Annual Statistics from the National Gambling Treatment Service Great Britain



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1 Executive Summary

Client characteristics

- A total of 7,072 individuals were treated within the National Gambling Treatment Services (who report to the Data Reporting Framework (DRF)) in Great Britain between April 2021 and March 2022.
- This included 5,996 people who were experiencing problematic gambling behaviour and 1,076 people who were impacted by someone else's gambling ('affected others') or at risk of developing problematic gambling behaviour.
- A large majority of clients (70%) identified as male.
- Three quarters (75%) of clients were aged 44 years or younger. The highest number were reported in the 25-29 years old and 30-34 years old age bands, accounting for 39% of clients in total.
- 88% were from a white ethnic background, including 76% White British and 5% White Other. The next most reported ethnic backgrounds were Asian or Asian British (6%), and Black or Black British (3%) or Mixed (3%).
- Most clients were in a relationship (36%) or married (27%). 30% were single, 4% were separated and 2% divorced.
- Most clients were employed (73%), with 11% identifying as living with long-term sickness and/or disability & not in work, 9% unemployed, 3% looking after family/home and not working, 2% retired and 2% student.
- The proportion of clients seeking help due to another individual's gambling has increased from 10% in 2015/16 to 14% in 2021/22.
- The proportion of female gambling clients increased from 13% in 2015/16 to 21% in 2021/22.

Gambling behaviour

- Problem Gambling Severity Index (PGSI)¹ scores indicated that most gambling clients (92%) were classed as 'problem gamblers' as defined by the scale (i.e. had a score of eight or more) during initial assessment for treatment.
- The most common location for gambling was online, used by 75% of clients. Bookmakers were the next most common, used by 30% of people who gamble. Use of online services was noticeably higher among younger age groups.
- Between 2015/16 and 2021/22 the proportion reporting use of online gambling services increased from 57% to 75%. In the same time period, the proportion using bookmakers decreased from 56% to 30%.
- Among online services, gambling on casino slots was the most common activity (38% compared to 32% in 2020/21), followed by sporting events (20% compared to 27% in 2020/21) and casino table games (12% compared to 21% in 2020/21).
- Among bookmakers, gaming machines were the most common form of gambling (17%), followed by sporting events (10%) and horses (7%).

- Compared to White or White British people who gamble, those who identified as Black or Black British were more likely to use bookmakers (44% compared to 30%) or casinos (17% compared to 7%). Those who identified as Asian or Asian British were also more likely to use bookmakers (44%) or casinos (17%).
- Most people who gamble (63%) reported having a debt due to their gambling. 11% had
 experienced a job loss because of their gambling and 26% had experienced a relationship loss.
 At the point of presentation to gambling services, clients reported having started gambling on
 average (median) 10 years prior.
- The median spend reported by people who had gambled in the previous 30 days before assessment was £1000, with 50% spending more than this.

Treatment engagement

- Most referrals into treatment were from the National Gambling Helpline (57%), followed by self-made (26%).
- For clients treated in 2021/22, 50% had a first appointment within five days of making contact and 75% within 12 days.
- Among those receiving and ending treatment in 2021/22, treatment lasted for an average (median) of 10 weeks. Overall, clients received a median of eight appointments within their treatment episode.

Treatment outcomes

- Among clients who ended treatment in 2021/22, a majority (63%) completed their scheduled treatment. This represents an increase from 59% in 2015/2016, when data were first collected.
- Just under one third (30%) dropped out of treatment before a scheduled endpoint, down from 35% in 2015/16.
- Among people who gamble, PGSI scores improved by an average (median) of 12 points between earliest and last appointment in treatment.
- At the latest point in treatment 72% had a PGSI score of below 8 (the cut-off for being defined as a 'problem gambler' on the PGSI scale), compared to 8% at the start of treatment.
- Improvements in PGSI score were seen in 80% of people who gamble, including 92% in those who completed treatment, compared to 62% of those who dropped out.
- At the end of treatment 60% of clients were defined as 'below clinical cut-off' on the CORE-10 scale², compared to only 20% at the start of treatment.
- Improvements in CORE-10 score were seen in 86% of clients who completed treatment, compared to 53% of those who dropped out.compared to 52% of those who dropped out.

2 About the National Gambling Treatment Service

The National Gambling Treatment Service (NGTS) is a network of organisations working together to provide confidential treatment and support for anyone experiencing gambling-related harms, either as a person who gambles or someone who is impacted by someone else's gambling. The NGTS is free to access across England, Scotland and Wales. The NGTS is commissioned by GambleAware, an independent grant-making charity that takes a public health approach to reducing gambling harms. Wherever someone makes contact with the NGTS network, the providers work alongside each other through referral pathways to deliver the most appropriate package of care.

The data for the 2021/22 period presented within this report covers submissions from the following organisations, with details of the services they provide listed below.

GamCare³ and its partner network offers:

- Online treatment supported by regular contact with a therapist, which can be accessed at a time and place convenient for the client over the course of eight weeks.
- One-to-one face-to-face, online and telephone therapeutic support and treatment for people
 with gambling problems as well as family and friends who are impacted by gambling.
- Group based Gambling Recovery Courses delivered face-to-face or online for between six to eight weeks.

Gordon Moody offers:

- Residential Treatment Centres two unique specialist centres, providing an intensive residential treatment programme for men with a gambling disorder over a period of 14 weeks.
- Recovery Housing specialist relapse prevention housing for those who have completed the treatment programmes requiring additional recovery support.
- Retreat & Counselling Programme retreat programmes for women-only-cohorts and men-only-cohorts which combine short residential stays with at-home counselling support.

Central and North West London NHS Foundation Trust (London Problem Gambling Clinic) offers:

Specialist addiction therapy and recovery to people affected by gambling addiction, as well as
those with mental health problems such as depression, anxiety, trauma, and suicidal feelings.
 They also provide help to also provide help to people close to those with gambling addiction,
such as family, partners, and carers.

NHS Northern Gambling Service, provided by Leeds and York Partnership NHS Foundation Trust offers:

Specialist addiction therapy and recovery for people affected by gambling addiction, as well
as those with mental health problems such as depression, anxiety, trauma, and suicidal feelings.
also provide help to people close to those with gambling addiction, such as family, partners,
and carers.

GambleAware funded treatment providers are required to submit quarterly datasets in a standardised format⁴. This report is informed by analysis of these submissions.

³ In addition, GamCare operates the National Gambling Helpline which offers telephone and online live chat support providing immediate support to individuals and referral into the treatment service. GamCare also offer information and advice via their website, moderated forums and online group chatrooms. These services are not within the scope of data presented in this report.

https://about.gambleaware.org/media/2147/gambleaware-drf-specification-june-16.pdf

3 Policy Context

At the time of publishing, GambleAware and others in the sector await the publication of the Gambling White Paper which will outline the Government's proposals for reform to the Gambling Act 2005. GambleAware is a strong advocate for the introduction of a compulsory levy on the gambling industry to be included within the review. The inclusion of such a levy would ensure long-term, sustainable and transparent funding for the essential services that are needed to prevent and reduce gambling harms.

It is likely that the forthcoming White Paper will result in changes to the sector. GambleAware is committed to tackling gambling harms as a public health issue and will continue to do so moving forward. As part of our organisational strategy 2021-2026, we made a commitment to "improving the coherence, accessibility, diversity, and effectiveness of the National Gambling Treatment Service". In our enhanced role as a strategic commissioner, we want to ensure that we improve our outcomes and the way we measure them to ensure the new system is of the highest quality it can be. This leadership role will also ensure that service user safety continues to be paramount and that future treatment providers are supported in their quality and improvement accountabilities.

4 The DRF database

The collection of data from clients receiving treatment through the NGTS is managed through a nationally co-ordinated system known as the Data Reporting Framework (DRF), initiated in 2015. Treatment service providers collect data about their clients and their treatment through bespoke case management systems in line with the DRF. This data is then pseudonymised and uploaded to a centralised system. Data items collected and uploaded by the treatment providers are set out in the DRF Specification⁵, which is provided in the appendix to this report. Data are collected using four separate tables which provide details of client characteristics, gambling history, referrals and appointments. The DRF constitutes a co-ordinated core data set, collected to provide consistent and comparable reporting at a national level.

5 About this report

This report summarises information on the clients of NGTS agencies, providing details of their characteristics, gambling activities, gambling history, treatment receipt and outcomes. It is restricted to clients who attended at least one appointment for assessment or were in receipt of structured treatment within the reporting period and so does not represent all activity of the reporting agencies, nor does it capture any activity of agencies that do not report to the DRF system. It provides a consistently reported summary, comparable across years. The agencies reporting to the DRF for the year 2021/2022 are Gamcare, Gordon Moody, Central and North West London NHS Foundation Trust (London Problem Gambling Clinic) and NHS Northern Gambling Service.

6 Notes on interpretation

Totals for services are summed to provide an estimate of national treatment levels. At the service level, client codes are used to distinguish one client from another without the need for identifiable information such as name and date of birth. If a client attends more than one service within the reporting period, they will be counted in each service they attended and therefore may be 'double counted' within the system. The total number presented in this report should therefore be interpreted as an estimate of the actual number of clients receiving treatment at participating agencies. The level of overlap between services can be estimated through the inclusion of a pseudonymised code, aligned to initials, date of birth and gender. In 2021/22, 119 (1.7%) clients were estimated to have been reported by more than one service provider.

Clients of gambling treatment services can either be people who experience problematic gambling behaviour themselves, people who are indirectly affected by another person's gambling (often termed 'affected others') or people who consider themselves at risk of developing problematic gambling behaviour. Within this report, we combine the second and third groups above so that clients are categorised as either 'people who gamble' or 'other clients'. Client characteristics and treatment engagement are presented for both client categories. Details of gambling activity and history are only presented for clients identified as people who gamble.

Within this report averages are presented either as means or medians, or sometimes both. As extreme individual values affect the mean but not the median, the median is often preferred.

To avoid drawing comparisons across measures with low numbers of responses, the tables in this report only compare across categories if there were at least 100 responses in the category (i.e. table row or column). The full list of categories is available in the data specification in appendix section 13.1.

The treatment period April 1st 2021 to March 31st 2022 coincided with the Covid-19 pandemic. During this period, rights of movement and access to public venues was sometimes restricted. Details of lockdowns and other restrictions across Great Britain can be found here:

- England:
- Scotland:
- Wales:

Within lockdown periods, access was restricted to services defined as essential. Hospitality and entertainment sector venues, such as pubs, restaurants and cinemas, but also betting shops, casinos and bingo premises were closed during lockdowns and subject to curfews and distancing restrictions outside of lockdowns.

7 About GambleAware

GambleAware⁶ is the leading charity working to keep people safe from gambling harms. We do this by leading public health campaigns and commissioning the transformation of treatment, education and prevention services in Great Britain.

We work in close collaboration with the NHS, clinicians, local and national government, gambling treatment providers, as well as other services such as mental health, services for people who use drugs, alcohol and harm reduction services and criminal justice, to ensure that the whole system works together to help people suffering from gambling harms.

GambleAware has an extremely robust system of governance, and we are accountable to the Charity Commission. Our independent Board of trustees are leaders within the NHS and public health sector, and we work alongside DCMS, DHSC, OHID and the Gambling Commission and those with lived experience of gambling harm inform and guide our work.

We are also an approved National Institute for Health Research (NIHR) non-commercial partner. An effective mechanism to align the work of many organisations on the reduction of gambling harm as part of a coalition of expertise - the best way to ensure support reaches those who need it.

GambleAware is dedicated to understanding how to prevent the harm caused by gambling and do this by adopting a public health approach to prevent gambling. We deliver this by bringing together public sector and charity partners into a coalition of expertise to provide targeted, innovative, and effective services that help reduce gambling harm. Led by strategy and evidence, GambleAware is focused on evidence-based decision making to meet our vision and to bring together public and third sector expertise to create a prevention and treatment network.

Furthermore, GambleAware is guided by the framework for harm prevention, as set out in the National Strategy to Reduce Gambling Harms. As part of this, GambleAware made a commitment in its <u>organisational strategy 2021–2026</u> to "improving the coherence, accessibility, diversity, and effectiveness of the National Gambling Treatment Service". In line with this commitment, GambleAware developed a long-term commissioning strategy for the National Gambling Treatment Service (NGTS) in November 2021 to ensure that it effectively serves to reduce gambling harm across Great Britain. GambleAware's <u>Commissioning Intentions</u> were published in September 2022. From 1 April 2023 there will be a refreshed helpline, more integrated regional services and increased support for residential treatment. These changes will enable the NGTS to respond to the growing needs of people at risk of gambling harm more effectively by enabling and supporting service providers to work closely with Local Authorities and local partners to deliver targeted support.

8 Assessment of completeness of 2021/22 DRF data

Table 1 below shows the level of completion of details taken at the time of assessment for clients treated in 2021/22. Completion implies that the question was asked and details were recorded to the system, including where the answer was 'not stated' or 'not known'. Details of gambling activity and history are not routinely collected for clients who do not themselves gamble, so levels of completeness of gambling information relate only to clients identified as people who gamble. Most data items have high completion rates, helping to strengthen comparisons with previous years.

Table 1 Level of completion of selected data fields

Data item	Level of completion
Referral reason	100%
Referral source	99.9%
Gender	99.4%
Ethnicity	98.1%
Employment status	97.6%
Relationship status	98.0%
Religion	43.0%
Sexual orientation	52.3%
Care for children	85.3%
Local Authority of residence	96.6%
Primary gambling activity*	95.8%
Money spent on gambling (per month)*	88.1%
Job loss*	99.6%
Relationship loss*	99.3%
Early big win*	99.3%
Debt due to gambling*	96.7%
Length of gambling history*	89.1%
Age of onset (problem gambling)*	92.5%
Days gambling per month*	86.6%
Use of self-exclusion tools*	72.8%

^{*} People who gamble only

9 Characteristics of Clients

A total of 7,072 individuals were reported as treated by NGTS providers in 2021/22. This includes 6,467 (91%) Residents of England, 222 (3%) of Scotland and 316 of Wales (4%), with 1% not known

Most of these clients were people who gamble (5,996; 85%), with 971 (14%) 'affected others'. A small number of referrals (105, 2%) related to clients who were not people who gamble but who considered themselves at risk of developing a gambling problem (see section 6).

One quarter (24%) of clients seen in 2021/22 were for recurring treatment (clients previously seen by the reporting service or another service).

9.1 Age and gender of Clients

Clients had a median age of 35 years at the point of referral, with three quarters (75%) aged 44 years or younger. The highest number of clients were reported in the 25-29 (18%) and 30-34 (21%) age bands (Table 2). Non-gambler clients had a higher median age of 40 years and were more likely than people who gamble to be in the over 45 age bands (Table 3).

A large majority of clients (70%) were male. This compares to 49% in the general population of Great Britain⁷. Thirty-one (0.4%) clients identified as a gender other than male or female (female to male, male to female transgender, or an unspecified gender category). The distribution of age differed by gender (Table 2 and Figure 1), with females being more evenly age distributed, including a greater proportion in all higher age groups (40+) compared to males. This resulted in a higher median age of 39 years for females compared to 34 years for males. Gender differed considerably by type of client (Table 4) with 79% of people who gamble being male compared to only 19% of other clients.

