

**Factors influencing gambling
harm for the Asian population
in New Zealand: An empirical
study to test the conceptual
Asian Integrated Tree Model
Final Report**

**Asian Family Services and Allen + Clarke
for Ministry of Health**

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Executive Summary

Background

New Zealand's Asian population now represents 17.3% of the population in New Zealand. Asian communities face disproportionately high risks of gambling harm; up to 9.5 times greater than people of European/Other ethnicities. Despite this, until recently culturally responsive frameworks – like Te Whare Tapa Whā (Māori) and the Fonofale model (Pacific) – were not available to address gambling harm and mental health risks for Asian communities. The Asian Integrated Tree Model (hereinafter Integrated Tree Model) was developed to fill this gap. It is a framework using a metaphor of parts of a tree and its environment to represent the person and their experiences. The model conceptualises gambling harm as an outcome of interconnected cognitive, cultural, psychological, experiential and environmental factors.

Research objective

This research aimed to empirically test factors relating to Asian migrants' experiences with gambling and mental health, as identified in the Integrated Tree Model, supporting its use as a holistic approach to addressing gambling harm.

Key areas of research investigation

The research included:

- identifying how external and internal factors influence experience of gambling harm among Asian people in New Zealand,
- identifying whether experiences of the acculturation process (adapting to and integrating into a new society) can be shown to influence an Asian migrant's gambling behaviour,
- analysing whether the pathways that lead Asian people to engage in gambling are distinct from those that increase risk of experiencing gambling harm,
- exploring the relationship between harmful gambling and mental health conditions, and the influence of identified factors, through statistical modelling,
- unpacking any distinct influences of the identified factors on different subgroups (including different ethnicities) of the New Zealand Asian population, and
- mapping these findings onto the Integrated Tree Model to provide evidence for its interpretation and use.

Methods

The study employed a three-phase, mixed-methods design to ensure rigor and depth:

Phase 1: Literature review

A review of 46 peer-reviewed articles and grey literature published between 2000 and 2024, focusing on Asian migrants in Western contexts, was carried out. The review identified a range of cultural, cognitive, and environmental risk factors related to harmful gambling experiences.

Phase 2: Qualitative interviews

Qualitative semi-structured interviews were conducted with 25 people from Asian migrant communities who had experience of gambling harm, either through their own or a family member's gambling. Participants represented diverse ethnicities, ages (20–65), and migration timelines. The discussion focused on migration stressors, cultural beliefs on gambling, and environmental triggers. Findings from thematic analysis of the interview data, together with the findings from the literature review, shaped the survey instrument for large-scale validation in Phase 3.

Phase 3: Quantitative Survey

A nationally representative survey of Asian adults living in New Zealand was carried out. The online survey was administered via Trace Research's Asian panel, with supplementary paper-based survey responses collected through community events. Paper-based data collection methods ensured that participants not well represented from the online data collection methods were included, such as older adults and those with limited digital literacy. The survey was translated into eight Asian languages to ensure accessibility and cultural relevance. The final sample included 1,273 valid responses. The sample was weighted to reflect the demographic profile (gender, ethnicity, and age) of Asian populations in New Zealand, based on the 2023 Census.

The survey explored the factors influencing gambling behaviours and coexisting issues (such as mental health symptoms and substance use), aligning with the Integrated Tree Model framework. The survey instrument was designed to capture key variables, including gambling harm severity (measured using a short-form Problem Gambling Severity Index), gambling frequency, cognitive distortions (via a truncated Gambling Related Cognitions Scale), personality traits (e.g., impulsiveness, sensation-seeking), and acculturative stressors.

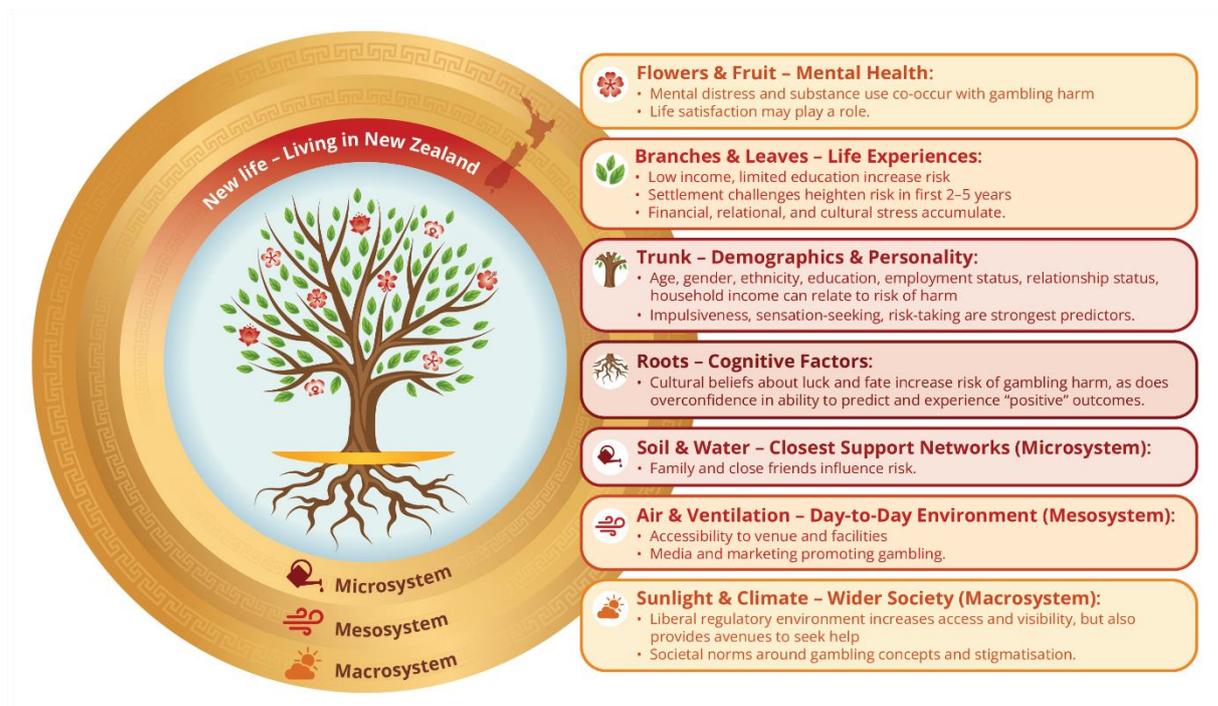
Hierarchical regression analyses and logistic regression were used to identify predictors of gambling harm/risks and/or participation. Exploratory factor analysis was used to condense cognitive distortion items into interpretable factors.

Key findings by Integrated Tree Model factors

The research showed that Asian populations living in New Zealand experience multifaceted drivers of gambling harm that align with the factors identified in the Integrated Tree Model.

Based on the findings from the survey, qualitative interviews and literature review phases of the research, elements of the Integrated Tree Model can be seen as metaphors representing different factors influencing mental health and risk of gambling harm.

Figure 1. Asian Integrated Tree Model adapted to gambling harm



Risk factors are tested and mapped around the Integrated Tree Model:

- **Roots - Cognitive factors:** there is evidence supporting the idea that risk of gambling harm can be correlated with erroneous beliefs that people bring with them from their cultural background (including cognitive distortions about fate and luck, and beliefs in their ability to predict outcomes).
- **Trunk - Demographic and personality influences:** there are some demographic variables associated with increased risk: being male and, among survey participants, being South Asian. However, a consistent factor across research phases was that inherent personality traits, including impulsiveness, sensation-seeking and risk taking, were most relevant to risk of gambling harm.

- **Branches, leaves – Experiences and acculturative stressors:** the findings present how settlement experiences impact risk of gambling harm and associated mental health conditions or distress. The first 2–5 years of migration, lower education and lower income were structural risk factors. Life course experiences of acculturative stressors (pressures and challenges experienced during the process of adapting to a new cultural setting) and accumulation of adverse life events (e.g. divorce, unemployment, worsened finance) were consistently linked to heightened risk of gambling harm.
- **Flowers, fruits – Comorbid mental health and other issues:** across research phases, comorbid mental distress was linked with risk of gambling harm (although the reasons for correlation may vary). Risky substance use was also associated with risky gambling for some.
- **Soil and water – microsystem:** the influence of a person’s social microsystem – family and close friends – was found across research phases to impact risk of gambling harm.
- **Air, moisture and ventilation – mesosystem:** accessibility of gambling opportunities, including in some cases media and marketing messaging, was found across research phases to impact risk of gambling harm.
- **Sunlight, temperature, climate – macrosystem:** while not covered in the quantitative study, other studies and the qualitative interviews linked a person’s experiences of the regulatory and cultural macroclimate in their new place of residence to their experience of gambling harm. Regulatory differences in New Zealand compared with most Asian countries make it easier to gamble and to lose control of gambling behaviour, but also easier to seek help via legal avenues.
- **Tree variations – Cultural influences on personal and experiential risk factors:** risk of gambling harm among Chinese migrants was linked to cognitive biases, impulsivity, and the stresses of acculturation and settlement. In contrast, Indian participants at higher risk of gambling harm often faced different life stage challenges, such as lower levels of education, recent migration, and specific cultural beliefs. Both groups, however, share vulnerability to gambling harm during life crises, underscoring gambling’s role as an escape mechanism.

Statistical findings further showed that personality and cognition related factors have more explanatory power than demographic factors in predicting gambling harm of Asian migrants. There are some inconsistent findings across the three phases about demographic influence, but the influence of personality, cognition and experience factors are consistent across. Cultural cognitive distortion and experience in acculturation are important factors in explaining gambling risks for the Asian population in New Zealand.

Overall findings

The study presents findings on predictors of gambling engagement and risk of gambling harm for Asians living in New Zealand. Gambling participation is largely influenced by personal characteristics such as age and gender, and by beliefs about the perceived benefits of gambling. Gambling harm severity is more closely tied to external life circumstances (e.g., stress, lower education, recent migration) and internal psychological factors like cognitive distortions and impulsivity. In short, gambling engagement is shaped by “who you are” and “what you believe,” while risk of gambling harm depends on “what happens to you” and “how you think.”

The model illuminates the interconnected factors that increase vulnerability to harm, from deeply rooted cultural beliefs about luck and fate, to personal experiences like migration recency and socioeconomic status, to environmental pressures such as pervasive gambling advertising and venue accessibility.

Limitations

While the mixed online/paper survey improved demographic representation, reliance on Trace Research’s Asian panel may have skewed the sample toward younger, more educated, more digitally connected and more settled Asian-origin participants. The qualitative part of the study was also subject to sampling limitations, meaning that the findings are not representative but provide an indication and illustration of the types of thinking that some Asian people in New Zealand can reflect on. Due to the sample, the model was only tested for its relevance to adults. Standardised tools like the PGSI scale, and the use of the short-form version of this and other scales for practical reasons, may fail to capture the nuances of people’s beliefs or true prevalence or harm, due to social desirability bias. This may call for a more culturally responsive measure of gambling harm.

Recommendations for future research

This research indicated that gambling harm may intersect with migration-related stress and coping strategies differently for men and women. Gendered patterns of gambling among migrants might also be explored in future studies. The research did not interrogate the motivations of those Asian migrants who did not gamble. This could have helped to identify protective factors that also could be mapped to the Integrated Tree Model, and could be the subject of future research.

Implications

For clinical services, the Integrated Tree Model offers a framework for holistic assessment and intervention. Screening for gambling harm in primary care and mental health settings, particularly among high-risk subgroups (e.g., South Asians, newer migrants), should be prioritised, with interventions tailored to intersect with comorbid



mental health and life stressors. Culturally adapted therapies can address the values, beliefs and identified stressors and risk factors for people from different backgrounds, and help manage personality-related risks like impulsiveness. Community-based approaches, including peer-led support and family-inclusive counselling, can leverage collective cultural values to reduce stigma and foster early help-seeking.

At the policy level, stricter regulations on gambling advertising, particularly in culturally targeted promotions, are critical to reducing exposure and normalisation of gambling behaviours. Settlement support programmes could integrate gambling harm prevention, including financial literacy and mental health education, to mitigate risks during the high-stress transition period.

Community-based approaches, including peer-led support and family-inclusive counselling, can leverage collective cultural values to reduce stigma and foster early help-seeking. Partnering with ethnic leaders and organisations to disseminate counter-messaging can shift social norms and motivations in gambling engagement. Culturally resonant storytelling and media campaigns, delivered in relevant languages and through trusted channels, can enhance awareness of support services while combating biased thoughts and beliefs around gambling.

By addressing the interplay of individual, cultural, and structural factors, these strategies can create a supportive ecosystem that reduces harm and promotes resilience across Asian migrant communities.

1 Introduction

This research aims to enhance understanding of the multifaceted stressors experienced by Asian residents in New Zealand impacted by gambling harm and comorbidity issues (such as mental health issues). Its objective is to contribute to the evidence base underpinning the Asian Integrated Tree Model, a culturally responsive service and support model tailored to Asians living in New Zealand, particularly to migrants who make up the majority of the current Asian population and the majority of participants in this research.

1.1 Background and context

1.1.1 Gambling patterns amongst Asian populations in New Zealand

The Asian population in New Zealand has seen rapid growth since the early 1990s, reaching 17.3% of the total population in 2023 and projected to increase to 26% by 2043. The Asian population in New Zealand comprises 34 ethnicities, with the four largest communities being Indian, Chinese, Filipino, and Korean (Stats NZ, 2019). The Asian population represents diverse cultures, languages, religions, socio-economic status, education levels, and migration experiences (Chiang et al., 2021). Migrants under the 'Asian' groups include skilled migrants, refugees, those on temporary work visas, foreign fee-paying students on fixed term visas, and others. According to the 2023 Census, of the 861,576 people of Asian ethnicities living in New Zealand, 74.9% of Asians were born in other countries, compared to 28.8% of the total New Zealand population. Among them, roughly half have lived in New Zealand for less than 10 years, and the other half for more than 10 years (Statistics New Zealand, 2024).

Asian people, especially migrants, are at a greater risk of harmful gambling than other ethnic groups (Abbott et al., 2014, 2015; Zhu et al., 2021). Asian people in New Zealand are 9.5 times more likely to experience gambling harm compared to New Zealanders of European/Other ethnicity (Ministry of Health, 2019). The 2025 New Zealand Gambling Survey data indicated there may be around 80,000 Asian people in New Zealand who report some level of gambling harm (Health New Zealand, 2025).

Research shows that Asian migrants may turn to gambling as a way of coping with immigration-related stress, including language barriers, unemployment, social isolation, and experiences of family violence (Bellringer et al., 2016; Keen et al., 2015). Asian migrants face a higher risk of gambling harm after moving to Western countries, partly because many come from places where gambling is restricted or uncommon, and where

social and institutional environments differ significantly from those in the West (Clarke et al., 2007; Colby et al., 2022).

However, there is a lack of comprehensive analysis on what combination of factors and stressors predict Asian migrants' gambling behaviours (Zhu et al., 2021).

1.1.2 Asian Integrated Tree Model

Asian Family Services (AFS), a mental health and addiction service provider in New Zealand, developed a conceptual Asian Integrated Tree Model (hereinafter Integrated Tree Model)¹ in the early 2000s that compares the Asian migration journey to a tree's transplantation process. The Integrated Tree Model identifies key internal traits and external factors in the person's environment, their immediate connections, wider networks and society.

The "Integrated" concept in the Integrated Tree Model refers to the process of building strong connections between migrant communities, broader society and local communities. Just like a tree in a forest, where a robust ecological network is essential for survival and flourishing, migrants need to establish deep-rooted support systems. These connections help them thrive within their new environment.

The Integrated Tree Model emphasises that migrants should feel a sense of belonging and actively build their support networks around them. It also encourages a better understanding of New Zealand's systems – social, cultural, and institutional – through the ecological framework. This integration promotes mutual understanding, support, and a more sustainable connection between migrant and local communities, fostering overall well-being.

This theoretical model has been used by AFS to inform public health activities to educate Asian communities about triggers and protective factors related to gambling addiction and comorbid mental health issues. It is used to help engage and establish trusting relationships with Asian clients in AFS' gambling harm reduction clinical practice. It has also been used as a tool to ascertain what stage Asian clients are at in the acculturation process², including their challenges, struggles, grief, loss and growth. Clinicians can then identify the issues that require intervention and support.

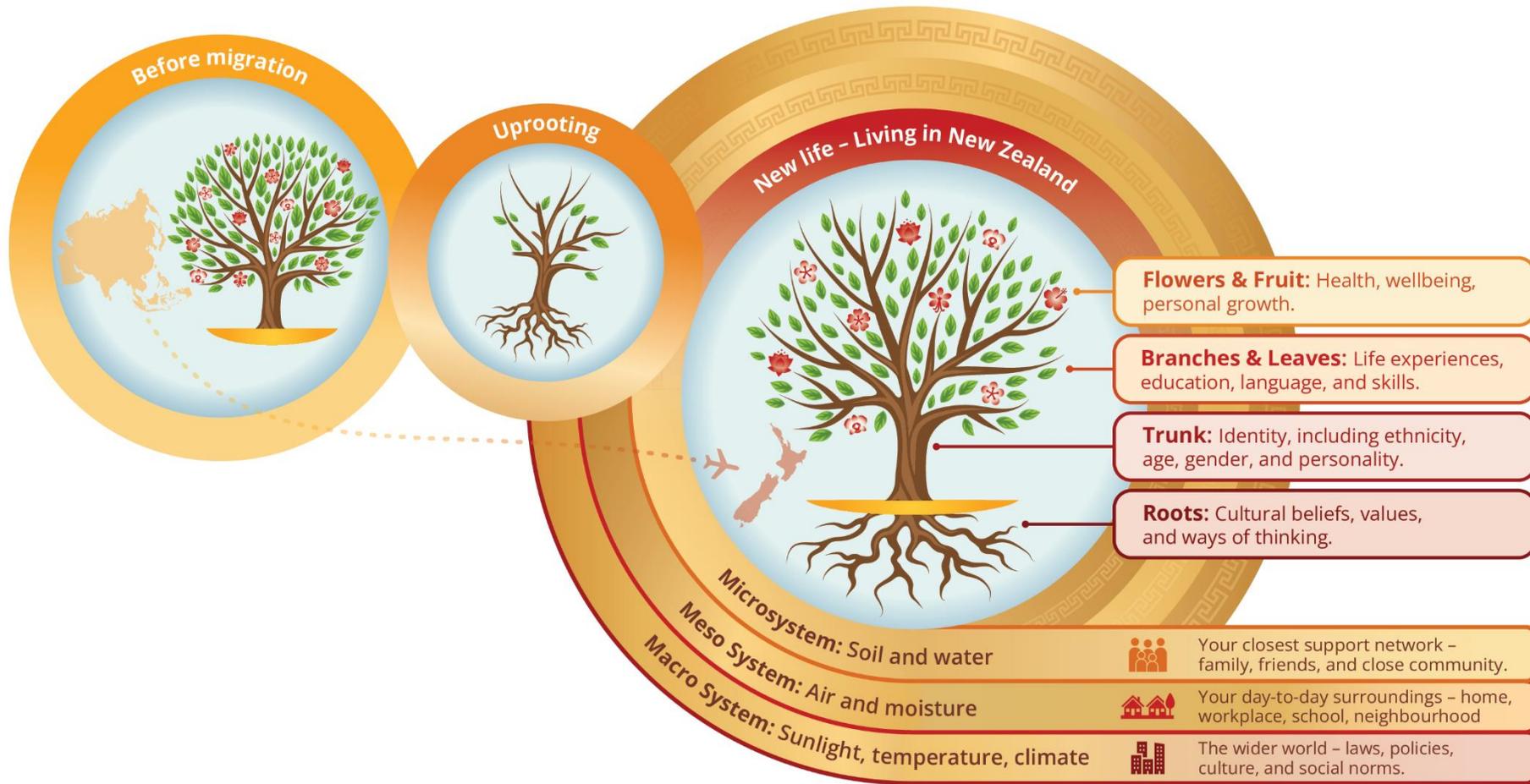
Figure 2 shows an infographic representation of the Asian Integrated Tree Model.

¹ <https://www.asianfamilyservices.nz/resources/resource-items/20231018-the-integrated-tree-model/>

² AFS use the term "Acculturation" to refer to the process that migrants and children of migrants experience as they familiarise with, adapt to, and integrate into a new cultural setting in a new country.



Figure 2. Asian Integrated Tree Model as developed by Asian Family Services



The tree-related concepts in the Integrated Tree Model include roots (cognition, cultural beliefs, values, etc), trunk (personal demographic and personality characteristics), branches and leaves (personal traits developed through life course, including language ability, education, etc), and flowers and fruits (expressed overall health and wellbeing status and outcomes – including gambling harm and disordered gambling).

There are also multiple layers of environmental factors that influence the development of the tree: soil and water (family, friends and close community), air and moisture (task environment and living environment) and sunlight, temperature and climate (the greater regulatory, normative and societal environment).

The Integrated Tree Model focuses particularly on the tree having been formed in one place with certain influences, then transplanted to a new environment, and the changes that may result. However, the ideas underpinning the Integrated Tree Model have not to date been validated with evidence about people's experiences, beyond the ideas discussed in AFS clinics. The lack of empirical validation (i.e. ability to show that the concepts are proven or supported by real-world evidence) limits the Integrated Tree Model's potential to be an evidence-based, culturally appropriate guide for Asian migrants affected by gambling harm. This study aims to contribute to the evidence base underpinning the Integrated Tree Model.

1.2 Research objectives and areas of investigation

This research was conducted by *Allen + Clarke* and AFS as part of the Ministry of Health's Gambling Harm Research Programme 2023/24–2024/25. The overall objective of the research was to empirically identify factors relating to gambling harm and comorbid mental health issues among Asian migrants using the Asian Integrated Tree Model.

Key areas of investigation to meet this objective included:

- identifying how external and internal factors influence experience of gambling harm among Asian people in New Zealand,
- identifying whether experiences of the acculturation process (adapting to and integrating into a new society) can be shown to influence an Asian migrant's gambling behaviour,
- analysing whether the pathways that lead Asian people to engage in gambling are distinct from those that increase risk of experiencing gambling harm,
- exploring the relationship between harmful gambling and mental health conditions, and the influence of identified factors, through statistical modelling of survey data collected,
- unpacking any distinct influences of the identified factors on different subgroups (including different ethnicities) of the New Zealand Asian population, and

- mapping these findings onto the Integrated Tree Model to provide evidence for its interpretation and use.

Findings from these areas of investigation about different types of personal, experiential and environmental factors were used to conceptually map internal and external drivers of heightened gambling risks for Asian populations in New Zealand. These findings contribute to the evidence base for the Integrated Tree Model for addressing gambling risks and related comorbid mental health among Asian populations (especially migrants) living in New Zealand.

The following areas of investigation were out of scope for this project:

- Direct engagement with gambling addiction support service providers on service improvement
- Close examination of gambling behaviours of Asians born in New Zealand³
- Exploration of the interaction or dynamics of factors on gambling participation or problematic gambling
- Analysis of influencing pathways of factors by subgroups other than by acculturation level or ethnicity.

1.3 Research roadmap

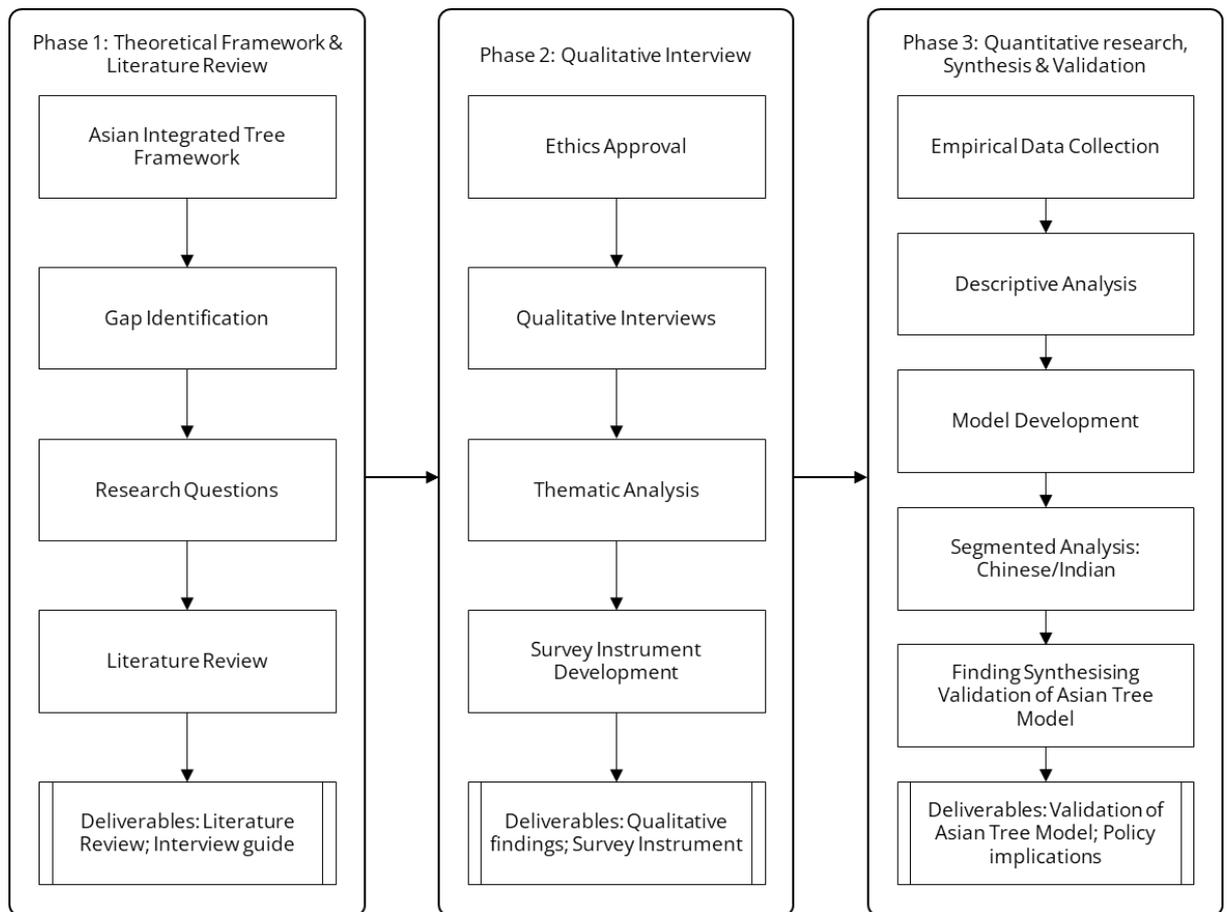
To address the research questions, we utilised a mixed method approach:

1. A review of 46 relevant academic articles and grey literature sources.
2. Qualitative interviews with 25 Asian residents who have experienced gambling harm and may also have a co-existing mental health condition.
3. A quantitative survey designed with reference to external and internal factors/themes identified from the literature and interviews, to identify and validate the most important and relevant factors that could influence gambling participation, harmful gambling and mental health issues.

³ Despite that this cohort was not scoped in, we do include a small proportion of Asians born in New Zealand in the quantitative analysis for the purpose of completing the profile of Asians living in New Zealand.

Figure 3 displays a 'roadmap' presenting a phase-by-phase breakdown of the research.

Figure 3. Three-phase research roadmap



1.3.1 Phase 1

This phase established the conceptual groundwork for the study via a comprehensive literature review, directly linking to section 2.1 and section 3, Literature Review.

- Literature review: An analysis of Asian gambling participation patterns (3.1) and risk factors (3.2) was carried out to identify gaps and inform the development of the qualitative and quantitative research. The Integrated Tree Model framework, which posits that gambling behaviours stem from intertwined demographic, cognitive, personality and environmental factors, was refined using existing evidence.
- Framework development: Risk factors (e.g., acculturative stressors⁴, cognitive bias, media influences) were mapped to the Tree's "roots" (e.g. key demographics/

⁴ Acculturative stressors are psychological, social, and behavioural challenges and pressures people face during the process of cultural adaptation, arising from the conflict between heritage cultural values and those of the host society.

cognitive), “trunk” (e.g., personality traits), “branches” (e.g., life events) and environments (3.3).

1.3.2 Phase 2

This phase involved a series of qualitative interviews, which further laid the foundation for the large-scale quantitative survey in Phase 3. This Phase is described in Sections 2.3–2.5 in Methodology, and findings are presented mostly in 4.1 to 4.3 in combination with quantitative descriptive findings.

- Qualitative interviews: Clinical clients from Asian communities were interviewed to further contextualise the Integrated Tree Model. Themes like acculturative stress and cultural perceptions of gambling emerged, which provide reference for the quantitative survey design.
- Quantitative survey development: Important variables from the literature and qualitative interview process were operationalised in the survey design (5.2.3–5.2.5).

1.3.3 Phase 3

This phase tested the Integrated Tree Model empirically via a quantitative survey, with the results presented in sections 4 and 5 (Analysis & Modelling).

1. Data collection & descriptive analyses: Survey data were collected, cleaned and weighted (4.1.5) to ensure demographic representativeness of Asian communities living in New Zealand. Gambling behavioural patterns (4.2) and bivariate risk associations (4.3) were analysed.
2. Model development: Hierarchical regressions (5.3) tested predictors of gambling severity (5.3.1–5.3.4) and participation (5.5). A robustness check was conducted using a different methodology (5.4).
3. Segmented subgroup validation: Subsample analyses (5.6) were conducted for the Chinese and Indian subsamples to identify nuances of risk factors.
4. Synthesis: Evidence from literature, interview and survey data was synthesised to provide empirical evidence on the validity of the Integrated Tree Model.

In summary, this structured yet iterative approach ensured the Integrated Tree Model was theoretically examined and tested through empirical research. Phase 1’s literature findings and identification of gaps shaped Phase 2’s qualitative interview themes, the findings of which refined and supported Phase 3’s selection of variables to test in the quantitative survey instrument. Evidence collected in all phases was synthesised to contribute to validating the factors used in the Integrated Tree Model.

1.4 Community research approaches

This research is underpinned by a commitment to appropriate engagement and data collection methods with culturally and linguistically diverse (CALD) communities.

There is currently no widely accepted research framework or principles guiding research work with CALD communities, including Asian communities living in New Zealand. We used a community participatory approach in qualitative data collection, and a culturally and linguistically appropriate approach to both qualitative and quantitative research processes.

Important principles of our community research approach included:

- Collaborative planning and feedback from Asian researchers/stakeholders in each phase of the research.
- Cultural sensitivity checks of the research design and implementation to ensure important cultural knowledge, norms, concepts or cognitive processes are captured, discussed and understood by both *Allen + Clarke* and AFS researchers.
- An equity focus, to ensure voices from both research teams, and Asian community stakeholders are listened to in key research decisions made by the research team.
- Effective, respectful and open communications with researchers/experts of Asian backgrounds.
- Ensuring the availability of language options throughout both the interview and survey processes to uphold participants' rights and mana, and to foster culturally safe and responsive participation.
- Ethical considerations related to protecting the confidentiality of participants were considered through a cross-cultural lens, with the researchers from both teams discussing how ethical requirements were applied in practice.
- Incorporating lived experience into the research to ensure it reflects the needs of communities rather than just services, and that the research findings are communicated in a way that can positively impact the people who could benefit from it.

This research aimed to provide a holistic view of gambling risks and harm and related issues, which is congruent with Asian philosophies and the holistic view of Asian care. The term "Asian" can be used in research to imply one monolithic group, which is not the case. In the quantitative part of this study, we have been able to separate out findings relevant to different Asian ethnic groups in New Zealand, most specifically Chinese and Indian, the largest population groups.



2 Methodology and Data

2.1 Literature review methodology

The review sought international literature on Asian communities' (especially migrants') risk factors for gambling harm. Specific searches were carried out for the impact of acculturation stressors and cultural factors relating to perceptions and understandings of gambling and its potential harms.

2.1.1 Search strategy and databases

The aim was to identify external and internal factors that drive an individual's gambling behaviour or problem gambling during their migration journey from an Asian to a Western country. Accordingly, literature was selected that relates to migrants in Western settings, and to Asian-specific experiences. This literature review process informed how to better define and scope factors comprising the Integrated Tree Model framework.

The study team scanned and selected literature around four types of internal factors and three categories of external factors (as identified in the Integrated Tree Model). These included:

- Demographic factors (such as education, marital status, income)
- Cognition and belief related factors
- Psychological factors (such as personality, motivational factors or psychological conditions)
- Experiences (such as challenges in migration journey)
- Micro-environment (including family, friends, close relatives, etc.)
- Meso-environment (such as extended family, neighbourhoods, work environment, mass media, school, social media, etc.)
- Macro-environment (broader environments including regulatory/legal environment, normative or socio-cultural environment, economic conditions and technological advancement, etc.).

Searches were carried out using search engines such as Google Scholar, ResearchGate and PubMed. Recent summaries of gambling-related literature, including those collected by the Ministry of Health, were also scanned, and the reference lists of selected articles were checked for other relevant work (backward citation searching).

Initial search terms included combinations of "Asian, gambling, risk, migration, addiction, mental health, protective, factor, culture, acculturation". Terms were then extended to cover specific Asian cultures. Accumulated relevant vocabularies on this gambling research direction were used in multiple rounds of iterative searches.

2.1.2 Inclusion/exclusion criteria

Table 1 shows the inclusion criteria for the literature search process.

Table 1. Inclusion and exclusion criteria for literature search

Key area	Inclusions	Exclusions
Type	Quantitative studies, qualitative studies and systematic reviews on the factors associated with gambling. Grey literature focused on government reports from countries within the Organisation for Economic Co-operation and Development, especially New Zealand and Australia.	Theoretical papers
Language	English	Literature published in other languages.
Recency and influence of literature	Prioritised journal articles compared with conference papers or working papers, and articles with a higher number of citations (if older – but no earlier than 2000) or new concepts (if newer).	Articles before the year 2000
Subject	Mostly Asian migrants' gambling behaviours in a Western host country, or environmental/cultural/psychological/cognitive factors that drive gambling behaviours in an Asian country. Generic risk factors that influence all population groups.	
Influencing factors	Focus on risk factors associated with gambling participation and harmful gambling. All risk factors identified will be included, with a focus on uniqueness of factors influencing gambling of Asian communities. Studies examining both risk and protective factors.	Studies that focus only on protective factors.
Outcome metrics	All forms of gambling including gaming with gambling components, and different levels of intensity of gambling behaviours (including gambling engagement and harmful/addictive gambling). Gambling and its comorbid mental health outcomes.	



2.1.3 Analysis of literature

Two researchers carried out the initial search, using Zotero for referencing. Applying the inclusion and exclusion criteria, we selected and reviewed 46 pieces of work that are referenced in Appendix A. We prepared a structured bibliography of literature noting methodology, findings, limitations, and relevance to this research, as the basis of the analysis. After that, we categorised key themes/subfactors under the internal and external structure of the Integrated Tree Model and examined whether factors in the conceptual model were covered in the literature and whether there are other factors that need to be added. We then synthesised the literature by identifying patterns, gaps, and relationships across studies. The findings were used to develop the qualitative interview guide used in Phase 2 of the study.

2.2 Ethics approval and expert review

The primary data collection for the research project was approved by the Northern B Health and Disability Ethics Committee in July 2024 (reference: 2024 EXP 20340).

As part of the approval process, an independent expert (Associate Professor Maria Bellringer, Director, Gambling and Addictions Research Centre, Auckland University of Technology) reviewed and approved the research plan.

2.3 Interview methodology

2.3.1 Participant selection criteria and recruitment process

Potential interviewees from Asian communities were first approached by an AFS staff member who they were familiar with. They included:

- Clients who have experienced/are experiencing gambling harm (either due to their own or someone else's gambling), recruited from AFS
- Clients with gambling addiction and comorbidities, recruited from AFS
- Clients from AFS psychological services at general practice (GP) clinics
- Pre-screening clients recruited from AFS's public health activities
- Representatives from the AFS lived experience group (people who have experienced gambling harm and affected others).

The participants were briefed about the research project, had the opportunity to ask questions, and informed consent to participate was sought.

Following the initial recruitment round and completion of 21 interviews, the team determined that the sample did not adequately reflect the diversity of perspectives intended for the study. For example, a small number of participants had experienced only gambling harm while living in their country of origin, and therefore could not talk about how their migration journey had interacted with their gambling experiences. The sample included very few international students or young professional adults moving to a Western country away from their family; a circumstance which is frequently seen at AFS counselling and in the literature. We therefore undertook a second round of more targeted recruiting for four more relatively recent migrants who had all experienced harm due to their own gambling.

2.3.2 Interview design and protocol

The qualitative, semi-structured interviews covered participants' and their families' migration journey to New Zealand, the cultural values they grew up with, their impressions about gambling in their home country and then in New Zealand, and the situations they were in at the time they started to experience gambling harm and/or co-existing mental health conditions.

The interview guides, information sheet and consent forms can be found in Appendix B and C.

2.3.3 Data collection procedures

Participants were interviewed in person, online or by telephone, by either one or a pair of interviewers from the AFS or *Allen + Clarke* teams. Care was taken to avoid having participants interviewed by someone they had a therapeutic relationship with.

Interviews were recorded with permission, and depending on the language used were transcribed in full or part with relevant quotes translated into English. Interview teams were provided with a template for taking notes on each aspect of the interview conversation corresponding with topics that would be analysed as relevant to the Integrated Tree Model.

Topics covered in the interviews included:

- Background – migration, how long been in in New Zealand, how long been client of AFS
- Gambling and mental health journey
- Ideas and values – looking back at own upbringing, cultural beliefs about gambling, values that influence behaviour
- Personal characteristics – demographics, life stage, personality characteristics, risk preferences, motivational factors
- Experience in NZ – acculturation, employment, life stage, financial, social, significant events

- Community influences – ideas from family, friends, community contacts
- Immediate environment influences – physical environment, marketing, opportunities to gamble and to seek help, stressors in the environment, policies or rules
- Macro-environment – regulation, New Zealand cultural ideas about gambling, policy, changes in types of available gambling.

The interviewer arranged translation if necessary and provided a written summary of each interview in English, labelled with the unique identifier code and including notes on demographics. These were analysed using NVivo, where all excerpts were collected, labelled with participant characteristics, and the quotes or translated summaries of responses tagged with themed codes.

2.3.4 Qualitative analysis approach

The coded excerpts from the 25 interviews were the basis for a first draft of qualitative findings, structured around the following overall question areas:

- **Roots:** what beliefs around gambling/betting activities do people bring from their original culture? What are the key cultural values that inform their choices? What ideas have protected them from gambling harm? To what extent do internalised stigma, cultural beliefs and values come up as relevant to people's experiences with gambling?
- **Trunk:** What can people from different demographic subgroups tell us about their own personality type and risk-taking preferences, that have influenced their experiences with gambling?
- **Branches/leaves:** How do Asian migrants with different types of social and employment status experience gambling and gambling-related harms? How do these personal situational factors interact with their gambling experience? Are specific types of stressful events identified as triggers, or situational variables identified as protective or triggering for gambling harm?
- **Flowers/fruits:** How do comorbid behaviours interact with gambling? Are factors important in identifying harmful gambling behaviours in achieving overall mental wellbeing?
- **Soil and water (microsystem):** What do people identify as family and close social influences on their journey with gambling?
- **Air, moisture (mesosystem):** How has the physical, marketing and cultural environment affected migrants' gambling journey? Are people able to identify the messages in their environment that influence them to gamble?

- **Sunlight, temperature, climate (macrosystem):** Can migrants relate the influence of being in a different regulatory, socio-cultural and policy environment on their experience to gambling? How does a more liberal gambling environment impact on those who move from places where gambling is less legally available?

Findings from this first summary are synthesised with the quantitative findings in this report, providing illustrations, explanations or possible contradictions in the ideas expressed by people who had experience of gambling harm, compared to the survey's more representative findings from the New Zealand Asian population.

2.4 Survey instrument development

2.4.1 Quantitative survey development

The quantitative survey was designed with reference to identified themes and factors from the literature and qualitative interviews. The survey incorporated validated measures assessing severity of gambling, gambling frequency, mental wellbeing and a variety of other relevant variables that predict gambling behaviours. The predictor variables were organised into four thematic blocks: demographics, cognitive, personality and experience related questions. In addition, the survey included a block of questions to examine the direct environmental influences. This structure enabled the survey to capture the key components of the Asian Integrated Tree Model. All items were presented as quantifiable, closed-ended questions to facilitate statistical analysis.

A consent form describing the context and purpose of the research, and voluntary and anonymous participation was developed, along with the survey content. A participant had to click the "consent" button (or verbally consent during the paper-based survey data collection) to proceed with the survey-taking process.

Details about the measurement and operationalisation of key variables in relation to the survey instrument design are provided below.

1. Measurement of outcome variables

To gauge the characteristics of the gambling behaviours of our sample, we included the Problem Gambling Severity Index (PGSI) short-form scale and gambling frequency.

Severity of gambling: PGSI short-form scale

The PGSI is a brief, 9-item, self-report measure of problematic gambling behaviours in the general population (Ferris & Wynne, 2001).

We adopted a shorter-form PGSI scale (PGSI-SF) for measuring gambling severity that has been previously validated, and has been used by the Problem Gambling Foundation

and AFS in New Zealand as a rapid clinical screening tool (Ferris & Wynne, 2001). This shorter version is useful for this research due to its suitability for population-based surveys. The PGSI-SF includes 3-items:

1. In the last 12 months have you bet more than you could really afford to lose?
2. In the last 12 months have people criticised your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?
3. In the last 12 months, have you felt guilty about the way you gamble or what happens when you gamble?

Like the full PGSI, each item is scored on a 4-point scale:

- 0 = Never
- 1 = Sometimes
- 2 = Most of the time
- 3 = Almost always.

Gambling severity is typically classified into different risk levels based on a total score ranging from 0–9 (as each of the 3 items is scored on a 0–3 scale). The classification is generally as follows:

- 0 = non-problem gambling
- 1 = low-risk gambling
- 2–3 = moderate-risk gambling
- 4+ = high-risk/problem gambling

We also recoded the gambling severity measure into a dichotomy measure; “likelihood of gambling harm”. Those responses who sum-scored 1 or 0 in the PGSI short-form scale were recoded as “0 – not likely to experience gambling harm”, and those whose sum score was 2 or higher were recoded as “1 – likely to experience gambling harm”. This dichotomous measure is used in logistic regression modelling.

Gambling frequency

We used frequency of gambling activities to indicate gambling participation. We asked participants to indicate how frequently they had engaged in gambling activities during the past twelve months.

Mental wellbeing measures

We used a multiple-choice question to ask if a person who reported gambling in the last twelve months had experienced any mental health or addiction symptoms. This was to gauge the prevalence of comorbid mental health and/or substance use among those who gambled.

Measure on gambling behavioural patterns

One question asked about the gambling activities that the participant had undertaken in the last 12 months. Another multi-choice question asked about what motivates the respondent to engage in gambling activities. The motivation choices encompass all the major motivations suggested by the literature. The major motivations include escapism, to win money, to socialise, for excitement/entertainment, to prove skills, and to prove luck.

2. Measurement of predicting variables

Demographic measures

We follow the Statistics New Zealand classifications to measure gender, age, income range and education. The classification of the Asian ethnic group measure was from the Level 2 subdivisions of the Ethnicity Standard Classification from Stats NZ, while considering the clientele composition of AFS practices. The self-identified multiple choice ethnicity question included Indian, Chinese, Filipino, Korean, Sri Lankan, Japanese, Thai, Vietnamese, Cambodian, Taiwanese, Indonesian, Malaysian and other Asians. An option of "Kiwi/New Zealander" was also included to accommodate the self-identification of New Zealand born Asians.

The study team discussed and agreed categorisation rules to measure location of residence, relationship status, employment status and annual household income, in response to insights from AFS on Asian populations.

Cognitive measure

We used the truncated Gambling Related Cognitions Scale (GRCS) to measure gambling related cognitive distortions.

GRCS is a validated 23-item self-report questionnaire designed to assess gambling-related cognitive distortions (Raylu & Oei, 2004b). The scale measures five key dimensions of gambling-related thoughts and beliefs:

1. Interpretive bias/illusion of control (e.g., "Specific numbers and colours can help increase my chances of winning")
2. Predictive control (e.g., "When I have a win once, I will definitely win again")
3. Gambling-related expectancies (e.g., "Gambling makes me happier")
4. Perceived inability to stop gambling (e.g., "It is difficult to stop gambling as I am so out of control")
5. Gambling-related expectations (e.g., "Gambling makes things seem better")

Responders' level of agreement with each statement was rated on a 5-point Likert scale from 1 (strongly disagree) to 5 (strongly agree), with higher scores indicating more gambling-related distorted beliefs.

We removed items relevant to “perceived inability to stop gambling”, as these items repeated the severity of gambling measures in our survey instrument. Also, these items are notably different from the others, as they relate to perceived self-control rather than cognitive biases.

In the regression analyses, we used the exploratory factor analysis to reduce the truncated 17 items in the adapted GRCS scale to three factors (i.e., general gambler’s fallacy⁵ around predictive control, culturally specific cognitive bias, and gambling expectancy) in the final modelling.

Personality measures

Based on the findings from the literature review and qualitative interviews, we included three personality related variables in the quantitative modelling: sensation seeking, impulsiveness, and propensity to risk taking.

The constraints related to survey length made it impractical to include full validated scales for each construct (e.g., the Sensation Seeking Scale has 40 items). Scenario questions allowed more efficient measurement of these constructs. More importantly, scenario questions are proven effective in eliciting honest responses about sensitive topics and thus reducing social desirability bias, which is generally regarded as an issue for respondents from Asian backgrounds (Fisher, 1993). In determining suitable scenarios for each of the measures, we consulted with AFS experts in gambling addiction to make sure the scenarios were relevant and free from ambiguity. For example, we measured impulsiveness using the following scenario: "Imagine you're at a shopping mall and see a flashy new gadget that you've been craving for a while. It costs significantly more than you had budgeted for. You have some money saved, but it was intended for something more important, like an upcoming bill. In this situation, how likely are you to buy the gadget?"

To measure inclination of sensation seeking, we used a scenario question to measure self-rating for propensity to seek novelty and excitement (10-point scale, where a higher score indicated a higher level of sensation seeking inclination).

We measured impulsiveness by creating a scenario that characterised unplanned rapid decision to stimuli without considering negative outcomes (10-point scale, where a higher score indicating a higher level of impulsiveness).

⁵ The gamblers' fallacy represents a **core cognitive distortion** in probability assessment and outcome prediction that leads individuals to maintain irrational beliefs about gambling success despite objective evidence of negative expected value.

To measure propensity of risk taking, we used a financial investment scenario to gauge one's willingness to engage in financial choices with highly uncertain outcomes that may involve potential loss (10-point scale, where a higher score indicating a higher risk-taking propensity).

Experience measures

The experience variables included cumulative acculturative stressors, concurrence of life events, and life satisfaction.

We used the cumulative score of number of acculturation stressors that a participant identified (the concurrence of stressors) as the measure of level of acculturative stresses. We further categorised the level of the concurrence of stresses as "low, medium and high" using the cut-off values⁶ of <3, 3–6, >6 respectively for crosstab analysis.

Similar to the operationalisation of concurrent acculturative stressors, we used the cumulative number of concurrent life events that a participant identified in the last five years as the measure of concurrence of life events. The concurrence of life events can be treated as a broader scope measure of acculturative stressors.

In the selection of life events that could trigger problematic gambling, we consulted AFS clinical specialists to confirm which specific life events were relevant. We captured 15 typical life events including: relationship changes (marriage, gaining a new family member, death of spouse/family member/close friend, being divorced or separated); financial burdens (mortgage pressure, business adjustment, starting a new business, change of financial situation, involved with legal matters, and being unemployed); life changes (having a new job, beginning or ending school, retirement, change of living conditions); and health issues. The selection of stressful life events aligned with findings in the literature (Thurm et al., 2023). These selected life events influence whether an individual's migration experience is smooth or marked by difficulties. Some events are linked to financial, emotional, hedonic, or social motivations (or a combination of these) that may contribute to engagement in gambling activities.

Environmental measures

We used scale questions to measure the self-reported influence of micro- and meso-environmental factors on gambling behaviours. These micro and meso-environments included family, friends, colleagues or neighbourhood, gambling advertising, social media, and accessibility to gambling venue(s) or facilities.

⁶ Cut off values were determined after checking the distribution patterns in the 10-point scale questions making sure the categorisation would include adequate subsample in each subcategory.



2.4.2 Reviewing, translation and piloting

Dr Bo Ning led the development of the survey instrument, which was peer reviewed by Dr Rebecca Gray from *Allen + Clarke*, Dr Andrew Zhu from Trace Research, Dr Kelly Feng, and Dr Wardah Ali from AFS, in early October 2024. This review process helped ensure questions were understood as intended and that response options are appropriate. The cognitive testing process included checking questions for functionality, accuracy and appropriateness, and identifying any changes needed to ensure the questions were easy to understand, logical and collected relevant and useful information.

The survey was translated into the eight most widely used Asian languages including simplified Chinese, traditional Chinese, Hindi, Punjabi, Filipino, Korean, Vietnamese and Thai. We back-translated the surveys and ensured the content was consistent across the nine versions⁷. Respondents were able to choose their preferred language at the beginning of the survey.

The finalised survey instrument was loaded into the online survey platform used by Trace Research, and we ensured the survey worked effectively for mobile phone, tablet and PC platforms, and across the different language versions. We ensured the online survey content was consistent with the paper-based survey.

A small-scale pilot testing (56 Asian participants) was carried out to check if there were any issues with the clarity and effectiveness of survey questions, format, flow, language use or response options that could impact large-scale data collection. No major issues were identified, but we re-adjusted the ethnicity question to include additional ethnicity categories (namely, to include Hong Kongers, Singaporeans, and Kiwi/New Zealander)⁸. The pilot data was included in the data set.

2.5 Quantitative data collection

We used a mixture of online and physical data collection procedures in data collection. Quota sampling was used in the online data collection.

⁷ In our back translation, we translated the English survey into a target Asian language (e.g., Hindi) by a translator, and asked a different translator to translate the Hindi version back into English. The AFS researcher compared the back translated English with the original English survey to identify discrepancies. These discrepancies, if any, were discussed and addressed through revision.

⁸ Both overseas-born and New Zealand-born Asians were included to ensure a representative understanding of the diverse Asian population living in New Zealand.



2.5.1 Online survey data

We used Trace Research's Asian online sampling panel for recruitment of online survey participants⁹. The targeted sample size was between 1200 and 1500 Asian adults (aged 18 or over) living in New Zealand. Quota sampling was used to ensure proportional demographic structure based on the 2023 Census distribution of Asian adults. This ensured proportional representation across age, gender, and geographic location.

The online survey was launched in late October 2024, employed random email invitations and social media boosting. This yielded 1,012 valid responses (24.9% response rate) over a four-week period. The online samples required full completion and was verified through IP address tracking to prevent duplication.

The survey data achieved robust reliability, with a margin of error of $\pm 3\%$ at a 95% confidence level, suitable for academic and policy-making purposes.

2.5.2 Paper based survey data

A potential limitation of the online survey is that it is unlikely to reach less digitally literate communities, which correlates highly with older adults.

To address the potential underrepresentation of older Asian adults facing barriers to digital technology use, we conducted additional in-person survey data collection, specifically targeting older participants. This additional data collection took place concurrently as the online survey rolled out, in three regions with a high proportion of Asian populations, i.e., Auckland, Wellington, and Christchurch.

AFS used trained coordinators to administer the paper survey to the target group at community events. These community events included cultural events, festival celebrations and public health events. A small gift (worth \$15–20) was given to participants after they completed the paper-based survey. We collected 275 supplementary print survey responses.

