Master of Public Health Nazarbayev University School of Medicine



Association of problem gambling with psychosocial characteristics among undergraduate students in Astana, Kazakhstan

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ABSTRACT

Background

The prevalence of probable pathological gamblers among college students worldwide doubled in 15 years. While gambling addiction causes financial and social losses, there is lack of studies on gambling involvement in Kazakhstan.

Aims

The current research aims to find the prevalence of gambling, explore the link with sociodemographic and psychological variables among college and university students is Astana, Kazakhstan. The study also aims to evaluate the association between gambling and school satisfaction, which was not reported before.

Method

The analysis included questionnaires of 399 students from three universities and three colleges in Astana, using random sampling. The survey consisted of demographic questions, and scales on anxiety and depression, alcohol use, school satisfaction, family cohesion and suicide ideation.

Results

From 399 questionnaires analyzed, 5.76% were classified as pathological gamblers according to the gambling scale used. The most popular gambling type was betting on sport events with bookmakers. 12.4% reported placing a bet through bookmakers at present time, and of them 91.5% were male, around half (46.8%) were categorized as some-problem gamblers, and one-third (36.1%) as pathological gamblers. Two-third of them (66%) did not reach legal age for gambling.

Pathological gamblers in comparison with non-gamblers/non-problem gamblers are more likely to be male, aged older than 21, have alcohol use disorders, have lower family cohesion, more frequent suicide ideation, and their fathers have no after school education.

Some-problem gamblers in comparison with non-gamblers/non-problem gamblers are more likely to be male, have lower school satisfaction, show symptoms of depression, and do not combine work and study.

Conclusions

The study gives the first overview for gambling problem and associated problems among undergraduate students in Astana. Associates of problem gambling is consistent with the literature. Since every fourth male in the study places a bet with bookmakers, and majority had a gambling problem, there is need for developing interventions to increase awareness and prevent problem gambling and associated psychosocial problems.

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CHAPTER 1

INTRODUCTION AND LITERATURE REVIEW

Today national governments can heavily rely on gambling business revenues, and this led to expanding the number of approved casinos, slot machines and lotteries available for public (Stuart, 2011). However, an increase in gambling venues available in a community results in increase of both regular and pathological gamblers (Campbell&Lester, 1999; Jacques et al., 2000; Stuart, 2011). Positive attitude towards gambling is associated with greater risks (Strong et al., 2004; Williams et al., 2006; Jackson et al., 2008). With the legalization of gambling venues, their availability increases which in turn facilitates social acceptance (Becona et al., 1995). Conservative cultures usually oppose the rise of interest in gambling (LaBrie et al., 2003; Ladouceur et al., 2007). In addition, gambling advertisements stimulate continuous gambling habits, and particularly impacts problem gamblers (Derevensky et al., 2010). Broadcasted promotion of betting during televised sport events significantly influences problem gamblers to gamble more (Hing et al., 2015).

Gambling addiction cannot be underestimated. Pathological gambling is defined as an illness with frequently recurring sessions of gambling, an addictive behavior that takes over the individual's life, often leading to financial losses, disintegration of family, deterioration of one's occupational, material, social values, and commitments. The sufferers from this illness risk their jobs, accumulate large debts, show violence in family, lie compulsively, and break the law to acquire more money. Pathological gamblers express uncontrollable desire to gamble and their minds are preoccupied with images and ideas of gambling. This desire and preoccupation of mind intensifies during stressful periods of life (WHO, 1992).

Individual comorbidities

Pathological gambling is highly comorbid with substance abuse. Studies showed that pathological gamblers have 6 times higher risk of alcohol abuse and 4.4 times greater risk of

substance abuse compared to non-gamblers (Petry et al., 2005 cited in Hodgins et al., 2011) Furthermore, pathological gamblers have 8 times greater risk of having a personality disorder and 3 times increased risk of major and mild depression compared to non-gamblers. Anxiety, panic disorders, and some phobias are comorbid with gambling disorder (Hodgins et al., 2011). There is a strong relationship found between being a male and pathological gambler (Ladouceur et al., 1999; Poulin et al., 2000; Bondolfi et al., 2000; Volberg et al., 2001). In addition, an Indian study among university students found that every third of pathological gamblers have had suicidal thoughts and 7.7% of them had suicidal attempts (George et al., 2016). Among underaged students who used a fake identification to gamble showed a two to three times greater risk for problem gambling compared to those who did not (Poulin et al., 2000).

Family as a Risk Factor

Many studies on gambling report that pathological gambling tends to be familial. There is a noticeable link between being a pathological gambler and having relatives with chronic substance abuse (Black et al., 2006). Pathological gamblers' families had significantly higher lifetime rates of major depression, psychiatric disorders, an antisocial personality disorder and other mental disorder (Black et al., 2006). Pathological gambling is also highly related with excessive emotional burden in family (Black et al., 2006). The lack of parental attention, bonding and restrictions create an environment where gambling easily sprouts (Ladouceur et al., 2007). Pathological gambler's families tend be larger in size than in comparison group of nongamblers (Black et al., 2006). Having a parent who had graduated a college is found to be a protective factor (LaBrie et al., 2003). In case when an older family member had a history of gambling habits, it is highly likely that the younger members will also be prone (Winters et al., 1993; Ladouceur et al., 2007).

Motives

Excitement, monetary, socialization, amusement and avoidance are stated as gambling motives (Neighbors et al, 2002). Among these five motives the last three motives are known to be common among alcohol abusers (Cooper et al., 1992). A unique characteristic for gambling not present in other habits are excitement and financial gain. Gamblers have huge illusory belief to hit jackpot and win easy money. This leads them to dreaming about immediate wealth and make plans with that imaginary money (Lee et al., 2007). Moreover, gambling is closely connected with avoiding negative feelings, escape from boredom and low self-esteem (Steel & Blaszczynski, 1998). The avoidance motive makes an important part in the continuation of gambling behavior (Lee at al., 2007). For sport fans sport events are emotionally charged, they try to show their allegiances with their team or equally demonstrate the confidence in failure of the other team (Mao et al., 2015).

Prevalence among college students

College students appear to have the highest proportion of probable pathological gamblers among general population (Blinn-Pike et al., 2007). A meta-analysis in 1999 estimated the proportion of probable pathological gamblers among college students to be 5.05% (Shaffer et al., 1999). Later in 2007 this number increased to 7.89% (Blinn-Pike et al., 2007). In 2014, the prevalence of probable pathological gamblers among college students worldwide doubled from 1999 estimate, and was already 10.23% (Nowak&Aloe, 2014).

The susceptibility of college students to gambling addiction are explained by several factors: at young ages people are easily get involved in risky behaviors, an availability of wide choice of legal or illegal gambling, acceptability of gambling business in communities and by government entities, advertising the gambling through media, especially promoting gambling as a sport, and access to financial loans (LaBrie et al., 2005). College students are believed to have resources, time and desire to get involved in variety of gambling activities, thus gambling problem among students should be addressed, as it poses a threat to students in terms of monetary loss and safety (Nowak&Aloe, 2014).

Gambling in Kazakhstan

According to Kazakhstan Ministry of Finance's State Revenue Committee, a dramatic increase in annual tax revenues from gambling businesses is registered – in 2017 they constitute more than 11.3 billion tenge (\$33 million), while in 2010 it was 3.4 billion tenge (\$23 million) (Yessenalina, 2017). Kazakhstan's first attempt to tackle gambling problem was moving casinos in cities to two specific gambling zones, Kapchagai and Shuchinsk, in 2007.

The above-mentioned regions are far from cities, and hereafter betting offices turned into the quickest way of satisfying one's desire for gambling. Bookmakers that are particularly specialized at betting on sport events have been increasing rapidly since 2007. According to Association of Kazakhstani Bookmakers and Totes there are about thirty different registered bookmaker companies and each of them have ten to hundred offices in Astana. Additionally, small and intermediate businesses were freed from governmental control from 2014, and this seems to further increase the availability of gambling (Prilutskaya & Kuliev, 2016). According to Kazakhstan Ministry of Finance, bookmakers provided 3.5 billion tenge (\$10.2 million) in tax revenue in 2016 alone (SRC).

In August of 2017 Kazakhstan Ministry of Culture and Sports proposed to move all bookmakers and totes to Kapchagai and Shuchinsk. They stated that bookmakers are already causing people severe social and financial issues. In case bookmakers will remain in cities, the number of pathological gamblers will continue increasing (Tengrinews, 2017).

Compared to casinos with the entrance fee of \$300-500, gamblers at bookmakers can place bets starting from 500 tenge (\$1.5). People can easily place a bet through electronic payment machines in a city once registered an account in a betting company's website. The legal age for gambling is 21, however the machines accept payments without age verification. All this makes gambling in bookmakers affordable and encouraging even for school and college students (Bartlett, 2013).

The current research aims to find the prevalence of gambling, explore its link with anxiety and depression, alcohol use, school satisfaction, family cohesion, and suicide ideation among college and university students in Astana. Research results may bring attention to the current problem.

CHAPTER 2

METHODOLOGY

Sample selection and study procedure

Study participants were university and college students in Astana. There are 18 universities and 43 colleges in the city. Initially 6 universities and 6 colleges were selected randomly, however only 3 universities and 3 colleges agreed to cooperate. All participants were aged above 18.

Sample calculation for several variables was carried out. Sample calculation for gender and alcohol abuse variables was based on Indian study among university students. Among problem gamblers 66.6% were males, and 39.9% had lifelong alcohol use (George et al., 2016). The sample sizes calculated for the two mentioned variables by StatCalc in Epi Info 7.2.2.2 are 263 and 610. Given the response rate in the Indian research was 96%, the intended sample size was estimated to be 635. However, this number was not achieved due to several factors. Two universities were unable to provide students due to winter breaks and undergoing governmental audit for 3 weeks. Some refused being cautious of the research topic.

