



**Karolinska
Institutet**

Involving CSOs in PG treatment

Lessons learned from three studies.

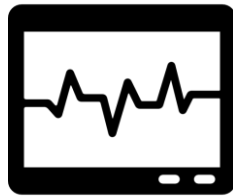
Anders Nilsson, PhD, Centre for Psychiatric Research,
Karolinska Institutet, Stockholm, Sweden

Concerned significant others

CSOs are often affected by PG in terms of:



Relationship
to gambler



Health



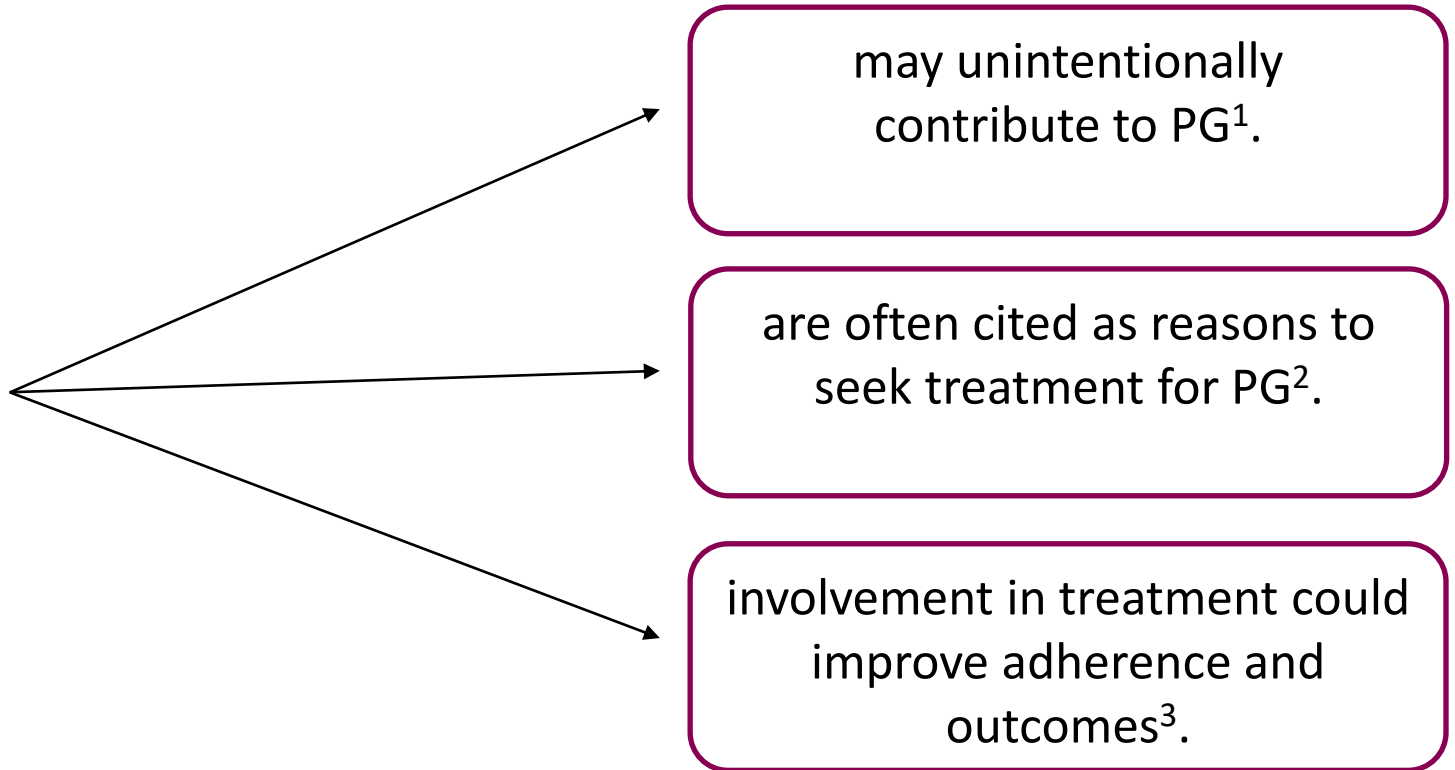
Financially



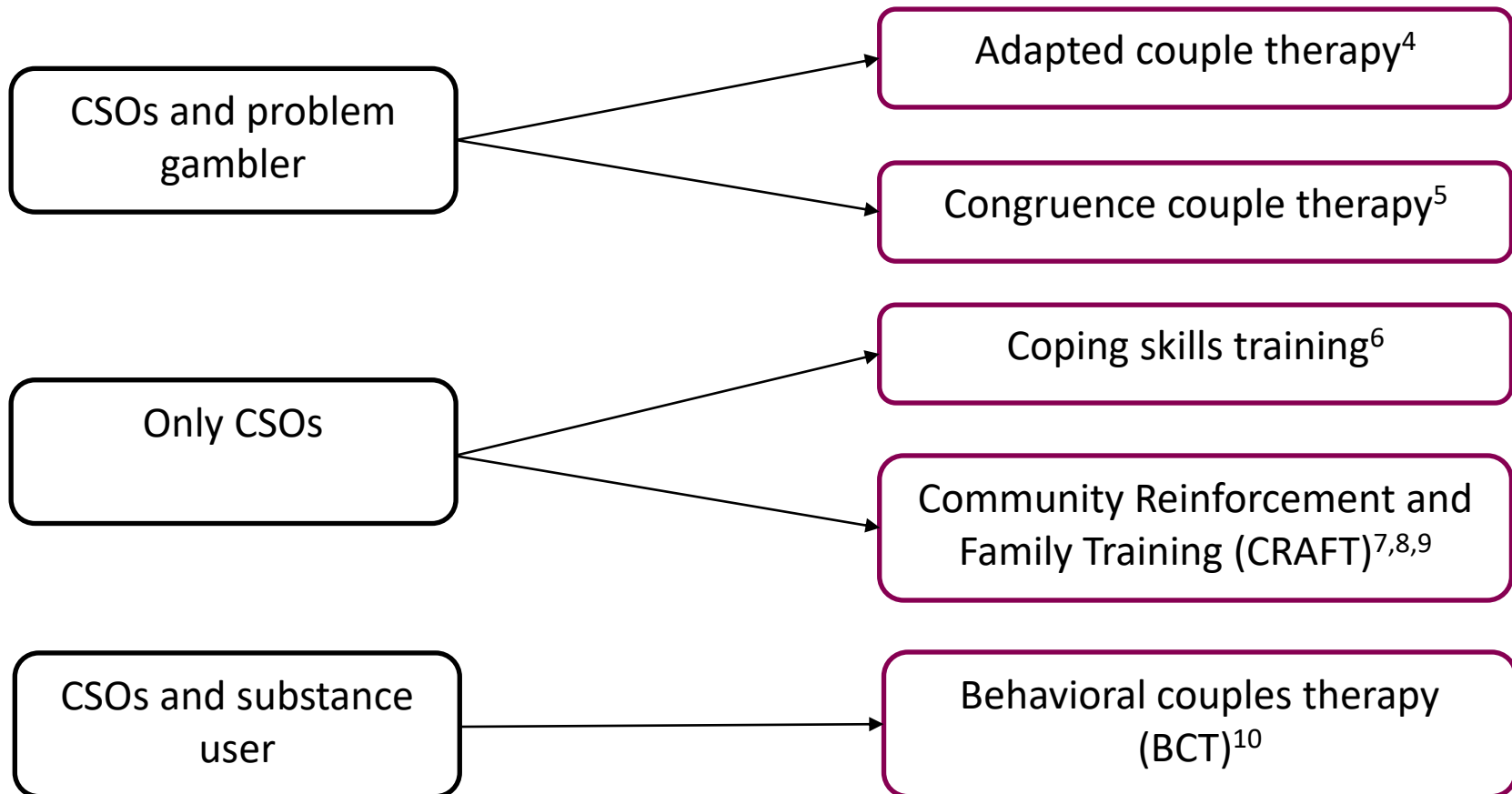
Relationship to
others

CSOs are important

CSOs



Previous treatment studies with CSOs



Key features of our studies

Differences from previous studies



Internet-
based



Involving all
types of CSOs



First study of
BCT for PG

Overall themes of studies



Supporting
CSOs



Involving CSOs
in treatment



Investigate
drop-out from
treatment

Description of studies

Study	RCT	CSO	IPG	N=	Question
CBT vs Behavioral Couples Therapy for PG (feasibility).	✓	✓	✓	18 CSO 18 IPG	Can we do it?
CBT vs Behavioral Couples Therapy for PG (full-scale).	✓	✓	✓	136 CSO 136 IPG	Does it help to involve CSOs in treatment?
Qualitative study on drop-out		✓	✓	8 CSO 8 IPG	Why do you not all love our treatment?

