

research snapshot

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Problem gambling in the U.K.: A public health issue affecting individuals, families and communities

What this research is about

This study examined the links between problem gambling and the physical, mental and social well-being of adult gamblers in the United Kingdom (U.K.). Data were drawn from the 2007 Adult Psychiatric Morbidity Survey, a randomly selected sample of over 7000 adults. Researchers have identified an increase in problem gambling in the U.K. but its implications for individuals, families and communities are unknown. The term 'problem gambling' refers to gambling causing a wide range of harms from moderate to extreme. Rates of disordered gambling are below 1% in England. However, more people are reported as being 'at-risk' of problem gambling. 'At-risk' refers to gamblers who have already experienced some harm from gambling and remain vulnerable.

What the researcher did

The researchers used data from the U.K.'s 2007 Adult Psychiatric Morbidity Study. In that study, more than 7000 households were randomly selected. Personal interviews were conducted with adults over age 16 who had gambled in the past year. Using questionnaires, interviewers collected information on gambling, alcohol and drug use and mental health issues. They also recorded participants' Body Mass Index (BMI) and demographic data. Participants rated their health and provided information about suicidal thoughts or attempts in their lifetime or the past year. They also answered questions about any financial difficulties in the past year, and their social networks. Interviewers asked about their use of health care services for mental or physical needs in the past year. The data were then analysed to identify associations between gambling and the information gathered.

What you need to know

Problem gambling was linked to poor mental health, including increased suicide attempts. These results support international studies with similar findings for problem gambling and mental health. Problem gamblers were also found to be over-represented in the health care system. This included primary care, mental health therapy and hospitals. The research supports problem gambling being recognized as a public health concern in the U.K., and intervention initiatives for it. However, the researchers note the lack of evidence for the most cost-effective way for the health care system to address it.

What the researcher found

The results indicated that problem gambling was associated with drug use problems in the past year, and with anxiety disorders in the past month. Compared to participants who reported no gambling difficulties, problem gamblers were 3 times more likely to have experienced panic disorder, drug use and anxiety. They were 9 times more likely to have phobias. About one quarter of problem gamblers reported having attempted suicide in their lifetime. They were more likely to have experienced financial difficulties and had a smaller network of social support.

Problem gamblers were twice as likely to have consulted their doctor for mental health problems as respondents with no gambling problems. They were also more than eight times as likely to have used psychological services.

Links between problem gambling and physical health were not significant, but problem gamblers did have more hospital stays than those without gambling

problems. However, no significant link was found between problem gambling and hazardous/harmful alcohol use and depressive episodes. This finding supports other European studies that have not found an association between these conditions.

At-risk gamblers were somewhat more likely to have experienced hazardous/harmful alcohol use, smoking and anxiety disorders, compared to respondents reporting no gambling problems. They were also somewhat more likely to have needed to borrow money in the past month. They reported more medical conditions, and increased risk of migraines/headaches.

How you can use this research

Problem gambling should be recognized as a public health concern. However, there is a lack of evidence on whether and how health care services should have a role in reducing harm from gambling. Therefore, public policy makers may wish to use this information as a starting point in developing initiatives to minimize gambling. Researchers could explore possible interventions such as case-finding programs and screening tools to determine their cost efficiency, relative to other uses of health-care services funding.

About the Researcher

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