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AWARENESS OF SERVICES FOR GAMBLING PROBLEM AMONG RUSSIAN SPEAKING RESIDENTS IN FINLAND

ABSTRACT

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Awareness of services for gambling problems among Russian speaking residents in Finland

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The aim of this research-oriented thesis is to investigate the level of awareness concerning services for gambling problems among Russian-speaking residents in Finland. This research also measures the demand for general social services provided in Russian language in Finland. Research was conducted with the support of non-governmental organization FARO. FARO has a project called Mapeli and this project provides services for Russian speaking people with a gambling problem in Finland and aims to spread awareness on the issue. Research was based on the needs of the Mapeli project. The research aims to support Mapeli by gathering relevant information on the target group and their needs.

Data was collected using anonymous online questionnaire for Russian-speaking residents in Finland. It was distributed online via closed Facebook groups for Russian-speaking people living in Finland and 116 respondents participated in the research. Results of the questionnaire were analyzed through qualitative descriptive analysis.

Results of the study show that the target group has a low level of awareness concerning available services that provide professional help to gambling problems. On the contrary to the low percentage of awareness, a high percentage of the participants reported that they have faced gambling related problems themselves or personally know someone who has. The problem is common and known among the target group and yet most of them do not have knowledge of available professional help.

Furthermore, 43% of the participants stated that they would rather seek professional help in Russian language if it was available. The results demonstrate that the services Mapeli provides are important for the target group. The Mapeli aims to promote their services and reach out to the people with gambling problem. It can be concluded that services provided in Russian language should be more promoted among the target group.

Keywords: Gambling problem, Russian-speaking residents, Professional help

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1 INTRODUCTION

Gambling problem is a serious issue in the modern society. A gambling problem influences the life of a gambler in multiple ways, as well as lives of the people close to them. Due to the open advertising of casinos, slot machines and other games, the number of people experiencing gambling related issues is only growing. Anyone can be involved in gambling because forms of gambling are available everywhere in Finland, for example shopping centers, stores and even online from home. Taking part in gambling does not require any level of knowledge or skill. Any person can find ways to gamble despite their age, income, social status, interests, and ethnicity (Gustafsson, 2010).

In Finland, this problem is especially common, there are many organizations that provide help to people living in Finland with gambling problem, but these services are provided mostly in Finnish and English languages. For Russian speaking residents it can be difficult to find help, especially for those who have little knowledge of local social organizations and systems.

In Finland online games and slot machines are very easily accessible for anyone, and therefore not only people with knowledge of local languages experience problems with gambling, but it is important to have services provided in other languages. To improve and increase awareness of the available services it is important to know the target group's perception on these services, as well as to define the reasons why potential service users do not seek for professional help. Services for Russian speaking people with problems related to gambling are not particularly common in Finland. Few organizations have brochures about gambling problem translated in Russian language, one of them is Finnish Institute of Health and Welfare, but there is only one organization in Finland that provides culturally sensitive services regarding gambling problem for Russian-speaking residents. When working with minorities, it is important to take into consideration cultural and linguistic features. Culturally sensitive services refer to services that are taking these particular qualities into account (Sawrikar, 2017).

The topic of gambling problems is closely related to social work as the person's penchant for gambling affects not only the player themselves, but there is also impact on their family and the society as a whole. The aim for this thesis work is to investigate if Russian-speaking residents are aware of what services are available for people with gambling problems.

The topic for this thesis is awareness of available professional help for Russian-speaking residents in Finland who suffer from gambling related problems. For this thesis we are cooperating together with the Mapeli project. Mapeli provides help and guidance to Russian speaking residents in Finland and to their loved ones. According to the Mapeli project coordinator, in their experience potential service users are not reaching out for help often even though there are many people who possibly need help. This could be due to lack of information concerning available services and this research aims to validate this theory with relevant measurements. There are two research questions that this thesis work aims to answer:

1. How well are Russian-speaking residents aware of available services for gambling problems in Finland?
2. How do the respondents perceive the need for services provided in Russian language?

Target group of the research is Russian-speaking residents of Finland. At some point in life anyone can face gambling related problems, so it is important to take into account awareness of any Russian residents living in Finland. The Russian speaking population in Finland is a large minority for which the Mapeli project provides services and help in their own language on gambling related problems and aims to spread awareness of these available services and importance of them.

