

GAMBLING AND CLIENTS OF ACT CORRECTIONS

FINAL REPORT

Ms Julie Lahn

Professor Peter Grabosky

Centre for Gambling Research

Regulatory Institutions Network

Australian National University

JUNE 2003



TABLE OF CONTENTS

EXECUTIVE SUMMARY	4
INTRODUCTION	7
GAMBLING IN THE ACT	7
PROJECT TERMS OF REFERENCE	8
LITERATURE REVIEW	9
DEFINING AND MEASURING PROBLEM GAMBLING	9
PROBLEM GAMBLING PREVALENCE AMONG CORRECTIONAL POPULATIONS	13
PREVALENCE OF OFFENDING AMONG PROBLEM GAMBLERS	19
SCREENING FOR AND TREATING OFFENDERS WITH GAMBLING PROBLEMS	28
THE SURVEY	37
QUESTIONNAIRE	37
AUSTRALIAN NATIONAL UNIVERSITY ETHICS APPROVAL	37
PARTICIPANT RECRUITMENT AND SAMPLING	37
INTERVIEWING	38
CONSENT BY PARTICIPANTS	38
SURVEY RESULTS	39
REPRESENTATIVENESS	39
DRUG USE BY SURVEY PARTICIPANTS	43
OFFENCES	44
GAMBLING PARTICIPATION	46
GAMBLING WHILE INCARCERATED	48
PROBLEM GAMBLING	49
DEMOGRAPHICS OF PROBLEM GAMBLERS	51
GAMBLING PARTICIPATION BY PROBLEM GAMBLERS	53
COMORBIDITY	55
GAMBLING AND OFFENDING	56
COMPARING CRIMES COMMITTED BY DRUG USERS AND PROBLEM GAMBLERS	58
SELF-ASSESSMENT F GAMBLING PROBLEMS AND HELP SEEKING	60
COMPARING HELP SEEKING FOR GAMBLING, ALCOHOL AND DRUG PROBLEMS	62
SUMMARY OF SURVEY RESULTS	63
REFERENCES	64
APPENDICES	71
APPENDIX 1: QUESTIONNAIRE	71
APPENDIX 2: CONSENT FORM	76
APPENDIX 3: INFORMATION SHEET	77
APPENDIX 4: LIFETIME GAMBLING ACTIVITIES BY CORRECTIONAL FACILITY	78
APPENDIX 5: SOCIO-DEMOGRAPHIC COMPARISON OF SURVEY SAMPLE AND CORRECTIONS ADMISSIONS	79

LIST OF TABLES

TABLE 1: PROBLEM GAMBLING PREVALENCE RATES RECORDED IN CORRECTIONAL POPULATIONS	18
TABLE 2: REPORTED RATES OF GAMBLING RELATED OFFENCES	27
TABLE 3: SUBSTANCE USE (CIGARETTES, ALCOHOL, ILLEGAL DRUGS)	43
TABLE 4: DRUG USE BY SURVEY PARTICIPANTS AND GENERAL ACT POPULATION	43
TABLE 5: OFFENCE CATEGORIES WITH AUSTRALIAN NATIONAL CLASSIFICATION OF OFFENCES (ANCO) CODES	44
TABLE 6: OFFENCES COMMITTED BY SURVEY PARTICIPANTS	45
TABLE 7: LIFETIME AND 12 MONTH GAMBLING PARTICIPATION	46
TABLE 8: RAW SCORES FROM THE ADMINISTERED SOGS	49
TABLE 9: GROUPED SOGS SCORES	49
TABLE 10: MAIN SOCIO-DEMOGRAPHICS OF PROBLEM GAMBLERS	51
TABLE 11: LIFETIME AND 12 MONTH GAMBLING PARTICIPATION BY SOGS 5+ PROBLEM GAMBLERS	54
TABLE 12: DRUG USE BY SOGS GROUPS	55
TABLE 13: CURRENT OFFENCES COMMITTED ACCORDING TO SOGS CATEGORIES	56
TABLE 14: GAMBLING RELATED OFFENCES	57
TABLE 15: OFFENCES COMMITTED BY USERS OF ALCOHOL AND ILLEGAL DRUGS	58
TABLE 16: SELF ASSESSED GAMBLING PROBLEMS ACCORDING TO SOGS GROUP	60
TABLE 17: 'TRIED TO GET HELP FOR GAMBLING'	61
TABLE 18: CORRECTIONAL ADMISSIONS AND SURVEY SOCIO-DEMOGRAPHIC DATA	79

LIST OF FIGURES

FIGURE 1: SURVEY SAMPLE BY AGE	39
FIGURE 2: CORRECTIONS ADMISSIONS BY AGE	39
FIGURE 3: SURVEY SAMPLE BY GENDER	40
FIGURE 4: CORRECTIONS ADMISSIONS BY GENDER	40
FIGURE 5: SURVEY SAMPLE BY EMPLOYMENT STATUS	41
FIGURE 6: CORRECTIONS ADMISSIONS BY EMPLOYMENT STATUS	41
FIGURE 7: SURVEY SAMPLE BY INDIGENEITY	41
FIGURE 8: CORRECTIONS ADMISSIONS BY INDIGENEITY	41
FIGURE 9: SURVEY SAMPLE BY OFFENCE	42
FIGURE 10: CORRECTIONS ADMISSIONS BY OFFENCE	42

EXECUTIVE SUMMARY

- In the ACT, as in the Australian population, the majority of people regularly participate in gambling activities. The purchase of lottery and instant scratch tickets, and use of club gaming machines comprise the highest participation in gambling in the ACT.
- While many people gamble without experiencing any adverse consequences, for some people, gambling creates difficulty in their lives. Problem gambling can be defined by the negative effects that gambling activities have on the gambler, their personal relationships, working life and the wider community.
- In 2001, the rate of problem gambling within the general ACT population was conservatively estimated as being 1.91%.
- Prior to this study being conducted the prevalence of problem gambling among clients of ACT Corrections was unknown.
- This project seeks to address this knowledge gap. The project is guided by four terms of reference. The specified terms are to provide:
 1. a literature review on gambling in correctional populations
 2. a discussion of the relationship between gambling and criminal activity
 3. results of a survey of clients of ACT Corrections, and
 4. an overview of counselling services for problem gamblers in correctional populations.
- The current study comprised a survey based on the lifetime and 12 month versions of the gambling screen, the South Oaks Gambling Screen (SOGS). In addition, the survey also contained questions relating to gambling and offending, gambling while a client of ACT Corrections, questions relating to drug and alcohol use, and help-seeking behaviour. For the present study, the SOGS offers the greatest comparability with other Australian and international correctional studies.
- Persons surveyed were predominantly male, aged between 18 and 35. More than half had not completed secondary school and had never been married. More than half the survey respondents usually did unskilled or trades work, but many of these people were unemployed at the time of their most recent entry into the

correctional system. The majority of participants did not identify with an ethnic group and the vast majority were non-indigenous.

- Survey participants were broadly representative in terms of the general ACT correctional population demographics. One significant point of difference was that the remand population was dominated by Indigenous persons. This survey conducted few interviews with Indigenous people across all correctional facilities.
- Offences committed by survey participants and the general correctional population were also broadly similar, with both having committed high levels of violent crimes, property related crimes and traffic offences.
- Legal and illegal drug use was high among both survey participants and the general correctional population.
- Those surveyed gambled mainly on poker machines both during their lifetime and in the 12 months prior to their conviction. Gambling participation rates were lowest in relation to dice games, betting on sports with a bookie, bingo, stock market trading, and playing sporting games for money.
- The survey found that 34.3% of survey participants have some form of gambling problem. This figure is within the range of other studies focusing on offenders and gambling. Gambling is a severe problem for 15.7% of all persons surveyed. These figures are substantially higher than general ACT population estimates.
- The majority of identified problem gamblers played poker machines most often in both lifetime and 12 month time frames. After pokie playing, gambling participation also featured betting on horses or dogs, playing sporting games for money, betting on sports with a bookie and bingo.
- Legal and illegal drug use was substantially higher among survey participants than found among the general ACT population. While all forms of drug use decreased as the rate of gambling participation and gambling problems increased, drug use by problem gamblers identified in this offender survey remained substantially higher than the general population.
- The most serious current offences recorded for problem gamblers were property crime (37.1%), violent crimes (28.6%) and traffic offences such as drink driving

(17.1%). Other studies of gambling among offenders, have generally highlighted property crime and fraud as the main offences committed by problem gamblers. In this study, the rate of fraud crimes among problem gamblers was lower than expected at 8.6%.

- For some surveyed problem gamblers, their offending can be described as being co-symptomatic or coincidental to their gambling. For other surveyed offenders, gambling directly related to their offending. 25.7% of problem gamblers said that their gambling had contributed to their offending. 45.7% of problem gamblers said that they had stolen or obtained money illegally to finance their gambling or to pay off accrued gambling debts.
- Only 25.7% of problem gamblers identified in this survey had sought help for a gambling problem. Moreover, not all of these persons sought help of their own volition. Some persons who sought help were obliged to do so in order to fulfil court orders.
- A significant conclusion of this study is that gambling problems among offenders need to be identified in the correctional system, as most will not identify themselves as having a problem and most will not seek help on their own. ACT Corrections may wish to consider routine screening of offenders at the pre-sentencing stage.

INTRODUCTION

Gambling in the ACT

- **In the ACT, as in the Australian population, the majority of people regularly gamble. The purchase of lottery and instant scratch tickets, and use of club gaming machines comprise the highest participation in gambling in the ACT.**

The ACT gambling survey (AIGR 2001a:124) reported that around 75% of people in the ACT had gambled in the year prior to being surveyed and 36% had gambled once a week or more during the same period. During the previous 12 months, the highest participation in gambling activities was via lotteries, instant scratch tickets, and club gaming machines.

- **The rate of problem gambling within the ACT general population was conservatively reported as being 1.91% in 2001.**

The ACT gambling survey (AIGR 2001a:70) estimated that problem gambling in the ACT was at 1.91% (n=5297), which is slightly lower than the estimated 2.01% national rate (Productivity Commission 1999 cited in AIGR 2001a:70). The 0.5% prevalence of more 'severe problem gamblers' in the ACT (1250 persons registering 10+ on the SOGS scale) was however, slightly higher than the national figures (AIGR 2001a).

- **One of the roles of the ACT Gambling and Racing Commission is to conduct or sponsor research into the nature and extent of gambling and problem gambling in the community.**

The ACT Gambling and Racing Commission has noted an increase in community concerns regarding the prevalence of gambling since the release of the Productivity Commission 1999 report (ACTGRC 2002:8). At the same time, those organizations/businesses who provide gambling activities have indicated a concern to limit the incidences and effects of problem gambling. One of the ACT Gambling and Racing Commission's roles in this regard is to respond to these concerns to ensure that ethical practice ensues and harm minimisation strategies are in place in the gambling

industry. The Commission is concerned that it “minimises the possibility of criminal or unethical activity; and reduces the risks and costs, to the community and individuals concerned, of problem gambling” (s7).

The ACT Gambling and Racing Commission has sought to improve knowledge of participation in gambling by a commitment to monitoring and researching gambling activities, including the effects that gambling has on the ACT community (s6.2 of the *GRC Act 1999*). Within these broad functions, the Commission has a number of roles stipulating that it conduct internal research into the social and economic effects of gambling, or provide funding for outside agencies to fulfil this requirement (s17 (2)). In this regard, the Commission has jointly funded the establishment of the Centre for Gambling Research at the Australian National University to generally enhance research into gambling. It has also funded research projects (e.g. AIGR 2001a; AIGR 2001b), including the current study, that investigate the prevalence and impact of gambling and problem gambling in the ACT.

Project Terms of Reference

This report was prepared as part of the project 'Gambling and Clients of ACT Corrections' undertaken by Professor Peter Grabosky and Julie Lahn of the Centre for Gambling Research, Australian National University.

The project is guided by four terms of reference. The specified terms were to provide:

1. a literature review on gambling in correctional populations
2. a discussion of the relationship between gambling and criminal activity
3. results of a survey of clients of ACT Corrections, and
4. an overview of counselling services for problem gamblers in correctional populations.

An Interim Report was finalised on the 15 May. It addressed three of the four terms of reference listed above: items 1, 2 and 4. This Final Report details the outcomes of the survey in relation to the literature on gambling and offenders.

LITERATURE REVIEW

Defining and Measuring Problem Gambling

- **There is some debate surrounding the best method for defining and measuring gambling participation. Prevalence studies in the majority of Australian and international cases have used the SOGS questionnaire.**

In Australian and international prevalence studies, the South Oaks Gambling Screen (SOGS) has been the predominant assessment instrument used (Abbott and Volberg 1999, AIGR 1997:20-1, Battersby et.al. 2002). Invented by Lesieur and Blume (1987). The SOGS was developed specifically to test for evidence of a 'pathological gambling' disorder in respondents. The SOGS questionnaire consists of 35 questions, of which 20 are counted. The answers to each of the 20 questions counted are assigned a value of either 0 or 1. The questions focus on identifying the type and frequency of a respondent's gambling activities, the largest amount ever gambled, any parental gambling problems, each respondent's self-perception relating to their gambling, any effect gambling has had on personal relationships, work attendance, and the funding sources for gambling— own money, another's money, credit, loans, or crime. Respondents with a score of less than 3 are categorised as being 'non-pathological gamblers', while a score of 3 or 4 indicates a 'potential problem gambler' and a score of 5 or more indicates a 'probable pathological gambler'.

The evolving term 'pathological gambling' has been developed to classify the existence high calculated rates of gambling participation that brings harm or disruption to gamblers' lives and that of others (family, friends, work relationships). The term pathological gambling was created by the American Psychiatric Association (DSM III) and is classified as an 'impulse-disorder'. More recently, pathological gambling has been revised as an 'addiction', and thus, akin to substance abuse (DSM III-R). These understandings of Pathological Gambling have been criticised for taking an overtly medicalised approach to the issue, which obscures or ignores the "broader environmental, socio-cultural, political and economic factors" (AIGR 2001a:65; see also AIGR 1997, Battersby et.al. 2002, Dickerson 1997, Productivity Commission 1999, Walker 1996).

A second critique has emerged regarding the term Pathological Gambling and the SOGS test created to identify the disorder. It has been suggested that both are inappropriate in Australian contexts (e.g. Battersby et.al. 2002, Walker 1996).

In light of these critiques, suggestions have been made to limit the use of SOGS to an initial research tool that must be complemented with additional research and assessment of each interviewee. This suggestion is not out of step with the authors of the original SOGS, Lesieur and Blume, who argued that the questionnaire may be unreliable if the questionnaire is modified and/or used outside clinical contexts.

- **Problem Gambling can be defined by the negative effects that gambling activities have on the gambler, their personal relationships, working life and the wider community.**

Problem Gambling is an encompassing term that includes but equally needs to be distinguished from the more narrowly defined term pathological gambling. The latter receives widespread usage in the US, and used to indicate a severe gambling problem.

Problem Gambling can be defined by the negative effects it has on both the individual, their family and other relationships they might have, and by a person's inability to effectively carry out their work duties or study obligations. In addition, problem gamblers tend to have minimal or no control over the amount of money they use to fund their gambling activities and experience difficulties in abstaining from gambling activities (AIGR 2001a, Productivity Commission 1999).

Problem gambling and pathological gambling do share similar features such as "...extensive indebtedness, and default on financial responsibilities, disrupted family relationships, inattention to work, financially motivated illegal activities, and impaired physical health" (Rosenthal and Lorenz 1992:648). However, pathological gambling has a narrower and overtly medicalised focus than problem gambling.

