

Royal Commission into Victoria's Mental Health System

This submission focuses on the close relationship between problem gambling and mental health. It makes four key points:

- 1) Problem gambling occurs co-morbidly with other mental health conditions, including depression, anxiety, and alcohol and substance abuse. Like other mental health problems, pathological gambling is similarly stigmatised.
- 2) While current services appear adequate they are underutilised and often only accessed when the individual or concerned significant others (CSO) are at crisis point;
- 3) Under a public health approach, identifying problem gambling through universal screening by GPs, and greater education about screening tools and treatment options, provides an important opportunity for early intervention;
- 4) The negative effects on the mental health of family members and CSOs are not well understood and require greater attention.

Terms of reference:

1. What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

Gambling is a popular recreational and social activity in Australia. For a significant minority though, gambling is correlated with mental health issues, including depression, anxiety, and suicidal ideation.¹ The social costs of gambling affect the health and wellbeing of individuals suffering gambling addiction, family members, CSOs and the wider community.²

There is a growing recognition that problem gambling needs to be understood as being closely related to mental health problems as a co-morbid condition in a similar way to alcohol and substance abuse, and thus an integrated public health approach offers the best chance of prevention and successful treatment.

The relationship between problem gambling and mental health is often misunderstood though, contributing to stigma associated with problem gambling which can further contribute to the deleterious mental health effects and become a barrier to seeking help.³ The Responsible Gambling

¹ Dowling, N. (2014). The Impact of Gambling Problems on Families. Australian Gambling Research Centre Discussion paper No.1. Australian Institute of Family Studies.

² Browne, M., Greer, N., Armstrong, T., Doran, C., Kinchin, I., Langham., E & Rockloff, M. (2017). The social cost of gambling to Victoria. Victorian Responsible Gambling Foundation, Melbourne. p. 2.

³ Hing, N., Russell, A. M. T., Gainsbury, S. M. & Nuske, E. (2016). The Public Stigma of problem Gambling: Its Nature and Relative Intensity Compared to Other Health Conditions. *Journal of Gambling Studies*. 32. pp. 847-864; Hing, N. & Russell, A. M. T. (2017). How Anticipated and Experienced Stigma Can Contribute to Self-Stigma: The case of Problem Gambling. *Frontiers in Psychology*. 8. 235. pp. 1-11.

Foundation reported in 2017 that approximately 70% of Victorians participate in gambling, with 2.8% being moderate risk and 0.8% being at high risk of gambling harm.⁴ This means that over 100,000 people are potentially at risk of experiencing gambling harm.

Of those at high or moderate risk, only 22% of people seek help. One of the key barriers to seeking help for problem gambling is that many of the current services require individuals to self-identify as being in need of help. The stigma attached to gambling and the increasing evidence that people with a mental health disorder have a higher likelihood of experiencing problem gambling, suggest that the capacity to seek out help could be negatively affected.

This link between gambling harm and mental health problems is well established⁵ yet there is little awareness amongst the community of the links between mental health disorders and problem gambling. Seeking treatment for problem gambling is complicated by this relationship, where the risks of gambling harm tend to be higher in those with mental health disorders⁶ and gambling harm can also exacerbate existing mental health disorders and lead to further deterioration.⁷

Even when people are being treated for mental health problems, research suggests that because problem gambling carries stigma, if it is not identified it could complicate other mental health treatments. This has important implications for the successful treatment of other mental health disorders particularly as problem gambling tends to precede and predict other mental health conditions.⁸ This has significant implications for successful treatment of gambling addiction and other mental health problems.

Lack of community understanding of the complex relationship between mental health disorders and problem gambling contributes to stigma and presents a significant barrier for those seeking help. It also helps explain why rates of help seeking have remained low and why help seeking tends to occur when conditions have become acute. Further effort should be made to find opportunities for early intervention and preventive strategies targeting those at moderate risk of gambling harm.

2. What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

The Victorian Government supports a preventive approach to gambling harm and continues to provide funding for services through Gambling Help and a range of community services supported by the Victorian Responsible Gambling Foundation.⁹ Given the comorbidity of gambling harm and other mental health disorders, there is a clear opportunity to identify those at risk of gambling harm when an individual, family member or CSOs present with other health concerns.

⁴ Lubman, D, Manning, V, Dowling, N, Rodda, S, Lee, S, Garde, E, Merkouris, S & Volberg, R (2017). Problem gambling in people seeking treatment for mental illness, Victorian Responsible Gambling Foundation, Melbourne. p.2.

⁵ Vic Health and Partners. (2019). Focusing on Prevention: A Joint Submission to the Productivity Commission Inquiry into Mental Health. pp. 18-19.

⁶ Lubman, D. et al. p. 1.

⁷ Lubman, D. et al. p. 1.

⁸ Lubman, D. et al. p. 3.

⁹ <https://www.premier.vic.gov.au/fighting-gambling-harm-across-victoria/>

Gambling harm is often only detected when at crisis point (extreme financial or family/relationship breakdown)¹⁰, universal screening within a primary care setting has the potential to ensure gambling harm is identified early and support is offered before it reaches a crisis point. Despite the obvious benefits from a preventive health viewpoint, there is very little in the way of systematic screening for gambling harm within a primary care setting.

