



Gambling & Crime Research Project

University of Technology, Sydney

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Introduction

As a consequence of receiving a grant from the NSW Casino Community benefit fund, the University of Technology, Sydney (UTS) Community Law and Legal Research Centre agreed to undertake research into gambling and crime. According to 'schedule A' of the agreement between the Trustees of the Casino Community Benefit Fund and UTS dated 14 July 1998 the research was required to inter alia:

- Expand on preliminary findings of the UTS pilot project and act upon recommendations of the report in relation to further research.
- To determine the nature of the link between gambling and crime and if that link is statistically significant.
- To determine specific issues of concern relating to the impact of gambling related crime
- To determine the types of crime associated with gambling
- To examine the direct and indirect social and economic impact of gambling related crime.
- To promote awareness of the social and economic impact and costs of gambling related criminal activity through information packages, public forums and multi-media exposure.
- To publish research literature on gambling related criminal activity.

- To examine and expose factors influencing the rehabilitation of offenders of gambling related criminal activity.

This research seeks to achieve all of these aims. The starting point for this project has been practical research of gambling related crime in New South Wales between the period of 1995-1999. In essence this research analyses the types of offences, the types of offenders and the types of responses that the courts have advocated when dealing serious problem gamblers that choose to offend the criminal law. This paper will discuss academic approaches to addiction and then turn to a summary of the cases reviewed by the practical research of this project. Finally, this paper summarises the cases where the offender was found to have committed an offence as a consequence of a desire to gamble. First however, this paper will explain its path.

Research Methodology

Researchers attended the Downing Centre at 143-147 Liverpool Street Sydney in the latter part of 1999. This complex is the main criminal court centre in New South Wales in terms of number of matters heard. On any one day there are around twelve Local and District courts in operation simultaneously, according to demand.¹ The Downing Centre also holds an archive of several thousand matters that pass through its courts and other courts of New South Wales. The researchers examined information provided by archive management in order to conduct searches for 'gambling related crime'² specifically, the research was undertaken in the following manner.

¹ The New South Wales Court hierarchy for criminal matters from lowest to highest is as follows: Local, District, Supreme Court & NSW Court of Appeal and finally the High Court of Australia.

² The term *Gambling Related Crime* is discussed in more detail at page 8

First, reports were obtained that showed the location of files in the archive according to offence and year the matter was set down for hearing.³ It is noted that in most cases far less than one hundred matters per offence, per year, would be indicated on these reports. The cause of this unevenness was influenced by three main factors. First, the initial police discretion to charge someone with an offence influences how the offence was recorded on the reports that in turn, were considered by the researchers. For instance, a person can be charged with "*steal in dwelling house*" or "*steal from dwelling house*" under Section 156 of the Crimes Act,⁴ However the reports would differentiate as to which offence code (*in house* or *from house*) was recorded. Secondly, some offences simply appeared more popular than others. Third, even if there were one hundred offences shown on the reports, this number would usually be reduced by other types of offences being included on those same reports. For instance, if a person were charged with armed robbery and larceny of a motor vehicle, the reports would include both types of offences in the report concerning armed robbery. By way of comparison, people that were charged with breach of a domestic violence order typically only committed this offence and as such nearly one hundred of these matters were examined for each year. With these constraints in mind, the following types of offences that went to court during 1995-1999 were considered:

³ Annexure A

⁴ 1900 NSW

Offences Examined 1995-1999

Fraud Offences

- Cheque not paid on presentation
- Obtain financial advantage by deception
- Make false or misleading statement with intent to obtain financial advantage
- Make false or misleading statement with intent to obtain money

Theft Offences

- Larceny
- Larceny as a clerk
- Larceny as a servant
- Larceny: Motor vehicle
- Steal in dwelling house
- Steal from dwelling house
- Steal from the person

Violence Offences

- Robbery
- Robbery being armed
- Assault and robbery
- Assault with intent to rob
- Assault and robbery with striking
- Breach of apprehended violence order

The Four Stage Screening Process

A procedure was used in order to determine whether or not to include files in this research.

The First Screen

This concerned systematic issues. If the reports showed that either;

- the accused failed to appear or
- if the charges were substituted or discontinued or
- the accused was found not guilty;

The files were not opened. However, if the reports did not indicate that this criterion was met, the files were retrieved from the compactor shelves. At this stage, files sometimes could not be located, or when they were located they were missing important documents, or at worst they were empty. Otherwise, the files typically included everything that the court accepted as evidence in addition to the prosecution brief.

The Second Screen

By referring to the comments made by the Judge, the second screening process was carried out. Here, if it was found that the matters were

- Referred to a higher court or,
- The matter was already included in the gambling and crime project

They were discarded and returned to the archive.

If not the third screen was undertaken.

The Third Screen

Here, researchers would skim the files looking for a mention of gambling or gambling related activity. The pre-sentence report was typically looked at first as researchers

rapidly discovered that if a person had a gambling problem, this is the document where it would most likely be mentioned. Also, the police record of interview was an effective indicator of the causes of the offence. If the matter referred to gambling it was more thoroughly scrutinised in order to determine whether or not the crime could be considered a gambling related offence and a "hit". This point warrants further explanation, as it was the essence of the research and was subject to a reasonable amount of interpretation that ultimately reduced the findings of this research project. Accordingly, in order to include a matter in this report and for it to be deemed a "hit", researchers were required to answer the following question affirmatively:

"Was gambling involved with or related to the offence?

That is, was the offence before the court:

- Committed as a consequence of, or
- Committed in order to support, or
- Committed as a significant result of, or
- Significantly related to :

The defendant's desire, need or compulsion to gamble?

If a case was considered a "hit", it was read more thoroughly in order to answer a questionnaire that sought to draw out details of the matter. For instance, the questionnaire ascertained the location of the offence and the age of the offender along with other salient information.⁵ Documents from the file were then photocopied and the originals were

⁵ Annexure 2

returned to the shelves. At best, this would involve making copies of the prosecution brief, pre-sentence reports, psychological reports, the person's criminal record and any other relevant information that could be used to establish an insight into the person's gambling, the commission of the offence and the courts response to it. As previously mentioned sometimes the files would be incomplete and would not hold all of the relevant information. This impacted upon the research as cases could be considered hits but at the same time, the understanding they provided was minimal. For instance if a pre-sentence report was not included in the file, it was much more difficult to glean information about the offender and the offence. Regardless of the composition of the file, If the matters were considered to be hits at this stage they were photocopied and then bundled according to the type of offence. The table overleaf shows that at this third stage, the following result were apparent.