Data collection was conducted between December 2017 and March 2018. The procedure of data collection in institutions who agreed to cooperate went as following. In the institution provided classrooms filled with students of different years and majors, all above age of 18, the researcher informed about the research and read the consent form. The researcher then administered self-reported paper questionnaires and informed students that the survey is anonymous, there is no right or wrong answers, it is voluntary, and no consequence of withdrawing from participation at any time. Verbal consent was obtained, and participants were given a sheet with contact information of the researcher and the city psychological help hotlines. It took in average 15-20 minutes to complete the survey. There were no incentives for participation. In total, 442 questionnaires were administered, 13 of them were returned immediately with a claim of being

too long and the participant would rather prefer to continue their classwork. Among 429 questionnaires obtained, 30 of them had insufficient data on at least one scale and thus were discarded.

The current study was cross sectional aiming to find the prevalence of pathological gambling and its association with personality comorbidities as discussed in the literature. Demographic questions included gender, age, ethnicity, religion, part time work, GPA, number of siblings, and education level of parents, these were followed by administration of standardized scales on gambling, alcohol use, anxiety and depression, family cohesion, school satisfaction and suicide ideation. The questionnaire was prepared in English, and then translated into Kazakh and Russian languages. To ensure accuracy, the Kazakh and Russian versions were translated back to English by a different person.

Instruments

Gambling

The South Oaks Gambling Screen (SOGS) is an available tool to identify the prevalence of pathological gambling in population, it was developed by Lesieur and Blume in 1987. It has shown good reliability and validity, the Cronbach's alpha=.97 (Lesieur&Blume, 1987). The scale asks questions on whether the participant was involved in different gambling activities and how frequent during the past 12 months, question on whether a person has a relative or a friend with signs of gambling addiction. Further, continues with dichotomous response questions: example questions are "Did you ever gamble more than you intended to?", and "Have you ever lost time from work (or school) due to betting money or gambling?"

The SOGS, the 20-item questionnaire classifies a person as a probable pathological gambler with score higher than 5 and as having some-problems with gambling with score between 1-4 out of 20. The Russian version translated and adopted by Karpov A. and Kozlov V. was available for use (Katkov, 2012).

Anxiety and Depression

The Ultra-Brief Screening 4-item Scale for Anxiety and Depression (PHQ-4) was used to measure one's anxiety and depression over the last two weeks (Kroenke et al., 2009), which has been validated for young adults with Cronbach's alpha=.81 (Khubchandani et al., 2016). The scale has following questions: have you ever felt nervous, anxious, or on edge, uncontrollable worrying, had little interest in doing things, felt down over the last 2 weeks. It assessed frequency of corresponding symptoms on a 4-point Likert scale, with a total score ranging from 0 to 12. This scale contains two subscales in it: anxiety subscale (score ranges from 0 to 6), and depression (score ranges from 0 to 6). On each subscale a score 3 and higher means probable anxiety or depression.

Alcohol Use

The Alcohol Use Disorders Identification Test (AUDIT-C) is a 3-item scale known to reliably identify heavy drinkers and those who have alcohol use disorders (Bush et al., 1998). Cronbach's alpha was reported to be .98 (Osaki et al., 2014). It asks the frequency of drinking alcohol containing drinks, and how much does the responder drinks on one occasion. It is scored on a scale between 0 and 12. A score 4 and higher means positive for men, while for women a score of 3 and higher.

School satisfaction

A 10-item subscale of Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q) scale was included to assess enjoyment and satisfaction experienced in School/Course Work in the past week by students (Endicott et al., 1993), with Cronbach's alpha=.90 (Schechter et al., 2007). Questions: "How much of the time have you been pleased with your course/class work accomplishments?", and "How much of the time have you communicated and interacted with ease with others at your course/class?". It assessed frequency of all items on a 5-point Likert

scale, with a total score ranging from 0 to 40. The higher score corresponds to better school satisfaction.

Family Cohesion

A 9-item family cohesion scale by Moos (2009) is used to measure the support and commitment in the family, with Cronbach's alpha 0.8. This scale administers two sets of statements which can be responded with either "mostly true" or "mostly false". One set has statements like "Family members really help and support one another", and "There is plenty of time and attention for everyone in our family." Another set has statements like "We often seem to be killing time at home" and "We rarely volunteer when something has to be done at home." One set is reversely coded and then responses are added together with total score of 9. A higher score implies a better family environment.

Suicidal Ideation

To assess the severity of suicidal thinking the Ultra Short Suicidal Ideation 4-item scale is used, with Cronbach alpha .90 (Nugent & Cummings, 2014). It consists of questions identifying frequency of suicidal thoughts like feeling of life is over, committing suicide, and different ways of killing oneself. It assesses all items on a 7-point Likert scale, with a total score ranging from 0 to 24, with a higher score indicating more severe suicidal ideation.

Ethical considerations

Institutional ethical approval was received from Nazarbayev University School of Medicine - Research Ethics Committee. Only students who verbally consented and were aged above 18 participated. Those who did not want were free to work with their class assignments.

Data Analysis

Prevalence of gambling participation and problem gambling in the last 12 months were determined. Unadjusted relationships between gambling and other variables were examined by bivariate analyses. For bivariate comparisons were done using Chi-square test or Fisher's exact

test and student t-test among groups of non-gamblers/non-problem gamblers, gamblers having some-problem and pathological gamblers. Poisson regressions with robust variance were run for pairwise comparisons using Stata/IC 12 statistical software program. Poisson regression with robust variance was used to calculate the adjusted prevalence risk ratios. This regression provides more reliable estimates than logistic regression in cross-sectional studies with binary outcomes analysis (Barros & Hirakata, 2003; Zou, 2004). Variables included in the multiple regression as potential confounders was based on the significance level P<.15 in bivariate analyses.

CHAPTER 3

RESULTS

Questionnaires, where at least one scale was omitted, were excluded from the study. In total, 429 participants from 3 universities and 3 colleges in Astana city responded. Among these questionnaires 30 (6.99%) were discarded and 399 were considered viable for the analysis. Of these, 200 were men (50.1%) and 309 were aged 18-20 (77.4%).

From analysis 11.03% of participants were classified as having some-problem with gambling, and 5.76% as probable pathological gamblers. 12.8% of all participants reported having a relative, i.e. father, mother, brother, other relatives, and a friend/friends having a gambling problem.

Unadjusted bivariate comparisons

Chi-square test revealed a statistically significant relationship at 0.05 level between gender and gambling categories, with males being more likely to be classified as some-problem gamblers and probable pathological gamblers than females (Table 1). Pathological gamblers comparing to non-gamblers/non-problem gamblers were younger, had alcohol use disorder, had lower school satisfaction, and lower family cohesion. Some-problem gamblers compared to non-gamblers/non-problem gamblers were more likely to experience anxiety and have lower school satisfaction. Comparing pathological gamblers with some-problem gamblers, there is a borderline significantly higher alcohol use disorders in the pathological gamblers group.

Table 1. Comparison of sociodemographic and psychological variables between non-gamblers/non-problem gamblers (n=332), some-problem gamblers (n=44) and pathological gamblers (n=23)							
Variables	Pathological gamblers (n=23)	Some-problem gamblers (n=44)	Non- gamblers/non problem gamblers (n=332)	Group II vs 0 (P)	Group I vs 0 (P)	Group II vs I (P)	
Gender • Male • Female	22 (95.7%) 1 (4.3%)	32 (72.7%) 12 (27.3%)	147 (44.3%) 185 (55.7%)	0.000	0.000	0.076	

			1	1	1	
Age	12 (7 5 72)	22 (72 72)	254 (50 504)	0.010	0.004	0.400
• 18-20	13 (56.5%)	32 (72.7%)	264 (79.5%)	0.010	0.301	0.180
• 21-older	10 (43.5%)	12 (7.3%)	68 (20.5%)			
Race	22 (05 70()	41 (02 20)	200 (07 10/)	0.7.00	0.404	1 000
• Kazakh	22 (95.7%)	41 (93.2%)	289 (87.1%)	0.769	0.494	1.000
 Russian 	0 (0%)	1 (2.3%)	18 (5.4%)			
• Other	1 (4.3%)	2 (4.5%)	25 (7.5%)			
Religion	10 (70 00)	40 (00 00)	265 (50 004)	0.120	0.404	0.145
• Islam	18 (78.3%)	40 (90.9%)	265 (79.8%)	0.139	0.484	0.145
 Christian 	0 (0%)	1 (2.3%)	19 (5.7%)			
Other	2 (8.7%)	0 (0%)	5 (1.5%)			
• None	3 (13.0%)	3 (6.8%)	43 (13.0%)			
GPA						
• ≤1.99	1 (4.3%)	2 (4.5%)	8 (2.4%)	0.001	0.045	0.173
• 2-2.99	12 (52.2%)	16 (36.4%)	64 (19.3%)			
• 3-4	10 (43.5%)	19 (43.2%)	200 (60.2%)			
• NA	0 (0%)	7 (15.9%)	60 (18.1%)			
Work						
• Yes	8 (34.8%)	20 (45.5%)	84 (25.3%)	0.316	0.005	0.400
• No	15 (65.2%)	24 (54.5%)	248 (74.7%)			
House						
• Yes	22 (95.7%)	43 (97.7%)	319 (96.1%)	0.918	0.589	0.636
• No	1 (4.3%)	1 (2.3%)	13 (3.9%)			
Siblings						
• 0	2 (8.7%)	4 (9.1%)	23 (6.9%)	0.683	0.887	0.681
• 1	6 (26.1%)	12 (27.3%)	80 (24.1%)			
• 2	9 (39.1%)	11 (25.0%)	105 (31.6%)			
• 3	4 (17.4%)	8 (18.2%)	52 (15.7%)			
• 4 and more	2 (8.7%)	9 (20.4%)	72 (21.7%)			
Father's highest education						
 Higher education 	17 (73.9%)	30 (68.2%)	204 (61.5%)	0.001	0.823	0.012
 College education 	(11111)	(,	(1 111)			
• School ed.	0 (0%)	10 (22.7%)	93 (28.0%)			
Other	, ,	,	,			
• Other	6 (26.1%)	4 (9.1%)	29 (8.7%)			
	0 (0%)	0 (0%)	6 (1.8%)			
Mother's highest educatio						
 Higher education 	15 (65.2%)	36 (81.8%)	229 (69.0%)	0.836	0.038	0.123
 College education 	6 (26.1%)	7 (15.9%)	76 (22.9%)			
• School ed.						
Other	2 (8.7%)	0 (0%)	26 (7.8%)			
	0	1 (2.3%)	1 (0.3%)			
Anxiety	6 (26.1%)	17 (38.6%)	80 (24.1%)	0.829	0.038	0.304
Depression	4 (17.4%)	15 (34.1%)	66 (19.9%)	0.772	0.031	0.150
Alcohol use disorder	10 (43.5%)	9 (20.4%)	45 (13.6%)	0.000	0.220	0.047
School satisfaction, mean	31.4 (7.6)	32.8 (6.5)	35.7 (7.5)	0.014	0.015	0.415
(s.d)	, ,	, ,	, ,			
Family cohesion, mean	6.3 (2.1)	7.1 (1.5)	7.5 (1.5)	0.015	0.080	0.104
(s.d)						
Suicide ideation, mean	3.7 (5.0)	2.0 (3.9)	1.6 (3.8)	0.058	0.513	0.124
(s.d)				<u> </u>		
Notes: p volues was based a	Chi gayara ar	Eighou's orrest to	-4		•	

Notes: p-values was based on Chi-square or Fisher's exact test.

