



Gambling and Debt Pathfinder Study

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Executive Summary

About the Study

The Gambling and Debt pathfinder study was funded by GamCare and the Money Advice Trust, and supported by the Salvation Army.¹ This study critically examines the nature of the relationship between gambling and debt. This has been achieved by investigating the wider social issues associated with gambling-related debt in order to understand the strategies used by individuals and families coping with gambling-related debt and exploring the help-seeking strategies employed by problem gamblers and debtors.

The need for a study of the relationship between gambling and debt was recognised independently by GamCare and the Money Advice Trust (MAT). The research was supported by the Salvation Army; the largest non-statutory provider of social care services in the UK. The Salvation Army's involvement was particularly valuable in facilitating the participation of homeless people in this research. The research team have also benefitted greatly from the knowledge, support and advice of Geoffrey Godbold (when Chief Executive of GamCare), Eileen Kinghan (GamCare) and Jim Fearnley (Money Advice Trust). Our thanks go to these and to all who have helped make this study possible through their participation.

¹ **GamCare**, a registered charity, is the leading national authority on the provision of advice, practical help, support and counselling in addressing the social impacts of gambling. **The Money Advice Trust (MAT)** is a registered charity formed in 1991 to increase the quality and availability of free, independent money advice in the UK with a vision to contribute to reducing unmanageable debt amongst UK consumers. **The Salvation Army** was established in 1865 as a church and registered charity and is now one of the largest and diverse social providers in the UK after the government. The Salvation Army is funded through donations from its members, the general public and, where appropriate, local authority and government grants.

Overview of Research Methods

A mixed-methods approach was adopted over a twelve-month period and included the following data collection approaches:

- ◆ A survey was designed to ascertain levels of awareness of gambling and debt support services and to establish a preliminary understanding of the links between gambling, expenditure and debt. A control group completed this survey and 246 were returned.
- ◆ 173 Gambling and Debt scoping surveys were completed with a non-control group, consisting of individuals who have current or previous gambling or debt problems to establish key indicators of indebtedness, types of gambling behaviours and typical help seeking pathways.
- ◆ 18 in-depth, semi-structured interviews were conducted. Seventeen interviews were conducted with problem gamblers and problem debtors at various stages of the help-seeking process. An additional interview was conducted with a family member of a problem gambler. The interviews explored participants' experiences of gambling-related debt, problem management and help seeking behaviours.
- ◆ 3 in-depth, semi-structured interviews were undertaken with representatives from the credit and banking industry to establish an overview of the working protocols for managing individuals presenting with problem gambling and debt.
- ◆ 2 regional focus groups were conducted with gambling counsellors, debt advisors, healthcare professionals, representatives of the gambling industry and problem gamblers. The focus groups were designed to explore the ways in which problem gambling and debt is understood and approached in advice and help settings, to consider the practical application of socially responsible gambling in the context of debt and establish priorities for the future.
- ◆ Case study analysis was undertaken of the GamCare Users Forum, moneysavingexpert.com and debt.co.uk examining data over the last 24 months. The comments provided insight into the daily lives and experiences of problem gamblers including gambling-related debt impacts, typical help-seeking behaviours and levels of debt for forty individuals with gambling problems. This aspect of the research was undertaken by Karen Grieg (Manchester Metropolitan University) and Andrew Thomas (University of Wales).

Key Terms

Problem gambling: Repeated episodes of gambling which the individual is progressively unable to resist and which dominate their life to the detriment of their social, occupational, material and family values and commitments.²

Life-course debt: This term is applied where an individual is a non-gambler or only gambles sporadically. Such individuals have problem debt that has occurred as a result of life events such as redundancy, divorce or death of a significant other.

Gambling-related debt: This term is applied where a significant proportion of debt is said by an individual to have occurred as a result of gambling behaviour. This can be directly or indirectly incurred debt. Directly incurred gambling-related debt occurs where money is spent directly on gambling activity, leading an individual into debt. Indirectly incurred gambling-related debt occurs when an individual, having spent money on gambling, then falls into debt as they cannot meet other financial commitments.

Holistic: This term is used to suggest approaches to treatment that are integral and inclusive of the whole person, in which one's entire well-being is considered, incorporating physical, emotional, spiritual, mental, social and environmental factors.

Problem Debt/Over-indebtedness: This is a contested area with a range of definitions and indicators in use. One measure that is often adopted is that designed by Elaine Kempson (2002) using debt-service ratios of i) spending more than 25 percent of gross income on credit commitments; and ii) spending more than 50 percent of gross income on credit commitments and household

² (The International Statistical Classification of Diseases and Related Health Problems 10th revision)

commitments. However, this is an indicative definition rather than an exclusive one and other key indicators are also important in defining problem debt or over-indebtedness.

Key Findings

Gambling-related Debt

This study identified that access to money was central to the activity of gambling, and that significant debt was caused by problem gambling for all but the wealthiest individuals. Gambling-related debt was evidenced through secured and unsecured credit commitments not being met, arrears with household bills and cutting back on key household items (such as food and clothes).

Data collected on gambling-related debt over the period of the study suggests that gambling debts averaging more than £60,000³ might be common amongst gamblers with unmanageable debt. This was much higher than had been expected based upon the figure of £17,500 as the average debt disclosed by clients in counselling with GamCare in the organisation's 2007 Care Services Report (GamCare, 2007). The existence of gambling-related debt also increased the likelihood of individuals taking out both unsecured and secured forms of credit for consolidation purposes, as well as experiencing more serious forms of debt action by creditors, such as visits from third-party debt collection agents and the use of County Court proceedings as a recovery tool which can lead to County Court Judgments (CCJs).

A key theme arising from this research is that the management of all causes of debt has consequential impacts on a

³ Note: 'outliers' were removed from the sample in order to get the most honest estimate of gambling debts (Judd and McClelland, 1989). This figure also recognises the limitations of determining how much of the overall debt has been accrued by individuals.

broad range of complex social and emotional behaviours and interactions at the individual and household level. Yet there were important differences noted between life-course debt and gambling-related debt. Gambling-related debt was more likely than life-course debt to lead to relationship difficulties or relationship breakdown at the family level. This study found that the burden of both the gambling and the debt problem was often shared with immediate partners and had an impact on other household members, both financially and emotionally. There was a strong tendency for family members to feel an initial sense of resentment and bitterness towards the individual who was seen as the source of the financial difficulties and issues of 'blame', 'responsibility' and 'trust' were emerging themes. Resolving gambling-related debt was potentially a far more complex matter than dealing with life-course debt, requiring a person-centred, holistic approach, which provides help and support to both the individual and the immediate family.

Gambling-related debt was also likely to have more severe detrimental impacts on the health and well-being of individuals and families than managing either problem gambling or problem debt in isolation. Twinned problems of gambling and debt exacerbated the psycho-social issues associated with problem identification and management. Difficulties overcoming the associated stigmas and stereotypes of both 'gambling' and 'debt' impacted on the success rates of those seeking help and advice. Managing gambling as an addiction and debt as a financial problem resulted in detrimental health and well-being impacts at the individual and family level.

Employment and Employability

Both problem gambling and associated debt impacted on employment in a number of ways. The survey results indicated that

problem gamblers appear to have a higher unemployment rate than the UK national average, although this would need to be confirmed by a larger sample of respondents. Where an individual was a problem gambler with no support systems in place, they often feared having an income above subsistence level. This was because of the opportunity this provided of access to disposable income and credit to fund gambling activity. Participants in paid employment had greater access to bank accounts and credit and thereby the potential means to continue gambling activity. Also, when in employment, rent and council tax (or at least a proportion of these costs) became the responsibility of the individual rather than the benefits system. This meant that the individual needed to take on a new responsibility for managing their finances, which they were unable to do within the context of the gambling problem.

The interviews suggested that problem gamblers who were employed were often unable to concentrate on tasks at work because of their preoccupation with gambling and some stole time from work in order to gamble. These interviewees were at a higher risk of being made unemployed than individuals with life-course debt as a result of disciplinary action taken by employers in response to behaviours induced by the problem gambling. Participants also noted that their productivity levels deteriorated as both time and effort were diverted away from specific work tasks towards the activity of gambling and the need to service their gambling addiction. Evidence from the interviews conducted with problem gamblers revealed that where participants were in a position of significant responsibility and had access to a company's finances, then the company could potentially be at risk of serious financial loss through theft or embezzlement with interviewees admitting removing significant sums from businesses to support their habit.

Accessing Help and Advice: Awareness

There were widespread problems with access to information regarding advice and other support services for individuals with gambling-related debt. Participants with gambling problems felt that they were ill-informed or unaware of available support services. Problem gamblers identified the importance of access points within the community as sources of information and advice. Often family members reported that they did not know where to access support (for both themselves and the problem gambler) and often chose to self-manage the problem within the household/family unit. This often had implications for the long-term resolution of the problem.

There was a necessity for gambling awareness and financial literacy education across all age cohorts so that individuals are equipped with information that meets the needs of themselves and their families. Problem gamblers identified financial illiteracy as a serious problem affecting their ability to identify and manage the problem. Almost all the problem gamblers with debt reported being unable to manage their money and the most successful resolution of both problems occurred in situations where a family member assumed control of all financial matters and provided the necessary support for the individuals to participate in a treatment programme. Treatment was not necessarily delivered via an external agency and internal family structures and support mechanisms were equally important. Additionally, there was evidence of family-derived financial literacy education, so that as the gambler developed new skills in managing money they were allowed increased responsibility for the household finances. This also happened in some non-family settings where community finance workers took on a similar role in supporting the individual to manage and assume responsibility for their finances.

Accessing Help and Advice: Signposting and Multi-Agency Working

Problem debt was a common trigger for help-seeking by those with gambling-related debt. Families often realised that a family member had a gambling problem as a result of their discovery of the extent and level of the debt through financial statements, correspondence from debt management companies or home visits from debt recovery companies. While family members often knew they could get help with debt resolution via organisations such as National Debtline, Citizens Advice Bureaux and the Consumer Credit Counselling Service, there was very limited awareness of gambling support organisations such as GamCare. Equally, there were serious misconceptions about the type of help that gambling support organisations might offer, which acted as a barrier to contacting them in the first instance. Individuals with gambling problems often felt that either partial self-exclusion from gambling activities or agreeing a repayment package with creditors equated to solving the gambling problem. In most cases, this approach resulted in a breakdown of the repayment plan and a recurrence of the problem gambling behaviour.

Accessing Help and Advice: NHS

The NHS was identified as a possible access point for individuals seeking help with gambling-related debt. The shame associated with confiding in friends and family about both gambling and debt (and indeed gambling and debt in isolation) was a significant barrier to individuals seeking help for their stress and anxiety-related symptoms. Where individuals told GPs they needed help for problem gambling and debt those presenting with the problems felt that there was a lack of knowledge about the nature of problem gambling and effective signposting to sources of help,

advice and support. Some GPs opted to refer patients to mental health services, including Drug and Alcohol Teams (DAT) and NHS counselling/cognitive behaviour therapy. However, many mental health services did not have a remit to assist problem gamblers, whilst others were not able to offer the specialist support that was needed.

A further significant barrier to accessing help and advice was the judgemental approach of some practitioners within the health and social care service concerning gambling and debt. Some participants reported that they disengaged from the help-seeking process because of the prevailing attitudes towards and perceptions of the problem gambler on the part of health practitioners, although this differed by practitioner and geographical area.

Accessing Help and Advice: Industry

The process of self-exclusion⁴ was discussed with problem gamblers. Many problem gamblers found it difficult to physically present for self-exclusion, citing the negative connotations associated with problem gambling as a significant barrier. Often self-exclusion failed to work effectively as the individual would switch to alternative gambling operators or other forms of gambling to continue the activity. There is a patchwork of effective practice in relation to self-exclusion across the gambling industry, with evidence of online companies rigorously monitoring accounts and signposting people to GamCare, but this approach was not widespread. Many online operators are not subject to the UK Gambling Act and its

⁴ Self exclusion is a scheme provided by gambling operators, which allows individuals to stop gambling for a minimum period of six months. It requires that the individual personally visit each premises (casinos, bookmakers, bingo halls, race course, greyhound track, amusement arcades and Adult Gaming Centre) with a photograph and complete a self-exclusion form; or can be facilitated by online gambling operators

Licence Conditions and Codes of Practice (LCCP)⁵ as they are based overseas; some of these may be operating under jurisdictions which are 'white listed' by the UK's regulator, the Gambling Commission, whilst others are not. GamCare also works with the industry to improve the protection of online players and recognises best practice through a GamCare Certification. Gambling operators who participated within the focus groups identified the need for a joined-up self-exclusion service, with agreed and enforceable responses to requests for self-exclusion, and a mechanism for sharing data between online and land-based gambling operators.

Accessing Help and Advice: Young People's Services

Young people with gambling-related debt and problem gambling behaviours felt that they were poorly served by existing service provision. The youth justice and prison service had facilities to treat individuals with drug and alcohol problems, but were reluctant to engage with gambling problems. Young people exhibited extremely low awareness of sources of help for problem debt, and were often reluctant to talk to creditors for fear of the consequences.

Young people often turned to the NHS for advice or help but there were no NHS gambling-related facilities tailored to young people, and they were often left disenchanted by their experiences of trying to access help. Suicidal thoughts were more common amongst young people with gambling-related debt than older people, and generally, feelings of hopelessness and despair were identified. Young people reported that the services offered by counselling organisations were not always appropriate, offering forms of

⁵ The LCCP require operators to have in place player protection and social responsibility measures such as providing information on responsible gambling, sources of help, and facilitating self-exclusion.

consultation which were difficult to access and help and advice which was not specific to the ways in which younger people wished to or were comfortable with engaging in (venue, approach and ethos).

Many of the participants within this study had started gambling at a young age and often before their early teens. Participants identified a need for awareness education for the upper-primary school age group, perhaps alongside financial literacy for younger age groups.

Key Recommendations

In-depth recommendations are presented at the end of this report but important areas of for prioritisation include:

Debt

It is recommended that in studies addressing the impact of gambling-related debt that a distinction needs to be made between 'directly gambling-related' debt (i.e. money owed to loan sharks, for private bets and other money specifically to service gambling) and 'gambling-derived' debt (i.e. all other debts that are accrued as a result of spending money on gambling and not other commitments).

Workplace Learning

The provision of integrated financial literacy education and gambling awareness education via workplace learning would be a useful step forward. This is recognised as an appropriate access entry point for the delivery of education and learning materials. Employers should also consider uniformly blocking employee access to gambling websites and consider identifying and sharing the ways

in which problem gambling can be identified within the workplace between employees.

Access Points

Insufficient knowledge of sources of help for problem gamblers was a common theme throughout this study. While many of the problem gamblers were able to identify GamCare, their families and professionals from whom help was sought were often not aware of the breadth and depth of services provided by agencies such as GamCare to support problem gamblers and their families. Further research needs to identify access points of delivery for this information as the findings from interviews with problem gamblers suggest that community settings represent the optimal locations through which to access “hard-to-reach” groups.

Education

A widespread lack of knowledge about problem gambling and its consequences for gamblers and their family members suggests that education measures need to be more widespread. Targeting gamblers should continue to take place but there also needs to be education for the wider public on problem gambling and debt. Awareness education would include increasing general knowledge of the risks associated with gambling and highlighting signs that might alert family members to problem gambling. These might be delivered through public health campaigns or in a broad range of educational settings. Participants noted that alcohol and tobacco had a much higher profile on the public health agenda than gambling, and as a result they often knew where to go for help with those addictions. Problem gambling and debt was less well situated in the

public realm, reflected in the lack of advertising and awareness campaigns.

Signposting and Multi-Agency Working

Resolving gambling-related debt was found to be potentially far more complex than life-course debt, requiring a person-centred, holistic approach, which provides help and support to both the individual and the immediate family. In order to facilitate this, raising awareness of the widespread and long-term impacts of gambling on families is a priority. Knowledge of sources of help for gambling is low amongst non-gamblers and this is an important area for development. Developing an effective mechanism for signposting those who do seek help for either the gambling or debt to relevant organisations to assist in resolving both problems is important. GamCare and National Debtline are proactive in this but other organisations have lacked awareness of the issue and signposting is often under-prioritised. The development of non-specialist screening tools for gambling-related debt may provide the means to identify problem gambling earlier and to expedite access to necessary help and advice agencies. This will require more effective multi-agency working and agreed pathways for signposting and referral.

Accessing Help and Advice: NHS

There is an urgent need for increased awareness of problem gambling amongst NHS professionals. The mental health impacts of gambling and debt often result in an individual presenting to frontline health professionals such as GPs, nurses and other medical staff as the first point of contact. Prevailing attitudes towards gambling and debt and the ways in which the problems are identified and managed by healthcare professionals are crucial to engaging

individuals in the help seeking process. Awareness education amongst healthcare professionals may assist in mitigating the judgemental attitudes that problem gamblers encountered when seeking NHS help, as well as putting in place a programme of help for improving physical and mental health outcomes for problem gamblers and their families.

Industry and Self-Exclusion

The experience of problem gamblers in this study suggests that the process of self exclusion is not comprehensive across offline and online gaming operators. The *Empowering Communities Count-me-Out programme* is a national scheme which enables an individual to self exclude online from any number of premises both locally and nationally. This model offers a one-stop exclusion process for problem gamblers, removing the burden and subsequent demotivation of having to present to a number of different operators within the local area. The expansion of such a service, to include the large gambling providers, would be of great benefit to problem gamblers.

Young People's Services

There is a pressing need for further research into how best to meet the needs of this vulnerable group and how best to situate services that are more responsive to younger people. This study suggests that help and advice services for young people need to be closely tailored to the ways in which young people develop social networks and interact with each other. Research into the types of services needed and the delivery channels they wish to access 'as consumers' needs to be investigated more specifically.

Introduction

All problem gamblers within the study reported associated debt problems as a result of the money spent on gambling activities. This could be directly attributable debt (i.e. cash or credit used to pay for a gambling activity) or indirectly attributable (i.e. where all available cash has been used to pay for gambling so additional finance is required to pay household bills or buy necessities).

The effects of debt are often agreed as being predicated upon a number of inter-related and complex social and economic facets; which have the potential to impose significant adverse impacts on individuals and their families. The UK Social Exclusion Unit (now the Social Exclusion Task Force) concluded that problem debt influenced the well-being of individuals and their families in a number of ways, including: health status (stress, anxiety and depression); employment rates (the ability to gain and sustain employment); levels of child poverty; housing (conditions and eviction rates); and incidences of crime (re-offending rates) (Social Exclusion Unit, 2004, pp 4-5).

Problem gambling can also have harmful health and social impacts, affecting physical and mental health (including depression); familial relationships (relationship breakdown and divorce); child neglect (use of housekeeping money); and the development of co-dependencies (such as alcohol or drugs) (Griffiths, 2002; Poulin, 2006; Korman et al, 2008). Yet, although there have been studies investigating correlations between bankruptcy rates and casino development in the USA (Nicholls et al, 2002; Barron et al, 2002), there has been little research exploring the reciprocal link between gambling and debt and the implications of gambling spend on household finances and personal debt.

GamCare and the Money Advice Trust funded this pathfinder study into Gambling and Debt in order to generate a preliminary understanding of the relationship between these inter-related problems and the wider impacts of gambling-related debt. Help-seeking behaviours and pathways in and out of problem gambling and debt are also investigated in order to develop an experiential, evidence-based understanding of help-seeking behaviours and how these can be supported by the provision of holistic and inter-linked services.

This study was conducted by Carolyn Downs (University of Salford) and Ryan Woolrych (Manchester Metropolitan University), supported by the Salvation Army (Gayle Munro and Fleur Bragaglia). Additional research was conducted by Karen Grieg of Manchester Metropolitan University and Andrew Thomas of the University of Wales. The study draws on the experiences of problem gamblers, gambling counsellors, debt advisers, healthcare professionals, representatives of the gambling industry, credit industry and insolvency service professionals and other key stakeholders.

The final report and the policy and practice implications contained herein are designed to act as the stimulus for further work in the area.

Background

The scale of personal debt in the UK has increased rapidly amongst all sectors of the population, particularly over the last ten years,⁶ with average household debt for those with some form of unsecured loan rising to £21,580 by mid-2009, when total UK personal debt stood at £1,459bn (Credit Action, March 2009).⁷ Over the same ten-year period new forms of gambling participation have developed. The first online gambling site was established in 1995, and since then technological developments have enabled this market to expand rapidly so that there are now c.3, 000 online gambling sites (Wood and Williams, 2009). Alongside the development of remote gambling, the UK has relaxed the regulations that govern gambling services with the introduction of the Gambling Act (2005). This has removed the need for operators to show an 'unmet demand' for gambling and is cited as behind a proliferation of new betting shops (Lords Hansard; 10 July 2007, Col. GC192) and the expansion of Adult Gaming Centres (hosting high-stake, high prize machines). The new law also removed membership requirements for bingo clubs and casinos, alongside other liberalising measures.

