The International Journal of Indian Psychology ISSN 2348-5396 (e) | ISSN: 2349-3429 (p) Volume 2, Issue 4, DIP: B00328V2I42015 http://www.ijip.in | July – September, 2015



# Psychoastrotherapeutic Effect on Pathological Gamblers and their Follow-up

Vandana Sharma<sup>1</sup>, M.G. Sharma<sup>2</sup>

# **ABSTRACT**

The present study examines the effectiveness of psych-astrotherapy on pathological gamblers.75-Pre-treated and 75Post-treated pathological gamblers were evaluated at S. I. Mental and Physical Health Society (SIMPHS) Varanasi district in India. These groups were matched on age (range 19 to 44years with a mean age of 29.6 years and they had gambled for an average of 12.5 years with a mean length of uncontrollable gambling of 9.7 years). Indian adaptation of T.A.T. (Seven cards) 1, 3B, 4, 6BM, 7BM, 13MF was used to ascertain personality characteristics on the four selected dimensions viz: need, press, interpersonal relations and outcome. Mean scores obtained on different variables were analyzed using t-test of significance. Results indicated that the characteristics associated with Post- treated pathological gamblers were cognizance, dominance, autonomy, achievement, counteraction, affiliation, sex capacity, interpersonal relations and outcome whereas the characteristics associated with Pre-treated pathological gamblers were aggression, rejection, passivity, acquisition, and press.

**Keywords:** Psychoastrotherapeutic, Pathological Gamblers

Pathological gambling was recognized as a psychiatric disorder in the DSM-III, but the criteria were significantly reworked based on large scale studies and statistical methods for the DSM-IV. As defined by American Psychiatric Association, Pathological gambling is an impulse control disorder that is a chronic and progressive mental sickness. In February, the American Psychiatric Society made headlines when it announced proposed changes to its encyclopedia of mental illness, the Diagnostic and Statistical Manual of Mental Disorders (DSM). Though the new version of the manual, DSM-V, will not be published until 2013, the suggested revisions already have incited vigorous debate about a wide range of issues, including gambling.

<sup>&</sup>lt;sup>1</sup>Ph.D. Chief Psychologist, S. I. Mental and Physical Health Society (SIMPHS), C33/204-1B-1, Chandua Chhittupur, Varanasi

<sup>&</sup>lt;sup>2</sup>Ph.D. Assistant Prof, Dept. of Psychology, Sri Agrasen Kanya P.G College, Parmanandpur, Varanasi. And Hon. Director S.I. Mental and Physical Health Society (SIMPHS) C.33/204-1B-1, Chandua Chhittupur, Varanasi, India

<sup>© 2015</sup> I V Sharma, M Sharma; licensee IJIP. This is an Open Access Research distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any Medium, provided the original work is properly cited.

The DSM-arguably one of a clinician's most important tools-dictates the diagnosis and treatment of thousands of mental illnesses, from adjustment disorders to sleep disorders. Changes to the manual influence not only the field of psychiatry; they also have profound implications for the academic, pharmaceutical and legal communities as well. There are some studies which is related to the pathological gambling Leary and Dickerson (1984) shows that exposure to gambling cues did not alter base line arousal in their high or low frequency poker machine players. Playing was associated with increased arousal in both groups, significantly so for the high frequency players. Their mean heart rate increase of 13.5 beats / minute was lower than that observed by Anderson and Brown (1984) but was most likely accounted for by differences in stimulated versus actual gambling conditions and average bet siz. Increased subjective ratings of anxiety as measured by a shorted from of the Speilberger's State-anxiety Inventory paralleled heart rate increases. Custer and Custer (1970) surveyed 150 Gamblers Anonymous members attending a conference and found only five percent had reported early, premorbid sociopath behaviors. Sharma and Sharma (2001) also have disclosed in an International conference after the long experience of the treatment of pathological gamblers that behavior therapy is very effective in comparison to the psychoanalytic therapy. Mc Cormic Russo, Ramirez, and Taber (1984) reported 76 percent of a sample of 50 gamblers seeking treatment to meet Research Diagnostic Criteria for major depressive disorder. Fourteen of their subjects reported that the depression commence prior to the emergence of their compulsive gambling. Ferioli and Cimenero (1980) describe similar characteristics in their gamblers: depression, low self esteem, lack of assertiveness, inability to handle stress and the inability to identify or express feelings. Sharma and Sharma (2008) used Eysenck Personality Questionnaire and revealed that treated pathological gamblers had significantly higher on extraversion and lower on neuroticism, psychoticism and lie, and group therapy is more effective techniques for the treatment of pathological gamblers as compared to the individual counseling (Sharma and Sharma, 2008). Some other recent study of Sharma and Sharma (2009) used meditation and psychotherapy on pathological gamblers and disclosed that these two techniques are more useful for the treatment point of view, and vipassana meditation is also one of the most important techniques for the treatment of pathological gamblers (Sharma and Sharma 2009)