Group II – Pathological gamblers; Group I – Some-problem gamblers; Group 0 – Non-gamblers/nonproblem gamblers

Gambling activities type

32.1% of participants reported as having gambled at least on one type of gambling in the last 12 months. Table 2 shows the participation of pathological and some-problem gamblers in different types of gambling in the last 12 months. Among pathological and some-problem gambler groups the most popular gambling type is betting on sports with bookmakers. This is followed by lotteries, slot machines, playing games of skill and card games for money.

Table 2. Participation in gambling activities in pathological gamblers (n=23) and some- problem gamblers (n=44)						
Activity type	Some-	Pathological	Chi-square			
	problem	gamblers	P-value			
	gamblers	n (%)				
	n (%)					
a. Played cards for money	12 (27.3%)	7 (30.4%)	.785			
b. Bet on horses, dogs, or other animals (at OTB, the	0 (0%)	4 (17.4%)	.030			
track or with a bookie)			Fisher's			
c. Bet on sport with bookie	30 (68.2%)	20 (87.0%)	.093			
d. Played dice games, including craps, over and	2 (4.5%)	2 (8.7%)	.496			
under or other dice games						
e. Went to casinos (legal or otherwise)	6 (13.6%)	7 (30.4%)	.099			
f. Played the numbers or bet on lotteries	7 (15.9%)	11 (47.8%)	.005			
g. Played bingo	7 (15.9%)	10 (43.5%)	.014			
h. Played the stock and/or commodities market	2 (4.5%)	7 (30.4%)	.003			
i. Played slot machines, poker machines, or other	10 (22.7%)	8 (34.8%)	.291			
gambling machines						
j. Bowled, shot pool, played golf, or some other	13 (29.5%)	8 (34.8%)	.661			
game of skill for money						
k. Some form of gambling not listed above	5 (11.4%)	5 (21.7%)	.258			

Amount of money spent

Table 3 presents the largest amount of money pathological and some-problem gamblers spent for gambling in the last 12 months. 34.8% of pathological gamblers spent more than 100,000 tenge.

Table 3. The largest amount of money spent by gamblers							
Amount of	Some-problem	Pathological	Chi-square (P)				
money	gamblers	gamblers					
>100,000 kzt	4 (9.1%)	8 (34.8%)	0.009				
50-100,000 kzt	0 (0%)	2 (8.7%)	0.114				
10-50,000 kzt	7 (15.9%)	4 (17.4%)	0.876				
5-10,000 kzt	8 (18.2%)	5 (21.7%)	0.727				
500-5,000 kzt	10 (22.7%)	2 (8.7%)	0.155				
<500 kzt	8 (18.2%)	0 (0%)	0.044 (Fisher's)				
Not reported	7 (15.9%)	2 (8.7%)	0.411				

Poisson regressions with robust variance models

Model 1: Pathological versus Non-gamblers/Non-Problem Gamblers

Poisson regression with a robust error variance analysis was conducted to find associations of pathological gambling compared to non-gambling/non-problem gambling (non-gamblers plus non-problem gamblers) using independent variables with p<0.15 from Table 1. These were gender, age, religion, GPA, father's education, alcohol, school satisfaction, family cohesion and suicide ideation. However, there were zero cells in religion, GPA, and father's education variables. For religion variable I merged Christian with "other" religion group, and run bivariate analysis again, and got p=0.899. For GPA variable, I removed those with "N/A" because this group are probably first-year students, and they can later be in any GPA group. And running bivariate analysis gives p=0.08. Similarly, I deleted "N/A" group in father's education group and combined College with High education group as having at least higher education than school one and got p-value equal to 0.07. The first Poisson regression model included gender, age, GPA, father's education, alcohol, school satisfaction, family cohesion and suicide ideation.

Table 4. Poisson regression with robust variance: pathological gamblers vs. non-									
gamblers/non-problem gamblers									
Variables	PR	Robust	z	P> z	95% CI				
		Std. Err.							
Gender: Male	6.97	5.24	2.58	0.010	1.60-30.43				
Age: 21 and older	2.50	.86	2.69	0.007	1.28-4.89				
GPA									
• 2-2.99	.33	.34	-1.07	0.285	.04-2.52				
• 3-4	.21	.22	-1.48	0.138	.03-1.65				
Father's education:									
Higher than school	.53	.20	-1.68	0.093	.25-1.11				
Alcohol	2.86	.96	3.13	0.002	1.48-5.51				
School satisfaction	.97	.02	-1.17	0.244	.93-1.03				
Family cohesion	.86	.07	-1.77	0.077	.74-1.02				
Suicide ideation	1.09	.03	3.32	0.001	1.04-1.15				

Reference groups: Gender: female; Age: 18-20; GPA: <2; Father's education: school education; Alcohol: no alcohol use disorder; School satisfaction, Family cohesion and Suicide ideation are continuous variables.

Removing insignificant variables stepwise, comparing AIC and BIC values, and changes in standard errors, the final model is given in Table 4.1.

Table 4.1. Poisson regression with robust variance: pathological gamblers vs. nongamblers/non-problem gamblers Variables PR Robust P>|z|95% CI Z Std. Err. 0.007 Gender: Male 7.56 5.65 2.71 1.75-32.72 Age: 21 and older 2.34 2.47 0.013 1.19-4.60 .81 Father's education: .19 Higher than school .48 -1.87 0.061 .22-1.04 Alcohol 2.70 .98 2.73 0.006 1.32-5.51 -2.34 Family cohesion .07 .71-.97 .83 0.019 Suicide ideation 1.09 .03 3.20 0.001 1.03-1.15

Reference groups: Gender: female; Age: 18-20; Father's education: school education; Alcohol: no alcohol use disorder; Family cohesion and Suicide ideation are continuous variables.

According to Poisson regression with robust variance in Table 4.1., gender, age, alcohol use disorder, family cohesion and suicide ideation are significant at the 0.05 level, and they are significantly associated with pathological gambling. Pathological gambling is on average seven and half times prevalent in men than women, and more than twice in those aged older than 21 compared to 18-20. In contrast, father's education higher than school education (PR=.48) and better family cohesion (PR=.83) were shown to have protective association with pathological gambling. Also, pathological gamblers had 2.7 times increased prevalence risk of having alcohol use disorders. One unit increase in suicide ideation score is associated with increased risk of being pathological gambler by more than nine percent, adjusting for all variables in Table 4.1.

Model 2: Some-Problem versus Non-gamblers/Non-Problem Gamblers

From Table 1 variables with P<.15 were gender, GPA, work, mother's education, anxiety and depression, school satisfaction and family cohesion. Considering zero cells in mother's education variable, I deleted "school education" and the "other" group, and chi-square p-value equals for this variable with two left categories is 0.213. A modified Poisson regression analysis was conducted to find associations of pathological gambling compared to non-gamblers/non-problem gambling, using gender, GPA, work, alcohol, school satisfaction, family cohesion, anxiety, and depression as predictor variables. All independent variables were entered.

Table 5. Poisson regression with robust variance: some-problem versus non-gamblers/non-problem gamblers							
Variables	PR	Robust Std. Err.	Z	P> z	95% CI		
Gender: Male	2.71	.91	2.95	0.003	1.40 - 5.24		
GPA							
• 2-2.99	.72	.42	-0.56	0.575	.23 - 2.28		
• 3-4	.51	.29	-1.21	0.227	.17 - 1.53		
• NA	.59	.37	-0.83	0.404	.17 - 2.02		
Work	.51	.14	-2.40	0.016	.2988		
Anxiety	1.55	.55	1.24	0.215	.77 - 3.11		
Depression	1.52	.54	1.17	0.241	.76 - 3.04		
School satisfaction	.97	.02	-2.07	0.039	.9499		
Family cohesion	.97	.08	-0.33	0.740	.84 - 1.14		
Notes: Gender: female. GPA <2. Work: no job. School satisfaction and Family							

cohesion are continuous variables.

Using similar procedures to the first model, the final model for comparing the two groups (someproblem gamblers versus non-gamblers/non-problem gamblers) is given in Table 5.1.

Table 5.1 Poisson regression with robust variance: some-problem versus non-gamblers/non-problem gamblers						
Variables	PR	Robust	Z	P> z	95% CI	
		Std. Err.				
Gender: Male	2.82	.91	3.22	0.001	1.50 - 5.30	
Work	.49	.14	-2.58	0.010	.2984	
Depression	2.11	.57	2.75	0.006	1.24 - 3.58	
School satisfaction	.96	.02	-2.28	0.022	.9499	
Notes: Gender: female. Work: no job. School satisfaction is continuous variable.						

According to the model given in Table 5.1. some-problem gambling is more prevalent among men (PR=2.82) compared to women. Some-problem gamblers had an increased prevalence risk of being depressed by a factor 2.1 compared to non-gamblers/non-problem gamblers. In contrast, being employed along with university studies (PR=.49) and the higher school satisfaction (PR=.96) were shown to have a protective association to some-problem gambling.

