. Policy-makers and practitioners could use this evidence to improve accessibility and suitability of veteran-specific gambling support services and to promote awareness campaigns reducing stigma around help-seeking among veterans and their families.

experience emotional distress, financial insecurity and relationship breakdowns because of another person's gambling.<sup>3,4</sup> Despite these harms, formal help-seeking remains low, with only around 20% of individuals experiencing gambling harm seeking support.<sup>5–7</sup> Key barriers to help-seeking include stigma, shame, denial and limited access to support services.<sup>8,9</sup>

Low levels of help-seeking for common mental health disorders are found in members of the Armed Forces Community (ie, currently serving and ex-service personnel<sup>10</sup>). Additionally, they face elevated gambling risk due to unique service-related stressors<sup>11,12</sup> and may use gambling to cope with trauma, boredom and social isolation.<sup>13–15</sup> Aspects of military life, including mobility, routines and transitioning to civilian life,<sup>16</sup> could increase stress and exacerbate gambling behaviour.

Existing qualitative research focuses on serving personnel, with limited evidence on veterans and families.<sup>17</sup> Champion *et al*<sup>18</sup> found that gambling was normalised within certain military contexts, particularly as a form of socialisation and a method of coping with trauma. Additionally, stigma, shame and possibly dismissal from their



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**To cite:** Dighton G, Treacy S, Hoon A, *et al*. *BMJ Mil Health* Epub ahead of print: [please include Day Month Year]. doi:10.1136/military-2025-003028

**Table 1** Sociodemographics of the interview sample

| Participant          | Gender | Age range | Service branch          | Length of service          | PGSI score |
|----------------------|--------|-----------|-------------------------|----------------------------|------------|
| Participant 1        | Male   | 25–29     | Army                    | 8 years (+2 in reserves)   | 27         |
| Participant 2        | Male   | 50–54     | Army                    | 22 years                   | 9          |
| Participant 3        | Male   | 45–49     | Army                    | 8.5 years (+3 in reserves) | 24         |
| Participant 4        | Male   | 30–34     | Army                    | 8 years                    | 17         |
| Participant 5        | Male   | 40–44     | Royal Air Force         | 12 years (+2 in reserves)  | 25         |
| Participant 6        | Male   | 40–44     | Army                    | 2 years                    | 24         |
|                      |        |           | Relationship to veteran | Length of relationship     |            |
| Family participant 1 | Female | 40–44     | Spouse                  | Married 14 years           | –          |
| Family participant 2 | Female | 45–49     | Spouse                  | Married 5 years            | –          |
| Family participant 3 | Female | 75–79     | Mother                  | Since birth (49 years)     | –          |

PGSI, Problem Gambling Severity Index.

role in the Armed Forces were notable barriers to seeking support while serving.<sup>19</sup>

To date, a qualitative understanding of the lived experience of veterans who are impacted by gambling-related harm, and their affected others, remains absent. This is an important gap to close, given that gambling-related harm is more prevalent among veterans than in the general population<sup>11 13</sup> (see also systematic reviews:<sup>12 17 20</sup>). Developing a qualitative understanding of the nuanced impact of gambling harm in veterans and their affected others is required to inform individualised support services and clinical interventions.

This study addresses this gap by exploring UK veterans' and family members' gambling trajectories, motivations and support-seeking behaviours, in order to inform policy and tailored interventions.

## METHOD

### Participants

Nine people participated in the study (six veterans and three family members), recruited using advertisements placed on social media and within support-service settings. Purposive quota sampling targeted those who had experienced gambling-related harm as a direct result of their own gambling (UK Armed Forces veterans) or as an 'affected other' (first-order family members). Given the relative homogeneity of the sample, data saturation was considered achievable.<sup>21</sup>

The sociodemographic features of the participants are shown in table 1. All veterans identified themselves as male, and all the family members as female. In addition, all veterans scored above 8 on the Problem Gambling Severity Index (PGSI<sup>22</sup>), indicating that they had experienced severe, negative consequences due to gambling in the last 12 months.