Table 2 Age and gender of clients

				Male			Female	To	tal Clients
		N	Col %	Row %	N	Col %	Row %	N	Col %
Age	< 20	63	1.3%	87.5%	9	0.4%	12.5%	73	1.0%
bands	20-24	469	9.6%	83.8%	91	4.3%	16.3%	569	8.1%
	25-29	953	19.5%	78.0%	269	12.7%	22.0%	1241	17.6%
	30-34	1115	22.9%	75.0%	371	17.6%	25.0%	1503	21.3%
	35-39	810	16.6%	70.2%	344	16.3%	29.8%	1164	16.5%
	40-44	530	10.9%	68.8%	240	11.4%	31.2%	773	10.9%
	45-49	343	7.0%	64.5%	189	8.9%	35.5%	538	7.6%
	50-54	262	5.4%	54.1%	222	10.5%	45.9%	488	6.9%
	55-59	175	3.6%	49.4%	179	8.5%	50.6%	358	5.1%
	60+	159	3.3%	44.5%	198	9.4%	55.5%	361	5.1%
	Total*	4879	100.0%	69.8%	2112	100.0%	30.2%	7068	100.0%
	Missing	2			1			4	
	Total clients	4881			2113			7072	

^{*}Categories of gender with less than 100 clients were excluded from this table. See section 13.1.1.1 for full categories.

Figure 1 Age and gender of clients at the point of referral

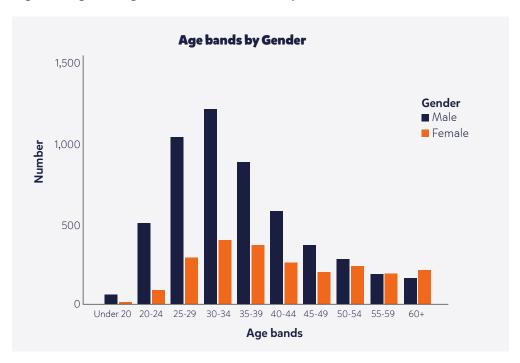


Table 3 Age bands by type of client

			Gambling clients		Other clients
		%	N	%	N
Age bands	Under 20	69	1.2%	4	0.4%
	20-24	524	8.7%	45	4.2%
	25-29	1121	18.7%	120	11.2%
	30-34	1336	22.3%	167	15.5%
	35-39	1014	16.9%	150	14.0%
	40-44	660	11.0%	113	10.5%
	45-49	447	7.5%	91	8.5%
	50-54	365	6.1%	123	11.4%
	55-59	254	4.2%	104	9.7%
	60+	203	3.4%	158	14.7%
	Total	5993	100.0%	1075	100.0%
	Missing	3		1	
	Total clients	5996		1076	

Table 4 Gender by type of client*

		Gambling clients		Other clients	
		%	N	%	N
	Male	4682	78.9%	199	18.8%
	Female	1251	21.1%	862	81.2%

^{*}Categories of gender with less than 100 clients were excluded from this table. See section 13.1.1.1 for full categories

9.2 Ethnicity of Clients

Nearly nine tenths (88%) of clients were from a White ethnic background (Table 5), including 76% White British and 5% White Other. The next most reported ethnic backgrounds were Asian or Asian British (6%), Black or Black British (3%), and Mixed (3%). This compares to national (UK) proportions⁸ of 87% White or White British, 7% Asian or Asian British, 3% Black or Black British and Mixed (3%).

Although no large differences existed between genders within categories defined by ethnicity (Table 6), a higher proportion of male clients were Asian or Asian British than female clients (7% compared to 4%) or Black or Black British (3% compared to 2%).

Table 5 Client ethnicity

		Gamblin	g clients	Other clients			Total
		N	%	N	%	N	%
White or White British	British	4509	80.7%	729	74.5%	5238	79.8%
	Irish	54	1.0%	13	1.3%	67	1.0%
	European	126	2.3%	27	2.8%	153	2.3%
	Other	224	4.0%	92	9.4%	316	4.8%
Black or Black	African	72	1.3%	13	1.3%	85	1.3%
British	Caribbean	60	1.1%	3	0.3%	63	1.0%
	Other	32	0.6%	4	0.4%	36	0.5%
Asian or Asian	Bangladeshi	33	0.6%	5	0.5%	38	0.6%
British	Indian	112	2.0%	25	2.6%	137	2.1%
	Pakistani	61	1.1%	5	0.5%	66	1.0%
	Chinese	11	0.2%	4	0.4%	15	0.2%
	Other	97	1.7%	24	2.5%	121	1.8%
Mixed	White and Asian	33	0.6%	7	0.7%	40	0.6%
	White and Black African	19	0.3%	2	0.2%	21	0.3%
	White and Black Caribbean	38	0.7%	8	0.8%	46	0.7%
	Other	92	1.6%	16	1.6%	108	1.6%
Other ethnic group		14	0.3%	1	0.1%	15	0.2%
	Total	5587	100.0%	978	100.0%	6565	100.0%
	Missing	409		98		507	
	Total clients	5996		1076		7072	

Table 6 Ethnicity by gender

		Male		Female
	N	%	N	%
White or White British	3978	86.8%	1767	90.8%
Black or Black British	150	3.3%	34	1.7%
Asian or Asian British	297	6.5%	77	4.0%
Mixed or Multiple	146	3.2%	66	3.4%
Other Ethnic Group	12	0.3%	3	0.2%
Total	4583	100.0%	1947	100.0%
Missing/not known/not stated	298		166	
Total Clients	4881		2113	

9.3 Relationship status of Clients

Most clients were in a relationship (36%) or married (27%). A further 30% were single, 4% were separated and 2% divorced (Table 7). Compared to male clients, female clients were less likely to be single (25% compared to 32%) and more likely to be married or in a civil partnership (32% compared to 24%) or widowed (2% compared to <1%) (Table 8).

Table 7 Relationship status of clients

	Gan	nbling clients		Other clients		Total
	N	%	N	%	N	%
In relationship	1954	37.5%	289	30.5%	2243	36.4%
Single	1719	33.0%	110	11.6%	1829	29.7%
Married	1193	22.9%	448	47.3%	1641	26.7%
Separated	194	3.7%	53	5.6%	247	4.0%
Divorced	112	2.2%	35	3.7%	147	2.4%
Widowed	36	0.7%	12	1.3%	48	0.8%
Total	5208	100.0%	947	100.0%	6155	100.0%
Missing/not known/ not stated	788		129		917	
Total Clients	5996		1076		7072	

Table 8 Relationship status of clients by gender

		Male		Female
	N	%	N	%
In relationship	1632	38.3%	585	32.0%
Single	1357	31.9%	455	24.9%
Married/Civil Partnership	1016	23.8%	607	33.2%
Separated	158	3.7%	88	4.8%
Divorced	82	1.9%	63	3.4%
Widowed	15	0.4%	32	1.7%
Total	4260	100.0%	1830	100.0%
Missing/not known/not stated	621		283	
Total Clients	4881		2113	

9.4 Employment status of Clients

Most clients were employed (73%) (Table 9). People living with long-term disabilities/illness and not in work accounted for 11%, followed by unemployed (9%), looking after family/home and not working (3%), retired (2%) and student (2%). Female clients were less likely to be employed (62% compared to 76% males) (Table 10) and more likely to be looking after family/home and not working (7% compared to 1%), long-term sick/disabled & not in work (17% compared to 8%) or retired (5% compared to 1%).

Table 9 Employment status of clients

	Gam	bling clients	Other clients			Total
	N	%	N	%	N	%
Employed	4039	73.5%	665	70.3%	4704	73.0%
Unemployed	511	9.3%	37	3.9%	548	8.5%
Student	96	1.7%	18	1.9%	114	1.8%
Long-term sick/ disabled & not in work	647	11.8%	37	3.9%	684	10.6%
Looking after family/ home and not working	88	1.6%	71	7.5%	159	2.5%
Not seeking work	15	0.3%	5	0.5%	20	0.3%
Volunteer	11	0.2%	0	0.0%	11	0.2%
Retired	70	1.3%	79	8.4%	149	2.3%
Seeking asylum	0	0.0%	3	0.3%	3	0.0%
In prison	17	0.3%	31	3.3%	48	0.7%
Total	5494	100.0%	946	100.0%	6440	100.0%
Missing	502		130		632	
Total clients	5996		1076		7072	

Table 10 Employment status by gender

		Male		Female
	N	%	N	%
Employed	3490	77.5%	1166	62.3%
Unemployed	404	9.0%	138	7.4%
Student	80	1.8%	32	1.7%
Long-term sick/disabled & not in work	370	8.2%	308	16.5%
Looking after family/home and not working	24	0.5%	134	7.2%
Not seeking work	14	0.3%	6	0.3%
Prison-care	0	0.0%	0	0.0%
Volunteer	9	0.2%	2	0.1%
Retired	61	1.4%	85	4.5%
Seeking asylum	3	0.1%	0	0.0%
In prison	48	1.1%	0	0.0%
Total	4503	100.0%	1871	100.0%
Missing	378		242	
Total clients	4881		2113	

9.5 Sexual orientation of clients

Introduced to data collection in April 2021, sexual orientation was reported by 53% of clients treated in 2021/22. Where specified, 96% identified as straight/heterosexual and 3% as lesbian, gay and/or homosexual.

Table 11 Sexual orientation of clients

	Gambling clients		Other clients		Tota	
	N	%	N	%	N	%
Lesbian, gay and/or homosexual	98	3.2%	15	2.5%	113	3.1%
Straight/heterosexual	2977	95.8%	573	96.8%	3550	95.9%
Bisexual	13	0.4%	1	0.2%	14	0.4%
Something else*	21	0.7%	3	0.5%	24	0.6%
Total	3109	100.0%	592	100.0%	3701	100.0%
Missing/not known/not stated	2887		484		3371	
Total Clients	5996		1076		7072	

^{*}Categories directly represent those in the data specification.

9.6 Responsibility for children

Introduced to data collection in April 2021, responsibility for children was specified for 85% of clients treated in 2021/22. Where specified, 41% of clients were responsible for the care of children.

Table 12 Responsibility for children

	Gambling clients		Other clients		Total	
	N	%	N	%	N	%
Have responsibility for children	2087	40.4%	360	41.5%	2447	40.6%
Don't have responsibility for children	3075	59.6%	508	58.5%	3583	59.4%
Total	5162	100.0%	868	100.0%	6030	100.0%
Missing/not known/not stated	834		208		1042	
Total Clients	5996		1076		7072	

9.7 Client religion

Introduced to data collection in April 2021, religion was specified for 43% of clients treated in 2021/22. A majority (59%) reported no religion, with a higher proportion among gambling clients (62%) than other clients (45%). A greater proportion of other clients than gambling clients were Christian (27% compared to 20%) or Muslim (13% compared to 4%). Other religions accounted for 11%, but details were not requested.

Table 13 Client religion

	Gambling clients		0	ther clients	Total	
	N	%	N	%	N	%
No religion	1593	61.8%	208	45.1%	1801	59.3%
Christian	525	20.4%	132	28.6%	657	21.6%
Buddhist	10	0.4%	2	0.4%	12	0.4%
Hindu	25	1.0%	5	1.1%	30	1.0%
Jewish	18	0.7%	0	0.0%	18	0.6%
Muslim	108	4.2%	58	12.6%	166	5.5%
Sikh	15	0.6%	1	0.2%	16	0.5%
Other religion	284	11.0%	55	11.9%	339	11.2%
Total	2578	100.0%	461	100.0%	3039	100.0%
Missing/not known/not stated	3418		615		4033	
Total Clients	5996		1076		7072	

9.8 Gambling profile

Section 8.5 reports information collected only from clients who reported disordered gambling behaviour.

9.8.1 Gambling locations

Up to three gambling activities are recorded for each gambling client and these are ranked in order of significance (agreed between client and keyworker). Gambling activities are grouped within the locations in which they take place. Forty eight percent of people who gamble reported one gambling activity, 29% reported two and 19% reported three.

The most common gambling location reported (Table 14) was online, used by 75% of people who gamble who provided this information. Bookmakers were the next most common, used by 30% of people who gamble. No other locations were used by more than 10% of people who gamble, although casinos were used by 7% and miscellaneous (such as lottery, scratch-cards and football pools) by 9%.

Table 14 also shows the location of main gambling activity, within which online services are the most common, followed by bookmakers. These two locations account for the majority of main gambling activities, at 87%.

Table 14 Location of gambling activity reported in 2021/22

	Any gambling in this location	%	Main gambling location	%
Online	4291	74.7%	3913	68.1%
Bookmakers	1741	30.3%	1105	19.2%
Miscellaneous	495	8.6%	212	3.7%
Casino	422	7.3%	210	3.7%
Adult Entertainment Centre (18+ arcade)	220	3.8%	119	2.1%
Pub	145	2.5%	59	1.0%
Bingo premises	101	1.8%	41	0.7%
Other	83	1.4%	14	0.2%
Family Entertainment Centre (arcade)	69	1.2%	25	0.4%
Live Events	23	0.4%	38	0.7%
Private Members Club	19	0.3%	9	0.2%
Total	5745		5745	
Missing	251		251	
Total people who gamble	5996		5996	

9.8.2 Gambling activities

Table 15 shows the number reporting each gambling activity, as a proportion of people who gamble overall and within specific gambling locations.

Table 15 Gambling activities, grouped by location

Location Activity	N	% among people who gamble	% within location
Bookmakers		J	
Sports or other event	539	9.6%	31.0%
Fixed Odds Gaming Machine	532	9.5%	30.6%
Horses	412	7.4%	23.7%
Gaming Machine (other)	402	7.2%	23.1%
Dogs	165	2.9%	9.5%
Other	147	2.6%	8.4%
Bingo premises			
Fixed Odds Gaming Machine	57	1.0%	56.4%
Live draw	28	0.5%	27.7%
Terminal	6	0.1%	5.9%
Skill Machine	4	0.1%	4.0%
Other	15	0.3%	14.9%
Casino			
Roulette	201	3.6%	40.6%
Fixed Odds Gaming Machine	111	2.0%	22.4%
Gaming Machine (other)	65	1.2%	13.1%
Poker	50	0.9%	10.1%
Non-poker card games	46	0.8%	9.3%
Other	78	1.4%	15.8%
Live events			
Sports or other event	50	0.9%	60.2%
Horses	25	0.4%	30.1%
Dogs	13	0.2%	15.7%
Other	6	0.1%	7.2%
Adult Entertainment Centre (18+ arcade)			
Gaming Machine (other)	131	2.3%	59.5%
Gaming Machine (FOBT)	76	1.4%	34.5%
Skill prize machines	5	0.1%	2.3%
Other	16	0.3%	7.3%
Family Entertainment Centre (arcade)			
Gaming Machine (other)	44	0.8%	63.8%
Fixed Odds Gaming Machine	23	0.4%	33.3%
Other	3	0.1%	4.3%

Location	Activity	N	% among people who gamble	% within location
Pub				
Gam	ing Machine (other)	132	2.4%	91.0%
	Sports	7	0.1%	4.8%
	Poker	3	0.1%	2.1%
	Other	4	0.1%	2.8%
Online				
С	asino (slots)	2187	38.1%	51.0%
S	ports events	1156	20.1%	26.9%
Casino (te	able games)	670	11.7%	15.6%
	Horses	470	8.2%	11.0%
	Bingo	223	3.9%	5.2%
Bettin	ng exchange	202	3.5%	4.7%
eSp	orts betting	183	3.2%	4.3%
	Poker	105	1.8%	2.4%
Finan	cial Markets	89	1.5%	2.1%
	Dogs	85	1.5%	2.0%
Spi	read betting	64	1.1%	1.5%
S	cratchcards	46	0.8%	1.1%
Virtual sp	orts betting	32	0.6%	0.7%
Within v	video games	29	0.5%	0.7%
	Other	245	4.3%	5.7%
Miscellane	ous			
S	cratchcards	254	4.4%	60.2%
Lotte	ry (National)	95	1.7%	22.5%
Fo	otball pools	75	1.3%	17.8%
Lo	ttery (other)	33	0.6%	7.8%
	rvice station ing machine	16	0.3%	3.8%
Private	e/organised games	8	0.1%	1.9%
Private me	mbers club			
Gam	ing Machine	9	0.2%	47.4%
	Poker	5	0.1%	26.3%
Non	-poker card	1	0.0%	5.3%
	games			
	Other	4	0.1%	21.1%
Other Loca		23	0.4%	
	Total Missing	5745 251		
Total	people who gamble	5996		

 $^{^{\}ast}$ %s may add up to > 100% because more than one activity can be reported

Within online services, casino slots were the most reported individual activity, reported by 38% of people who gamble overall, followed by sporting events (20%) and casino table games (12%). Within bookmakers, gaming machines were the most common form of gambling, used by 17% of people who gamble, followed by sporting events (10%) and horses (7%).

