



Geelong Region Alliance

YOUNG MEN & PROBLEM GAMBLING IN GEELONG

A Brief Literature Review

2009



This literature review was undertaken by Ms Bec Henderson, Gamblers Help at Bethany Community Support for the demonstration project and supported with report preparation from Ms Kate Smith, G21 Health & Wellbeing Pillar.

December 2009.

CONTENTS

	Page
Introduction	
Approach	3
Background	4
Findings	
Gambling in Australia	5
How do we compare internationally?	5
Gambling in Geelong	6
Why young men?	6
Effects of problem gambling on young men	7
Risk factors	
Co morbidity	7
Parental gambling	8
Help seeking	8
Protective factors	9
Service Coordination for young men	9
Where to from here?	
Research	10
Consultation	10
Awareness	10
References	11

INTRODUCTION

The G21 Service Coordination Demonstration Project has been commissioned for a twelve month period by the Department of Justice through the Office of Gaming and Racing (OGR). One of two sites for a demonstration project, the G21 Health and Wellbeing Pillar (G21) was funded to conduct a project in a regional setting based on the EGM use per capita rates relative to the disadvantage under the Socio-Economic Index for Advantage (SEIFA). G21 subsequently partnered with Bethany Community Support, the organisation responsible for providing specialist problem gambling services (Gambler's Help - GH) for the Barwon Region.

The demonstration project aims to demonstrate innovative strategies that lead to improved access for clients to both Gambler's Help services and more general health and welfare services, through improved and culturally appropriate referral pathways.

This brief literature review seeks to appraise the local and current knowledge and practices that will form an initial local evidence base. The focus of the literature was limited to key themes and links between young men and problem gambling on an international, national, state and regional level including existing strategies or interventions that indicate a presence of effective service coordination.

Approach

Material relevant for this review was obtained from a number of sources. The first of these involved a search of published articles identified by the Ebsco Host database, using a wide range of keywords including 'youth gambling', 'adolescent gambling', 'co-morbidity, gambling and young men', 'teenage gambling', 'student gambling', 'teenage male gambling', 'young male gamblers', 'teen gambling', 'teen gamblers', 'youth gamblers' and 'young men and gambling' for the period 1999-2010. This produced 111 results, the majority of which were not Australian research. A second source involved using web-based catalogues such as The Australasian Gaming Council Electronic Library (12 articles using a broader search of 'youth and adolescent gambling') and Gaming Research Australia (25 articles using the similar search terms) for 1999-2010. The search terms that provided the most relevant data was 'youth gambling', 'adolescent gambling' and 'young men and gambling'. A third source involved various government websites such as Office of Gaming/Department of Justice and Productivity Commission. The final source utilized internet searches using the range of keywords outlined previously. Trends observed in the research available was a dominance of Canadian and North American research, and only a small representation of Australian research. An area found to be lacking was research dedicated to 18-25 year old males. Most of the research found around young men pertained to adolescents.

Background

The project aims to work towards improving access of care for clients, through a client-centered approach. This will be accomplished through developing and embedding a shared understanding of common referral and assessment principles, processes and practices that will assist Barwon GH counsellors and other health and community service providers to screen for problem gambling and to make referrals to GH in a timely manner.

Young men between 15-25 years have been identified as the target group for this demonstration project given the underrepresentation of this cohort presenting at GH in Geelong and the difficulty Gamblers Help Services across the state have anecdotally identified in engaging this group. After a brief overview of the prevalence of gambling in adults in Australia, the vulnerability of young men is explored through discussing available research and its relevance to the Geelong region. The impact on young men and their community is considered and some recommendations on future directions are noted.

FINDINGS

Gambling in Australia

Gambling is a growing industry in Australia and takes many forms including electronic gaming (pokies), online gambling, table games at casinos as well as sports betting in TABs. An estimated three out of four Australians took part in a legal gambling activity in the last year and player losses in 2006 -2007 were estimated at \$18 billion, which equates to around 3% (or more than \$1500 for each adult who has gambled in the last year) of a household's consumption expenditure. Considering that player loss expenditure is approximately the same as alcohol sales, gambling has become a major industry in Australia (Australian Government Productivity Commission, 2009).