### Measures and materials

Veteran participants completed the PGSI,<sup>22</sup> a well-validated<sup>23</sup> nine-item inventory measuring risk behaviours and negative consequences associated with gambling. Items are scored from 0 ('never') to 3 ('almost always') and total scores on the PGSI are categorised as: non-problem gambling (score of 0), low-risk gambling (score of 1 or 2), moderate-risk gambling (scores of 3–7) or problematic gambling (scores of 8 or more).

Sociodemographic data included gender, age, relationship status, children, nationality and ethnicity. Veterans were

separately asked for military demographics: branch (ie, Royal Navy, Army or Royal Air Force) and length of service.

### Procedure

Nine semistructured interviews were conducted (six veterans, three family members) with a semistructured approach to allow participants the space to articulate their experience, while also allowing for researchers to shape the interviews.<sup>24</sup> Interview schedules included questions about veterans' military and gambling experiences, the impacts of these on them and their family (see online supplemental materials 1 and 2 for veterans' interview schedule and family member's interview schedule, respectively), and questions about support-seeking. Interviews were audio-recorded, lasted an average of 42.5 min (SD=14.4 min) and were transcribed verbatim.

### Analysis

Demographic information and PGSI scores were reported. Interview transcripts were imported into NVivo V.12<sup>25</sup> and analysed by two researchers using a framework method<sup>26</sup> to support a reflexive thematic analysis.<sup>27</sup> This combination allows for a systematic approach to identifying themes and the relationship between them, and of comparing each individual's experience. The six analytical stages followed were: (1) familiarisation with the data—reading and re-reading interviews, noting initial thoughts and ideas; (2) coding—selecting and labelling all relevant text; (3) developing the initial framework—grouping codes into agreed categories; (4) application of the framework—coding all transcripts, refining and revising; (5) charting—creating a matrix using with a row for each participant, categories and codes as columns, and data summarised in each corresponding cell and (6) interpretation and reporting of the data.

