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RESEARCH ARTICLE



Public perceptions of gambling in the UK Armed Forces: understanding stigma via qualitative inquiry

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ABSTRACT

Background: Existing research has identified elevated public stigma toward Armed Forces personnel experiencing gambling-related harm. However, the reasoning underlying these perceptions remains poorly understood. Qualitative research can explore the drivers of such stigma and inform potential approaches to reduce it.

Methods: A qualitative online survey was conducted with UK-based civilian respondents ($N=52$) recruited via Prolific. Participants were screened to ensure they could meaningfully discuss gambling and military life. Open-ended questions invited participants to reflect on perceived risks and discuss attitudes toward gambling in both military and civilian contexts. Responses were analyzed using thematic analysis.

Results: Four overarching themes with eleven sub-themes were identified: (1) Constructing the Unknown, (2) Perceived Drivers of Gambling within Military Culture, (3) Locating Responsibility and (4) Responding to Military Gambling.

Conclusion: Findings suggest that public interpretations of military gambling-related harm were shaped by tensions between gambling and an idealized military identity, alongside negotiated understandings of responsibility across individual, institutional, and societal levels.

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Introduction

Harmful gambling is associated with financial loss, family disruption, and detrimental effects on physical and mental health (Langham et al. 2016; Muggleton et al. 2021; Wardle et al. 2024). Along with these direct consequences, individuals experiencing gambling-related harm frequently encounter public stigma, characterized by negative stereotypes such as being viewed as irresponsible, weak, or lacking self-control (Hing et al. 2016; Aonso-Diego et al. 2025; Lloyd et al. 2025; Singer 2025). Stigma is understood as a socially constructed process, whereby particular attributes become associated with negative stereotypes that can reduce an individual's social status and shape how others perceive and respond to them (Goffman 1963; Link and Phelan 2001; Barthels et al. 2026). Therefore, public stigma does not arise solely from gambling behavior itself but also reflects the assumptions, expectations, and cultural narratives through which gambling-related harm is interpreted. For example, stigma may

arise when gambling-related harm is perceived as incompatible with the characteristics expected of a particular social identity. This perceived incompatibility may alter how the person is viewed, resulting in what Goffman (1963) described as a 'spoiled identity'.

The military can be one important context to examine these processes because military personnel occupy a distinctive social role commonly associated with discipline, resilience, responsibility, and service (McCartney 2011; Phillips et al. 2022). Recent studies have highlighted increased gambling-related harm within the UK Armed Forces, with aspects of military life exacerbating such harms (Milton et al. 2020; Garvey Wilson et al. 2021; Paterson et al. 2021; Pritchard and Dymond 2022; Dighton et al. 2023; Jones et al. 2025; Dekel et al. 2026). The social expectations associated with military personnel may shape how gambling-related harm is interpreted, resulting in perceptions that differ from those directed toward civilian populations. Recent quantitative research has

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identified differences in some public perceptions of gambling-related harm according to military status, although the reasoning underpinning these differences remains unclear (Smith et al. 2026). Understanding how members of the public reconcile gambling-related harm with these expectations may provide important insight into how military gambling becomes stigmatized.

Within the Armed Forces specifically, the negative stigma around mental health can be internalized by service personnel, leading to negative self-beliefs that undermine their motivation to seek help (Greene-Shorridge et al. 2007; Vogt 2011; Dekel et al. 2026). For example, Armed Forces personnel have revealed worries that the public would see them as less competent because of gambling (Champion et al. 2022). This stigma may contribute to an already established reluctance to disclose gambling-related concerns due to fears of career repercussions (Champion et al. 2022; Biggar et al. 2025; Dekel et al. 2026). Public perceptions of military personnel also have relevance beyond interpersonal stigma, as civilian attitudes can influence wider support for the Armed Forces, including recruitment, resourcing, and defence policy (Dandeker 2010; Edmunds 2012; Gribble et al. 2012).

Although quantitative studies have consistently demonstrated negative public attitudes toward individuals experiencing gambling-related harm, considerably less attention has been paid to how these attitudes are constructed, the assumptions that underpin them, or how they may differ across social contexts such as the military (Hing et al. 2014; Hing, Russell, Gainsbury, et al. 2016; Aonso-Diego et al. 2025; Smith et al. 2026). Additionally, few studies have examined how gambling-related stigma may be mitigated, particularly within military contexts (Brown and Russell 2020). Existing strategies are drawn from general mental health stigma research focusing on education and contact-based interventions (Allport 1954; Corrigan and Penn 1999; Adu et al. 2022). However, Greene-Shorridge et al. (2007), note that contact-based interventions have not been adequately explored in a military context, and a critical gap in understanding remains.