The 1999 Australian Government Productivity Commission into Gambling estimated that 2.3% of the Australian adult population experienced significant problems with their gambling, with 1% experiencing severe problems. The 2009 Productivity Commission Draft found that prevalence rates have dropped to 0.75% for severe problem gamblers and 1.7% for moderate risk. As the report suggests, it is important to bear in mind that a small prevalence rate does not necessarily mean the problem or consequences of the problem is not significant.

How do we compare internationally?

The AGR3 reports similar findings for Australia and overseas when looking at the relationship between adolescent and adult prevalence rates (2-3 times higher for adolescents). The AGR3 finds this consistent in studies in the United Kingdom, United States, Canada and in New Zealand. The drop in prevalence as adolescents become adults (3.1-3 to 2.3%) in Australia is also reflected in the North American and Canadian findings (Australasian Gambling Review, 2007).

The difference in prevalence rates between males and females aged 15-24 also compares internationally (Desai et al. 2005; Chalmers & Willoughby, 2006). For example, Huang and Boyer (2007) report that young men in Canada consistently have a higher prevalence of problem gambling than young women. A U.S. youth and gambling survey conducted in 2007 found that 0.9% female participants compared to 3.3% of males reported a gambling problem (Welte et al. 2007). This difference was also found by Desai et al. (2005). Some caution must be applied when comparing Australian prevalence rates to international studies: Australian laws limit most gambling activities to over 18 year olds, whereas other countries are not as restrictive. An example of this is slot-machines in gaming arcades in the United Kingdom (AGR3, 2007). The authors

of the AGR3 suggest this might account for the richness of research into youth gambling overseas in comparison to the moderate research undertaken in Australia in this area.

Gambling in Geelong

Geelong was identified for this project based on high levels of EGM expenditure relative to disadvantage according to Socio-Economic Index for Advantage (SEIFA). At this stage no formal research has occurred in Geelong around young men's gambling behavior, therefore it is assumed for this project that Victorian prevalence rates may be indicative for the Geelong population.

Available data on the number of gaming machines in Geelong indicates that gambling is a thriving industry in the region. At present, there are 1323 electronic gaming machines (EGM) in Greater Geelong. The EGM gaming loss last financial year was a total of \$120 million for Geelong, which can be translated in \$736 per adult in Geelong (Victorian Commission for Gambling Regulation, 2009). Greater Geelong's expenditure rated as the fifth highest among local government areas in Victoria (Levakis, 2009). The number of TAB venues in Greater Geelong is upward of 25 (Betcare, 2009). In addition to this, Victoria's Crown casino is approximately 75km drive from Geelong, and easily accessible by public transport.

Why young men?

Although the adult prevalence rate of problem gambling has decreased over the past ten years, research shows that young men between the ages of 15-25 are significantly more at risk with prevalence rates of problem gambling in young people varying between 2.4 and 8% (Gambling Research Australia, 2008). More specifically, prevalence rates for Victoria in the past decade have ranged between 3.1 and 3.8% (GRA, 2008). Of the quantitative research investigated by O'Neil et al. (2003), all nine studies found that prevalence rates for males in this age group are higher than females (between 3 and 8 times). In a recent study, Lambros and Delfabbro (2007) found that males were significantly more likely to have gambled in the past year and to gamble on a weekly basis. Males in this study were also found to have spent more money per gambling session than their female counterparts.

Consideration should also be given to the moderate-risk gamblers. In Victoria alone, the Centre for Gambling Research Australia (2003) found that a disproportionate number of 18-24 year old males were in this category (23.3%), compared to the 25-34 age group (6.1%). A 2008 Victorian study by Hare segmented by age and gender found that while

the severe rate was 0.78% for males aged 18-24; the moderate risk was much higher for this group at 5.97%. For the 15-19 year old males, it has been suggested that in Australia 14% are potential problem gamblers (Jackson & Delfabbro, 2009).

