

The Impact of COVID-19 on Problem Gamblers treatment providers in Canada

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Short Summary

The COVID-19 pandemic has resulted in limited access to treatment resources for problem gamblers, but internet gambling venues remained accessible and are subjected to very little regulation. This study examined how problem gamblers and problem gambling counselors have been impacted by COVID-19. Specifically, this study examined how mental health services for problem gamblers have adapted their treatment services to the COVID-19 pandemic. Counselors and clients from two Canadian provinces were surveyed to explore how clinicians who work with problem gambling clients have adapted to the pandemic and what training they require to improve their ability to deliver safe and effective treatment. Results show increases in counselor and client distress levels and increases in services by phone and online methods during the pandemic. Although face-to-face counseling was rated the most successful method, preferences for future methods were largely for phone and video-calling counseling. Keeping clients engaged was the most challenging factor in delivering counseling during the pandemic. Counselors indicated additional training is needed on how to conduct video group discussions with clients.

Survey:

The online survey of problem gambling counselors asked the participants how they have adapted to the COVID-19 pandemic, in particular, if they are offering services during this pandemic and whether they feel their training and support are sufficient for the challenges the pandemic has raised.

Recruitment and Consent

The advertisement was posted on Evidence Exchange Network (EENet), an online knowledge exchange platform for mental health and addictions, inviting people who subscribe to EENet to participate in the study. A total of 16 gambling professionals completed the survey; 15 were from Ontario, and one was from Prince Edward Island. The link in the ad, brought up the informed consent form, followed by the survey if they consented. The survey took 15 to 30 minutes and was placed entirely online. If a person clicked on the link, they were taken to the survey. No personal information was collected, and the survey was anonymous.

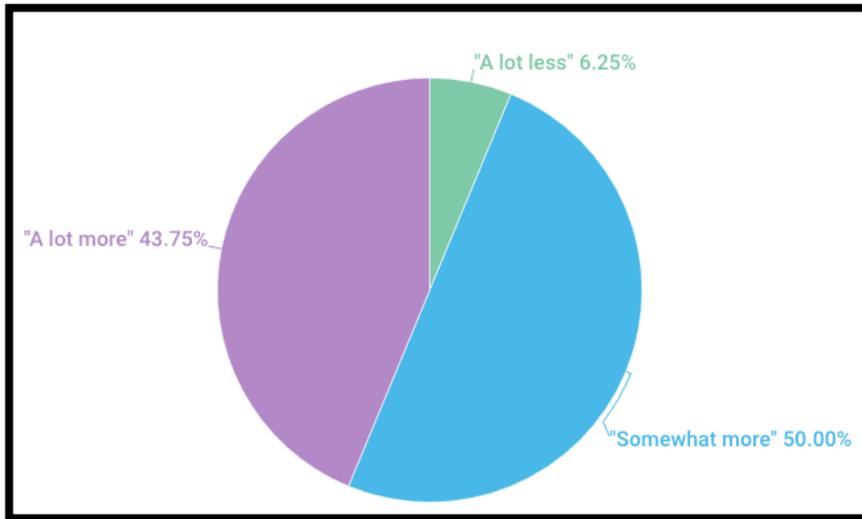
Results

Distress Level. We asked the counsellors how much distress their clients were experiencing during the pandemic. Only one counsellor (6.25%), indicated their clients displayed “a lot *less* distress”

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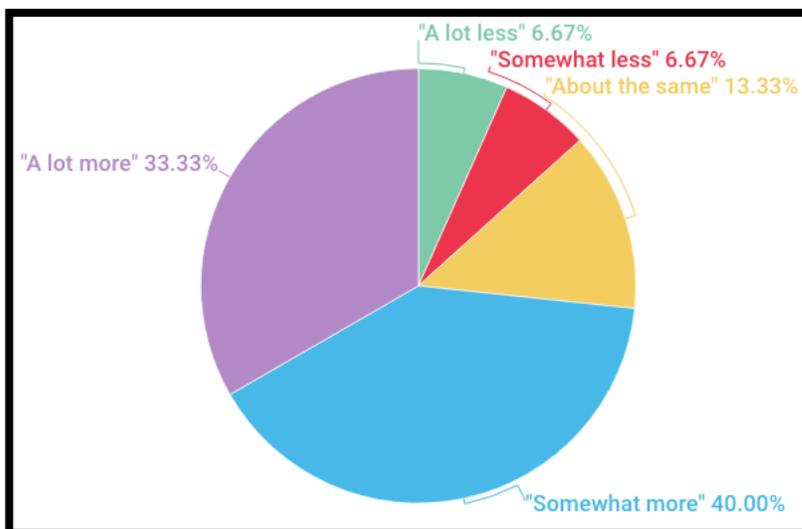
since Covid-19 (See Figure 1). All other participants indicated either “somewhat more” or “a lot more” distress among their clients during the pandemic.

