

COMPLETED SUICIDE AND SUICIDAL BEHAVIOUR AMONG PEOPLE WITH HEAVY GAMBLING BEHAVIOURS

Paul W.C. Wong

The University of Hong Kong, Hong Kong S.A.R. (China)

Internationally, the average rates of past year problem gambling range between 0.5% and 7.6% with an average of 2.3%; the lowest rates are observed in Europe and the highest rates in Asia such as Macao, Singapore and Hong Kong [1-3]. The most tragic outcomes of heavy gambling are completed suicide. There are limited studies about suicide and gambling. Two Coroner's Court record-based descriptive studies on suicides with gambling behaviour from Australia [4] and Canada [5] suggested that gambling was a crucial risk factor for suicide. Two studies from the United States examined suicide rates in counties with [6] and without [7] gaming facilities yielded mixed results. Hence, the link between gambling and suicide is not or yet to be established. However, gambling and suicide has been found to be closely related in Hong Kong.

This presentation will include sharing of findings of three studies about suicide and gambling conducted in Hong Kong by the presenter and his colleagues. The three studies include a psychological autopsy study of people with pathological gambling disorder [8], a retrospective coroner's court files review study [9], and an analysis of 3,686 treatment seeking gamblers and their suicidal and familicidal ideation [10]. Suicide is a global public health challenge. Like other addictions, families of those addicted suffer. The issue about gambling and violent death is largely under-recognized, poorly understood, and not addressed in an aggressive way [10]. More information is needed to formulate preventive and crisis intervention approaches to minimize the harm caused by rapid expansion of both legal and illegal offshore gambling availability in this digital era. If the social costs associated with gambling keeps being trivialized in front of gambling revenues, more money, health, and even lives will be lost due to severe gambling.