⁹ Trace Research has a proven track record in sampling for nationally representative social and political polls, using online panels of tens of thousands of individuals living in New Zealand who agree to receive invitations to participate in online surveys. They receive "credit points" as a token to acknowledge their time and input. These points, when accumulated, can be converted to a supermarket voucher.

2.5.3 Data preparation

We merged the digitised data from the online and print responses and conducted a data cleaning process. In total, we collected 1,287 responses from Asian people living in New Zealand¹⁰.

We removed 7 incomplete, invalid or blank responses. We also removed 8 responses who either claimed to be non-Asian (6 responses) or originated from geographically ambiguous areas¹¹.

After the cleaning process we were left with 1,273 valid samples (with 1009 valid online samples and 264 valid paper survey samples).

Crosstabulation of the data sources and age group indicates that the print survey responses significantly increase the proportion of participants aged 46 or older (Chi-square=22.69, $p<0.01$). This indicates that the print survey efforts did increase the representativeness of the aged communities as planned (see Table 2).

Table 2. Proportion of age range - online survey and print survey

Age range	Online survey	Print survey	Chi-Square test
45 or younger Count %	644 63.8%	126 47.7%	<i>Chi-square= 22.689, p<0.05</i>
46 or older Count %	365 36.2%	138 52.3%	
Total Count	1009	264	

2.5.4 Demographic representativeness of the sample

To increase the generalisation of the findings related to this population-based research, we matched selected demographic variables (i.e., gender, age group, ethnicity and major geographic locality of residence) of this sample with the Asian profile of the New Zealand Census. We used Chi-square goodness-of-fit test to compare our sample

¹⁰ We included a small proportion (<10%) of Asian participants born in New Zealand to complete the profile of the Asian population living in New Zealand and for comparison of key gambling prevalence metric. However, the gambling behaviours of the subgroup (i.e., Asian New Zealanders) was not the focus of this research.

¹¹ Two listed birthplace countries more commonly categorised as either West Asia or the Middle East.

proportions against Census proportions for each demographic variable (Table 3). If p-value > 0.01, the sample is considered representative in that demographic distribution.

Table 3. Goodness of fit test of the sample and Census NZ

	Census 2023 (%)	Sample (%)	Goodness of fit
Gender			Chi-squared=6.196, p>0.01
Male	49.4	45.6	
Female	50.4	53.5	
Age range			Chi-squared=15.398, p<0.01
16-25 years*	11.0	11.0	
25-44 years*	52.5	49.5	
45-64 years	25.7	25.4	
65+	10.8	14.1	
Asian Ethnicity			Chi-squared=82.457, p<0.01
Chinese	32.4	32.8	
Indian	33.9	27.1	
Korean	4.5	5.3	
Filipino	12.6	10.8	
Sri Lankan	2.7	2.7	
Japanese	2.3	2.3	
Other Asian	11.6	19.0	
Main locality of residence			Chi-squared=7.682, p>0.01
Auckland	61.5	61.4	
Wellington	9.8	11.4	
Christchurch	11.6	12.6	

Note: * indicated that the age range of our sample and the Census were slightly different and thus the proportions were adjusted via a proportionate recalculation to match the age ranges of the Census.

Our sample distribution matches the New Zealand Asian population in terms of gender and locality (residence in major cities), but the goodness-of-fit test suggested that our sample needs to be weighted to match the Census data on age range and ethnicity distribution. Specifically:

1. Those aged between 25 and 44 were slightly under-represented.
2. Those aged 65+ were slightly over-represented.
3. Indians and Filipinos were under-represented.
4. Korean and other Asians were slightly over-represented.

2.5.5 Sample weighting adjustment

For the two non-representative demographic groups (i.e. age and ethnicity), we calculated weights for each demographic group using the formula:

$$\textit{Weight (i)} = (\textit{Population proportion in census})/(\textit{Sample proportion})$$

These adjusted weights were combined into a single weight by multiplying the two weights. For any given observation *i*,

$$\textit{Combined weight (i)} = \textit{Age weight(i)} * \textit{Ethnicity weight (i)}$$

This combined weight was used to weight the data in regression modelling analysis to correct over/under-representation, as an effective solution to reduce sampling bias and make the survey results more applicable to the entire Asian population living in New Zealand.

2.6 Quantitative analysis techniques

Analysis of the survey responses was undertaken using SPSS Statistics 26 and R Studio. For the first phase of the quantitative analysis, findings were presented as descriptive statistics to show how a certain factor (e.g., varied levels of impulsiveness) is related to severity of gambling.

The second stage of analysis involved multiple rounds of multivariate regression modelling. This is a statistical technique used to understand how multiple factors affect an outcome. Exploratory factor analysis and regression techniques were used. Details of the methods used for these analyses are presented alongside the findings in section 5 in this report, to show how the different factors were found significant or not.

Statistical estimates and p value¹² for significant relationship/influence are reported.

Table 4 below describes how the analysis methods addressed the research questions.

¹² The p value stands for probability. It measures how likely it is that any observed difference in outcomes is due to chance. For example, when the p value is less than 0.05, this means that the outcome difference by a factor is less than 5% likely to be caused by chance and thus would be considered statistically significant.

Table 4. Data analysis questions and methods

Research questions	Analysis methods
How do external and internal factors (as identified in the Tree Model) influence harmful gambling behaviours of Asians in New Zealand?	Descriptive analysis and crosstabulation is used to analyse how a factor is related to gambling; principal component analysis, multivariate linear regression and/or other statistical modelling techniques were employed to examine whether and how the predicting variables impact on severity of gambling behaviours or gambling harm risks.
Are the pathways that lead Asians to engage in gambling distinct from those that increase vulnerability to gambling-related risk?	To test for possible different pathways, after running regression models of gambling severity, we ran gambling participation models to check whether there are differences in factors predicting gambling harm severity versus gambling participation.
What is the role of the acculturation process in influencing an Asian migrant's gambling behaviour?	We planned to use subgroup analysis to identify if there are different pathways influencing the development of addictive gambling between newer migrants and more established residents, but the newer migrant subgroup (<5 years) did not meet the minimum subsample requirement to yield stable coefficients in regression models. Instead, we examined and validated the influence of acculturation in the regression models of gambling harm severity.
What are the relationship dynamics between gambling addiction and related mental health metrics among the Asian communities?	We examined the relationship between mental health comorbidities and gambling through crosstabulation and chi-square tests. We also included in the regression model the influences of two sources of stress and a subjective measure of life satisfaction.
How do the influences of these identified factors manifest differently across different subgroups (e.g., ethnicity)?	We ran segmented regression models for the two largest ethnic subgroups (i.e., Indian and Chinese), as these two groups have adequate statistical power to yield stable estimates in modelling.

2.6.1 Exploratory Factor Analysis

Exploratory factor analysis (EFA) was used to determine the number of factors under the truncated Gambling Related Cognitions Scale (GRCS) using judgement techniques like Kaiser's criterion, scree plot and factor loadings. The research team interpreted the extracted factors based on the factor loadings and item content. This process compressed the multiple items in the scale to a smaller number of factors to be used in statistical modelling.



2.6.2 Hierarchical linear regression and logistic regression

We used multivariate linear regression and logistic regression to examine whether multiple factors are statistically significant in affecting an outcome variable.

Multivariate linear regression examines how multiple independent variables (in our case, the demographic, cognitive, personality and experience factors) simultaneously influence a single continuous outcome (for example, harm/risk of problem gambling in the form of severity levels).

Logistic regression, on the other hand, predicts categorical outcomes such as yes/no dichotomy, estimating the probability that an observation belongs to a particular category. In this case, it was used to determine whether a respondent is at risk of gambling harm, or not. We used logistic regression as a measure to check the robustness of findings.

2.6.3 Subgroup analysis

Segmented regression was undertaken to examine the influences of predictors of gambling harm risk on subgroups of the Asian sample. We ran segmented regressions for the Chinese and Indian subgroups separately. This subgroup analysis could be useful to guide the clinical services offered to Chinese and Indian clients.



3 Literature review findings

3.1 Literature on Asian gambling prevalence and patterns

3.1.1 Prevalence

A widely-understood definition of gambling refers to the act of risking money or something of value on the outcome of an uncertain event (Bolen & Boyd, 1968). This definition usually encompasses various forms of wagering, such as betting on sports events, playing casino games, participating in lotteries, or engaging in games of chance where the outcome is partially or entirely determined by chance rather than skill. In New Zealand, the [Gambling Act 2003](#) classifies gambling based on the amount of money spent and the risk of harm associated with the activity (classes of gambling range from low-stake, low-risk gambling, to high-risk, high-turnover gambling).

Gambling has been a part of Asian cultures for centuries, with various traditional games and practices deeply ingrained in norms, culture and rituals. For example, games like Mahjong, Pachinko, and various card games have long been popular forms of entertainment in countries such as China, Japan, and Korea (Colby et al., 2022).

Disordered gambling, also known as harmful gambling, problem gambling, or gambling addiction, is a serious mental health condition characterised by persistent and recurrent problematic gambling behaviour. Recent research and policy work in New Zealand tends to refer to “gambling harm” more than “problem gambling”. In this report, we use these terms interchangeably depending on the source of the findings. The terminology used in gambling literature has changed over time and varies depending on the measures used, and the language preferences of participants and stakeholders.

Research shows that people of Asian ethnicities experience a higher risk of problem gambling, compared with people of other ethnicities in a Western country setting (Caler et al., 2017; Thomas et al., 2000). Although gambling prevalence (gambling participation rates) amongst Asian communities are reported to be generally lower in Western countries, rates of problem gambling amongst Asian gamblers is reported to be significantly higher than in other groups (Rowlatt et al., 2023; Thomas et al., 2000). For example, in the state of Victoria, Australia the prevalence rate of problem gamblers among Chinese communities was between 2.4 and 4%, whereas the overall prevalence rate was 1 to 1.5% (Victorian Casino and Gaming Authority, 2000). As noted in the introduction to this report, Asian people in New Zealand experience harmful gambling rates 9.5 times higher when compared with European/Other New Zealanders (Ministry

of Health, 2019). More recent New Zealand Gambling Survey responses show 10.1% of Asian people are at some risk of a gambling problem (Health New Zealand, 2025).

A number of studies find binomial distribution of gambling behaviour in Asian communities, that is, high prevalence of non-gambling, but also higher than other ethnic groups for problematic gambling (McCready et al., 2007; T. P. Oei & Raylu, 2010).

3.1.2 Cultural norms and practices around gambling

Certain Asian cultures regard gambling activities as a part of their lifestyle and cultural tradition (Raylu & Oei, 2004a). This is especially observed about East Asian cultures such as Chinese and Vietnamese; however in most accounts research participants have mentioned that social gambling is encouraged in their culture, whereas excessive gambling is frowned upon (Dinshaw et al., 2017).

In some other parts of Asia, gambling is not seen as a socially acceptable activity. This includes many Muslim cultures and within the Tamil culture (Radermacher et al., 2016). Some Asian cultural norms, such as the value of maintaining stability of the family, may be protective against gambling harm (Papineau, 2005).

Despite gambling being prohibited through the history of most Asian countries, gambling in East Asian countries (including China, Japan, Korea, and Vietnam) can be traced back to over 2000 years. Chinese communities use the word “gaming” or “playing games” to refer to their gambling behaviours, regardless of whether they are engaged in social gambling or not. This can serve as a strategy to assert that their gambling activities are distinct from those prohibited by the government (Wu & Lau, 2015).

Over time, the terms “gaming” and “playing” became synonymous with gambling in community narratives across East Asian countries. Chinese migrants, for example, are likely to believe their gambling behaviours are a form of entertainment; as a result, they are also more likely to equate the term “gambling” to “harmful gambling” (Keovisai & Kim, 2019). The unique “gaming” cultural conception “may predispose Chinese individuals to wagering activities and increase the risk of gambling disorder” (Keovisai & Kim, 2019; Wu & Lau, 2015).

Conversely, there is pervasive cultural and societal stigma around “real” gambling, especially in Chinese and broader East Asian communities that perceive gambling as misconduct, rather than an addiction issue (Williams et al., 2012; Wu & Lau, 2015). This perception, along with the fear of “losing face”, can prevent people from disclosing their harmful gambling behaviours and seeking professional help. This can increase the risks and associated harm of gambling, because these individuals want to avoid being labelled as a “problem gambler”. This fear of losing face applies to those Asian cultures where social gambling is somewhat encouraged, and those where any gambling is seen as sinful (Radermacher et al., 2016).



3.1.3 Gambling preference

Evidence suggests that individuals from Asian communities tend to prefer certain forms of gambling, such as baccarat and card games in casinos, as well as Mahjong, which is often played as a form of social gambling (Rowlatt et al., 2023). Korean nationals are reported to prefer engaging in card games, casino gambling, electronic gambling machines (EGMs)¹³, and internet (otherwise referred to as “online” in this report) gambling (Williams et al., 2012). Mahjong gambling is particularly popular among Chinese international students in Australia, especially those from Hong Kong, who often engage in it as a social activity (Zheng et al., 2011). The absence of family support and intervention in the host country environment can heighten the risk of engaging in this type of gambling.

There is also evidence that recent migrants from Asian countries tend to avoid EGMs in bars or pubs, instead showing a preference for table games; a pattern that may be linked to their stage in the acculturation process (Ohtsuka & Ohtsuka, 2014; Thomas et al., 2000). Research from the United States of America on older Chinese migrants found they favour Mahjong and casino gambling (Keovisai & Kim, 2019).

3.2 Literature on risk factors of gambling

3.2.1 Demographic influences

Overall, the literature is inconsistent regarding age groups as a risk factor, although male Asians were generally noted as more likely than females to engage in risky gambling behaviour.

Demographic variables that can help to explain the personality profiles of Asian (tendencies towards risk-taking, sensation-seeking or impulsiveness), and that can lead to higher likelihood of gambling engagement include, lower educational attainment (George et al., 2016) and being male (Caler et al., 2017; Chiu & Woo, 2012; Petry et al., 2003; Zheng et al., 2011). One study notes younger males and those not married are more at risk among Asian gamblers (McCready et al., 2007). Another notes (Chinese) men generally had greater perceived gambling expectancy bias¹⁴ than women (Tang & Wu, 2012).

¹³ The machines known officially as electronic gambling machines (EGM) in New Zealand are colloquially called pokies. In other countries they are known as slot machines, gaming machines, one-armed bandits or fruit machines. We use the term EGM throughout this report unless in a direct quote.

¹⁴ **Gambling Expectancy Bias** refers to the systematic cognitive distortion in probability assessment and outcome prediction that leads individuals to maintain irrational beliefs about gambling success despite objective evidence of negative expected value.

Studies have identified higher risk among a variety of different age groups. Those aged 35 or older were identified among Chinese migrants in Australia (Zheng et al., 2011), while those aged 18 to 34 were identified in an Australian study targeting the whole population (Miller, 2015). Thirty to forty year-olds were identified as higher risk in a Korean study (Williams et al., 2012), whereas younger people were reported to be of higher risk of gambling harm in a multi-ethnic study (Caler et al., 2017). Another study focused on young people found associations between youth, sensation-seeking and gambling (Calado et al., 2020). A further study focused on older gamblers in Singapore supports an assertion that age-related cognitive decline can heighten vulnerability to gambling-related harm, given that gambling involves complex and risky decision-making processes (Subramaniam et al., 2017).

The inconsistent findings on the relative risk experienced by those in different age groups may lie in the scope of specific research. For example, Asian research targeting younger or older people will have findings and conclusions about unique risk factors, related to the specific age group studied. However, there are different personality, motivational and psychological characteristics, and life experiences, associated with age. Therefore, at different stages of life, various factors are likely to play a more significant role in influencing gambling participation and the development of gambling-related harm.

Seeking wealth through gambling activities is found to be a very strong motivator of Asian gamblers in Western countries (Rowlatt et al., 2023). Following this primary motivation, Asian migrants of lower social-economic status, facing financial challenges and lower educational attainment, are at greater risk of experiencing gambling-related harm (Caler et al., 2017; Miller, 2015). Poverty and other demographic factors associated with low socio-economic status have been identified as contributing causes of problem gambling, as evidenced in a study of an Asian American community (Colby et al., 2022). Many Asian migrants struggling to make a living through low-skilled, low-paid, and often stressful work, are drawn to gambling by the hope of achieving financial success (Colby et al., 2022). Some justify their gambling as a means to support their families (Colby et al., 2022). Conversely, demographic indicators of higher socio-economic status often relate to more successful acculturation, which was found to be a protective factor against gambling risks (Chee & Lui, 2021; Loo et al., 2008).

3.2.2 Cognitive factors

1. Generic gamblers' fallacy

In general, gambling-related cognitive distortions and biased beliefs include flawed and illogical perceptions of the probability of winning in gambling (Ji et al., 2015; Johansson et al., 2009; Tang & Wu, 2012; Thurm et al., 2023). Although gambling outcomes are inherently random and unpredictable, many gamblers develop cognitive distortions that attribute success to personal traits such as skill or capability. These erroneous beliefs

can lead to misjudging the odds, misinterpreting outcomes, and ultimately engaging in more frequent and problematic gambling.

The generic cognitive distortions related to gambling are categorised into two types: 1) availability heuristics and 2) representative heuristics (Kahneman & Tversky, 1972).

1. The availability heuristic is evident in gambling behaviour where individuals tend to recall wins more readily than losses, leading to a biased perception of their overall success. In some Asian cultures, this cognitive bias manifests as an interpretive belief that winnings outweigh losses, further reinforcing continued gambling (Kim, 2012).
2. Representative heuristics occur when a person makes a judgement about the possibility of an event (e.g., winning) based on the perceived similarity to past events, rather than on actual probabilities. This cognitive bias is reflected in phenomena such as the gambler's fallacy and overconfidence in personal control. As a result, individuals may gamble more frequently in an attempt to validate their perceived skill or gambling competence (Keovisai & Kim, 2019).

Frequent gamblers often exhibit a poor understanding of statistical probabilities and tend to hold overly optimistic beliefs about their ability to influence outcomes through skill or personal control.

The general gamblers' fallacies of the illusion of control or biased interpretation of gambling outcomes are also found in research on Asian gamblers. Research suggests that these cognitive distortions may be more pronounced in this group, with East Asian gamblers shown to be more susceptible to the gambler's fallacy compared to their European counterparts (Ji et al., 2015).

2. Cultural cognitive distortion

Some studies have indicated that Asian participants had different types of gambling-related biases and cognitive distortions compared with people of other ethnic backgrounds. Cognitive distortion is reported to be closely related to escalating the risk of gambling and gambling addiction in both the Asian and Asian migrants contexts, across ethnicities and age groups (Oei & Raylu, 2009; Rowlatt et al., 2023; Subramaniam et al., 2017).

In addition to general cognitive distortions such as the gambler's fallacy, research has identified culturally specific gambling fallacies rooted in the unique philosophical and cultural traditions of Asian societies (Calado et al., 2020).

This form of cognitive distortion, while related to the illusion of control, is more closely tied to superstitious thinking than heuristic reasoning. In many Asian cultures, such superstitious beliefs are rooted in cultural notions of luck and fate, contributing to culturally specific gambling fallacies that extend beyond general cognitive biases.

For example, Australian Chinese gamblers were reported to be more superstitious than gamblers of European origins (Rowlatt et al., 2023).

Studies have reported that Asian migrant gamblers often exhibit both universal cognitive distortions such as the illusion of control, and culturally specific erroneous beliefs shaped by traditional views on luck and fate (Ohtsuka & Ohtsuka, 2014). This particular form of the illusion of control is rooted in superstitious beliefs, where individuals perceive that gambling outcomes can be influenced by luck or external forces, rather than by personal skill or strategy, reflecting culturally embedded notions of fate and fortune (Keovisai & Kim, 2019).

Building on the concept that luck is predetermined by fate, some believe luck follows a cyclical pattern over time (Chee & Lui, 2021). This form of superstitious thinking is particularly prevalent across Asian societies and plays a role in shaping gambling behaviours (T. P. S. Oei & Goh, 2015; Ohtsuka & Ohtsuka, 2010). "Luck and fate can be seen as "命运 (Mìngyùn) in Chinese, 運命 (Unmei) in Japanese, 운명 (un myeong) or 팔자 (palja) in Korean, โชคชะตา (chok chata) in Thai, नसीब (naseeb) or कर्म (karma) in Hindi and số phận in Vietnamese, as examples of commonly shared cultural values that interconnect "chance/luck" and "fate".

In many Asian popular cultures, the integration of beliefs about luck and fate suggests that major life events are predetermined at birth and largely unchangeable. However, gambling is often perceived as a means of engaging with or testing one's destiny, offering an opportunity to influence what is otherwise seen as a fixed life path (needs ref). This belief in predetermined luck can lead to more persistent gambling behaviour. If luck is seen as cyclical, a losing streak might be interpreted not as a sign to stop but as indication that a winning period is approaching. Two Australian studies examining the gambling behaviours of Vietnamese migrants found that luck was commonly perceived as a key determinant of winning, and various forms of superstitious thinking were prevalent in the study participants' gambling practices (Ohtsuka & Ohtsuka, 2014; Thomas et al., 2000).

In cultures where fate is believed to be predetermined, gambling is sometimes viewed as a way to gain insight into what "heaven" has ordained. This belief system fosters superstitious thinking, where individuals interpret signs, omens, or environmental cues as indicators of when luck is favourable. Such interpretations often guide decisions about when and how to gamble, reinforcing the idea that gambling outcomes can be foretold through symbolic messages (Chee & Lui, 2021; Raylu & Oei, 2004a; Williams et al., 2012; Zheng et al., 2011). These signs or omens include numbers (8, 9, and 3 are often considered lucky in Korean culture; and 8 and 6 are associated with luck and prosperity in Chinese culture), colours (red is a sign for success and good fortune for Chinese), behaviours (i.e. practices rooted in Feng Shui, such as selecting a "lucky" spot in a casino believed to enhance chances of winning; washing hands can symbolise a

change of luck for gamblers in Hong Kong and Macau) and objects (East Asian gamblers may avoid carrying a book, as “book” has a similar pronunciation as “lose” in Mandarin and Cantonese) (needs refs).

Cultural perceptions of luck, fate, and perceived self-worth can reinforce the biased illusion of control, thereby increasing the risk of gambling-related harm among migrants from Asian backgrounds (Raylu & Oei, 2004a).

3.2.3 Personality related factors

Risk-taking behaviour is more closely associated with financial motivations for gambling, whereas impulsivity and sensation seeking are often linked to social, emotional (including escapism), or hedonic motivations for gambling participation. Individual differences in personality characteristics (such as sensation-seeking, impulsiveness, and risk-taking propensity) can also influence a migrant's propensity to gamble (Johansson et al., 2009). Some individuals may be more likely to participate in gambling regardless of their cultural adaptation process.

Gambling is often portrayed as an exciting and stimulating activity, which can appeal strongly to sensation seekers. Sensation seeking is a well-documented driver of gambling behaviour and is considered a risk factor for disordered gambling, particularly among youth across diverse ethnic backgrounds (Calado et al., 2020, Reardon et al., 2019).

Elevated risk-taking tendencies and higher levels of impulsivity have been identified as key psychological factors contributing to the development of pathological gambling among individuals of Asian descent (T. P. S. Oei & Goh, 2015).

Risk taking propensity in Asian migrant gamblers may be strengthened by cognitive characteristics as well. Evidence suggests that East Asian gamblers' biased illusion of control – believing that the gambling outcomes will be reflected in their own luck and fate – can reinforce their risk taking propensity (Rowlatt et al., 2023).

3.2.4 Experience related factors

One distinctive aspect of Asian migrants' life experience lies in the stress of acculturation. Experiences and conditions resulting from acculturation challenges are a group of important risk factors regarding Asian migrants' gambling participation or problem gambling in Western countries. Stressful life experiences and related psychological factors have been shown to predict the onset and progression of gambling behaviours and/or gambling disorders (Thurm et al., 2023), as gambling is deemed a way of coping with stressors in life experiences.

Acculturation refers to the process through which migrants adopt the cultural norms, values, behaviours, and practices of the host country environment (Kim, 2012). Stress

arises from the challenges and adjustments that migrants face as they navigate differences between their home culture and the culture of the new host environment. These different sources of stress are referred to as acculturative stressors (Kim, 2012).

Acculturative stressors involve a wide array of experiences including loneliness, boredom, racial discrimination, negative psychological states such as anxiety or distress, and other adverse life experiences/conditions (Kim, 2012; Lin et al., 2023; Marginean et al., 2023).

Particular psychological states, such as anxiety or mental distress are generally believed to be important triggers of gambling behaviours (Kim, 2012). For Asian migrants, these psychological states are closely associated with the adaptation experiences and problems such as isolation, racism and frustration caused by language barriers and cultural difference (Colby et al., 2022; Loo et al., 2008).

Okuda et al. (2016) concluded of experience-related factors that “Racial and ethnic minority status in it of itself is not a risk factor for (gambling disorder) but may be a proxy for underlying potential risk factors such as social economic disadvantage, gambling availability, stress and acculturation processes, as well as cultural variations in values and cognitions” (Okuda et al., 2016, p. 290). Experience of acculturative stress can predict severity of gambling problems among migrants more generally, not just Asian (Jacoby et al., 2013).

A cross-cultural study of European and Chinese gamblers found that psychological stressors lower life satisfaction, which is associated with problem gambling (Tang & Oei, 2011). This literature also highlights the correlation between disordered gambling and life satisfaction (as a proxy of subjective mental well-being). Emotional and social isolation were found to be the greatest predictor of gambling addiction among a group of Chinese migrants in Korea (Lin et al., 2023). Chinese migrants in Victoria, Australia were reported to engage in gambling because of emotional stress, loneliness and boredom in their migration journey (Thomas et al., 2000). Qualitative research on older Asian migrants living in New York also identified gambling as a coping mechanism for managing mental health challenges (Keovisai & Kim, 2019). US research involving wider Asian communities (including Khmer, Chinese, Korean, Filipino and Vietnamese immigrants) also found acculturative stressors (e.g., life uncertainty, boredom and work stress) influenced migrants’ gambling behaviours (Colby et al., 2022).

On the other hand, successful acculturation has been identified as a protective factor against gambling participation (Chee & Lui, 2021; Loo et al., 2008). Additionally, positive work adaptation may help reduce the risk of gambling addiction or harm among Asian migrants (Lin et al., 2023).



3.2.5 Comorbidities

There is evidence that comorbid mental health conditions are correlated with gambling behaviour among Asian migrants (Colby et al., 2022). These individuals may become trapped in a 'vicious cycle,' where gambling is used as a means of escaping psychological distress, but financial losses exacerbate mental health issues, which in turn fuel further gambling.

An overview of the body of literature on vulnerable populations, defined by the authors as including older adults, women and people from low socio-economic contexts, found that comorbid mental (e.g., mood or personality disorder) and physical health conditions and experience of trauma were identified as correlates of gambling (Sharman et al., 2019).

Existing literature has consistently identified tobacco use, alcohol consumption, and drug use as correlates of gambling behaviours (Abdi et al., 2015; Caler et al., 2017; Sharman et al., 2019), although literature supporting smoking as a co-existing behaviour was sparse. Evidence on a link with substance use was also supported in a study examining Chinese migrants in the US (Chiu & Woo, 2012), Indian student gambling (George et al., 2016), and Singaporeans (T. P. S. Oei & Goh, 2015). A link was identified between problem gambling and cigarette smoking among Asian American adolescents, although this study did not find a strong correlation with alcohol (Kong 2013).

Video game playing and substance use was associated with problem gambling amongst Chinese students in the US (Chiu & Woo, 2012). A study based in China found that the purchase of video game 'loot boxes' may link to problem gambling for people across different cultures, though among Chinese people these products were not viewed as the same as gambling and did not seem to link to the same risk factors (Xiao et al., 2024).

3.2.6 Environmental factors

1. Family, friends and peers

A substantial body of literature identifies early life experiences and familial role modelling as key precursors to the development of gambling problems. In Asian migrant communities, gambling behaviours may be socially transmitted within families, peer groups, or close-knit communities where gambling is a normalised or habitual practice (Rowlatt et al., 2023).

Research shows that having family members with current or previous gambling problems has been associated with an increased risk of developing disordered gambling (Rowlatt et al., 2023). Evidence from a large-scale US study indicated that there are multigenerational patterns, and that men are more likely to "inherit" the habit of gambling from their male parent (Wilson et al., 2015). An overview of literature also

found that adolescent females' risk of problem gambling was affected by parental gambling (Sharman et al., 2019). Lao immigrants with gambling problems reported more family involvement with gambling/problem gambling, and starting at a young age (King et al., 2020). Some researchers described these young people as "behaviourally conditioned gamblers" due to their early experiences (Chan & Ohtsuka, 2011).

Compared with some Western countries, Asian countries feature a higher level of power distance¹⁵ in national culture, and this is reflected in the patriarchal family structure. Literature suggests that Asian males, as opposed to females, are more likely to gamble partly because of this father-son intergenerational influence (Chee & Lui, 2021).

Cohesive family relationships, on the other hand, can be a protective factor. Singaporean research indicates that having a more cohesive family lowers the propensity to problem gambling among individuals with mental health conditions (T. P. S. Oei & Goh, 2015).

Evidence suggests that having friends or peers with gambling experience is associated with elevated level of gambling activities, not necessarily elevated gambling risk. Social interaction is a significant motivator in the development of gambling behaviours among East Asian gamblers, who are often influenced by collectivist cultural norms and peer pressure (Raylu & Oei, 2004a). This social drive to engage in gambling is particularly pronounced among international students and early-stage migrants, who may experience limited social support and seek connection through shared activities like gambling (Keovisai & Kim, 2019; Rowlatt et al., 2023). This mechanism may also operate through peer influence, whereby gambling behaviours become normalised within social groups. There is, however, evidence from Australia in a more general context suggesting that the influence of family or friends were inconsistent or unclear in one's development of gambling behaviours (Miller, 2015).

2. Accessibility of gambling facilities and advertising

A range of environmental and geographic risk factors contribute to problem gambling, with the accessibility and availability of gambling products being particularly influential (Miller, 2015, Sharman et al., 2019). This dynamic is also evident in the development of gambling behaviours among Asian migrants, where ease of access interacts with cultural and social vulnerabilities (Kim, 2012). Access to gambling venues was proven to be a risk factor for Singaporean's development of gambling disorders (T. P. S. Oei & Goh, 2015).

¹⁵ **Power Distance** is a cultural dimension concept developed by Dutch social psychologist Geert Hofstede that measures how cultures handle inequality and hierarchy. A higher power distance means more acceptance of inequality in power and respect of authority.

An Australian non-governmental report found that working in gambling venues is also a risk factor for problem gambling, in that this employment type provides easy access to gambling activities (Miller, 2015).

Marketing techniques used by casinos are reported to play a role in motivating Asian migrants to start and continue casino gambling (Colby et al., 2022). An Asian friendly casino environment (e.g., Asian language speaking casino staff, free food, festive Asian décor and design), easier access to casinos (e.g., free shuttles from Chinatown to casinos), and lower threshold for entry was reported to be an enticement for Asian migrants in the US to engage in (casino) gambling (Ohtsuka & Ohtsuka, 2014). In these studies, bar environments were often perceived as less welcoming and appealing to Asian migrants, partly due to challenges in adapting to Western bar and pub culture. This cultural disconnect may help explain the preference among many Asian migrants for casino-based gambling over pub-based EGMs.

For individuals experiencing social isolation, casinos offered a culturally familiar environment where they could interact with others who spoke their language. Additionally, migrants from densely populated Asian cities often expressed frustration with the limited late-night entertainment options in their new settings, making the 24-hour accessibility of casinos particularly appealing. These patterns have been observed among Chinese migrants in Canada and Lao communities in the United States (Dinshaw et al., 2017; King et al., 2020)

3. Macroenvironments

Exposure to a host country with more permissive gambling regulations may influence migrants (particularly those from more restrictive regulatory and normative environments) to increase their propensity to gamble. Regulatory differences between a host and home country can pose a risk when migrants from countries with limited access to gambling are exposed to an environment where gambling is widely accepted and available (Rowlatt et al., 2023). This legal availability may give the impression that it is a safe activity. A deregulated gambling market increases both the variety and accessibility of gambling options, which may encourage migrants from Asian countries to engage in gambling as a way of seeking novelty or new experiences (Loo et al., 2008).

Another body of literature highlights how normative patterns and cultural attitudes toward gambling in migrants' countries of origin can contribute to the normalisation of gambling behaviours, thereby influencing Asian migrants' gambling preferences and participation. A culturally permissive attitude toward gambling in some Asian societies represents a distinctive environmental factor that may contribute to the development of gambling behaviours among individuals from Asian cultural backgrounds (Kim, 2012).

On the other hand, those from cultures where gambling is not encouraged are likely to retain low gambling rates if they continue to associate with those from their own culture, but the likelihood of gambling increases as they move into a more permissive gambling environment and associate with other groups who gamble more (Raylu & Oei, 2004a).

3.3 Association of literature review with Integrated Tree Model

Through the literature review process, we further refined the definition of components of the Integrated Tree Model and identified the factors around the typology of the tree. Table 5 shows a summary of factors identified.

Table 5. Factors leading to gambling participation and harm arranged by the Asian Integrated Tree Model

Integrated Tree Model component	Factor identified in literature
Analysed concepts Root Internalised culture, beliefs, and values	Internalised normative/cultural values or beliefs of gambling Gamblers' fallacy Culture-specific cognitive distortion Religion Internalised stigma/shame
Trunk Factors that intrinsically identify you as a person	Demographic variables (e.g., gender, ethnicity) Personality variables (e.g., risk taking, impulsiveness) Ability to resist pressure (i.e., resilience) ¹⁶
Branches and leaves Factors from social experiences and processes that identify you	Demographic variables (e.g., marital status, financial status, employment status, education) Age and life stage Stresses from migration including language barriers, boredom, work acculturation, discrimination, loneliness, social isolation, etc. Stressful life events

¹⁶ Personality and resilience factors are often viewed as a mixed factor of "nature" and "nurture" influences. We place them under the "Trunk" for the format of brevity, but note that these factors are also developed through socialisation process.

Integrated Tree Model component Analysed concepts	Factor identified in literature
Fruit and Flowers Expressed psychological and/or behavioural manifestation, outcomes or symptoms	Wellbeing including life satisfaction Gambling disorder and comorbidities Resilience Mental health Physical health
Soil and water- Microenvironments Family, friends, close circle	Parental influence Family trauma Peer influence/ peer pressure to gamble Close community Stigmatisation of gambling
Air, moisture, and ventilation- Meso-environments Task environment (school, workplace) and life environment (community, media, social media)	Accessibility of gambling Advertising Online media and social media Stigmatisation in community environment
Sun, temperature and climate- Macroenvironmental Political/regulatory, Economic, Socio-cultural, and Technological environment	Regulatory difference between host and home country Social/cultural norms on gambling Employment/financial status affected by macro-economic/policy environment Advancement of new techniques, e.g., online gambling

4 Descriptive Analysis

4.1 Sample demographics

4.1.1 Qualitative interviews

We interviewed a total of 25 people representing a range of nationalities/ethnicities; length of time residing in New Zealand (the majority had been resident for 10 years or more at the time of the interview, with six participants having migrated more recently); other demographics such as age group and gender; and whether they had sought help due to their own gambling or were a family member affected by someone else's gambling. The characteristics of the sample are described in Table 6.

Table 6. Interview participant demographics

	Gambler**	Affected other	Total
Generation*			
1st generation	5	6	18
1.5 generation	3	1	4
2nd generation	1	2	3
Age (years)			
20–30	2	0	5
31–40	3	2	5
41–50	2	4	6
51–60	4	2	6
61+	2	1	3
Ethnicity			
South Asian	7	2	9
Chinese	5	4	9
Thai	1	0	1
Vietnamese	1	0	1
Korean	2	2	4
Filipino	0	1	1
Relationship			
Single	2	0	2
Married	9	8	17
Divorced	5	1	6
Gender			
Female	5	7	12
Male	11	2	13
Total	16	9	25

*“Generation” here refers to whether the person first moved to New Zealand as an adult (1st generation), moved with their family as a child or adolescent (1.5 generation) or is the child of migrants (2nd generation), having been born or at least mostly raised in New Zealand. This was a distinction made among the qualitative participants but not in the survey.

**“Gambler” in this context means a person talking about their experiences with harm from their own gambling.

4.1.2 Quantitative survey

The survey collected valid responses from 1,273 Asian adult participants residing in New Zealand, comprising 1,009 online and 264 paper-based responses. Sample demographics are presented in Table 7.

The sample has a balanced gender distribution, with slightly more females (53.5%) than males (45.6%), and a small proportion identifying as gender diverse (0.3%) or preferring not to disclose their gender (0.6%).

Nearly half of the participants (49.5%) were aged between 25–44 years, followed by those aged 45–64 (25.4%), 65 or older (14.1%), and under 24 (11.0%).

In terms of ethnic composition, Chinese participants formed the largest group (32.8%), followed by Indian (27.1%), Filipino (10.8%), and Korean (5.3%) participants. Other Asian ethnicities each represented less than 5% of the sample, while 8.3% identified as Kiwi/New Zealander.

The majority of participants (61.4%) had lived in New Zealand for more than 11 years, with 19.9% residing for 6–10 years, and the remaining 18.8% having lived there for less than 5 years. This indicates that the sample was slightly skewed towards settled migrants.

Geographically, participants were mainly from the Auckland region (61.4%), with smaller representations from Canterbury/Christchurch (12.6%), Wellington (11.5%), and other regions.

The majority of participants (72.6%) were married or living with a partner, while 20.2% were single, and the remainder were either divorced/separated (5.0%) or widowed (1.5%). Most participants were employed (72.3% combining full-time, part-time, casual, and self-employed), while others were retired (11.5%), students (6.4%), or unemployed (5.8%).

The sample was well-educated, with 68.9% holding tertiary qualifications (45.6% bachelor's degree and 23.3% master's degree or above). Regarding household income, 41.7% reported earning between \$70,001 and \$180,000 annually, while 31.1% earned \$70,000 or less.

Table 7. Demographic Characteristics of Participants

Demographic Variable	N	%
Gender		
Male	580	45.6
Female	681	53.5
Non-binary or gender diverse	4	0.3
Prefer not to say	8	0.6
Age (years)		
Under 24	140	11.0
25-44	630	49.5
45-64	323	25.4
65 or older	180	14.1
Ethnicity		
Chinese	417	32.8
Indian	345	27.1
Filipino	138	10.8
Kiwi/New Zealander	106	8.3
Korean	67	5.3
Malaysian	40	3.0
Sri Lankan	35	2.7
Japanese	29	2.3
Hong Konger	21	1.6
Indonesian	14	1.1
Taiwanese	13	1.0
Vietnamese	10	0.8
Thai	9	0.7
Singaporean	8	0.6
Cambodian	5	0.4
Other Asian	16	1.3
Length of Time in New Zealand		
Less than 2 years (New migrants)	130	10.2
2-5 years (Recent migrants)	109	8.6
6-10 years (Long-term migrants)	253	19.9
More than 11 years (Established migrants)	781	61.4
Region		
Auckland Region	781	61.4
Wellington Region	146	11.5
Other regions of the North Island	148	11.6
Canterbury/Christchurch Region	160	12.6
Other regions of the South Island	37	2.9

Demographic Variable	N	%
Relationship Status		
Single	257	20.2
Married/living with a partner	924	72.6
Divorced/Separated	66	5.0
Widowed	19	1.5
Employment Status		
Employed full-time	658	51.7
Employed part-time	146	11.5
Casual employment	21	1.6
Self-employed	96	7.5
Unemployed	74	5.8
Student	82	6.4
Retired	146	11.5
Care-taking	44	3.5
Educational Background		
High school graduate or below	152	13.5
College or vocational training	224	17.6
Bachelor's degree	581	45.6
Master's degree or above	296	23.3
Household Income		
Less than \$50,000	199	15.6
\$50,001–\$70,000	197	15.5
\$70,001–\$90,000	175	13.7
\$90,001–\$140,000	266	20.9
\$140,001–\$180,000	128	10.1
More than \$180,000	109	8.6
Not stated	199	15.6

Note: N = Total number of participants for each variable. Percentages may not sum to 100% due to rounding and “not stated” responses.

4.2 Survey data recoding

To facilitate categorical analysis, we recoded ethnicity for those who indicated multiple ethnicities using the prioritised ethnicity grouping approach. The Asian-related ethnicity is prioritised in the recoding. For example, if a participant is a Fiji-born Indian who reported both Fijian and Indian ethnicities, the Indian ethnicity will be captured for this research. If an Asian participant reports multiple Asian ethnicities (e.g., both Chinese

and Singaporean), the less common Asian ethnicity/country of origin will be captured (e.g., in this case: Singaporean)¹⁷.

We regrouped the ethnicity responses into broader Asian categories for analysis purposes. These are:

- South Asian: Bhutanese, Nepali, Indian, Pakistani, Bangladeshi, and Sri Lankan.
- East Asian: Chinese, Hong Konger, Japanese, Korean and Taiwanese.
- Southeast Asian: Cambodian, Indonesian, Malaysian, Filipino, Singaporean, Lao, Thai, Vietnamese or Burmese.
- Asian New Zealander: Those who were born in New Zealand and reported being of Asian descent or being both of Asian descent and a New Zealander. Note that those who reported being born in New Zealand but self-identified as any other ethnicity but an Asian ethnicity were excluded in the previous data cleaning process.

There is also one Kazakh respondent, categorised under the “Central/Western Asian” category.

4.3 Behavioural patterns

This section presents a summary of quantitative findings, followed with a summary of the related findings from the qualitative interviews (where relevant). This presentation of findings reflects the fact that the quantitative survey findings are the foundation for validating the use of the Integrated Tree Model, while the interviews provide supplementary illustrations, different perspectives, and explanations for these findings.

Caveat: It should be noted at this point that once responses are divided into ethnic groupings and reported risk of gambling harm, some cell sizes become very small. Results can be distorted or artefactual, so it is important to treat findings about difference with caution as these sub-groups get smaller.

4.3.1 Gambling prevalence rate

To gauge gambling behaviours and risk, the survey included questions on gambling frequency and self-reported severity of gambling harm over the previous 12 months. The PGSI-SF produced a satisfactory scale reliability using our sample (Cronbach's $\alpha = 0.774$).

¹⁷ The rarity of a reported Asian ethnicity is judged based on population of that Asian ethnicity in the New Zealand Census 2023.

Overall gambling prevalence in the survey sample

Findings related to gambling frequency and risk of gambling harm are provided in Table 8.

Table 8. Gambling frequency and risk of problem gambling

Gambling Characteristics	N	%
Frequency		
Never	862	67.7
Rarely (< 3 times a year)	234	18.4
Occasionally (3 to 8 times a year)	107	8.4
Weekly or even daily	70	5.5
Risk of problem gambling		
Non gambling	508	39.9
Non-problem gambling	491	38.5
Low-risk gambling	122	9.6
Moderate-risk gambling	109	8.6
High-risk/Problem gambling	43	3.4

The majority of the sample (67.7%) reported never gambling. A further 18.4% participated in gambling infrequently, defined as less than three times per year. Occasional gambling participation, occurring between three to eight times annually, was reported by 8.4% of the sample. Regular gambling participation, defined as weekly or daily engagement, was reported by 5.5% of the sample.

A substantial proportion of the sample (78.4%) was classified as non-problem gamblers. Low-risk gambling represented 9.6% of the participant sample, while moderate-risk gambling accounts for 8.6%. A smaller percentage of the sample (3.4%) was categorised as high-risk or problem gamblers.

Risk of gambling harm prevalence by ethnicity

As Table 9 shows, East Asians reported the lowest problem gambling rates (0.9%), whereas South Asians reported more high-risk gambling (5.9% high risk and 11.2% moderate risk). Asian New Zealanders also show concerning rates of moderate to high-risk gambling, but this finding might be preliminary due to a small subsample size (n=107).

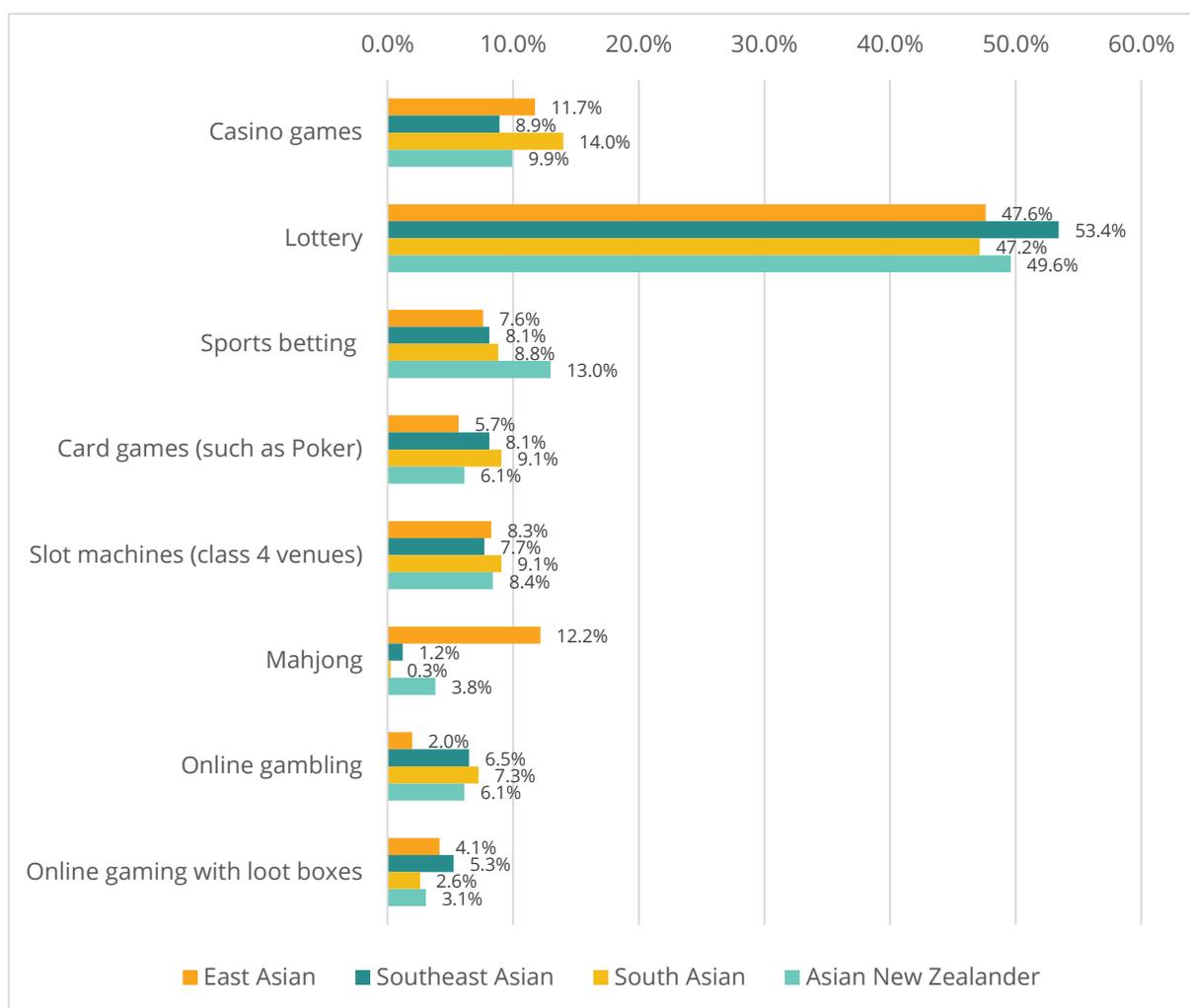
Table 9. Risk of gambling harm prevalence by broader ethnicity group (N / %)

Gambling Risk	East Asian	Southeast Asian	South Asian	Asian NZer
Non-problem or non-risk	473/ 86.6%	183/ 69.8%	264/ 73.9%	78/ 72.9%
Low risk	37/ 6.8%	43/ 16.4%	32/ 9.0%	10/ 9.3%
Moderate risk	31/ 5.7%	26/ 9.9%	40/ 11.2%	12/ 11.2%
High-risk/Problem	5/ 0.9%	10/ 3.8%	21/ 5.9%	7/ 6.5%
Total	546	262	357	107

4.3.2 Patterns of gambling participation

Among participants who engaged in gambling activities within the last 12 months, distinct patterns emerged across different Asian ethnic groups (Figure 4).

Figure 4. Gambling participation patterns by ethnicity



Lottery participation was consistent across all Asian subgroups, with prevalence rates ranging from 47.2% to 53.4%. Mahjong participation was more prevalent among East Asian communities, with a participation rate of 12.2%. Casino gaming showed notably higher engagement among South Asian (14.0%) and East Asian (11.1%) populations compared to other groups.

Card-based gambling activities demonstrated higher prevalence among Southeast Asian (8.1%) and South Asian (9.1%) communities. Sports betting had the highest participation rate among Asian New Zealanders at 13.0%. EGM participation (at Class-4 venues) remained relatively consistent across all ethnic groups, with prevalence rates ranging between 8% and 9%.

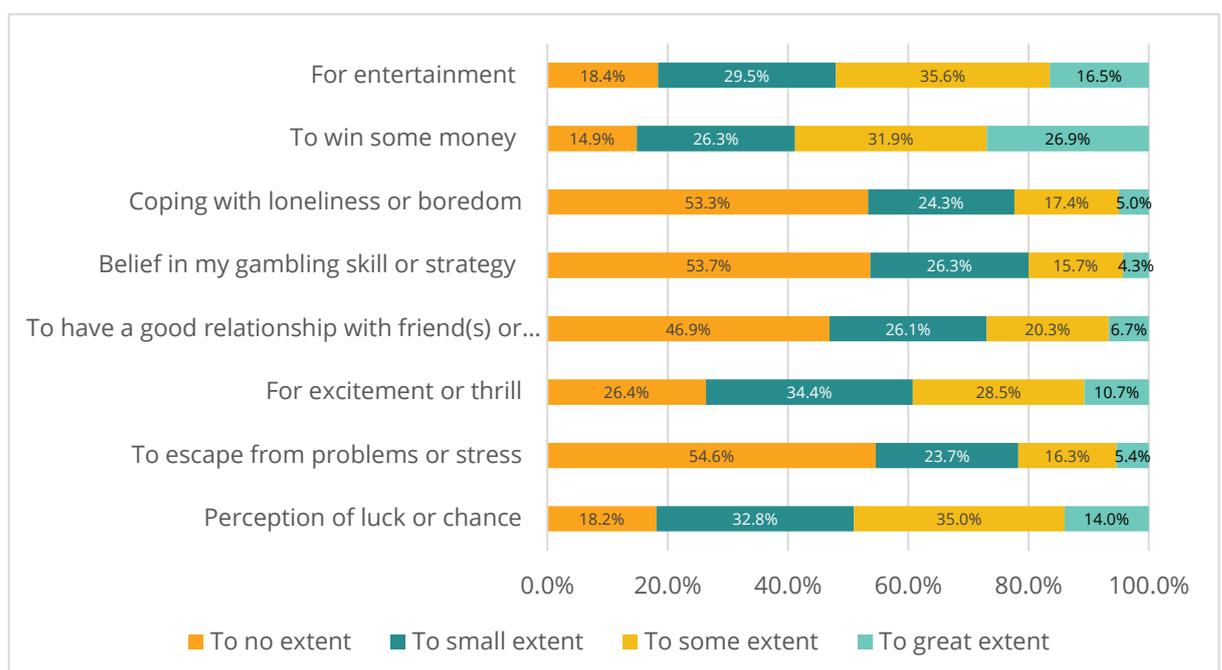
Contemporary digital gambling formats showed varying levels of engagement. Online gaming with loot box components (which do not currently meet the definition of gambling under New Zealand law) exhibited relatively low participation rates, ranging from 2.6% among East Asians to 5.3% among Southeast Asian participants. Online gambling activities demonstrated limited prevalence across all groups, with South Asian participants showing the highest engagement at 7.3%.

