

DÉBA - Jeu-8

Détection et besoin d'aide en regard du jeu excessif

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File no.

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Family name, first name

Age

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Gender

Male
 Female

Date

Year				Month		Day	

Phone no.

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Family name, first name of the evaluator

Evaluator's signature

In the last year, how often have you taken part in the following gambling activities?

Question the respondent about each activity, indicating how often and where he/she gamble

- Buying lottery tickets (e.g., 6/49, Super 7, Mini lotto, etc.) or instant "scratch and win" tickets (e.g., Mots cachés, Gagnant à vie, etc.)?
- Playing slot machines, video lottery terminals, or other types of machines for money?
- Playing bingo for money?
- Playing cards for money:
 - poker?
 - other card games?
- Betting on sports?
- Betting on horse, dog, or other animal races?
- Betting on your own performance (e.g., billards, golf, bowling, etc.)?
- Playing other games for money? Which ones :

	Never	< 1 time / month	1 to 3 times / month	1 to 2 times / week	3 or more times / week	Where did you gamble (More than one is possible)		
						On the Internet	At the casino	Another place
1. Buying lottery tickets...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
2. Playing slot machines...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
3. Playing bingo for money?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
4. Playing cards for money:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
a) poker?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
b) other card games?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
5. Betting on sports?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
6. Betting on horse, dog, or other animal races?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
7. Betting on your own performance (e.g., billards, golf, bowling, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
8. Playing other games for money? Which ones :	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

a. If the respondent has not played during the last year → STOP HERE
 Or
b. If the respondent has only bought lottery tickets or scratch tickets (q. 1)
 If yes, ask, "Have you had any problems with lottery or scratch ticket?" No → **STOP HERE**
 Yes → **Continue with questions 9 to 16**
 Or
c. If the respondent has played any other game (q. 2 to 8) during the last year → Continue with questions 9 to 16

The following questions deal with your gambling habits.

How often have you been in the following situation IN THE LAST YEAR?

Fill in the matching circle.

- When gambling in the last year, have you ever played longer than you first planned?.....
- In the last year, have you hidden or tried to hide your gambling from other people (e.g., family members)?.....
- When gambling in the last year, have you ever spent more money than you first planned?.....
- In the last year, have there been times where you have spent a long time thinking about gambling, either what you did in the past or what you would do in the future?.....
- In the last year, have you ever went and gambled to win back money that you had previously lost?.....
- In the last year, have you ever felt nervous or grumpy after having tried to reduce or stop your gambling?.....
- In the last year, have you asked people to lend you money because of financial problems caused by gambling ?.....
- When gambling in the last year, have you ever felt like you were someone else?.....

	Never	Rarely	Sometimes	Often	Almost Always
9. When gambling in the last year, have you ever played longer than you first planned?.....	<input type="radio"/>				
10. In the last year, have you hidden or tried to hide your gambling from other people (e.g., family members)?.....	<input type="radio"/>				
11. When gambling in the last year, have you ever spent more money than you first planned?.....	<input type="radio"/>				
12. In the last year, have there been times where you have spent a long time thinking about gambling, either what you did in the past or what you would do in the future?.....	<input type="radio"/>				
13. In the last year, have you ever went and gambled to win back money that you had previously lost?.....	<input type="radio"/>				
14. In the last year, have you ever felt nervous or grumpy after having tried to reduce or stop your gambling?.....	<input type="radio"/>				
15. In the last year, have you asked people to lend you money because of financial problems caused by gambling ?.....	<input type="radio"/>				
16. When gambling in the last year, have you ever felt like you were someone else?.....	<input type="radio"/>				

17. Would you like help with your gambling?..... Yes No

I authorize _____ to send this evaluation to _____ and discuss it for guidance purposes.
 Date _____ Valid until _____
 User's signature _____

Add up the results for 9 to 16

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Score interpretation
 0 - 5 Green light: no treatment
 6 - 10 Yellow light: frontline treatment
 11 - 32 Red light: specialized treatment