Effects of problem gambling on young men

A 2006 study of Australian and New Zealand adolescents found that problem gamblers in comparison to their peers were found to have significantly poorer scores on all psychosocial measures (such as mood, self esteem, general health, social alienation, popularity, finances, alcohol, cigarettes and drug use), which suggest that problem gambling is a significant risk factor for poorer mental health. Social alienation was found to be the strongest predictor in problem gambling status (Delfabbro et al. 2006). A study into the attitudes of young men towards gambling by the Centre for Gambling Research in 2005 found that the extent to which young men become involved in gambling is heavily influenced by the leisure contexts in which they tend to participate. The younger men expressed an interest in gaming machines, while the older preferred table games, sport betting and racing. Gambling was often seen by the participants as a way to enhance or add value to other social activities. Again, as reflected in other studies, gambling appeared to be connected to the experience of social isolation. Gambling in this group was found to be heavily related to a transitional phase as the group moved into adulthood and took on more financial responsibility and serious relationships (Marshall et al. 2005).

Risk Factors

Co-morbidity

An important theme emerging from international gambling research is the link between problem gambling and other issues such as mental health and substance use. This highlights the need for staff within the broader health and welfare services to screen for and assess problem gambling behavior. As a result of this, The Productivity Commission Draft Report (2009) recommended that screening should be targeted at high-risk groups, particularly those presenting with co-morbid issues (anxiety, depression, substance use).

The majority of the research investigated for co-morbidity issues has been conducted overseas. A US study by Petry in 2005 found that 73.22% of adult problem gamblers had a co-morbid alcohol use disorder, and 38.1% had co morbid drug use disorders. Studies into adolescent co-morbidity have found a link between gambling and substance use, with a rise in substance use as the severity of gambling increased (Ste-Maria et al. 2006).

Co-morbidity between gambling and mental health is also strong. Looking overseas, it was found that Canadian adolescent gamblers had higher rates of depression, lower self-esteem and are at increased risk for developing multiple addictions when compared to their peer group (Ste-Maria et al. 2006). Findings in Australia revealed similar results. A recent epidemiological study in Victoria found that in comparison to non-problem gamblers, problem gamblers were 22 times more likely to have a severe mental disorder, 11 times more likely to have a moderate mental disorder, and five times more likely to have a mild mental disorder (Hare 2008). These concerning results highlight the need for Victorian based studies in co-morbid issues for youth and gambling.

Parental Gambling

Having a parent with addiction issues has been identified as a risk factor for adolescents and their gambling (Office of Gaming and Racing, 2007). The South Australian Centre for Economic Studies conducted a literature review into youth gambling and found parental gambling to be a predictor of problem gambling behavior. It also noted that the age at which the young person engages in gambling activities influences their response (O'Neil et al. 2003). A compelling article by Felsher et al. (2003) looked at impact of parental influence and social modeling for youth lottery participation in Canada. Both females and males in the 11-12 year old age group reported parental participation as an important factor for the initiation and continuation of lottery play. However, the older age group (15-17 years) reported an interest in winning money. For males, this was the primary motivation reported for lottery involvement, while females reported still playing the lottery because their parents played. This shows that males in particular were developing an awareness of the misconceptions of gambling faster than their female counterparts.

Help Seeking

The minimal rate at which young men seek help for their problem gambling intensifies the risk for this group. Intakes recorded between January and July in 2009 show that there were only 6 male clients aged 15-25 that accessed the Geelong Gamblers Help service (Geelong Gamblers Help, 2009). In an Australian Capital Territory study, students identified that they would seek help in the following order: friends, counsellors (school), family members and staff. As the group aged, there was a preference indicated for seeking help from partners, friends and family (Delfabbro et al. 2005). This study suggests that this group is not likely to utilize formal counselling services, as they prefer to deal with the issue privately, rather than seek professional help. This has

implications for attracting young men to a Gamblers Help service. The high level of co-morbidity between gambling and other issues such as mental health and alcohol and drug use may indicate that the target group is accessing services for what may be perceived as the primary issue, and any problem gambling remains undetected.