Problem gambling counselling professionals and self-help organisations have long recognised that problem gamblers seeking support invariably have problem debts, while debt advice organisations are becoming progressively aware of the likelihood that problem gambling is an underlying (albeit rarely-identified) cause of problem debt. Recently, studies investigating problem internet gambling (Valentine and Hughes, 2008) and recovering

⁶ The rate of growth of unsecured borrowing and the rise in secured borrowing has declined recently as a result of the recession (or in the case of unsecured borrowing due to other earlier unanalysed factors).

⁷ This figure includes outstanding mortgage balances and unsecured credit commitments rather than debts that are in default or arrears.

problem gamblers (Anderson et al, 2009) have highlighted the role of debt in the lives of problem gamblers. This pilot study was designed to formulate research-based accounts of the role of debt in the lives of problem gamblers through developing in-depth understandings of the reciprocal link between gambling and debt from the perspectives of key stakeholders.

There have been few investigations into the micro-economic effects (i.e. at the individual and family level) of gambling-related debt. Problem gamblers have been found to suffer increased divorce rates and family breakdown as a result of the burdensome impact of gambling and debt (see Kempson, 2002; Edwards 2003). Amongst people in employment, high rates of absenteeism and loss of productivity are issues that have been found to affect problem gamblers identified in UK-based research (Social Exclusion Unit, 2004, p 4-5). While there have been attempts to quantify individual financial impacts of gambling in terms of bankruptcy filing rates in the USA (Nicholls et al, 2002; Barron et al, 2002), parallel studies to investigate gambling's causal links with debt, personal finance and associated social impacts have failed to emerge. This research shortfall is noted across jurisdictions, and was highlighted in an Australian study: *"It is surprising that the literature surrounding problem gambling pays so little attention to the economic aspects of gambling"* (Gambling Research Australia, 2005, p.18).

The need to understand the financial implications of gambling is also considered important in the design of effective scoring criteria and screens for pathological gambling. The South Oaks Gambling Screen (SOGS) uses a range of financial questions to screen for pathological gambling and was based upon the American Psychological Association's DSM III criteria, yet the application of the screen across different age groups suggests some of the questions are too ambiguous and difficult to comprehend (Ladouceur et al,

2000). Similar results have been found when testing the Canadian Problem Gambling Index, with gamblers seeking clarification and further explanation concerning key questions (Anderson et al, 2009).

While there has been some research into income and gambling expenditure, this type of work has not led to a consideration of the wider consequences to income of gambling. This research deficit has led researchers to conclude that the individual *“economic characteristics of gambling have vanished”* (Slade and McConville, 2003, p.13). The studies that have attempted to establish the correlation between income, gambling and debt are based upon self-reported accounts of the amount of money staked or lost, whereas it is generally accepted that gamblers underestimate gambling spend and losses and overestimate winnings (Grun & McKeigue, 2000; Sproston et al, 2000). Furthermore, it is difficult to establish consistent patterns of behaviour from entirely quantitative studies, and this type of research, although valuable, offers little evidence to assist in developing a clear picture of vulnerable groups, the inter-related impacts of gambling and debt, and information about gambling behaviours that might predispose individuals to problem debt.

Thus, whilst there is a widespread recognition of the importance of developing an evidence base for understanding gambling-related debt, there has been little research undertaken with problem gamblers and professional stakeholders to inform best practice. Problem gambling behaviours, especially when associated with problem debt, can take different forms and may require complex, multi-agency interventions, which can only be understood and developed by combining different forms of research evidence.

This pathfinder study offers a preliminary insight into how this might be achieved, establishing key recommendations for further work in the area.

Methods

A mixed-methods approach was used in this study, applying a broad range of research techniques in order to capture the experiences of both the 'problem gambler' and the 'professional community', the former consisting of problem gamblers and or over-indebted individuals and the latter consisting of debt advisers, problem gambling counsellors, and representatives from the gambling and credit industry. This inclusive approach was chosen in order to provide breadth and depth to the study through multiple perspectives of the research problem.

The mixed methods applied in this study consisted of:

- A gambling and debt scoping survey conducted with a control group and non-control group;
- Telephone/email interviews with problem gamblers, gamblers' family members and non-gambling debtors;
- Telephone interviews with representatives from the banking and credit sector;
- Regional focus groups with problem gamblers, counsellors, advisers and other representatives from the gambling sector and credit industry;
- Case study analysis of posts on GamCare's online forum and entries on money advice websites (conducted by Karen Grieg and Andrew Thomas).

This multi-methods approach allowed the research team to build a relationship with participants, many of whom remained actively engaged in communication with the research team beyond data collection.

Gambling and Debt Survey

A gambling and debt scoping survey was designed and distributed, with findings collated and analysed from responses provided by individuals with gambling and/or debt problems (non-control group) and staff and students from a university in the North-West of England (control group). The analysis represents a preliminary examination of the types of problem gambling behaviours displayed by those with gambling and debt problems; patterns of gambling spend across different forms of participation in gambling activities; gambling and debt coping strategies; and information and advice-seeking pathways used by those with gambling and debt problems. In some cases, the results from the non-control group are presented alongside the control group for comparison.

Survey Design

The topics selected for inclusion in the survey were generated from an initial literature review, discussions with frontline support and advice professionals, and close collaboration with project advisory group members. The Manchester Metropolitan University research team formulated the first draft which was disseminated to the project team for input and amendments. The second draft was distributed to a number of named contacts involved in providing frontline help and advice services. Their assistance and direction informed the development of a third draft, also circulated for final amendments by the project team. Finally, the survey was piloted amongst academic staff at Manchester Metropolitan University and the University of Salford, and gambling and debt advice counsellors were asked to provide further input and advice on survey format and content. The fourth and final draft is attached in Appendix I.

In addition to a paper-based version of the survey, an electronic survey form was designed and hosted via an online publishing tool. Use of both formats widened access and enhanced participation in the project.

Control group

The survey opened to the control group on the 18th September 2008 and was closed on the 9th December 2008. The survey was distributed via all staff and student mailing lists, with an attached link to the online survey.

246 electronic responses to the survey were completed. The data was inputted into an SPSS database for statistical analysis.

Non-control group

The survey opened on the 26th October 2008 and was closed on the 7th May 2009. A number of communication channels were used to enhance access and participation. Information about the survey was posted on the GamCare and National Debtline websites and GamCare clients were notified by information posted in counselling waiting rooms. Additionally, a Manchester City Council drop-in debt advice service agreed to undertake face-to-face survey completion with clients. No financial inducements or incentives were used to encourage a higher response rate. Only individuals who had experienced gambling and/or debt problems were invited to apply. Those who reported no such problems in their survey responses were removed from the final dataset.

173 completed electronic and paper-based responses were returned. The data was inputted into an SPSS database for statistical analysis.

Care was taken to ensure that duplicates were removed from the survey returns. This screening out did not rely solely on removing repeat responses from the same IP address (given that more than one person with gambling/debt problems could be accessing the same computer), and so age, gender and employment status were also used as variables to identify duplicates. Presentations of the key findings from the analysis of the control and non-control group are attached in the Appendix II (together with caveats for the data). The results are also presented at relevant sections of this report to support arguments and findings as they develop.

Interviews

Participant Interviews

Semi-structured interviews were undertaken with problem gamblers and/or problem debt to explore the lived experiences of managing and coping with gambling-related debt. The interviews lasted for 45-90 minutes, and were based on a pre-designed topic guide. The topics represented in the guide were prompted by preliminary findings from the gambling and debt pilot survey, contributions from the project team and themes identified in the literature review.

Interview topics included:

- The nature of the interviewee's gambling and debt problems;
- The impact of gambling and debt on well-being of self and others;

- The application and development of debt coping strategies and gambling prevention strategies;
- Perceived and actual barriers to identifying and presenting for help and advice;
- Recommendations for the design of advice and other support services in the future.

The topic guide is included at Appendix I. An e-mail topic guide was developed from this and is also attached in Appendix I.

Eleven semi-structured interviews were conducted over the telephone with problem gamblers, and two were conducted face-to-face. Four e-mail interviews were undertaken with problem gamblers. An additional telephone interview was conducted with the mother of a problem gambler. The sample of problem gamblers was selected from two sources. Twelve problem gamblers provided contact information after completing the gambling and debt survey, and six problem gamblers were identified through contacts developed with community workers providing welfare support services for people with gambling and debt problems. A breakdown of the sample of problem gamblers interviewed for this project can be found in the Appendix I. It reveals that:

- Thirteen interviewees were male and five were female. The youngest interviewee was eighteen and the oldest 65.
- Fourteen participants reported currently or previously experiencing **both** gambling and debt problems.
- Fourteen participants felt that their gambling and or debt problems were **not** currently under control.
- Ten participants had previously sought help from a gambling or debt advice agency.
- Average income of participants ranged from less than £100 per week after tax up to £600 per week.

Findings from the telephone interviews were tape recorded, transcribed, merged with the e-mail interview findings, and then thematically analysed.

Credit Sector Interviews

Three interviews were conducted with representatives from the banking and credit sector. The interviews lasted between 45 and 60 minutes. A topic guide was designed in collaboration with the project advisory group, and covered the following themes:

- Attitudes towards clients presenting with gambling and debt problems;
- Signposting of problem gamblers to advice and/or other support services;
- Early identification and prevention of gambling-related debt;
- Managing the recovery of debts incurred by problem gamblers.

The sample of credit sector interviewees was identified through contacts provided by the project advisory group and those involved in the focus groups of this research. Job titles of those interviewed included: Recovery Strategies Manager, Third Party Liaison Manager and Personal Insolvency Manager. The findings from the credit management interviews were tape recorded and transcribed.

Focus Groups

Focus group discussions were used to elicit participants' experiences and understandings of gambling and debt from the perspectives of problem gamblers and key stakeholders.

Two focus groups took place, one in Manchester and the other in London. The focus groups were attended by gambling and debt counsellors, healthcare professionals, representatives of the gambling industry, problem gamblers and other key stakeholders.

The focus groups lasted for between 2 and 3 hours. A focus group agenda was designed in collaboration with project advisory group members, which was principally focussed on ensuring that key questions emerging from the research could be discussed openly within a group context (see Appendix I). The project lead researcher acted as the focus group facilitator, ensuring that all participants were given an opportunity to make a contribution. The focus groups were audio recorded and transcribed for analysis. The findings are grouped around key thematic areas and included:

- Issues in identifying problem gambling and debt;
- Awareness of help and advice services for gambling and debt;
- Prevention of problem gambling and debt;
- Design of help and advice services to address gambling and debt;
- Identifying priorities for the future.

Gambling Forum

The GamCare Forum is a moderated area on the GamCare website where members can discuss, ask questions and offer advice about self-help strategies for coping with problem gambling. The Forum is a locus for:

- New members to introduce themselves to other participants;
- Members to share supportive approaches, advice, and ideas on gambling-related problems;
- Relatives, friends, and significant others to share supportive approaches, advice and ideas;
- Members to create a recovery diary in which they record their journey through problem gambling recovery;
- Members to ask GamCare staff any gambling-related questions.

(The Forum 'Research pages' area is where information about the project was posted.)

The most frequented area of the message forum is the 'Recovery diaries' section, which attracts just over 54% of the total number of messages posted. There have been over 90,000 messages posted on the various forums since their launch and more than half of these have been posted to 'Recovery diaries'. The recovery diary messages members have posted during their individual journeys through problem gambling recovery were examined and common themes identified. The findings are included as case study examples at intervals in the main body of this report.

This method was adopted by Koski-Jännes (1998), who collected narrative accounts of drug addicts, and found that the approach provided insight into participants' "turning point experiences" in relation to developing strategies to cope with and manage their addiction and similar "turning point" experiences and coping strategy developments were noted throughout the analysis of recovery diaries. Through the use of narratives, the recovering addict can support their perceived sense of self and help construct a new, recovered-addict identity. The narrative allows the individual to generate understanding and meaning in their otherwise chaotic and undesirable circumstances.

The archived pages on the GamCare Forum were used as a source of material. This was supported by a specific investigation into messages that stated amounts lost through gambling, posted by gamblers on the moneysavingexpert.com, debt.co.uk and GamCare websites, which allowed for the construction of a table of data that illustrates the levels of indebtedness of gamblers with debt. Findings elicited via this method were compatible with the self-reported debt levels in the survey and interview data.

Gambling and debt: a reciprocal problem

The research findings identify that the reciprocal relationship between gambling and debt is stronger and more closely inter-linked than previously understood.

It has been well documented, and indeed acknowledged in the problem gambling screens, that financial loss as a result of gambling can lead the problem gambler to try to recoup the loss through further gambling, known as chasing losses. In some cases, problem gamblers can service high levels of debt through high levels of disposable income or savings. The ability to manage mortgage repayments and other forms of consumer credit ensure that the individual is able to abstain from seeking help for as long as possible.

This study found that the impacts of gambling-related debt were traumatic, could be widespread, and had the potential to be long-term. These factors make the study of gambling-related debt important as it will allow an understanding to be generated of patterns of behaviour that could highlight the existence of a spiralling gambling-related debt, offers the potential to develop new strategies for the identification of and provision of support to the problem gambler and their families, and may help inform the development of policy by regulators, the credit and gambling industry, and the voluntary and public sectors.

Participation, Financing and Debt

Amounts of debt

Analysis of content from the three online message boards: moneysavingexpert, debt.co.uk and the GamCare Forum (see Appendix I) identified forty individuals who had a relationship with gambling and debt. The postings of those individuals were then tracked in order to establish key features of each case. There are caveats to the data; mainly that it is dependent upon self-reported amounts of debt. Nevertheless, the figures provided suggest that there may be considerable long-term debt impacts associated with problem gambling. Six responses were not included in the calculations of gambling-related debt as the individual publishing the post had declined to disclose the amount.

The total combined gambling-related debt was **£2,131,000**, giving a mean debt of **£62,676**. In addition to debt problems, other social consequences of problem gambling can be observed from the data collected via messaging boards. These include suicidal ideation, bankruptcy, and family breakdown. Some respondents still regarded gambling as an escape from debt problems, intending to win back their losses. Moreover, although many problem gamblers had set up repayment plans with creditors, almost all failed to pay off their debts in full and ended up borrowing or obtaining money from friends and/or family, which fits the pattern found in studies in other jurisdictions (Schwer et al, 2003).⁸

⁸ This section was developed as a result of analysis carried out by Andrew Thomas, University of Wales.

Manageable debt and forms of gambling participation

The Valentine and Hughes study of problem internet gamblers noted that gamblers had a “*debt horizon*” (Valentine and Hughes, 2008, pp.2, 18-19). Typically, until individuals hit a debt ceiling that either triggered a negative creditor response, recovery action in respect of unmet commitments or individuals found their levels of debt otherwise unmanageable; they shifted responsibility for their problems to the banks and credit institutions that had provided the credit. Valentine and Hughes (2008) noted that often the realisation of a ‘credit horizon’ acted as the impetus for moderating or stopping gambling, even if only temporarily in some cases. Gamblers’ shifting the responsibility and ownership of the problem from themselves to the credit provider was less evident within this study. All the problem gamblers participating in this study were able to locate problem gambling within the context of their financial situation and in relation to manageable or unmanageable debt, even in problem gamblers who were not receiving treatment for their gambling.

Problem gamblers alluded to the difficulties in determining the level of spending at or beyond which gambling could be considered problematic. An estimate of such a level differed from person to person and was dependent upon salary income, outgoings, and subsequent disposable income. Amounts of disposable income available to the gambler and their family could change rapidly as debt levels rose and required servicing, yet the lack of disposable income did not necessarily act as a barrier to prevent gambling, as those with a strong impulse to continue gambling often relied on sources of credit and money obtained from friends and/or family.

For some problem gamblers, their ability to service debt enabled them to continue gambling. Yet this capacity was relative and dependent on income and outgoings:

"Now, 20 to 30 thousand a year to me is serviceable. Don't get me wrong; its 20 or 30 thousand a year that I could spend on the house. To anybody else if they were spending 20 or 30 thousand they would be in trouble."

(Problem gambler, male, early 40s)

"Gambling impacts negatively on all areas of [my] life. Everything revolves around money and more and more you think where can I get more money from."

(Problem Gambler, male, late teens)

For many, access to money for gambling enabled them to continue gambling. Whilst the activity of gambling provided the stimulation, it was having the money (or equivalent) which provided the practical means to gamble:

"I am alright [now] but when I have money then I gamble. But when I have got no money then I am alright with it. I find something else to occupy my mind. It is when I have money the problem strikes."

(Problem gambler, male, early 20s)

However, some participants prioritised gambling over, for instance, payment of household bills, and then related problem gambling to having no money:

"Gambling only becomes a problem for me when I have no money."

(Problem gambler, female, early 30s)

"You cannot always tell if somebody is gambling. The only time that people know when I'm gambling is if I can't pay my rent or can't pay my bills."

(Problem gambler, male, late 50s)

The survey data was analysed for trends in forms of gambling participation, across both the control and non-control groups. The results supported the findings from the interviews, showing that 'gambling with friends' was more common amongst the control group than the non-control group. Further analysis of the forms of

gambling participation suggests that those currently living with financial problems as a direct result of gambling are more likely to be engaged in forms of gambling such as the casino, fruit machines, and fixed odds betting terminals than those without a gambling problem (for whom the lottery and scratch cards tend to be the main or sole activities). These forms of participation may provide an explanation for the significant losses which problem gamblers reported losing per week.

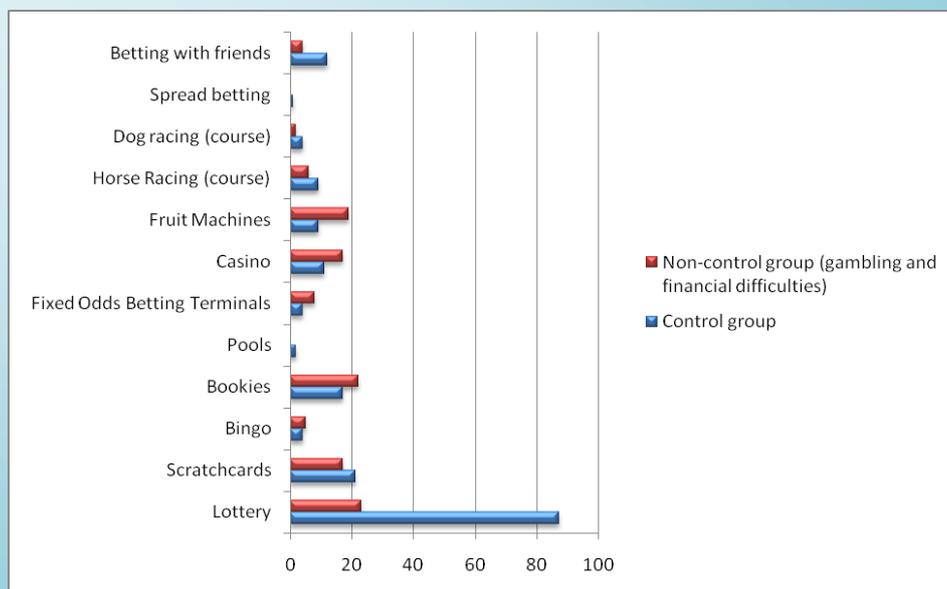
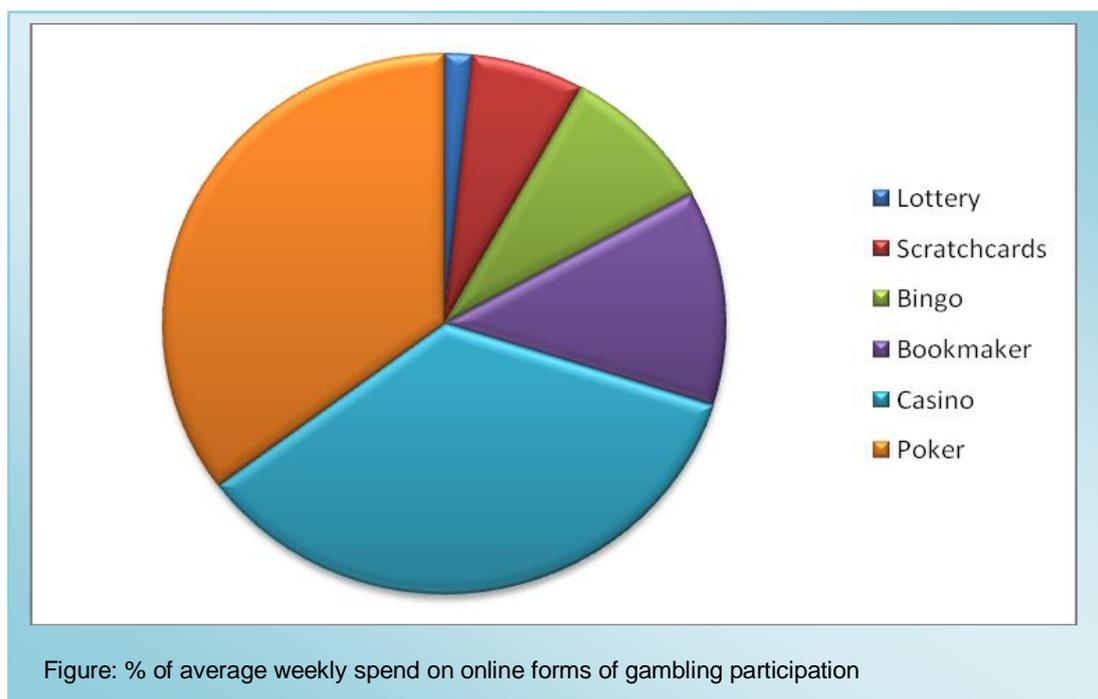


Figure: Frequency of forms of gambling participation across the control and non-control group

Total cumulative spend figures across the non-control group (those with problem gambling and/or debt) revealed that almost equal amounts were recorded for online and offline gambling expenditure per week. Total for online spend = **£15244** and total for offline spend = **£14824** per week across the sample.

