Cyprus Turkish Journal of Psychiatry & Psychology
Published Online: 29 July 2026, Doi:10.35365/ctjpp.26.3.26

CASE REPORT / OLGU SUNUMU

A Case Report on Gambling Disorder in the Context of Hopelessness and Values: A Narrative Therapy Intervention

Kumar Oynama Bozukluğu, Umutsuzluk ve Değerler Kapsamında Bir Vaka Raporu: Narrative Terapi Uygulaması

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Abstract:

In recent years, the increasing prevalence of gambling disorder has prompted mental health professionals to explore various treatment modalities. Although several therapeutic approaches have been proposed, there is still a lack of robust empirical evidence regarding their effectiveness. Intervention-based studies have emphasized the need to move beyond symptom reduction and behavioral control by incorporating multidimensional aspects of recovery, thereby highlighting the necessity for innovative therapeutic frameworks. This case report aims to describe and analyze the clinical story and therapeutic process of a 25-year-old male w ho was considered to have a gambling disorder due to repetitive engagement in online betting and who underwent treatment through the Narrative Therapy approach. The client's symptoms were assessed using the DSM-5 diagnostic criteria for gambling disorder, along with the South Oaks Gambling Screen (SOGS). The client was followed for over a year, during which 28 individual Narrative Therapy sessions were conducted. This case report discusses the role of values and hopelessness within the context of Narrative-based psychotherapy. Narrative-specific techniques such as externalization and alternative story development are addressed in relation to diagnosis, intervention, and follow-up. Rather than aiming to eliminate the gambling behavior directly, the intervention focused on uncovering and engaging with the underlying values and hopes that drive such behaviors—underscoring a shift from pathology to meaning-making. Narrative Therapy offers practical and applicable techniques for addressing gambling disorder, especially by facilitating a value-oriented and individualized therapeutic process.

Keywords: Gambling disorder, Values, Hopelessness, Psychotherapy, Narrative therapy.

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Date of Received/Geliş Tarihi: 08.11.2025**, Date of Revision/Düzeltme Tarihi:** 01.05.2026, **Date of Acceptance/Kabul Tarihi:** 04.05.2026, **Date of Online Publication/Çevirimiçi Yayın Tarihi:** 29.07.2026

Citing/Referans Gösterimi: Deniz, H. A. & Topçu, F. (2026). A case report on gambling disorder in the context of hopelessness and values: A narrative therapy intervention. *Cyprus Turkish Journal of Psychiatry & Psychology*, 1-7. https://doi.org/10.35365/ctjpp. 26.3.26

Öz:

Kumar oynama bozukluğunun son yıllarda giderek yaygınlaşması nedeniyle bu konuda ruh sağlığı çalışanları tarafından çeşitli tedavi yöntemleri ortaya çıkmaya başlamıştır. Her ne kadar çeşitli yaklaşımlar bu sorunu ele alıyor olsa da, bu yaklaşımların etkililiğine dair çok fazla çalışma bulunmamaktadır. Müdahale araştırmaları ise bozukluğa özgü semptomların ve davranışların ötesinde, iyileşmenin çok boyutlu alanlarının ele alınmasının ve sonuçlara dahil edilmesinin önemli olduğunu ve yeni tedavi yaklaşımlarına olan ihtiyacı ortaya koymuştur. Bu çalışmanın amacı, tekrarlayan ve kontrol edilemeyen şekilde çevrimiçi bahise para harcadığı için kumar oynama bozukluğu tanısı almış ve tedavisinde Narrative terapi yaklaşımı uygulanan 25 yaşında bir erkek danışanın öyküsünü ve terapi sürecini tanımlamak ve analiz etmektir. Vakanın semptomları, DSM-5'in kumar bozukluğu kriterleri ve South Oaks Kumar Tarama Testi kullanılarak değerlendirilmiştir. Bu vaka bir yılı aşkın süre boyunca takip edilmiştir ve toplam 28 seans Narrative terapi uygulanmıştır. Değerler ve umutsuzluk konularının ele alındığı Narrative temelli bireysel psikoterapiye ek olarak, aile üyesinin sürece dahil edilmesinin; dışsallaştırma ve alternatif hikâye yazma gibi Narrative Terapi'ye has tekniklerin kullanılmasının önemi, tanı, tedavi ve takip süreci açısından tartışılmıştır. Bu vaka raporu, kumar oynama bozukluğunun tedavisinde kumar oynama davranışını ortadan kaldırmaya çalışmak yerine, davranışların altında yatan değerlerin ve umutların ele alınmasının önemini vurgulamaktadır. Narrative Terapi'nin kumar oynama bozukluğunda kullanılabileceği ve etkili olduğu gösterilmiştir.