Figure 1: Client distress level during the COVID-19 pandemic.



The counsellors were also asked about their own level of distress. The majority (73.3%) of counsellors reported increased distress during the pandemic. As shown in Figure 2, 33.3% of counsellors felt “a lot more distress” and 40% felt “somewhat more distress” since the start of Covid-19.

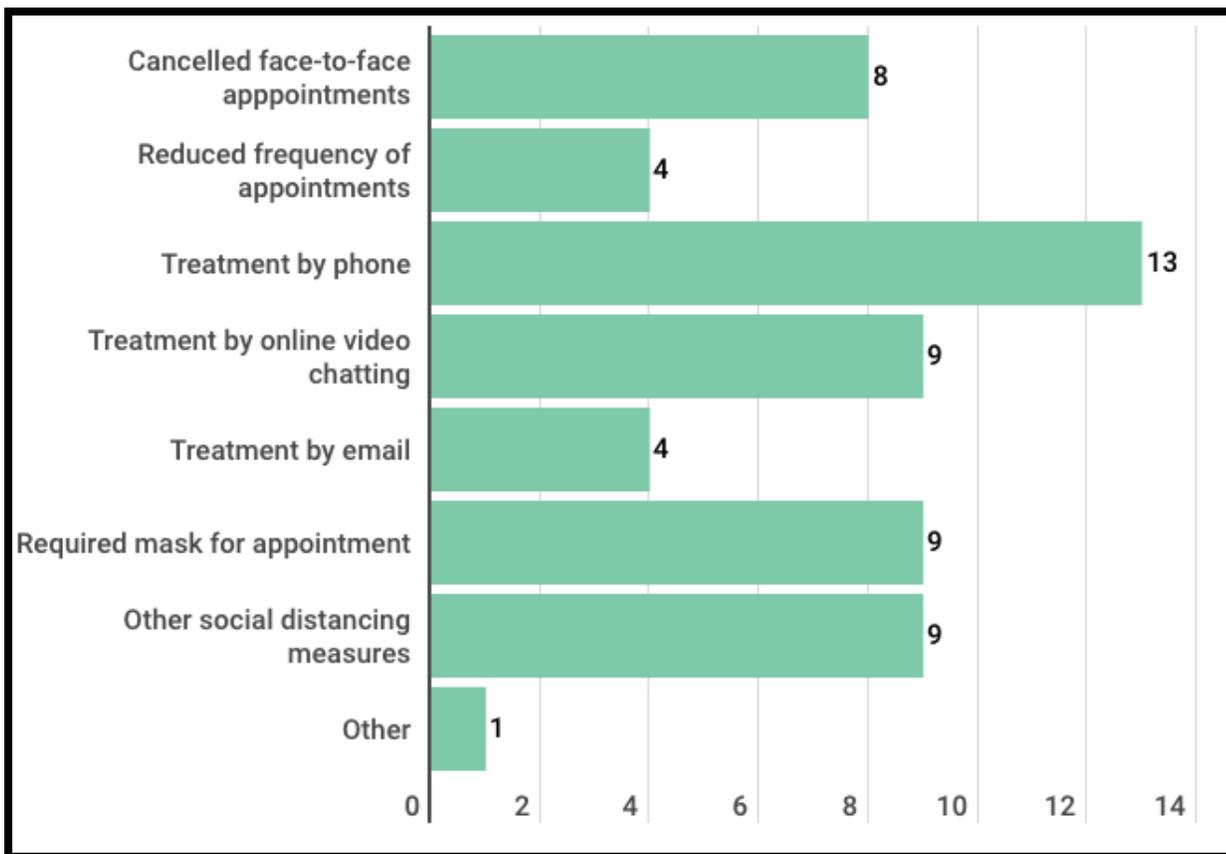
Figure 2: Counsellor distress level during the Covid-19 pandemic.



