AFFECTED OTHER REPORT

Language & Terminology Survey Findings - July 2024

National Gambling Support Network

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BACKGROUND

The Gambling Commission (2020) describes gambling related harms as the 'adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society. These harms impact people's lives, relationships and health. Negative effects can include debt, crime, loss of employment, breakdown of relationships and deterioration of physical and mental health. ***Harms can be experienced not just by gamblers themselves, they can also affect their children, partners, wider families, social networks, employers, communities and society as a whole***' - These people are referred to as 'Affected Others'.

It is estimated that approximately 7% of the Great British population are considered to be Affected Others, which equates to 3.8 million adults and young people. Of these, Affected Others are more likely to be women (8% vs 6% of men), with the most severe impacts of harmful gambling being felt most by immediate family members (Gosschalk et al, 2022). Additionally, almost half (48%) of people who were affected by a spouse or partner's gambling reported a severe negative impact, this was followed by people affected by the gambling of a parent (41%) and the gambling of a child (38%) (Gunstone & Gosschalk, 2020).



PURPOSE

In March 2024, a group of professionals who support those experiencing gambling harms, alongside people with lived experience from across the U.K., came together to discuss current practice in relation to Affected Others and whether we are using terminology that is considered to be representative. The reasoning behind this was that many individuals on a service user and professional level have disclosed that they do not feel comfortable using the term Affected Other. This is particularly poignant as it is recommended that we should strive to avoid the use of stigmatising language in order to reduce discrimination, exclusion and barriers to accessing help and support for the harm encountered through gambling (GambleAware, 2024).

The purpose of this piece of work was to explore the use of language and terminology in relation to Affected Others as to date there is very little, if any, research available studying this notion. There has been some work conducted which explores the most suitable terms to use for those who are gambling and experiencing harms, but not for Affected Others specifically (GambleAware, 2024). It was therefore felt to be imperative that with the changing landscape of the gambling harms sector due to the expansion of support services and acknowledgement of Affected Others within this, that some form of exploration in to this topic should be commenced. Meaning that we can learn from and build upon this, in the hope that the results obtained will evidence and start to highlight the shared experience between those who gamble and those who are affected.

As a result of this, the group collaboratively and collectively compiled a number of possible suggestions to that of Affected Other, along with alternative descriptors of an Affected Other. This was then collated into a survey which was circulated across the whole of the U.K., ensuring that the results collected were comprehensive, inclusive, diverse and demonstrative of those who have experienced gambling harms.



DEMOGRAPHICS

In total, there were 83 survey respondents that took part, with a modal age range of 35 - 44 years old, there was a gender split of 61 females to 22 males, 71% had been impacted by gambling harms (70% had been harmed by someone else's gambling, 25% had been harmed by their own gambling, and 5% had been harmed by both their own and someone else's gambling) and of these, 66% had accessed help and support.

The respondents were from all regions of the U.K., with representation across different faiths, ethnicities, sexual orientations, familial set up, disability/neurodivergent status, caring responsibilities, employment and marital status.

35% of the respondents who had been impacted by gambling, also reported having dependent children, with 48% of these having 2 children aged between 0 and 19 years old. These young people within the household are also Affected Others, and it is important to acknowledge that the demographic questions asked captured this.

METHODOLOGY

It was decided that an online survey would be the best form of methodology for this particular piece of work, the data was collected anonymously and was captured through the completion of 20 quantitative and qualitative questions. The questions asked consisted of 16 demographic questions, 2 preference ranking questions and 2 free text response boxes.

The survey was live for 4 weeks and was circulated via word of mouth, newsletters, social media and service promotion. The survey was targeted at all individuals who had experience of gambling harms, in order to capture a variety of perspectives.
The data was assembled and statistical inferences were then generated through the technique of weighting, whereby a numerical value is assigned to the ranking response in order to ascertain preference from the survey respondents, giving a total weighted score.



KEY FINDINGS

In relation to the purpose of this study, there were 2 questions that specifically examined preference in terms of the language and terminology currently used - Preferred term for Affected Other and preferred definition of Affected Other.

Preferred term for Affected Other

The total weighted results showed that 'Affected Other' was ranked 1st by 27 of respondents which equates to 1/3 of those completing the survey, with the least preferred term being that of 'Indirectly Harmed' with 51 respondents ranking this 10th.

Term	Ranking
Affected Other/s	1
Affected Individual/s or People/Person	2
Impacted Individual/s or People/Person	3
Friends and Family	4
Loved Ones	5
FFO - Friends, Family and Others	6
Harmed Individual/s or People/Person	7
Concerned Significant Other/s or Significant Other/s	8
Directly Harmed	9
Indirectly Harmed	10
Total Responses	83



KEY FINDINGS...