Currently, the term 'Problem Gambling' receives wide usage, especially in Australia and New Zealand, as a way of escaping the medical model and allowing for other socio-cultural understandings to emerge. Definitions of Problem Gambling are currently very similar and broad in scope (see Productivity Commission 1999:6.2-6.5) For example, the AIGR (1997) provides the following definition:

'Problem gambling' refers to the situation when a person's gambling activity gives rise to harm to the individual player, and/or to his or her family, and may extend into the community (Australian Institute of Gambling Research 1997:2)

- **Use of the SOGS in Australia has been modified to reflect a broader definition of Problem Gambling and greater tolerance of gambling in Australian contexts.**

Some authors have recommended altering the original SOGS scoring system for the Australian situation, as it is a society more tolerant of gambling activities with higher levels of general participation than other countries. Using the same scale as that designed for use in the USA would inflate estimates of problem gambling. Thus, some Australian researchers employ higher cut off scores when assessing the prevalence of 'problem gambling'. For instance, the AIGR 2001 review of problem gambling in the ACT interpreted scores of 5+ as indicating a 'moderate' gambling problem and 10+ to denote a 'severe' gambling problem (see AIGR 2001a, AIGR 1997, Battersby 2002, Dickerson et.al. 1996, Productivity Commission 1999:6.24).

The Productivity Commission (1999:6.24) also notes that Australian studies have modified testing by limiting the time frame of the questions, from 'lifetime' to questions focusing on the previous 6 or 12 month period. This latter approach is based on the idea that a prior gambling problem may not indicate the presence or absence of recent or current problems (see Ferris et.al. 1995, Delfabbro 1998).

The Productivity Commission has also suggested that no test is able to concretely measure the nature and prevalence of gambling. The Productivity Commission (1999:6.18) endorse the view that "precise tests of problem gambling are impossible, because ... the phenomenon itself lies on a continuum of differing degrees of severity ... from no problems (level 1 gambling) to severe problems (level 3 gambling)." The report recommends that where SOGS is utilised, cut-offs should be established according to the particular needs of each project. In particular, the threshold of problem gambling "depends on judgements about what levels of severity are policy relevant" (Productivity Commission 6.18). For example, a study interested in identifying those persons who need assistance require a high threshold and an examination of "how the harms associated with problem gambling vary as the test score rises ... The important

point is that determining the threshold for direct intervention should be based on evidence, rather than arbitrarily selected” (PC 1999:6.20). However, a study that was designed to identify higher than average public health risks may require a lower threshold that incorporates both moderate and severe problems (PC 1999:6.21).

Overall, the Productivity Commission (1999:6.37) cautiously endorses the use of the SOGS questionnaire in the kinds of studies that are concerned to examine “the prevalence of people whose problems do not require individual intervention, but which are of concern for public health reasons.” The report finds that the SOGS is an appropriate tool provided the terms of the study are presented in detail (including the rationale behind the study) so that they may be aware of the potential for false positives and false negatives associated with different SOGS cut off scores.

Other questionnaires have been developed such as the CPGI (Canadian Problem Gambling Index), which is said to better ascertain socio-cultural and environmental influences and has been recommended by the Productivity Commission report into gambling (Productivity Commission 1999). A comparison of screens such as the SOGS and the CPGI is currently being conducted by Professor Jan McMillen of the ANU's Centre for Gambling Research. At the present time, the SOGS continues to be employed by most studies in Australia, including the current one, as it allows researchers to compare their own research results with a large body of comparable data (see AIGR 1997).

Problem Gambling Prevalence among Correctional Populations

- **Studies have highlighted the need for future research to focus on 'at-risk' groups who may experience greater problems with gambling than the general population.**

Authors have highlighted the need for greater attention to the prevalence of gambling in 'at-risk' populations like the homeless, the elderly, those who have a history of substance abuse, military personnel and prisoners (e.g. Walters and Contri 1998, McCorkle 2002, Lepage, Ladouceur and Jacques 2000, Shaffer et.al. 2002).

The Productivity Commission (1999:6.55-6.59) investigated if any particular socio-demographic factors were noticeable in problem gambling statistics. The Commission highlighted that within the general population the only significant socio-demographic factor was age. It was suggested that younger people (under 25) are more heavily represented in problem gambling statistics than all other age categories, a finding that was also apparent from the 2001 ACT Survey (AIGR 2001a:87) and supported by other studies (e.g. Rossen 2001:25).

- **Persons with gambling problems are also more likely to experience problems with substance abuse (comorbidity)**

There are an increasing number of comorbidity studies that provide evidence for the incidence of substance abuse (including alcohol) among those persons with gambling problems (e.g. Baron n.d., McCallum and Blaszczynski 2002, Petry and Tawfik 2001, Welte et.al. 2001). Confirmation of this tendency is evident in a Canadian study where rates of alcohol use among gamblers were between two and three times that of the general population in Ontario (Toneatto and Skinner 2000), and in populations seeking treatment for chemical dependency, between 20 and 30% have been recorded as possessing gambling problems (Feigelman et.al. 1998).

- **Australian studies suggest that the rate of Problem Gambling among offenders is greater than among the general population.**

Studies of correctional populations reveal much higher levels of gambling problems than those recorded for the general population. In Australia, four prevalence studies

have focused on correctional populations: two in Queensland, one in South Australia and one in Western Australia (AIGR and LIRU 1996, Jones, 1989, Marshall et.al. 1997, Powis 2002). Taken together, these Australian studies have estimated rates of problem gambling among offenders to lie between 17% and 30%.

A table presented at the end of this section provides summary details of Australian and international correctional studies cited.

The rates reported in each of these studies need to be scrutinised according to the screens used to determine problem gambling prevalence. As noted in the above section, 'Defining and Measuring Problem Gambling', different screens such as the SOGS and the CPGI, produce varying results, reducing the direct comparability of research results.

In the South Australian study, Marshall et.al (1997) completed a study of male prisoners at Yatala Labour Prison. The study reported that 30% of the 103 inmates interviewed were problem gamblers. This figure was generated by use of the 6 month version of the SOGS screen. Marshall et.al (1997) distinguishes between problem gamblers (SOGS score of 1 to 4) and probable pathological gamblers (SOGS score of 5 and above). However, if severe problem gambling is defined as recommended by some authors (e.g. Dickerson 1996, Productivity Commission 1999, see above), by a SOGS score of 10 and above, the results of this study can be reinterpreted as indicating that 17.4% of interviewees had severe gambling problems.

The Western Australia study of 60 inmates at Canning Vale Remand Centre estimated that 'probable problem gamblers' constituted 22% of the sample (Jones 1989). The rate of 'problem pathological gambling' was measured by calculating the number of respondents who had a score of 5 and above on the lifetime version of the SOGS screen.

Unlike the SA and WA studies, a study conducted in Queensland used the Canadian Problem Gambling Index (CPGI). Of 178 prisoners surveyed, 17.4% were deemed to have a gambling problem (Powis 2002). The highest incidence found was among non-indigenous males (21.4%) while the lowest was indigenous males (14.3%). The Queensland study has produced slightly lower rates than other studies. This is probably due to their use of the CPGI, which is known to produce slightly lower prevalence rates.

An earlier Queensland study (AIGR and LIRU 1996) used no gambling screen to when interviewing 74 inmates of the Arthur Gorrie Centre (72 men, 1 female and 1 undisclosed) and 121 Break Even clients (93 men and 28 women). The study focused in the main on the use of poker machines, which were recently introduced into Queensland at the time. The survey asked each respondent to indicate if they had experienced any personal or financial difficulties as a result of their gambling, to which 31.1% answered 'yes'.

While Australian studies focusing on correctional populations are few, all have reported greater incidences of problem (or pathological) gambling than found among the general population.

- **International studies also report high incidences of problem gamblers among prison populations.**

International studies support the findings of Australian research that higher incidences of problem gambling exist among correctional populations. As in the Australian correctional studies, the following international studies use differing screens to ascertain the prevalence of problem gambling. Again, some researchers have used a SOGS 5+ cut-off to determine the level of problem gambling, while others employ different cut-offs and entirely different screens such as the CPGI. Each study should be assessed according to the methods employed. However, regardless of the screen used for each study, common to all correctional studies focused on gambling, are higher reported levels of problem gambling than found among the general population.

Three recent New Zealand studies have reported high incidences of gambling problem among prison populations. The extensive survey included the 6-month SOGS-R screening instrument. Abbott et.al. (2000a, 2000b) found that 21% of male prisoners and 33% of female prisoners were lifetime probable pathological gamblers while Brown's (1998) study estimated that 25% were problem gamblers. In the Abbott study of male offenders (2000b:9-10) both Maori and non-Maori showed similar rates of problem gambling.

Large incidences of pathological gambling (SOGS 5+) were also evident in a study by Walters and Contri (1998) of 316 male prisoners where 57 respondents were deemed to be probable pathological gamblers (18%). An earlier study by Walters (1997) produced

comparatively lower rates of pathological gambling where only 5.2% of 363 incarcerated offenders in a Nevada prison had a SOGS score of 5 and above. Though the prevalence was lower than other studies, it remains higher than existing estimates for the general US population.

A more recent US study identified 38% of 233 incarcerated males as being probable pathological gamblers by using a SOGS 5+ cut off (Anderson 1999). Similarly, Lesieur and Klein (1985, cited in Blaszczynski 1994:132) found high rates of pathological gambling (30%) among 448 US New Jersey prisoners, which they estimated to be about 10 to 15 times the rate of 'pathological gambling' in the general population. This estimate is based on the total number of SOGS 5+ scores. The sample breakdown comprised 118 females, 30.5% being pathological gamblers, and 230 males of whom 29.6% scored 5 or more on the SOGS screen.

In another US study, Templer et.al. (1993), tested 136 consecutively admitted male inmates in a Nevada prison. The SOGS was self-administered by the inmates along with a Minnesota multiphasic Personality Inventory (MMPI), a psychasthenia scale and a MacAndrew alcoholism scale. From the SOGS results, it emerged that 47.06% had some gambling problem. This figure was calculated by adding together all scores of 1 or more. Of these scores, 24.26% of inmates (n=33) were classified as 'probable pathological gamblers' (SOGS 5+ scores).

McCorkle's (2002) study of 2307 arrestees in Las Vegas (Nevada) and Des Moines (Iowa) used a 144 item survey included the NODS survey created by National Opinion Research Centre (NORC) based on DSM-IV criteria. From the survey carried out it was deemed that 14.5% of Las Vegas arrestees and 9.2% surveyed at Des Moines were classified as pathological gamblers from the DSM-IV criteria.

In the UK, correctional studies are few. Of the three located, one presents unreliable anecdotal evidence of the prevalence of gambling problems in HMP Ford prison in West Sussex (Bellringer 1986). In comparison, Ricketts et.al. (2000) study provides some evidence that gambling is a risk factor for probationers. A self-administered 3-question survey was distributed to all persons on probation and combination orders in the Yorkshire area. From the 444 surveys completed, all persons who answered 'yes' to

two particular questions¹ relating to gambling (n=46) were selected for further interview (including a SOGS questionnaire). Only 11 persons (out of 46) agreed to participate. Of these 11, 9 had a SOGS score of 5+ and 8 had a DSM-IV 3+ score. In terms of the total probation population (n=444), 4.5% were deemed to be problem gamblers (4.8% SOGS 5+ and 4.2% DSM-IV 3+). These figures were 6 to 7 times that of general population problem gambling estimates. This study is important because it focuses on probationers rather than the usual prison studies that typify correctional-focused studies of gambling behaviour.

A third UK study focuses on identifying gambling problems in young male incarcerated offenders (Madden et.al. 1992). The mean age of the 406 participants was 19 years 4 months. Each participant was interviewed using a semi-structured format that incorporated questions about gambling and video games. Those who were preliminarily identified as heavy gamblers (gambling most days or every day), were then administered the DSM-III-R. 11.9% were identified as 'heavy gamblers' but the DSM-III-R found that only 2.2% could be classified as 'pathological gamblers'.

From these studies, it can be concluded that despite the range of survey methods used and differing prevalence estimates in Australia, New Zealand, the United States and the UK, problem gambling is an issue for correctional populations. Interest in the relationship between gambling and crime has in part fuelled these correctional studies. The nature of this relationship is the subject of much ongoing discussion and debate.

¹ The two questions were:

"2) Other than the National Lottery, have you gambled more than twice in any one week?

3) Have you spent more time or money on gambling than you intended?"

Activities defined as gambling include the National Lottery, as well as "scratchcards, any other lottery, football pools, bingo, fruit machines, private betting, betting on horse or dog races or other events at a bookmakers or tables in a casino" (Ricketts et.al. 2000:13).

Table 1: Problem Gambling Prevalence Rates Recorded in Correctional Populations¹

Author	Location	Sample	Screen	Prevalence
Marshall et.al. 1997	South Australia	103	6 month SOGS 5+	30% PG
Jones 1989	Western Australia	60	Lifetime SOGS 5+	22% PPaG
Powis 2002	Queensland	178	CPGI	17.4% PG
AIGR and LIRU 1996	Queensland	74	None used	31.1% ²
Abbott et.al. 2000a	New Zealand	94 women	SOGS-R	33% lifetime PPaG 22% current PPaG
Abbott et.al. 2000b	New Zealand	357 men	SOGS-R	21% lifetime PPaG 16% current PPaG
Lesieur and Klein 1985	New Jersey	448	SOGS 5+	30% PaG
Templer et.al. 1993	Nevada	136	SOGS 5+	24.26% PPaG
McCorkle 2002	Nevada and Iowa	2307	NODS (DSM-IV)	Nevada 14.5% PaG Iowa 9.2% PaG
Walters 1997	Nevada	363 men	SOGS 5+	5.2% PPaG
Anderson 1999	Midwest USA	233 men	SOGS 5+	38% PPaG
Walters and Contri 1998	USA	316 men	SOGS 5+	13% PaG
Ricketts et.al. 2000	South Yorkshire	444	SOGS 5+ DSM-IV	4.8% 4.2%
Maden, Swinton and Gunn 1992	UK	404 young men	DSM-III-R	12% 'excessive gamblers'

¹ The following abbreviations are used in the table

PG = problem gambling, PaG = pathological gambling, PPaG = probable pathological gambling.

² This figure was calculated by adding together all the 'yes' responses to the question: "have you ever experienced personal or financial problems because of poker machine playing?"

Prevalence of Offending among Problem Gamblers

- **Not all problem gamblers become criminals, nor do all offenders with gambling problems commit gambling related offences.**

The terms crime and gambling are often linked in the literature, but it is important to remember that there isn't always a simple causal relationship between problem gambling and offending. Not all problem gamblers become criminals and not all criminals with gambling problems commit offences related to their gambling (AIGR and LIRU 1996, Doley 2000, Marshall et.al. 1997, Productivity Commission 1999, Rossen 2001).

Researchers focusing on crimes committed by problem or pathological gamblers comprise a small but growing area of interest. Recent reviews by Doley (2000:13), Andrew et.al. (1997), the Centre for Criminology and Criminal Justice (2000), and the Productivity Commission (1999:H1) suggest that there is evidence that problem gambling is a risk factor for offending in Australia. The majority of studies examining the relationship between gambling and crime have been carried out in clinical contexts. When clinical studies are viewed in combination with the current correctional studies, it is apparent that some offenders do commit crimes to support their gambling, and for other offenders, crimes committed are unrelated to gambling.

Researchers have characterised links between problem gambling and crime in three ways. The first is that for some problem gamblers, their offending is coincidental and bears no relationship to their gambling problem. Secondly, some researchers have proposed that a co-symptomatic relationship exists between problem gambling and offending. That is, gambling and offending each arise from the same antecedent factor (i.e. poor impulse control). Thirdly, offending may be directly related (i.e. instrumental) to gambling problems.

- **For some problem gamblers, their offending is coincidental to their gambling.**

The bulk of literature examining offending by problem gamblers tends to focus on the links between the two. As a result, rates of non-gambling related offending are not

always reported or even discernible from survey data. It is important to read statistics that link problem gambling with criminal offences with the understanding that the commission of non-gambling related offences by problem gamblers are not always reported.

There are exceptions to this trend. For instance Blaszczynski and McConaghy's (1994b) study of a group of 306 Gamblers Anonymous and hospital patients, focused on both the commission of gambling related offences and non-gambling related offences, as well as non-offending. By respondents' own admissions, 6% had never committed a gambling related offence, 48% had committed only gambling related offences, and 35% said they had never committed an offence. In Marshall et.al's (1997) South Australian correctional study, 24% of offenders with a SOGS 5+ score had never committed a gambling related offence.

