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Adolescent gambling: Still a cause for concern?

Problem adolescent gamblers were more likely than other children to have other addictive behaviours, more likely to report that their parents approved, to be male, have begun gambling at an early age, have had a big win early on, and to be from a lower social class. Very few adolescent problem gamblers turn up for treatment.

This article briefly overviews some of the latest research into adolescent gambling and briefly overviews the recent 2005 Gambling Bill in relation to adolescent gambling measures. Based on the most recent findings, it is argued that adolescent gambling is still a cause for concern.

Legislation

Currently children of any age can enter a bingo club as long as they do not take part in the game. From the age of 16, young people may bet on the football pools, and from age 18 they may enter a betting shop, place a bet, and work there. At age 18 they may also enter any premises where gaming takes place, for example a casino. As a general rule gambling is considered to be an adult activity although the UK is unusual in that there is no law preventing children and adolescents gambling on fruit machines in seaside arcades and family leisure centres (see below).

Gambling Act 2005

The most recent legislation is the Gambling Act 2005, which will replace existing law on gambling in England, Scotland and Wales. This Act will not be fully implemented until 1 September 2007. Gambling in relation to the National Lottery remains separate, and young people may play and sell national lottery tickets and scratch cards from the age of 16. The new Act will not change any of the above age limits in relation to gambling. However, under 18s

will be permitted to enter non-gambling areas of regional casinos to access leisure, cultural or sporting facilities.

The rules for gaming machines will also change. Under 18s will be able to play them (currently there is no legal minimum age restriction but operators can sign up to a voluntary code to exclude under 16s or 18s) but only for a maximum prize of £5 (in cash or in kind), and a maximum stake of 10p (or 30p if the prize is not cash). The Act contains a provision for the Secretary of State to create an age limit for gaming machines (and associated offences) after consultation with the Gambling Commission, representatives of the gambling business, and those who have knowledge of social problems relating to gambling.

Protection of children

Part 4 of the new Act concerns the protection of children (those under 16) and young people (16-18 year olds). This part contains offences to protect children from being invited to gamble, or gamble; from being invited to enter, and entering, premises where gambling takes place; and from employment in gambling environments. Penalties for commission of these gambling offences by young people carry a level 3 (£1000) fine.

Independent Gambling Commission

The 2005 Act establishes a new

independent Gambling Commission to license and regulate commercial gambling through casinos, bingo, betting, pool betting, larger charity lotteries and remote technologies such as the Internet. The new licensing objectives set out in section 1 are:

- ♦ Preventing gambling from being a source of crime and disorder, being associated with crime or disorder or being used to support crime
- ♦ Ensuring that gambling is conducted in a fair and open way, and
- ♦ Protecting children and other vulnerable persons from being harmed or exploited by gambling

The Gambling Commission must:

- ♦ Promote the licensing objectives
- ♦ Issue codes of practice about the way in which facilities for gambling are provided, including the arrangements that a person providing facilities for gambling must make to:
 - (a) ensure that gambling is conducted in a fair and open way
 - (b) protect children and other vulnerable persons from being harmed or exploited by gambling, and
 - (c) make assistance available to persons who are or may be affected by problems relating to gambling
- ♦ Issue guidance to local authorities
- ♦ Advise the Secretary of State about the
 - (a) incidence of gambling
 - (b) manner in which gambling is carried on
 - (c) effects of gambling, and
 - (d) regulation of gambling
- ♦ Investigate the commission of gambling offences and institute criminal proceedings

Prevalence

In 2000, research was commissioned by the National Lottery Commission as part of an ongoing tracking survey to monitor young people's gambling behaviour and attitudes towards gambling¹. Three waves have been completed so far: 1997, 1999 and 2000 (and with a fourth wave currently under way). The survey was also designed to identify the prevalence of 'problem gambling' by under-16s on the National Lottery, scratch cards and fruit machines.

The 2000 sample consisted of 11,581 12- to 15-year olds drawn from a representative sample of 131 schools in England and Wales. The latest wave found that 22% had gambled weekly on fruit machines (55% in the previous year), 9% had gambled weekly on National Lottery scratch cards (36% in the previous year), and 7.6% weekly on the National Lottery draw (26% in the previous year).

Problem gambling

There are many definitions of problem gambling although most agree that that the consequences compromise, disrupt and/or damage family, occupational, personal and/or recreational pursuits.² The British Gambling Prevalence Survey³ found that just under 1% of the UK adult population are problem gamblers (approximately 275,000 - 325,000 people). However the proportion of problem gamblers is higher amongst 16-24 year-olds (1.7%) than for over-25s (0.5%). The problem gambling rate in adolescents is two to three times higher in adolescents², particularly as a result of problematic fruit machine gambling which is legally available to children and adolescents.

