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Systematic review of interventions offered for problem gambling in population under criminal justice system (CJS) pathway

Rohini Ravishankar, Shakina Bellam, Mamta Kumari, Anne Aboaja, Rachel Steele, Amanda E Perry

Citation

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Review question

What type of interventions are used to reduce problem gambling behavior in population involved with CJS pathway?

Searches

Literature searches were conducted using MEDLINE, PsycINFO and EMBASE bibliographic databases. Natural language keywords and database specific subject headings/thesaurus terms relating to gambling were combined, using the Boolean operator AND, with natural language keywords and database specific subject headings/thesaurus terms relating to criminal behaviours or populations. Date limits were applied 2005 to 2019 but no language limits were specified.

Timeframe - Searches will include articles published since 2005 (Introduction of Gambling Act in 2005) We included advanced google searches of Charities, Government websites, University research groups and organizations relating to gambling. We conducted forward and backwards citation searches and contacted individual authors for information to identify further grey unpublished literature.

Search strategy

https://www.crd.york.ac.uk/PROSPEROFILES/161876 STRATEGY 20200121.pdf

Types of study to be included

We will include randomised controlled trials and quasi-experimental studies including a comparable control group.

We will exclude any study design that does not contain a control group (for e.g. single group, before and after studies with no comparable control, cross sectional and longitudinal studies, and qualitative studies).

Condition or domain being studied

Gambling disorder is classified in Diagnostic and Statistical Manual (DSM 5) under "Substance- related and Addictive disorders". Gambling disorder refers to persistent and recurrent problem gambling behaviour leading to clinically significant impairment or distress.

Other names for problem gambling are Ludomania, Gambling addiction, compulsive gambling, pathological gambling.

Participants/population

Population in CJS pathway aged 18 and over, both gender who have current or past problem gambling diagnosis. The evaluated index test should be a gambling disorder self report instrument based on DSM or ICD symptom definitions, aimed at diagnosing gambling disorder and/or one of the following index screening tests will be included (but will not be limited to):

South Oaks Gambling Screen (SOGS);

Gambling Symptom Assessment Scale(GSAS);

Problem Gambling Severity Index(PGSI);

Gambling Problem Scale (GPS):

Gamblers Anonymous 20 (GA-20):

Canadian Problem Gambling Index (CPGI);



Problem and Pathological Gambling Measure (PPG)

Individuals will need to be under the care of criminal justice system including those in prisons, jail, police custody, probation, courts, secure forensic mental health setting, community setting referred through the criminal justice system.

Intervention(s), exposure(s)

The interventions to be reviewed are cognitive therapies (correcting irrational belief schemas), cognitive analytical therapy, motivational interviewing, motivational enhancement therapy, behavioural interventions (e.g. exposure and response prevention), psychoanalytic and family therapies, and self-help interventions available online. Pharmacological treatment (e.g. selective serotonin reuptake inhibitors {SSRIs}, Clomipramine, Naltrexone) in addition to treatment of gambling related behaviours like anxiety and depression and social interventions like Gamblers Anonymous.

Comparator(s)/control

- (I) Standard care (treatment as usual) versus a specific gambling intervention
- (2) Standard care and a specific gambling intervention versus no intervention
- (3) Standard care and a specific gambling intervention versus another intervention (for e.g. substance misuse)

Main outcome(s)

The reduction in gambling behavior. This may be measured using self-report information, responses to questionnaires, and objective measures of data collected on participants gambling behaviour.

* Measures of effect

For each main outcome measured, we intend to extract data from each outcome at every time point within each study.

Additional outcome(s)

Secondary outcomes to be measured by subjective reports and objective questionnaires include:

- Self harm behaviour,
- Suicidal thoughts/attempts
- Alcohol/drug misuse
- Quality of life
- * Measures of effect

For each additional outcome measured, we intend to extract data from each outcome at every time point within each study.

Data extraction (selection and coding)

We will include studies that have a comparison and/or control group including a population of people who are involved with the criminal justice system. This includes people in prison and the community under the care of court, probation, parole and other allied agencies. The intervention aims are to reduce gambling behaviour in this population. Two reviewers will independently extract data from each study. Any disagreements will be arbitrated by a third reviewer. We will extract data to describe the overall study details (year, author, location, sample size, age and gender) and intervention components (intervention description, intensity, duration, measures, time points and outcomes). We do not expect to conduct a meta-analysis. Risk of bias (quality) assessment

In accordance with good systematic review practice, the authors will be conscious of risk of bias. Risk of bias will be assessed using the Cochrane Collaboration's Risk of Bias Tool and NIH quality assessment tools for any randomised studies. For each potential source of bias, a judgement will be made independently be two members of the research team as to the extent of the bias, and rated as low, medium or high risk. If insufficient details are available, risk of bias will be categorised as unclear. Any disparity will be resolved by discussion, or referral to a third member of the research team.

Strategy for data synthesis



We will conduct a formal narrative synthesis of the data. The synthesis of the results will be conducted by the review team and discrepancies resolved by the lead PI (AP). Data will be synthesized to produce an overview of the types of interventions used, with outcome measures and time points. A summary of the significant and non-significant results will be produced. Individual authors will be contacted to clarify any missing data or data that is needed to produce pre and post-test outcomes in the intervention and control and/or comparison group.

Analysis of subgroups or subsets

No prior sub group analyses will be identified. Any sub group analyses will be determined by the final selection of studies for inclusion in the review.

Contact details for further information

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Organisational affiliation of the review

University of York

Review team members and their organisational affiliations

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Type and method of review

Intervention, Narrative synthesis, Systematic review

Anticipated or actual start date

01 November 2019

Anticipated completion date

01 August 2020

Funding sources/sponsors

No funding sources. University of York will be the responsible party.

Conflicts of interest

Language

English

Country

England

Published protocol

Stage of review

Review Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

Criminal Law; Gambling; Humans



Date of registration in PROSPERO 19 May 2020

Date of first submission 21 January 2020

Details of any existing review of the same topic by the same authors

Stage of review at time of this submission

Stage	Started	Completed
Preliminary searches	Yes	No
Piloting of the study selection process	Yes	No
Formal screening of search results against eligibility criteria	Yes	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No

The record owner confirms that the information they have supplied for this submission is accurate and complete and they understand that deliberate provision of inaccurate information or omission of data may be construed as scientific misconduct.

The record owner confirms that they will update the status of the review when it is completed and will add publication details in due course.

Versions 19 May 2020

PROSPERO

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