This is the Accepted Version of a paper published in the Journal of Health Psychology:


http://dx.doi.org/10.1177/1359105314566611
Problem Gambling and Help Seeking among Chinese International Students: Narratives of Place Identity Transformation

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Abstract

This article uses examples of problem gambling and help seeking among Chinese international students (CIS) in New Zealand to demonstrate place identity transformation. Two-wave narrative interviews were conducted with 15 CIS. Place identity among participants is shown to be a process that features the transformation of participants’ identity. While the casinos in which the CIS gambled gave rise to negative place identities, positive place identities facilitated the participants to change their problematic gambling. Through the investigation of place identity transformation, this paper promotes a strength-based, non-labelling approach to intervention for people who are concerned about their gambling behaviours.

Key words: Place identity, Asian, young adults, problem gambling, narrative

Introduction

Health psychologists have engaged in ongoing debates to extend understandings of place beyond the common-sense level and knowledge of places’ impact on people’s wellbeing and health (Huynh et al., 2013). Place has been explored within physical, social, relational and cultural contexts in which the bond with places and individual experiences are embedded (Lengen and Kistemann, 2012). As Harvey (1996) claimed, place is a social construct. Place is socially and culturally constructed because the ways in which people experience place and the meaning people ascribe to it come out of a social and cultural milieu (Li, 2013). Place is therefore relevant for health and health care because it constitutes and contains social and cultural relations and physical resources (Cummins et al., 2007). As place is socially and culturally constructed, contradictions are inherent in people’s feelings and perceptions of place (Li et al., 2010a). For example, a casino is a creational place for many Chinese international students (CIS). For these students a casino is a place to play games with their fellow Chinese. For other CIS a casino is a place associated with problems caused by their gambling, such as academic failure and the inability to stop gambling at will (Li et al., 2014b). Consequently, a
casino can bring about different meanings and perceptions for gamblers and, in this case, Chinese international students.

Informed by the notions that everything researched is emplaced (Gieryn, 2000) and that gambling is a place-based activity, we contend that gambling is a significantly emplaced construct that connects the gambler to others in specific locales such as at a casino. Conceptualising gambling as an emplaced construct provides a window into identity, social relationships and the meanings assigned to gambling places. To investigate the significance of physical settings and their properties in terms of identity, Proshansky and colleagues (1983) developed the concept of place identity. Place identity is defined as a substructure of the self that consists of cognitions about the physical world in which the individual lives, including memories, ideas, feelings, attitudes, values, and meanings attributed to behaviour and experience. At the core of such physical environment-based cognitions is the environmental past of the person. This is a past that consists of places, spaces and their properties. These properties have served instrumentally in the satisfaction of the person’s biological, psychological, social and cultural needs.

From a behavioural perspective, Sarbin (1983) criticised Proshansky et al. (1983) for failing to make use of an action framework to conceptualise place identity. For Sarbin, place identity is construed from activities that are directed toward locating oneself in the geographical environment. In light of Sarbin’s theory, Korpela (1989) defined place identity as a psychological structure that arises out of individuals’ attempts to regulate their environments. It is through personal regulation of a place that people develop the sense of belonging and purpose that gives meaning to their life. Such a place engenders personal significance in people’s lives and is necessary for the maintenance of identity and emotional wellbeing.

The tendency to emphasise the individualistic dimensions of place identity and regard it as a psychological given is a weakness of the above theories of place identity (Li, 2013). This tendency obscures the interactive nature of the relations among the person, identity and environmental meaning (Dixon and Durrheim, 2000). People are not simply “placed” in a location or an environment. To emphasise the individual’s capacity to interact with the environment, Cuba and Hummon (1993) argued that place identity is an interpretation of self
that uses environmental meaning to symbolise or situate identity. This understanding of place identity suggests that a place is where people experience identity continuity; where they can express the self; where they can have interaction with others or participate in activities; and where they receive information about how to behave and interact with the place (Alexander, 2008; Lavin and Agatstein, 1984).