Given this research gap, the utilization of qualitative methods to explore public perceptions of gambling in the Armed Forces is warranted. Existing quantitative research has identified differences in public perceptions but cannot explain the reasoning, assumptions, or interpretive processes underpinning those perceptions. Furthermore, qualitative research exploring gambling-related harm within military

populations remains limited (Paterson et al. 2021). A qualitative approach can help to explore the reasoning, assumptions, and interpretive processes through which public perceptions of military gambling are constructed.

This study aimed to explore how members of the public construct and interpret gambling-related harm when it is associated with military personnel. Specifically, the study sought to understand the knowledge and assumptions underpinning these perceptions, how participants explained gambling within military contexts, and how these interpretations informed views regarding stigma, responsibility, and support. The study was guided by the following research question:

1. How do members of the public construct and interpret gambling-related harm when associated with military personnel?

Methods

Participants and recruitment

Ethical approval was obtained from the School of Psychology ethics panel at Swansea University [#1-2025-12735-11954]. Participants were recruited from individuals who had previously taken part in a related quantitative study on examining public perceptions of gambling-related harm among military personnel on Prolific (Smith et al. 2026) and who had indicated that they were willing to be contacted about future research. They were expected to provide rich and varied accounts of public perceptions of military gambling. This approach is consistent with recommendations that qualitative recruitment should seek participants who can offer 'rich, complex, and textured data' that meaningfully contribute to answering the research question (Terry and Braun 2017, p. 15). This resulted in a purposive sample of 52 UK-based civilian participants *via* the crowdsourcing platform Prolific. Civilian participants were defined as any individual who had never served in the UK Armed Forces in either a regular or reserve capacity.

Data collection took place in April 2025 over three days and was conducted using the crowdsourcing platform Prolific. Participants were compensated £2.20 for completing this study ($M = 18.44$ min, $SD = 10.34$), with an average reimbursement rate of £8.87 per hour (pro rata). Prolific was selected because it has consistently been shown to provide high-quality research data and offers an efficient means of recruiting participants for online research (Peer et al. 2022). Prolific

Table 1. Demographic characteristic.

Demographic category	(N = 52) (%)
Gender	
Male	20 (38.5)
Female	32 (61.5)
Age	
Mean (SD)	48.92 (13.26)
Range	22–68
Ethnicity	
White	42 (80.8)
Black	2 (3.8)
Asian	5 (9.6)
Mixed	1 (1.9)
Other	2 (3.8)
Employment	
Full-time	19 (36.5)
Part-Time	7 (13.5)
Not in paid work (e.g. ‘homemaker’, ‘retired’ or ‘disabled’)	9 (17.3)
Unemployed	3 (5.8)
Other	14 (26.9)

functioned solely as a recruitment platform in the present study. The qualitative methodology, data collection, and analysis followed guidance for online qualitative research.

Participants were provided with an information sheet and gave informed consent digitally before taking part. Upon completion, they were also given information about support services related to gambling-related harm. Participant demographics are summarized in Table 1.

Survey procedure

A qualitative survey comprising open-ended questions was designed to explore participants’ views on the chosen phenomena, allowing them to express their thoughts in their own words (Braun et al. 2021). Questions were presented *via* open-text boxes with a minimum character limit of 80–100 to encourage depth without discouraging participation.

The survey was developed iteratively, informed by the existing literature on gambling stigma, public perceptions of the Armed Forces, and military mental health, and was structured around three themes: (1) knowledge and awareness of gambling within the military; (2) perceptions of gambling in military versus civilian contexts; and (3) the construction of stigma. Participants were encouraged to take their time and assured there were no right or wrong answers (Braun et al. 2021; Thomas et al. 2024). Example questions included (1) ‘What do you know about gambling among military members?’, (2) ‘In what ways might risks or impacts of gambling differ between military personnel and civilians?’, (3) ‘What factors do you believe contribute to stigma around gambling or gambling-related harm, especially in the military?’ A final ‘clean-up’ question ensured no topics were missed: ‘Is

there anything else you’d like to share about the topic we’ve covered in this survey?’ (Braun and Clarke 2013; Thomas et al. 2024).