### Patient and public involvement

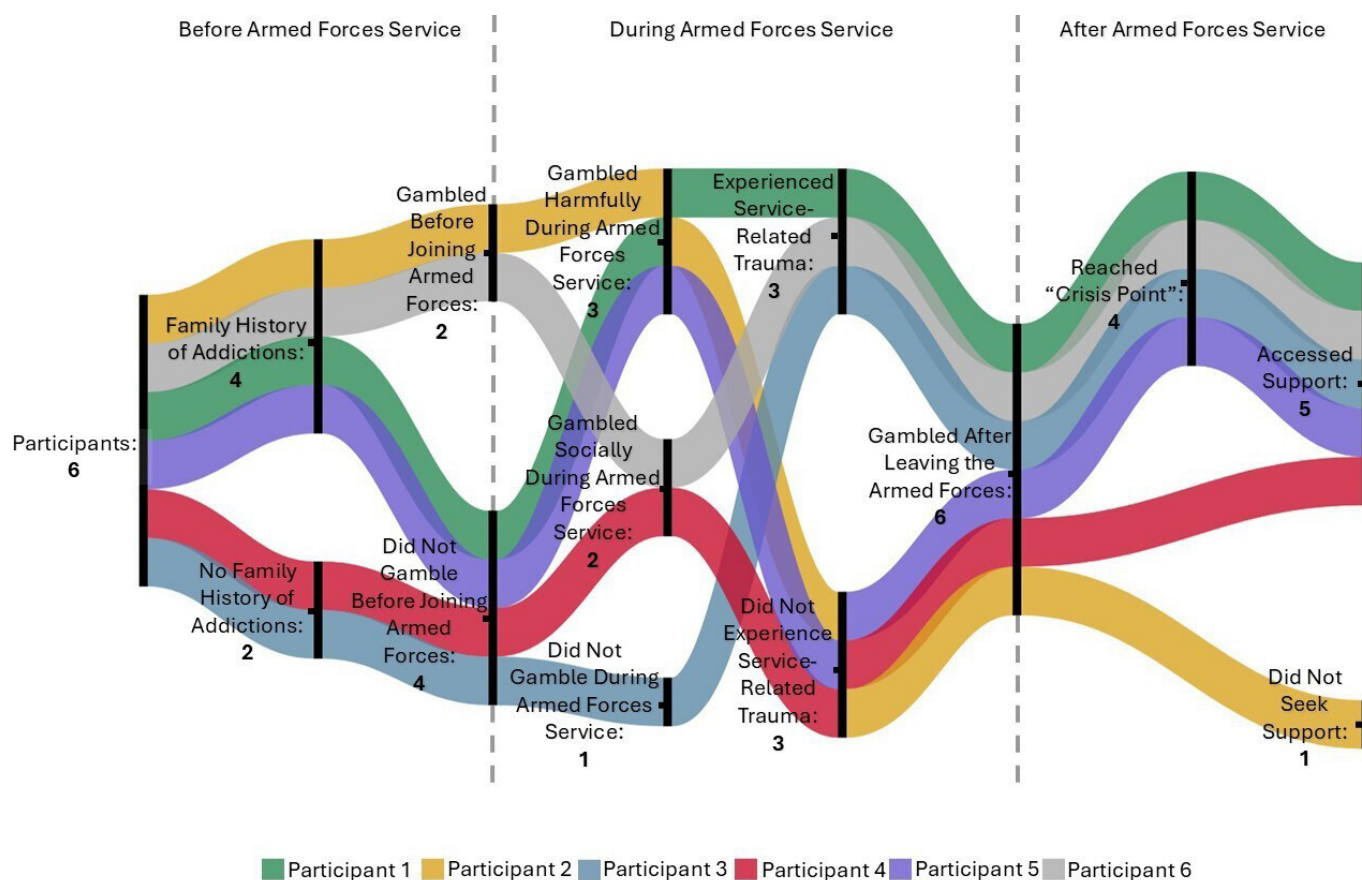
A lived experience advisory panel composed of serving and former members of HM Armed Forces who had experienced gambling-related harms was consulted regarding analysis of interview data, with modifications made from their feedback. This was an important part of validating the research data and ensuring that themes resonated.

## RESULTS

Four key themes that illustrate gambling behaviour and recovery of UK Armed Forces veterans and the impacts on, and experiences of, their affected others were identified: gambling histories and trajectories, the role of the Armed Forces in gambling behaviour, psychosocial and financial impacts of gambling, and barriers and motivations for seeking support. Supporting quotations are provided in text to underline the veterans' gambling histories and trajectories, whereas quotations in support of the role of the Armed Forces in gambling behaviour, psychosocial and financial impacts of gambling, and barriers and motivations for seeking support are provided in tables 2–4, respectively.

### Gambling histories and trajectories

Participants described varied gambling trajectories, shaped by personal histories, military culture and postservice transitions (see figure 1 for a graphical representation). Four participants noted they grew up with family members who experienced difficulties with gambling or drinking. Additionally, two participants reported gambling before enlistment. This early exposure normalised gambling, embedding it as a familiar and socially accepted behaviour. One veteran described gambling as an



**Figure 1** A Sankey diagram representing the gambling histories related by the veteran sample, highlighting commonalities across their experiences. Sankey nodes are drawn post hoc from interview responses. The diagram only represents experiences discussed during the semistructured interviews.

intrinsic part of his upbringing, stating, “*It’s something we’ve all grown up with, it’s something that we’ve all known*” (Participant 2). For these individuals, joining the military did not introduce gambling but instead provided an environment that facilitated and exacerbated their existing tendencies.

Conversely, two participants had not gambled prior to military service but began engaging in gambling either during or after their enlistment. One veteran described how he was introduced to gambling through his social circle while serving, stating, “*I never gambled in my life. I didn’t even know really what a bet was... it’s purely because of my friends in the Army.*” (Participant 4). His initial experiences were framed as a harmless recreational activity, yet over time, this progressed into a more serious and harmful pattern of gambling. Another participant only started gambling 8 years after leaving the Armed Forces, suggesting that postservice factors, such as financial insecurity, loss of structure and difficulties transitioning to civilian life, played a significant role in the emergence of gambling problems.