9.8.3 Gambling history

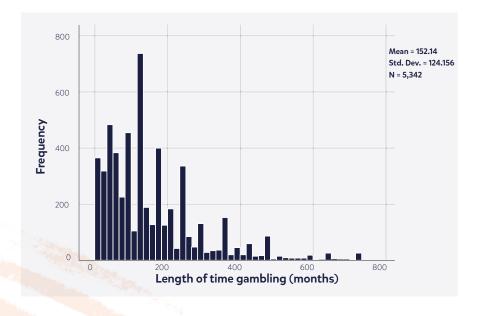
The median age of onset of problem gambling was 24 years, although this was highly variable. One quarter reported problem gambling starting by the age of 18 years and three quarters by age 32. At the point of presentation to gambling services, a median of 10 years of gambling was reported. Again, this was highly variable. One quarter reported problem gambling for up to 5 years and three quarters for up to 19 years. Figure 2 and Figure 3 show the distributions of age of onset and length of time gambling. Spikes in these distributions are likely to represent the rounding of answers (to five-year age brackets and number of years' gambling).

Mean = 26.62
Std. Dev. = 10.246
N = 5,484

200
200
Age of problem gambling onset

Figure 2 Distribution of age of onset of gambling

Figure 3 Distribution of length of time gambling prior to presentation



The DRF contains a number of measures of detrimental outcomes of gambling, some of which are not presented here in table form but summarised as follows. A majority of people who gamble (62%) had experienced an early big win in their gambling career. Job loss (because of gambling) was reported by 11% and relationship loss by 26%.

Nearly four in ten people who gamble (37%) had no debt due to gambling at the time of assessment (Table 16). 23% had debts under £5,000 and 31% had debts of £5,000 or more. A further 2% were bankrupt or in an Individual Voluntary Arrangement (IVA) and 5% did not know the size of their debts.

Table 16 Debt due to gambling

	N	%
No debt	2094	37.3%
Under £5000	1308	23.3%
£5000-£9,999	575	10.2%
£10,000-£14,999	354	6.3%
£15,000-£19,999	247	4.4%
£20,000-£29,999	206	3.7%
£30,000 - £49,999	152	2.7%
£50,000 - £99,999	123	2.2%
£20,000-£99,999 (not specified)	124	2.2%
£100,000 or more	53	0.9%
Bankruptcy	22	0.4%
In an IVA	78	1.4%
Don't know (some)	276	4.9%
Total	5612	
Missing/not stated	384	
Total people who gamble	5996	

A greater proportion of those reporting job loss relationship through gambling (Table 17) reported using bookmakers (46% compared to 27% with no job loss) and casinos (12% compared to 8%), whereas a greater proportion of those reporting no job loss through gambling reported using online services (77% compared to 65% of those not job loss). Similarly (Table 18), a greater proportion of those reporting a loss of relationship through gambling (40% compared to 26% of those not reporting loss) reported using bookmakers, whereas a greater proportion of those reporting no loss of relationship through gambling reported using online services (78% compared to 70% of those who did report a loss).

Table 17 Gambling location by job loss

	Job loss			No job loss
	N	%	N	%
Bookmakers	256	45.6%	1309	27.3%
Bingo premises	8	1.4%	69	1.4%
Casino	69	12.3%	361	7.5%
Live Events	11	2.0%	44	0.9%
Adult Entertainment Centre (18+ arcade)	28	5.0%	150	3.1%
Family Entertainment Centre (arcade)	11	2.0%	45	0.9%
Pub	11	2.0%	113	2.4%
Online	367	65.3%	3702	77.1%
Miscellaneous	32	5.7%	346	7.2%
Private Members Club	2	0.4%	12	0.3%
Other	4	0.7%	18	0.4%
Total	562	100.0%	4800	100.0%

Table 18 Gambling location by relationship loss

	Re	Relationship loss		lationship loss
	N	%	N	%
Bookmakers	543	39.8%	1043	26.0%
Bingo premises	23	1.7%	59	1.5%
Casino	140	10.3%	300	7.5%
Live Events	35	2.6%	35	0.9%
Adult Entertainment Centre (18+ arcade)	64	4.7%	129	3.2%
Family Entertainment Centre (arcade)	19	1.4%	40	1.0%
Pub	35	2.6%	90	2.2%
Online	954	70.0%	3113	77.7%
Miscellaneous	83	6.1%	299	7.5%
Private Members Club	6	0.4%	8	0.2%
Other	0	0.0%	18	0.4%
Total	1363	100.0%	4009	100.0%

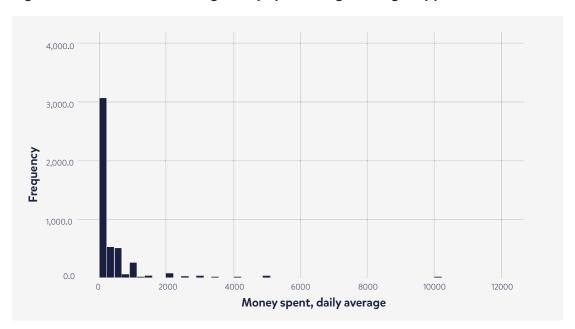
9.8.4 Money spent on gambling

People who gamble reported gambling on a median of 15 days in the last 30 and spending a median of £120 per day that they gambled in the previous 30 days before assessment. The mean value of £511 per day demonstrates that some people who gamble spent at considerably higher levels. Almost half spent up to £100 per gambling day in the previous 30 days before assessment (Table 19), 15% spent between £100 and £200, 21% spent between £200 and £500 and 14% spent over £500.

Table 19 Average spend on gambling days

	N	%
Up to £100	2349	49.8%
Up to £200	725	15.4%
Up to £300	377	8.0%
Up to £400	149	3.2%
Up to £500	453	9.6%
Up to £1000	396	8.4%
Up to £2000	143	3.0%
Over £2000	126	2.7%
Total	4718	
Missing	1278	
Total people who gamble	5996	

Figure 4 Distribution of average daily spend on gambling (capped at £10k)



In the preceding month, people who gamble reported spending a median of £1000 and a mean of £2,288 on gambling. 63% of people who gamble spent up to £1,000 in the preceding month (Table 20). 17% reported spending over £2000 in the preceding month.

Table 20 Reported spend on gambling in month preceding treatment

	N	%
Up to £100	388	7.3%
Up to £200	254	4.8%
Up to £300	300	5.7%
Up to £400	281	5.3%
Up to £500	564	10.7%
Up to £1000	1567	29.7%
Up to £2000	1060	20.1%
Over £2000	870	16.5%
Total	5284	
Missing	102	
Total people who gamble	5996	

Mean values and the range of spend differed considerably between those reporting different gambling locations (Table 21), although that spend cannot be attributed specifically to gambling in those locations. Mean value of spend on gambling days was highest among those using live events and then casinos. These means can be affected by outliers (extreme individual values) but the median values were also relatively high for casinos (£200). The median value was highest among users of casinos and adult entertainment centres (18+ arcades) (£200) and then bookmakers and private members clubs (£150). Average monthly spend was particularly elevated among those using casinos and live events, but also among those using online services and bookmakers, more so than seen for average daily spend, suggesting that frequent use of these services may contribute to a high monthly spend.

Table 21 Money spent on average gambling days and in the past month, by people who gamble reporting each gambling location.

	Average spend p	er gambling day (£)	Spend in p	oast month (£)
	Mean	Median	Mean	Median
Bookmakers	489	150	1839	1000
Bingo premises	220	100	1004	600
Casino	1092	200	3406	1000
Live Events	1853	130	1991	1000
Adult Entertainment Centre (18+ arcade)	321	200	1010	700
Family Entertainment Centre (arcade)	245	100	1428	550
Pub	208	100	811	600
Online	526	125	2431	1000
Miscellaneous	195	50	1060	500
Private Members Club	686	150	1977	700
Other	353	80	1000	700

4,000.0

3,000.0

1,000.0

0 10000 20000 30000 40000 50000 60000

Money spent, monthly average

Figure 5 Distribution of spend on gambling in last month (capped at £50k)

9.8.5 Gambling type by age

Table 22 shows that use of bookmakers, bingo premises, adult entertainment centres (18+ arcades) and pubs was more commonly reported by those in older age categories, whereas use of online services is clearly related to age, being more popular among younger age bands.

Table 22 Gambling locations by age group

								Age	bands*
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
Bookmakers	22.5%	28.6%	29.3%	30.4%	32.6%	34.0%	35.0%	34.4%	39.2%
Bingo premises	0.9%	1.1%	1.2%	1.6%	1.4%	3.3%	3.7%	4.6%	3.1%
Casino	10.6%	8.0%	9.4%	8.8%	6.5%	7.8%	10.0%	8.7%	6.2%
Live Events	2.1%	1.4%	1.8%	0.9%	1.4%	1.2%	1.4%	1.2%	1.0%
Adult Entertainment Centre (18+ arcade)	1.6%	2.5%	2.9%	3.3%	5.0%	5.2%	6.8%	8.3%	8.2%
Family Entertainment Centre (arcade)	0.5%	0.6%	1.2%	1.2%	1.6%	1.7%	1.4%	2.9%	2.1%
Pub	2.5%	1.9%	1.8%	2.5%	3.2%	4.8%	1.7%	4.1%	4.1%
Online	83.1%	80.6%	79.2%	74.4%	72.9%	65.6%	64.4%	60.2%	51.5%
Miscellaneous	6.9%	6.0%	5.9%	6.9%	7.9%	12.4%	9.1%	8.3%	10.8%
Private Members Club	0.2%	0.3%	0.2%	0.3%	0.2%	0.5%	0.9%	1.2%	0.0%
Other	0.5%	0.5%	0.2%	0.5%	0.5%	0.5%	0.0%	0.0%	1.0%
Total people who gamble*	502	1072	1296	967	634	421	351	241	194

Note: %s may total > 100% as more than one location can be reported.

9.8.6 Gambling location by gender

A lower proportion of women who gamble reported using bookmakers (10% compared to 36% males who gamble), casinos (6% compared to 9%) or live events (0.3% compared to 2%), whereas a higher proportion reported using bingo premises (6% compared to 1%), adult entertainment centres (18+ arcades) (6% compared to 3%), family entertainment centres (2% compared to 1%), online services (82% compared to 73%) or miscellaneous activities (12% compared to 6%).

Table 23 Gambling location by gender

		Male		Female
	N	%	N	%
Bookmakers	1614	35.9%	115	9.6%
Bingo premises	24	0.5%	75	6.3%
Casino	417	9.3%	72	6.0%
Live Events	79	1.8%	4	0.3%
Adult Entertainment Centre (18+ arcade)	147	3.3%	71	5.9%
Family Entertainment Centre (arcade)	47	1.0%	21	1.8%
Pub	123	2.7%	21	1.8%
Online	3262	72.6%	981	82.1%
Miscellaneous	278	6.2%	140	11.7%
Private Members Club	18	0.4%	1	0.1%
Other	17	0.4%	6	0.5%
Total people who gamble*	4492		1195	

^{*}Categories of gender with less than 100 people who gamble were excluded from this table. See section 13.1.1.1 for available categories. Note: %s may total > 100% as more than one location can be reported.

9.8.7 Gambling location by ethnic group

Some considerable differences were evident between the gambling locations reported by different ethnic groups (Table 24). Compared to White or White British people who gamble: a higher proportion of people who gamble who identified as Black or Black British reported using bookmakers (44% compared to 30%) or casinos (17% compared to 7%); a higher proportion of those who identified as Asian or Asian British also reported using bookmakers (34%) or casinos (20%). Use of bookmakers was highest among those who identified as Black or Black British (44%), whereas use of bingo premises (1%), live events (1%), family entertainment centres (0%) or pubs (0%) was lowest. Use of casinos was highest among those identifying as Asian or Asian British (20%), whereas use of online services was lowest (61%) compared to other ethnic groups.

Table 24 Gambling location by ethnic group

	White	White or White British		or Black British	Asian	or Asian British	Mixed	
	N	%	N	%	N	%	N	%
Bookmakers	1405	29.7%	70	44.3%	104	34.3%	48	30.4%
Bingo premises	87	1.8%	1	0.6%	4	1.3%	2	1.3%
Casino	343	7.3%	27	17.1%	60	19.8%	26	16.5%
Live Events	68	1.4%	1	0.6%	7	2.3%	2	1.3%
Adult Entertainment Centre (18+ arcade)	191	4.0%	5	3.2%	10	3.3%	3	1.9%
Family Entertainment Centre (arcade)	60	1.3%	0	0.0%	5	1.7%	2	1.3%
Pub	133	2.8%	0	0.0%	3	1.0%	2	1.3%
Online	3587	75.9%	108	68.4%	185	61.1%	109	69.0%
Miscellaneous	357	7.6%	7	4.4%	16	5.3%	15	9.5%
Private Members Club	17	0.4%	0	0.0%	2	0.7%	0	0.0%
Other	16	0.3%	1	0.6%	1	0.3%	4	2.5%
Total people who gamble*	4725		158		303		158	

^{*}Categories of ethnic group with less than 100 people who gamble were excluded from this table. See section 13.1.1.1 for available categories. Note: %s may total > 100% as more than one location can be reported.

9.8.8 Gambling type by relationship status

Compared to those in a relationship, a greater proportion of people who gamble defined as not in a relationship (divorced, separated or single) reported using bookmakers (35% compared to 28%), bingo premises (3% compared to 1%), casinos (10% compared to 7%), and adult entertainment centres (18+ arcades) (5% compared to 3%), family entertainment centres (2% compared to 1%), pubs (3% compared to 2%) and miscellaneous (9% compared to 6%) (Table 25). A greater proportion of those in a relationship or married/ in a civil partnership reported using online services (79% compared to 69%).