An initial sample was recruited, and the responses were reviewed to assess the breadth and richness of the dataset in relation to the research question. Following this review, recruitment was reopened, and a further 25 participants were recruited to ensure adequate information power and conceptual breadth. The 52 responses resulted in 16,513 words. Participants contributed an average of 317.6 words across the survey (SD = 109.6, range = 179–809 words), and the research team collectively agreed that information power was reached (Malterud et al. 2016).

Data analysis

A codebook template thematic analysis was conducted following the guidance of Roberts et al. (2019). A combined deductive–inductive approach was used. The initial codebook was informed by literature on gambling stigma and public perceptions of military personnel, while remaining flexible enough to incorporate unanticipated patterns in the data. The analysis was underpinned by a critical realist epistemology, recognizing that participants’ accounts were shaped by social and cultural contexts (McGrath 2004). This allowed the themes to remain grounded in participants’ accounts while considering broader influences such as military culture and public stigma.

JS and ST independently coded 10% of transcripts, developing a shared codebook through iterative discussion, insights from previous research and systematic refinement, following recommended guidelines (Roberts et al. 2019; O’Connor and Joffe 2020). The codebook was applied to the full dataset with changes

tracked, including clear definitions, criteria, and examples (Boyatzis 1998), with inter-rater reliability on a subset yielding Cohen's $\kappa = 0.87$, indicating high agreement (Richards 2009; McHugh 2012). Related codes were iteratively compared and grouped according to shared patterns of meaning. Through discussion and refinement, these groupings developed into higher-order themes and sub-themes that captured both semantic similarities and broader interpretive concepts across the dataset.

Results

The analysis identified four main themes and eleven sub-themes, as shown in Table 2. Across the analysis, participants attempted to make sense of gambling-related harm within a population widely associated with discipline, responsibility, and resilience. Limited knowledge and assumptions contributed to an idealized military identity against which gambling-related harm was interpreted. Participants drew on cultural, psychological, and structural explanations, allocated responsibility across individual, military, and societal levels, and considered who should support, discipline, or intervene. Together, these themes explain how public perceptions of military gambling were constructed, with expectations of military identity and attributions of responsibility emerging as two key processes shaping participants' interpretations. The themes presented below reflect these interconnected processes of interpretation.

Main theme 1: Constructing the 'unknown'

Participants began by acknowledging they knew very little about military gambling. In the absence of direct knowledge, they relied on broader assumptions about military personnel to make sense of gambling-related harm. These assumptions culminated in an idealized image of the soldier against which gambling was judged.

Limited public awareness of military gambling

Participants frequently discussed a lack of awareness and understanding surrounding gambling-related harm within the military, stating they '*did not know very much*'. One participant stated that they would be '*surprised*' if this was something the public thought about at all. Others openly acknowledged that this was a topic that had never really crossed their minds and believed this was likely reflective of society.

I had never given it any thought before, and I suspect that would be true of most members of the public.

(White, Male, 39)

This general unfamiliarity was compounded by limited insight into military life. Participants suggested that awareness of gambling-related harm was likely to be lower among those without '*friends or family members serving or who have served in the military*'. This was reflected in accounts from participants who knew '*next to nothing*' because they did not '*know anyone in the military*', while another acknowledged that they had '*never heard anything about it so can only speculate*'. Their accounts positioned military gambling as a hidden or overlooked issue, reflecting broader civilian-military disconnection. Limited contact did not prevent judgment; instead, it created space for assumptions and familiar cultural narratives to shape interpretations of gambling-related harm.

Homogenized risk narratives for military gambling

In the absence of knowledge, participants drew on demographic assumptions, relying on stereotypical ideas of who joins the military, to explain why gambling might be prevalent within the military. For example, participants frequently linked military service to '*lower socio-economic backgrounds*' and growing up in '*less educated*' households whereby gambling was perceived as more '*prevalent*'. Age and gender were also cited, constructing an image of military personnel who engaged in gambling as '*young*' and '*male*'. These demographic assumptions were also linked to

Table 2. Summary of main themes and sub-themes.