Place identity is a social construct which grows out of direct experience with the physical environment (Lewicka, 2008). It is not a static state but a growing and changing process that responds to a changing physical and social world. Such an understanding of place identity provides a framework in which identity is constructed, maintained, and transformed (Cuba and Hummon, 1993), taking shape over time through social interactions that are associated with particular locations. In this sense, place identity is compatible with the proposition that human selves are much more than fixed personality-based entities residing within individuals (Hodgetts et al., 2010). The transformation of place identity reflects Strauss’ (1969) theoretical analysis of identity change. Strauss contended that “the I, as subject, in reviewing its Mes continually moves into a partially uncharted future; thus new Is and Mes necessarily emerge” (p. 124). A sense of identity thus is never gained nor maintained once and for all; it is constantly changed, lost and regained.

Research has suggested that there are a number of ways in which place identity may be linked to health and well-being through narrative (Tucker and Smith, 2014). Firstly, increasing attention paid to narrative perspectives in health psychology has heightened interest in identity development because identity is, in essence, stories (Bohlmeijera et al., 2014). These stories are often related to places in which people live or experience. Secondly, narrative research suggests that positive place identity has a strong association with mental wellbeing and can act as a buffer against stress (Curtis, 2010). In the analysis of migrant narratives, Li et al. (2010a) found that place identity provided migrants with a sense of comfort and security, both of which are crucial to well-being. Thirdly, place identity is associated with discourses and practices that shape health experiences and behaviour (Bolam et al., 2006; Dixon and Durrheim, 2000). Health psychologists have argued that human beings live in a storied world and that they interpret the actions of others and themselves through the stories they exchange (Murray, 2003; Tse et al. in press). Through narrative, people not only shape the place and their health, but are
also shaped by the place and their health. Narrative construction thus is a core human means of making sense of and giving meaning to place and people’s health (Murray, 2000). For example, the process of constructing a narrative enables gamblers to give meaning to the constant changes (e.g., the change of place identity) in their lives, to connect the past to the present, and to claim new place identities (Li, 2013; Murray, 2000).

Despite the relevance of place identity to narrative research, place dynamics have not been high on the research agenda within the discipline (Bolam et al., 2006; Dixon and Durrheim, 2000; Hodgetts et al., 2007), particularly in the area of problem gambling. Although narrative has become an established approach in health research (Sools, 2013), the majority of psychological research on problem gambling employs a positivism paradigm, which is in keeping with the epidemiological methods that dominate the field. Little attention is paid to the dynamics between the gamblers, places and narratives related to problem gambling and help seeking. This arguably reflects a lack of attention to the spatial context of gambling and help seeking, both of which are spatial, place-based activities. It also reflects the dominance of de-contextualised social-cognitive paradigms within health psychology (Bolam et al., 2006) and gambling research. The conventional approach is being questioned now that a person-in-context perspective recognising individual experience and subjectivity (Bolam et al., 2006; Marks, 2002, 2008) has evolved.

To advance understandings of place identity, problem gambling, and help seeking among CIS living in New Zealand, the present theory-driven research offers insights into the narratives related to spatial aspects of problem gamblers’ health. Our focus is on how negative place identities of the problem gamblers transform into positive place identities during the process of seeking help. This investigation will be conducted by employing narrative analysis to reinterpret the data collected by the first author for her Masters research (for details of the research, see Li, 2007). One of the theoretical assumptions of place identity is that place identity is constructed through personal attachment to geographically locatable places (Li, 2013; Proshansky et al., 1983). Much of the literature on place identity therefore emphasises the positive meanings that people attach to place, and how these meanings contribute to sustaining health and wellbeing (Lengen and Kistemann, 2012; Lewicka, 2008). Researchers have also argued that some relationships to place may not be positive (Li et al., 2014a; Manzo, 2005).
For some people, place may not be a sanctuary, but a space of struggle or isolation (Manzo, 2005; Tucker and Smith, 2014), as we will investigate in our analysis. To address how place identities of the CIS with gambling related problems are shaped by the gambling venue, this article first explores CIS’ identities and how they are attached to places where CIS have had negative gambling related experiences such as a casino. The article then considers places in which CIS have had positive experiences in relation to dealing with problem gambling, such as counselling rooms and the wider Chinese community in the host society. As the first empirical exploration of place identity in the convergence of health psychology and gambling research that the authors are aware of, the positive direction of our analysis reflects a strength-based, non-labelling approach. This approach is in contrast to the more traditional deficit-focused position in problem gambling research.

