PROtect Integrity & Problem Gambling

Introduction

This summary paper was produced from the Round Table discussions in Stockholm as part of the Erasmus+ 2016 PROtect Integrity project.

Emerging evidence from EU Athletes and its members is showing that elite athletes are prone to gambling problems. For example, EU Athletes research in 2014/15 showed that 1.5% of athletes included in the study gambled every day and 8.2% had demonstrated current or past gambling problems. In the UK, research by the PPF showed that sportsmen were more than three times more likely to be problem gamblers compared to other young men.

Link with Integrity

Athletes who are in distress whether financial or due to addictions are at a higher risk of corruption and becoming vulnerable to match fixers. We would suggest that this risk is increased if they are using illegal or unregistered betting or gambling with unsavoury characters. So, whilst problem gambling is undoubtedly a social welfare issue there are strong integrity concerns as well. Therefore, it is in the best interests of sports and National Platforms to look at this issue.

Research

The first step a Player Association should take is to determine the size of the problem in its sport. This research should be developed in partnership with a recognised academic institution and/or problem gambling organisation and cover current and retired players as well as men, women and academy players.

Duty of Care

The whole of sport, including clubs, leagues, federations and the Player Association, probably has some form of Duty of Care to support athletes’ welfare. It is important that you make sure that all the sports stakeholders are aware of the size of the problem in their sport. Confidentiality is important for players seeking help as they may not want their employers to know they have a problem. The Player Associations are best placed to deliver this type of service and this should be supported and ideally funded by the rest of the sport.

Treatment Pathways

The treatment options available for problem gamblers need to be identified. There is little point in promoting problem gambling education if there is no help available for people with problems. Treatment options will vary across different countries and will include private healthcare/counselling; public healthcare; and voluntary sector provision like Gamblers Anonymous. Once good treatment pathways have been identified then Player Associations should promote greater awareness of both the problem and the treatment available.

Stigma

Player Associations should try to start to reduce the stigma and shame around gambling problems. Problem Gambling is recognised as a medical addiction and mental health issue and players should be encouraged to seek help. A small social media campaign featuring former and current players talking about their problems can be a great way to highlight the issue and break down the stigma.

Conclusion

Problem Gambling is likely to be an issue for your members. The most important thing that can be done is to first find out the size of the problem, encourage people to talk about problem gambling and then signpost people to the relevant help.