Third Stage Review Results

Offence	Number of hits/ per number of cases reviewed						
	1995	1996	1997	1998	1999	Totals	Ratio
Larceny as a clerk/servant	7/56	11/46	6/31	9/35	1/14	36/182	5.05
Cheque not paid on presentation	2/9	0/9	2/9	2/3	0/1	6/31	5.16
Obtain financial advantage by deception	8/47	6/41	6/40	1/15	0/11	21/154	7.33
Make false misleading statement with intent to obtain money	1/16	1/14	2/9	0/7	1/4	4/50	12.5
Robbery being armed	5/71	4/79	0/71	6/78	0/74	15/373	24.86
Make false misleading statement with intent to obtain financial advantage	0/16	1/12	NA	0/7	0/4	1/39	39
Steal from dwelling house	0/14	1/18	0/15	1/19	0/12	2/78	39
Steal in dwelling house	0/23	0/31	1/8	1/15	0/6	2/83	41.5
Robbery	1/59	1/68	3/71	0/75	1/27	6/300	50.0
Larceny Motor Vehicle	3/88	0/81	1/87	1/93	1/52	6/401	66.83
Steal from the person	1/40	0/65	1/51	1/59	0/44	3/259	86.33
Larceny	2/86	0/82	2/77	0/88	0/85	4/418	104.5
Assault and Robbery	0/2	0/1	NA	0/1	NA	0	0
Assault and Robbery with striking	0/3	NA	0/2	NA	NA	0	0
Assault with intent to rob	0/28	0/28	0/21	0/8	0/2	0/87	0
Apprehended violence orders	0/90	0/97	0/88	0/94	0/48	0/417	0
Totals⁶	30/560	25/662	22/580	22/594	6/383	105/2779	
Ratio	18.66	26.48	26.36	27.0	63.83	26.46	

⁶ The average figure has been compiled without the inclusion of both "Assault and Robbery" in addition to "Assault and Robbery with Striking", as the sample of 8 reviewed cases in total is miniscule.

The Fourth Screen

When the final screening process was undertaken, only 63 from the 105 cases from the third screen were actually included in this report. The main reasons for this considerable deduction of cases in the final stage were:

- A lack of general information in the case file that gave an insight into the subject.
- A lack of specific information that pertained to the subject's gambling or crime.
- An inability to reconcile the test of gambling related crime with the chronology of events.
- An inability to justify that the crime committed was a gambling related crime.

In effect the original test of gambling related crime was quite rigid. For instance, a person could be a compulsive gambler and steal a car, but if there was no link between the two events the matter would not be considered a hit. Or, a person could steal alcohol from a shop and have a self confessed gambling problem, but again if there was no correlation between the person gambling, resulting in the person stealing it would generally not be included in the tally of gambling related crime. Instead, the research typically required a link between the commission of the offence and the subject's gambling. For instance, a robbery committed to finance gambling or a theft that resulted in the vast majority of the proceeds of the crime being gambled would be included. Essentially then, the link between the two events of criminal act and gambling had to be directly related.

The last stage of the process involved reviewing the work of the researchers for a final cull and then summarising the information gleaned from the questionnaire and other copied information and then putting all of the information on a database.

This paper now turns to consider addiction generally. As a theoretical basis and in order to provide a background for the subjects uncovered by the research. Also, this topic is chosen as it is a key issue that propels the activities of problem gamblers. As a starting point, this paper will attempt to define addiction.

Defining Addiction

It hard to state with certainty what constitutes an addiction. The term is closely related to concepts of: excess, routine, necessity, compulsion, and harm. For instance, it can be routine for someone to place bets on horse races every Saturday morning in as much as it is a routine to go shopping every Saturday afternoon. However in the normal sense of the term addiction, it would only be appropriate to consider that the activity of gambling as addictive. According to the Macquarie Dictionary "addict" is defined as; "... to give (oneself) over, as to habit or pursuit; apply or devote habitually."⁷ Accordingly, it is proposed that there is an enormous element of subjectivity in the term "addict" and it is also noted that "habitual" is an equally ambiguous concept. Hence, a person that is deemed to do something "habitually" is a relative construct influenced by the norms of the person deciding that the behaviour is habitual.⁸ For instance a person that has never walked on a beach may call someone that does walk on a beach every morning "addicted" to the task whilst it could be completely "normal" in another persons eyes. This point indicates another issue; that people can become addicted to all forms of human pursuits.

⁷ Macquarie Dictionary Second Edition (1991) at 18

⁸ "Habit" is defined as: "A disposition or tendency, constantly shown, to act in a certain way." as per Macquarie Dictionary Second Edition (1991) at 788

Addictive behaviour can generally only be described when the frequency of the pursuit or behaviour by the subject person or group is undertaken substantially more often than by the person or group that decides whether or not the behaviour is an addiction.⁹

A working definition must also include other elements. Next, the term addiction usually requires a negative trait. Perhaps ironically the term 'winners are grinners' should also note that 'winners are rarely addicts either'. Accordingly, pursuits that are held in a positive regard by those that determine addictive behaviour are rarely considered addictive. By way of example, people that immerse themselves in their employment are not generally considered addicts. Instead they are "hard working", "determined" and "tenacious." In the everyday use of the term then, the "addiction" is usually required to have an effect that harms the addict or the addict's environment. If people are also successful at a "positive pursuit" it is even more unlikely that they would be considered addicts. Hence professional athletes that train seven days per week for 4 hours per day and then win, would rarely, if ever, be considered addicts.

In terms of gambling; addicts are usually only identified when losses impact on an addict's financial status or law abiding behaviour. Kerry Packer may bet tens of thousands per week on a regular basis, but it would be hard to classify him as a gambling addict since his "addictive gambling" does not effect his billion dollar empire. However if Mr Packer were to loose his considerable fortune to gambling, he would no doubt be considered a gambling addict. Likewise, a pensioner that buys a Tattsлото ticket every week along with other expenditure on disposable items is not meant to be caught by the everyday definition of a gambling addict.

⁹ It is possible however to have an addict recognise addictive behaviour in another person.

The final element of addiction requires the addictive behaviour to be more than a routine. In order for the definition to have utility there needs to be some form of automatic behaviour. A workable definition needs to strike a balance between being general enough to recognise untraditional "positive behaviour" as also being addictive and specific enough to exclude the completion of everyday activities. From this discussion, the definition of addiction can be described as follows:

- A repeated activity undertaken by a person
- That results in the activity taking priority over other activities and responsibilities
- That generally but not always has a negative consequence on the individual, or the individuals immediate community.

Straight away, this paper recognises that the this definition is not perfect, as for instance questions can be raised about priority and the grey areas in between. However, as a working definition, it is considered useful. This paper will now turn to the psychiatrists accepted definition of gambling addiction which is referred to as pathological gambling.

Addictive Personality

The Psychiatric Definition of Pathological Gambling

The American Psychiatric Association publishes a diagnostic and statistical manual of mental disorders. In its fourth edition it is known as "DSM-IV". This 885 page book is an accepted dictionary of psychiatric disorders that can assist in the recognition of mental illness problems. First recognised in the 3rd edition, it describes the essential features of pathological gambling as:

- Persistent and maladaptive gambling behaviour
- That disrupts personal family or vocational pursuits
- [That cannot be] better accounted for by a manic episode”¹⁰

DSM-IV then goes on to define “Persistent and Maladaptive Gambling Behaviour” as indicated by five of the following ten behaviours being present in the subject.