As we will see below, it is seductive to purport a causal link between the development of a gambling problem and the commission of crimes. But again it should be remembered that not all problem gamblers offend, and some offend for reasons unrelated to their gambling.

- **Some authors suggest that there is a co-symptomatic relationship between problem gambling and crime.**

Some researchers have understood criminal acts committed by problem gamblers as being co-symptomatic with poor impulse control. Pathological gambling is defined by DSM criteria as an impulse control disorder. Blaszczynski and Silove (1996:359) state that impulse control disorders are typified by

- the repeated failure to resist impulses or the drive to carry out certain behaviours which are harmful to the individual or to others;
- an increasing sense of tension immediately before committing the act;
- and the experience of pleasure, gratification, or relief on completion of the act.

- Immediately following the act there may or may not be genuine regret, self-reproach, or guilt.

In this model, poor impulse control is envisaged as an underlying factor that results in risky behaviour in many aspects of a person's life including, gambling, sexual practices, and crime. For example, one US study noted that problem gamblers were participating in risky sexual behaviours. Though not the only explanation on offer, it was suggested that an impulsive personality trait could be used to explain co-occurrence (Petry 2000). Excessive gambling and criminal acts are sometimes construed as symptoms of an underlying impulse disorder, but there are other explanations on offer, including the role of depression and childhood experiences in the development of excessive gambling and the commission of criminal acts. These and other theories (including psychoanalytic approaches) seek to explain cases where the co-existence of unrelated behaviours like pathological gambling and criminal acts are found. Many of these theories are subject to ongoing debate in the literature, especially in the USA.

- **For other problem gamblers, their offending is instrumental to their gambling.**

There is evidence that problem gamblers are at risk of committing gambling related offences (CCCJ 2000, PC 1999). In a broad range of studies, including correctional and general population studies, some problem gamblers have been found to offend to acquire money to fund their gambling activities, or to replace gambling losses or pay gambling debts. These are generally referred to as 'gambling related offences'. For example, the Productivity Commission (1999:H15) concluded that "while not all crimes committed by problem gamblers are gambling related, the overwhelming majority are." This assertion is not reflected in the available literature. Much of the evidence for gambling related offences comes from data collected from gamblers undergoing counselling or other treatment. This data requires sensitive interpretation given that the instances of gambling related crimes are higher among treatment groups than found in the general population (Productivity Commission 1999:H12). From the literature surveyed below, rates of gambling related offences committed by gamblers are varied.

The Productivity Commission (1999) estimate that from their own surveys of counselling agencies, 50.2% of gamblers had committed criminal offences, while

among the general population, 10.5% of lifetime SOGS 5+ and 26.5% of lifetime SOGS 10+ problem gamblers had committed a gambling related offence. The PC emphasised that there is no direct causality involved in the 'development' of a gambling problem and the commission of crimes.

Blaszczynski's (1994:8) study found that between 21% and 85% of 'pathological gamblers' commit offences to support their gambling activities and "on the basis of this statistical association, [pathological gamblers in treatment] have postulated or inferred a direct causal relationship between crime and gambling." In an earlier joint study, Blaszczynski and McConaghy (1992, 1994b) interviewed 306 gamblers who were undergoing treatment, 59% of whom said they had specifically committed an offence to fund their gambling activities. In Victoria, 30% of 1452 clients of Break Even counselling agencies said they had committed a gambling related offence (Jackson et.al. 1997).

UK and US studies support the high Australian rates of gambling related offences. A UK study of 107 Scottish and British Gamblers Anonymous participants found that 77% and 82% respectively had committed a gambling related offence (Brown 1987).

In the US, Bland et.al. (1993) found that 60% of pathological gamblers interviewed offended to support their gambling activities. In clinical studies carried out in the US, high rates of offending among 'pathological gamblers' were also found. Both Lesieur (1989) and Rosenthal and Lorenz (1992) report that two thirds of compulsive gamblers offend to fund their gambling activities. Rosenthal and Lorenz (1992; 1991:657) suggest that 70 to 80% of 'pathological gamblers' commit gambling related offences in the latter stages of their gambling careers. Like Blaszczynski (1994), Rosenthal and Lorenz (1992) advocate understanding pathological gambling as a "progressive disorder" that comprises four stages: the winning phase, and the losing, desperation, and giving up or realisation/help seeking phase. Lesieur (1977) found from 50 subjects studied, over 90% of those who offended, did so for reasons related to gambling.

- **In the correctional studies presented above, each made some comment on the relationship between gambling and crime.**

Jones' (1989) data from Western Australia indicates that two-thirds (8 of 12) of those prisoners deemed to be Probable Problem Gamblers (i.e. with a SOGS 5+ score) had

committed a Gambling Related Offence. Jones suggested a range of relationships between gambling and crime. For some people criminal activity can lead to gambling as 75% of those interviewed were convicted at young ages before they became gamblers. At the same time, Jones found evidence to suggest that for some people, gambling does lead to crime. 25% were convicted when they were older, and had committed no crimes prior to their gambling activities. This group felt that if they could stop gambling, they wouldn't commit any more crimes. He also found that prisoners gamble more than general population and that gambling occurs with the proceeds of the crime as a way of enjoying it. Like Brown (1987, see above), Jones concedes that low socio-economic status may be a common underlying factor of the coincidence of gambling problems and criminal activities.

In the Queensland Arthur Gorrie survey (AIGR and LIRU 1996:45), 7% of respondents said that their current offence was committed in order to obtain money to play poker machines. 10.8% felt that their poker machine playing had caused them to be in 'in trouble with the police'.

Powis' (2002) Queensland study found that 6.7% of respondents said that their current offence was committed to fund their gambling and 7.3% said that they had committed an offence in the past that was gambling related.

In the South Australian correctional study (Marshall et.al. 1997) 26 of the 103 inmates interviewed indicated that their gambling had 'gotten them into trouble with the law'. This group had a mean SOGS score of 12.38 compared with 1.56 SOGS score for those who answered 'no' to the same question. All interviewees with a SOGS 5+ score had committed a Gambling Related Offence while 10% of those with SOGS 5 or less, had committed a GRO. While the South Australian (Marshall et.al.1997) findings seems to suggest strong links between GRO and those inmates with a SOGS5+ score, the authors remained cautious about making any direct causal link between gambling problems and criminal activities.

The Australian correctional studies in general have been careful not to make a direct link between gambling and crime. AIGR and LIRU (1996:49) caution that "the direction of causality is complex but it would appear that for some people who gamble

excessively a criminal offence becomes the 'only' means of meeting debts and/or continue to gamble."

- **A recent general population survey found that 15.1% of problem gamblers in the ACT had committed a Gambling Related Offence. Estimates of GRO in the Australian population are at 10.5%.**

The ACT Gambling Survey (AIGR 2001a:123) asked participants if they had “obtained money illegally because of their gambling; experienced problems with the police because of their gambling; or appeared in court on charges related to their gambling”. From these questions, it was estimated that of those respondents with a SOGS score of 5+, 15.1% had committed a gambling related offence. The Australian figures were 10.5% (AIGR 2001a:124). In addition, 14.2% of problem gamblers had performed illegal acts in order to obtain money to gamble or to pay off gambling debts. The Australian figure is 7%. Among those ACT respondents with a SOGS score of 10+, 16.4% had participated in a ‘gambling related illegal activity’ and had also ‘obtained money illegally’. Australian figures were 26.5% and 13.2% respectively.

- **Gambling Related Offences tend to be non-violent property offences**

Gamblers who commit offences usually carry out non-violent property offences. In particular, white-collar crime and property theft rate highly in studies of pathological gamblers committing gambling related offences (Doley 2000:11, Grinois et.al 1999:11 cited in CCCJ 2000:46, Lesieur 1987, Rosenthal and Lorenz 1991). Crofts’ (2002:52) review of NSW local and district court files found that 2.7% of property offences on file were gambling related (63 of 2362). Another recent study found that 14.7% of 183 Australian and New Zealand prosecuted fraud crimes were gambling related (Sakurai and Smith 2003). An examination of Canadian files found that 4% of 5196 Edmonton Police files examined from January 2001 to August 2002, recorded gambling related crimes, mostly counterfeiting and fraud related, but some involved family disputes where one or both parties' gambling fuelled the dispute (Smith et.al. 2003).

White-collar crime also rates highly in studies of gamblers who offend (Lesieur 1987, Rosenthal and Lorenz 1991). In addition to these offences, Rosenthal and Lorenz (1991) also found that bad checks were common (34%), as were loan fraud (31%), embezzlement and employee theft (30%), hustling (29%), bookmaking (21%), tax

evasion (19%), tax fraud (12%), and to a lesser extent, robbery, pimping and prostitution.

In a UK study, Brown (1987) found that 40% of Scottish and 51% of British gamblers in treatment had been prosecuted for non-violent property crimes.

In Canada, one study found that Problem Gamblers who offend commit “theft, forgery, embezzlement, fraud, credit card scams, domestic violence, [and] break and enters” (Smith and Wynne 1999:14). Statistics on these offences were difficult to obtain as police had maintained no systematic record of offences committed by problem gamblers. The authors recommended that gambling related offences be rigorously recorded by law enforcement agencies.

Blaszczynski and McConaghy (1992, 1994b) report that a proportion of ‘pathological gamblers’ they interviewed admitted to having committed roughly ten offences over ten years. The authors advocate a direct causal link between ‘pathological gambling’ and GRO as increased availability and advertisement of gambling facilities has led to increased prevalence of Pathological Gamblers.

Some problem gamblers have been imprisoned for gambling related offences. New Zealand studies suggest that 15% had committed a gambling related offence, either burglary, theft, fraud robbery (in order of incidence) and 9% had been sentenced for a gambling related crime (Abbott et.al. 2000b).

- **Many Gambling Related Offences committed by problem and pathological gamblers are undiscovered.**

The Productivity Commission's (1999) investigation into problem gambling and crime suggested that many offences committed by problem gamblers are undiscovered and unprosecuted because "some of the offences are not serious enough to be detected; not all crimes that are committed are reported to the police; not everyone who commits an offence gets caught; and only some of the offences end up in the courts" (PC 1999:H18).

Blaszczynski and McConaghy's (1992, 1994b) study of 306 treatment-seeking gamblers, shows that while 59% had committed a gambling related offence, only 23%

had been prosecuted for an offence related to their gambling. From Powis' (2002) correctional study, 12.4% of respondents claimed that they had offended in the past to fund their gambling without being detected, and thus prosecuted for the offences.

- **Gambling Related Offences are under-identified by Police, Courts and Corrections.**

A report examining the relationship between crime and problem gambling in Victoria highlighted a need for police, courts and corrections to record offences that are gambling related in order to provide more accurate information on the occurrence of gambling related offences (Centre for Criminology and Criminal Justice 2000). At the present time, Police in Victoria reported that gambling was a factor in the commission of offences but that statistics do not reflect this (CCCJ 2000; see also AIGR and LIRU 1996, Crofts 2002, 2003, Fiegelman et.al. 1998, Jones 1989).

Table 2: Reported Rates of Gambling Related Offences

Author	Location and sample type	Total sampled	GRO
AIGR 2001a	ACT general population	5445	1.9% SOGS 5+ 15.1% of SOGS 5+ 0.5% SOGS 10+ 16.4% of SOGS 10+
Productivity Commission 1999	National counselling agencies	404	50.2%
Jackson et.al. 1997	VIC counselling agencies	1452	30%
Jackson et.al. 1999	VIC counselling agencies	2209	20%
Blaszczynski and McConaghy 1994b	NSW Gamblers Anonymous and Hospital gambling treatment patients	306	59%
Brown 1987	Scottish GA British GA	30 63	77% 82%
Bland et.al. 1993	Alberta general pop	7214 (PaG=30)	60% of PaG
Productivity Commission 1999	AUS general pop	3498	10.5% of lifetime SOGS 5+ (12 mth 3.3%) 26.5% of lifetime SOGS 10+ (12mth 11.3%)
AIGR and LIRU 1996	QLD correctional pop	74	6.8% (of 74) in jail for a GRO
Jones 1989	WA correctional pop	60 (13 or 22% PPaG)	66.7% of PPaG
Powis 2002	QLD correctional pop	178	6.7% in jail for a GRO 7.3% convicted past GRO 12.4% past GRO without detection
Marshall et.al. 1997	SA correctional pop	103 (PPaG=33%, SOGS 5+)	100% of PPaG
Lesieur 1977	USA prison and GA	50	90% of those who offended
Crofts 2002	NSW Court Files	2362 files examined	2.667% (63) gambling related property offences
Smith et.al. 2003	Canada Police Records	5196 files examined	4% were gambling related offences

Screening for and Treating Offenders with Gambling Problems

- **It has been claimed that treating offenders who have gambling problems may reduce recidivism.**

Gambling-focused correctional studies recommend that gambling screening and treatment options become part of the correctional system (e.g. Jones 1989, Marshall et.al. 1997, Powis 2002). For example, in the Western Australian prison study, Jones (1989) favours rehabilitative approaches, rather than incarceration, for offenders who have committed gambling related offences. He suggests that sentencing for an offender with gambling problems, should include them being directed to some form of rehabilitation/restitution rather than prison as they constitute no threat to the community. Rehabilitation is less likely during imprisonment as offenders will continue to gamble while in prison, a finding also presented by Powis' (2002) Queensland correctional study. Blaszczyński (1994) has also recommended rehabilitative approaches be utilised in the cases of those offenders who are 'pathological gamblers'. "While not advocating insanity as a valid plea for diminished responsibility, it is important to be aware that appropriate psychological interventions for rehabilitation are available and represent a more cost effective strategy to reduce the risk of recidivism in this population" (Blaszczyński 1994:14, see also Jones 1989). However, in a recent review of prosecuted fraud crimes, 76% of offenders who had committed gambling related fraud crimes received full-time custodial sentences. The Australian Capital Territory (ACT) was the only state in Australia to order offenders to undergo treatment (including counselling) for gambling related fraud crimes (Sakurai and Smith 2003).

The issue of intervention/rehabilitation is not straightforward. For offenders whose gambling is directly related to their gambling, intervention may prove difficult unless they actually feel like they have a problem, and are willing to participate in some form of therapeutic assistance to control their gambling. Many problem gamblers don't feel that gambling is a problem for them, and do not seek help (e.g. AIGR 2001b).

In addition, there are varying approaches to rehabilitation and their relative effectiveness have been subject to ongoing debate. A recent review of studies of intervention for problem gamblers concluded that there is a paucity of reliable research

available assessing treatment intervention (Oakley-Browne et.al. 2003, see also Robson et.al. 2002). It suggested that the bulk of existing research suffers from a lack of standardisation and methodological rigour. However, from the research reviewed, it appears that behavioural and cognitive-behavioural interventions are somewhat beneficial over the short and long term. Current therapeutic approaches include residential therapy, counselling and financial counselling, Gamblers Anonymous groups which operate in several countries, including Australia, strongly modelled on the Alcoholics Anonymous model, pharmacological interventions, and psychological interventions. For the remainder of this section, I outline the various methods of offender screening and treatment, specifically in relation to problem gambling.

Australia

All states in Australia assess offenders for risk and need. No assessment tool used in Australia explicitly focuses on gambling. Most use standardised tools while others use open ended interviews to determine whether offenders are eligible for assistance through specific offender programmes. All states offer offender programmes, such as those focusing on readdressing violent and sex offender behaviour and excessive drug and alcohol use. Only one state in Australia, New South Wales, has a specific programme targeting those offenders with gambling problems. Most states offer information about relevant counselling agencies. Details of offender assessment for each state are provided below.