Internet-based interventions

- Participant logs in to platform to access "modules" with text materials, video clips and assignments.
- One module per week, 9-10 in total.
- Therapist support through email/telephone.
- Therapist spends ≈ 15 min per week.

anhörigstudien Start Meny Administrera Hjälp Anders Nilsson Logg

Funktionell analys av spelandet

Ett sätt att både få en bättre bild av spelandet och att vara till en hjälp för den som spelar är att analysera själva spelsituationen med funktionell analys. Som vi skrev tidigare vill man analysera vad ett beteende fyller för funktion. Alltså när spelar man och vad är det för följder som gör att man kommer tillbaka till spelet igen?

Situation	→	Beteende	→	Konsekvens
Spelaren är uttråkad		Spelar		Kort sikt <ul style="list-style-type: none"> Spänning Avslappnande Lång sikt <ul style="list-style-type: none"> Mer stress Mindre pengar

Här försöker man identifiera när spelandet inträffar, vad det fyller för funktion och vad det får för konsekvenser. Som anhörig är det normalt att känna att man inte har tillräckligt med kunskap, eller att man gissar för att svara på frågorna. Det gör inget och det är okej att det finns luckor, som anhörig besitter du viktigt kunskap om spelaren även om det är "kvalificerade gissningar".

När spelar man? Situationen

Innehåll

- Introduktion
- Man spelar inte hela tiden
- Att förstå och förändra din roll i problemet**
- Att upptäcka spelproblem
- Exempel på tecken
- Funktionell analys av spelandet**
- När spelar man? Situationen
- Vad gör man? Beteendet
- Vad händer under tiden? Kortsiktiga konsekvenser
- Vad händer efteråt? Längsiktiga konsekvenser
- Hur kan man vara till hjälp?
- Aktiviteter som är inkompatibla med spelandet
- Belöna när spelaren inte spelar
- Vanliga frågor
- Avslutande uppgifter

↑ Tillbaka till toppen

Measurements, RCT and feasibility study

- Measures of gambling:
 - NODS
 - Time Line Follow-Back (TLFB)
- Measures of health
 - PHQ-9 for depression
 - GAD- 7 for anxiety
- Measures of relationship satisfaction
 - Relationship Assessment Scale Revised
- Follow-up at 3, 6 and (12) months

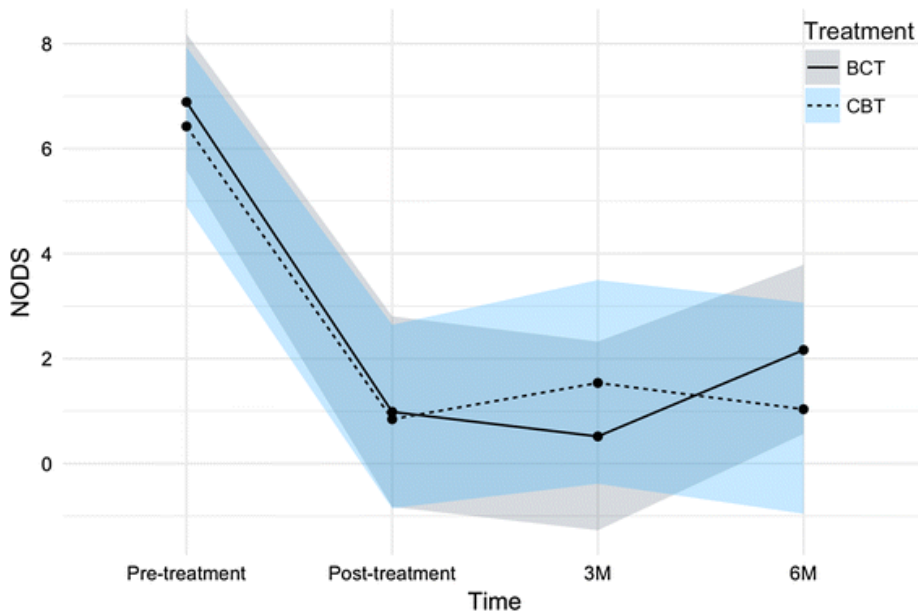
Design, feasibility study

- 18 dyads (18 IPGs and 18 CSOs) randomized into either BCT or CBT.
- In BCT condition both IPG and CSO received modules to work with, in CBT condition only the IPG.
- Participants surveyed about their experiences of the treatment.
- Therapists interviewed regarding their experiences in working with the treatment.

