



## Short Communication

# The impacts of problem gambling on concerned significant others accessing web-based counselling



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## HIGHLIGHTS

- CSOs of gamblers frequently access the Australian web-based counselling site
- CSOs were mostly young intimate partners who accessed the site after hours
- Emotional distress, relationship, social life and finances were most common
- Family members reported similar impacts but friends reported lower impacts
- The findings can inform the development of web-based interventions for CSOs

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## ABSTRACT

The ‘concerned significant others’ (CSOs) of people with problem gambling frequently seek professional support. However, there is surprisingly little research investigating the characteristics or help-seeking behaviour of these CSOs, particularly for web-based counselling. The aims of this study were to describe the characteristics of CSOs accessing the web-based counselling service (real time chat) offered by the Australian national gambling web-based counselling site, explore the most commonly reported CSO impacts using a new brief scale (the Problem Gambling Significant Other Impact Scale: PG-SOIS), and identify the factors associated with different types of CSO impact. The sample comprised all 366 CSOs accessing the service over a 21 month period. The findings revealed that the CSOs were most often the intimate partners of problem gamblers and that they were most often females aged under 30 years. All CSOs displayed a similar profile of impact, with emotional distress (97.5%) and impacts on the relationship (95.9%) reported to be the most commonly endorsed impacts, followed by impacts on social life (92.1%) and finances (91.3%). Impacts on employment (83.6%) and physical health (77.3%) were the least commonly endorsed. There were few significant differences in impacts between family members (children, partners, parents, and siblings), but friends consistently reported the lowest impact scores. Only prior counselling experience and Asian cultural background were consistently associated with higher CSO impacts. The findings can serve to inform the development of web-based interventions specifically designed for the CSOs of problem gamblers.

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## 1. Introduction

The gambling problem of one individual has direct negative effects on many ‘concerned significant others’ (CSOs) (Kalischuk, Nowatzki, Cardwell, Klein, & Solowoniuk, 2006). Although most available research

is based on intimate partners and children, there is limited evidence that other CSOs, such as parents, grandparents, friends, employers and colleagues, are also affected, although possibly to a lesser extent (Kalischuk et al., 2006; Patford, 2007). International empirical evidence suggests that the CSOs of problem gamblers experience intimate relationships and family environments characterised by low satisfaction, conflict, deficient interpersonal communication, and confusion of roles and responsibilities (Dowling, Smith, & Thomas, 2009; Hodgins, Shead, & Makarchuk, 2007; Kalischuk et al., 2006). There is also evidence that the intimate partners and children of problem gamblers

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experience impaired emotional and physical health and high rates of maladaptive behaviours (Hodgins, Shead, et al., 2007; Vitaro, Wanner, Brendgen, & Tremblay, 2008; Wenzel, Oren, & Bakken, 2008).

Several studies have explored the most common issues for the CSOs of problem gamblers. The most common issues for face-to-face treatment-seeking CSOs in an Australian study were relational, followed by intrapersonal, family, and financial issues (Crisp, Thomas, Jackson, & Thomason, 2001). Exploration of a Norway population database found that the most commonly reported effects of gambling by CSOs were family conflict and worsening family financial situations, followed by reduced physical health, reduced mental health, and less contact with family and friends (Wenzel et al., 2008). A New Zealand study found that professional help-seeking for CSOs was motivated by financial problems, followed by emotional factors, wanting to prevent the gambling from becoming a major problem, isolation from friends and family, and problems with spouse or partner (Bellringer, Pulford, Abbott, DeSouza, & Clarke, 2008). An Australian study of telephone help-seeking CSOs revealed that they were motivated to seek help because of concerns that the gambling might develop into a major problem, negative emotions, problems in maintaining normal daily activities, concerns about the welfare of dependents, and physical health concerns (Hing, Tiyce, Holdsworth, & Nuske, 2013). Although few studies have investigated factors associated with different types of CSO impact, there is some evidence that male CSO gender is associated with financial impacts (Crisp et al., 2001), higher emotional consequences, negative gambler consequences, and gambling problem severity are associated with CSO relationship dissatisfaction (Hodgins, Shead, et al., 2007), and a spousal relationship, young CSO age, and emotional and behavioural consequences are associated with CSO psychological distress (Hodgins, Shead, et al., 2007).

