HELP-SEEKING BEHAVIOURS AMONG WOMEN GAMBLERS: FROM A CROSS-SECTIONAL POPULATION SURVEY IN QUEBEC, CANADA

Adèle Morvannou, PhD, Postdoctoral fellow / psychologist, addiction centre
Sylvia Kairouz, PhD, Professor
Research Chair on Gambling
Concordia University

September 12th 2018
12th European Conference on Gambling Studies and Policy Issues
Malta
Aims

- Do women gamblers know and use the help services?
- How do help seeking behaviours and gambling problems evolve through time in women gamblers?
Québec and gambling

- Canada: CA$ 17.3 billion in 2017
- Québec: second-largest revenue (CA$3.6 billion - casinos, lotteries, and online gambling)
- Prevalence: 66.6% gambled the last year (64.1% women gambled)
- Most of them gamble with few or no consequences
- Up to 1.8%* (~115 000) of Quebecois suffer from a gambling problem (2.2% women gamblers)
- Professional help services have been established by government

* PGSI: moderate risk + problem gamblers
Services in Québec

■ Prevention
  - 2 information and referral services
    ■ Website
    ■ Helpline
      - Between 2014-2015: 12,500 calls
      - Majority of men, but number of women callers increasing

■ Treatment services
  ■ in all regions of Québec
  ■ 327 people showed up for gambling related issues
  ■ numbers below expectations
  ■ no data according to gender

http://www.jeu-aidereference.qc.ca/www2/Article/34/fr/historique-et-mission;
Gender impacts help-seeking behaviour

■ Help-seeking problem gamblers remain a minority: they represent 3 to 12% of all problem gamblers (formal treatment or Gamblers Anonymous meetings) ¹

■ Women may be more likely to seek help ²

 – Ex. Helpline frequentation: males 38% < females 53% ³

■ Compared to male gamblers, women more often accepted a referral to additional treatment, but were less likely to attend the appointment ⁴

■ Women are more likely than men to attribute avoidance of GA to inconvenience, often associated with the location of meetings ⁵. They are also more likely to deny the problem and express a wish to continue gambling activities ⁶

■ Women gamble for different motivations, and gambling has various impacts based on gender roles ⁷ = different implications for treatment plans and suitability ⁸

Women are more likely than men to seek help (depending on services) but not all women do, and they encounter different barriers.

¹ Slutske, 2006; ² Productivity Commission 2010; ³ Ledgerwood et al., 2012; ⁴ Weinstock et al., 2011; ⁵ Suurvali et al., 2012; ⁶ Volberg et al. 2006; ⁷ McMillen et al. 2004; ⁸ Gainsbury et al., 2014
Methods

Conducted in 2009 with a random sample of adults, representative of the population in Quebec \(^1\) (n= 11,888 respondents), response rate= 52.5%

At the end of the survey interview, based on the PGSI \(^2\), we invited to participate in the follow-up study:

- all problem gamblers \(^3\),
- all moderate-risk gamblers \(^4\)
- all low-risk gamblers \(^5\)
- a random sample of non problem gamblers \(^6\)

\(^1\) From a general population survey, ENHJEU-Québec ; Kairouz & Nadeau, 2014; \(^2\) Ferris & Wynne, 2001; \(^3\) PGSI score of 8 and over, n = 60; \(^4\) PGSI score between 3 and 7, n = 138; \(^5\) PGSI scores of 1 or 2, n = 262; \(^6\) PGSI score of 0, n=54
Study samples

179 gamblers
(n=90 women)

n = 77 (85.6%)

n = 73 (94.8%)

Survey

Wave 1

Wave 2

Wave 3

0

4 weeks

12 months

24 months

Time

Waves

Retention
Measures

• PGSI (9 items – categories)
• Awareness: ‘Have you ever heard of...’
• Use
  - website: ‘Have you already sent a support request...’
  - helpline: ‘Have you already called...’
  - treatment services: ‘Have you ever consulted...’
  - other services (Gamblers Anonymous, Doctor, psychologist, social worker etc...)
Socio-demographic profile (Wave 1)

<table>
<thead>
<tr>
<th>WOMEN GAMBLERS n=90</th>
</tr>
</thead>
<tbody>
<tr>
<td>INCOME (CAN$)</td>
</tr>
<tr>
<td>Less than 40 000</td>
</tr>
<tr>
<td>40 000 - 59 999</td>
</tr>
<tr>
<td>60 000 +</td>
</tr>
<tr>
<td>AGE (years)</td>
</tr>
<tr>
<td>18-34</td>
</tr>
<tr>
<td>35-54</td>
</tr>
<tr>
<td>55 +</td>
</tr>
<tr>
<td>BORN IN CANADA</td>
</tr>
</tbody>
</table>
## Gambling profile (Wave 1)