An analysis of average weekly spend across the non-control group revealed that more significant amounts were spent gambling

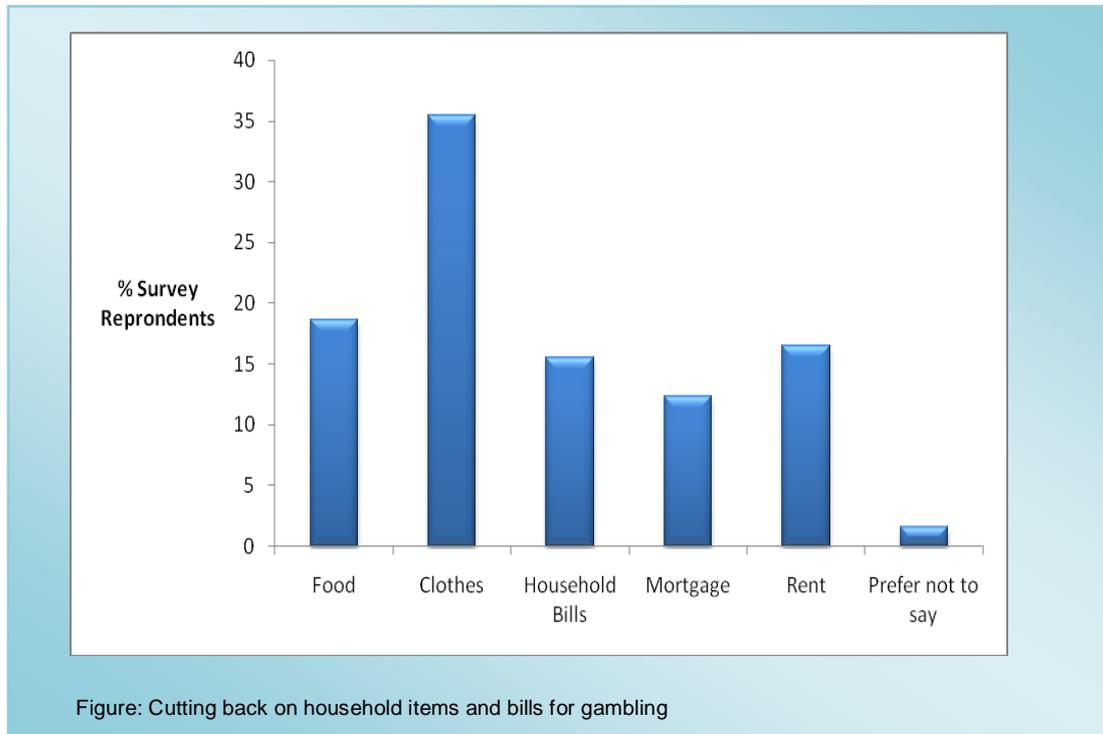
online (£205.90 per week) than offline (£133.70 per week). These levels of spend were considerably (and perhaps predictably) higher for those who recorded that their financial difficulties were a direct result of gambling (£308.30 and £255.63 respectively). Analysis by type of online gambling (see figure below) revealed that 'online casino' and 'poker sites' contributed to the most significant amounts of average spend for the non control group.



Prioritising gambling spend

In order to acquire money to finance gambling activity, respondents from the survey identified that they have cut back on other, essential, spend. 79.5 per cent of the non-control group revealed that they had cut back on key household items or payments of household bills to pay for gambling. Of those 35.5% of respondents had cut back on clothes, 18.6% had cut back on food, 16.5% rent and 15.5% household bills. This demonstrates the significant negative impact that gambling can have in terms of the

ability to service household costs, and provide essential household items. Importantly, the inability to pay priority household bills and cover mortgage repayments can have a long-term detrimental impact at both the individual and the household level.



In some cases, families suffering from gambling-related debt had to manage their household on state benefits and even had the state amongst its creditors. Even small debts had a severe impact for individuals and families living on state benefits. Deductions were often made from state benefits to cover payments for Crisis Loans or other Social Fund loans or overpayments of tax credits, so that within a short period of time family income was significantly reduced:

"She would go over and stay with her sister at the weekend sometimes and come back and I had just gambled all the money away. She said, "You going to the shop to get some food" and I said, "No, I've got no money".

(Problem gambler, male, early 40s)

Yet these impacts were not solely felt by lower-income groups. The following participant was earning a salary of circa £30,000 per annum, but their outlay on gambling and servicing gambling-related debt left little money for other activities:

"The realisation came to me, not that long ago actually, when I literally had 2 pounds in my wallet for the month. I could not pay all my bills, I couldn't buy food, I could not put any petrol in my car to get to work. That is when you know that you have to get help."

(Problem gambler, male, mid-30s)

The income levels of participants in this study ranged from individuals in receipt of state benefits to high-salaried professionals. However, in all cases, the financial impacts of debt related to gambling had implications on the household spend. Whilst cutting back on household bills was more common amongst the lower income groups, the extent of the financial losses associated with the higher income groups were more significant and often resulted in re-mortgaging property or selling assets to finance the gambling activity.

Where the family were not aware of the debt or the gambling, there was still an impact, as there was less money available for the household. Managing the debt accumulated from gambling was seen as having a detrimental long-term impact on the lifestyle of family members:

"It has impacted on me because I have maxed out the credit cards before and I have had to pay it back so further down the line there will be less availability for what my family need. It is an impact that goes further down the line. But when you are a gambler, you are not thinking about that. You are thinking as a gambler that [it] won't matter because you will make life really good for them. You are going to take them holiday and you are going to do this. You are pretty good at spending the money in your head before you have actually made it. When is enough enough. I have had 10,000 in my online account and not withdrawn it. That could've made a

massive difference. But its not real money is it. It's just figures on a screen."

(Problem gambler, male, mid-30s)

In many of these cases families took out consolidation loans or used savings to cover all or part of the debts incurred by family members. However, losses do not necessarily have to be huge to have a significant effect on the lives of the gambler or their family. Respondents from low-income households, including means-tested benefit claimants, talked of the impact of losing small amounts which nevertheless significantly impacted on their ability to buy food and pay household bills.

Credit and gambling-related debt

In a previous study of problem gamblers it was reported that the banking and finance industry is seen as 'at fault' by some gamblers for allowing access to easy credit (Valentine and Hughes 2008). The participants in this study suggested that the behaviour of banks or other credit institutions were regarded as secondary to the responsibilities of the individual, but that banks and financial institutions could be more proactive in identifying problematic levels of spend on easily identifiable gambling-related activities. Many felt that there was a need for a practical response from consumer credit providers when they realised that gambling on credit was taking place:

"I don't blame banks 'cos at the end of the day banks are there to lend money and to make money based on their lending. I understand that but I always go back to the fact that if the banks didn't lend me money or give me access to it I wouldn't be able to gamble with it. I might have been fed up. I might have been hacked off but now I would feel better to be at home and hacked off than to be feeding hundreds and hundreds of pounds into [gambling operator] bank account. Which is what I did."

(Problem gambler, male, early 50s)

There was evidence to suggest that certain credit providers put more emphasis on social responsibility. Barclaycard were an organisation identified by participants as having a policy of telephoning the client if a credit card is being used for a gambling transaction to inform them they were contravening the terms and conditions of the credit agreement which prohibits such spending. This intervention often caused the individual to pause and consider their actions and in some cases to stop gambling (albeit for a short period of time). However, this policy was not the norm. The motives of the credit card providers in following this policy were questioned by a number of participants:

"Credit Card companies should take a note from the likes of Barclays. Whenever in the past I used my Barclaycard they phoned me within the hour to confirm the transaction and always tell me "It's a gambling transaction" (much to my horror) and that Barclaycard terms of use do not allow this. That in itself stopped me using that card, at least online. Others don't give a damn as they class it as cash transactions so you can imagine the fees involved with interest. That in itself has another negative social impact."

(Problem gambler, male, early 40s)

"Even if the credit card has got an eleven grand limit they [gambling providers] should be saying when customers use the [credit card] that they should have a limit on what they can use and that should be an absolute limit and they shouldn't be able to change their mind in the middle of a card game and say, "I want to up my limit" because in the heat of the moment that is always going to happen. Whatever the floor limits are they should enforce them much more strictly and people should not be able to amend them."

(Insolvency Practitioner)

Yet for a number of problem gamblers, interventions from the credit provider were not successful and alternative cards were used instead. Individuals provided evidence of increasingly ingenious

ways of continuing to gamble to avoid visibility from the credit providers:

"I remember getting an Indian call centre at 7 in the morning wanting to verify these transactions. They wanted to tell me the terms and conditions of where you can use the card facility. They look at spending patterns now. I have had 25 transactions come in for a casino or whatever, The bank are obviously going to see that but as long as you cover it there is nothing that they can do. The credit card can because you are gambling with their money."

(Problem gambler, Male, early 30s)

In this context, it is difficult to ascertain what types of intervention would be appropriate for the individual and the relative success that these would have. There are clear practical and financial limitations on what banking or credit providers could do beyond reminding a customer that they are spending money on gambling beyond an overdraft or other borrowing facility. However, there were customers that were gambling via overdraft facilities where the bank involved took no action until there was a default. The ease with which problem gamblers were able to access money through increasing their overdraft was a notable area for concern:

"Banks probably could do more. They upped my overdraft five times within as many months and never asked my why once. Because I have got online banking you can just go into online banking, ask for an increase and if it's not more than one and a half times your monthly salary it just does it automatically. It is a licence to gamble. With internet gambling, given that you have to deposit money online very often, if you have got an internet bank account they should be stopped on certain websites."

"So if I was to go on the [gambling operator] website there could be something on my bank account that says that this website has got a stop on it and not to deposit. There is nothing."

(Problem gambler, Male, early 30s)

A problem that was also highlighted was the availability of cash machines (ATMs) in gambling venues. The ATMs may be the fee-charging 'LINK' ATMs, which were noted as especially common in casinos, bingo halls and arcades. Gamblers in this study felt that this enabled them to continue their gambling without leaving the gambling venue. This is seen by those who have acknowledged their problem gambling as being a factor in escalating gambling expenditure:

"In the bingo now they have cash point machines. When I was first going there wasn't a cash point machine so you could withdraw money within the club. Now they are everywhere and my question is 'Why are they there? Why make it easy for people to draw out money that they can't afford to spend?' It comes back to the same thing. Because they are there to make money. Why are people allowed to draw out 500 pound a day in the bingo? How many times have I done that? If I have done that once I must have done it a hundred times! I can go to the cash-point in the bingo; I don't get charged and can withdraw 500 pounds a day every day if I have money in my account. And nobody said a word to me until after it was gone."

(Problem gambler, male, early 30s)

The banking and financial services representatives that participated in this research were all aware of cases where gambling had been a trigger for unmanageable debt and even bankruptcy. These cases were regarded as hard to identify, and unless online gambling was involved, were also difficult to detect. Yet bank statements provided a rich source of information for making decisions:

"We have seen things like online bingo... it is fairly easy to tell. If we have got a customer [account] in front of us we can get a certain amount. Normally our collectors won't have time to go through reams of statements on screen but they can look at the last few weeks and see the tell-tale signs."

(Recoveries Strategy Manager)

"Clearly with the real problem gamblers it is very evident from looking at their statements... you can clearly see that they have

been going online and perhaps multiple transactions of round amounts to betting companies on a daily basis."

(Third Party Liaison Manager)

Professionals working for third parties and insolvency practitioners noted that the number of gambling related cases represented a small, but noticeable, proportion of their caseload. The difficulties of identifying gambling-related debt amongst individuals were seen as a significant challenge:

"I am not sure how many cases we come across on a weekly basis, but I would say it is at least a handful of cases. But of course it is not always easy because people may do their weekly shop in Tesco's and buy national lottery tickets. We might not identify that because it is part of a bill or if the customer is taking out cash transactions and then going to the betting shop then we can't always recognise it. We find a lot of online gambling because with online companies you do have to register a credit card so we recognise that on our credit card site which is dealt with by a separate team, but that is something that they would identify."

(Third Party Liaison Manager)

"In previous jobs working for the Joint Insolvency Monitoring unit and the Official Receiver I had around 10 percent of cases where there were gambling issues. They might not have been the root cause of the bankruptcy but when people get into debt they quite often see gambling as a quick way of getting their money back or getting them out of the difficulties that they are in. I would say the numbers where it is the sole cause of the bankruptcy are not enormous but you can't always tell because they don't always tell the truth. It's like alcoholics. They are not always going to tell you where the money has gone."

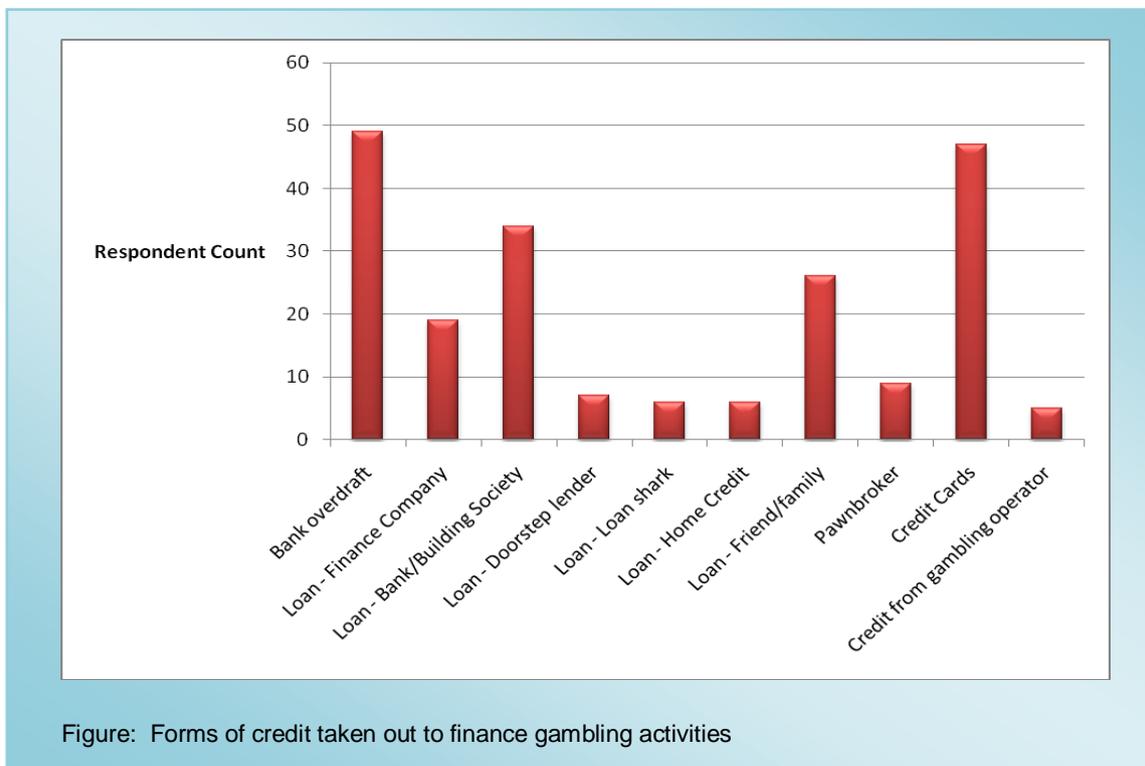
(Insolvency Practitioner)

Although credit professionals and money advisers felt that problem gambling was responsible for the breakdown of repayment plans, this evidence was anecdotal. The reasons for the breakdown of repayment plans were not collected or collated so there was no hard evidence available. This is likely to be important data for all debtors

and creditors as the information could highlight common patterns that will allow more effective interventions to take place.

Borrowing from friends and family

An analysis of the survey data revealed that although overdrafts, credit cards, and loans from a bank/building society were popular forms of accessing credit, reliance on family and friends to acquire money for gambling was also well cited:



Often, the need to acquire money for gambling resulted in actions which compromised the honesty and the individual and the integrity of the family unit:

"His daughter is only 5, and he took her [Nintendo] DS. Sold it for cash to gamble. How do I explain that to her?"

(Problem gambler's mother)

Problem gamblers identified that social isolation and loneliness were often the outcomes of problem gambling as friends became a vehicle for obtaining money:

"Like you'll have mates in work and you say can you borrow me 20 quid until I get paid, I haven't got many friends. I have not got any friends like that anymore anyway because when you are gambling it is a lonely activity."

(Problem gambler, male, late teens)

"There are people that gamble and it won't make any difference to their lives if they lost 20 or 30 pounds a day and they haven't got a problem. When you have got a certain amount of money and you spend it and you start asking your friends or colleagues will you lend us... have you got 20 pounds, can you do this for us, can you help us out and your friends see that... when your friends begin to see that then they start to move away... they start to distance themselves from you 'cos they know here comes such and such... we know what he wants because he's got no money."

(Problem gambler, male, mid-40s)

A preoccupation with gambling and the associated need to acquire money often had a detrimental impact on problem gamblers' ability to develop and sustain social relationships with others. The propensity to borrow money from close friends frequently led to those friends distancing themselves from the relationship.

Disclosing the Problem

Concealing the Problems

The debt advice charity, the Consumer Credit Counselling Service (CCCS) conducted research amongst its clients in 2007, and

found that a common response to debt was to conceal it from partners or family (CCCS, 2007). There are a number of possible causes for this behaviour, including the fear of losing trust within a relationship and the likely limitations on lifestyle that owning up to and managing the debt will impose.

People with problem debts and problem gamblers identified various methods by which they 'kept secret' their problem debts. Hiding bank statements and credit card bills was a common method of concealing the problem from partners and other family members. This can also act a form of self-deceit, as it enables individuals to ignore the worsening of a problem:

"I was hiding credit card statements, bills... I was hiding all sorts of stuff."

(Problem gambler, male, early 30s)

"When the letters come through the door I am always there first, I have heard people say that they get to the mail before their wife 'cos they don't want her to know that they have got a problem. Bank statements and things like that. You get there first so you can hide a lot of things that are going on. Even when I was on my own there would be a stack of letters that I just put to one side. I would not deal with them because that is like facing the facts about your problem."

(Problem gambler, male, late 40s)

"Well I don't have those [bank statements] because I have internet banking. Ask me why I switched to internet banking and there is your answer."

(Problem gambler, male, early 20s)

Evidence from the gambling and debt survey revealed that concealing evidence of gambling behaviour was common amongst participants. The table below demonstrates the high percentage of people within the non-control group (those with current or previous financial problems as a result of gambling) who identified that they frequently hid betting slips, lottery tickets and other traces of gambling activity from friends or family members.

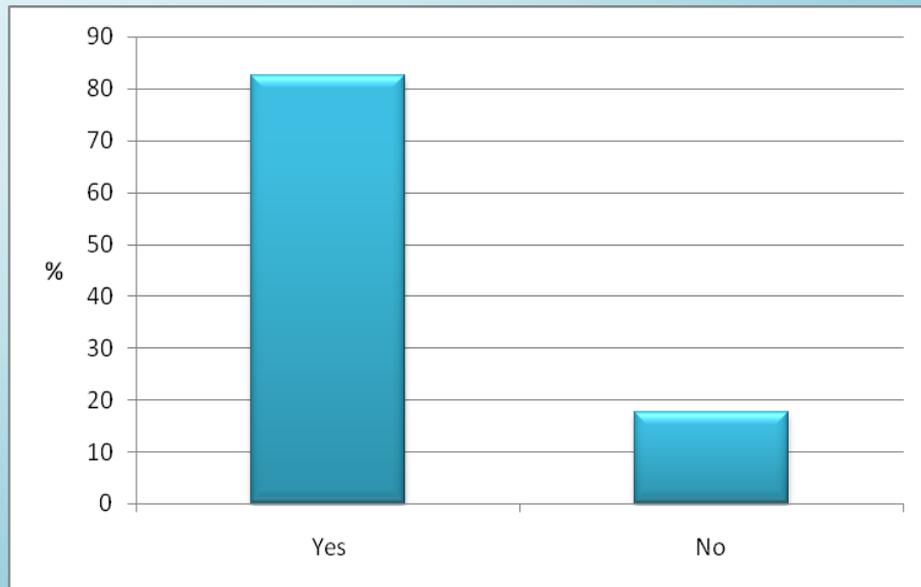


Figure: Have you ever hidden betting slips, lottery tickets, gambling money or other signs of gambling from your partner, children or other people close to you?