Theme	Sub-theme	Support from cases N (%)
Constructing the 'Unknown'.	• Limited Public Awareness on Military Gambling	41 (78%)
	• Homogenized risk narratives for military gambling.	25 (48%)
	• Perceived Seriousness and Risk of Military Gambling	44 (84.6%)
	• Gambling as a threat to the idealized military image	24 (46.2%)
Perceived drivers of gambling within military culture	• Gambling as an accepted rite of military social life	31 (59%)
	• Gambling as a coping strategy within military culture	33 (63.5%)
Locating Responsibility	• Individual responsibility – (micro-level)	19 (36.5%)
	• Institutional Responsibility for Military Gambling (Meso-Level)	23 (44.2%)
	• Societal and Structural Responsibility for Military Gambling (Macro-Level)	16 (30.8%)
	• Support or Accountability.	41 (78.9%)
Responding to Military Gambling	• Engaging the Public in Military Gambling Awareness	31 (59.6%)

perceived personality traits, with the Armed Forces portrayed as attracting or fostering risk-taking behavior:

I feel that those serving in the military tend to be risk takers, as part of their training they are encouraged to consider themselves invincible and therefore to get a buzz they have to take increasingly more risks. Gambling gives them a relatively safe way of achieving that buzz.

(White, Female, 63)

These assumptions were often expressed with a degree of uncertainty. Nevertheless, they constructed a homogenized and imagined profile of service personnel as young, male, working-class, and thrill-seeking, overlooking individual variation. Analytically, the significance of these assumptions lies not in whether they were factually accurate, but in how they provided a social identity against which participants interpreted gambling-related harm.

Perceived seriousness and risk of military gambling

Building on the gap in understanding of military life, participants often made broad assumptions about the risks associated with gambling-related harm in the Armed Forces. In the absence of concrete knowledge, military gambling was frequently perceived as highly risky. These concerns commonly included effects on mental health, operational performance, and safety. Illustrating this broader pattern, participants anticipated 'severe emotional disturbances,' 'suicidal ideation', increased 'isolation' and potential physical harm to the individual or others.

Several participants believed that gambling among service personnel could result in 'desperate choices' and viewed it as inherently more dangerous than civilian gambling. Participants' concerns included mental health deterioration and financial consequences. Other accounts extended to corruption, 'security vulnerabilities', exposure to 'blackmail', or the concern that gambling 'could distract them whilst in serious situations'. There was also concern expressed about access to weapons:

Due to the strict nature of life within the military, and the access to weaponry, I would say the potential harms are more serious in the military as I feel gambling is more prevalent and the risk of overreacting to stressful situations more likely

(White, Male, 56)

These amplified risk perceptions reveal the heightened concern gambling evokes when placed within the high-responsibility context of military service.

Gambling as a threat to the idealized military image

Participants idealized military personnel as 'disciplined,' 'calm, collected and serious,' and as 'role models' who represented something to be 'proud' of. Yet, gambling was seen by some as incompatible with this image, representing a loss of control, 'recklessness', or 'inappropriate behavior'. Thus, gambling didn't 'really fit in that idealized picture of discipline'. This tension sometimes generated surprise, disappointment, and diminished empathy, with gambling framed as bringing 'shame' to the military or demonstrating a failure of military discipline. The disclosure of gambling-related harm could consequently transform perceptions of an otherwise competent and likeable service member:

Mike seems to be a regular soldier, pleasant and likeable. However, discovering that he is addicted to gambling makes him seem like he has a real problem. Rather than an alert, highly trained soldier, he could cause harm to himself and others.

(White, Female, 59)

These responses illustrate how gambling-related harm challenged participants' constructed image of military personnel: 'harmful gambling behavior might contradict that image, making them seem more dangerous.' Gambling did not simply add a negative characteristic. Instead, it altered how the whole person and their suitability for a valued military role were interpreted. This contributed to the broader narrative of risk identified in the preceding sub-theme.

Theme 2: Perceived drivers of gambling within military culture

Participants drew on their understanding of military life to explain why gambling-related harm might occur. Accounts of camaraderie, competition, boredom, trauma, and coping functioned as interpretive resources through which participants attempted to explain the tension identified in Theme 1. Together, these accounts positioned military gambling as both socially produced through military culture and psychologically functional as a means of coping with service-related pressures.