Anahtar Kelimeler: Kumar oynama bozukluğu, Değerler, Umutsuzluk, Psikoterapi, Narrative terapi.

Introduction

Gambling Disorder (GD) is defined as a condition characterized by persistent and recurrent gambling urges that cause clinically significant distress or impairment in functioning (American Psychiatric Association, 2013; Livazović & Bojčić, 2019). This condition adversely affects individuals' financial stability and psychosocial well-being (Potenza et al., 2019). However, the severe consequences of GD on mental health have encouraged researchers to develop various approaches and programs that equip individuals with coping strategies (Petry, 2006; Toneatto & Ladoceur, 2003). In this respect, GD continues to represent both a clinical challenge and an area of therapeutic innovation (Çakıcı et al., 2019).

Recent clinical research on addictions has yielded consistent findings regarding the causes, mechanisms, and effects of addiction, but research into treatment options is still ongoing (Moreira et al., 2024; Guercio, Johnson & Dixon, 2012). Although proven treatments have been identified, personalized, multidisciplinary interventions are more effective than single-dimensional treatments (Yau & Potenza, 2015).

One of the therapies that can be used to combat problematic gambling behavior is Narrative Therapy (NT). Drawing on philosophical theories and focusing on the discourses constructed by language, NT defines a therapeutic relationship and understanding in which the individual is the expert on their own life (Baştemur & Baş, 2021). It does not approach the client's experiences solely as problems but rather defines them as subjects with the power to shape their own life stories (White, 2007).

According to Narrative Therapy, addiction develops as part of an individual's life story, which is shaped by social, cultural, and personal contexts (Morgan, 2000; Ekinci & Tokkaş, 2024). In the narrative therapy approach, the addicted person repeats their addiction story and the mistakes they made within that story so many times that the story of addiction and the associated failure becomes the 'dominant story'. This is because individuals may use addiction as a mechanism to cope with negative xperiences and traumas (Dinç, 2019). NT reframes addiction stories instead of fighting them.

The lack of case studies in the literature that include Narrative therapy applications prompted the preparation of this report. The main aim of this case report is to discuss the role and effectiveness of Narrative Therapy techniques in the process of change in an individual with a gambling disorder. In addition, the study aims to raise awareness and provide a practical roadmap for clinicians to use postmodern approaches as intervention tools in such cases. Given that gambling disorder is a recurring and increasingly significant public health issue, it was deemed important to conduct personalized work, such as values-based approaches (Brand et al., 2024).

Methods and Materials

This study was prepared as a case report and approved by Gaziantep University Social and Human Sciences Scientific Research and Publication Ethics Board (Decision No: E-87841438-302.08.01-707988, Date: 05.09.2025). The client's clinical course, psychotherapy interventions, and psychological evaluations were regularly monitored and analyzed throughout therapy.

During the interview with the client, it was determined that the client met the criteria for "gambling disorder" according to the American Psychiatric Association's (APA) 2013 Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5). According to measurements using standardized assessment tools, the client's Engaged Living Scale (ELS; Işık & Bilge, 2023) score was 19, and the South Oaks Gambling Screen (SOGS; Duvarcı & Varan, 2001) score was 13. These results indicate severe gambling disorder. The data make sense when considered in conjunction with the client's mood, thoughts, and behavior. The treatment process was carried out with supervision and support.

