

Problem Gambling in Women

British Psychological Society Psychology of Women Section Annual Conference
Virtual Feminisms; Politics & Activism; (Dis)embodiment
Cumberland Lodge, The Great Park, Windsor, UK
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Dr Sharon Kalsy
Consultant Clinical Psychologist &
Clinical Services Director



What is GamCare?

- A registered National Charity
- The UK's leading authority on the provision of information, advice, training and treatment for problem gambling
- Established in 1997
- GamCare National Helpline (www.gamcare.org.uk; 0845 6000 133)
- 68% UK coverage – counselling service provision through GamCare Partners, in-house and online services
- Funds raised from gambling related industries and distributed to treatment providers



GamCare Service Provision



Online support / Phone support / Counselling support

GamCare provides support, information and advice to anyone suffering through a gambling problem.

NetLine

Talk live online to one of our trained Advisors who can offer counselling support, information and advice.

[FAQs](#)

[Speak to an advisor now >](#)

Helpline

Call the Helpline and speak to a trained Advisor for counselling support, information and advice. 8am - midnight, 7 days a week.

[More about the helpline](#)

0845 6000 133

Forum & Chatroom

The Message Forum and Chat/support room are moderated areas where you can discuss, ask questions and offer advice.

[Read the forum >](#)

[Login to the chatroom >](#)



Free face to face and online counselling

Our Purpose

- To provide advice, information, practical help, counselling and support to address the social impact of gambling and gambling related debt
- To improve awareness of problem gambling
- To promote responsible gambling (e.g. GamCare Certification Scheme; Education Programmes)
- To address the needs of anyone adversely affected by a gambling dependency



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Gambling: No Longer a Man's Game?