# **PSYCHOASTROTHERAY:**

Combination of psychotherapy and astrotherapy is known as psychoastrotherapy. Psychoastrotherapy is a new technique which has been developed for the treatment of mental patients. The position of planets in horoscope plays an important role to the origin of mental sickness. So, knowledge of astrology is must for any clinical psychologist besides psychotherapy. At present era science has proved that planets are directly/indirectly effect on human's body and mind. After the analysis of horoscope and the position of planets appropriate suitable stones and Indian Vedic Mantra as well as psychotherapy were used for the treatment of mental patients (Sharma and Sharma, 2013)

There is a number of therapeutic techniques are available for the treatments of pathological gamblers. Psychodynamic psychotherapy attempts to uncover any underlying psychological factor that trigger the gambling. For people who can gamble to escape, such as those who are depressed, this approach may

be successful. Treating any substance abuse problems that may exist with the pathological gambling can also be helpful. Other types of treatments involve behavioral techniques used to teach relaxation and avoidance of stimuli associated with gambling. Aversion therapy appears to be successful in treating pathological gambling disorder in highly motivated patients with some insight into the problems, but is not helpful for patients who are less educated or resistant to behavioral methods or treatments. Psychotherapy is the treatment, by psychological means of problems of an emotional nature in when a trained person deliberately establishes a professional relationship with the patient with the object of (1) removing modifying or retarding existing symptoms, (2) mediating disturbed patterns of Behaviour and (3) promoting positive personality growth and development. Psycho-astrotherapy is also one of the effective and new Indian technique which is developed by Indian psychologist (Sharma and Sharma, 2013).

Psychotherapy is procedures in which persons with mental disorder interact with a trained psychotherapist who helps them change certain behaviors, thoughts or emotions so that they feel and function better. Group therapy is also a type of procedure in which several people discuss their problems with one another under the guidance or leadership of a trained therapist. So, we have decided to see the effectiveness of counseling and group psychotherapy on pathological gamblers which was compared on the Projective Test by Chowdhury (1967).

#### MATERIALS AND METHOD:

This scientific study was consisted at S.I. Mental and Physical Health Society (SIMPHS), Varanasi, India. The sample compared of 75 Pre-treated and 75 Post-treated pathological gamblers between the ages ranges of 19 to 44 years with a mean age of 29.6 years. Both groups were matched on socioeconomic status. All the subjects had gambled for several years and were gambling over half their weekly income. After counseling group psychotherapy was provided by a group of three experts' clinical psychologists of the study to post-treated group. Time allotted to each group session about 60-90 minutes at a particular date, and place for six months. In 1<sup>st</sup> month-4 times /week, 2<sup>nd</sup> months-3 times/week,3<sup>rd</sup> months-2 times/week,4<sup>th</sup> months-1 time/week, 5<sup>th</sup> months-1 time/10 days and 6<sup>th</sup> months-1 time/15 days.

#### Tools:

Thematic Apperception Test (Chowdhury, 1967) was administered to the ascertain personality characteristics of Pre-treated and Post-treated pathological gamblers

# Statistical Analysis:

The obtained data of pre-treated and post-treated pathological gamblers on these two tests were scored and analyzed using Mean, S.D. and 't'-test.

.

# **RESULTS AND DISCUSSION:**

An attempt was made to compare mean scores of Pre-treated and Post-treated pathological gamblers on need, press, interpersonal relations and outcome variables using 't'-test of significance. Results of such comparison are given in table no.1 and 2 respectively.

Table 1 Comparison of Pre-treated and Post -treated Pathological Gamblers on Need Variable.

Needs	Pre-treated Pathological Gamblers		Post-treated Pathological Gamblers		't'-value	df.	p.
	M	SD	M	SD			
Cognizance	3.34	2.01	4.09	1.66	2.58	148	.01
Aggression	9.3 5	2.00	7.69	2.04	5.18	148	.01
Dominance	9.58	1.65	11.04	1.82	5.03	148	.01
Rejection	3.78	1.81	2.97	1.87	2.79	148	.01
Autonomy	4.43	1.99	6.12	1.97	2.25	148	.01
Achievement	8.23	1.87	10.76	1.96	7.90	148	.01
Passivity	2.01	1.00	1.87	1.01	0.93	148	N.S
Harm-avoidance	1.09	1.02	2.36	1.06	7.87	148	.01
Counteraction	2.03	0.97	3.32	1.17	7.58	148	.01
Affiliation	3.99	0.98	4.98	1.34	5.50	148	.01
Acquisition	3.29	1.00	2.86	0.99	3.07	148	.01
Sex	5.97	1.99	7.35	1.21	5.30	148	.01

