

# QAADRANT

Spring 2017

## Quaker Action on Alcohol & Drugs



### **Gambling problems among prisoners** *pages 2-4*

*A Friend shares her insights*

**A dialogue with Friends** *pages 5 and 7*



# Addiction to gambling – how can we get help for addicts in prison?

asks Liz Bridge of Wandsworth Quaker Meeting

At the end of my ‘Money management’ class in the prison I visit, just before we hand out the certificates to those who have toiled their way through four sessions, there is a break where we ask for feedback and whether there are any topics we haven’t covered. Usually the class think this is the bit where they are expected to say thank you to the teachers- welcome but not very useful. But in September, just as we got to this point, the alarm bells went off throughout the prison and teachers and prisoners alike knew we were stuck. The grapevine from the cells said someone was on the roof so we cracked into what was left of the biscuits and began chatting in a way that was more relaxed than anything we had managed earlier. Time, so regimented in the prison, had stopped and we were granted a strange moment in which no one knew what to do but talk.

I was standing looking out of the window when a man came up quietly and asked what help there was in the prison for gamblers. With his forehead pressed on the glass he said that his life was being ruined by gambling. He could not stop; he had resolved to stop many times but couldn’t keep it up. His wife had abandoned him and he had got involved in criminal activity to pay his enormous debts. Quietly with his face away from everyone else he began

to cry. There was not a lot to be done. I covered for him, and promised him to find out what help there was. With a premonition of what was to come, I said if the worst came to the worst I would get him a book.

So what help is there in my enormous local city prison? Well the answer was none. Addicts of drugs and drink can get help - there is a specialised unit. And if your addiction is drink and gambling both can be counselled at the same time. But there is nothing for anyone with no substance addiction.

Anyway I began to vibrate. I tried phoning Gamblers Anon, and Gamcare to see if they knew of books I could buy for the library, and whether there were workbooks we could use with anyone in the money management class who showed an interest. There was nothing. I got promises of help which did not materialise. There was a suggestion that a GA group could be started – but nothing came of it. There were promises of workbooks at design stage –but no drafts to test or use.

I then started to approach the prison governors with a view to trying to run what you might call a discussion group –just something where people who knew they had a problem could admit it and talk. In all honesty, all I thought was that something was better than nothing.

I was a bit panic stricken when the response from the governor with responsibility for

rehabilitation was that she was happy to discuss the need but could I bring any evidence I had of that need? I didn’t think anecdotes of one prisoner at a complete loss, and those others in Money management classes who had joked off their failure to balance a budget without gambling, would be enough. As an ex civil servant used to numerical justifications for every new measure, I felt a bit floored. I feared that the problem could easily be denied without statistics. But then I realised that there was nothing to stop me asking prisoners and counting them in a homemade survey. It might be a bit lacking in science and challengeable by those with knowledge of the methodology of surveys –but even a rough and ready survey would be indicative, and might stand a chance of helping.

I set off on 10 November with my keys and a clipboard to ask-

- When you are outside do you ever bet?
- What do you bet on –horses-machines-casinos –other?
- What is the maximum you would bet in a day?
- How many days a week do you bet?
- Do you think your betting has anything to do with your being in here?
- Do you bet in here?

The results were amazing. Because gambling is not illegal no one was particularly anxious about discussing it widely. Lots of men just laughed and said no, they never bet and thought it a waste of money; but minutes later they were back introducing friends, men off the wing who they knew had a problem. As I walked the

landings, I felt there was a clear divide between the world of those who were trapped into gambling and those for whom it had no pull. Within the world of the wings and landings, it was well known who were the problem gamblers, and the help they needed.

I have to add that there was no privacy in the conversations I had; everyone about on the landings was interested, and so some people may have been reluctant to admit their problem in these open circumstances, if, for example, gambling was against their religion. My results may also have been affected by gamblers suddenly finding a person who was interested. But the level of gambling that was admitted was amazing. Men who would bet on anything, men who would play machines all day if their winnings held out –playing until they had nothing more to play with, men who had staked thousands of pounds on a bet and who had won thousands of pounds –but had losses too. Many admitted the strain on their families, and that the debts were hard to service without crime.