Case Presentation

Patient Information and Clinical Findings

N (nickname initials) is a 25-year-old male university student. He first started betting on sports at the age of 15 and has been gambling online at a problematic level for 4 years. Although he initially stated that he gambled for fun and to be accepted by his friends, he later indicated that he gambled to win back the money he had lost. He sought therapy at his family's request, complaining of intense feelings of not enjoying life and hopelessness, uncontrolled online gambling, and the disruption of his family, school, and life balance due to this behavior. During the first clinical interview with the client, it was determined that his self-care was good, his cognitive functioning was adequate, and his willingness to communicate was low. It was determined that he was in a depressed mood.

He stated that he used to feel excited when he played, but that this was no longer enough for him now, and that he would bet increasing amounts of money to get more relaxation. He stated that he constantly thought about his gambling-related activities, debts, and games he played, and that he could not focus on anything else other than dealing with these thoughts. He stated that he was obsessed with his losses, felt he had to gamble constantly, and ended up playing more as a result. He stated that he had great difficulty continuing his daily life and that he constantly lied to his family and distanced himself from them. It was learned that he could not control his anger due to the troubles he was experiencing, and that he started to harm other people.

The client stated that he felt shame and guilt due to his gambling behavior, lying, and manipulation. This situation was evaluated as a distancing from the values he had adopted, such as “honesty, reliability, family, and loyalty”. In addition, the regret of not being able to continue school was thought to be related to the values of success and competence. He stated that he felt unable to be competent and independent due to debt and legal proceedings. This situation was also considered as moving away from value areas. N stated that he often regretted his actions but did not believe he could change, having lost all hope for the future.

Therapeutic Interventions, Follow-up, and Outcomes

Narrative Therapy (NT)

During the first and second sessions, the therapeutic dialogue centered on the types of gambling in which the client engaged. Discussions addressed the nature of the games, the client’s knowledge about gambling, the games in which he perceived himself as particularly skilled, and the personal rituals (“totems”) he practiced. These conversations were intended to reinforce the client’s sense of being the expert in his own life. Adopting a collaborative stance, the therapist stepped outside traditional hierarchical boundaries to foster a therapeutic alliance.

In the third session, a life chart exercise was conducted with the client. They discussed what was important to them during different periods of their life. Stories related to these periods were explored. According to the NT, life does not consist of a single story; some stories are more dominant than others (Besley, 2002). The work attempted to bring other stories to light. In the 4th to 7th sessions, it was learned that he had been watching pornography for a long time to cope with his desire to gamble, and as a result, he felt more depressed and had more frequent suicidal thoughts. This situation was addressed using the ‘externalization technique’. The aim was for the client to stop seeing the problem as his own and to become someone who struggles with it (Kenndy, 2024). In this way, it becomes easier for him to realize his ability to resist gambling. The focus was on his skills, his years of struggle, and his resilience. The gambling problem was named using concrete language, such as 'something he struggles with, the fog'. This allowed him to distance himself from the problem, which he had identified with as part of his identity, thereby removing it from his personality (Payne, 2000; Russell & Carrey, 2004). As a result, externalization enabled them to move away from guilt and take responsibility for change. In the next few sessions, the effects of the problem, the damage the 'fog' caused in his life, and the obstacles it presented were discussed. Attempts were made to understand the preferred narrative and to learn about the struggles he faced. In sessions 10-12, a ‘re-authoring’ conversation exercise was conducted to discuss what he was able to do and his coping methods. The aim was to enable him to develop other narratives as he made sense of himself and his experiences (Graham, 2014). The problem's weaknesses were emphasized by focusing on the values, dreams, goals, and hopes that undermined gambling's power. With the application, an alternative identity story aligned with the client's core values was constructed to replace the dominant dependent story in the client's life. Thus, N realized that he had preferences regarding his identity and saw the change as a matter of identity preference rather than an obligation. In sessions 12 to 15, themes related to values came to the fore. Alternative story exercises were conducted to move beyond the client's stories of shame and failure (Shumbamhini, 2025). The client sees himself as inadequate and useless because he cannot achieve the position he thought he would attain by making money from gambling. It was observed that his real motivation was not to make money but to suppress the sense of worthlessness he felt when his family learned of his situation. It was learned that this caused him to struggle with his values related to honesty and family. This is because inadequacy and dishonesty are key defining factors for this client. For this reason, the client was assured that honesty was not lost but, on the contrary, was a value waiting to be recovered. As a result, the shame and failure experienced became a functional responsibility, making honesty an accessible identity. To reduce gambling behavior, it was decided to prioritize a value-oriented life over financial results. It was discussed why it is important to harmonize their actions with their own values.