Jane Rigbye

Head of Education Development



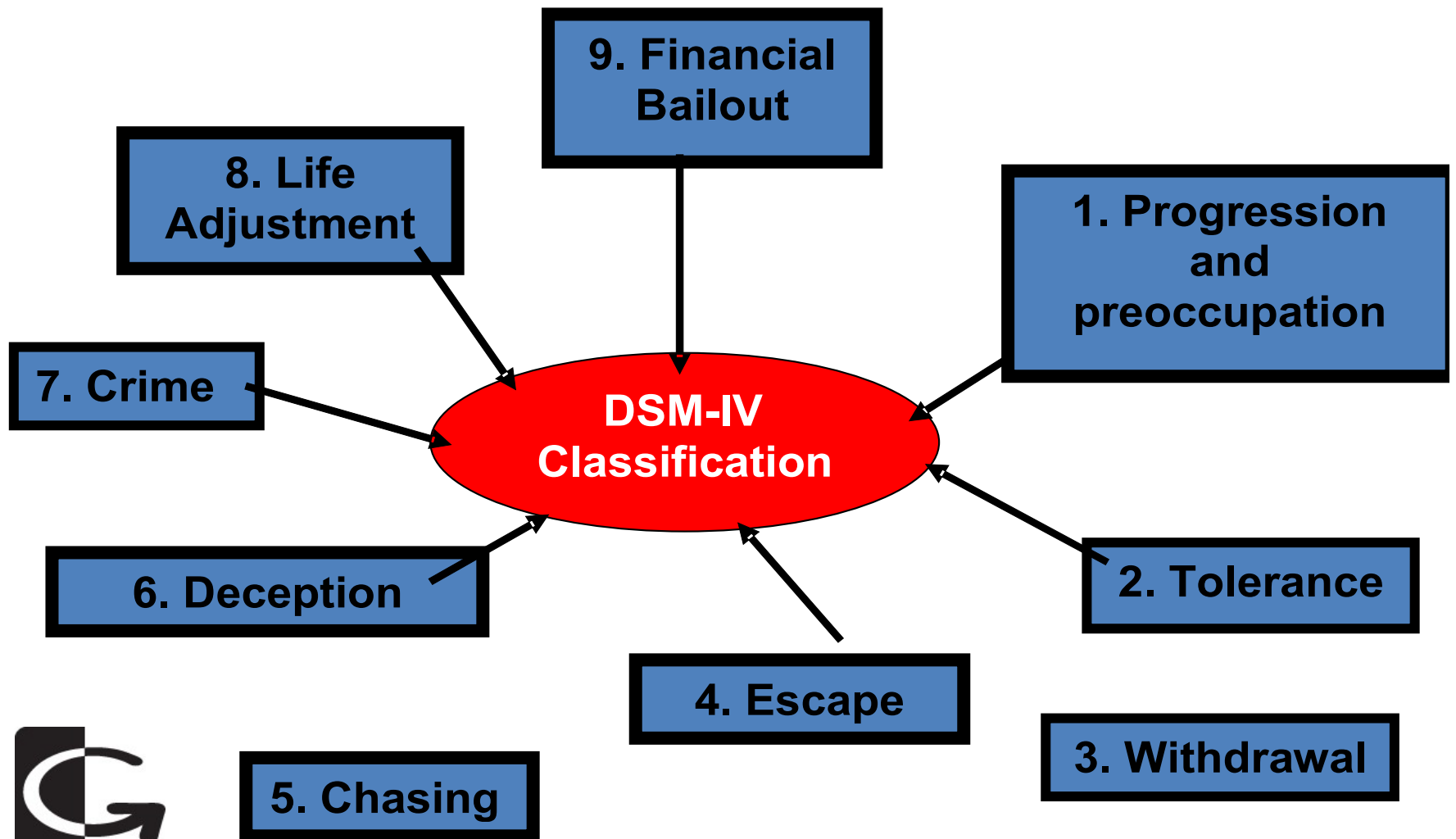
Gambling and Problem Gambling

Gambling is the wagering of money (or other material items or services) on the outcome of events which are determined by chance

Definition of problem gambling:

APA (1994) “An inability to control impulses to gamble which disrupts or damages personal, family or vocational pursuits”.