The present research

As narrative research derives from the Western literature model (Gergen and Gergen, 1986), researchers have advocated culturally-sensitive narrative research (Li, 2013). The narrative interviews in the present study promoted the equality of status and emphasised the insider relationship between the researcher and participants. These objectives were achieved by a two-interview series and the use of the Chinese language. The two-interview structure was designed for building rapport and trust with the participants. At the end of the second interview, the participants were asked to comment on the interview method. Overall, the participants appreciated the two-interview structure and storytelling form. For example, they reported, “I knew the research better in the second interview and felt more comfortable to talk about my gambling problems.” “I felt free to talk about something the researcher did not ask.”

Full use of the Chinese language was integral in the research. The interviews were conducted in either Mandarin or Cantonese depending on the participants’ preference. The first author, who is fluent in both languages, conducted all interviews. Participants felt that they could best and most comfortably express their ideas, emotions, beliefs and attitudes using the Chinese language.

Participants
Participants were recruited from Auckland and Hamilton in 2006. Auckland is the largest city in New Zealand. In 2006 it had a population of 1.3 million, at which time Hamilton had a population of 0.3 million (Statistics New Zealand, 2013). Both cities have casinos. Auckland is an urban area with relatively high concentrations of CIS. The city has well-established problem gambling services which cater specifically for Asian communities. Hamilton represents a more typical medium-sized community in New Zealand, with few services specifically for Asians problem gamblers. The participants were all CIS who self-reported gambling-related problems at the time of interview, or had experienced gambling-related problems in the past but had since recovered.

Ten organisations (e.g., Chinese churches, language schools, polytechnics and universities) were approached to recruit potential participants. Only one potential participant emerged from these groups. This reflected a difficulty in recruiting participants or of conducting a gambling study through such public channels. A snow-ballling technique was then employed. The first author emailed the information concerning the study to her personal contacts who were CIS to recruit participants and thereafter asked these initial participants to forward the information to their friends. Fourteen participants were recruited through this means (Li et al, 2014). To ensure participants’ anonymity, pseudonyms are employed in this article.

The sample consisted of five females and 10 males; the average age of the sample was 25.7 (range = 20-41). Eight participants were studying at universities, six in polytechnics, and one participant was studying at a private tertiary educational institution. Their average length of residence in New Zealand was 3.9 years (range = 1-7).

**Material**

The narrative interviews were semi-structured and organised into two sections. The first focused on collecting demographic data (such as age, gender, education, marital status, and length of stay in New Zealand) as well as the participants’ gambling experiences in China and New Zealand. Here there was a focus on where and with whom they gambled. The second section addressed participants’ adjustment after their relocation; the tensions, costs, benefits, and consequences of their gambling; how they had addressed their gambling problems; and the meaning of places related to their gambling experiences.
**Procedures**

Ethical approval was obtained from the Ethics Committee of the School of Psychology at the University of Waikato. Before the main study was undertaken, three pilot interviews were conducted to identify whether the interview questions could be easily understood and were suitable for investigating the gambling experiences and place identity construction of CIS. All participants in the main study took part in two interview sessions (each lasting approximately one and a half hours), with an interval of six months between each. The rationale for the six-month interval was that, while developmental changes were expected to occur, the participants maintained memory of the initial interview (Taplin, 2005).