In the following sessions, a 'therapeutic document' was created that recorded the client's own words regarding the values discussed, and it was shared with them. This is an important way to facilitate the development of a rich narrative and to avoid having the words spoken (Fox, 2003). This application aims to embody the values that become more visible with the client. It was used as a reminder during difficult times, so as not to be forgotten amid the stress and hopelessness experienced. It was observed that the document was effective in promoting impulse control, preventing relapse, and reinforcing commitment to values outside the session. In sessions 19 and 20, the intense desire to gamble and the triggering situations were addressed through externalization. The

practice is to ensure that the client does not see the inability to resist the request as a lack of willpower. This internalized situation may prevent resistance against triggers. By externalizing the desire, distance was put between the impulse and the action. Thus, the skills of saying no and stopping were developed. In sessions 21-22, the client's damaged sense of identity and self-image resulting from gambling was attempted to be repaired using the 'life tree' exercise. Alternative narratives were developed using metaphors such as roots, trunk, leaves, and branches. With this practice, the unsuccessful identity dominated by gambling was balanced, hidden resources and values were made visible again, and a solid foundation for identity was created. Thus, the client started to define himself not only as an addict but also as an individual with roots, skills, and a promising future. In this way, the continuity of the motivation for change was ensured. Treatment continued over the next few sessions, discussing what values the client truly cherished, what change meant to them, and what their purpose was, in an effort to enrich their 'landscape of identity'. The answers to these questions were shaped by the client's hopes, values, and intentions. In this context, a 'deconstruction' exercise was used to broaden the client's identity landscape and reduce the influence of the dominant narrative. The aim is to reveal what addiction imposes on the client. Thus, he began to recognize his thoughts and values in relation to impulses. The client expanded his identity by embracing core values like responsibility and family. In the 26th session, the client's mother was invited, and an 'external witness' exercise was conducted. In this session, the mother was asked questions such as what his son meant to her and what made him unique. During this meeting, it was learned that he had diverse interests, high academic achievement, was devoted to his family, and was a professional footballer. With the application, the client's new identity construction was socially visible and approved. He stated that he started to feel honorable again. It also increased his desire to reintroduce things he had previously achieved into his life.

Throughout these sessions, the client stopped gambling after the 10th session, made arrangements regarding his debts, and resumed his interrupted schooling. Although there were instances where he succumbed to the urge to gamble during the process, these situations were analyzed, and coping plans were developed for triggering situations. In the 28th session, the client shared that he now believed he had succeeded in his struggle with gambling, and a 'letter' exercise was conducted for his friends. This is a piece of writing that can be useful to people going through similar processes, which they can reread during difficult times, helping them feel their own strength again. The client shared this letter on the platforms of his choice. Thus, the client internalized his own healing process, contributed to the value of providing social benefit, and increased his intrinsic motivation against the risk of recurrence. The sessions were concluded with a 'ceremony session' attended by his friends and family. However, follow-up sessions are held at specific intervals as needed.

End-of-Treatment Consultations

Measurements taken using standardized assessment tools during the patient's end-of-treatment consultations revealed increased value domains and decreased GD symptoms. In addition, the client has become more effective in dealing with the inability to stop or control themselves, as they expressed.

The client's transformation in the therapy process started with the identification of gambling, which he saw as fully integrated into his self, as a problem that infiltrated and harmed his life. With this, the behavior of turning to gambling again, with the feeling of guilt, decreased. After seeing the consequences of his lying, he put his core values, such as honesty and loyalty, at the center of his life. With his transparency towards his family, the value of an honorable life began to take shape. He stopped seeing money only as a betting tool and started to realize how it could contribute to the value of autonomy. Thus, the values made visible became not only a factor that prevented gambling but also the basic building blocks of the client's new identity.

