

research snapshot

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The development and evaluation of the Recovery Index for Gambling Disorder (RIGD)

What this research is about

Gambling disorder is categorized as an addiction in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Much research has focused on the rates, causes, and consequences of gambling disorder. But not much research has been done on what it means to recover from gambling.

Several treatment options exist for gambling disorder. This includes medication and different types of therapy. Studies on the treatment of gambling have used many different definitions and measures of recovery. This makes it hard to compare the different types of treatments.

Traditionally, recovery was thought to be an absence of symptoms. This definition of recovery is limited. People who recover from gambling disorder also report positive changes in certain areas. Recent definitions of recovery include the perspectives of people with lived experiences and tend to be more complete. Patient-centred measures have been developed for many mental disorders. In this study, the researchers set out to create and evaluate such a measure for gambling disorder.

What the researchers did

The researchers set out to create the Recovery Index for Gambling Disorder (RIGD). The researchers used well-established guidelines to come up with the items for the RIGD. First, they came up with key aspects of recovery. This was informed by a systematic review of treatment outcomes in gambling research. It was also informed by interviews with people who sought treatment for gambling problems. The researchers created a definition of gambling recovery with six dimensions: (i) gambling reduction, (ii) urge coping,

What you need to know

Little research has been done on what it means to recover from gambling disorder. Recovery has been defined as the absence of gambling and its symptoms. The researchers set out to create a more complete measure of gambling recovery that was person-centered. Through a systematic review of gambling research and interviews, the researchers created the Recovery Index for Gambling Disorder (RIGD). The performance of the RIGD was then examined in 204 people either in treatment for gambling or self-excluding, including individuals who had completed treatment six months ago. The final version of the RIGD contained 32 items to measure six dimensions: gambling reduction, urge coping, recovery wisdom, life functioning, interpersonal relationships, and mental health. The RIGD was reliable and valid in measuring gambling recovery. A score of 45 out of 60 was identified as a cut-off to indicate recovery from gambling disorder.

(iii) recovery insight, (iv) interpersonal relationships, (v) life functioning, and (vi) mental health.

Next, 34 items were created to measure the six dimensions. The researchers invited 20 experts to review the 34 items, delete irrelevant items, and add new ones. They then did cognitive interviews with six people seeking gambling treatment to ensure the items were understandable. During the cognitive interview, participants spoke aloud what came to their mind when they saw the items. Based on this process, a total of 40 items were included in the RIGD. Higher scores indicate a higher level of recovery.

To evaluate the RIGD, the researchers recruited 204 people who were either in treatment for gambling or in a self-exclusion program. Participants had just begun treatment or completed treatment six months before. The 204 participants were mostly Australian men (63.7%), with an average age of 43 years. They had experienced problem gambling for 10 years. Many reported electronic gaming machines as the source of their problematic gambling.

The participants were asked to complete different self-report measures. These included the RIGD and questions on how they felt about their recovery. The Problem Gambling Severity Index was used to measure problem gambling. Participants also completed questionnaires on psychological distress, mistaken beliefs about gambling, gambling urges, self-efficacy, and quality of life. Not all participants completed every measure. Two weeks later, participants who had completed their treatment program six months ago were invited to re-complete the RIGD.

What the researchers found

The final version of the RIGD consisted of 32 items. Based on the results, recovery insight was renamed recovery wisdom to reflect learning from experiences over time. All 32-items were reliable and contributed to measuring recovery. The RIGD was associated with the participants' self-reported recovery. Positive relationships were found between gambling reduction and self-efficacy. In other words, people with stronger belief in their ability to achieve goals scored higher on gambling reduction. Positive relationships were also found between life functioning, interpersonal relationships, and mental health on the RIGD with better quality of life. As expected, participants who scored lower on urge coping and mental health on the RIGD had greater gambling urges and more distress.

The RIGD was able to separate people with and without problem gambling. However, it was not able to separate people who had started and those who had completed treatment. A score of 45 (out of 60) was found as the cut-off score to indicate recovery from gambling disorder. The RIGD was reliable over time (participants scored similarly two weeks later).

How you can use this research

Clinicians can use the RIGD to measure recovery in their patients. The RIGD can be used in gambling services based on person-centered models. Researchers can use the RIGD to assess recovery from gambling disorder and further evaluate it.

About the researchers

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Citation

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About 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 safer gambling policies, standards, and practices. The work we do is intended for researchers, policy makers, gambling regulators and operators, and treatment and prevention service providers.

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