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ORIGINAL ARTICLE

Determination of the Psychological Burden of Gambling Harm in Iraq

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ABSTRACT

Aim: To find out the association between psychosocial burden and the sociodemographic data such us (gender, age, social status, level of education, residential, occupational and economic status) and to assess the psychological burden among the gambler in the Iraq's' roulette casino

Methodology: A cross-sectional design is carried throughout to assess the impact of the gamble upon gamblers psychosocial states in the Iraq's' roulette casino for the period of September 2nd 2018 to April 4th 2020. The present study is conducted in different settings that include roulette casino. A non-probability "purposive" sample of (232) participants is selected. An instrument was constructed for the intent of the study. It is content of (six) domains. The instrument included three parts: sociodemographic variables, gambling addiction and the psychosocial burden among the gambler in the Iraq's' roulette casino. The researcher used descriptive statistics tools such as frequency, percentage, mean of score and used in inferential statistics such as Chi-Square.

Results: The findings of the study indicate that the study samples (65.9%) they have sever gambling addiction level, while (18.1%) they have moderate gambling addiction level and (15.9%) they have mild gambling addiction level. Also, the findings of the study indicate that (58.2) they have moderate social burden level, while (26.3%) they have sever social burden level and (15.5%) they have mild social burden level.

Conclusions: There is a high significant relationship between the most sociodemographic data and psychological burden.

Keywords: Determination, Psychological, Burden, Gamble

INTRODUCTION

Gambling has a long pedigree, going back millennia and pervading many cultures and societies. The effects of gambling can be study, where impacts are divided into social, health and well-being status, economic status and effect of the job status. These groups manifest in personal, interpersonal, and societal levels. Individual impacts cause effects on a personal level to gamblers themselves. External impacts influence the interpersonal and community levels and concern other people. The temporal level indicates to the development, hardness and scope of the gambling impact (Abbott, P, M, 2017). Hurts from gambling are many and common, unlike the more direct and manageable harms caused by physical disease or even drug abuse. Moreover, the big number of potential damage that may difficult and clearly traced to gambling as their reason, impacts on efforts to address gambling harm from a community health opinion (Langham, E., et al 2016). the prevalence of gambling and related social and psychological, financial, lifestyle status and gambling addiction from a public health perspective. The expansion of gambling in middle and Northern Iraq, and then considers both the costs and disadvantage of gambling a public health approach is applied to understanding the epidemiology of gambling-related problems (Shaffer, H. J., & Korn, D. A. 2014.

METHODOLOGY

✓ **Design of the study**: A cross-sectional design is carried throughout to assess the impact of the gamble upon gamblers psychosocial states in the Iraq's' roulette casino for the period of September 2nd 2018 to April 4th 2020. The present study is conducted in different settings that include roulette casino.

✓ **Sample of the study**: The sample was (a non-probability) purposive sample of (232) participants is selected.

Study instrument: the study instrument consist of from three part .A questionnaire was formed by the researcher to quest the study objectives. Available of relevant literature were extensively reviewed to find the appropriate instrument for the study.

- The levels of gambling addiction among people gambling in roulette halls are determined based on the sum of items scores , score of 4–6 is considered normal level, 7–9 mild level, 10–12 moderate level, 13–15 sever level.

=1.5. The study results were assessed and analyzed using (SPSS, Version 26).

RESULTS:

Table 1: Socio- demographic characterizes of the sample.

No.	Variable		
1	Gender	f.	%
1	Male	230	99.1
2	Female	2	.9
	Total	232	100.0
2	Age (year)	F.	%
1	-18 Year	22	9.5
2	19-28 Year	38	16.4
3	29-38 Year	69	29.7
4	39-48 Year	65	28.0
5	49- Year	38	16.4
	Total	232	100.0
3	Social status	f.	%
1	Single	41	17.7
2	Married	137	59.1
3	Divorced	45	19.4
4	widow	9	3.9
	Total	232	100.0
4	Level of education	f.	%
1	Illiterate	32	13.8
2	educated	40	17.2
3	Elementary	65	28.0
4	Middle School	43	18.5
5	High School	31	13.4
6	Academic	21	9.1
	Total	232	100.0
5	Residential	f.	%
1	Rural	89	38.4
2	Urban	143	61.6
	Total	232	100.0
6	Occupational	f.	%
1	Unemployed	45	19.4
2	Employ	93	40.1
3	Businessman	94	40.5
	Total	232	100.0
7	Economic Status	f.	%
1	Not enough	62	26.7
2	Enough same	96	41.4
3	Enough	74	31.9
	Total	232	100.0

The table shows that most of the study sample (99.1%) were male, and (9.0%) were female. Also, shows that (29.7%, 28%) of sample with in the age groups (29-38 and 39-48 years respectively). Also, shows that (59.1%) were married and (19.4%) were divorce. This table shows that (28.0%) were elementary graduate and (18.5%) were middle school. This table shows the majority of the study samples (61.6%) were urban. This table show (40.5%) was businessman, (40.1%) was employ and 19.4%) was unemployed. regarding economic status, (41.4%) their income enough same.