Given the symptoms experienced by CSOs, it is not surprising that they frequently seek counselling. Internationally, CSOs comprise up to one-third of clients presenting to gambling face-to-face treatment agencies (Crisp et al., 2001; Productivity Commission, 2010), helplines (Clifford, 2008; Griffiths, Scarfe, & Bellringer, 1999), and web-based services (Rodda & Lubman, 2013; Rodda, Lubman, Dowling, & McCann, 2013; Wood & Griffiths, 2007). Despite these high rates of help-seeking, there are few empirical investigations of CSO characteristics. The available literature suggests that treatment-seeking CSOs are more likely to be females aged between 30 and 65 years of age (Crisp et al., 2001; Hing et al., 2013; Wood & Griffiths, 2007). There is, however, evidence from a community-recruited sample that female gender, young age, city residence, and divorce are associated with CSO status (Wenzel et al., 2008).

It has been suggested that most CSOs will engage in lower intensity interventions, such as self-help telephone or online support (Hing et al., 2013). Indeed, recent research involving family and friends accessing an Australian web-based program found this modality attractive due to its potential for anonymity, discreteness and ease of access (Rodda, Lubman, Dowling, & McCann, 2013). To date, however, there is no information available exploring this group of help-seekers. The aims of this study were to describe the characteristics of CSOs accessing web-based counselling offered by the Australian national web-based counselling site, explore the most commonly reported CSO impacts using a new brief scale (the Problem Gambling Significant Other Impact Scale: PG-SOIS), and identify the factors associated with different types of CSO impact.

## 2. Method

### 2.1. Participants and procedure

The sample comprised all CSOs accessing the web-based counselling (chat) service offered by the Australian national site Gambling Help Online between December 2010 and September 2012 ( $n = 366$ ). Web-based counselling is offered as real time chat, without an appointment and via any internet enabled device. Excluding repeat sessions and

contact not enquiring about their own or a CSO's gambling problem (e.g., administrative enquiries, students, professionals, venue workers), approximately 83% of clients accessing the real time chat and email support service did so in relation to concerns about their own gambling, with the remaining 17% contacting the service in relation to the gambling of a CSO (Rodda & Lubman, 2013). Ethics approval was granted from the University of Melbourne's Human Research Ethics Committee (ID: 1034028) and the Victorian Department of Justice's Human Research Ethics Committee (JHREC) (ID: CF/10/17108).

### 2.2. Measures

There are currently no published measures to evaluate the impact of problem gambling on CSOs. Measures that assess CSO impact for substance use disorders (Kirby, Dugosh, Benishek, & Harrington, 2005; Orford, Templeton, Velleman, & Copello, 2005) have not been adapted for use with the CSOs of problem gamblers and comprise too many items for brief screening. The six-item Problem Gambling Significant Other Impact Scale (PG-SOIS) (Appendix 1) was therefore specifically developed for use by the chat counselling service. In the substance use measures and problem gambling research, CSO impact is generally described and evaluated across six broad domains of functioning: financial, emotional distress, interpersonal relationship, social life, employment, and physical health (Crisp et al., 2001; Dowling et al., 2009; Hodgins, Shead, et al., 2007; Kalischuk et al., 2006; Kirby et al., 2005; Orford et al., 2005). The substance use measures tend to use a current version with a multiple frequency response format. The PG-SOIS was therefore designed to evaluate the degree of impact across the six areas of functioning in the previous three months using a frequency response format from (0) *Not at all* to (3) *Often*. Given the scarcity of problem gambling CSO research, it was intended that this scale be analysed in terms of each domain.

Single items employing drop-down responses were administered before participants undertook a web-based counselling session. These included gender, age group, postcode, cultural background, gambling activity of concern, preferred mode of gambling (e.g., telephone, venue, online), relationship to the gambler (e.g., self, partner, parent), previous gambling counselling experience, and mode of previous counselling (e.g., face-to-face, telephone, chat, email). The time of day the web-based counselling service was accessed was also collected.

### 2.3. Data analysis

There was no missing data as participants were required to answer all items. Descriptive statistics were employed to describe the characteristics of CSOs and problem gambling impacts. Because of the ordinal and negatively skewed nature of the PG-SOIS data, a series of non-parametric tests (independent samples Mann-Whitney tests and Spearman's correlations) were employed to explore the factors associated with each CSO impact domain.

## 3. Results

As indicated in Table 1, participants were most often intimate partners who identified their cultural background as Australian. Most were female and under 40 years of age. They represented all Australian states and territories and approximately two-thirds accessed the service outside of traditional business hours. Although most participants indicated that the current session was the first time that they had accessed counselling about the gambling problem, participants with counselling experience had previously accessed both face-to-face (56.0%) and telephone counselling (44.0%). Most participants were concerned about electronic gaming machines (EGMs). Although a significant proportion of participants could not identify the preferred mode of gambling, over half stated that the preference of the gambler was to gamble in a venue such as a hotel, club or casino.

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