DSM-IV criteria for problem gambling



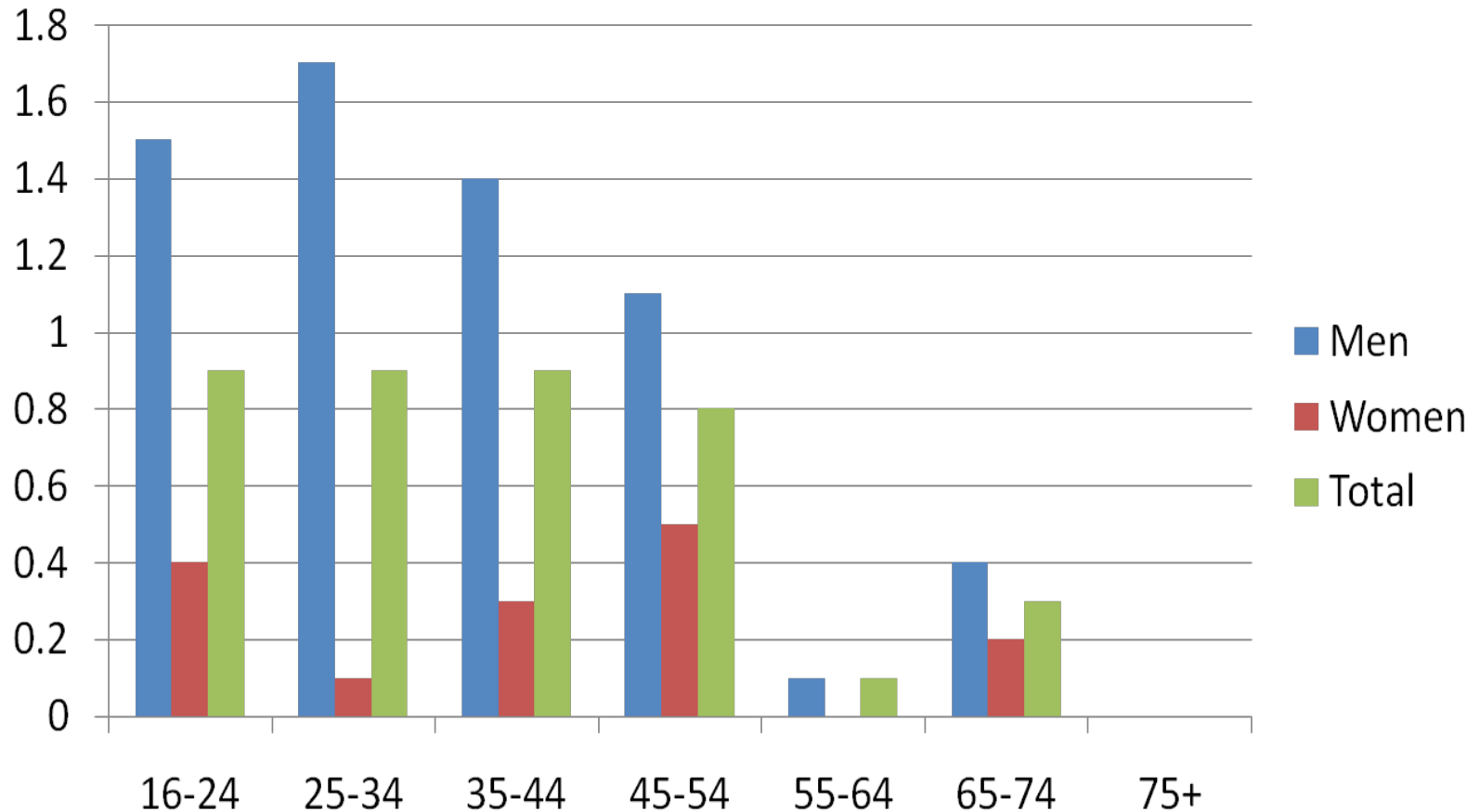
Prevalence in Great Britain

- 48% of GB gamble (excluding the National Lottery)
 - 0.6% problem gamblers (n=300,000) aged over 16
- Men 5x as likely than women to be problem gamblers
- 5-8 others (e.g. spouses, children, colleagues) are directly affected by the difficulties of each problem gambler

Prevalence of Problem Gambling 1

DSM-IV PG by Age & Sex (National Centre for Social Research, 2007)

Survey report: <http://www.gamblingcommission.gov.uk>



Increased Advertising Directed at Women

Gambling for Women Daily Gambling Specials Free Gambling Money Gambling Tips



www.gamblinggirl.com

...the online destination for female gamblers



NO. BOYS. ALLOWED.

Online sites range from portals to other sites with offers aimed at women, to sites with tips on what to wear when visiting casinos and how to play the game



Where have all the Women gone?

paddypowerbingo.com

LADIES BETTING



Ladies Betting.com



Sign up now for your FREE \$10 BINGO

To claim your free \$10 simply enter the code MW1

Everybody wants to be an 888lady.

888ladies.com
— Enjoy the game —



PLAY BINGO NOW!
No Download Required

Welcome Bonus



play now

- HOME
 - JOIN NOW!**
 - PROMOTIONS
 - BINGO GAMES
 - FREE BINGO
 - WINNERS
 - JACKPOTS
 - BLOG
-
- Popular Games
 - Bingo Information
 - ▶ Bingo News**
 - Bingo Articles

A large illustration of a woman with long, wavy brown hair, wearing a brown top and a necklace. She is smiling and has her hand on her hip.

