

28 May 2012

Meg Banfield  
Principal Research Officer  
Joint Select Committee on Gambling Reform  
Department of the Senate

Dear Meg Benfield

Thank you for the invitation to provide a submission for the *Inquiry into the prevention and treatment of problem gambling*.

In addition to our original submission is a response to the inquiries request for information on services for people from culturally and linguistically diverse/aboriginal backgrounds.

***1. Do you have any data on what percentage of your clients are from culturally and linguistically diverse (CALD)/Aboriginal backgrounds? If not, could you estimate?***

Helplines collect varying information on CALD/Aboriginal backgrounds. Across the four helplines and national online counselling service this information is collected via the fields ‘country of birth’, ‘ethnic background’, ‘cultural identity’ as well as ‘language spoken’.

As shown on the table below, data collected on the Victorian Gamblers Helpline is in response to the field ‘country of birth’. Around 17% of callers are from countries other than Australia including Vietnam, China, India and the United Kingdom.

Table 1: Country of birth of Victorian Gamblers Helpline caller (n=6224)

Country	No.	Percentage	Country	No.	Percentage
Australia	5196	83.5%	Croatia	16	0.3%
Vietnam	119	1.9%	Ireland	16	0.3%
China	114	1.8%	Lebanon	16	0.3%
India	97	1.6%	Thailand	14	0.2%
United Kingdom	71	1.1%	Sri Lanka	13	0.2%
Italy	68	1.1%	Hong Kong	12	0.2%
Greece	64	1.0%	Malta	10	0.2%
New Zealand	47	0.8%	South Africa	10	0.2%
Philippines	39	0.6%	Sudan	10	0.2%
Cambodia	20	0.3%	Germany	9	0.1%
United States	20	0.3%	Macedonia	9	0.1%
Turkey	19	0.3%	Pakistan	9	0.1%
Afghanistan	16	0.3%	Other	149	2.4%

The data presented on Table 1 is collected during the telephone interaction by the counsellor. In comparison Gambling Help Online data on ‘cultural identity’ is self-report and directly entered by clients accessing the online service prior to commencing a counselling session.

Over the 2010-11 period *Gambling Help Online* clients most often recorded their cultural background as Australian or Australian born. As shown on the Table 2 below, Chinese, New Zealander and people with Indian backgrounds also accessed the real time chat and email programs in high volumes.

Table 2: Ethnicity of Gambling Help Online client\*

Cultural Background	Live counselling		Email Support	
	Number	%	Number	%
Australian	712	47.7%	123	42.7%
Australian Born	295	19.8%	67	23.3%
Chinese	82	5.5%	8	2.8%
New Zealander	34	2.3%	8	2.8%
Indian	32	2.1%	3	1.0%
Aboriginal	22	1.5%	5	1.7%
Italian	20	1.3%	2	0.7%
Vietnamese	20	1.3%	9	3.1%
English	20	1.3%	6	2.1%
Greek	17	1.1%	2	0.7%
Lebanese	17	1.1%	-	-
British	14	0.9%	2	0.7%
Filipino	13	0.9%	3	1.0%
Assyrian/Chaldean	10	0.7%	-	-
Iranian	9	0.6%	1	0.3%
Serbian	9	0.6%	-	-
Irish	8	0.5%	1	0.3%
Austrian	8	0.5%	-	-
Armenian	8	0.5%	-	-
Turkish	7	0.5%	-	-
Other	134	8.9%	45	15.6%

\*Live chat=1491, Email support=288

The lack of visual and audio cues present in online counselling makes it potentially attractive to those experiencing shame/stigma associated with both the gambling concern and help seeking. In fact, previous research has suggested that relative anonymity provided by the internet is attractive to people with gambling problems<sup>1</sup>.

Compared with helplines, the online counselling program appears to attract a higher proportion of those from Asian and European background. Whether the relative anonymity is especially attractive to people from different cultural backgrounds, or those experiencing shame/stigma, requires further investigation.

## 2. *What are the typical referral pathways for these clients?*

Since 2006, Turning Point has provided helpline callers an enhanced referral model. The model includes a facilitated referral option to ‘chaperone’ clients from the Helpline to face-to-face problem gambling services using a combination of direct telephone transfer and referral follow-up contact methods.

<sup>1</sup> 1. Wood RT, Wood SA. An evaluation of two United Kingdom online support forums designed to help people with gambling issues. *Journal of Gambling Issues* 2009: 5-30.