- 1) is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture or thinking of ways to get money with which to gamble)
- 2) needs to gamble with increasing amounts of money in order to achieve the desired excitement
- 3) has repeated unsuccessful attempts to control, cut back or stop gambling
- 4) is restless or irritable when attempting to cut down or stop gambling
- 5) gambles as a way of escaping from problems or of relieving a dysphoric mood (eg feelings of helplessness, guilt, anxiety, depression)
- 6) after losing money gambling, often returns another day to get even (“chasing” one’s losses)
- 7) lies to family members, therapist or others to conceal the extent of involvement in gambling
- 8) has committed illegal acts such as forgery, fraud, theft or embezzlement to finance gambling

¹⁰ American Psychiatric Association “Diagnostic and Statistical Manual of Mental Disorders”. 4th Ed
 “DSM-IV” Washington DC. p 615

- 9) has jeopardised or lost a significant relationship, job, or educational or career opportunity because of gambling
- 10) relies on others to provide money to relieve a desperate financial situation caused by gambling.”¹¹

Provided the gambling behaviour is not better accounted for by a Manic episode.

Academic perspectives of addiction

This paper will now turn to examining academic writing on the topic of addiction. The literature reveals a certain degree of consensus; most scholars (psychologists, psychiatrists, and anthropologists) agree that addiction may be conceptualised as the manifestation of a combination of biological, psychological, and social factors.¹² There is however scholarly dispute as to the correct ‘weighting’ of these factors.

According to addictive personality theory certain ‘personality types’ are more prone to addictions or dependencies than others. Addictive personalities are said to have initial positive effects from the subject of their addiction (most commonly psychoactive drugs) which ‘trigger’ their addiction and the accompanying long-term negative effects. There is research to support the contention that there are ‘addictive personality types’. The scores of alcoholics, pathological gamblers and drug users on personality tests are quite

¹¹ American Psychiatric Association “Diagnostic and Statistical Manual of Mental Disorders”. 4th Ed “DSM-IV” Washington DC. p 618

¹² Shaffer, H. J., Hall, M.N. and Vander Bilt, J., (1997), “*Estimating the Prevalence of Disordered Gambling Behaviour in the United States and Canada: A Meta-analysis*”, Harvard Medical School, Division of Addictions, December 10, 1997. And: Shaffer, H.J. and Gambino, B., (1989), “The Epistemology of ‘Addictive Disease’: Gambling as a Predicament”, *Journal of Gambling Behaviour*, 5(3), 211-229.

similar.¹³ One study concluded that gamblers, while similar to alcoholics, are more extreme in their personality deviations than alcoholics.¹⁴ It is suggested that problem gamblers, alcoholics and drug addicts are not just similar in terms of personality profiles. American studies show a great deal of cross-addiction, with those who have one problem are much more likely to experience the other two problems. Blaszczynski et al found that about 30% of the problem gamblers in their study also had a problem with alcohol.¹⁵ Taber, et al made similar findings, with about 54% of their problem gamblers also experiencing alcohol problems.¹⁶

In his General Theory of Addictions, Jacobs¹⁷ suggests a model that is intended to explain all addictions. Jacobs posits that there are two underlying and interacting conditions which cause discomfort for an individual and lead to addictive behaviour as an attempt at 'self-medication'. The first factor Jacobs mentions is a unipolar physiological resting state (in which an individual is chronically over, or under, stimulated). The second factor is a psychological problem such as rejection or insecurity that creates considerable psychological pain. In order to escape the discomfort caused by these factors, the individual uses the addictive behaviour to retreat into a dissociative state, which allows the individual to escape from the pain, or discomfort. There is support for Jacobs theory:

¹³ Blaszczynski, A. P., (1985, December), "A Winning Bet: Treatment for Compulsive Gambling", *Psychology Today*, 38, 42-44, 46. And: Blaszczynski, A., Buhrich, N., and McConaghy, N., (1987), "Pathological Gamblers, Heroin Addicts and Controls Compared on the EPQ 'Addiction Scale'", *British Journal of Addiction*, 82, 315-319.

¹⁴ McCormick, R.A., Taber, J.I., Kruegelbach, N. and Russo, A., (1987), "Personality Profiles of Hospitalised Pathological Gamblers", *Journal of Clinical Psychology*, 43, 521-527.

¹⁵ Blaszczynski, A.P., Wilson, A.C. and McConaghy, N., (1986), "Sensation Seeking and Pathological Gambling", *British Journal of Addiction*, 81(1), 113-117.

¹⁶ Taber, J.I., Russo, A.M. Adkins, B.J. and McCormick, R.A., (1986), "Ego Strength and Achievement Motivation in Pathological Gamblers", *Journal of Gambling Behaviour*, 2(2), 69-80.

¹⁷ Jacobs, D.F., (1986), "A general Theory of Addictions: A New Theoretical Mode", *Journal of Gambling Behaviour*, 2(1), 15-31.

Dickerson, et al note that negative mood, such as depression or anger, was associated with increased persistence at gambling despite losses.¹⁸ There is also empirical support for Jacob's framework in terms of adolescent gambling problems¹⁹

Jacobs outlines a 3 stage course to addiction:

- Discovery;
- Resistance to change; followed by
- Exhaustion

Jacobs suggests that it is at the initial discovery stage and the exhaustion stage that it is possible to change behaviour. He also notes that it is possible to identify and prevent the development of behavioural problems. As Brown points out, Jacobs' theory is different from the addictive personality in that the unipolar physiological resting state is portrayed as inherited, rather than learned or developed through experience.²⁰ Tyndel and Jacobs, amongst others, have suggested that addicts tend to attribute negative life events to their own agency and addictive behaviour is thus an attempt to master guilt, depression or anxiety.²¹

¹⁸ Dickerson, M., Cunningham, R., England, S.L. and Hinchy, J., (1991), "On the Determinants of Persistent Gambling: III. Personality, Prior Mood and Poker Machine Play", *International Journal of the Addictions*, 26(5), 531-548.

¹⁹ Gupta, R. and Derevensky, J., (August 1997), "An Empirical Examination of Jacobs' *General Theory of Addictions*: Do adolescent gamblers fit the theory?", Paper presented at the annual meeting of the National Conference on Compulsive Gambling, New Orleans.

²⁰ Brown, R.I., (1988), "Models of Gambling and Gambling Addictions as Perceptual Filters", *Journal of Gambling Behaviour*, 3(4), 224-236.

²¹ Tyndel, M., (1963), "Gambling - An Addiction", *Addictions*, 10, 40-48.

Gambling Addiction

While gambling constitutes a harmless form of recreation for the vast majority of people, a small percentage of gamblers experience difficulties in controlling their gambling behaviour. These people are generally categorized, interchangeably, as 'problem', 'compulsive', or 'pathological' gamblers. For ease of reference the term 'problem gambling' is preferred here. This condition was formally recognized by the American Psychiatric Association (APA) in 1980 and included in the DSM-IV²² as:

"A progressive disorder characterized by a continuous or periodic loss of control over gambling; a preoccupation with gambling and with obtaining money with which to gamble; irrational thinking; and a continuation of the behaviour despite adverse consequences."

This next section will consider different types of theories that attempt to explain addiction generally and gambling addiction specifically. Where appropriate, cases from the research conducted at the Downing Centre will be included as a means of contrasting these theories with everyday cases of gambling and other forms of addiction.