**Thematic analysis and research rigor**

After the interviews were transcribed preliminary data analysis was carried out in Chinese. Thematic analysis is the most common method of narrative analysis, and the most straightforward and appealing in applied settings (Riessman, 2008). Thematic analysis was thus subsequently utilised to analyse the data. This analysis involved three stages. Firstly, the participants’ accounts from the two interviews were chronologically rearranged, generating 15 chronological narratives, one for each participant. Secondly, two tools—metaphors and places—were used to identify analytical themes. Working with the narratives, the authors noticed that the participants often employed metaphors to help them think about their lives. The metaphors (e.g., prisoner of gambling) were used to map out analytical themes. Meaningful places (e.g., casino, counselling room, university, church) in the narratives were also utilised to develop analytical themes that demonstrated participant place identity. Thirdly, particular accounts were selected based on their ability to exemplify the themes and general patterns. According to Riessman (2008), thematic analysis is based on the assumption that accounts of individuals in a group resemble each other. Correspondingly, the selected accounts were organised around the same theme. Only the selected account were translated into English. Both of the authors who are bilingual checked the accuracy of the translation.

In this study, triangulation was used to add rigor, breadth, complexity, and depth to the inquiry in order to enhance the credibility and persuasiveness of the analysis (Flick, 2006). Three types of triangulation were utilised: data triangulation, investigator triangulation and theory
triangulation. The data were collected in different locations and settings on different dates. Further, two investigators from different disciplines (e.g., psychology and population health) were involved in the analysis process. The authors worked as a team to interpret the data in an attempt to minimise any bias resulting from the perspective of a single researcher only.

**Findings and analysis**

Researchers have identified many factors that initially motivate people to gamble, including seeking enjoyment, entertainment, excitement, and fun; winning money; socializing; and escaping from stress (Raylu and Oei, 2004). The CIS in this study, however, expressed additional reasons for their gambling, namely minimal parental monitoring; casino tours offered by their friends; satisfying a fantasy and positive gambling expectancy triggered by gambling movies; and life transition difficulties (Li et al., 2014b). These factors are closely related to the participants’ transition to a new place. The data showed that the participants preferred to gamble in casinos. The following section analyses the participants’ place identities associated with their excessive gambling (which happened mostly in casinos).

**CIS’ perceived place identities when gambling excessively in casinos**

*A prisoner of gambling*

At the time participants began to experience gambling problems, they had already spent a significant amount of time gambling on a regular basis. Participants in the study generally gambled every day. The duration of these sessions ranged from five to 16 hours. On average participants spent approximately 40 hours a week gambling. This is significant because it has been suggested that spending excessive time gambling is indicative of a shift from social to addictive gambling (Clarke et al., 2006). In that regard, the casino became a place which was attractive to these CIS. They experienced the shift from social to addictive gambling and regarded themselves as “prisoners of gambling.” This was evident when Xiong Mei (female, 23 years old) reflected on her gambling experiences.
At some point, my whole life was spent in the casino, which was full of Chinese gamblers. I only had very limited contact with local people. I felt that the casino was a “gambling prison” where I did not have contact with others except for gamblers.

The metaphor used by Xiong Mei symbolises her place identity as a prisoner of gambling rather than a student. Such prison imagery can be contrasted with the sense of “new-found freedom” also mentioned by CIS when they talked about their initial feelings about studying in New Zealand. This sense of freedom related primarily to the lack of parental monitoring. For example, Xiao Lian (female, 23 years old) described herself as “a young bird that had been set free from the cage [of strict parental monitoring] and is now flying free in a wild world.” Identifying as a prisoner of gambling indicates that gambling had severely limited Xiong Mei’s time and ability to communicate with local residents, as well as her participation in local social activities. The importance of establishing social connections with local people should not be discounted, because adjusting to life in a new country can be especially difficult when people become isolated from the community.

As a result of this sense of imprisonment in gambling, the participants appeared to acknowledge that their protracted gambling was related to their deteriorating physical health. Many lost weight, suffered from insomnia, and smoked and drank more. Apart from these issues, prolonged gambling seemed to affect the participants’ ability to successfully adapt to their new cultural surroundings. Similarly to Xiong Mei, Li Zhong’s (male, 24 years old) experience illustrated that because he spent so much time in a casino he continued to live in a Chinese-language environment with little intercultural exchange despite being in New Zealand. Li Zhong stated that

I didn’t need to speak much English when I lived a gambling life. I made friends, in the casino, with whom I shared gambling skills. We went out for dinner after the casino closed. Chinese was the language I used most of the time when I was a gambler.