Australian Capital Territory

Offenders in the ACT Correctional System are not presently screened for gambling problems. Currently, criminogenic risks and needs are screened using the Canadian designed 'Level of Service Inventory-Revised' (LSI-R). This assessment tool records details of a subject's criminal history as well as their current and past situation in relation to education/employment, financial, family/marital, leisure/recreation, companions, alcohol/drug problem, emotional/personal and general attitudes/orientation. There is an intention to begin training staff to use 'Crime-Pics II' as part of each assessment. This short questionnaire is designed to assess the effectiveness of probation procedures with each subject. The Crime-Pics II problem inventory asks

the subject to self-assess their degree of problem in regard to a number of issues, including gambling, by using a scale ranging from no problem to big problem.

South Australia

South Australian Corrections currently uses the 'Wisconsin needs/risk assessment tool' to screen for criminogenic need. The Wisconsin Need Instrument is the most widely used in the USA (National Institute of Corrections 1999:8). Designed in the 1970s, it has been suggested that the use of non-Australian tools in the Australian context has weakened its validity (Maller and Lane 2002:3). It has also been suggested that all assessment tools can become less effective over time if their design is fixed and not dynamic. The SA department is looking to change their methods of assessment for criminogenic need and are currently investigating the possible use of the New Zealand designed Criminogenic Needs Index (CNI, see below) for their purposes.

Western Australia

Western Australia Department of Justice have developed their own screening tools for assessing levels of substance use, violence, and sex offending to determine what treatment programmes are best suited for each offender who is incarcerated or in community corrections. No screening tool used focuses on gambling. Counselling access is available in WA prisons.

Queensland

The Department of Corrective Services currently screens offenders using an Offender Risks Needs Inventory (ORNI). The inventory was developed internally and is based on the LSI assessment tool. While gambling does not comprise a substantial focus of the ORNI, offenders are asked if they gamble, and if they feel that they have a problem with gambling (rated as no problem, low, medium or high problem). If an offender does feel like they have a problem, they may be referred to a relapse prevention programme, which receives mainly offenders with drug problems. Gamblers Anonymous assistance is available in some facilities, and identified offenders with gambling problems are offered information about various post-release services available to them, such as counselling by Relationships Australia. A gambling programme focused on identifying and addressing underlying factors critical to the development of gambling problems was

being designed for offenders in the Queensland system, but is currently a low priority and its development is on hold.

Tasmania

In Tasmania, criminogenic need is identified for clients of community corrections by assessing each offender in an unstructured interview format. Apart from offender disclosure, needs and risks are identified by taking into account the nature of the current offence, any mitigating circumstances that may have arose in court proceedings, and by identifying any relevant factors from previous case histories available for each offender.

Relationships Australia offers counselling to those offenders (and their families) who voice an interest in receiving counselling related to their gambling. Offenders at all Tasmanian correctional facilities are all potentially able to receive counselling on request, though some may only be able to receive telephone counselling.

Victoria

The Office of the Correctional Services Commissioner (OCSC) has been developing a Victorian risk and need assessment tool. This new tool does not have a gambling component in its determination of risk levels, details on offender motivation, needs according to the specific offences, assessment of self-harm risks, other needs particular to each individual and a plan for offenders who are deemed to have needs upon release. While this tool is being developed, the LSI-R continues to be employed by corrections staff to assess risk and need (Birgden and McLachlan 2002).

Victoria - Addendum

Since completion of this project, the Victorian Government Community Services announced the *Inside Out* program for Loddon Prison inmates. The program seeks to train prison workers in the identification of problem gamblers. In addition, the Bendigo Community Health Services is to run a 6-week awareness program for prisoners, as well as providing individual counselling services for prisoners (Victorian Government 31-07-03).

New South Wales

Like the ACT and Victoria, the New South Wales Department of Corrective Services currently uses the LSI-R assessment tool. Originally piloted in the Probation and Parole service, the department intended its use to expand to use with all offenders, including those who are incarcerated. As mentioned earlier, the LSI-R has no gambling component.

The department operates what appears to be Australia's only gambling focused programmes for offenders. All four programmes listed below, do not address any underlying behavioural issues for offenders with gambling problems. Instead, the programmes are designed to raise general awareness of the risks involved in gambling. The Casino Community Benefit Fund and the Department of Gaming and Racing have been in communication with Corrections Health and the Department of Corrective Services on the issue of prison services for gamblers. Discussions are ongoing. The four existing programmes are

- Vietnamese Problem Gambling Program at the MSPC Long Bay (Alcohol and Other Drug (AOD) Strategy),
- Vietnamese Gambling Relapse Prevention Program (Alcohol and Other Drug (AOD) Strategy),
- A gambling awareness programme for women,
- Problem Gambling Awareness. (Alcohol and Other Drug Health Promotion Unit).

Northern Territory

The Northern Territory is currently developing methods of assessing offenders for risk and need. The state currently uses the LSI-R to screen offenders. The majority of prosecuted offenders in the NT are indigenous. It has been found that the LSI-R is unable to effectively isolate needs and risks facing indigenous offenders. Thus, a large component in the development of the new assessment tool, called the Integrated Offender Management System, will be a strong focus on cultural needs.

New Zealand

The New Zealand Department of Corrections uses the Criminogenic Needs Inventory (CNI) to assess offenders prior to and after sentencing (Coebergh et.al. n.d.). The CNI interview format is semi-structured and contains a gambling component. The CNI is designed to assess whether gambling is temporally and behaviourally associated with offending. The CNI also has components which are sensitive to the 'culture-related needs' of Maori (Maynard et.al. n.d.). Programmes targeting offenders have been designed according to determined recidivist needs and offender types. New Zealand currently has no programmes targeting offenders with gambling problems, as violence, drug and alcohol use have been highlighted as constituting the predominant criminogenic need in offender populations. All programmes for criminogenic need are similarly structured: group based, cognitive behavioural, relapse prevention, offence focused. They are about 100 hours in length and cater for groups of 8-12 and facilitated by two people. Identified offenders whose gambling has contributed to their offending are directed to one of the existing programmes. The department is currently reassessing various criminogenic need with reconviction rates in order to assess the current programmes it offers. Gamblers who offend are included in this review.

UK

In the UK, gambling has not been a focus of correctional services. Recent research has found that the Assessment Case management and Evaluation (ACE) screening tool, which has a gambling component, identifies criminogenic factors such as drug and alcohol use as the critical issues for tackling reoffending. Gambling is a risk for only 2% of the offender population (Raynor et.al. 2000, see also Merrington 2001). In terms of probationers, the National Probation Service has no specific policy or intention to developing services targeting offenders with gambling problems. At the moment, Gamblers Anonymous runs groups for those people with gambling problems in some prisons.

Canada

A gambling awareness programme is being designed and trialled at the Lethbridge correctional facility. It is primarily a preventative programme that runs over six weeks,

that includes educating offenders about the odds of gambling. The programme is currently being run and assessed and is due to be completed next year (Nixon n.d.).

USA

While some authors have argued that the development of gambling treatment programmes for offenders is limited in the US (e.g. Gowen 1996), there are a number of initiatives that focus on the identification and rehabilitation of incarcerated offenders with gambling problems. These services are based on DSM criteria for pathological gambling comprising a medicalised addictive model approach to rehabilitation. Initiatives include correctional staff training (e.g. Arizona), prisoner access to telephone counselling and counselling services (Gamblers Anonymous) (e.g. Minnesota), and specific programmes for prisoners with gambling problems (e.g. Minnesota, Nevada). Jurisdictions in the United States have implemented judicial alternatives for offenders committing gambling related crimes and treatment initiatives for correctional populations. Rosenthal and Lorenz (1992) report that where US courts have taken ‘compulsive gambling’ into account, sentencing has included a number of treatments, including restitution, community service and probation. Brief details of some these initiatives are presented below.

The New York legislature notes that gambling can become a problem for some people, and as such funds treatment agencies. One of these agencies, Human Technologies Corporation, operates a Gambling Information and Counselling service that runs courses in two medium security prisons (Powell 2001). About 12-15 inmates are accepted into a 10-week course. In the Mohawk Correctional Facility, the *Gambling with Recovery* 2002-2003 programme dealt with “diagnosis of problem and pathological gambling..., recovery and relapse prevention ...[and]... issues of compulsion and impulsivity” (Klein n.d.). Though most participants highly rated the programme, no formal assessment of course effectiveness has been conducted.

The State of Nevada Gamblers Assistance Program has investigated the use of the Gambling Severity Index (GAI), modelled on the Addiction Severity Index, which attempts to identify among other criminogenic factors, gambling and substance abuse. Gamblers in one Nevada county jail participate in 6 week ‘psycho-educational’ courses to enhance their motivation to seek treatment post-release.

The Minnesota statutes require that probation officers must investigate if gambling is a factor in the commission of crimes such as theft, embezzlement of public funds, or forgery. If gambling has played a role in the commission of an offence, the offender must be screened for compulsive gambling (SOGS 5+) and treatment options recommended (State of Minnesota 2002: 609.115. subdivision 9). The Department of Human Services funds programmes that specifically target incarcerated offenders. For example, a 'Problem Gambling Prevention Program' designed for all offenders was designed to assist in preparation for post-release adjustment. Workshops in four correctional facilities, consisting of 12-30 participants through to over 100 in larger federal prisons, covered topics such as the history of gambling in Minnesota, controlling personal gambling to avoid the risks of developing a gambling problem, detecting the signs of problem gambling, how to approach someone whose gambling is a concern, and information about existing community counselling and treatment services (Reynolds 1999). This programme has ceased operating in June 2002 due to a lack of government funding.

In Arizona, probation and parole officers undergo training in understanding the DSM-IV definition and characteristics of pathological gamblers and their characteristics in order to identify pathological gamblers during pre-sentencing, and to understand the implications for the family of pathological gamblers, and the reasons behind probation violation by pathological gamblers. As an outcome of offender screening, probation officers can recommend the offender attend Gamblers Anonymous and ask the offender to report monthly on their financial situation, or refer them to inpatient or outpatient treatment (Arizona Council on Compulsive Gambling 2002).

Gambling courts (modelled on the drug court framework) have been established to specifically receive cases where offender's crimes are in some way related to their gambling. Offenders must plead guilty in a regular court before they can be referred to a gambling court. Gambling courts then refer offenders to some form of therapy. These courts take the view that gambling is an addiction, and that offenders cannot control the compulsion to gamble and to commit crimes until the addiction has been eradicated. The Louisiana Gambling Court refers non-violent offenders to intervention treatments that last from 12 to 18 months where offenders progress through different forms of treatment (State of Louisiana 2003). The Amherst Gambling Court in New York state

offers career counselling, psychiatric services, substance abuse treatment, access to physicians, financial counselling and financial therapy. So far, the New York court has claimed a 90% success rate for gambling cessation, a decrease in recidivism and reductions in substance use (National Criminal Justice Reference Service 2003, Rose 2003). No documentation detailing the measurement of these successes has yet been made available. Without any information regarding assessment procedures for gambling courts, or for screening tools and offender gambling programmes, all claims regarding their success must be treated cautiously.

THE SURVEY

Questionnaire

The questionnaire comprises a South Oaks Gambling Screen (SOGS) with questions pertaining to both lifetime and 12 month gambling activities. The Questionnaire also contains additional questions regarding drug and alcohol use, help seeking behaviour for substance abuse (alcohol and illegal drugs), questions relating to gambling at ACT correctional facilities, and questions asking about gambling related offences. A copy of the Questionnaire appears in Appendix 1.

Australian National University Ethics Approval

The Questionnaire was submitted as part of a larger research proposal to the Australian National University's Human Research Ethics Committee. The Committee gave informal approval on the 14 April 2003 and formally ratified approval on the 2 May 2003.

Participant Recruitment and Sampling

Participation was sought from clients of the five ACT Corrective Services facilities. These facilities are the Belconnen Remand Centre (BRC) and the Symonston Temporary Remand Centre (STRC), both of which house persons awaiting sentencing, and those people to whom bail has been refused; the Periodic Detention Centre (PDC), housing offenders from Friday evening to Sunday evening, who perform community work; the Probation and Parole Unit (PPU), supervising those persons on bail and offenders on periodic detention, parole and community-based orders; and clients of the Community Service Orders Unit (CSO) at Symonston.

Information Sheets outlining the project were distributed to all clients of BRC, STRC, PDC, and CSO. In addition, an informal Information Session was conducted at the PDC only, on Saturday the 26th of April. A copy of the Information Sheet can be found in Appendix 3. As the majority of offenders in the ACT are required to report to the PPU,

a sample of this subgroup was invited to participate. Over a three-week period, all clients who attended PPU were offered an Information Sheet.

Interviewing

A total of 102 persons participated in the survey.

A total of fifteen remandees were interviewed. Eight persons were interviewed at the Belconnen Remand Centre (BRC), five on 29th April and three on the 1st May 2003. On the days of interviewing, there were 52 and 45 detainees respectively being housed at the institution. Seven persons were interviewed at the Symonston Temporary Remand Centre (STRC), five on the 29th April and two on the 1st May 2003. On these days, the STRC housed 19 and 17 detainees respectively. At the Periodic Detention Centre (PDC) on the 3rd of May, 10 men agreed to participate in the survey out of a total of 25. Interviewing of offenders attending the Probation and Parole Unit were interviewed over a fifteen day period on the following dates: 19-20 May, 22-23 May, 26-30 May, 2-6 June, and 10 June. A total of sixty-seven persons were interviewed. The average number of clients attending the PPU over the fifteen days of interviewing was roughly 48. Community Service Order (CSO) participants were interviewed both at the CSO facility on the 14th of May, and sporadically at the Probation and Parole Unit during 15 days of interviewing. During the week of the 14th of May, there were 97 persons serving a CSO.

Consent by Participants

A Consent Form was read and signed by each person prior to their participation in the survey (see Appendix 2). For those persons with poor literacy skills, the Consent Form was read out. The purpose of the Consent Form was twofold. Firstly, it allowed each participant to formally agree to take part in the survey. Secondly, it gave permission to researchers to access 'background information' about them from ACT Corrections databases. The 'background information' included date of birth, marital status, gender, employment status at reception, date of reception, the most serious current offence, postcode and indigeneity.

SURVEY RESULTS

Representativeness

Overall, the socio-demographics of survey participants interviewed between April and June 2003 (n=102) are broadly representative of correctional admissions over the same period (n=740) (see Appendix 5 for a information on correctional admissions and the correctional population). Both the survey sample and correctional admissions during April-June 2003 were predominantly male, aged between 18-35 years, many of whom were unemployed at reception, having been charged with or sentenced for property related crimes, traffic offences and violent offences.

The main demographic comparison of survey participants and correctional admissions are as follows. Importantly, the survey data relating to age and gender approximate that of correctional admissions over the same period. Being male and young are the two risk factors for problem gambling noted in the literature.

Age

- Around half of the participants and correctional admissions were young, aged between 18 -29 years. The age categories in figures 1 and 2 are broad so that 'youth' as an entire category is discernible.

Figure 1: Survey Sample by Age

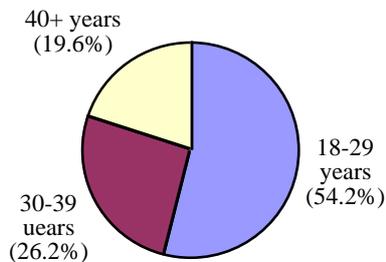
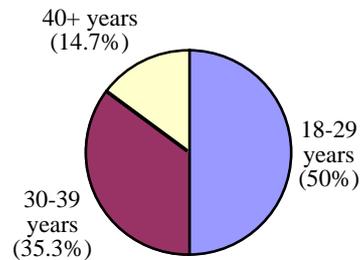


Figure 2: Corrections Admissions by Age



Gender

- Like correctional admissions, the survey sample was predominantly male (95%).
'Missing data' refers to data not recorded at reception.