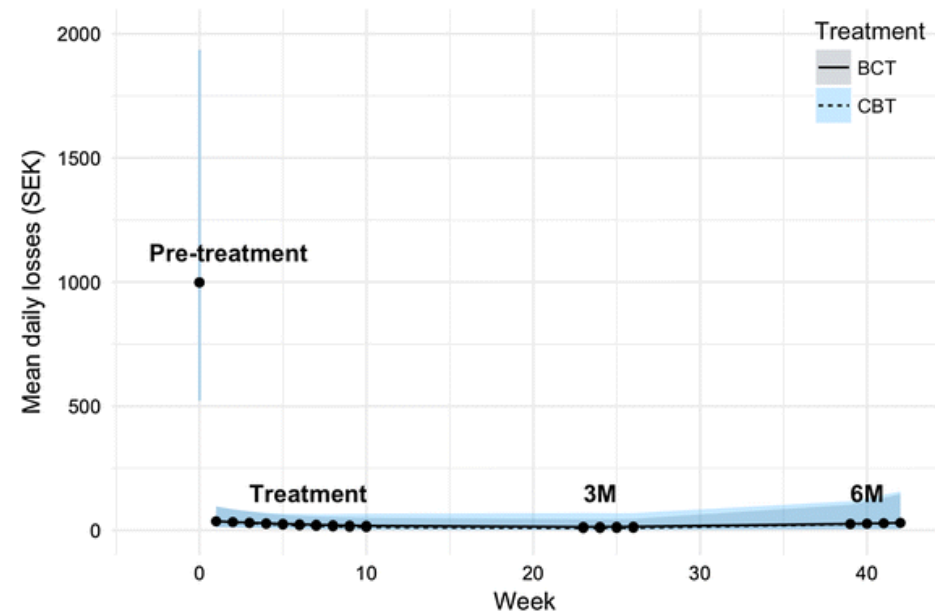
Key findings, feasibility study

- No differences between IPG groups, but CSOs in BCT lowered their score on anxiety and depression more than the CBT group (control).
- Generally very positive responses from participants in all groups.
- Some disappointment from CSOs who did not receive any modules
- Therapist listed a few challenges related to:
 - Participants' adherence to treatment.
 - Keeping participants at the same pace.
 - Gamblers possibly pushed into treatment.