Model 3: Some-Problem versus Pathological Gamblers

For Poisson regression building variables with p<0.15 were used: gender, religion, father's and mother's education, alcohol, family cohesion, suicide ideation, and depression. However, considering zero cells, I added the "other" group and Christians to one category. Then bivariate test gave p=0.251. In father's education, college and higher education were added together as "having higher than school education" (p=0.268). For the mother's education I would need to remove the "other" group and the school group (p=0.258).

So, the model includes gender, alcohol, family cohesion, suicide ideation, and depression variables.

Table 6. Poisson regression with robust variance: pathological versus some-problem gamblers						
Variables PR Robust Z P> z 95% CI						
		Std. Err.				
Gender: Male	1.92	1.36	0.93	0.353	.48-7.65	
Depression	.45	.23	-1.58	0.114	.16-1.21	
Alcohol use disorder	1.64	.54	1.48	0.138	.85-3.14	
Family cohesion	.90	.07	-1.47	0.141	.78-1.04	
Suicide ideation	1.05	.03	2.02	0.044	1.00-1.11	
Notes: Family cohesion and Suicide ideation are continuous variables						

The final model is in Table 6.1.

Table 6.1. Poisson regression with robust variance: pathological versus some-problem gamblers						
Variables	PR	Robust	Z	P> z	95% CI	
		Std. Err.				
Depression	.42	.22	-1.66	0.096	.15-1.17	
Alcohol use disorder	1.82	.56	1.95	0.051	.998-3.32	
Family cohesion	.88	.07	-1.71	0.087	.76-1.02	
Suicide ideation	1.05	.03	1.86	0.063	.997-1.11	
Notes: Family cohesion and Suicide ideation are continuous variables						

All the variables in the model are significant at 0.1 level. Those with alcohol use disorders have 1.82 times increased prevalence risk of being pathological gamblers versus some-problem gamblers. Whereas, depression and better family cohesion is more prevalent among some-problem gamblers compared to pathological gamblers.

Betting at bookmakers

53.03% reported having a friend currently gambling through bookmakers. (201/379). 12.4% reported that they are gambling through bookmakers currently, where 91.5% are males. That is

every fourth male in the sample bet through bookmakers (22.4%). And among of these who gamble at bookmakers, 46.8% are classified as having some-problem with gambling, and 36.1% as pathological gamblers. Among currently gambling in bookmakers 66.0% are aged 18-20. Most frequently reported payment method is through electronic payment machines in the city (56.8%). The second most frequent was using a debit card (24.3%). Lastly, payment with cash in bookmaker offices consist 18.9%. Also, 17 was the average age of the first experience gambling in bookmakers among reported.

CHAPTER 4

DISCUSSION, IMPLICATIONS, AND CONCLUSION

The current study on students gambling is likely to be first in Kazakhstan as no such reports were seen prior in the literature. It revealed that among the sample size of 399 students, 11% have some gambling problems and 5.76% are probable pathological gamblers. This result fits reasonably within the range of other country-specific rates of probable pathological gamblers. As cited through meta-analysis, United States has rate of 3 to 32%, Singapore and Canada -8.7%, China -6.4%, Japan -4.2%, Nigeria -4.2% and Scotland -3.9% (Nowak&Aloe, 2014).

The current study found that more than one third of all participants gambled at least once during the last 12 months. That is twice more than presented in Indian study (George et al., 2016). The most popular activity among pathological and some-problem gamblers is placing bets in bookmaker offices on sport events. More than twelve percent of all participants currently gamble at bookmakers and more than one-third were classified as probable pathological gamblers and more than half as some-problem gamblers by SOGS scale. Most notably, more than ninety percent of those who gamble at bookmakers are males, and two-third are below age of 21, which is the legal age for gambling. These numbers are highly concerning, because more than eighty percent those who gamble at bookmakers currently were shown to have some or pathological gambling problem.

Poisson regression with robust variance analyses was used to estimate adjusted prevalence ratios. The results show significant association of pathological gambling with gender, age, parent's education, alcohol use, family cohesion and suicidal thoughts when comparing with non-gamblers/non-problem gamblers. The factors associated with pathological gambling found in this study were identical to those conducted in other countries. In this study similar to other studies, university and college students who are pathological gamblers are mainly males (Volberg et al., 2001), are likely to have alcohol use disorders (Hodgins et al., 2011), lower family cohesion

(Black et al., 2006; Ladouceur et al., 2007), and frequent suicide ideation (George at al., 2016) compared with non-gamblers/non-problem gamblers. Also, fathers receiving education after school was found to have protective association with pathological gambling (LaBrie et al., 2003).

Those categorized as some-problem gamblers problems also show significant association with gender, employment, depression, and school satisfaction when comparing with non-gambler/non-problem gamblers. Some-problem gamblers are mainly males, more likely to be depressed (Hodgins et al., 2011), and have lower school satisfaction. However, having a part time job had a protective association with some-problem gambling as opposed to other studies (George et al., 2016). This could be true as those working along with university studies are more independent and feel the responsibility for sustaining themselves and will not waste their money for gambling.

Lastly, pathological gamblers and some-problem gamblers had associations that do not differ significantly at 0.05 level. This may be due to small sample size, or this may indicate that some-problem gamblers may quickly move to pathological gamblers. For adolescents' change from social to problem gamblers quickly (Blinn-Pike et al., 2010).

The current study is important for two reasons: as the first study on prevalence of gambling in Kazakhstan and for using structured instruments for screening gambling and related issues.

On limitations, despite being translated into Kazakh and Russian and pilot tested, most of the scales were not validated before in local languages in this specific population. In addition, the present study used only self-report data and it is not excluded that participants may have answered dishonestly on some questions about involvement in certain questions. Taking into consideration that students at greatest risk are likely to be truant, absent or dropped-out from the school on the day of administration of questionnaire, there is a high chance that this method can

underestimate the prevalence of problem gamblers (MacMahon & Trichopoulos, 1996 as cited in Dickson et al., 2008).

Given the lack of research on gambling in Kazakhstan, clearly more efforts are needed to address this issue now. College administrations should be aware of these problems and pass special training to identify and treat this condition. In conclusion, results of this study show that college students in Kazakhstan gamble at alarming rate. The easy access, increased availability and wide options to choose from further aggravates the problem, leading to growing number of gamblers each year and worsening their addiction. The researcher of this study makes a call to increase awareness of gambling and its potential consequences among the public, college students, educators, healthcare professionals and policymakers.

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APPENDIX A -The Questionnaire in all three languages

	Survey
1.	Gender Female Male
2.	Your age □ 18 – 20 □ 21 and older
3.	four ethnicity Kazakh Russian Mixed (please specify) Other (please specify)
4.	Which religion do you associate yourself with? Muslim Christian Buddhist None Other (please specify)
5.	What is your current GPA? ☐ Less than 1 ☐ 1-1.99 ☐ 2-2.99 ☐ 3-4 ☐ NA (freshman)
6.	Are you working for money along with university studies? ☐ Yes ☐ No
7.	Does your family own a house? Yes No
8.	How many siblings do you have? 0 1 2 3 4 and/or more
9.	What is the highest educational degree your father has obtained? School education College education High education
10.	What is the highest educational degree your mother has obtained? School education College education High education

A1.	During the past weel	k how much of the t	ime have you enjoyed	d the course/class work	?	
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
		k how much of the t	ime have you looked	forward to getting to w	ork on the course/cla	55
	work?					
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A3.	During the past weel	k how much of the t	ime have you dealt w	rith the course/class wor	rkwithout undue stre	ss?
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A4.	During the past weel	k how much of the t	ime have you though	t clearly about the cour	se/class work?	
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A5.	During the past weel	k how much of the t	ime have you been d	ecisive about the course	c/class work when nee	eded?
	П		П		П	
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never	one of the section of		most of the time	all the time	
A6.	During the past weel	k how much of the t	ime have you been p	leased with your course,	/class work	
	accomplishments?			6- 31		
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A7.	During the past weel	k how much of the t	ime have you been in	iterested in your course,	/class work?	
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A8.	During the past weel	k how much of the t	ime have you concen	trated on your course/c	lass work?	
	П		П			
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never	Harery	Sometimes	most of the time	all the time	
ΔΟ	During the past weel	k how much of the t	ime have vou felt øod	od while doing your cou	rse/class work?	
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never			most of the time	all the time	
A10	During the p	ast week how much	of the time have you	communicated and into	eracted with ease wit	h
	others at your course					
	Ġ					
	Not at all	Rarely	Sometimes	Often or	Frequently or	
	or never	udanistynd3209 05 °0.		most of the time	all the time	

B1.	Over the last 2	weeks, how of	ten have you b	een bothered b	y feeling nervo	ous, anxious or	on edge?		
	Not at all		Several days	More	than half the	days N	learly every day		
B2.	Overthe last 2	weeks, how of	ten have you b	een bothered b	y not being ab	e to stop or co	ntrol worrying?		
	Not at all		Several days	More	than half the	days N	learly every day		
ВЗ.	Overthe last 2	weeks, how of	ten have you b	een bothered b	y little interest	or pleasure in	doing things?		
	Ш		Ц	0 0 F 2 min 10 m		os Chaladara 💌	Ш		
	Not at all		Several days	More	than half the	days N	learly every day		
B4.		weeks, how of	ten have you b	een bothered b		, depressed, o			
				3.4					
	Not at all		Several days	More	than half the	days N	learly every day		
C1.	My family men	nbers really hel	lp and support	one another.		Mostly Ti	rueMostly	y False	
C2.	We, my family	members, ofte	en seem to be k	illing time at ho	me.	Mostly T	rueMostl	y False	
C3.	We put a lot of	f energy into w	hat we do at ho	ome.		Mostly TrueMostly Fal			
C4.	There is a feeli	ng of together		Mostly TrueMostly F					
C5.	We rarely volu	nteer when so	Mostly TrueMostly Fa						
C6.	6. Family members really back each other upMostly TrueMostly True								
C7.	There is very lit	ttle group spiri		Mostly TrueMostly					
C8.	We really get a	long well with	Mostly TrueMostly F						
C9.	There is plenty	of time and at	tentions for eve	eryone in our fa	mily.	Mostly T	rueMostl	y False	
D 4	D	T	I	15					
טד.	How often do y	you nave a drin □	ik containing ai	conol?	П				
	4 or	more 2	-3 times a	2-4 times a	Monthly or				
		a week	week	month			1.70		
D2.	How many star	ndard drinks co	ontaining alcoho	ol do you have o	on a typical day	7			
	10 or more	7 to 9	5 or	6 3	or 4	1 or 2	0		
D3.	How often do y			one occasion?					
	Daily o	r almost	Weekly	Monthly	Less than	n Ne	ver		
	da	aily			monthly	(
E1.	How often do y	you feel that yo	our life is over a	ind you may as	well end it?				
	All of the	Most of the	A good part	Some of the	A little of	Very rarely	None of the		
	time	time	of the time	time	the time		time		
E2.	How often do	you think abou	t committing su	uicide?					
	All of the	Most of the	A good part	Some of the	A little of	Very rarely	None of the		
	time	time	of the time	time	the time		time		