In brief, gambling participation generally reflects cultural preferences within each Asian subgroup, with noticeable variation in specific activities like Mahjong and casino games.

4.3.3 Motivation patterns

We examined motivational factors in gambling participation, as well as their influence on progression of gambling risks (Figure 5).

Figure 5. Motivation patterns in gambling participation



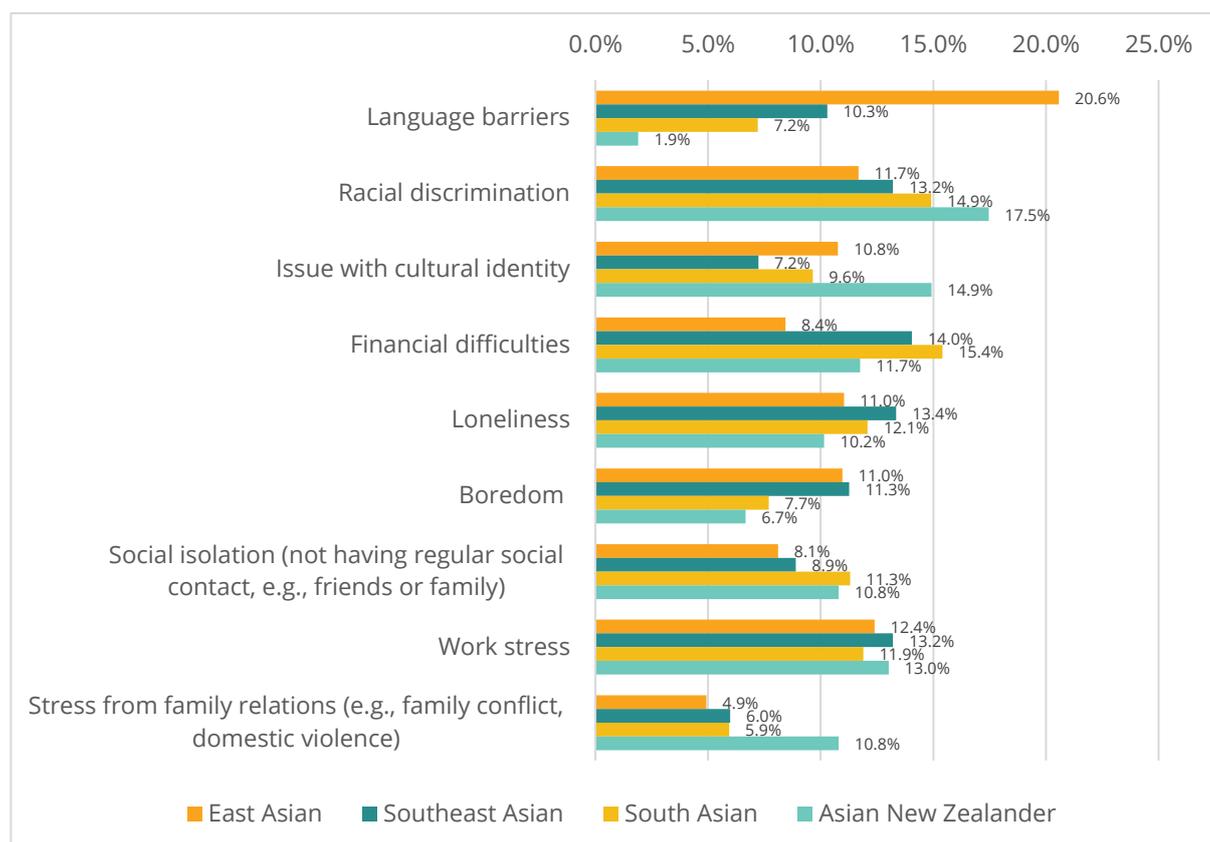
When combining "to some extent" and "to great extent" as an indicator of motivations, winning money is the strongest motivator for gambling participation (58.8% combined), followed by for entertainment (52.1% combined) and due to perception of luck (49.0% combined). Excitement/thrill is also a major factor, with 39.3% of respondents indicating it plays a large role in their gambling participation.

When it comes to motivation patterns, practical motivations (to win money, for entertainment) tend to be stronger than emotional motivations (for excitement, to reduce stress, or to combat loneliness/boredom). Social and escape-related motivations (to make friends, to escape loneliness or boredom, to escape from problems or stress), generally show lower importance.

4.3.4 Acculturative stressors

We asked about settlement challenges in a multiple response question to understand the acculturative stressors faced by Asian communities living in New Zealand (Figure 6), most of whom have been through or are going through the acculturation (settlement) process. Also, as suggested by literature, acculturative stressors (settlement challenges) may be associated with escalated gambling harm for those who use gambling as a coping mechanism (add ref). We examine the association of acculturative stressors and gambling risk categories in the Association Analysis section (section 4.4.3).

Figure 6. Settlement challenges by ethnicity group



As Figure 6 shows, settlement experience includes a range of challenges for different Asian groups.

Language barriers pose a considerable obstacle for East Asians (20.6%) and were less pronounced among South Asians (7.2%) and Asian New Zealanders (1.9%).

Racial discrimination is a shared concern across groups, with Asian New Zealanders reporting the highest incidence (17.5%), closely followed by South Asians (14.9%). Asian New Zealanders' higher reporting might indicate greater awareness and willingness to identify and report discriminatory experiences, rather than necessarily experiencing more discrimination.

Financial difficulties disproportionately affect South Asians (15.4%) and Southeast Asians (14.0%).

Feelings of loneliness and boredom are more commonly reported by East (22.0% combined) and Southeast Asians (24.7% combined), but less so for Asian New Zealanders (16.9% combined).

Work-related stress appears relatively consistent across all groups, ranging from 11.9% to 13.2%.

Family related stress, as well as issues with cultural identity are more prominent for Asian New Zealanders (10.8%, and 14.9% respectively); East Asians also report concerns with cultural identity (10.8%).

4.4 Association analysis of risk factors to gambling severity

We conducted association analyses (e.g., crosstabulation and chi-square tests) to indicate the relationship between explanatory variables and severity of gambling behaviours, to prepare for the regression analysis.

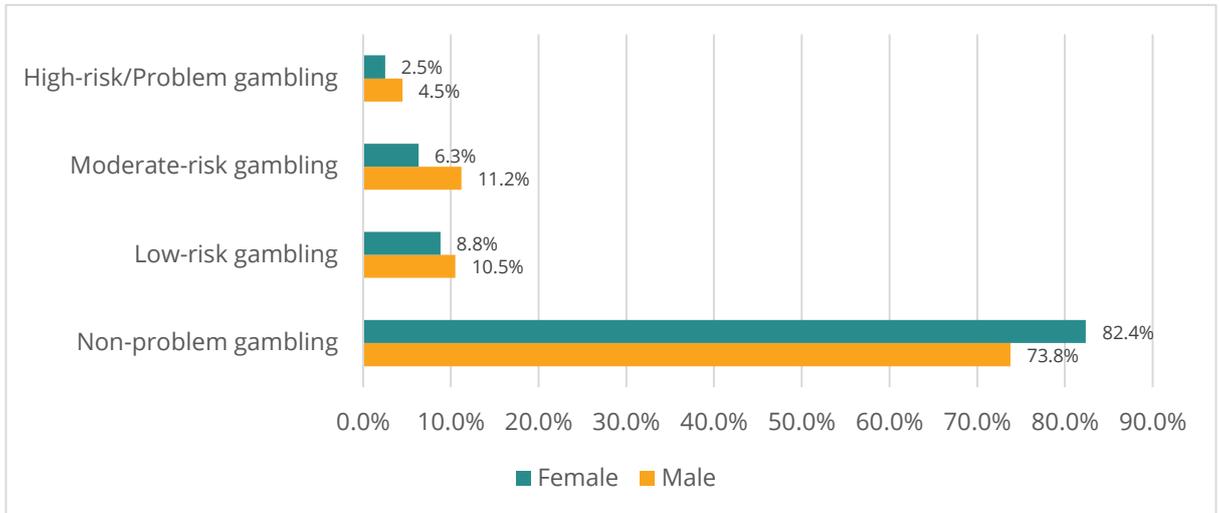
These analyses present findings via bivariate analysis of explanatory variables (i.e., demographics, acculturative stressors and concurrence of life events, personality factors, motivation variations comorbid mental health, life satisfaction and micro-environments) to severity of gambling. This association analysis will help AFS to identify the influence of individual factors on escalated gambling severity before adopting a “more holistic” approach using multivariate modelling in Chapter 5.

We also present the influence of meso- and macro-environmental factors on the development of gambling problems using the qualitative interview findings.

4.4.1 Demographics and risk levels

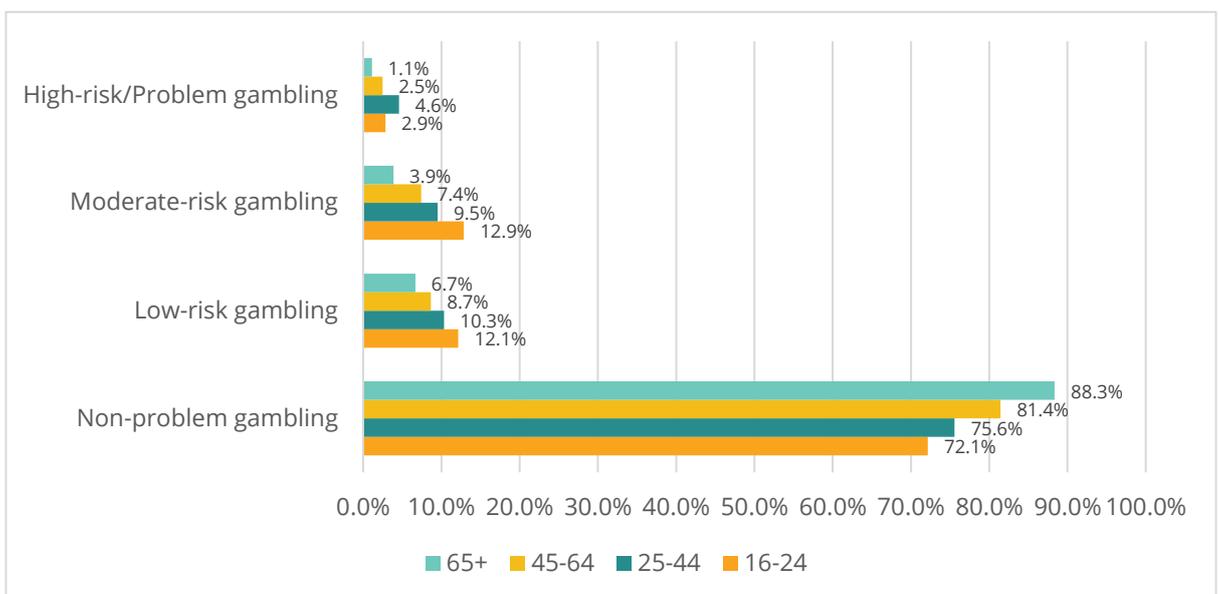
As shown in Figure 7, Asian males are more likely to be moderate risk or high-risk gamblers than their female counterparts (Pearson Chi-Square=17.910, $p < 0.05$).

Figure 7. Gender and risk of gambling harm



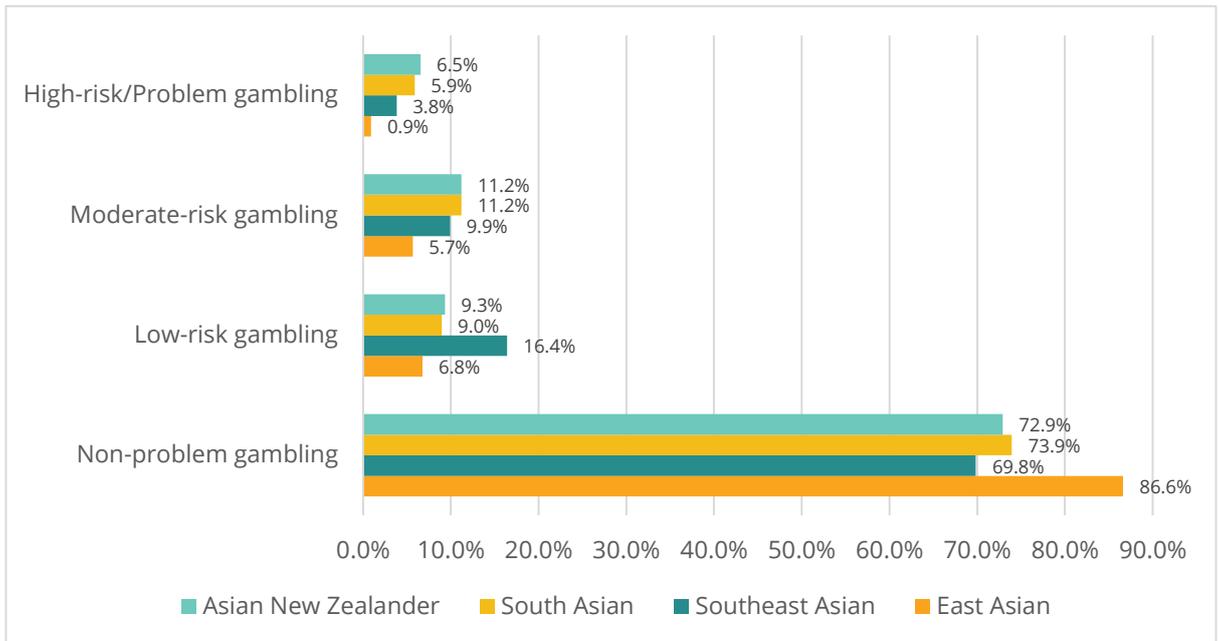
There are significant differences in gambling risk levels across the age groups (Pearson Chi-Square=22.376, $p < 0.01$). As is seen in Figure 8, those aged 16 to 24 and 25 to 44 reported higher level of moderate to high risk of gambling harm.

Figure 8. Age and risk of gambling harm



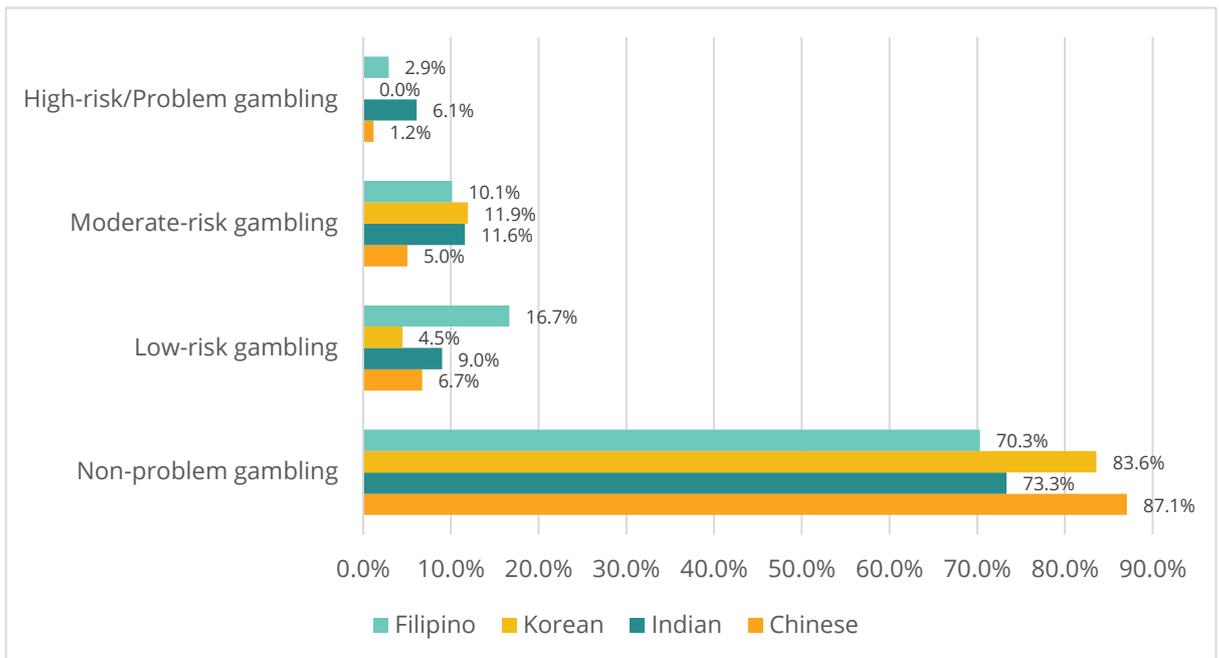
There are significant differences in gambling risk levels across ethnicity (Pearson Chi-Square=55.354, $p < 0.01$). As seen in Figure 9, South Asians and Asian New Zealanders reported higher risk of gambling harm, compared with other grouping of ethnicities.

Figure 9. High-level ethnicity group and risk of gambling harm



We also identified significant differences between specific ethnic groups (Pearson Chi-Square=86.052, $p < 0.01$). A higher percentage of Indian respondents reported experiencing high risk of gambling harm, compared with Filipino, Korean and Chinese (Figure 10).

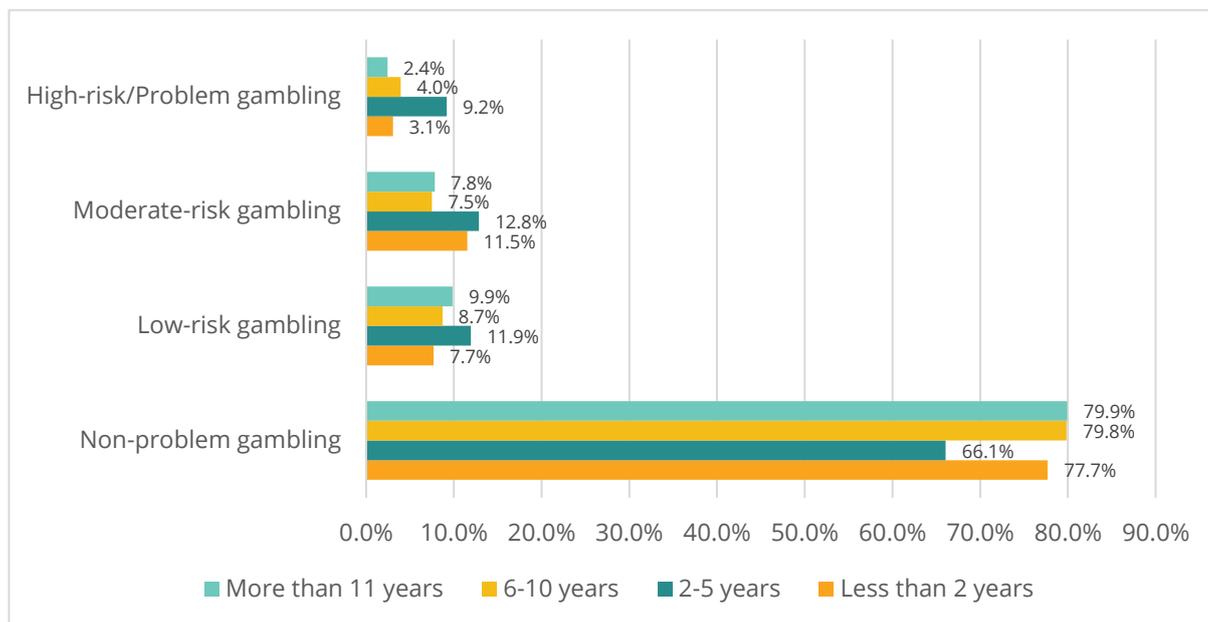
Figure 10. Ethnicity and risk of gambling harm



Chi-square test results ($\chi^2 = 21.505$, $p < 0.05$) indicate a statistically significant relationship between length of residence and gambling severity (Figure 11). Asian migrants living in New Zealand for 2–5 years show the highest rates of risking gambling

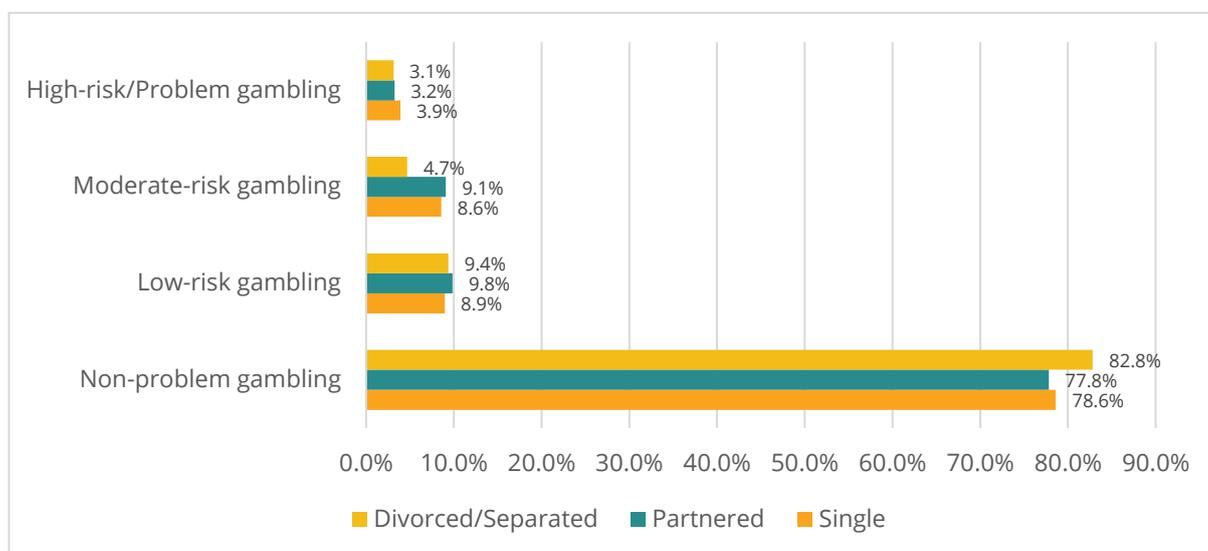
harm (9.2% high-risk, 12.8% moderate-risk), compared with very recent arrivals and well-established residents. Recent arrivals did report experiencing moderate-risk gambling at a rate that was almost as high as the 2–5 year group (11.5%), but were less likely to report low- or high-risk gambling.

Figure 11. Length of residence and risk of gambling harm



As shown in Figure 12, no significant association was identified between relationship status and severity of gambling harm risk ($p>0.05$).

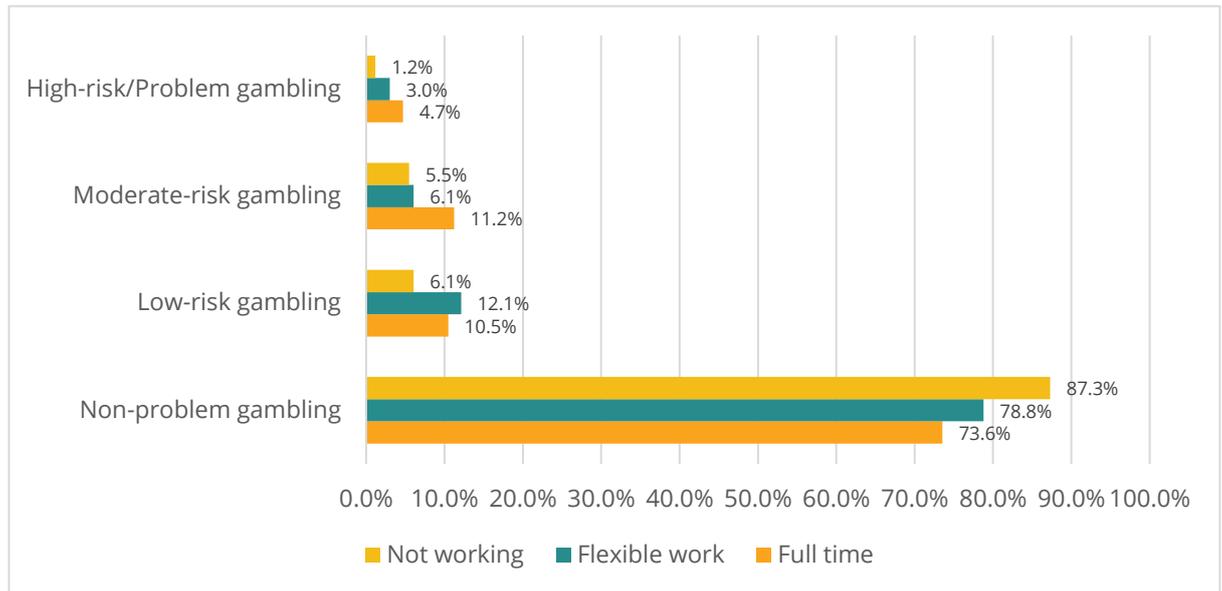
Figure 12. Relationship status and risk of gambling harm



We recoded employment types into three categories: full time employment, flexible working (including contractor, casual work and part-time employment) and not in paid work (which includes students, care givers, the unemployed and retirees).

Chi-square test results ($\chi^2 = 32.031$, $p < 0.01$) indicate a statistically significant association between employment status and risk of gambling harm (Figure 13). Those in full-time or flexible work show higher risk, particularly in the moderate and high-risk gambling categories. Those not in paid work (including student, retired and care giving) show the highest reporting of no risk of gambling harm (87.3%).

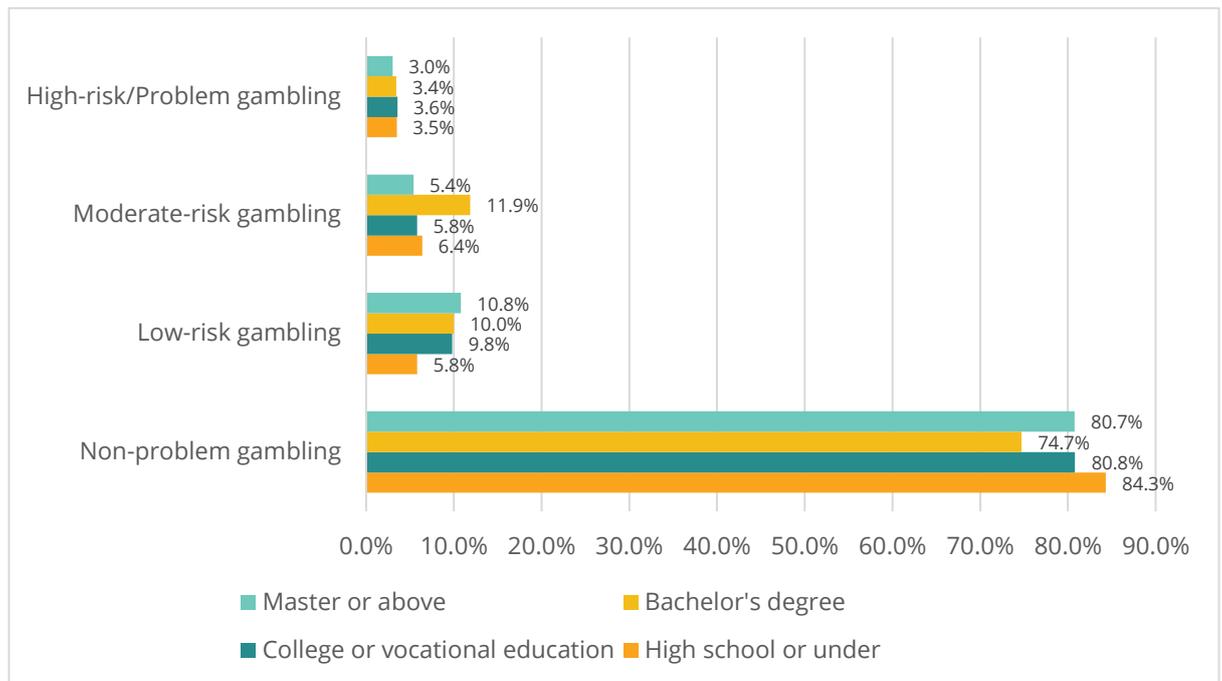
Figure 13. Employment status and risk of gambling harm



Chi-square test results ($\chi^2 = 19.243$, $p < 0.05$) indicate a statistically significant association between education status and risk of gambling harm (Figure 14).

Those with bachelor's degrees reported higher proportions in the moderate-risk category (11.9%), but there is no obvious difference in high-risk gambling across the education groups. This is likely related to the higher proportion of Asian migrants in New Zealand with high education levels, as in our sample.

Figure 14. Education and risk of gambling harm



4.4.1.1 Other demographics and risk of gambling harm

No association was found between the area of residence ($p > 0.05$), nor between household income and risk of gambling harm ($p > 0.05$).

4.4.2 Internalised cultural influences and gambling risk levels

As noted in the literature review, there are multiple ways in which an Asian person’s cultural background may influence their thoughts and behaviours around gambling. When these ideas are internalised, they form part of the “roots” of the Integrated Tree Model. There are other ideas that a person might be aware of (although they may not entirely agree, or take literally), and these are more like the microsystem or climate that surrounds them – the reference points they have for articulating how they wish to behave, including their participation in gambling.

From this section onwards, the qualitative interview findings will be presented along with survey findings. Due to the small sample of interview participants and their familiarity with AFS support services, demographic details are not included alongside quotes, to protect their privacy.

4.4.2.1 Beliefs about luck

Some interview participants talked about familial beliefs regarding luck rooted in their culture of origin, but did not always personally share these beliefs or take the ideas seriously.

Chinese participants discussed a range of luck-related beliefs and cultural superstitions, including how perceived control over luck might influence gambling behaviour. They also talked about money-oriented values and varying attitudes toward financial risk-taking. Notably, only one participant reported actively maintaining beliefs in luck and fate that shaped their expectations of gambling success.

Indian interview participants made fewer direct references to cultural beliefs related to gambling, but did talk about family beliefs regarding superstition and luck. People from other South Asian countries who had a Buddhist background talked about culturally or religiously-influenced beliefs in luck, and in one case, having visions or dreams about what they could do.

4.4.2.2 Superstitions and rituals

I had some superstitions, you could call it, in terms of my luck. I would always want to open the cards [when I played games like] Baccarat. I don't personally have any rituals of my own, but I was really getting into the Chinese rituals and things like that. They really believe in a lot of things... one of the things was cutting cards, which is when you take a card, and you put it in the deck yourself. So, the dealer shuffles it from where you've put [the card] where you want them to shuffle.

Some participants mentioned having family members with strong superstitious beliefs or claimed 'psychic' abilities. While the interview participants themselves may not fully subscribe to these views, such ideas often left a lasting impression and participants found themselves referring back to their family members' beliefs over time. This phenomenon can be described as 'cultural inertia', which refers to the subconscious retention of familial beliefs despite consciously rejecting them.

4.4.2.3 General cultural values

Participants described cultural values regarding how to live a 'good life'. They reported following or rejecting these cultural values to different extents; part of the migration journey for some included living less constrained by cultural expectations, whereas for others it was important to live by the values they were brought up with.

These values may serve as protective factors against harmful gambling, evoke feelings of shame when behaviour conflicts with cultural norms, or even motivate individuals to gamble in pursuit of culturally valued outcomes. Although being identified as a 'gambler' was socially shameful, the desire to look wealthy, and to be seen as a good provider, could feed into gambling activities. An overall observation in the literature is that most Asian cultures value 'saving face' (maintaining reputation), and this came through in some interviews.

In the quantitative survey analysis, three factors were extracted from the Gambling Related Cognitions Scale (GRCS): “perception of predictive control”, “culture-specific biases around gambling” and “gambling related expectancies”. The factor analysis process is detailed in section 5.

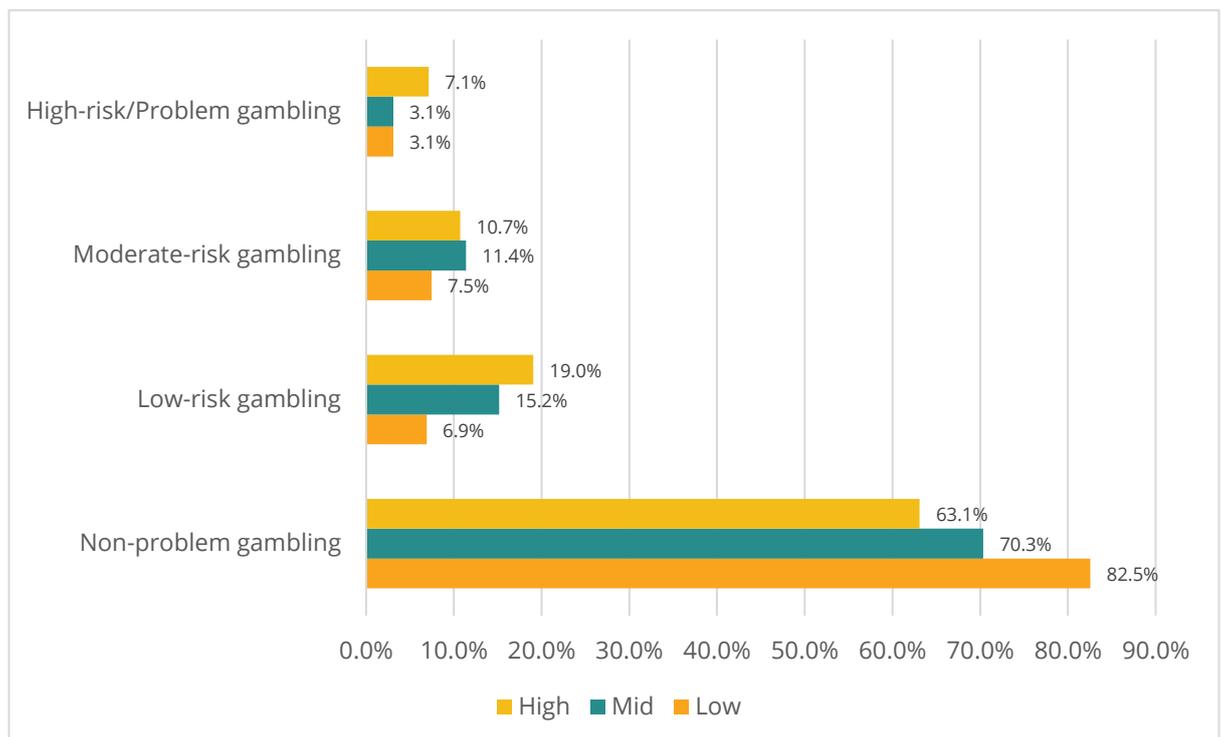
We undertook a linear regression of all three cognition factors (using factor scores) against severity of gambling and found that all three aspects of cognition are significantly related to escalated severity of gambling, all other things being equal. Specifically:

- Stronger beliefs around biased learning from previous gambling experiences and perception of self-ability to predict outcomes (generic gamblers’ fallacy) is related to more severe gambling harm (t=4.176, p<0.01).
- Cultural and superstitious beliefs around gambling also contributes to heightened gambling risk (t=2.041, p<0.05).
- Gamblers’ beliefs about the positive rewards that gambling can bring about can also increase the severity of gambling harm (t=2.043, p<0.05).

4.4.3 Acculturative stress and risk levels

Crosstabulations indicated a strong relationship between cumulative acculturation stresses and increased gambling risk (Chi-square=39.148, p<0.001). This evidence was also supported via a linear regression analysis (t=4.491, p<0.000): as one’s acculturative stressors increase, the risk of gambling harm increases (Figure 15).

Figure 15. Level of accumulative stress and risk of gambling harm

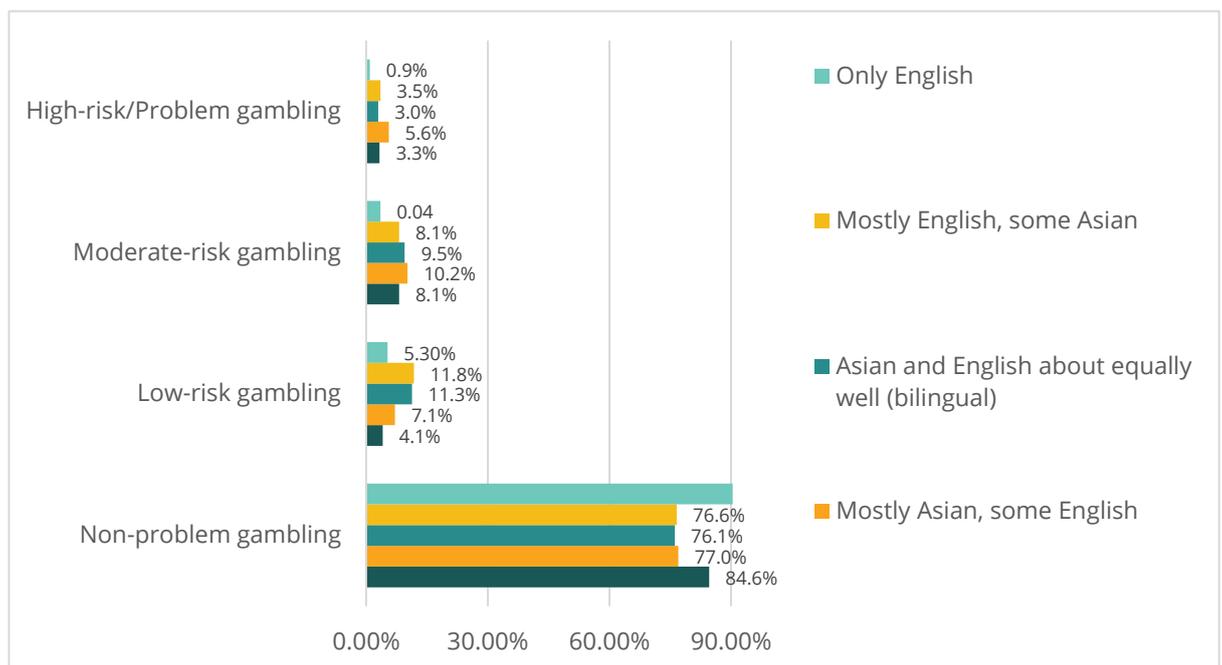


As noted earlier, Asian migrants living in New Zealand for 2–5 years show the highest rates of risky gambling (9.2% high-risk, 12.8% moderate-risk), compared with very recent arrivals and well-established residents. This suggests that settlement challenges might be more pronounced for the 2 to 5 years of settlement period. The findings on the influence of acculturative stress triangulate this: shorter residence length often coincides with settlement challenges and significant life transitions, and gambling might be used as a coping mechanism for settlement stress.

Besides the acculturative stressors, we also adopted three key measures from a short-form acculturation scale: language utilisation; place(s) of upbringing; and composition of social connections. These are the primary proxies of an individual’s acculturation levels (Park et al., 2021).

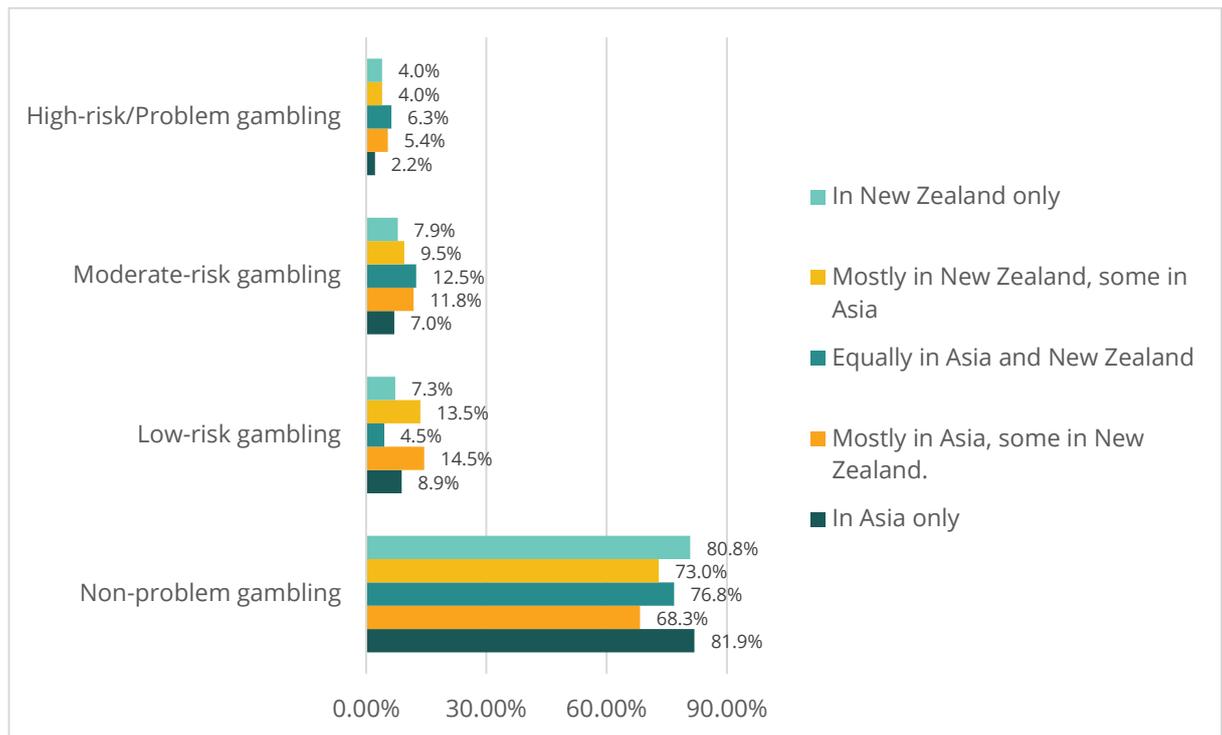
Figure 16 shows that those who are bilingual or use mostly or only Asian languages reported higher risk of gambling harm (Chi-square=23.819, $p < 0.05$).

Figure 16. Language use and risk of gambling harm



As shown in Figure 17, migrants who were raised in both countries, and those who grew up mostly in an Asian country reported more risk of gambling harm (Chi-square=29.777, $p < 0.01$).

Figure 17. Place of upbringing and risk of gambling harm



Composition of social connections (whether a person’s social network consists of more migrant friends, or more local friends) is not associated with gambling risk ($p>0.01$).

4.4.3.1 Interview findings on migration stress, mental health and gambling harm

On the topic of migration stress and its relationship with mental health and gambling harm, loneliness and shame came up a lot in the interviews. Shame was partly due to engaging in an activity that was not socially approved, and may undermine their family’s interests. This was despite the fact that in some cases people gambled with hope of improving their family finances.

Migration stresses can carry down through the generations, and we heard about children affected by parents’ struggles as migrants who later went on to develop maladaptive coping strategies including gambling. Early childhood trauma was described by several participants from different demographic groups. Some also observed that members of their family had developed mental health problems as a result of their parents’ difficulty with settling in after migrating.

Experiences with racism were brought up by some, mostly younger participants, as a contributor to migration stress. This aligns with the quantitative findings in which younger respondents were more conscious of racism as a source of stress.

The first time I felt a couple of incidences [of racism] that was quite shocking for me. That's how I think things started going down for me. And then I kind of isolated as well. There were immigration issues, you need to find a job, you are on a visa, and all those stressors come along. And during that time as well, [I was] gambling.

Some participants gravitated to gambling because they found life in New Zealand boring, without the types of activities and social opportunities they used to enjoy.

I guess it was money too, but it was also to get away from other stuff. Just like the rush of dopamine. Like, you know, it makes the time go fast when you are at the casino or pub.

4.4.4 Concurrency of life events and risk levels

We ran a simple linear regression that uses the gambling risk as the dependent variable and concurrence of life events as the explanatory variable. The result indicated that increased number of life events, as a broader measure of life stressors, is associated with escalated risk of gambling harm ($t=8.401$, $p<0.01$).

4.4.4.1 Interview findings on the interaction between life stage events and gambling harm

Most participants had been in New Zealand for some time and had got some distance from the worst of their gambling problems, by the time of the interviews. This meant they could look back at their reasons for migrating, the life stage they had been in then and how things had changed now.

Interview findings concurred with the idea that migration could be one among many transitional life events that, when happening in the same timeframe, could add up to stress and gambling as a coping mechanism.

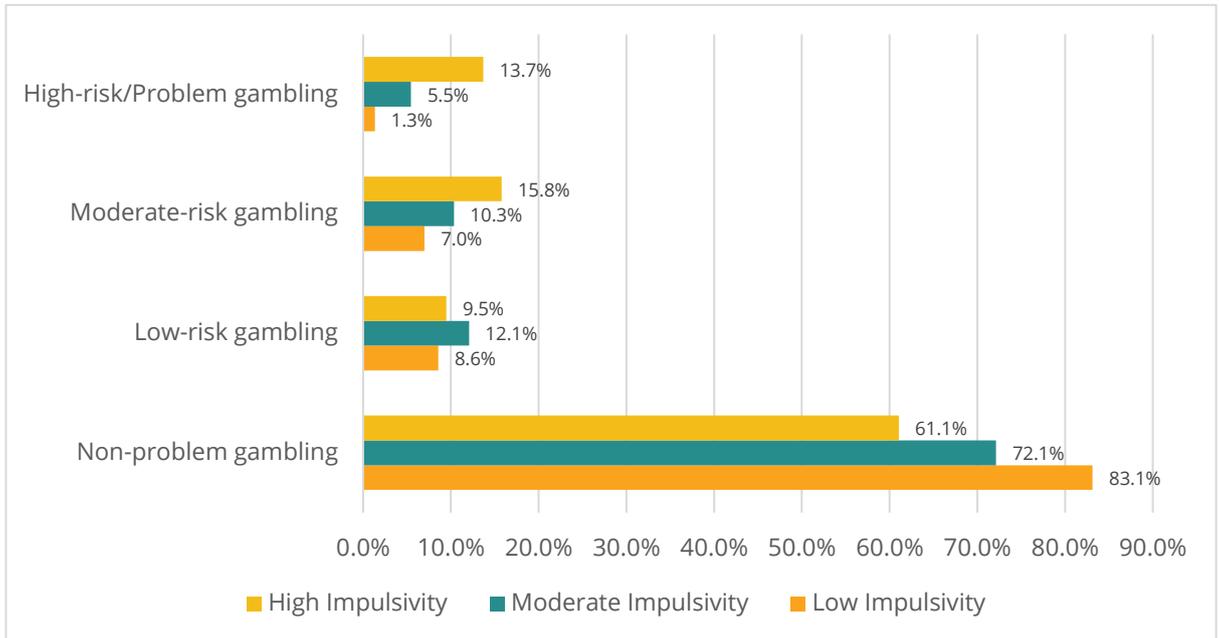
The divorce and client's suing me happened at the same time. I was isolated and depressed... I had nothing and felt suicidal... I went to see my manager to quit my job. First angel for me [who encouraged seeking help] was the manager.

Some participants noted that the onset of gambling harm was linked to dramatic changes in life circumstances. Examples included loss of employment, relationship breakups, social isolation due to new routines away from support networks (including in COVID lockdowns), changing or dropping out of education, and difficulties related to running a business.

4.4.5 Personality factors and risk levels

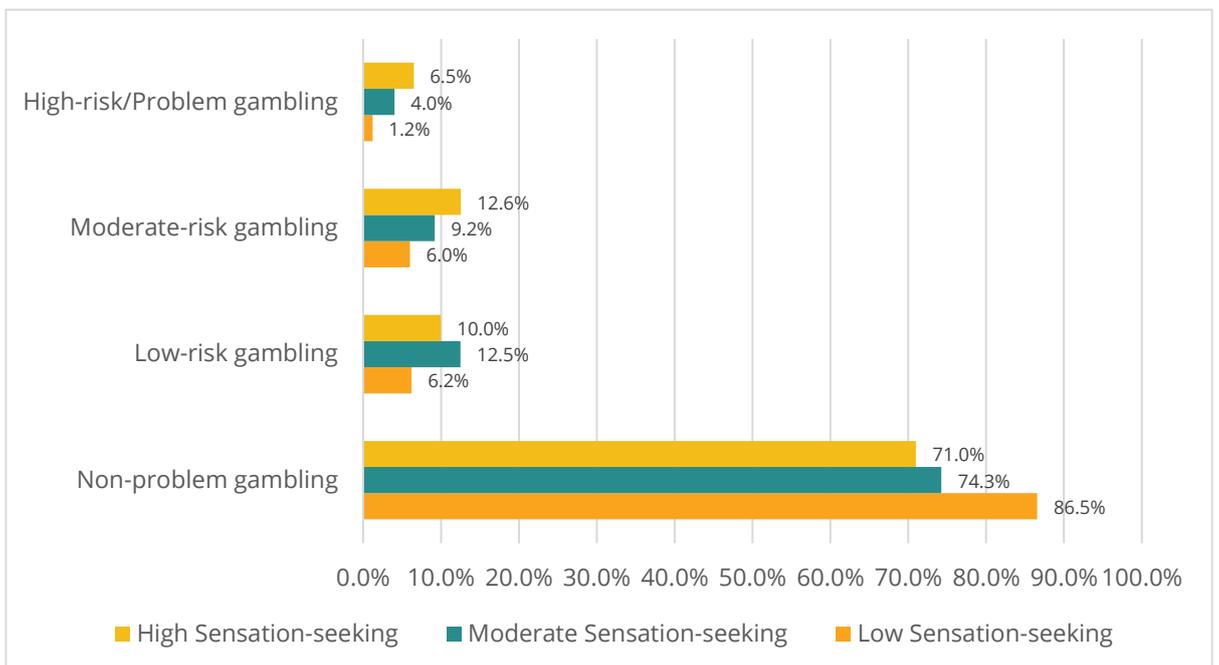
The crosstab results indicate that those with high impulsiveness reported more risk of gambling harm (Chi-square=65.099, $p < 0.01$) (Figure 18).

Figure 18. Impulsiveness and risk of gambling harm



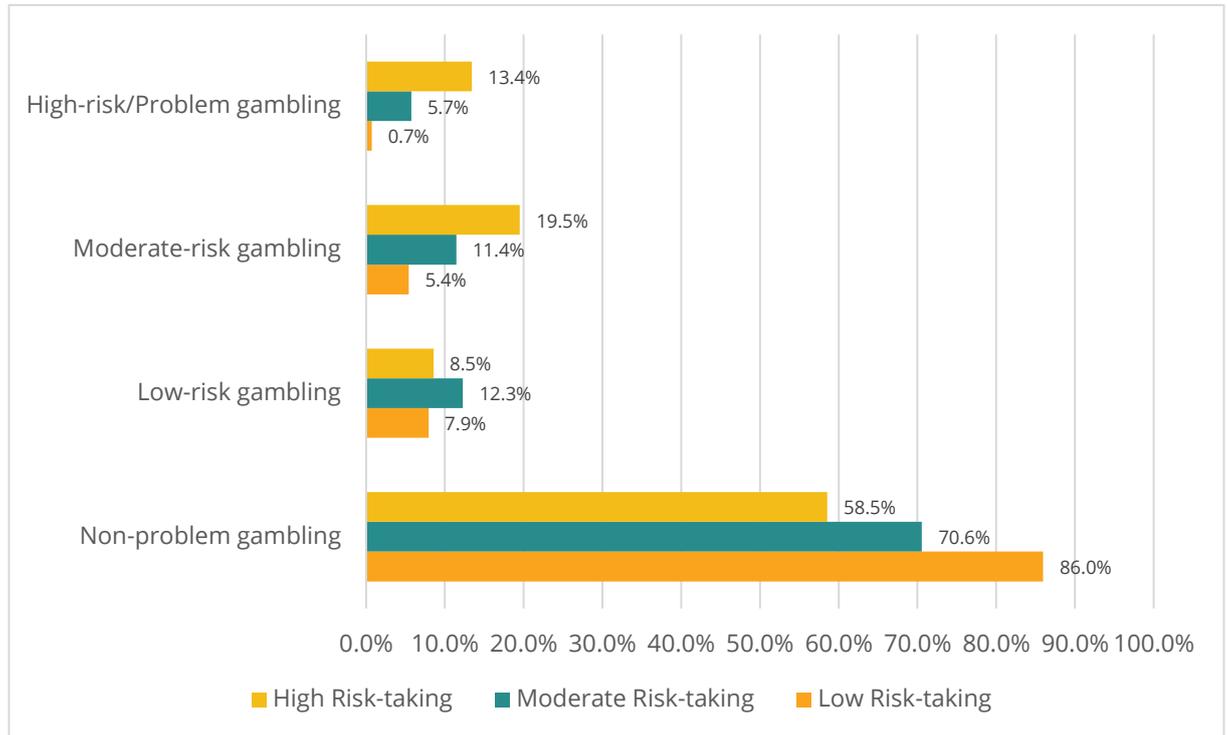
The crosstab results indicate that people with high sensation-seeking personality reported more risk of gambling harm (Chi-square=40.345, $p < 0.01$) (Figure 19).