Get a **£25 WELCOME BONUS**
On your first £10

JOIN NOW

Home > Bingo News > **Online Bingo Favoured By Women Over World Cup**

Online Bingo Favoured By Women Over World Cup

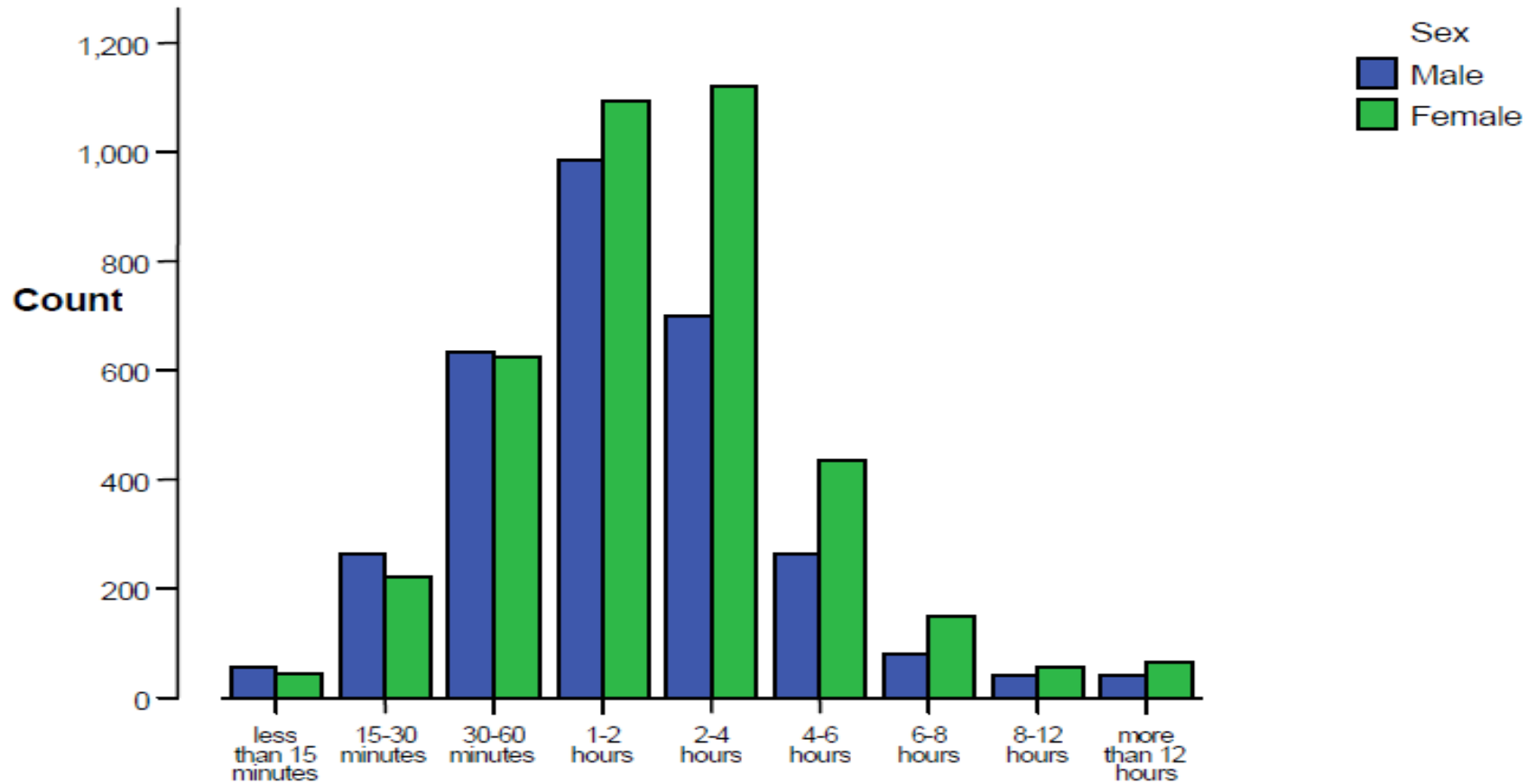
Fri, 06/25/2010 - 16:21 — Rachel Reed



Only two per cent intend to solely watch the football. Women would rather play online bingo than watch the Fifa World Cup, a new survey has found.

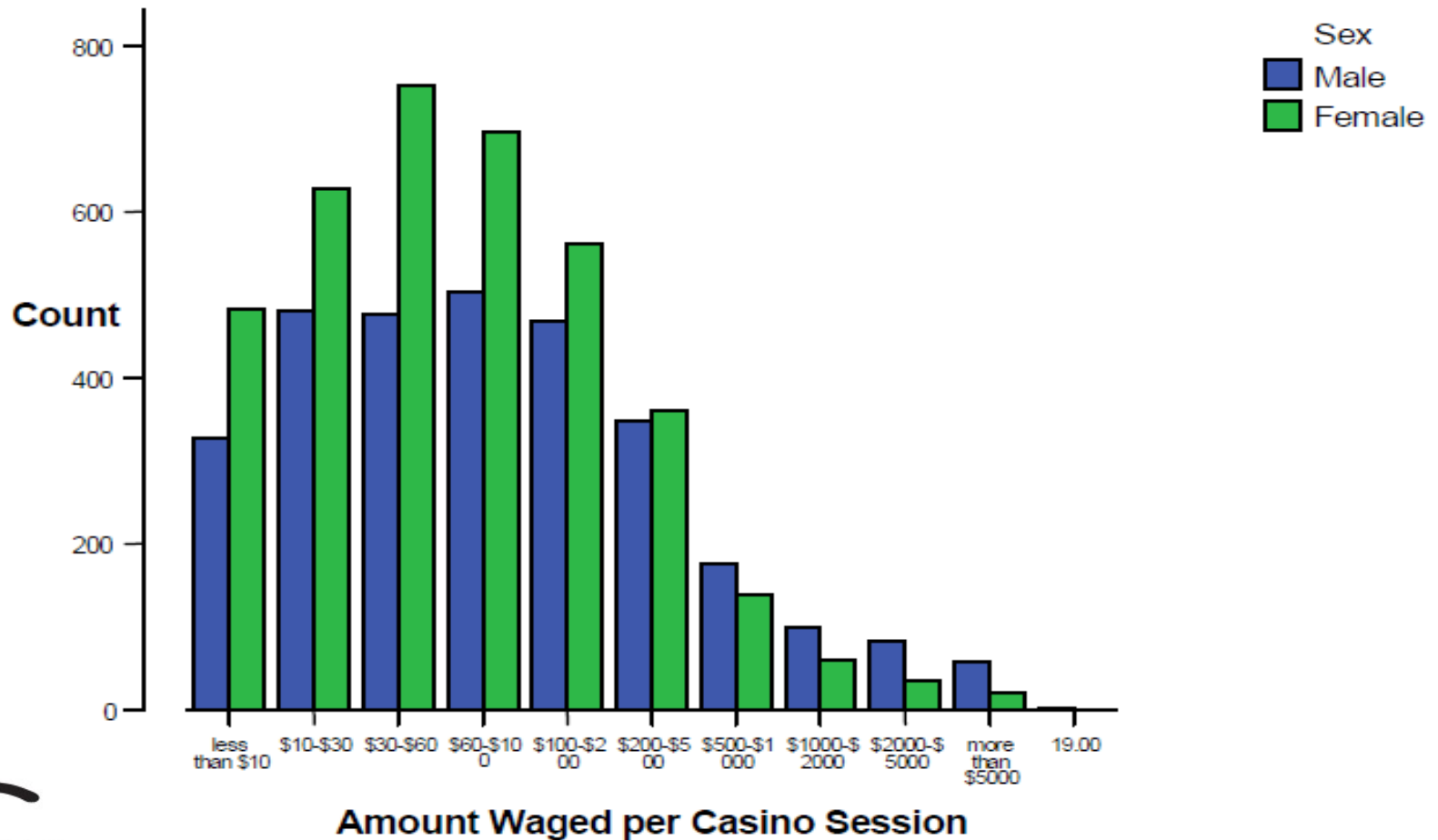
It was carried out by 888ladies.com and it found 39 per cent of ladies would rather play bingo games than sit around tuning into the football, which Bingo reports.