Theories and Models

Biological theories tend to characterise addiction as a physiological response to a physiological pre-disposition. Most researchers who take a biological approach to

²² 'Diagnostic and Statistical Manual', produced by the APA, 1994.

problem gambling do not see it as a 'disease'. There is evidence that addictions, or addictive tendencies, tend to run in families and this has been cited as indicative of a genetic tendency toward gambling addiction (and addiction generally).²³ Often however, 'biological' theories suggest that there is some interaction between pre-disposition and the environment.

According to the medical model, problem gambling is seen as a disease, a medical pathology that needs to be addressed. Problem gambling is seen as a black and white distinction, with the gambler either compulsive or not compulsive. Problem gamblers, therefore, are seen as in some way qualitatively different from other gamblers. "Compulsive" is the preferred term in that it fits with the psychiatrists' clinical definition of gambling as a disorder of impulse control.²⁴ The qualitative difference seen as central to the model may be due in part to some physiological factor which pre-disposes the individual to compulsive gambling or to a mental illness such as obsession or compulsion or to a combination of factors, including environmental circumstances.²⁵ As the next Problem gamblers are seen as different, different even from other gamblers who experience serious gambling problems, in some measurable way. Rosecrance summarises the major components of the disease model thus:²⁶

- there is a single phenomenon that can be called 'compulsive gambling'
- compulsive gamblers are quantitatively different from other gamblers

²³ Blume, S.B., (1987), "Compulsive Gambling and the Medical Model", *Journal of Gambling Behaviour*, 3(4), 237-247.

²⁴ APA - DSM IV, 1994).

²⁵ Brown, R.I., (1987), "Classical and Operant Paradigms in the Management of Gambling Addictions", *Behavioural Psychotherapy*, 15(2), 111-122.

²⁶ Rosecrance, J. (1985-1986). "The Next Best Thing: A Study of Problem Gambling", *International Journal of the Addictions*, 20(11-12), 1727-1739.

- compulsive gamblers gradually lose control, and are eventually unable to stop gambling
- compulsive gambling is a progressive condition, with inexorable progression through defined stages²⁷
- Compulsive gambling is a permanent and irreversible condition. The only 'cure' is total abstinence. If the gambler were to resume gambling all of the 'symptoms' described above would manifest once again.

The disease model provides perhaps the most popular template for addiction worldwide. The labelling of gambling as a disease has obvious legal consequences. If addictive and associated behaviour is deemed involuntary, then the disease model has exculpatory potential in the legal context.

Psychological theories

There are four broad types of psychological theories; psychodynamic theory, personality/trait theory, social learning theory, and cognitive-behavioural theory.

Psychodynamic theory is often equated with Freudian theory. Psychodynamic models of pathological gambling see the problem as within the individual's psyche.²⁸ The source of the behaviour is entirely internal, unconscious, and beyond the voluntary control of the individual. Essentially, these theories suggest that the problem gambler uses gambling in an attempt to heal a psychic wound (similar to Jacobs' 1986 General Theory of the Addictions) or as a means of coping with conflict. The gambling behaviour offers a

²⁷ This is generally the point of departure between the different disease theories. Otherwise, Rosecrance's model is largely representative of the medical/disease model generally.

²⁸ Rosenthal, R.J., (1992), "Pathological Gambling", *Psychiatric Annals*, 22(2), 72-78. And Bergler, E., (1958), *The Psychology of Gambling*, Hill and Wang, New York.

temporary escape, a loss of self, which is very attractive to the gambler, whether the gambler wins or loses. In fact winning, and money, are secondary attributes of gambling for the gambler. What is important is "the action." Winning is so unimportant to pathological gamblers that some theorists suggest that there is an unconscious desire to lose.²⁹

This notion of 'moral masochism' is attributable to Freud. There is, however, an on-going debate about the masochistic nature of the pathological gambler. Lesieur and Rosenthal, see the underlying mechanism in problem gambling as a 'narcissistic personality'.³⁰ Narcissistic personality is susceptible to swings of arousal and depression. The gambling behaviour is an attempt to regulate these swings, and many other behaviours can be used for the same purpose, including alcohol consumption or drug use, overeating, sleeping, watching television, physical exercise, or sex. Rosenthal also suggests that people gamble in order to "control the uncontrollable" essentially to feel that they can predict the future, which provides the illusion of controlling it.³¹ In fact, many of the magic rituals which gamblers engage in are attempts to provide the gambler with the illusion of control.

Personality or trait theory focuses on research that links problem gambling to high scores on depression tests.³² There is also some debate as to whether gambling is the

²⁹ Rosenthal, R.J., (1986), "The Pathological Gambler's System for Self-deception", *Journal of Gambling Behaviour*, 2(2), 108-120.

³⁰ Lesieur, H.R. and Rosenthal, R.J., (1991), "Pathological Gambling: A Review of the Literature", *Journal of Gambling Studies*, 7(1), 5-39.

³¹ Rosenthal, R.J., (1986), "The Pathological Gambler's System for Self-deception", *Journal of Gambling Behaviour*, 2(2), 108-120.

³² Blaszczynski, A., and McConaghy, N., (1988), "SCL-90 "Assessed Psychopathology in Pathological Gamblers", *Psychological Reports*, 62(2), 547-552. Graham, J.R. and Lowenfeld, B.H., (1986), "Personality Dimensions of the Pathological Gambler", *Journal of Gambling Behaviour*, 2(1), 58-66. and

cause or in fact the effect of the depression as there is evidence to support both hypotheses. It has commonly been supposed that depression is one of the causes of problem gambling, leading to a need to self-medicate using gambling to increase arousal levels.³³ However, Lesieur found that pathological gambling created other stresses within the gambler's life that increased as gambling involvement increased.³⁴ Some research has suggested that there are different types of traits associated with different types of gambling. For instance, skill gamblers (those more likely to bet on poker or sports) are more likely to be outgoing and less likely to be depressed than gamblers who are luck bettors (betting on lotteries or slot machines).³⁵ Vague clinical support for this typology of gambling types and traits is offered by Selzer, who notes that skill gamblers are more likely to have personality disorders, while luck gamblers are more likely to have affective disorders.³⁶ McCormick and Taber suggest five major clusters of personality traits that are most likely to be linked to all types of pathological gambling:

- obsessive-compulsive tendencies
- a mood factor (ranging from depression to hypomania)
- presence of significant trauma or major life stresses (ranging in significance from recent and acute to chronic and remote)
- a socialization factor (with problems associated with antisocial personality disorder)

Moravec, J.D. and Munley, P.H., (1983), "Psychological Test Findings on Pathological Gamblers in Treatment", *The International Journal of the Addictions*, 18, 1003-1009.

³³ Rosenthal, R.J., (1987), "The Psychodynamics of Pathological Gambling: A Review of the Literature", In T. Galski, (ed.) *The Handbook of Pathological Gambling*, Charles C. Thomas, Springfield, IL.

³⁴ Lesieur, H.R., (1979), "The Compulsive Gambler's Spiral of Options and Involvement", *Psychiatry*, 42, 79-87.

³⁵ Adkins, B.J., Kruegelbach, N.G., Toohig, T.M., and Ruple, L.J., (1987, August 23-26), Paper presented to the Seventh International Conference on Gambling and Risk Taking, Reno, Nevada.