It is depicts from the table no.1 that the pre-treated and post-treated pathological gamblers on need variables found that the two groups differ significantly on cognizance, aggression, dominance, rejection, autonomy, achievement, counteraction, affiliation, acquisition, and sex and post-treated pathological groups having higher mean scores on cognizance, dominance, autonomy, achievement, harm-avoidance, counteraction, affiliation and sex needs of which pre- treated pathological gamblers do have higher mean scores on aggression, rejection, and acquisition. It indicates that post-treated pathological gamblers had better cognizance, dominance in nature, autonomy in behavior they always think about their achievement; counteraction, affiliation, and sex were the main needs. Pre--treated pathological gamblers were more aggressive, rejected from family and society, and have less passivity as capacity is not a good an effective of life. In a study of Sharma and Sharma (2008) revealed that non treated pathological gamblers were aggressive in nature, tough minded and dominating personality. In another recent study of Sharma and Sharma (2009) reported that treated pathological gamblers were associated with dominance, autonomy, achievement, harm-avoidance, counteraction affiliation and sex, and this finding of the study is quite similar to the present study.

With a view to comparing mean scores of Pre- treated and Post- treated pathological gamblers on press, interpersonal relations and outcome variables using 't'-test of significance. Results of such comparison are given in table2.

Table 2 Comparison of Pre-treated and Post-treated Pathological Gamblers on Press, Interpersonal Relations and Outcome Variables.

	Pre-treated		Post-treated				
Variables	Pathological gamblers		Pathological gamblers		't'-value	df.	p.
	M	SD	M	SD			
Press	3.96	1.27	2.31	1.39	7.14	148	.01
Interpersonal relations	2.81	2.01	4.01	1.87	3.52	148	.01
Outcome	1.83	1.09	2.87	1.81	4.00	148	.01

It is obvious from the table no. 2 that the press, interpersonal relations and outcome, the two group's i.e., pre-treated and post-treated pathological gamblers do differ significantly on press, interpersonal relations and outcome variables. The pre-treated pathological gamblers do have higher mean values on press variable and lower on interpersonal relations and outcome variables. This means it is quite fact that interpersonal relations was better and they did like to adjust in social situation. In a study of Sharma and Sharma (2009) used same test., and revealed that characteristics associated with treated pathological gamblers are press and interpersonal relations. This finding of the study is quite similar to the present finding.

Table-3, 18 Months Follow-up of Pathological gamblers

Pathological gamblers	N	Not seen Compulsive symptoms
Treated Pathological gamblers	75	75
Reporting after 1 <sup>st</sup> months	74	74
Reporting after 2 <sup>nd</sup> months	74	72
Reporting after 3 <sup>rd</sup> months	74	73
Reporting after 4 <sup>th</sup> months	72	70
Reporting after 5 <sup>th</sup> months	72	71
Reporting after 6 <sup>th</sup> months	70	70
Reporting after 7 <sup>th</sup> months	71	70

Reporting after 8 <sup>8th</sup> months	69	68
Reporting after 9 <sup>th</sup> months	65	65
Reporting after 10 <sup>th</sup> months	65	63
Reporting after 11 <sup>th</sup> months	63	61
Reporting after 12 <sup>th</sup> months	63	63
Reporting after 13 <sup>th</sup> months	65	63
Reporting after 14 <sup>th</sup> months	65	63
Reporting after 15 <sup>th</sup> months	64	62
Reporting after 16 <sup>th</sup> months	63	62
Reporting after 17 <sup>th</sup> months	62	61
Reporting after 18 <sup>th</sup> months	63	63

Table-3 Month wise follow-up was given in the above table. After 1st month 75 pathological gamblers did not complaints compulsive symptoms out of 75 subjects. After 2<sup>nd</sup> month 74 pathological gamblers were reported at the centre but 74 were not complaints any type of compulsive behaviour which were related to the gambling. After 3<sup>rd</sup> months same number of the subjects was reported and 72 subjects were not reported any type of compulsive symptoms. After 4<sup>th</sup> months 74 pathological gamblers reported and 73 were not feeling any kind of compulsive symptoms. After 5<sup>th</sup> months 72 patients were reported and 70 pathological gamblers were not complaints any type of compulsive symptoms. After 6<sup>th</sup> months 72 pathological gamblers were reported to the centre for follow-up and same subjects were reported not any type of compulsive symptoms. After the 7<sup>th</sup> months of follow-up 70 experimental groups of pathological gamblers were attend to the centre and 70 subjects not complaints any kind of compulsive symptoms. , In 8<sup>th</sup> months 71 pathological gamblers were reported and 70 subjects were not complaints compulsive symptoms. After 9<sup>th</sup> month 69 pathological gamblers were participated follow-up session and 68 were not in compulsive symptoms. In 10th month 65 pathological gamblers were reported at the centre and same numbers of subjects were found compulsive free behaviour. After 11th months 63 numbers of pathological gamblers were not complaints compulsive behaviour out of 65 subjects. After 12<sup>th</sup> months 63 pathological gamblers reported and 63 were not feeling any kind of compulsive symptoms. After the 13<sup>th</sup> months of follow-up 65experimental groups of pathological gamblers were attend to the centre and 63 subjects not complaints any kind of compulsive symptoms. , In 14<sup>th</sup> months 65 pathological gamblers were reported and 63 subjects were not complaints compulsive symptoms. After 15<sup>th</sup> month 64pathological gamblers were participated follow-up session and 62 were not in compulsive symptoms. In 16<sup>th</sup> month 63 pathological gamblers were reported at the centre and same numbers of subjects were