Figure 3: Survey Sample by Gender

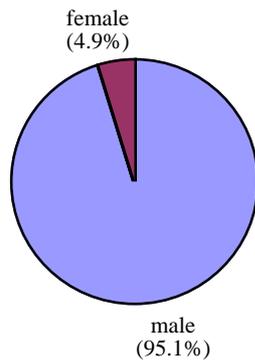
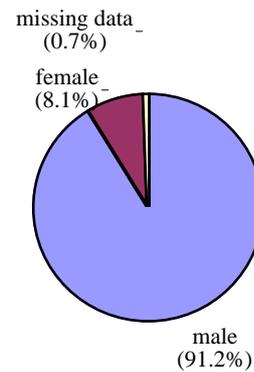


Figure 4: Corrections Admissions by Gender



Employment

- 30.4% of survey participants stated that their usual work was unskilled. 29.4% said that they usually did skilled (e.g. tradesman) work. 20.5% said that they were *usually* unemployed.
- Despite the majority of those surveyed having worked in the past, 42.2% were unemployed at their time of most recent entry into the correctional system. 24.5% were employed at time of most recent entry. Unemployment figures for the survey sample approximated those relating to correctional admissions over the April-June period. In the correctional admissions database, employment data was not recorded for 32.4%. Thus, the employment figures should be taken as conservative.

Figure 5: Survey Sample by Employment Status

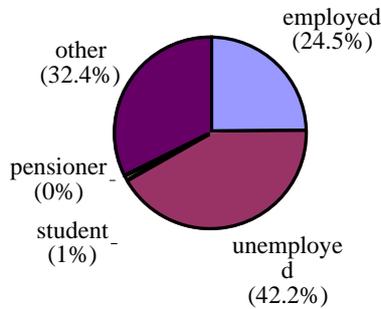
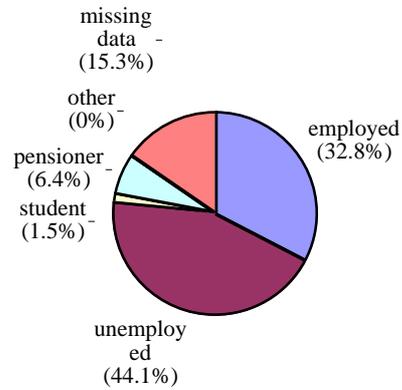


Figure 6: Corrections Admissions by Employment Status



Ethnicity/Indigeneity

- The majority of participants (80.4%) did not identify with any ethnic group. Participant numbers identifying with an ethnic group are as follows: Croatian 4, Italian 1, Serbian 2, Thai 1, Spanish 3, Maori 1, German 1, Vietnamese 2, PNG 1, Greek 1, Pacific Islander 1. Indigenous persons represent about 8.8% of correctional admissions over the April-June quarter. The 2001 Australian Bureau of Statistics census found that 1.2% of the ACT general population were indigenous (ABS Yearbook). 3.9% of survey participants identified as Indigenous.

Figure 7: Survey Sample by Indigeneity

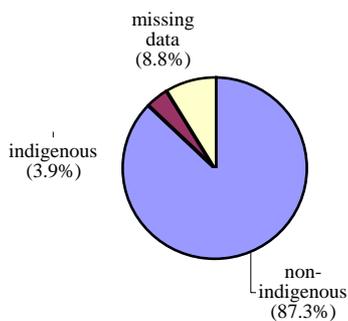
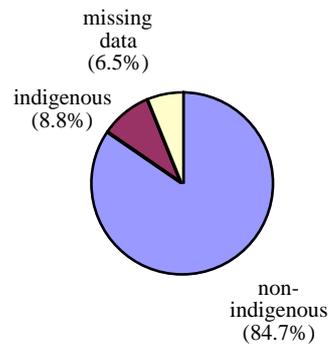


Figure 7: Corrections Admissions by Indigeneity



Current Offences

- Unlike socio-demographic characteristics, current offences of survey participants and correctional admissions differed. The main difference is that survey participants had committed more violent offences (30.4%) than correctional admissions (18.5%) over the period, more property offences (28.4% and 22.1%) and less traffic offences (12.8% and 22.7%). 'Not listed' refers to certain crimes being out of scope, which means that the person was either convicted interstate, the matter was referred to the supreme court, or was a child welfare matter.

Figure 9: Survey Sample by Offence

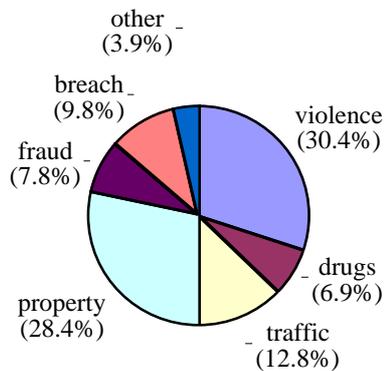
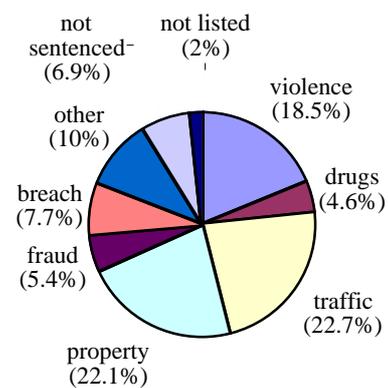


Figure 10: Corrections Admissions by Offence



Education

- More than half of the survey participants had not completed year 12. 14.7% had completed year 9, 32.4% had completed year 10, and 11.8% had completed year 11. A quarter (25.5%) had completed year 12 and 11.8% stated that they had completed a commercial or technical course or a university degree. Data on education was not available for correctional admissions at the time of study.
- 54.9% of survey participants had never been married, 32.4% were married or defacto and 12.7% were separated or divorced.

Drug Use by Survey Participants

The use of legal and illegal drugs by all survey participants are set out below in Table 3.

Table 3: Substance Use (Cigarettes, Alcohol, Illegal Drug)

Survey Question	Answer: Yes % (n)	Answer: No % (n)
Do you smoke cigarettes?	73.5 (75)	26.5 (27)
Do you drink alcohol?	74.5 (76)	25.5 (26)
In the past 12 months, have you used any of the following drugs?		
cannabis	56.9 (58)	43.1 (44)
heroin	22.5 (23)	77.5 (79)
speed	35.3 (36)	64.7 (66)
ecstasy	27.5 (28)	72.5 (74)
cocaine	21.6 (22)	78.4 (80)

The rates of drug use found in the survey are compared with ACT general population estimates in Table 4.

- Legal and illegal drug use was higher among participants than found in general population surveys.

Table 4: Drug Use by Survey Participants and General ACT Population

Drug	Survey Participants	ACT general population ¹
Smoking	73.5% current	25% males smoke daily
Alcohol	74.5% current	59% males current regular drinkers
Cannabis	56.9% in the last 12 months	20.3% in the last 12 months
Heroin	22.5% in the last 12 months	.4% in the last 12 months
Speed	35.3% in the last 12 months	3.1% in the last 12 months
Ecstasy	27.5% in the last 12 months	2.8% in the last 12 months
Cocaine	21.6% in the last 12 months	1.2% in the last 12 months

¹ Australian Institute of Health and Welfare (Miller and Draper 2001) data drawn from the 1998 National Drug Strategy Household Survey (NDSHS) of persons aged 14 and above. Illicit drug use appears as a proportion of the population.

Offences

In this report, offences have been categorised in the format that appears in Table 5. In the ACT Corrections databases, only the most serious offences are recorded. As a general rule, the most serious offence is determined by the Australian National Classification of Offences codes attributed to each person.² Generally, the lower the ANCO number, the more serious the offence. However, there may be cases where the most serious offence is determined in a more intuitive manner. For example, if a person is charged with both sexual assault and assault, the sexual assault will be recorded as the most serious offence, despite sexual assault having a higher ANCO number than other forms of assault.

Table 5: Offence Categories with Australian National Classification of Offences (ANCO)

Offence Category	Offence description	ANCO ¹
Violence	Attempted Murder	112
	Assault	122, 129
	Sexual Assault	136
	Other Sexual Offences	139
	Armed Robbery	211
Property	Other Robbery	212
	Break and Enter	311, 318, 319
	Possession of Stolen Goods	332
	Other Theft	399
	Arson	411
	Other Property Damage	419
Fraud	Fraud, Forgery and False Pretences	321
Breach	Breach of probation or parole orders	527
Traffic	Drink driving offences	711
	Dangerous or negligent driving	

² The Australian Standard Offences Classification (ASOC) had been developed to take the place of Australian National Classification of Offences (ANCO) (ABS 1997). ASOC takes into account "whether the offence involved the use of violence; whether the offence compromised the safety or well-being of persons or was primarily or solely directed at the acquisition of damage of property; whether the offence involved an intentional act or resulted from recklessness or negligence; and whether the offence had a specific victim, or constituted a breach of public order or other social codes" (ABS 1997:5). Use of ASOC is being phased in by ACT Corrections. In Table 5, ANCO codes have been used as not all offences were yet listed with ASOC codes.

	Driving while licence suspended or cancelled	732
Drug	Illegal drug possession	613, 616
	Deal and traffic illegal drugs	653, 659
	Other drug offences	699
Other	Other offences against good order	599
	Offence unlisted, unconvicted (in case of remandees), conviction was interstate, supreme court matter or child welfare court.	--

¹ Australian National Classification of Offences (ANCO) as set out in the *Australian Standard Offence Classification* (Australian Bureau of Statistics 1997).

Table 6: Offences committed by survey participants

OFFENCE TYPE	% (n)
Violence	30.4 (31)
Property	28.4 (29)
Fraud	7.8 (8)
Breach	9.8 (10)
Traffic	12.8 (13)
Drug	6.9 (7)
Other	3.9 (4)
Total	100 (102)

- The main offences committed by survey participants were violent offences (30.4%), property offences (including destruction of property) (28.4%), traffic offences (12.8%) and breach offences (9.8%).
- The offences of survey participants differed from offences recorded for incarcerated ACT prisoners housed in the NSW system. At June 30 2000, sex offences (14%), drug offences (14%), robbery (13%), and homicide (11%) comprised the highest rates of offences recorded for ACT offenders in NSW jails (ACT Prison Community Panel 2000:14).

Gambling Participation

- For all respondents, poker machine playing constituted the highest rate of participation in gambling activities once a week or more, with 43.1% of respondents playing more than once a week or more at some stage in their lifetime.
- The lowest rates of participation in gambling activities where respondents had never played was in dice games (82.4%), betting on sports with a bookie (72.5%), bingo (54.9%), stock market or commodities market (86.3%), and sporting games for money (52%).
- 36.3% of respondents said they had gambled more than three times a week in the 12 months prior to their conviction. In this period, 81.1% of these persons said that they played pokies, 27% had bet on horses or dogs, and 16.2% said they played casino games.

Table 7: Lifetime and 12 Month Gambling Participation³

Gambling Activity	Lifetime % (n)	Gambled more than three times a week in 12 months prior to conviction (n=37) % (n)
Played cards for money		10.8 (4)
not at all	41.2 (42)	
less than once a week	46.1 (47)	
once a week or more	12.7 (13)	
total	100 (102)	
Bet on horses, dogs or other animals		27 (10)
not at all	29.4 (30)	
less than once a week	59.8 (61)	
once a week or more	10.8 (11)	
total	100 (102)	
Bet on sports with a bookie		0
not at all	72.5 (74)	
less than once a week	20.6 (21)	
once a week or more	6.9 (7)	
total	100 (102)	
Played dice games for money		0
not at all	82.4 (84)	

³ For rates of gambling participation by participants from each correctional facility, see Appendix 4.

less than once a week	16.7 (17)	
once a week or more	1.0 (1)	
total	100 (102)	
Went to a casino		16.2 (6)
not at all	39.2 (40)	
less than once a week	55.9 (57)	
once a week or more	4.9 (5)	
total	100 (102)	
Played or bet on lotteries		13.5 (5)
not at all	20.6 (21)	
less than once a week	59.8 (61)	
once a week or more	19.6 (20)	
total	100 (102)	
Played bingo		2.7 (1)
not at all	54.9 (56)	
less than once a week	37.3 (38)	
once a week or more	7.8 (8)	
total	100 (102)	
Played the stock and/or commodities market		0
not at all	86.3 (88)	
less than once a week	12.7 (13)	
once a week or more	1.0 (1)	
total	100 (102)	
Played slot machines, poker machines or other gambling machines		81.1 (30)
not at all	6.9 (7)	
less than once a week	50 (51)	
once a week or more	43.1 (44)	
total	100 (102)	
Bowled, shot pool, played golf, or played some other game of skill for money		2.7 (1)
not at all	52 (53)	
less than once a week	37.3 (38)	
once a week or more	10.8 (11)	
total	100 (102)	

Gambling while incarcerated

Survey participants at both ACT remand centres (BRC, STRC) and the Periodic Detention Centre (PDC) were asked if they had gambled while detained in these centres.

- 60% had gambled while incarcerated in the BRC, STRC and the PDC.

The majority of gambling participation was in bets on televised sporting matches and card games. Winnings comprised buy-ups, including cigarettes, soft drinks and chips. Only one person said they 'got into trouble' for gambling and were made to return the winnings.

- Of the 15 persons who gambled while incarcerated, 5 had a SOGS 5-9 score and 3 had a SOGS 10+ score.
- Anecdotal evidence gathered during interviewing found that boredom is a significant factor in gambling while incarcerated.

Problem Gambling

- 34.3% of survey participants have some form of gambling problem.

Prevalence of Problem Gambling among those surveyed was determined using the South Oaks Gambling Screen (SOGS). As explained in Section 'Defining and Measuring Problem Gambling', there is some debate concerning the cut off scores used to distinguish gamblers from problem gamblers. In this survey, a cut off score of 5 and above was used to indicate problem gambling but SOGS scores of 5-9 and 10+ are given in all tables below.

Table 8: Raw Scores from the administered SOGS

SOGS Scores	Frequency	Percent	Cumulative Percent
0	28	27.5	27.5
1	13	12.7	40.2
2	9	8.8	49.0
3	9	8.8	57.8
4	8	7.8	65.7
5	5	4.9	70.6
6	3	2.9	73.5
7	3	2.9	76.5
8	3	2.9	79.4
9	5	4.9	84.3
10	2	2.0	86.3
11	3	2.9	89.2
12	8	7.8	97.1
13	1	1.0	98.0
16	2	2.0	100.0
Total	102	100.0	100.0

- From those surveyed 27.5% of persons scored '0' on the SOGS scale. These people never gambled or had done so only a few times in their lives. This figure is consistent with that found in the 2001 ACT general population survey where 26.6% were non-gamblers (AIGR 2001a:44).

Table 9: Grouped SOGS Scores

Non-gambler SOGS 0	Non-problem SOGS 1-4	Problem gambling SOGS 5-9	Severe problem gambling SOGS 10+	SOGS 5+ General gambling Problem
27.5% (28)	38.1% (39)	18.5% (19)	15.7% (16)	34.3% (35)

- The 34.3% rate of problem gambling is about eighteen times higher than the ACT general population estimate of 1.9% for the adult population, and seventeen times higher than the Productivity Commission 2.01% estimate for the Australian adult population.
- The rate of problem gambling found in this survey is within the range of problem gambling estimates (between 4% and 38%) found in other Australian and international offender studies.

Demographics of Surveyed Problem Gamblers

The main demographic features of identified problem gamblers (SOGS 5+) are set out below.

- The majority of the problem gamblers identified were male, aged between 18-35, half of whom had never been married. The majority did not identify with an ethnic group. More than half did not complete high school and just over 40% usually did some form of unskilled/manual work. At the time of reception for the most recent offence into the correctional system, over 30% were unemployed.

Table 10: Main Demographics of Problem Gamblers

Variable	% of SOGS 5+ (n=35)
Age	85.7% (30) were aged between 18-35
Gender	91.4% (32) were male
Marital Status	57.1% (20) had never been married 17.1% (6) were separated or divorced 25.7% (9) were married or defacto
Ethnicity	25.7% (9) identified with an ethnic group
Indigeneity	2.9% (1) was Aboriginal or Torres Strait Islander
Education	17.1% (6) had completed year 9 37.1% (13) had completed year 10 31.4% (11) had completed year 12 0% (7) of university educated persons had a gambling problem
Usual Employment	42.9% (15) usually did manual/unskilled work 14.3% (5) said they usually did skilled work 17.1% (6) said they were usually unemployed 17.1% (6) said they usually did professional work
Employment Status at Reception	34.9% (15) were unemployed at time of reception
(missing data for 33 participants)	44% (11) were employed at time of reception

- In relation to all survey participants, those with gambling problems were broadly similar in demographics. Like the total sample, problem gamblers are also predominantly male, aged between 18 and 35.