Discussion

The main purpose of this case presentation is to show how gambling disorder, which has been addressed with various interventions in the literature, can be structured within the framework of Narrative Therapy and to discuss the clinical applicability of this approach. In this framework, the main hypothesis is that Narrative Therapy techniques can enable the construction of a value-oriented identity by distancing from the problem in individuals with gambling disorder. The findings obtained at the end of the process support this hypothesis.

There are several reasons why this case is considered significant: Instead of focusing on the client's gambling behavior, eliciting alternative stories and values has been observed to have a therapeutic effect on gambling. Thus, understanding the client's values and hopes provided insight into their relationship with gambling. At the same time, the study offers detailed insights into how gambling disorder can be addressed within the NT framework. Individuals who gamble are at risk of developing hopelessness (Çavuş, Cıvgın, & Yorulmaz, 2023). This is because gambling causes financial problems, leading to stress and anxiety, and these adverse outcomes can increase hopelessness (Buchanan, McMullin, Baxley, & Weinstock, 2020). Furthermore, gambling can serve as a negative coping mechanism for individuals experiencing distress and unhappiness. Therefore, recognizing this negative coping mechanism, which may contribute to the persistence of GD symptoms, is important (Karadağ & Çokluk, 2025).

The state of hopelessness that gambling individuals fall into due to financial stress and anxiety can be changed through the process of identity and value reconstruction offered by NT. In this direction, the study provides a theoretical and practical example of how a gambling disorder can be transformed within a post-modern approach. The psychotherapeutic approach to GD varies according to the specific needs (Ledgerwood & Petry, 2006). Values guide behavior and can be shaped by the circumstances. In this sense, values are concepts that determine which behaviors and thoughts should be pursued or avoided (Şanver, Sarıtunç, Erakkuş, & Mustafayeva, 2017).

In particular, research on the co-occurrence of addictive behaviors and other mental disorders has focused chiefly on cognitions (Acar & Şaşman Kaylı, 2021; Emond & Marmurek, 2010). However, although studies in this field have shown positive results of NT on different psychopathologies, there are no case presentations for different psychotherapy methods (Banting & Lloyd,

2017). In the presented case, the emergence of hopelessness due to a departure from values, leading to impulsive behaviors such as gambling, represents an important profile of such departure.

In terms of treatment, the NT approach focuses on restructuring the narrative and establishing a healthy distance from negative thoughts and beliefs (Madigan, 2016). NT seeks to help clients understand the elements they place at the center of their lives by working on their values and guiding their behavior accordingly (White & Epston, 1990). While emphasizing the importance of what individuals say about their problems, it can also reveal the fundamental values that guide their behavior (Akbulut, 2020; Baldiwala & Kanakia, 2021). The therapist's emphasis on the values and gains in the addiction story through double listening will contribute to the individual's better self-assessment (Ed. Dinç & Dinçer, 2021). The externalization technique used for this purpose, alternative story discovery interventions, and the identification of strengths and values hold an important place in NT (Morgan, 2000).

While the values, hopes, and resilient behaviors that come to the fore in the case are treated as internal characteristics or schemas across different approaches, in NT, these elements serve as the building blocks of identity construction and an alternative story. Thus, it is thought that the strength of the study lies not only in identifying and revealing values but also in turning them into a preferred identity.

The results obtained in this case presentation show significant parallels with the limited number of case studies in the literature on the effect of Narrative Therapy on addiction. For example, in the literature, while working with the themes of failure and guilt in the narratives of individuals with addiction problems, it has been observed that reconstruction of identity and emphasizing support systems such as family are effective (Nuske, E., & Hing, N., 2013). In addition, the client's story indicates that similar interventions to strengthen individual strengths, such as commitment to goals, are appropriate (Callahan, 2001). In the current case, explanations related to these practices were included.

In addition to these, this case study differs from existing studies in the literature by emphasizing value-oriented transformation in addressing addiction with NT and providing detailed information on the purpose and effectiveness of NT techniques. In addition, this study makes an important contribution to the field in terms of the fact that there is no case presentation in the Turkish literature in which gambling disorder is addressed with NT and clinical results are supported by objective scales. Studying the NT approach and techniques in the context of our country's culture is considered an example of the NT's applicability to future studies.