This table clarify with regard to gambling addiction, the study sample (65.9%) they have sever gambling addiction level, while (18.1%) they have moderate gambling addiction level, (12.1%) they have mild gambling addiction level and (3.9%) they haven't gambling addiction. The results out of this table indicate of 73.3% there are wish to leave the gamble play and on the other hand we have a 69% of those who can't leave the gamble play, that indicate there sever addiction on gamble game

Table 2: Gambling addiction among the gambler in the Iraq's roulette casino.

No.	Levels (Gambling Addiction)	f.	%
	No	9	3.9
1	Mild	28	12.1
2	Moderate	42	18.1
3	Sever	153	65.9
	Total	232	100.0

Table 3: Descriptive analysis about addiction

	Categories	Answer	No.	%age
1	I wish to leave the gamble	yes	170	73.3
		No	62	26.7
2	I can leave the gamble	yes	72	31.0
		No	160	69.0

Table 4: Descriptive analysis and stander deviation of economic state

N	Items	Answer	No.	%age	X	S.D
1-	Lost a lot of money	Yes	202	87.1%	1.13	.336
		No	30	12.9%		
2	Lost of significant assets (e.g. Car)	Yes	130	56.0%	1.44	.497
		No	102	44.0%		
3	Lost of significant assets (e.g. home)	Yes	100	43.1%	1.57	.496
		No	132	56.9%		
4	Less spending on (medications and healthcare)	Yes	139	59.9%	1.40	.491
		No	93	40.1%		
5	Less spending on (food)	Yes	92	39.7%	1.60	.490
		No	140	60.3%		
6	Less spend on (insurances and education)	Yes	128	55.2%	1.45	.498
		No	104	44.8%		
7	Less spending on (car and home maintence)	Yes	139	60.2%	1.40	.491
		No	92	39.8%		
8	Less spending on recreational expenses such as eating out, going to movies	Yes	166	71.6%	1.28	.452
		No	66	28.4%		
		No	97	41.8%		
9	Reduction of my available spending money	Yes	158	68.1%	1.32	.467
		No	74	31.9%		
10	Reduction of my savings	Yes	164	70.7%	1.29	.456
		No	68	29.3%		
Mean_money			232	1.3911	.21485	

No.=number %=percentage X =mean S.D= stander deviation

Results out of this table reveal that 87.1% of the sample after gambling had lost of a lot money, home, car and less spending on medications and health care, food, education, car and home maintence, recreational, late payments on bills (e.g. utilities, electricity and mobile), education of my savings

Table 5: Descriptive analysis and stander deviation of psychological domain

N	Items	Answer	No.	%	X	S.D
1	Felt I might have a mental illness	yes	134	57.8%	1.42	.495
		no	98	42.2%		
2	Thoughts of running away or escape	yes	165	71.1%	1.29	.454
		no	67	28.9%		
3	Felt like a failure in Live	yes	158	68.1%	1.32	.467
		no	74	31.9%		
4	Feeling of hopelessness	yes	144	62.1%	1.38	.486
		no	88	37.9%		
5	Felt distressed about my gambling	yes	157	67.7%	1.32	.469
		no	75	32.3%		
6	Felt angry	yes	158	68.1%	1.32	.467
		no	74	31.9%		
7	Felt ashamed	yes	159	68.5%	1.31	.465
		no	73	31.5%		
8	had regrets	yes	156	67.2%	1.33	.470
		no	76	32.8%		
9	Committed acts harm of him self	yes	94	40.5%	1.59	.492
		no	138	59.5%		
10	Attempted suicide	yes	96	41.4%	1.59	.494
		no	136	58.6%		
	Mean_psy		232	1.3875	.18971	

No.=number %=percentage X =mean S.D= stander deviation

This table shows majority effect of gambling on psychological domain in all items. Where there is a bad feeling about life, a large percentage of the sample feel that they suffer from mental illnesses, failure in live, hopelessness, felt distressed,

angry, ashamed, regrets, attempt acts harm of himself and there are 41% of the study sample attempted suicide.

