Gamblers Anonymous (GA) is a 12-step program that helps people recover from their gambling problems. GA is the most widely available source of help that is face to face for gamblers. There are few other treatment options in the United Kingdom for people who have gambling problems. There have not been any studies about GA in the United Kingdom in the last 25 years. Moreover, it is hard for researchers to gather information since GA meetings are usually closed to researchers and people without gambling problems. Therefore, more research about current GA programs is needed. In this study, the researcher explored how one GA group in the North of England is run. The researcher also explored what brings people to GA meetings and how they understand their gambling problems through their participation in GA.

The researcher attended 20 weekly GA meetings held in a city located in the North of England over a period of 18 months. These meetings were “open” and allowed guests without gambling problems to attend. The researcher observed and made notes of what happened during the meetings. In total, there were 278 individuals who attended the 20 GA meetings. The researcher also interviewed eight GA members. Two were women and six were men. The age range was 19 to 64 years old. During the interview, the researcher asked the members what made them first go to GA, why they kept going to GA meetings, and how GA had helped them.

The researcher analyzed the meeting observations and interviews to find main themes. These themes were shared with three GA members who regularly attended meetings. The researcher revised the themes based on their feedback. The researcher also explored how the findings compared to other research studies on GA and addiction recovery.

The researcher identified nine key themes that were discussed by members or observed at GA meetings:

- **Gender:** It was observed that only four women attended the GA meetings over the study period. Most of the other women who attended were spouses or partners of male gamblers. Past research in Canada and USA has reported that women are very important in men’s recovery from gambling problems. GA has meetings for family members who support the gamblers, though they make up a small number of the GA meetings in the UK.

- **Support:** GA members support one another in their recovery both during and outside of meetings. Many members reported suffering from depression and suicidal thoughts. Some member had also committed crimes due to their gambling. The support that members received at the GA meetings for other mental health problems varies.
The structure of GA meetings: Culture affects how GA is run in different countries. GA meetings in this study started with members stating their name, their identity as a compulsive gambler, and the date of their last bet. Members then shared their concerns and experiences. Responses from other members were usually how important it was to stop gambling and to come to meetings every week. Very few members mentioned the 12 steps of GA.

Money: GA members often talked about their money problems. They discussed the desire to win money was why they had gambled. The advice given was usually to stop gambling and to let a family member take control of their finances.

Meetings make recovery: Members were often reminded of how important it was to go to meetings. Not attending is seen as leading to relapse. Studies suggest that people who go to GA meetings regularly are more likely to stop gambling. Dropout rates can be high though. More than half of the GA members in this study stopped going over the course of one year.

Identity as a compulsive gambler and a member of GA: Members called themselves compulsive gamblers at the beginning of each meeting. Research suggests that making a person’s addiction part of their identity may help them recover from it. Members felt socially supported by other members of the GA community. Research suggests that a positive change in social network can help people recover from their addiction.

Support outside of GA meetings: Members stay in touch with each other when they are not at GA meetings. It is common for members to send text messages to seek or offer support. Text messaging is used by both older and younger members.

Comorbidities: Many people with gambling problems have other mental health problems. When members tried to seek advice for other mental health issues, the level of support and advice might vary. Their issues might be downplayed or dismissed at meetings.

Suicide: Many members said they had feelings of depression. They also mentioned having suicidal thoughts or trying to commit suicide. Some members discussed how GA had helped them deal with suicide. A chair of the GA meetings said they are not trained to deal with members’ mental health problems.

Crime: Some members had committed crimes to fund their gambling. A chair of the GA meetings mentioned that there is no support in prison for people with gambling problems.

How you can use this research

Policy makers could use this research to train mental health service staff in how to support people with gambling problems. Researchers could use this research to further investigate how successful GA programs are at helping people recover from gambling problems. More research is also needed to identify which types of support help gamblers with comorbidities recover from their gambling problems.

About the researchers

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Citation


Gambling Research Exchange Ontario (GREO)

Gambling Research Exchange Ontario (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 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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