Women Spend More Time Gambling



Length of Gambling Sessions at Internet Casinos

Women Spend More Money Gambling



Newspaper Headlines

A nation of gambling addicts: Teenagers and women at risk, warn doctors

Women more prone to gambling addiction

Female gambling addicts 'on rise'

Grandmother's £2m gambling spree

Britain's new addicts: women who gamble online, at home and in secret

Women? Gambling? Now we're all in trouble

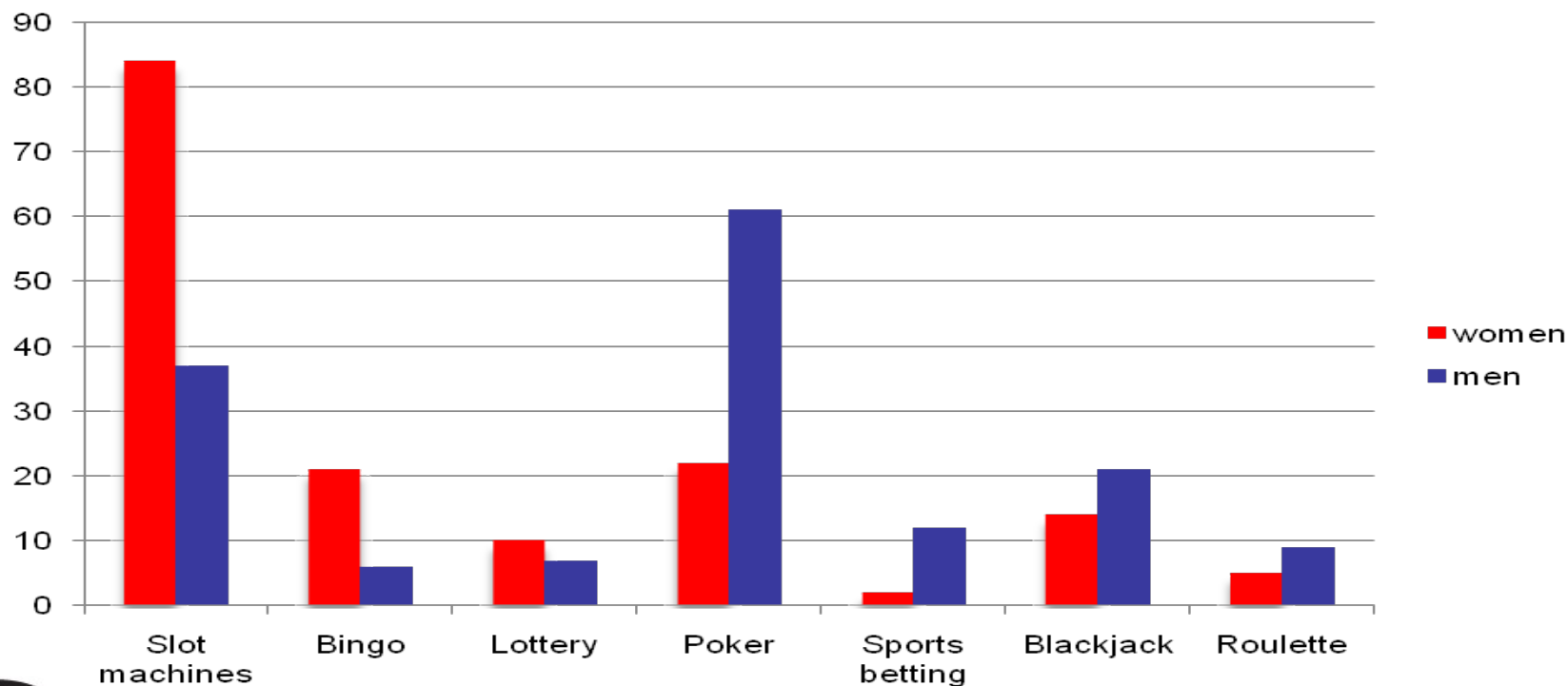
Gender Differences in Gambling Motivation

- Research by Parke & Rigbye (2006)
 - Women are more likely to gamble...
 - To escape
 - To take their mind off their everyday worries
 - To relax
 - To relieve boredom
 - Men are more likely to gamble...
 - For excitement
 - For the competition
 - To win money
- May explain differences games men and women choose...