The results of my mornings work were:

I spoke to 134 men of whom 94 (70%) did not gamble more than the lottery occasionally and the Grand National.

40 (30%) said they gambled more than once a week

27 (20%) gambled more than 5 days a week six gambled on everything, 11 on football, 19 on machines, 8 on roulette and casinos, 6 on horses, 2 on cards and 2 on dogs.

10 said they were still betting in the prison (7%) I thought this was probably

underestimated because they thought I might disapprove or that I represented authority in some way.

When I asked the size of bets placed daily I got very vague answers. I got more information from asking about maximum losses in a day. Almost everyone lost more than £100 at a sitting. The most common response was £500. The general impression I got was that those who gambled 5 plus days a week gambled whatever they had. Although they had winnings they continued to gamble until any winnings were exhausted. I asked for anecdotes about holidays taken, things bought with big winnings. None were forthcoming.

The most common vehicle for the habitual gamblers I spoke to was machine gambling, where they talked about being unable to stop playing until all available money was exhausted. None spoke of being able to walk away with winnings

22 people thought that their betting was something to do with why they were in prison (16% of those asked.)

I was surprised and relieved that my rough survey, done before I had read a Lancaster University survey on gambling amongst offenders, accords with its results very well. It shows that 20-30% of the prisoners at my prison who were asked do have a need for some gambling counselling/discussion/GA provision. There were a substantial number in the 40 gamblers who I met who would have been willing to talk about their problem gambling and recognised it as a problem.

The more important result is that the Governors of the prison are now considering

how gambling addiction can be addressed. After a lot of emailing Gamcare have found some money for counselling and are discussing how it could be set up within the prison. The doctors at the NHS Clinic for Gambling addiction locally are not funded to help but have recommended a book about Cognitive Behavioural Approaches for Problem Gambling.

So when do I let go? Not yet. At the moment I am trying to work out whether I could design ten sessions to run with say 6 prisoners to get them to think about the thought patterns that trap them into gambling addiction and how to identify them as they pop into mind, how to control them and how to avoid them, and how to climb back from a lapse without guilt, and how to build a fulfilling life which does not include gambling

It perhaps does not need saying that I don't fancy the time commitment of ten once a week sessions but I am thinking of asking the prison if I can run a trial with six men, each warned that they are helping to design a course to help others. (If I can find my money management graduate, I will ask him to join.) I would do a written report at the end of each session, and then at the end of the run of sessions add feedback from the volunteers to describe what was discussed and whether anything was a help. It will take some serious organisation.

I will report back on whether anything was ever achieved...like lots of projects it may run into the sand. I will keep you posted.

Reference: May-Chahal, C., Wilson, A., Humphreys, L. and Anderson, J. (2012), Promoting an Evidence-Informed Approach to Addressing Problem Gambling in UK Prison Populations. *Howard J Crim Justice*, 51: 372-386. doi:10.1111/j.1468-2311.2012.00723.

## Responses to QAADRANT

The last edition of QAADRANT contained an article on gambling, which elicited these responses from Friends:

*I was prompted by '38 degrees' to email my MP about FOBTs and accompanying problems, just after getting QAADRANT with my copy of The Friend. I wrote to my MP and cribbed freely from your article.*

*I frequently take the overnight coach from London to Glasgow, which goes along the M6 Toll road to the east of the Birmingham conurbation and stops at 3 am for a "comfort break" at the services there. The M6 Toll is used a lot by commercial vehicles, and so unsurprisingly the services there is somewhat less "family-friendly" than the average service station on a British motorway. As you enter, the first things you meet are two enclosures full of "fruit machines" and on the other side, one of those "grab the toy" machines. They are seldom in use at 3 am, but I wonder if their prominence*

*indicates a tendency to gambling among commercial drivers?*

**Sheila Peacock,  
Basingstoke Quaker Meeting**

QAAD hope other Friends will consider contacting their MPs – the call for evidence about FOBTs and other gambling issues (including advertising) is still pending while the DCMS considers the responses it has received, including one from QAAD. "38 degrees" report that their petition was handed to Tracey Crouch, the relevant Minister, by concerned families. The lorry driver point is an interesting one. It is argued that that most

people aren't in the vicinity of service station gaming machines for very long, so potential ill-effects may be limited – but of course, those working in these locations or visiting them often would have regular exposure. QAAD argues against 'casually available' gambling in a non-gambling environment because of the risks to problem gamblers.