Table 25 Gambling type by relationship status

	Di	vorced	Sep	arated	sed Single		le In relationship		Married/ Civil Partnership	
	N	%	N	%	N	%	N	%	N	%
Bookmakers	42	40.4%	59	31.1%	570	34.9%	553	28.8%	295	25.7%
Bingo premises	5	4.8%	8	4.2%	38	2.3%	19	1.0%	17	1.5%
Casino	14	13.5%	10	5.3%	174	10.7%	134	7.0%	85	7.4%
Live Events	0	0.0%	4	2.1%	29	1.8%	21	1.1%	13	1.1%
Adult Entertainment Centre (18+ arcade)	10	9.6%	7	3.7%	78	4.8%	55	2.9%	43	3.7%
Family Entertainment Centre (arcade)	3	2.9%	7	3.7%	22	1.3%	16	0.8%	13	1.1%
Pub	5	4.8%	8	4.2%	52	3.2%	33	1.7%	22	1.9%
Online	60	57.7%	141	74.2%	1120	68.6%	1552	80.7%	886	77.1%
Miscellaneous	8	7.7%	15	7.9%	151	9.2%	99	5.2%	92	8.0%
Private Members Club	2	1.9%	3	1.6%	6	0.4%	2	0.1%	3	0.3%
Other	0	0.0%	1	0.5%	6	0.4%	5	0.3%	6	0.5%
Total people who gamble*	104	100.0%	190	100.0%	1633	100.0%	1922	100.0%	1149	100.0%

^{*}Categories of relationship status with less than 100 people who gamble were excluded from this table. See section 13.1.1.1 for available categories. Note: %s may total > 100% as more than one location can be reported.

9.8.9 Gambling type by employment status

Use of bingo premises (5%), casinos (12%), adult entertainment centres (18+ arcades) (9%) and miscellaneous activities (14%) was higher among those defined as long-term living with a disability or sickness & not in work than among those who were employed (Table 26), with use of online services the lowest (66%). Use of online services (77%) was higher among those employed than the unemployed.

Table 26 Gambling type by employment status

	Employed		Unemployed		Long-term sick/ disabled & not in work	
	N	%	N	%	N	%
Bookmakers	1136	29.1%	189	38.2%	191	31.5%
Bingo premises	41	1.1%	7	1.4%	31	5.1%
Casino	316	8.1%	37	7.5%	71	11.7%
Live Events	53	1.4%	8	1.6%	4	0.7%
Adult Entertainment Centre (18+ arcade)	115	2.9%	18	3.6%	53	8.7%
Family Entertainment Centre (arcade)	29	0.7%	9	1.8%	13	2.1%
Pub	91	2.3%	10	2.0%	21	3.5%
Online	3033	77.7%	344	69.5%	381	62.9%
Miscellaneous	233	6.0%	40	8.1%	84	13.9%
Private Members Club	10	0.3%	1	0.2%	5	0.8%
Other	15	0.4%	1	0.2%	4	0.7%
Total people who gamble*	3902	100.0%	495	100.0%	606	100.0%

^{*}Categories of employment status with less than 100 people who gamble were excluded from this table. See section 13.1.1.1 for available categories. Note: %s may total > 100% as more than one location can be reported.

9.9 Use of self-exclusion tools

Introduced to data collection in April 2021, use of self-exclusion tools was specified for 73% of people who gamble treated in 2021/22. Self-exclusion tools can be used by individuals to place limits on their gambling activity. Self-exclusion involves an individual requesting that a gambling operator excludes them from gambling with them for a set amount of time by for example blocking their online account or denying service at a bookmaker. Where specified, 74% used a tool, with 12% stating that they had the ability to circumvent these.

Table 27 Use of self-exclusion tools

	N	%
Yes	2673	61.3%
Yes, but have ability to circumvent	534	12.2%
No	1156	26.5%
Total	4363	100.0%
Missing/not stated	1633	
Total people who gamble	5996	

10 Access to services

10.1 Source of referral into treatment

Most referrals were from the national gambling helpline (57%) or self-made (26%). The national gambling helpline was only introduced as a recorded source of referral in April 2021 and is likely to have been subsumed within 'self-referral' before this as self-referral accounted for 93% of clients in 2020/21. The GamCare/partner network accounted for a further 8% of referrals. Independent health sector mental health services, other primary health care and other services or agencies accounted for 6% of referrals between them (Table 28). Other sources accounted for less than 1% of referrals each. Source of referral was broadly comparable between people who gamble and other clients, a greater proportion of other clients attended via the gambling helpline or self-referral.

Table 28 Referral source for clients treated in 2021/22, by type of client

	Gambli	ng clients	Oth	ner clients		Total
	N	%	N	%	N	%
National Gambling Helpline	3452	57.6%	554	51.5%	4006	56.7%
Self-Referral	1465	24.4%	338	31.4%	1803	25.5%
GamCare/partner network	474	7.9%	92	8.6%	566	8.0%
Other service or agency	165	2.8%	18	1.7%	183	2.6%
Independent Sector Mental Health Services	130	2.2%	4	0.4%	134	1.9%
Other Primary Health Care	99	1.7%	3	0.3%	102	1.4%
GP	26	0.4%	24	2.2%	50	0.7%
Prison	15	0.3%	31	2.9%	46	0.7%
Not stated	36	0.6%	8	0.7%	44	0.6%
Mental Health NHS Trust	32	0.5%	2	0.2%	34	0.5%
Probation Service	22	0.4%	0	0.0%	22	0.3%
Social Services	14	0.2%	0	0.0%	14	0.2%
Police	13	0.2%	0	0.0%	13	0.2%
Voluntary Sector	10	0.2%	2	0.2%	12	0.2%
Drug Action Team / Drug Misuse Agency	9	0.2%	0	0.0%	9	0.1%
Citizen's Advice	6	0.1%	0	0.0%	6	0.1%
Carer	6	0.1%	0	0.0%	6	0.1%
Health Visitor	6	0.1%	0	0.0%	6	0.1%
Northern Gambling Service / LYPFT	4	0.1%	0	0.0%	4	0.1%
London Problem Gambling Clinic / CNWL	3	0.1%	0	0.0%	3	0.0%
Gordon Moody Association (GMA)	2	0.0%	0	0.0%	2	0.0%
Jobcentre plus	1	0.0%	0	0.0%	1	0.0%
Court Liaison and Diversion Service	1	0.0%	0	0.0%	1	0.0%
Education Service	1	0.0%	0	0.0%	1	0.0%
Total	5992	100.0%	1076	100.0%	7068	100.0%
Missing	4		0		4	
Total clients	5996		1076		7072	

10.2 Where heard of service

Introduced to data collection in April 2021, where clients heard of the service is recorded for self-referred clients only. Sources other than those specified accounted for 36% of cases, internet searches for 30%, GamCare website for 14% and family or friend for 10%. No clients reported hearing of the service via newspaper or radio and very few from TV, social media or the GambleAware website.

Table 29 Where heard of service

	Gambli	ng clients	Otl	ner clients		Total
	N	%	N	%	N	%
Other source	461	37.0%	95	31.5%	556	35.9%
Internet search	393	31.6%	63	20.9%	456	29.5%
GamCare website	182	14.6%	35	11.6%	217	14.0%
Family or friend	89	7.1%	70	23.2%	159	10.3%
Other professional	81	6.5%	26	8.6%	107	6.9%
Other website	28	2.2%	11	3.6%	39	2.5%
BeGambleAware website	6	0.5%	0	0.0%	6	0.4%
Social Media	4	0.3%	1	0.3%	5	0.3%
TV	1	0.1%	1	0.3%	2	0.1%
Newspaper	0	0.0%	0	0.0%	0	0.0%
Radio	0	0.0%	0	0.0%	0	0.0%
Total	1245	100.0%	302	100.0%	1547	100.0%
Missing	220		36		256	
Total clients self-referred	1465		338		1803	

10.3 Waiting times for first appointment

Waiting time was calculated as the time between referral date and date of first recorded appointment. For clients treated during 2021/22, 50% had an appointment within five days and 75% within twelve days. Waiting times for residential services were higher, with 50% of clients seen within six weeks.

11 Engagement

A total of 55,853 appointments were recorded for clients treated in 2021/22 (Table 30). This represents a median of seven appointments per client, identical for both people who gamble and other clients.

Mean = 8.08 Std. Dev. = 6.077 N = 5,177

Figure 6 Distribution of number of appointments recorded

Most of these appointments (79%) were for the purpose of treatment, with 18% being for assessment.

Table 30 Appointment purpose for clients treated in 2021/22

	Gamb	ling clients	0	ther clients		Total
	N	%	N	%	N	%
Treatment	29100	77.5%	5195	83.0%	34295	78.3%
Assessment	6831	18.2%	1008	16.1%	7839	17.9%
Review only	767	2.0%	18	0.3%	785	1.8%
Review and treatment	432	1.1%	15	0.2%	447	1.0%
Assessment and treatment	282	0.8%	12	0.2%	294	0.7%
Aftercare	99	0.3%	1	0.0%	100	0.2%
Formal structured follow-up	29	0.1%	7	0.1%	36	0.1%
Other	26	0.1%	0	0.0%	26	0.1%
Extended Brief Intervention (EBI)	0	0.0%	0	0.0%	0	0.0%
Total	37566	100.0%	6256	100.0%	43822	100.0%
Missing	10789		1242		12031	
Total appointments	48355		7498		55853	

In a clear reflection of pandemic conditions, most (90%) appointments were conducted remotely by telephone (77%) web camera (13%) or other remote platform (1%) with only 8% conducted on a face-to-face basis (and 1% 'other'). This marks an increase in remote appointment even in comparison to 2020/21.

New 'appointment type' categories were introduced in April 2021 (CBT (Cognitive Behavioural Therapy), Structured psycho-social, 5 Step, Psychodynamic therapy, Pharmacological, Motivational Interviewing, DBT (Dialectical behaviour therapy), ACT (Acceptance and commitment therapy), EMDR (Eye movement desensitisation and reprocessing)). Most appointments (58%) are now described as 'structured psycho-social'. A further 19% were for CBT (Cognitive Behavioural Therapy) and 12% for motivational interviewing (Table 31). Previously, most appointments (97% in 2020/21) were defined as counselling activity.

Table 31 Interventions received at appointments in 2021/22

	Gamb	oling clients	0	ther clients		Total
	N	%	N	%	N	%
Structured psycho-social	26133	58.6%	4146	56.4%	30279	58.3%
CBT (Cognitive Behavioural Therapy)	8801	19.7%	1261	17.2%	10062	19.4%
Motivational Interviewing	5292	11.9%	784	10.7%	6076	11.7%
Brief advice	1730	3.9%	328	4.5%	2058	4.0%
Other	1024	2.3%	60	0.8%	1084	2.1%
Counselling	844	1.9%	0	0.0%	844	1.6%
5 Step	113	0.3%	565	7.7%	678	1.3%
Psychotherapy	268	0.6%	197	2.7%	465	0.9%
Psychodynamic therapy	330	0.7%	10	0.1%	340	0.7%
EMDR (Eye movement desensitisation and reprocessing)	35	0.1%	0	0.0%	35	0.1%
DBT (Dialectical behaviour therapy)	9	0.0%	0	0.0%	9	0.0%
Pharmacological	6	0.0%	0	0.0%	6	0.0%
Total	44585	100.0%	7351	100.0%	51936	100.0%
Missing	3770		147		3917	
Total appointments	57800		9349		67149	

11.1 Length of time in treatment

Among those receiving and ending treatment within 2021/22, treatment lasted for a median of ten weeks. One quarter of clients received treatment for five weeks or less, half received treatment for between six and 16 weeks and one quarter received treatment for over 16 weeks. Treatment for clients other than people who gamble was shorter, with a median of 9 weeks compared to 10 weeks for people who gamble. Treatment in residential centres was generally longer, lasting a median of 20 weeks.

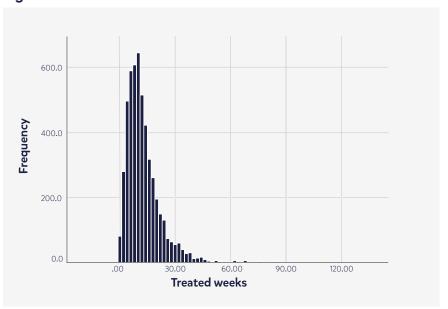


Figure 7 Distribution of number of weeks in treatment

12 Treatment Outcomes

Among clients treated within 2021/22, 1,895 (27%) were still in treatment at the end of March 2022 whereas 5,177 (73%) exited treatment before the end of March 2022. Treatment outcomes are presented for those clients who were discharged between April 2021 and March 2022 to represent their status at the end of treatment.

12.1 Treatment exit reasons

Most clients (63%) who exited treatment within 2021/22 completed their scheduled treatment. However, 30% dropped out of treatment before a scheduled endpoint. Much smaller proportions were referred on to another service following treatment (6%) or discharged or referred on following assessment, without receiving treatment (1%). Clients other than people who gamble were more likely to complete treatment (76% compared to 60%) and less likely to drop out (21% compared to 31%).

Table 32 Reasons for treatment exit for clients treated within 2021/22

	Gamb	ling clients	01	ther clients		Total
	N	%	N	%	N	%
Treated - Completed scheduled treatment	2640	60.4%	607	75.8%	3247	62.8%
Treated - Dropped out of treatment (unscheduled discontinuation)	1356	31.0%	169	21.1%	1525	29.5%
Treated - Referred to other service	276	6.3%	11	1.4%	287	5.5%
Treated - Not Known	51	1.2%	4	0.5%	55	1.1%
Assessed - Discharged by mutual agreement following advice and support	37	0.8%	10	1.2%	47	0.9%
Assessed - Not Known	8	0.2%	0	0.0%	8	0.2%
Assessed - Referred to another therapy service by mutual agreement	4	0.1%	0	0.0%	4	0.1%
Total	4372		801		5173	
Missing	4		0		4	
Total clients	4376		801		5177	

Some minor differences in exit reason were noted between male and female clients, with a greater proportion of female clients dropping out of treatment (26% compared to 31% males). However, when restricting to gambling clients, an equal proportion of male and female clients dropped out of treatment.

A greater proportion of those who were unemployed (36%) dropped out of treatment (Table 33), whereas those who were employed were the most likely to complete treatment (64%). Levels of drop out decreased with age, falling from 36% among those under 30 years old to 21% among those over 50 years old. Rates of completion were higher among those in a relationship (64% compared to 58% not in a relationship) and among females (66% compared to 61% in males).

Table 33 Treatment exit reason by employment status (among gambling clients)

		Employed	Und	employed	Long-term sick/ disabled & not in work	
	N	%	N	%	N	%
Treated - Completed scheduled treatment	1880	63.5%	198	51.7%	244	55.2%
Treated - Dropped out of treatment (unscheduled discontinuation)	943	31.9%	139	36.3%	107	24.2%
Treated - Referred to other service	123	4.2%	42	11.0%	80	18.1%
Assessed - Discharged by mutual agreement following advice and support	12	0.4%	4	1.0%	9	2.0%
Assessed - Referred to another therapy service by mutual agreement	2	0.1%	0	0.0%	2	0.5%
Total	2960	100.0%	383	100.0%	442	100.0%

^{*}Categories of employment status with less than 100 clients were excluded from this table. See section 13.1.1.1 for available categories

Table 34 Treatment exit reason by	v age	(among	gambling c	lients)

	L	Inder 30		30-39		40-49	50 a	nd over
	N	%	N	%	N	%	N	%
Treated - Completed scheduled treatment	740	57.1%	1012	58.5%	501	63.7%	386	69.4%
Treated - Dropped out of treatment (unscheduled discontinuation)	464	35.8%	573	33.1%	204	26.0%	114	20.5%
Treated - Referred to other service	63	4.9%	108	6.2%	62	7.9%	43	7.7%
Assessed – Discharged by mutual agreement following advice and support	10	0.8%	18	1.0%	7	0.9%	2	0.4%
Assessed - Referred to another therapy service by mutual agreement	1	0.1%	0	0.0%	1	0.1%	2	0.4%
Total	1297	100.0%	1731	100.0%	786	100.0%	556	100.0%

Among gambling clients, exit reasons differed according to primary gambling activity. Treatment completion was achieved by 62% of those citing online services compared to 53% of those citing bookmakers.

