

EXPLORING THE MENTAL DYNAMICS OF INCARCERATED PATHOLOGICAL GAMBLERS: A CASE STUDY IN BALAI PEMASYARAKATAN (CORRECTIONAL CENTER) CLASS II KEDIRI

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Abstract: Impulse control disorders take various forms, one of which is pathological gambling, characterized by an individual's inability to control the urge to gamble, even though the individual knows that his actions can have negative impact. Individuals with gambling disorder will feel anxious and worry when not gambling and feel relieved after doing so. Correctional center, such as the Balai Pemasyarakatan, provide guidance, rehabilitation, and a sense of security for clients with psychological issues, helping them achieve recovery. This study used a qualitative method with a case study approach. Data were collected through interviews, observations, and document analysis conducted at Balai Pemasyarakatan Class II Kediri. The subject of the study was an individual with pathological gambling behavior. The findings revealed that the client had been addicted to gambling since adolescence, experienced anxiety and tension when not gambling, and spent almost all of his financial resources on gambling. His inability to control gambling urges led to involvement in theft on three occasions. However, his psychological condition improved through a series of psychological guidance and rehabilitation programs provided by the correctional center. These results indicate that comprehensive psychological assessment can have a positive impact and help prevent recidivism caused by pathological gambling.

Keywords: Gambling Disorder, Impulse Control Disorder, Psychological Assessment

1. INTRODUCTION

The phenomenon of gambling in Indonesia shows increasingly alarming figures. Although gambling is prohibited both legally and socially, in practice it remains widespread among Indonesian society, occurring both conventionally and online. The Ministry of Communication and Information Technology (Kemenkominfo) recorded an estimated national loss of IDR 138 trillion per year due to the proliferation of online gambling (Jannah et al. 2023). These losses have the potential to disrupt economic stability. Gambling is not only a legal offense but also morally and psychologically harmful. It reflects a psychological vulnerability toward addictive behavior, where individuals struggle to control the urge to gamble. Over time, this behavior may lead to pathological gambling. Pathological gambling is a form of impulse control disorder, where individuals are unable to resist the urge to gamble despite knowing the negative consequences of their actions. This condition is the first recognized form of addiction that does not involve substances or drugs, according to the Diagnostic and Statistical Manual of Mental Disorders (Gunawan et al. 2023). In the Guidelines for Classification and Diagnostics of Mental Disorders III (PPDGJ III), pathological gambling is classified as an impulse control disorder under code F63.0. Gambling becomes problematic when it meets the criteria for pathological gambling, which is characterized by maladaptive and persistent behavior, such as continuously placing bets despite repeated losses (Mustaqilla et al. 2023). This disorder can result in various negative life impacts, such as financial problems, damaged interpersonal relationships, and involvement in legal issues (Aryanata, 2016). Individuals with pathological gambling are often trapped in an endless cycle of betting, where repeated losses only increase their desire to gamble again. Psychologically, pathological gambling is closely linked to impulsivity and poor emotional regulation, as individuals struggle to manage stress and control negative emotions such as anxiety, worry, and tension (Jauregui et al. 2016). In Indonesia, cases of pathological gambling are increasingly found in correctional settings. These environments often reveal recurring gambling behavior among inmates, particularly those with a history of gambling addiction who tend to commit similar offenses after release. Understanding the psychological characteristics of clients with pathological gambling disorders is essential for accurate diagnosis, and prevention of recidivism.

This study aims to explore the psychological profile of a correctional client with a pathological gambling disorder. The assessment in this study includes the client's psychological profile, behavioral patterns, and the underlying factors driving the gambling habit. This study highlights the importance of effective psychological assessment processes for clients with gambling addiction within the correctional system.

2. MATERIALS AND METHODS

This study employed a qualitative methodology with a case study approach, incorporating interviews, observations, and document analysis conducted at the Class II Correctional Center (Balai Pemasyarakatan) in Kediri, East Java. The qualitative method was chosen for its ability to explore the depth of a phenomenon in a localized context, without aiming to generalize empirical findings to the broader population (Firmansyah et al. 2021). Data collection was carried out over a two-month period, from March to April 2025, with one participant in the counseling room of the Kediri Correctional Center. All data were obtained following informed consent from the client. The documentation study method involved gathering secondary data, including previous community research reports, to support a comprehensive understanding of the phenomenon and to identify related issues.

Interviews and observations were conducted directly with the client, as well as with significant others such as the client's mother and a correctional counselor. The purpose of the interviews and observations was to obtain accurate insights into the phenomenon under study. Behavioral observations were conducted during the counseling sessions. By integrating both interview and observational methods, the study aimed to generate more comprehensive and nuanced findings related to the psychological and behavioral aspects of pathological gambling.