³⁶ Selzer, J., (1992), "Borderline Omnipotence in Pathological Gambling", *Archives of Psychiatric Nursing*, 6(4), 215-218.

- Substance abuse or multiple addiction problems.³⁷

Social learning theory models view gambling as a learned behaviour, learned through imitation, either of an admired figure or from one's peers. The frequency of subsequent gambling behaviour and the amount of money spent on gambling is determined in large part by the social context, or environment of the gambler. Where there are more opportunities to gamble, the individual will gamble more often. Opportunities to gamble are affected by the individual's occupation or leisure time pursuits, peer group, ready geographic availability of gambling venues, and general views about the use of money.³⁸

Social learning models of gambling suggest that gambling behaviour falls along a continuum of problem-free to problem-dominated gambling. Further, the development of gambling problems does not follow set stages (although there may be patterns), nor are serious gambling problems considered permanent. It is expected that individuals may move in and out of problem gambling behaviour without ever receiving treatment and that spontaneous recovery from problems is possible.³⁹ It has also been suggested that problem gambling is a phase, and that individuals may simply "grow out" of the phase⁴⁰ This is in direct contrast to disease models of gambling behaviour, which suggest a qualitative difference between compulsive and non- pathological gamblers, a common set of stages in the development of problems, and no real way to recover from the problem other than abstinence - which is merely avoidance of the problem. The major difference between those who support social learning or behavioural theories of problem gambling

³⁷ This is analogous to 'the addictive personality' discussed above.

³⁸ Brown, R.I., (1988), "Models of Gambling and Gambling Addictions as Perceptual Filters", *Journal of Gambling Behaviour*, 3(4), 224-236.

³⁹ Stimson, G., Oppenheimer, E. and Thorley, A., (1978), "Seven Year Follow-up of Heroin Addicts: Drug Use and Outcome", *British Medical Journal*, I, 1190-1192.

⁴⁰ Lesieur, H.R. and Rosenthal, R.J., (1991), "Pathological Gambling: A Review of the Literature", *Journal of Gambling Studies*, 7(1), 5-39.

and most others is thus the belief that because the behaviour was learned, it can also be unlearned.

Cognitive behavioural models build on learning theory, but focus on the role cognitive processes play in the acquisition and maintenance of gambling behaviour.⁴¹ The cognitive-behavioural model outlined by Sharpe and Tarrier is a good example of the theory. Gambling behaviour is acquired through the traditional mechanisms of operant and classical conditioning.⁴² The gambling behaviour is reinforced on a partial and variable reinforcement schedule, through a combination of financial rewards and heightened physiological arousal levels, which are interpreted by the gambler as excitement. This is premised on the assumption that once the gambler has had a few exposures to gambling, most will experience a win, which acts as a positive reinforcement of the behaviour, and increases the likelihood that the gambler will return to gamble again. Gradually, heightened levels of autonomic arousal become associated with monetary rewards, increasing the reinforcement value of the heightened arousal levels. This is a particularly powerful system of reward as there is reinforcement through increased arousal as a result of gambling, and there is also partial reinforcement through material, monetary rewards. Gamblers learn that wins will be intermittent, but that they will occur, and so they learn to continue gambling despite repeated losses.⁴³

⁴¹ Ladouceur, R., Boisvert, J. and Dumont, J., (1994), "Cognitive-behavioural Treatment for Adolescent Gamblers", *Behaviour Modification*, 18(2), 230-242.

⁴² Sharpe, L. and Tarrier, N., (1993), "Towards a Cognitive-behavioural Theory of Problem Gambling", *British Journal of Psychiatry*, 162, 407-412. And Dickerson, M., (1979), "FI Schedules and Persistence at Gambling in the U.K. Betting Office", *Journal of Applied Behaviour Analysis*, 12, 315-323.

⁴³ Walker, M.B., (1992), "Irrational Thinking Among Slot Machine Players", *Journal of Gambling Studies*, 8(3), 245-261. And Sharpe, L. and Tarrier, N., (1993), "Towards a Cognitive-behavioural Theory of Problem Gambling", *British Journal of Psychiatry*, 162, 407-412. And Dickerson, M., (1979), "FI

Sociological theories are similar, in some ways, to the social learning perspective. The sociological perspective suggests that gambling problems are not necessarily compulsive, or even destructive or irrational.⁴⁴ Gamblers must obtain a certain amount of pleasure or satisfaction from gambling, or they would not persist in the behaviour.⁴⁵ Gambling in certain specific contexts provides the opportunity for the gambler to take on an exciting role, that of the "high roller" who is accorded a great deal of respect by others within a gambling environment.⁴⁶ This role would likely be attractive to the sub-group of problem gamblers who are chronically depressed or under stimulated. The ability to escape the outside world, and to focus on a limited, repetitive gambling activity, on the other hand, would appeal to the chronically overstimulated gamblers.

It has also been suggested that gambling as an institution has social rewards, including membership in a gambling sub-culture, which counteract the monetary losses, and provide the problem gambler with an identity, a language, and like-minded peers.⁴⁷ The gambler in effect retreats to this sub-culture when the wider social structure is perceived

Schedules and Persistence at Gambling in the U.K. Betting Office", *Journal of Applied Behaviour Analysis*, 12, 315-323.

⁴⁴ Oldman, D., (1974), "Chance and Skill: A Study of Roulette", *Sociology*, 8, 407-426. And Rosecrance, J., (1988), "Active Gamblers as Peer Counselors", *International Journal of the Addictions*, 23(7), 751-766.

⁴⁵ Stein, S. A., (1993), "A Developmental Approach to Understanding Compulsive Gambling Behaviour", In H. Shaffer, S. Stein, B. Gambino and T. Cummings (eds.), *Compulsive Gambling: Theory, Research and Practice*, Lexington Books, Lexington, 69-80.

⁴⁶ Holtgraves, T. M., (1988), "Gambling as Self-presentation", *Journal of Gambling Behaviour*, 4(2), 78-91.

⁴⁷ Hayano, D. M., (1982), *Poker Faces: The Life and Work of Professional Players*, University of California Press, Berkeley. And Martinez, T. M., (1983), *The Gambling Scene: Why People Gamble*, Charles C. Thomas, Springfield, Illinois. Martinez, T. M., (1983), *The Gambling Scene: Why People Gamble*, Charles C. Thomas, Springfield, Illinois. Rosecrance, J., (1985), "Compulsive Gambling and the Medicalization of Deviance", *Social Problems*, 32, 275-284. And Ashley, L.R., (1990), "The Words of My Mouth and the Meditation of My Heart: The Mindset of Gamblers Revealed in Their Language", *Journal of Gambling Studies*, 6(3), 241-261.

as somewhat threatening.⁴⁸ As the gambler loses more and more money, the commitment to gambling is reinforced, as this is the only milieu, which provides comfort and a sense of security to the gambler, thus exacerbating the problem.

Anthropological theories explain the human motivation to gamble in evolutionary terms. Wildman characterises the urge to wager as anachronistic, a hold-over from a time when risk taking behavior had positive evolutionary value.⁴⁹ Humans have learned to approach these situations by employing all of the intelligence, skill and courage available. Unfortunately, in many gambling situations where the results are random, these traits are of limited utility, and the human tendency to seek rational patterns is a liability rather than an asset.