Another Friend writes:

*I am shocked to note that in Bridlington, East Riding of Yorkshire families are routinely taking children of primary school age to the seaside gaming arcades (2p penny pushers and similar) as there is nothing else for these children to do here!*

*This is teaching children of Primary school age to gamble! Surely there should be a law banning anyone under 18 years of age from entering such gaming arcades?!*

*I can accept that the seaside gaming arcades can be considered as harmless to those who are born and brought up inland and only see the arcades one or two weeks a year, but what I am witnessing is children attending primary school in a seaside town and going to the arcades (some with their parents, some on their own when a little older) every weekend!*

**Arthur Phillipson**

Children can enter 'Family Entertainment Centres,' and there are two classes of machine children can use: the old 'mechanical grabber' type (mentioned by our first correspondent), and a 'Category D' slot machine, which have a maximum prize of £10 in money. Research in the 1990s did indeed show higher rates of problems in teenagers in seaside towns. QAAD argues against any form of gambling being available to children, including gambling type 'games' on the internet, and we raise these concerns at policy level.

# A view on residential rehabilitation

## Helena Chambers of QAAD offers some reflections

It is rather salutary to realise that it is forty years since I was first involved in the field of addiction. I began as a volunteer in a night shelter while I was at university, then worked with homeless people with alcohol problems: I managed the second-stage houses associated with a residential unit. Residential rehabilitation remains close to my heart. Although ‘relapse’ is common in addiction, I saw some astonishing changes – including in people who told me afterwards that they had only come in ‘for a lie down.’ Many residential schemes introduce residents to the 12 Step programme of Alcoholics Anonymous. This is often a significant part of the benefit, including as regards maintaining sobriety when people go back into the community. Residential treatment is targeted mostly at people who have not been able to benefit from provision in the community, but even those with families or other resources can need this combination of safety and challenge, being part of a group that knows addiction from the inside. It is not for no reason that people with the financial resources pay privately for this kind of treatment. However, residential services are expensive – the more so because people often need follow-up. Second stage houses are part of this, but so is individual support even after they have moved on. This is particularly important for people with heroin problems – those leaving residential treatment who relapse have a raised risk of overdose.

There is a long-running debate about abstinence and ‘harm minimisation,’ which in the case of heroin users usually means methadone or other prescription. I think that most people in the field see this divide as an unhelpful polarity – it isn’t an either/or, but different options for different people at different times. Nevertheless it was positive to see David Cameron expressing a commitment to residential rehabilitation in order to offer the best chances of abstinence where this was possible. One recent study did not show the expected savings to the public purse from rehabs, but it did show some good outcomes in *human* terms, particularly for some of the most vulnerable people, who seemed less likely to relapse after residential treatment. Rates for ‘lower complexity’ clients were also improved. Substitute prescribing and the support services associated with it also have considerable benefits. Substitute prescribing – and retention in this service – is related to lower death rates. Maintaining these services is a key concern - drug-related deaths have been rising over the past three years. I am aware in some of the advice work that I do that access to residential treatment seems to be becoming more difficult. Another problem is help for those who have dependencies alongside a mental health issue: more support in the community before the situation becomes acute is needed. QAAD tries to facilitate supportive contacts between Friends who are affected, including close others. At the policy level, a new drug strategy is due but no government consultation has yet taken place. We will be looking to raise these and other issues when that occurs.

