



# Report Summary

## Problem gambling, suicidal thoughts, suicide attempts, and non-suicidal self-harm

### What this report is about

This is the third and final report on gambling and suicide in England. In the first two reports, the researchers analyzed data from the UK 2007 Adult Psychiatric Morbidity Survey. This is a representative survey of 6,941 English adults aged 16+ who live in private homes. Using this survey, the authors found that people with problem gambling reported greater levels of loneliness and suicidality. Suicidality refers to self-harm, thoughts about suicide and suicide attempts. This report provides the results of a workshop with stakeholders to better understand current knowledge and gaps in knowledge on gambling-related suicide.

### What was done?

Two of the researchers led a workshop on current knowledge on gambling-related suicide. The workshop included researchers, clinicians, gambling operators, and people with lived experiences. The researchers provided information about the project, gambling, and suicide. Discussions then took place in response to three questions. The first question asked what are the gaps in knowledge about gambling-related suicide. The second question discussed what research can be done now using what is currently available. The third question asked what is the feasibility of making changes to increase knowledge of gambling-related suicide. Participants were asked to consider the questions from the perspective of a wide range of people who are affected by gambling-related suicide.

### What you need to know

For the first question, participants discussed gaps in research, policy, and clinical practice. Five research

### Why is this report important?

Problem gambling is linked to increased suicidality. This report summarizes a workshop on gambling-related suicide. The participants included researchers, clinicians, gambling operators, and people with lived experiences. Questions on current knowledge and gaps in knowledge on gambling-related suicide were discussed.

The participants identified gaps in research, public policy, and clinical practice. They also provided suggestions on how to address these gaps. Participants discussed what could be done now to increase knowledge of gambling-related suicide. Lastly, participants discussed how to make changes to better understand the nature and extent of gambling-related suicide.

gaps were identified. The first is not having recent data on gambling and suicide. The second gap is related to needing better methods to identify gambling-related suicide. Studies are also needed that track gambling-related suicide over time. Fourth, studies are needed that use 'big data' such as electronic health records and hospital records. Lastly, interventions are needed for gambling related suicide. Participants suggested that more data are needed on the link between self-harm and gambling related suicide. A gap also exists on the relationship between types of gambling and suicidality. Identifying risk and protective factors for gambling-related suicidality was also discussed as being important.

For gaps in policy, the fact that gambling does not fall within the Department of Health and Social Care was

identified as a barrier in communicating the impact of gambling-related suicide. There is also a gap in the “Make Every Contact Count” policy that helps people make healthy changes to their mental and physical health and well-being. Participants also identified an opportunity to work with friends and family of people who committed suicide due to gambling. For clinical practice, the lack of awareness among professionals about gambling-related suicide was found to be a gap. This could be addressed by training medical and allied health professionals on gambling-related suicide. Using agreed upon scales to measure gambling-related suicide could also address this gap.

On increasing knowledge of gambling-related suicide, participants provided several suggestions. The first is a systematic review of published studies. Qualitative research on self-exclusion, coroner court reports, and family members could also help understand gambling-related suicide. Using existing data sets that are available was discussed as a way to increase knowledge. Lastly, partnerships with financial organizations, gambling venues, suicide prevention groups, first responders, and national gambling-helplines were discussed as important.

For the third question, participants felt that creating a National Helpline that is available 24 hours a day could help generate more data on gambling-related suicide. Online forums and focus groups could also be used. Stigma associated with gambling related harm should also be explored. As well, ways to increase help-seeking for problem gamblers was found to be important.

### Who is it intended for?

This report is intended for researchers, policy makers, and organizations that provide funding for research.

### What does the report recommend?

This report recommends that future research funding be focused on the following three areas. The first recommendation is understanding the prevalence of gambling-related suicide. For example, the Adult Psychiatric Morbidity Survey 2021 could include questions on gambling and suicide. The second is funding studies that examine gambling-related suicide

over time. This includes mapping existing cohort studies. The third is funding research on developing treatments for gambling-related suicide.

### About the researchers

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### Citation

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<https://about.gambleaware.org/media/1977/report-3-gambling-related-suicide-and-suicidal-behaviours.pdf>.

### Study disclosures

The research questions were set by the Responsible Gambling Strategy Board, who are independent advisors to the Gambling Commission. The project was commissioned by GambleAware through a competitive funding process.

### Gambling Research Exchange (GREO)

Gambling Research Exchange (GREO) has partnered with the Knowledge Mobilization Unit at York University to produce Research Snapshots. GREO is an independent knowledge translation and exchange organization that aims to eliminate harm from gambling. Our goal is to support evidence-informed decision making in responsible gambling and policies to reduce harm from gambling. Learn more about GREO by visiting [greo.ca](http://greo.ca) or emailing [info@greo.ca](mailto:info@greo.ca).