Figure 19. Sensation seeking and risk of gambling harm



The crosstab results indicate that those with a high preference for risk taking reported significantly higher gambling risk (Chi-square=90.564, $p < 0.01$) (Figure 20).

Figure 20. Risk taking propensity and risk of gambling harm



4.4.5.1 Personal characteristics and motivations among interview participants

Interview participants discussed how their or their family member’s personality and preferences related to their motivations to gamble. Personal motivating characteristics like risk taking and impulsiveness were frequently mentioned.

In many of the participants’ cultures of origin, gambling was more common among men than women (with the exception of social card and table games). Some men with lower self-esteem stated that they were drawn to gambling as a way of gaining approval and showing they could win, or of gaining attention when they felt they were not as high-achieving as their peers. There were comments about the influence of “macho” cultural backgrounds. Others wanted to prove their cleverness and show they could beat the system to find a way to get money for little effort.

My husband’s father died when he was young, which may cultivate his low self-esteem and high reliance on perception of others. [I believe] this personality was an important factor that caused his constant gambling.

The women in this sample tended to be less motivated by risk taking and put less emphasis on the idea that they could beat the odds to win large amounts of money.



They reported different motivations for gambling, typically related to distraction from poor mental health or stressed/broken relationships.

The desire for sensation seeking came through somewhat in participants' descriptions of the casino environment. Some also talked about feeling rebellious – from their culture or family of origin, or against social norms – and wanting to have new experiences on their own terms.

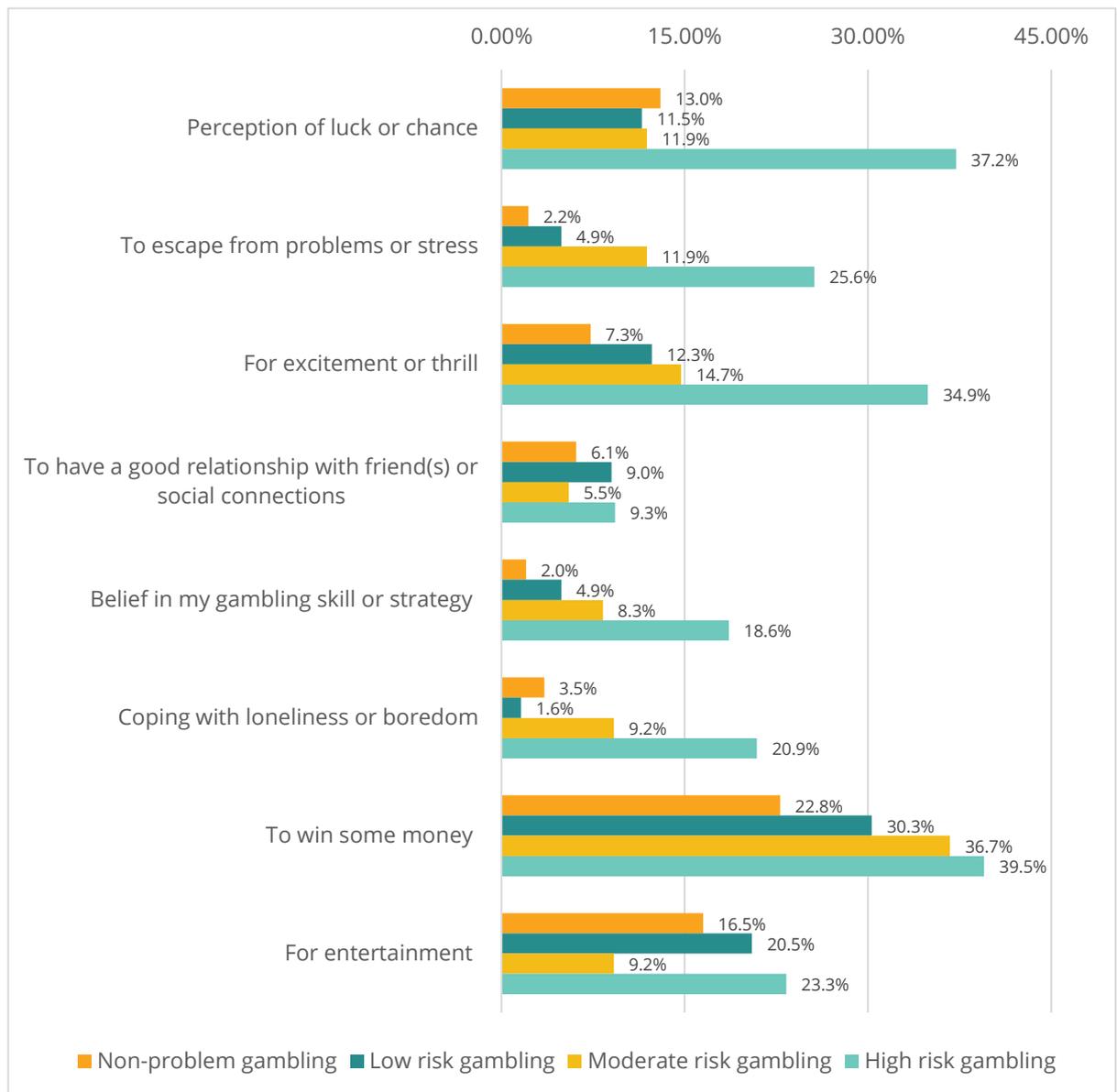
A motivator for several participants was to have more social contact, and the more extroverted sometimes used gambling as a way of bonding with friends and family.

Participants who appeared to have more insight into their own motivations sometimes recognised that they had been displaying disordered behaviour as a response to stress, so they needed to channel these tendencies in other ways. Their process of finding something else to distract from gambling sometimes included online games, shopping, or other compulsive behaviours. People found that ultimately settling on a less destructive or more healthy replacement behaviour helped with recovery. Having support people to contact helped to redirect these impulses; some had gained valuable friendship through peer support groups connected to their counselling service.

4.4.6 Motivational factors and risk levels

As Figure 21 shows, across all risk categories, the pursuit of monetary gain stands out as the primary motivator for gambling among the survey respondents. Financial incentives consistently drive individuals to gamble, regardless of whether they are non-problem, low-risk, moderate-risk, or high-risk gamblers.

Figure 21. Motivational factors and gambling risk categories



As gambling severity increases, the influence of emotional motivations becomes more pronounced, particularly among high-risk gamblers. Examining the shift in motivations associated with escalating gambling severity reveals a transition from gambling as a recreational activity to a behaviour driven by more intense psychological needs. For moderate- and high-risk gamblers, the desire to escape from stressors, manage feelings of loneliness or boredom, and seek sensations becomes markedly more important.

For instance, the use of gambling as a means of escapism increases significantly, with a large proportion of high-risk gamblers (25.6%) reporting this as a key motivator compared to their non-problem (2.2%) and low-risk gambling (4.9%) counterparts. Similarly, gambling to combat loneliness and boredom sees a considerable rise in prevalence among high-risk individuals (20.9% versus 3.5%/1.2%), as does the pursuit of excitement and sensation (34.9% versus 7.3%/12.3%). These patterns support existing literature that identifies gambling as a coping strategy for reducing stress and enhancing mood.

Furthermore, cognitive drivers (i.e., illusions of control, and overconfidence in gambling skills) are notably more prevalent among high-risk gamblers, compared to low risk or non-problem gamblers (37.2%/18.6%). These cognitive motivations, alongside emotional motivators, co-create complex motivational profiles in moderate- and high-risk gamblers. The convergence of multiple motivational factors may, therefore, serve as a strong indicator of elevated gambling risk.

In contrast, social motivations for gambling appear to remain relatively stable across different risk levels. This suggests that social aspects of gambling, in isolation, may not necessarily contribute to increased gambling risk of the Asian communities in New Zealand. However, it is possible that social motivations interplay with practical, psychological or cognitive drivers (such as the desire to win money or escapism), to make one's gambling behaviours more problematic.

4.4.6.1 Cognitive distortions discussed in interviews relating to luck and skill

In addition to the motivations described above, interview participants – who were selected due to having experienced harm from gambling – discussed the role of cognitive distortions aligned with the 'gamblers fallacy' that motivated their gambling. Participants were mostly speaking in retrospect about their own prior beliefs, or about their family member's beliefs that linked to experiencing gambling harm. The cognitive distortions they described typically involved either the belief that they could predict their luck or that they could influence outcomes through skill, thereby increasing their chances of winning.

It was common for participants to reflect that they no longer held these beliefs as strongly, having had more experience with gambling. However, some underlying superstitions and motivations could remain, even if participants were no longer applying them to gambling. Some people still believed strategies to win at gambling might work, but they were less sure about this than they had been.

I think you can... maybe not lose as much. There has been proof that people have won a lot of money using the techniques. But how long that works is a different story.

Others felt their previous attempts at being strategic were never going to work.

When I gambled, I tried to use my mind and think strategically. For example, if I kept losing by betting on one side, I would switch to the other side, hoping for a win. I believed that if I changed my approach, I might win, but in the end, no strategy could guarantee success. Gambling tricks you into thinking you can outsmart it, but that's just another illusion.

It was common for participants to become more certain, in retrospect, that gambling activities were set up to make them feel like they had more control than they really did.

When it first started, I'd win here and there and thought maybe I'm a lucky person. Also, when you're putting in money, you're losing so little at a time that you don't realise it. I thought I had a skill, every time I changed the bet I'd get free games. I don't think that anymore.

Some participants found that the challenge of beating the system was part of the reason gambling appealed. They noticed their own and other gamblers' strategies.

Every gambler has it... I'm pretty sure about that. Some people have numbers... whenever you're gambling, you'll see there'll be a graph behind you. In casinos, some people speculate using those graphs. Baccarat, basically, it's head and tails. How many times the heads came, how many times tails came and then we'll show you the percentage and stats... Different numbers basically it's just your mind trying to crack things... like it doesn't have any evidence or backing towards it.

Family members also talked about their relative's conviction that their gambling wins were linked to skill, while losses were not (the 'gambler's fallacy').

While luck seemed real, belief in the ability to predict or influence luck was linked to cognitive distortions around gambling.

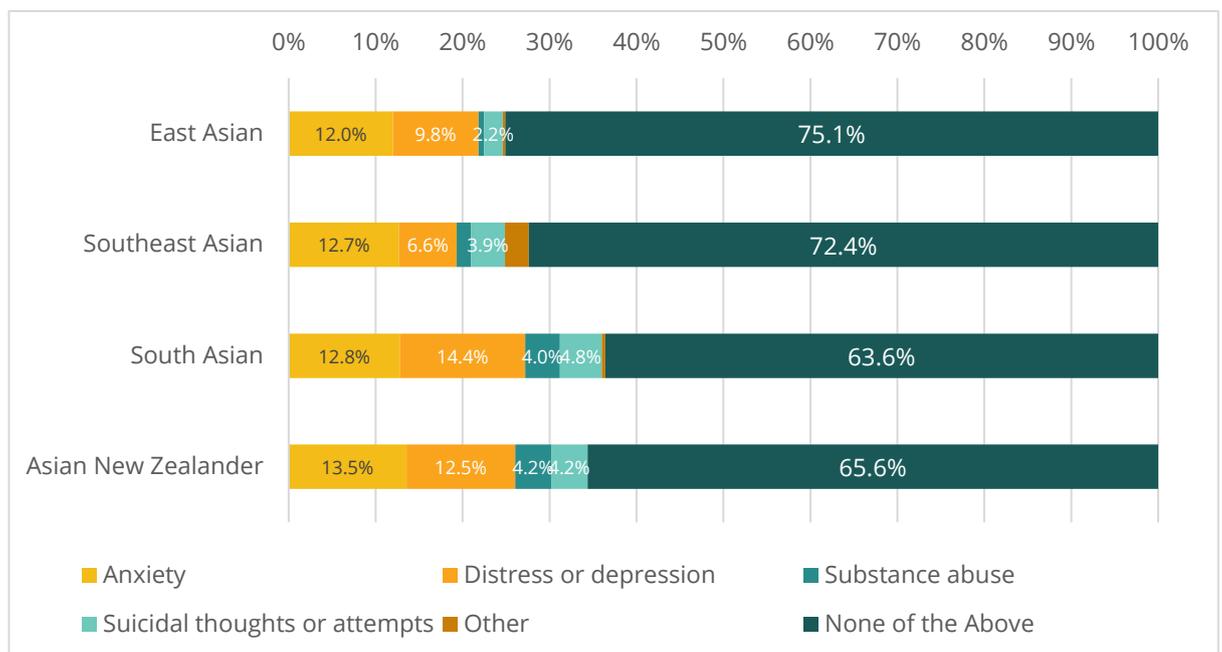
I think there is luck, but I have been unlucky... It's hard to explain luck, but there's luck involved in everything.

In common with the wider literature around gambling, some participants talked about an early experience of beginners' luck being a motivator to keep gambling, even after they went on to lose more than they won.

4.4.7 Comorbid mental health and risk levels

We asked those who had gambled in the last twelve months about comorbid mental health and substance use issues (Figure 22). We found that anxiety and depression are the most commonly reported mental health issues (varying from combined 19.3% to 27.2%) across all Asian groups that reported gambling behaviours. South Asians and Asian New Zealanders show higher rates of mental health comorbidities. Fewer than 5% across the Asian groups have developed severe mental health symptoms like suicidal thoughts. Similarly, substance abuse appears to be relatively low across all Asian communities. There are 7 responses are related to “other” most of whom did not specify their condition, although one stated “difficulty to sleep”.

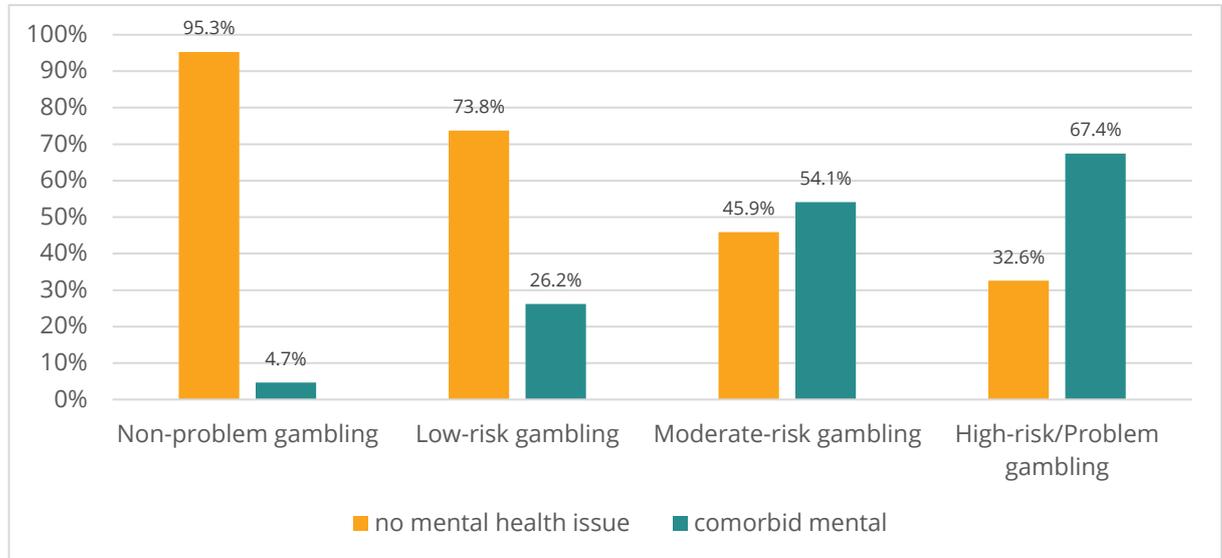
Figure 22. Experience of mental health and substance abuse conditions by ethnic group



To examine the relationship between severity of gambling and comorbid mental health, we created a dichotomous variable to capture whether a gambling participant reported having comorbid mental health issue(s). The cross tabulation revealed a positive covariance between gambling risk and mental health comorbidity.

As shown in Figure 23, the proportion of those having comorbid mental health increases as gambling risk level increases (Chi-Square=352.621, $p < 0.01$).

Figure 23. Mental health comorbidity and risk of gambling harm



4.4.7.1 Interview findings on mental, physical and family health

The qualitative findings captured a broader range of comorbidities that occurred either prior to or alongside gambling harm. When describing themselves or their significant other who gambled, participants frequently talked about mental health diagnoses, anxiety and depression. The order of correlation was not always clear. Several had experienced suicidal thoughts at the time that they were most distressed by the impact of their gambling. Mental health issues, in most cases, made their gambling issues worse; and conversely, those who had gambling problems reported having had worsened mental health.

Losing money made me mentally unclear, and when I ran out of money, it took a toll on my thoughts and emotions. I couldn't enjoy life anymore; I was always thinking about the money I lost, constantly tired and regretful. When I lost everything, it brought many difficulties. It consumed my thoughts, and without money, I became depressed and frustrated.

Heavy drinking and sometimes smoking, especially among younger South Asian men, came up among the comorbid behaviours that were becoming problematic in the same timeframe as gambling. Some experienced trouble with the law from offenses like drink driving or theft.

Some participants described losing interest in eating and exercising properly, or not having money to keep themselves physically comfortable. Others describe physical health events such as heart problems related to gambling and stress.

I started losing weight and not eating properly. Stopped cooking. Stopped working out. Stopped going [to the] gym. And start drinking hard. That's only after losing the money. Alcohol is the only solution for me to remove that stress, otherwise I couldn't sleep at night time.

Some women in the group described either the impact of their gambling spouse becoming aggressive during arguments, or they themselves developing gambling problems as they used it as an outlet to get away from abusive relationship dynamics.

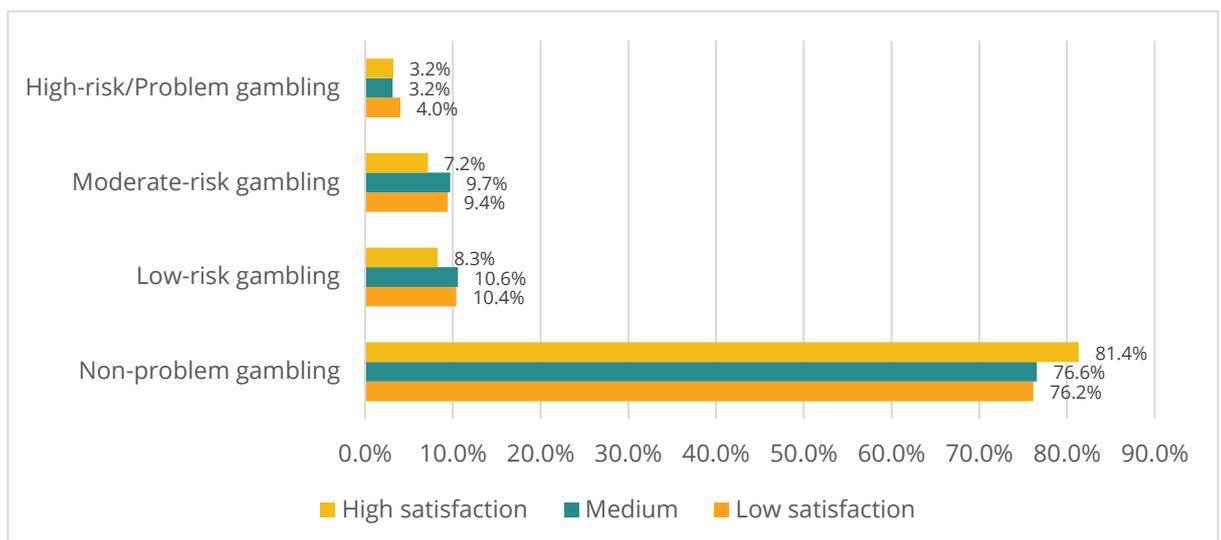
Some parents and spouses also mentioned their suspicion that the person gambling displayed neurodivergence such as Attention Deficit Hyperactivity Disorder (ADHD) or more rarely conditions like Obsessive Compulsive Disorder (OCD). Some participants had initially been influenced by culture but described their own superstitious tendencies in terms of mental health-related cognitive distortions.

I'm a very big believer in fate and numbers having significance and stuff. For me, my lucky number, even though my favourite number is 9, my lucky number is 8 because I've noticed that if I have eight in my hand, I somehow win. Just recently a psychologist was like, yeah, you've got OCD... And I was like oh that that actually makes a lot of sense 'cos I also believe in like if I don't do something, something bad's gonna happen you know, like, very superstitious.

4.4.8 Life satisfaction and risk levels

The relationship between life satisfaction and gambling risk did not reach statistical significance (Chi-square=5.181, $p > 0.05$). Besides self-reporting bias caused by potential socially desirable responding, one explanation is that both gambling severity and life satisfaction perception might be influenced by some moderating factors (e.g., personality traits, or social support).

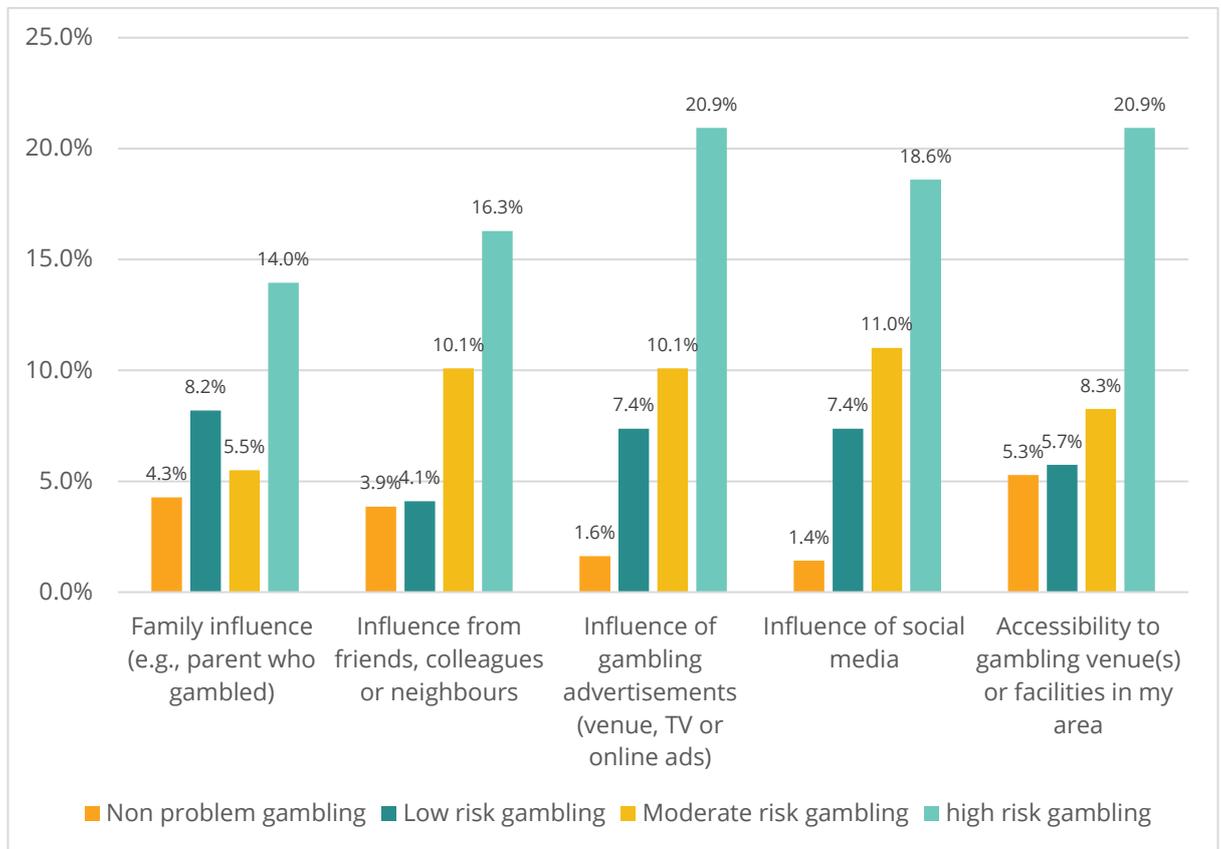
Figure 24. Life satisfaction and risk of gambling harm



4.4.9 Microenvironments and risk levels

Figure 25 shows the relationship between various social and environmental factors and gambling risk categories.

Figure 25. Micro environmental factors and risk of gambling harm



Across all environmental factors, those who report high-risk gambling show the most experience with these micro-environmental factors, particularly the influence of gambling advertisements and accessibility to gambling venues (both at 20.9%).

Gambling advertisements and accessibility to venues were the influences most reported by those with high risk of gambling harm (both 20.9%), followed by social media influence (18.6%). Family and friend influences were lower compared to media and accessibility.

Family influence shows a different pattern across risk categories, from 4.3% for non-problem gambling to 14% for high-risk gambling. A higher proportion of those with low-risk gambling reported family influence compared with those at moderate risk (8.2% compared to 5.5%). High-risk gamblers reported much higher influence from friends, colleagues, and neighbours (16.3%) than other groups.



4.4.9.1 Interview findings on social influences

Family

According to interview participants, family who gamble or gambled are a strong influence. This includes fathers who take risks in business, and (mostly) male family members who gamble to socialise and show off.

Several participants also described themselves or their family member developing problematic gambling in their home country, which led to gambling as a coping behaviour, or further curiosity about new forms of gambling, upon settling in New Zealand.

[It was in my] DNA, from my childhood, I was interested in gambling activities and did stock betting from my early age. I arrived at my early age in NZ and no-one was here. I had lost money because of stock betting in Korea. When I heard my friends won money a lot from gambling on stocks, I believed I could as well. Also, when I had stress, I gambled. I did not know how to release stress.

On the one hand, strained family relationships could be what led people to use gambling to avoid problems, or to impress people by providing more for the family, but on the other hand, the desire to look after their family was also a motivation to stop.

In my family, the idea has always been that they want me to become a good person. Someone who works hard and is determined to succeed. They encouraged me to stay away from gambling, drinking, and smoking because those things lead to addiction and self-destruction. Everyone in my family advised me to avoid anything that would make me lose control of my life.

Friends

Several participants mentioned that Chinese migrants among their social circle frequent casinos as a social opportunity, while others (mostly South Asian) talked about taking visiting family and friends to casinos as a leisure and sightseeing activity.

Romantic partners were also a potential influence, with several participants talking about former partners who had introduced them to gambling or had serious gambling problems themselves. These relationships sometimes broke up because one partner continued to gamble. Some young men had felt pressure to impress girlfriends by winning and being able to buy expensive things.

A few interview participants discussed how successful settlement experiences (such as securing employment and making friends) can be a 'double-edged sword'. An increase in income can conceal losses as people still have enough money for a while. Promotions at work can lead to more money and leisure, but the success can also trigger

overconfidence and lead to their gambling becoming out of control. The following translation of interview notes is an example of the interaction of emotional, social and cognitive motivations to gamble:

A smooth acculturation process. Full time work from the early settlement to now. Successful acculturation (More income, acknowledgement by boss, more confidence, more free time) could be an influencing factor of his gambling.

New social relationships, and new opportunities to find entertainment with extended family and work friends, could be positive. Gambling, like drinking, could sometimes provide a positive social opportunity, but in some cases then became the cause of problems. Some affected family members felt that certain friends had become a bad influence regarding gambling. There were some “face” aspects to keeping up with friends’ and associates’ gambling, as well as desire for social interaction and fun. New groups of friends through work or migration are sometimes seen as “bad” influences. There were a number of mentions of friendships with other migrants from different places who bonded by going gambling together.

He was like ‘nah keep playing, here’s another \$20’, then I won \$300. Went back the next day, thought I’ll win some more, just a bit of fun. Then it became a thing every time we went to work, have a bit of a flutter... I’d go and keep him company then it became almost a bonding kind of session but get carried away. Mostly just at bars with pokies. Then started going back to the casino.

4.4.10 Interview findings on physical, marketing and cultural environment

If someone gambled in their own country, they were likely to take up gambling in New Zealand but in different forms and in different contexts, because of the legality and availability of different gambling activities.

Gambling advertising was mentioned a lot in interviews. This included online as well as physical advertisements. For some it was a trigger to consider gambling. Some people were at a point where they could walk by the ads and feel proud that they are no longer influenced by them, or did not notice them much. Others found the advertising upsetting as a reminder of their or their family member’s experience. Some tried to find a way to stop the ads coming up on their phone.

It does make me a bit angry. Like online with the slot games, that kind of triggers me.

Accessibility is a key theme. It is easier to go to gambling venues in New Zealand than in many Asian countries. It is also accessible to a broader range of people. For example, while gambling exists in China, this is not legal in many areas so is practiced

‘underground’, and only people in certain social circles engage in it. In New Zealand, anyone over the age of 18 can gamble on lottery products and from age 20 can enter casinos, and gambling sites are relatively visible.

Easy access. Too easy access. And not only that, there are some students not working who have been given cards to go to the VIP room and gamble heavily. It doesn't make sense.

The casino environment can be relaxing, or exciting.

[I] liked to stay in the casino as the environment is comfortable and cozy.

Some participants had noticed sensory features like smells and lighting that induced both relaxation and subconscious association with the casino. Some people would go there after a difficult day to relieve stress.

Me and my friend, we were just talking, like ‘why do our clothes smell in a certain way?’ Then we realised that the smell was from casino. I was like, ‘why do you smell like a cinnamon? Did you go to casino this morning?’ It was like, ‘no, it's the same jacket I wore yesterday’. I'm like, oh okay. Very clever.

Casinos offer promotions that make visits appealing for older people, migrants who like being around people speaking their language, and those who might not otherwise consider gambling there.

Changes in the business and social environment might reduce the “share” that casinos had of migrant communities’ social patronage. A participant described how the casino, with its 24-hour availability, became a social hub for the participant and her friends when they were international students, offering food and entertainment options that were otherwise limited. The affordable food, especially Chinese options, was a major draw. She also noticed other forms of gambling nearby, such as small machines and TAB betting on horse races or sports.

4.4.11 Meso- and macro- environments and gambling risk

Macro-environments were not explicitly covered in the survey. Interview participants discussed gambling norms in their country or culture of origin, and what they had observed since arriving in New Zealand. There were a range of views on how New Zealand’s regulatory and cultural environment differed. Overall, participants tended to view New Zealand culture as more permissive, equal and individualistic. It was also seen as less patriarchal, and less socially-controlling of an individual’s activities. Some had a sense that the liberal social environment can enable risk-taking personalities in a different way to their country of origin. Some participants liked this about New Zealand, but others felt they or their family member had been negatively influenced.



4.4.11.1 Environmental norms around gambling from countries of origin

Participants from different countries described different levels of socially or legally sanctioned gambling participation. Some common social betting games were seen as entertainment, but on reflection participants noted that they were a casual form of gambling.

Gambling has always existed in Chinese history... It's just not openly visible in China, but it's still around.

Gambling was commonly seen as immoral, irresponsible and a way to lose control of one's life. Participants from the Philippines and Vietnam both talked about cultural values towards individual gamblers, referencing the idea that gambling clouded an individual's mind and that people who had the type of personality that could lead them to gambling needed to be very careful.

However, in East Asian countries (Korea, Vietnam, China) there are many opportunities to gamble socially, and this could lead to its normalisation as a leisure activity. This aligns with some of the literature. People also described contradictory attitudes among family in their home country, such as family members being heavily involved in activities like social card game betting but still disapproving of "gamblers". Some also noted their family members had expressed an interest in gambling by playing the stock market rather than betting on games. While they may not have seen this investing activity as "gambling" at the time, in retrospect with experience of gambling harm, their family members saw interest in the stock market as a related activity or a related mindset.

In more multicultural countries like Malaysia, perceptions of gambling were different among religious or ethnic groups – banned for Muslims but more normalised among Malay Chinese communities and in some Indian social circles. There were some comments about the older generation of Malaysian Chinese people bringing mainland Chinese cultural values to their interest in gambling, and also of Chinese people experiencing gambling harm with the products available in New Zealand, having already developed gambling problems when they lived in China.

I think men in Malaysia culture gamble more than females... I think my dad was interested in gambling because my father is from the China side.

In China, gambling is not legal but was still practiced as a social or 'underground' activity, and is commonly practiced as part of networking or business activities. Some see Chinese culture as more risk averse than New Zealand and with more money-oriented values.

Gambling is taboo in most South Asian countries, and for participants that desire or interest to gamble became more apparent after they moved to New Zealand. Also, in Southeast Asian countries such as Vietnam gambling was illegal and therefore an uncontrolled underground activity, though quite common among some social groups.

4.4.11.2 Environmental norms around gambling in New Zealand

There were many more opportunities to gamble legally in New Zealand, and this along with liberal controls on substances like alcohol made such activities seem normal.

If it was illegal I wouldn't gamble, because I would just look at it as something that's illegal. I didn't do a lot of illegal [activities].

Because it's legal. So, you don't have any guilt [in the] back in your mind. You say if it's legal, I may like it. It'll be good.

While this could lead to problems, the legality also meant that there were more supports and controls in place. Some people considered that New Zealand has more regulation than their home country and perceived the gambling business to be relatively transparent – it is conducted legally and is subject to industry regulations. People may be encouraged to gamble through promotions, but they are not manipulated into taking part in underground activities with fewer controls, as in some countries.

In New Zealand, gambling is more transparent. There's no system of pawning items or high-interest loans like there is in Vietnam. It's much less exploitative compared to the underhanded tactics that often happen in Vietnamese gambling circles.

Many participants appreciated finding out that there were actually places they could call for counselling support, and legal processes that they could take such as arranging to be banned from casinos. This is not the case in other countries with casinos (such as Macau). The fact that in New Zealand someone can be banned by family rather than themselves is awkward to accept, but can result in reduced gambling harm.

Some suggested that harm could be avoided if migrants were better informed about the differences in New Zealand society, and had advice on how to adjust to cultural norms and how to manage the new risks they would encounter.

I think there should be a compulsory cultural course for every migrant entering New Zealand. Yes, gives you a little bit concept about the history of New Zealand or say Treaty of Waitangi and also social life. Kiwi way of living so that a person has a handbook. And can go also about these harms: gambling harm, drug harm.



There were some questions raised about whether New Zealand regulators currently do enough about online gambling run by offshore operators, which can also include scams. Progress in regulating online gambling in New Zealand is ongoing, as is detailed further in the discussion section.

Online gambling is problematic – NZ government regulated effectively on-site gambling, but should strengthen the control on online gambling, especially the regulation and control on off-shore gambling sites.

5 Model Development and Validation

Descriptive analyses and bivariate association in Section 4 have provided initial insights into the relationship between individual variables. However, these analyses examined variables in isolation, without accounting for how multiple factors might work together to influence the risk of gambling harm. Section 5 follows up this descriptive analysis by using multivariate regressions to provide a more accurate examination of the relationship between the explanatory variables and gambling severity. The multivariate modelling approach was appropriate to identify which associations represent genuine influences worthy of theoretical and practical attention. The detailed methods for this part of the research are described alongside the findings, to explain how blocks of factors influence the gambling metrics.

The modelling phase identified important risk factors of gambling participation or gambling addiction of Asians living in New Zealand. This will be used as evidence for building and testing the Asian Integrated Tree Model.

5.1 Modelling framework

We undertook a variable selection process by selecting the most discussed and relevant factors to include in modelling and discarding factors that either correlate heavily with other factors or impact only a subgroup of the Asian population.

We framed the selected predicting variables, in relation to the key findings from the literature review and qualitative interviews, into four blocks:

- Demographic block: all relevant demographic factors identified from literature.
- Cognition block: factors identified from the cognitive distortion measure.
- Personality block: three key personality measures, i.e., sensation seeking, impulsiveness, and propensity of risk taking.
- Experience block: acculturation challenges, life stressors and perceptual life satisfaction.

5.2 Variable selection and operationalisation

5.2.1 Dependent variables

The dependent variable is the sum score of the self-reported gambling severity level based on the three-item short-form PGSI scale. The higher the score, the more severe consequences (or the higher the risk) one's gambling behaviour can bring.

In our sensitivity test, we also developed a dichotomous dependent variable “likelihood to experience gambling harm” by categorising the non-problem and low risk gamblers as the “not likely” group, and the moderate and high-risk participants as the “likely” group for a robustness check via logistic regression analysis.

Besides the severity or risk of gambling harm, we were also interested in what influences gambling participation and ran regressions to identify what factors influence gambling participation.

5.2.2 Demographic variables

The model development included all the demographic variables that were pre-tested in 1-on-1 relationship analyses (as in the cross-tabulation analysis, or simple linear regressions) in Chapter 4. The demographic block of predictors variables included gender, age, ethnicity, length of residence in New Zealand, employment status, relationship status, education, and household income.

5.2.3 Cognitive variables

1. Scale measurement

As discussed in the Survey Methodology, we employed the truncated version of the 23-item Gambling Related Cognitions Scale (GRCS) to measure a respondent’s cognitive distortion towards gambling.

We removed items relevant to “Perceived inability to stop gambling”, as these items repeat the severity of gambling measure in our survey instrument. Also, these items are notably different from the others as it relates to perceived self-control rather than cognitive bias of gambling behaviours or outcomes.

Accordingly, the truncated 17 item scale has been used in our study. It shows high internal consistency (Cronbach’s $\alpha = .951$) after the scale truncation.

2. Dimension reduction

We use Exploratory Factor Analysis (EFA) to further compress the dimensions of the truncated Gambling Related Cognitions Scale (GRCS), before running the regression analysis.

We used Unweighted Least Squares (ULS) as the extraction methods, with oblique rotation of Promax with Kaiser Normalisation, which ended up having a stable three-factor structure. In item purification, we removed the item “Relating my losses to bad luck and bad circumstances makes me continue gambling” from the scale, as it has low loadings across all three factors (loading coefficient less than 0.4).

After the item purification we reran the EFA process, which resulted in clear and discriminant factor structure with all remaining items loading clearly on one factor. The three extracted factors cumulatively explain 58.64% of variance of the scale.

The results of the EFA analyses are presented in Table 10.

Table 10. Exploratory Factor Analysis and factor naming

Items of the truncated GRCS	Factor 1	Factor 2	Factor 3	Factor naming
Losses when gambling are bound to be followed by a series of wins.	0.402			<i>Predictive control</i>
Relating my winnings to my skill and ability makes me continue gambling.	0.674			
A series of losses will provide me with a learning experience that will help me win later.	0.558			
When I have a win once, I will definitely win again.	0.581			
Relating my losses to probability makes me continue gambling.	0.571			
There are times that I feel lucky and thus, gamble those times only.	0.501			
Remembering how much money I won last time makes me continue gambling.	0.710			
I have some control over predicting my gambling wins.	0.617			
Specific numbers and colours can help increase my chances of winning.		0.676		<i>Culture-specific biases</i>
Praying helps me win.		0.666		
Gambling makes the future brighter.		0.517		
I collect specific objects that help increase my chances of winning.		0.743		
I have specific rituals and behaviours that increase my chances of winning.		0.648		
Gambling makes me happier.			0.894	<i>Gambling related expectancies</i>
Gambling makes things seem better.			0.405	
Gambling helps me reduce tension or stress.			0.486	

As shown in Table 10, Factor 1 are mostly strong loading items related to biased learning from gambling experiences and perception of one's own ability to predict outcomes. We have named this factor "Predictive control", as it refers to mostly the generic gamblers' fallacies in predicting/interpreting gambling outcomes. Key items under this factor include:

- Remembering past wins (.710)
- Relating winnings to skill and ability (.674)
- Control over predicting wins (.617)
- Learning from losses helps win more (.558)
- Feeling lucky (.501)

Factor 2 are items involving cultural rituals and superstitious beliefs around gambling. We have named this factor “Culture-specific biases”. Key items include:

- Collecting specific objects (.743)
- Specific rituals and behaviours (.648)
- Specific numbers and colours (.676)
- Praying to win (.666)

Factor 3 are congruent mostly with the original factor structure “Gambling related expectancies”, which is about beliefs about positive rewards that gambling can bring about.

3. Factor scores

We used both the weighted sum method and the regression method to calculate the factor score based on the three-factor structure of the shortened GRCS. The weighted sum method multiplies each item by its factor loading before summing, giving more weight to items that better represent the factor. An alternative way to use regression coefficients to estimate factor scores was used in the robustness check.

5.2.4 Personality variables

Based on the literature review and findings from qualitative interviews, we included three personality related variables in the quantitative modelling: sensation seeking, impulsiveness, and propensity of risk taking. All are based on a 10-point scale indicating the propensity of a personality trait, where a higher score indicates a higher propensity.

5.2.5 Experience variables

We included the following experience variables in the modelling: cumulative acculturative stressors, concurrence of life events, and perception of life satisfaction.



5.3 Statistical model specifications

Since our survey sample is slightly different from the census structure in terms of age range and ethnicity, we applied post-stratification weighting to adjust it in the regression analysis.

In regression modelling, we examined demographic influences (i.e., gender, ethnicity, age, employment state, household income, education background, length of residence in New Zealand) on severity of gambling or likelihood to gambling harm first (Model 1) and used hierarchical regression modelling techniques to create Model 2 and Model 3 that encompass further cognition related and personality related influences respectively. Model 4 adds experience related factors into modelling, to see if experience factors would add to the explanatory power on the development of gambling problems. These are shown in section 5.4.

We treated experience factors as the interaction of personal factors with environmental factors, and did not specify self-reported environmental influences in modelling for the purpose of parsimonious modelling. These environmental influences were either supported by literature or validated through the qualitative interview and descriptive analyses process.

Models 5 to 8 are a robustness check to see whether the findings hold true when we use different measures and approaches. These are shown and discussed in section 5.5.

For comparison, we ran Models 9 to 12 to regress against gambling participation (frequency of engaging in gambling) using similar model specifications. These are shown and discussed in section 5.6.

For all the modelling process, we ran multicollinearity diagnostics via calculating Variance Inflation Factors (VIFs) to rule out collinearity issues. It turned out that multicollinearity was not an issue for all our models.

Following these models, we conducted separate segmented modelling on just the Chinese and Indian subsamples, to check what drives risk of gambling harm among the largest ethnic subgroups. These are shown and discussed in section 5.7.

5.4 Influences on risk of gambling harm

As Table 11 shows we presented four models with progressive addition of variable blocks. The regression outcomes showed how the explanatory power (R-square) increases from 0.114 to 0.331, indicating improved model fit with each step.

Table 11. Hierarchical linear regression outcomes against risk of gambling harm

Predictors	Model 1	Model 2	Model 3	Model 4
Demographic factors				
Gender	-0.227** (-3.204)	-0.126° (-1.940)	-0.078 (-1.210)	-0.114° (-1.769)
Age	-0.039 (-0.031)	0.041 (0.838)	0.049 (1.018)	0.090° (1.856)
Ethnicity	0.143*** (4.618)	0.093** (3.253)	0.080** (2.865)	0.072** (2.582)
Length of residence	-0.211*** (-5.154)	-0.187*** (-5.000)	-0.159*** (-4.287)	-0.135*** (-3.591)
Marital status	0.030 (0.455)	0.037 (0.602)	0.043 (0.717)	0.020 (0.341)
Employment	-0.150** (-2.878)	-0.122** (2.570)	-0.105* (-2.259)	-0.111* (-2.407)
Education	-0.093* (-2.242)	-0.068° (-1.800)	-0.073* (-1.981)	-0.090* (-2.426)
Household income	-0.109* (-1.998)	-0.030 (-0.610)	-0.042 (-0.869)	-0.025 (-0.512)
Cognitive factors				
Predictive control		0.052*** (3.511)	0.048** (3.298)	0.047** (3.315)
Culture specific bias		0.049** (2.545)	0.028 (1.472)	0.025 (1.316)
Gambling expectancies		0.046 (1.547)	0.045 (1.532)	0.039 (1.348)
Personality factors				
Impulsiveness			0.176** (3.193)	0.194** (3.485)
Sensation-seeking			-0.021 (-0.463)	-0.024 (-0.531)
Risk-taking			0.209*** (3.625)	0.201*** (3.515)
Experience factors				
Settlement stresses				0.014 (0.863)
Life satisfaction				-0.021 (-1.208)
Life events				0.048*** (3.572)
Intercept	3.132 (11.1452)	1.505 (5.349)	0.994 (3.296)	0.867 (2.671)

Predictors	Model 1	Model 2	Model 3	Model 4
Model Summary				
F statistics	10.915***	23.338***	21.740***	19.451***
R Square	0.114	0.276	0.312	0.331
F change	10.915***	50.120***	11.771***	6.343***

Note: (1) T statistics in parentheses. (2) °, p<0.1;*, p<0.05;** , p<0.01;***, p<0.001

5.4.1 Explanation of models 1–4 findings

5.4.1.1 Demographic influences

Model 1 shows the influence of demographic factors on the escalation of gambling risks (severity of gambling behaviours).

Gender shows a negative relationship (-0.227**), suggesting females report lower gambling harm severity, and that being male is a risk factor to gambling harm.

Length of residence has a negative association (-0.211**), suggesting that newer migrants are more likely to be subject to gambling harm.

Similar to the findings from the crosstabulation of Asian ethnicities and gambling severity, being South and Southeast Asian ethnicity is a risk factor.

Model 1 also found that higher levels of education (-0.093*) and household income (-0.109*) correlate with lower gambling harm. This indicates that higher education and higher household wealth are protective factors of gambling harm in Asian communities. In other words, Asians from lower education background and from households with lower income are more susceptible to transition towards problem gambling.

Employment was also a salient factor – we found that Asians who are in full time employment, compared to those who are in flexible employment and not in paid work, are more prone to report more severe gambling harm. Work related stress, more disposable income available to fund gambling activities, compared to non-working groups, may contribute to this finding.

5.4.1.2 Cognitive influences

We specifically looked at cognitive influences on increased gambling severity in Model 2.

The addition of cognitive factors substantially improves model fit (R-square increases to 0.276).

The cognitive predictive control factor (0.052***) is significantly associated with increased gambling risk. This factor is mostly related to the general gamblers' fallacies.

Culture-specific bias (0.099**) shows a significant positive relationship with gambling harm. This indicates that cultural cognitive distortion, which is rooted from the culture and norms of the country of the origin, is a significant risk factor for development of gambling disorders for Asian people.

5.4.1.3 Personality influences

The further addition of personality factors further improve model fit (R-square = 0.312). This suggests personality traits add substantial explanatory power beyond demographics and cognitive factors.

Impulsiveness (0.176**) and risk-taking (0.205***) show strong positive associations with gambling severity, whereas the proneness to sensation seeking's influence was not significant.

It is also noted that with the addition of the personality factors, the previously significant cultural cognitive distortion in Model 2 becomes nonsignificant.

The loss of significance for cultural cognitive distortion in Model 3 likely reflects its shared variance with personality traits; impulsiveness or risk-taking may affect how cognitive distortions influence decision making in gambling behaviours. For example, strong beliefs about luck or fate in receiving a windfall may predispose a person to develop more impulsive tendencies or propensity of risk taking, which directly predict gambling severity.

This highlights the importance of personality variables as a proximal driver of gambling behaviours, while cognitive factors may operate indirectly or distally. Cultural/normative beliefs may operate through psychological pathways (e.g., shaping personality or normalising risk-taking), rather than directly influencing gambling severity.

5.4.1.4 Experience influences

When we added the experience related factors in Model 4, most of the relationships identified in previous models remain stable and model fit reached its highest (R square=0.331).

The F-statistics are significant across all models ($p < 0.001$); the F-change values indicate significant improvement with each model iteration.

Concurrence of life events is significantly associated with increased gambling harm, whereas settlement stresses and life satisfaction show no significant relationship.

Settlement stress specifically measures acculturative stressors, while concurrence of life events measures general life stressors in the settlement processes. The life events measure captures a wide range of stressors (relationship changes, financial burdens,

life transitions, health issues) that might overlap with or encompass many of the specific stressors measured in the settlement stress variable, although collinearity between settlement stress and concurrence of life events was found weak to moderate.

The findings may suggest that gambling severity among Asian migrants is more strongly associated with general life stress than migration-specific stress. Cumulative life stress, compared with settlement specific stress, might be particularly relevant for understanding gambling risk for Asian migrants.

It is also likely that settlement stress influence gambling severity indirectly by affecting how individuals cope with those stressors.

5.4.2 Summary of modelling findings

Through the four models, we can summarise the findings on the predictors of gambling harm severity of Asian communities in New Zealand as follows:

- Personal characteristics like impulsiveness and risk-taking are stronger predictors than demographic factors
- Cumulative life stressors are likely to increase vulnerability to gambling risk
- General and cultural cognitive biases play a significant role in escalated gambling harm
- Longer length of residence and higher education appear protective against gambling harm for Asian migrants
- The final model (4) explains 33.1% of the variance in severity of gambling behaviours (final R-square = 0.331)

5.4.2.1 Comment on cumulative modelling with reference to qualitative findings

Interview discussions, as described in section 4.3.5, support the idea that personality factors including risk-taking and impulsiveness may influence risk of gambling harm. They also pointed to different personal and mental health challenges, such as low self-esteem, a need for approval or attention, and tendency to gravitate towards distractions as a response to stress.

The findings about cumulative life stress as a risk for gambling harm, and the role of migration as just one among multiple, connected, significant life events, are also supported by the experiences discussed in the interviews (see section 4.3.4). Overall participants described how the types of migration stress they might expect as “normal” (visa requirements; finding work and community) could become harder to manage at a time when other life events and changes were happening as well, and their story of progression in and out of gambling harm showed how this accumulation of pressures could trigger mental distress.

5.5 Robustness testing

In testing of result robustness, we changed the regression methods using logistic regression by creating a binary dependent variable “likelihood of gambling risk” using the categorical severity of gambling measure. The moderate and high gambling risk groups were recoded as “1-likely to increased gambling risk”, whereas the non-problem gambling and low-risk groups were recoded as “0-not likely to increase gambling risk”.

Model 5 to 8 specifically tests the influence of demographics, cognition, personality and experiential factors. Length of residence, education and income were treated as interval variables (no dummy variables are created hence no reference group).