Protective Factors

Protective factors for youth in Geelong include local government strategies, and accessibility of youth services. The G21 Community Health and Wellbeing profile has identified problem gambling as an area of concern for 2009. The 2009 -2013 Geelong Health and Wellbeing plan addresses gambling in Geelong by the inclusion of a problem gambling action plan for the region (City of Greater Geelong, 2009). The comprehensive youth services network is also a protective factor for young men in Geelong. The accessibility of services such as Headspace, Barwon Youth and Time for Youth provides young men with a range of entry points for assistance. This demonstration project will look at these entry points and develop referral pathways to GH to ensure young men experiencing issues with their gambling are offered the appropriate services. On a state level, young men have recently been the targeted focus of a media campaign to direct problem gamblers to the Gamblers Help website and the helpline.

Service Coordination for young men

In 2008, the Victorian Government released the Vulnerable Youth Framework (VYF) Discussion Paper that outlines a framework for improved outcomes for vulnerable young people in Victoria. The VYF outlined five areas for focus:

- prevention and early identification
- engagement in education, training and employment
- local planning for youth services
- tailored responses for particular groups
- effective service, capable people

In response to the VYF, The Better Youth Services Pilot was conducted in the cities of Swan Hill, Frankston, Wyndham and Greater Bendigo. As a result of the recommendations from the initial Pilot, three other regions in Victoria, including Geelong, were chosen to participate in the second phase. Geelong has been funded for an initial six month period to conduct consultations with a range of stakeholders and the collection and analysis of local data. The findings will be available mid 2010.

Where to from here?

Research

Young men and problem gambling is an area that requires further research, particularly with a local focus. As research emerges about the co-morbidity between problem gambling and other issues internationally, it becomes imperative that research is within the local cultural context. The initial findings of increased moderate gambling in Victorian young men also warrants further research.

Consultation

Effective consultation will inform and guide local strategies for young men as well as acknowledging that effective practice requires consumer participation in future planning and strategies around problem gambling. Consultation with young men provides direct and culturally relevant data to research findings, and evidence would indicate that this can contribute to a sense of empowerment for the participants. Key search questions need to include:

- How do the young men feel about gambling?
- What do they perceive as OK or manageable?
- What do they think will reach their friends and loved ones?
- What are the contributing factors to developing a gambling problem in Geelong?

Awareness

Raising awareness of the vulnerability of young men to problem gambling will increase the support network for these young men in Geelong. Facilitating resources for youth service providers to screen for problem gambling enhances the opportunity to raise concerns about problem gambling and provides options for assistance and support. Developing strong referral pathways between local Gamblers Help services and youth organisations encourages youth practitioners to refer to or draw on advice from GH more appropriately. Conducting training for youth service practitioners will also enhance generalist youth service providers' knowledge, competence and confidence to explore gambling issue with young men.

References

- Australian Government Productivity Commission (1999). *Australia's Gambling Industries*, Productivity Commission, Commonwealth of Australia.
- Australian Productivity Commission (2009). *Productivity Commission Issue Paper: Gambling*, Productivity Commission, Commonwealth of Australia.
- Brown (2009). *Gambling Losses 2009 by LGA*. Data sourced from Victorian Commission for Gambling Regulation, Australian Bureau of Statistics & the Reserve Bank of Australia.
- Betcare *TAB locations for Victoria*, viewed 18 December 2009.
http://nettab.custhelp.com/cgi-bin/nettab.cfg/php/enduser/std_adp.php?p_faqid=71
- Chalmers, H. & Willoughby, T. (2006). *Do Predictors of Gambling Involvement Differ Across Male and Female Adolescents?* *Journal of Gambling Studies*, 22, 373-392.
- City of Greater Geelong (2009). *2009-2013 Geelong Health and Wellbeing Plan (Draft)*
www.geelongaustralia.com.au
- Delfabbro P., Lahn, J., & Grabosky, P. (2005). *Adolescent Gambling in the ACT*, prepared by the Centre for Gambling Research for the ACT Gambling and Racing Commission.
- Delfabbro, P. H. (2008). *Australasian Gambling Review*, Third Edition, Independent Gambling Authority, Adelaide.
- Delfabbro, P., Lahn J., & Grabosky, P. (2006). *Psychosocial correlates of problem gambling in Australian students*, *Australian and New Zealand Journal of Psychiatry*, 40, 587-595.
- Department of Justice, November 2008, *Strategic Policy Framework for Gambler's Help Services*.
- Desai, R.A., Maciejewski, P.K., Pantalon, M.V., & Potenza, M.N. (2005). *Gender Differences in Adolescent Gambling*, *Annals of Clinical Psychiatry*, 17 (4), 249-258.