Modification of Counselling Services

In terms of modifying counselling sessions, participants indicated a shift from in-person treatment to other forms of counselling including relying more on telephone, and video chatting. Findings from the survey show that many cancelled face-to-face appointments (as indicated by eight counsellors). In addition, four counsellors reduced the number of appointments they had. This led to increases in other forms of service including an increased use of telephones by 13 of the 16 counsellors, providing treatment using online video chat by 9 counsellors and email by 4 counsellors. Modifications for in-person sessions were reported by nine counsellors who reported requiring masks use for appointments and nine counsellors who reported putting other social distancing measures in place (See Figure 3).

Figure 3: Modification of counselling services since the Covid-19

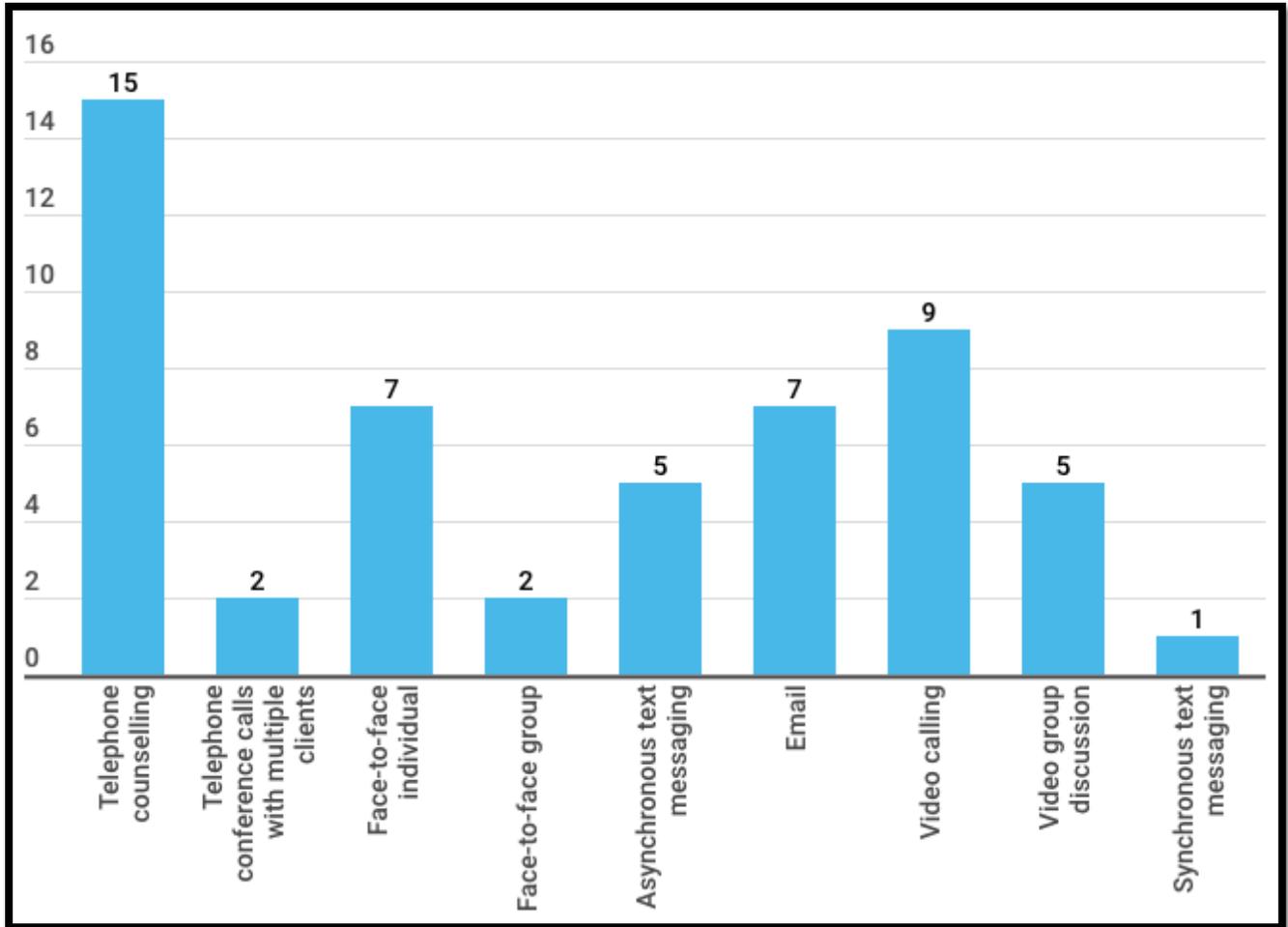


Types of Counselling Methods Used During the Pandemic. As a result of the modifications required to continue counselling services because of the pandemic lockdowns, different kinds of services were more widely used. Counseling services post-pandemic saw an increase in electronic forms of treatment used by the participants. Findings from the survey found that majority of counsellors (15/16) used telephone for counseling. Video calling was the second most used type of counseling after telephone counseling with nine counselors who said they relied on that method during the pandemic. Lastly, methods like