- There are small differences between the total sample and the problem gambling group. Slightly higher percentages of problem gamblers identified as members of an ethnic group, usually did unskilled work, were unemployed at reception, possessed slightly higher high school completion rates.
- Like the ACT general population, problem gamblers identified in this survey are young males who are not married, and who hadn't completed high school.

Gambling Participation by Problem Gamblers

- In both lifetime and 12 month gambling, more people played pokies than any other form of gambling according to both lifetime (74.3% played once a week or more) and 12 month (80%) rates.
- After pokie playing, the next highest forms of gambling played once a week or more on the lifetime scale were betting on animals (22.9%), playing sporting games (in particular pool competitions) (20%), betting on sports with a bookie (17.1%) and bingo (14.3%).
- Cards (2.6%) and dice games (2.9%) played for money, stockmarket trading (2.9%), and casino (8.6%) games showed the least once or week or more lifetime participation.
- In the 12 months prior to conviction, 20 persons with a SOGS 5+ score had gambled more than three times a week. 80% of these people included pokie playing as a regular gambling activity, while 20% said they played at the casino or bet on animals. 10% said they played cards for money and bet on lotteries.
- Both 12 month and lifetime gambling participation by problem gamblers showed similar rates of pokie playing and animal betting. But in the last twelve months, more problem gamblers had played more casino games, card games for money, than lottery, sporting games for money and bingo.
- In relation to all persons surveyed, problem gamblers bet on horses or dogs once a week or more but less problem gamblers bet on horses or dogs in the last 12 months. Problem gamblers played less card games for money, bet more on sports with a bookie and played dice games more in their lifetime, played more casino games and sporting games for money in their lifetime and the last 12 months, played less bingo and played lotteries about the same.

Table 11: Lifetime and 12 month gambling participation by SOGS 5+ problem gamblers

Gambling Activity	SOGS 5+ Lifetime participation (n=35) % (n)	SOGS 5+ Gambled more than three times a week in 12 months prior to conviction (n=20) % (n)
Played cards for money not at all less than once a week once a week or more	20 (7) 54.3 (19) 2.6 (9)	10 (2)
Bet on horses, dogs or other animals not at all less than once a week once a week or more	14.3 (5) 62.9 (22) 22.9 (8)	20 (4)
Bet on sports with a bookie not at all less than once a week once a week or more	62.9 (22) 20 (7) 17.1 (6)	0
Played dice games for money not at all less than once a week once a week or more	74.3 (26) 22.9 (8) 2.9 (1)	0
Went to a casino not at all less than once a week once a week or more	14.3 (5) 77.1 (27) 8.6 (3)	20 (4)
Played or bet on lotteries not at all less than once a week once a week or more	22.9 (8) 54.3 (19) 22.9 (8)	10 (2)
Played bingo not at all less than once a week once a week or more	40 (14) 45.7 (16) 14.3 (5)	5 (1)
Played the stock and/or commodities market not at all less than once a week once a week or more	88.6 (31) 8.6 (3) 2.9 (1)	0
Played slot machines, poker machines or other gambling machines not at all less than once a week once a week or more	2.9 (1) 22.9 (8) 74.3 (26)	80 (16)
Bowled, shot pool, played golf, or played some other game of skill for money not at all less than once a week once a week or more	37.1 (13) 42.9 (15) 20 (7)	5 (1)

Comorbidity

Table 12: Drug use by SOGS groups

SOGS	Current Use		Any use in the last 12 months				
	Smoke (n=75)	Alcohol (n=76)	Cannabis (n=58)	Heroin (n=23)	Speed (n=36)	Ecstasy (n=28)	Cocaine (n=22)
0	26.7% (20)	28.9% (22)	17.2% (10)	17.4% (4)	19.4% (7)	14.3% (4)	18.2% (4)
1-4	36% (27)	38.2% (29)	41.4% (24)	34.8% (8)	38.9% (14)	39.3% (11)	45.5% (10)
5-9	20% (15)	19.7% (15)	24.1% (14)	13% (3)	19.4% (7)	21.4% (6)	18.2% (4)
10+	17.4% (13)	13.2% (10)	17.2% (10)	34.8% (8)	22.2% (8)	25% (7)	18.2% (4)

- Highest rates of all forms of drug use occur in the SOGS 1-4 range (non-problem gamblers).
- All forms of drug use generally decreases as the SOGS score increases.

Gambling and Offending

- The most serious current offences recorded for the 34.3% of participants with gambling problems were property crime (37.1%), traffic offences (17.1%), violent crimes (28.6%) and fraud (8.6%).

15.7% of participants scored 10+ on the SOGS. This group possesses the least violent offences (18.75%) but the most property offences (50%). Traffic offences were also less than other SOGS groups.

Property crime was high across all groups, between 20-50%. Property crimes were between 20-28% in the SOGS 0, 1-4 and 5-9 groups but as noted above, much higher (50%) in the SOGS 10+ group.

The highest incidence of violent crime was committed by those in the SOGS 1-4 and SOGS 5-9 groups.

- Fraud offences were not substantially different across the SOGS groups.

More drug-related convictions were recorded for the SOGS group that scored '0' than in any other category. But, as the Corrections database records only the most serious offence, there may be other drug-related convictions that will not show up in the data set out in Table 13.

Table 13: Current offences committed according to SOGS categories

Offence Type	SOGS 0	SOGS 1-4	SOGS 5-9	SOGS 10+
Violence (n=31)	21.4% (6)	38.5% (15)	36.9% (7)	18.75% (3)
Drugs (n=7)	14.3% (4)	5.1% (2)	0	6.25% (1)
Fraud (n=8)	7.1% (2)	7.7% (3)	10.5% (2)	6.25% (1)
Traffic (n=13)	7.1% (2)	12.8% (5)	26.3% (5)	6.25% (1)
Breach (n=10)	10.7% (3)	15.4% (6)	0	6.25% (1)
Property (n=29)	28.6% (8)	20.5% (8)	26.3% (5)	50% (8)
Other (4)	3.6% (3)	0	0	6.25% (1)
TOTAL	100% (28)	100% (39)	100% (19)	100% (16)

The results in Table 13 differ from other studies suggesting that problem gamblers commit mainly non-violent property crimes (e.g. Abbott et.al. 2000b, Doley 2000, Lesieur 1987, Rosenthal and Lorenz 1991, Smith and Wynne 1999). Although the incidence of property crime was high across all SOGS groups, with the highest being for the SOGS 10+ group, violent crimes also remained high across all SOGS groups, with the lowest incidence in the SOGS 10+ group. Violent crimes committed by survey participants were: attempted murder, assault, sexual assault, other sexual offences, and armed robbery.

Survey participants were also asked two questions relating gambling and offending. The two questions were:

“Would you say that your gambling contributed to your offending?”

“Have you ever stolen anything or obtained money illegally to pay for gambling or to pay gambling debts?”

In sum, 25.7% of problem gamblers (i.e. those persons with a SOGS score higher than five) said that their gambling has contributed to their offending. 45.7% of problem gamblers said that they had stolen something or obtained money illegally to pay for gambling or gambling debts. The breakdown within the problem gambling SOGS 5+ range is set out in Table 14. The table shows that the SOGS 10+ group had committed crimes that directly related to their gambling at double the rate of the SOGS 5-9 group.

Table 14: Gambling Related Offences

SOGS Scores	Gambling contributed to offending	Done anything illegal to get money for gambling or pay off gambling debts
SOGS 5-9 (n=19)	21.1% (4)	26.3% (5)
SOGS 10+ (n=16)	56.25% (9)	68.75% (11)

Comparing Crimes committed by Drug users and Problem Gamblers

On the whole, drug users and problem gamblers commit similar crimes. In relation to drug users, the following points extrapolated from Table 15 are important.

- Violent crimes comprise about 30% of those offences committed by users of legal and illegal drugs.
- Half of those persons who had used heroin in the past 12 months were convicted for property offences. For those persons who had used other drugs in the past 12 months, 26-39% had committed property offences.
- Drug related convictions were low among drug users. Cannabis users having the highest conviction numbers for drug offences at over 20%.
- Traffic offences were highest among those people who currently drink alcohol and smoke cigarettes.

Table 15: Offences committed by users of alcohol and illegal drugs

Offence Type	Type of Drug Use						
	Problem Gambling SOGS 5+ (n=35)	Alcohol (n=76)	Canna- bis (n=58)	Heroin (n=23)	Speed (n=36)	Ecstasy (n=28)	Cocaine (n=22)
Violence	28.6% (10)	30.3% (23)	29.2% (17)	30.4% (7)	27.8% (10)	35.8% (10)	31.8% (7)
Drugs	2.9% (1)	9.2% (7)	10.3% (6)	4.3% (1)	13.9% (5)	17.8% (5)	22.7% (5)
Fraud	8.6% (3)	9.2% (7)	5.2% (3)	4.3% (1)	5.6% (2)	3.6% (1)	4.5% (1)
Traffic	17.1% (6)	15.8% (12)	17.2% (10)	0	5.6% (2)	3.6% (1)	4.5% (1)
Breach	2.9% (1)	7.9% (6)	8.6% (5)	4.3% (1)	5.6% (2)	3.6% (1)	4.5% (1)
Property	37.1% (13)	26.3% (20)	27.5% (16)	47.8% (11)	39% (14)	35.7% (10)	31.8% (7)
Other	2.9% (1)	1.3% (1)	1.7% (1)	4.3% (1)	2.8% (1)	0	0

In relation to gamblers, drug users committed similar crimes.

- Property offences were high among problem gamblers and users of all drugs.
- Traffic offences (drink driving and driving while licence suspended) were higher among problem gamblers, alcohol and cannabis users than those users of all other drugs.
- Fraud offences were slightly higher among alcohol users and problem gamblers than illegal drug users.
- Drug offences were lowest among problem gamblers (2.9%) but highest among cocaine and ecstasy users (22.7% and 17.8% respectively).

Self-Assessment of Gambling Problems and Help Seeking

To gauge participant self-assessment of gambling problems, the following three survey questions were asked. The first two questions were in the SOGS component of the survey:

In the 12 months prior to conviction: "Would you say that gambling has caused you any problems?"

Lifetime question: "Do you feel you have ever had a problem with gambling?"

The third question relates to help seeking and is not part of the SOGS component:

"Have you ever sought help in the past for a gambling problem?"

The results of these three questions are set out in Table 16.

Table 16: Self Assessed Gambling Problems according to SOGS group

SOGS group	Any problems with gambling in the 12 months prior to conviction?	Any lifetime gambling problems?			Ever sought help for a gambling problem?
		No	in the past	Now	
SOGS 5-9 (n=19)	36.8% (7)	31.5% (6)	47.4% (9)	21.1% (4)	15.8% (3)
SOGS 10+ (n=16)	43.8% (7)	18.8% (3)	68.8% (11)	12.5% (2)	37.5% (6)

Positive self-assessment of gambling problems were generally higher among the SOGS 10+ group than the SOGS 5-9 group.

Those who answered yes to having experienced problems with gambling in the 12 months prior to conviction, were asked to describe these problems.

- 66.7% said their gambling related problems in the 12 months prior to conviction were of a financial nature.

- 27.8% said their gambling related problems in the 12 months prior to conviction related to their personal relationships.
- 14.3% said their gambling had led them to committing offences.
- 2 persons said that gambling had caused them to have emotional problems. One person specified depression as being caused by gambling.
- 2 persons said that they associated their gambling with the increased intake of illicit drugs.

Table 17: 'Tried to Get Help for Gambling'

SOGS group	ACT Offenders	ACT 2001 survey	PC 1999 National Survey
SOGS 5-9 (n=19)	15.8% (3)	53.4% (678)	32% (15,040)
SOGS 10+ (n=16)	37.5% (6)	12.3% (498)	12% (29,750)

In Table 17, help seeking by offenders in relation to gambling differs from that found in both the ACT 2001 phone survey and the Productivity Commission (PC) 1999 National Survey. The main difference is that there was a higher percentage of persons scoring SOGS 10+ seeking help for gambling than found in the PC and ACT general survey. The help seeking figures for the SOGS 10+ group from the current survey are probably inflated as at least three survey participants were ordered to seek gambling counselling as a requirement of their probation order.

The ACT 2001 (AIGR 2001a:125) general population survey on gambling found that "...the majority of ACT regular gamblers with a self-assessed problem did not seek help for their gambling problems, although help-seeking increased according to the severity of gambling problem being experienced." This finding is in keeping with the results of the present survey. Like the AIGR 2001 survey, anecdotal evidence from the current survey found that many people believed that they could give up gambling on their own, or had already done so.

Comparing help seeking for gambling, alcohol and drug problems

Survey participants were asked if they had ever sought help for gambling, drug and alcohol problems.

- 25.7% (n=9) of persons scoring 5+ on the SOGS scale had sought help for a gambling problem.
- Of these, 55.6% (n=5) of those persons whose gambling had contributed to their offending had sought help.
- 88.9% (n=8) of those persons rating SOGS 5+ and who had stolen anything or obtained money illegally to pay for gambling or gambling debts had sought help.
- 26.5% (n=27) of all survey participants had sought help for a drinking problem.
- 25.9% (n=7) of these persons seeking help for a drinking problem had been convicted of a drink driving related offence.
- 36.3% (n=37) had sought help for a drug problem.
- 10.8% (n=4) of those who had sought help for a drug problem had been convicted of a drug related offence.

Anecdotal evidence collected during administered questionnaires reveals that the majority of respondents who answered 'yes' to the questions relating to help seeking for drug and alcohol problems, attended some form of drug and alcohol counselling or rehabilitation programme as part of their sentencing arrangements. The above drug and alcohol help seeking figures should be considered in relation to sentencing requirements.

Summary of Survey Results

The main outcomes of this study are:

- The survey found that 34.3% of survey participants have some form of gambling problem. This figure is within the range of other studies focusing on offenders and gambling. Of the 34.3% of problem gamblers identified in this survey of ACT offenders, gambling is a severe problem for 15.7%. These figures are substantially higher than have been estimated for the general ACT population.
- The majority of identified problem gamblers played poker machines most often in both lifetime and 12 month time frames. After pokie playing, gambling participation also featured betting on horses or dogs, playing sporting games for money, betting on sports with a bookie and bingo.
- Legal and illegal drug use was substantially higher among survey participants than found among the general ACT population. While all forms of drug use decreased as the rate of gambling participation and gambling problems increased, drug use by problem gamblers identified in this offender survey was substantially higher than the general population.
- The most serious current offences recorded for problem gamblers were property crime (37.1%), violent crimes (28.6%) and traffic offences (17.1%). Other studies of gambling among offenders, have generally highlighted property crime and fraud as the main offences committed by problem gamblers. In this study, the rate of fraud crimes among problem gamblers was lower than expected at 8.6%.
- For some surveyed offenders with a gambling problem, their offending can be described as being co-symptomatic or coincidental to their gambling. For other surveyed offenders who have gambling problems, gambling directly related to their offending. 25.7% of problem gamblers said that their gambling had contributed to their offending. 45.7% of problem gamblers said that they had stolen or obtained money illegally to finance their gambling or to pay off accrued gambling debts.
- Only 25.7% of problem gamblers identified in this survey had sought help for a gambling problem. Not all of these persons sought help of their own volition. Some persons who sought help were obliged to do so in order to fulfil court orders.
- A significant conclusion of this study is that gambling problems among offenders need to be identified in the correctional system, as most will not seek help on their own.