12.2 Severity scores

Two measures of severity are routinely recorded within appointments; the Problem Gambling Severity Index (PGSI), which is recorded for people who gamble only, and the CORE-10 score, which is recorded for all clients. Clients are asked directly for their responses.

PGSI

The PGSI is a validated and widely used tool⁹ designed to assess an individual's level of gambling related risk behaviour. The PGSI consists of nine items, each of which are scored on a four-point scale (0, 1, 2, or 3) and summed to give a total score of between zero and 27 points (see appendix, 13.2 for further details).

A PGSI score of eight or more is used to classify an individual as having problematic gambling behaviour, defined by the scale as a 'problem gambler'. Scores between three and seven represent individuals classified as being a 'moderate risk gambler' by the scale (those who experience a moderate level of problems leading to some negative consequences). A score of one or two represents individuals classified by the scale as undertaking low risk gambling (those who experience a low level of problems with few or no identified negative consequences). Therefore, anyone scoring one or more on the scale is experiencing some level of difficulty or problem. A score of zero represents a person with no identified gambling problems, harms, or consequences.

CORE-10

The Core-10 is a 10-item questionnaire designed to measure distress, including commonly experienced symptoms of anxiety and depression and associated aspects of life and social

⁹ PGSI is a validated population level screening tool. It should be noted that the PGSI was not designed as a clinical tool, nor as an outcome measure for treatment. PGSI cannot be directly interpreted as a benchmark of treatment effectiveness, as longer-term outcomes are not captured. It additionally does not weight harms; it is a proxy measure of harm. Moreover, it is argued to use stigmatising language and terminology in its categorisation of various levels of experienced gambling harm. However, in the absence of a widely agreed clinical measure, the PGSI provides an internationally recognised indicator of gambling harm.

functioning^{10 11}. The Core-10 has 10 items, which include Anxiety (2 items), depression (2 items), trauma (1 item), physical problems (1 item), functioning (3 items - day to day, close relationships, social relationships) and risk to self (1 item). The Core-10 items are individually scored on a five-point scale (0, 1, 2, 3 or 4) and summed to give a total score of 40 (see appendix, 13.3 for further details).

A Core-10 score of 25 and above is used to classify an individual as having severe psychological distress, a score of 21 to 25 as moderate to severe distress, a score of 16 to 20 as moderate distress, a score of 11 to 15 as mild distress, and a score of 0 to 10 classifies an individual as being below the clinical cut off for psychological distress.

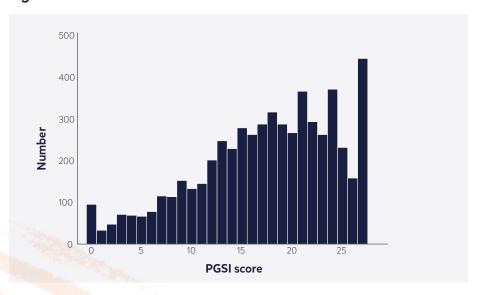
12.2.1 Baseline and latest severity scores

At the earliest PGSI assessment for people who gamble treated during 2021/22, PGSI scores were recorded for 94% distribution of scores shown in Figure 8). Among these (Table 35), the majority (90%) recorded a PGSI score of 8 or more. Much smaller proportions were defined as moderate risk (7%), low risk (1%) or no problem (2%). Among those in the highest PGSI category (8+), mean PGSI score was 19, considerably higher than the minimum of eight for this category.

Table 35 PGSI category of severity at earliest PGSI assessment, all people who gamble

		Ec	ırliest PGSI assessment
	N	%	Mean score
No problem (0)	95	1.7%	0
At low risk (1-2)	80	1.4%	2
At moderate risk (3-7)	400	7.1%	5
Score of 8+	5039	89.8%	19
Total	5614	100.0%	
Missing	382		
Total people who gamble	5996		

Figure 8 Distribution of PGSI score at earliest PGSI assessment



¹⁰ CORE-10 USER MANUAL Version 1.0 Released 1st June 2007.

¹¹ The CORE-10: A short measure of psychological distress for routine use in the psychological therapies https://onlinelibrary.wiley.com/doi/abs/10.1080/14733145.2012.729069

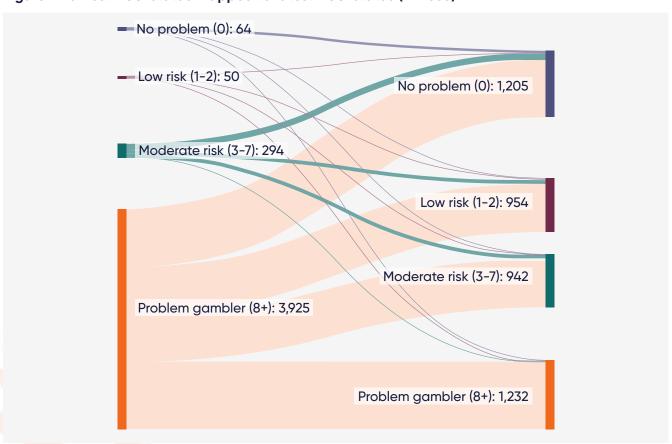
At the latest score taken (Table 36), a smaller proportion of clients (28%) still had a PGSI score of 8+. Around three in ten people who gamble (28%) were now defined as having no gambling related risk behaviour, with the remainder defined as at either low (22%) or moderate (22%) risk of gambling related risk behaviour.

Table 36 PGSI category of severity at earliest and latest PGSI assessment, people who gamble exiting treatment

		Earliest PGS	lassessment		Latest PGS	l assessment
	N	%	Mean score	N	%	Mean score
No problem (0)	64	1.5%	0	1205	27.8%	0
At low risk (1-2)	50	1.1%	2	954	22.0%	1
At moderate risk (3-7)	294	6.7%	5	942	21.7%	5
Score of 8+	3925	89.7%	19	1232	28.4%	16
Total	4333	100.0%		4333	100.0%	
Missing	43			43		
Total people who gamble	4376			4376		

Approximately 70% of those with a PGSI score of 8+ at earliest measure no longer recorded a score of 8+ at the latest, with 26% now being defined as 'no problem'. For those completing treatment, 87% no longer recorded a score of 8+ at this stage, with 37% being defined as 'no problem'. Figure 9 shows how clients PGSI category changed from earliest to latest recorded PGSI assessment.

Figure 9 Earliest PGSI status mapped to latest PGSI status (n=4333)



CORE-10

At the earliest known appointment for clients treated during 2021/22, CORE-10 scores were recorded for 86% of clients (distribution of score shown in Figure 10). Among these clients, scores were evenly distributed across the categories of severity (Table 36) with around one fifth of clients scoring as severe (17%), moderate-to-severe (18%), moderate (22%) or mild (19%) and 24% scoring below clinical cut-off. A greater proportion of people who gamble recorded a score of severe than other clients (19% compared to 9%). Within the category of severe, mean scores were 30 for people who gamble and 29 for other clients.

Table 37 CORE-10 category of severity at earliest appointment

	Gamk	oling clients	0	ther clients		Total
	N	%	N	%	N	%
Below clinical cut-off	1194	23.5%	252	26.2%	1446	23.9%
Mild	925	18.2%	208	21.6%	1133	18.7%
Moderate	1063	20.9%	264	27.5%	1327	21.9%
Moderate severe	958	18.8%	150	15.6%	1108	18.3%
Severe	945	18.6%	87	9.1%	1032	17.1%
Total	5085	100.0%	961	100.0%	6046	100.0%
Missing	911		115		1026	
Total clients	5996		1076		7072	

Figure 10 Distribution of CORE-10 score at earliest CORE-10 assessment

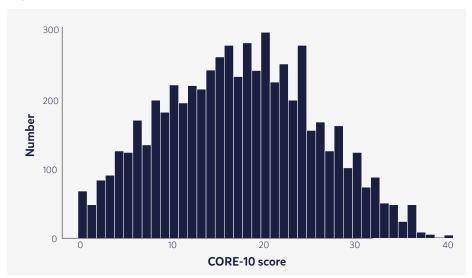


Figure 11 Earliest CORE-10 status mapped to latest CORE-10 status - people who gamble (n=4339)

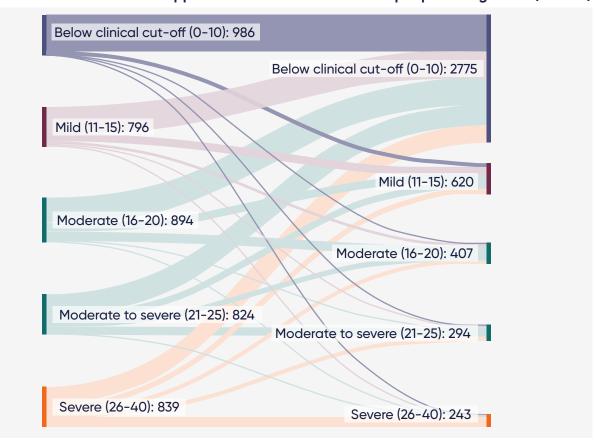
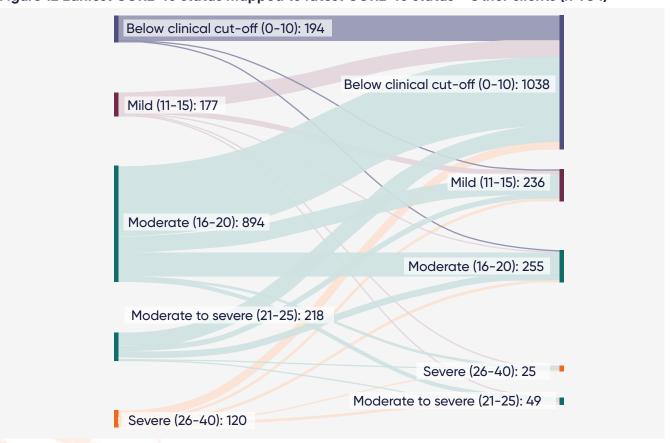


Figure 12 Earliest CORE-10 status mapped to latest CORE-10 status - Other clients (n=784)



12.2.2 Change in severity scores

As scores for PGSI and CORE-10 are recorded periodically, it is possible to report on changes to these scores during treatment. Change scores are reported here in three ways: level of change in scores, direction of change in scores, and changes between categories of severity. Changes are reported only between the earliest and latest scores recorded within a client's latest episode of treatment. Therefore, if a client has received multiple episodes of treatment (from one or more providers), scores may not be reflective of the cumulative change over their entire treatment history.

12.2.2.1 PGSI

Between earliest and latest PGSI scores, clients saw a median reduction (improvement) of 12 points on the PGSI scale.

Table 38 summarises the direction and extent of change in PGSI scores with the majority (80%) improving, 18% showing no change and a small minority (3%) recording a higher score at latest appointment compared to earliest scores. The greatest proportion of clients (36%) improved by 10–19 points, with a further quarter (25%) improving by 20–27 points¹².

Table 39 shows these changes in PGSI score by discharge reason. A greater proportion of those that did not complete treatment recorded no change in score (34% for dropped out compared to 6% for completed). For those who completed scheduled treatment, improved scores were recorded for most (92%). Level of change also differed by discharge reason with a median of 15 points for those completing treatment, compared to seven for those dropping out before completion.

Table 39 Changes in PGSI score between earliest and latest appointments

	N	%
Improved by 20- 27 points	1071	24.7%
Improved by 10-19 points	1548	35.7%
Improved by 1- 9 points	833	19.2%
No Change	760	17.5%
Increased: 1 to 9 points	109	2.5%
Increased: 10 to 18 points	11	0.3%
Increased: 19 to 27 points	1	0.0%
Total	4333	100.0%
Missing	43	
Total	4376	

¹² Categories designed to group level of change evenly within the range of values and do not represent formal categories of severity

Table 40 Direction of change in PGSI score between earliest and latest appointments by discharge reason

		Worse		No change		Better
	N	%	N	%	N	%
Assessed - Discharged by mutual agreement following advice and support	2	5.4%	12	32.4%	23	62.2%
Assessed - Referred to another therapy service by mutual agreement	0	0.0%	2	66.7%	1	33.3%
Treated - Completed scheduled treatment	51	1.9%	156	5.9%	2419	92.1%
Treated - Dropped out of treatment (unscheduled discontinuation)	54	4.1%	455	34.1%	824	61.8%
Treated - Referred to other service	13	4.7%	114	41.5%	148	53.8%
Assessed - Not Known	0	0.0%	6	75.0%	2	25.0%
Treated - Not Known	1	2.1%	13	27.1%	34	70.8%

CORE-10

Between earliest and latest CORE-10 assessment within treatment where CORE-10 scores were recorded, client's scores decreased (improved) by a median of 7 points on the CORE-10 scale (8 points for people who gamble and 6 points for clients other than people who gamble).

Table 40 summarises the direction and extent of change in CORE-10 scores. Most clients (74%) saw a reduction during treatment, 17% showed no change and a minority (9%) saw an increase in Core-10 score. Most clients (64%) recorded an improvement of between 1 and 20 points. The most common improvement (1-10 points) was achieved by 37%. A greater proportion of people who gamble improved by more than 20 points (11% compared to 5% other clients)¹³.

Table 41 shows these changes in CORE-10 score by discharge reason. Lack of change in score was much more likely in those that did not complete treatment (36% for dropped out compared to 7% for completed). For those who completed scheduled treatment, improved scores were recorded for most (86%).

¹³ These categories group level of change evenly across possible values and do not represent formal severity categories.