Yet individuals taking part in the research acknowledged that hiding debt can be problematic, as it challenged their perceptions of self, especially where the debt caused them to act in ways which were dishonest or untrustworthy, leading to feelings of guilt, stress and worry. Gambling is recognised as a 'hidden addiction' (Ladoucer, 2004), and a common feature was that the discovery or admission of the debt problem was the first indication a partner or family member had an underlying gambling problem:

"It is the shame where you can't share it with other people. Obviously there is a high level of shame with gambling because people in my position, my family, friends and everything else they can't empathise with it and I don't want them to empathise with it. But that problem means that you feel shame and you feel guilt and that makes you feel worse."

(Problem gambler, male, early 30s)

"I was trying to hide it I was trying get up and get to the post first so no one can see it. Unplugging the phones because there were people ringing up for money. Just mental stress all day, everyday thinking: "What are you going to do? How are you going to get out of it?" You are trying to hide it from people."

(Problem gambler, male, late 50s)

Yet veiling and masking the problem had detrimental consequences. It was acknowledged and accepted by problem gamblers as a serious cause of stress and relationship difficulties, but often still seen as necessary to hide the extent of their problems:

Interviewer: "[In] what ways did it impact upon your family relationships?"

Respondent: "Just the lying and things like that. My family have tried to help as much as they can but they don't know much about it either. They do help me but you can soon fall back into it, then you start lying to them again because you don't want to them to know that you have got back into it."

(Problem gambler, male, mid-20s)

Deceit was often linked to the shame and embarrassment which would arise if other people found out about the problem. Many participants felt that they should be able to manage their problems, thereby preventing other family members from finding out:

"Lying to your family about where your monies are. I used up more excuses than soft Mick as to where my money has gone. The more ludicrous you make them sound, the more believable they are. The financial aspect of it, the lying... you don't mean to do it, you just think that you have got to because you feel ashamed of what you are doing and you don't want people to find out. You just want to try and get yourself out of it before anybody finds out. Then you can get yourself out of it, stop all together and you will be fine. I have done it a few times... we are happy for 5 or 6 months and then I just go back to it and then I tell lies to her again and it ruins everything and then it takes me months and months to make up so that we can get back together again. I lie to all of them, my mum included."

(Problem gambler, male, mid 20s)

"The only reason I got away from telling my wife was because I could financially cover it. We do not miss mortgage payments; we do not lose the car. I could cushion the debt. But the problem is that not everybody has access to that. That is a massive impact. If I had gone on for another 2 or 3 weeks that impact would've been massively different."

(Problem gambler, male, late 40s)

Problem gamblers noted the impact that gambling had on levels of communication and intimacy with partners and family members as gambling becomes an isolating activity:

"... my wife nearly left me when I was spending more time gambling than with her. She thought it was good at first. She was with me in the casinos at the beginning but then she saw the sickening amount of money that I would throw away. She thought that it was money that could be spent on something and it was true. It was totally selfish. My wife said you have got to stop, when you are gambling you are not spending time with the kids and the family. And also sexually when you have had a big loss, you lose that intimacy for a period. All you can think about is this massive loss and how you can chase it back."

(Problem gambler, male, late 40s)

Personality changes had a negative impact on relationships with family members as the activity of gambling brought about abnormal behaviour in the individual:

"I couldn't afford to lose that money, however much. But it has gone. It also had a direct effect on me in the ways that it was interacting with my children and my wife. My wife said, 'Why are you always upstairs?' Right through December I would have my head in the computer 'I'm working'. I'm not working, I'm playing poker. It's just that I put the screen of the laptop down when she came up to my office in the house. Another lie. You become more short-tempered, you become more aggressive. Especially when you are in the middle of a poker game and you have to come down and make dinner with the kids. You don't want to be there, you want to be back upstairs. A simple thing of taking the dog for a walk. Under normal circumstances, great. Let's go out. But you are not thinking about it. Your mind is on the gambling. Your personality changes from being nice and calm and relaxed to being aggressive and non-communicative."

(Problem gambler, male, early 40s)

The desire to shield the wider family from the fact of the gambling problem appears to indicate that the gambler realises that they have a problem that will impact adversely on their family. However,

not telling the wider family has in itself the potential to increase levels of stress as well as depriving the individual of a vital source of support in the long-term.

Shame and coping

Comments from problem gamblers and professional stakeholders were analysed to identify responses to gambling-related debt. The participants provide contrasting and unique insights into how debt is perceived and managed by problem gamblers and professionals.

While the eventual acknowledgement of gambling problems and associated debts removed the stress of concealing these issues from family it also introduced new stresses. Here, individuals had to begin to manage their problem debt and this often required difficult lifestyle changes. Furthermore, owning up to the problem often had detrimental impacts on personal and family relationships, in the sense that trust had been damaged and reciprocity needed to be re-established.

Focus group participants commented on the complexities of gambling-related debt and identified the difficulties that individuals face when presenting with problem gambling and debt. The shame of the problem gambler was identified as a recurrent issue by all focus group participants and was a key theme generated through the interviews with problem gamblers. Shame was seen as being generated as a result of both sense of low self-worth and how problem gamblers felt they were being perceived by others. There is a particular issue with the notion of gambling-related debt being a self-inflicted problem, the result of rashness on the part of the gambler:

"There is a lot of shame associated with gambling and debt. This shame is self generated... both in terms of what self generated shame from individual responsibility and what they perceive is coming from different people."

(Gambling advice worker)

"Discussing debt generally is a big issue for people so coming forward for advice is obviously a big step for them. One of the barriers is that people feel a sense of bringing upon themselves when they have an associated gambling addiction. I think that they carry a great deal of responsibility for that."

(Debt Advice Worker)

"It is the shame where you can't share it with other people. Obviously there is a high level of shame with gambling because people in my position, my family, friends and everything else they can't empathise with it and I don't want them to empathise with it. But that problem means that you feel shame and you feel guilt and that makes you feel worse."

(Problem Gambler)

In addition to problem gambling inducing debt, gambling counsellors and debt advice workers felt that the problems of managing the scale of the debt caused stress and anxiety. Even when an individual did not have a gambling problem excessive amounts of debt often brought about feelings of despair and hopelessness. Individuals could believe that their debt was insurmountable and some contemplated suicide in response:

"My wife and my mum were taking it in turns to literally babysit me in case I did anything stupid. It just got that bad I threw my tablets at my wife and said I don't want to live anymore and threw them at her. Total desperation."

(Life course debtor, mid 40s)

"When I asked what I could do to help he just said, "The best thing would be to get a gun and shoot me. Imagine hearing your son saying that...and he meant it."

(Parent of a problem gambler)

"I have got one lady who telephoned me the other evening absolutely terrified because she had to present bank statements the

following day to a letting agency. She is in a situation of having to sell her home which she has been in for 23 years. She is a career woman who has made plenty of money but has gambled it all away and she was seriously considering suicide rather than showing her bank statements because it would bring her shame because she is a casino gambler which is quite rare in a woman. She was seriously considering her own life instead of doing that."

(Gambling Counsellor)

Some gamblers suffered mood swings, from feelings of euphoria, when the individual felt that that they had their gambling and debt problems under control, to absolute despair when the realisation of the scale of the debts diminished the achievement of controlling their gambling behaviour. Whilst remedial strategies can be put in place for individuals to manage their debt problems, this needs to be twinned with assistance to help the gambling problems:

"Clients have an essential feeling of euphoria when they stop gambling then they are counting the weeks that they have been gamble free and then they start to have a period of reflection on the damage that they have caused, become quite grief stricken and the reality of their debt becomes quite depressing, realising that it might be 10 years before they are debt free. And the realisation that they might have to do it on their own. So, initial euphoria and then a period of reality and regret, depression and debt."

(Gambling Advice Counsellor)

In response to the desperation of their situation, some participants perceived gambling as a *solution* to their problems on the premise that they could accumulate funds from further gambling activities that would then enable them to resolve their debt problems ('chasing losses'). One gambling counsellor told of her experiences of delivering help and advice services to those with gambling and debt problems. She found that debt is often associated with notions of feeling *despondent* and *trapped*, leading people to look for a form of *escape*. Often, further gambling was regarded by the individual as a vehicle for helping themselves out of the debt, i.e. a practical solution to their problems:

"One thing that I am finding particularly problematic is that somebody's debt could be cause for relapse. That is one of the main differences between gambling addiction and drug and alcohol addiction. Because of the large amounts of debt that the clients are left with, there comes a certain point in their recovery, even when they are doing really well, when they can be feeling quite despondent about the level of debt that they have, feeling trapped and then gambling in the hope that they may win themselves out of the situation or escaping from the emotional and psychological impacts of gambling and debt."

(Gambling Counsellor)

Effective control of gambling problems can be undermined by insurmountable debt which can in turn lead problem gamblers back into uncontrolled gambling activity. Equally, the problem gambler may suffer relapses that lead them back into spending, borrowing and/or engaging in activities (both legal and illegal) to acquire money for gambling. In both of these types of relapse a structured financial plan will ultimately break down.

A gambling counsellor suggested that the link between gambling and debt is such that a twinned approach is necessary to ensure that both issues are managed and monitored at the same time:

"What I often struggle with is somebody will come in and they will say these are my points of action, I am in all this debt, so therefore what I am going to do is I'm going to go bankrupt, I'm going to get a consolidating loan and everything will be fine. I think by that stage they have got so much debt so in their own mind they feel that the debt is the problem but it is like the layers of an onion of course, underneath the debt is the gambling problem and the reasons for that. So my concern, which I often voice to the client, is: that's great, but if you take care of the debt without taking care of the gambling problem then my guess is that in 6 months time you are going to be back to square one, some way or another. Because even if they have gone bankrupt and cannot find money by legal means they will still find a way if they have the urge to gamble."

(Gambling Counsellor)

The reciprocal relationship between gambling and debt suggests that the mutual recognition of the role of support services from both the gambling and debt advice sectors is vital to devising holistic solutions that challenge the 'revolving-door' nature of many gambling and debt-related scenarios. There is developing practice here, with GamCare's awareness raising programme in the money-advice sector showing where progress can be made. Evidence suggests that this help and advice needs to be delivered in tandem, with cross-agency cooperation (although perhaps not in the same venue and certainly not by the same counsellor), to ensure that the necessary structure is in place for dual support of both the gambling and debt problems. This framework needs to be underpinned by a more thorough understanding of problem gambling and debt from the perspective of problem gamblers, their families, professional frontline workers and service commissioners to identify how this service can be facilitated.

Debt as a trigger to seeking help

For a number of problem gamblers, the discovery of their gambling or debt problem by family members was the point at which they sought help. Individuals were often forced into disclosure and help-seeking by a family member discovering the extent of the problems. This frequently occurred when significant others answered the telephone to a creditor or identified discrepancies on a bank statement or credit card. In one example, the discovery of fraudulent use of a credit card led to the arrest of the individual concerned:

"When we had to report him to the police it brought it home to us. What his gambling had done. We didn't want him to go to prison but we couldn't pay the bill. It was too much."

(Mother of problem gambler)

In all the cases studied for this project it was finally coming to a realisation that they had lost the ability to service debt in the long-term that led individuals to seek help. Amongst participants there was evidence to suggest that levels of unmanageable debt can and do act as triggers to seek help for gambling problems, debt problems or both:

"I simply could not take it anymore. The losses were just getting so horrendous. I was in massive debt. I was worried that a) how was I ever to pay it off b) I was worried about it getting worse. I kind of knew that if I was to come clean, between me, my wife and my mother I knew it could and would be sorted out. If it had got much worse there would have been more serious repercussions."

(Problem gambler, male, 40s)

When levels of debt became difficult to service or financial problems more difficult to mask then the individual regained a sense of responsibility to themselves and their family. The notion of debt as a trigger to help-seeking was noted, but not explored, in an Australian study (Evans and Delfrabbo, 2005), and was found to be a significant catalyst for the disclosure of problem gambling (Valentine and Hughes, 2008). However, as Poulin (2006) commented in her review of the health impacts of gambling, "Although treatment may stop the haemorrhaging of an individual's wealth, it cannot restore lost wealth, and lost wealth can have an impact on health for decades and even generations" (p. 175).

A number of focus group participants understood debt as a trigger for help seeking:

"People want to stop gambling because they can see that it is making a mess of their lives but they are scared to let it go because they are gambling so that they can cope with other things in their

lives so something needs to trigger that need to seek help and it is often debt."

(Gambling Advice Worker)

As gambling became an increasingly solitary pursuit, the true extent of the problem and associated debt remained invisible to friends and family, preventing early intervention. However, when debt became unmanageable and led friends and family to the discovery of the serious gambling problem that was underlying the debt a sense of betrayal was the common reaction to the revelation. Family relationships were particularly stressed by the lying and dishonesty associated with problem gambling and this impacted on daily living within the family over long periods of time. In one of our cases a breakdown of trust and a custodial sentence led not only to the individual losing his partner (and joint care of his child) but also put severe strain on his relationship with his mother and step-father so that even more than a year after the event his mother continued to hide credit cards and valuables and check whether small commissions had actually been carried out by calling the service provider.

Impact of debt on the family

Problem gambling has impacts on sustaining family relationships and these are exacerbated where serious debt is involved. Research has investigated the wider impact of problem gambling at the family level (Valentine and Hughes, 2008). The study *"New Forms of Participation: Problem Internet Gambling and the Role of the Family"* found that problem gambling had harmful impacts on significant others, including spouse/partner, siblings, parents, children, other care givers and household members. Often, the extent of the debts incurred by problem gamblers led to family members intervening to help with repaying the debt, and thus the gambling debt became a financial burden to others:

"The initial effect experienced by most families was financial. The disclosure of an internet gambling problem was commonly accompanied by the disclosure of debts. These ranged for the interviewees from £2000 sterling to £144,000 sterling. In the majority of cases one or more family members stepped into bear some or all of the losses."

(Valentine, pending, 2010)

The stress caused by debt (whether attributable to gambling or not) can be widespread, affecting many family members. The Joseph Rowntree Foundation, in a hearing of the Commons Select Committee on Communities and Local Government, noted that *"the effect of debt and repossession on families is profound and long-lasting"* (JRF, 2008). The following participant is discussing his marriage breakdown which resulted from gambling problems:

"In '81 I found out that my wife was seeing someone else and my marriage broke up then. With the marriage breaking up and me having nowhere to go, I spent about 3 months living on the beach at Brighton. Just sleeping on the stones or cubbyholes on the beach."

(Problem gambler, male, late 50s)

Poulin (2006) found that gambling-related debt had identifiable health and wellbeing impacts that were not limited to the individual but affected the wider family. Repossession has been identified as having well-being impacts including being trigger for families to split up; older children often having to fend for themselves. In extreme cases, repossession can lead to families spending long periods living in sub-standard temporary accommodation with concomitant long-term effects on health and wellbeing. The following frontline service worker identified the longer-term impacts of gambling-related on debt on other members of the household:

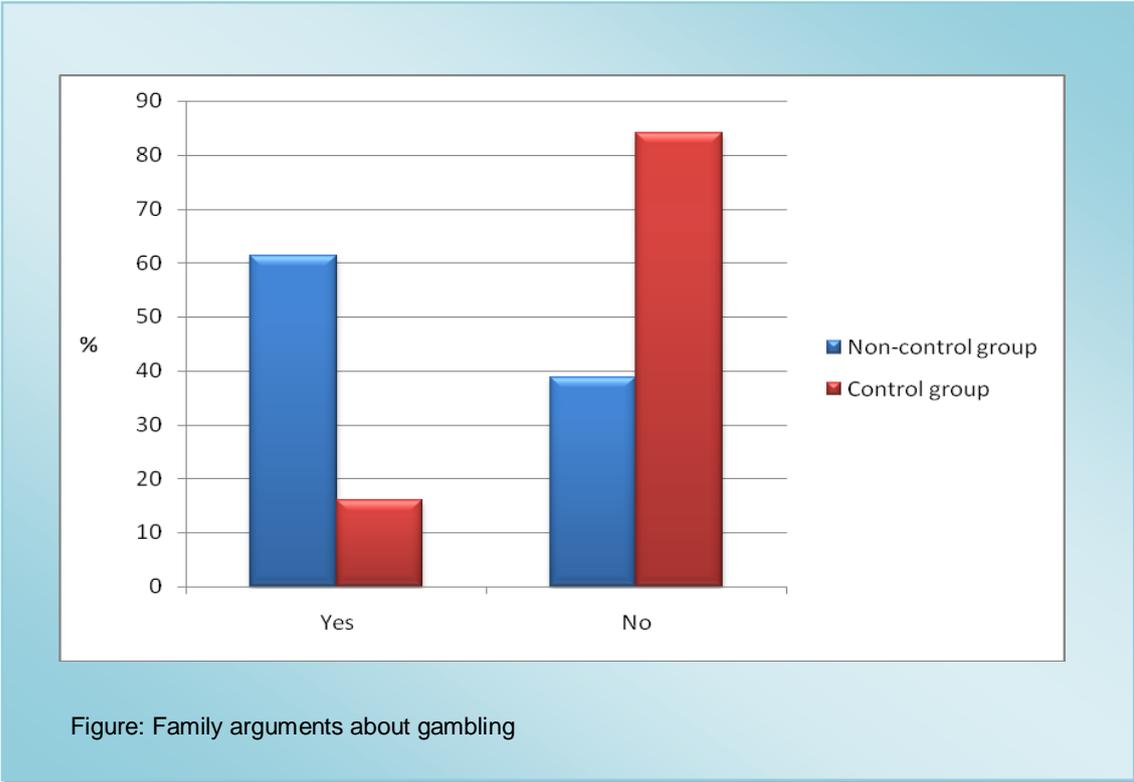
"One man worked full-time and was well paid but had a gambling addiction. He borrowed money from his parents. But he had to tell his wife they were in debt to the tune of thousands of pounds. Their

children were at private school and had to be taken out so there was a huge impact on them."

(Salvation Army Officer)

This quote illustrates one of the many ways problem gambling and resultant debt affects families and highlights the many serious long-term consequences it has, both for the gambler and their family; increasing disadvantage and leaving them stigmatised. Moving to rented accommodation or to live with family members may similarly result in children having to move educational settings with consequences for the child's social networks, educational stability and longer-term prospects (Amato, 2000; Petit, 2004). There are multifarious and inter-linked factors which impact upon the social, economic and environmental well-being of individuals and their families affected by gambling-related debt.

Results from the gambling and debt survey supported comments from participants that problem gambling and debt can be disruptive to stable family relationships. The results indicated that 70.3% of the non-control group had argued about money and of those arguments 61.3% were gambling-related. Only 53.3% of the control group had argued about money and of those only 16.0% were gambling-related.



Participants also identified a concern about the effects of problem gambling on children, especially younger children who are less able to articulate their fears and worries. An example of the effect of County Court hearings for debt on children was noted in one case where a debtor (life course) was regularly being taken to court for non-payment of various credit arrangements after unemployment. His son perceived court as a place where people got sent to prison and was living in fear for months that his father would be sent to prison. The child became traumatised by these circumstances. In this case the matter was resolved after six months but where gambling is an exacerbating factor in debt we have noted that repayment arrangements are more likely to break down leading to repeated recovery actions and adding to the stress levels of children and other family members.

"My wife knows when I am having a good day and a bad day. My boys will go [away] because I start stuttering and slurring my speech because I start having panic attacks over what happened."

(Problem gambler, male, late 40s)

For the following case study participant, who did not have a support network of friends and family, social networks developed through online gambling forums were equally important. Feelings of responsibility to others and perceptions of letting people down were common forum discussion themes.

Case Study – Jamie

Jamie has a previous addiction to alcohol, gambles in betting shops and on roulette machines but does not like casinos or online gambling. His earliest entry on the site is dated June 1st, 2008 and since then he has created 3 recovery diaries; June 08 (Jamie's diary), Sept 08 ('Cannot get this at all'), Oct 08 ('Even better days ahead').

Jamie has identified a number of strategies for coping with his gambling addiction; self-exclusion from all bookies, not carrying any cash on his person, and in particular reading the messages posted on the GamCare forums by new members.

"Without newer members I would probably be gambling again. Reason being, I read the early day struggles and it reminds me what is out there for me if I want to return to gambling."

Jamie talks candidly about the loneliness of his journey and how despite extended periods of 'feeling down' and 'screaming inside'; no one else knows that he is suffering. Membership of the forum is clearly important to Jamie:

"Every time I get the urge [to gamble] I think to myself I don't want to let anyone on this site down."

Other gamblers cited relationship breakdown as a factor contributing to the development of problem gambling. One problem gambler had not managed to acquire a settled life or stable relationship for nearly 30 years and was only now tentatively managing a level of stability as a result of high-level and sustained and personalised intervention provided by a money mentor service.

The evidence found in this study suggested that there is a reciprocal relationship where family breakdown can lead to the onset of problem gambling and debt and that similarly gambling-related debt can lead to family breakdown.

Impact of debt on employment

Gambling has been described as an “enchanted witchery” (Cotton, 1674), distracting people from work, family and society and undermining their ability to participate in everyday life. The experiences of participants within the study suggested that problem gambling becomes the sole activity through which to channel effort and energy, impacting on productivity in the workplace:

“Nothing else matters. You don’t put as much effort into your work”.