Two other participants had some experience of gambling before joining the Armed Forces but did not experience obvious gambling-related harm until after leaving. In these cases, gambling transitioned from an occasional activity to a harmful coping mechanism, used to deal with the challenges of reintegration into civilian society. One veteran reflected on his gambling escalation, linking it to the difficulties he faced in adjusting to life outside the military: “*I was always bored, and I had more time on my hands... I felt like there was a bit of a void left to fill. I didn’t have the camaraderie anymore, the fun things and the things I would do in my spare time were now gone*” (Participant 4).

Crisis points were pivotal in altering gambling trajectories. This typically involved profound financial hardship, deteriorating mental health to the point of suicidal behaviour, or the loss of critical relationships. Four veterans explicitly reached such crisis points, which served as catalysts prompting them to seek support and initiate recovery.

At the time of the interviews, three participants continued to gamble in a harmful way, despite efforts to control their behaviour, while two had ceased gambling entirely, specifically after reaching a crisis point. One reported gambling in a more controlled manner, limiting to occasional low-stakes bets, and did not need to seek gambling-related support.

### The role of the armed forces in gambling behaviour

The Armed Forces was widely perceived as an environment that either introduced gambling or exacerbated pre-existing tendencies (see table 2 for supporting quotations). Interviewees described how gambling was ingrained in military life, particularly through the presence of fruit machines in mess halls and other social areas (eg, automats, NAFFIs), card games during deployment and sports betting among peers. The availability of gambling opportunities, combined with social reinforcement, created a setting where gambling was both normalised and easily accessible.

Financial security within the military was also identified as a significant factor contributing to gambling behaviour. Regular salaries, minimal living expenses and lump-sum payments after deployment meant that personnel often had substantial disposable income. Veterans reflected on how financial security



**Table 2** Illustrative quotations supporting the theme of 'The Role of The Armed Forces in Gambling Behaviour' and subthemes of thematic analysis

| Subtheme                               | Quotation   |
|--|---|
| Gambling is ingrained in military life | <i>"It's just part of the culture. You go to the mess, you see the fruit machines, you see your mates betting, and before you know it, you're doing the same"</i><br>(Participant 3)  |
|  | <i>"I mean I'd never gambled in my life. I didn't even know really what a bet was. It's purely because of my friends in the Army... that group of friends happened to place bets and they had online betting accounts. Everyone did actually."</i><br>(Participant 4)   |
| Financial security                     | <i>"In the Army I'd come home on leave, obviously because you're really earning quite good money at a young age, and I had no bills, obviously I got paid monthly so... mad two weeks but then a skint two weeks if you didn't win, you know."</i><br>(Participant 6)   |
|  | <i>"They're cocooned. They always have food, always have a roof over their head, and when they get big payments after deployment, it's easy to just blow money without thinking"</i><br>(Family Participant 2)  |
| Military mentality of competitiveness  | <i>"We're taught to win. We don't give up, we push harder. So, when you lose, you chase the win. That mentality is drilled into you"</i><br>(Participant 2)   |
|  | <i>"We have to win everything and then if you don't win you want to kind of go in and win back what you've lost. And I do think that that kind of mentality of wanting to win so badly and not giving in and just taking it so personally when you lose I think that's probably worse because of the mentality of the servicemen."</i><br>(Participant 4) |
| Pursuit of risk                        | <i>"I wanted to be out there amongst it. I didn't really care if I lived or died. That's how I lived my life"</i><br>(Participant 1)  |

allowed them to gamble without immediate consequences. The absence of immediate financial hardship may have contributed to some individuals failing to recognise the risks associated with their gambling until they left the military and faced the reality of their financial losses.