This study is connected to a working life organization FARO. Non-governmental organization FARO is the working life partner for this thesis. FARO is The Finnish Association of Russian-Speaking Societies. It unites Russian-speaking social organizations throughout Finland. At the moment, the association includes more than 20 member organizations. FARO was opened at the end of 2000 and from the very beginning FARO was a kind of bridge for dozens of organizations. The mission of the association is to support the integration of the Russian speaking population and

the realization of social and cultural rights through joint work with organizations. (Faro, 2020)

In March 2020 Faro launched a new project called Mapeli. At the moment this is the only project that FARO developed, and this organization has never had any independent projects before. It is a non-governmental project and its main task is to support Russian-speaking residents with gambling problems and their families. Mapeli provides information about gambling and about organizations working on gambling problems in Finland (Mapeli, 2020).

Mapeli also investigates the real needs to provide the most culturally sensitive services. Goal of the project is to provide information and easily accessible services in Russian, that service users can easily, anonymously, and free of charge use to solve their problems and improve their knowledge on the issue of gambling problem (Mapeli, 2020). Their activities include phone line, online chat and info bank on their website and social media. The project will benefit from the cooperation for this thesis paper as they will receive good and updated data. Received data can be used by the project for further improvement and development of their services or ways for reaching out to potential service users.

2 BACKGROUND AND KEY CONCEPTS

The key concepts were defined to better interpret the results of the conducted questionnaire. Key concepts for the thesis are gambling problems, Russian speaking population in Finland and professional help. The choice of these concepts is based on the idea of the thesis.

Gambling in Finland is a serious and common problem. Finnish Institute of Health and Welfare published results of a survey conducted in 2019, according to which there were about 112 000 people experiencing gambling related problems in Finland and about half of them had a possible gambling addiction. To put it in perspective, 112 000 people is 3% of the population of the country. Their ages vary from 15 to 74 years old. The youth (18-24 years old) make up the biggest group of people with gambling problems, 5,5%. Men in Finland face gambling related problems almost twice more often compared to women: 4% and 1,2% respectively (Finnish Institute of Health and Welfare, 2019).

In 2011 Iowa University carried out research that suggests that gambling affects close ones of the player not only on the psychological, financial, and social level but also on genetic level. This type of research has never been conducted before and the results are quite new. Scientists found out that pathological attraction to gambling is inherited. Scientific work shows that people with the gambling addict in the family are 8 times more likely to develop this problem: 16% of relatives of people with gambling addiction had the same problem, compared to people who do not have gamblers in a family, among them this problem is quite rare only 3%. Dr. David Black believes that healthcare professionals should consider that when working with gambling addicts. (Black, 2011)

Finland among other countries is using an International Classification of Diseases developed by the World Health Organization (document for the accounting morbidity, assessing the health records of the population and causes of death). Gambling addiction officially received the status of a mental illness and is included in the ICD-11 (international classification of diseases). ICD-11 is the newest classification document that was approved by the World Health Organization in 2018 and is used by health service providers, medical service professionals and scientists

all over the world. According to the International Classification of Diseases, pathological gambling is a disorder that requires treatment. (World Health Organization, 2018)

2.1 Available support services

In Finland professional help to people with gambling problems and their families provided by public, private and non-governmental organizations. People in need of professional help can find different options: rehabilitation clinics, peer support groups, phone lines, different types of therapies, networking, and self-help programs. (Addictionlink, 2020)

In the case of gambling problem, a person can visit a local health station or municipal psychiatric outpatient clinic in order to get assistance and to discuss further treatment possibilities. Also, in the capital area Gambling Clinic offers its services. This clinic specializes on the gambling problem and provides outpatient treatment, services targeted to people over 18 years old and it is free of charge. In many big cities in Finland different clinics provide help: Kuopio Crisis center offers confidential professional help and peer support. Sovatek Foundation is located in Jyväskylä. Sovatek Foundation offers psychological rehabilitation and cooperation to people with gambling problems. The most known clinic in Finland is A-klinikka, also offers help to people with gambling addiction and their clinics are located mostly in Southern Finland. In addition to clinics, assistance concerning gambling problem can be received online via the Addiction link website or Peluuri project website, they have a lot of information regarding the issue, anonymous online chat, and phone line (Peluuri, 2020).

2.2 Gambling problem

It is important to take into consideration that a gambling problem does not have obvious physical signs or symptoms that could be noticed with other issues, such as drug addiction or alcoholism. Gamblers usually deny the fact that they have any problems. In addition, they are commonly trying to hide the fact that they are gambling. (Dudko, 2004)

Gambling problem is caused by many combined factors, it is known from different long-term observations and studies of deviant behaviors, including alcohol and drug addiction. Gambling problem is so common due to its availability and accessibility. Gambling is an activity where losing control is easy. The longer a player gambles, the higher the chance of losing control and becoming addicted to games. Gambling problem is one of these behavioral disorders that is very dangerous for a person who loses control and is not able to cope with their own wishes. It can lead to quite tangible financial problems. (Erens & Mitchell, 2003). According to the Peluuri annual report (2019) on average their service user with gambling problems contacts them when debt caused by gambling is considerably big, ranging from 20 000 euro to 50 000 euro.