E3.	How oft	en do you act	uallythi	nk about differ	ent ways that y	ou could kill y	ourself?		
	All of	the Most	of the	A good part	Some of the	A little of	Very rare	ly None of t	he
	time	e tir	me	of the time	time	the time		time	
E4.	How ofte	en have you a	ctually c	lecided that yo	ou are going to t	ake your own	life and now	you think abo	ut final
		doing that?	1151	82				53	
	All of		of the		Some of the	A little of	Very rare		he
	time		ne	of the time	time	the time	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	time	AD. TO
F1.	Please ir	ndicate which	of the fo	ollowing types	of gambling you	ı have done ir	the last 12 n	months. For ea	ch type,
	mark on	e answer: "No	ot at All,	" "Less than Or	nce a Week," or	"Once a Wee	k or More."		
							NOT AT	LESS THAN	ONCE
PLEAS	SE "✓" ON	IE ANSWER F	OR EACH	H STATEMENT			ALL	ONCE A	WEEK
								WEEK	More
a. Pla	yed cards	for money							
					he track or with	n a bookie)			
. Be	on sport	(parlay cards	, with b	ookie, at Jai Al	ai)				
					ider or other di	ce games			
e. We	ent to cas	inos (legal or	otherwi	se)					
. Pla	yed the n	umbers or be	t on lott	eries					
g. Pla	yed bingo)						5.2	
n. Pla	yed the s	tock and/or c	ommod	ities market					
. Pla	yed slot m	achines, pok	er mach	ines, or other	gambling mach	ines			
. Bov	vled, shot	pool, played	golf, or	some other ga	ame of skill for i	money			
k. Pla	yed pull t	abs or "paper	game:	other than lo	tteries				
. Sor	ne form o	f gambling no	ot listed	above (please	specify:				
F2.	What is	the largest an	nount of	money you ha	ive ever gamble	d with on any	one-day in tl	he past 12 moi	nths?
		More than 10	00.000 k	zt					
		More than 50).000 kzt	up to 100.000	O				
		More than 10	0.000 kzt	up to 50.000					
		More than 5.	000 kzt	up to 10.000 k	zt				
		More than 50	00 kzt up	to 5.000 kzt					
		500 kzt or les							
		Never gamble	ed						
F3.	Checkw	hich of the fo	llowing i	people in vour	life has (or had) a gambling n	roblem.		
		Father				, b P	•		
		Mother							
		Brother/Siste	r						
		My spouse/Pa							
		My Child(ren)							
		Another Rela							
				Important in I	MyLifo				
			Jilleone	Important in I	viy Lile				
	П	No one							

F4. When	n you gamble, how often do you go back another day to win back money you l hs?	have lost in	the pas	t 12
	Tibir] Every Time I Lose			
	and additional designation of the second second second			
	an about the property of the same and the sa			
5. Have	you every claimed to be winning money gambling, but weren't really? In fact,	you lost in	the pas	t 12
mont	hs?			
	Yes, less than half the time I lost			
	I Never			
18 440 1000 E	rou feel you have ever had a problem with betting or money gambling in the paths?	oast 12	Yes_	_No
(0.000,000	you ever gamble more than you intended to in the past 12 months?	n	Yes_	_No
F8. Hav	e people criticized your betting or told you that you had a problem, regardless	s of		
	ther or not you thought it was true in the past 12 months?		Yes_	_No
F9. Hav	e you ever felt guilty about the way you gamble, or what happens when you g	amble		
	ne past 12 months?		Yes_	_No
F10.	Have you ever felt like you would like to stop betting money on gambling,	but		
	't think you could in the past 12 months?		Yes	_No
		. 196		
F11.	Have you ever hidden betting slips, lottery tickets, gambling money, IOUs			
	er signs of betting or gambling from your parents, spouse or other important p our life in the past 12 months?	zobie	Yes	No
ALTERNATION OF THE PARTY OF THE	Exception (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
F12.	Have you ever argued with people you live with over how you spend mon	iey on	Yes	No
0.000	bling in the past 12 months?	1.006		
F13.	Have you ever borrowed from someone and not paid them back as a result as a post 12 months?		Yes_	No
************	gambling in the past 12 months?			
F14.	Have you ever lost time from school (or work) due to betting money or ga	ambling	V	N.I
in th	ne past 12 months?		Yes_	_No
		THE T		
=15. "Vos"	If you borrowed money to gamble or to pay gambling debts, who or where or "No" for each):	ala you bo	rrow tr	om (d
	From household money	Yes		N
	From your spouse	res Yes	-	N
	From other relatives or in-laws	Yes	80	N
	From banks, loan companies, or credit unions	res Yes	-	N
5		res Yes	***************************************	N
6	The Control of the Co	Yes	2	N
	You cashed in stocks, bonds or other securities	Yes	-	N
8		Yes	-	 N
	You borrowed on your checking accounts (passed bad checks)	Yes		
	O. You have (had) a credit line with a bookie	Yes	=	 N
	1. You have (had) a credit line with a casino	Yes		N
- 16.	Do you have friends who place a bet on sport events through bookmakers?	?		
	l No			

F17.		Do you currently place a bet on sport events through bookmakers?							
		Yes							
		No							
lf y	es,								
F18.		How do you place a bet?							
	Terr	ninals (e.g. QIWI, etc.)		Debit card		With cash in offices			
F19.		From what age did you start betting?		_					
F20.		In which websites you place a bet? (olimp.kz, etc.)							
F21.		How many accounts do you have for	gaml	bling?					
		3 or/and more than 3							
		2							
		1							

Thank you for participation!

		Опросник					
1.	. Укажите Ваш пол						
		Женский					
		Мужской					
2.	Ваш во	зраст					
		18 - 20					
		21 или старше					
3.	Национ	нальность					
		Казах/Казашка					
		Русский/Русская					
		Метис (укажите)					
		Другое (укажите)					
4.	Скакой	і́ религией Вы себя ассоциируете?					
		Ислам					
		Христианство					
		Буддизм					
		Ни с какой					
		Другое (укажите)					
5.	Ваш те	кущий GPA?					
		Меньше 1					
		1-1.99					
		2-2.99					
		3-4					
		Пока нет GPA (1 курс)					
6.	Ru naƙ	отаете помимо учебы для заработка?					
٥.		Да					
		Нет					
7.		емья имеет собственное жилье?					
		Да Нет					
	Ш	hel					
8.		о у Вас родных братьев и сестер?					
		0					
		1					
		2					
	Ц	4 или больше					
9.		наивысшую степень образования получил Ваш отец?					
		Школьное образование					
		Среднее специальное образование					
		Высшее образование					
10.	Какую	наивысшую степень образования получила Ваша мать?					
		Школьное образование					
		Среднее специальное образование					
		Высшее образование					

A 1.	Как часто за прошедшую не работой?	еделю Ва	м нравилос	ь проводить врем	я слушая	лекцию/заниматьс	я классной
	Никогда (очень	редко)	_ Редко	<u> </u>	Часто	Постоянно	
A2.	Как часто за прошедшую не	еделю Вь	і с нетерпен	ием ожидали лек	шию/клас	сную работу?	
		11 12	П	ď.	' i		
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A3.	Как часто за прошедшую не стресса?	еделю Вь	і сидели на .	лекции/занимали	сь классн	ой работой без изи	лишнего
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A4.	Как часто за прошедшую не	еделю Вы	і могли четк	о воспринимать л	екцию/ки	пассную работу?	
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A 5.	Как часто за прошедшую не необходимо?	еделю Вь	і были реши	тельным на лекці	ии/классн	юй работе, когда э	то было
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A6.	Как часто за прошедшую не	еделю Вы	і были дово.	льны своими дост	гижениям	и в лекциях/классн	ной работе?
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A 7.	Как часто за прошедшую не	еделю Вь	і были заин	гересованы лекци	ей/класс	ной работой?	
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A8.	Как часто за прошедшую не	еделю Вь			а лекции	/классной работе?	č
		89					
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
A9.	Как часто за прошедшую не	еделю Вь	P8			лассную работу?	
	Lluverne /even	manual	Danus	П	Llagra	Постолица	
	Никогда (очень	редкој	Редко	Иногда	Часто	Постоянно	
A10.	Как часто за прошедшую не	еделю Вь				707,	лекции?
	Никогда (очень	редко)	Редко	Иногда	Часто	Постоянно	
B1.	Как часто за последние 2 н	едели Ва			ности, бес		Вы на грани?
		In International Control					
	Никогда	неско	лько дней	Больше недели	ПОЧТИ	каждый день	
B2.	Как часто за последние 2 но контролировать свое волно			ю то, что Вы не в і	инкотро	и остановить или	
	Никогда	Неско	лько дней	Больше недели	Почти	каждый день	
ВЗ.	Как часто за последние 2 н удовольствия?	едели Ва	с беспокоил	ю то, что у Вас про	опал инте	рес ко всему или н	е получаете
	удовольствил:						
	Никогда	Неско	лько дней	Больше недели	Почти	каждый день	
					8000 R000		