Table 12. Logistic regression outcomes against likelihood to increased gambling risk

Predictors	Model 5	Model 6	Model 7	Model 8
Demographic factors				
Gender	-0.633** (0.531)	-0.538* (0.584)	-0.395° (0.674)	-0.506* (0.603)
Age	-0.243 (0.784)	0.067 (1.070)	0.116 (1.123)	0.193 (1.212)
Ethnicity (Asian NZer as reference group)				
East Asians	-1.162** (0.313)	-0.954* (0.385)	-0.919° (0.399)	-0.858° (0.424)
Southeast Asians	-0.712 (0.491)	-0.697 (0.498)	-0.717 (0.488)	-0.679 (0.507)
South Asians	-0.212 (0.809)	-0.284 (0.753)	-0.411 (0.663)	-0.384 (0.681)
Marital status (Other as reference group)				
Single	0.804 (2.235)	0.587 (1.799)	0.785 (2.192)	1.166 (3.209)
Partnered	1.182 (3.262)	0.860 (2.362)	1.110 (3.035)	1.479 (4.390)
Divorced/Separated	0.495 (1.640)	0.515 (1.673)	0.727 (2.070)	1.233 (3.431)
Employment (Not working as reference group)				
Full time	0.615° (1.850)	0.528 (1.695)	0.442 (1.556)	0.445 (1.561)
Flexible work	0.171 (1.186)	0.069 (1.072)	-0.060 (0.942)	-0.229 (0.888)
Length of residence	-0.442*** (0.642)	-0.481*** (0.618)	-0.449*** (0.638)	-0.393** (0.675)

Education	-0.274** (0.760)	-0.253** (0.777)	-0.286* (0.751)	-0.317* (0.728)
Household income	-0.237 (0.789)	-0.024 (0.976)	-0.061 (0.941)	-0.020 (0.980)
Cognitive factors				
Predictive control		0.166*** (1.180)	0.171*** (1.187)	0.177*** (1.193)
Culture specific bias		0.135* (1.144)	0.079 (1.082)	0.066 (1.068)
Gambling expectancies		0.008 (1.008)	-0.003 (0.997)	-0.015 (0.985)
Personality factors				
Impulsiveness			0.374* (1.454)	0.444* (1.559)
Sensation-seeking			-0.116 (0.891)	-0.112 (0.894)
Risk-taking			0.598** (1.819)	0.586** (1.796)
Experience factors				
Settlement stresses				0.022 (1.022)
Life satisfaction				-0.078 (0.925)
Life events				0.122* (1.118)
Intercept	1.925 (6.855)	-1.851 (0.157)	-3.167 (0.042)	-3.884 (0.021)
Model Summary				
-2 Log likelihood	632.401	543.825	524.316	515.274
Cox & Snell R Square	0.106	0.215	0.237	0.247

Note:

(1) Odds ratio (95% confidence interval) in parentheses.

(2) °, p<0.1;*, p<0.05;** , p<0.01;***, p<0.001

The logistic regression models examined predictors of increased gambling risk across four progressively comprehensive models (Model 5 to Model 8).

Demographic factors revealed that females consistently had lower risk compared to males, with significant effects in Models 5, 6, and 8. East Asians showed lower risk than other ethnicities, particularly in earlier models, while longer residence in New Zealand and higher education levels were associated with reduced risk across all models. Employment status (full-time vs. flexible working vs. not working) initially suggested elevated risk in Model 5 but lost significance in subsequent models.

Cognitive factors emerged as influential in later models: stronger beliefs in predictive control (e.g., over gambling outcomes) were linked to higher risk, while culture-specific biases showed a marginal positive effect (in Model 6).

Personality traits like impulsiveness and risk-taking significantly increased risk (in Models 7 and 8), whereas sensation-seeking had no notable impact.

Experiential factor, i.e., concurrence of life events, were associated with higher gambling risk in the final logistic model.

Model fit improved sequentially, with Model 8 explaining the most variance (Cox & Snell $R^2 = 0.247$). The inclusion of cognitive, personality, and experiential factors enhanced predictive capacity, underscoring the interplay of demographic, psychological, and situational factors in gambling risk.

The alternative use of logistic regression modelling support almost all the findings¹⁸ in the multivariate hierarchical regression analyses, which indicate that the research findings are robust.

5.6 Gambling participation models and comparison

5.6.1 What factors influence gambling participation?

Besides examining what drives risk of gambling harm, we were also interested in what drives gambling engagement.

We built gambling participation models using reported gambling frequency as the dependent variable, and the same four groups of variables (i.e., demographic, cognitive, personality, and experiential) as independent variables. We present findings from Model 9 to Model 12 through Table 13.

¹⁸ The findings not supported in logistic modelling findings include the influence of household income and employment status.

Table 13. Hierarchical linear regression outcomes against gambling participation

Predictors	Model 9	Model 10	Model 11	Model 12
Demographic factors				
Gender	-0.189* (-2.099)	-0.099 (-1.114)	-0.115 (-1.277)	-0.128 (-1.410)
Age	0.291*** (4.318)	0.331*** (4.981)	0.331*** (4.950)	0.346*** (5.054)
Ethnicity	0.146*** (3.743)	0.124** (3.207)	0.130** (3.331)	0.129** (3.278)
Length of residence	0.082 (1.587)	0.081 (1.604)	0.071 (1.366)	0.075 (1.419)
Marital status	0.099 (1.158)	0.102 (1.228)	0.101 (1.211)	0.099 (1.167)
Employment	-0.076 (-1.146)	-0.056 (-0.868)	-0.062 (-0.951)	-0.063 (-0.978)
Education	-0.024 (-0.464)	-0.001 (-0.011)	0.001 (0.014)	-0.007 (-0.139)
Household income	-0.048 (-0.694)	-0.004 (-0.058)	0.001 (0.012)	0.006 (0.095)
Cognitive factors				
Predictive control		-0.005 (-0.244)	-0.003 (-0.164)	-0.003 (-0.167)
Culture specific bias		-0.008 (-0.317)	-0.001 (-0.030)	-0.001 (-0.046)
Gambling expectancies		0.178*** (4.382)	0.179*** (4.416)	0.175*** (4.258)
Personality factors				
Impulsiveness			-0.103 (-1.340)	-0.093 (-1.181)
Sensation-seeking			0.009 (0.143)	0.009 (0.144)
Risk-taking			-0.044 (-0.545)	-0.047 (-0.577)
Experience factors				
Settlement stresses				0.015 (0.601)
Life satisfaction				-0.078 (0.925)
Life events				-0.004 (0.601)
Intercept	0.059 (0.172)	-0.898 (-2.343)	-0.723 (-1.721)	-0.796 (-1.736)

Predictors	Model 9	Model 10	Model 11	Model 12
Model Summary				
F statistics	7.314***	9.068***	7.331***	6.089***
R Square	0.080	0.129	0.133	0.134
F change	7.314***	12.730***	0.967	0.387

Note:

(1) T statistics in parentheses.

(2) °, p<0.1;*, p<0.05;** , p<0.01;***, p<0.001

The hierarchical models for gambling participation highlight age and ethnicity as consistent demographic predictors.

Older individuals and those from Southeast or South Asian ethnic backgrounds (higher ethnicity codes correlate with increased participation) showed greater gambling engagement. Males participated in gambling more than females, though this effect diminished when other factors were added.

Cognitive factors, particularly gambling expectancies (perceived positive benefits about gambling), were the strongest drivers of gambling participation.

Demographic variables like household income, education, and employment lacked statistical significance, as did personality traits (impulsiveness, sensation-seeking) and experience factors (e.g., life satisfaction).

The models' explanatory power increased incrementally (R^2 : 0.080 to 0.134), with cognitive factors contributing most to variance. F change indicates that Model 10 is the best participation model across Model 9 to 12 – Model 11 and 12 didn't add significant variance to the explanatory capacity.

5.6.2 Comparison of gambling participation with gambling severity models

The drivers of gambling participation differ meaningfully from those influencing gambling severity.

Participation is largely driven by demographic and cognitive factors. Older adults, males and those from Southeast or South Asian ethnic backgrounds, are more likely to gamble more frequently. This, to some degree, is likely reflected in cultural norms or social acceptance of gambling within these communities. Positive gambling expectancies – the belief that gambling yields rewards or lowers pressure – emerged as the strongest cognitive driver, suggesting that participation is motivated by perceived benefits rather than impulsive traits or circumstantial stressors.

Gender initially played a role (males participated more), but this effect faded as other factors were considered, implying that cultural or cognitive variables overshadow personal demographics.

In contrast, risk of gambling harm is shaped by a more comprehensive and complicated set of variables including cumulative life stressors, cognitive distortions, and personality traits. Newer migrants (shorter residency in New Zealand) and individuals with lower education or from lower income households face heightened gambling risk, possibly due to isolation, financial strain, or limited capability to socially integrate. Cognitive factors like predictive control (e.g., overconfidence in one's ability to predict outcomes) and culture-specific biases (e.g., superstitions about luck or fate) amplify risk, acting as mental traps that sustain problematic gambling behaviour. Personality traits such as impulsiveness and risk-taking further fuel severity, creating a feedback loop where high-risk individuals chase losses or thrill. Notably, concurrence of life events – stressors like job loss, financial crisis, divorce or family conflict – when accumulated, may act as acute triggers for escalating severity, whereas accumulated stressors had no significant bearing on participation patterns.

5.7 Segmented models for the Chinese and the Indian subsamples

We also ran segmented regressions for the Chinese and the Indian subsamples to identify unique predictors of gambling for these two largest Asian ethnic groups in New Zealand. These two segments are the only two subsamples that have adequate statistical power for further subgroup analysis (segmented regression).

5.7.1 Chinese subsample risk models

Table 14. Hierarchical linear regression outcomes for Chinese subsample

Predictors	Model 13	Model 14	Model 15	Model 16
Demographic factors				
Gender	-0.042 (-0.391)	0.026 (0.257)	0.012 (0.116)	-0.026 (-0.262)
Age	-0.025 (-0.325)	-0.004 (-0.050)	-0.006 (-0.082)	0.054 (0.729)
Length of residence	-0.029 (-0.423)	-0.070 (-1.128)	-0.069 (-1.107)	-0.081 (-1.304)
Marital status	-0.107 (-1.111)	-0.076 (-0.860)	-0.081 (-0.910)	-0.096 (-1.068)
Employment	-0.115 (-1.569)	-0.123° (-1.840)	-0.114° (-1.703)	-0.108° (-1.661)
Education	0.004 (0.063)	0.019 (0.342)	0.022 (0.397)	-0.035 (-0.617)
Household income	-0.142° (-1.731)	-0.091 (-1.209)	-0.099° (-1.310)	-0.044 (-0.570)
Cognitive factors				
Predictive control		0.053* (2.340)	0.054* (2.325)	0.049* (2.149)
Culture specific bias		0.016 (0.528)	0.014 (0.456)	0.012 (0.410)
Gambling expectancies		0.061 (1.284)	0.046 (0.953)	0.043 (0.913)
Personality factors				
Impulsiveness			0.176° (1.860)	0.193* (2.064)
Sensation-seeking			-0.029 (-0.414)	-0.010 (-0.154)
Risk-taking			0.030 (0.350)	0.020 (0.239)
Experience factors				
Settlement stresses				0.046° (1.967)
Life satisfaction				-0.020 (-0.715)
Life events				0.042* (2.046)
Intercept	2.224 (4.743)	1.216 (2.674)	1.077 (2.263)	0.955 (1.870)

Predictors	Model 13	Model 14	Model 15	Model 16
Model Summary				
F statistics	0.922	5.185***	4.321***	4.322***
R Square	0.032	0.214	0.231	0.286
F change	0.922	14.673***	1.348	3.556**

Note:

(1) T statistics in parentheses.

(2) °, $p < 0.1$; *, $p < 0.05$; **, $p < 0.01$; ***, $p < 0.001$

For the Chinese subsample, the hierarchical regression models (Model 13 to 16) revealed that cognitive factors – particularly the belief in predictive control (the illusion that one can predict or influence gambling outcomes) – were consistently significant predictors of gambling severity across models ($p < 0.1$). This suggests that overconfidence in one's ability to "beat the odds" may drive riskier gambling behaviours within the Chinese subgroup.

Personality traits also played a role: impulsiveness emerged as a robust predictor ($p < 0.1$ in Model 15, $p < 0.05$ in Model 16), indicating that individuals prone to impulsive decisions were more likely to engage in more harmful gambling behaviour.

Experience-related stressors further amplified risk, with acculturation stresses and cumulation of life stressors both showing positive associations ($p < 0.1$).

Demographic factors, however, had limited explanatory power. Only household income showed marginal significance in early models ($p < 0.1$), with lower income households weakly linked to higher gambling severity, but this effect dissipated as cognitive and experiential factors were added. Other variables, such as gender, age, and marital status, were non-significant. The final Chinese model (Model 16) explained 28.6% of variance, with cognitive and experiential factors contributing the most incremental predictive power.

For the Chinese subsample, gambling severity was primarily influenced by cognitive factors (predictive control), personality traits (impulsiveness), and experience-related stressors (settlement stresses and significant life events).

5.7.2 Indian subsample risk models

Table 15. Hierarchical linear regression outcomes for Indian subsample

Predictors	Model 17	Model 18	Model 19	Model 20
Demographic factors				
Gender	-0.309* (-2.003)	-0.193 (-1.383)	-0.097 (-0.698)	-0.168 (-1.183)
Age	-0.122 (-1.065)	0.082 (0.767)	0.125 (1.182)	0.119 (1.127)
Length of residence	-0.248** (-2.777)	-0.234** (-2.915)	-0.189* (-2.356)	-0.121 (-1.449)
Marital status	0.133 (0.889)	0.150 (1.114)	0.148 (1.131)	0.140 (1.080)
Employment	-0.118 (-0.959)	-0.118 (-1.076)	-0.140 (-1.306)	-0.141 (-1.333)
Education	-0.196* (-2.373)	-0.179* (-2.383)	-0.204** (-2.790)	-0.217** (-2.966)
Household income	-0.110 (-0.938)	-0.005 (-0.047)	-0.018 (-0.171)	-0.052 (-0.501)
Cognitive factors				
Predictive control		0.023 (0.737)	0.016 (0.528)	0.015 (0.485)
Culture specific bias		0.115** (2.745)	0.081* (1.944)	0.083* (2.006)
Gambling expectancies		0.034 (0.594)	0.039 (0.718)	0.047 (0.844)
Personality factors				
Impulsiveness			0.158 (1.471)	0.156 (1.412)
Sensation-seeking			-0.045 (-0.448)	-0.050 (-0.448)
Risk-taking			0.321** (2.622)	0.284** (2.322)
Experience factors				
Settlement stresses				-0.030 (-0.939)
Life satisfaction				0.007 (0.193)
Life events				0.075** (2.725)
Intercept	4.133 (7.624)	1.942 (3.276)	1.277 (1.947)	0.882 (1.274)

Predictors	Model 17	Model 18	Model 19	Model 20
Model Summary				
F statistics	3.901***	8.271***	7.887***	6.729***
R Square	0.129	0.312	0.364	0.395
F change	3.901***	16.220***	4.856***	2.225°

Note:

(1) T statistics in parentheses.

(2) °, $p < 0.1$; *, $p < 0.05$; **, $p < 0.01$; ***, $p < 0.001$

For the Indian subsample, demographic factors were more salient. Gender (male), shorter length of residence in New Zealand (<5 years), and lower education levels consistently predicted higher gambling severity. Education had a strong protective effect ($p < 0.05$), suggesting that higher educational attainment (e.g., postgraduate qualifications), which could link to more probability-based cognition, reduced gambling risk.

Cognitive factors also matter: culture-specific biases (superstitious beliefs or fatalistic attitudes toward gambling) were significant ($p < 0.05$), reflecting culturally ingrained perceptions that may aggravate one's judgments in gambling, resulting in more severe risk of harm.

Personality traits like risk-taking propensity were strongly associated with severity ($p < 0.01$), highlighting temperament tendency to high-risk activities.

Finally, concurrence of life stressors emerged as a key risk factor ($p < 0.01$).

The final Indian model (Model 20) accounted for 39.5% of the variance, with cultural cognition, personality, and demographic (education, residency length) factors driving explanatory power. Notably, length of residence lost significance in Model 20, implying its effects may be suppressed by cultural adaptation or accumulated life stressors.

5.7.3 Summary of insights from cultural models

While some demographics played a stronger role for Indians (e.g., education, residency length), both models showed that specific demographic vulnerabilities (e.g., lower household income for Chinese, shorter residency and lower education for Indians) could heighten risk of gambling harm.

Both groups are influenced by personality traits (impulsiveness more for Chinese, risk-taking more for Indians) and by stressors from cumulative life events, underscoring gambling as a coping mechanism during life crises, which occur more in the early settlement stage.



6 Discussion and implications

6.1 Validation of components of Asian Integrated Tree Model

After the quantitative modelling was completed, we systematically validated the components in the Integrated Tree Model framework in the context of gambling harm and comorbid mental health. We compared findings across the three research phases in this study: literature review, qualitative research, and quantitative descriptive analysis and modelling from survey data. This enabled us to identify convergence and divergence in how internal and external factors predict gambling risk and provide a cross-validation outcome to each factor. Demographic risk factors are not assessed using the qualitative evidence, given participants were selected to represent different demographic groups, but all experienced gambling harm. These findings are briefly summarised in Table 16.

Table 16. Validation of the Asian Integrated Tree Model across three phases

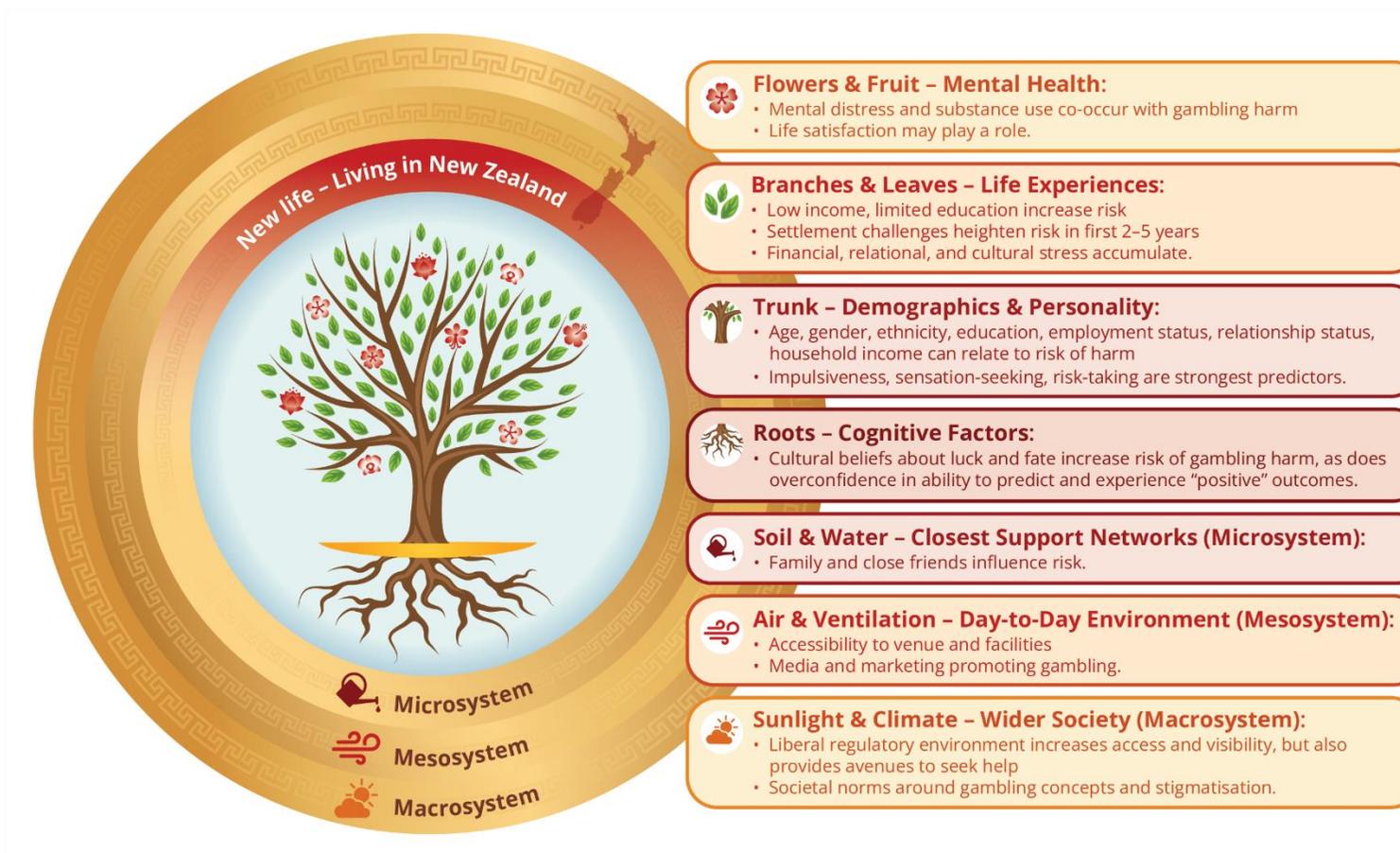
Tree component	Risk factor	Literature review	Qualitative research	Survey data
Root	Predictive control	+	+	+
	Cultural cognitive distortion	+	+	+
	Gambling expectancy	+	+	N.S.
Trunk	Gender	Male		Male
	Age	mixed		N.S.
	Ethnicity	mixed		South Asian
	Impulsiveness	+	+	+
	Sensation-seeking	+	+	N.S.
Risk taking	+	+	+	
Branches, leaves	Education	-	Mixed	- ^o
	Employment	Un- or under-employment (+)	Mixed	Full employment (+)

	Marital status	Not married (+)	Marital strain°	N.S.
	Length of residence in NZ	n.a.	+	-°
	Household income	-	N.S.	-°
	Acculturative stressors	+	+	+°
	Life stressors	+	+	+
Flowers, fruits	Comorbid mental health symptoms	+	+	+
	Life satisfaction	-	+	N.S.
Soil and water-Microsystem	Family influence	Parents gambled (+), close family relationship (-)	+	Family influence (+)
	Friends and peers	+	+	+
Air, moisture, and ventilation-Mesosystem	Local communities (accessibility of gambling)	+	+	+
	Media influence	+	mixed	+
Sunlight, temperature, climate-Macrosystem	Regulatory differences between countries	+	+	n.a.
	Economic environment	Freer market (+)	-	n.a.
	Socio-cultural environment	Deeply rooted gambling culture (+)	+	n.a.
	Technological environment	Online advertising (+), accessibility to online gambling (+)	+	n.a.

Note: “-” indicates negative and “+” for positive influence on gambling risk; “N.S.” for “not significant”; “°” indicates the influence was salient only for some subgroups. “n.a.” indicates not relevant; “mixed” indicates indefinite findings.

The findings have identified risk factors that can be represented by the different parts of the metaphorical tree in assessing gambling harm and associated mental health. Specifically, risk factors around gambling experiences of Asian communities are tested and mapped around the Integrated Tree Model:

Figure 26. Asian Integrated Tree Model adapted to gambling harm



- **Roots – Cognitive factors:** the beliefs and expectations that people bring with them from their cultural background and early impressions (including cognitive distortions about fate and luck, and beliefs in their ability to predict outcomes) do have an impact on Asian migrants risk of gambling harm.
- **Trunk – Demographic and personality influences:** there are some demographic variables associated with increased risk: male gender and, according to the survey findings, being of South Asian ethnicity. However, the consistent factor across research phases was that the inherent personality traits, including impulsiveness, sensation-seeking and risk taking, were most relevant to risk of gambling harm.
- **Branches, leaves – Experiences and acculturative stressors:** the findings present a mixed view of how life course developments, including education, employment, marital status and migration timing, impact risk of gambling harm. Length of timing since migration (the first 2–5 years) appears to be a higher risk phase, and lower education and income were relevant in some cases. Life course experiences of accumulating stressors due to migration/acclimation and other life events (e.g. finances, relationships) were consistently linked to risk of gambling harm.
- **Flowers, fruits – Comorbid mental health and other issues:** comorbid mental distress was linked with risk of gambling harm across research phases (although the reasons for correlation may vary). Risky substance use was also associated with risky gambling for some. A link with life satisfaction was not as easy to measure.
- **Soil and water – microsystem:** the influence of a person’s social microsystem – family and close friends – was found across research phases to impact risk of gambling harm.
- **Air, moisture and ventilation – mesosystem:** the influence of a person’s environmental mesosystem – accessibility of gambling opportunities and in some cases media and marketing messages – was found across study types to impact risk of gambling harm.
- **Sunlight, temperature, climate – macrosystem:** while not covered in the quantitative study, other studies linked a person’s experiences of the regulatory and cultural macroclimate in their new place of residence to higher risk of gambling harm. Regulatory differences in New Zealand compared with most Asian countries make it easier to gamble and to lose control of gambling behaviour, but also easier to seek help via legal and therapeutic help-seeking avenues.
- **Tree variations – Cultural influences on personal and experiential risk factors:** risk of gambling harm among Chinese migrants was linked to cognitive biases, impulsivity, and the stresses of acculturation and settlement. In contrast, Indian participants at higher risk of gambling harm often faced different life stage

challenges, such as lower levels of education, recent migration, and specific cultural beliefs. Both groups, however, share vulnerability to gambling harm during life crises, underscoring gambling's role as an escape mechanism.

Statistical findings further proved that personality and cognition related factors have more explanatory power than demographic factors in predicting gambling harm of Asian migrants. There are some inconsistent findings across the three phases about demographic influence, but the influence of personality, cognition and experience factors are consistent across. Cultural cognitive distortion (especially luck and fate concepts) and experience in acculturation are important factors in explaining gambling risks for the Asian population in New Zealand.

6.1.1 Overall findings

The study presents findings on predictors of gambling engagement and risk of gambling harm for Asians living in New Zealand. Gambling participation is largely influenced by personal characteristics such as age and gender, and by beliefs about the perceived benefits of gambling. Gambling harm severity is more closely tied to external life circumstances (e.g., stress, lower education, recent migration) and internal psychological factors like cognitive distortions and impulsivity. In short, gambling engagement is shaped by “who you are” and “what you believe,” while risk of gambling harm depends on “what happens to you” and “how you think.”

6.2 Discussion

The validation of the use of the Asian Integrated Tree Model highlights how multiple cognitive, psychological, socio-cultural, and environmental factors collectively drive gambling harm among Asian people in New Zealand.

This study found some ethnic nuance in personal and experiential risk factors. For instance, the prominence of cognitive distortions among Chinese migrants in this sample (e.g., belief in predictive rituals or luck cycles) reflects deeply rooted cultural narratives about fate and prosperity, which may clash with self-control related narratives of gambling in a Western context. This dissonance, compounded by risk associated with life and migration stressors, creates fertile ground for harmful gambling as individuals seek to “get rich”, find new sources of entertainment, or achieve financial stability. The survey findings from Indian communities, where respondents exhibited structural vulnerabilities such as lower education and shorter residency, underscore how systemic inequities intersect with culturally driven behaviours, further increasing gambling harm risk. Both groups, however, share vulnerability to gambling harm during life crises, underscoring gambling's role as an escape.

The study illuminates gambling's role as a maladaptive coping mechanism for Asian migrants. The acculturation process is not static: this study supports the view of gambling risk as dynamic, shifting across the settlement journey as migrants navigate changing stressors, relationships and adaptations. The findings highlight the length of time residing in New Zealand, with those who have been in the country for 2–5 years at heightened risk. This phase of settlement, which may feature isolation, fading novelty, integration challenges and unmet expectations, is a higher risk time-period for mental health and gambling harm.

While acculturative stressors (e.g., language barriers, discrimination) are often cited in migration literature, this research found that cumulative life stressors – including job loss, family conflict and financial strain – carry greater weight in association with escalating harm. This suggests that gambling is not merely a response to cultural dislocation, but a broader strategy to manage upheaval in multiple life domains. Such findings align with theories of "stress-coping" but challenge assumptions that migration-specific stress is the primary driver. Similarly, where the survey findings show correlation with other issues such as risky substance use, the interviews found that for many people the urge to gamble needs to be carefully replaced with coping behaviours that ultimately make the person feel better about themselves, rather than other unhealthy behaviours.

Finally, the environmental layers of the Integrated Tree Model – particularly meso-level factors like gambling accessibility and advertising – reveal how structural forces in local and online environments normalise risk behaviours. The high engagement with casino games among South Asians, Mahjong among East and Southeast Asians, and lottery participation across groups underscores the role of targeted marketing and cultural familiarity with certain gambling forms.

6.3 Limitations

6.3.1 Sampling limitations

While the mixed online/paper survey improved demographic representation, reliance on Trace Research's Asian panel may have skewed the sample toward younger, more educated, more digitally connected and more settled Asian-origin participants.

Socioeconomic barriers (e.g., limited access, shame and stigma) likely persisted, leaving the experiences of vulnerable subgroups (e.g., less educated individuals, low-income households) underrepresented. Additionally, the focus on Chinese and Indian respondents, while pragmatic for statistical power, meant overlooking nuances among smaller groups from this study cohort (e.g., Filipino, Korean, Vietnamese) regarding migration challenges and cultural beliefs and norms.

The qualitative part of the study was also subject to sampling limitations, meaning that the findings are not representative but provide an indication and illustration of the types of thinking that some Asian people in New Zealand have. Although the team made an effort to ensure all interviewers had material that would allow them to ask and record questions consistently, in practice the participants had different preferences for how they would be interviewed and what they chose to focus on. This means that in some cases, especially when phrases were summarised and translated for analysis by an English-speaking coder, there may be a lack of deeper nuance or detail. This was in part ameliorated by ensuring that those recording notes also wrote down key cultural concepts raised in the interviews.

6.3.2 Measurement limitations

The use of a short-form PGSI scale, though practical allowing for survey length, may oversimplify gambling severity, which results in coarser measurement of gambling risks. Similarly, we adopted a more subjective measurement of overall wellbeing using self-rated life satisfaction, which may not fully reflect the relationship between the severity of gambling and wellbeing.

The significantly lower self-reported problem gambling prevalence among East Asian communities (e.g., Chinese, Korean) in New Zealand likely reflects social desirability bias – a tendency to underreport stigmatised behaviours not to *DiuLian* (lose face) and avoid shaming oneself or family. Social desirability responding is found to be stronger in respondents from a higher power distance, higher context communication or a more collectivist culture that prioritises social harmony, familial reputation, and avoidance of public dishonour (Harzing, 2006; Lalwani et al., 2006). East Asian countries feature high power distance, high context¹⁹ and collectivist culture, where South Asian culture (and most southeast Asian culture) is often described as a mixture of collectivist and individualistic culture and a lower context communication (Hofstede, 2011). Standardised tools like the PGSI scale may fail to capture true prevalence due to social desirability bias; this may call for a more culturally responsive measure of gambling severity.

Similarly, personality traits like impulsiveness were measured via single-item scenarios rather than validated multi-item scales due to the survey length constraint. This practice may sacrifice some extent of measurement validity compared with a full-scale measurement.

¹⁹ In this usage, a high-context culture is one where norms are known and unspoken, so communication may be less direct and less verbal, while in low-context cultures explicit verbal communication is required to understand the message being communicated.

Cognitive distortions, while captured through an adapted GRCS scale, were condensed into broad factors (e.g., "predictive control"), potentially masking specificities of culturally specific beliefs (e.g., luck and fate beliefs and luck rituals) that only qualitative interviews could capture.

6.3.3 Contextual factors

New Zealand's unique gambling landscape – with its regulated casino environments and pervasive Class 4 venues – differs significantly from the prohibitive policies in many Asian home countries. This regulatory contrast may amplify migrants' exposure to gambling opportunities.

Furthermore, the cross-sectional design of this research captures a snapshot of stressors during a specific post-pandemic period (2023–2024), but it may overlook longitudinal patterns such as how gambling behaviours evolve over longer time of residency.

6.3.4 Future research recommendations

This study focused on the applicability of the Integrated Tree Model to the factors that lead migrants to risk of harm from gambling, but it did not collect information specifically on protective factors. That is, it did not interrogate the motivations of those Asian migrants who did not gamble. This could have helped to identify protective factors that also could be mapped to the Integrated Tree Model and could be the subject of future research.

Gendered patterns of gambling among migrants might also be explored in future studies. This research indicated that gambling harm may intersect with migration-related stress and coping strategies differently for men and women.

Future research can be conducted on investigating interactions of personality, cognitive and cultural factors (given the perception of gambling activities and what constitutes harmful gambling can vary within Asian communities, particularly among new migrants), or mediation pathways to further clarify their roles in risk or prevention of gambling harm.



6.4 Innovation and use of the study

This research can be used to bridge gaps in responding to Asian communities' needs in a culturally responsive manner by better understanding the broader external contexts and internal factors that influence gambling behaviours. It is a substantial effort toward building a health-related conceptual model for the Asian population.

Evidence to validate the Integrated Tree Model can support future clinical intervention, driving both consistency and quality of care for Asian populations. Adopting the model removes the 'blame' of gambling harm from the individual to considering how system issues (such as policy, environment and life experiences) influence propensity to engage in harmful gambling. In addition, this research is intended to contribute to equity of health access, service quality and outcomes for Asian migrants, who comprise nearly three quarters of the currently resident Asian population according to New Zealand Census 2023. It also provides a valuable resource to staff providing support to those who experience gambling addiction and comorbidities.

The research findings emphasise the need for a holistic approach to treating gambling risks and harm. The study confirmed that gambling harm is often rooted in complicated psychological and cognitive issues, and links to broader issues such as settlement difficulty and mental health. This has implications for gambling harm support service practice, as it underscores the importance of culturally sensitive interventions that consider cultural mindsets, values, beliefs, variations in experiences, and the involvement of family and wider environments in shaping the supporting net.

6.5 Policy implications

The findings from this research support efforts to make gambling harm prevention culturally responsive to new Asian migrant groups.

6.5.1 Industry regulation

At the time of writing, online gambling regulation is under further development in New Zealand. This study supports measures to control the pervasive influence of gambling advertising, especially offshore sites and social media influencers who target Asian migrant communities on social media and online platforms frequented by younger migrants. For instance, the study's finding that South Asian and East Asian migrants are disproportionately drawn to casino games and are influenced by culturally tailored advertising (e.g., venue advertising, festive decorations in casinos associated with cultural symbols), underscores the need to regulate targeted gambling advertisements and online social media promotion. The influence of cultural symbols in gambling promotion makes a case for further policy regulations restricting the gambling industry's

ability to target Asian people with visual cues and other enticements of cultural importance or significance. This reinforces recommendations of previous research including Chinese people in New Zealand (Tse et al., 2012).

Additionally, the link between gambling accessibility and harm, particularly in densely Asian-populated regions like Auckland, warrants attention on the density of Class 4 venues near migrant hubs. Migrants' relative unfamiliarity with New Zealand regulations makes the application of host responsibility policies particularly important for preventing harm. It is important that when migrants are attracted to gambling with hosts from their own cultural and linguistic backgrounds that they will be made aware of what boundaries and support are available to ensure that their gambling activities do not lead to harm.

Promoting safer gambling environments need not discourage participation among those who find some social benefit from safe levels of gambling participation. By addressing the unique pathways to harm – rather than participation itself – strategies can preserve recreational gambling activities while preventing escalation into harmful gambling.

6.5.2 Settlement and social support

The research underscores that newer immigrants, particularly during their first 2–5 years in New Zealand, face heightened vulnerability to gambling harm. This is likely due to intersecting pressures such as life transitions, acculturative stress, financial instability, and social isolation. Systemic support for migrants during high-stress settlement phases (e.g., the first 2–5 years post-arrival) is critical.

To mitigate these risks, Asian migrants would benefit from more awareness of the harm prevention techniques they have available to them in this new regulatory environment. For example, multilingual resources, community campaigns, and information on how banks can enable family financial transparency can help to limit harmful gambling behaviour. These ideas apply to support and information services for many life transitions, including retirement and orientation for new students, as well as specific settlement services for migrants.

Finally, the disproportionate impact of life stressors – such as relationship crises, unemployment or other significant life changes – on gambling severity highlights the need to provide enough of a social safety net that people of all ethnicities will be less driven towards high-risk gambling as a stress response to financial and relational pressures.



6.6 Clinical practice implications

For addiction and counselling services, the Asian Integrated Tree Model offers a cultural framework to guide clinical practice with clients of Asian ethnicity. The emphasis on interconnected factors – cultural beliefs, cognitive bias, personality traits, and environmental layers – calls for a shift from symptom-focused interventions to evidence based holistic assessments.

The research highlights the need to embed cultural responsiveness into both clinical addiction services and community health promotion strategies to address gambling harm among new migrants.

6.6.1 Culturally informed interventions to counter gambling biases

The study highlights how internalised cultural narratives (such as beliefs in luck cycles and fate) and generic gamblers' fallacy can increase harmful gambling behaviours. To address this, interventions must actively deconstruct cultural myths while respecting cultural values.

6.6.2 Information and health promotion

Educational campaigns could employ culturally responsive literacy training about probabilities to challenge misconceptions about luck and predictive winning. The harm-reduction idea of 'safer' gambling, or 'lower risk' gambling could be used in orientation programmes, raising awareness of the odds of winning and the industry techniques used to encourage more gambling, as well as how to set safe limits on gambling expenditure and time spent gambling. Workshops led by bilingual facilitators might mix Western concepts of statistical literacy with culturally relevant examples, such as debunking myths around "lucky numbers" in casino games.

These efforts should be complemented by multilingual resources – such as translated guides, helpline services, and culturally resonant videos – that clarify gambling regulations, probabilities of winning, and pathways to seeking help. Community partnerships are critical here; collaborating with ethnic associations, faith groups, and migrant-led organisations can ensure messages reach audiences through trusted channels, such as cultural festivals or community hubs.

Meanwhile, public health promoters could collaborate with leaders within Asian communities to disseminate counter-messaging through social media or community storytelling, reframing gambling not as a path to prosperity but as a business model that encourages gambling more than intended and can thus prove a threat to financial and familial stability.



6.6.3 Counselling and clinical support

The Integrated Tree Model can form the basis of narrative techniques exploring influences on individuals' experiences and wellbeing, enabling them to understand the reasons that led them to harm, and to let go of the shame that can be caused by feeling it is their fault. Psychological intervention models or therapy including cognitive behavioural therapy programmes can work with migrants to a certain degree, and combining this with cultural awareness and the structure of the Integrated Tree Model could better engage Asian people to understand the journey of migration, its associated challenges, break stigma, and build trust.

Many Asian cultures are community based, meaning that peer-led recovery groups and family-inclusive treatment models are likely to be well received. This might involve incorporating family-centric approaches for collectivist cultures to break stigma and build trust, or integrating modules on combating cognitive biases in gambling.

For instance, clinicians working with Asian clients reporting gambling harm should screen for cognitive distortions and culture-related biased thoughts and link these to culturally adapted counselling modules that transform superstitious thoughts into logical thinking through probabilistic literacy exercises. Similarly, community clinical services may consider implementing screening for impulsiveness and risk-taking propensities in their assessment processes, and develop targeted therapeutic programmes such as using mindfulness techniques to lower impulsiveness.

For Asian clients whose risks are tied to structural factors like lower education or lower income households, may benefit from interventions that integrate vocational training or debt management support alongside addiction counselling, addressing both the "trunk" (demographic vulnerabilities) and "roots" (cultural beliefs) of harm and beliefs about what kind of gambling can become harmful.

6.6.4 Demographic and cultural differences

The nuanced differences between ethnic subgroups further emphasise that cultural frameworks are not monolithic. Clinical interventions and community engagement must account for intra-Asian diversity in values and beliefs, migration trajectories, and community resources.

For example, our research found differences between the risk profile and motivating factors for of Chinese and Indian respondents. The Chinese respondents to this research reported more cognitive and psychological distortions and settlement stress, so would likely benefit from interventions to challenge illusions of control (e.g., probability literacy programmes), targeted mental health and social support for settlement-related stresses, and support for low-income families. For Indian respondents, risk was higher for those who were at a more vulnerable stage (recent



migration, lower education), more inclined towards risk-taking, and who held culturally biased beliefs about gambling. This suggests Indian respondents could respond to culturally appropriate public health campaigns to debunk gambling myths with a focus on addressing culture-specific cognitive biases.

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Appendices

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Appendix A: Summary table of literature reviewed

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
1	(Abdi et al., 2015)	Ethiopia	Survey, n=422	Ethiopian high school students	Self-esteem, cognitive bias, drug abuse, peer influence, parental gambling, accessibility of gambling and advertising.
2*	(Calado et al., 2020)	UK	Survey, n=1137	Portuguese and English	Individual and family factors, motivational, cognitive.
3	(Chan & Ohtsuka, 2011)	Hong Kong	Qualitative study	Chinese problem gamblers seeking help in Hong Kong	Early involvement, early wins, poor decision-making and a lack of effective coping skills.
4*	(Chee & Lui, 2021)	Singapore	Narrative review	Chinese living in western countries	Cultural differences in social and cultural factors, including acculturation.
5	(Chiu & Woo, 2012)	USA	Survey, student sample (n=192)	Chinese American adolescents	Gender, urge to win, substance use, video gaming.
6*	(Colby et al., 2022)	USA	Interviews to local Khmer (n = 12), Chinese (n = 20), Korean (n = 3), and Vietnamese (n = 5)	Asian migrants in America	Low socio-economic status, difficulty in acculturation.
7	(Dinshaw et al., 2017)	Canada	Qualitative interviews with gambling harm service providers and responsible gambling casino staff	Immigrants in Canada	Presence or absence of state sanctioned gambling in countries of origin, cultural beliefs about luck, length of time in Canada, expectations about gender roles, and lack of knowledge about the relationship between gambling and addiction.
8*	(George et al., 2016)	India	Survey, student sample (n=5k+)	South Asians	Gender, occupation, educational attainment, substance use, psychological status, ADHD.
9	(He et al., 2023)	Macao	Telephone Survey of Chinese gamblers (n=464)	Chinese people resident in Macao	A significant and positive association between protective gambling beliefs and responsible gambling behaviours.

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
10	(Jacoby et al., 2013)	Germany	Semi structured interviews (n=106)	Migrants and Germans with varying degrees of gambling problems	The experience of acculturative stress can predict the severity of gambling problems as well as the motivation and craving to gamble. More religious participants having lower severity of gambling problems.
11	(Ji et al., 2015)	Canada	41 Euro-Canadian, 40 Asian Experiments to show gambling related beliefs	Students with different ethnic backgrounds	Asians (mainly Chinese) were significantly more likely than Euro-Canadians to believe that they would win (correctly predict the coin toss) after a series of losses (a non-linear thinking pattern), suggesting greater susceptibility to the gambler's fallacy.
12*	(Johansson et al., 2009)	Norway	Critical review	Generic	Comprehensive (demographics, physiological and biological factors, cognitive distortions, comorbidity and concurrent symptoms, and personality symptoms and characteristics, etc).
13	(Kastirke et al., 2015)	Germany	Data from a telephone survey, n=1,209 gamblers with a migration background	Respondents to a nationwide survey on gambling	Demographic risk factors and gambling preference may partially mediate but not completely explain the higher prevalence of gambling problems among the population with migration background. Having an MB may be considered as an independent risk factor for gambling problems.
14	(Keen et al., 2015)	Australia	Literature review	"Asia", "gambling", "domestic violence", "family violence", and "abuse"	Cultural factors include patriarchal family systems, low help seeking and under reporting, the impact of collectivist culture on gambling normalisation, and immigration and acculturation stresses.
15	(Keovisai & Kim, 2019)	USA	Interviews, n=25	Older east Asian migrants in US	Culture-specific motivational and cognitive factors.
16*	(Kim, 2012)	USA	Conceptual	Asian migrants	Acculturation-related factors.

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
17	(King et al., 2020)	USA	Structured interviews, 200 participants recruited from a community centre	Lao nationals in USA	Motivations: Making money (68%), social life (31.3%), entertainment (58.3%), and reducing boredom (35.4%), depression or stress (14.6%) and escape (10.4%). More participants in the problem gambling group who had started gambling before the age of 13 years. Twice the level of sibling problem gambling histories relative to those without problem gambling.
18	(Kong et al., 2013)	USA	Cross sectional survey	Asian and Caucasian American high school students	Binomial distribution of gambling behaviour in Asian students – less likely to gamble, more likely to experience problems if they do. More family views on gambling among Asian students, either pro or anti. Link with cigarette smoking and gambling problems.
19	(Lin et al., 2023)	Korea – Korean-Chinese participants	Survey n=314	Korean-Chinese sports club participants	Emotional isolation had the most positive effect on sports gambling addiction tendency, followed by social alienation. Among the subfactors of cultural adaptation, work adaptation had a negative effect on sports gambling addiction tendency.
20*	(Loo et al., 2008)	China	Meta analysis, n=25 (12848 samples)	Chinese	Cultural difference in gambling patterns and correlates.
21	(McCready et al., 2007)	Mixed ethnicities in Canada	Secondary analysis of large national survey n=14,422	Comparison between Ontario residents of different ethnic backgrounds. Most Asian migrants ended up grouped into a low prevalence cluster which limits some of the analysis for our purposes	Among immigrants, longer amounts of time in Canada were associated with fourfold increase in the odds of reporting a gambling problem. Among Low Prevalence groups, reporting a gambling problem was associated with reporting a mood disorder, and with an alcohol/any substance disorder.
22*	(Miller, 2015)	Australia	Review- Government report	Generic	Environmental, geographic, social, cultural, demographic, socio-economic, family and household risk factors.
23*	(Ohtsuka & Ohtsuka, 2014)	Australia	Interview, n=21	Vietnamese Australian	Culture-specific cognitive influence.

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
24	(Okuda et al., 2016)	International	Evidence review	Studies on gambling disorder risks among migrants	Racial and ethnic minority status in itself is not a risk factor for gambling disorder but may be a proxy for underlying potential risk factors such as social economic disadvantage, gambling availability, stress and acculturation processes, as well as cultural variations in values and cognitions.
25	(Papineau, 2005)	Canada Chinese	Literature review	Cultural concepts relevant to Chinese population in Montreal relating to gambling harm	Beliefs on fate, luck, control may be risky; value of stability in family may be protective.
26	(Petry et al., 2003)	USA	Survey, n=96	Southeast Asian refugees	Demographic factors.
27	(Price, 2023)	Canada	A cross-sectional online survey of gamblers (n=2,012) in Ontario, Canada.	Amidst this sample were smaller cohorts of East Asians (n=206) and South Asians (n=107).	East and South Asian gamblers in Ontario experience a variety of comorbid health inequities, relative to other gamblers in the province. These inequities related to online gambling risks, intoxicated gambling, mental health problems, and, to a lesser degree, financial concerns.
28	(Radermacher et al., 2016)	Australia	Individual interviews and a focus group with 36 individuals from the Chinese (n = 25) and Tamil (n = 11) communities	Ethnic minority communities (Tamil and Chinese)	“Saving face” may make it harder to seek help. Cultural differences in conception of what makes a gambler/ what is problematic. Shame felt more widely than individual, thus more motivation to cover up problems.
29	(Raylu & Oei, 2004)	International	Review	Generic	Discussed three cultural variables (i.e., cultural beliefs and values, culturally determined help-seeking attitudes, and the process of acculturation).
30*	(Rowlatt et al., 2023)	Australia	Review	East Asian descent in Australia	Cultural variations in motivation, beliefs, (and behaviours).
31*	(Sharman et al., 2019)	UK	Systematic review	Generic	Being male, co-morbid mental and physical health conditions, substance use disorders, accessibility and availability of gambling, form and mode of gambling, and experience of trauma.

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
32	(Sobrun- Maharaj et al., 2013)	NZ	Mixed methods qual	Four major Asian ethnic subgroups in New Zealand, i.e. Chinese, Indian, Korean and Southeast Asian, and with Asians from a refugee background; 50 face-to-face interviews were then completed with individuals across the five groups; four focus group discussions.	Acculturation and settlement stress caused by cultural differences, financial difficulties and concomitant family stress; negative environmental factors such as social isolation and gambling culture. Cultural and language differences, social isolation, financial stress compounded by expectations of sending funds to family (family values can be protective against gambling though), changing dynamics within families/ spouses, poor coping strategies.
33*	(Subramania m et al., 2017)	Singapore	Interviews, n=25	Older Asian gamblers	Culture-specific cognitive bias.
34	(T. Oei & Raylu, 2009)	Australia	Questionnaire survey n=233	Chinese residents in Brisbane	Adjustment to host culture (both adopting local culture and retaining links to own culture) was protective. Adherence to Asian cultural values linked to more gambling problems.
35	(T. P. Oei & Raylu, 2010)	Australia	Questionnaire survey	Chinese (n=199) and white (n=306) Australian residents	Chinese were more likely than Caucasians to report chasing behaviour most of the time or every time they gambled, as well as claiming to be winning when they were not. On the other hand, Caucasians were more likely than Chinese to report having gambled more than they intended Extrinsic motivation- identification was higher among Chinese than Caucasians. More motivations among Chinese males; implications for ideas about gambling and social standing.
36*	(T. P. S. Oei & Goh, 2015)	Singapore	Survey, n=310	Southeast Asians	Risk (i.e., gambling cognitions, gambling urges, psychological distress) and protective factors (i.e., life satisfaction, resilience, gambling refusal self-efficacy).
37	(Tang & Oei, 2011)	China	Survey, 132 European+154 Chinese gamblers	Chinese	Cognitive and emotional risk factors triggered by stress.

No.	Author(s)/ Year	Country	Methodology/ sample size	Target group/ context	Factors identified
38	(Tang & Wu, 2012)	China	Survey	2,835 youths, 934 young adults, and 162 mature adults in Chinese societies.	Various levels of gambling pathology among. Among the five categories of cognitive biases being examined, perceived inability to stop gambling (GRCS_IS) and positive gambling expectancy bias (GRCS_GE) were the most salient correlates of pathological gambling.
39	(Thomas et al., 2000)	Australia	Government report	Cultural groups in Australia	Had a section specifically discussed about risk factors for problem gambling.
40*	(Thurm et al., 2023)	Australia	Survey, n=516	Generic gamblers	Psychological and cognitive factors and stressful life events.
41	(Vuorinen et al., 2021)	4 countries including South Korea	Demographically balanced cross-sectional survey	15–25 year olds in Finland (n = 1200), the United States (n = 1212), South Korea (n = 1192), and Spain (n = 1212)	Loneliness and low sense of mastery were associated indirectly with excessive gambling via psychological distress in all country samples. Low sense of mastery was also directly associated with excessive gambling. There was a direct association between loneliness and excessive gambling only in samples from South Korea and Spain.
42*	(Williams et al., 2012)	South Korea	Survey, n=4k	Korean	Gambling fallacies (cognitive bias), demographic, mental health, motivation +protective factors (attitude to gambling, restricted access).
43*	(Wilson et al., 2015)	USA	N=5363 versus n=19715	Migrants versus native Americans	Demographic factors, and also inter- and intra-generational influences, duration and age of arrival (acculturation), country of origin.
44	(Wu & Lau, 2015)	China	Conceptual	Chinese	Culture-related cognitive factors.
45	(Zheng et al., 2011)	Australia	Survey, n=229	Chinese Australian	Gender(male), age (35 or older), oriental orientation (as opposed to western orientation) related to propensity to gambling.
46*	(Caler et al., 2017)	USA	Survey, n=1341 (Asian/other= 177)	Multi ethnicities	Alcohol or drug use, east-Asians, gender, social factors such as social isolation, language barriers, and access to employment.

Appendix B: Interview guide

Qualitative interview guidelines – own gambling

Note for researchers: these questions do not have to be followed in order, but we wish to prompt participants to reflect on elements of the Asian Integrated Tree Model as they tell their story. Use these guidelines to ensure that participants have the opportunity to consider all the groups of factors that may have influenced their experiences.

As participants tell their stories, we will prompt them to consider relations with the closest people in their lives, what the wider community they interacted with was like, and the social norms and ideas that influenced their choices.

The interview topics will be similar when the participant is an affected other. We will ask them to tell their story of their immigration experience and gambling experience, culture-specific behavioural and thinking patterns, alongside the onset of gambling engagement and harm. Depending on how talkative the participant is, overall questions are listed first, with prompt questions in italics for following up if these topics are not raised by the participant.

Introduction

Introduce interviewer and note-taker/ cultural support person.

Thank you for agreeing to help us with this interview. Before we start, do you want to ask any questions about the research and this process? Has everything been explained to you? We will check the information and consent form together. Please let us know if it is ok to record this interview.

Background

Can you tell us about where you are originally from, and when you moved to New Zealand?

What were your reasons for migrating? (e.g. travel, work, study, family...)

