



4<sup>th</sup> May 2021

Deputy Thomas Gould, TD  
Dáil Eireann  
Kildare Street  
Dublin 2.

**PQ: 19312/21**

To ask the Minister for Health the average wait time for persons to access gambling addiction counselling by quarter in each of the years 2019, 2020 and to date in 2021; and the number of persons who accessed the service in tabular form

**PQ 19313/21**

To ask the Minister for Health the average wait time for persons to access gambling addiction residential treatment by quarter in each of the years 2019, 2020 and to date in 2021 including the number of persons who accessed the service in tabular form

**PQ 19314/21**

To ask the Minister for Health the number of persons who presented to the HSE with a gambling addiction in each of the years 2019, 2020 and to date in 2021, by month

Dear Deputy Gould,

The Health Service Executive has been requested to reply directly to your above Parliamentary Questions which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position:

The HSE has received no specific funding from the Department of Health to provide or commission support services for gambling addiction. Our HSE Addiction and Section 39 funded Services have been traditionally funded to treat problematic Drug and Alcohol use however some cases of problematic gambling have been provided with treatment within existing resources. Interventions provided to those presenting with gambling addiction include one to one counselling, financial advice and onward referral to other voluntary groups including Gamblers Anonymous.

These figures provided in the below tables relate to the number of cases reported to the National Drug Treatment Reporting System (NDTRS) (see below appendix) with gambling reported as the main reason for seeking treatment. Please note that the NDTRS data is case based, which means that there is a possibility that individuals appear more than once in the database, for example where a person receives treatment at more than one centre or at the same centre more than once per year.

The figures reflect assessments and entries into treatment (new cases and previously treated cases returning to treatment) and do not include the number of cases continuing in treatment from preceding years. Reporting treatment for gambling to the NDTRS is **optional**. This option is facilitated by the



NDTRS for individual services who wish to use the data for their own purposes. Therefore, these data **cannot** be considered complete or representative of treatment for gambling in a national context. The median waiting time is a more appropriate summary statistic than the mean. This is due to the fact that waiting time is affected by outliers (skewed data distribution), meaning that the mean is influenced by a small number of cases who waited for long durations.

### 2019 figures

- Figures for 2019 are provided in the tables below.

### 2020 figures

- As of 26/04/2021, there were 227 cases assessed or treated for gambling as a main problem in 2020 (36 cases were assessed only and 191 cases were treated). Please note that these figures are provisional as data validation for 2020 is ongoing.

### 2021 figures

- Figures for 2021 are not available as data collection for Q1 2021 is ongoing.

### Residential treatment: the average wait time to access gambling addiction by quarter and the number accessing treatment

Table 1 below outlines the number of cases and average waiting time (between referral and treatment start) for cases with gambling as a main problem who commenced treatment in a residential setting in 2019.

**Table 1: Number of cases treated for gambling as a main problem in a residential setting and median waiting time, NDTRS 2019**

	Q1 January-March	Q2 April-June	Q3 July-September	Q4 October - December	2019 (annual)
Number of cases treated at an inpatient service	27	23	33	21	104
Median waiting time (days) between referral and treatment start	5 days	2 days	5 days	5 days	5 days

*\*Quarter relates to the quarter in which treatment commenced*

*\*\*Waiting time refers to the number of days between date of referral and date treatment commenced*

### Average wait time for persons to access gambling addiction residential treatment

Table 2 below outlines the number of cases and average waiting time (between referral and treatment start) for cases with gambling as a main problem who accessed counselling services in an outpatient setting in 2019. Counselling includes individual counselling and/or group counselling.

**Table 2: Accessing counselling in an outpatient setting: number of cases treated for gambling as a main problem and median waiting time, NDTRS 2019**

	Q1 January-March	Q2 April-June	Q3 July-September	Q4 October - December	2019 (annual)
Number of cases assessed at an inpatient treatment service	23	13	22	15	73
Median waiting time (days) between referral and treatment start	9 days	11 days	7 days	15 days	10 days

*\*Quarter relates to the quarter in which treatment commenced*

*\*\*Waiting time refers to the number of days between date of referral and date treatment commenced*

## Number of persons who presented to the HSE with a gambling addiction

Table 3 below outlines the number of cases with gambling as a main problem who presented to a treatment provider for assessment or treatment in 2019.

**Table 3: Number of cases presenting for gambling as a main problem and reported to the NDTRS 2019**

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Assessed only* (not treated)	5	<5	<5	<5	<5	5	5	5	<5	6	<5	<5	41
Treated	20	17	28	19	12	14	26	19	23	21	9	16	224

*\*For assessed only cases, month is the month in which the assessment took place. For treated cases, month is the month in which treatment commenced*

*<5: NDTRS does not publish figures less than five to ensure that an individual cannot be inadvertently identified.*

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,



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Joseph Doyle  
National Lead, Social Inclusion

## Appendix

### NDTRS Terms & Conditions

Any of the data published here may be freely used, but remains the property of the NDTRS. To safeguard the integrity and confidentiality of the data, all users must agree to the following conditions:

1. NDTRS data are not to be presented in either written or oral form that could directly or indirectly identify an individual patient.
2. Tables containing NDTRS data should not be published where any individual cells contain less than 5 cases.
3. The responsibility for interpretation of the data lies fully with the data user. Please contact the NDTRS should you have any queries on data interpretation.
4. The data provided below supersedes any previous analysis done as figures may change due to data validation processes.
5. The NDTRS should be clearly acknowledged as the source of the data in any publication or presentation in which the data are used.
6. The NDTRS must be provided with a copy of all documents in which NDTRS data are used.
7. The HRB National Drugs Library should be provided with a copy of any published paper in which NDTRS data are used.

### National Drug Treatment Reporting System

Treatment for problem alcohol and drug use in Ireland is provided by statutory and non-statutory services, including residential centres, community-based addiction services, general practices and prison services.

For the purpose of the NDTRS, treatment is broadly defined as 'any activity which aims to ameliorate the psychological, medical or social state of individuals who seek help for their substance misuse problems'. Clients who attend needle-exchange services are not included in this reporting system. From 2004 onwards, clients who report alcohol as their main problem drug have been recorded by the system. These data have been presented in an earlier paper in the HRB Trends Series (Fanagan *et al.* 2008). Drug treatment options include one or more of the following: medication (detoxification, methadone reduction, substitution programmes and psychiatric treatment), brief intervention, counselling, group therapy, family therapy, psychotherapy, complementary therapy, and/or life-skills training.

Compliance with the NDTRS requires that data be collected for each new client coming for first treatment and for each previously treated client returning to treatment for problem drug use in a calendar year.

Staff at the NHIS unit in the HRB process the anonymous, aggregated data, which are analysed and reported at national and EU levels. The main elements of the reporting system are defined as follows:

*All cases treated* – describes cases who receive treatment for problem drug and/or alcohol use at each treatment centre in a calendar year, and includes:

*Cases assessed only* - describes cases who were assessed but who did not progress to treatment

*Previously treated cases* – describes cases who were treated previously for problem drug/alcohol use at any treatment centre and have returned to treatment in the reporting year;  
*New cases treated* – describes cases who have never been treated for problem drug/alcohol use; and

*Status unknown* – describes cases whose status with respect to previous treatment for problem drug/alcohol use is not known.

Each case refers to an episode of treatment. Therefore ‘previously treated cases’ could appear more than once in the data, in a calendar year, if for example they receive treatment at more than one centre or at the same centre more than once per year.

NDTRS does not publish figures less than five to ensure that an individual cannot be inadvertently identified.