Preferred definition of Affected Other

The total weighted results showed that respondents preferred the description of an Affected Other being ‘People/individuals impacted by someone else's gambling’ with this option being ranked 1st by 44 of the respondents. In comparison 33 respondents reported ‘People/Individuals indirectly harmed by someone else's gambling’ as their least preferred descriptor by ranking this as 5th.

Definition	Ranking
People/Individuals impacted by someone else's gambling	1
People/Individuals harmed by someone else's gambling	2
People/Individuals who have experienced gambling related harms because of someone else's gambling	3
People/Individuals directly harmed by someone else's gambling	4
People/Individuals indirectly harmed by someone else's gambling	5
Total Responses	83



KEY THEMES

Based upon the data analysis and responses received, both from the quantitative and qualitative 'free text' questions; there were a number of key themes that were apparent and ran concurrently throughout the findings. These themes are acknowledged below and should be taken into consideration across all services.

- Respondents desired more nuanced language that reflects the personal nature of the impact.
- Desire for terms that avoid stigmatising labels and focus on the collective effort of healing, such as 'together towards recovery'.
- Some respondents expressed a preference for avoiding labels, requesting to be identified by their name rather than by the harm that they have encountered.
- Respondents expressed the use of more personalised and less clinical language.
- The preferred terms emphasise the negative consequences and emotional impact of gambling harms.



RECOMMENDATIONS

There are a number of recommendations from the responses obtained that services who support those impacted by gambling should consider.

- ‘Affected Other’ is an acceptable and preferred term for aligning those people harmed as a result of someone else’s gambling.
- When describing this group of individuals it is considered to be preferable to refer to them as ‘People/individuals impacted by someone else's gambling’.
- Service providers should endeavour to avoid the term ‘indirectly’ as this was repeatedly found to be a word that respondents deemed not to be suitable or appropriate for Affected Others by receiving the lowest ranking in both questions.
- ‘Affected’, ‘impacted’ and ‘harmed’ were all adjectives associated with gambling harms that ranked in the top half of respondents’ preferences and therefore are suggested as appropriate.
- Services should continue to avoid stigmatising language, ensuring that a person-centred approach is maintained across their service provision, evading clinical language wherever possible and keeping the humanistic identity of a person at the forefront of any engagement.
- For research, reporting and guidance processes it is recommended that for now, the term ‘Affected Other/s’ should be included and embedded in a unified way to prevent confusion, misinterpretation and over complication of terminology.



DISCUSSION

To date, this is the first piece of work that has been done in relation to the use of language and terminology when engaging with Affected Others. It has been designed collaboratively across a network of third sector services, who all support those impacted by gambling harms, alongside that of lived experience involvement and perspectives. Therefore, this report provides a foundational and imperative evidence base which can and should be built upon in the future.

That said, it is also important to note that there are likely to be some limitations with regard to the findings, in that the respondent sample size could be argued to be small. This is in comparison to the number of individuals anticipated to have experienced gambling harms with a Problem Gambling Severity Index (PGSI) score of 8+ and/or be impacted by another's gambling, which equates to approximately 9% of the adult population or around 4.8million individuals (Gosschalk et al, 2022).

Although the survey reached all regions of the United Kingdom, there was a higher proportion of respondents from areas within London (all) (13%), the North West (13%), the South East (12%) and the South West (12%). There was also a higher ethnic skew of 'White British/Any other white background' (81%) in comparison to other ethnic backgrounds (Asian or Asian British: Indian/ Pakistani/ Bangladeshi/Chinese/Any other Asian background = 9.4%, Mixed: White and Black Caribbean/White and Black African/White and Asian/Any other Mixed background = 2.35%, Black: Black British/Black African/Black Caribbean/Any other Black background = 2.35%).
The fact that 66% of respondents had accessed help and support for the gambling harm encountered could imply that many had had exposure to the term 'Affected Other' prior to completion of the survey, and were therefore were more likely to understand and be accepting of the terminology used.

Consequently, when taking these factors in to consideration, the findings have the potential to limit the generalisability of the results overall.



CONCLUSION

In conclusion, this report provides an essential baseline study into the language and terminology preferences for Affected Others from both a lived experience and professional perspective. The opinions, feedback, insights and involvement received were paramount in ensuring that this piece of work was inclusive, current and non-stigmatising.

The report highlights themes and recommendations that should be considered and accounted for when engaging with those who have experienced gambling harms, particularly for those who have been impacted by someone else's gambling.

This report and the survey findings provide a foundation for further research opportunities into this area of gambling related harms, as well as the appropriateness of this topic and ideally should be considered within future guidance around language.



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