B4.	Как часто за посл	педние 2 н	едели Вы бес	покоили	сь, чувству	уя себя п	одавленнь	ым или безна,	дежным?
	Нь	⊔ икогда	Ц Несколько	лней	Больше н	I Іелели	Почти ка	⊔ ждый день	
			, , , , , , , , , , , , , , , , , , , ,	Д.,,,	Вол, ВШО	, on on the	11011111111	притрить	
C1.	Члены нашей сел	мьи оказы	вают реальну	ю помощ	ь и подде	ржку дру	уг другу.	Верно	Неверн
C2.	Мы часто дома «	убиваем»	время.					Верно	оНеверн
C3.	Мы вкладываем	много эне	ргии в домаш	іние дела	ί.			Верно	оНеверн
Ç4.	В нашей семье с	уществует	чувство един	ства.				Верно	оНеверн
C5.	Мы редко вызыв	аемся доб	бровольно, ког	гда что-то	э н уж но с	делать до	oma.	Верн	оНеверн
C6.	Мы стараемся де	елать все в	во имя сплочен	ности на	шей семь	и.		Верн	оНеверн
Ç7.	В нашей семье о	чень слаб	о развит дух ко	оллектив	изма.			Верно	оНеверн
C8.	Мы по-настояще	му ладим	друг с другом					Верно	оНеверн
	В нашей семье в				времени	и вниман	іия.	Верн	оНеверн
			• •		•				
D1.	Как часто Вы упо	требляете	алкогольные	напитки	?				
	[
	4 и бол в нед		2-3 раза в неделю		раза в чесяц		в месяц 1 реже	Никогда	
	Впед	ÇCZIIO	педелю	14	пселц	71217	Греме		
D2.	Сколько доз алко			ыпиваете	в день в	ыпивки?	(обычная д	доза это: 250	мл для пива, 30
	мл для водки, 75		ина) □						
	10 M		7 - 9	5 - 6	3 - 4		1 - 2	0	
	боле	ee							
D3.	Как часто Вы выг	тиваете бо	лее 180 м л во	одки (1.5	л пива, 45	60 м л вин	на) в течен	ие одной выг	іивки?
							ı İ		
	Каждый	день	Каждую неделю	Кажды	й месяц	Реже каждый		Никогда	
			педелю			пальды	тиссиц		
E1.	Как часто Вас пос	_	ІСЛИ, ЧТО ЖИЗНЬ П	закончил:	ась и Вы м	ожете уж ⊓	_		П
	⊔ Постоянно	Очень	Ц Часто	Инс	⊔ огда	⊔ Редко	Оче		□ огда
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	часто	140.0	2.3.133	- m-	, 5H.15	ред		
ED	Какчасто Вас посе			NOULIE C	cafov?				
CZ.		щаю≀ мыс	IИ О Желании ПС	MOHYMIDC					
	Постоянно	Очень	Часто	Ино	огда	Редко	Оче	нь Ник	огда
		часто					ред	КО	
E3.	Как часто Вы раз	мышляете	е о различных	способах	самоуби	йства?			
							[]	
	Постоянно	Очень	Часто	Инс	огда	Редко	Оче	нь Ник	огда
		часто					ред	КО	
E4.	Как часто Вы нам	еревалис	ь совершить с	амоубий	ство и под	цробно п	ланировал	іи чтобы осуц	цествить это?
				-				_	
	Постоянно	Очень часто	Часто	Ино	огда	Редко	Оче ред		огда

F1. Укажите, в какие из следующих видов азартных игр Вы играли в последние 12 месяцев:

Для каждого типа выберите один из вариантов ответ «Один раз в неделю	НИКОГДА	РЕЖЕ ЧЕМ	ОДИН РАЗ
и чаще», «Реже, чем один раз в неделю» или «Никогда».	000	ОДИН РАЗ	В
		В	НЕДЕЛЮ
		НЕДЕЛЮ	И. ЧАЩЕ
а. Делал (-а) ставки на спортивные мероприятия (через букмекера)			
b. Играл (-a) в карты на деньги			
с. Делал (-а) ставки на мероприятиях, связанных с животными (через вне			
ипподромный или официальный тотализатор, или через букмекера)			
d. Играл (-a) в кости на деньги			
е. Играл (-а) в казино (легальном или нелегальном)		5	
f. Играл (-a) в лотерее		2	
g. Играл (-a) в бинго или лото			
h. Играл (-a) на фондовых или товарных рынках		3	
і. Играл (-а) на игровых автоматах			
ј. Играл (-а) на деньги в боулинг бильярд, гольф или в другие виды спорта,			
требующие особых умений			
k. Другое (укажите)			

_		SOLICE CONTROL							
e.	Играл (-а) в казино (легальном или нелегальном)							
	f. Играл (-a) в лотерее								
g.	g. Играл (-a) в бинго или лото								
h.	Играл (-а) на фондовых или товарных рынках							
i.	Играл (-а) на игровых автоматах							
j. V	1грал (-	а) на деньги в боулинг бильярд, гольф или в другие виды спорта,							
тр	ебующі	ие особых умений							
k.	Другое	(укажите)							
F2.	Назови	те самую крупную сумму денег, за последние 12 месяцев, потраче	нных Вами на игру	λ.					
		Больше 100.000 тенге							
		50.000 - 100.000 тенге							
		10.000 - 50.000 тенге							
		5.000 - 10.000 тенге							
		500 - 5.000 тенге							
		500 тенге или меньше							
		Никогда не играл (-а)							
		_	·-						
F3.		ыли) ли у Ваших близких проблемы, связанные с азартными играми	17						
		Отец							
		Мать							
		Брат							
		Сестра							
		Супруг (-а)/Партнер							
		Другой родственник							
		Друг или другой важный для меня человек							
		Никто							
ΕΛ	И асто г	и Вы возвращаетесь на другой день, чтобы отыграться?							
r 4 .		и вы возвращаетесь на другои день, чтооы отыграться: Всегда							
		Почти всегда, когда проигрываю							
		Иногда (в менее чем половине случаев проигрыша)							
		иногда (в менее чем половине случаев проигрыша) Никогда							
	S	Тикогда							
F5.	За посл	едние 12 месяцев, говорили ли Вы, что выиграли, когда на самом ,	деле проиграли?						
		Да, почти всегда							
		Да, в менее чем половине случаев проигрыша							
		Никогда (или никогда не играл/а)							
F6.	Злоупо	отребляли ли вы азартными играми в последние 12 месяцев?		Да_	_Нет				
F7.	За пос	ледние 12 месяцев, случалось ли Вам играть на большие суммы ил	и дольше.		1)9				
		ы запланировали?		Да	Нет				
	Attelessibilities				- 5:				

	чем В	ы запланировали?	ДаНет
F7	. За пос	ледние 12 месяцев, случалось ли Вам играть на большие суммы или дольше,	
F6	. Злоуп	отребляли ли вы азартными играми в последние 12 месяцев?	ДаНет
		Никогда (или никогда не играл/а)	
		Да, в менее чем половине случаев проигрыша	
		Да, почти всегда	
F5.	За пос	ледние 12 месяцев, говорили ли Вы, что выиграли, когда на самом деле проиграли?	
		Никогда	
		Иногда (в менее чем половине случаев проигрыша)	
		Почти всегда, когда проигрываю	

	а последние 12 месяцев, были ли люди, которые не одобряют Ваше увлечение зартными играми?	ДаНет
	в последние 12 месяцев, испытывали ли Вы чувство вины за свои поступки и мысли о время игры?	ДаНет
F10.	За последние 12 месяцев, были ли случаи того, что Вам хотелось бросить зартные игры, но Вы чувствовали, что не способны это сделать?	ДаНет
F11.	За последние 12 месяцев, прятали ли вы квитанции по ставкам, лотерейные	
	илеты, деньги, предназначенные для игры, или другие доказательства вашего	
	влечения азартными играми от ваших родителей, супруги (супруга), или других лизких людей?	ДаНет
F12.	За последние 12 месяцев, были ли у Вас споры со своими друзьями и близкими, том, как вы тратите деньги на азартные игры?	ДаНет
F13.	За последние 12 месяцев, Вы брали деньги в долг и не отдавали их из-эа ваших роигрышей?	ДаНет
F14.	За последние 12 месяцев, пропускали ли Вы учебу или работу, чтобы поиграть в	
a	эартные игры?	ДаНет
	уда вы (если брали) брали деньги на игру или на то, чтобы расплатиться с долгами по и э или «Нет» на каждый пункт):	1гре? (ответьте
3. 13	1. Из семейного бюджета	ДаНе
	2. У супруги	ДаНе
	3. У других родственников	ДаНє
	4. Продавали личные вещи или имущество	ДаНе
	5. У ростовщиков (деньги в долг под проценты, ломбарды)	ДаНе
	6. Брали в долгу букмекера	ДаНе
	7. Брали в долг у казино	ДаНе
	 В банках, кредитных компаниях Обналичивали (продавали) акции, облигации, другие ценные бумаги 	ДаНє ДаНє
F16.	Есть ли у Вас друзья, кто делает ставки на спортивные события через букмекера?	
F17.	Делаете ли Вы сейчас ставки на спортивные мероприятия через букмекера? П Да П Нет	
Если «		
F18.	Какой вид оплаты Вы используете при оплате ставки? □ Терминалы (QIWI, итд.) □ Банковскую карту □ Нали	ичными в офисах
F19.	С какого возраста Вы делаете ставки на спортивные мероприятия через букмекера?	
F20.	На каких сайтах вы предпочитаете делать ставки? (olimp.kz, итд.)	
F21.	Сколько у Вас всего логинов для ставок? □ 3 или больше □ 2 □ 1	

Спасибо за участие!