This thesis work is using the definition of Ontario Problem Gambling Research Centre when referring to gambling problem due to its prevalence. Ontario Problem Gambling Research Centre (OPGRC) in their recent research, also defines problem gambling as repetitive gambling that leads to (or exacerbates) repetitive negative consequences: financial problems caused by gambling, mental problems, and gambling addiction. (Ontario Problem Gambling Research Centre, 2018) Corresponding definition implies that involvement in the gambling stay continuously and varies from not causing problems to explicit involvement with subsequent problems (Dickerson, 2005)

Person can be considered addicted to gambling if his or her gambling habits can be described as pathological. Pathological gambling is a repetitive, maladaptive gambling process that is impossible to control and that leads to significant deleterious consequences such as legal, family related, financial and personal (Blaszczinski, 2002).

Problem gambling has its stages. Not all players go through these stages, but those going through them can face different stages at different intervals. For some players it can take up to 30 years, while for some it can take only weeks. First stage is “winning stage”, it is when a person slowly starts to lose control and even a small win strongly stimulates interest. At this stage the gambler still feels in control. Next stage is “losing stage”. At this stage gambler is preoccupied with gambling. The desire to play is not reinforced by the presence of finance, in order to get money player, spend all the available funds and even tend to borrow money for gambling.

Third stage is the desperation stage, when a person loses interest in everything, a depressed psychological state often leads to health problems. Gambler is trying to run away from the problems, sometimes this is when the gambler starts to seek professional help. Also, there is a 4th stage “hopeless stage” gambler realizing the problem, does not believe in help and is still gambling. (National Council on Problem Gambling, 2000).

The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) identifies pathological gambling addiction as a separate disorder. They define it as “persistent and recurrent maladaptive gambling behavior” that disrupts interpersonal or professional relations, and it has 10 main symptoms. If individual has 5 or more symptoms, then he or she has gambling addiction: An individual is preoccupied with gambling, planning for gambling or contemplating ways to get money for it, Lie to hide involvement in gambling is another symptom. Another symptoms include following : the need to increase the stakes in the game to get the desired level of excitement, successful repetitive attempts to control, reduce or stop gambling behavior, anxiety and irritability when trying to reduce or stop gambling behavior, relying on the help of others in a difficult financial situation caused by gambling. Exposure of significant interpersonal and professional relationships opportunities due to gambling. Returning to play after a loss to win back a loss or streak of losses. Gambling to avoid problems or reduce dysphoric manifestations. Offenses in order to get money for the game. (Hinchliffe, 2015)

2.3 Russian-speaking population in Finland

The Russian speaking population in Finland is very large and growing every year. From 2016 to 2019 Russian-speaking population in Finland increased by 6162 people. According to Statistics Finland there were 81 606 people in Finland in 2019 whose mother tongue is Russian. It is the most common language in Finland after Finnish and Swedish languages. (Statistics Finland, 2020) According to the European Migration Network (2019), the 3 main reasons why Russian-speaking people move to Finland from Russia are work, family ties and study.

It is important to note that Russian-speaking residents in Finland are not only people who arrived from Russia. According to the research conducted by Kantar project in

2019, 63% of population of Ukraine speaks Russian language fluently (Kantar, 2019). In 2019, 2170 people moved from Ukraine to Finland on the basis of work permit (Finnish Immigration service, 2019). In Estonia, where the total population is 1,327,163 people, at the end of 2019 there were 382 155 people whose mother tongue is Russian language. (Department of Statistics, 2019). In 2019 there were 50 860 people from Estonia living in Finland (Statistics Finland, 2019). It shows that there are many potential service users for services provided in Russian language in Finland.

In Finland there are more than 100 Russian-speaking organizations that serve Russian-speaking people of all ages, the most popular ones are children's clubs. They focus on different activities and on supporting of Russian language among children. Many Russian-speaking organizations in Finland also provide integration services (Cultura-säätiö, 2019). Despite the quantity of organizations FARO is the only Russian-speaking organization in Finland that provides consultations and help to people with problem gambling.

According to the Cultura fund (2017), which is an expert organization whose task is to expand the participation of Russian-speaking residents of Finland in public life and to promote the deep integration of Russian-speaking residents of Finland into Finnish society, Russian-speaking residents in Finland face many integration-related problems that are associated with insufficient language level. In the families where both parents Russian-speakers, integration takes longer time. In 2017 in Finland there were 15 000 families where both parents are Russian speakers.