The sharing of gambling skills, food, and language can be seen as building a collective place identity among the gamblers of the casino. In this sense, problem gambling is not only about
the individual gambler him/herself, but a set of relationships linked by experience, culture, and place. This finding is consistent with the notion that place identity is not a static personal construct, but is framed and shaped by relationships and social interactions (Hodgetts et al., 2010; Li, 2013).

**An academic failure**

Most of the participants reported that they had experienced academic difficulties as a result of cutting classes or studying less in order to gamble. In the Chinese culture, scholastic achievement has traditionally been regarded as a passport to social success and a way to enhance one’s family’s status in the community (Li, 2013). The CIS and their families would have felt great shame if the students had been unable to achieve their academic goals due to their substantial involvement in gambling. Consequently, participants hid their failures from their loved ones, as Yu Xiao (male, 28 years old) explained.

> My parents expected me to be an academic. However, I failed my degree because of my gambling. I was ashamed when I talked to my parents. I hated the casino. It was a place reminding me I was an academic failure.

Yu Xiao suggests that academic failure negatively influenced his self-esteem. The discrepancy between his parents’ expectations and his academic performance fostered feelings of pain and a hatred toward the casino. In blaming the casino for his poor performance, Yu Xiao was able to protect his self-identity to a certain extent As such, physical settings (e.g., a casino) that threaten, detract from, or interfere with the individual’s self-identity not only preclude the development of place-belongingness but also produce its very opposite, place aversion (Proshansky et al., 1983). Consequently, the place identity of an academic failure severely affected participants’ psychological health. This was evident in the account of Zhang Xin (Male, 26 years old), who lost a total of NZ$20,000 through gambling.

> I lost everything. I failed my degree. Everything was out of control. I was a hopeless and worthless failure. [sighs.] The casino was a place where I buried myself.
Zhang Xin’s account suggested that he was depressed, pessimistic, and self-defeated as a “hopeless and worthless failure.” Such a negative identity led him to a “poverty of aspiration” (Li, 2012) where he had little motivation or desire to aspire to anything beyond his current circumstances or health status. This predisposed him to “bury” himself in the casino and continue isolating himself from the broader community. The isolation very likely resulted in his deteriorating health and lack of motivation to change.

An unfilial child

As discussed above, while place serves instrumentally in the satisfaction of one’s social and cultural needs, place identity is shaped by the person’s social and cultural beliefs and values. When the data were scrutinized, the concept of “filial piety” was found to be mentioned by participants repeatedly. Filial piety, a Confucian concept, refers to traditions of respect, reverence, care, obedience, and fulfilling one’s duty to parents and grandparents (Li et al., 2010b). Xia An (male, 25 years old) described how he gambled in the hopes of winning so that he could meet his filial responsibilities:

I was gambling when I received a phone call from my Dad telling me that Grandma died. [Pause.] I lost all my money at gambling. I did not have money to fly home when Grandma was very sick [in tears]. I kept coming to the casino in a hope that I would win so I could go home to serve Grandma with medicine in hospital. I was an unfilial child. [Sobbing.]

For many Chinese people, the greatest regret a son or daughter could is to miss the opportunity to serve one’s parents with medicine and soup on their deathbed, and be present when they die (Li, 2013). Xia An hoped that the casino could become a place that would help him fulfil his filial duties. Unfortunately, it did not. Rather, the casino was a place where Xia An constructed himself as an unfilial child. This suggests that the casino was not simply a place for Xia An to gamble, but had been incorporated as part of his concept of self.
Another example of participants regarding themselves as unfilial was related to their academic failure. In Chinese culture, parents consider their children’s achievements to be manifestations of their filial piety (Li, 2013). Chen Jie (male, 25 years old) described how he and his fellow Chinese students felt they were unfilial because they had brought shame and dishonour to their families:

I was part of a group of my peer international students gambling in the casino. We regarded ourselves as unfilial children because we failed so many papers and brought shame to our families. We thought that our parents might not love us anymore. We felt we were placeless children.

