

# Brief Interventions: Helping Redefine Treatment for Problem Gamblers and Their Families

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# What is a brief intervention?

- Less-intensive treatment tool
  - a therapeutic approach
- Motivational Interviewing:
  - “A directive client-centred method for enhancing intrinsic motivation to change by exploring and resolving ambivalence.”  
(Miller & Rollnick 2002)

# A brief intervention is also an....

- Early intervention tool - opportunistic

“Screening typically involves responding to a series of brief, often self-administered, questions for people not in gambling treatment to determine if they may have the disorder. By screening groups of asymptomatic people in the community or health care settings, health care professionals try to identify the problem or disorder so that early intervention is possible.” (Korn & Shaffer 2004)

# New Zealand Brief and Early Intervention Studies

## ● Youth Study 2001

- of over 500 students one in five were identified as at risk for problem gambling

## ● Mangere Health Resources Trust Gambling Project 2004

- of 1580 patients 18% had been affected by another's gambling and 7.5% were identified as problem gambling

## ● Maori Health Services Project 2004

- high levels of gambling harm were identified from 792 participants receiving health and lifestyle interventions

# NZ B&E Intervention Studies continued...

- **Salvation Army Foodbank Study 2004**
  - of 1,291 participants 13% in Auckland and 17% in Chch identified for problem gambling and 21.4% had been affected by another's gambling
- **Community AOD Project 2005**
  - of 395 AOD clients the level of problem gambling was one in eight
- **A national Gambling Screening Training Project 2007**
  - B&E training provided to 883 social service and allied health providers with increased integration, screening and referral outcomes
- **DHB Project 2007/08**
  - Maori and Pacific focus in Auckland
  - consumer leaders



# Study Outcomes

- problem identification confirmed in high risk populations
- minimal resistance to be screened
- selective vs general screening
- barriers for non-specialist services
- the need for innovations in service provision

# Concerned Others Gambling Screen (COGS) Sean Sullivan

- Do you think you have been affected by someone else's gambling?
  - a. Don't know for sure
  - b. Yes, in the past
  - c. Yes, that's happening to me now
  - d. No, never
- How would you describe the effect of that person's gambling on you now?
  - a. I'm uncertain
  - b. I worry about it sometimes
  - c. I am nervous about it
  - d. It is affecting my health
  - e. It is hard to talk with anyone about it
  - f. I am concerned about my, or my family's, safety
  - g. It doesn't affect me any more
- What would you like to happen?
  - a. I would like some information
  - b. I would like to talk about it in confidence with someone
  - c. I would like some support or help
  - d. Nothing at this stage

# EIGHT Screen

Sean Sullivan

1. Sometimes I've felt depressed or anxious after a session of gambling  
A. Yes, that's true                      B. No, I haven't
2. Sometimes I've felt guilty about the way I gamble  
A. Yes, that's so    B. No, that isn't so
3. When I think about it, gambling has sometimes caused me problems  
A. Yes that's so                      B. No, that isn't so
4. Sometimes I've found it better not to tell others, especially my family,  
about the amount of time or money I spend gambling  
A. Yes, that's true    B. No, I haven't
5. I often find that when I stop gambling I've run out of money  
A. Yes, that's so                      B. No, that isn't so
6. Often I get the urge to return to gambling to win back losses from a past  
session    A. Yes, that's so                      B. No, I haven't
7. Yes, I have received criticism about my gambling in the past  
A. Yes, that's true                      B. No I haven't
8. Yes, I have tried to win money to pay debts    A. Yes, that's true                      B. No, I  
haven't

# Benefits of Brief and Early Interventions

- detection at earlier stages of problem and requires less intrusive interventions
- addresses barriers to help-seeking for problem gamblers (AUT project 2007)
- identifies affected family/whanau and their intervention requirements
- overall better matching prevalence needs
- a non-specialist in-house approach will benefit both the client and the organisation

# Preventing and Minimising Gambling Harm: MOH Strategic Plan until 2010

## Current Framework (Public/Mental Health Model)

- Primary Prevention - public health initiatives by specialist services
- Secondary Prevention – brief and early interventions by specialist treatment services and pilot community projects
- Tertiary Prevention – specialist treatment services (face to face/Helpline)

# Future Strategic Plan Considerations

- more emphasis needed on whole-of-government approach - currently relying on enthusiastic supporters (MOH/MOJ initiative)
- looking beyond a single all-inclusive option for secondary and tertiary intervention services
- Redefining tertiary intervention services
- conceptual frameworks of treatment provision need to set levels of intervention rather than dictate the makeup of the provider



# Innovative Intervention Models in the Addictions Field

- **Oregon's Problem Gambling Services:** Public health orientation in a stepped-care approach (2003)
  - County government funds are available for prevention and outreach activities
  - Outreach activities include case finding among high-risk populations
  - A stepped-care approach to treatment delivery: level .05 telephone sessions, level I outpatient, level II crisis-respite