Both veterans and family members also suggested that the mentality fostered in the military, particularly a focus on competitiveness and resilience, contributed to gambling-related harm. Veterans highlighted the military's emphasis on 'winning'; this relentless pursuit of success, while beneficial in a military setting, appeared to translate into harmful gambling behaviours, particularly when individuals attempted to recover losses or prove their ability to succeed.

For some participants, the pursuit of risk extended beyond gambling into other aspects of military careers. Veterans reflected on their willingness to take on high-risk roles in combat and how this mirrored their gambling behaviour. This suggests that gambling-related harm may not be an isolated behaviour but part of a broader pattern of risk-taking reinforced by military experiences.

### Psychosocial and financial impacts of gambling

The consequences of gambling were profound, affecting financial stability, mental health, relationships and overall well-being (see table 3 for supporting quotations). Participants accumulated substantial debts, resorted to payday loans or, in two cases, theft from the military. Losses led to extreme financial distress.

The financial repercussions extended to family members, with partners often shouldering the burden of debt and attempting to mitigate the harm caused by gambling. Partners related how their

**Table 3** Illustrative quotations supporting the theme of 'Psychosocial and Financial Impacts of Gambling' and subthemes of thematic analysis

| Subtheme                          | Quotation   |
|-----------------------------------|---|
| Financial harm                    | <i>"I was gambling to try and win money to pay off my debts, but that just made everything worse"</i><br>(Participant 5)  |
|                                   | <i>"I bailed him out so many times. £30k, £50k—gone. It wasn't just his life he was ruining; it was mine too"</i><br>(Family Participant 2)   |
| Mental health                     | <i>"Addictions go hand-in-hand with PTSD I think... Escape. That's what I did, I think. I wasn't coping well with what happened in the Army I think, ie, enjoyed the buzz of gambling."</i><br>(Participant 6)  |
|                                   | <i>"I've walked to these cliffs down there... Very depressed. Very suicidal. And I just feel like a failure and a loser in life. Like a social fucking reject. That's had everything. That could have had a fruitful life. Because... I'm a degenerate gambler."</i><br>(Participant 1) |
|                                   | <i>"I wasn't just living with his gambling; I was living with the constant fear of what was next"</i><br>(Family Participant 1)   |
|                                   | <i>"I was shocked to the hilt... I was having a complete breakdown I was on Prozac from the doctor and I wasn't really able to continue working. I was given six months leave of absence. It was a complete finish to my life"</i><br>(Family Participant 3)                            |
| Deception, lies, and broken trust | <i>"My whole life was a lie. My wife didn't know who I was anymore"</i><br>(Participant 3)  |
|                                   | <i>"Trust is everything. And once it's gone, it's almost impossible to get back"</i><br>(Family Participant 2)  |

husband's gambling during and after military service had deep impacts on their household finances. In some cases, gambling-related financial distress led to relationship breakdowns, with participants reporting separations and divorces as a direct result of gambling behaviour.

Mental health difficulties were closely linked to gambling, including experiences of depression, anxiety and post-traumatic stress disorder (PTSD). Four veterans described experiencing suicidal thoughts due to their gambling, with three detailing suicide attempts. Veterans linked their gambling behaviour directly to their attempts to cope with trauma. For family members, the emotional impact was similarly significant, describing the seemingly unending psychological toll of living with a gambler and constantly being torn between veteran and wider family members.

In addition to financial and psychological harm, gambling had a detrimental effect on social relationships. Participants frequently described their gambling as secretive and isolating, leading to loss of trust among family and friends. Family members similarly reported that trust had been irreparably damaged due to constant deception.