(Problem gambler, Male, early 40s)

It therefore becomes difficult for the problem gambler to engage in tasks which require mental purpose and application. Debt worries further exacerbate the problem as the gambler has the twin preoccupation of (i) the urge to gamble and (ii) the need to manage or resolve the debt. Participants within the study suggested that problem gambling does lead to demonstrable signs such as unexplained absences from work:

“At lunch-time at work I was thinking I could just nip out and play. Which obviously I didn’t because I didn’t have time. But I would occasionally leave work early to go and play. So it impacted on my work.”

(Problem gambler, female, late 30s)

Participants in the study talked about gambling as a problem which challenged their thought processes, where the activity of gambling becomes more important than sustaining employment. Problem gamblers spoke of absenteeism from work where gambling was the diversionary activity. In one example this has led to disciplinary action at work:

"I was working but then I got quite bad because I was stealing time away from work to go in the afternoons, I was then subsequently found out that I was doing it at work. I was on a disciplinary from work. I was suspended from work for 3 months. Luckily I managed to hold onto my job more by luck than anything else because my work took it very seriously because I had a team of staff that worked for me so you could say that I was neglecting my duties both to myself and to my staff."

(Problem gambler, male, mid-20s)

The results from the gambling and debt survey conducted within this study suggest that the link between problem gambling and unemployment may be significant. 8.9% of respondents who reported financial difficulties (now or in the past) as a result of gambling were unemployed. At the time this survey was conducted, labour market statistics suggested that the UK unemployment rate was 6.7% (Labour Market Statistics, February 2009).

While gambling and related debt has an impact on work productivity, it also acts as a barrier to employment for unemployed problem gamblers. Some of those participants in our research were genuinely worried about the prospects of getting a job because this would give them access to disposable income, a bank account and various forms of consumer credit. They had a very real fear that they would return to gambling on a larger scale and fall further into difficulty once they had access to the financial means to allow it:

"It is weird because when I have money I spend it, but when I have got none I am alright and I can do without. It is like a part of my

brain that wakes up when I have money and then when I have no money it goes to sleep."

(Problem gambler, male, late teens)

"A lot of people are happy to be on the dole. Everything is paid for and you have a little bit of money. Someone who gambles, it is going to be really hard for them to pay all the bills."

(Problem gambler, male, late 30s)

"That vicious circle of being on the dole, it is hard to find work. If you get a job, then you need to get a job where I can pay my rent and my poll tax or whatever it's called. You need money to get to the place to do your job, then you have got all your food and bits and pieces in between, you need 2 or 3 new outfits when you start a job, you cannot wear the same thing everyday. All that costs. It's having that discipline to say that I going to use this for this and that for that when you are gambling."

(Problem gambler, male, late 50s)

Resolving the twin problems of gambling and debt often require the sustained investment of time to resolve, which may necessitate individuals being absent from work. A number of participants within this study provided examples of appointments with counsellors that they were unable to make because they would have had to excuse themselves from work. In many cases the embarrassment and shame associated with problem gambling and debt often prevented an individual from explaining to an employer why their attendance or productivity was suffering, which made their overall employment situation more fragile.

Problem Resolution

Family intervention

While debt impacted on the family relationships of both gamblers and non-gamblers there was a group of subjects with gambling-related debt that had managed to reassign the worry of dealing with debt, and as a result appeared to have a better chance of reaching a long-term solution to their difficulties. This reassignment of worry was found amongst the gamblers who had access to supportive family members or others willing to take a lead in helping managing the problem. In a number of cases, this required '*taking responsibility*' for the financial affairs of the problem gambler, and in our study this role was taken on by partners, parents and, in two cases, a non-family advice worker.

In response to learning of the problem gambler's level of debt, comprehensive action was taken to ensure that the gambler had limited access to money, that appropriate monitoring was put in place to prevent further gambling, and that sustainable arrangements for repaying the debt were established. These included having 'third party' access arrangements to monitor bank accounts, dealing with creditors and taking on tasks such as arranging counselling. Such approaches were successful because they also supported the problem gambler emotionally, by 'being there' and encouraging the gambler that they were not alone. Reassigning worry to another individual helped support the emotional well-being of the individual gambler and also helped creditors with recovery of money. When family support is available there are clear benefits in solving the twin problems of gambling and gambling-related debt for the problem gambler. The impacts of gambling-related debt on families and the needs of those families in supporting problem gamblers and resolving gambling-related debt is an important issue that needs to be addressed in future research.

Controlled disbursements were often provided by family members of the problem gamblers in our study. This is an

arrangement that appears to help those affected to more effectively manage their problems. The following GamCare Forum member commented on the feelings of safety and security that this gave them yet also indicating that the process can be disempowering for the individual:

"I only get access to a small amount of money daily.... am happy (and good at) living like a boy on spends.... I actually prefer it. I need to stay safe, very safe and this is the way."

Case Study – Paul

Paul is a 19 year old student who developed an addiction to slot machines between the ages of 10 and 14 and then he abstained from gambling until the age of 18 when he discovered online betting (as a result of the Grand National). Paul also visits arcades and is a regular lottery player. Paul first posted on 1st March, 2008 a message entitled "Is this something I should be concerned about?" and then started a recovery diary on 08/03/09.

Paul lives at home, has not admitted his addiction to his parents and is in increasing debt to the bank. He has been advised by other users of the Forum not to set timeframes for abstention as this implies the door to future gambling will be left open. Whilst the size of his debts is dwarfed by those of other contributors, relatively speaking they are just as significant. What he seems to be lacking, in comparison to the other contributors on the site, is someone close by to support him, for example, a parent, friend or partner. The message below was posted on March 12th, 2009:

Case Study - Paul

"Yeah, you were right - the six month thing didn't work... What I'm going to do now is say to myself "why gamble today, I could gamble another day" and I'll post here everyday (or as much as possible) to say whether I did or didn't gamble that way I'll hopefully embarrass myself into not doing it."

Paul posted messages on the forum regularly until his last message on 7th April, 2009.

Family support is not an option for every gambler and in some cases the gambling addiction has depleted their social capital (friendships and networks) (as in the case of Paul, a GamCare Forum member: see case study). As a result problem gamblers try to self-manage the problem with little or no support mechanism in place. This can impact on their mental well-being as they tend to be unsuccessful at resolving their problems in the longer term as a result of not having structures of support to help them cope. Those gamblers with no family support were far more likely to report failure to manage debt repayments, more likely to return to gambling, and more frequently reported feelings of depression and anxiety.

Money management

Many participants felt that the controls in place when dealing with bankruptcies should extend to the banking sector for individuals who wish to acknowledge a gambling-related debt or spending problem.⁹ It was felt that this would ensure that the monitoring of spending in the context of risky or hazardous behaviour became standard practice:

"I have been to bankruptcy meetings with people who are undergoing official receivership and the official receiver has all that information and using that find out if a case is as a result of gambling and they want an official explanation of [why] you have withdrawn that money, what have you spent it on. It is easily done by receivers so it should be done by a bank really."

⁹ If the Official Receiver considers that the conduct of a bankrupt has been dishonest, or blameworthy in some other way, he will report the facts to the High Court and ask for a BRO to be made. If the bankrupt accepts the Official Receiver's report the bankrupt may enter into a BRU. This has exactly the same effect as a BRO but does not involve going to Court. Because the bankrupt admits the unfit conduct, the period of the BRU is likely to be shorter than if the court made a BRO.

(Debt adviser)

"You can only gamble with what you have got but once you go bankrupt you cannot incur anymore credit. So if you don't have the cash you can't do it. If you do it once and get a discharge, second time round with bankruptcy you don't get an automatic discharge. You are bankrupt until you get the discharge which is based on the circumstances of the case, whatever the issues are."

(Insolvency practitioner)

Developing a range of financial controls (albeit in a way that was empowering to individuals) was felt to be a key area for action in the interviews conducted with problem gamblers. The experience of gambling counsellors and debt advisers suggests that controls on spending, however instigated, are an effective tool for bringing about positive results for the individual. Here, some flexibility over the controls that are in place can help retain a sense of control and autonomy for the problem gambler:

"We opened a Credit Union account for [client's name] who said that he did have the concern that they did provide loans and when he had an account with them, then he might start approaching them for money. So we discussed the option of going to see them in advance and letting them know that [persons name] did have a gambling and problem... we went in, sat down and asked for a note to be placed on his account... and that is not taking away any control from [persons name] as to when and how he can access his money."

(Money adviser)

Professionals felt that individuals needed to take responsibility for their problems and that this was a fundamental aspect to managing their difficulties and regaining control of their finances but yet all participants acknowledged that for many with gambling-related debt this would need to be a staged and managed process. A model that might prove useful here is one used in the mental health field. The 'recovery model' focuses on building resilience through goal setting, coaching and mentoring. Similar strategies appear to be being

employed informally by families and also by some case workers within the Salvation Army and a community-based Money Mentors project.¹⁰ There is a need to establish whether this might be a suitable technique for wider use amongst those working in the area of gambling-related debt.

The professionals involved in this study recognised that providing help to individuals with gambling-related debt needed to be a staged process that ideally incorporated significant financial literacy education. The problem gamblers in this study felt that the process of help-seeking and help-acceptance is more complex and difficult than is understood even by those delivering the help. The process is interspersed with phases of relapse, which can and often do impact on the ability to fulfil structured financial management plans. Having an external control in place was seen as something which would help in the management of their problems and provide a level of support and control:

"Now I have been at the [organisation] a few weeks, my project worker helps me and takes me to the post office to cash my Giro, brings me back and pays my accommodation and then whatever I have left I can do what I want with it. Once I have paid my rent and got my baccy. But for SA to give me that help to make sure that I am not wasting that money on the gambling. Last week I had 5 quid left, I ended up walking into town and putting the money into that machine but I don't feel as bad cos I know that I have paid my rent. That I am sorted out for that week."

(Problem gambler)

Professionals recognised that such controls were of practical use in helping alleviate the pressure of managing debt within the context of problem gambling and therefore allowing the individual to start

¹⁰ Money Mentors is an East Manchester based Financial Inclusion project (financed by Manchester City Council) which was set up to help local residents manage their finances. The service is free and confidential and offers one-to-one support or group advice sessions on a range of issues relating to debt, banking, budgeting and benefit entitlements.

thinking about the motivation for their underlying gambling behaviours. There was consensus that controls to manage the finances of the problem gambler would prevent many from defaulting on debt management plans:

"If the problem gambler knew that all the essential bills were paid and he knew for sure that what was left was his money then that is quite empowering in a way because you know what you have got left. The current system puts so much obligation on the individual and so many risks..."

...especially individuals that are at risk that it is inevitable that a proportion of the population are going to default on a debt."

(Charity worker)

Any programme of personal financial management would need to ensure that individuals feel empowered as part of the process. As individuals are able to take ownership of the problem and become more in control of their finances the intensity of the financial controls can then be relaxed. The level of support required would need to be assessed from person to person to take into account their individual needs and levels of family support available. In many cases training or support for family members is needed to ensure that they are supported in managing the gambling-related debt. Gambling and debt has an impact on all household members and a 'think family' solution offers a holistic and integrated way of managing impact.

Awareness and Attitudes

A shift in attitude and approach to managing individuals with gambling-related debt was noted by professional stakeholders. There have been changes in criteria to include those with gambling problems when administering help and advice for debt. This

represents a significant change in attitudes towards recognising gambling and debt as an inter-related issue:

"When I started doing [name of national organisation] 12 years ago the first training session was about how we go about getting information from clients. We were told that if there was a case where people had a gambling problem then we shouldn't be taking those cases on. That was the approach then.

We could not get involved because the attitude was that those debt problems would just carry on escalating and our involvement wasn't going to help them which I don't think is particularly true."

(Debt Advice Worker)

Although cultural attitudes were agreed to have improved over the last twelve years, focus group participants still felt that many interpreted gambling related debt as being entirely avoidable and therefore the responsibility of the individual to sort out for themselves. Despite gambling being an addiction and the clear similarities with drugs and alcohol dependency, focus group participants felt that gambling was interpreted differently, especially in the context of debt. Here, there appeared to be less sympathy with gambling as an addiction, rather it appeared to be seen as a 'reckless' and 'hazardous' activity. A commissioner of NHS services who has spent several years trying to improve service provision for young people with gambling problems said there was now less stigma associated with sexually transmitted disease than with problem gambling and associated debt or crime.

On a significant number of occasions, both debt advice workers and gambling counsellors participating in the research project had supported clients brought before the courts. It was noted by all that there was little consideration or empathy afforded

to those with problem gambling within the criminal or civil justice systems:

"I have had a few cases that seem to have been dealt with differently by the courts. There seems to be a lot of difficulty in understanding that gambling is addictive in itself in the same terms that alcohol or drugs might be and I think we are struggling to get that point across.

I have spoken to a few people where the magistrate thinks that they have been irresponsible and they are gambling for the sheer fun of it and they haven't understood that gambling is actually a dependency."

(Gambling Advice Worker)

Problem gamblers felt that there was little awareness of problem gambling behaviours within the civil and/or criminal justice system. This was seen as important as there are cases brought to court where an individual with gambling problems has committed crimes to feed their habit or to pay off debt as well as gambling being a factor in a proportion of repossession cases and other debt hearings:

"The courts have shown little leniency when the client undertakes activities which are attributable to problem gambling and the need to acquire money. When presenting at court I am increasingly being asked to write reports about the psychology of gambling because there is so little understood by the issue."

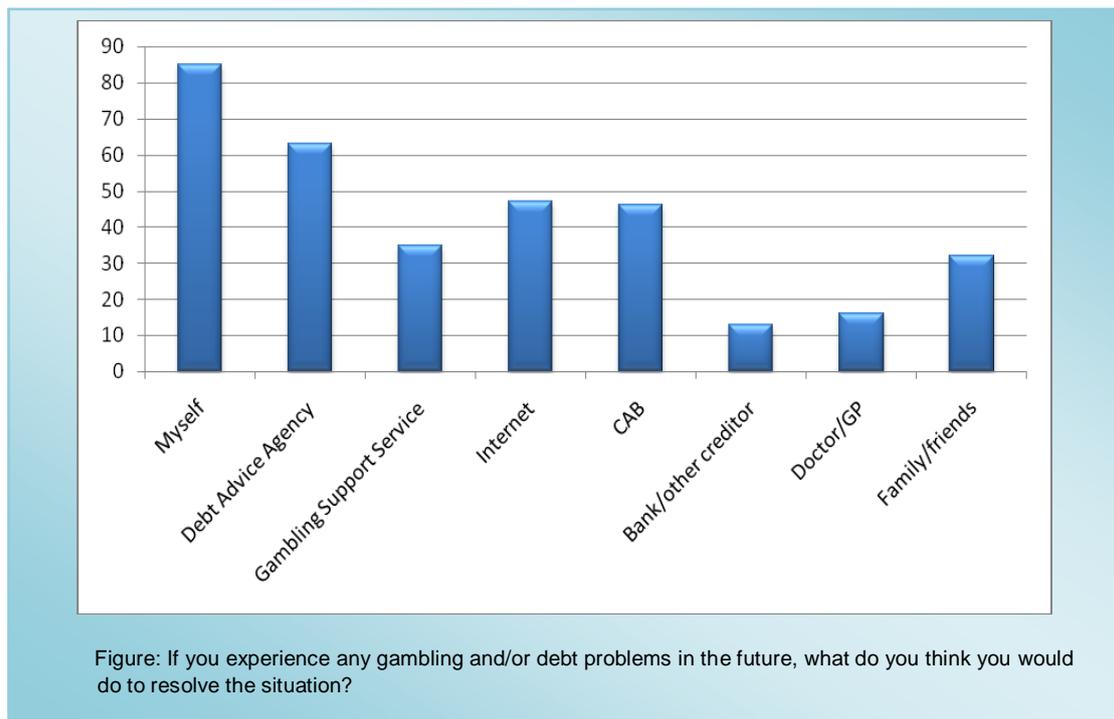
(Gambling Counsellor)

"They [the courts] tend to think that gambling is undertaken by somebody that is behaving irresponsibly or they are just gambling for fun whereas with drugs and alcohol there tends to be an understanding that there is some underlying reason for it."

(General Advice Worker)

Unhelpful attitudes towards gambling and debt were cited often by problem gamblers and debtors as a reason for not accessing

services. In the gambling and debt survey, when those who had experienced previous problems with gambling and debt were asked who they would present to if the problems re-occurred, the highest number of respondents reported that they would manage the problem themselves. Barriers such as perceived shame and responsibility, lack of information and awareness of existing service or previous negative experiences of treatment prevent those with problem gambling and debt from accessing services.



Responsible Lending

All participants in our focus groups and most of our interviewees felt that more proactive interventions could and should be developed by consumer credit institutions. An example of good practice is Barclaycard’s insertion of helpline details for people with debt problems on their credit card bills. Problem gamblers felt that a contributory factor to their lack of control was an inability to deal with the consequences of access to credit, and many stated that

they needed a more specific intervention from the banking sector. This included intervention mechanisms imposed on accounts and individual finances:

"I think it could actually go a bit further than freezing accounts. Banks could potentially offer an ongoing support within branch and a telephone service to assist clients with gambling problems. It might be that they want to open a bank account and say to the bank straightaway I am a gambler. I have admitted that I am a gambler."

(Advice Agency Counsellor)

There was concern expressed by debt advisers that there was no effective mechanism to prevent self-acknowledged problem gamblers from barring themselves from accessing credit. Current practices for alerting consumer credit providers to incidences of problem gambling were deemed insufficient and in some examples had failed:

"There is a mechanism where that can be done at the moment. Credit reference agencies can send a note to your bank to say I have a gambling problem and I don't want to borrow money. In my experience that doesn't work too well. We have a case going through at the moment where a bank lent somebody 15 thousand pounds by the bank despite that being on there. That case is currently going through the financial ombudsman whether they should have been allowed to borrow that kind of money."

(Debt Adviser)

However, consumer credit representatives offered a range of views on the practical and ethical issues regarding the application and maintenance of more interventionist systems. They suggested that it might require concerted effort to negotiate an agreed position on the use of techniques such as alerting credit reference agencies to instances of problem gambling. Nevertheless, professionals felt that they were necessary for the identification of gambling-related debt:

"I don't see why, because these customers are particularly vulnerable, why these large credit agencies wouldn't share this

information, if you informed one that they could put something on their system that they know would appear through the scorecard and would be clear. If somebody is a discharged bankrupt then we won't open them up a current account. It will come up as failed scoring.

So there are markers that the credit reference agencies use that all banks are able to detect through a normal credit scoring system without physically putting in the customer's details and printing off a report."

(Third Party Liaison Manager)

"The immediate thing I am thinking of is discriminating against people. If there was a voluntary correction notice on their file then we would take notice of it. So if someone says, "As part of my treatment because I have got a problem I need to make sure that nobody lends me any money", then if subsequently they come to us in a positive moment and we credit score an application for credit it would pick that up and we wouldn't grant credit."

(Recoveries Strategy Manager)

Creditor representatives were uncertain that such notices would be identified by the system authorising the loan or credit facility:

"In terms of our credit scoring systems we would not necessarily pick up corrections notices, we would only pick up the adverse information so those systems automatically pick it up. It is only where we perhaps have reason to suspect that the customer is not telling us the truth or the credit search might need to be looked into in more depth that we would do a physical credit search."

(Third Party Liaison Manager)

"I would like to say that it would not get an automatic yes. I don't know of any instance of where it has or has not happened but that is my theoretical understanding. Cos you don't notice the corrections in the event of debt and mental illness as well. Where the mentally ill might decide or have that decision made for them by the counsellor, what you need to do is enter something on your correction agency records so that... which we come across occasionally."

(Recoveries Strategy Manager)

These comments suggest that secure and robust systems are not in place that could identify problem gamblers through credit searches although it may be possible to develop these. In some cases the posting of credit messages was futile as they were not acted upon and individuals were allowed access to credit cards and bank/building society loans. In other cases problem gambling was not considered significant enough to warrant a search thus enabling problem gamblers access to credit. This issues may extend into the use of 'behavioural data sharing' among creditors via credit reference agencies although that goes beyond the scope of this report.

Creditor responses to gambling-related debt

The presence of gambling-related debt has been observed by recovery teams working in the banking and credit sectors as a progressively more significant issue. Nevertheless, there was no policy or protocol in place for dealing with problem gamblers. Similarly, representatives from the credit and banking sectors did not identify any procedures for managing clients with gambling-related debt differently to life-course debtors:

"We will ask them about their underlying problems to ascertain that what they do offer is not something that is going to fail at step one."

(Recoveries Strategy Manager)

"When a payment fails it'll go straight to dialler where a call is made. The agent when getting in touch with them will ask why that has happened. If they said, 'Well it's because I gambled away all the money that was meant to come to you' then I think it is likely that they will say, "Don't you think you ought to do something about that." I don't think we would look at it the other way round

and say we have identified that they are gambling so we will signpost them to particular treatment."

(Recoveries Strategy Manager)

"We would not ask them [about gambling] directly but we would mention that we have noticed these transactions and we would say to them, 'How much are you spending on gambling? Because clearly like smoking, entertainment or anything else it is an area that you can cut back on in order to help you meet your day-to-day expenses and your commitment to be paying us as well."

