

research snapshot

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Women in treatment for gambling disorder: what affects relapse and drop out?

What this research is about

People with gambling disorder (GD) have difficulty controlling their gambling. Their gambling causes them distress and impairment in their lives. There are differences between how men and women are affected by GD. GD is more common in men. On average, women start gambling at an older age but develop GD more quickly than men. This is called the telescoping effect.

An effective treatment option for GD is cognitive behavioural therapy (CBT). CBT targets the psychological and behavioural processes involved in GD. Although CBT is effective in treating GD, many people drop out of treatment and/or relapse during treatment. Some research has examined what factors contribute to drop out and relapse. However, little research has focused on these factors in women.

The aim of this study was to examine the short-term effectiveness of a 16-week CBT treatment for women with GD. The researchers wanted to know which factors contributed to drop out and relapse.

What the researchers did

A total of 214 women who sought treatment for their gambling at a hospital clinic in Spain were involved in this study. Participants all met DSM-5 criteria for GD. Participants were not included in the study if they had an intellectual disability or another mental illness.

Participants were asked to attend an outpatient CBT group therapy on a weekly basis. In the weekly therapy sessions, participants were educated on GD and taught skills to cope with their desire to gamble. The CBT also helped participants identify and change their false beliefs about gambling. The aim was to

What you need to know

Gambling disorder (GD) is a mental disorder where a person's gambling causes them distress and impairment in their personal life. There are several gender differences between men and women with GD. The aim of this study was to see what factors contribute to drop out and relapse in women attending a 16-week cognitive behavioural therapy for GD. All participants were diagnosed with GD and were asked to attend weekly group therapy sessions. Out of 214 participants, 90 dropped out and 77 relapsed at least once during treatment. The researchers identified several factors that contributed to drop out and relapse. For instance, women with less severe GD but higher distress were at greater risk of dropping out. Women with less education and who did not have debt from gambling were at greater risk of relapse.

facilitate their abstinence from gambling. Attendance to therapy and the presence of a gambling episode were noted weekly for each participant. Three consecutive absences from therapy were defined as a drop out. The presence of a gambling episode during treatment was defined as a relapse.

Participants filled out several questionnaires prior to the first week of therapy. These included information on sociodemographic factors, the Symptom Checklist-Revised (SCL-90-R) to measure distress, and use/abuse of alcohol, tobacco, and other drugs.

What the researchers found

The average age of participants was 49.2 years. The average age of onset of gambling problems was 37.7

years. The average length of time was 5.7 years from first gambling to development of GD. Approximately 44% of participants were in debt due to their gambling. Of the 214 participants, 90 dropped out and 77 had at least one relapse during their treatment.

Dropouts occurred during the first two months of treatment. About 7.5% dropped out during week 2, 14.5% during week 3, 24% during week 4, and 17.8% at weeks 5 to 7. Relapses occurred throughout the treatment. There was a higher rate of relapse during the first 4 weeks (14.5% at week 4 vs. 8.4% during month 2, and 6.5% during months 3 and 4).

The researchers found that women with less severe GD and higher distress levels were at greater risk of dropping out. They also found that women who were younger, had less severe GD, and had greater distress attended fewer sessions in general.

The researchers further found that the risk of relapse was higher for women with less education and who did not have debt due to gambling. Relapse occurred more often for women who were divorced, had a lower socioeconomic status, preferred non-strategic gambling, bet heavily during gambling episodes, and used illicit drugs.

How you can use this research

This information could be useful for researchers, treatment providers, and other professionals who want to develop better treatment options for women with GD.

About the researchers

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