Gambling as an accepted rite of Armed Forces social life

Participants demonstrated an awareness of gambling as a culturally accepted and normalized aspect of military life. Rather than viewing it as deviant or problematic behavior, many framed gambling as a social

ritual, something embedded in the Armed Forces and closely tied to ‘*camaraderie*’ and ‘*a competitive game among colleagues*’. Thus, it was often described as a ‘*group activity*’, characterized by friendly rivalry, with ‘*men egging each other on*’, suggesting that gambling served to build bonds and provide entertainment during downtime. Participants suggested that proximity to ‘*competitive individuals*’ could encourage risk-taking and contribute to a gambling culture.

However, while most framed gambling in the military as a harmless pastime, a smaller number of participants highlighted the risks embedded in this culture. They recognized that the social normalization of gambling could create a pathway toward more harmful behaviors, particularly for younger or newer recruits influenced by more experienced peers and the ‘*toxic masculine culture*’ known in the military:

They are predominantly young men who train hard for long periods of time and when they have leave, they look for activities that give them downtime. They are introduced to gambling by other longer-serving men who see it as a good night out and once the younger man becomes used to it, they then explore other forms of gambling which are readily available from online bookies.

(White, Female, 63)

Overall, participants perceived this social dimension of gambling as a key factor in its prevalence within the Armed Forces, whether this be good or bad was up for debate.

Gambling as a coping strategy within military culture

Participants frequently expressed the view that gambling could serve as a coping mechanism for Armed Forces personnel, particularly because of the ‘*stressful nature of the job*’. This sub-theme captures how participants framed gambling not solely as recreational or socially driven but as a strategy for managing ‘*mental health issues*’, ‘*trauma*’, and ‘*high stress situations*’ of the military. Stress ‘*relief*’ and mental health were topics that frequently came up:

Many experience trauma, PTSD or mental health issues, resulting from the service and gambling can become a means of coping with these emotional burdens.

(Asian, Female, 54)

Therefore, gambling was interpreted as a ‘*coping mechanism*’ to help with ‘*processing traumatic experiences*’. Gambling was described as a distraction from the broader pressures of military service, including long periods away from home, to help manage

‘*boredom*’ and ‘*isolation*’ and feeling ‘*lonely*’. These interpretations positioned gambling-related harm within the emotional and structural conditions of military life rather than solely as reckless or irresponsible behavior.

Theme 3: Locating responsibility

Having considered why gambling-related harm might occur within military life, participants then negotiated where responsibility should be located. Participants frequently sought to locate responsibility for gambling-related harm at different levels, drawing on individual, institutional, and societal explanations to make sense of why gambling occurred and who should be responsible for responding to it.

Individual responsibility – Micro

While many participants offered socially and psychologically informed explanations for gambling in the Armed Forces, a subset framed it as a matter of individual choice and personal failing. Some respondents positioned gambling as a self-inflicted behavior arising from personal ‘*weakness*’, ‘*lack of discipline*’, or an inherent tendency toward risk-taking. In these accounts, gambling was ‘*specific to each individual*’:

I think of it from an individualistic perspective, whether that be someone from the military or someone corporate with family and kids or a student, it still carries a high risk.

(White, Female, 22)

Notably, although the survey intentionally avoided using the term ‘*addiction*’, many participants described gambling in these terms; ‘*addiction*’ appeared over 50 times across responses, language that located responsibility with the individual. For example, referring to it as ‘*his addiction*’. Such responses reflect a broader societal narrative that frames gambling harm as the result of individual failings, rather than acknowledging the structural or contextual factors that may contribute to such behaviors.

Institutional responsibility for military gambling – Meso-Level

Although some participants framed gambling as a matter of personal responsibility, many located responsibilities at the institutional level, arguing that ‘*the problem is within the military*’. They believed the Armed Forces should provide ‘*training*’, ‘*counselling*’, ‘*education*’, and tailored support to reduce gambling-related harm. Participants perceived existing provision as inadequate and characterized the military as a

'closed book', suggesting that outsiders could not help and that it was 'harder to get help in the military.' They called for more visible support and a 'much more open debate' about gambling-related harm within the Armed Forces.

However, this institutional framing also revealed a subtle shift, whereby assigning responsibility to the military reduced the perceived need for wider public involvement:

Surely this is an internal matter best handled by the military—it doesn't need to be made public if they are handling it.

(White, Female, 62)

Some argued that if the military created the conditions that encouraged gambling, 'there should be structures in place to offer support.' Others distanced themselves from the issue by stating that 'what they do with their money is up to them.' Together, these responses raise questions about how participants understood the respective responsibilities of military institutions and wider society.