- Where a caller is receptive to a treatment referral, the Helpline offers callers the option for the call to be immediately transferred to the relevant agency. This occurs during regular business hours (Mon – Fri 9.00 am to 5.00 pm). It enables immediate engagement of the caller by the treatment service and the opportunity for scheduling of an assessment and/or counselling appointment, as part of this initial contact with the Helpline.
- Where the referral cannot be successfully transferred to the agency, or the call is out of business hours, callers are offered the option of a referral follow-up call. Where there is capacity for follow-up at the agency level, basic contact/referral details are collected by the Helpline and forwarded by email to a designated contact person at the agency. Standard informed consent processes have been developed accordingly. The agency is then responsible for the follow-up process. Callers who decline to have their call transferred are also offered the referral follow-up option (i.e., email referral).
- Callers who decline the above options are offered standard agency referral information.

The above process applies to all callers of helplines operated by Turning Point. In addition, Turning Point maintains a national database on gambling and other agency details so that appropriate referrals can be arranged by telephone or online. This includes specialised CALD/Aboriginal services and information on bi-lingual workers in face-to-face agencies.

### **3. Do they have special needs? If so, how are their needs taken into account?**

Turning Point has undertaken a number of projects and partnerships with CALD and Aboriginal groups to increase awareness of treatment barriers and undertake collaborative resource development. This includes joint projects with the Centre for Culture, Ethnicity and Health (CEH) and VACSAL. Recent service developments have included collaboration with services in developing a bi-lingual program for Vietnamese and Italian speakers (Victoria), assistance in training Chinese peer support workers (Victoria) the establishment of a Vietnamese website, e-resources and in-language Vietnamese counselling through the *CounsellingOnline* service (National alcohol and drug online counselling service).

Recognising English as a second language can be a significant barrier to accessing treatment, Turning Point aims to employ workers from different cultural backgrounds. We currently employ approximately seven bi-lingual staff fluent in approximately a dozen languages/dialects.

Counsellors also receive training in working with callers from diverse backgrounds. This includes cultural sensitivity training and awareness training around the issues faced by callers with CALD and Aboriginal backgrounds within their own communities and mainstream service delivery environment.

Our understanding of the issues and challenges faced by CALD and Aboriginal communities has been informed through current literature and practice models targeting marginalised populations. However, similar to the wider group of people affected by problem gambling, there is limited empirical research describing how people prefer to access support, or whether the current structure/services provided meet their needs.

### **4. Is more targeted work needed for these groups? If so, what do you suggest?**

*Gambling Help Online* is able to provide services to small or dispersed populations across a large geographic area. The higher proportion of people from CALD backgrounds presenting to *Gambling Help Online* suggests an opportunity for a new referral pathway that could link clients with bi-lingual counsellors. Given current uptake of online counselling by ethnicity, we expect demand would include Cantonese/mandarin, Vietnamese and Greek. Sessions would be by appointment in the person's home or local Gamblers/Gambling Help service. Given the success of similar program in New Zealand (Asian family services with the Problem Gambling Foundation providing services by webcam), it is timely to consider this model in Australia.

Gambling Therapy online counselling service in the UK also provides counselling in other languages via an automated translation service. Whether this would be attractive or viable with Australian populations could also be investigated.

Turning Point is also examining options for translating its Gambling Help Online website content into other languages provided by text or assistive technologies for text to voice

**5. Do you offer any non-English language services to your clients? If so, in which languages and are these non-English language treatments offered on a full time basis?**

In circumstances where a caller presents with limited fluency in English, helpline counsellors provide 24/7 access to interpreters via the national Telephone Interpreter Service (TIS). This facilitates an interaction via a three-way conference call. Turning Point also provides counsellors with training on working with interpreter services and practical strategies for interpreter-mediated counselling and education.

During 2010/11 Telephone Interpreter Services (TIS) were required in 75 calls. As shown on Table 3, conference calls with an interpreter were arranged for predominantly Vietnamese (29 calls) and Cantonese (12 calls) speaking callers.

Table 3: Language requested for TIS and helpline

Language	No. of Callers	Language	No. of Callers
Vietnamese	29	Serbian	3
Cantonese	12	Macedonian	3
Mandarin	8	Polish	2
Greek	5	Khmer	2
Arabic	4	Italian	2
Korean	3	Hindi	1

Turning Point is also able to provide callers with access to bi-lingual helpline counsellors, within the limitations of rostering practices in the helpline environment.

Please contact us if you require any further information regarding the submission.

Yours sincerely,

Simone Rodda and Professor Dan Lubman  
Turning Point Alcohol and Drug Centre