### Barriers and motivations for seeking support

Seeking support was often a last resort, with many participants delaying help-seeking due to shame and stigma (see e table 4 for supporting quotations). Veterans and family members highlighted that the 'military personality' may have halted approaching support services, as they were 'conditioned' not to. Some did not initially recognise their gambling as harmful, only seeking help during a crisis point. Others described a lack of available services tailored to veterans, with family members

Table 4 Illustrative quotations supporting the theme of ‘Barriers and Motivations for Seeking Support’ and subthemes of thematic analysis

| Subtheme  | Quotation   |
|---|---|
| ‘Military personality’ as a barrier to help seeking               | <i>“I was so scared with people finding out or what I’d say to anyone with this problem that I’ve had... You may lose your job you may get downgraded. I was arrogant about it maybe not being as bad as it was but also prideful of my job, so I just did my best to stow and square away my emotions about this problem, as we were trained to do.”</i><br>(Participant 5)  |
|   | <i>“I think sometimes you just shut up shop when you are in the Forces. You bottle a lot of things up, so you come out with whatever negative experiences you’ve had, you sometimes just shut them down and just stop the disclosing them to people.”</i><br>(Participant 6)  |
| Family members pushing veteran to seek support                    | <i>“I met a woman, and she actually sorted me out. Told her I’m a fucking chronic gambling addict. She started looking after my money for me, wanted me to -pushed me to start to go to G.A, stuff like that.”</i><br>(Participant 1)   |
|   | <i>“After we brought him home(post-eviction)my middle son took him to Gamblers Anonymous. I took him to an advice group in my church.”</i><br>(Family Participant 3)  |
| Lack of tailored support services for veterans and their families | <i>“I went to a couple of sessions with [gambling support provider] but... they weren’t with someone who understood gambling or veterans. I think he was an alcohol counsellor who had re-trained. He didn’t really get it or what I’d been seen and done. I was going to those sessions, but still secretly gambling, just to keep [Wife] happy.”</i><br>(Participant 3)   |
|   | <i>“You go to these places, and they don’t get it. They don’t understand what it’s like being with someone who has seen what they’ve seen, done what they’ve done”</i><br>(Family Participant 1)  |
| Current support services ‘not enough’                             | <i>“It helped while I was there, but once it stopped, I felt lost again”</i><br>(Participant 5)   |
|   | <i>“I’ve had the carrots dangling there by these [Support Provider] people saying well we’ll help you but we’re not going to help you now because of your drinking and I just wish I had the money to put myself through rehab. I look every day, I look on [Private Rehab Service] I look everywhere-. I think fucking hell, I wish I had the money I’d pay for myself to go in there. I’m gambling, now, for a place in rehab.</i><br>(Participant 1) |

also corroborating that when they tried to help signpost, they were unable to find tailored, appropriate support services. Both veterans and family members highlighted that it was the family member pushing the veteran to seek support that often led to them acting.

However, for those who had sought support, experiences were mixed. Some found Gamblers Anonymous (GA) and specialist counselling helpful, while others felt that interventions were too short-term or failed to address underlying trauma. Some services turned veterans away due to their cases being ‘too complex,’ and one veteran related how they were continuing to gamble to attempt to fund private rehabilitation and therapy for their gambling.

Despite these challenges, participants who had successfully reduced or ceased gambling emphasised the importance of structured financial management, social support and long-term professional assistance in their recovery journey. Notably, veterans who perceive themselves to be stable in their recovery professed a strong desire to help others—this was also reported by family members.

DISCUSSION

This study highlights the significant impact of gambling-related harm on UK Armed Forces veterans and their families. Veterans reported gambling for socialisation, boredom, escape from trauma and financial desperation, with behaviours often escalating during or after military service. The consequences were severe, affecting financial stability, mental health, relationships and, in some cases, leading to criminal activity. Veterans cited postservice gaps in support and using gambling to cope with trauma, or the loss of military structure. Family members also experience significant emotional and financial distress due to a veteran’s gambling, often struggling with secrecy, mistrust and the burden of financial recovery. Despite the evident harm, help-seeking was low, largely due to stigma, shame and limited knowledge of available support services.