Gender Differences in Gambling Activities

Women tend to favour different games to men

(Parke & Rigbye, 2006)



Help Seeking Behaviours

- Less than 1% of problem gamblers seek help
- Unlike traditional mental health services we do not see more women than men – in 2008/2009 around a fifth of those who contacted GamCare were women
- WHY?
 - Lack of awareness – personal and professional
 - Reluctance to ask the question during screening

“Have you currently got a problem with your gambling?”



How Do Problems Manifest for Women?

Last night the "frenzy" took hold and I cleared my bank account. At that point all reason had gone and I then used my parents bank details to the tune of £1000 that they can ill afford. I am so ashamed.

*I have had to tell my husband who is trying to be understanding. He went and told my parents as I can't face them. And now **I feel like a coward** too. I **HAVE** to stop before this gets worse I just don't know where to begin. I don't think I am up to talking to people about it yet.*

The anonymity of being online helps to hide the shame I feel but what next?

Felt really low tonight** after seeing a friend in the supermarket. Seems like her life has moved on without me. Although she was still friendly and chatty, there's more distance there. She said she can probably meet up in a few weeks. That's what happens when you are out of circulation for a while, people move on then don't have much time to fit you in anymore. **It feels lonely.

*I am addicted to online gambling and of late turning up at service stations to try and win on the £500 slots. My life hit rock bottom twice really, once when my daughters found out that I had been **lying and stealing money** from them, and then a year later when I stole money from my mum and the rest of the family found out. My husband has stuck by me but I am killing him slowly, how much more he can take I do not know.*

Conclusions

- Women gamble less than men, but gender gap is closing
- Marketing by gambling operators specifically target women
 - impact on prevalence rates & 2011 prevalence survey???
- Women gamble differently to men in terms of...
 - Motivation
 - Types of games played
 - How they play gamesImplications for the types of treatment we offer???

‘Reflections on the Mirror’ Therapeutic Groups for Women with a Gambling Problem

Liz Karter
Counsellor and Women’s Group Therapist



Why Provide Groups Just for Women?

- No provision existed offering group support exclusively for female problem gamblers.
- Existing groups (e.g. G.A) were and are still predominantly male
- There is a difference in the psychology of the female gambler and her male counterpart.
- Feedback from women presenting as one to one clients said that they wanted groups, which recognized gender difference.

What is the Group Framework at GamCare?

- Established four and a half years ago.
- Currently 3 groups in existence within GamCare and its partners. Maximum of 7 members in each group.
- Weekly meetings of 90 minutes each.
- Commitment to regular attendance.
- Groups are open and open ended. There is a therapeutic focus to the process.

Who Attends?

- Age range = 26yrs- 57yrs
- 70% Unemployed
- 45% Single mothers
- 75% Live alone or alone with children
- 75% Present with mental health diagnosis, ranging from depression and anxiety to personality disorder
- 50% History of cross addiction, self-harm [cutting, burning] or eating disorder
- 95% Report sexual, physical or psychological abuse in childhood or as an adult

What Modes of Gambling are Women Using?

- 75% Fruit machine players
- 20% Gambling online
- 5% Scratch cards
- Over 50% report problematic gambling 10 + years
- All meet criteria for pathological gambling according to DSM IV

What are the Aims of the Groups?

- To offer a recovery process acknowledging the whole person
- To offer strategies for becoming/ remaining free of problematic gambling
- To identify the underlying triggers for problem gambling, which are often unconscious
- To explore intrapersonal and interpersonal relationships
- To develop a healthier and more productive lifestyle

What Therapeutic Models Are Used?

- Integrative model
 - Incorporating principles of Transactional Analysis and C.B.T.
- Underpinned by Core Conditions of Person Centered Model.

What are the Areas of Greatest Challenge?

- Encouraging initial engagement and maintaining this in the early stages of group therapy
- Transference projections onto therapist and other group members
- Facilitating emotional expression
- Managing and containing emotional expression.
- Holding a balance between catharsis and chaos.

What are the Benefits of Group Therapy for Women?