Table 41 Direction of change in CORE-10 score between earliest and latest appointments

	Gamb	oling clients	O	ther clients		Total
	N	%	N	%	N	%
Improved by 31-40 points	39	0.9%	1	0.1%	40	0.8%
Improved by 21-30 points	439	10.1%	39	5.0%	478	9.3%
Improved by 11-20 points	1184	27.3%	200	25.5%	1384	27.0%
Improved by 1-10 points	1523	35.1%	366	46.7%	1889	36.9%
No Change	774	17.8%	117	14.9%	891	17.4%
Increased by 1-10 points	352	8.1%	56	7.1%	408	8.0%
Increased by 11-20 points	25	0.6%	5	0.6%	30	0.6%
Increased by 21-30 points	3	0.1%	0	0.0%	3	0.1%
Increased by 31-40 points	0	0.0%	0	0.0%	0	0.0%
Total	4339	100.0%	784	100.0%	5123	100.0%

Table 42 Direction of change in CORE-10 score between earliest and latest record by discharge reason

		Worse		No change		Better
	N	%	N	%	N	%
Assessed - Discharged by mutual agreement following advice and support	5	10.6%	12	25.5%	30	63.8%
Assessed - Referred to another therapy service by mutual agreement	1	33.3%	2	66.7%	0	0.0%
Treated - Completed scheduled treatment	228	7.1%	213	6.6%	2783	86.3%
Treated - Dropped out of treatment (unscheduled discontinuation)	167	11.1%	533	35.6%	799	53.3%
Treated - Referred to other service	32	11.2%	114	39.9%	140	49.0%
Assessed - Not Known	0	0.0%	6	75.0%	2	25.0%
Treated - Not Known	8	15.1%	9	17.0%	36	67.9%

13 Trends

13.1 Trends in numbers in treatment

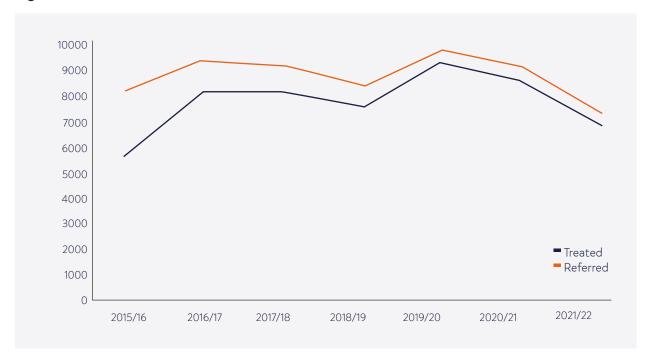
Table 43 and Figure 13 show how the number of clients treated each year has varied since 2015/16, with the greatest number of clients treated in 2019/20. Between 2020/21 and 2021/22 there was a 17% reduction in clients treated.

The number of individuals referred each year (including those that do not result in treatment) has varied since 2015/16, with the greatest number of clients referred in 2019/20. Between 2020/21 and 2021/22 there was an 18% reduction in referrals.

Table 43 Trends in number of clients referred and treated per year -2015/16 to 2021/22

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Clients treated	5909	8133	8219	7675	9008	8490	7072
Individuals referred	8194	9266	9081	8453	9726	9046	7429

Figure 13 Trends in number of referred and treated clients – 2015/16 to 2021/22



Gambling services provide a point of contact and support both for disordered gambling behaviour and for those affected by another's gambling. Table 43 shows that the proportion of clients seeking help due to another individual's gambling has increased from 10% in 2015/16 to 14% in 2021/22.

Table 44 Trends in reason for referral – 2015/16 to 2021/22

	2015/16		2015/16 2016/17		2017/18		2018/19		2019/20		2020/21	
	N	%	N	%	N	%	N	%	N	%	N	%
Clients with disordered gambling behaviour	5288	90.2%	7293	90.7%	7337	90.1%	6744	88.7%	7473	84.3%	7191	84.7%
Affected other	563	9.6%	744	9.2%	790	9.7%	834	11.0%	1192	13.4%	1245	14.7%
Person at risk of developing gambling problem	9	0.2%	7	0.1%	15	0.2%	25	0.3%	202	2.3%	53	0.6%
Missing	49		89		77		72		141		1	
Total Clients	5909		8133		8219		7675		9008		8490	

13.2 Trends in gambling type

The most notable difference in reported gambling locations (based on three main activities) between 2015/16 and 2021/22 (Table 44) has been the increase in the proportion of clients reporting using online gambling services (rising from 57% to 75%) alongside the reduction in the proportion using bookmakers (falling from 56% to 31%). Data for 2021/22 show a general increase in use of 'in person' venues compared to the low values recorded in 2020/21. Covid-19 conditions, including periodic lockdowns may have affected reports for 2020/21 and 2021/22.

Table 45 Trends in gambling locations – 2015/16 to 2021/22

	20	15/16	20	16/17	20	17/18	20	18/19	20 ⁻	19/20	2020/21		20	21/22
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Bookmakers	2858	56.1%	3564	50.7%	3219	45.5%	2817	42.8%	2740	38.0%	1902	28.8%	1741	30.3%
Bingo premises	101	2.0%	120	1.7%	114	1.6%	110	1.7%	110	1.5%	84	1.3%	101	1.8%
Casino	614	12.1%	776	11.0%	680	9.6%	589	9.0%	669	9.3%	433	6.6%	495	8.6%
Live Events	45	0.9%	44	0.6%	32	0.5%	25	0.4%	23	0.3%	30	0.5%	83	1.4%
Adult Entertainment Centre (18+ arcade)	197	3.9%	265	3.8%	245	3.5%	212	3.2%	269	3.7%	166	2.5%	220	3.8%
Family Entertainment Centre (arcade)	62	1.2%	51	0.7%	48	0.7%	38	0.6%	41	0.6%	39	0.6%	69	1.2%
Pub	213	4.2%	234	3.3%	197	2.8%	170	2.6%	212	2.9%	131	2.0%	145	2.5%
Online	2890	56.8%	4214	59.9%	4666	66.0%	4331	65.9%	4956	68.8%	5206	79.0%	4291	74.7%
Miscellaneous	604	11.9%	777	11.1%	619	8.8%	562	8.5%	526	7.3%	535	8.1%	422	7.3%
Private Members Club	12	0.2%	10	0.1%	13	0.2%	12	0.2%	10	0.1%	9	0.1%	19	0.3%
Other	104	2.0%	143	2.0%	155	2.2%	163	2.5%	136	1.9%	63	1.0%	23	0.4%
Total Clients	5288		7293		7337		6744		7473		7191		5177	

Table 45 provides trends in common activities within the three most used gambling locations (bookmakers, casinos and online only). Within online activity, casino slots have increased (by six

percentage points in 2021/22) whereas poker has gradually decreased. Casino table games decreased sharply in 2021/22. Casino slot reports represented an increase of six percentage points over the previous year.

Table 46 Trends in selected individual gambling activities – 2015/16 to 2021/22

	20)15/1 6	20	16/17	20	017/18	20	18/19	20	19/20	20	20/21	20	21/22
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Bookmakers														
Horses	701	13.8%	820	11.7%	705	10.0%	570	8.7%	656	9.1%	538	8.2%	412	7.2%
Dogs	238	4.7%	278	4.0%	263	3.7%	154	2.3%	207	2.9%	155	2.4%	147	2.6%
Sports/other event	714	14.0%	902	12.8%	803	11.4%	708	10.8%	858	11.9%	612	9.3%	539	9.4%
Gaming Machine	1848	36.3%	2266	32.2%	2056	29.1%	1735	26.4%	1459	20.3%	914	13.9%	934	16.3%
Casino														
Poker	80	1.6%	92	1.3%	70	1.0%	55	0.8%	65	0.9%	42	0.6%	50	0.9%
Other card games	116	2.3%	157	2.2%	125	1.8%	96	1.5%	99	1.4%	58	0.9%	46	0.8%
Roulette	404	7.9%	508	7.2%	419	5.9%	373	5.7%	412	5.7%	240	3.6%	201	3.5%
Gaming Machine	113	2.2%	141	2.0%	129	1.8%	124	1.9%	154	2.1%	118	1.8%	65	1.1%
Online														
Horses	452	8.9%	697	9.9%	719	10.2%	626	9.5%	671	9.3%	631	9.6%	470	8.2%
Other	173	3.4%	232	3.3%	225	3.2%	239	3.6%	251	3.5%	338	5.1%	245	4.3%
Sports events	1059	20.8%	1512	21.5%	1740	24.6%	1637	24.9%	1807	25.1%	1772	26.9%	1156	20.1%
Bingo	159	3.1%	164	2.3%	163	2.3%	126	1.9%	176	2.4%	218	3.3%	223	3.9%
Poker	184	3.6%	240	3.4%	236	3.3%	171	2.6%	154	2.1%	178	2.7%	105	1.8%
Casino (table games)	908	17.8%	1323	18.8%	1429	20.2%	1311	19.9%	1315	18.3%	1363	20.7%	670	11.7%
Casino (slots)	839	16.5%	1285	18.3%	1590	22.5%	1458	22.2%	1900	26.4%	2104	31.9%	2187	38.1%

^{*}Introduced April 2021.

Table 47 shows a stable median number of days gambled out of the last 30 days, between 2015/16 and 2021/22. Table 48 shows an increased median spend in the last 30 days, rising from £750in 2015/26 to 1000 from 2018/19 onwards.

Table 47 Trends in number of days gambled out of the last 30 - 2015/16 to 2021/22

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Mean	14.7	14.8	14.8	14.6	14.7	15.6	15.4
Median	15	15	15	15	15	15	15

Table 48 Trends in spend on gambling in past month— 2015/16 to 2021/22

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Mean	2164	1906	1935	2272	2102	2070	2288
Median	750	800	900	1000	1000	1000	1000

13.3 Trends in treatment exit reason

Table 49 shows an increase in the proportion of clients completing scheduled treatment from 59% in 2015/16 to 74% in 2020/21, before dropping to 63% in 2021/22. Alongside this, the proportion dropping out of treatment fell from 35% in 2015/16 to 20% in 2020/21, before increasing to 30% in 2021/22.

Table 49 Trends in exit reason – 2015/16 to 2021/22

	20)15/1 6	20	016/17	20	17/18	20	18/19	20	19/20	20	20/21	20	21/22
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Discharged by agreement	136	3.2%	251	3.9%	297	4.5%	232	3.8%	398	5.6%	176	2.8%	47	0.9%
Completed scheduled treatment	2513	58.5%	3943	61.7%	4165	62.7%	4215	69.4%	4859	68.7%	4671	73.5%	3247	62.8%
Dropped out	1515	35.3%	1976	30.9%	1989	29.9%	1517	25.0%	1696	24.0%	1247	19.6%	1525	29.5%
Referred on	93	2.2%	180	2.8%	132	2.0%	91	1.5%	103	1.5%	199	3.1%	291	5.6%
Total Clients Discharged	4297		6392		6645		6092		7076		6484		5177	

13.4 Trends in client characteristics

Table 50 shows a consistent increase in the proportion of clients who are female from 19% in 2015/16 to 30% in 2021/22. Table 51 shows that the proportion of female gambling clients increased from 13% in 2015/16 to 21% in 2021/22.

Table 50 Trends in gender – 2015/16 to 2021/22

	2	015/16	2	016/17	2	017/18	2	018/19	2	019/20	2	020/21	2	021/22
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Male	4770	80.8%	6594	81.1%	6518	79.4%	6033	78.7%	6769	75.2%	5780	70.4%	4881	69.0%
Female	1134	19.2%	1536	18.9%	1691	20.6%	1628	21.2%	2214	24.6%	2423	29.5%	2113	29.9%
Total Clients	5909		8133		8219		7675		9008		8490		7072	

Categories of gender with less than 100 clients were excluded from this table. See section 13.1.1.1 for available categories.

Table 51 Trends in gender by referral reason – 2015/16 to 2021/22

		20	015/16	20	016/17	2	017/18	20	018/19	20	19/20	20	20/21	20)21/22
		N	%	N	%	N	%	N	%	N	%	N	%	N	%
Gambler	Male	4613	87.3%	6386	87.6%	6329	86.4%	5821	86.5%	6296	84.5%	5668	80.3%	4682	78.9%
	Female	669	12.7%	904	12.4%	998	13.6%	910	13.5%	1155	15.5%	1382	19.6%	1251	21.1%
Other	Male	116	20.3%	133	17.7%	120	14.9%	142	16.5%	403	29.0%	171	13.5%	199	18.8%
client	Female	456	79.7%	618	82.3%	685	85.1%	716	83.4%	989	71.0%	1092	86.3%	862	81.2%

Table 52 shows that the proportion of White or White British clients has reduced slightly between 2015/16 (91%) and 2021/22 (88%). This is due to a greater increase in clients from ethnic minorities accessing the service; while the number of clients has increased for all groups except for "Other" ethnicity, this has been greater for clients from ethnic minority groups.

Table 52 Trends in ethnicity -2015/16 to 2021/22

	20	15/16	20	16/17	20	017/18	20	18/19	20	19/20	20	20/21	20	21/22
	%	N	%	N	%	N	%	N	%	N	%	N	%	N
White or white British	5272	90.6%	7264	90.2%	7361	90.4%	6800	89.7%	7890	89.0%	7200	87.6%	5774	88.0%
Black or Black British	127	2.2%	190	2.4%	146	1.8%	188	2.5%	264	3.0%	307	3.7%	184	2.8%
Asian or Asian British	260	4.5%	368	4.6%	375	4.6%	373	4.9%	432	4.9%	430	5.2%	377	5.7%
Mixed	96	1.6%	132	1.6%	144	1.8%	137	1.8%	169	1.9%	166	2.0%	215	3.3%
Other	64	1.1%	95	1.2%	116	1.4%	87	1.1%	111	1.3%	116	1.4%	15	0.2%
Not known/ Missing	90		84		77		90		142		271		507	
Total Clients	5909		8133		8219		7675		9008		8490		7072	

Table 53 shows changes in employment status between 2015/16 and 2021/22. Trends for most categories have remained relatively stable but the largest increase has been for clients who are living with long-term sickness or disability.

Table 53 Trends in employment status – 2015/16 to 2021/22

	20	15/16	20	16/17	20	17/18	20	18/19	20	19/20	20	20/21	20	21/22
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Employed	4375	75.8%	6254	77.9%	6436	79.3%	5926	78.1%	6675	75.1%	5814	72.7%	4704	73.0%
Unemployed	572	9.9%	708	8.8%	655	8.1%	640	8.4%	767	8.6%	811	10.1%	548	8.5%
Student	149	2.6%	161	2.0%	168	2.1%	141	1.9%	146	1.6%	172	2.1%	114	1.8%
Long-term sick/disabled & not in work	346	6.0%	470	5.9%	481	5.9%	501	6.6%	630	7.1%	733	9.2%	684	10.6%
Looking after family/ home and not working	112	1.9%	138	1.7%	130	1.6%	147	1.9%	194	2.2%	201	2.5%	159	2.5%
Not seeking work	10	0.2%	23	0.3%	17	0.2%	20	0.3%	19	0.2%	30	0.4%	20	0.3%
Volunteer	21	0.4%	28	0.3%	15	0.2%	12	0.2%	25	0.3%	20	0.3%	11	0.2%
Retired	126	2.2%	176	2.2%	191	2.4%	160	2.1%	206	2.3%	182	2.3%	149	2.1%
Seeking asylum*													3	0.0%
In prison**	60	1.0%	74	0.9%	20	0.2%	39	0.5%	227	2.6%	14	0.2%	48	0.7%
Missing/Not stated	138		101		106		89		117		513		632	
Total	5909		8133		8219		7675		9008		8490		7072	

^{*}Only collected from April 2021.

^{**} recorded as 'prison-care' until 2021/22.