2.4 Professional help

Help to people with gambling problems can be provided by friends, relatives or by professionals. Main skills for those who want to support the people close to them who have gambling problem, are empathy and the ability to listen. This type of help leads to temporary relief from the problem by sharing psychological difficulties with others. Professional help refers to help provided only by trained specialists, who understand the specificity of the problem and ways of helping. It does not focus on short-term help. The specificity of professional assistance lies in its voluntary nature,

it means that help is only efficient when service users are willing to receive professional help. (Beredinova, 2018)

Many potential service users face barriers in seeking help. Reasons behind that are quite different: some people are concerned with confidentiality of the services or they are ashamed that they will be treated as an addict or mentally ill. Some people do not wish to spend money for help services, some people believe they can solve problems by themselves and their issue does not require professional help. Cultural background and inability to find right service also could be a barrier (Gainsbury & Hing, 2013).

Various techniques are used to help people with a gambling problem. The choice of it determined by a specialist after a preliminary consultation. There are many options for the service user, they include helplines, support groups, psychological help and medical. One of the most efficient treatment methods is cognitive behavioural therapy. The aim of this therapy is to identify dysfunctional thoughts and habits and during mutual cooperation to replace them with rational thinking and to recover control of own feelings and emotions. The most important aspect of this treatment is the patient's will to cooperate with the professional in order to see the results (Gambling Research Exchange Ontario, 2020).

3 RESEARCH METHODS

Research methods are determined in accordance with objectives, tasks and goals. Chosen research method for this thesis is quantitative research. Quantitative research is needed for transforming data such as written conversation into numbers and qualitative research needed for descriptive information (Tracy, 2013). The choice between qualitative and quantitative research methods should be done based on the nature of the research questions. Quantitative methods are often hypothesis driven and can be used to collect facts to support a theory. Qualitative methods can be used to better understand an individual or group's views and perceptions. (Wellington, Marcin 2007)

Quantitative research method is based on numerical data, it allows obtaining quantitatively expressed information on a certain range of issues but for data to be reliable higher number of participants is required, compared to qualitative method of research. Higher number of participants makes it possible to process data by statistical methods. Quantitative research is a great way to assess the level of awareness of a certain target group. Main ways of collecting data in the quantitative type of research are different surveys and questionnaires. (Burke & Christenson, 2014) As the idea of this thesis work is to find out the level of awareness concerning available services for Russian-speaking residents in Finland with gambling problems, quantitative method provides a great tool to measure it. The subject of the research is Russian-speaking residents of Finland. The aim is to find if they are aware of available help services for people with gambling problems.

3.1 Questionnaire

For obtaining information from the target group for this research a questionnaire is used. The questionnaire is available for participants for a time period of 3 weeks. Google forms was the platform of choice and it was used for questionnaire development and publishing. This website does not require registration to participate in the questionnaire. It is also easily accessible, and the interface of this website is clear and simple to operate. This method of collecting data has many advantages. Questionnaires guarantee anonymity to the participants, also responders can answer

the questions at any suitable time for them, as well as they can spend as much time as they need to answer the questions. Closed form questions help to standardize the data for better interpretation. (Miller, 2002)

To develop a good questionnaire several rules have to be followed. First of all, questionnaires have to have questions logically related to the topic of the research and based on the research questions. Also, when creating questions, it is important to always ask yourself “why is this question important?” and asking unrelated questions just out of interest is not acceptable. Also, the wording of the questions has to be correct and as objectively understandable as possible for everyone, thus it is better to use simple questions. (Bradburn, 2005) It is important to have closed questions in the beginning of the questionnaire and closer to the end open questions where participants can express their opinion or feelings towards certain issues when they are already familiar with the topic. This way it will reduce the confusion and discomfort of the respondents. (Wellington & Szczherbinski, 2018)

The questionnaire aims to collect data on the issue and one of the key questions for this thesis work: what is the level of awareness concerning services for people with gambling problems among Russian speaking residents in Finland. The hypothesis before conducting the research is based on Mapeli project organizations experience in dealing with the target group; Language barrier is a big factor as well low level of trust to the services and possibly low awareness of available services for people with gambling related problems. This is also the basis for forming the questions for the questionnaire. To confirm this hypothesis or other valid conclusion measurable data is needed, thus the methodology of choice is quantitative research. (Vanderstoep, 2009)

3.2 Data collection

Due to Covid19 circumstances during the research phase, data will be collected entirely online via closed Facebook groups for Russian-speaking people living in Finland using an online link to the questionnaire. The existing Facebook groups are a great way to reach the specific target group as the group members only consist of users that the questionnaire aims to reach, and they are likely to interact with the questionnaire. Questionnaire questions were defined in cooperation with the Mapeli

project coordinator, and it was decided to have the questionnaire completely anonymous for the participants. They also were informed about this prior to participating. Also, participants were informed that the received data will be used for the public thesis work.