- Challenges the injunctions received by the inner 'hurt child' e.g. 'don't be close,' 'don't tell,' 'don't feel.'
- Reparative space for confronting the problems with interpersonal relationship that were identified as triggers for problem gambling
- Offers a sense of support that is lacking in community/ extended family
- Sharing life stories offers desensitization and encourages development of understanding of how the problem developed and forgiveness for the self. 'Mirror' effect.

What are the Benefits of Group Therapy for Women (ctd.)

- Therapist's opportunity to see in action the client's emotional triggers for gambling
- Encourages development of assertiveness skills – 'finding the voice'
- Open groups - encourage persistence in members at all stages of recovery
- Space to practice working through instead of escaping from that which has been experienced as intolerable

What are the Outcomes?

After 18-24 months' attendance, members reported:

- Longest period of gambling free time since onset of problem gambling
- Can understand the underlying / unconscious triggers for their problem
- Significant improvements in self-care and self-esteem
- A 'tool kit' of healthy self-soothing mechanisms
- Better regard and understanding of the value of emotional expression
- Living more productive lives:
 - Paid / voluntary work.
 - Tendency to engage in other group or team based activities

What are the Outcomes? (ctd)

- Reduction or total absence of self- harming behaviour
- Increasing confidence in ability to move on from regular group sessions
- Members of the original group reported being free of problem gambling at 1 year follow-up appointment

Reflections from Group Members

"When I first came here I wanted to hide. Now, I want someone to hold that mirror up to my face and tell me what they see when I can't see myself"

"My one to one [counselling] really helped, but this group has really made the difference in my life. I used to put everyone else first and always say 'yes' to everyone. Now, I take care of myself, too"

"This group is my healing. It's my lifeline. It's my therapy"

Empowering Women to Deal with the Unspeakable Through Online Therapy

Susanne Irving
Counsellor and Online Therapist



Background

Online Counselling

- Specialised service
- Different forms of online counselling:
 - E-mail exchange
 - Instant messaging
 - Audio/Visual
- Gamcare offers a dedicated instant chat (webcam available)



Background (ctd)

Online Counselling (ctd)

- Similarities to face 2 face work: weekly 50 min sessions; some time-limited, some open-ended; approach depending on a client's needs
- Service soft-launched in Sep '07. Client numbers/sessions have more than doubled:
 - 4/08 – 3/09: 39 clients, 269 sessions
 - 4/09 – 3/10: over 90 clients, 540 sessions

Assumptions We Initially Made

Assumption	Reality
Online clients want to replicate face 2 face experience	WRONG – few clients wanted to use webcam
Used by clients who have difficulty accessing services because of health issues or location	PARTLY RIGHT – additional key factor are psychological reasons (shame), especially for women
Service more popular with young people	PARTLY RIGHT - tends to be correct for men; women's age range broader
Service popular with women who have children	RIGHT

Differences Working Online

Technology:

- *“Ideally, the technology becomes ‘transparent’, so it simply serves as a tool for communication, without requiring attention in and of itself.”* (Mulhauser, 2010) In reality, it may be a “third party” in counselling
- “Black hole”:
“The Black Hole is like an inkblot test. It draws out whatever is on our mind. It’s a blank screen onto which we project our wishes, fears and insecurities.” (Suler, 1997)

Differences Working Online (ctd)

For the client:

- Disinhibition (or censoring)
- Attitude towards confidentiality/privacy (others present; “unusual” environments)
- Attitude towards interruptions (something counsellor also has to look at!)

Differences Working Online (ctd)

For the counsellor:

- Needs to know technology: *“An online therapist operating without intimate knowledge of her technological context is akin to a hearing-impaired counsellor who hasn’t checked whether her clients can be overheard outside the counselling-room.”* (Mulhauser, 2010)
- Strong transference/projection: *“... transference reactions tend to be magnified by the ambiguity of text communication. The mind-merging... may even cause developmentally advanced people to dip into periods of self object transferences.”* (Suler, 2010)

Differences Working Online (ctd)

For the counsellor:

- More use of intuition/felt bodily sense (getting into client's inner world without being distracted by outward persona)
- Can be more exhausting
- Dilemma of risk monitoring and risk management: *“Depressed clients may lack the determination to make and keep a face-to-face appointment with a clinical professional, yet seize a moment of willingness to reach out by clicking for online help. Initial assessment may reveal either that the client is completely unwilling to seek help within his or her community or that none is available.”* (Fenichel et al., 2002)

Evidence that Service Appeals to Women*

	Male	Female	Conclusion?
Clients	72 (61%)	47 (39%)	Much higher than for f2f work / other international online services
Total/ average number of client hours	357 (44%) – average 5 h	459 (56%) – average 10 h	Women working through more entrenched traumatic historical experiences
Attendance rate	67%	72%	Commitment slightly higher for women

Service Appeals to Women (ctd) *

	Male	Female	Conclusion?
No response to session offered**	81 (79%)	21 (21%)	Women more committed once they have decided to seek help
% in ongoing treatment, referred or successfully discharged	51%	50%	Similar success rates, even though women often deal with trauma
% under 35 / average age	75% (29)	55% (36)	Women come from all walks of life

Women's View on Online Counselling

Easier to have a voice:

“At times my fingers took a life of their own, stuff came out and I didn't think, just wrote... my fingers really said what was going on.”