The Australian Medical Association has, since 2013, been recommending GPs include gambling harm as part of universal screening. They include the following three policy recommendations:

- Medical practitioners should be aware of the potential adverse impacts of problem gambling on the physical and mental health of individuals and their families. Patients with problem gambling may present with symptoms that appear unrelated to gambling. Other patients may present with health-related concerns arising from a family member's gambling problem.
- Medical practitioners should consider including gambling as part of their systematic lifestyle risk assessment when taking a medical history.
- Information kits which include screening and assessment questionnaires should be available to all medical practitioners, especially general practitioners, to help identify, manage and refer patients affected by problem gambling.¹¹

While many GPs are aware of the comorbidity of gambling harm, mental health disorders, and AOD, a range of other health issues can also indicate the presence of some degree of risk, and should therefore also prompt further investigation through the use of screening tools. These can include disrupted or changed sleeping and/or eating patterns, anxiety and depression, stress and dissatisfaction with life.¹²

The main obstacles to universal screening within a primary health setting include a lack of information and education for GPs about the relationship between gambling harm and mental health disorders, a lack of time and low levels of knowledge and awareness of appropriate or available screening tools.¹³

Each of these barriers to universal screening can be addressed through targeted education and training.¹⁴ This would ensure that GPs have the knowledge and confidence to identify gambling harm through universal screening, refer people to the appropriate services, and, significantly, identify those at risk before people are in acute crisis. This is in line with the Victorian Government's commitment taking preventive approach to mental health.

6. What are the needs of family members and carers and what can be done better to support them?

Gambling has a significant social cost, with negative impacts on the families of those with a gambling addiction. These impacts include financial insecurity, neglect, increased risk of family violence, and

¹⁰ Lubman, D. et al. p. 1.

¹¹ Australian Medical Association. (2013). *Health Effects of Problem Gambling*. <<https://ama.com.au/position-statement/health-effects-problem-gambling-2013>>

¹² Rodda, S., Lubman, D. I. & Latage, K. (2012). Problem Gambling: Aetiology, Identification and Management. *Pathological Strategies*. 41: 9. pp. 725-729.

¹³ Lubman D. et al.

¹⁴ Davidson, T., Taylor-Rogers, E. & Fogarty, M. (2018). Informing targeted Interventions for People Experiencing gambling Harms in the ACT. Centre for Gambling Research, ANU Centre for Social Research and Methods, Research School of Social Science. p. 18.

those within the family, including children, being at a higher risk of developing gambling and other addictions.¹⁵ There is also growing evidence of the links between gambling addiction and intimate partner violence (IPV).¹⁶

Because of the extensive negative effects on family and loved ones, they can often be the first to make contact with Gambling support services, such as Gamblers Help. The Victorian Responsible Gambling Foundation found that approximately 30% of the people who called the Gamblers Helpline, and 15% of the people who used Gamblers Help Online were family members or Concerned Significant Others (CSO).¹⁷

Early identification through universal screening could thus also be of immense benefit to family and CSOs. It has the potential to provide help and support services before family breakdown and financial crisis occur. However, research into the impacts on families, particularly the mental health of children of those experiencing gambling harm and women at risk of IPV, is seriously lacking¹⁸ and requires much greater attention in order to design policies and services for effective intervention and support.

¹⁵ Kalischuk, R. G., Nowatzki, N., Cardwell, K., Klein, K., & Solowoniuk, J. (2006). Problem gambling and its impacts on families. *International Gambling Studies*, 2, 61-83.

¹⁶ Dowling, N., Suomi, A., Jackson, A., Lavis, T., Patford, J., Cockman, S., Thomas, S., Bellringer, M., Koziol-Mclain, J., Battersby, M., Harvey, P. & Abbott. (2016). Problem Gambling and Intimate Partner Violence: A Systematic review and Meta-Analysis. *Trauma, Violence, and Abuse*. 17:1. pp. 43-61.

¹⁷ Townshend, P., Dowling, N., Rodda, S., & Legge, B. (2014). An Introduction to Gamblers Help for GPs. *Victorian responsible Gambling Foundation*. p. 21.

¹⁸ Kourgiantakis, T., Saint-Jacques, M. & Tremblay J. (2013). Problem Gambling and Families: A Systematic Review. *Journal of Social Work Practice in the Addictions*. 13: 4. pp. 353-372.