Conclusion

In conclusion, this case report highlights the clinical effectiveness of shifting the focus from symptom elimination to identity reconstruction in the treatment of gambling addiction. The NT interventions not only resulted in a remission of the client's gambling behavior but also in a shift towards a value-oriented life.

The quantitative and qualitative data obtained throughout the process confirmed that behavioral control was developed, self-efficacy was gained through identity repair, and permanent change was achieved by living in accordance with values.

Narrative Therapy, which facilitates the emergence of relationships among values, hopes, and resistant behaviors (such as gambling), highlights the need for personalized approaches to the individual's accompanying difficulties. Through narrative therapy, the link between hopes, values, and resilient behaviors was made visible, enabling him to realize his alternative stories instead of gambling. Thus, the necessity of personalized and meaning-focused approaches in gambling disorder was demonstrated.

Future longitudinal research will reveal the impact of NT techniques on preventing relapse and the critical role of integrating cultural systems, such as family honor, social integrity, and values, into treatment.

Limitations

Although this study makes important contributions to the literature on gambling disorder and NT in our country, it has sampling limitations, as it was conducted on a single case and is not generalizable to all cases. Furthermore, due to the postmodern and collaborative nature of narrative therapy, the process has progressed through the joint efforts of the therapist and the client. This necessitates interpreting the study's results while taking into account the therapist's clinical skills and theoretical orientation. Therefore, the study's methodology presents certain limitations. Furthermore, while the therapeutic process was ongoing, the impact of external variables in the client's life on the changes observed could not be fully controlled. Additionally, narrative therapy interventions were shaped solely by the client's own cultural narratives. Finally, given the risk of relapse in gambling addiction, sharing the results of longer-term follow-up for the client would be beneficial for future studies.

Declarations

Ethics Committee Approval
Ethics approval was obtained from the Scientific Research and Publication Ethics Committee of Gaziantep University, Turkey (Protocol No. 707988, 05.09.2025).

Consent for Publication
Not applicable.

Availability of Data and Materials
Not applicable.

Competing Interests
The authors declare no competing interests in this manuscript.

Funding Support
Not applicable.

Authors' Contributions
HAD made significant contributions to the study's planning, the case's follow-up, and the report's writing. FT made significant contributions to the interpretation of the data. FT also contributed to the overall writing and proofreading of the manuscript. All authors read and approved the final version of the manuscript.

References

Acar, S., Şaşman Kaylı, D. (2021). Türkiye'de Bağımlılık Alanında Kalitatif ve Karma Yöntemlerle Yapılan Çalışmaların Analizi. *Kıbrıs Türk Psikiyatri ve Psikoloji Dergisi*, 3(1): 37-47. https://doi.org/10.35365/ctjpp.21.1.01

Akbulut, Z. (2020). The use of spirituality in narrative couples and family therapy. *Spiritual Psychology and Counseling*, 5(1), 113-130. https://doi.org/10.37898/spc.2020.5.1.099

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th ed.). American Psychiatric Association Publishing. https://doi.org/10.1176/appi.books.9780890425596.529303.

Baldiwala, J., & Kanakia, T. (2021). Using narrative therapy with children experiencing developmental disabilities and their families in India: a qualitative study. *Journal of Child Health Care*, 26(2), 307-318. https://doi.org/10.1177/13674935211014739

Banting, R., & Lloyd, S. (2017). A case study integrating CBT with narrative therapy externalizing techniques with a child with OCD: How to flush away the Silly Gremlin. A single-case experimental design. *Journal of Child and Adolescent Psychiatric Nursing*, 30(2), 80-89. https://doi.org/10.1111/jcap.12173

Baştemur, Ş., & Baş, E. (2021). Öyküsel terapinin dışavurumcu sanat uygulamaları ile bütünleşmesi. *Psikiyatride Güncel Yaklaşımlar*, 13:146-169. https://doi.org/10.18863/pgy.771319.

Besley, A. C. (2002). Foucault and the turn to narrative therapy. *British Journal of Guidance & Counselling*, 30(2), 125–143. https://doi.org/10.1080/03069880220128010.