Personal characteristics

Let's talk a bit more about you: you are from (Country), you've been here (amount of time);

[interviewer note: participant gender, age range, ethnicity, client type-AFS/public recruit, etc]

What sort of events and activities do you enjoy? (prompt: are you really social or prefer to be quieter, do you like excitement and taking risks)

What sort of things are you really good at? [Optional prompt: what do you do for a living? Are you single or married? Asking about occupation/employment status/marital status, which may imply social economic status]

Gambling and mental health journey

What made gambling activities appeal to you? (Prompts: does this relate to what you said about the things you enjoy or find motivating? Were there other reasons to do with your situation?)

How did your gambling behaviour develop?

Prompt: how did gambling participation get out of control? How did you realise it was causing problems?

If relevant: How long have you been seeing Asian Family Services/ other service provider?

Why did you seek support? What led you to seek support from them?

We are interested in the things that influence people's experiences with gambling.

Experience in NZ

What was going on for you in the time between arriving in New Zealand and experiencing problems from gambling?

When you started gambling here, what life stage were you at? How old were you, what was your family situation? Were you studying, working, being retired, or doing something else?

How were you settling into life in New Zealand – what was going well or not so well? (how were you feeling – prompt about psychological state)

What was your employment and financial situation? Relationship status? Did you have friends or family while living in NZ?

Were there other significant events happening at that time? (eg changes in life stage, e.g., being broke, being bankrupt, academic difficulty, breakup, loss and grief, domestic violence...etc. difficult or positive experiences)

Are there other physical or mental health conditions you have been experiencing?

(Prompt on comorbidity): any relationship issues? Cigarette, drugs, alcohol?

Community influences

How did the people in your life influence your gambling activities? What ideas did people have, who encouraged it, who discouraged it?

(prompts: family structure, family dynamics, family gambling behaviour, physical separation (or not) from family. Influence of friends, virtual friends/community, workmates/classmates)

Thinking patterns in gambling

What were the really important values you were brought up with? (for example, ideas about family, how to behave and interact with others, what to be most proud about)

What sort of cultural beliefs or messages do you remember about gambling, or playing games for money?

Was it encouraged, discouraged, were there ideas about what did and didn't count as gambling?

Suggested prompt 1: How do you see gambling and gambling outcomes? Do you believe in luck and fate, or have some beliefs that there is a thing that could help you win?

Suggested prompt 2: Did you believe that “when luck comes, it will bring more wins”? How do you reduce your bad luck in gambling? Did you believe some objects, some numbers, or some cultural rituals can help with winning more? Can you give some examples? ... Do you think this thinking is related to your home culture?

Suggested prompt 3: In your previous gambling behaviours, do you relate your winning to your skills, or your mastery [confidence] of techniques?

Environment influences

In the area you were living, what sort of opportunities were there to gamble, or messages that made people consider gambling?

Do you recall advertising for gambling, and the sort of messages you got about gambling as an activity in New Zealand? (prompts, for example physical advertising, media, social media, websites, the sort of incentives that you remember)

Were there any things happening around you that made you feel stressed?

Have you noticed changes in the types of gambling activities that you could take part in?

Do you think any of these things influenced your choices about gambling? How?



Do you think policies or rules about gambling are different in New Zealand compared to where you are from? How? What do you think about this?

Final words

Thank you for telling us your story. Is there anything else you have been thinking about that we have not already discussed, especially about what made a difference to your experience with gambling harm?

Thank you very much. If there's nothing else, we will turn off the recording now.

Qualitative interview guidelines – affected others

Note for researchers: these questions do not have to be followed in order, but we wish to prompt participants to reflect on elements of the Asian Integrated Tree Model as they tell their story. Use these guidelines to ensure that participants have the opportunity to consider all the groups of factors that may have influenced their experiences.

As participants tell their stories, we will prompt them to consider relations with the closest people in their lives, what the wider community they interacted with was like, and the social norms and ideas that influenced their choices.

The interview topics will be similar when the participant is an affected other. We will ask them to tell their story of their immigration experience and gambling experience, alongside the onset of gambling engagement and harm. Depending on how talkative the participant is, overall questions are listed first, with prompt questions in italics for following up if these topics are not raised by the participant.

Introduction

Introduce interviewer and note-taker/ cultural support person.

Thank you for agreeing to help us with this interview. Before we start, do you want to ask any questions about the research and this process? Has everything been explained to you? We will check the information and consent form together. Please let us know if it is ok to record this interview.

Background

Can you tell us about where you are originally from, and when you moved to New Zealand?

What were your reasons for migrating? (eg travel, work, study, family...)

If relevant: How long have you been seeing Asian Family Services/ other service provider?

Why did you seek support? What led you to seek support from them?

(prompts: ask for detail how the other person's gambling behaviour and harm developed)

We understand you are here talking about how someone's gambling affected you or your family. Could you please tell us who that person was and their relationship with you – we will use their name when we talk, if that is ok with you.

We are interested in the things that influence people's experiences with gambling.

Experience in NZ

What was going on for the person in the time between arriving in New Zealand and experiencing problems from gambling?

*How were they settling into life in New Zealand – what was going well or not so well?
(how were you feeling – prompt about psychological state)*

What was your and their employment and financial situation? [“your situation” may not be asked if “you” are not a family of the affected others]

Were there other significant events happening at that time? (eg changes in life stage, difficult or positive experiences)

Are there other physical or mental health conditions you or the family have been experiencing? [“your situation” may not be asked if “you” are not a family of the affected others]

Community influences

How did the people in your life influence (person's) gambling activities? What ideas did people have, who encouraged it, who discouraged it?

(prompts: family structure, family dynamics, family gambling behaviour, physical separation (or not) from family. Influence of friends, virtual friends/community, workmates/classmates)

Behavioural and thinking patterns in gambling

What were the really important values you and (person) were brought up with? (for example, ideas about family, how to behave and interact with others, what to be most proud about)

What sort of cultural beliefs or messages do you remember about gambling, or playing games for money?

Was it encouraged, discouraged, were there ideas about what did and didn't count as gambling?

[suggested prompt] If you recalled about their previous gambling experience, did he or she have some 'unique' thoughts about their winning odds? Do they believe in their luck? their fate (did they say something like 'I am destined to win big money')? or their skills?

[suggested prompt2] What do you think he or she would think when they kept on putting money into gambling? Is this thinking related to their culture?

Environment influences

In the area you were living, what sort of opportunities were there to gamble, or messages that made people consider gambling?

Do you recall advertising for gambling, and the sort of messages you got about gambling as an activity in New Zealand? (prompts, for example physical advertising, media, social media, websites, the sort of incentives that you remember)

Have you noticed changes in the types of gambling activities that you could take part in?

Were there any things happening around you that made you or (person) feel stressed?

Do you think any of these things influenced (person's) choices about gambling? How?

Do you think policies or rules about gambling are different in New Zealand compared to where you are from? How? What do you think about this?

Final words

Thank you for telling us your story. Is there anything else you have been thinking about that we have not already discussed, especially about what made a difference to your experience with gambling harm?

Thank you very much. If there's nothing else, we will turn off the recording now.

Cultural concepts identified throughout the interview:

Original language, translation and explanation of what the concept means in the context of the participant's story

Appendix C: Participant information and consent form

Participant information sheet

Asian migrants and gambling harm – Information and consent form

Research by Allen + Clarke and Asian Family Services, sponsored by the Ministry of Health

Coordinating Investigator: Dr Bo Ning, Allen + Clarke

Research site: Auckland (in-person) with option for online

Ethics committee reference: 2024 EXP 20340

Tēnā koe,

You are being invited to share your experiences as a person who moved to New Zealand from Asia and has experience with gambling harm. We are looking for people who have sought help for their own or someone else's gambling, and who can talk about experiences with gambling and its impacts on mental health.

What's it all about?

This research is being conducted by a team of researchers from *Allen + Clarke* and Asian Family Services. We are looking at personal and environmental things that impact people's experiences with gambling, and are using a tool that AFS developed called the Asian Integrated Tree Model which compares the Asian migration journey to a tree's transplantation process. This research will help to improve this tool to make a culturally-appropriate guide for helping Asian migrants affected by gambling harm.

Why have I been invited?

You are invited to participate because we want to talk to people from Asian cultures about experiences with gambling (either their own or someone else's) as a migrant to New Zealand.

What is involved?

If you choose to take part in the research, you'll be interviewed by two members of the team. We will work with support people from your service provider or another support organisation to meet with you. They can attend the interview with you if you'd like. We will arrange a space where we can meet safely and privately. We can also conduct interviews via online video calls if you would prefer this.

We'll ask you to share your experiences with gambling harm and mental health since you came to New Zealand. You may ask for recording to be turned off, or to stop the interview, at any time, and you do not have to answer any question that you do not wish to.

The interview will take about 1 hour, and you will receive a \$80 voucher afterwards to thank you for participating. If you agree, we will record and take notes from the interview. We'll give you a copy of this form to keep.

You can be interviewed in English or in your preferred language.

How will my privacy be protected?

Our discussion will be private and the information from your interview will only be accessed by our project team. We won't use your name or any other details about you. In any reports or presentations, we won't include information that would make it possible for someone to identify you, and if we include any quotes from what you tell us, these will be short and not include any identifying details about you.

We will store notes from interviews on a secure system, and will label them with a code so your own name will not be linked to what you have said.

The information we gather from people like you will not be used for any other purposes or research projects. All records will be kept secure at *Allen + Clarke* during the project and will be destroyed after a year. We will take action to prevent any privacy breaches (unplanned or accidental access to personal information). Should we suspect a breach has occurred, we would inform you and the organisations that oversee our work, and carry out a number of steps to prevent harm occurring as a result.

The only situation in which we would share your information with any other people is if you tell us something that indicates there may be a serious threat to the life or health of you or another person.

The only other people who may have access to the information include: the sponsor, ethics committees, or government agencies, if the study or site is audited. Audits are done to make sure that participants are protected, the study is run properly, and the data collected is correct.

What are the benefits and risks of participating in the research?

This information will help us improve the resources on offer to help people from different Asian cultures with problems relating to gambling and mental health.

We understand that some experiences may be upsetting to talk about, and we would work with you to ensure you are comfortable with choosing the type of information you

wish to discuss. If you feel distressed as a result of participating in the research, we will stop the interview, and will help you to access support if you need it.

Do I have to take part?

You do not have to take part in this project. Please read the information sheet and feel free to ask any questions about the project so you know what you're agreeing to. If you decide you no longer want to take part after the interview, we are more than happy to remove your interview and data from the project.

Taking part (or not taking part) in the project will not affect your current or future relations with your service provider.

Who can answer my questions about the project?

You can contact Dr Wardah Ali at [CONTACT DETAILS REDACTED] to ask any questions you have about the project, or to ask to withdraw. You may also request a copy of the information gathered about you, and correct any inaccuracies in the notes. If you wish to withdraw your information from the study, you will need to advise the team before September 2024, when the first report will be drafted.

This study has been approved by an independent group of people called a Health and Disability Ethics Committee (HDEC), who check that studies meet established ethical standards. If you have any questions or concerns, please contact hdecs@health.govt.nz.

If you want to talk to someone who isn't involved with the study, you can contact an independent health and disability advocate on:

Phone: 0800 555 050

Fax: 0800 2 SUPPORT (0800 2787 7678)

Email: advocacy@advocacy.org.nz

Website: <https://www.advocacy.org.nz/>

Statement of consent: I agree to take part in the research on Asian migrants and gambling harm

Please circle yes or no alongside each statement below.

I have read the information sheet about this research. Yes / No

I consent to take part in the research. Yes / No

I consent to audio record the interview. Yes / No

Signature _____ Date _____

Printed name _____

Optional:

I wish to be emailed a copy of reporting that is published from this research.

Email address _____

Declaration by member of research team:

I have given a verbal explanation of the research project to the participant, and have answered the participant's questions about it.

I believe that the participant understands the study and has given informed consent to participate.

Signature _____ Date _____

Printed name _____

Appendix D: Survey questionnaire-online/paper (English)

Participant Information Sheet

This research aims to explore the factors associated with gambling participation and mental health among Asian population living in New Zealand. Your response will help us improve the resources on offer to help people from different Asian cultures with problems relating to gambling and mental health.

Your participation in this survey is completely anonymous. All responses will be kept confidential and stored securely for a year from the completion of the study and then destroyed. Data collected will be for aggregate analysis only, and no individual information will be identifiable in any research outcomes nor publications. The information we gather from people like you will not be used for any other purposes. This research is funded by the Ministry of Health (Gambling Harm Research Fund GH2024-32) and undertaken by *Allen + Clarke* and Asian Family Services,

[for online version] By clicking the forward arrow button “⇒” to proceed with the survey, you are providing consent in participating in this research study and the use of your anonymised data for research purposes. If you choose not to participate, you may simply close the window and exit. Please ensure that you answer all questions true to your situation and to the best of your ability.

[for print version] Please let the survey administrator know if you would proceed with the survey and consent in participation in this research. Please ensure that you answer the questions true to your situation and to the best of your ability.

It may take you about 10 to 15 minutes to complete.

[for online version] You are entitled to 100 Reward Points and to entering a draw to win one of 10 Woolworth Gift Card (\$50 worth) for completing the survey if you are a member with Trace Research online panel. Trace Research reserves the final interpretation of this promotion.

[for print version] After you completion of the survey, please hand it back to the survey administrator. You will be able to receive a small gift valued at \$xx as a token of thanks at the AFS booth, after the survey administrator confirms your completion of the survey. Asian Family Services reserves the final interpretation of this promotion.

If you have any questions or concerns about the survey, please feel free to contact the research team at Dr Wardah Ali or Dr Bo Ning [*CONTACT DETAILS REDACTED*].

If you feel uncomfortable as a result of participating in the research, you may pause or stop at any time. If you require immediate assistance or support related to gambling or mental health issues, please call Asian Helpline 0800862342.

Thank you for considering participating in this study. Your input is invaluable to our research efforts.

[for online version] The survey will be closed on 4th December 2024.



Factors related to Asian Migrants' Gambling and Mental Health

Thank you for participating in this survey. Your responses will help us better understand the risk factors associated with gambling participation and addictive behaviours among Asian population living in New Zealand. Please circle or tick on the response(s) that you would like to choose when you respond to a survey question.

Section 1 is about some demographic information of yours.

1. Gender:

- Male
- Female
- Non-binary or gender diverse
- Prefer not to say

2. Age:

- Under 18
- 19-24
- 25-44
- 45-64
- 65 or older

3. Where were you born?

- China
- India
- Korea
- The Philippines
- Sri Lanka
- Japan
- Thailand
- Vietnam
- Cambodia
- Taiwan
- Indonesia
- Malaysia
- New Zealand
- Other (please specify): _____

4. What ethnicity group(s) do you identify yourself with? **Select all that apply.**

- Chinese
- Indian
- Korean
- Filipino
- Sri Lankan
- Japanese
- Thai
- Vietnamese
- Cambodian
- Taiwanese
- Indonesian
- Malaysian
- Kiwi / New Zealander
- Other (please specify): _____

5. How many years have you been living in New Zealand?

- Less than 2 years
- 2-5 years
- 6-10 years
- More than 11 years

6. Which area are you living in?

- Auckland
- Wellington
- Other regions of the North Island
- Christchurch
- Other regions of the South Island
- Outside New Zealand **[exit the survey-disqualified (online)]**

7. Your relationship status:

- Single
- Married/living with a partner
- Divorced
- Separated
- Widowed
- Other (please specify): _____

8. Your employment status:

- Employed full-time
- Employed part-time
- Casual employment (contractor)
- Self employed
- Unemployed
- Student
- Retired
- Care giving
- Other (please specify): _____

9. Your highest level of education:

- Less than high school
- High school graduate
- College or vocational training
- Bachelor's degree
- Master's degree or higher

10. You estimated annual household income level (before tax):

- Less than \$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- More than \$180,000
- Prefer not to say

The next section will ask about your journey in New Zealand. This part of the survey will cover the languages you speak, your upbringing, and any challenges you faced during migration.

11. Which of the following best describes your everyday language use in New Zealand?

- Asian language only (for example, Chinese, Hindi, Japanese, Korean, Vietnamese, etc.)
- Mostly Asian, some English
- Asian and English about equally well (bilingual)
- Mostly English, some Asian
- Only English

12. Where were you raised?

- In Asia only
- Mostly in Asia, some in New Zealand.
- Equally in Asia and New Zealand
- Mostly in New Zealand, some in Asia
- In New Zealand only

13. Which of the following best describes your social connections in New Zealand?

- Almost exclusively Asian migrants
- Mostly Asian migrants and Asian New Zealanders
- About equally Asian groups and other groups
- Mostly New Zealand European, Māori, Pacific or other non-Asian ethnic groups
- Almost exclusively New Zealand European, Māori, Pacific or other non-Asian ethnic groups

14. As an Asian migrant, have you experienced any of the following issues during your settlement in New Zealand? Select all that apply. **[skip logic to response “New Zealand” in Q3(online)]**

- Language barriers
- Racial discrimination
- Issue with cultural identity
- Financial difficulties
- Loneliness
- Boredom
- Social isolation (not having regular social contact, e.g., friends or family)
- Work stress
- Stress from family relations (e.g., family conflict, domestic violence)
- Other (please specify): _____

The follow-up section is related to how you describe your personalities and life experience.

15. **Scenario question:** "Imagine you're at a shopping mall and see a flashy new gadget that you've been craving for a while. It costs significantly more than you had budgeted for. You have some money saved, but it was intended for something more important, like an upcoming bill. In this situation, how likely are you going to buying the gadget?"

Please rate your likelihood of buying it on a scale of 1 to 10, where 1 is not likely at all and 10 is extremely likely.

1	2	3	4	5	6	7	8	9	10
Not likely at all									Very likely

16. **Scenario question:** "You're with friends at a beach, and you notice a group of people participating in a thrilling water sport—jet skiing. They're laughing, racing, and having great fun. You've never tried it before, and it looks both enjoyable and a little dangerous."

Please rate your likelihood of trying this game on a scale of 1 to 10, where 1 is not likely at all and 10 is extremely likely.

1 Not likely at all	2	3	4	5	6	7	8	9	10 Very likely
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17. Scenario question: "You hear about a new investment opportunity that promises very high returns, but it also has a high chance of losing your initial investment. How likely are you to invest your money in this opportunity?"

Please rate your likelihood of investing on a scale of 1 to 10, where 1 is not likely at all and 10 is extremely likely.

1 Not likely at all	2	3	4	5	6	7	8	9	10 Very likely
---------------------------	---	---	---	---	---	---	---	---	-------------------

18. Have any of these events happened in your life during the last 5 years?
Please select Yes, No or Not applicable.

Event	Response		
Marriage	Yes	No	Not applicable
Gain a new family member	Yes	No	Not applicable
New job	Yes	No	Not applicable
Begin or end school	Yes	No	Not applicable
Mortgage (e.g., buying a house, or a business mortgage)	Yes	No	Not applicable
Business readjustment (downsizing, or upsizing)	Yes	No	Not applicable
Start a new business	Yes	No	Not applicable
Change of financial situation	Yes	No	Not applicable
Change in living conditions	Yes	No	Not applicable
Retirement	Yes	No	Not applicable
Being unemployed	Yes	No	Not applicable
Death of spouse or close family member or close friend	Yes	No	Not applicable
Divorce or marital separation	Yes	No	Not applicable
Involvement with legal matters	Yes	No	Not applicable
Issue with health condition	Yes	No	Not applicable

19. Overall, how satisfied are you with your life right now? Please rate your overall satisfaction on a scale of 1 to 10, where 1 is extremely dissatisfied and 10 is extremely satisfied.

1 Very dissatisfied	2	3	4	5	6	7	8	9	10 Very satisfied
---------------------------	---	---	---	---	---	---	---	---	-------------------------

The last section is about your experience with gambling activities and related mental health.

20. Have you ever participated in gambling activities (e.g, playing Mahjong, playing card games) for fun or entertainment?

- Yes
- No

21. Have you ever participated in gambling activities (e.g buying lotto, playing Mahjong, playing card games) for money?

- Yes
- No

Please skip to Question 33, if a “No” is ticked in both Question 20 and 21. (paper based)

Display logic setup for Q22 to Q32: Yes is selected in Q20, OR Yes is selected in Q21.(online)

22. If you respond “Yes” to either Q20 or Q21, in the last 12 months what types of gambling activities you have participated in? **Select all that apply.**

- Casino games
- Lottery
- Sports betting (such as horse racing, online betting for football games)
- Card games (such as Poker)
- Slot machines
- Mahjong
- Internet gambling
- Online gaming with loot boxes
- Other (please specify): _____
- None of the above

23. In the last 12 months, how often did you you engage in gambling activities in the last 12 months?

- Never
- Rarely (less than thre times a year)
- Occasionally (between 3 to 8 times a year)
- Almost Monthly
- Weekly or even daily

24. In the last 12 months have you bet more than you could really afford to lose?

- Never
- Sometimes
- Most of the time
- Almost always

25. In the last 12 months have people criticised your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?

- Never
- Sometimes
- Most of the time
- Almost always

26. In the last 12 months, have you felt guilty about the way you gamble or what happens when you gamble?

- Never
- Sometimes
- Most of the time
- Almost always

27. Have you ever had a family member who ever gambled?

- Yes
- No
- Don't know

28. Please indicate the extent to which each of the following reasons that could influence your decision to participate in gambling activities.

Reasons	To no extent	To small extent	To some extent	To great extent
Perception of luck or chance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To escape from problems or stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For excitement or thrill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To have a good relationship with friend(s) or social connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Belief in my gambling skill or strategy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coping with loneliness or boredom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To win some money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For entertainment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Have you experienced any of the following mental health issues in relation to your gambling behaviour? **Select all that apply.**

- Anxiety or related symptoms
- Distress, depression or related symptoms
- Substance abuse (including tobacco, alcohol, cannabis or other drugs)
- Suicidal thoughts or attempts
- Other (please specify): _____
- None of the above

30. To better understand gambling behaviors, please indicate if you have engaged in any of the following acts when or after gambling. **Select all that apply.**

- Lying about gambling habits
- Borrowing money to gamble
- Neglecting responsibilities (e.g. parenting) due to gambling
- Relationship problems due to gambling
- Other (please specify): _____
- None of the above

31. How much do you agree or disagree with the following statements? Please select one answer for each statement.

Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Gambling makes me happier.	<input type="checkbox"/>				
Praying helps me win.	<input type="checkbox"/>				
Losses when gambling, are bound to be followed by a series of wins.	<input type="checkbox"/>				
Relating my winnings to my skill and ability makes me continue gambling.	<input type="checkbox"/>				
Gambling makes things seem better.	<input type="checkbox"/>				
Specific numbers and colours can help increase my chances of winning.	<input type="checkbox"/>				
A series of losses will provide me with a learning experience that will help me win later.	<input type="checkbox"/>				
Relating my losses to bad luck and bad circumstances makes me continue gambling.	<input type="checkbox"/>				
Gambling makes the future brighter.	<input type="checkbox"/>				
I collect specific objects that help increase my chances of winning.	<input type="checkbox"/>				
When I have a win once, I will definitely win again.	<input type="checkbox"/>				
Relating my losses to probability makes me continue gambling.	<input type="checkbox"/>				

Gambling helps me reduce tension or stress.	<input type="checkbox"/>				
I have specific rituals and behaviours that increase my chances of winning.	<input type="checkbox"/>				
There are times that I feel lucky and thus, gamble those times only.	<input type="checkbox"/>				
Remembering how much money I won last time makes me continue gambling.	<input type="checkbox"/>				
I have some control over predicting my gambling wins.	<input type="checkbox"/>				

32. Please indicate the extent to which each of the following environmental factors influences your gambling behaviour:

Environmental factor	To no extent	To small extent	To some extent	To great extent
Family influence (e.g., parent who gambled)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influence from friends, colleagues or neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influence of gambling advertisements (venue, TV or online ads)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influence of social media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessibility to gambling venue(s) or facilities in my area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments

33. Is there anything else you would like to share about your experiences with gambling or any suggestions for better addressing gambling issues among Asian migrants living in New Zealand?



Thank you for completing the survey.

Appendix E: Survey questionnaire-paper based (Hindi)

प्रतिभागी सूचना पत्र

इस शोध का उद्देश्य न्यूजीलैंड में रहने वाली एशियाई आबादी के बीच जुआ भागीदारी और मानसिक स्वास्थ्य से जुड़ कारकों का पता लगाना है। आपकी प्रतिक्रिया हमें जुआ और मानसिक स्वास्थ्य से संबंधित समस्याओं के साथ विभिन्न एशियाई संस्कृतियों के लोगों की मदद करने के लिए प्रस्ताव पर संसाधनों को बेहतर बनाने में मदद करेगी।

इस सर्वेक्षण में आपकी भागीदारी पूरी तरह से गुमनाम है। सभी प्रतिक्रियाओं को गोपनीय रखा जाएगा और अध्ययन के पूरा होने से एक वर्ष के लिए सुरक्षित रूप से संग्रहीत किया जाएगा, और फिर नष्ट कर दिया जाएगा। एकत्र किया गया डेटा केवल समग्र विश्लेषण के लिए होगा, और कोई भी व्यक्तिगत जानकारी किसी भी शोध परिणामों और न ही प्रकाशनों में पहचान योग्य होगी। हम आप जैसे लोगों से जो जानकारी एकत्र करते हैं, उसका उपयोग किसी अन्य उद्देश्य के लिए नहीं किया जाएगा। इस शोध को स्वास्थ्य मंत्रालय (जुआ हानि अनुसंधान कोष GH2024-32) द्वारा वित्त पोषित किया गया है और एलन + क्लार्क और एशियाई परिवार सेवाओं द्वारा शुरू किया गया है,

[for online version] सर्वेक्षण के साथ आगे बढ़ने के लिए आगे तीर बटन "-->" पर क्लिक करके, आप इस शोध अध्ययन में भाग लेने और अनुसंधान उद्देश्यों के लिए अपने अज्ञात डेटा के उपयोग में सहमति प्रदान कर रहे हैं। यदि आप भाग नहीं लेना चुनते हैं, तो आप बस खिड़की बंद कर सकते हैं और बाहर निकल सकते हैं। कृपया सुनिश्चित करें कि आप अपनी स्थिति के अनुसार और अपनी क्षमता के अनुसार सभी प्रश्नों का उत्तर दें।

इसे पूरा करने में आपको लगभग 10 से 15 मिनट लग सकते हैं।

[for online version] यदि आप ट्रेस रिसर्च ऑनलाइन पैनल के सदस्य हैं तो आप 100 रिवॉर्ड पॉइंट के हकदार हैं और ड्रॉ में प्रवेश करने के लिए सर्वेक्षण पूरा करने के लिए 10 वूलवर्थ गिफ्ट कार्ड (\$ 50 मूल्य) में से एक जीतते हैं। ट्रेस रिसर्च इस पदोन्नति की अंतिम व्याख्या सुरक्षित रखता है।

यदि सर्वेक्षण के बारे में आपके कोई प्रश्न या चिंताएं हैं, तो कृपया बेझिझक डॉ वर्दा अली [CONTACT DETAILS REDACTED] या डॉ बो निंग [CONTACT DETAILS REDACTED] की शोध टीम से संपर्क करें।

यदि आप अनुसंधान में भाग लेने के परिणामस्वरूप असहज महसूस करते हैं, तो आप किसी भी समय रुक सकते हैं। यदि आपको जुए या मानसिक स्वास्थ्य के मुद्दों से संबंधित तत्काल सहायता की आवश्यकता है, तो कृपया एशियाई हेल्पलाइन 0800862342 पर कॉल करें।

इस अध्ययन में भाग लेने पर विचार करने के लिए धन्यवाद। आपका इनपुट हमारे शोध प्रयासों के लिए अमूल्य है।

[for online version only] सर्वेक्षण 4 दिसंबर 2024 को बंद कर दिया जाएगा।

एशियाई प्रवासियों के जुआ और मानसिक स्वास्थ्य से संबंधित कारक

इस सर्वेक्षण में भाग लेने के लिए धन्यवाद। आपकी प्रतिक्रियाओं से हमें न्यूजीलैंड में रहने वाली एशियाई जनसंख्या के बीच जुआ भागीदारी और नशे की लत व्यवहार से जुड़े जोखिम कारणों को बेहतर ढंग से समझने में मदद मिलेगी। कृपया उस प्रतिक्रिया (प्रतिक्रियाओं) पर सर्कल या टिक करें जिसे आप सर्वेक्षण प्रश्न का उत्तर देते समय चुनना चाहते हैं।

खंड 1 आपकी कुछ जनसांख्यिकीय जानकारी के बारे में है।

1. लिंग:

- पुरुष
- महिला
- गैर-बाइनरी या लिंग विविध
- कहना पसंद नहीं करते

2. उम्र:

- 18 वर्ष से कम आयु
- 19-24
- 25-44
- 45-64
- 65 या उससे अधिक

3. आपका जन्म कहाँ हुआ था?

- चीन
- भारत
- कोरिया
- फिलीपीन
- श्रीलंका
- जापान
- थाईलैंड
- वियतनाम
- कम्बोडिया
- ताइवान
- इंडोनेशियाई
- मलेशिया
- न्यूजीलैंड
- अन्य (कृपया बताएँ): _____

4. आप किस जातीयता समूह (समूहों) के साथ अपनी पहचान रखते हैं? लागू होने वाले सभी का चयन करें.
- चीनी
 - भारतीय
 - कोरियाई
 - फ़िलिपिनो
 - श्री लंकाई
 - जापानी
 - थाई
 - वियतनामी
 - कम्बोडियन
 - ताइवानी
 - इंडोनेशियाई
 - मलेशियाई
 - कीवी/न्यूजीलैंड
 - अन्य (कृपया बताएँ): _____
5. आप न्यूजीलैंड में कितने सालों से रह रहे हैं?
- 2 वर्ष से कम
 - 2-5 साल
 - 6-10साल
 - 11 वर्ष से अधिक
6. आप किस क्षेत्र में रह रहे हैं?
- ऑकलैंड
 - वेलिंगटन
 - उत्तरी द्वीप के अन्य क्षेत्र
 - क्राइस्टचर्च
 - दक्षिण द्वीप के अन्य क्षेत्र
 - न्यूजीलैंड के बाहर [exit the survey-disqualified]

7. आपके रिश्ते की स्थिति:

- अविवाहित
- एक साथी के साथ / विवाहित
- तलाकशुदा
- वियुक्त दंपति
- विधवा / विधुर
- अन्य (कृपया निर्दिष्ट करें): _____

8. आपकी रोजगार की स्थिति:

- पूर्णकालिक कार्यरत
- अंशकालिक कार्यरत
- आकस्मिक रोजगार (ठेकेदार)
- स्व नियोजित
- बेरोज़गार
- छात्र
- सेवानिवृत्त
- देखभाल देना
- अन्य (कृपया निर्दिष्ट करें): _____

9. आपकी शिक्षा का उच्चतम स्तर:

- हाई स्कूल से कम
- हाई स्कूल स्नातक
- कॉलेज या व्यावसायिक प्रशिक्षण
- स्नातक डिग्री
- मास्टर डिग्री या उच्चतर

10. आपका अनुमानित वार्षिक घरेलू आय स्तर (कर से पहले):

- \$50,000 से कम \$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- \$180,000 से अधिक
- कहना पसंद नहीं करते

अगला भाग न्यूजीलैंड में आपके सफ़र के बारे में पूछेगा। सर्वेक्षण के इस भाग में आपके द्वारा बोली जाने वाली भाषाओं, आपकी परवरिश और प्रवास के दौरान आपके सामने आने वाली किसी भी चुनौती को शामिल किया जाएगा।

11. निम्नलिखित में से कौन सा न्यूजीलैंड में आपकी रोजमर्रा की भाषा के उपयोग का सबसे अच्छा वर्णन करता है?

- केवल एशियाई भाषा (उदाहरण के लिए, चीनी, हिंदी, जापानी, कोरियाई, वियतनामी, आदि)
- ज्यादातर एशियाई, कुछ अंग्रेजी
- एशियाई और अंग्रेजी समान रूप से अच्छी तरह से (द्विभाषी)
- ज्यादातर अंग्रेजी, कुछ एशियाई
- केवल अंग्रेजी

12. आप कहाँ पले-बढ़े थे?

- केवल एशिया में
- ज्यादातर एशिया में, कुछ न्यूजीलैंड में।
- समान रूप से एशिया और न्यूजीलैंड में
- ज्यादातर न्यूजीलैंड में, कुछ एशिया में
- केवल न्यूजीलैंड में

13. निम्नलिखित में से कौन सा न्यूजीलैंड में आपके सामाजिक संबंधों का सबसे अच्छा वर्णन करता है?

- लगभग विशेष रूप से एशियाई प्रवासी
- ज्यादातर एशियाई प्रवासी और एशियाई न्यूजीलैंड के लोग
- समान रूप से एशियाई समूह और अन्य समूह
- ज्यादातर न्यूजीलैंड यूरोपीय, माओरी, Pasific या अन्य गैर-एशियाई जातीय समूह
- लगभग विशेष रूप से न्यूजीलैंड यूरोपीय, माओरी, प्रशांत या अन्य गैर-एशियाई जातीय समूह

14. एक एशियाई प्रवासी के रूप में, क्या आपने न्यूजीलैंड में अपने समंजन के दौरान निम्नलिखित में से किसी भी मुद्दे का अनुभव किया है? लागू होने वाले सभी का चयन करें.[skip logic to response "New Zealand" in Q3]

- भाषा की बाधाएं
- नस्लीय भेदभाव
- सांस्कृतिक पहचान के साथ मुद्दा
- वित्तीय कठिनाइयाँ
- अकेलापन
- नीरसता
- सामाजिक अलगाव (नियमित सामाजिक संपर्क नहीं होना, जैसे, दोस्त या परिवार)
- काम का तनाव
- पारिवारिक संबंधों से तनाव (जैसे, पारिवारिक संघर्ष, घरेलू हिंसा)
- अन्य (कृपया निर्दिष्ट करें): _____

अनुवर्ती अनुभाग इस बात से संबंधित है कि आप अपने व्यक्तित्व और जीवन के अनुभव का वर्णन कैसे करते हैं।

15. परिदृश्य प्रश्न: "कल्पना कीजिए कि आप एक शॉपिंग मॉल में हैं और एक आकर्षक नया गैजेट देखते हैं जिस के लिए आप कुछ समय से तरस रहे हैं। इसकी कीमत आपके बजट से काफी अधिक है। आपके पास कुछ पैसे बचाए गए हैं, लेकिन यह कुछ और महत्वपूर्ण के लिए अभिप्रेत था, एक आगामी बिल की तरह। इस स्थिति में, आप गैजेट खरीदने की कितनी संभावना रखते हैं?"

कृपया इसे 1 से 10 के पैमाने पर खरीदने की अपनी संभावना को रेट करें, जहां 1 की संभावना बिल्कुल नहीं है और 10 की अत्यधिक संभावना है।

1 बिल्कुल संभावना नहीं है	2	3	4	5	6	7	8	9	10 बहुत संभावना है
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16. परिदृश्य प्रश्न: "आप एक समुद्र तट पर दोस्तों के साथ हैं, और आप एक रोमांचकारी पानी के खेल-जेट स्कीइंग में भाग लेने वाले लोगों के एक समूह को नोटिस करते हैं। वे हंस रहे हैं, दौड़ रहे हैं, और बहुत मज़ा आ रहा है। आपने इसे पहले कभी नहीं आजमाया है, और यह सुखद और थोड़ा खतरनाक दोनों दिखता है।

कृपया इस गेम को 1 से 10 के पैमाने पर आजमाने की अपनी संभावना को रेट करें, जहाँ 1 की संभावना बिल्कुल नहीं है और 10 की अत्यधिक संभावना है।

1 बिल्कुल संभावना नहीं है	2	3	4	5	6	7	8	9	10 बहुत संभावना है
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17. परिदृश्य प्रश्न: "आप एक नए निवेश अवसर के बारे में सुनते हैं जो बहुत अधिक रिटर्न का वादा करता है, लेकिन इसमें आपके प्रारंभिक निवेश को खोने का एक उच्च मौका भी है। इस अवसर में आपके पैसे का निवेश करने की कितनी संभावना है?"

कृपया 1 से 10 के पैमाने पर निवेश करने की अपनी संभावना को रेट करें, जहां 1 की संभावना बिल्कुल नहीं है और 10 की अत्यधिक संभावना है।

1 बिल्कुल संभावना नहीं है	2	3	4	5	6	7	8	9	10 बहुत संभावना है
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18. क्या पिछले 5 वर्षों के दौरान आपके जीवन में इनमें से कोई भी घटना हुई है? कृपया हां, नहीं या लागू नहीं का चयन करें।

घटना	प्रतिक्रिया		
विवाह	हाँ	नहीं	लागू नहीं
परिवार में नया सदस्य मिला	हाँ	नहीं	लागू नहीं
नई नौकरी	हाँ	नहीं	लागू नहीं
स्कूल शुरू या समाप्त	हाँ	नहीं	लागू नहीं
बंधक (जैसे, एक घर खरीदना, या एक व्यवसाय बंधक)	हाँ	नहीं	लागू नहीं
व्यवसाय पुनः समायोजन (आकार घटाना, या अपसाइजिंग)	हाँ	नहीं	लागू नहीं
एक नया व्यवसाय शुरू	हाँ	नहीं	लागू नहीं
वित्तीय स्थिति में बदलाव	हाँ	नहीं	लागू नहीं
रहने की स्थिति में परिवर्तन	हाँ	नहीं	लागू नहीं
सेवानिवृत्ति	हाँ	नहीं	लागू नहीं
बेरोज़गार	हाँ	नहीं	लागू नहीं
पति या पत्नी या परिवार के करीबी सदस्य या करीबी दोस्त की मृत्यु	हाँ	नहीं	लागू नहीं
तलाक या वैवाहिक अलगाव	हाँ	नहीं	लागू नहीं
कानूनी मामलों में भागीदारी	हाँ	नहीं	लागू नहीं
स्वास्थ्य की स्थिति के साथ समस्या	हाँ	नहीं	लागू नहीं

19. कुल मिलाकर, आप अभी अपने जीवन से कितने संतुष्ट हैं? कृपया अपनी समग्र संतुष्टि को 1 से 10 के पैमाने पर रेट करें, जहां 1 बेहद असंतुष्ट है और 10 बेहद संतुष्ट है।

1 बहुत असंतुष्ट	2	3	4	5	6	7	8	9	10 बहुत संतुष्ट
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अंतिम खंड जुआ गतिविधियों और संबंधित मानसिक स्वास्थ्य के साथ आपके अनुभव के बारे में है।

20. क्या आपने कभी मनोरंजन या मनोरंजन के लिए जुआ गतिविधियों (जैसे, महजोंग खेलना, कार्ड गेम खेलना) में भाग लिया है?

- हाँ
- नहीं

21. क्या आपने कभी पैसे के लिए जुआ गतिविधियों (जैसे लोट्टो खरीदना, महजोंग खेलना, कार्ड गेम खेलना) में भाग लिया है?

- हाँ
- नहीं

Display logic setup for Q22 to Q32: Yes is selected in Q20, OR Yes is selected in Q21.

22. यदि आप Q20 या Q21 के लिए "हां" का जवाब देते हैं, तो पिछले 12 महीनों में आपने किस प्रकार की जुआ गतिविधियों में भाग लिया है? लागू होने वाले सभी का चयन करें.

- कैसीनो के खेल
- लॉटरी
- खेल सट्टेबाजी (जैसे घुड़दौड़, फुटबॉल खेलों के लिए ऑनलाइन सट्टेबाजी)
- कार्ड गेम (जैसे पोकर)
- स्लॉट मशीन
- महजोंग
- इंटरनेट जुआ
- लूट बक्से के साथ ऑनलाइन गेमिंग
- अन्य (कृपया निर्दिष्ट करें): _____
- उपरोक्त में से कोई नहीं

23. पिछले 12 महीनों में, आप कितनी बार जुआ गतिविधियों में शामिल हुए?

- कभी नहीं
- शायद ही कभी (वर्ष में तीन बार से कम)
- कभी-कभी (वर्ष में 3 से 8 बार के बीच)
- लगभग मासिक
- साप्ताहिक या दैनिक भी

24. पिछले 12 महीनों में क्या आपने वास्तव में हारने की क्षमता से अधिक दांव लगाया है?

- कभी नहीं
- कभी कभी
- अधिकांश समय
- लगभग हमेशा

25. पिछले 12 महीनों में क्या लोगों ने आपकी सट्टेबाजी की आलोचना की है या आपको बताया है कि आपको जुए की समस्या थी, भले ही आपको लगा कि यह सच है या नहीं?

- कभी नहीं
- कभी कभी
- अधिकांश समय
- लगभग हमेशा

26. पिछले 12 महीनों में, क्या आप जिस तरह से जुआ खेलते हैं उसके बारे में दोषी महसूस किया है या जब आप जुआ खेलते हैं तो क्या होता है?

- कभी नहीं
- कभी कभी
- अधिकांश समय
- लगभग हमेशा

27. क्या आपके परिवार का कोई सदस्य है जिसने कभी जुआ खेला है?

- हाँ
- नहीं
- नहीं मालूम

28. कृपया इंगित करें कि निम्नलिखित में से प्रत्येक कारण किस हद तक जुआ गतिविधियों में भाग लेने के आपके निर्णय को प्रभावित कर सकता है।

कारण	कोई हद नहीं	छोटी हद तक	कुछ हद तक	काफी हद तक
भाग्य या संयोग की धारणा	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
समस्याओं या तनाव से बचने के लिए	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
उत्साह या रोमांच के लिए	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
मित्र (मित्रों) या सामाजिक संबंधों के साथ अच्छे संबंध रखना	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
मेरा जुआ कौशल या रणनीति में विश्वास	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

अकेलेपन या बोरियत से निपटना	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
कुछ पैसे जीतने के लिए	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
मनोरंजन के लिए	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
अन्य (कृपया निर्दिष्ट करें): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. क्या आपने अपने जुआ व्यवहार के संबंध में निम्नलिखित मानसिक स्वास्थ्य समस्याओं में से किसी का अनुभव किया है? लागू होने वाले सभी का चयन करें.

- चिंता या संबंधित लक्षण
- संकट, अवसाद या संबंधित लक्षण
- मादक द्रव्यों का सेवन (तंबाकू, शराब, भांग या अन्य दवाओं सहित)
- आत्मघाती विचार या प्रयास
- अन्य (कृपया निर्दिष्ट करें): _____
- उपरोक्त में से कोई नहीं

30. जुए के व्यवहार को बेहतर ढंग से समझने के लिए, कृपया इंगित करें कि क्या आपने जुए के दौरान या बाद में निम्नलिखित में से किसी भी कार्य में भाग लिया है। लागू होने वाले सभी का चयन करें.

- जुए की आदतों के बारे में झूठ बोलना
- जुआ खेलने के लिए पैसे उधार लेना
- जुए के कारण जिम्मेदारियों की उपेक्षा (जैसे पालन-पोषण)
- जुए के कारण रिश्ते की समस्याएं
- अन्य (कृपया निर्दिष्ट करें): _____
- उपरोक्त में से कोई नहीं

31. आप निम्नलिखित कथनों से कितना सहमत या असहमत हैं? कृपया प्रत्येक कथन के लिए एक उत्तर का चयन करें।

वक्तव्य	दृढ़ता से असहमत	असहमत	तटस्थ	सहमत	पूर्णतः सहमत
जुआ मुझे खुश करता है.	<input type="checkbox"/>				
प्रार्थना मुझे जीतने में मदद करती है.	<input type="checkbox"/>				
जुआ खेलते समय हार, जीत की एक श्रृंखला के बाद होना तय है.	<input type="checkbox"/>				
मेरी जीत को मेरे कौशल से संबंधित करना और क्षमता मुझे जुआ खेलना जारी रखता है	<input type="checkbox"/>				

जुआ खेलने से चीजें बेहतर लगती हैं।	<input type="checkbox"/>				
विशिष्ट संख्या और रंग मेरे जीतने की संभावना बढ़ाने में मदद कर सकते हैं।	<input type="checkbox"/>				
हार की एक श्रृंखला मुझे एक सीखने का अनुभव प्रदान करेगी जो मुझे बाद में जीतने में मदद करेगी.	<input type="checkbox"/>				
बुरी किस्मत और बुरी परिस्थितियों के लिए मेरे नुकसान से संबंधित मुझे जुआ जारी रखने के लिए बनाता है।	<input type="checkbox"/>				
जुआ भविष्य को उज्ज्वल बनाता है।	<input type="checkbox"/>				
मैं विशिष्ट वस्तुओं को इकट्ठा करता हूँ जो मेरे जीतने की संभावना बढ़ाने में मदद करते हैं।	<input type="checkbox"/>				
जब मुझे एक बार जीत मिलेगी तो मैं निश्चित रूप से दोबारा जीत जाऊंगा।	<input type="checkbox"/>				
मेरे नुकसान को संभावना से जोड़ना, मुझे जुआ जारी रखने के लिए बनाता है।	<input type="checkbox"/>				
जुआ मुझे तनाव या तनाव कम करने में मदद करता है	<input type="checkbox"/>				
मेरे पास विशिष्ट अनुष्ठान और व्यवहार हैं जो मेरे जीतने की संभावना को बढ़ाते हैं	<input type="checkbox"/>				
ऐसे समय होते हैं जब मैं भाग्यशाली महसूस करता हूँ और इस प्रकार, केवल उन समयों में जुआ खेलता हूँ।	<input type="checkbox"/>				
यह याद रखना कि मैंने पिछली बार कितना पैसा जीता था, मुझे जुआ जारी रखने के लिए प्रेरित करता है।	<input type="checkbox"/>				
मेरी जुए की जीत की भविष्यवाणी करने पर मेरा कुछ नियंत्रण है।	<input type="checkbox"/>				

32. कृपया इंगित करें कि निम्नलिखित में से प्रत्येक पर्यावरणीय कारक आपके जुए के व्यवहार को किस हद तक प्रभावित करता है:

पर्यावरणीय कारक	कोई हद नहीं	छोटी हद तक	कुछ हद तक	काफी हद तक
पारिवारिक प्रभाव (जैसे, जुआ खेलने वाले माता-पिता)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
दोस्तों, सहकर्मियों या पड़ोसियों का प्रभाव	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
जुए के विज्ञापनों का प्रभाव (स्थल, टीवी या ऑनलाइन विज्ञापन)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
सोशल मीडिया का प्रभाव	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
मेरे क्षेत्र में जुआ स्थान(ओं) या सुविधाओं तक पहुंच	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
अन्य (कृपया निर्दिष्ट करें): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

अतिरिक्त टिप्पणियाँ

33. क्या कुछ और है जो आप जुआ के साथ अपने अनुभवों के बारे में साझा करना चाहते हैं या न्यूजीलैंड में रहने वाले एशियाई प्रवासियों के बीच जुआ के मुद्दों को बेहतर ढंग से संबोधित करने के लिए कोई सुझाव देना चाहते हैं?