REFERENCES

- Abbott, M. and B. McKenna. 2000a. Gambling and Problem Gambling among recently sentenced women prisoners in New Zealand. Report Number Four of the New Zealand Gaming Survey. Wellington: Department of Internal Affairs.
- Abbott, M., McKenna, B. and L. Giles. 2000b. *Gambling and Problem Gambling among recently sentenced males in four New Zealand prisons. Report Number Five of the New Zealand Gaming Survey.* Wellington: Department of Internal Affairs.
- Abbott, M. and R. Volberg. 1999. *Gambling and Problem Gambling in the Community: an international overview and critique. Report Number One of the New Zealand Gaming Survey.* Wellington: Department of Internal Affairs.
- Anderson, D. 1999. Problem gambling among incarcerated male felons. *Journal of Offender Rehabilitation* 29(3/4):113-127.
- Andrew, N., Asimacopoulos, K., Dimovski, D., and D. Haydon. 1997. Who's Holding the Aces? *Alternative Law Journal* 22(6):268-272.
- Arizona Council on Compulsive Gambling. 2002. *Pathological Gambling, Probation and Parole. An educational program.* Unpublished manuscript.
- Australian Bureau of Statistics. 1997. *Australian Standard Offence Classification.* Canberra: Commonwealth of Australia.
- ACT Gambling and Racing Commission. 2002. *ACT Gambling and Racing Commission Annual Report 2001-2002.* Canberra: ACT Government.
- ACT Prison Community Panel. 2000. *An ACT Prison: 'Getting it Right' (in 2 volumes).* Canberra: Department of Corrective Services.
- ACT. 2002. *Gambling and Racing Control Act 1999. No. 46.* Republication No 2, 13 September 2002.
- Australian Institute of Gambling Research. 2001a. K. Tremayne, H. Masterman-Smith and J. McMillen. *Survey of the nature and extent of gambling and problem gambling in the ACT.* Sydney: Australian Institute for Gambling Research, University of Western Sydney, c2001.
- Australian Institute for Gambling Research. J. McMillen and N. Bellew. 2001b. *ACT needs analysis: gambling support services.* Sydney: Australian Institute for Gambling Research, 2001.
- Australian Institute for Gambling Research. 1997. *Definition and Incidence of Problem Gambling, including the Socio-economic Distribution of Gamblers.* Report prepared for the Victorian Casino and Gaming Authority. Sydney: AIGR.
- Australian Institute for Gambling Research and the Labour and Industry Research Unit. 1996. *Problem gambling and criminal behaviour in Queensland: a report of the*

second year of the study into the social and economic impact of the introduction of gaming machines to Queensland clubs and hotels. Brisbane: Department of Families, Youth and Community Care.

- Baron, E. n.d. *The effect of drinking alcohol on control of gambling: a preliminary study on gaming machines in Australia.*
http://drugarm.org.au/research/baron_full.htm (sighted 24-02-03).
- Battersby, M., Thomas, L., Tolchard, B., and A. Esterman. 2002. The South Oaks Gambling Screen: A Review with Reference to Australian Use. *Journal of Gambling Studies* 18(3):257-271.
- Becona, E. 1996. Prevalence Surveys of Problem and Pathological Gambling in Europe: the cases of Germany, Holland and Spain. *Journal of Gambling Studies* 12(2):179-192.
- Bellringer, P. 1986. Gambling and Crime: a prison perspective. *Society for the Study of Gambling Newsletter* 9:9-12.
- Birgden, A. and C. McLachlan. 2002. *Reducing re-offending framework: setting the scene. Paper No. 1.* Melbourne: Office of the Correctional Services Commissioner.
- Bland., R., Newman, S., Orn, H., and Stebelsky, G. 1993. Epidemiology of pathological gambling in Edmonton. *Canadian Journal of Psychology* 38:108-112.
- Blaszczynski, A. 1994. Criminal Offences in Pathological Gamblers. *Psychiatry, Psychology and Law* 1(2):129-38.
- Blaszczynski, A. and McConaghy. 1994a. Antisocial personality disorder and pathological gambling. *Journal of Gambling Studies* 10(2):129-45.
- Blaszczynski, A. and McConaghy. 1994b. Criminal offences in Gamblers Anonymous and Hospital treated pathological gamblers. *Journal of Gambling Studies* 10(2):99-127.
- Blaszczynski, A. and McConaghy. 1992. *Pathological Gambling and Criminal Behaviour. Report to the Criminology Research Council.* Canberra: Institute of Criminology.
- Blaszczynski, A. and D. Silove. 1996. Pathological Gambling: forensic issues. *Australian and New Zealand Journal of Psychiatry* 30:358-369.
- Blaszczynski, A., Steel, Z., and McConaghy, N. 1997. Impulsivity in pathological gambling: the antisocial impulsivist. *Addiction* 92(1):75-87.
- Boreham, P., Dickerson, M. and B. Harley. 1996. What are the Social Costs of Gambling?: the case of Queensland machine gaming industry. *Australian Journal of Social Issues* 31(4):425-42.

- Brown, R. 1998. Problem Gambling among people on community corrections. In, *Compulsive Gambling Society of New Zealand. Proceedings of the National Workshop on treatment for problem gambling*. Auckland.
- Brown, R. 1987. Pathological Gambling and Associated Patterns of Crime: Comparisons with Alcohol and Drug Addictions. *Journal of Gambling Behavior* 3:98-114.
- Centre for Criminology and Criminal Justice. 2000. *The Impact of Gaming and Crime Statistics. Report prepared for the Victorian Casino and Gaming Authority*. Caulfield East: CCCJ.
- Coerbergh, B., Bakker, L., Anstiss, B., Maynard, K. and S. Percy. no date. *A Seein' "I" to the Future: the criminogenic needs inventory (CNI)*. unpublished manuscript.
- Crofts, P. 2003. Researching the link between Gambling and Crime. Paper presented at *Evaluation in Crime and Justice: trends and methods*. Conference organized by the Australian Institute of Criminology and the Australian Bureau of Statistics, Canberra, 24 - 25 March 2003.
- Crofts, P. 2002. *Gambling and Criminal Behaviour: analysis of local and district court files*. Sydney: Casino Community Benefit Fund.
- Dickerson, M. 1997. *Pathological Gambling: what's in a name? Implications for social policy and related educational and rehabilitative strategies*. Paper presented to the 10th International Conference on Gambling and Risk Taking, Montreal.
- Dickerson, N., E. Baron, S. Hong, D. Cottrell. 1996. Estimating the extent and degree of gambling related problems in the Australian population: a national survey. *Journal of Gambling Studies* 12(2):161-78.
- Doley, R. 2000. *Want to Make a Bet? Gambling and Crime in Australiasia*. Australian Centre for Policing Research. Critical Issues in Policing Paper, No. 4.
- Ferris, J., Stirpe, T., and Ialomiteanu, A. 1995. *Gambling in Ontario: a report from a general population survey on gambling-related problems and opinions*. Toronto: Addiction Research Foundation.
- Feigelman, W., Wallisch, L., and Lesieur, H. 1998. Problem Gamblers, problem Substance Users, and Dual-Problem Individuals: an epidemiological study. *American Journal of Public Health* 88(3):467-70.
- Grinois, E., Mustard, D., and Dilley, C. 1999. *Casinos and Crime*. Paper prepared for the US National Gambling Impact Study Commission, Washington, June 1999.
- Gowen, D. 1996. Pathological Gambling: an obscurity in community corrections? *Federal Probation* 60(2):5-9.
- Jackson, A., Thomas, S., Thomason, N., Borrell, J., Crisp, B., Ho, W., Holt, T., and Smith, S. 1999. *Analysis of Clients Presenting to Problem Gambling Counselling Services July 1997 to June 1998*. Client and Service Analysis Report Number 4. Melbourne: School of Social Work, Melbourne University.

- Jackson, A., Thomason, N., Ryan, V., and S, Smith. 1997. *Analysis of Clients Presenting to Problem Gambling Services from July 1, 1995 – June 30, 1996*. Client and Service Analysis Report Number 1. Melbourne: School of Social Work, Melbourne University.
- Jones, G. 1989. The Prevalence and Characteristics of Prisoners with Gambling Related problems in Canning Vale Remand Centre. Perth, WA: Department of Corrective Services.
- Klein, J. n.d. *Mohawk Correctional Facility Gamblers' Treatment Report*. Unpublished manuscript.
- Lepage, C., Ladouceur, R., and C. Jacques. 2000. Prevalence of problem gambling among community service users. *Community Mental Health Journal* 36(6):597-601.
- Lesieur, H. 1989. *Female Pathological Gamblers and Crime*. Paper presented at the meeting of the American Society of Criminology, Reno, Nevada.
- Lesieur, H. 1977. *The Chase: career of the compulsive gambler*. New York: Anchor Books.
- Lesieur H. 1987. Gambling, pathological gambling and crime. In: Galski T, editor, *The Handbook of Pathological Gambling*. Springfield, IL: Charles C. Thomas.
- Lesieur, H. and S. Blume. 1987. The South Oaks Gambling Screen (SOGS): a new instrument for the identification of pathological gambling. *American Journal of Psychiatry* 144:1184-1188.
- Lesieur, H. and R. Klein. 1985. *Prisoners, Gambling and Crime*. Paper presented at the Annual Meeting of the Academy of Criminal Justice Sciences, Las Vegas.
- Maller, M. and R. Lane. 2002. A Risk Assessment Model for Offender management. Paper presented at the *Probation and Community Corrections: making the community safer conference* convened by the Australian Institute of Criminology and the probation and Community Corrections Officers' Association Inc, Perth, 23-24 September 2002.
- Marshall, M., Balfour, R., and A. Kenner. 1997. *Pathological Gambling: prevalence, type of offence, comorbid psychopathology and demographic characteristics in a prison population*. Submission to the Productivity Commission. <http://www.pc.gov.au/inquiry/gambling/subs/sublist.html>
- Maynard, K., Coebergh, B., Anstiss, B., Bakker, L. and T. Hruiwai. no date. *Ki te Arotu. Toward a new assessment - the identification of cultural factors which may pre-dispose Maori to crime*. unpublished manuscript.
- Maden, T., Swinton, M., and J. Gunn. 1992. Gambling in young offenders. *Criminal Behaviour and Mental Health* 2:300-308.
- McCallum and Blaszczynski. 2002. Pathological Gambling and comorbid substance use. *Aus and NZ J of Psychiatry* 36(3):411-15.

- McCorkle, R. 2002. *Pathological Gambling in Arrestee Populations*. Final Report Prepared for National Institute of Justice, U.S. Department of Justice. Las Vegas: Department of Criminal Justice.
- Merrington, S. 2001. Emerging ACE Date: further analysis of needs and risk. *Probation Studies Unit, ACE Practitioner Bulletin 4*.
- Meyer, G. and T. Fabian. 1996. Pathological Gambling and Criminal Culpability: an analysis of forensic evaluations presented to German Penal Courts. *Journal of Gambling Studies* 12(1):33-47.
- Miller, M. and G. Draper. 2001. *Statistics on drug use in Australia 2000. Drug Statistics Series Number 8*. Canberra: Australian Institute of Health and Welfare.
- National Criminal Justice Reference Service. 2003. Gambling Courts. <https://mis.ncjrs.org/network/ConfRpts/0206memos/020613c.html> (sighted 23-04-03).
- National Institute of Corrections. 1999. *Topics in Community Corrections. Annual Issue 1999: classification and risk assessment*. Colorado: Longmont.
- Nixon, G., and T. Leigh. n.d. *Developing a Gambling Awareness and Prevention Program: impacting gambling behavior in prison populations*. <http://www.abgaminginstitute.ualberta.ca/Research/2002/nixon.htm> (sighted 2 May 2003).
- Oakley-Browne, M., Adams, P., and P. Mobberley. 2003. Interventions for pathological gambling (Cochrane Review). *The Cochrane Library* 1.
- Petry, N. 2000. Gambling problems in substance abusers are associated with increased sexual risk behaviours. *Addiction* 95(7):1089-1100.
- Petry, N. and Z. Tawfik. 2001. Comparison of problem-gambling and non-problem-gambling youths seeking treatment for marijuana abuse. *Journal of the American Academy of Child Adolescent Psychiatry* 40(11):1324-1331.
- Powell, L. 2001. Gambling Information and Counselling Services. Service Profile. *EGambling* 4. <http://www.camn.net/egambling>
- Powis, J. 2002. *Problem Gambling Prevalence Survey 2002*. Brisbane: Department of Corrective Services.
- Productivity Commission. 1999. *Australia's Gambling Industries*. Report No. 10. Canberra: AusInfo.
- Raynor, P., Kynch, J., Roberts, C. and S. Merrington. 2000. *Risk and need assessment in probation services. Home Office Research Study 211*. London: Research, Development and Statistics Directorate, Home Office.
- Reynolds, K. 1999. Problem Gambling Prevention Program for Prison Inmates. *Beyond the Odds* March.

- Ricketts, R., Bliss, P., Macdonald, H., and C. Rayner. 2000. *The Extent of Gambling among Offenders on Probation*. Sheffield: Specialist Psychotherapy Services, Community Health Sheffield NHS Trust.
- Robson, E., Edwards, J., Smith, G., and I. Colman. 2002. Gambling Decisions: an early intervention program for problem gamblers. *Journal of Gambling Studies* 18(3):235-255.
- Rose, I. 2003. The world's only gambling court. *The Wager* 4-06-03. <http://www.the.wager.org/editorial.htm> (sighted 12-06-03).
- Rossen, F. 2001. *Youth Gambling: a critical review of the public health literature*. Auckland: Centre for Gambling Studies, University of Auckland.
- Rosenthal, R. and V. Lorenz. 1992. The Pathological Gambler as Criminal Offender. Comments on Evaluation and Treatment. *Clinical Forensic Psychiatry* 15(3):647-660.
- Sakurai, Y. and R. Smith. 2003. Gambling as a Motivation for the Commission of Financial Crime. *Trends and Issues in Crime and Criminal Justice No. 256*. Canberra: Australian Institute of Criminology.
- Shaffer, H., Freed, C., and D. Healea. 2002. Gambling disorders among homeless persons with substance use disorders seeking treatment at a community center. *Psychiatric Services* 55(9):1112-1117.
- Smith, G., Wynne, H. and T. Hartnagel. 2003. *Examining Police Records to Assess Gambling Impacts: a study of gambling-related crime in the city of Edmonton*. Report prepared for The Alberta Gaming Research Institute, March 2003.
- Smith GJ. and Wynne HJ. 1999. *Gambling and Crime in Western Canada: Exploring Myth and Reality*. Calgary: Canada West Foundation, August 1999.
- State of Louisiana. 2003. *Adult/Juvenile Drug Courts. FAQ about Gambling/Drug Court Programs*. <http://www.26thda.org/drugcourts.html> (sighted 12-03-03).
- State of Minnesota. 2002. *Minnesota Statutes*. <http://www.revisor.leg.state.mn.us/stats/245/98.html>
- Templer, D., Kaiser, G., and K. Siscoe. 1993. Correlates of Pathological Gambling Propensity in Prison Inmates. *Comprehensive Psychiatry* 34(5):347-51.
- Templer, D. Moten, J. and G. Kaiser. 1994. Casino Gaming Offense Inmates: what are these men like? *Journal of Gambling Studies* 10(3):237-246.
- Toneatto, T. and W. Skinner. 2000. Relationship between gender and substance use among treatment-seeking gamblers. *EGambling* 1.
- Victorian Government. 2003. *Loddon Prison joins the fight against problem gambling*. Press Release 31-07-03.

- Walker, M. 1996. The Medicalisation of gambling as an ‘addiction’. In, J. McMillen (ed), *Gambling Cultures: studies in history and interpretation*, 223-42. London: Routledge.
- Walters, G. 1997. Problem Gambling in a Federal Prison Population: results from the South Oaks Gambling Screen. *Journal of Gambling Studies* 13(1):7-24.
- Walters, G. and Contri, D. 1998. Outcome Expectancies for Gambling: empirical modelling of a memory network in federal prison inmates. *Journal of Gambling Studies* 14(2):173-191.
- Welte, J., Barnes, G., Wieczorek, W., Tidwell, M., and J. Parker. 2001. Alcohol and gambling pathology among US adults: prevalence, demographic patterns and comorbidity. *Journal of Studies on Alcohol* 62(5):706-712.