Screening instrument

The most widely used screening instrument for measuring problem gambling behaviours in youth (DSM-IV-MR-J) includes a set of nine criteria. A person who meets four or more of these criteria is identified as a problem gambler. The criteria⁴ are that the young person:

- is preoccupied with gambling
- needs to gamble with increasing sums of money in order to achieve the desired excitement
- is restless or irritable when attempting to cut down on gambling
- gambles as a way of escaping from problems or relieving depression
- after losing money gambling, often returns another day in order to get even
- lies to family members or others to conceal

- the extent of involvement with gambling
- often spends much more money on gambling than intended
- committed antisocial or illegal acts, such as using their school fare or dinner money, or stealing from family or others, in order to finance gambling
- has fallen out with family, truants from school, or has disrupted schooling because of gambling

Problem gambling behaviours

The 2000 survey¹ also screened the 11,581 12-15 year-olds for problem gambling behaviours. In total 4.9 % from the sample were problem gamblers (3.2% fruit machines, 0.5% scratch cards, and 1.2% fruit machines and scratch cards combined). The survey found that these problem gamblers were more likely than other children to have other addictive behaviours, (i.e., to have smoked cigarettes, drunk alcohol and taken illegal drugs in the past week) confirming other large scale UK studies⁵. Although these can be shown to be associated with problem gambling, they are not necessarily causal factors.

Parental gambling

Parental gambling and attitudes were also key. The parents of the children identified as problem gamblers were twice as likely to have gambled on each of nine different commercial gambling games than the parents of other children. They were also more likely than other children to report that their parents approved, or did not mind, if young people their age spent money gambling on fruit machines or National Lottery products. This confirms the findings of other independent UK studies^{6,7}.

Further research

Further research has shown that adolescent problem gamblers are also more likely to be male, have begun gambling at an early age, have had a big win early on, and to be from a lower social class.^{4,8} In addition to the risk factors based on personal characteristics, the social and physical environment in which young people gamble and the gambling activity also play a part. There has been increasing research examining the situational and structural characteristics of gambling. This research has indicated that the most addictive gambling activities to be those that involve high event frequencies, short interval between stake and payout, near misses, a combination of very high prizes and frequent winning of small prizes, and

suspension of judgement^{9,10,11}

Identifying the problem

Gambling has often been termed "the hidden addiction". This is because⁸:

- There are no observable signs or symptoms like other addictions (e.g. alcoholism, heroin addiction etc.)
- Money shortages and debts can be explained away with ease in a materialistic society
- Adolescent gamblers do not believe they have a problem or wish to hide the fact
- Adolescent gamblers are exceedingly plausible and become adept at lying to mask the truth
- Adolescent gambling may be only one of several excessive behaviours

Warning signs

Griffiths^{4,8} reports there are a number of possible warning signs to look for although individually, many of these signs could be put down to adolescence. However, if several of them apply to a child or adolescent it could be that they will have a gambling problem. The signs include:

- No interest in school highlighted by a sudden drop in the standard of schoolwork
- Unexplained free time such as going out each evening and being evasive about where they have been
- Coming home later than expected from school each day and not being able to account for it
- A marked change in overall behaviour (that perhaps only a parent would notice). Such personality changes could include becoming sullen, irritable, restless, moody, touchy, bad-tempered or constantly on the defensive
- Constant shortage and borrowing of money
- Money missing from home (e.g., from mother's purse or father's wallet)
- Selling personal possessions and not being able to account for the money
- Criminal activity (e.g., shoplifting in order to sell things to get money for gambling)
- Coming home hungry each afternoon after school (because lunch money has been spent on gambling)
- Loss of interest in activities they used to enjoy
- Lack of concentration and a "couldn't care less" attitude
- Lack of friends and/or falling out with friends
- Not taking care of their appearance or personal hygiene
- Constantly telling lies (particularly over money)

However, many of these "warning signs" are not necessarily unique to gambling addictions and can also be indicative of other addictions (e.g., alcohol and other drugs).

Conclusion

Adolescent gambling is still a cause for concern with a small but significant minority of adolescents having a severe gambling problem. Following the full implementation of the Gambling Act 2005, the newly established Gambling Commission will need to further monitor young people's gambling behaviours. This should help to identify whether age restrictions should be imposed on gaming machines, and examine the extent to which the gambling offences in relation to young people have been used.

Young people's access to the leisure and cultural facilities based in regional casinos needs to be researched to see whether this normalises gambling as a social activity. This is key in the context of the implementation of the Youth Matters¹² proposals to provide young people with 'somewhere to go and something to do'. Are young people attracted to gambling venues such as arcades in order to gamble, or are they hanging out there because it provides a warm and dry place for them to meet their friends away from home?

Although there are clear gaps in the literature, there are many studies all

showing that a small but significant minority of children and adolescents have a gambling problem. However, there is a lack of evidence of how current social support systems assess and respond to young people's problem gambling behaviours, and a Common Assessment Framework has been suggested as a tool¹³. Further research is also needed into the adequacy of treatment and support for young people who are problem gamblers as very few adolescent problem gamblers turn up for treatment^{14,15}.

Note: Some of the material from this article was taken from a 2006 National Children's Bureau 'Highlights' document (Young People and Gambling) written by the authors.