<table>
<thead>
<tr>
<th>WOMEN GAMBLERS n=90</th>
<th>PARTICIPATION</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>lottery</td>
<td></td>
<td>98.9</td>
</tr>
<tr>
<td>slots machines</td>
<td></td>
<td>42.2</td>
</tr>
<tr>
<td>bingo</td>
<td></td>
<td>32.2</td>
</tr>
<tr>
<td>VLT</td>
<td></td>
<td>24.4</td>
</tr>
<tr>
<td>keno</td>
<td></td>
<td>4.4</td>
</tr>
<tr>
<td>cards</td>
<td></td>
<td>3.3</td>
</tr>
<tr>
<td>casino</td>
<td></td>
<td>8.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MEDIAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>FREQUENCY OF GAMBLING (nb of plays) *</td>
</tr>
<tr>
<td>MONEY SPENT (CAN$) *</td>
</tr>
</tbody>
</table>

* during the 12 last months
Observations < n=5 are not showed (i.e., gamble at: Internet, table, poker, sports, games of skills, investments)
Awareness of services depending on the PGSI category

Data collected at Wave 1
Use of services depending on the PGSI (Wave 1)

<table>
<thead>
<tr>
<th>Risk Category</th>
<th>Services Used</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low risk</td>
<td>No services</td>
<td>23</td>
<td>70.0%</td>
</tr>
<tr>
<td></td>
<td>Doctor</td>
<td>3</td>
<td>9.1%</td>
</tr>
<tr>
<td></td>
<td>Social worker</td>
<td>1</td>
<td>3.0%</td>
</tr>
<tr>
<td></td>
<td>Psychologist</td>
<td>1</td>
<td>3.0%</td>
</tr>
<tr>
<td></td>
<td>Gamblers anonymous</td>
<td>3</td>
<td>9.1%</td>
</tr>
<tr>
<td></td>
<td>Treatment centers</td>
<td>5</td>
<td>15.2%</td>
</tr>
<tr>
<td></td>
<td>Web sites</td>
<td>1</td>
<td>3.0%</td>
</tr>
<tr>
<td></td>
<td>Phone line</td>
<td>3</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

Note. One gambler could have used more than one service.
Use of services depending on time among low risk gamblers

Note. * during the last 12 months; attrition n=4 at wave 2 and wave 3, all of them did not use services
Use of services depending on time among moderate risk gamblers

<table>
<thead>
<tr>
<th>Participant</th>
<th>Wave 1</th>
<th>Wave 2</th>
<th>Wave 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n=13/18</td>
<td>n=15/16</td>
<td>n=12/14</td>
</tr>
<tr>
<td>participant a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>participant b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>participant c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>participant d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>participant e</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Those who did not use at least one service *

Those who used services

Note. * during the last 12 months; attrition n=2 at wave 2 and n=4 at wave 3, all of them did not use services at wave 1.
Use of services depending on time among problem gamblers

Note. * during the last 12 months; attrition n=4 at wave 2 and n=5 at wave 3, represented by the white colour
Evolution of the PGSI among those who continued to use services across time

Low risk at wave 1

0 participants continued

LEGEND
- Increase PGSI cat.
- Decrease
- Stability
- no problem
- low risk
- moderate risk
- problem

No services
Doctor
Social worker
Psychologist
Gamblers anonymous
Treatment centers
Web sites
Phone line
16
Evolution of the PGSI among those who used services but stopped

<table>
<thead>
<tr>
<th>Wave 1</th>
<th>Wave 2</th>
<th>Wave 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low risk</td>
<td>Increase PGSI cat.</td>
<td>Decrease</td>
</tr>
<tr>
<td>Moderate risk at wave 1</td>
<td>Stability</td>
<td></td>
</tr>
<tr>
<td>Problem at wave 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. 3 were excluded because of attrition

**LEGEND**
- Increase PGSI cat.
- Decrease
- Stability
- No services
- Doctor
- Social worker
- Psychologist
- Gamblers anonymous
- Treatment centers
- Web sites
- Phone line

---

17
Evolution of the PGSI among those who never used services

- Low risk at wave 1
- Moderate risk at wave 1
- Problem at wave 1

Legend:
- Increase PGSI cat.
- Decrease
- Stability

- no problem
- low risk
- moderate risk
- problem

Note: 4 were excluded because of attrition
Note: 2 were excluded because of attrition

n=5/33
Discussion

■ Next steps for research: investigating the obstacles met by some women gamblers—particularly those who remain problem gamblers and discontinue service use, and those who do not use services at all. Qualitative research could yield a better understanding of women’s lived experience.

■ Ultimately, results show that this group of women gamblers is quite heterogeneous when it comes to help seeking behaviours. The lack of available data about them calls for more research.
Thank you...

- Research Chair on gambling
Références (à faire)

- Ministère de la santé et des services sociaux (2002). *Plan d’action gouvernemental sur le jeu pathologique 2002-2005*

Use of services depending on the PGSI (Wave 1)

Number of times services were used during the last 12 months

- Average number of times services were used
  - All gamblers (n=90)=0.43
  - Gamblers who use services (n=17)=2.29 (min=1; max=5)
- Most popular: Gamblers Anonymous > phone line > treatment centers
- Higher PGSI scores:
  - Use services more frequently
  - Use more diverse services

Note. One gambler could have used more than one service