Appendix 1: Questionnaire

<p>Interviewee Number</p> <p>Have I interviewed you before?</p> <p>Yes</p> <p>No</p> <p>Have you been sentenced yet (for remandees)?</p> <p>Yes</p> <p>No</p> <p>-----</p> <p>Question 1. What is your marital status?</p> <p>Never married</p> <p>Defacto</p> <p>Married</p> <p>Separated</p> <p>Divorced</p> <p>Widowed</p> <p>Question 2. What is your usual occupation?</p> <p>Student</p> <p>Homemaker/Childcare</p> <p>Retired</p> <p>Unemployed</p> <p>Manual Work (unskilled)</p> <p>Skilled Work (tradesman, etc)</p> <p>Managerial/Professional</p> <p>Other.....</p> <p>Question 3. What is your highest level of education?</p> <p>Primary School</p> <p>High School (year).....</p> <p>Commercial / Technical Training</p> <p>University</p>	<p>Question 4. Do you identify with an ethnic group? Specify one or more.</p> <p>.....</p> <p>.....</p> <p>Question 5. In the 12 MONTHS before your conviction (charge), did you regularly gamble, by regularly I mean more than three times per week?</p> <p>YES</p> <p>NO..... Go to Question 6.</p> <p>If YES, about how much did you spend on it (\$/week)?</p> <p>.....</p> <p>...</p> <p>What types of gambling (eg: horse racing, cards, pokies)?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>How did you get the money to pay for this?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Would you say that gambling has caused you any problems?</p> <p>YES</p> <p>NO</p> <p>Specify.....</p> <p>.....</p>
--	---

<p>Question 6. Please indicate which of the following types of gambling you have done in your lifetime.</p> <p>Played cards for money</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Bet on horses, dogs or other animals (in off-track betting, at the track, or with a bookie)</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Bet on sports with a bookie</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Played dice games (including craps, or other dice games) for money?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Went to a casino (legal or otherwise)?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Played or bet on lotteries?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Played bingo?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p>	<p>Played the stock and/or commodities market?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Played slot machines, poker machines, or other gambling machines?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Bowled, shot pool, played golf, or played some other game of skill for money?</p> <p>Not at all</p> <p>Less than once a week</p> <p>Once a week or more</p> <p>Question 7. What is the largest amount of money you have ever gambled with on any one day?</p> <p>Never gambled</p> <p>\$1 or less</p> <p>More than \$1 up to \$10</p> <p>More than \$10 up to \$100</p> <p>More than \$100 up to \$1000</p> <p>More than \$1000 up to \$10000</p> <p>More than \$10000</p> <p>Question 8. Do (did) your parents have a gambling problem?</p> <p>Both my father and mother gamble (or gambled) too much</p> <p>My father gambles (or gambled) too much</p> <p>My mother gambles (or gambled) too much</p> <p>Neither one gambles (or gambled) too much</p> <p>Question 9. When you gamble, how often do you go back on another day to win back money you lost?</p> <p>Never</p> <p>Some of the time (less than half the time) I lost</p> <p>Most of the time I lost</p> <p>Every time I lost</p>

<p>Question 10. Have you ever claimed to be winning money gambling but weren't really? In fact, you lost?</p> <p>Never (or never gamble)</p> <p>Yes, less than half the time I lost</p> <p>Yes, most of the time</p> <p>Question 11. Do you feel you have ever had a problem with gambling?</p> <p>No</p> <p>Yes, in the past, but not now</p> <p>Yes</p> <p>Question 12. Did you ever gamble more than you intended to?</p> <p>Yes</p> <p>No</p> <p>Question 13. Have people criticized your gambling?</p> <p>Yes</p> <p>No</p> <p>Question 14. Have you ever felt guilty about the way you gamble or what happens when you gamble?</p> <p>Yes</p> <p>No</p> <p>Question 15. Have you ever felt like you would like to stop gambling but didn't think you could?</p> <p>Yes</p> <p>No</p> <p>Question 16. Have you ever hidden betting slips, lottery tickets, gambling money, or other signs of gambling from your spouse, children, or other important people in your life?</p> <p>Yes</p> <p>No</p>	<p>Question 17. Have you ever argued with people you live with over how you handle money?</p> <p>Yes</p> <p>No</p> <p>Question 18. (If you answered yes to the previous question) have money arguments ever centred on your gambling?</p> <p>Yes</p> <p>No</p> <p>Question 19. Have you ever borrowed from someone and not paid them back as a result of your gambling?</p> <p>Yes</p> <p>No</p> <p>Question 20. Have you ever lost time from work (or school) due to gambling?</p> <p>Yes</p> <p>No</p> <p>Question 21. If you borrowed money to gamble or to pay gambling debts, who or where did you borrow from?</p> <p>From household money</p> <p>No</p> <p>Yes</p> <p>From your spouse</p> <p>No</p> <p>Yes</p> <p>From other relatives or in-laws</p> <p>No</p> <p>Yes</p> <p>From banks, loan companies, or credit unions</p> <p>No</p> <p>Yes</p> <p>From credit cards</p> <p>No</p> <p>Yes</p>
--	---

<p>From loan sharks</p> <p>No</p> <p>Yes</p> <p>You cashed in stocks, bonds, or other securities</p> <p>No</p> <p>Yes</p> <p>You sold personal or family property</p> <p>No</p> <p>Yes</p> <p>You borrowed on your checking account (passed bad cheques)</p> <p>No</p> <p>Yes</p> <p>You have (had) a credit line with a Bookie</p> <p>No</p> <p>Yes</p> <p>You have (had) a credit line with a Casino</p> <p>No</p> <p>Yes</p> <p>Question 22. Would you say that your gambling contributed to your offending?</p> <p>Yes</p> <p>No</p> <p>Question 23. Have you ever gambled while you were a client of ACT Corrections?</p> <p>Yes</p> <p>No.....Go to question 24.</p> <p>If yes, what types of gambling was this?</p> <p>.....</p> <p>.....</p> <p>Has this gambling ever caused you to get into trouble?</p> <p>Yes</p> <p>No</p>	<p>If yes, please describe what sort of trouble was this?</p> <p>.....</p> <p>.....</p> <p>Question 24. Would you like help to give up gambling?</p> <p>Yes</p> <p>No</p> <p>Question 25. Have you ever gambled to relieve feelings such as sadness, anger or boredom?</p> <p>Yes</p> <p>No</p> <p>Question 26. Have you ever sought help in the past for a gambling problem?</p> <p>Yes</p> <p>No</p> <p>Question 27. Have you ever stolen anything or obtained money illegally to pay for gambling or to pay gambling debts?</p> <p>Yes</p> <p>No</p> <p>Question 28. Do you smoke cigarettes?</p> <p>Yes</p> <p>No</p> <p>Question 29. Do you drink alcohol?</p> <p>Yes</p> <p>No</p> <p>Question 30. Have you ever sought help in the past for a drinking problem?</p> <p>Yes</p> <p>No</p>
---	---

<p>Question 31. In the past 12 months, have you ever used any of the following drugs:</p> <p>Cannabis</p> <p>Yes</p> <p>No</p> <p>Heroin</p> <p>Yes</p> <p>No</p> <p>Speed</p> <p>Yes</p> <p>No</p> <p>Ecstasy</p> <p>Yes</p> <p>No</p> <p>Cocaine</p> <p>Yes</p> <p>No</p> <p>Question 32. Have you ever sought help in the past for a drug problem?</p> <p>Yes</p> <p>No</p>	
---	--

Appendix 2: Consent Form

Centre for Gambling Research
Research School of Social Sciences
Canberra ACT 0200
AUSTRALIA
Telephone: 61 (0)2 6125 8869
Fax: 61 (0)2 6243 8507

Consent Form

Thank you for your willingness to participate in a research project of the Australian National University, entitled “Gambling and Community Corrections.” It will involve brief face-to-face interviews with clients of ACT Corrections. Questions will be asked about your individual gambling practices. The research is intended to provide general information that will improve services to ACT Corrections clients generally. It is funded by the ACT Gambling and Racing Commission.

It’s important that you know the following things.

- First, you don’t have to do this interview if you don’t want to.
- Second, you don’t have to answer any questions that you don’t want to.
- Third, you can stop the interview and leave anytime you like.

We will not name you or any other participants, either in our Report or in any other publications. The questionnaires will be locked away, and not shown to anyone. Names will be removed from all files. However, under Australian law, it is possible to subpoena research data, so you may wish to avoid making any statements that may get you into trouble with the law. Remember, you don’t have to answer any questions that you don’t want to. In addition, we ask your permission to obtain ‘background information’ about you collected by ACT Corrections. Your ‘background information’ will not be accessible to anyone apart from us, the researchers. Again, our report will not identify you personally and any information you offer or consent to us accessing will be locked away.

The Director of the Project is Professor Peter Grabosky, and the interviewer will be Ms Julie Lahn. They are based at the Centre for Gambling Research at the Australian National University and can be contacted on 6125 8869. The interviewer, Julie Lahn, has an anthropology background working with Indigenous Australians both in remote locations and in a correctional context.

I hereby consent to participate in the Project “Gambling and Community Corrections”.

Signed

Date

Appendix 3: Information Sheet

Centre for Gambling Studies
Research School of Social Sciences
Canberra ACT 0200
AUSTRALIA
Telephone: 61 (0)2 6125 8869

Fax: 61 (0)2 6243 8507

Information Sheet

You are invited to participate in a research project of the Australian National University, on “Gambling and Community Corrections.” A researcher from the ANU will do short face-to-face interviews with clients of ACT Corrections. The interviews will be at [...insert name of Correctional facility...]. The purpose of the research is to improve services to clients of ACT Corrections. It is funded by the ACT Gambling and Racing Commission.

It’s important that you know the following things.

- First, you don’t have to do this interview if you don’t want to.
- Second, you don’t have to answer any questions that you don’t want to.
- Third, you can stop the interview and leave anytime you like.

We will not name you or any other participants, either in our Report or in any other publications. These questionnaires will be locked away, and not shown to anyone. Names will be removed from all files. However, under Australian law, it is possible to subpoena research data, so you may wish to avoid making any statements that may get you into trouble with the law. Remember, you don’t have to answer any questions that you don’t want to.

The Director of the Project is Professor Peter Grabosky, and the interviewer is Ms Julie Lahn. They are based at the ANU and can be contacted on 6125 8869. Julie will be conducting interviews at [...insert relevant dates and address...].

If you have any concerns about how the research was conducted, please contact

Ms Sylvia Deutsch, Human Ethics Officer
Research Services Office
The Australian National University
ACT 0200
Tel.: 02-6125-2900
Fax: 02-6125-4807
Email: Human.Ethics.Officer@anu.edu.au
<http://www.anu.edu.au/rso/Ethics/human.html>

Appendix 4: Lifetime Gambling Activities by Correctional Facility

Gambling Activity	PPU/CSO	BRC/STRC	PDC	totals
Played cards for money				
not at all	30 (38.9%)	8 (53.3%)	4 (40%)	42
less than once a week	40 (52)	5 (33.3)	2 (20)	47
once a week or more	7 (9.1)	2 (13.3)	4 (40)	13
total	77 (100)	15 (100)	10 (100)	102
Bet on horses, dogs or other animals				
not at all	24 (31.2%)	3 (20)	3 (30)	30
less than once a week	48 (62.3)	9 (60)	4 (40)	61
once a week or more	5 (6.5)	3 (20)	3 (30)	11
total	77 (100)	15 (100)	10 (100)	102
Bet on sports with a bookie				
not at all	59 (76.6%)	7 (46.7)	8 (80)	74
less than once a week	15 (19.5)	5 (33.3)	1 (10)	21
once a week or more	3 (3.9)	3 (20)	1 (10)	7
total	77 (100)	15 (100)	10 (100)	102
Played dice games for money				
not at all	66 (85.7)	8 (53.3)	10 (100)	84
less than once a week	11 (14.3)	6 (40)	0	17
once a week or more	0	1 (6.7)	0	1
total	77 (100)	15 (100)	10 (100)	102
Went to a casino				
not at all	30 (39)	5 (33.3)	5 (50)	40
less than once a week	44 (57.1)	9 (60)	4 (40)	57
once a week or more	3 (3.9)	1 (6.7)	1 (10)	5
total	77 (100)	15 (100)	10 (100)	102
Played or bet on lotteries				
not at all	14 (18.2)	4 (26.7)	3 (30)	21
less than once a week	49 (63.6)	7 (46.7)	5 (50)	61
once a week or more	14 (18.2)	4 (26.7)	2 (20)	20
total	77 (100)	15 (100)	10 (100)	102
Played bingo				
not at all	44 (57.1)	9 (60)	3 (30)	56
less than once a week	27 (35.1)	6 (40)	5 (50)	38
once a week or more	6 (7.8)	0	2 (20)	8
total	77 (100)	15 (100)	10 (100)	102
Played the stock and/or commodities market				
not at all	67 (87)	12 (80)	9 (90)	88
less than once a week	9 (11.7)	3 (20)	1 (10)	13
once a week or more	1 (1.3)	0	0	1
total	77 (100)	15 (100)	10 (100)	102
Played slot machines, poker machines or other gambling machines				
not at all	6 (7.8)	1 (6.7)	0	7
less than once a week	42 (54.5)	5 (33.3)	4 (40)	51
once a week or more	29 (37.7)	9 (60)	6 (60)	44
total	77 (100)	15 (100)	10 (100)	102
Bowled, shot pool, played golf, or played some other game of skill for money				
not at all	42 (54.5)	8 (53.3)	3 (30)	53
less than once a week	25 (32.5)	7 (46.7)	6 (60)	38
once a week or more	10 (13)	0	1 (10)	11
total	77 (100)	15 (100)	10 (100)	102

Appendix 5: Socio-Demographic Comparison of Survey Sample and Corrections Admissions

- The following table provides socio-demographic details for both the survey sample and correctional admissions over the April-June 2003 period.
- The survey sample (n=102) was interviewed between the 29th April and the 10th June at the Belconnen Remand Centre (BRC), the Symonston Temporary Remand Centre (STRC), the Community Service Orders Unit (CSO), Periodic Detention (PD), and the Probation and Parole Unit (PPU).
- Client admission data to the BRC, STRC, CSO and PPU was drawn from the ACT Corrective Services databases for the period of 1 April to 13 June (n=740).

Table 18: Correctional Admissions and Survey Socio-Demographic Data

Variable	Survey Sample (n=102)	Corrections Admissions (n=740)
	%	%
Age		
18-24	28.43	37.29
25-29	21.57	16.89
30-34	21.57	16.89
35-39	13.73	9.32
40-44	4.90	9.46
45+	9.80	10.14
Gender		
Male	95.09	91.21
Female	4.90	8.11
Missing	--	.68
ATSI		
Non-ATSI	87.25	84.73
ATSI	3.92	10.37
Missing	8.82	6.49
Employment status		
Employed	24.51	32.84
Unemployed	42.16	44.05
Student	.98	.15
Pensioner	0	6.35
Missing	32.35	15.27
Offence		
Violence	30.39	18.51
Drugs	6.86	4.59
Traffic	12.75	22.70
Property	28.43	22.16
Fraud	7.84	5.41
Breach	9.80	7.70
Other	3.92	10
Not sentenced	--	6.89
Not listed	--	2.03

- The correctional population is different to the number of correctional admissions for the period. During the April-June 2003 quarter, the average daily occupancy at the BRC/STRC was 65 persons, 449 persons had CSO orders at the start of that quarter, an

average 865 persons were being supervised at the PPU at the start of each month in the quarter, while an average of 27 detainees were supervised at PD at the start of each month in the quarter (ACT Department of Justice and Community Safety 2003, *ACT Criminal Justice Statistical Profile: June 2003 Quarter*).