



Time to fold

Self help manual is a successful model

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Peli poikki - Time to fold 1

- Internet based self help manual for problem gamblers.
 - 8 weeks
- Nationwide treatment program
 - Intended to lower barrier in help seeking
- Developed by Spelinstitutet Ab in Sweden
 - Originally ordered by Swedish National Institute of Public Health (SNIP)
- Software by Malmömediastudio



Peli poikki - Time to fold 2

- Peluuuri helpline runs the program
 - Two years research program
 - For the Ministry of Social and Health.
- One therapist working with clients and
- Peluuuri's development manager - administration of the program.
- Program started in 25.9.2007
- Based on CBT and motivational interview



Evaluation study

- Autumn 2008
- Kari Huotari, Sari Pitkänen Sosiaalikehitys Oy.
- 49 completed, 9 interrupted, 75 in queue
- Screening (n=99), pre (n=53) and past program (n=24) questionnaires
 - demographic questions, NODS, AUDIT, depression test, readiness to change questions and questions of his gambling habits.
 - 36 clients qualitative material
- Interviews; 5 clients finished, 4 in queue
- 25 interviews of professionals
- Will be published by the National Institute of Health and Welfare



Findings of the evaluation study 1

- Popular even with limited marketing
- Queue and difficulties in starting
 - More client than could be taken in
 - Technical difficulties
 - Unfinished Finnish content
- Of clients
 - 64 % very satisfied
 - 36 % mostly satisfied
- Changes in clients' psychic and physical health considerable
- How lasting the effects are?



Findings of the evaluation study 2

- Positive development in most aspects disregarding age or gender
- Positive changes in strengthening of social networks
- Changes in substances abuse were not indicative
- What was functioning
 - Discussions with therapist
- What to do better
 - Exercises
 - Internet forum
 - More interactivity - chat