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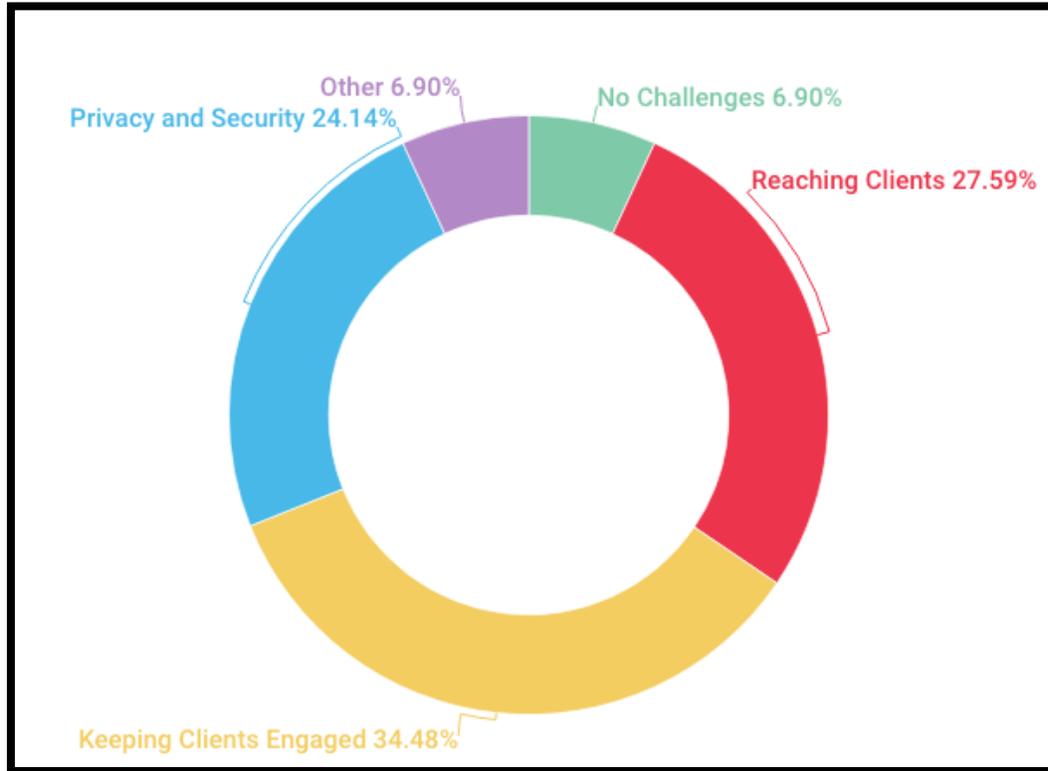
email and text messaging were also used during this time with seven counselors using email and five counselors using text messaging as a method to provide service (See Figure 4).

Figure 4: Type of counselling used during the pandemic



Challenges of delivering counselling during the pandemic. Counsellors voiced a few concerns they had with modifications made in response to the pandemic. The biggest factor was keeping clients engaged, which 34.5% said was a challenge. Another challenge was being able to reach clients, which 27.6% said was a struggle. Due to the inherently private nature of counselling, the switch to online treatment meant that 24.1% voiced concerns about privacy and security with these methods (See Figure 5).