Brand, M., Antons, S., Bőthe, B., Demetrovics, Z., Fineberg, N. A., Jimenez-Murcia, S., … Potenza, M. N. (2025). Current Advances in Behavioral Addictions: From Fundamental Research to Clinical Practice. *American Journal of Psychiatry*, 182(2), 155–163. https://doi.org/10.1176/appi.ajp.20240092.

Buchanan, T. W., McMullin, S. D., Baxley, C., & Weinstock, J. (2020). Stress and gambling. *Current Opinion in Behavioral Sciences*, 31, 8-12. https://doi.org/10.1016/j.cobeha.2019.09.004.

Callahan, T. (2001). Alcohol, drugs, and suffering. *Dulwich Centre Journal*, (3&4), 1-8. https://dulwichcentre.com.au/articles-about-narrative-therapy/deconstructing-addiction/alcohol-drugs-suffering/.

Çakıcı, M., Çakıcı, E., Karaaziz, M. & Babayiğit, A. (2019). Kuzey Kıbrıs'ta Sorun ve Patolojik Kumar Üzerine Bir İnceleme. *Kıbrıs Türk Psikiyatri ve Psikoloji Dergisi,* 1(2): 123-128. https://doi.org/10.35365/ctjpp.19.1.15

Çavuş, F., Çıvgın, U. & Yorulmaz, E. (2023). The mediating role of self-esteem in the relationship between impulsivity, shame, and gambling severity. *Cyprus Turkish Journal of Psychiatry & Psychology*, 5(3): 228-238. https://doi.org/10.35365/ctjpp.23.3.05

Dinç, M. (2019). Postmodern terapiler ve bağımlılık. M. Öztürk, K. Ögel, C. Evren, R. Bilici (Ed.), Bağımlılık: Tanı, Tedavi, Önleme içinde (s. 419-429). Türkiye Yeşilay Yayınları. ISBN: 978–6059090483.

Dinç, M., ve Dinçer, E.M. (Eds.). (2021). Narrative terapi uygulamaları Türkiye'de yürütülen bireysel ve toplu çalışmalar. (1. Baskı). Ketebe Yayınları. ISBN: 978-625-7854-25-2.

Duvarcı, İ. ve Varan, A. (2001). South Oaks Kumar Tarama Testi Türkçe formu güvenirlik ve geçerlik çalışması. *Türk Psikiyatri Dergisi*, 12(1), 34-45. https://tr-scales.arabpsychology.com/?p=30827.

Ekinci, N. & Tokkaş, B. G. (2024). A systematic review of narrative therapy. Psikiyatride Güncel Yaklaşımlar - *Current Approaches in Psychiatry*. 2024; 16:58–71. https://doi.org/10.18863/pgy.1256695.

Emond, M.S., & Marmurek, H.H.C. (2010). Gambling-related cognitions mediate the association between thinking style and problem gambling severity. *Journal of Gambling Studies*, 26, 257–267. https://doi.org/10.1007/s10899-009-9164-6

Fox, H. (2003). Using therapeutic documents: a review. *International Journal of Narrative Therapy and Community Work*, (4), 26-36. https://doi.org/10.4320/ywgv7584.

Graham, M. (2014). Narrative therapy for treating video game addiction. *International Journal of Mental Health and Addiction* 12, 701–707. https://doi.org/10.1007/s11469-014-9491-4.

Guercio, J.M., Johnson, T., & Dixon, M.R. (2012). Behavioral treatment for pathological gambling in persons with acquired brain injury. *Journal of Applied Behavior Analysis*, 45, 485-495. https://doi.org/10.1901/jaba.2012.45-485

Işık, H. R. ve Bilge, Y. (2023). Engaged living scale: the study of validity, reliability, and adaptation to Turkish culture. *Journal of Cognitive-Behavioral Psychotherapy and Research*, 12 (2), 145-155. https://doi.org/10.5455/JCBPR.112588.