(Third Party Liaison Manager)

This was not always standard practice. A small number of professionals from debt recovery teams did respond proactively to customers who were experiencing physical or mental health problems. Here there was evidence of working practices being more flexible to the needs of the customer. Much of this work involved the person-centred delivery of services where budget plans were tailored to meet the needs of the individual:

"The [name of town] Financial Guidance team all have the number for GamCare and they would hand that out if the customer said that they wanted help and guidance. I am not aware if that number is handed out on a regular basis and I am only guessing that is because the customer could be quite defensive because of the nature of the questions being asked, "Is the amount of money that you spend on gambling a problem?" The reason we included that question is that GamCare suggested that it was a good question. [edit] It's more about what you are spending your money on rather than asking if they have got a problem.

(Third Party Liaison Manager)

"So if a customer is ill in any way, physically or mentally, gamblers would almost certainly fall into that category, they would be referred to the team [that] do not have collections targets, they are simply there to offer a budgeting service and to help find a repayment solution and they focus on building empathy and rapport with the customer and really getting under their skin and finding out what the best solution is for the customer and getting the customers buy-in. Its all very well coming up with a solution but if the customer does not understand how it is going to help them that solution is only going to fall down and go through the collections

process. We have to give out the regulatory legal warnings and of course the more payments you miss and the further down the chain you go the more the likelihood is that the debt will be passed onto a debt collection agency or that legal action will be settled."

(Third Party Liaison Manager)

The Royal College of Psychiatrists, commissioned by the Money Advice Liaison Group (MALG) and funded by the Money Advice Trust (MAT), has developed a standard Debt and Mental Health Evidence Form (DMHEF) to support the MALG Mental Health Awareness Guidelines. The purpose of the DMHEF is to assist advisers and creditors in requesting relevant and proportionate information from health/social care practitioners about the impact that a consumer's mental health problems might have on their ability to repay debt (Money Advice Trust, 2009). It is not clear whether these forms will be used where a gambling-related debt is involved, as the notion that gambling is 'rash' or 'hazardous' rather than a symptom of a mental health problem or other underlying issues appears deeply ingrained. However, in general terms, creditors think these will be a useful tool in effectively managing debt recovery:

"We understand that there is no point in calling people 3 or 4 times a day, leaving messages on an answer machine if they are physically or mentally not in any state to repay us because that is just not fair to the customer."

(Third Party Liaison Manager)

Debt recovery teams exist to recover the money that the institutions have lent and, without the co-operation of the individual in seeking help to stop gambling, creditors are unlikely to take steps to stabilise the quantum of the debt (e.g., by freezing interest and waiving charges):

"If we have a customer that is very defensive who does not admit that they have got a problem we would refuse to freeze charges and interest for them because without their commitment to stopping the gambling it then makes it very difficult for us from a

business point of view to say that we are going to help you whilst you are not helping yourself. It is very difficult [to do that] because we understand that gambling is a mental illness but as a business we have to look at that."

(Third Party Liaison Manager)

"We did have a chap that had a severance pay of 30 thousand pound in October [2008] and he had spent it in 6 weeks on various online transactions which were all clearly gambling and national lottery tickets etc and in January when he came to us claiming hardship we did say to him at the time that we would not, because he didn't have any arrears on his mortgage or priority debts, that we would not pay money directly into his account even though he was suffering from hardship. [edit] We said we are not prepared to put money into your account because we believe that looking at this evidence that you are not going to spend it on what you need it for.

(Third Party Liaison Manager)

These comments indicate the difficulties faced by creditors identifying and dealing with gambling related debt. The following manager commented on how preconceptions impact on the way that creditors may react to individuals:

"You can't always tell [with gamblers] because they don't always tell the truth. It's like alcoholics they are not always going to tell you where the money has gone."

Reducing prejudices against problem gamblers across a variety of help-providing sectors is a vital task for action.

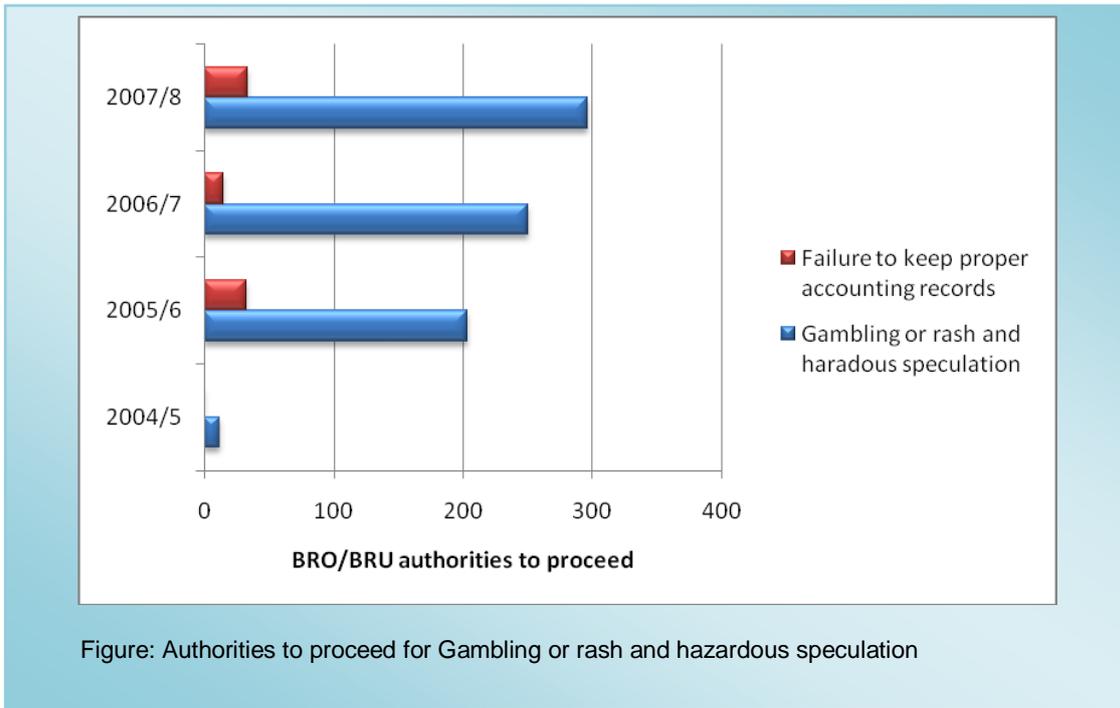
Debt, bankruptcy and problem gambling

The regular Credit Action reports offer an analysis of credit and debt in the UK. The statistics provide some indication of the current debt status of individuals within the UK.

Debt: The Facts

- Total UK Debt stands at 1.46 billion.
- Average household debt in the UK is £9305 (excluding mortgages).
- Every 3.5 minutes a person becomes bankrupt or enters into an IVA
- Citizens Advice Bureau deal with 7,423 new cases with debt problems everyday.
- Total credit card debt in the UK is £54.4 billion with an average credit card limit of £5129 per person.
(Credit Action, May 2009)

A further indication of levels of unmanageable debt in the UK are provided through Insolvency Service statistics indicating that there were 19,062 bankruptcies and 10,713 Individual Voluntary Arrangements (IVAs) during the first quarter of 2009 (Insolvency Service, 2009). From these figures, it is possible to extrapolate data



regarding those presenting with bankruptcy and gambling problems. The results indicate that levels of Bankruptcy Restriction Orders and Undertakings (BRO/BRU) related to *gambling or rash and hazardous speculation* have been rising year-on-year since 2004.¹¹ These orders allow the time an individual spends before being discharged from bankruptcy to be extended for up to fifteen years, although between three and seven years is a more likely period of supervision.

The use of BRO and BRU procedures to manage the bankruptcy of those individuals considered to have contributed to

¹¹ It is not possible to distinguish between cases that are gambling and cases that are rash or hazardous speculation

their situation has only been in force since the Enterprise Act (2002) came into effect. This means that there is no comparable data for earlier periods. Nevertheless, the trend seems to be an increase in cases where gambling is concerned. The Insolvency Service only proposes that a restriction be imposed if they believe the gambler had not taken steps to control their problem behaviour. Research participants from the Insolvency Service identified that problem gambling was prioritised in the interviewing process and was a key question when determining the cause of debt.

The investigations conducted by insolvency practitioners at the stage of someone petitioning for bankruptcy include assessing the extent to which personal debt is attributable to problem gambling. They are also active in identifying whether the individual is currently receiving help for their gambling problems in order to decide whether the individual is taking steps to reduce the risk of further gambling-related debt:

"If we have decided that gambling might be an issue which might lead to a Bankruptcy Restriction Order there will be a further interview and at that point the issues such as have you sought advice, who did you seek advice from, how did you respond to the advice are asked."

(Insolvency Practitioner)

However, insolvency practitioners were specific about the role that they fulfil; their objective is to establish the reason for the bankruptcy petition being filed and the nature of the client debt. Insolvency practitioners felt their role stopped short of signposting problem gamblers to advice organisations even if that client expressed a clear need for professional advice:

"We do not offer signposting to problem gambling organisations. Our job is to find out what happened and why it happened and that is basically the end of it."

(Insolvency Practitioner)

"We don't see that encouraging people to seek advice for gambling problems is a big part of our role really. We don't offer much aftercare for our bankrupts."

(Insolvency Practitioner)

Nevertheless, seeking treatment for problem gambling was seen as a mitigating factor in assessing whether imposing a BRU or presenting a case before the courts for a BRO is in the public interest. Leniency was applied to problem gamblers who were actively engaged in a help and advice programme:

"Our role is to make sure that we take forward the cases that are in the public interest and one of the factors that we think about in the analysis of the public interest is yes they have gambled, they have lost lots of money and gambled when they shouldn't have been but if they have gone and got help and are recovering and maybe their conduct is not that serious then we might say on balance that this is not in the public interest because people are trying to help themselves."

(Insolvency Practitioner)

Insolvency practitioners play a key role in identifying problem gambling as a cause of people falling into debt and petitioning for their own bankruptcy and also in cases where creditors petition for bankruptcy. At that time the individual may or may not be actively seeking advice for their gambling problems. There is no standard protocol on the part of insolvency practitioners for signposting to advice and/or other support services, although it might be feasible for the Insolvency Service to recommend or stipulate such a practice in its regulatory capacity in future.

The gambling and debt survey undertaken with the control group revealed interesting findings when compared with the non-control group. Although the small sample size did not generate conclusive findings for bankruptcy filing rates, other types of debt action were compared. Those who had a current or previous gambling problem were extrapolated from the survey results

(n=79) and compared with a random 79 respondents from the control group. Those with gambling problems now or in the past demonstrated significantly higher respondent counts across all forms of recovery action. This was most pronounced for: correspondence from creditors or their agents, involvement of third-party debt collection agencies, and disconnection for non-payment of utility bills. Those with a gambling problem are also six times more likely to have a County Court Judgement imposed upon them and eight times more likely to have a visit/correspondence from bailiffs.

These findings indicate that problem gamblers are more likely to undergo financial hardship as a result of debt and experience one or

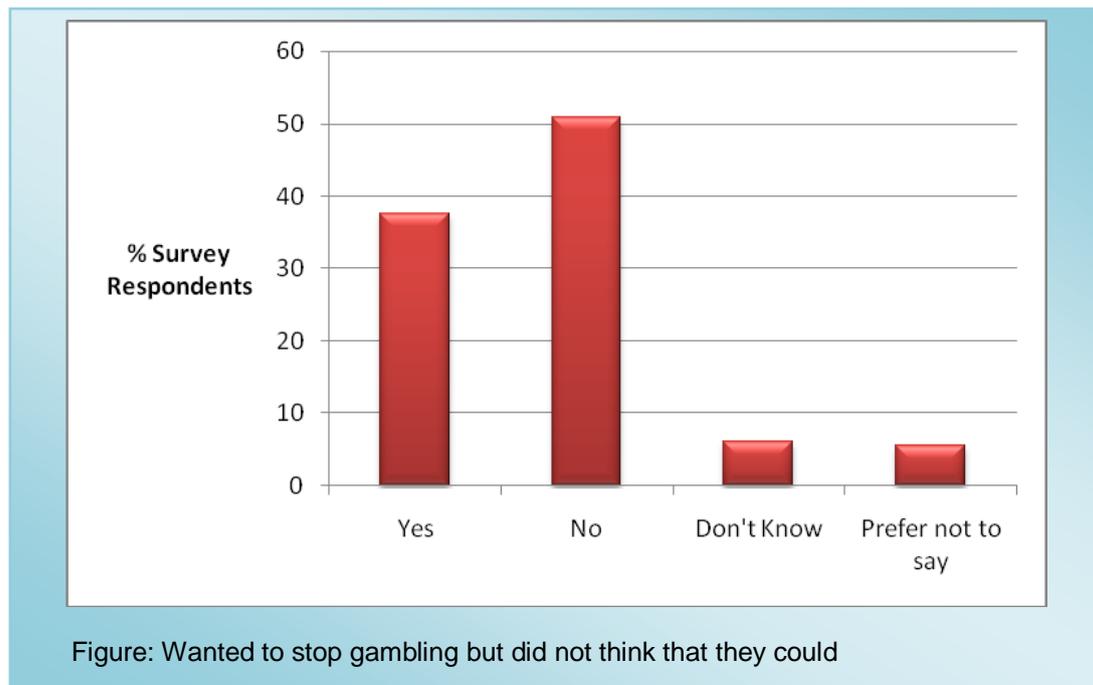
Form of Debt Action	Control Group	
	Problem Gamblers Respondent Count	Non-Problem Gamblers Respondent Count
Correspondence from creditors or their agents	45	11
Involvement of third party debt collection agency	32	5
CCJ	12	2
Visit or correspondence from bailiffs	8	0
Disconnection of gas, electricity or phone	5	1
Charging order	4	2
Eviction from home	2	0
Visits or threats from a loan shark	2	0
Order for sale	2	0
IVA	2	1
Possession hearing	2	0

Table: Types of debt action across problem gamblers and a random control group sample.

more forms of creditor action although the causal relationship between the multiplicity of creditor recovery activities and insolvency routes is not clear.

Accessing Help and Advice

An analysis of the data from the non-control group revealed that a high percentage of respondents (37.6%) felt that at some stage they have wanted to give up gambling but they did not think that they could.



Interviews with problem gamblers and debtors and professional stakeholders helped identify some of the potential barriers to seeking help, and some of the pitfalls which individuals encounter in the management of their gambling and debt problems. Some of these barriers are psychological and revolve around shame and responsibility (see above pp 42-44) whilst others are organisational and institutional barriers to seeking help.

Information and awareness

A significant barrier to accessing help for problem gamblers was the lack of information and awareness of gambling advice organisations to help them deal with the problem. The gambling and debt survey undertaken with the control group revealed that there were high levels of awareness of the self-help organisation Gamblers Anonymous but significantly lower levels of awareness for all other gambling advice agencies.

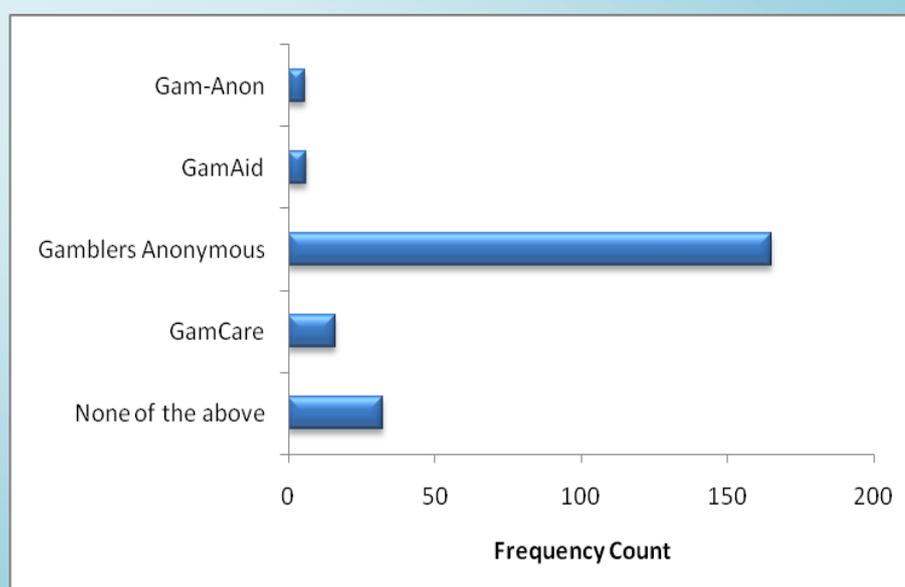


Figure: Awareness of gambling advice agencies

Accessibility of information and advice services was discussed amongst problem gamblers and gambling and debt professionals. Participants felt that there was a lack of information about and awareness of where to access help and advice for those living with problem gambling, and those organisations that do provide such

support services were 'standalone' i.e., they did not provide (or signpost) both gambling and debt advice under one umbrella:

"There is not that many places where you can go for help. Yes, there is the odd organisation where you can get gambling problems addressed but then I don't know where to go to sort my money problems out."

(Problem gambler)

"Awareness is a problem. There is a shockingly low awareness and I was quite surprised, speaking to people anecdotally, the level of awareness of gambling help organisations such as GamCare is low and I don't know why that is. It is surprising that so many don't know the Gamble Aware website for example. Agencies and organisations that you think would be in people's consciousness."

(Gambling Commissioner)

Levels of awareness of debt advice agencies were significantly higher than levels of awareness of help for problem gambling. Participants from the non-control group asked about their levels of awareness of debt advice agencies most commonly cited Citizens Advice Bureaux. The FSA and National Debtline were also well represented.

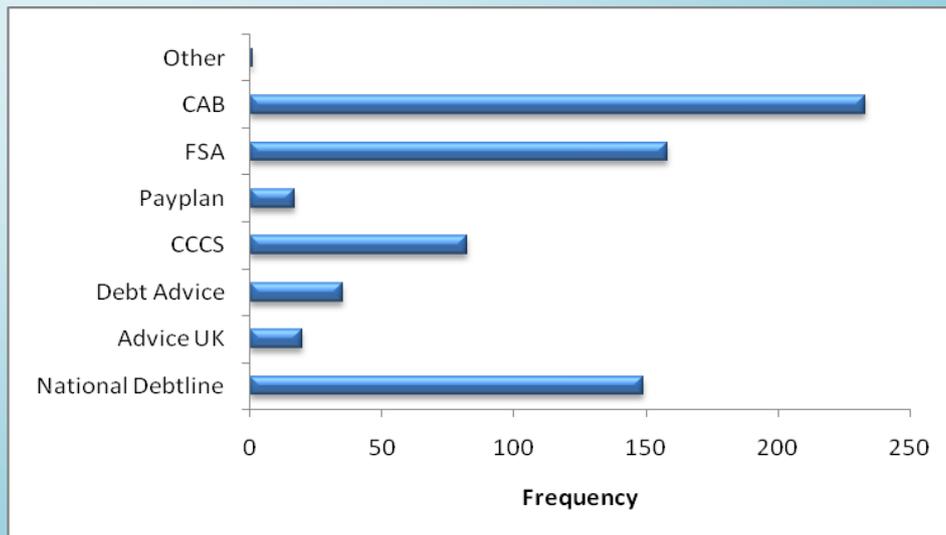


Figure: Awareness of debt advice agencies

Findings from the focus groups and interviews undertaken with professionals and problem gamblers identified the shifts in attitudes towards credit and debt over the last decade or more. Participants felt that the younger generation have grown up in a climate where there has been easy access to credit products and financial services. This has been closely aligned with an increasing ease with which people can access debt products such as overdrafts, credit cards and loans. Yet this has not been met with a corresponding increase in educational initiatives for young people to teach them about these changes. Focus group participants felt that financial literacy education and information about the potential negative impact of gambling needed to be offered by schools and colleges to young people. However, the probability of this happening was questioned, given the demands on the current curriculum and the somewhat contingent status of financial capability on the curriculum overall, unless there was a robust evidence base to drive it:

"The change in regards to personal, social, health education in schools being made statutory will have a major role to play but again you are competing with limited curriculum time and on the scale of health education, gambling will always come after substance and alcohol misuse and sexual health so you are always competing with higher vulnerability and risk taking behaviours but the outcomes of sexual health are more tangible. You have an aim there to reduce teenage pregnancies, but with gambling what is the overall aim."

(Healthcare Professional)

Participants noted that there was potential for accessing young people and their parents via after-school and other community initiatives, as a viable alternative to reliance on inclusion of these issues on the curriculum. Focus group participants highlighted successful and effective working practices already taking place:

"There is a group called the Family Care Group and they do a programme called 'Quid's In' and with relation to the community and local government they are doing something with the over 11s, something at an after school club that you can do to learn about money management and then pass that onto their parents. When you live in an environment that is credit based, where we get credit and pay it off, it is about re-integrating a correct money management approach and stressing that gambling does not have to be so negative all the time."

(Charity Research Officer)

Focus group participants agreed that such activity needed to extend beyond schools; identifying and targeting at-risk adult groups. Participants concurred that there needed to be more work undertaken to identify the impact of gambling and debt (however incurred) amongst the more deprived sections of society, given their vulnerability to the problems of unmanageable debt:

"The environment is very important to us establishing those at-risk groups. The indices of multiple deprivation: your employment and income scale..."