The research focused on a case of pathological gambling exhibited by a correctional client at Bapas Kediri (Correctional Center). A case study design was utilized, in which data were collected through interviews and observations of a client undergoing conditional release (parole integration). The research process included psychological assessment, intervention, and analysis of the client's case chronology to explore the development of pathological gambling behavior and its consequences.

Findings from the assessment indicated that the client exhibited compulsive gambling behavior, which began during adolescence and persisted into adulthood, ultimately resulting in criminal activity in the form of theft. Throughout the assessment process, psychological symptoms such as anxiety, tension, emotional instability, and a sense of relief following gambling were consistently observed. These findings suggest the presence of a clinically significant gambling disorder, reinforcing the need for targeted psychological intervention within the correctional system.

3. RESULTS

The results indicated that the client, identified by the initials CP, is a 30-year-old male who suffers from a gambling addiction. His gambling behavior began when he was in the second year of high school and persisted into adulthood. Initially, he used his allowance money to place bets after being introduced to gambling by a classmate. Over time, his friend who first introduced card gambling began offering online gambling, promising larger returns. Feeling challenged, the client began wagering money, and this continued into adulthood with increasingly higher stakes.

After graduating from high school, the client pursued higher education but dropped out in his sixth semester due to his inability to pay tuition fees—funds that had been used for gambling. His parents enrolled him at other universities several times, but he repeatedly misused the tuition funds for gambling, leading to his permanent withdrawal from higher education. In 2016, after leaving university, he migrated and worked at a shopping mall for a year but left the job due to insufficient salary. He later switched jobs multiple times, including working as a café and restaurant waiter, poultry hatchery assistant, personal driver, cilok (meatball snack) vendor, and mobile phone repair technician. Unfortunately, the majority of his earnings from these jobs were spent on gambling, which eventually led to financial instability.

The client's gambling behavior proved difficult to control. He reported experiencing psychological symptoms such as anxiety, restlessness, and tension when not gambling, followed by a sense of relief after doing so. These symptoms indicated a compulsive pattern of gambling. His addiction led to legal infractions in 2016, he was sentenced to four months in prison after being caught gambling at an internet café, which was reported to the local police by the café owner. Further, in 2018 and 2022, he was convicted of theft. These crimes were committed as a

means of obtaining money for gambling, driven by his financial difficulties. He had spent nearly all his income on gambling. The two theft cases resulted in prison sentences of one year and eight months, and two years, respectively.

Observation data revealed that the client was cooperative throughout the assessment process. He was able to answer the interview questions appropriately and expressed remorse for his unlawful behavior. Although he has not fully demonstrated a strong commitment to behavioral change, he expressed a desire to improve. Additionally, signs of anxiety were observed during the assessment, such as repeated leg-shaking, indicating internal distress.

Additional information obtained from significant others, including the client's biological mother and parole officer, indicated that the client had a normal developmental history but began to exhibit behavioral changes during adolescence. At the age of 12, the client experienced a severe traffic accident that caused physical trauma and several days of unconsciousness. Later, during high school, the client became involved in a negative peer environment, where he was first introduced to card gambling by his friends. Over time, his gambling behavior became uncontrollable and expanded into online gambling, which continued into adulthood. In addition, the client is described as a rather quiet and reserved individual. However, he still actively participates in community activities when events are held in his neighborhood. Both the parole officer and the client's mother confirmed that he had been involved in criminal cases three times. They also stated that after being convicted for the third time, the client expressed regret and remorse for his actions. The client hopes that after his release from prison, he will be accepted again by both his family and the wider community.

After serving two-thirds of his sentence, the client was granted parole integration and is currently undergoing supervision and rehabilitation at the Correctional Center to receive further interventions, accompanied by a parole officer, with the hope of becoming a better individual. The client has also become more cautious in making decisions. During the supervision and rehabilitation process, he has shown positive behavioral changes, such as becoming more diligent in practicing religious worship and working more actively. In addition to receiving supervision and rehabilitation from the parole officer, the client also receives strong social support from his family, which serves as a protective factor in his psychological recovery process.

From a multiaxial perspective, the client was diagnosed with pathological gambling disorder (F63.0) on Axis I. On Axis IV, he experienced problems in his social environment and involvement with the legal and correctional systems. The client exhibited high levels of impulsivity, with behavioral changes starting in high school marked by truancy and a loss of academic interest. As gambling became a routine part of his daily life, it negatively affected multiple life domains. He experienced psychological distress when not engaging in gambling and spent nearly all his income on betting, leading to criminal acts such as theft. Other symptoms included rapid mood swings and anxiety in the absence of gambling. Nonetheless, the client demonstrated motivation for change and self-improvement. Data obtained through interviews, observations, and community assessment reports support the conclusion that the client suffers from a habitual and impulse control disorder in the form of pathological gambling.