Karadağ, Ö. M. & Çokluk, G. F. (2025). Kripto Para Alım Satımıyla Uğraşan Bireylerde Kumar Bağımlılığı, Uyku Kalitesi, Depresyon ve Kaygı Arasındaki İlişki. *Kıbrıs Türk Psikiyatri ve Psikoloji Dergisi*, 7 (4), 349-356. https://doi.org/10.35365/ctjpp.25.4.02

Kennedy, H. (2024). Delusions: Seeking epistemic justice for the most unusual of stories. *International Journal of Narrative Therapy and Community Work*, (2), 39–50. https://doi.org/10.4320/LXOK9847.

Ledgerwood, D. M., & Petry, N. M. (2006). Psychological experience of gambling and subtypes of pathological gamblers. *Psychiatry Research*, 144(1), 17-27. https://doi.org/10.1016/j.psychres.2005.08.017

Livazović, G., & Bojčić, K. (2019). Problem gambling in adolescents: what are the psychological, social, and financial consequences?. *BMC Psychiatry*, 19(1), 308. https://doi.org/10.1186/s12888-019-2293-2

Payne, M. (2000). Narrative therapy: An introduction for counselors. London: SAGE Publications. ISBN: 978-1-4129-2012-4.

Petry, N. M. (2006). Substance abuse and gambling disorders: A review of the literature. *Clinical Psychology Review*, 26(3), 288-306. https://doi.org/10.1016/j.cpr.2005.11.003

Potenza, M. N., Balodis, I. M., Derevensky, J., Grant, J. E., Petry, N. M., Verdejo-Garcia, A., & Yip, S. W. (2019). Gambling disorder. Nature reviews Disease primers, 5(1), 51. https://doi.org/10.1038/s41572-019-0099-7.

Russell, S. & Carey, M. (2020). Narrative terapide temel uygulamalar. (İ. Eskioğlu Aydın, Çev.). İstanbul: Kaknüs Psikoloji (Orijinal eserin basım tarihi 2004, 1. baskı). ISBN: 978-975-256-653-8.

Shumbamhini, M. (2025). Healing narratives: A journey of transformation and renewal. *International Journal of Narrative Therapy and Community Work*, (1), 24–35. https://doi.org/10.4320/SHBV2722.

Şanver, M., Sarıtunç, B., Erakkuş, Ö. ve Mustafayeva, L. (2017). Din, ahlak ve değerler eğitimi açısından Türk kültüründeki eğitim anlayışlarıyla farklı/alternatif eğitim anlayışları arasında bir mukayese. *Social Sciences Studies Journal* (SSSjournal), 3(5), 884-893. http://dx.doi.org/10.26449/sssj.126.

Toneatto, T., & Ladoceur, R. (2003). Treatment of pathological gambling: a critical review of the literature. Psychology of addictive behaviors: *Journal of the Society of Psychologists in Addictive Behaviors*, 17(4), 284–292. https://doi.org/10.1037/0893-164X.17.4.284.

Madigan, S. (2016). Naratif terapi (G. Akkaya, Çev.). İstanbul: Okyanus Yayınları (Orijinal eserin basım tarihi 2011, 1. baskı). ISBN: 9786055134976.

Moreira, D., Dias, P., Azeredo, A., Rodrigues, A., & Leite, Â. (2024). A Systematic Review on Intervention Treatment in Pathological Gambling. *International Journal of Environmental Research and Public Health*, 21(3), 346. https://doi.org/10.3390/ijerph21030346.

Morgan, A. (2000). What is narrative therapy? Dulwich Centre Publications. Adelaide. ISBN: 978–0957792906.

Nuske, E. & Hing, N. (2013). A narrative analysis of help-seeking behavior and critical change points for recovering problem gamblers: the power of storytelling. *Australian Social Work*, 66(1), 39-55. https://doi.org/10.1080/0312407X.2012.715656.

Yau, Y. H., & Potenza, M. N. (2015). Gambling disorder and other behavioral addictions: recognition and treatment. *Harvard Review of Psychiatry*, 23(2), 134–146. https://doi.org/10.1097/HRP.0000000000000051.

White, M. (2007). Maps of narrative practice. New York: Norton. ISBN: 978-0-393-70516-4.

White, M., & Epston, D. (1990). Narrative means to therapeutic ends. Dulwich Centre Publications. Adelaide. ISBN: 0-393-70098-4.