...if they are low then it indicates that you have a higher susceptibility to problem gambling which links into social exclusion and other indicators."

(Charity research officer)

Other participants noted that the impacts of the current financial crisis on individual members of society could be longer-lasting than the lifespan of the recession as a macro-economic phenomenon. Those individuals who are likely to be made redundant or experience a significant cut in their income were regarded as a possible at-risk group that may experience problems with debt and also, having more time available, potentially could develop gambling problems:

"With the credit crunch we are going to see a large number of people made redundant, a large number of people having their houses repossessed. At the point that happens they need to be given an indication of what the consequences are of being made redundant, of not having a job, losing their home. That seems like a good idea to target people who are at risk, so targeting them at a point that might be beneficial in the future."

(Insolvency Practitioner)

Given that a number of problem gamblers identified that the root cause of their problems was triggered in early childhood, the need for educational initiatives that are firmly embedded in the curriculum is important. This will ensure that issues of debt, budget management and gambling are given increased transparency and visibility at a younger age.

Industry

Gambling and casino operators who participated in the focus group identified the types of interventions that took place within gambling premises. There was evidence of good-practice from land-based casino operators of procedures in place for identifying

problem gamblers on their premises and interventions used if it was felt that an individual was displaying problem gambling behaviour. Such procedures involved subjective interpretations by staff members as to signs, gestures and other behaviour that might indicate problem gambling:

"In casinos if we think that somebody is exhibiting behaviour, they are coming towards a problem with their gambling we will actually intervene or speak to them about it. We recognise changes in behaviour... so maybe they come in earlier in the day or perhaps they come in more frequently."

(Casino operator)

While some participants reported that they had been approached about their gambling behaviour whilst in a casino and that this had had an impact on their behaviour, no similar interventions in other land-based gambling settings were reported by the problem gamblers in our study. Many felt that there was a need for interventions in land-based settings which were more direct and proactive:

"You can't tell me that a woman who is in the arcade working...she will watch her customers and know exactly who has got a problem and who hasn't and I have often spoke to them and they have told me that such and such came in here and they blew thousands a week. And I think why don't you help them?"

(Problem Gambler, Female, early 30s)

Many problem gamblers felt that there should be an enforceable limit on the amount of money that they were permitted to spend at any one time. Yet participants also felt that the introduction of such limits and controls was unlikely, given that the gambling provider was running a business which needed to make profit:

"Unless there is a limit on what money you can spend in an arcade but that is not why they are in business. They are not going to cap it and say 250 is your limit and when you get there you've got to go."

(Problem gambler, Male, late teens)

It was recognised that even if operators did intervene it would require the willingness of the individual to recognise that they have a problem and stop gambling at that point. A number of problem gamblers within this study felt that in many cases operator interventions may only have a very limited impact which may prevent them gambling for a short period of time. Others felt that such interventions were under-used and did not go far enough and that they provided a useful reality-check for problem gamblers when they are losing control of their gambling.

Self-Exclusion

Self exclusion is a scheme provided by gambling operators which allows individuals to bar themselves from gambling for a minimum period of six months with individual operators either online or on premises. With land-based operators they must personally present to each gambling premises with a photograph and complete a self-exclusion form. However, the effectiveness of self-exclusion programmes was variable. Physically presenting at the gambling operator was seen as a significant barrier to seeking exclusion and, for many, was associated with shame and embarrassment:

"There are processes of self-exclusion but people are loath to do that because it is drawing attention to the fact that they have got a problem."

(Problem Gambler, Male, late teens)

In some cases, gambling operators tried to prevent the self-exclusion of their customers by drawing out the process and asking for sensitive information. In the following example this delay resulted in further financial loss to the individual:

"When I asked them to self-exclude me, the woman wrote back and she said 'we want to know why such a valued customer wants to exclude themselves'. That one e-mail was enough to halt my decision for self-exclusion and I then lost a further £3,000. My next e-mail was, 'exclude me instantly, do not try and ask me for reasons why or I will be going to the gaming commission and I will post this on the GamCare forum' and then they self-excluded me. This [online] casino, even though they were run by [name], it was a relatively new casino and they have been hit by the loss of the American market and they have tightened up but if they are serious about a social commitment to responsible gaming do they really want money from people that lose their homes and in some cases lose their lives."

(Problem Gambler, Male, mid 40s)

Another limitation with self-exclusion is that the problem gambler can see it as the resolution to their gambling problems. Self-excluding from a favoured venue can convince the gambler that they do not need to seek other help or support for their gambling problem. However, in practice the gambler often continues to gamble, just through other channels. Moreover, participants in the study who have self-excluded have often subsequently undertaken necessary evasive procedures to prevent them from being identified by casino and gambling operators if they wanted to gamble in the venue again:

"In a few months time the people that actually work in that bookies or arcade will move on to a different job and they will get other people in, so when you go in the people don't recognise you."

(Problem Gambler, Female, late 30s)

"Firstly, I know that it is really hard for a compulsive gambler to go to a casino and exclude themselves. Then you have to go round every one and make sure that you exclude from all of them. Also, those with a problem find a way to gamble. I would just go to another casino down the road. There are ways of getting round self-exclusion."

(Problem Gambler, Male, early 30s)

One of the case studies from the GamCare discussion forum was 'FootyFan'. He started gambling to excess in 2005 when his mother was dying. He was initially involved in online gambling but after self-exclusion, started on the roulette machines at the bookies, negating the effect of his exclusion from online sites.

Case Study - FootyFan

FootyFan started gambling to excess in 2005 when his mother was dying. He was initially involved in online gambling but after self-exclusion, started on the roulette machines at the bookies. He has been 'bailed out' four times by his wife and no longer carries any money around with him having handed the management of his money over to his wife. He lost his job in October 2008. FootyFan began his recovery diary entitled 'My story - day 2 diary begins' on March 5th, 2009. Unemployed now for over 7 months and gambling free for over 80 days, FootyFan speaks candidly in his recovery diary about the restrictions his addiction places on his search for employment, as having access to money is a factor he sees as increasing the risk that he will return to gambling. He is also worried about his use of time, as when time hangs heavily he thinks about gambling.

"..my gambling issues limit where I can go, sort of. I daren't take a job that means I have to stay away from home. That means I have Time and need to carry money and we all know of the equation

Time + Money = Gambling"

Self exclusion from bookmakers, arcades and bingo halls was found to be very difficult to achieve in reality for all the gamblers who participated in the study. Moreover, different operators do not share their self-exclusion lists meaning that problem gamblers often have to go to a number of different operators to self-exclude:

"A lot of bookmakers do offer self-exclusion but you have got to go in there physically obviously. I know some people that have done it and they admitted they spent the day going round the bookmakers. I wouldn't have the balls to do that. I take my hat off to them that they can do that. Ladbrokes have a self-exclusion programme but it is a two-way commitment. Staff can't look at every face and think well he's self-excluded."

(Problem Gambler, Male, mid 30s)

"I know that the only way I am going to stop is to have the balls to send that e-mail, self-exclude myself as quick as I can."

(Problem Gambler, Male, early 40s)

"One of my mates did that. In [name of small town] he took his passport and ID into [gambling operator] once. But he used to then go into [gambling operator] or [gambling operator] so it defeats the object. You just don't go into one of them. There are that many about... round here is only a small area but it would probably take me about two weeks to go and exclude myself from every bookies."

(Problem Gambler, Male, mid 20s)

The *Gambling Self Exclusion Program Count Me Out* has laid the foundations for sharing information on self-exclusions through the provision of a database of self excluded persons that enables information to be easily and legally shared between members, licensees, partner agencies and support groups such as counselling services. Although there were notable absences in the list of participants, the existence of a database provides a means for managing the process and removes a number of the barriers to individuals presenting for self-exclusion.

NHS

A common theme across almost all responses from problem gamblers was the impact of debt and gambling-related debt on their general and mental health. The health impacts of debt are an area of growing concern with several recent reports highlighting the cost to the NHS of coping with the symptoms of debt and pointing to the need for holistic service provision and effective signposting to advice and support services to help people resolve the stresses to health brought on by debt. (See for example, Dept. of Health, 2009; Mental Health Foundation, 2009; Fitch et al, forthcoming; Royal College of Psychiatrists, 2009) The mental and physical

symptoms of problem gambling and debt brought people into contact with GPs and other healthcare providers. Those dealing with life-course debt were as affected by this issue as those with gambling-related debt but where the source of the problem was admitted to the GP do appear to have been generally treated with more sympathy by NHS practitioners than those with gambling-related debt.

In most of the cases found during this research presenting to a GP was regarded as a barrier to accessing effective help. People turned instinctively to GP surgeries for help; often because they were experiencing anxiety and depression as a result of their debt and gambling problem. A survey by National Debtline found that 36% of their customers turned to GPs for help with debt-related ill health (London Health Forum, 2009, 16) Yet despite this demand for support there appeared to be little awareness amongst GPs encountered by participants in this study of the range of services on offer for people with gambling and debt problems. This led individuals to assume that if their GP could not offer help or support or signpost to relevant third-party agencies, then there was probably no help or support available. Furthermore, there was no evidence among GPs of awareness of the impacts of problem gambling or gambling-related debt on long-term physical and mental health:

'I have been to the doctors a few times and they say, 'I don't know where to send you to''

(Problem gambler, Male, mid 20s)

"They just need a better understanding of where to refer to you to especially round here because they don't have a clue who to send you to because they don't have a phone number or anything. They didn't even have the number for GamCare; I had to go and get that on my own. That is the most recognised people... they did not even say have you been to these or anything. They did not mention one form of help or advice or anything."

(Problem gambler, Male, mid 20s)

Often GPs identified an underlying/associated health problem and provided a course of medication to help with this, without being able to provide additional signposting to appropriate help and advice agencies. There appeared to be little awareness amongst health practitioners of the causes and impacts of the problem:

"The first doctor was alright, he tried to put me through to somebody called a prime team that deal with drugs and alcohol so he referred me to them and I went back and seen him a few times and he gave me like tablets to sleep and stuff and tablets to stop the depression. He was trying to help and he did all right with me but you go and see different doctors all the time."

(Problem gambler, Male, mid 20s)

Although in this example the referral was prompt, the mental health team subsequently refused to see the individual as they *"did not work with problem gamblers"* and had no expertise in the area. The participant then returned to his GP practice to be seen by another doctor who displayed little sympathy with the problem:

"I was depressed... suffering from depression and anxiety but after going there it made me feel worse. [edit]. I went to see [name of GP] and he said, 'I don't know what I can do for you, the best place is prison'."

(Problem gambler, Male, late teens)

There has been an increase in the use of counselling within GP practice and some surgeries are offering a service to individuals disclosing problem gambling. This service is not specifically designed for problem gambling and is most commonly cognitive behaviour therapy. Where problem gamblers in the study had used a non-specialist service this was not generally successful. A further difficulty highlighted by the problem gamblers interviewed was that where NHS counselling was offered the length of waiting times often

resulted in critical delays in the provision of help and advice to the problem gambler:

"I went to the doctors this week on Tuesday and I explained to them that I was suffering [problem gambling] and this is what it is. He was very sympathetic. He made all the right noises. He said go out to the reception desk and ask the lady to book an appointment with our counsellor because we have a counsellor that works in the surgery. He said tell the girl that it is urgent and so I told the lady that it was urgent and she said the next available date is the 29th May. That is it. From the start of April to the end of May I have no kind of support apart from me telling myself that I not am going to gamble. It is a personal battle and you have to suffer every single day."

(Problem gambler, Male, late 40s)

While mental health issues might be an unsurprising impact of both life-course debt and gambling-related debt our respondents also suffered physical problems that they associated as linked to their gambling-related debt

"I have been to the doctor with heart problems as a result with the shame and the guilt that you carry with you and it has physical symptoms. I am currently receiving counselling from the doctor and I am receiving heart tablets as a direct result of the anxiety and stress that compulsive gambling causes. I would not like to think about how many people are presenting at their doctors with a deterioration in physical health and they are not necessarily linking it with those different things. Whereas I know that the reason I feel depressed and the reason I feel bad is because I have not got any money and the reason I have not got any money is because I have gambled it away. They are all linked... they are all linked."

(Problem gambler, Male, early-30s)

The impacts of debt upon individual health and well-being are complex and little understood but they include gastro-intestinal disorders, raised blood pressure, cardio-vascular disorder, a higher prevalence of psychotic conditions, respiratory disorders and reduced immunity (Mental Health Foundation, 2009). Although research participants talked of a lack of understanding when

presenting at GP surgeries, the research shortfall in the area means that there is little rigorous evidence for GPs and others to work from. It is perhaps not surprising that healthcare professionals are not equipped with the knowledge to deal with the impacts of gambling and debt. Recognising this, in 2008, GamCare carried out a pathfinder awareness campaign in four UK regions for GPs and other help agencies, comprising literature and posters and leaflets specifically designed, with the aim of also reaching family members and those who did not disclose problem gambling. Outreach work carried out by GamCare and its regional counselling partners also helps raise awareness. However, much more work needs to be done within the NHS to publicise problem gambling and to establish effective pathways for referring to gambling and debt help and advice agencies.

Signposting and Multi-Agency Working

All focus groups participants felt that a broader approach was needed to facilitate wider understanding of gambling and debt and that a joined-up service was needed to promote more effective interventions. Many focus group participants, and specifically problem gamblers, identified that gambling and debt problems impact upon various facets of individual and family well-being. As a result there was an identified need for multi-agency and integrated working:

"To rely on one form of help is not good enough. This is where GamCare are really good; they tell you that you need a number of different solutions. GamCare is just one part. I think you need a number of tools".

(Problem Gambler, Female, late 30s)

"That is what I would really like to see, a much more joined up service. I think there is a lot of stuff out there, debt advisers, a lot of consumer help and quite a lot of help for problem gamblers and in the long-term there is a case for looking at problem gambling as a public health issue."

(Gambling Commissioner)

Focus group participants felt that gambling and debt advice agencies needed to be operating within an integrated service framework where relevant support services were more closely aligned. More transparent service provision pathways needed to be set up to ensure that agencies are operating within a multi-agency approach:

'It's when people present for debt counselling or debt management that there is an underlying gambling issue. Where is the collaborative approach? For instance in the advice bureau or whatever where are these services that are operating in a multi-agency approach and I feel this is a massive gap for that young adult cohort, women and young adults.'

(Healthcare professional)

"The instigator for a service is the individual, so a lot of emphasis is on the individual to present to a service. Looking at more of the protective factors, there is obviously a gap or a need for a service, whether it is a therapeutic intervention or some service for problem gamblers but at the other end of the scale more early identification and preventative work. That is where a multi-agency, collaborative approach would raise awareness specifically."

(Gambling Counsellor)

Professional participants felt that there was a gap in existing service provision for specific groups. Participants felt that there was a particular lack of services for and awareness of the needs of women and the younger age groups, with children aged 8 to 14 not served well and services for young people aged 14-24 not always available or suitable to the needs of the client group.

Problem gamblers identified the difficulties in presenting with gambling problems to help and advice agencies and stressed the importance of having information and advice services which were easily accessible within the local community. Community places were seen as important venues for hosting information and advice services and providing easy access for those with gambling and debt problems:

"We need to be accessing people through the community not just the statutory. Education establishments like colleges but children's centres, post offices where people collect their benefits."

(Charity organisation, research officer)

"All the things that we have discussed around secrecy and the difficulties of people presenting themselves with a gambling issue and the lack of knowledge and available services to go to, whether it's a support network or group to present to. It's where the people can go within an area. Community places."

(Community debt advice worker)

The difficulties of presenting with gambling and debt problems that have been identified and the many challenges in proving appropriate and effective provision indicate that outreach services need to be provided in the communities where people live. Focus group participants felt that more work needed to be undertaken to identify the access points in the communities where people live to ensure that there were facilities that could engage with people more directly. It was felt that community service provision was needed to complement more formal types of service provision:

"Those who clearly have gambling problems... we may not be able to see them, they may not be visible in the community as many are not picked up in official statistics, many of them not leading up to the NHS. Many people wish to remain anonymous or the NHS services are just not appropriate. The environment through which people are likely to access services is informal and non-statutory and a vital way in which to engage with people. The access points

and the way that they are formulated can be off-putting if they look to formal or clinical or whatever."

(Research officer, Salvation Army)

The perceived low visibility of gambling advice services was an important area of discussion. Whilst the provision of a wholly new service was seen as unnecessary the need to ensure that within existing services (NHS, advice agencies, Connexions, Job Centres, Sure Start Centres) awareness of the nature of problem gambling and gambling-related debt were embedded and that clear pathways for help and advice seeking were established which were reflective of the needs of the service user was highlighted. This might include GamCare staff working within NHS settings to train or raise awareness of problem gambling and its wider impacts. These pathways could and should make use of existing pathways for seeking help and advice. The survey work identified that a high percentage of respondents identified the Citizens Advice Bureaux as an organisation at which they would initially present with gambling or debt problems. Such advice agencies were seen as being visible and well-established local places in the local community and therefore easier to access, both physically and psychologically. These venues can act as gateways for disseminating information and raising awareness of services.

Focus group participants felt that a more personalised service, which establishes a level of trust with the help-seeker, could assist with ascertaining the root cause of the problem. Focus group participants also presented evidence of successful working within person-centred services, where capacity exists to deliver an individualised and non-judgemental approach to understanding problem gambling and debt:

"Sometimes issues do come up through the actual conversation with someone. Obviously it takes a while to build up that trust."

Thankfully through the way that our project works we are able to dedicate more appointment times, more of the hand-holding if you like and treat each individual on a case-by-case basis and sometimes by being able to do that we are able to build more of a relationship and in turn find those underlying issues but it is not standard practice [in other agencies] generally to find out are there any underlying issues in your debt problems."

(Community debt advice worker)

Professional participants felt that funding for this type of personalised service was unlikely given the current emphasis on quantifiable targets. It was felt that a culture change was needed within funding bodies to allow the provision of more personalised support services:

"Typically looking at the way services are funded it's about having outputs and being able to take on more cases and justify your funding. In an ideal world I would love to see a service that gamblers can go to, to receive support on a day-to-day or weekly basis, a service that everyone has access to, so we could have more support workers."

(Money Mentor)

Many felt that there was a need for gambling and debt advice agencies to work more closely together, increasing awareness across both sectors and sharing experiences where appropriate:

"I would like to see the people who are providing debt advice are far more aware of what a problem gambler might look like and people picking up problem gamblers far more aware of what debt advice there might be. I would like to see two-way traffic where there is a proper way for picking these people up no matter what organisation you were in and giving people the opportunity to seek help, whether that be with problem debt or problem gambling."

(Gambling Commissioner)

In addition to sharing experiences and raising awareness, participants identified key workforce issues which could assist in identifying the dual diagnosis of problem gambling and debt. Counsellors working within gambling support organisations felt that

there was a need to have easy access to debt advice counsellors. However, counsellors were not suggesting that a single advice worker/counsellor would be able to fulfil both roles:

"I don't think having one trained adviser to identify both problem gambling and problem debt would work. I think that would be a duality of role. The nature of psychotherapy does not lend itself to then giving practical advice. It's a different process but I certainly think it would make real sense to have debt advice counsellors in-house but not necessarily the same counsellor fulfilling both roles."

(Gambling Counsellor)

Further work needs to be undertaken to explore the ways in which gambling and debt advice agencies can further develop working together.

Young people

Young people were readily and often identified as a vulnerable group both in terms of propensity to engage in gambling, develop problem gambling and as a group consistently falling through gaps in service provision. Most participants within this study developed gambling problems in their early teens or before. The younger gamblers in our study were not well-served by any of the services they encountered, and those between the ages of 18-25 felt that there was no service specifically targeted at them, but that were there such a service, it would help them in coping and recovering from their problems. Although Gamblers Anonymous was widely cited in the interviews, experiences suggested that the format of group therapy was not thought suitable by or for younger people:

"It is looking at that approach for children and young people and young adults, certainly the things that are in place aren't young people friendly. Although Gamblers Anonymous might be functioning in a particular area but for a young person or 20 year

old to go to that group, especially a male oriented group, then that interaction ends."

(Gambling advice worker)

Younger gamblers within our study were less comfortable with help and advice offered over the telephone. One young gambler felt that it was often difficult to negotiate a private space where they would not be overheard by other members of the family. Another young gambler owned a mobile phone but could not afford credit and so only used their mobile for receiving calls. This meant that calls to a helpline had to be made from the communal, family telephone.

None of the younger gamblers interviewed had Internet access and one of them feared using the internet because of the temptation to use online gambling sites. One of the younger gamblers had tried several types of support and was finding the Salvation Army 12-Step programme useful, although he noted that it was more for people with alcohol and drug issues. However, as all the people attending the group were of a similar age and in similar life circumstances to him, he felt comfortable in the environment and found the staff non-judgemental and the approach beneficial. Another young gambler with a very severe gambling problem, high levels of debt, suicide ideation and criminal convictions for acquisitive crime to fund gambling, wanted to have residential support but seemed unable to arrange this, citing his convictions as a major factor in his failure to secure in-patient treatment.