Wildman goes on to suggest that the reactions of humans to gambling, the anxiety and heightened arousal, were at one point likely useful adaptive mechanisms for humans facing challenges in their physical environment. Evolution has conditioned us as a species to react to threats with the physiological response of anxiety and heightened arousal. However, most threats in modern life are of a less than tangible nature, threats to our personal wealth, social standing or self-esteem rather than to our physical well being. The heightened arousal, the "fight or flight" reflex may actually be maladaptive in these circumstances, encouraging persistence when there can be no reasonable hope of success.

Economic theories view gambling as a means to achieve greater wealth, as a consumption activity, or as entertainment.⁵⁰ Economic models are inherently rational, and

⁴⁸ Ocean, G. and Smith, G.J., (1993), "Social Reward, Conflict and Commitment: A Theoretical Model of Gambling Behaviour", *Journal of Gambling Studies*, 9(4), 321-339.

⁴⁹ Wildman, R. W., (1997), *Gambling: An Attempt at an Integration*, Wynne Resources Inc, Edmonton.

⁵⁰ Eadington, W.R., (1988), "Economic Perceptions of Gambling Behaviour", *Journal of Gambling Behaviour*, 3(4), 264-273.

assume an allocation of resources which will provide the most utility or satisfaction for the consumer.

Economic models distinguish between two basic motivations for gambling: the hope of greatly increased personal wealth, and the entertainment motivation.⁵¹ As Eadington (1988) has suggested, most economic analyses have focused on the wealth motivation. Essentially, the marginal utility of wealth declines as an individual becomes wealthier. Money is of course worth more to the poor. Gambling, therefore, is a means by which "economic man" hopes to increase his level of utility, and this explains why gamblers are often willing to accept very long odds on lotteries, because for a very small risk, there is the chance of a very large gain. Gambling is a rational and efficient means of attempting upward economic mobility when there are no other options available.

There is some support for hypotheses derived from economic models. For instance, data on who gambles, and on what activities suggests that the relatively poor will spend more of their income on lotteries or gambling than the relatively rich, and that winners of large prizes may suddenly cease or limit gambling after winning a large amount of money.⁵²

When the motivation for gambling is primarily its entertainment value, it can be looked at in the same way as any other commodity purchase. Unlike those who gamble in the hope of an increase in wealth, those who gamble for entertainment are more likely to favour fixed odds games with even money pay-off than activities like the lottery, with low entertainment value and long odds.

⁵¹ Ignatin, G. and Smith, R.F., (1976), "The Economics of Gambling", In W.R. Eadington (ed.), *Gambling and Society*, Charles C. Thomas, Springfield, Illinois.

⁵² Brenner, R., (1985), *Betting on Ideas*, The University of Chicago Press, Chicago.

Problem gambling is addressed in economic theory by suggesting that this may be one instance when "economic man" makes somewhat irrational decisions. Adam Smith first pointed out that the chance of gain tends to be overvalued, compared to the chance of loss. Eadington cites Snyder in support of Smith's observation, suggesting that gamblers in horse racing tend to under-support favourites, and over-support long shots, in essence overestimating the likelihood of winning on the long shots.⁵³ An alternate explanation is that the ability to continue gambling, to stay "in action" has more value to the problem gambler than the money he or she is spending to continue gambling.

From all this it seems there is a wide spectrum of debate around addiction generally and gambling behaviour specifically. As the summaries of cases have shown this debate is warranted. There does not appear to be any specific reason for one subject becoming addicted to gambling over another. That said though depression and some form of trauma do appear more regularly than would be expected. This next section considers cases where people have committed gambling related crimes and also have one or more additional addictions. Thus, the people involved in these offences can be characterised as having addictive personalities. By the same token much of this behaviour could be explained by referring to economic explanations. As a consequence of this disunity it is possible to suggest that agreement surrounding the causes of addictive behaviour will remain unsettled. This paper will now turn to examining the cases found that were included in the final screen.

⁵³ Snyder, W. W., (1978), "Decision-making with Risk and Uncertainty: The Case of Horse Racing", *American Journal of Psychology*, 91, 201-209.

Findings

Since the size of the samples for the types of offences do not warrant scrutiny as a formal quantitative study, this research does not make any statistical findings. That said however, it does seem reasonable to suggest that some types of offences may have a higher propensity to be committed by people with gambling problems than others types of offences. This study found that larceny as a clerk or servant together with some fraud offences were crimes that people with gambling problems were more likely than not to commit. If they were going to commit offences to fund their gambling activity. On the other hand, gambling was largely not relevant to Apprehended Violence Orders or the offence of assault with intent to rob. Ultimately though, the quantitative findings of the study must necessarily be considered in the realm of broad generality.

Instead, the real benefit that this study offers is its qualitative research. It is rare for researchers to have access to such specific documents that necessarily shed light upon gambling related crime and criminals that broke the law in order to gamble. Pre sentence reports, psychological reports, criminal histories, and educational backgrounds are all pieces of information that have been considered by researchers.

Extracting the Gambling cases

Type of Offence

Armed robbery (9 cases) , Fraud related offences (22 Cases) and Larceny as a servant (28 cases) were the most common offences to be associated with gambling and crime. Fraud related offences were given a broad definition as they could include passing valueless

cheques or of making a false or misleading statement or similar deceptive behaviour. Theft was insignificant (2 cases) whilst the offences of robbery and larceny of a motor vehicle both had 1 case recorded in these summaries.

Gender

Women were the offenders in 9 of these cases. Larceny as a servant (6 cases) and Fraud (3 cases) were the only offences committed by women. All women gambled only on pokies. Together the amount they obtained was over \$1.4 million, whilst their average amount involved per offence was \$158,000.00. This compares to an average of \$49,905.00 for men.

Age

The ages of the subjects varied from 17 years to 71 years. The largest proportion of people came from 26-30 age group (16 Cases), with the 21-25 age group next most common (13 cases). The third most common group was the 31-35 year olds (9 cases) By way of comparison; no people came from the 66-70 age group whilst 61-65 and 71-75 each recorded 1 case. Next least common was the 15-20 group (2 cases).

Victim

The most common place for the offences to occur was at a small business (16 cases). This category would also encompass larceny as a servant in addition to some fraud offences. Banks or financial institutions were next most popular (15 cases). Unsurprisingly, larceny as a servant was also particularly relevant to banking institutions. Some people appear to have attempted to recoup their losses or commit offences upon Hotels, clubs or the TAB (6 cases). People including partners also accounted for a fair proportion of victims (6 cases) Large businesses were the least popular places to commit offences (2 cases).

Education

Year 10 was the most common level of education attained by the subjects (25 cases). A caution should be added here as some people attempted or completed a trade but it was not included in this survey. The next most common level of education was year 12 (12 cases) No information was provided for in many instances (9 cases) Only one subject had a degree. Year 6 was the highest level of education obtained by the subject in 2 cases, whilst year 8 was relevant in 1 case.