“It's the first time I've really acknowledged me, so many times I wrote something and was then surprised by what I'd written.”

Greater sense of control:

“Online counselling allows me to deal with and control my feelings...”

“I have control over what I say here, whereas on the phone I wouldn't”

... but self-censoring can also stop a client from moving forward

Women's View on Online Counselling (ctd)

Safer to express emotions:

"A space to think and feel without censoring myself"

"I tend to put on a brave face...can't risk being vulnerable but it feels safe now"

Not feeling judged:

"Face 2 face is too personal, but here I cannot see your response."

Other reasons:

"Testing out" what therapy is like

"Indirect" way of communicating with others

"The act of writing about one's experiences can itself be therapeutic..."

(Mulhauser, 2010)

Issues in Working with (Wo)Men Online

Potential issue	Solution
Typing speed and accuracy	<ul style="list-style-type: none">▪ Let client know if something is unclear▪ Explore reasons for slow typing speed and look at alternative services
Technology as unwelcome “participant” in counselling process	<ul style="list-style-type: none">▪ Discuss how disruptions are handled
Less ground (a third?) covered than in face 2 face work	<ul style="list-style-type: none">▪ “Homework”▪ Text prepared beforehand▪ Client’s own insights better retained because of <i>“asymmetry in the speed with which a complex expression can be read – as compared to... written ...”</i> (Mulhauser, 2010)

Issues in Working with (Wo)Men Online (ctd)

Potential issue

- Filtering out unsuitable clients - danger of inadvertent harm.
- Person's level of object relations differs: *"People who operate at a developmentally primitive level... experience others as extensions of themselves... text communication ... may exacerbate this poor self/other differentiation."* (Suler, 2010)

Solution

- Follow ISMHO Principle for the Online Provision of Mental Health Services: working within competence
- Letting client know expertise / experience
- Express concern
- Check out suicidal ideation/issues around breach of confidentiality
- Regular supervision
- Checking out regularly how the client experiences me/the counselling work

Issues in Working with (Wo)Men Online (ctd)

Potential issue	Solution
Breaches of confidentiality (on both sides)	<ul style="list-style-type: none">▪ Let client know how they can protect their confidentiality▪ Check whether there might be issues▪ Be familiar with technology
Self-harm/suicide: The more vulnerable the women, the less likely they are to come for counselling if they have to share a lot of personal info. If we don't have the information, what happens when a woman is suicidal?	<ul style="list-style-type: none">▪ Establish a crisis plan and affirm client's commitment to seek local medical help▪ Being congruent▪ Supervision

Issues in Working with (Wo)Men Online (ctd)

Potential issue	Solution
Potential collusion with a client who feels more comfortable in the cyber world than “real world”	<ul style="list-style-type: none">▪ Encourage client to build face 2 face network
Emotional distance - Lack of physical presence can make client feel less comforted at times of distress	<ul style="list-style-type: none">▪ <i>“Presence resides in the human mind.”</i> (Suler, 2010)▪ Acknowledge limits of what can be offered online▪ Clients have reported benefits: Increased autonomy, improved decision-making / (online) relationships / engagement, increased self-responsibility

Conclusion

- Online therapy can be a powerful tool to help women work through issues that are otherwise unspeakable
- Online counselling is neither “better” nor “worse” than face 2 face counselling – it’s a question of what is most appropriate for a particular client
- There are ways of overcoming potential obstacles

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Problem Gambling in Women: Conclusions

Dr Sharon Kalsy
Consultant Clinical Psychologist &
Clinical Services Director



Symposium Conclusions

“Invisibility” - a common theme in:

- **Gambling**
 - A hidden phenomenon
 - Social isolation of problem gamblers
- **The experience of women**
 - Rendered silent by and through social role expectations
- **Survivors of abuse**
 - Hidden and rendered silent through shame and fear
- **The “private world” of therapy**
 - Confidentiality, anonymity
 - Online therapy – enables client to remain “hidden”?
 - Group therapy – enabling the “private” to be made “public”?

Conclusions

- Problem gambling – a public health problem
- Significant social implications
- Alarming rates of physical and sexual abuse in female problem gamblers
- Importance of education and prevention
- Necessity for the availability of a diverse range of treatment options to meet the complex needs of this client group