# Innovative Intervention Models (Addiction)

## ● **National Models of Care for Alcohol Misusers** (Dept of Health, London 2006)

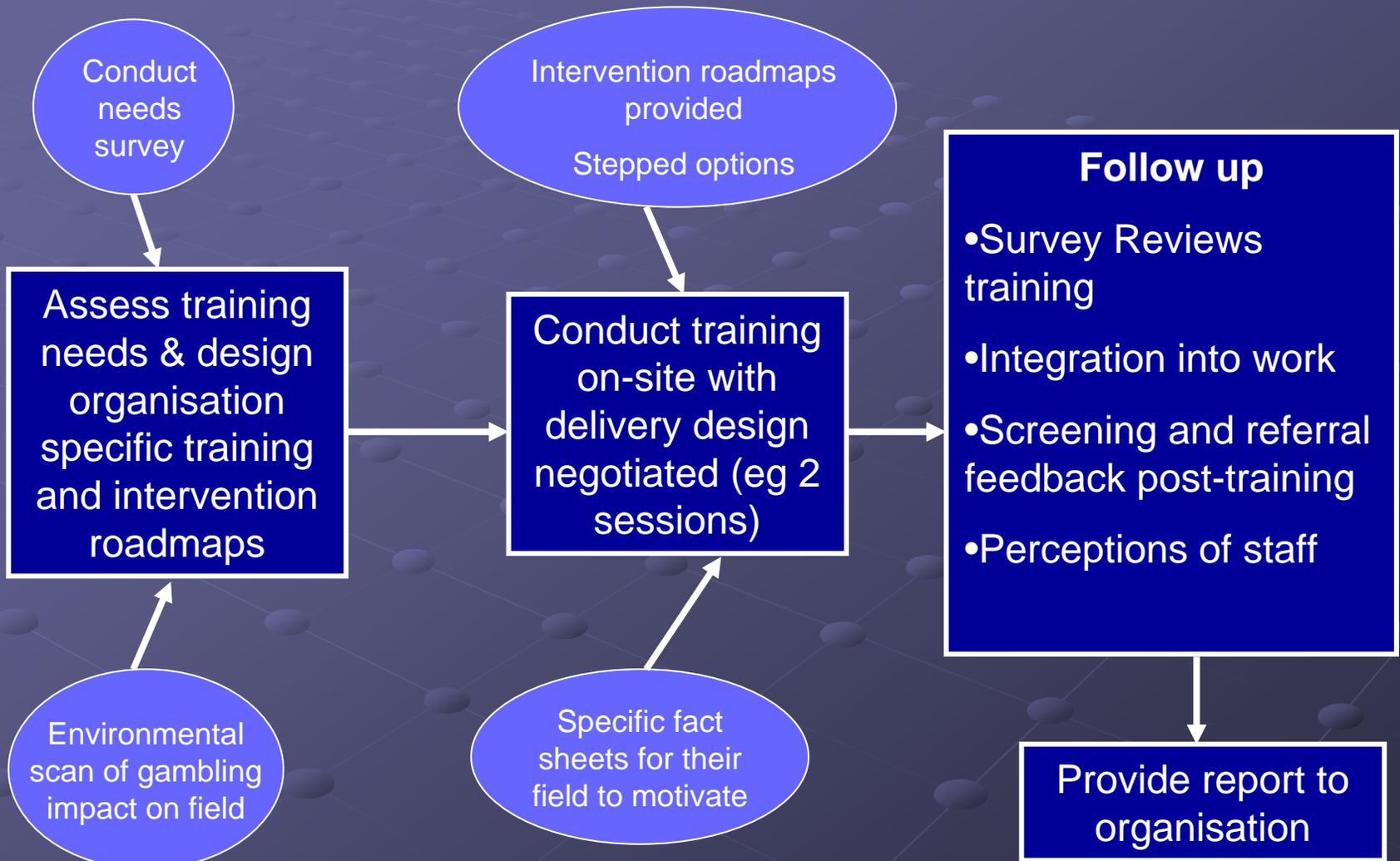
a four-tiered conceptual framework of treatment provision that offers the opportunity to integrate local treatment systems

- **Tier One:** B&E interventions most appropriate for wide range of agencies
- **Tier Two:** interventions offering extended alcohol-specific brief interventions in an open-access non-care-planned environment in settings where an alcohol worker with basic competencies would be available
- **Tier Three:** Specialist Outpatient Interventions
- **Tier Four:** Specialist Inpatient interventions

# Future Consideration: A model offering a menu of intervention provisions

- **Primary Prevention:** public health initiatives by specialist services and wider community
- **Secondary Prevention** – brief and early interventions by specialist treatment services and non-specialist services with pg workers available in high risk services
- **Tertiary Prevention** – specialist treatment services offering stepped care approaches

# Abacus Training Model



# Conclusion

- Waiting for clients affected by problem gambling to present appears to be no longer an option
- Reaching out to opportunities can have substantial positives for both providers and future clients
- Look to innovations within AOD treatment provision (DHBs, consumer leaders, MOH/MOJ initiative)
- Workforce development implications including cultural competencies need to be considered

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