Chen Jie’s account indicated that the casino became a place where CIS shared their perceived identity as unfilial children. Their shared cultural understanding of filial piety brought Chen Jie and his friends a perception of “placelessness.” Although they were in a place (the casino), they felt out of place because they felt disconnected from their parents as a result of their problematic gambling. In this sense, Chen Jie’s place identity as an unfilial child was bound up with the casino. His feeling of placelessness was also intertwined with how his parents reacted to his gambling and how they defined him as a person. Therefore, a physical environment is also a social environment. The relationship between a physical and a social setting is evidenced in place identity through the merger of the individual’s personally held images, feelings, and ideas about the given social and physical settings (Proshansky et al., 1983). These settings consist of relevant attitudes, values, and behavioural tendencies that express the sociocultural characteristics of the individual.

The above analysis shows that the participants’ place identities were negative while they were gambling to excess in casinos. This suggests a “shadow side” (Chawla, 1992, p. 66) of people’s relationships with places. As suggested by Manzo (2005), negative place identities are as significant as positive ones, particularly when people make the effort to change negative into positive. As shown in the next section, the negative place identities that resulted from gambling encouraged participants to consider modifying their behaviour.
Changes in CIS’ place identities as they modified their gambling behaviours

In the second interviews, the participants were invited to talk about the costs, benefits, and impact of gambling. They were asked if gambling was a problem for them and if they had tried to reduce or modify their gambling behaviours. All the participants had considered and tried to reduce their gambling, with the majority having done so successfully. Some had stopped completely, while others had reduced the time spent gambling and the frequency of gambling sessions. Two participants had initially stopped gambling but then relapse several months later. When participants recalled their experiences of modifying their gambling behaviours, the theme of the transformation of place identity emerged. In the process of change, participants became active agents who sought help and interacted with the physical and social environment around them.

A help seeker

Research suggests that Chinese people are less likely to seek help for their gambling problems compared to non-Chinese gamblers (Li, 2007). The reasons why Chinese people with gambling problems may not seek professional help range from wanting to handle things on their own; a lack of awareness of treatment availability; stigma; embarrassment; feeling unable to talk about their problems; and negative attitudes toward treatment (Raylu and Oei, 2004). Although this may be the case for many Chinese gamblers, a cross-account examination showed that six out of 15 participants had actively sought professional help. Hou Jie (male, 24 years old) described his experience of seeking help:

After I failed several papers, I felt that I needed to deal with my gambling. I went to see a counsellor. Meeting with the counsellor was important to me as I felt calm and relaxed when sitting in the counselling room. I felt that my mind was clearer about why I should stop gambling.

This narrative suggested that the counselling room facilitated Hou Jie’s experiences of restoration and renewal of the self by supporting a sense of calmness and relaxation, clearing the mind of worrying thoughts, and clarifying worries and concerns (Sampson and Gifford, 2012). The counselling room therefore became a place of health for Hou Jie. His account also showed that he did not passively receive communications from his surroundings. Instead, he
actively sought help and extracted meanings from his interpretations of what he needed, and what he thought the physical and social environment was offering (Windi and Whittaker, 2012).

A community member

Apart from professional help, community and social support was also important to participants during the process of change. All participants faced a major life transition when they moved overseas. They experienced great stress in the acculturation process because they were culturally distant from the host society (Berry et al., 2002). Many of them tended to have little attachment to the society they had moved into and remained relatively isolated. In the circumstances, community and social support played a positive role in the process of change, as described by Luo Jia (male, 24 years old):

People in a Chinese church were friendly. The pastor talked to me respectfully. He looked for free accommodation for me when I had no money to pay my rent as a consequence of my gambling. An auntie visited me regularly, bringing me delicious food she had made. Everything they said to me was very positive and encouraging.