Table 6: Psychological burden among the gambler in the Iraq's' roulette casino.

No.	Levels (Psychological Burden)	f.	%
1	Normal Psychological Domain	90	38.8
2	Psychological Burden	142	61.2
	Total	232	100.0

This table calrify as regarding psychological burden, the study sample (61.2 %) they have psychological burden, while (38.8 %) they have normal psychological domain.

Table 7: Financial burden among the gambler in the Iraq's' roulette casino.

No.	Levels (Financial Burden)	f.	%
1	Enough Financial Domain	91	39.2
3	Financial Burden	141	60.8
	Total	232	100.0

This table indicate as regarding financial burden, the study sample (60.8 %) they have financial burden, while (39.2 %) they have enough financial domain.

Table 8: Descriptive analysis and stander deviation of lifestyle dimension.

N	Items	Answer	No.	%age	X	S.D
1	Neglected my hygiene	yes	73	31.5%	1.69	.465
		No	159	68.5%		
2	Increased consumption of alcohol	yes	125	53.9%	1.46	.500
		No	107	46.1%		
3	Increased use of tobacco	yes	174	75.0%	1.25	.434
		No	58	25.0%		
4	Did not eat as much or often as I should	yes	56	24.1%	1.76	.429
		No	176	75.9%		
5	Reduced physical activities	yes	164	70.7%	1.29	.456
		No	68	29.3%		
6	Loss of sleep due to spending time gambling	yes	136	58.6%	1.41	.494
		No	96	41.4%		
7	Loss of sleep due to stress and worry	yes	128	55.2%	1.45	.498
		No	104	44.8%		
	Mean of lifestyle D.		232	1.4729	.17726	

No.=number %=percentage X =mean S.D= stander deviation

The results out of this table indicate that there are highly effect the gambling on the study sample, as they became more consuming alcohol and cigarettes, reduced physical activities, loss of sleep due to spending time gambling and loss of sleep due to stress and worry.

This table shows as regarding lifestyle burden, the study sample (52.6 %) they have lifestyle burden, while (47.4%) they have normal lifestyle domain.

Table 9: Lifestyle burden among the gambler in the Iraq's' roulette casino

No.	Levels (Lifestyle Burden)	f.	%
1	Normal Lifestyle Domain	110	47.4
3	Lifestyle Burden	122	52.6
	Total	232	100.0

Table 10: Descriptive analysis and stander deviation of job dimension.

N	Categories	Answer	No.	%	X	S.D
1	Late of my job	yes	122	52.6%	1.47	.500
		no	110	47.4%	1.46	
2	Absent of my job	yes	125	53.9%	1.46	.500
		No	107	46.1%		
3	Reduced my performance	yes	143	61.6%	1.38	.487
		no	89	38.4%		
4	Lack of progression in my job	yes	128	55.2%	1.45	.498
		no	104	44.8%		
5	Used my work resources to gamble	yes	102	44.0%	1.56	497
		no	130	56.0%		
6	Conflict with my colloquies	yes	123	53.0%	1.47	..500
		no	109	47.0%		
7	Lost my job	yes	67	28.9%	1.71	.454
		no	165	71.1%		
	Mean Job Dim		232	1.5012	.30107	

No.=number %=percentage X =mean S.D= stander deviation

The results out of this table indicate that there are highly effect the gambling on the study sample, as they became absent and being late for work, the performance is bad, lack of progression in the job, used work resources to gamble, relationships with colleagues are not good and there are 28.9% of gamblers have lost their job.

This table indicated as regarding job Burden, the study sample (51.7 %) they have job burden, while (48.3 %) they have normal job domain.

Table 11: The Job burden among the gambler in the Iraq's' roulette casino.

No.	Levels (The job Burden)	f.	%
1	Normal job Domain	112	48.3
3	Job Burden	120	51.7
	Total	232	100.0

Table 12: Descriptive analysis and stander deviation of health domain

N	Items	Answer	No.	%	X	S.D
1-	After gambling I became chronically ill	Yes	116	50.0%	1.50	0.501
		No	116	50.0%		
2-	Increased use of health services	Yes	133	57.3%	1.43	0.496
		No	99	42.7%		
3-	Neglected my medical needs	Yes	126	54.3%	1.46	0.499
		No	106	45.7%		
	Mean health		232	100%	1.4612	0.37016

No.=number %=percentage X =mean S.D= stander deviation

Results out of this table reveal that 50% of the sample after gambling had chronically ill and most of the study sample, they need more health services after their gambling, and yet there was neglect of their health.