Other Addictions

By far, the majority of subjects did not have any other addictions (37 cases). It seems reasonable to suggest that this could at least be partially attributable to the prohibitive cost of gambling. However the abuse of alcohol was the next most popular category (13 cases) No conclusive information was provided for some subjects (5 cases) A minority of people had two drug problems or uncommon drug problems in addition to gambling, such as; Alcohol and marijuana combined (2 cases), Alcohol and Amphetamines combined (1 case) Heroin and marijuana combined (1 case) and heroin (2 cases) .

Life Crisis

The majority of cases did not indicate that the subjects suffered any traumatic event in their lives (35 cases) of these many of the reports indicated that the subject had experienced a "normal " or "happy" or "uneventful" child upbringing. However, of the cases that did mention some form of trauma there was a broad spectrum, for instance; domestic violence (5 cases), war (4 cases) sexual assault (3 cases) One person felt responsible for shooting his cousin in an accident, whilst another found her friend after she had committed suicide by hanging. No information was provided in 5 cases.

Diagnosis

This category was two folded. Either the subject went to gamblers anonymous or their psychologist referred to them as having a particular disturbance that could include a pathological gambling problem. The majority of cases did not point to any form of diagnosis (20 cases). However gamblers variously defined comprised the next largest number (18 cases). Depression was also relevant (16 cases) however it is unclear that they were depressed before being apprehended or as a consequence of being apprehended. Post traumatic stress, Obsessive compulsive disorder, and general personality disorders and no information of a disorder all occurred in 2 cases.

Type of gambling

This issue is difficult to state with any kind of certainty. This is because cases would often state words to the effect of 'the subject spent his/her money at the casino, pub or club.' Generally, all variety of gambling products besides scratchies are available at these venues. As such, an accurate picture of the people's gambling behaviour is difficult to ascertain. That said however, the possibility of pokies being available was evident in the majority of instances (38 cases). This would mean that the subject admitted to spending money on pokies outright, or that they frequented venues where pokies were present and they did not indicate that they did not play the pokies. In comparison a number of subjects did not play pokies, here reference is made to them making bets with bookies, the TAB or going to racing events (16 cases). No information was present in 9 cases.

Amount of loss

This varied widely from \$40.00 to \$425,000.00. The average amount lost per subject was \$67,019.00 with a grand total loss of \$2,794,672.00. 1 case did not specify the amount of loss whilst another was not included in the tally, because it was just noted that the subject had to sell his home to finance debts.

Criminal History

More than half of the subjects had a criminal history (32 cases) however even minor or old offences would be included in this tally. No information as to the subjects history was also a factor (5 cases), whilst no prior criminal history was relevant in the second largest amount of subjects (26 cases).

Sentence

There was a broad range of sentencing options utilised by the courts. A 4 year minimum term was the top of the scale (1 case) whilst good behaviour bonds can be portrayed as the most lenient (10 cases). Most subjects received a prison term of between 6 months and 1 year (13 cases) whilst prison for between 2.5 years and 3 years was also prevalent (7 cases). Periodic detention was relatively well utilised (7 cases). Community service orders were occasionally used (4 cases), and home detention was rarely used (1 case).

Other points of relevance

Loan sharks were involved in a minority of instances. with their accompanying threats of violence (4 cases). Woeful internal security arrangements were in place in a small number of cases also (5 cases). In one case, the subject was able to pay himself, without any oversight mechanism. In another case the subject worked at a bank responsible for stocking the automatic teller, that was only ever balanced weekly. In another example, a

subject was able to steal from her employer to the value of over \$400,000.00 over several years because of ineffective auditing.

One person considered himself to be a professional gambler, whilst another admitted to stealing winning and then losing over \$100,000.00 in one day of betting. Another gambler had debts of over \$400,000.00.

The cases

Subject 1 committed an act of armed robbery from a "video ezy" in suburban Sydney.⁵⁴

The subject was a 29 year old male Anglo Australian male at the time of the offence.

According to the pre sentence report and the police record of interview the subject had a long association with alcohol and amphetamines. This point is made as indicated on the defendants pre sentence report where he had admitted himself into Odyssey House (a rehabilitation centre) in order to detoxify his body from these drugs. In terms of environmental factors, The pre sentence report notes that: *"From separate discussions with the offender and his mother it appears that the offender has suffered from varying degrees of depression, social isolation and alcohol and drug addiction for the majority of his adult life."*

Accordingly it seems reasonable to suggest that the subject became addicted to gambling in line with his other addictive behaviour. Hence the gambling addiction appeared to be combined with his other addictions, as the subject admitted in his record of interview that he was going to spend the proceeds of his crime on gambling and alcohol. According to the pre sentence report the subject suffered from a depressive illness that was not diagnosed until some 9 months prior to the pre sentence report being compiled. The

F⁵⁴ GRN 96-21-3044/28

subject has had two relationships, the first a marriage that lasted for "some months" and resulted in two children, but was abandoned as a consequence of his "threatening behaviour whilst his later de facto relationship also ended for the same reasons. Finally the offender is described as having left school at 16 after obtaining his school certificate; he had gained employment for some 5 or so years in various physical labour capacities. He was sentenced to a minimum of 2 years imprisonment.

Subject 2 defrauded the NSW Office of the Protective Commissioner where he worked by utilising his knowledge of procedures in order to create a fictitious person as a beneficiary of one of the deceased clients.⁵⁵ His addiction to both alcohol and gambling has been with the offender since his teenage years. The pre-sentence report states that his relatives describe him as a "chronic alcoholic" and a gambler. Since the age of 16 the offender has gambled and has sometimes used his entire salary for that purpose. Whilst his alcohol addiction began at 15 and can be described as a substantial cause of relationship breakdown and employment loss. The pre sentence report also notes that the offender's mother was also an alcoholic. **Subject 18**

The subject was convicted of one count of obtaining a financial advantage by deception along with some residual charges.⁵⁶ Aged 46 at the time of the offence he was employed as the Deceased Estates Officer for the NSW Protective Commissioner. Through a complex fraud arrangement involving false bank accounts, colour photocopies of Solicitors letterheads he was able to get the entire estate of a deceased person to the value of \$94,324.00. Prior to the cheque being cleared, the Office of the Protective

⁵⁵ GPN 97-11-0081

⁵⁶ GPN 97-11-0081

commissioner was tipped off and the subject was confronted. After making admissions he fled to Queensland only to return soon after and surrender to the police making full admissions.

The pre sentence report indicates that he came from a family alcohol problems which he then continued from the age of 14. In addition, the report notes that the subject "has been gambling since he was 16 years of age, and has sometimes, in the past, used his whole salary gambling". Educated until year 11, then finding employment. The psychologist report states that the subject started taking small amounts from trust accounts in order to pay bills and continue his gambling and drinking. The subject admitted gambling from the age of 17 and he regards himself as a compulsive gambler as he would gamble as much money as he had available to him. He regularly betted on the horses, trots or greyhounds, but was not interested in poker machines or Casino's. The psychologist concluded that the subject's personality profile indicated he was antisocial, passive aggressive and narcissitic with a grandiose and ego centric self image. With a history of drink driving offences the subject was sentenced to a 3 year sentence, with a minimum of 18 months.