		Сауалнама
1.	Жыныс	
		Әйел
		Ер
2.	Жасын	ыз нешеде
		18-20
		21 немесе 21-ден асқан
3.		ызды көрсетіңіз
		Қазақ
		Орыс
		Метис (көрсетіңіз)
	Ш	Басқа (көрсетіңіз)
4.	Қай дін	ді ұстанасыз?
		Ислам
		Христиан
		Буддизм
		Ешқандай
		Басқа (көрсетіңіз)
5.	Сіздің (GPA көрсеткішіңіз?
		1-ден төмен
		1-1.99
		2-2.99
		3-4
		Әзірше жоқ (1 курс)
6.	Сабақт	ан тыс жалақы үшін жұмыс істейсіз бе?
		eN
		Жоқ
7.	Отбась	іңызда жеке меншік үй бар ма?
		Иә
		Жоқ
Ω	Отбась	іңызда қанша туған бауырларыңыз бар?
О.		
		2
		3
		4 немесе 4-тен көп
9.	Aveuis	дің білім деңгейі қандай?
		мектеп білімі
		Орта білім
		Жоғарғы білім
10.		здың білім деңгейі қаңдай?
		Мектеп білімі
		Орта білім

□ Жоғарғы білім

А1. Өткен аптада	а Сізге дәріс тыңдау/	сынып жұмыста	рымен жасау	қаншаль	іқты жиі ұнайты	н?
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
А2. Өткен аптада	а дәріс/сынып жұмыс	тарын қаншалы	қты жиі асыға	а күткен е	діңіз?	
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
АЗ. Өткен аптада	а Сіз қаншалықты жиі	10 <u>101</u> 0	909	12	12 12 12 12 12 12 12 12 12 12 12 12 12 1	ңыз?
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
А4. Өткен аптада	а Сіз дәріс/сынып жұл					діңіз?
	2007		1004 1000			
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
A5. Өткен аптада таныттыңыз?	а Сіз қажет болған жа ,	ғдайда дәріс/сь	інып жұмыст	ары кезін,	де қаншалықты	жиі белсенділік
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
Аб. Өткен аптада	а дәріс/сынып жұмыс	тарындағы жетіс	тіктеріңізбег	н қаншалы	ықты қанағаттан	ідыңыз?
And the street of the street o						The second Propagation of
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
А7. Өткен аптада	а Сіз дәріс/сынып жұғ	иыстарына қанш	алықты жиі н	қызығушь	лық таныттыңь	э?
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
А8. Өткен аптада	а Сіз дәріс/сынып жұл	иыстарына қанш	алықты жиі з	зейін/көңі	л бөле ала алды	ыңыз?
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
А9. Өткен аптада	а сынып жұ м ыстарын					іңіз?
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
A10. Өткен алдыңыз?	н аптада Сіз дәріс бар	оысында қаншал	ықты жиі бас	сқалармеі	н еркін қарым-к	атынас жасай
	Ешқашан (өте сире	к) Сирек	Кейде	Жиі	Әрқашан	
В1. Өткен екі апт	тада Сізді ашушаңтык	, м азасыздану, \	/рей сезімде∣ □	рі қаншал	ықты жиі м азал	ады?
	Ешқашан	Бірнеше күн	Бір аптадан	н көп	Күн сайын	
	ада өзіңіздің қобалж жиі мазалады?	ку/алаңдауыңыз	ды тоқтатуға	немесе б	ақылауға қабіле	етсіз екеніңіз Сізді
қапшалықТы			П			
	□ Ешқашан	⊔ Бірнеше күн	⊔ Бір аптада⊦	н көп	⊔ Күн сайын	
			э.р з.на <u>д</u> ан	. 10500	, , , sanom	

ВЗ.	Өткен екі аптада мазалады?			болмай, еш		эныш алмайт	ыныңыз қан	ншалықты жи
	ı		[]				i	
	ı	Ешқашан	Бірнеше	күн ыр	аптадан көп	Күн сай	ЫН	
B4.	Өткен екі аптада	қаншалықты ж □	киі депресси	іяда немесе	үмітсіздікте □	болғандай о	езіндіңіз?	
	[Ешқашан	Бірнеше	күн Бір	аптадан көп	Күн сай	ЫН	
C1.	Біздің отбасы мүг	шелері бір-бірі	не шынайы	көмек пен н	олдау көрсе	теді _К	елісемін	_Келіспеймін
C2.	Біз үйде уақытты	көбінесе пайд	асыз/бекер	ге өткіземіз.		K	(елісемін	_Келіспеймін
С3.	Біз үй шаруалары	на/жұмыстары	ына көп күш	саламыз.		<u>+</u>	Келісемін	Келіспеймін
C4.	Біздің отбасымыз	зда бірлік сезіл	лі бар.				(елісемін	_Келіспеймін
C5.	Үйде қандай да б	ір шаруаны ер	ікті түрде іс	теу сирек ке	здеседі.	K	(елісемін	Келіспеймін
C6.	Біз отбасымызды	ң үйлесімділігі	і үшін бәрін	жасауға тыр	ысамыз.		Келісемін _	Келіспеймін
C7.	Біздің отбасымыз	зда ұжымдасты	іру рухы өте	: нашар дам	ыған.	K	(елісемін	Келіспеймін
C8.	Біздің бір-біріміз	бен жақсы қар	ым-қатынас	тамыз.		K	елісемін	_ Келіспей м ін
C9.	Біздің отбасымыз	здың әрбір мүг	шесіне жетк	ілікті уақыт і	тен көңіл бө.	лінедіК	елісемін	_Келіспеймін
D1.	Сіз алкогольді іші	мдіктерді қа нı □	шалықты жи	іі ішесіз?		П	П	
	Аптасына 4 рет	Аптасына	2-3 рет и	∆йына 2-4 р	ет Айь	іна 1 рет	Ешқаш	ан
	немесе одан кө	П			неме	се одан аз		
D2.	Ішімдік ішкен күн	60 000	1000				ен есептеге	нде?
	(стандартты көле	м: сыра үшін 2 ⊐	.50 мл, арақ □	үшін 30 м л, □	вино үшін 7	5мл) □		
	10 немесе		7 - 9	5 - 6	3 - 4	1 - 2	0	
D3.	Бір ішкенде 180м	IN-UQU QNTLIK QI	na иты (1 5 г	сыра 45 0м/	I BNAU/ NSMIII	элыуты жиі іі	mecia?	
55.			041(10) (1:0)		r como, içanız			
	Күн сайын	Әр апта са	йын Ә	р ай сайын	Айына б	ір реттен аз	Ешқац	л ан
E1.	Өмірдің мәні кеті	п. оны токтату	жайлы ойл:	ар Сізді кані	шалыкты жи	мазалайды?	,	
	Әрқашан	Өте жиі	Жиі	Кейде	Сирек	Өте сирек	Ешқашан	
E2.	Өз-өзіңізге қол ж	ұмсау туралы (Сіз қаншаль	қты жиі ойл	айсыз?			
	Әрқашан	Өте жиі	Жиі	Кейде	Сирек	Өте сирек	Ешқашан	
E3.	Өз-өзіңізге қол ж					ы жиі ойлайс		
		0		U o ŭ d o	Cupou	O=0 0::	Гинуалиан	
	Әрқашан	Өте жиі	Жиі	Кейде	Сирек	Өте сирек	Ешқашан	
E4.	Өз-өзіңізге қол ж	C) 250 (C 3)	7707	7//		10.5		рлайсыз?
	201/201/201	□ Өте жиі	U	П	Cupar	OTO SUPOV		
	Әрқашан	оте жиг	Жиі	Кейде	Сирек	Өте сирек	Ешқашан	

F1. Соңғы 12 айда ойнаған ойын түрлерін көрсетіңіз:

Ойынның әр түріне "Аптасына бір рет немесе одан да көп", "Аптасына бір реттен аз" немесе "Ешқашан" деген нұсқалардың біреуін таңдаңыз.	ЕШҚАШАН	АПТАСЫНА БІР РЕТТЕН АЗ	АПТАСЫНА БІР РЕТ НЕМЕСЕ ОДАН ДА КӨП
1. Спорттық ойындарға ұтыс тіктім (букмекер арқылы)			
2. Карта ойындарына ақша тіктім.			
3. Жануарларға байланысты іс-шараларда ұтыс тіктім (ипподром немесе ресми тотализатор, немесе букмекер арқылы)			
4. Ойын тастарын (кубик) ақшаға ойнадым			
5. Казиноға бардым (заңды немесе заңсыз түрдегі)			
6. Лотерея ойнадым			
7. Бинго немесе лото ойнадым			
8. Фонд немесе тауар нарығында ойнадым			
9. Ойын автоматтарында ойнадым			
10. Боулинг, бильярд, гольф немесе басқа арнайы дағдыларды қажет ететін ойындарды ақшаға ойнадым			
11. Басқа (көрсетіңіз)			

Казиноға ба	рдым (заңды немесе заңсыз түрдегі)		
Лотерея ойн	адым		
Бинго немес	се лото ойнадым		
Фонд не м ес	е тауар нарығында ойнадым		
Ойын автом	аттарында ойнадым		
	бильярд, гольф немесе басқа арнайы ажет ететін ойындарды ақшаға ойнадым		
. Басқа (көрс	сетіңіз)		
			ı
	12 айда құмар ойындарға жұмсаған ең үлкен сома	ны көрсетіңіз?	
	100.000 теңгеден көп		
	50.000 - 100.000 теңге		
	10.000 - 50.000 теңге		
	5.000 - 10.000 теңге		
	500 - 5.000 теңге		
	500 теңге немесе одан аз		
	Ешқашан ойнаған емеспін		
F3. Сіздін х	жақыңдарыңызда ойынға құмарлық проблемалар	ы болды ма?	
100.00	Экем		
	Анам		
	Afam		
	Эпкем		
	Жұбайым/Партнер		
	Басқа туысқаным		
	Досым немесе маған өте маңызды адам		
	Ешкімде болмады		
F4 C	42 - X		A PARTICIPATION AND THE PARTICIPATION
ғ4. соңғы болды	12 айда ұтылғаныңызды қайтып ұту үшін келес ?	күні қайта баратын кездеріі	ңіз қаншалықты жиі
200	Әрқашан		
	Жиі		
	Кейде		
	Ешқашан		
PROCESSES AND ADDRESS OF THE PARTY OF THE PA	12 айда ұтылған кездеріңізде «ұ ттым» деп жалған	айтқан кездеріңіз болды ма?	
	Иә, әрқашан		
	Жиі		
	Ешқашан		
F6. Соңғы ба?	12 айда құмар ойындарымен шектен көп ойнадын	Г РІЗ	ИәЖоқ