Appendices

14 Appendices

14.1 DRF data items

14.1.1 Person Table

Core DRF Spec

Data Item Code	Data Item	Input Code Table
XO	Care Plan Number	
X4	System Client Identifier	
X1	Local Client Identifier	-
X2	Provider code	-
X3	Date of Birth	-
P1	Gender Identity	P-A
P1_Other	Detail of Self-Described Gender Identity	
P7	Sex	P-F
P2	Postcode Area	-
P11	Local Authority	
P3	Employment indicator	P-B
P4	Relationship status	P-C
P5	Ethnic background	P-D
P6	Additional Client Diagnosis	P-E
P8	Sexual Orientation	P-G
P8_Other	Detail of Self-Described Sexual Orientation	
P9	Children	P-H

14.1.1.1 Person Table Codes

P-/	A Gender	Type of change	Detail of change	Rationale
0	Not known		Response options have	Protected characteristic.
1	Male		been amended to reflect	Amends reflect
2	Female		diversity of genderidentities.	Stonewall's guidance.
3	Transgender	Delete response	= Identities.	
4	Female-to male (FTM)/ Transgender Male/Trans Man	New		
5	Male-to-Female/Transgender Female/Trans Woman	New	_	
6	Genderqueer, neither exclusively male nor female	New	_	
7	Additional Gender Category/ (or Other), please specify	New		
9	Not stated (person asked but declined to provide a response)	New		

P-F Sex: This item relates to patient stated sex assigned at birth, i.e. client to be asked "What sex were you assigned at birth on your original birth certificate?".

P-F	Sex	Type of change	Detail of change	Rationale
1	Male	New field	Additional field to collect	Protected characteristic.
2	Female		sex assigned at birth	Amends reflect Stonewall's
9	Not stated (person asked but declined to provide a response)			guidance.

P-B Employment Status: This item relates to the employment status of the client. In the event that multiple descriptors apply, the response which best describes what they are mainly doing should Vbe selected.

P-B	Employment Status	Type of change	Detail of change	Rationale
1	Employed			
2	Unemployed and Seeking Work			
3	Students who are undertaking full (at least 16 hours per week) or parttime (less than 16 hours per week) education or training and who are not working or actively seeking work			
4	Long-term sick or disabled and not in work	Amend	Previous version specified names of Government support client may be receiving – removed and clarification added that client is not in work	Specification of benefits/ support received not important – clarification of working status of greater importance
5	Looking after the family or home and not working or actively seeking work	Amend	Removed reference to "homemaker"	Updated to remove infrequently used term
6	Not receiving benefits and who are not working or actively seeking work			
12	In prison	New	Replaced code 7 with codes 11 and 12 (Removed references to "in care" and separated out "seeking asylum" from "in prison")	Treatment programmes in prisons are being initiated/underway so monitoring this as a standalone category will become more important over time. "In care" is not an employment status
11	Seeking asylum	New	Split out from code 7	Need to differentiate in analysis
8	Unpaid voluntary work who are not working or actively seeking work			
9	Retired			
10	Not Stated (Person asked but declined to provide a response)			

P-C Relationship Status: This item relates to the client's relationship status as an indicator of social support.

P-C	Relationship Status
0	Not known
1	Divorced/Dissolved Civil Partnership
2	Separated
3	Single
4	Widowed
5	In a relationship
6	Married/Civil partnership
9	Not Stated (Person asked but declined to provide a response)

P-D Ethnic background: This item relates to the ethnicity of the client and is a mandatory field.

P-D	Ethnic background	Type of change	Detail of change	Rationale
1	White British			
2	White Irish			
3	White European			
4	White Other			
5	Black, Black British: African			
6	Black, Black British: Caribbean			
7	Black, Black British: Other			
8	Asian, Asian British: Bangladeshi			
9	Asian, Asian British: Indian			
10	Asian, Asian British: Pakistani			
11	Asian, Asian British: Chinese			
12	Asian, Asian British: Other			
13	Mixed: White and Asian			
14	Mixed, White and Black African			
15	Mixed: White and Black Caribbean			
16	Mixed: Other			
17	Any other ethnic group			
99	Not Stated (Person asked but declined to provide a response)	New	Additional code added	To ensure completeness of data a non-response option is needed

P-E Additional client diagnosis: This field relates to additional health conditions a client may have. Only professionally diagnosed, long term health conditions should be considered.

P-E	Additional client diagnosis	Type of change	Detail of change	Rationale
0	Not stated (Person asked but declined to provide a response)			
1	Psychological	Delete		
2	Pharmacological	Delete		
3	Yes — Physical	New	Categories changed from psychological and pharmacological to physical and mental	Previous categories were treatment types, not diagnoses – mental and physical are standard categories for understanding other co-occurring health conditions
4	Yes - Mental	New		
5	Yes – Both physical and mental	Amended		
6	No			

P-G Sexual Orientation: Client to be asked "Do you think of yourself as...?"

P-E	Sexual Orientation	Type of change	Detail of change	Rationale
1	Lesbian, gay or homosexual	New	New response options	Protected characteristic.
2	Straight or heterosexual		for new data item	In line with Stonewall's recommended wording.
3	Bisexual			recommended wording.
4	Something else (please specify)			
9	Not stated (Person asked but declined to provide a response)			

P-H Children: Record whether client is responsible for the care a of a child/children aged under 18

P-H	Children	Type of change	Detail of change	Rationale
1	Yes	New	New response options	Protected characteristic.
2	No		for new data item	In line with Stonewall's recommended wording.
9	Not stated (Person asked but declined to provide a response)			recommended wording.

P-I Religious affiliation: Record whether client consider themselves to have religious affiliation to any of the below groups. This is a connection or identification with a religion irrespective of actual practice or belief, so clients may consider their upbringing to be relevant even if not practicing at present.

P-I		Type of change	Detail of change	Rationale
1	No religion	New	Note that client does	This is a protected
2	Christian		not need to be actively practicing to consider	characteristic so needs to be monitored
3	Buddhist		themselves affiliated	for equity of service
4	Hindu		with a religion.	provision.
5	Jewish		Christian includes	
6	Muslim		Church of England,	
7	Sikh		Catholic, Protestant and all other Christian	
8	Other religion		denominations.	
9	Not stated (Person asked but declined to provide a response)			

14.1.2 Gambling History Table

Data Item Code	Data Item	Input Code Table	Name	Format	Example
ХО	Care Plan Number		XO	N25	
X1	Local Client Identifier	-	X1	N25	
X2	Provider code	-	X2	A10	
G-A A1	Bookmakers - horses	G-A	G-A A1	N2 (1-10)	
G-A A2	Bookmakers - dogs	G-A	G-A A2	N2 (1-10)	
G-A A3	Bookmakers - Sports or other event	G-A	G-A A3	N2 (1-10)	
G-A A4	Bookmakers - Gaming Machines (FOBT)	G-A	G-A A4	N2 (1-10)	
G-A A5	Bookmakers - Gaming Machine (Other)	G-A	G-A A5	N2 (1-10)	
G-A A6	Bookmakers - Other	G-A	G-A A6	N2 (1-10)	
G-A B1	Bingo Premises - Live draw	G-A	G-A B1	N2 (1-10)	
G-A B2	Bingo Premises - Terminal	G-A	G-A B2	N2 (1-10)	
G-A B3	Bingo Premises - Skill Machine	G-A	G-A B3	N2 (1-10)	
G-A B4	Bingo Premises - Gaming Machines (other)	G-A	G-A B4	N2 (1-10)	
G-A B5	Bingo Premises - Other	G-A	G-A B5	N2 (1-10)	
G-A C1	Casino - Poker	G-A	G-A C1	N2 (1-10)	
G-A C2	Casino - Other card games	G-A	G-A C2	N2 (1-10)	
G-A C3	Casino - Roulette	G-A	G-A C3	N2 (1-10)	
G-A C4	Casino - Gaming Machines (FOBT)	G-A	G-A C4	N2 (1-10)	
G-A C5	Casino - Gaming Machine (Other)	G-A	G-A C5	N2 (1-10)	
G-A C6	Casino - Other	G-A	G-A C6	N2 (1-10)	
G-A D1	Live Events - Horses	G-A	G-A D1	N2 (1-10)	
G-A D2	Live Events - Dogs	G-A	G-A D2	N2 (1-10)	
G-A D3	Live Events - Sports or other event	G-A	G-A D3	N2 (1-10)	
G-A D4	Live Events - Other	G-A	G-A D4	N2 (1-10)	
G-A E1	Adult Entertainment Centre - Gaming Machines (FOBT)	G-A	G-A E1	N2 (1-10)	
G-A E2	Adult Entertainment Centre Gaming Machine (Other)	G-A	G-A E2	N2 (1-10)	
G-A E3	Adult Entertainment Centre Skill prize machines	G-A	G-A E3	N2 (1-10)	
G-A E4	Adult Entertainment Centre Other	G-A	G-A E4	N2 (1-10)	
G-A F1	Family Entertainment Centre - Gaming Machines (FOBT)	G-A	G-A F1	N2 (1-10)	
G-A F2	Family Entertainment Centre - Gaming Machine (Other)	G-A	G-A F2	N2 (1-10)	
G-A F3	Family Entertainment Centre - Skill prize machines	G-A	G-A F3	N2 (1-10)	
G-A F4	Family Entertainment Centre - Other	G-A	G-A F4	N2 (1-10)	
G-A G1	Pub - Gaming Machines	G-A	G-A G1	N2 (1-10)	
G-A G2	Pub - Sports	G-A	G-A G2	N2 (1-10)	
G-A G3	Pub - Poker	G-A	G-A G3	N2 (1-10)	
G-A G4	Pub - Other	G-A	G-A G4	N2 (1-10)	
G-A H1	Online - Horses	G-A	G-A H1	N2 (1-10)	

Data Item Code	Data Item	Input Code Table	Name	Format	Example
G-A H2	Online - Dogs	G-A	G-A H2	N2 (1-10)	
G-A H3	Online - Spread betting	G-A	G-A H3	N2 (1-10)	
G-A H4	Online - Sports events	G-A	G-A H4	N2 (1-10)	
G-A H5	Online - Bingo	G-A	G-A H5	N2 (1-10)	
G-A H6	Online - Poker	G-A	G-A H6	N2 (1-10)	
G-A H7	Online - Casino (table games)	G-A	G-A H7	N2 (1-10)	
G-A H8	Online - Casino (slots)	G-A	G-A H8	N2 (1-10)	
G-A H9	Online - Scratchcards	G-A	G-A H9	N2 (1-10)	
G-A H10	Online - Betting exchange	G-A	G-A H10	N2 (1-10)	
G-A H12	Online - eSports betting	G-A	G-A H12	N2 (1-10)	
G-A H13	Online - Virtual sports betting	G-A	G-A H13	N2 (1-10)	
G-A H14	Online - Within video games	G-A	G-A H14	N2 (1-10)	
G-A H15	Online - Financial markets	G-A	G-A H15	N2 (1-10)	
G-A H11	Online - Other	G-A	G-A H11	N2 (1-10)	
G-A I1	Miscellaneous - Private/organised games	G-A	G-A I1	N2 (1-10)	
G-A 12	Miscellaneous - Lottery (National)	G-A	G-A I2	N2 (1-10)	
G-A 13	Miscellaneous - Lottery (Other)	G-A	G-A 13	N2 (1-10)	
G-A 14	Miscellaneous - Scratchcards	G-A	G-A 14	N2 (1-10)	
G-A 15	Miscellaneous - Football pools	G-A	G-A I5	N2 (1-10)	
G-A 16	Miscellaneous - Service station (gaming machine)	G-A	G-A 16	N2 (1-10)	
G-A J1	Private members club - Poker	G-A	G-A J1	N2 (1-10)	
G-A J2	Private members club - Other card games	G-A	G-A J2	N2 (1-10)	
G-A J3	Private members club - Gaming Machine	G-A	G-A J3	N2 (1-10)	
G-A J4	Private members club - Other	G-A	G-A J4	N2 (1-10)	
G-A K1	Other –Other not categorised above	G-A	G-A K1	N2 (1-10)	
G1_ Other	Detail of gambling activities/ locations	G-A	G1_Other	A50	
G2	Length of time gambling (Months)	-	G2	N3	
G3	Job loss through gambling	G-B	G3	N1	
G4	Relationship loss through gambling	G-C	G4	N1	
G5	Age of problem gambling onset	-	G5	N2	
G6	Early big win	G-D	G6	N1	
G7	Debt due to gambling	G-E	G7	N2	
G8	Time spent gambling – last 30 days (days)	G-F	G8	N2 Number between 0 and 30 99=not stated	
G9	Time spent gambling – daily average (hours)	G-G	G9	N2.1 Number between O and 24. Half hours (0.5) allowed. 99=not stated	

Data Item Code	Data Item	Input Code Table	Name	Format	Example
G10	Money spent gambling – daily average	G-H	G10	N6 999999=not stated	
G11	Money spent per month	G-I	G11	N6 999999=not stated	
G12	Use of any self-exclusion tools at time of assessment	G-J	G12	N1	
				N1	

14.1.2.1 Gambling History Codes

G-A Gambling Activities and Locations: Question wording: What are you gambling on? Do not complete if an 'affected other'.

	G-A Gambling Activities	Type of change	Detail of change	Rationale
	G-A Gambling Activities	Type of change	Detail of change	Rationale
A - Bookmakers	1 Horses			
	2 Dogs			
	3 Sports or other event			
	4 Gaming Machine (FOBT)	Amended	Category split into FOBT and other	Aligning with version used by GamCare
	5 Gaming Machine (Other)	New	Category split into FOBT and other	Aligning with version used by GamCare
	6 Other			
B - Bingo Premises	1 Live draw	Amend	Location name changed from "bingo hall" to "bingo premises"	Updated language
	2 Terminal			
	3 Skill Machine			
	4 Gaming Machine (Other)			
	5 Other			
C - Casino	1 Poker			
	2 Other card games			
	3 Roulette			
	4 Gaming Machine (FOBT)	Amended	Category split into FOBT and other	Aligning with version used by GamCare
	5 Gaming Machine (Other)	New	Category split into FOBT and other	Aligning with version used by GamCare
	6 Other			
D - Live events	1 Horses			
	2 Dogs			
	3 Sports or other event			
	4 Other			

	G-A Gambling Activities	Type of change	Detail of change	Rationale
E - Adult Entertainment Centre (18+ Arcade)	1 Gaming Machine (FOBT)	Amended	Location renamed to include "Gaming"	Aligning with version used by GamCare
			Category split into FOBT and other	
	2 Gaming Machine (Other)	New	Category split into FOBT and other	Aligning with version used by GamCare
	3 Skill prize machines			
	4 Other			
F - Family Entertainment	1 Gaming Machine (FOBT)	Amended	Category split into FOBT and other	Aligning with version used by GamCare
Centre (Arcade)	2 Gaming Machine (Other)	New	Category split into FOBT and other	Aligning with version used by GamCare
	3 Skill prize machines			
	4 Other			
G - Pub	1 Gaming Machine (other)			
	2 Sports			
	3 Poker			
	4 Other			
H - Online	1 Horses			
	2 Dogs			
	3 Spread betting			
	4 Sports events			
	5 Bingo			
	6 Poker			
	7 Casino (table games)			
	8 Casino (slots)			
	9 Scratchcards			
	10 Betting exchange			
	12 eSports betting	New	Added	Emerging and
	13 Virtual sports betting	New	Added	growth gambling types
	14 Within video games	New	Added	-
	15 Financial markets	New	Added	_
	11 Other			
I - Misc	1 Private/organised games			
	2 Lottery (National)	Amended	Lottery split into two codes – one for national, one for other	Alignment with GamCare's data collection
	3 Lottery (Other)	New		
	4 Scratchcards			
	5 Football pools			
	6 Service station (gaming machine)			
J - Private	1 Poker			
members club	2 Other card games			
	3 Gaming Machine			

	G-A Gambling Activities	Type of change	Detail of change	Rationale
K - Other	1 Other not categorised above (specify)	Amended	Details of other activities to be recorded	To monitor emerging/new gambling activities

G-B Job loss through gambling

G-B Job loss through gambling				
0	Not stated (Person asked but declined to provide a response)			
1	Yes			
2	No			
9	Unknown			

G-C Relationship loss through gambling

G-C Relationship loss through gambling				
0	Not stated (Person asked but declined to provide a response)			
1	Yes			
2	No			
9	Unknown			

G-D Early big win

G-D Early big win				
0	Not stated (Person asked but declined to provide a response)			
1	Yes			
2	No			
9	Unknown			

G-E Debt due to gambling

G-E	Debt due to gambling	Type of change	Detail of change	Rationale
0	Not stated (Person asked but declined to provide a response)			
1	No			
2	Under £5000			
3	£5000 - £9,999			
4	£10,000 - £14,999			
5	£15,000 - £19,999			
6	£20,000 - £99,999	Deleted	Category split into three below	To improve accuracy of data
11	£20,000 – £29,999	New	Added	
12	£30,000 - £49,999	New	Added	
13	£50,000 - £99,999	New	Added	
7	£100,000 or more			
8	Bankruptcy			
9	In an IVA			
10	Don't know (some)			

G-F Time spent gambling – last 30 days: How many days in the last 30 would you say you have gambled? Include option for "not stated/don't know"

- **G-G Time spent gambling daily average over the last 30 days:** How long do you spend on average gambling on a gambling day? Time to be input in hours (not minutes). Time should be spent on gambling activities, not rumination about gambling. Include option for "not stated/don't know"
- **G-H Money spent gambling daily average over the last 30 days:** How much money do you spend on average on a typical gambling day? Include option for "not stated/don't know"
- **G-I Money spent per month:** How much do you spend in a month on gambling (total gambling expenditure minus total gambling wins)? Include option for "not stated/don't know"
- **G-J Use of self-exclusion tools at point of assessment:** Record whether at the point of assessment the client is using any self-exclusion tools (this could be schemes such as GamStop, blocking software, or bank transaction blocking). Check whether client has methods of circumventing exclusion for the restriction put in place (e.g. if still online gambling despite registering with GamStop).