Societal and structural responsibility for military gambling – Macro-level

The least common view was that gambling among military personnel reflects a broader societal issue, influenced by the UK's wider culture of gambling. A systemic issue affecting all sectors of society 'regardless of occupation'. Participants who took this stance tended to view gambling harm as a public health issue, a 'nationwide epidemic', requiring wide-scale policy reform, regulation, and educational campaigns.

Completely eradicate gambling from society altogether. Doesn't the 'House' always win anyway? So what is the point of gambling?

(White, Male, 37)

Some explicitly rejected the idea of singling out the Armed Forces, believing there was no need to 'demonise one profession'. Instead, they discussed needing a more equitable and effective approach, which would be to address the root causes that enable gambling harm across society, targeting the 'system that makes them more likely to have gambling issues'.

Theme 4: Responding to military gambling

Participants' interpretations of military gambling also shaped views about what kind of response was warranted. Rather than focusing on who was responsible for causing or managing the problem, this theme reflects judgements about whether Armed Forces

personnel experiencing gambling-related harm deserved greater understanding or tailored support and whether the wider public had a role in reducing stigma or increasing awareness.

Support or accountability

Participants disagreed about whether military personnel experiencing gambling-related harm warranted greater support or greater accountability. Some expressed empathy because of the 'stressful' and 'physically and mentally' demanding nature of military work, which they believed could contribute to gambling:

I am very empathetic towards Mike, as I strongly feel that in many ways the military environment must be a 'trigger' for people to engage in harmful gambling. And I understand the shame that can result from active addiction - which must be magnified many times over within such a macho setting.

(White, Female, 63)

For some, greater support was also framed as a response to military service itself, with one participant describing support as 'a tangible way to give back to those who sacrifice so much for our nation'.

Empathy was nevertheless conditional for some participants. When gambling was perceived to compromise operational performance or place others at risk, they supported disciplinary measures or mandatory treatment. One participant supported treatment 'if he wants to retain his role within the military', while another described an affected service member as a 'loose cannon' who should be 'forced to enter treatment'. Others attributed gambling to personal choice and expressed little empathy:

I don't feel empathy for Mike. He is a big boy, He makes his own choices in life and it's no concern of mine if he gambles or not.

(White, male, 52)

These contrasting responses demonstrate how military identity shaped competing expectations of care and accountability. For some, the demands of military service justified greater empathy and tailored support. For others, the responsibilities associated with military roles warranted higher standards of personal accountability, discipline, or compulsory intervention.

Engaging the public in military gambling awareness

Participants also disagreed about whether the public had a role in creating or reducing stigma. Some believed that the public did 'not think negatively of military gambling' and consequently played little role

in perpetuating stigma. Others resisted stigma-reduction efforts, arguing that ‘[there] *SHOULD be a stigma*’ because they viewed it as a possible deterrent to gambling. Public involvement was therefore contested, with participants differing over whether stigma existed, whether it should be challenged, and whether responsibility rested with the public or the military.

Despite this disagreement, many participants believed that education and greater awareness could help ‘*shift public perceptions*’. They argued that greater understanding of military life and the ‘*sacrifice*’ made by service personnel could foster empathy and challenge misconceptions. Participants also proposed awareness campaigns and more humanizing media representations:

Education definitely and keeping open communication around the subject going. Maybe have a TV show that discusses it, like the Post Office scandal TV show brought that issue to the public eye in a humanised way.

(White, female, 37)

One participant suggested that ‘*a program of public education could go some way in developing better appreciation of the social problems that military personnel (including gambling) are sometimes prone to*’, while another argued that ‘*the public need to be made aware of the problem, and educating us would make us realize how stressful life in the military can be*.’ Yet this emphasis on public education was itself contested. Some participants questioned whether changing public understanding should be a priority at all, with one stating that ‘*it’s not necessarily the public that needs educating. The problem is within the military and it’s here that the educating needs to take place*.’ These contrasting accounts demonstrate that participants differed not only in whether public education was needed, but also in where responsibility for reducing stigma should be located.

