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A profile of people who seek treatment for problem gambling in Ireland

What this research is about

Gambling disorder is also known as gambling addiction or compulsive gambling. Gambling disorder involves repeated problematic gambling behaviour. People with gambling disorder are preoccupied with gambling and have trouble controlling their gambling. Also, people with gambling disorder often experience gambling related harms. Gambling related harms may include negative impacts on finances and mental health, relationship problems, as well as work and emotional-related issues.

Previous research suggests that only 7 to 12% of people with problem gambling seek treatment. Currently, research on problem gambling in Ireland is limited. Gambling treatment is provided free of charge in the public health system in Ireland. However, there is a lack of a dedicated referral pathway for gambling treatment within mental health and addiction services. Treatment services also vary widely across different regions. The purpose of this study was to describe episodes of treatment for problem gambling in Ireland. Such information could provide insight into treatment uptake and profile of people who seek treatment.

What the researchers did

The researchers used data from the Irish National Drug Treatment Reporting System (NDTRS). The NDTRS is a national database of addiction treatment in Ireland. Treatment service providers (e.g., outpatient services, inpatient services, general practices, prisons) record information in the database. This information includes client demographic and socioeconomic information. It also includes referral and assessment details. Service providers can input up

What you need to know

Problem gambling can have a negative impact on finances, mental health, relationships, and work. But only 7 to 12% of people with problem gambling seek treatment. This study described treated problem gambling in Ireland. The researchers used data from the Irish National Drug Treatment Reporting System (NDTRS). The NDTRS is a national database of addiction treatment in Ireland. The researchers found a total of 2999 gambling treatment episodes were entered in the database between 2008 and 2019. More than half (52.7%) reported gambling as their sole problem. But 47.3% reported problem gambling as well as other problems. Most episodes involved men (93.8%). About 20% lived with children. There were high levels of employment (35.4%) and formal education qualifications. Problem gambling often occurred with problem use of other substances (47.3%), like alcohol and cocaine. Most episodes were treated at inpatient settings (56.1%) and involved self-referral (46.3%).

to five current problem drugs or other behavioural addictions. Additional information collected included: history of addiction treatment, injecting risk behaviours, treatments provided, and treatment outcome information. Service providers also have the option of reporting gambling treatment.

The data entered into the NDRTS refer to an episode of treatment rather than an individual. So, an individual might appear more than once if they return to treatment or are treated multiple times at different services within the same year.

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What the researchers found

The researchers found a total of 2999 gambling treatment episodes were entered in the database between 2008 and 2019. More than half (52.7%) reported gambling as their sole problem. But 47.3% reported problem gambling as well other problems.

Most treatment episodes involved men (93.8%). Over half were between 25 and 39 years old (54.2%). Half of the treatment episodes involved people who began gambling before they were 17 years old. Most had stable homes (86.1%). Many lived with their parents or family (38.6%). About 20% lived with children. Half of the episodes involved people who were unemployed (53.3%). About 35.4% were in paid employment.

Most of the treatment episodes that were recorded in the database were inpatient services (56.1%) or outpatient services (38.7%). A small number occurred via low threshold (3.8%) or prison services (1.4%). Most treatment episodes involved self-referral (46.3%). About 20% were referred by family or friends. Referrals from general practitioners and mental health professionals were low (11.3%).

The most common length of time between being referred to treatment and starting treatment was six days. But a lot of people (29.9%) were referred, assessed, and began treatment all on the same day.

Almost half (47.3%) also reported problem use of at least one drug. Common drugs used included alcohol (85.6%), cannabis (32.3%), and cocaine (28.0%).

The authors also compared data from people being treated only for problem gambling and people being treated for gambling and other problems. More people who were treated for gambling only were living with children than those being treated for gambling and other problems. They were also more likely to have higher levels of education.

People being treated for gambling and other problems, like drug use, were more likely to experience homelessness and unemployment. They were also more likely to attend inpatient treatment services. In addition, they were more likely to have

been referred to by the legal system (court/probation/police) or by another drug treatment service or outreach service than those being treated only for gambling.

How you can use this research

The NDRTS database can be used to monitor and measure efforts and legislative changes that aim to reduce the harm of gambling. This study suggests a need for improved awareness of gambling harms among healthcare professionals. Having a dedicated referral pathway is also needed to remove barriers to access and improve treatment uptake.

About the researchers

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