4. DISCUSSIONS

Data collection results indicated that the client was experiencing pathological gambling disorder. The client's gambling behavior began during adolescence, specifically in the second year of senior high school, and persisted into adulthood. Gambling is defined as an activity that involves wagering money or other valuables on an uncertain outcome (Aryanata, 2016). Legally, gambling is considered a criminal act, involving the staking of a sum of money where the winner claims the entire wagered amount (Kusumo et al., 2023). Gambling involves individuals placing bets in games with the intention of gaining uncertain rewards.

Pathological gambling is a subtype of impulse control disorder. According to the PPDGJ III, this disorder is characterized by strong, uncontrollable urges to gamble, maladaptive behaviors, feelings of anxiety and restlessness when not gambling, and relief after engaging in gambling (Maslim, 2013). The etiology of pathological gambling includes biological, psychological, and social factors. Gambling behavior may serve as a coping mechanism for managing negative emotions. The client exhibited a strong compulsion to continue gambling despite being aware of its adverse consequences, including financial loss, educational disruption, employment difficulties, social problems, and legal involvement.

The client reported experiencing pleasure and relief after gambling, even when facing significant losses. Based on Skinner's behavioral theory, this indicates reinforcement of gambling behavior despite negative outcomes. Skinner's operant conditioning theory posits that behaviors are shaped by consequences, particularly through

reinforcement (Asyari, 2020). A behavior is likely to be repeated or extinguished depending on the type of reinforcement applied. Reinforcement is defined as any response to a behavior that increases the likelihood of that behavior recurring (Darsam, 2023). In this case, the client's gambling behavior was maintained by both positive and negative reinforcement.

Positive reinforcement occurred when the client experienced early wins in gambling, generating feelings of excitement and pleasure. These winning experiences served as positive reinforcers, strengthening the desire to gamble again. This aligns with Skinner's principle that pleasant consequences increase the likelihood of repeating a behavior. Negative reinforcement, on the other hand, was observed when gambling provided emotional relief and reduced feelings of anxiety and stress. Gambling thus functioned as a coping strategy to eliminate unpleasant emotional states, which further reinforced the behavior.

The thrill and instant gratification from winning reinforced the client's urge to gamble repeatedly. Even in the face of repeated losses, the client displayed a persistent urge to recoup his losses through further gambling. The random and unpredictable nature of gambling wins made it even harder for the client to quit. This pattern is referred to as intermittent reinforcement, where inconsistent but occasional rewards sustain a behavior over time.

Emotionally, the client experienced significant internal conflict, including feelings of guilt toward his family, who bore the financial burden of his gambling habit. However, this guilt was insufficient to deter his behavior. Even after serving two prison sentences for theft and failing to complete his education due to misusing tuition fees for gambling, the client continued gambling. This persistence highlights that gambling had become a maladaptive coping mechanism for the client.

Socially, the client tended to withdraw from interpersonal relationships and was relatively closed off about his problems, especially with his family. His relationship with his older sibling deteriorated due to the financial damage caused by his gambling. Despite these challenges, the family continued to provide emotional support, hoping the client would change. This emotional support served as a protective factor in the client's psychological rehabilitation.

Environmental factors also contributed significantly to the client's gambling behavior. He first engaged in gambling during high school, influenced by a classmate, and continued into adulthood. However, assessment findings also documented signs of positive change during the client's guidance and supervision at Bapas Class II Kediri. These included starting a mobile phone repair business, increasing participation in religious activities, openness during assessments, and a declared commitment to change. These developments suggest the client has considerable potential for recovery, provided that psychological intervention, social support, and ongoing supervision are consistently maintained.

This study's strength lies in its comprehensive assessment approach, which incorporated interviews, observations, and literature review to understand the client's behavior. It underscores the significance of sustained family support, continuous mentorship, and appropriate interventions as key factors in recovery. However, the study also has limitations. It focused on a single participant, which restricts generalizability. Additionally, data heavily relied on the client's self-reported narrative, which may contain biases. Furthermore, the study lacked quantitative data to corroborate the qualitative findings. These limitations present opportunities for future research with more comprehensive designs and a broader participant base.

5. CONCLUSIONS

This study demonstrates that the client experienced pathological gambling disorder, which significantly impacted various aspects of their life functioning. The compulsive gambling behavior, accompanied by strong impulsive urges, caused the client to experience psychological distress and financial hardship, ultimately leading to criminal acts. These findings emphasize the importance of in-depth psychological assessment and continuous intervention for correctional clients with impulse and habit disorders. With adequate social support, adaptive coping strategies, and appropriate psychological intervention, the client has the potential to achieve positive behavioral changes and reduce the risk of recidivism. Therefore, rehabilitative approaches within the correctional system need to be strengthened to effectively address similar cases.

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