G-J Use of self-exclusion tools at point of assessment			
1	Yes		
2	Yes, but have ability to circumvent		
3	No		
9	Not stated		

14.1.3 Referral Table

Data Item Code	Data Item	Mandatory (M)/ Required (R)	Input Code Table	Name	Format	Examples
XO	Care Plan Number	М		XO	N25	
X1	Local Client Identifier	М	-	X1	N25	
X2	Provider code	М	-	X2	A10	
R1	Referral Source	М	R-A	R1	N2	
R8	Where heard about service	Only if R1 = 4, Self-referral	R-F	R8	N2	
R2	Date referral received	М	-	R2	Date11 DD/MM/ YYYY	
R3	Referral acceptance indicator	М	R-B	R3	N1	
R4	Referral reason	М	R-C	R4	N1	
R5	Previous treatment for gambling	М	R-D	R5	N1	
R9	Tier	М	R-G	R9	N1	
R6	End reason	М	R-E	R6	N2	
R7	End date	М	-	R7	Date11 DD/MM/ YYYY	

14.1.3.1 Referral Codes

R-A Referral source

R-A Referral source		Type of change	Detail of change	Rationale
1	GP			
22	National Gambling Helpline	New	Added	To monitor referrals
23	GamCare/partner network			between NGTS providers
24	London Problem Gambling Clinic / CNWL			
25	Northern Gambling Service / LYPFT			
26	Gordon Moody Association (GMA)			
2	Health Visitor			
3	Other Primary Health Care			
4	Self-Referral			
5	Carer			
6	Social Services			
7	Education Service			
8	Employer			
9	Police			
10	Courts			
11	Probation Service			
12	Prison			
13	Court Liaison and Diversion Service			
14	Independent Sector Mental Health Services			
27	Citizen's Advice	New	Added	Are a GA funded partner
15	Voluntary Sector			
16	Accident And Emergency Department			
17	Mental Health NHS Trust			
18	Asylum Services			
19	Drug Action Team / Drug Misuse Agency			
20	Jobcentre plus			
21	Other service or agency			
28	Not stated	New	Added	To prevent missing data
29	Primary Care Gambling Service (PCGS)	New	Added	

R-F Where heard about the service (for self-referrals)

R-F	Where heard about service	Type of change	Detail of change	Rationale
1	Internet search	New	Added	To inform communications
2	BeGambleAware website			and outreach strategies
3	GamCare website			
4	Other website			
5	Social Media			
6	TV			
7	Radio			
8	Newspaper			
9	Family or friend			
10	Other professional			
11	Other source			

R-B Referral acceptance indicator

R-B Referral acceptance indicator				
1	Yes			
2	No			

R-C Referral reason

R-C Referral reason				
1	Problem gambler			
2	Affected other			
3	Person at risk of developing gambling problem			

R-D Previous treatment for gambling: This field should be used to indicate if any treatment has previously been received for gambling harm, and if so, the most recent previous provider of treatment to the client

R-D	Recurrence indicator	Type of change	Detail of change	Rationale	
0	Not stated (Person asked but declined to provide a response)		Question labelled as "recurrence indicator"	With the addition of a systemwide client ID,	
1	Yes – not known where	Only if cannot specify	amended to cover any previous treatment	previous treatment becomes red	the recurrence indicator becomes redundant for
2	No		source through additionalresponse codes options.	services within the NGTS, unless accessed prior	
3	Yes - GamCare/partner network	Added	- Tesponse codes options. -	to DRF creation or from a non-NGTS source. To be analysed to inform treatment pathways.	
4	Yes – London Problem Gambling Clinic	Added			
5	Yes – Northern Gambling Service	Added			
6	Yes – Gordon Moody Association	Added			
7	Yes – other NHS provided service	Added	_		
8	Yes – other private healthcare service	Added			
9	Unknown				

R-E End reason

R-E	End Reason	Type of change	Detail of change	Rationale	
9	Offered Asses43-45sment but DNA	Removed	Code split to add extra	Additional detail to be collected	
16	Contact attempted to offer assessment – unable to make contact	Added	detail as requested		
17	Offered assessment but DNA – client cancellation	Added			
	ASSESSED ONLY				
10	Not suitable for service - no action taken or directed back to referrer				
11	Not suitable for service - signposted elsewhere with mutual agreement of patient				
12	Discharged by mutual agreement following advice and support				
13	Referred to another therapy service by mutual agreement				
14	Suitable for service, but patient declined treatment that was offered				
15	Deceased (assessed only)				
97	Not Known (assessed only)				
	ASSESSED AND TREATED				
42	Completed scheduled treatment				
43	Dropped out of treatment (unscheduled discontinuation)				
44	Referred to other service				
45	Deceased (assessed and treated)				
98	Not Known (assessed and treated)				

R-G Treatment Tier

R-C	Treatment Tier	Type of change	Detail of change	Rationale
2	Tier 2	New	New field	Allows Tier 2,3,4 data to
3	Tier 3	New		be distinguished
4	Tier 4	New		

14.1.4 Appointment Table

Data Item Code	Data Item	Mandatory (M)/ Required (R)	Input Code Table	Name	Format	Examples
XO	Care Plan Number	М		XO	N25	
X1	Local Patient Identifier	М	_	X1	N25	
X2	Provider code	М	_	X2	A10	
A1	Appointment date	М	-	A1	Date11 DD/MM/ YYYY	
A2	Unique caregiver code	М	_	A2		
A3	Attendance	М	A-A	А3	N1	
A10	Treatment Setting	М	A-E	A10	N1	
A4	Contact duration	М	_	Α4	N3	
A5	Appointment purpose	М	A-B	A5	N1	
A6	Appointment medium	М	A-C	A6	N1	
A11	Treatment Attendees	М	A-F	A11	N1	
A7	Intervention given	М	A-D	A7	N2	
A8	PGSI score	M IF R4 =1	-	A8	N2	
A9	CORE-10 score	М	-	A9	N2	
A12	Use of self-exclusion tools since last appointment	M IF R4 =1	A-G	A12	N1	

14.1.4.1 Appointment Codes

A-A	A-A Attendance				
5	Attended on time or, if late, before the relevant care professional was ready to see the patient				
6	Arrived late, after the care professional was ready to see the patient, but was seen				
7	Patient arrived late and could not be seen				
2	Appointment cancelled by, or on behalf of, the patient				
3	Did not attend - no advance warning given				
4	Appointment cancelled or postponed by the health care provider				

A-I	Treatment Setting	Type of change	Detail of change	Rationale
1	Community	New	Additional field to record	For analysis purposes
2	Residential		detail of treatment	
3	Recovery house		setting	
4	Retreat			
5	Other			

A-B	Appointment purpose	Type of change	Detail of change	Rationale
1	Assessment			
2	Treatment			
3	Assessment and treatment			
4	Review only			
5	Review and treatment			
6	Formal structured follow-up	Amend	Wording amended to clarify that this applies only to formal follow-up appointments	To clarify appointment purpose
7	Aftercare	New	Addition	To disambiguate this code from structured follow-ups
8	Extended Brief Intervention (EBI)	New	Addition	Additional appointment purpose
9	Other			
10	Not Recorded			

A-C	Appointment medium	Type of change	Detail of change	Rationale
1	Face to face communication			
2	Telephone			
3	Web camera (e.g. skype)			
4	Online chat			
5	Email			
6	Text message/Messaging App	Amended	Changed from "short message service" to updated language including internet enable messaging (e.g Whatsapp and iMessage)	Remove outdated terminology
7	Other	New	Additional code	Code for future-proofing purposes

A-F	Treatment attendees	Type of change	Detail of change	Rationale
1	Individual	New	Added to capture further	For future analysis of
2	Group		detail about nature of intervention provided	treatment outcomes
3	Couple			
4	Family			
5	Other			

A-D Intervention given: This detail is only required if the appointment purpose at A5 is "treatment" or "assessment and treatment"

		Type of change	Detail of change	Rationale
1	CBT (Cognitive Behavioural Therapy)	New	Addition	There are many
2	Counselling			different therapy/
3	Structured psycho-social	New	Addition	treatment types offered by NGTS
4	5 Step	New	Addition	providers – this list is
5	Brief advice			an attempt to provide
6	Psychotherapy			greater detail than
7	Psychodynamic therapy	New	Addition	the previous list for thepurposes of analysis of
8	Pharmacological	New	Addition	treatment outcomes,
9	Motivational Interviewing			without covering
10	DBT (Dialectical behaviour therapy)			every possibility and therefore making the
11	ACT (Acceptance and commitment therapy)			list unwieldy.
12	EMDR (Eye movement desensitisation and reprocessing)			
13	Other			

A-G Use of self-exclusion tools since last appointment: Record whether at the point of each contact client is using any self-exclusion tools (this could be schemes such as GamStop, blocking software, or bank transaction blocking). Check whether client has methods of circumventing exclusion for the restriction put in place (e.g. if still online gambling despite registering with GamStop).

A-G Use of self-exclusion tools since last appointment		Type of change	Detail of change	Rationale
1	Yes	New field	Addition	To monitor usage
2	Yes, but have ability to circumvent			of self-exclusion
3	No			and outcomes for treatment
9	Not stated			dodinont

14.2 Problem Gambling Severity Index (PGSI)

The PGSI is the most widely used measure of problem gambling behaviour in Great Britain. It consists of nine items and each item is assessed on a four-point scale: never, sometimes, most of the time, almost always. Responses to each item are scored as follows:

- never = zero
- sometimes = one
- most of the time = two
- almost always = three

Scores are then summed to give a total score which can range from a minimum of 0 to a maximum of 27.

When used as a population screening tool, the typical reference period used for the questions is "the past 12 months". Within treatment settings, the scale is usually adjusted by providers so that clients are asked about their behaviour since their appointment, or in the past two weeks.¹⁴

The nine items are as listed below:

Thinking about the last [TIMEFRAME]...

- 1. Have you bet more than you could really afford to lose?
- 2. Have you needed to gamble with larger amounts of money to get the same feeling of excitement?
- 3. When you gambled, did you go back another day to try to win back the money you lost?
- 4. Have you borrowed money or sold anything to get money to gamble?
- 5. Have you felt that you might have a problem with gambling?
- 6. Has gambling caused you any health problems, including stress or anxiety?
- 7. Have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?
- 8. Has your gambling caused any financial problems for you or your household?
- 9. Have you felt guilty about the way you gamble or what happens when you gamble?

A PGSI score of eight or more represents a problem gambler, that is, people who gamble who do so with negative consequences and a possible loss of control. This is the threshold recommended by the developers of the PGSI and the threshold used for this analysis.

Scores between three and seven represent 'moderate risk' gambling (people who gamble who experience a moderate level of problems leading to some negative consequences) and a score of one or two represents 'low risk' gambling (people who gamble who experience a low level of problems with few or no identified negative consequences).

¹⁴ The consistency of the timeframe asked about by providers has been noted as a potential area for methodological improvement in the collection of DRF submissions.

14.3 CORE-10

CORE stands for "Clinical Outcomes in Routine Evaluation" and the CORE system comprises tools and thinking to support monitoring of change and outcomes in routine practice in psychotherapy, counselling and any other work attempting to promote psychological recovery, health and wellbeing. CORE System Trust owns the copyright on all the instruments in the system.

The CORE outcome measure (CORE-10) is a session by session monitoring tool with items covering anxiety, depression, trauma, physical problems, functioning and risk to self. The measure has six high intensity/ severity and four low intensity/ severity items.

Clients are asked to answer 10 items on a frequency response scale. Details of the items, response and scoring are as follows:

For each statement please say how often you have felt that way over the last week...

	Response op	Response option and corresponding item score				
	Not at all	Only occasionally	Sometimes	Often	Most or all of the time	
1. I have felt tense, anxious or nervous	0	1	2	3	4	
2. I have felt I have someone to turn to for support when needed	4	3	2	1	0	
3. I have felt able to cope when things go wrong	4	3	2	1	0	
4. Talking to people has felt too much for me	0	1	2	3	4	
5. I have felt panic or terror	0	1	2	3	4	
6. I have made plans to end my life	0	1	2	3	4	
7. I have had difficulty getting to sleep or staying asleep	0	1	2	3	4	
8. I have felt despairing or hopeless	0	1	2	3	4	
9. I have felt unhappy	0	1	2	3	4	
10. Unwanted images or memories have been distressing me	0	1	2	3	4	

Scores are then summed to give a total score which can range from a minimum of 0 to a maximum of 40. A score of 40 would be classed as severe distress, 25 = moderate to severe, 20 = moderate, 15 = mild, with 10 or under below the clinical cut off.

About GambleAware

GambleAware is an independent charity (Charity No. England & Wales 1093910, Scotland (SC049433)) that champions a public health approach to preventing gambling harms.

GambleAware is a commissioner of integrated prevention, education, and treatment services on a national scale, with over £56 million of funding under active management. As an independent charity, GambleAware is regulated by the Charity Commission for England and Wales, and the Scottish Charity Regulator (OSCR).

For further information about GambleAware please contact info@gambleaware.org.

About ViewIt

ViewIt Ltd is a University of Manchester start-up company, supported by GC Business Growth Hub, specialising in data management and analysis to provide a platform for simple reporting.

The company originates from the team that provides National Statistics production and validation for National Drug Treatment Monitoring Service outputs on behalf of Public Health England.