सर्वेक्षण पूरा करने के लिए धन्यवाद।

Appendix F: Survey questionnaire-paper based (Simplified Chinese)

参与者信息说明

本研究旨在探讨居住在新西兰的亚裔人群参与赌博及其心理健康相关的因素。您的回答将帮助我们改善针对不同亚裔文化群体在赌博和心理健康问题上提供的帮助。

您参加这项调查是完全匿名的。所有回答将被保密，并在研究结束后安全存储一年，然后销毁。所收集的数据只用于汇总分析，任何研究成果或出版物中都不会涉及个人可识别的信息。我们从您这样的参与者那里收集的信息不会用于其他目的。这项研究由新西兰卫生部资助。

请告知调查管理员您是否愿意继续参与调查并同意参与这项研究。请确保您根据自己的实际情况如实回答问题。

完成这项调查大约需要 10 到 15 分钟。

完成调查后，请将调查表交还给调查管理员。完成调查后，您可以在亚洲家庭服务中心的展台领取一份价值\$50 元的小礼品，以示感谢。亚洲家庭服务中心保留对此活动的最终解释权。

如果您对调查有任何问题或疑虑，请随时联系研究团队，联系人：Dr Wardah Ali [CONTACT DETAILS REDACTED]或 Dr Bo Ning [CONTACT DETAILS REDACTED]。

如果您因参与研究感到不适，可以随时暂停或停止。如果您需要有关赌博或心理健康问题的即时帮助或支持，请拨打亚洲热线 0800862342。

感谢您考虑参与这项研究。您的意见对我们的研究工作至关重要。



与亚洲移民的赌博和心理健康相关的因素

感谢您参与这项调查。您的回答将帮助我们更好地了解生活在新西兰的亚洲人群参与赌博及成瘾行为的相关风险因素。请您在回答调查问题时，圈出或勾选您想选择的答案。

第一部分是关于您的个人基本信息。

1. 性别:

- 男性
- 女性
- 非二元性别或性别多样化
- 不愿透露

2. 年龄:

- 18 岁以下
- 19-24 岁
- 25-44 岁
- 45-64 岁
- 65 岁或以上

3. 您的出生地是哪里？

- 中国
- 印度
- 韩国
- 菲律宾
- 斯里兰卡
- 日本
- 泰国
- 越南
- 柬埔寨
- 台湾
- 印度尼西亚
- 马来西亚
- 新西兰
- 其他（请注明）： _____

4. 您属于哪个族裔群体？请勾选所有适用的选项。

- | | |
|--------------------------------|---|
| <input type="checkbox"/> 中国人 | <input type="checkbox"/> 台湾人 |
| <input type="checkbox"/> 印度人 | <input type="checkbox"/> 印度尼西亚人 |
| <input type="checkbox"/> 韩国人 | <input type="checkbox"/> 马来西亚人 |
| <input type="checkbox"/> 菲律宾人 | <input type="checkbox"/> 新西兰人 |
| <input type="checkbox"/> 斯里兰卡人 | <input type="checkbox"/> 其他（请注明）： _____ |
| <input type="checkbox"/> 日本人 | |
| <input type="checkbox"/> 泰国人 | |
| <input type="checkbox"/> 越南人 | |
| <input type="checkbox"/> 柬埔寨人 | |

5. 您在新西兰生活了多少年？

- 少于 2 年
- 2-5 年
- 6-10 年
- 超过 11 年

6. 您住在哪个地区？

- 奥克兰
- 惠灵顿
- 北岛其他地区
- 基督城
- 南岛其他地区
- 新西兰以外

7. 您的婚姻状况：

- 单身
- 已婚/与伴侣同居
- 离婚
- 分居
- 丧偶
- 其他（请注明）： _____

8. 您的就业状况:

- 全职工作
- 兼职工作
- 临时雇佣（合同工）
- 自雇
- 失业
- 学生
- 退休
- 照顾家庭
- 其他（请注明）： _____

9. 您的最高学历:

- 高中以下
- 高中毕业
- 大专或职业培训
- 学士学位
- 硕士学位或更高学历

10. 您估计的家庭年收入水平（税前）:

- 少于\$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- 超过\$180,000
- 不愿透露

接下来的部分将询问您在新西兰的生活经历。此部分将涉及您使用的语言、成长背景以及在您在移民过程中遇到的挑战。

11. 以下哪项最符合您在新西兰日常语言使用的情况？

- 仅使用亚洲语言（例如，中文、印地语、日语、韩语、越南语等）
- 主要使用亚洲语言，偶尔使用英语
- 亚洲语言和英语使用情况相当（双语）
- 主要使用英语，偶尔使用亚洲语言
- 仅使用英语

12. 您在哪里长大？

- 仅在亚洲
- 主要在亚洲，在新西兰生活过一段时间
- 亚洲和新西兰生活时间相当
- 主要在新西兰，在亚洲生活过一段时间
- 仅在新西兰

13. 以下哪项最符合您在新西兰的社交关系？

- 几乎完全是亚洲移民
- 主要是亚洲移民和新西兰的亚洲人
- 亚洲群体和其他群体比例相当
- 主要是新西兰欧洲裔、毛利人、太平洋岛裔或其他非亚洲族群
- 几乎完全是新西兰欧洲裔、毛利人、太平洋岛裔或其他非亚洲族群

14. 作为亚洲移民，您在新西兰定居期间是否经历过以下问题？请勾选所有适用的选项。

- 语言障碍
- 种族歧视
- 文化身份问题
- 财务困难
- 孤独感
- 无聊
- 社交孤立（没有定期的社交联系，例如朋友或家人）
- 工作压力
- 家庭关系压力（例如家庭冲突、家庭暴力）
- 其他（请注明）： _____

接下来的部分将涉及您对自己性格和生活经历的描述。

15. 情境问题：“想象一下，您在购物中心看到一个炫酷的新物品，您一直很渴望拥有它。但它的价格远远超出了您的预算。您有一些存款，但原本是为更重要的开支（例如即将到期的账单）而准备的。在这种情况下，您有多大可能会购买这个新物品？”请在 1 到 10 的范围内评分您购买的可能性，其中 1 表示完全不可能，10 表示极有可能。

1 点也不可能	2	3	4	5	6	7	8	9	10 极有可能
------------	---	---	---	---	---	---	---	---	------------

16. 情境问题：“您和朋友们在海滩上，留意到一群人正在参加一项有趣且刺激的水上运动——摩托艇。他们欢笑着、竞逐着，玩得非常开心。您从未尝试过这种运动。它看起来十分有趣，但好像有点危险系数。”请在 1 到 10 的范围内评估您尝试这项活动的可能性，其中 1 表示完全不可能，10 表示极有可能。

1 点也不可能	2	3	4	5	6	7	8	9	10 极有可能
------------	---	---	---	---	---	---	---	---	------------

17. 情境问题：“您听说有一个新的投资机会，承诺会有很高的回报，但也有很高的风险可能会失去您的初始投资。在这种情况下，您有多大可能会把钱投资在这个机会中？”请在 1 到 10 的范围内评分您进行投资的可能性，其中 1 表示完全不可能，10 表示极有可能。

1 点也不可能	2	3	4	5	6	7	8	9	10 极有可能
------------	---	---	---	---	---	---	---	---	------------

18. 在过去的 5 年里，以下事件有没有发生在您身上？请选“是”、“否”或“不适用”。

事件	圈出您的回答		
结婚了	是	否	不适用
新家庭成员出生	是	否	不适用
开启新工作	是	否	不适用
开始或结束一段学业	是	否	不适用
抵押贷款（例如，购买房屋或商业抵押）	是	否	不适用
业务调整（缩减或扩张）	是	否	不适用
创业	是	否	不适用
财务状况变化	是	否	不适用
居住条件变化	是	否	不适用
退休	是	否	不适用
失业	是	否	不适用
配偶或近亲、密友去世	是	否	不适用
离婚或分居	是	否	不适用
法律事务缠身	是	否	不适用
健康状况有问题	是	否	不适用

19. 您对自己目前的生活总体满意度如何？请在 1 到 10 的范围内给出您的总体满意度评分，其中 1 表示非常不满意，10 表示非常满意。

1 非常不满意	2	3	4	5	6	7	8	9	10 非常满意
------------	---	---	---	---	---	---	---	---	------------

最后一部分是关于您参与赌博活动及相关心理健康的经历。

20. 您是否曾经为了娱乐或消遣参与过赌博活动（例如打麻将、玩牌）？

- 是
- 否

21. 您是否曾经为了赢钱参与过赌博活动（例如买彩票、打麻将、玩牌）？

- 是
- 否

如果在第 20 题和 21 题均选择了“否”，请跳到 33 题。

22. 如果您在第 20 题或第 21 题中回答“是”，在过去 12 个月中，您参与了哪些类型的赌博活动？请勾选所有适用的选项。

- 赌场游戏
- 彩票
- 体育博彩（如赛马、在线足球投注）
- 纸牌游戏（如德州扑克）
- 老虎机
- 麻将
- 网络赌博
- 带有战利品箱的在线游戏
- 其他（请具体说明）： _____
- 以上均没有

23. 在过去 12 个月中，您参与赌博活动的频率如何？

- 从未
- 很少（每年少于三次）
- 偶尔（每年 3 到 8 次之间）
- 几乎每月一次
- 每周甚至每天

24. 在过去 12 个月中，您是否曾下注超过自己真正能承受的损失范围？

- 从未
- 有时
- 大多数时候
- 几乎总是

25. 在过去 12 个月中，是否有人批评您的赌博行为或告诉您有赌博问题，不管您是否认为自己真的有问题？

- 从未
- 有时
- 大多数时候
- 几乎总是

26. 在过去 12 个月中，您是否因自己的赌博方式或赌博结果感到内疚？

- 从未
- 有时
- 大多数时候
- 几乎总是

27. 您的家人是否有人曾经参与过赌博？

- 是
- 否
- 不知道

28. 请说明以下每个原因在多大程度上影响了您参与赌博活动的决定。

原因	完全没有影响	很少影响	有些影响	很大影响
对运气或机会的看法	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
为了逃避问题或压力	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
为了刺激或兴奋	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
为了和朋友或社交圈建立良好关系	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
相信自己的赌博技巧或策略	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
应对孤独或无聊	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

为了赢钱	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
为了娱乐	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
其他（请具体说明）： _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. 您是否因赌博行为经历过以下任何心理健康问题？**请选择所有适用项。**

- 焦虑或相关症状
- 压力、抑郁或相关症状
- 物质滥用（包括烟草、酒精、大麻或其他药物）
- 自杀念头或尝试自杀
- 其他（请具体说明）：_____
- 以上都没有

30. 为了更好地理解赌博行为，请说明您是否在赌博时或赌博后是否有以下行为。**请选择所有适用项。**

- 对自己的赌博习惯撒谎
- 借钱来赌博
- 因赌博而忽视责任（例如：照顾孩子）
- 因赌博而产生的关系问题
- 其他（请具体说明）：_____
- 以上都没有

31. 您在多大程度上同意或不同意以下陈述？请为每个陈述选择一个答案。

陈述	非常不同意	不同意	中立	同意	非常同意
赌博让我更快乐。	<input type="checkbox"/>				
向神灵祈祷有助我赢钱。	<input type="checkbox"/>				
赌博输多了之后，后面一定会有一连串的胜利。	<input type="checkbox"/>				
我对自己赌博技术或能力的信心，让我一直参与赌博。	<input type="checkbox"/>				
赌博能改善我的现状。	<input type="checkbox"/>				
特定的数字和颜色可以帮助我提高赢钱的机会。	<input type="checkbox"/>				

一系列的损失会让我获得经验，这有助于我以后赢。	<input type="checkbox"/>				
我的赌博损失都是因为运气不好和坏情况。	<input type="checkbox"/>				
赌博让我的未来更光明。	<input type="checkbox"/>				
我佩戴一些特定的物品来提高我的赢钱机会。	<input type="checkbox"/>				
一旦我赢了一次，我后面一定会再次赢。	<input type="checkbox"/>				
我的损失是小概率事件。	<input type="checkbox"/>				
赌博帮助我减轻紧张或压力。	<input type="checkbox"/>				
我有特定的仪式和行为来提高我的赢钱机会。	<input type="checkbox"/>				
有时候我觉得特别幸运，因此我在感觉对的时机赌博。	<input type="checkbox"/>				
我之前赢过一些钱，这让我继续赌博。	<input type="checkbox"/>				
我感觉自己多少都能预测自己的输赢。	<input type="checkbox"/>				

32. 请说明以下每个环境因素对您赌博行为的影响程度：

环境因素	完全没有影响	很少影响	有些影响	很大影响
家庭的影响（例如：赌博的父母）	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
朋友、同事或邻居的影响	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
赌博广告的影响（赌场、电视或网上广告）	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
社交媒体的影响	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
在我所在地区到赌博场所或设施的方便程度	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
其他（请说明）： _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

其他评论



33. 您还有什么想告诉我们关于您赌博的经历吗？或者您对如何更好地解决在新西兰生活的亚裔人群的赌博问题有什么建议吗？

感谢您完成调查。

Appendix G: Survey questionnaire-paper based (Traditional Chinese)

參與者資訊表

本研究旨在探索居住在紐西蘭的亞洲族群參與賭博及心理健康相關的因素。您的回應將幫助我們改善資源，以幫助不同亞洲文化背景的人士解決賭博和心理健康問題。

您對本次調查的參與是完全匿名的。所有回應將被保密，並且自研究完成後將安全保存一年，然後銷毀。收集的數據僅用於總體分析，任何個人信息都不會在研究結果或出版物中被識別。我們從像您這樣的人收集的信息不會用於其他用途。本研究由紐西蘭衛生部 (Gambling Harm Research Fund GH2024-32) 資助，由 Allen + Clarke 和 亞洲家庭服務部門執行。

請告知調查管理員是否願意繼續調查並同意參與本研究。請確保您的回答真實並準確回應。

完成調查可能需要您花費 10 至 15 分鐘。

完成調查後，請將調查表交還給調查管理員。經管理員確認您完成調查後，您將在亞洲家庭服務部攤位收到價值 \$50 紐西蘭元的小禮物作為答謝。最終解釋權歸亞洲家庭服務部所有。

如果您對調查有任何疑問或擔憂，請隨時聯繫研究團隊：Dr. Wardah Ali [CONTACT DETAILS REDACTED]或 Dr. Bo Ning [CONTACT DETAILS REDACTED]。

如果參與研究使您感到不適，您可以隨時暫停或停止。如果您需要與賭博或心理健康問題相關的即時援助，請撥打亞洲熱線 0800862342。

感謝您考慮參與本次研究。您的意見對我們的研究工作至關重要。



關於亞洲移民的賭博和心理健康

感謝您參加這個調查。您的回答將幫助我們更好地了解在紐西蘭的亞洲社區中，與賭博和成癮行為相關的風險因素。請在選項上圈選或打勾。

第一部分：基本信息

1. 性別：

- 男
- 女
- 非二元性別或其他
- 不想回答

2. 年齡：

- 18 歲以下
- 19-24 歲
- 25-44 歲
- 45-64 歲
- 65 歲或以上

3. 您的出生地是哪裡？：

- 中國
- 印度
- 韓國
- 菲律賓
- 斯里蘭卡
- 日本
- 泰國
- 越南
- 柬埔寨
- 台灣
- 印尼
- 馬來西亞
- 紐西蘭
- 其他（請說明）： _____

4. 您認為自己屬於哪個族裔？（可多選）：

- 中國人
- 印度人
- 韓國人
- 菲律賓人
- 斯里蘭卡人
- 日本人
- 泰國人
- 越南人
- 柬埔寨人
- 台灣人
- 印尼人
- 馬來西亞人
- 紐西蘭人
- 其他（請說明）：_____

5. 您在紐西蘭住了多久？：

- 少於 2 年
- 2-5 年
- 6-10 年
- 超過 11 年

6. 您目前住在哪裡？：

- 奧克蘭
- 惠靈頓
- 北島其他地區
- 基督城
- 南島其他地區
- 紐西蘭以外

7. 您的婚姻狀況是什麼？：

- 單身
- 已婚或同居
- 離婚
- 分居
- 配偶過世
- 其他（請說明）： _____

8. 您的工作狀況：

- 全職
- 兼職
- 臨時工
- 自僱
- 失業
- 學生
- 退休
- 照顧家庭
- 其他（請說明）： _____

9. 您的最高學歷：

- 高中沒畢業
- 高中畢業
- 大專或職業培訓
- 學士學位
- 碩士學位或以上

10. 您的年收入（稅前）是多少？：

- 少於 50,000 元
- 50,001 元 - 70,000 元
- 70,001 元 - 90,000 元
- 90,001 元 - 140,000 元
- 140,001 元 - 180,000 元
- 超過 180,000 元
- 不想說

第二部分：您在紐西蘭的生活

11. 在紐西蘭，您平時主要說什麼語言？：

- 只說亞洲語言（例如中文、印地語、日語、韓語、越南語等）
- 主要說亞洲語言，但有時用英語
- 亞洲語言和英語一樣多（雙語）
- 主要說英語，但有時用亞洲語言
- 只說英語

12. 您在哪裡長大？：

- 只在亞洲
- 主要在亞洲，有一段時間在紐西蘭
- 亞洲和紐西蘭各一半
- 主要在紐西蘭，有一段時間在亞洲
- 只在紐西蘭

13. 您在紐西蘭的社交圈子是怎樣的？：

- 幾乎全是亞洲移民
- 主要是亞洲移民和亞裔紐西蘭人
- 亞洲群體和其他族群一半一半
- 主要是紐西蘭歐裔、毛利人或太平洋島民
- 幾乎全是紐西蘭歐裔、毛利人或太平洋島民

14. 作為亞洲移民，您在紐西蘭定居時遇到過哪些問題？（可多選）：

- 語言障礙
- 種族歧視
- 文化認同問題
- 經濟困難
- 孤獨感
- 無聊
- 缺少社交（例如缺少家人或朋友的聯繫）
- 工作壓力
- 家庭壓力（例如家庭衝突或家庭暴力）
- 其他（請說明）： _____

第三部分：您的個性和生活經歷

15. 情景問題：“想像一下，您在購物中心看到一款您一直很想買的新產品。它的價格比您預算的要高不少，儘管您有一些存款，但這些錢原本打算用於更重要的事情，例如支付即將到來的賬單。在這種情況下，您有多大可能會買下這個產品？”

請根據 1 到 10 分打分，1 表示完全不可能，10 表示非常有可能。

1 完全不可 能	2	3	4	5	6	7	8	9	10 非常有可 能
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16. 情景問題：“您和朋友在海邊，看到一群人在玩令人興奮的水上運動——摩托滑水。他們在歡笑、比賽，看起來玩得很開心。您從來沒試過，但它看起來既有趣又有點危險。”
請根據 1 到 10 分打分，1 表示完全不可能，10 表示非常有可能參加這個活動。

1 完全不可 能	2	3	4	5	6	7	8	9	10 非常有可 能
----------------	---	---	---	---	---	---	---	---	-----------------

17. 情景問題：“您聽說過一個新的投資機會，承諾能帶來非常高的回報，但也有很大的可能會失去您最初的投資。您有多大可能會投資這個機會？”
請根據 1 到 10 分打分，1 表示完全不可能，10 表示非常有可能。

1 完全不可 能	2	3	4	5	6	7	8	9	10 非常有可 能
----------------	---	---	---	---	---	---	---	---	-----------------

18. 過去 5 年中，您是否經歷過以下事件？
請選擇“是”，“否”或“不適用”。

事件	Response		
結婚	是	否	不適用
有了新家庭成員	是	否	不適用
找到新工作	是	否	不適用
開始或結束學業	是	否	不適用
按揭貸款（例如買房或業務貸款）	是	否	不適用
業務調整（縮小或擴大）	是	否	不適用
創辦新業務	是	否	不適用
財務狀況變化	是	否	不適用
生活條件變化	是	否	不適用

退休	是	否	不適用
失業	是	否	不適用
配偶或親密家人或朋友的去世	是	否	不適用
離婚或分居	是	否	不適用
涉及法律問題	是	否	不適用
健康問題	是	否	不適用

19. 您現在對生活的整體滿意度如何？

請根據 1 到 10 分打分，1 表示非常不滿意，10 表示非常滿意。

1 非常不滿意	2	3	4	5	6	7	8	9	10 非常滿意
------------	---	---	---	---	---	---	---	---	------------

第四部分：賭博活動與心理健康。

20. 您是否曾參與過任何賭博活動（例如打麻將、玩紙牌遊戲）作為娛樂或消遣？

- 是
 否

21. 您是否曾參與過任何賭博活動（例如買樂透、打麻將、玩紙牌遊戲）為了贏取金錢？

- 是
 否

如果問題 20 和 21 都選擇了“否”，請跳到問題 33

22. 如果您在問題 20 或 21 中回答“是”，請問您在過去 12 個月內參與了哪些賭博活動？（可多選）：

- 賭場遊戲
 樂透
 體育博彩（例如賽馬、在線足球賽事投注）
 紙牌遊戲（例如撲克）
 拉霸機
 麻將
 網絡賭博
 帶戰利品箱的在線遊戲
 其他（請說明）： _____
 以上皆無

23. 過去 12 個月內，您參與賭博的頻率如何？：

- 從未
- 很少（每年少於 3 次）
- 偶爾（每年 3 到 8 次）
- 幾乎每月一次
- 每週或更頻繁

24. 過去 12 個月內，您是否賭了超出您可以承受的金額？

- 從未
- 有時
- 大多數時候
- 幾乎總是

25. 過去 12 個月內，是否有人批評過您的賭博行為或告訴您有賭博問題，不論您是否同意？

- 從未
- 有時
- 大多數時候
- 幾乎總是

26. 過去 12 個月內，您是否因為賭博感到內疚？

- 從未
- 有時
- 大多數時候
- 幾乎總是

27. 您的家庭成員中是否有人曾經賭博？

- 是
- 否
- 不清楚

28. 請說明下列因素在多大程度上影響了您參與賭博的決定。

原因	完全沒影響	有一點影響	有些影響	很大影響
運氣或機會的感覺	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
為了逃避問題或壓力	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
為了刺激或興奮	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
與朋友保持良好關係或社交聯繫	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
對自己的賭博技巧或策略有信心	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
為了應對孤獨感或無聊	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
想贏點錢	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
為了娛樂	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
其他（請說明） _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. 您是否因為賭博行為，經歷過以下任何心理健康問題？（可多選）：

- 焦慮或相關症狀
- 壓力、抑鬱或相關症狀
- 濫用物質（包括煙草、酒精、大麻或其他藥物）
- 自殺念頭或自殺行為
- 其他（請說明）：_____
- 沒有以上問題

30. 為了更好地了解賭博行為，請說明您是否在賭博期間或之後做過以下行為。（可多選）：

- 對賭博習慣撒謊
- 為賭博借錢
- 因賭博忽略責任（例如育兒）
- 因賭博出現關係問題
- 其他（請說明）：_____
- 沒有以上行為

31. 請說明您對以下說法的同意程度

說法	強烈不同意	不同意	中立	同意	強烈同意
賭博讓我更快樂.	<input type="checkbox"/>				
祈禱能幫助我贏.	<input type="checkbox"/>				
賭博的損失之後肯定會有一連串的贏.	<input type="checkbox"/>				
把我的贏和我的技巧和能力聯繫起來, 讓我繼續賭博.	<input type="checkbox"/>				
賭博讓事情看起來更好.	<input type="checkbox"/>				
特定的數字和顏色能增加我贏的機會.	<input type="checkbox"/>				
一連串的損失會給我一個學習機會, 幫助我以後贏.	<input type="checkbox"/>				
把我的損失歸因於壞運氣和壞情況, 讓我繼續賭博.	<input type="checkbox"/>				
賭博讓未來看起來更光明.	<input type="checkbox"/>				
我收集的特定物品能增加我贏的機會.	<input type="checkbox"/>				
一旦我贏了一次, 我一定會再贏.	<input type="checkbox"/>				
把我的損失歸因於概率, 讓我繼續賭博.	<input type="checkbox"/>				
賭博幫助我減少壓力或緊張.	<input type="checkbox"/>				
我有一些特定的習慣或行為能增加我贏的機會.	<input type="checkbox"/>				
有時我覺得自己很幸運, 於是只在那些時候賭博.	<input type="checkbox"/>				
記得我上次贏了多少, 讓我繼續賭博.	<input type="checkbox"/>				
我認為自己能預測賭博贏的結果.	<input type="checkbox"/>				

32. 請說明下列環境因素對您賭博行為的影響程度。

環境因素	完全沒影響	有一點影響	有些影響	很大影響
家庭影響（例如父母賭博）	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
朋友、同事或鄰居的影響	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
賭博廣告的影響（場地、電視或在線廣告）	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
社交媒體的影響	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
您所在區域的賭博場所或設施的便利性	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
其他（請說明）_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

額外評論

33. 如果您還有任何想分享的賭博經驗，或對如何更好地解決在紐西蘭的亞洲移民賭博問題有任何建議，請在此提供：

感謝您完成調查！

Appendix H: Survey questionnaire-paper based (Tagalog)

Sheet ng Impormasyon para sa Kalahok

Ang pananaliksik na ito ay naglalayong tuklasin ang mga salik na nauugnay sa pakikilahok sa pagsusugal at kalusugan ng isip ng mga populasyong Asyano na naninirahan sa New Zealand. Ang iyong mga sagot ay makakatulong sa amin na mapabuti ang mga mapagkukunan ng inaalok na tulong para sa mga taong mula sa iba't ibang kultura ng Asya na may mga problemang kaugnay sa pagsusugal at kalusugan ng isip.

Ang iyong pakikilahok sa survey na ito ay hindi ibubunyag. Lahat ng sagot ay mananatiling kumpidensyal at itatago nang ligtas sa loob ng isang taon mula sa pagtatapos ng pag-aaral, at pagkatapos ay sisirain. Ang nakalap na datos ay gagamitin lamang para sa pangkalahatang pagsusuri, at walang impormasyon ng indibidwal ang makikilala sa anumang resulta ng pananaliksik o publikasyon. Ang impormasyong nakalap namin mula sa mga katulad mo ay hindi gagamitin para sa ibang layunin. Ang pananaliksik na ito ay pinondohan ng Kagawaran ng Kalusugan (Gambling Harm Research Fund GH2024-32) at isinasagawa ng Allen + Clarke at Asian Family Services.

Mangyaring ipaalam sa tagapangasiwa ng survey kung nais mong ipagpatuloy ang survey at pumayag na makilahok sa pananaliksik na ito. Tiyakin na sagutin ang mga tanong nang totoo sa iyong sitwasyon at sa abot ng iyong makakaya.

Maaaring tumagal ng mga 10 hanggang 15 minuto upang makumpleto ang survey na ito.

Matapos mong kumpletuhin ang survey, mangyaring ibalik ito sa tagapangasiwa ng survey. Makakatanggap ka ng maliit na regalo bilang pasasalamat sa AFS booth, pagkatapos makumpirma ng tagapangasiwa ng survey ang iyong pagkumpleto ng survey.

Kung mayroon kang mga katanungan o alalahanin tungkol sa survey, mangyaring makipag-ugnayan sa research team kay Dr. Ali [CONTACT DETAILS REDACTED] o kay Dr. Bo Ning [CONTACT DETAILS REDACTED]

Kung nararamdaman mong hindi ka komportable bilang resulta ng paglahok sa pananaliksik, maaari kang panandaliang huminto o tuluyanag tumigil sa anumang oras. Kung kailangan mo ng agarang tulong o suporta kaugnay ng mga isyu sa pagsusugal o kalusugan ng isip, mangyaring tumawag sa Asian Helpline 0800862342.

Salamat sa pagsasaalang-alang na makilahok sa pag-aaral na ito. Ang iyong input ay napakahalaga sa aming mga pagsisikap sa pananaliksik.



Mga salik na kaugnay sa pagsusugal at kalusugan ng isip ng mga Asian na migrante

Salamat sa paglahok sa survey na ito. Ang iyong mga sagot ay makakatulong sa amin na mas maunawaan ang mga panganib na kaugnay ng pakikilahok sa pagsusugal at mga nakakaadik na pag-uugali sa mga Asian na populasyon na nakatira sa New Zealand. Mangyaring bilugan o lagyan ng check ang sagot na nais mong piliin kapag tumugon sa isang tanong sa survey.

Section 1 Ang Seksyon 1 ay ilang impormasyon tungkol sa iyong demograpiko.

1. Kasarian:

- Lalaki
- Babae
- Non-binary o iba pang kasarian
- Ayaw sabihin

2. Edad:

- 18 pababa
- 19-24
- 25-44
- 45-64
- 65 o mas matanda

3. Saan ka ipinanganak?

- China
- India
- Korea
- Pilipinas
- Sri Lanka
- Japan
- Thailand
- Vietnam
- Cambodia
- Taiwan
- Indonesia
- Malaysia
- New Zealand
- Iba (paki-tukoy): _____

4. Sakop ka ng aling grupo ng lahi? Piliin ang lahat ng naaangkop.

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Taiwanese |
| <input type="checkbox"/> Indian | <input type="checkbox"/> Indonesian |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Malaysian |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Kiwi / New Zealander |
| <input type="checkbox"/> Sri Lankan | <input type="checkbox"/> Iba (paki-tukoy): _____ |
| <input type="checkbox"/> Japanese | |
| <input type="checkbox"/> Thai | |
| <input type="checkbox"/> Vietnamese | |
| <input type="checkbox"/> Cambodian | |

5. Gaano katagal ka nang naninirahan sa New Zealand?

- Mas mababa sa 2 taon
- 2-5 taon
- 6-10 taon
- Higit sa 11 taon

6. Saang lugar ka nakatira?

- Auckland
- Wellington
- Ibang rehiyon ng North Island
- Christchurch
- Ibang rehiyon ng South Island
- Sa labas ng New Zealand

7. Ang iyong katayuan sa relasyon:

- Walang asawa
- Kasal/naninirahan kasama ang kapareha
- Diborsyado
- Hiwalay
- Biyuda/Biyudo
- Iba (paki-tukoy): _____

8. Ang iyong katayuan sa trabaho:

- Full-time na empleyado
- Part-time na empleyado
- Casual na trabaho (kontraktor)
- Self-employed
- Walang trabaho
- Estudyante
- Nagretiro
- Tagapag-alaga
- Iba (paki-tukoy): _____

9. Ang iyong pinakamataas na antas ng edukasyon:

- Elementarya
- Nagtapos ng mataas na paaralan
- Kolehiyo o pagsasanay sa bokasyonal
- Bachelor's degree
- Master's degree o mas mataas

10. Ang iyong tinatayang taunang kita ng sambahayan (bago kaltasin ang buwis):

- Mas mababa sa \$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- Higit sa \$180,000
- Ayaw ipaalam

Ang susunod na bahagi ay tungkol sa iyong paglalakbay sa New Zealand. Sakop ng bahaging ito ng survey ang mga wika na iyong sinasalita, ang iyong pagpapalaki, at anumang mga hamon na iyong hinarap sa panahon ng iyong paglipat.

11. Alin sa mga sumusunod ang pinakamahusay na naglalarawan ng iyong pang-araw-araw na paggamit ng wika sa New Zealand?

- Tanging wikang Asyano lamang (halimbawa, Tsino, Hindi, Hapon, Koreano, Vietnamese, atbp.)
- Kadalasang Asyano, kaunting Ingles
- Asyano at Ingles na ginagamit nang halos pantay (bilingual)
- Kadalasang Ingles, kaunting Asyano
- Tanging Ingles lamang

12. Saan ka lumaki?

- Sa Asya lamang
- Kadalasang sa Asya, kaunting sa New Zealand
- Pantay sa Asya at New Zealand
- Kadalasang sa New Zealand, kaunting sa Asya
- Sa New Zealand lamang

13. Alin sa mga sumusunod ang pinakamahusay na naglalarawan ng iyong mga koneksyon sa lipunan sa New Zealand?

- Halos eksklusibong mga imigrante mula sa Asya
- Kadalasang mga imigrante mula sa Asya at mga Asyanong New Zealanders
- Halos pantay sa grupong Asyano at iba pang grupo
- Kadalasang mga New Zealand European, Māori, Pacific o iba pang mga grupong etniko na hindi Asyano
- Halos eksklusibong mga New Zealand European, Māori, Pacific o iba pang mga grupong etniko na hindi Asyano

14. Bilang isang imigrante mula sa Asya, nakaranas ka ba ng alinman sa mga sumusunod na isyu sa panahon ng iyong pananatili sa New Zealand? Piliin ang lahat ng naaangkop.

- Mga hadlang sa wika
- Diskriminasyon sa lahi
- Isyu sa pagkakakilanlan sa kultura
- Mga kahirapan sa pananalapi
- Kalungkutan
- Kabagutan
- Sosyal na pagkabukod (walang regular na pakikipag-ugnayan sa lipunan, halimbawa, mga kaibigan o pamilya)
- Stress sa trabaho
- Stress mula sa relasyon sa pamilya (halimbawa, hidwaan sa pamilya, karahasan sa tahanan)
- Iba (paki-tukoy): _____

Ang susunod na bahagi ay nauugnay sa kung paano mo ilalarawan ang iyong personalidad at karanasan sa buhay.

15. **Tanong na senaryo:** "Isipin mong nasa isang shopping mall ka at nakita ang isang makislap na bagong gadget na matagal mo nang hinahangad. Ito ay mas mataas ang presyo kaysa sa iyong nakalaang budget. Mayroon kang kaunting ipon, ngunit ito ay nakalaan para sa mas mahalagang bagay, tulad ng isang darating na bayarin. Sa sitwasyong ito, gaano ka posibleng bumili ng gadget?" Mangyaring i-rate ang posibilidad ng pagbili nito sa isang sukat mula 1 hanggang 10, kung saan na ang 1 ay hindi malamang at ang 10 ay labis na malamang .

1 Hindi malamang	2	3	4	5	6	7	8	9	10 sobrang malamang
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16. **Tanong na senaryo:** "Kasama mo ang mga kaibigan mo sa beach, at napansin mo ang isang grupo ng mga tao na nakikilahok sa isang kapana-panabik na water sport—jet skiing. Sila ay nagytatawanan, nagkakarera, at sobrang saya. Hindi mo pa ito nasubukan, at mukhang masaya at medyo delikado." Mangyaring i-rate ang posibilidad ng pagsubok mo sa larong ito sa isang sukat mula 1 hanggang 10, kung saan na ang 1 ay hindi malamang at ang 10 ay labis na malamang.

1 Hindi malamang	2	3	4	5	6	7	8	9	10 sobrang malamang
------------------------	---	---	---	---	---	---	---	---	---------------------------

17. **Tanong na senaryo:** "Narinig mo ang tungkol sa isang bagong oportunidad sa pamumuhunan na nangangako ng malaking kita, ngunit may mataas na posibilidad na mawala ang iyong paunang puhunan. Gaano kalamang na ipuhunan mo ang iyong pera sa pagkakataong ito?" Mangyaring i-rate ang posibilidad ng pamumuhunan sa isang sukat mula 1 hanggang 10, kung saan na ang 1 ay hindi malamang at ang 10 ay labis na malamang.

1 Hindi malamang	2	3	4	5	6	7	8	9	10 sobrang malamang
------------------------	---	---	---	---	---	---	---	---	---------------------------

18. Nangyari ba ang alinman sa mga kaganapang ito sa iyong buhay sa nakaraang 5 taon? Pakisagot kung "Oo," "Hindi," o "Hindi naaangkop."

Event	Response		
Kasal	Oo	Hindi	Hindi naaangkop
May bagong miyembro ng pamilya	Oo	Hindi	Hindi naaangkop
Bagong trabaho	Oo	Hindi	Hindi naaangkop
Nagsimula o natapos sa paaralan	Oo	Hindi	Hindi naaangkop
Nagsangla (halimbawa, pagbili ng bahay o negosyo)	Oo	Hindi	Hindi naaangkop
Pag-aayos ng negosyo (pagbawas o pagdagdag)	Oo	Hindi	Hindi naaangkop
Mag-umpisa ng bagong negosyo	Oo	Hindi	Hindi naaangkop
Pagbabago sa sitwasyong pinansyal	Oo	Hindi	Hindi naaangkop
Pagbabago sa mga kondisyon ng pamumuhay	Oo	Hindi	Hindi naaangkop
Pagreretiro	Oo	Hindi	Hindi naaangkop
Walang trabaho	Oo	Hindi	Hindi naaangkop
Pagkamatay ng asawa o malapit na miyembro ng pamilya o kaibigan	Oo	Hindi	Hindi naaangkop
Diborsyo o paghihiwalay	Oo	Hindi	Hindi naaangkop
Nasangkot sa mga legal na usapin	Oo	Hindi	Hindi naaangkop
Isyu sa kalusugan	Oo	Hindi	Hindi naaangkop

19. Sa kabuuan, gaano ka nasisiyahan sa iyong buhay ngayon? Paki-rate ang iyong kabuuang kasiyahan sa isang scale mula 1 hanggang 10, kung saan ang 1 ay labis na hindi nasisiyahan at ang 10 ay labis na nasisiyahan.

1 Napakalungkot	2	3	4	5	6	7	8	9	10 Napakasaya
--------------------	---	---	---	---	---	---	---	---	------------------

Ang huling bahagi ay tungkol sa iyong karanasan sa mga aktibidad ng pagsusugal at kaugnay na kalusugan sa isip.

20. Nakasali ka na ba sa mga aktibidad ng pagsusugal (halimbawa, paglalaro ng Mahjong, paglalaro ng mga baraha) para sa kasiyahan o libangan?

- Oo
- Hindi

21. Nakasali ka na ba sa mga aktibidad ng pagsusugal (halimbawa, pagbili ng lotto, paglalaro ng Mahjong, paglalaro ng mga baraha) para sa pera?

- Oo
- Hindi

Kung parehong "Hindi" ang napili sa Tanong 20 at 21, mangyaring lumaktaw sa Tanong 33.

Kung sumagot ka ng "Oo" sa alinman sa Q20 o Q21, sa nakaraang 12 buwan, anong mga uri ng aktibidad sa pagsusugal ang sinalihan mo? Pumili ng lahat ng naaangkop.

- Mga laro sa casino
- Loto
- Pagsusugal sa sports (tulad ng karera ng kabayo, online na pagtaya sa mga laro ng football)
- Mga laro ng baraha (tulad ng Poker)
- Mga slot machine
- Mahjong
- Internet gambling
- Online gaming na may loot boxes
- Iba pa (mangyaring tukuyin): _____
- Wala sa mga nabanggit

23. Sa nakaraang 12 buwan, gaano kadalas ka nakilahok sa mga aktibidad ng pagsusugal?
- Hindi kailanman
 - Bihira (mas mababa sa tatlong beses sa isang taon)
 - Paminsan-minsan (mula 3 hanggang 8 beses sa isang taon)
 - Halos buwanan
 - Lingguhan o kahit araw-araw
24. Sa nakaraang 12 buwan, tumaya ka ba ng higit pa sa kaya mong ipatalo?
- Hindi kailanman
 - Minsan
 - Kadalasan
 - Halos palagi
25. Sa nakaraang 12 buwan, may mga taong bumatikos sa iyong pagtaya o sinabi na mayroon kang problema sa pagsusugal, maging sa tingin mo ay totoo o hindi?
- Hindi kailanman
 - Minsan
 - Kadalasan
 - Halos palagi
26. Sa nakaraang 12 buwan, nakonsyensya ka ba kung paano ka magsugal o kung ano ang nangyayari kapag nagsusugal ka?
- Hindi kailanman
 - Minsan
 - kadalasan
 - Halos palagi
27. Mayroon ka bang pamilya na naglalaro ng sugal?
- Oo
 - Hindi
 - Hindi ko alam

28. Pakisabi kung gaano kalaki ang epekto ng bawat isa sa mga sumusunod na dahilan sa iyong desisyon na makilahok sa mga aktibidad ng sugal.

Dahilan	Wala kahit ano	Kaunti	Medyo	Malaki
Paano mo tinitingnan ang swerte o pagkakataon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para makaiwas sa mga problema o stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para sa kasiyahan o pananabik	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para magkaroon ng magandang ugnayan sa mga kaibigan o kakilala	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Naniniwala sa aking husay o diskarte sa pagsusugal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para makayanan ang kalungkutan o pagkabagot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para manalo ng pera	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Para malibang	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Iba pa (paki-sabi): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Naranasan mo ba ang alinman sa mga sumusunod na isyu sa kalusugan ng isip na may kaugnayan sa iyong pagsusugal? Pumili ng lahat ng naaangkop.

- Pagkabalisa o kaugnay na mga sintomas
- Stress, depresyon o kaugnay na mga sintomas
- Matinding paggamit sa mga substansya (kasama ang tabako, alak, cannabis o iba pang droga)
- Pag-iisip o pagtatangkang magpakamatay
- Iba pa (paki-sabi): _____
- Wala sa mga ito

30. Para mas maunawaan ang mga pag-uugali sa pagsusugal, mangyaring isaad kung ginawa mo ang alinman sa mga sumusunod kapag nagsusugal o o pagkatapos magsugal. Pumili ng lahat ng naaangkop.

- Nagsinungaling tungkol sa mga gawi sa pagsusugal
- Humihiram ng pera para magsugal
- Pinababayaan ang mga responsibilidad (hal. pag-aalaga ng bata) dahil sa pagsusugal
- Mga problema sa relasyon dahil sa pagsusugal
- Iba pa (paki-sabi): _____
- Wala sa mga ito

31. Gaano ka sumasang-ayon o hindi sumasang-ayon sa mga sumusunod na pahayag? Mangyaring pumili ng isang sagot para sa bawat pahayag.

	Lubos na hindi sumasang-ayon	Hindi sumasang-ayon	Hindi lubha	Sumang-ayon	Lubos na sumasang-ayon
Ang pagsusugal ay nagpapasaya sa akin.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang panalangin ay tumutulong sa akin na manalo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang mga pagkatalo sa pagsusugal ay tiyak na susundan ng sunod-sunod na panalo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang pag-uugnay ng aking mga panalo sa aking kakayahan ay siyang nagpapatuloy sa akin na magsugal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang pagsusugal ay nagpapaganda ng mga bagay.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang mga partikular na numero at kulay ay makakatulong sa aking pagkakataong manalo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang sunod-sunod na pagkatalo ay magbibigay sa akin ng karanasan na makakatulong sa akin na manalo sa susunod.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang pag-uugnay ng aking mga pagkatalo sa malas at masamang sitwasyon ang siyang nagpapatuloy sa akin na magsugal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ang pagsusugal ay nagbibigay liwanag sa hinaharap.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Nag-iipon ako ng mga partikular na mga bagay na tumutulong sa aking pagkakataong manalo.	<input type="checkbox"/>				
Kapag nanalo ako isang beses, siguradong mananalo ako ulit.	<input type="checkbox"/>				
Ang pag-uugnay ng aking mga pagkatalo sa probabilidad ang siyang nagpapatuloy sa akin na magsugal.	<input type="checkbox"/>				
Ang pagsusugal ay tumutulong sa akin na mabawasan ang tensyon o stress.	<input type="checkbox"/>				
Mayroon akong mga partikular na ritwal at gawi na nagpapataas ng aking pagkakataong manalo.	<input type="checkbox"/>				
May mga pagkakataong nararamdaman kong masuwerte kaya naglalaro lang ako sa mga panahong iyon.	<input type="checkbox"/>				
Kapag naalala ko kung gaano karaming pera ang napanalunan ko sa nakaraang pagkakataon kung kayat nagpapatuloy ako sa pagsusugal.	<input type="checkbox"/>				
Mayroon akong kaunting kontrol sa pagkalkula ng aking mga panalo sa pagsusugal.	<input type="checkbox"/>				

32. Pakisaad kung gaano ang mga sumusunod na aspeto ng kapaligiran ang nakaka-impluwensya ng iyong pa-uugali sa pagsusugal

Aspeto ng kapaligiran	Sa walang lawak	Sa maliit lawak	Sa ilan lawak	Sa galing lawak
Impluwensya ng pamilya (halimbawa: magulang na naglalaro ng sugal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impluwensya ng mga kaibigan, katrabaho, o kapitbahay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impluwensya ng mga patalastas sa sugal (sa mga kaganapan, casino, TV, o online ads)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impluwensya ng social media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Madaling pumunta sa mga lugar ng sugalan sa aking paligid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Iba pa (pakisulat): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Karagdagang Komento

33. Mayroon ka bang nais na sabihin sa amin tungkol sa iyong karanasan sa pagsusugal?
O may mga mungkahi ka ba para mas mabuting matugunan ang mga problema sa pagsusugal ng mga migranteng Asyano sa New Zealand?

Salamat sa pagsagot ng survey.

Appendix I: Survey questionnaire-paper based (Korean)

연구 지원 참여자 정보지

이 연구는 뉴질랜드에 거주하는 동양 사람들의 도박 참여와 정신 건강에 관련된 요소를 알아보는 것을 목표로 합니다. 여러분의 응답은 다양한 동양 문화권 사람들의 도박과 정신 건강 문제에 관한 도움을 받을 수 있는 자원을 개선하는 데 도움이 됩니다.

이 설문조사는 완전히 익명입니다. 모든 응답은 비밀이 유지되며, 연구가 끝난 후 1년 동안 안전하게 보관되고 그 후에 파기됩니다. 수집된 자료는 집계 분석만을 위해 사용되며 어떤 연구 결과나 출판물에서도 개인 정보가 식별되지 않습니다. 여러분에게서 얻은 정보는 다른 용도로 사용되지 않습니다. 이 연구는 보건부(도박 피해 연구 기금 GH2024-32)의 지원을 받아 Allen + Clarke 과 아시안 패밀리 서비스에서 진행합니다.

설문 조사 관리자에게 설문조사를 진행하고 이 연구에 참여하겠다고 알려주세요. 모든 질문에 대해 자신의 상황에 맞게 사실대로 답변해 주시기를 부탁드립니다.

완료하는 데 약 10분에서 15분 정도 걸릴 수 있습니다.

설문조사를 완료한 후, 설문조사 관리자에게 제출해 주세요. 설문조사 관리자가 여러분의 완료를 확인하면 아시아 패밀리 서비스 부스에서 감사의 표시로 \$50 불을 받을 수 있습니다. 아시아 패밀리 서비스는 이 프로모션의 최종 해석 권한을 가집니다.

설문조사에 대한 질문이 있으시면, 연구팀 Dr. Wardah Ali [CONTACT DETAILS REDACTED] 또는 Dr. Bo Ning [CONTACT DETAILS REDACTED] 에게 언제든지 문의해 주세요.

연구 참여로 인해 불편함을 느끼신다면, 언제든지 잠시 중단하거나 그만둘 수 있습니다. 도박이나 정신 건강 문제와 관련하여 즉각적인 지원이 필요하시면, 아시안 헬프라인 0800862342 로 전화해 주세요.

이 연구에 참여해 주셔서 감사합니다. 여러분의 의견은 이 연구를 이루는 데 있어 소중한 것입니다.



아시아 이민자의 도박과 정신 건강 관련 요인

이 설문조사에 참여해 주셔서 감사합니다. 여러분의 응답은 뉴질랜드에 사는 동양인들의 도박 참여와 중독 행동과 관련된 위험 요소를 더 잘 이해하는 데 도움이 됩니다. 설문지 질문에 있는 답들 중 하나를 선택해주시면 됩니다.

섹션 1 은 여러분의 인구 통계 정보를 다룹니다.

1. 성별:

- 남성
- 여성
- 여성도 남성도 아닌 또는 성 다양성
- 말하지 않음

2. 나이:

- 18 세 미만
- 19-24 세
- 25-44 세
- 45-64 세
- 65 세 이상

3. 어디에서 태어나셨나요?

- 중국
- 인도
- 한국
- 필리핀
- 스리랑카
- 일본
- 태국
- 베트남
- 캄보디아
- 대만
- 인도네시아
- 말레이시아
- 뉴질랜드
- 기타 (명시해 주세요): _____

4. 어떤 민족 그룹에 속한다고 생각하시나요? 해당되는 모든 항목을 선택해 주세요.

- 중국인
- 인도인
- 한국인
- 필리핀인
- 스리랑카인
- 일본인
- 태국인
- 베트남인
- 캄보디아인
- 대만인
- 인도네시아인
- 말레이시아인
- Kiwi / 뉴질랜드인
- 기타 (명시해 주세요): _____

5. 뉴질랜드에 몇 년 동안 거주하셨나요?

- 2 년 미만
- 2-5 년
- 6-10 년
- 11 년 이상

6. 현재 어느 지역에 살고 계신가요?

- 오클랜드
- 웰링턴
- 북섬의 다른 지역
- 크라이스트처치
- 남섬의 다른 지역
- 뉴질랜드 밖

7. 여러분의 관계 상태:

- 미혼
- 결혼/파트너와 함께 생활
- 이혼
- 별거 중
- 사별
- 기타 (명시해 주세요): _____

8. 여러분의 고용 상태:

- 정규직
- 파트타임
- 비정규직 (계약직)
- 자영업
- 실업
- 학생
- 은퇴
- 돌봄 제공
- 기타 (명시해 주세요): _____

9. 여러분의 최고 학력:

- 고등학교 미만
- 고등학교 졸업
- 대학 또는 직업 교육
- 학사 학위
- 석사 학위 이상

10. 여러분의 예상 연간 가계 소득 수준 (세전):

- 50,000 달러 미만
- 50,001 - 70,000 달러
- 70,001 - 90,000 달러
- 90,001 - 140,000 달러
- 140,001 - 180,000 달러
- 180,000 달러 이상
- 말하지 않음

다음 섹션은 뉴질랜드에서의 여러분의 여정에 대해 질문할 것입니다. 이 부분에서는 귀하가 사용하는 언어, 성장 과정, 이주 중 겪었던 어려움에 대해 다룰 것입니다.

11. 다음 중 뉴질랜드에서의 일상 언어 사용을 가장 잘 설명하는 것은 무엇인가요?

- 아시아 언어만 사용 (예: 중국어, 힌디어, 일본어, 한국어, 베트남어 등)
- 주로 아시아 언어, 약간의 영어
- 아시아어와 영어를 거의 동등하게 잘 사용 (이중 언어)
- 주로 영어, 약간의 아시아 언어
- 오직 영어만

12. 어디서 자라셨나요?

- 아시아에서만
- 주로 아시아에서, 일부는 뉴질랜드에서
- 아시아와 뉴질랜드에서 균등하게
- 주로 뉴질랜드에서, 일부는 아시아에서
- 뉴질랜드에서만

13. 다음 중 뉴질랜드에서의 사회적 연결을 가장 잘 설명하는 것은 무엇인가요?

- 거의 전적으로 아시아 이민자들
- 주로 아시아 이민자와 아시아 뉴질랜드인
- 아시아 그룹과 다른 그룹이 거의 동등하게
- 주로 뉴질랜드 유럽인, 마오리, 태평양 또는 기타 비아시아 민족 그룹
- 거의 전적으로 뉴질랜드 유럽인, 마오리, 태평양 또는 기타 비아시아 민족 그룹

14. 아시아 이민자로서 뉴질랜드 정착 중 다음 문제를 경험하셨나요? 해당되는 모든 항목을 선택해 주세요.

- 언어 장벽
- 인종 차별
- 문화 정체성 문제
- 재정적 어려움
- 외로움
- 지루함
- 사회적 고립 (정기적인 사회적 접촉이 없음, 예: 친구나 가족)
- 직장 스트레스
- 가족 관계에서의 스트레스 (예: 가족 갈등, 가정 폭력)
- 기타 (명시해 주세요): _____

다음 섹션은 여러분의 성격과 삶의 경험을 어떻게 설명하는지에 관한 것입니다.

15. **상황 질문:** "쇼핑몰에 가서 여러분이 오래전부터 원하던 화려한 새 기기를 봅니다. 가격이 예산보다 훨씬 비쌉니다. 저축한 돈이 있지만, 더 중요한 것, 예를 들어 다가오는 청구서에 사용할 돈이었습니다. 이런 상황에서 이 기기를 구매할 가능성은 얼마나 되나요?" 구매 가능성을 1 에서 10 까지의 척도로 평가해 주세요. 1 은 전혀 가능성이 없고, 10 은 매우 가능성이 높습니다.

1 은 전혀 가능성이 없음을	2	3	4	5	6	7	8	9	10 일어날 가능성이 매우 높다
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16. **상황 질문:** "해변에서 친구들과 함께 있는데, 스릴 넘치는 수상 스포츠인 제트스키를 즐기는 사람들 그룹을 봅니다. 그들은 웃고, 경주하고, 아주 재미있어 보입니다. 여러분은 한 번도 해본 적이 없지만, 재미있으면서도 조금 위험해 보입니다."

이 게임을 시도할 가능성을 1 에서 10 까지의 척도로 평가해 주세요. 1 은 전혀 가능성이 없고, 10 은 매우 가능성이 높습니다.

1 은 전혀 가능성이 없음을	2	3	4	5	6	7	8	9	10 일어날 가능성이 매우 높다
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17. **시나리오 질문:** "높은 수익을 약속하는 새로운 투자 기회를 듣게 되었지만, 초기 투자금을 잃을 가능성도 높습니다. 이 기회에 여러분부의 돈을 투자할 가능성은 얼마나 됩니까?" 1 에서 10 까지의 척도로 투자할 가능성을 평가해 주세요. 1 은 전혀 가능성이 없음을, 10 은 매우 가능성이 높음을 의미합니다.

1 은 전혀 가능성이 없음을	2	3	4	5	6	7	8	9	10 일어날 가능성이 매우 높다
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18. 지난 5 년 동안 이러한 사건이 여러분의 삶에서 일어난 적이 있습니까? "예", "아니오" 또는 "해당 없음"을 선택해 주세요.

사건	답변		
결혼	예	아니오	해당 없음
가족이 한 명 늘어남	예	아니오	해당 없음
새로운 직업	예	아니오	해당 없음
학교에 다니기 시작하거나 끝남	예	아니오	해당 없음
주택 담보 대출 (예: 집이나 사업을 사는 경우)	예	아니오	해당 없음
사업 조정 (축소 또는 확대)	예	아니오	해당 없음
새로운 사업 시작	예	아니오	해당 없음
재정 상황 변화	예	아니오	해당 없음
생활 조건 변화	예	아니오	해당 없음
은퇴	예	아니오	해당 없음
실업	예	아니오	해당 없음
배우자 또는 가까운 가족이나 친구의 사망	예	아니오	해당 없음
이혼 또는 결혼 분리	예	아니오	해당 없음
법적 문제에 연루됨	예	아니오	해당 없음
건강 문제	예	아니오	해당 없음

19. 지금의 삶에 대해 전반적으로 얼마나 만족하십니까? 1 에서 10 까지의 척도로 전반적인 만족도를 평가해 주세요. 1 은 매우 불만족, 10 은 매우 만족입니다.

1 매우 불행하다	2	3	4	5	6	7	8	9	10 매우 행복하다
-----------------	---	---	---	---	---	---	---	---	------------------

마지막 섹션은 도박 활동 및 관련 정신 건강에 대한 귀하의 경험에 관한 것입니다.

20. 재미나 오락을 위해 도박 활동(예: 마작, 카드 게임)을 한 적이 있습니까?

- 네
- 아니요

21. 돈을 위해 도박 활동(예: 복권 구매, 마작, 카드 게임)에 참여한 적이 있습니까?

- 네
- 아니요

질문 20 이나 21 에 "예"라고 하셨다면 22 번에서 32 번까지의 질문에 대답해주세요.

22. Q20 또는 Q21 에 “예”라고 답하신 경우, 지난 12 개월 동안 어떤 종류의 도박 활동에 참여하셨나요? 해당되는 모든 항목을 선택해 주세요.

- 카지노 게임
- 복권
- 스포츠 베팅 (예: 경마, 축구 게임 온라인 베팅)
- 카드 게임 (예: 포커)
- 슬롯 머신
- 마작
- 인터넷 도박
- 룯 박스가 있는 온라인 게임
- 기타 (명시해 주세요): _____
- 해당 사항 없음

23. 지난 12 개월 동안 얼마나 자주 도박 활동을 하셨나요?

- 전혀 하지 않음
- 가끔 (1 년에 3 회 미만)
- 가끔 (1 년에 3 회에서 8 회 사이)
- 거의 매달
- 주간 또는 매일

24. 지난 12 개월 동안 정말 감당할 수 있는 것보다 더 많이 베팅한 적이 있나요?