Discussion

This study explored how members of the public construct and interpret gambling-related harm associated with military personnel. Participants understood harm in relation to an idealized military identity characterized by discipline, resilience, and responsibility. Perceived conflict between gambling and these expectations prompted assumptions about military culture, dangerousness, and responsibility. Although participants often portrayed military personnel as young, male, thrill-seeking, and using gambling to cope with service-related pressures, they also expressed concern

and a desire to understand military life. The findings suggest that gambling-related stigma is shaped not only by gambling behavior but also by the social identity of the person experiencing harm, involving interconnected judgements about military identity, risk, responsibility, and appropriate support.

These findings can be interpreted through Goffman’s (1963) concept of spoiled identity. Participants appeared to hold an idealized image of military personnel as disciplined, resilient, and self-controlled. Gambling-related harm was often perceived as incompatible with these expectations, creating a gap between the expected identity of a service member and the identity attributed to someone experiencing such harm. References to weakness, addiction, risk, and diminished competence illustrate how gambling-related harm could alter perceptions of the individual and shape views about appropriate support, intervention, or accountability. This is consistent with previous evidence that gambling is heavily stigmatized (Hing et al. 2014; Hing, Russell, Gainsbury, et al. 2016; Smith et al. 2026), with participants attributing responsibility at the micro level, placing blame on the individual, compared to macro-level factors, such as the gambling industry, being cited least. This emphasis on personal responsibility reflects the broader framing of gambling as a moral failing rather than a health issue (Konkolý Thege et al. 2015; Dąbrowska and Wieczorek 2021; GamLEARN 2025). Gambling is linked to personal choice, attracting blame and little pity (Horch and Hodgins 2008; Konkolý Thege et al. 2015; Dąbrowska and Wieczorek 2021; Wöhr and Wuketich 2021), and this pattern is consistent with recent experimental findings on public perceptions of military gambling (Smith et al. 2026).

Although the study avoided stigmatizing language in its questions, participants frequently introduced such language themselves, describing gambling as ‘*his addiction*’ or a ‘*problem*’. Such framing risks further victimizing those experiencing gambling-related harm, contrasting with recommendations for respectful reporting (Biggar and Wardle 2024) and can deter people from seeking help (Hing 2015; McGinty et al. 2015; Ashubwe and Miano 2018; Brown and Russell 2020; Aonso-Diego et al. 2025). Overall, these findings illustrate how gambling continues to be framed as a personal failure, reinforcing stigma. They reinforce the importance of conceptualizing gambling-related stigma as a socially constructed process rather than solely an individual judgment of behavior. Contemporary public-health approaches to gambling-related harm increasingly emphasize the role of

commercial, regulatory, and structural determinants alongside individual factors (Bowden-Jones et al. 2019). Against this broader framing, the limited attention participants gave to macro-level influences may reflect a lack of public recognition of the wider determinants of gambling-related harm. This gap in understanding suggests a potential role for public education in broadening awareness beyond individual responsibility and highlighting the social and structural conditions that can contribute to harm.

Although some participants framed gambling as an individual failing, responsibility was also placed on the military. Participants argued that military culture could contribute to gambling harm and that the Armed Forces should provide more visible and accessible support, reflecting previous evidence of gambling normalization, emotional coping, stigma, and inconsistent support within military settings (Champion et al. 2022; Biggar et al. 2025; Dekel et al. 2026). By considering the military context, participants shifted some responsibility away from affected individuals, with some accounts reflecting elements of cognitive empathy. This contrasts with earlier quantitative findings showing no significant differences in empathy toward Armed Forces personnel experiencing gambling harm (Smith et al. 2026). One possible explanation is that expressions of empathy may become more apparent when participants can explain their reasoning in their own words. Alternatively, assigning responsibility to the military also allowed some participants to position gambling harm as an internal matter requiring little public involvement. Therefore, institutional responsibility had a dual function. It supported calls for tailored provision while distancing wider society from an obligation to respond. This tension raises broader questions about how responsibility for harms experienced by service personnel is distributed among individuals, military institutions, the state, and wider society.

