

Transitions and Stability of Problem Gambling Behaviours

Report Highlights

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TRANSITIONS AND STABILITY OF PROBLEM GAMBLING BEHAVIORS

Gambling behaviour lies on a dynamic continuum. Some individuals choose not to gamble while other individuals gamble socially or recreationally. Others may have problems with their gambling and experience these problems in varying degrees. Individuals may move forwards or backwards along the continuum over time and movement may include multiple shifts into and out of any given state. While prevalence studies provide a snapshot of the extent of gambling and problem gambling at a certain point in time, they do not capture changes. To date, little is known about transitions in gambling behaviours, and the factors associated with transitions over time.

This longitudinal study makes a significant contribution to the field by examining the dynamic nature of gambling over a one year period to capture important transitions and changes in gambling and the critical underlying conditions to explain transitions and stability in gambling over time. As well, this study seeks to better understand why some people with gambling problems seek help to change their behavior while others do not.

This study explores these questions by examining gambling among two different populations: participants of AFM’s gambling prevalence study and individuals who attended AFM’s Problem Gambling Orientation Session.

Following is a summary of the key highlights from the research. The reader is encouraged to consult the full study for full a detailed discussion of the methodology and findings.

STUDY OBJECTIVES

- To examine the changes in gambling over time
- To gain insight into the predictors of gambling severity
- To examine why people do not seek help for gambling problems

SAMPLES

Sample 1 – General Population Group		Sample 2 – Help-Seeking Group	
<ul style="list-style-type: none"> • Low-risk, moderate risk and problem gamblers from the <i>2006 Manitoba prevalence study</i> • Five data waves at three month intervals 		<ul style="list-style-type: none"> • Individuals concerned about their own gambling who attended <i>AFM’s Problem Gambling Orientation session</i> • Two data waves: first within one month of attending the program, the second three months later 	
Sample Characteristics	Sample Size: 347 participants Gender: 39% Male ; 61% Female	Sample Characteristics	Sample Size: 42 participants Gender: 55% Male ; 45% Female

INFORMATION COLLECTED

Telephone Surveys Measured ...

- Gambling participation
- Problem gambling levels
- Gambling cognitions
- Alcohol consumption
- Drug use
- Personal and mental health
- Perceived social support
- Demographic information

CHANGES IN PROBLEM GAMBLING OVER TIME

General Population

- There is a great deal of movement in gambling levels.
- Of all the participants who were gambling at problem levels at baseline, between 19 and 32% continued to gamble with problems at 12, 24, 36 and 48 weeks later. Another way of looking at it is that between 68 and 81% were gambling at less problematic levels.
- Of all the participants who were gambling at moderate risk at baseline, between 23 and 49% were gambling at moderate or problem levels at 12, 24, 36 and 48 weeks later. This means that between 52% and 77% were gambling at less problematic levels.

Help Seeking Group

- Movement in problem gambling levels was also observed among those who attended AFM's Problem Gambling Orientation Group for problems related to their own gambling.
- By the time of the first assessment, which occurred after the start of the Orientation Group, 17% were non-gamblers and 17% were non-problem or low risk gamblers, likely reflecting rapid improvement.
- After three months, 52% were non-gamblers, 19% non-problem or low risk gamblers, 10% moderate risk and 19% problem gamblers.
- Of those who were gambling at moderate-risk at first contact, 40% continued to gamble at moderate risk, none were gambling at problem levels and 60% were gambling at less problem levels.¹
- Of those who were gambling at problem levels at first contact, 30% continued to gamble at problem levels 3 months later; 70% had moved to less problematic levels.

¹ It was not always possible to contact a program participant immediately after the session; all were contacted within one month. Some participants had already reduced their gambling by the time of first contact.

PREDICTORS OF PROBLEM GAMBLING

General Population

- The main reasons participants give for significant increases in the time and money spent gambling are personal, work and financial issues.
- An individual's perceived inability to stop gambling was consistently related to problem gambling and faster improvement.
- Other variables including depression, illicit drug abuse, and alcohol abuse were also related to problem gambling, some in a very unique way. For instance, whereas depression and illicit drug abuse predicted higher levels of gambling problems, they were also associated with a faster rate of decline of problem gambling in the longer term. Alcohol abuse, on the other hand, was only related to higher initial levels of problem gambling. These findings suggest that problem gambling and alcohol abuse are associated behaviours, whereas problem gambling, illicit drug abuse and depression are incompatible over the long term.

Help Seeking Group

- 92% of the general population group said that they would seek help if they were concerned about their gambling. Most (75%) were aware of the helpline and 38% were aware of problem gambling counseling services. However, only 13% of those with gambling problems ever used either service.
- Among the help-seeking group, 66% attended counseling following Orientation, most commonly three sessions.
- A comparison of problem gamblers from the general population with the help-seeking group revealed a number of important differences:
 - The help-seeking group was much more likely to report that gambling had caused personal or household financial problems (46% vs. 14%).
 - The help-seeking group was much more likely to report feeling guilty about the way they gambled (57% vs. 14%).
 - The help-seeking group was more likely to have family and friends actively supporting a reduction in gambling involvement.
 - The help-seeking group had a significantly higher proportion of people who drank at harmful levels (88% vs. 19%).
 - A higher proportion of the problem gambling group from the general population exhibited some level of drug abuse (19% vs. 5%).

KEY CONSIDERATIONS

- Problem gambling is a changeable condition and underlying factors may occupy a more complex role than previously thought.
- Participants from both the general population and help-seeking group identify personal, financial and work issues and the main reason for significant increases in time and money spent gambling. Clearly, these are important risk factors.
- Feeling unable to stop gambling occupies a significant role in responses to gambling problems, suggesting that notions such as self-efficacy and self-empowerment play important, even crucial, roles in problem gambling recovery.
- There is evidence from the treatment sample for rapid early improvement in gambling problems.
- Gamblers may be more likely to seek help when they feel their problems have been compounded by alcohol use.
- While individuals “self recover” from gambling problems, it is possible that underlying conditions remain, particularly depression and in some cases illicit drug abuse.

IMPLICATIONS

- Belief in the ability to change is critical. How can feelings about one’s ability to stop gambling be targeted to enhance the effectiveness of treatment and maintenance of recovery from problem gambling? Can rates of treatment-seeking be increased with messages that reflect optimism about the possibility of change?
- Understanding the complex relationships between problem gambling and depression, alcohol abuse and illicit drug abuse particularly in terms of help-seeking behaviours.
- Rapid early improvement in gambling problems has not yet been studied although the “sudden gains” phenomena have garnered interest in substance abuse and mental health disorders. Early change in drinking and eating disorders has been found to predict longer term positive outcome. This area requires further investigation and has important implications for how we structure our treatment services with quick and easy access prioritized. Services such as Orientation groups that offer brief motivation and support are invaluable components of a broader treatment system.
- The large variability in the course of gambling problems suggests that one component of the treatment system should be structured to provide ongoing and long-term access to brief support in order to minimize episodic problem gambling.