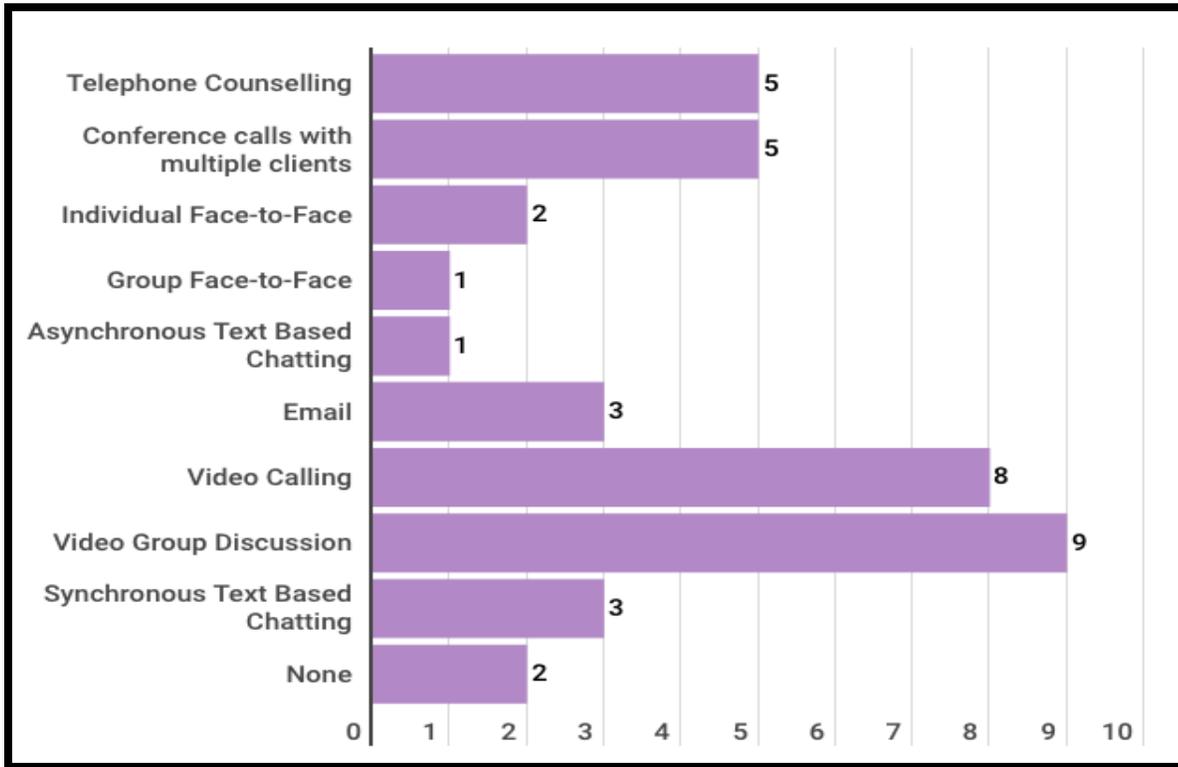
Figure 5: Challenges of delivering counselling during Covid-19



Additional Training Needed for Counsellors. According to the survey, many counsellors shared that they need or want additional training on certain types of counselling treatments, especially given the modifications to traditional ones due to the pandemic. The method on which many of the counsellors indicated they wanted more training was video group discussions (9/16 counsellors). Eight counsellors said they wanted more training on video calling. This was followed by telephone counselling and conference calls with multiple clients with five counsellors sharing they wanted more training on these. Additionally, three counsellors said they would like more training with email and synchronous text-based chatting each (See Figure 6).

Open ended feedback. The survey also included several open-ended questions. The qualitative data revealed that many counselors voiced problems with the use of online methods such as problems with unstable internet connections, problems with booking/scheduling clients, and issues with their current work platforms or access to reach clients using new online methods. These problems not only impact those that are able to access these forms of treatment, but also significantly impact those that do not have access or cannot gain access to online treatment. When asked about client populations who they are particularly concerned about, many counselors voiced the inability of vulnerable populations to access the modified treatment methods during the pandemic. Specifically, those vulnerable populations include people

Figure 6: Methods counsellors need additional training on



without access to technology, senior citizens, people living in poverty, and those who are struggling with homelessness and/or mental health issues.

Conclusions

Overall, the pandemic led to significant changes to the way counselors can provide treatment to clients with problem gambling during the pandemic. Although these modified methods of treatment were successful, they raised concern regarding populations who do not have access to these methods such as the vulnerable populations mentioned above. Future training for counselors on these new methods and hopefully with the end of the pandemic near, treatment options may widen for all those in need. The findings from this study provide valuable information about the impact of the pandemic on treatment professionals for problem gambling as well as providing some guidance to their future training needs.

Limitations: All but one of the participants were from Ontario. The number of participants in this study is small. This report is a preliminary summary and we have expanded the survey to include counsellors who work with clients with other psychological issues such as addictions and mood disorders. The conclusions would be clearer with greater participation.