Table 13: Health burden among the gambler in the Iraq's' roulette casino.

No.	Levels (Health Burden)	f.	%
1	Normal Health Domain	107	46.1
3	Health Burden	125	53.9
	Total	232	100.0

This table shows as regarding health burden, the study samples (53.9 %) they have health burden, while (46.1%) they have normal health domain.

s table shows that there is a high significant and significant relationship between (Gambling Addiction) with Socio-demographic (Gender, social status, occupational and economic Status) at p value ≤ 0.05.

Table 14: Association between Domains of Gambling Addiction and Psychological Burden with Socio- demographic Characteristics

Socio- Demographic Characteristics	No	df	Gambling Addiction	
			X^2	Sig.
Gender	232	3	1. 533	.004
Age (year)		12	4.322	.977
Social status		9	7.339	.015
Level of education		15	11.837	.691
Residential		3	**1**.552	.670
Occupational		6	2.991	.008
Economic Status		6	2.209	.038
Based on Chi-squire test: Highly Sig. At P>0.05				

Table 15: Association between domains of gambling addiction and psychological burden with Socio- demographic characteristics

Socio-Demographic Characteristics	No	df	Social Burden		Psychological Burden:		Financial Burden		Lifestyle Burden		job Burden		Health Burden	
			X^2	Sig.	X^2	Sig.	X^2	Sig.	X^2	Sig.	X^2	Sig.	X^2	Sig.
Gender	232	1	2.100	.350	1.450	.0**4**4	.796	.672	1.210	.546	4.865	.088	.912	.012
Age (year)		4	16.415	.037	7.835	.450	5.978	.650	1.955	.982	5.526	.700	2.298	.681
Social status		3	7.584	.**025**	2.283	.012	4.152	.656	6.847	.0**0**6	4.505	.609	1.405	.018
Level of education		5	7.171	.709	5.853	.827	5.036	.889	10.494	.398	4.507	.922	7.959	.159
Residential		1	.992	.217	3.584	.167	1.868	.393	1.027	.0**03**	1.974	.373	1.202	.273
Occupational		2	7.395	.017	6.072	.0**4**7	8.815	.0**5**6	1.195	.0**0**6	7.002	.0**3**6	1.547	.461
Economic status		2	.351	.002	2.678	.0**19**	2.867	.0**4**6	.696	.952	7.342	.0**25**	3.267	.034
Based on Chi-squire test: Highly Sig. At P>0.05														

Table 16: Association between economic dimension and health dimension

Pearson Chi-Square	Value	df	Asymptotic Significance (2-sided)	Sig
Continuity Correction[b]	15.065[a]	1	0.000	HS
Likelihood Ratio	14.883	1	0.000	HS
Fisher's Exact Test	15.055	1	.0000	HS

X: Chi-square, df: Degree of freedom, Sig: Significance

This table indicates that there is highly significant association between economic dimension and health dimension at P < 0.05.

This table indicates that there is highly significant association between economic dimension and psychology dimension at P < 0.05.

Table 17: Association between economic dimension and psychology dimension

Pearson Chi-Square	Value	df	Asymptotic Significance (2-sided)	Sig.
Continuity Correction[b]	146.485[a]	1	0.000	HS
Likelihood Ratio	146.166	1	0.000	HS
Fisher's Exact Test	145.922	1	.0000	HS

X: Chi-square, df: Degree of freedom, Sig: Significance

This table indicates that there is highly significant association between economic dimension and lifestyle dimension at P < 0.05.

Table 18: Association between economic dimension and lifestyle dimension

Pearson Chi-Square	Value	df	Asymptotic Significance (2-sided)	Sig.
Continuity Correction[b]	23.181[a]	1	0.000	HS
Likelihood Ratio	23.033	1	0.000	HS
Fisher's Exact Test	23.173	1	.0000	HS

X: Chi-square, df: Degree of freedom, Sig: Significance

This table shows that there is a high significant and significant relationship between (psychological burden) with socio-demographic (gender, social status, occupational and economic status) at p value ≤ 0.05. Also, there is a significant relationship between (financial burden) with socio- demographic (economic status) at p value ≤ 0.05. Also, this table shows that there is a high significant and significant relationship between (lifestyle burden) with socio- demographic (social status, residential and economic status) at p value ≤ 0.05. Also, there is a high significant and significant relationship between (job burden) with Socio-demographic (occupational and economic status) at p value ≤ 0.05. Also, there is a high significant and significant relationship between (health burden) with socio- demographic (gender, social status, and economic status) at p value ≤ 0.05.