Although experimental research has not found a significant interaction between military-related stigma and gambling stigma (Smith et al. 2026), participants in the present study, when prompted, expressed concerns and frequently linked military service and gambling to harmful situations. These interpretations often drew on a stereotypical image of the soldier as combat-focused and potentially dangerous, despite the Armed Forces comprising more than 150 distinct roles (NHS Employers 2023). Such assumptions may partly reflect the ‘civil–military gap’, whereby limited contact and mutual understanding between civilian and military populations can contribute to simplified

or stereotyped perceptions of military life (Feaver et al. 2001; BBC News 2007; Hines et al. 2015). Relatedly, individuals with little exposure to ex-service personnel have been found to rely more heavily on negative media portrayals (YouGov 2022). Accordingly, assumptions underpinning gambling-related stigma may arise not solely from attitudes toward gambling but also from broader misunderstandings of military life, suggesting that improving public understanding may also have value for stigma reduction. Intergroup contact theory proposes that positive interaction between social groups can reduce prejudice (Allport 1954), and education and contact with people with lived experience may similarly help challenge misconceptions surrounding gambling-related harm (Corrigan and Penn 1999; Aonso-Diego et al. 2025). Although these approaches remain underexplored in military contexts (Greene-Shortridge et al. 2007), participants’ interest in learning more, alongside the cognitive empathy evident in their contextual explanations, suggests that the public may be receptive to initiatives that humanize both military life and experiences of gambling-related harm.

Further research is needed to understand how stigma manifests within the Armed Forces and whether service personnel are aware of, or directly experience, the negative public attitudes identified in these studies. These findings also point to a need for stigma-reduction interventions tailored to military populations affected by gambling harm. Approaches such as contact-based programmes, educational campaigns, and informational resources on military gambling policies have shown promise in reducing mental health stigma and may hold similar potential for gambling-related harm (Corrigan and Penn 1999; Gao and Ng 2021; Quigley 2022). Aonso-Diego et al. (2025), note that campaigns targeting gambling stigma should particularly focus on vulnerable groups, who may experience elevated levels of stigma and consequently face greater barriers to accessing support. However, education alone may be insufficient if public understanding continues to locate responsibility primarily with affected individuals or military institutions. Stigma-reduction initiatives may also need to broaden awareness of the wider social, structural, and commercial factors that contribute to gambling-related harm. Recent accounts from UK veterans similarly support consideration of responses beyond education, including routine screening, culturally informed and non-punitive support, and closer integration of gambling-related harm and mental health services (Dekel et al. 2026).

Limitations

Several limitations should also be noted. First, the study was conducted with a UK public sample, and findings may not be transferable to other populations, cultural settings, or military organizations. The sample was also relatively older, which may have influenced perspectives, as older participants are likely to have different levels of exposure to the military or gambling compared with younger individuals. Secondly, the online qualitative survey format, unlike traditional interviews, does not allow for interactive probing or clarification of responses (Thomas et al. 2024). For instance, some participants appeared to conflate empathy with sympathy, in such cases, results were interpreted cautiously to avoid over-interpretation.

Finally, while the study offers in-depth insight into public perceptions, it cannot quantify the prevalence of these views. Given the small sample size, caution should be exercised when applying these findings to the wider population. Nonetheless, in the context of a novel research area with limited prior evidence, the study provides an important foundation for developing understanding and guiding future, larger-scale research.

Conclusion

This study provides new insight into how members of the public construct and interpret gambling-related harm when it is associated with military personnel. Participants' interpretations appeared to be shaped not only by gambling-related harm itself, but also by the perceived incompatibility between such harm and socially valued expectations of military identity. Participants debated the causes of gambling harms and where responsibility lies, highlighting stigma and public concern surrounding military personnel experiencing harm. Beyond gambling, the findings also revealed a broader lack of understanding of military life. However, participants expressed strong interest in learning more, suggesting a willingness to bridge the civil–military gap. The study contributes to the growing evidence base on gambling-related stigma in military contexts and identifies a need for further research on stereotypes, responsibility, and stigma-reduction. Addressing these areas may support more informed and empathetic public understandings of military gambling-related harm and contribute to the development of more appropriate support for service personnel and their communities.

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Ethics statement

Ethical approval was obtained from the School of Psychology ethics panel at Swansea University [#1-2025-12735-11954].

Author contributions

CRedit: **Jessica Smith**: Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Writing – original draft, Writing – review & editing; **Samantha Treacy**: Formal analysis, Writing – review & editing; **Simon Dymond**: Conceptualization, Supervision, Writing – review & editing; **Jamie Torrance**: Conceptualization, Methodology, Supervision, Writing – original draft, Writing – review & editing.

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Data availability statement

The data that supports the findings of this study are not publicly available due to the sensitive nature of the qualitative responses and the risk of participant identification. All data relevant to the results are included within the article. Anonymized excerpts may be available from the corresponding author upon reasonable request.

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