	Соңғы 12 айда өзіңіз жоспарлаған соммадан көп немесе жоспарлаған уақыттан ұзақ ойнаған сәттеріңіз болды ма?	ИәЖоқ
	Соңғы 12 айда сіздің ойындарға құмарлығыңызды мақұлдамаған адамдар болды ма?	ИәЖоқ
F9.	Соңғы 12 айда ойын үстінде өз істеріңіз үшін кінәлі сезіндіңіз бе?	ИәЖоқ
F10	. Соңғы 12 айда құмар ойындардан бас тартқыңыз келіп, бірақ бұны істей алмайтындығыңызды сезген сәттер болды ма?	ИәЖоқ
	. Соңғы 12 айда ұтыс квитанцияларын, лотерея билеттерін, құмар ойынға арналған ақшаларды немесе басқа да құмар ойындарға қызуғышылығыңызды растайтын дәлеледемелерді өз жақындарыңыздан, ата-анаңыздан немесе жұбайыңыздан жасырған кездеріңіз болды ма?	ИәЖоқ
F12	. Соңғы 12 айда сіздің құмар ойындарға ақша құртуыңыз жайлы достарыңызбен және жақын адамдарыңызбен дауластыңыз ба?	ИәЖоқ
F13	. Соңғы 12 айда сіз қарызға ақша алып, ұтылғаныңыз үшін қарызыңызды қайтара алмаған кездеріңіз болды ма?	ИәЖоқ
F14	қалдыңыз ба?	ИәЖоқ
	. Ойындарға немесе қарыңыздан құтылу үшін ақшаны қайдан алдыңыз? (ар п "жоқ" деген жауап беріңіз): 1. Отбасылық бюджеттен 2. Жұбайымнан 3. Басқа туыстарымнан 4. Жеке заттарымды саттым 5. Қарыз берушілерден (қарызға процентпен ақша алу, ломбард) 6. Букмекерлерден қарызға алдым 7. Казинодан қарызға алдым 8. Банктерден, кредиттік компаниялардан 9. Акцияларымды, бағалы қағаздарымды саттым Букмекерлер арқылы спорттық шараларға ұтыс тігетін достарыңыз бар ма? □ Иә □ Жоқ Қазіргі уақытта өзіңіз букмекерлер арқылы спорттық ойындарға ұтыс тігесіз бе? □ Иә □ Жоқ	унктке "иә" немесс ИәЖоқ ИәЖок ИәЖок ИәЖок ИәЖок ИәЖок ИәЖок
F18. F19. F20.	ә″ болса, Букмекерлер арқылы ойынға ставка қою үшін қандай төлем түрін қолданасыз? □ Терминалдар (QIWI, т.б.) □ Банк картасы □ Офистерде қолма-қол төлем Канша жасыңыздан бастап букмекерлер арқылы спорттық ойындарға ұтыс тігуді баста Кандай букмекерлік сайттарда ұтыс тігуді ұнатасыз? (olimp.kz, т.б.) Сіздің ұтыс қоюға арналған неше логиніңіз бар? □ 3 немесе 3-тен көп □ 2 □ 1	
	Қатысқаныңыз үшін рахметі	

APPENDIX B - The Cover Letter given to participants in three languages



Consent form

The project aims to look on Psychosocial Characteristics of College and University Students in Astana.

The questionnaire consists of demographic questions, such as age, gender, ethnicity, and family size; questions related to overall school satisfaction, feeling of anxiety, family cohesion, alcohol use, suicidal ideation, and gambling involvement. The questionnaire will take approximately 20 minutes to complete. Please complete the questionnaire individually and not to discuss questions or answers with anybody. After completion the questionnaire, please put the questionnaire in the envelope. Your participation is voluntary and you can withdraw from participation at any time without any consequences.

Your identification will not be identified in any way by your answers and all information is anonymous. You will not be asked to write your name or sign anything. The questionnaire will be randomly assigned a unique identification number for further analysis. Once the questionnaires are transferred to database, written questionnaires will be destroyed later. The database will be saved in the researcher's computer, that is password secured. The study is anonymous, and there will be no way to link back identification number with your identity, since none of the forms will have any identifying information.

There will be minimal risk in the study and that you may discontinue my participation or skip any questions that make you uncomfortable at any time without penalty. If you feel strong negative reaction to the content of the questions, there are free contacts of free and 24-hour psychological help hotline at 150 or 8(7172) 51 88 44, 8(7172) 54 76 03, 8(7172) 54 70 53 to get assistance with any psychological discomfort you incur because of participation in the study.

Responsible person for the project is Gulzira Janabel, gkhamidulliyeva@nu.edu.kz, tel. 8 707 418 44 41

Project is supervised by:

Dr. Byron Crape at byron.crape@nu.edu.kz

Dr. Raushan Alibekova <u>raushan.alibekova@nu.edu.kz</u>

Dr. Valentina Stolyarova valentina.stolyarova@nu.edu.kz

Once you start to fill out the questionnaire, you confirm, you have understood the information, and you give your consent to participate in the study, and you are not younger than 18, and you are a student, and you are aware that you can stop your participation at any time without any consequences.



Форма Согласия

Проект изучает психосоциальное здоровье студентов колледжей и университетов в г. Астана

Ваше участие является добровольным, и Вы имеете право прекратить участие в любой момент, что не повлечет за собой никаких последствий. Анкета состоит из демографических вопросов, таких как возраст, пол, этническая принадлежность и размер семьи; вопросов, связанные с общей удовлетворенностью школой, чувством беспокойства, сплоченности семьи, употреблением алкоголя, суищидальными идеями и участием в азартных играх.

Вопросник в основном состоит из вопросов с множественным выбором, где нужно будет выбрать один из заданных вариантов ответа. Он содержит несколько открытых вопросов, где нужно будет записать ответ. Участие в исследовании займет приблизительно 20 минут. После заполнения вопросника поместит его в конверт. Прошу также заполнять анкету самостоятельно и ни с кем не обсуждая вопросы и ответы.

Ваша идентификация никоим образом не будет определяться Вашими ответами, и вся информация анонимна. Вас не попросят написать свое имя или подписать что-либо. Каждому вопроснику будет присвоен уникальный идентификационный номер для дальнейшего анализа. После того, как вопросники будут переведены в базу данных, письменные анкеты будут уничтожены. База данных будет хранится на компьютере исследователя, который защищен паролем. Исследование анонимно, и исключается любая возможность связать Вашу личную информацию с Вашей анкетой, поскольку ни одна из форм не будет иметь идентифицирующую информацию.

Потенциальные риски от данного исследования минимальны, и Вы можете беспрепятственно прекратить участие в любой момент и без каких-либо последствий, а также пропустить любые вопросы, вызывающие дискомфорт. Если содержание вопросов вызывает негативную реакцию, Вы можете позвонить на бесплатную и круглосуточную горячую линию Психологической Помощи 150 или 8 (7172) 51 88 44, 8 (7172) 54 76 03, 8 (7172) 54 70 53 для получения психологической помощи.

Ответственным за этот проект является Гулзира Жанабил, gkhamidulliyeva@nu.edu.kz, номер телефона 8 707 418 44 41

Проект контролируется:

Др. Байрон Крэйп byron.crape@nu.edu.kz

Др. Раушан Алибека raushan.alibekova@nu.edu.kz

Др. Валентина Столярова valentina.stolyarova@nu.edu.kz

Начав заполнение данного опроса, Вы подтверждаете, что Вы поняли информацию, даёте свое согласие участвовать в исследовании, Вам не менее 18 лет, Вы являетесь студентом университета/колледжа в г. Астана.



Хабардар етілген келісім

Бұл жоба Астана қаласының колледждеріндегі және жоғары оқу орындарындағы студенттердің психологиялық-әлеуметтік денсаулығын зерттейді.

Бұл сауалнамаға ерікті болып табылатынды, және кез-келген уақытта сауалнамаға қатысуды тоқтатуға құқығыныз бар, бұл ешқандай салдар әкелмейді.

Сіздің аты-жөнінің анықталмайды және барлық ақпарат жасырын. Сізден атыңызды жазуыңыз немесе құжатқа қол қоюңызы сұралмайды.

Сауалнаманы толтыруға шамамен 15 минут кетеді. Сауалнаманы өзіңіз жеке толтыруыңыз күтіледі.

Бұл жоба сізге минималды тәуекел туғызады. Егер, қандай да бір сұраққа жауап беру ыңғайсыздық туғызса, сұрақты аттап немесе сауалнамаға қатысудан бас тартуға болады. Психологиялық көмек үшін тегін және тәулік бойы жедел желілер -150, 8 (7172) 51 88 44, 8 (7172) 54 76 03, 8 (7172) 54 70 53.

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Сіз осы сауалнамаға қатысуыңыз, берілген мәліметті түсінгеніңізді, келісіміңізді бергеніңізді, жасыңыз 18-ден асқандығын, және Астана қаласындағы университет/колледж студенті екеніңізді растайсыз.

APPENDIX C – Ethics committee decision



NUSOM-REC

Decision:

Prevalence of problem gambling and associated risk factors among young adults in Astana city of Kazakhstan

The above-mentioned student driven classroom project was evaluated by the NUSOM-REC (Nazarbayev University School of Medicine - Research Ethics Committee) and classified as expedited.

The decision is based on the facts that the study employs participants from non-vulnerable groups (Young adults of 18 years of age and above), is fully anonymous, bears minimal/no risk and meets ethical standards (informed consent {oral}, explanation of study, possibility of withdrawal, no coercion).

This is to inform you that the research "Prevalence of problem gambling and associated risk factors among young adults in Astana city of Kazakhstan "that is being performed by the MPH student Gulzira Janabel and Dr. Byron Crape has been granted "expedited" status and was approved by the Nazarbayev University School of Medicine Research Ethics Committee (NUSOM-REC). This decision was based on the fact that the study does not involve vulnerable groups, the researchers will not be storing identifiable private information from any of the study's participants and the participants will be elucidated about the research project and participate voluntarily

Prof. Dieter Riethmacher Chair NUSOM-REC