Example key findings, gambling

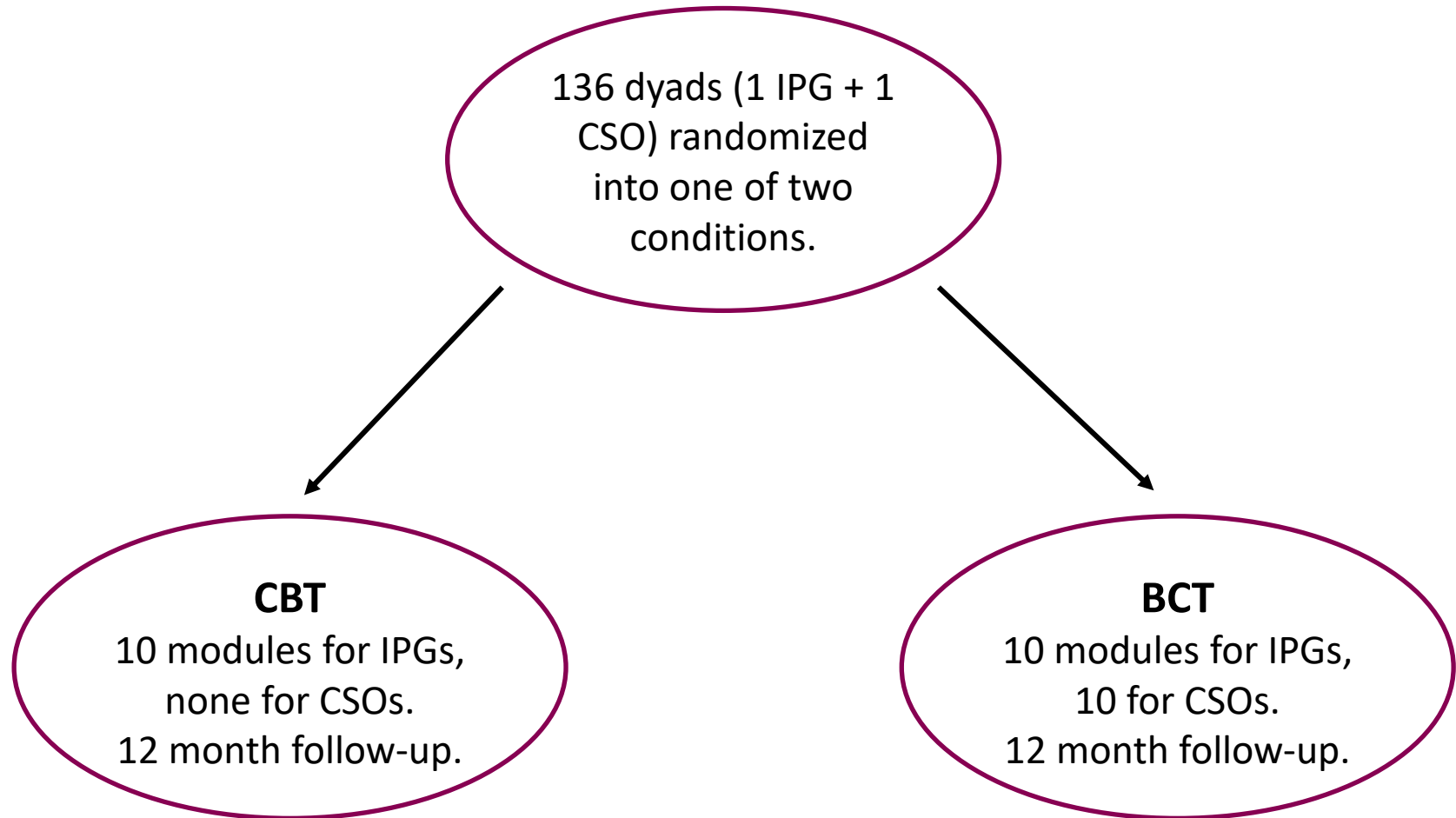


NODS measures Pathological Gambling according to DSM-IV.



Money lost to gambling (SEK).

Design, RCT

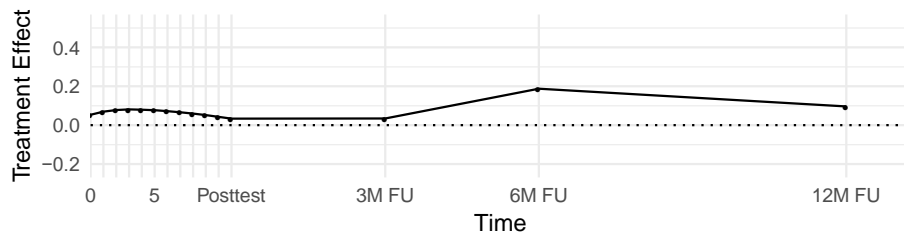
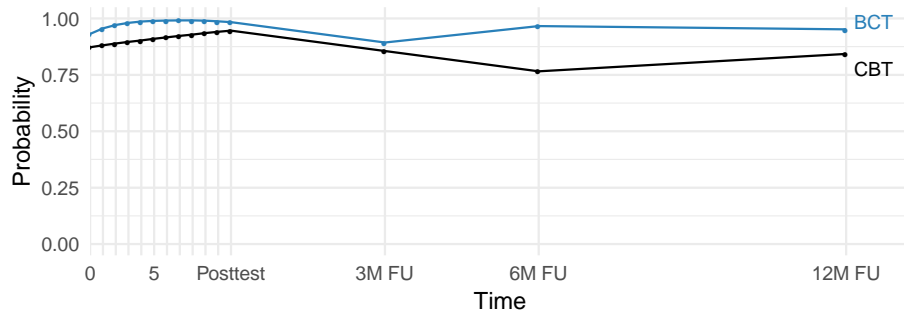