Participants highlighted the need for more work to be undertaken to identify the patterns of social behaviour and the development of support networks in younger age groups. Concerns were raised that there was a need to ensure that help and advice services were orientated towards the social needs of younger people and that suitable access points should be identified. These prevention and intervention services needed to be constructed

around a fundamental understanding of the role of gambling within the socio-cultural lives of younger people, especially the very young age at which most gamblers in this research started gambling, and there was concern that there was very limited understanding of the role that gambling played in the lives of younger people:

"An increasing concern specifically going back to the early prevention and identification work is the majority of services that are in place are 18 plus and the majority of young people gambling have absolutely no services and that is a real issue with the ease of access through the online spectrum. That is a massive issue for me... if we move into the area of social networks... once they are leaving school at 16 or 17 and they are not in employment that their social group is the betting shop... that is the club or the pub to them."

(Gambling operator)

An understanding of the ways in which younger people interact and the community places where they interact is vital in helping identify access points for help and information suitable for young people. These can then be used to provide the information they need to make better informed decisions and seek support with problems.

Conclusions and Recommendations

Gambling and debt: A Reciprocal Problem

People who are struggling with gambling-related financial difficulties and debt represent a different client group to those with problem debt or with a gambling problem alone. To the problem gambler, whose behaviour is characterised by a loss of control, a structured debt management plan can be difficult to adhere to. Problem gamblers who are saddled with the problems of unmanageable debt often feel that they can gamble themselves out of the debt problem.

It is clear that if the gambling problem is not addressed, the financial crisis is unlikely to improve, but it is equally clear that without an holistic approach to the management of the gambling and debt problem it is difficult to achieve an effective resolution and that the lack of holistic provision leads to a revolving door scenario, with clients reappearing after their case has previously been understood by advisers as having been resolved.

In fact, participants with gambling-related debt engaging in help and support for only debt **or** gambling perceive that they have **both** problems under control which often leads to relapse and a worsening of the situation. The results of this study demonstrated the need for greater cooperation, enhanced understanding and better reciprocal signposting services between debt advice and gambling support services.

Recommendations:

- Gambling counsellors and debt advice workers need to be provided with the opportunity to share knowledge, skills and working practices to ensure that there are mutual awareness of gambling and debt advice services. Knowledge exchange

would open up the opportunity for enhanced understandings and also provide the mechanisms for reciprocal signposting between gambling and debt advice agencies.

- More work needs to be done to develop screening tools that help debt advice agencies to recognise instances where a debt problem is linked to an underlying gambling problem (or other addictive behaviour). This would ensure that the problem can be quickly and easily identified and the individual brought to treatment earlier. Corresponding arrangements should be put in place for gambling treatment and counselling services.

Information and awareness

There are significant barriers to individuals presenting with gambling and debt problems. Feelings of shame and culpability often prevent individuals from presenting at an early stage in their difficulties. Nevertheless, the individual often develops perceptible signs at home, in the workplace and when engaging socially, which may indicate a problem with gambling and/or debt. Yet even if and when the problem is identified, there appears to be low levels of awareness of where to get help with problems on the part of those experiencing them.

This study indicates that information is not reaching people in the right ways or in the right places. Many problem gamblers and their families experience feelings of helplessness as they struggle to find effective support. The study identified that a high percentage of respondents identified Citizens Advice Bureaux as an organisation that they would initially approach with gambling or debt problems. Such advice agencies were seen as being visible and well-established sources of support in the local community and therefore physically and psychologically easier to access.

Recommendations

- More research needs to be undertaken to identify access points within the community to ensure that information and awareness of services reaches people more directly. These access points may include places such as public libraries, educational establishments and health centres, but may also include more informal venues such as cafes, public houses and public notice boards. The access points need to be identified and service information targeted accordingly.
- Indicators of gambling-related debt need to be disseminated within the work environment and to the general public. In addition to assisting identification of problem gambling and debt amongst work colleagues, friends and family it would also ensure that problem gambling becomes more discussed and transparent than it is currently. This may, in turn, help with resolving issues of shame in the long-term.
- Awareness of GamCare services needs to be promoted urgently among the general public, and also with GPs, Connexions advice workers, Social Services teams, Mental Health and Drug and Alcohol Teams and other social welfare advice services. A concerted effort will be needed to tackle this problem with significant resources devoted to it. Academic efforts to raise awareness will include bidding for follow-on funding to develop a model for this work. Other strategies could include a nationwide seminar series to develop a wider knowledge of the social impacts of problem gambling amongst NHS and other professionals on the individual, family and wider community and how GamCare services can support individuals, families and social welfare advice services in working with problem gamblers.

Signposting and multi-agency working

Problem gambling and problem debt have significant impacts on various aspects of individual and familial health and well-being. As a result, individuals and family members often presented with problems to a range of statutory and voluntary services. Lack of

awareness of the impacts of problem gambling or appropriate sources of support meant that the services approached by problem gamblers and their families often lacked an understanding of the issues and individuals were often given the wrong advice or signposted incorrectly. For many participants, this disengaged them from the help-seeking process, meaning that their problems remained unaddressed and unresolved.

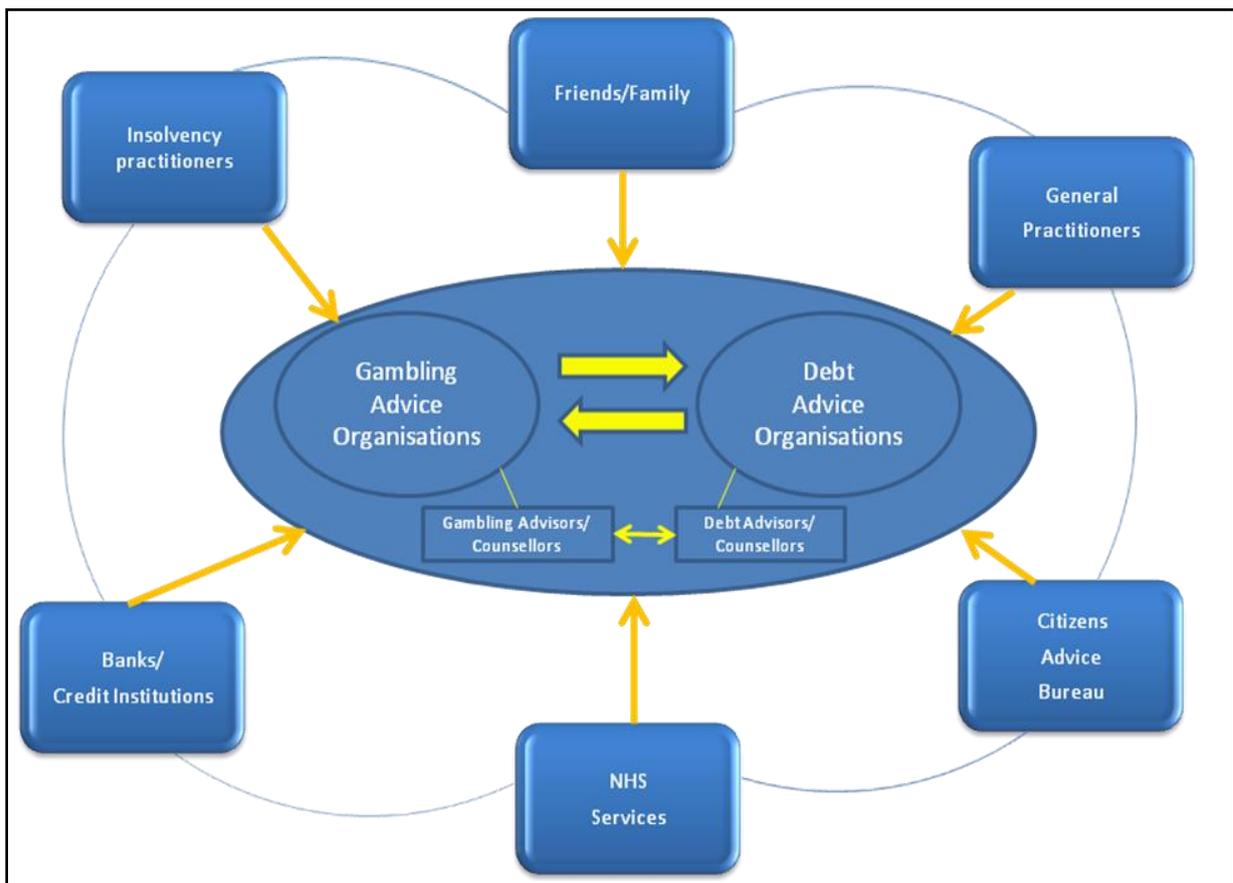
Professionals indicated that there was a lack of clear and effective signposting for problem gambling and gambling-related debt, which prevented effective intervention. As a result of difficulties in obtaining effective support, individuals with gambling and debt problems and their family members often tried to self-manage problems, typically containing issue within the family unit. This strategy worked for some participants, although often with consequences for the health and wellbeing of family members, for most participants, self or family management was a holding strategy until crisis point was reached.

An effective framework for signposting needs to be developed that works across statutory and voluntary sector services.

Recommendations

- Work is needed to establish where mechanisms for signposting exist and mapping of routes for referral needs to be undertaken. There is an urgent need to raise awareness of the nature and impacts of problem gambling and the range of support that is available. Awareness raising needs to take place within the NHS, criminal justice system, advice agencies, Connexions, Job Centres, and Children's Centres, Sure Start, the education system and other service providers. Urgent work is needed within the NHS to publicise problem gambling and to establish effective pathways for referring to gambling and debt help and advice agencies.

- Clearly embedded pathways for help and advice seeking must be established which are reflective of the needs of the service user. These pathways could and should make use of existing pathways for seeking help and advice and utilise community access points as noted in the Awareness and Signposting sections. They should also closely involve the work of insolvency practitioners who can identify problem gamblers when presenting for bankruptcy.
- More evidence needs to be gathered to develop the link found here between problem gambling, debt and individual and familial well-being. Only through rigorous research and establishing robust links will the area be given increased recognition in the commissioning of Gambling and NHS services to address the problem. Decisions and policy pertaining to gambling need to be based on a full accounting of the health, economic and social costs of gambling.



NHS

The NHS does not collect any data on problem gambling and, apart from the National Problem Gambling Clinic, has no provision for supporting problem gamblers. Despite this lack of provision, the NHS was the first port of call for many participants in the study. Shame prevented some from revealing why they were suffering from stress and anxiety-related symptoms. However, in cases where individuals told GPs they needed help for problem gambling, there was a lack of knowledge on the part of practitioners about the nature of problem gambling, sources of help, advice and support, likelihood of co-morbidities (especially alcohol abuse), and the need for rapid intervention.

Where GPs were prepared to offer help, this tended to revolve around mental health services. Approaches used by GPs included referring to Drug and Alcohol Teams (DATs), youth Mental Health services, and NHS counselling/cognitive behaviour therapy. In many instances, NHS mental health and DAT teams encountered by participants refused to work with problem gamblers referred on by GPs, citing lack of knowledge, expertise or funding. This is an issue that GamCare and their partners are currently seeking to address with outreach. An additional matter of concern is the judgemental approach of some practitioners within the health service. This indicates shortcomings in training and awareness levels.

Recommendations

- That a problem gambling awareness-raising programme be established within the NHS, using the expertise of problem gambling service providers.

Employment and Employability

Problem gambling, associated debt, and general life-course debt appear to impact on employment in a number of ways. It appears that problem gamblers may be subject to higher-than-average rates of unemployment, and appear to experience significant difficulties with money management. Problem gamblers with no support systems in place often fear having an income above subsistence level. This is because earning money requires a bank account, allows access to credit, and means that some or all rent and council tax become the responsibility of the individual rather than the benefits system. These were barriers to seeking employment that were clearly articulated by problem gamblers.

Problem gamblers in employment were often unable to concentrate on their work and were at higher risk than individuals with life-course debt of losing their job as a result of disciplinary action taken by employers in relation to absenteeism, mis-use of computer facilities and in some cases theft from employers. Evidence from the interviews conducted with problem gamblers revealed that where participants were in a position of significant responsibility and had access to a company's finances, then the company could potentially be at risk of serious financial loss through theft or embezzlement, with interviewees admitting having removed significant sums from businesses to support their habit.

Recommendations

- Employers need to be aware of the signs and symptoms of problem gambling. This will allow proactive interventions to take place and may help safeguard businesses from fraud and theft.
- Jobcentres should consider the feasibility of offering financial literacy education as part of back-to-work programmes.

Young People's Services

Young people with gambling-related debt and problem gambling behaviours were poorly served. This is in part because young people tend generally not to be proactive help-seekers and are often reluctant to come forward for support and advice. Nevertheless, where young people did look for help and advice, they found little available and were left with a strong sense of rejection.

Youth justice and criminal justice services had facilities to treat individuals with drug and alcohol problems, but were reported by research participants as being reluctant to engage with gambling problems. Young people had extremely low awareness of sources of help for problem debt, and were often reluctant to talk to creditors for fear of what might happen. They often turned to the NHS for advice or help, but there were no dedicated NHS facilities available and they were often turned away.

Thinking about and attempting suicide were more common amongst young people with gambling-related debt than older people, which is clearly an issue of considerable concern. Young people had reasonable awareness of GamCare but often found the model difficult to use. Telephone counselling was problematic where the individual only had access to a family phone, mobile phones required topping up (which was difficult where the young person was on a low income or had limited access to money and a gambling habit), and none of the young people in the study said they were able to access the Internet. In some cases they could not go online due to fear of being tempted to gamble, in others because their debt levels had made them homeless.

Recommendations

- There is an urgent need for research into how best to meet the needs of this vulnerable group.

- The link between problem gambling, debt and suicidal ideation amongst young people should be urgently investigated.

Awareness raising, financial literacy and financial inclusion: after the gambling problem has been taken in hand

A number of problem gamblers identified difficulties in dealing with the inter-related problems of gambling and debt. Many have previously given up gambling but are still trying to resolve the debt legacy, which can be more long-term and, as discussed, can itself act as a trigger for a return to gambling. This study has demonstrated that the financial implications of gambling affect partners and the wider family, who can end up with shared or even sole responsibility for the debt.

In many examples, financial limitations imposed by debt mean that there is little money left for household expenses such as household bills, food and clothes. Many problem gamblers identified giving a family member control over all financial matters as an effective coping strategy, which often created a shift in gender power relationships from the male to the female, which itself sometimes added tensions to relationships (see pp 68-71). Those problem gamblers that did not have supportive friends or family members often needed other external financial controls to help them with money management in the longer term and where they could not access this sort of individualised help, outcomes were invariably poor, and included return to problem gambling habits, destitution, homelessness and resorting to criminal activity.

Recommendations:

- Long term strategies need to be developed in collaboration between debt advisers and gambling counsellors so that individuals are provided with integrated and effective

solutions to deal with inter-related gambling and debt problems. Affected individuals need to be provided with continuous support and help.

- Practical advice and other support should not only be designed for gamblers, but also tailored towards their affected partners and family, who can end up with shared responsibility. Recognition of the heavy burden and high levels of trauma experienced by family members who have to take on responsibility for resolving the financial difficulties caused by gambling-related debt should be a priority. A mechanism needs to be developed that provides practical, emotional and psychological support for family members.
- The success of community-based money mentoring programmes should be evaluated to identify the importance of the provision of community services, which are person-centred interventions that help individuals take control of their finances over the long term.
- The place of managed bank accounts in developing solutions for individuals with gambling-related debt should be considered in all cases. There is scope for the high street banks to develop this sort of service. In order to empower individuals using such an account it is important to establish how these accounts can have elements where financial literacy, planning, financial goal-setting, and management are incorporated effectively so that the individual using such an account is able, over time, to develop the skills necessary to move back to a standard bank account.

Awareness-raising and financial literacy

A number of participants identified that they had developed gambling problems at a very young age. Keeping people safe from harm has to be the first principle of responsible lending and responsible gambling. Financial literacy and gambling awareness need to be given increased priority within a structured learning environment through schools to ensure that those in their early

teens and younger are provided with necessary education in these areas. Other at-risk groups also need to be identified and more research and learning needs to be acquired to understand who those at-risk groups and target interventions specifically. The study revealed that many participants developed gambling problems at an age where their understanding of gambling addiction and debt were undeveloped. Indeed, for many, this lack of understanding remained into adulthood and often prevented individuals from identifying and realising that they had a problem.

Recommendations:

- Educational tools linking gambling awareness and financial literacy need to be developed and rolled out to schools and gain increasing recognition on the school curriculum in primary and secondary schools.
- Education materials should be developed for use in upper Key Stage 2 (age 9-11) as well as for older age groups. The materials should recognise time constraints on the curriculum and be largely pupil-directed learning that can be used in form time. Topic ideas at KS2 might include 'Winning and Losing', 'Spending and Saving', 'Who Dares?' but should cover risk, money, what is debt, interest, leisure spending, differences between wants and needs, how to save, goal-seeking and planning skills
- Financial literacy and gambling awareness needs continuous reinforcement in a range of settings to fit with life-course changes and needs. So might be available in Job Centres, Children's Centres, workplace learning, universities and FE colleges etc, It should include education about leisure spend as this could incorporate spending on alcohol, gambling etc.

Gambling operators: increased responsibility

The findings from this study indicate that problem gambling and debt can affect all groups and income levels. Yet the more

marginalised and deprived are often the most susceptible. Whilst voluntary self-exclusion was offered by the gambling industry as an effective mechanism for problem gamblers, affected individuals felt that self-exclusion was often ineffective. Individuals found it difficult to physically present at the gambling venue, feeling a sense of shame and embarrassment in the process. Even after self-exclusion the mechanisms were not enforced or were easily avoided by participants. Moving between different gambling operators was a strategy where a gambler had self-excluded from one or two venues in a locality as this avoided detection and staff turnover was another factor that ensured that they were able to gamble again. Additionally, self exclusion was cited by many problem gamblers as an indication that they were receiving help and were in control of their gambling problems.

Other gambling operators offered means for intervention including monitoring usage patterns and behavioural indicators which may have some benefit although it is important to note here that levels of spending alone are not indicative of a problem, individuals may be able to afford to spend large amounts of money gambling. Patterns of behaviour including uncharacteristic sending are. Interventions need to be appropriate to the situation but might include suggesting taking a break from play, indicating GamCare as a source of help and support or highlighting the availability of self-exclusion. Affected individuals felt that whilst such interventions would only be successful in the short-term they would help limit financial spend.

Recommendations:

- The process of self-exclusion should be managed for problem gamblers upon their request and data should be shared within and across both online and offline gambling operators to ensure that they are self-excluded from online and offline

forms of gambling. The *Gambling Self Exclusion Program Count Me Out* has laid the foundations for this work through the provision of a central database of self-excluded persons that enables information to be easily and legally shared between members, licensees, partner agencies and support groups such as counselling services.

- Soft interventions need to be employed by all gambling operators and these need to be rigorous, transparent and continuously evaluated. Soft interventions were defined by problem gamblers as interventions made by members of staff within gambling premises if they felt that someone was exhibiting problem gambling behaviour. Problem gamblers within this study identified that such soft interventions can provide them with a pause in the gambling activity which can bring about a realisation, which can prevent them from gambling in the short-term. It is important that staff are adequately trained in identifying problem gambling behaviour and intervening appropriately.

Credit Management: Increased Responsibility

Problem gamblers within this study, especially those without supportive family members, felt that the onus of self-control was on the shoulders of the very individuals who have a serious addiction. Many felt that there was a lack of empathy and support from the credit industry in identifying adopting proportionate and supportive positions in relation to consumers with known gambling and debt problems. Participants named examples of credit providers who effectively blocked gambling transactions being made in land-based and on-line casinos. This type of good practice might be promoted amongst credit providers. When affected individuals found themselves in increasing amounts of debt, they often encountered difficulties in managing that debt. Whilst individuals with gambling related debt were able to access debt advice maintaining a repayment schedule could prove difficult especially where there was no associated management of income.

Informal management of bank accounts (organised by a family member in most instances) proved central to the long-term maintenance of a repayment schedule. The development of mechanisms for managed bank accounts might prove an important tool for individuals with gambling-related debt seeking to resolve their problems. When individuals with gambling-related debt found it difficult to manage repayment schedules and these difficulties were presented to credit providers, there were few sympathetic attempts to support the individual in finding a solution. Raising awareness of effective strategies for maintaining repayment schedules might assist both creditors and debtors.

Recommendations:

- Establishing what is an affordable level of gambling spending is almost impossible. Using someone else's money to gamble should not be acceptable. Therefore credit providers should be encouraged to make gambling on credit more difficult. Credit providers might consider adopting an approach which ensures that any credit card payments to on-line and off-line gambling operators are blocked, as practiced by Barclaycard.
- Credit providers could ensure that their continuous monitoring of transactions includes gambling spend where it can be identified. Subsequent interventions where a problem could be identified could include sending gambling and debt help and advice leaflets with bank statements. Debt and gambling advice line numbers could routinely be printed on all credit card and bank statements.
- Bankers and credit industry need to be proactive and offer services to people before they get into difficulty. They could provide tips and tools for money management; advertise numbers of CCCS, National Debtline etc. in prominent positions on their bank statements.

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