The findings align with the conceptual framework afforded by Blaszczynski and Nower’s<sup>28 29</sup> pathways model, which identifies three primary routes into gambling harm: behavioural conditioning, emotional vulnerability and antisocial/impulsive traits. Some of the interviewed veterans fit the behaviourally conditioned pathway, where gambling was normalised within military culture, facilitated by high disposable incomes, structured leisure time and a competitive ethos.<sup>18 19</sup> The military environment reinforced gambling as a socially acceptable and often encouraged pastime. Others fit the emotionally vulnerable pathway, using gambling as a maladaptive coping mechanism for trauma, stress or mental health difficulties, which supports the findings of previous work.<sup>11</sup> Participants with experiences of combat trauma, physical assault or PTSD symptoms reported gambling to numb distress, avoid intrusive thoughts or regain a sense of control. Some veterans exhibited characteristics of the antisocial/impulsivist pathway, engaging in high-risk gambling linked to reckless behaviour, sensation-seeking or, in some cases, criminal activity to fund their gambling.<sup>17</sup> This pathway appeared to be particularly relevant for those who had struggled with rule-breaking or impulsivity prior to or during their military service.

The experiences of family members underscore the intergenerational and relational impact of gambling-related harm.<sup>4</sup> The sample described financial devastation, relationship breakdowns and emotional distress because of a veteran’s gambling. The themes of secrecy and deception were particularly prominent, with family members often unaware of the extent of gambling harm until a crisis occurred. The emotional toll extended beyond partners to children, with some family members reporting concerns about the long-term psychological impact on younger relatives.<sup>30</sup> Some veterans and families sought support, but barriers such as stigma, limited support service availability and the perception that gambling problems were not taken as seriously as other addictions hindered engagement.<sup>5</sup> Interventions must target both individual behaviour and family systems, with veteran-specific, trauma-informed and long-term support structures. Future research should explore the long-term trajectories of veteran gamblers and evaluate tailored interventions that incorporate military and family-specific support mechanisms.

Limitations

This study is limited in that the sample was restricted to male veterans and female family members. The experiences of female veterans may differ significantly, particularly regarding the influence of military culture, gambling trajectories and support-seeking behaviours. Similarly, male family members may have different psychosocial impacts, coping mechanisms or barriers to seeking support compared with female family members. Further

research including female veterans and male affected others would be beneficial to ensure a comprehensive understanding of gambling-related harm within the Armed Forces community.

## CONCLUSIONS

This study highlights the profound financial, emotional and sociorelational consequences of gambling-related harm experienced by UK Armed Forces veterans and their families. Military culture, trauma and postservice challenges contribute to gambling behaviours, consistent with a pathways model approach.<sup>28 29</sup> Veterans exhibited characteristics of all three pathways: social conditioning, using it as a coping mechanism for trauma, and displaying impulsive, high-risk behaviours. Family members experienced significant distress, financial strain and broken trust. Help-seeking remained low due to stigma and accessibility issues. These findings underscore a clear need for military-specific gambling interventions, increased awareness of gambling harm within the Armed Forces and greater support for affected families.

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**Acknowledgements** We thank the UK Armed Forces charities and veterans' networks for their keen support of this research.

**Contributors** GD, AH and SD designed the study. GD collected the data. GD and ST conducted the statistical analysis. ST and GD completed the first draft of the manuscript, and all authors contributed to and approved the final manuscript. GD is the guarantor.

**Funding** The research described here formed part of a PhD studentship, which was funded by GambleAware (charity no. 1093910, registered in England—no. 4384279).

**Disclaimer** The funders had no role in the study design, collection, analysis or interpretation of the data, or writing/approval of the manuscript.

**Competing interests** SD is a director and shareholder in Soteria Global Services, a risk management business with a focus on gambling harm. The other authors have no conflicts of interest to declare.

**Patient consent for publication** Not applicable.

**Ethics approval** This study involves human participants and was approved by Swansea University, Department of Psychology Ethics Committee (Review Number: 0203). This approval outlined a detailed protocol in order to ensure distress was minimised, and participants could access support and aftercare. Participants gave informed consent to participate in the study before taking part.

**Provenance and peer review** Not commissioned; externally peer reviewed.

**Data availability statement** Data are available on reasonable request. The data that support the findings of this study are available from the corresponding author on reasonable request. The data are not publicly available due to privacy or ethical restrictions.

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