Department of Human Services, Department of Planning and Community Development & Department of Education and Early Childhood Development. (2008). *Vulnerable Youth Framework Discussion Paper* prepared for the Victorian Government.

Felsher, J.R., Derevensky, J.L., & Gupta, R. (2003). *Parental Influences and Social Modelling of Youth Lottery Participation*, *Journal of Community & Applied Social Psychology*, 13, 361-377.

G21 Health and Wellbeing Profile (2009). www.g21.org.au

Gambling Research Australia (2008). *A Review of Australian Gambling Research*, Ministerial Council on Gambling, www.gamblingresearch.org.au

Hare, S. (2008). *A Study of Gambling in Victoria: problem gambling from a public health perspective*, prepared by Schottler Consulting for Department of Justice.

Jackson, A. & Delfabbro, P. (2009). *General Practice Problem Gambling Resource Kit: Who is at risk?*, prepared for the Government of South Australia, www.probelmgambling.sa.gov.au

Lambros, C., Delfabbro, P., Puglies, S. (2007). *Adolescent Gambling in South Australia*, Report prepared on behalf of the Department for Education and Children's Services for the Independent Gambling Authority of South Australia, http://www.scimas.sa.edu.au/scimas/files/pages/SCIMAS/Financial%20Literacy/Research%20Papers/Adolescent_Gambling_in_SA.pdf

Levakis, S. (2009). Draft Panel Hearing Presentation to City of Greater Geelong.

Huang, S.M. & Boyer, R. (2007). *Epidemiology of Youth Gambling Problems in Canada; A National Prevalence Study*, *The Canadian Journal of Psychiatry*, 52 (10), 657-665.

Office of Gaming and Racing (2007). *Problem Gambling Resource Kit*, Department of Justice

Marshall, D., Haughton, J., & Harris, N. (2005). *Young Men and Gambling in the ACT: An Exploratory Study of Attitudes, Perceptions and Engagement*, prepared by the Centre for Gambling Research at ANU, commissioned by ACT Gambling and Racing Commission. www.anu.edu.au

- O'Neil, M., Whetton S., & Duerrwald, K. (2003). *Measurement of Prevalence of Youth Problem Gambling in Australia: Report on Review of Literature*, prepared by the South Australian Centre for Economic Studies for the Department of Family and Community Services, <http://www.adelaide.edu.au/saces>
- Petry, N.M., Stinson F.S., & Grant B.F (2005). Co-morbidity of DSM-IV Pathological Gambling and other Psychiatric Disorders: Results from the National Epidemiologic Survey on Alcohol and Related Conditions, *Journal of Clinical Psychiatry*, 66, 5, 564-574.
- Ste-Maria, C., Gupta., R & Derevensky,. J. (2006). Anxiety and Social Stress Related to Adolescent Gambling Behaviour and Substance Use, *Journal of Child and Adolescent Substance Abuse*, 15(4), 55-74.
- The Centre for Gambling Research Australian National University (2003). *Victorian Longitudinal Community Attitudes Survey*, prepared for the Gambling Research Panel. www.justice.vic.gov.au
- Welte, J.W., Barnes, G.M., Tidwell, M.O., & Hoffman, J.H. (2007). *The Prevalence of Problem Gambling Among U.S Adolescents and Young Adults: Results from a National Survey*, *Journal of Gambling Studies*, 24, 119-133.