2019 Submission - Royal Commission into Victoria's Mental Health System

Organisation Name

N/A

Name

Ms Michaela Settle

What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

"Gambling is a popular recreational and social activity in Australia. For a significant minority though, gambling is correlated with mental health issues, including depression, anxiety, and suicidal ideation. The social costs of gambling affect the health and wellbeing of individuals suffering gambling addiction, family members, CSOs and the wider community. There is a growing recognition that problem gambling needs to be understood as being closely related to mental health problems as a co-morbid condition in a similar way to alcohol and substance abuse, and thus an integrated public health approach offers the best chance of prevention and successful treatment. The relationship between problem gambling and mental health is often misunderstood though, contributing to stigma associated with problem gambling which can further contribute to the deleterious mental health effects and become a barrier to seeking help. The Responsible Gambling Foundation reported in 2017 that approximately 70% of Victorians participate in gambling, with 2.8% being moderate risk and 0.8% being at high risk of gambling harm. This means that over 100,000 people are potentially at risk of experiencing gambling harm. Of those at high or moderate risk, only 22% of people seek help. One of the key barriers to seeking help for problem gambling is that many of the current services require individuals to self-identify as being in need of help. The stigma attached to gambling and the increasing evidence that people with a mental health disorder have a higher likelihood of experiencing problem gambling, suggest that the capacity to seek out help could be negatively affected. This link between gambling harm and mental health problems is well established yet there is little awareness amongst the community of the links between mental health disorders and problem gambling. Seeking treatment for problem gambling is complicated by this relationship, where the risks of gambling harm tend to be higher in those with mental health disorders and gambling harm can also exacerbate existing mental health disorders and lead to further deterioration. Even when people are being treated for mental health problems, research suggests that because problem gambling carries stigma, if it is not identified it could complicate other mental health treatments. This has important implications for the successful treatment of other mental health disorders particularly as problem gambling tends to precede and predict other mental health conditions. This has significant implications for successful treatment of gambling addiction and other mental health problems. Lack of community understanding of the complex relationship between mental health disorders and problem gambling contributes to stigma and presents a significant barrier for those seeking help. It also helps explain why rates of help seeking have remained low and why help seeking tends to occur when conditions have become acute. Further effort should be made to find opportunities for early intervention and preventive strategies targeting those at moderate risk of gambling harm. "

What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

"The Victorian Government supports a preventive approach to gambling harm and continues to

provide funding for services through Gambling Help and a range of community services supported by the Victorian Responsible Gambling Foundation. Given the comorbidity of gambling harm and other mental health disorders, there is a clear opportunity to identify those at risk of gambling harm when an individual, family member or CSOs present with other health concerns. Gambling harm is often only detected when at crisis point (extreme financial or family/relationship breakdown) , universal screening within a primary care setting has the potential to ensure gambling harm is identified early and support is offered before it reaches a crisis point. Despite the obvious benefits from a preventive health viewpoint, there is very little in the way of systematic screening for gambling harm within a primary care setting. The Australian Medical Association has, since 2013, been recommending GPs include gambling harm as part of universal screening. They include the following three policy recommendations: Medical practitioners should be aware of the potential adverse impacts of problem gambling on the physical and mental health of individuals and their families. Patients with problem gambling may present with symptoms that appear unrelated to gambling. Other patients may present with health-related concerns arising from a family member's gambling problem. Medical practitioners should consider including gambling as part of their systematic lifestyle risk assessment when taking a medical history. Information kits which include screening and assessment questionnaires should be available to all medical practitioners, especially general practitioners, to help identify, manage and refer patients affected by problem gambling. While many GPs are aware of the comorbidity of gambling harm, mental health disorders, and AOD, a range of other health issues can also indicate the presence of some degree of risk, and should therefore also prompt further investigation through the use of screening tools. These can include disrupted or changed sleeping and/or eating patterns, anxiety and depression, stress and dissatisfaction with life. The main obstacles to universal screening within a primary health setting include a lack of information and education for GPs about the relationship between gambling harm and mental health disorders, a lack of time and low levels of knowledge and awareness of appropriate or available screening tools. Each of these barriers to universal screening can be addressed through targeted education and training. This would ensure that GPs have the knowledge and confidence to identify gambling harm through universal screening, refer people to the appropriate services, and, significantly, identify those at risk before people are in acute crisis. This is in line with the Victorian Government's commitment taking preventive approach to mental health. "

What is already working well and what can be done better to prevent suicide?

N/A

What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other.

N/A

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

N/A

What are the needs of family members and carers and what can be done better to support them?

"Gambling has a significant social cost, with negative impacts on the families of those with a

gambling addiction. These impacts include financial insecurity, neglect, increased risk of family violence, and those within the family, including children, being at a higher risk of developing gambling and other addictions. There is also growing evidence of the links between gambling addiction and intimate partner violence (IPV). Because of the extensive negative effects on family and loved ones, they can often be the first to make contact with Gambling support services, such as Gamblers Help. The Victorian Responsible Gambling Foundation found that approximately 30% of the people who called the Gamblers Helpline, and 15% of the people who used Gamblers Help Online were family members or Concerned Significant Others (CSO). Early identification through universal screening could thus also be of immense benefit to family and CSOs. It has the potential to provide help and support services before family breakdown and financial crisis occur. However, research into the impacts on families, particularly the mental health of children of those experiencing gambling harm and women at risk of IPV, is seriously lacking and requires much greater attention in order to design policies and services for effective intervention and support. "

What can be done to attract, retain and better support the mental health workforce, including peer support workers?

N/A

What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

N/A

Thinking about what Victorias mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

N/A

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?

N/A

Is there anything else you would like to share with the Royal Commission?

N/A