Luo Jia’s story revealed his experience of a therapeutic landscape that emerged through a set of interactions between him and the broader socio-environmental setting. According to Gesler (1992), a therapeutic landscape is a geographic metaphor to help people understand how the healing process works itself out through place. Luo Jia’s account shows that the church, as a place, not only provided him with a positive identity and satisfied his need for encouragement and respect, but also acted as the location of social networks that provided settings for therapeutic activities. Dai Jian’s (male, 41 years old) narrative further illustrated that the development of emotional bonds with places is a prerequisite of psychological balance and good adjustment (Lewicka, 2008). These bonds facilitated his involvement in local activities:

At the beginning of living in New Zealand I felt that I was living in a desert, like a rootless tree. No one cared about me. Gambling helped me to release [my frustration],
but it didn’t work. After I became involved in a church where I received support, I felt that I was a member of this society. I felt like I was rerooted and regrown.

Dai Jian’s account expressed an experience of positioning himself in society as a community member. He no longer felt himself a “prisoner of gambling.” Dai Jian’s experiences of past gambling and behavioural change functioned to increase his understanding of himself and others, to build up the capacity for self-reflection, and to encourage adaptation. In the process, he developed a sense of empowerment and the ability to choose, which enhanced his ability for self-transformation (Li, 2012). These developments were important because they strengthened Dai Jian’s capacity to cope with, or to change, adverse situations. In this sense, to be healthy involves not only physical health, but also the ability to participate in the host society as a re-rooted community member. Place identity thus has value within a social model of health where improvement in social connectedness is important for one’s health and wellbeing. Being able to transcend the locality of place to connect with people (such as in church) in the local community was integral to these participants’ behavioural change.

An active learner

As discussed above, problematic gambling resulted in disruption to participants’ academic performance. Given the fact that their goal was to pursue higher education in New Zealand, it could be assumed that places related to their education would be more important for them than any other places. A cross-account examination showed that topics in relation to academic performance featured far more frequently in the narratives related to participants’ behavioural change. Compared to their perceived identity as “academic failures,” in the second interviews participants made more positive references to their performance and places that supported their learning. Wu Hai (male, 29 years old) offered an example:

I knew my English was not good enough even though I had completed a course in an English language school. I re-enrolled in a program in the language school, attending classes from 6.30 to 8.30 pm every day. I went to my university during the day for my degree study. I no longer had time to gamble.
Wu Hai’s experience implied that the language school and university were his favourite places during the process of changing his gambling behaviour. These places replaced the casino as the ones where he spent most of his time. In that regard, the language school and university were therapeutic. These were places where environmental, relational, and individual factors worked together to preserve Wu Hai’s health and wellbeing. These therapeutic landscapes were not simply physically constituted, but also involved social relationships and social connections between the self and the diverse ‘others’ (Li and Chong, 2012). The place identity of an “active learner” emerged within and through relations with the place and other people (such as fellow students and lecturers).

The aforementioned positive place identities are not separate entities. Instead, they are woven together to support the process of behaviour change. The participants’ behavioural changes show that identity-consistent behaviour is important in maintaining health (Strachan et al., 2011). When the participant’s positive place identities (such as a help seeker) are constructed, they are more likely to act in ways (such as seeking help) consistent with those positive place identities.

**Discussion**

This article has explored CIS’ gambling narratives with a focus on their place identity reconstruction in a new country. Narratives, as a culturally and socially constructed way to make sense of the world, shape the participants’ place identities. Narrative interviews and analysis provided a means to access place identity constructions as well as the broader experiences related to gambling among the participants. It is found that the participants understood or discovered themselves, and revealed themselves to others, through the stories they told. Their place identities were evident in their narratives. For example, in the process of changing their gambling behaviours, participants’ place identities shifted, e.g., from a perceived prisoner of gambling to a help seeker, and from a perceived academic failure to an active learner.