Subject 3 was a 47 year old supervisor for a national concrete manufacturer.⁵⁷ Over a four year period, the offender sold pallets of concrete to third parties and kept the money from the sales. The company estimated its loss to be in the order of \$70,000.00. In the pre-sentence report the offender stated that he is able to consume a carton of stubbies in one night "easily" and that "in his own way" he had a drinking problem. In addition to this

⁵⁷ GPN 95-21-0405

confusing approach the offender denied that he had a gambling problem but at the same time asserted that he had spent all of his stolen takings on the pokies and the TAB. The offender had a childhood of mixed fortune, his mother was described as a chronic alcoholic sometimes going on four week drinking binges, whilst his father was violent and left the family when the offender was 7 years of age. He was sentenced to two years by way of periodic detention.

Subject 4 was a senior employee of a large electrical retail shop in Sydney charged with 1 count of larceny as a servant with a further 26 counts taken into account.⁵⁸ Holding the position of duty manager the offender was able to generate false refunds for computer equipment and steal these amounts. Over several months the offender stole over \$15,000.00 using this method of which he gambled on pokie machines at nearby clubs and hotels. Aged 29 at the time of the offences, the subject lived with his mother in the family home. In terms of addiction, the offender, stated that 'whenever he gambled at the clubs he would have up to six or seven beers a day. Whilst when not gambling he would only have two beers. Accordingly, both addictions seemed to be relied upon together. The offender has also attended both alcoholics' anonymous and individual counselling for his gambling addiction. With his no prior offences taken into account, the offender was sentenced to six months home detention with an additional 12 months of parole supervision.

⁵⁸ GPN 98-22-0093

Subject 5 is a female aged 54 years at the time of the offence.⁵⁹ She was convicted of Larceny as a Clerk for stealing monies from her employer (a doctors surgery) to the value of 425,277.00 over a ten year period. This was possible since the medical practice did not utilise auditing methods and there was some confusion when electronic records replaced a manual financial recording system.

The subject had an alcohol dependency in addition to a history of depression. A psychiatric report indicated that she had used Sera pax and Prozac in order to combat her mental problems. She also suffered from postnatal depression. Her mother was also noted as having an alcohol dependency, whilst her father required a laminectomy (extremely serious spinal surgery) which required the subject to seek full time employment. As a consequence, she was only educated until 6th class. Her alcohol dependency resulted in her drinking by her own admissions 2-3 casks of wine per week

The subject was interviewed by as practising psychiatrist. In this report the doctor notes the subject's gambling addiction agreed with a diagnosis of "Pathological Gambling" as outlined by the American Psychiatric Associations definition.⁶⁰ In order to be considered in this category, a subject must answer positively to five out of ten specific questions, concerned with gambling addiction. The subject exceeded this threshold by is answering eight questions.

Her thefts started out as being relatively minor stealing \$50.00 per week, whilst prior to her arrest, she admitted stealing \$1000-\$1500.00 per week. All of her gambling occurred at local clubs around her region and all included pokie machines. The subject was sentenced to a minimum of 1 year with two and a half years parole.

⁵⁹ GPN 98-71-0012/85

⁶⁰ As outlined in the "DSM-IV"

Subject 6 was a 50 year old male that stole \$ 9,402.90 from the hotel where he worked as a bar tender.⁶¹ He attended the hotel where he worked on his day off and asked for the office keys on the pretence of looking for a suit jacket that he said was inadvertently left at the hotel overnight. Whilst alone in the hotel office he used the keys to open the safe and remove the contents. The offender has a considerable criminal record and problems with gambling in the past. The defendant admitted to spending his takings by: "just drinking of a day and night, [and] pushing the money through the poker machines" The offender cited his repeated and ongoing sexual, emotional and physical abuse that he received in a boys correctional centre as a substantial cause of his current disposition. The father of the offender died when he was two years of age, whilst he appears to have been left by his mother in a boarding home since the age of 15. The offender admitted that he had spent the last twenty three and a half years out of thirty, in prison. He was diagnosed as having chronic post-traumatic stress disorder and a permanent personality dysfunction. The offender has also attempted suicide on numerous occasions. He was sentenced to two years minimum for this offence in addition to alcohol and gambling counselling.

Whilst

Subject 7 stole \$80,434.20 by working at a suburban supermarket as a cashier.⁶² Her thefts were committed by her falsifying claims for refunds by bogus customers. She was

⁶¹ GPN 97-11-1015

⁶² GPN 95-11-0735

caught on video surveillance after one of her refunds was for an amount exceeding the most expensive items in the shop. The offender wrote to the judge and described herself as having started smoking at 13 and drinking at 16. She was diagnosed with a compulsive disorder that resulted in her excessively cleaning, time keeping and retaining extremely tight schedules in her daily existence. For instance she would allocate herself 30 minutes between the period of getting home and getting her evening meal ready. She also describes having a trauma in her life when she discovered at the age of 18 that she mistakenly believed that her stepfather was her biological father. The gambling appeared to start as simply betting \$10 occasional at the local hotel, this then progressed to \$20 and then seemed to get out of control after a big win. Prior to her thefts the offender was spending all of her rent and other survival money on the pokies. She was sentenced to 2 and half years periodic detention and she had started to attend gamblers anonymous.

Subject 8 committed an armed robbery upon a supermarket gaining around \$1900.00 whilst he was intoxicated.⁶³ The offender stated that he stole the money as he was being physically assaulted by loan sharks that had demanded \$5000.00 immediately. The offender then stated that he gambled all of his takings with a view to repaying the loan sharks. The subject saw gambling as a realistic means to create wealth. Alcohol, crime, violence and gambling have all played an important part in the offender's life. The offender started gambling on horse races in his teenage years and then frequented illegal casinos where he met the loan sharks. Aged 39 at the time of sentence, the offender has been subject to a childhood where his father would frequently beat his mother. His

⁶³ GPN 96-21-1176

mother died whilst he was in gaol; an issue that the offender seems to feel continuing guilt over. He also mentioned that he was sexually assaulted as a child in a seven year period. Perhaps not surprisingly, the offender was diagnosed as having "Post Traumatic Stress Disorder" and "strong Borderline Personality Disorder" together with "phobias and symptoms of panic disorder." The offender also attempted suicide by overdosing on Valium. He was sentenced to a minimum term of four years imprisonment.

Subject 9 was involved in the systematic defrauding of customers that gave him their money to invest in secured funds.⁶⁴ Instead, the monies were placed in high risk funds and the money was lost. Aged 26 at the beginning of the offences, the subject had a gambling history that started in his teens. It seems that his betting behaviour increased with the size of the odds available. Hence Greyhounds, Horses and then the stock market were used in a progressive fashion. His pre-sentence report described him as an enigma with reference to his sporting and business prowess contrasted with twice weekly binge drinking that had begun since the age of 18 and his serious fraud offences. He was diagnosed by one psychologist as having a Dependant Personality Disorder. In essence this condition is characterised by a dependence on attention from others and success. The offender attempted suicide shortly after his activities were discovered. The offender also stated that he was adopted and had suffered sexual abuse as a child but at the same time did not draw on these events as explaining his behaviour. He was sentenced to a minimum term of 12 months imprisonment.

⁶⁴ GPN 95-31-0293