- 전혀 없음
- 가끔
- 대부분의 경우
- 거의 항상

25. 지난 12 개월 동안 사람으로부터 당신의 베팅에 대해 비판을 받거나 도박 문제가 있다고 들은 적이 있나요? (사실인지 아닌지와 상관없이)

- 전혀 없음
- 가끔
- 대부분의 경우
- 거의 항상

26. 지난 12 개월 동안 도박 방식이나 도박 중에 일어나는 일에 대해 죄책감을 느낀 적이 있나요?

- 전혀 없음
- 가끔
- 대부분의 경우
- 거의 항상

27. 가족 중에 도박을 한 적이 있는 분이 있나요?

- 예
- 아니오
- 잘 모르겠음

28. 다음 이유들이 도박 활동에 참여하는 결정에 얼마나 영향을 미칠 수 있는지 알려주세요.

이유	전혀 아니다	조금	어느 정도	많이
운이나 기회에 대한 생각	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
문제나 스트레스를 피하기 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
흥미나 짜릿함을 느끼기 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
친구나 사회적 관계를 좋게 만들기 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
내 도박 실력이나 전략을 믿어서	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
외로움이나 지루함을 느끼지 않기 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
돈을 벌기 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
재미를 위해	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
기타 (구체적으로 적어주세요): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. 도박 행동과 관련하여 다음과 같은 정신 건강 문제를 경험한 적이 있습니까? 해당하는 모든 항목을 선택하십시오.

- 불안 또는 관련 증상
- 스트레스, 우울증 또는 관련 증상
- 물질 남용 (담배, 술, 대마초 또는 기타 약물 포함)
- 자살 생각 또는 시도
- 기타 (구체적으로 적어주세요): _____
- 위의 내용 중 해당 없음

30. 도박 행동을 더 잘 이해하기 위해, 도박 중이나 후에 다음과 같은 행동을 한 적이 있는지 알려주세요. 해당하는 모든 항목을 선택하십시오.

- 도박 습관에 대해 거짓말하기
- 도박을 위해 돈을 빌리기
- 도박 때문에 책임을 소홀히 하기 (예: 자녀 양육)
- 도박으로 인한 관계 문제
- 기타 (구체적으로 적어주세요): _____
- 위의 내용 중 해당 없음

31. 다음 진술에 대해 얼마나 동의하거나 동의하지 않습니까? 각 진술에 대해 하나의 답변을 선택하십시오.

진술	강하게 반대하다	반대하다	중립적이다	동의하다	강하게 동의하다
도박은 나를 더 행복하게 만든다.	<input type="checkbox"/>				
기도가 내가 이기는 데 도움이 된다.	<input type="checkbox"/>				
도박에서의 손실은 반드시 연속된 승리에 뒤따른다.	<input type="checkbox"/>				
내 승리를 내 실력과 능력에 연결하면 계속 도박하게 된다.	<input type="checkbox"/>				
도박은 상황을 더 좋게 보이게 만든다.	<input type="checkbox"/>				
특정 숫자와 색상이 내 승리 확률을 높이는 데 도움이 될 수 있다.	<input type="checkbox"/>				
연속된 손실이 나에게 배움의 경험을 주어 나중에 이기는 데 도움이 된다.	<input type="checkbox"/>				
내 손실을 나쁜 운과 나쁜 상황으로 연결하면 계속 도박하게 된다.	<input type="checkbox"/>				
도박은 미래를 더 밝게 만든다.	<input type="checkbox"/>				
나는 내 승리 확률을 높이는 특정 물건들을 모은다.	<input type="checkbox"/>				
한 번 이기면 반드시 다시 이길 것이다.	<input type="checkbox"/>				

내 손실을 확률로 연결하면 계속 도박하게 된다.	<input type="checkbox"/>				
도박은 내 긴장이나 스트레스를 줄이는 데 도움이 된다.	<input type="checkbox"/>				
나는 승리 확률을 높이는 특정 의식과 행동이 있다.	<input type="checkbox"/>				
가끔 나는 운이 좋다고 느껴서 그런 때만 도박을 한다.	<input type="checkbox"/>				
지난번에 얼마나 많은 돈을 이겼는지 기억하는 것이 나를 계속 도박하게 만든다.	<input type="checkbox"/>				
나는 내 도박 승리를 예측하는 데 어느 정도 통제권이 있다.	<input type="checkbox"/>				

32. 다음의 각 환경 요인이 귀하의 도박 행동에 미치는 영향을 얼마나 느끼는지 알려주세요.

주변 요인	전혀 그렇지 않다	약간 그렇지 않다	어느 정도 그렇다	매우 그렇다
가족의 영향 (예: 도박하는 부모)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
친구, 동료 또는 이웃의 영향	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
도박 광고의 영향 (이벤트, 카지노, TV 또는 온라인 광고 중)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
소셜 미디어의 영향	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
내 지역의 도박장이나 시설에 접근하기 쉬운 정도	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
기타 (구체적으로 적어주세요): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

추가 의견

33. 도박에 대한 경험을 더 이야기하고 싶은 게 있나요? 아니면 뉴질랜드에 사는 아시아 사람들의 도박 문제를 더 잘 해결하기 위한 제안이 있나요?

설문조사를 완료해 주셔서 감사합니다.

Appendix J: Survey questionnaire-paper based (Thai)

แบบฟอร์มข้อมูลผู้เข้าร่วมการสนับสนุนการวิจัย

งานวิจัยนี้มีเป้าหมายเพื่อสำรวจปัจจัยที่เกี่ยวข้องกับการเข้าร่วมการพนันและสุขภาพจิตในกลุ่มประชากรชาวเอเชียที่อาศัยอยู่ในนิวซีแลนด์

การเข้าร่วมในการสำรวจของคุณจะช่วยให้เราในการพัฒนาทรัพยากรที่มีอยู่เพื่อช่วยเหลือผู้คนเอเชียที่มีวัฒนธรรมแตกต่างกันในเรื่องปัญหาที่เกี่ยวข้องกับการพนันและสุขภาพจิต

การเข้าร่วมในแบบสำรวจนี้ของคุณ เป็นแบบไม่ระบุตัวตนอย่างแน่นอน

ข้อมูลทุกอย่างที่ได้จากการสำรวจจะถูกเก็บเป็นความลับและจะถูกเก็บรักษาอย่างปลอดภัยเป็นเวลา 1 ปีหลังจากการศึกษาเสร็จสิ้น จากนั้นจะถูกทำลาย ข้อมูลที่เก็บรวบรวมจะใช้เพื่อการวิเคราะห์โดยรวมเท่านั้น และไม่มีข้อมูลส่วนบุคคลที่สามารถถูกระบุตัวตนได้ ไม่ว่าจะในผลการวิจัยหรือเอกสารเผยแพร่ใดๆ ข้อมูลที่เราเก็บจากงานวิจัยนี้ เช่นจากคุณ จะไม่ถูกนำไปใช้ในวัตถุประสงค์อื่น ๆ.

งานวิจัยนี้ได้รับการสนับสนุนจากกระทรวงสาธารณสุข (กองทุนวิจัยผลกระทบจากการพนัน GH2024-32) และดำเนินการโดย Allen + Clarke และหน่วยงานบริการครอบครัวชาวเอเชีย Asian Family Services (AFS)

โปรดแจ้งผู้ดูแลการสำรวจให้ทราบว่า คุณจะเริ่มดำเนินการต่อไปในแบบสำรวจและให้ความยินยอมในการเข้าร่วมงานวิจัยนี้ โปรดตอบคำถามตามความเป็นจริงของคุณและเต็มความสามารถของคุณ

การทำแบบสำรวจนี้อาจใช้เวลาประมาณ 10 ถึง 15 นาทีในการเสร็จสิ้น

หลังจากที่คุณทำแบบสำรวจเสร็จแล้ว โปรดส่งคืนแบบสำรวจให้กับผู้ดูแลการสำรวจ

คุณจะได้รับของขวัญเล็กน้อยเป็นจำนวนเงิน 50 ดอลลาร์ เพื่อเป็นสินน้ำใจแสดงการขอบคุณได้ที่บูธของ AFS หลังจากที่คุณส่งคืนแบบสำรวจยืนยันว่าคุณได้ทำแบบสำรวจเสร็จสิ้น ทั้งนี้ Asian Family Services (AFS) ขอสงวนสิทธิ์ในการตีความการโปรโมชันนี้ในขั้นสุดท้าย

หากคุณมีข้อซักถามหรือความกังวลเกี่ยวกับแบบสำรวจนี้ โปรดติดต่อที่วิจัยได้ที่ ดร. วอร์ด้า อาลี [CONTACT DETAILS REDACTED] หรือ ดร. โบ นิ่ง [CONTACT DETAILS REDACTED]

หากคุณรู้สึกไม่สบายใจจากการเข้าร่วมการวิจัย คุณสามารถหยุดหรือหยุดชั่วคราวได้ตลอดเวลา

หากคุณต้องการความช่วยเหลือหรือการสนับสนุนทันที อันเนื่องมาจากปัญหาการพนันหรือสุขภาพจิต โปรดโทรไปที่บริการสายด่วนเอเชีย Asian Help เบอร์ 0800862342

ขอขอบคุณที่พิจารณาเข้าร่วมการศึกษาในครั้งนี้

ข้อมูลของคุณมีค่าอย่างประเมินไม่ได้ต่อความตั้งใจพยายามในการวิจัยของเรา



ปัจจัยที่เกี่ยวข้องกับการพนันและสุขภาพจิตของผู้ย้ายถิ่นชาวเอเชีย

ขอบคุณที่เข้าร่วมแบบสำรวจนี้

คำตอบของคุณจะช่วยให้เรามีความเข้าใจมากขึ้นต่อปัจจัยเสี่ยงที่เกี่ยวข้องกับการเข้าเล่นการพนันและพฤติกรรมติดการพนันในกลุ่มประชากรชาวเอเชียที่อาศัยอยู่ในนิวซีแลนด์ กรุงเทพมหานครหรือทำเครื่องหมายถูกที่คำตอบที่คุณต้องการเลือกเมื่อคุณตอบคำถามในแบบสำรวจ

ส่วนที่ 1 เกี่ยวกับข้อมูลประชากรบางอย่างของคุณ.

1. เพศ:

- ชาย
- หญิง
- ไม่ระบุเพศหรือเพศที่หลากหลาย
- ไม่สะดวกบอก

2. อายุ:

- ต่ำกว่า 18 ปี
- 19-24
- 25-44
- 45-64
- 65 ปีขึ้นไป

3. คุณเกิดที่ไหน?

- จีน
- อินเดีย
- เกาหลี
- ฟิลิปปินส์
- ศรีลังกา
- ญี่ปุ่น
- ไทย
- เวียดนาม
- กัมพูชา
- ไต้หวัน
- อินโดนีเซีย
- มาเลเซีย
- นิวซีแลนด์
- อื่นๆ (กรุณาระบุ): _____

4. คุณระบุว่าตนเองเป็นกลุ่มชาติพันธุ์ใด? เลือกทั้งหมดตามที่ใช้ได้

- ชาวจีน
- ชาวอินเดีย
- ชาวเกาหลี
- ชาวฟิลิปปินส์
- ชาวศรีลังกา
- ชาวญี่ปุ่น
- ชาวไทย
- ชาวเวียดนาม
- ชาวกัมพูชา
- ชาวไต้หวัน
- ชาวอินโดนีเซีย
- ชาวมาเลเซีย
- ชาวนิวซีแลนด์ / คิริ
- อื่นๆ (กรุณาระบุ): _____

5. คุณอาศัยอยู่ในนิวซีแลนด์มาเป็นเวลานานแค่ไหน?

- น้อยกว่า 2 ปี
- 2-5 ปี
- 6-10 ปี
- มากกว่า 11 ปี

6. คุณอาศัยอยู่ในพื้นที่ไหน?

- ออคแลนด์
- เวลลิงตัน
- พื้นที่อื่นๆ ของเกาะเหนือ
- ไครสต์เชิร์ช
- พื้นที่อื่นๆ ของเกาะใต้
- นอกนิวซีแลนด์

7. สถานะความสัมพันธ์ของคุณ:

- โสด
- แต่งงาน/อยู่กับคู่ชีวิต
- หย่าร้าง
- แยกกันอยู่
- หม้าย
- อื่นๆ (กรุณาระบุ): _____

8. สถานะการทำงานของคุณ:

- ทำงานเต็มเวลา
- ทำงานพาร์ทไทม์
- งานชั่วคราว (ผู้รับเหมา)
- เป็นเจ้าของธุรกิจ
- ไม่มีงานทำ
- นักเรียน
- เกษียณอายุ
- ผู้รับดูแล
- อื่นๆ (กรุณาระบุ): _____

9. ระดับการศึกษาสูงสุดของคุณ:

- ต่ำกว่ามัธยม
- จบมัธยมปลาย
- วิทยาลัยหรือการฝึกอบรมวิชาชีพ
- ปริญญาตรี
- ปริญญาโทหรือสูงกว่า

10. รายได้ในครัวเรือนประจำปี ของคุณ โดยประมาณ (ก่อนภาษี):

- น้อยกว่า \$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- มากกว่า \$180,000
- ไม่ต้องการบอก

ส่วนถัดไปจะถามเกี่ยวกับการดำเนินชีวิตของคุณในนิวซีแลนด์
ส่วนนี้ของแบบสำรวจจะครอบคลุมถึงภาษาที่คุณใช้พูด การเติบโตของคุณ และความท้าทายใดๆ
ที่คุณเผชิญในระหว่างการย้ายถิ่นพำนัก

11. สิ่งต่อไปนี่ ข้อใดอธิบายการใช้ภาษาของคุณในชีวิตประจำวันในนิวซีแลนด์ได้ดีที่สุด?

- ใช้ภาษาเอเชีย (เช่น ไทย, จีน, อินเดีย, ญี่ปุ่น, เกาหลี, เวียดนาม ฯลฯ) เท่านั้น
- ส่วนใหญ่ใช้ภาษาเอเชีย, ภาษาอังกฤษเล็กน้อย
- ใช้ภาษาเอเชียและภาษาอังกฤษประมาณเท่ากัน (สองภาษา)
- ส่วนใหญ่ใช้ภาษาอังกฤษ, ภาษาเอเชียเล็กน้อย
- ใช้ภาษาอังกฤษเท่านั้น

12. คุณถูกเลี้ยงดูเติบโตที่ไหน?

- ในเอเชียเท่านั้น เช่น ในไทย
- ส่วนใหญ่ในเอเชีย, ในนิวซีแลนด์เวลาอันสั้น
- เท่าๆ กันในเอเชียและนิวซีแลนด์
- ส่วนใหญ่ในนิวซีแลนด์, ในเอเชียในเวลาสั้น
- ในนิวซีแลนด์เท่านั้น

13. สิ่งต่อไปนี่ ข้อใดอธิบายการมีความเชื่อมต่อทางสังคมของคุณ คนที่คุณคบค้าในนิวซีแลนด์ได้ดีที่สุด?

- เกือบทั้งหมดเป็นผู้ย้ายถิ่นเอเชีย เช่น ชาวไทย
- ส่วนใหญ่เป็นผู้ย้ายถิ่นเอเชียและชาวนิวซีแลนด์เชื้อสายเอเชีย
- กลุ่มเอเชียและกลุ่มอื่นๆ ประมาณเท่ากัน
- ส่วนใหญ่เป็นชาวนิวซีแลนด์เชื้อสายยุโรป, Māori, ชาวเกาะแปซิฟิก
หรือกลุ่มชาติพันธุ์อื่นที่ไม่ใช่เอเชีย
- เกือบทั้งหมดเป็นชาวนิวซีแลนด์เชื้อสายยุโรป, Māori, ชาวเกาะแปซิฟิก
หรือกลุ่มชาติพันธุ์อื่นที่ไม่ใช่เอเชีย

14. ในฐานะที่เป็นผู้ย้ายถิ่นเอเชีย คุณเคยประสบปัญหาใดบ้างในระหว่างการตั้งรกรากในนิวซีแลนด์?
เลือกทั้งหมดตามที่คุณเห็นเหมาะสม

- อุปสรรคทางภาษา
- การเลือกปฏิบัติทางเชื้อชาติ
- ปัญหาเกี่ยวกับอัตลักษณ์ทางวัฒนธรรม
- ความยากลำบากทางการเงิน
- ความเหงา
- ความเบื่อหน่าย
- การแยกตัวทางสังคม (ไม่มีการติดต่อทางสังคมเป็นประจำ เช่น เพื่อนหรือครอบครัว)
- ความเครียดจากการทำงาน
- ความเครียดจากความสัมพันธ์ในครอบครัว (เช่น ข้อพิพาทในครอบครัว, ความรุนแรงในครอบครัว)
- อื่นๆ (โปรดระบุ): _____

ส่วนถัดไปเกี่ยวข้องกับกรรบรรยายเกี่ยวกับบุคลิกภาพและประสบการณ์ชีวิตของคุณ

15. คำถามในสถานการณ์สมมติ: "จินตนาการว่าคุณ"อยู่ในห้างสรรพสินค้าและเห็นอุปกรณ์ใหม่ที่โดดเด่น ซึ่งคุณหมายปองมาสักพักแล้ว ราคามันสูงกว่าที่คุณตั้งบไว้มาก คุณมีเงินเก็บอยู่บ้าง แต่ตั้งใจจะใช้สำหรับเรื่องที่สำคัญกว่านี้ เช่น บิลที่กำลังจะมาถึง ในสถานการณ์นี้ คุณมีโอกาสที่จะซื้ออุปกรณ์นี้มากแค่ไหน?

โปรดประเมินโอกาสในการซื้ออุปกรณ์นี้ในระดับ 1 ถึง 10 โดยที่ 1 หมายถึงไม่น่าจะเป็นไปได้เลย และ 10 หมายถึงมีแนวโน้มมาก

1 ไม่น่าเป็นไปได้เลย	2	3	4	5	6	7	8	9	10 เป็นไปได้มาก
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16. คำถามในสถานการณ์สมมติ: "คุณอยู่กับเพื่อน ๆ ที่ชายหาด และสังเกตเห็นกลุ่มคนที่กำลังเล่นกีฬาทางน้ำที่น่าตื่นเต้น—เจ็ตสกี พวกเขากำลังหัวเราะ แข่งขันกัน และมีความสุขสนานมาก คุณไม่เคยลองมาก่อน และมันดูน่าสนใจและอาจจะอันตรายนิดหน่อย"

โปรดประเมินโอกาสในการลองเล่นเกมนี้ในระดับ 1 ถึง 10 โดยที่ 1 หมายถึงไม่น่าจะเป็นไปได้เลย และ 10 หมายถึงมีแนวโน้มมาก.

1 ไม่น่าเป็นไปได้เลย	2	3	4	5	6	7	8	9	10 เป็นไปได้มาก
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17. คำถามในสถานการณ์สมมติ: "คุณได้ยื่นเกี่ยวกับโอกาสในการลงทุนใหม่ที่สัญญาว่าจะให้ผลตอบแทนสูงมาก แต่ก็มีความเสี่ยงสูงที่จะสูญเสียการลงทุนเบื้องต้นของคุณ คุณมีโอกาสมากแค่ไหนในการลงทุนเงินของคุณในโอกาสนี้?"

โปรดประเมินโอกาสในการลองเล่นเกมนี้ในระดับ 1 ถึง 10 โดยที่ 1 หมายถึงไม่น่าจะเป็นไปได้เลย และ 10 หมายถึงมีแนวโน้มมาก.

1 มันไม่น่าเป็นไปได้เลย	2	3	4	5	6	7	8	9	10 เป็นไปได้มาก
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18. ในช่วง 5 ปีที่ผ่านมา เหตุการณ์เหล่านี้เกิดขึ้นในชีวิตของคุณหรือไม่? กรุณาเลือก "ใช่", "ไม่ใช่" หรือ "ไม่เกี่ยวข้อง"

เหตุการณ์	คำตอบ		
การแต่งงาน	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
มีสมาชิกในครอบครัวใหม่	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
ได้งานใหม่	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
เริ่มหรือเลิกเรียน	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
สินเชื่อบ้าน (เช่น การซื้อบ้านหรือสินเชื่อธุรกิจ)	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
ปรับเปลี่ยนธุรกิจ (ลดหรือขยายขนาด)	ใช่	ไม่ใช่	ไม่สามารถใช้ได้

เริ่มธุรกิจใหม่	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
การเปลี่ยนแปลงสถานะทางการเงิน	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
การเปลี่ยนแปลงในสภาพการอยู่อาศัย	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
เกษียณอายุ	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
ตกงาน	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
การเสียชีวิตของคู่สมรส สมาชิกในครอบครัวหรือเพื่อนที่ใกล้ชิด	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
การหย่าร้างหรือการแยกกัน	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
การเกี่ยวข้องกับเรื่องทางกฎหมาย	ใช่	ไม่ใช่	ไม่สามารถใช้ได้
ปัญหาสุขภาพ	ใช่	ไม่ใช่	ไม่สามารถใช้ได้

19. โดยรวมแล้ว คุณพอใจกับชีวิตของคุณในตอนนี้มากแค่ไหน? กรุณาให้คะแนนความพอใจโดยใช้สเกล 1 ถึง 10 โดยที่ 1 คือ ไม่พอใจอย่างมาก และ 10 คือ พอใจอย่างมาก

1	2	3	4	5	6	7	8	9	10
ไม่มีความสุขมาก									มีความสุขมาก

ส่วนสุดท้ายเกี่ยวกับประสบการณ์ของคุณเกี่ยวกับกิจกรรมการพนันและสุขภาพจิตที่เกี่ยวข้อง.

20. คุณเคยเข้าร่วมเล่นการพนัน (เช่น การเล่นมาจอง การเล่นไพ่) เพื่อความสนุกสนานหรือความบันเทิงหรือไม่?

- ใช่
- ไม่

21. คุณเคยเข้าร่วมกิจกรรมการพนัน (เช่น การซื้อหวย การเล่นมาจอง การเล่นไพ่) เพื่อเงินหรือไม่?

- ใช่
- ไม่

หากเลือก "ไม่" ในทั้งคำถาม 20 และ 21 กรุณาข้ามไปที่คำถาม 33

22. หากคุณตอบ “ใช่” ในคำถามที่ 20 หรือข้อ 21 พิจารณาว่าในช่วง 12 เดือนที่ผ่านมา คุณได้เข้าร่วมเล่นพนันประเภทใดบ้าง? โปรดเลือกทั้งหมดที่ตอบใจททยนี้

- เกมคาสีโน
- ลอตเตอรี
- การพนันกีฬา (เช่น การแข่งม้า, การเดิมพันฟุตบอลออนไลน์)
- เกมไพ่ (เช่น โป๊กเกอร์)
- สล็อตแมชชีน
- มาจอง
- การพนันทางอินเทอร์เน็ต
- เกมออนไลน์ที่มีกล่องของขวัญ
- อื่น ๆ (โปรดระบุ): _____
- ไม่มีข้อใดข้างต้น

23. ในช่วง 12 เดือนที่ผ่านมา คุณมีส่วนร่วมเล่นการพนันบ่อยแค่ไหน?

- ไม่เคย
- แทบไม่เคย (น้อยกว่า 3 ครั้งต่อปี)
- บางครั้ง (3 ถึง 8 ครั้งต่อปี)
- เกือบทุกเดือน
- ทุกสัปดาห์หรือแม้แต่ทุกวัน

24. ในช่วง 12 เดือนที่ผ่านมา คุณเคยเดิมพันมากกว่าที่คุณสามารถจะจ่ายได้หรือไม่ ?

- ไม่เคย
- บางครั้ง
- ส่วนใหญ่
- เกือบตลอดเวลา

25. ในช่วง 12 เดือนที่ผ่านมา มีคนวิพากษ์วิจารณ์การเดิมพันของคุณ หรือบอกว่าคุณมีปัญหาการพนันหรือไม่ ไม่ว่าจะเป็นจริงหรือไม่ก็ตาม คุณคิดว่าเป็นความจริงหรือไม่ ?

- ไม่เคย
- บางครั้ง
- ส่วนใหญ่
- เกือบตลอดเวลา

26. ในช่วง 12 เดือนที่ผ่านมา คุณรู้สึกผิดเกี่ยวกับวิธีที่คุณเล่นพนัน หรือมีอะไรเกิดขึ้นเมื่อคุณเล่นพนันหรือไม่?

- ไม่เคย
- บางครั้ง
- ส่วนใหญ่
- เกือบตลอดเวลา

27. คุณเคยมี สมาชิกในครอบครัวที่เล่นการพนันหรือไม่?

- ใช่
- ไม่
- ไม่แน่ใจ

28. โปรดบอกถึงระดับมากหรือน้อยของแต่ละเหตุผลดังต่อไปนี้ที่อาจมีอิทธิพลต่อการตัดสินใจของคุณในการเข้าร่วมเล่นการพนันต่างๆ

สาเหตุ	ไม่มีเลย	น้อยมาก	มีบ้าง	มาก
มีความคิดว่าเป็นเรื่องของ โชคหรือโอกาส	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อหลีกเลี่ยงปัญหาหรือความเครียด	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อความตื่นเต้นหรือเร้าใจ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อสร้างความสัมพันธ์ที่ดีกับเพื่อนหรือเป็นกิจกรรมเชื่อมสัมพันธ์ของคนในสังคม	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เชื่อในความสามารถหรือกลยุทธ์การพนันของตัวเอง	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อแก้เหงาหรือเบื่อบ้าง	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อชนะได้เงินรางวัล	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
เพื่อความบันเทิง	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
อื่น ๆ (โปรดระบุ): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. คุณเคยประสบปัญหาทางจิตดังต่อไปนี้ ที่เกี่ยวข้องกับพฤติกรรมการเล่นพนันของคุณหรือไม่? กรุณาเลือกคำตอบทั้งหมดที่ตอบใจขงนี้.

- ความวิตกกังวลหรืออาการที่เกี่ยวข้อง
- ความเครียด ซึมเศร้าหรืออาการที่เกี่ยวข้อง
- การใช้สารเสพติด (รวมถึงยาสูบ แอลกอฮอล์ กัญชา หรือยาอื่นๆ)
- ความคิดหรือความพยายามที่จะฆ่าตัวตาย
- อื่น ๆ (กรณารระบุ): _____
- ไม่มีข้างต้น

30. เพื่อให้มีความเข้าใจพฤติกรรมการเล่นพนันได้ดีขึ้น โปรดระบุว่า คุณได้ทำสิ่งใดต่อไปนี้เมื่อารพนันหรือหลังเล่นหรือไม่ กรุณาเลือกคำตอบทั้งหมดที่ตอบใจขงนี้

- โทกเกี่ยวกับอุปนิสัยการพนันของคุณ
- ยืมเงินเพื่อการพนัน
- ละเลยความรับผิดชอบ (เช่น การดูแลเด็ก) เนื่องจากการพนัน
- มีปัญหาความสัมพันธ์กับผู้อื่น อันเป็นผลมาจากการพนัน
- อื่น ๆ (กรณารระบุ): _____
- ไม่มีข้างต้น

31. คุณเห็นด้วยหรือไม่เห็นด้วยกับประโยคต่อไปนี้มากน้อยเพียงใด ? กรุณาเลือกคำตอบหนึ่งคำตอบสำหรับแต่ละประโยคต่อไปนี้

ประโยค	ไม่เห็นด้วยเลย	ไม่เห็นด้วย	เห็นเป็นกลาง	เห็นด้วย	เห็นด้วยอย่างยิ่ง
การพนันทำให้ฉันมีความสุขมากขึ้น	<input type="checkbox"/>				
การสวดภาวนาช่วยให้ฉันชนะได้	<input type="checkbox"/>				
การเสียพนันหลายครั้งจะต้องตามมาด้วยการชนะหลายครั้ง	<input type="checkbox"/>				
มีความเชื่อมโยงระหว่างการชนะของฉันกับทักษะและความสามารถ จึงทำให้ฉันยังคงเล่นการพนัน	<input type="checkbox"/>				
การพนันทำให้ทุกอย่างดีขึ้น	<input type="checkbox"/>				
หมายเลขและสีพิเศษเฉพาะ สามารถช่วยเพิ่มโอกาสในการชนะของฉัน	<input type="checkbox"/>				
การเสียพนันหลายครั้งจะให้ฉันมีประสบการณ์การเรียนรู้ ที่จะช่วยให้ฉันชนะในภายหลัง	<input type="checkbox"/>				

มีความเชื่อมโยงการเสียพนันของฉันทันกับโชคร้ายและสถานการณ์ที่ไม่ดี จึงทำให้ฉันทันยังคงเล่นการพนัน	<input type="checkbox"/>				
การพนันทำให้อารมณ์เครียด	<input type="checkbox"/>				
ฉันทันสะสมวัตถุประสงค์ต่างๆเพื่อช่วยเพิ่มโอกาสในการชนะของฉันทัน	<input type="checkbox"/>				
เมื่อฉันทันชนะครั้งหนึ่ง ฉันทันจะชนะอีกครั้งอย่างแน่นอน	<input type="checkbox"/>				
มีความเชื่อมโยงของการเสียพนันของฉันทันกับความน่าจะเป็นว่าจะชนะ จึงทำให้ฉันทันยังคงเล่นการพนัน	<input type="checkbox"/>				
การพนันช่วยให้ฉันทันลดความตึงเครียดหรือความเครียด	<input type="checkbox"/>				
ฉันทันมีพิธีกรรมพิเศษและพฤติกรรมเฉพาะที่ช่วยเพิ่มโอกาสในการชนะของฉันทัน	<input type="checkbox"/>				
มีบางครั้งที่ฉันทันรู้สึกโชคดียิ่ง ดังนั้นฉันทันจึงเล่นการพนันในช่วงเวลานั้นเท่านั้น	<input type="checkbox"/>				
การจำได้ว่า ฉันทันชนะได้เงินเท่าไรในครั้งก่อน จึงทำให้ฉันทันยังคงเล่นการพนัน	<input type="checkbox"/>				
ฉันทันมีความควบคุมบางอย่างในการคาดการณ์การชนะในการพนันของฉันทัน	<input type="checkbox"/>				

32. กรุณาระบุระดับความมากหรือน้อยของแต่ละปัจจัยสิ่งแวดล้อมต่อไปนี้
ที่มีอิทธิพลต่อพฤติกรรมการเล่นพนันของคุณ::

ปัจจัยสิ่งแวดล้อม	มีน้อย	มีปานกลาง	มีมาก
อิทธิพลจากครอบครัว (เช่น พ่อแม่ที่เล่นการพนัน)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
อิทธิพลจากเพื่อน, เพื่อนร่วมงาน หรือเพื่อนบ้าน	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
อิทธิพลของโฆษณาการพนัน (จากบ่อนคาสิโน, โทรทัศน์ หรือโฆษณาออนไลน์)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
อิทธิพลจากโซเชียลมีเดีย	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ความสะดวกง่ายในการเข้าบ่อนพนันหรือหาสิ่งอำนวยความสะดวกในการเล่นพนันในที่ตั้งในพื้นที่ของฉันทัน	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
อื่น ๆ (โปรดระบุ): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ความคิดเห็นเพิ่มเติม

33. คุณมีอะไรอยากบอกเราบ้างเกี่ยวกับประสบการณ์การเล่นพนันของคุณ
หรือมีข้อเสนอแนะอะไรที่จะช่วยในการแก้ปัญหากการติดพนันต่างๆในกลุ่มคนเอเชียที่อาศัยอยู่ในนิวซีแลนด์ได้
ดีขึ้น?

ขอบคุณที่กรอกแบบสอบถามเสร็จแล้ว

Appendix K: Survey questionnaire-paper based (Vietnamese)

Mẫu Thông Tin Người Tham Gia Nghiên Cứu

Nghiên cứu này nhằm khám phá các yếu tố liên quan đến việc tham gia đánh bạc và sức khỏe tâm thần trong cộng đồng người châu Á sống tại New Zealand. Phản hồi của bạn sẽ giúp chúng tôi cải thiện các nguồn lực hỗ trợ người từ các nền văn hóa châu Á khác nhau với các vấn đề liên quan đến đánh bạc và sức khỏe tâm thần.

Việc bạn tham gia khảo sát này hoàn toàn là ẩn danh. Tất cả các câu trả lời sẽ được giữ bí mật và lưu trữ an toàn trong một năm sau khi nghiên cứu hoàn tất, sau đó sẽ bị tiêu hủy. Dữ liệu thu thập được chỉ dùng cho phân tích tổng hợp, không có thông tin cá nhân nào sẽ được nhận diện trong bất kỳ kết quả nghiên cứu hay ấn phẩm nào. Thông tin mà chúng tôi thu thập từ những người như bạn sẽ không được sử dụng cho bất kỳ mục đích nào khác. Nghiên cứu này được tài trợ bởi Bộ Y tế (Quỹ Nghiên cứu Tác hại Đánh bạc GH2024-32) và được thực hiện bởi Allen + Clarke và Dịch vụ Gia đình Châu Á.

Xin vui lòng cho người quản lý khảo sát biết nếu bạn muốn tiếp tục khảo sát và đồng ý tham gia nghiên cứu này. Hãy chắc chắn rằng bạn trả lời các câu hỏi một cách trung thực theo tình huống của bạn và trong khả năng tốt nhất của mình.

Khảo sát này có thể mất khoảng 10 đến 15 phút để hoàn thành.

Sau khi bạn hoàn thành khảo sát, vui lòng chuyển lại cho người quản lý khảo sát. Sau khi người quản lý khảo sát xác nhận bạn đã hoàn thành khảo sát, bạn sẽ nhận được một món quà nhỏ trị giá \$50 như một lời cảm ơn tại gian hàng AFS. Dịch Vụ Gia Đình Châu Á có tiếng nói quyết định về chương trình khuyến mãi này.

Nếu bạn có bất kỳ câu hỏi hoặc mối quan tâm nào về khảo sát, xin vui lòng liên hệ với nhóm nghiên cứu qua Tiến sĩ Wardah Ali [CONTACT DETAILS REDACTED] hoặc Tiến sĩ Bo Ning [CONTACT DETAILS REDACTED]

Nếu bạn cảm thấy không thoải mái khi tham gia nghiên cứu, bạn có thể tạm dừng hoặc ngừng bất kỳ lúc nào. Nếu bạn cần hỗ trợ hoặc trợ giúp ngay lập tức liên quan đến vấn đề đánh bạc hoặc sức khỏe tâm thần, xin hãy gọi đến Đường dây hỗ trợ Châu Á 0800862342.

Cảm ơn bạn đã xem xét tham gia nghiên cứu này. Thông tin mà bạn cung cấp rất quý giá đối với nghiên cứu của chúng tôi.



Các yếu tố liên quan đến cờ bạc và sức khỏe tâm thần của người di cư châu Á

Cảm ơn bạn đã tham gia khảo sát này. Các câu trả lời của bạn sẽ giúp chúng tôi hiểu rõ hơn về các yếu tố rủi ro liên quan đến việc tham gia cờ bạc và hành vi nghiện ngập trong cộng đồng người châu Á sống ở New Zealand. Vui lòng khoanh tròn hoặc đánh dấu vào câu trả lời mà bạn muốn chọn khi trả lời câu hỏi khảo sát.

Phần 1 là về thông tin nhân khẩu học của bạn.

1. Giới tính:

- Nam
- Nữ
- Không phân biệt nam nữ hoặc đa dạng giới
- Không muốn nói

2. Tuổi:

- Dưới 18
- 19-24
- 25-44
- 45-64
- 65 tuổi hoặc hơn

3. Bạn sinh ra ở đâu?

- Trung Quốc
- Ấn Độ
- Hàn Quốc
- Philippines
- Sri Lanka
- Nhật Bản
- Thái Lan
- Việt Nam
- Campuchia
- Đài Loan
- Indonesia
- Malaysia
- New Zealand
- Khác (vui lòng ghi rõ): _____

4. Bạn xác định mình thuộc nhóm dân tộc nào? Chọn tất cả các tùy chọn phù hợp.

- Người Trung Quốc
- Người Ấn Độ
- Người Hàn Quốc
- Người Philippines
- Người Sri Lanka
- Người Nhật Bản
- Người Thái
- Người Việt Nam
- Người Campuchia
- Người Đài Loan
- Người Indonesia
- Người Malaysia
- Người Kiwi / New Zealander
- Khác (vui lòng ghi rõ): _____

5. Bạn đã sống ở New Zealand bao nhiêu năm?

- Dưới 2 năm
- 2-5 năm
- 6-10 năm
- Hơn 11 năm

6. Bạn đang sống ở khu vực nào?

- Auckland
- Wellington
- Các khu vực khác của Đảo Bắc
- Christchurch
- Các khu vực khác của Đảo Nam
- Ngoài New Zealand

7. Tình trạng hôn nhân của bạn:

- Độc thân
- Đã kết hôn/ sống với bạn đời
- Ly hôn
- Ly thân
- Goá
- Khác (vui lòng ghi rõ): _____

8. Tình trạng việc làm của bạn:

- Đang làm việc toàn thời gian
- Đang làm việc bán thời gian
- Việc làm tạm thời (hợp đồng)
- Tự kinh doanh
- Thất nghiệp
- Sinh viên
- Đã nghỉ hưu
- Người chăm sóc
- Khác (vui lòng ghi rõ): _____

9. Trình độ học vấn cao nhất của bạn:

- Dưới trung học
- Tốt nghiệp trung học
- Đào tạo nghề hoặc cao đẳng
- Bằng cử nhân
- Bằng thạc sĩ hoặc cao hơn

10. Mức thu nhập hàng năm ước tính của hộ gia đình bạn (trước thuế):

- Dưới \$50,000
- \$50,001 - \$70,000
- \$70,001 - \$90,000
- \$90,001 - \$140,000
- \$140,001 - \$180,000
- Hơn \$180,000
- Không muốn tiết lộ

Phần tiếp theo sẽ hỏi về hành trình của bạn ở New Zealand. Phần này sẽ đề cập đến các ngôn ngữ bạn nói, nền tảng của bạn và những thách thức mà bạn đã gặp phải trong quá trình di cư.

11. Điều nào sau đây mô tả tốt nhất việc sử dụng ngôn ngữ hàng ngày của bạn ở New Zealand?

- Chỉ sử dụng ngôn ngữ châu Á (ví dụ: tiếng Trung, tiếng Hindi, tiếng Nhật, tiếng Hàn, tiếng Việt, v.v.)
- Chủ yếu là ngôn ngữ châu Á, một chút tiếng Anh
- Tiếng châu Á và tiếng Anh đều sử dụng khá đều (bilingual)
- Chủ yếu là tiếng Anh, một chút tiếng châu Á
- Chỉ sử dụng tiếng Anh

12. Bạn đã lớn lên ở đâu?

- Chỉ ở châu Á
- Chủ yếu ở châu Á, một chút ở New Zealand
- Ở châu Á và New Zealand đều nhau
- Chủ yếu ở New Zealand, một chút ở châu Á
- Chỉ ở New Zealand

13. Điều nào sau đây mô tả tốt nhất các mối quan hệ xã hội của bạn ở New Zealand?

- Gần như hoàn toàn là người nhập cư châu Á
- Chủ yếu là người nhập cư châu Á và người New Zealand gốc châu Á
- Các nhóm châu Á và các nhóm khác gần như đều nhau
- Chủ yếu là người New Zealand gốc châu Âu, Māori, Thái Bình Dương hoặc các nhóm sắc tộc khác không phải châu Á
- Gần như hoàn toàn là người New Zealand gốc châu Âu, Māori, Thái Bình Dương hoặc các nhóm sắc tộc khác không phải châu Á

14. Là một người nhập cư châu Á, bạn đã gặp phải bất kỳ vấn đề nào sau đây trong quá trình định cư ở New Zealand không? Chọn tất cả những gì áp dụng.

- Rào cản ngôn ngữ
- Phân biệt chủng tộc
- Vấn đề về bản sắc văn hóa
- Khó khăn tài chính
- Cảm giác cô đơn
- Sự nhàm chán
- Cô lập xã hội (không có liên lạc xã hội thường xuyên, ví dụ như bạn bè hoặc gia đình)
- Căng thẳng công việc
- Căng thẳng từ quan hệ gia đình (ví dụ: xung đột gia đình, bạo lực gia đình)
- Khác (vui lòng chỉ rõ): _____

Phần tiếp theo liên quan đến cách bạn mô tả tính cách và trải nghiệm cuộc sống của mình.

15. **Câu hỏi tình huống:** "Hãy tưởng tượng bạn đang ở trung tâm thương mại và thấy một thiết bị mới nổi bật mà bạn đã ao ước từ lâu. Nó có giá cao hơn rất nhiều so với ngân sách của bạn. Bạn có một ít tiền tiết kiệm, nhưng số tiền đó được dự định cho điều quan trọng hơn, như một hóa đơn sắp đến. Trong tình huống này, khả năng bạn sẽ mua thiết bị đó là bao nhiêu?" Xin hãy đánh giá khả năng mua nó trên thang điểm từ 1 đến 10, trong đó 1 là không khả năng và 10 là rất khả năng.

1 không thể nào	2	3	4	5	6	7	8	9	10 Rất có thể
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16. **Câu hỏi tình huống:** "Bạn đang ở bãi biển cùng với bạn bè và nhận thấy một nhóm người đang tham gia một môn thể thao dưới nước thú vị—lái xe mô tô nước. Họ đang cười đùa, đua nhau và rất vui vẻ. Bạn chưa bao giờ thử nghiệm trước đây, và nó trông vừa thú vị vừa có chút nguy hiểm." Xin hãy đánh giá khả năng thử nghiệm trò chơi này của bạn trên thang điểm từ 1 đến 10, trong đó 1 là không khả năng và 10 là rất khả năng.

1 không thể nào	2	3	4	5	6	7	8	9	10 Rất có thể
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17. **Câu hỏi tình huống:** "Bạn nghe nói về một cơ hội đầu tư mới hứa hẹn sẽ mang lại lợi nhuận rất cao, nhưng cũng có nguy cơ cao về việc mất khoản đầu tư ban đầu của bạn. Bạn có khả năng đầu tư tiền của mình vào cơ hội này là bao nhiêu?" Xin hãy đánh giá khả năng đầu tư của bạn trên thang điểm từ 1 đến 10, trong đó 1 là không khả năng và 10 là rất khả năng.

1 không thể nào	2	3	4	5	6	7	8	9	10 Rất có thể
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18. Trong 5 năm qua, có sự kiện nào trong số này xảy ra trong cuộc sống của bạn không? Vui lòng chọn "Có", "Không" hoặc "Không áp dụng".

Sự kiện	Trả lời
Kết hôn	Đúng không Không áp dụng
Có thành viên mới trong gia đình	Đúng không Không áp dụng
Công việc mới	Đúng không Không áp dụng
Bắt đầu hoặc kết thúc học tập	Đúng không Không áp dụng
Thế chấp (ví dụ, mua nhà hoặc thế chấp doanh nghiệp)	Đúng không Không áp dụng
Điều chỉnh kinh doanh (giảm quy mô hoặc mở rộng)	Đúng không Không áp dụng
Bắt đầu một doanh nghiệp mới	Đúng không Không áp dụng
Thay đổi tình hình tài chính	Đúng không Không áp dụng
Thay đổi điều kiện sống	Đúng không Không áp dụng
Nghỉ hưu	Đúng không Không áp dụng
Thất nghiệp	Đúng không Không áp dụng
Cái chết của vợ/chồng hoặc thành viên gia đình gần gũi	Đúng không Không áp dụng
Ly hôn hoặc chia tay	Đúng không Không áp dụng
Liên quan đến các vấn đề pháp lý	Đúng không Không áp dụng
Vấn đề về sức khỏe	Đúng không Không áp dụng

19. Nhìn chung, bạn hài lòng với cuộc sống của mình hiện tại ra sao? Vui lòng đánh giá mức độ hài lòng của bạn trên thang điểm từ 1 đến 10, trong đó 1 là cực kỳ không hài lòng và 10 là cực kỳ hài lòng.

1 Rất không vui	2	3	4	5	6	7	8	9	10 Rất hạnh phúc
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Phần cuối cùng nói về trải nghiệm của bạn với các hoạt động đánh bạc và sức khỏe tâm thần liên quan.

20. Bạn đã từng tham gia vào các hoạt động đánh bạc (ví dụ: chơi Mạt chược, chơi bài) để giải trí hoặc vui vẻ chưa?

- Đúng
- Không

21. Bạn đã từng tham gia vào các hoạt động đánh bạc (ví dụ: mua vé số, chơi Mạt chược, chơi bài) để kiếm tiền chưa?

- Đúng
- Không

Nếu bạn chọn "Không" ở cả câu hỏi 20 và 21, hãy chuyển đến câu hỏi 33.

22. Nếu bạn trả lời "Có" cho câu hỏi 20 hoặc 21, trong 12 tháng qua, bạn đã tham gia vào các hoạt động đánh bạc nào? Vui lòng chọn tất cả những gì áp dụng.

- Trò chơi casino
- Xổ số
- Cá cược thể thao (như đua ngựa, cá cược bóng đá trực tuyến)
- Trò chơi bài (như Poker)
- Máy đánh bạc
- Mạt chược
- Đánh bạc qua internet
- Trò chơi trực tuyến có hộp quà
- Khác (vui lòng chỉ rõ): _____
- Không có mục nào ở trên

23. Trong 12 tháng qua, bạn đã tham gia vào các hoạt động đánh bạc bao nhiêu lần?

- Không bao giờ
- Hiếm khi (dưới ba lần một năm)
- Thỉnh thoảng (từ 3 đến 8 lần một năm)
- Gần như hàng tháng
- Hàng tuần hoặc thậm chí hàng ngày

24. Trong 12 tháng qua, bạn đã bao giờ đặt cược nhiều hơn số tiền mà bạn thực sự có thể chịu được khi mất chưa?

- Không bao giờ
- Đôi khi
- Thường xuyên
- Gần như luôn luôn

25. Trong 12 tháng qua, có ai chỉ trích việc đặt cược của bạn hoặc nói rằng bạn có vấn đề về đánh bạc không, cho dù bạn có nghĩ rằng điều đó là đúng hay không?

- Không bao giờ
- Đôi khi
- Thường xuyên
- Gần như luôn luôn

26. Trong 12 tháng qua, bạn có cảm thấy tội lỗi về cách bạn đánh bạc hoặc những gì xảy ra khi bạn đánh bạc không?

- Không bao giờ
- Đôi khi
- Thường xuyên
- Gần như luôn luôn

27. Bạn đã từng có thành viên nào trong gia đình chơi đánh bạc chưa?

- Có
- Không
- Không biết

28. Xin hãy cho biết mức độ mà mỗi lý do dưới đây có thể ảnh hưởng đến quyết định tham gia vào các hoạt động đánh bạc của bạn.

Lý do	Không có gì	Ít	Một chút	Nhiều
Cảm giác về may mắn hay cơ hội	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để tránh xa vấn đề hoặc căng thẳng	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để tìm cảm giác hồi hộp hoặc thú vị	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để có mối quan hệ tốt với bạn bè hoặc xã hội	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tin vào khả năng hoặc chiến lược chơi của mình	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để đối phó với sự cô đơn hay chán nản	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để thắng tiền	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Để giải trí	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Khác (vui lòng ghi rõ): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Bạn đã từng trải qua bất kỳ vấn đề sức khỏe tâm thần nào liên quan đến hành vi cờ bạc của mình không? Vui lòng chọn tất cả các mục áp dụng.

- Lo âu hoặc triệu chứng liên quan
- Căng thẳng, trầm cảm hoặc triệu chứng liên quan
- Lạm dụng chất (bao gồm thuốc lá, đồ uống có cồn, cần sa hoặc các loại ma túy khác)
- Suy nghĩ, có ý định hoặc cố gắng tự tử
- Khác (vui lòng ghi rõ): _____
- Không có gì ở trên

30. Để hiểu rõ hơn về hành vi cờ bạc, vui lòng cho biết nếu bạn đã thực hiện bất kỳ hành động nào sau đây khi hoặc sau khi cờ bạc. Vui lòng chọn tất cả các mục áp dụng.

- Nói dối về thói quen cờ bạc
- Vay tiền để cờ bạc
- Bỏ bê trách nhiệm (ví dụ: nuôi dạy con cái) do cờ bạc
- Xảy ra các vấn đề trong các mối quan hệ do cờ bạc
- Khác (vui lòng ghi rõ): _____
- Không có gì ở trên

31. Bạn đồng ý hay không đồng ý với các tuyên bố sau đây đến mức độ nào? Vui lòng chọn một câu trả lời cho mỗi tuyên bố.

Tuyên bố	Rất không đồng ý	Không đồng ý	Trung lập	Đồng ý	Rất đồng ý
Đánh bạc khiến tôi hạnh phúc hơn.	<input type="checkbox"/>				
Cầu nguyện giúp tôi thắng.	<input type="checkbox"/>				
Các khoản thua khi đánh bạc chắc chắn sẽ được theo sau bởi một loạt thắng.	<input type="checkbox"/>				
Liên kết chiến thắng của tôi với kỹ năng và khả năng của tôi khiến tôi tiếp tục đánh bạc.	<input type="checkbox"/>				
Đánh bạc khiến mọi thứ có vẻ tốt hơn.	<input type="checkbox"/>				
Số và màu cụ thể có thể giúp tăng cơ hội thắng của tôi.	<input type="checkbox"/>				
Một chuỗi thua lỗ sẽ mang lại cho tôi kinh nghiệm học hỏi giúp tôi thắng sau này.	<input type="checkbox"/>				
Liên kết thua lỗ của tôi với vận xui và hoàn cảnh xấu khiến tôi tiếp tục đánh bạc.	<input type="checkbox"/>				
Đánh bạc làm cho tương lai tươi sáng hơn.	<input type="checkbox"/>				
Tôi sưu tầm những vật phẩm cụ thể giúp tăng cơ hội thắng của tôi.	<input type="checkbox"/>				
Khi tôi thắng một lần, tôi chắc chắn sẽ thắng lần nữa.	<input type="checkbox"/>				
Liên kết thua lỗ của tôi với xác suất khiến tôi tiếp tục đánh bạc.	<input type="checkbox"/>				
Đánh bạc giúp tôi giảm căng thẳng hoặc áp lực.	<input type="checkbox"/>				
Tôi có những nghi lễ và hành vi cụ thể làm tăng cơ hội thắng của tôi.	<input type="checkbox"/>				
Có những lúc tôi cảm thấy may mắn và chỉ đánh bạc vào những lúc đó.	<input type="checkbox"/>				
Nhớ lại số tiền tôi đã thắng lần trước khiến tôi tiếp tục đánh bạc.	<input type="checkbox"/>				
Tôi có một chút kiểm soát trong việc dự đoán chiến thắng khi đánh bạc.	<input type="checkbox"/>				

32. Vui lòng cho biết mức độ mà mỗi yếu tố môi trường sau đây ảnh hưởng đến hành vi chơi cờ bạc của bạn:

Yếu tố môi trường	Rất không đồng ý	không đồng ý	Trung lập	Đồng ý
Ảnh hưởng từ gia đình (ví dụ: cha mẹ có thói quen đánh bạc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ảnh hưởng từ bạn bè, đồng nghiệp hoặc hàng xóm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ảnh hưởng của quảng cáo đánh bạc (trong sự kiện, casino, quảng cáo trên TV hoặc trực tuyến)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ảnh hưởng của mạng xã hội	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Độ dễ dàng tiếp cận các địa điểm hoặc cơ sở đánh bạc ở khu vực của tôi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Khác (vui lòng ghi rõ): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ý kiến bổ sung

33. Bạn có điều gì khác muốn nói với chúng tôi về trải nghiệm của bạn với cờ bạc không? Hoặc bạn có gợi ý gì để giúp giải quyết vấn đề cờ bạc của người châu Á ở New Zealand không?

Cảm ơn bạn đã hoàn thành khảo sát.