It is always good to receive correspondence from younger Friends – this one is on the subject of alcohol

I am aware that addiction and its effects both on the individual and the wider society is a traditional Quaker concern. Quakers were strong supporters of the Temperance Movement, pioneering non-alcoholic beverages such as cocoa. To this day traditional Quaker enclaves all over the country, including parts of Birmingham and Croydon prohibit licensed pubs and bars. Perhaps against the odds in the centre of London, Friends House runs a non-licensed restaurant and café. Quaker spaces aren’t the only ones - there has been a recent growth in ‘dry bars’, which are now found in many cities and towns in the UK. Some are run by addiction charities to provide their clients - and lately the general public - with safe places in which to socialise and lead a generally non-addictive lifestyle. As far as I know, the only commercially funded and run bar in London is Redemption Bar. Opening five years ago, it positions itself as the upper end of bars and serves healthy vegan food. It seems to appeal to women, particularly young, professional, high earning women who may also be mothers of young children. This demographic has been identified as an emerging group at risk of alcohol problems.

Friends House restaurant and Redemption Bar stand out as viable alcohol-free places of socialising –it would be good to see or hear of more!

Helena Wren

## Scotland and Alcohol Marketing

A welcome report published by Alcohol Focus Scotland has examined the evidence relating to alcohol marketing and children. The report states:

*‘Alcohol marketing encourages children’s drinking; exposure to alcohol marketing reduces the age at which young people start to drink, increases the likelihood that they will drink and increases the amount of alcohol they will consume once they have started to drink.’*

The report also addressed the fact that while there are advertising standards that give guidelines about specific content, there is a larger issue relating to the volume of advertising to which children are exposed. Among many recommendations, the report proposes restrictions on alcohol advertising on television between 6am and 11 p.m.

A further recommendation is that the Scottish Government should set out a timetable for ending alcohol sponsorship of sports events, music and cultural events.

Similar issues relate to gambling advertising – sponsorship of sports events and the advertising that takes place around them are one of the ways in which children are exposed to gambling marketing. QAAD argued against pre-watershed gambling advertising associated with sport in its recent submission to the DCMS. We work towards both alcohol and gambling advertising being addressed in a public health framework in the way this report suggests.

## QAAD News

QAAD trustees are sad to announce that our much-valued Director will be retiring at the end of October 2017 after 17 years of service. Trustees will be considering a new appointment (see page 8)



## QAAD weekend

Friday 20th – Sunday 22nd  
October at Charney Manor  
Oxfordshire

QAAD holds a regular biennial gathering for trustees at Charney Manor, when we reflect widely on matters within our concern and consider our responses. For us it is a time ‘...for unhurried deliberation on matters of common concern...’ when we can ‘get to know one another better in things that are eternal as in things that are temporal...’

This year we thought that we would broaden out the weekend to include Friends who share QAAD’s concern with addiction, and with substances or gambling. There are a limited number of self-funded places available: the cost (inclusive of meals) would be £150 for a single room, or £75 if you are willing to share.

If you think you might be interested, please contact Helena Chambers at [helenaqaad@hotmail.com](mailto:helenaqaad@hotmail.com) or telephone **01684 299247**. Helena will be glad to give you more details.

Have you looked at the  
QAAD website recently?

[www.qaad.org](http://www.qaad.org)

Please visit it for information about QAAD, news of events for Friends, and details of our public issues work.

## QAAD Director Post

Quaker Action on Alcohol and Drugs (QAAD), a Recognised Body of the Religious Society of Friends, are inviting applications for a Director due to the retirement of the current incumbent after 17 years’ service. We hope to be address the needs of Friends, of Meetings, young Friends, and work on public issues in the fields of alcohol consumption, gambling and drug misuse.

The salary offered would be £24,000 in return for a 4 day week, largely working from home (expenses and home office allowance would be paid). We are open to applications from anyone in sympathy with our objectives. The post would be available from 1st October 2017. Applications will be considered until 31st May. Interviews will be planned in June at a mutually convenient time. Please enquire to Tim James at [trjames@doctors.org.uk](mailto:trjames@doctors.org.uk)

Letters and articles for QAADRANT are very welcome, and should be sent to Helena Chambers, 21 Church Street, Tewkesbury, Gloucestershire GL20 5PD. t: 01684 299247 e: [helenaqaad@hotmail.com](mailto:helenaqaad@hotmail.com)