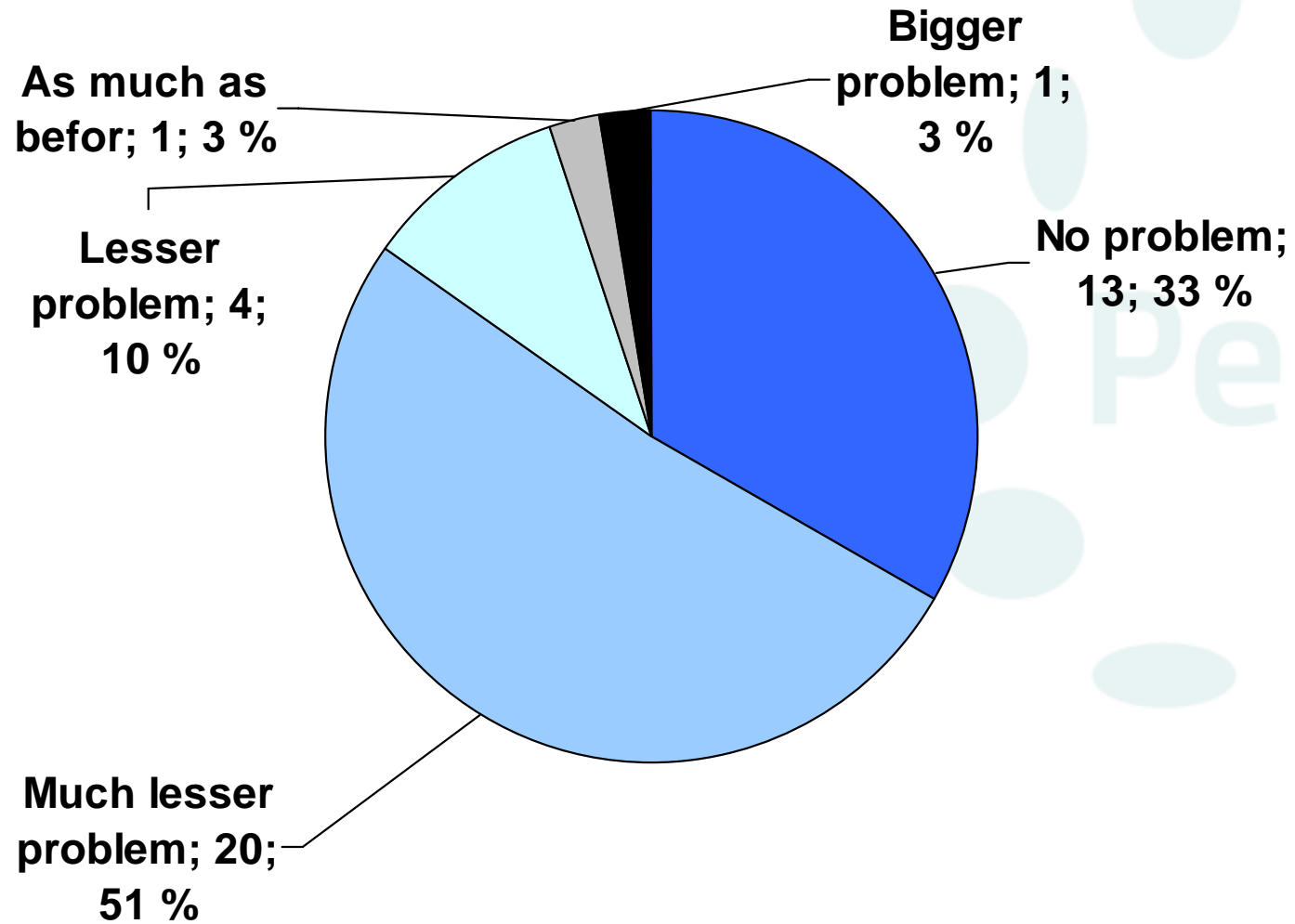


Some remarks

- Special attention is needed;
 - In group of under 25
 - Women more depressed than average
 - Men more addicted to gambling and increasing their alcohol use during program
- The lasting effects of program could not be studied
- Indication that changes are long lasting as in the Swedish program
 - Strong positive development in gambling, health, and psychical condition



Change of gambling during treatment





Gambling - NODS

Test		Mean			Standard deviation		
		All (n=40)	Female (n=10)	Male (n=30)	All	Female	Male
Gambling (NODS 2 months)	Screening, all	7,34	6,89	7,52	1,75	1,76	1,75
	18-25 y. (n=8)	7,00	4,00	7,50	2,00	.	1,64
	26-35 y. (n=15)	7,40	6,75	7,64	1,88	2,06	1,86
	over 35 y. (n=17)	7,50	7,75	7,33	1,51	0,50	1,97
	Pretest all	6,41	5,71	6,65	2,44	2,81	2,32
	18-25 y. (n=8)	6,83	6,00	7,00	1,47	.	1,58
	26-35 y. (n=15)	5,50	4,50	5,83	3,12	4,95	2,86
	over 35 y. (n=17)	6,77	6,25	7,00	2,35	2,50	2,40
	Past, al	3,33	4,00	3,23	3,35	1,41	3,59
	18-25 y. (n=8)	3,80	3,00	4,00	4,09	.	4,69
	26-35 y. (n=15)	2,50		2,50	4,36	.	4,36
	over 35 y. (n=17)	3,50	5,00	3,20	2,43	.	2,59
Gambling (NODS 12k months)	Screening, all	7,94	7,20	8,24	1,37	1,03	1,39
	18-25 y. (n=8)	8,43	7,00	8,67	1,13	.	1,03
	26-35 y. (n=15)	7,87	7,25	8,09	1,55	1,50	1,58
	over 35 y. (n=17)	7,77	7,20	8,13	1,30	0,84	1,46
	Pretest all	7,63	7,40	7,72	1,65	1,78	1,62
	18-25 y. (n=8)	8,33	9,00	8,20	0,82	.	0,84
	26-35 y. (n=15)	7,53	7,50	7,55	1,68	1,73	1,75
	over 35 y. (n=17)	7,43	7,00	7,67	1,87	2,00	1,87



Depression

- Changes indicative in decreasing depression also for women

MADR-S	Clients finished program (n=40)						Waiting or in program (n=53)					
	Mean			Standard deviation			Mean			Standard deviation		
Depression	All	Female (n=10)	Male (n=30)	All	Female)	Male)	All	Female (n=12)	Male (n=43)	All	Female	Male
Screening	19,46	20,00	19,28	9,18	11,05	8,66	19,21	18,55	19,73	8,52	8,15	8,54
Pretest	15,76	18,50	14,74	8,70	8,68	8,65	15,22	18,80	14,37	7,91	7,51	7,94
Past	7,33	9,20	6,70	5,51	7,76	4,53						



Financial problems relieved?

- Changes in economical situation substantial even though most had gambling debt after program

	Screening %			Pretest %			Past %		
	Good	Bad but in control	Bad not in control	Good	Bad but in control	Bad not in control	Good	Bad but in control	Bad not in control
All	13	32	55	14	59	27	25	68	8
Male	18	25	57	19	59	22	27	67	7
Female	0	50	50	0	60	40	20	70	10
N=	5	12	21	5	22	10	10	27	3



The use of other services

- 39 % had sought help before
- 29 % had gotten help
- More use of psychological care
- Less use of depressants
- Usual to want or use face to face counselling to or self help group to support abstinence or psychical health



Time to fold

- Program experienced as a good treatment by many
- First treatment or support service
- Has reached clientele that otherwise not seek help
- Changes great both in psychic and physical health
- Best model; multiple service to PG's



Conclusions

- Cheap
- Popular
- Needs to be developed further
- Different client group to be taken into account better
- Great potential
- More interactivity - chat
- Support after completing manual
- Software needs refinement



Thank you!

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