Key results, RCT

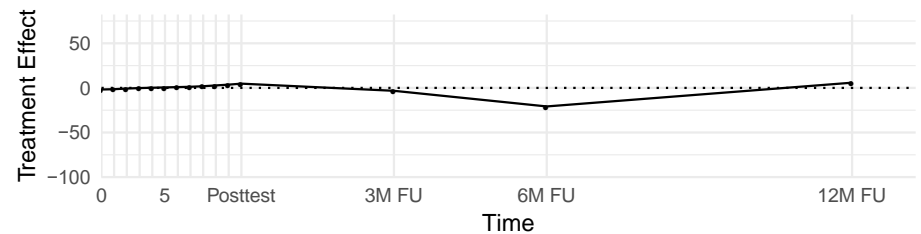
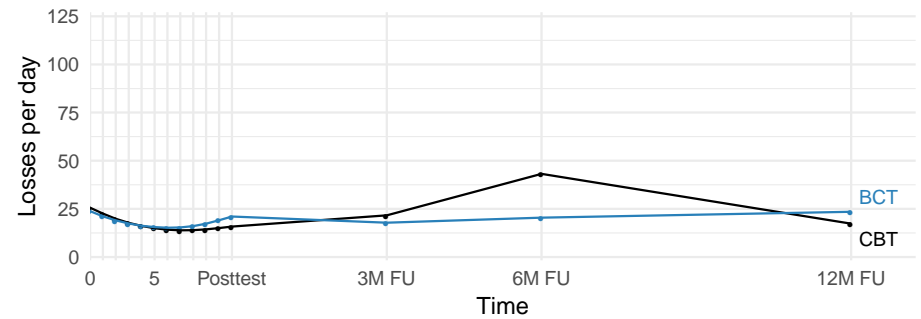
- Large improvements in both gambler groups, but small and inconclusive effects between groups on gambling, health and relationship satisfaction (e.g. TLFB-G: multiplicative effect = 1.13, 95% [0.30;4.31]).
- A higher portion started treatment in BCT group 94.2% vs. 85.3%.
- Small and inconclusive effects between CSO groups on health and relationship satisfaction.
- Many participants had reduced/stopped gambling before entering treatment.

Example key findings, gambling

No losses



Losses overall



Design, qualitative study

- 8 IPGs and 8 CSOs interviewed about their experiences of treatment, general take on PG treatment and reasons for drop-out.
- All IPGs had dropped out before completing half of our treatment, CSOs were CSOs of a IPG who had dropped out.
- Semi-structured interview analyzed with thematic analysis.

Key results, qualitative study

- Relapses, psychological distress, denial of gambling problems, as well as actual recovery, were related to drop-out from treatment.
- CSOs were seen as important for treatment seeking, but also for staying in treatment.
- Some IPGs expressed ambivalence towards CSO involvement.
- Honesty and openness seen as key to recovery by gamblers. Implies an important role for CSOs.
- Treatment setting, context, and delivery were generally more discussed than treatment content.
- IPGs emphasized the value of meeting peers with similar experiences of PG.

Conclusions

- Internet-delivered CBT and BCT can help reduce PG, and provide support for CSOs.
- Involving CSOs in treatment doesn't necessarily affect the outcomes for the IPG.
- Drop-out seems to be largely associated with factors outside of treatment.
- Differences depending on type of CSOs?
- Delicate balance for CSOs between a push and counterproductive coercion.

Conclusions

- Challenges regarding “couple therapy” when delivered online.
- Common factors (e.g seeking treatment, assessment) likely explain part of the results.
- CSO health and satisfaction important outcome in its own right.

Studies

- Feasibility study:
 - Nilsson, A., Magnusson, K., Carlbring, P., Andersson, G., & Gumpert, C. H. (2018). The development of an internet-based treatment for problem gamblers and concerned significant others: A pilot randomized controlled trial. *Journal of Gambling Studies*, 34(2), 539-559.

- RCT:
 - Nilsson, A., Magnusson, K., Carlbring, P., Andersson, G., & Hellner, C. (2020). Behavioral couples therapy versus cognitive behavioral therapy for problem gambling: A randomized controlled trial. *Addiction*, 115(7), 1330-1342.

- Qualitative study:
 - Nilsson, A., Simonsson, O., & Hellner, C. (2021). Reasons for dropping out of internet-based problem gambling treatment, and the process of recovery—a qualitative assessment. *Current Psychology*, 1-12.

References

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