This finding suggested that place identity is a process which features the transformation of the self and identity. It is consistent with existing studies on the intricate relationship between one’s identity and gambling behaviours (Nixon et al., 2013; Reith and Dobbie, 2012).
Nixon and colleagues (2013) described a clinical case study where a counsellor used Almaas’ approach to transformation of narcissism to assist a woman to regain control of her gambling. They encourage counsellors to resolve addictions by exploring transformation experiences with their clients. Moreover, investigating the transformation of the participants’ place identities promotes a strength-based, non-labelling approach to intervention for people concerned about their gambling. This approach highlights the agency of the participants in seeking out and fostering connections with the kinds of places that will support their wellbeing in the process of initiating behavioural change (Li et al., 2010a; Sampson and Gifford, 2012).

Our findings also suggested that the process of behavioural change reported by these participants show that the experience of place can be positive and negative. A negative place (such as the gambling venue in this study) has an adverse impact on place identities (such as seeing oneself as a prisoner of gambling, an academic failure, and an unfilial child). A positive place (such as a counselling room or the community) provides a therapeutic space where participants can experience place constructively as, for example, help seekers, community members and active learners. In that regard, attachment or aversion to places is at the core of the definition of place identity that is open to change (Cuba and Hummon, 1993; Lewicka, 2008). Thus, place identity, as a continuous but changing structure, is modified over the course of the life cycle. This finding is akin to Strauss’ (1969) notion that identity is capable of changing and transforming over the course of the person’s life. As Strauss claimed, the CIS’ place identity change is a process of reconceptualising their social roles, a change in their terminological framework that reorders their world and has marked effects on their social interactions. Such a transformation in place identity involves a shift in perspective and world outlook. As CIS change their perspectives, they change their place identities, their definitions of social reality and, consequently, their behaviour (Li, 2013).

Moreover, the places (such as the counselling room, church, language school, and university) that make up the therapeutic landscape are conducive to changing the participants’ gambling behaviours. These non-gambling places, where participants are welcomed and accepted by others, play an important role in participants’ renewed sense of social connection and inclusion (Sampson and Gifford, 2012). The participants’ experiences with these positive places are growth experiences, or events that help move their life journeys forward (Manzo, 2005). It is
not simply the place itself that is significant in behavioural change but the people who support
that change. The participants value key individuals associated with each place (such as the
counsellor, church members and lecturers) as important social bridges to help the transition to
new positive places other than gambling venues (Tse et al., 2013). What is valuable to the
participants is that these individuals treat them in a non-judgmental, friendly, sensitive and
empathetic manner. These are often described in the literature as the critical interpersonal
qualities which empower a person to initiate behavioural change (Miville et al., 2006). Such
individuals are therefore critical in the participants’ positive place-identity construction in that
they help participants re-examine meaning in life, rebuild self-esteem, and regain control of
gambling behaviours.

Using a culturally sensitive narrative approach, this paper challenges the dominant gambling
discourse which largely emphasises CIS’ negative experiences. The narrative approach enables
us to generate stories that integrate vital and previously neglected aspects of CIS’ gambling
experiences, such as their capacity for change and positive growth. These stories provide
alternative knowledge about CIS gambling, which is as valuable to researchers as knowledge
about prediction of pathological gambling behaviour using epidemiological methods.

The study has a number of limitations. First, the sample size is small. The study may not have
captured those CIS who continue to struggle in controlling their gambling behaviour, whose
recovery has been less straightforward, and who have not (re)joined their communities readily.
Second, the study relied solely on the participants’ own descriptions of their experiences and
did not seek any collateral information, such as whether family members and friends noticed
changes in place identity when participants reduced their gambling.

Despite these limitations, this study allows for in-depth knowledge of the participants’
gambling and help seeking experiences, and offers some directions for future research. These
directions include questions such as the relationship between changes in place identity and
changes in gambling behaviours (that is, which comes first, if either); which identity is more
important in changing one’s behaviours; identities emerging from the individualistic (for
example, an active learner) or collectivistic (for example, a community member) value
orientation; and how family members and friends see a person’s place identities.
References


Tse S, Yuen YMY and Suto M (In press) Expected possible selves and coping skills among young and middle-aged adults with bipolar disorder. *East Asian Archive of Psychiatry*.