DISCUSSION

Table 1: Socio- demographic characterizes of the sample

- The table shows that most of the study sample (99.1%) were male, and (9.0%) were female. This result disagree by (Giralt, S., et al, 2018) According to the data, males made up the majority of the sample

(54.1%). One of our study's primary drawbacks is that the majority of the participants were guys. In a Muslim-majority country, however, locating women with addiction disorders in the community is practically impossible.

- Also, shows that (29.7%, 28%) of sample with in the age groups (29-38 and 39-48 years respectively. This result was disagree by (Giralt, S., et al, 2018) They discovered that the majority of the samples (45.4 percent) were between the ages of (12 - 13 years). This is owing to the fact that the majority of the study participants in this age group are experiencing unpleasant psychological difficulties as a result of the stresses of everyday life, such as family issues and the desire for a new experience in order to earn money.
- Also, shows that (59.1%) were married and (19.4%) were divorce. This is due to the fact that most of the study samples were divorced and married who suffer from marital problems due to addiction to gambling in roulette halls.
- This table shows that (28.0%) were elementary graduate and (18.5%) were Middle School. The result was agree by (Giralt, S., et al, 2018) they finding (47.3%) were Integrated school and (38.2%) were Lower secondary.
- This table shows the majority of the study samples (61.6%) were urban. This result was accepted by (Giralt, S., et al, 2018) they found in rural areas, problematic gambling occurred with a lower frequency (1.5%) than in small towns (2.6%) and in cities (2.6%) and the majority of the study samples were urban. This is because the roulette hall where the gambling is located is in urban areas.
- This table show (40.5%) was businessman, (40.1%) was employ and 19.4%) was unemployed. This is due to the fact that most of the study samples were from businessmen and important people in the country, because this place is not able to the poor individual to gamble, because the game depends on money.
- Regarding economic status, (41.4%) their income enough same. This is due to the fact that most of the study samples were businessmen and important people in the country, so their financial condition is good.

Table 2: Gambling Addiction among the gambler in the Iraq's' roulette casino.

This table shows as regarding gambling addiction, the study sample (65.9%) they have sever gambling addiction level, while (18.1%) they have moderate gambling addiction level, (12.1%) they have mild gambling addiction level and (3.9%) they haven't gambling addiction.

(Browne., M, 2017) accepts this result after discovering harmful gambling habit. Gambling, like narcotics or alcohol, activates the brain's reward system, leading to addiction. This is because the majority of Iraqi culture is afflicted with a psychological stressor that causes worry, depression, and nervous tension. This, in turn, leads to the individual gambling in an attempt to alleviate psychological distress. This outcome is also related to a variety of factors, including family disintegration, high family pressures, a desire to escape reality, befriending terrible associates, a desire to acquire money quickly and easily, entertainment, and leisure time.

Table3: Psychological Burden among the gambler in the Iraq's' roulette casino.

This table reveals that the study samples (61.2%) have Psychological Burden and (38.8%) have Normal Psychological Domain in terms of Psychological Burden. This is due to the constant fear of losing every evening in the gambling hall, the successive losses that led to many psychological problems, including thoughts of suicide, as well as feelings of sadness, despair, shame, and remorse that made the gambler irritable and angry in the most basic situations (Browne., M, 2016). They discovered that problem gambling behavior had significant relationships to mental health problems and psychological wellness in the New Zealand National Gambling Study (Abbott et al., 2017). Sixty-six percent of persons seeking treatment for gambling problems showed high levels of psychological disorder (as judged by the Kessler Scale), according to the study. In the New Zealand National Gambling Study, 46 percent of those with gambling problems agreed. Problem gamblers also reported greater rates of depression and anxiety (both 21%) than non-gamblers (6%) and non-problem gamblers (5%). (7 percent , 5 percent). In client-based samples, 58 percent of participants satisfied the diagnostic criteria for major depression, while the remaining 12 percent were diagnosed with minor depression (Abbott, P, M, 2017).

Table 4: Financial Burden among the gambler in the Iraq's' roulette casino.