found compulsive free behaviour. After 17<sup>th</sup> months 62 numbers of pathological gamblers were not complaints compulsive behaviour out of 61 subjects. After 18<sup>th</sup> months 63 pathological gamblers reported and 63 were not feeling any kind of compulsive symptoms. So it is clear from this study that psychoastrotherapy and vipassana meditation is more effective technique for the treatment of pathological gamblers. Sharma, Sharma and Upadhyay (2013) reported in a recent study that behaviour therapy, meditation and astrotherapy are more effective techniques for the treatment of pathological gamblers. This result was found after the 7<sup>th</sup> months of follow-up.

# **CONCLUSION:**

The result has shown on need and press that the characteristics associated with post-treated pathological gamblers are cognizance, dominance, autonomy, harm-avoidance, counteraction, affiliation, sex, interpersonal relation and outcome whereas characteristics associated with pre-treated pathological gamblers are aggression, achievement, acquisition and press. So it is clear that psychoastrotherapy technique is just like a panacea for the treatment of pathological gamblers. In other words this technique is more effective for the treatment of pathological gamblers.

# **REFERENCES:**

- Brown, R.I.F. (1984). The investigation of arousal and sensation seeking factors in the explanation of gambling and gambling addictions. Paper presented at the 6th Conference on Gambling and Risk Taking, Atlantic City, New Jersey.
- Chowdhuri, Uma. (1967). Manual of the Indian adaptation of the T.A.T. Published by Janaki Nath Basu, 1 Sanker Ghose Lane, Calcutta -6.
- Custer, R.L. & Custer, L.F. (1978). Characteristics of the recovering compulsive gambler: a survey of 150 members of Gamblers Anonymous. Paper presented at the Fourth Annual Conference on Gambling, Reno, Nevada.
- Ferrioli, M. & Ciminero, A.R. (1981). The treatment of pathological gambling as an addictive behavior, In W.R. Eadington (ed). The Gambling Papers: Proceedings of the Fifth National Conference on Gambling and Risk Taking. Bureau of Business and Economic Research, University of Nevada, Reno.
- Frank, J. Fahrenkopf, J. (2013). Gambling Disorders: A New Understanding, a New Definition. Global Gaming Business.
- Leary, K. & Dickerson, M.G. (1984). Levels of arousal in high and low frequency gamblers. Unpublished Manuscript.
- Mc Cormick, R.A., Russo, A.M., Ramirez, L.F. & Taber, J.I. (1984). Affective-disorders among pathological gamblers seeking treatment. American Journal of Psychiatry, 141, 215-218.
- Sharma, M.G. (2001). Treatment of pathological gamblers with behavior therapy, Proceedings of the International Conference on World Optometrists, IMS, B.H.U.
- Sharma, M. G. & Sharma, V. (2008). Treatment of pathological gamblers with counseling and group therapy compared on the MMHSI and TDAS, Psycho-Lingua. 38,152-156.

- Sharma, M.G. & Sharma, V. (2008). Pathological gamblers and psychotherapy compared on the E.P.Q. Indian Journal of Applied Psychology. 45, 31 - 34.
- Sharma, M.G. & Sharma, V. (2009). Effect of psychotherapy and vipassana meditation on pathological gamblers, S.I.S. Journal of Projective Psychology & Mental Health. 16,147-151.
- Sharma, M.G. & Sharma, V. (2009). The effect of meditation and psychotherapy on pathological gamblers: A comparative study, Journal of Indian Psychology, .27 (In press).
- Sharma, M.G. & Sharma, V. (2013). Psycho-astrotherapy and vipassna meditation for pathological gambling. Lap-Lambert Academic Publishing House, Germany.
- Sharma, M.G. & Sharma, V. (2014). Psycho-astrotherapy and 1Year Follow-up of Pathological Gamblers. International Journal of Psychology and Education. ISSN: 2321-8606. Vol.1 Issue. 12 (2014) pp: 109-117.