References

1. Ashworth, J, Doyle, N., and Howat, N. (2000). *Under 16s and the National Lottery: Tracking survey July 2000*. BMRB International Ltd. London: National Lottery Commission.
2. Griffiths, M. (2004). Betting your life on it. *British Medical Journal*, 329, 7474, 1055-1056.
3. Sproston, K, Erens, B., and Orford, J. (2000). *Gambling Behaviour in Britain: Results from the British Gambling Prevalence Survey*. London: National Centre for Social Research.
4. Griffiths, M.D. (2002). *Gambling and Gaming Addictions in Adolescence*. Leicester: British Psychological Society/Blackwells.
5. Griffiths, M.D., and Sutherland, I. (1998). Adolescent gambling and drug use. *Journal of Community and Applied Social Psychology*, 8, 423-427.

6. Wood, R.T.A., and Griffiths, M.D. (1998). The acquisition, development and maintenance of lottery and scratchcard gambling in adolescence. *Journal of Adolescence*, 21, 265-273.

7. Wood, R.T.A., and Griffiths, M.D. (2004). Adolescent lottery and scratchcard players: Do their attitudes influence their gambling behaviour? *Journal of Adolescence*, 27, 467-475.

8. Griffiths, M.D. (1995). *Adolescent Gambling*. London: Routledge.

9. Griffiths, M.D. (1993). Fruit machine gambling: The importance of structural characteristics. *Journal of Gambling Studies*, 9, 101-120.

10. Griffiths, M.D. (1999). Gambling technologies: Prospects for problem gambling. *Journal of Gambling Studies*, 15, 265-283.

11. Griffiths, M.D., and Parke, J. (2003). *The environmental psychology of gambling*. In G. Reith (Ed.), *Gambling: Who wins? Who Loses?* pp. 277-292. New York: Prometheus Books.

12. Department for Education and Skills. (2005). *Youth Matters (Cm 6629)*. London: DFES.

13. Department for Education and Skills. (2004). *Common Assessment Framework*. Consultation. London: DFES.

14. Griffiths, M.D. (2001). Why don't adolescent gamblers seek treatment? *Journal of Gambling Issues*, 5. Located at: <http://www.camh.net/egambling/issue5/opinion/index.html>

15. Chevalier, S. & Griffiths, M.D. (2004). Why don't adolescents turn up for gambling treatment (revisited)? *Journal of Gambling Issues*, 11. Located at: http://www.camh.net/egambling/issue11/jgi_11_chevalier_griffiths.html

FE & 6th FORM HEALTHY COLLEGE NEWS FROM SHEU

Cannabis

The chance of Dutch teenagers using hard drugs later in life is six times greater among those who use cannabis than among those who don't. For more details search for the publication 'Behavior Genetics' at... <http://www.springerlink.com> then... search for the author 'Lynskey'.

Cannabis use moderately increases the risk of psychotic symptoms in young people but has a much stronger effect in those with evidence of predisposition for psychosis. For more details search for author 'Henquet' at... <http://bmj.bmjournals.com>

The 2005 USA 'Monitoring the Future' survey revealed an almost 19 percent decline in past month use of any illicit drug by 8th, 10th, and 12th graders (13-18 year olds) between 2001 and 2005. Since 2001, past month use of marijuana has fallen by 28 percent among 8th graders and by 23 percent among 10th graders. The survey revealed continued high rates of non-medical use of prescription medications, especially opioid painkillers. For further details visit... www.monitoringthefuture.org

FE students

Data from over 1700 UK FE students found...

- ▷ 47% of males and 54% of females said that they 'felt a real part of their college'
- ▷ 34% overall said that they were included in lots of activities at college
- ▷ 54% of males and 66% of females said that their level of effort in their course was 'high or very high'
- ▷ 29% of students said that they had too much

Further details from www.sheu.org.uk/whoweworkwith/fe.htm

Alcohol

Americans, aged 15 to 26 years, who saw more alcohol advertisements on average drank more. When looking at those under 21 years of age - the legal drinking age in the USA - there were similar results. Those exposed to more alcohol advertisements showed increases in drinking levels into their late 20s, but drinking plateaued in the early 20s for those exposed to fewer alcohol advertisements

Further details from... www.commercialalert.org/alcoholnsnyder.pdf

Parents not peer pressure is thought to be responsible for UK teenage binge drinking. A significant link has been discovered between the extent that parents encourage drinking and both drinking frequency and intensity, challenging the view that peer pressure is mainly to blame for the increasing levels of alcohol consumption amongst 15-16 year olds. The research, which was carried out by Dr John Marsden and colleagues from the Institute of Psychiatry, was published in the September 2005 issue of the *British Journal of Developmental Psychology*. Further details from the website of the Institute of Alcohol Studies... http://www.ias.org.uk/publications/alert/05issue2/alert0502_p23.html

The above items are extracted from the FE & 6th FORM HEALTHY COLLEGE NEWS FROM SHEU which is usually sent via email and appears, on average, about once a month.

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