The study samples (60.8 percent) have financial burden, whereas (39.2 percent) have enough financial domain, as shown in the table. This is due to a gambling addiction that causes you to lose money on a regular basis, hiding your behavior, losing your savings, amassing debt, or even turning to theft or fraud to maintain your addiction.

Table 5: Lifestyle Burden among the gambler in the Iraq's' roulette casino.

This table reveals that the study samples (52.6%) have lifestyle burden and (47.4%) have normal lifestyle domain when it comes to lifestyle burden. The deterioration of the gambler's lifestyle is due to many nights in roulette halls for gambling and constant thinking in an attempt to win after each loss, which in turn leads to a deterioration of the gambler's lifestyle, such as neglecting his personal hygiene, eating fewer meals, smoking, avoiding exercise, and losing homework and social duties) Maarefvand, M., et al, 2019

Table 6: The job Burden among the gambler in the Iraq's' roulette casino.

In terms of job burden, the study samples (51.7%) have job burden, whereas (48.3%) have normal job domain. The deterioration of the gambler's work is due to a long stay in the roulette halls, returning home late, sleeping little, and constantly thinking about gambling and how to get money to gamble in it. This will result in the gambler's failure to perform the job work properly, delays in arriving at work, and constant problems with coworkers, which will result in his dismissal from the job (Raento, P. 2016)

Table 7: Health Burden among the gambler in the Iraq's' roulette casino.

In terms of health burden, the study samples have Health Burden in 53.9 percent of cases, whereas normal health domain is in 46.1 percent of cases. In this study, there is a health burden owing to psychological difficulties coming from frequent gambling losses, such as hopelessness, regret, unhappiness, continual anxiety, and in many cases, thoughts of suicide, all of which lead to health problems and hence physical ailments.

Table 8 : Association between economic dimension and health dimension

Also, this table shows that there is a high significant and significant relationship between (job burden) with Socio- demographic (occupational and economic status) at p value ≤ 0.05. This is due to the reason for the frequent losses and the many nights out in order to earn money, which led to the deterioration of the economic situation and the job situation, which led to the burden of the job, such as not completing work, delaying access to work, and continuing problems with employees and co-workers, which led many of them to be fired from the job.

Also, this table shows that there is a high significant and significant relationship between (health burden) with Socio-demographic (gender, social status, and economic status) at p value ≤ 0.05. This is due to most of the study samples being males, so a large percentage of males are addicted to gambling, who suffer from a deterioration in the economic situation as a result of repeated losses. These problems have led to great family disintegration in their families, so they suffer a lot from psychological problems that ultimately affect their health.

CONCLUSIONS

According to the findings of the study, it can be concluded that:

1. The majority of sample were shows as regarding gambling addiction they have sever gambling addiction level.
2. The majority of the study sample they have financial burden.
3. There is strong and high association between mean of social burden and mean of financial burden. social problems as a result of repeated losses from gambling that resulted in a financial burden that will affect his social interaction and relationships with others, such as marital problems, lack of desire for family and social duties, and complete separation from society.
4. There is strong and high association between mean of health burden and mean of financial burden. Health problems as a result of repeated losses from gambling, such as و After gambling the gambler became chronically ill, become neglected of medical needs and Less spending on (medications and healthcare)

5. There is strong and high association between mean of psychological burden and mean of financial burden. This is because gambling is highly dependent on money, therefore, the repeated losses of the gambling game will lose him a lot of money, which will lead to a psychological burden such as feelings of despair, regret, grief, and constant anxiety, and often thinks of suicide. many of the study samples have actually attempted suicide and many times.

6. There is strong and high association between mean of job burden and mean of financial burden. Repeated staying up for long periods at night in gambling halls in order to win money by gambling, and the result is frequent losses, which in turn will affect job performance and lead to a continuous burden at work such as poor completion of tasks and delay in reaching the workplace and thus will be expelled from work.

Recommendation: Recommendations for nursing practices include the following :

1. The state must prohibit any form of gambling because of its serious psychological and social consequences. Therefore, all gambling halls must be closed.

2. Preventing gambling-related problems among individuals and groups at risk for gambling addiction.

3. Identify, treat and prevent risk factors that lead to gambling, which is often linked to mental illnesses such as depression and anxiety..

4. To apply the principle of prevention is better than treatment, gamblers who are less addicted to this behavior must be treated psychologically and mentally, because psychological problems can lead to gambling behavior.

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