Data collection process started from the meeting with Mapeli project coordinator. We organized 2 meetings in the office of Mapeli project and 2 online meetings. During the first 2 meetings we discussed the needs of the research and what data we need to receive with the questionnaire. Based on the research questions, the aim of the questionnaire was to find out how big percentage of the respondents are aware of available services for people with a gambling problem in Finland, how common are gambling related issues among the target group, and to see how they perceive the need services provided in Russian language. We also discussed initial questions for the questionnaire. During the 3rd meeting we discussed methods of questionnaire distribution and promotion. After the methods were decided, questions were sent to the responsible teacher for approval. Questionnaire questions were modified and specified based on the meetings and the feedback.

During the 4th meeting in cooperation with the project coordinator and members of the project, questions were finalized for publishing. The final version of the questionnaire was published and distributed using Google forms platform. The decided reporting period was 3 weeks, which was also added in the questionnaire description for information of the participants. Same day an online link to the questionnaire was posted by the Mapeli project to several big, closed Facebook groups. After 2 weeks, when the amount of the responses reached 80 answers, an initial analysis was made. After the full reporting period of 3 weeks questionnaire was closed and final results were exported into charts and analyzed.

3.3 Data analysis

Received answers of the questionnaire were analyzed using the quantitative descriptive data analysis. Quantitative descriptive analysis is done by data visualization and also by describing received data using statistics. This type of analysis provides a quantitative description of the dataset (Anderson, 2015). Descriptive analysis is used to simplify the presentation of data. All of the data is

presented in charts or graphics for better interpretation and understanding of the results (Loeb et al., 2017). Questionnaire was distributed online, and it makes the administration, analyzing and summarizing of the information more efficient than analysis of the paper version of the questionnaire. (Miller, 2002)

The first step in the processing of data is editing. Editing is a stage of checking the received questionnaire answers one by one in order for finding possible gaps in the answers, misunderstandings, and errors. (Kumar, 2011) To minimize the risk of participants skipping questions, we made all questions mandatory for answering, except the question defining gender of the participants, in case some of the participants do not wish to identify themselves. To make the data more easily fit for the quantitative analysis phase, we used mostly multiple-choice questions and as few as possible questions with open answers as an option. After data was initially processed it was automatically systematized and as the questionnaire is completely electronic, transferring received answers into charts was the best option for us. Charts converted answers into percentage automatically. From charts we are also able to monitor the frequency and distributions.

Second stage is the so-called data immersion phase. The point of this stage is to discuss received information with the Mapeli project in order to consider different interpretations of the received answers and to come to a joint conclusion. (Tracy, 2013) After that it was essential to understand if received data is significant to make a conclusion. Research has a good number of participants, 116 people participated and from this information we can conclude that received data is reliable. Further analysis is based on describing the received results and presenting it via the charts.

3.4 Validity and reliability

Smaller amount of the participants in the research usually leads to a higher risk of low statistical results. To prevent unreliable data in quantitative research, a greater number of the participants should be involved in the research. (Taylor, 2013) In the questionnaires where personal data of respondents is conducted during the research, participants might not want to share sensitive information this way. Also, sometimes when questions are not written clearly, respondents might choose only a certain answer option, for instance picking ‘no’ option in order not to agree to something

the respondent is not familiar with. These response sets can negatively affect the reliability of data. In order to prevent this, questions have to be simple and clear for understanding (Truhan, 2019)

Thus, during the formation of the questionnaire several project workers reviewed the questions and editing was done for the purpose of improving the final version and to avoid improper data as the result. In order to receive honest answers from the respondents, questionnaire can be completed anonymously. Also, validity and reliability of the received data for this thesis paper is achieved by stronger statistical power.

Concepts such as gambling problem can have varying definitions depending on the source and context. Also, it is not possible to presume participants of the questionnaire to have enough information about this kind of complex concept to answer related questions. If this issue is not addressed, the participants might not want to answer the questions due to insufficient level of information on the topic and the validity of data from the questionnaire is compromised by subjective views of the participants (Belanovsky, 2001). To ensure that participants were familiar with the definition of the key concept, gambling problem, they were provided with detailed description of the signs and symptoms prior to answering the questions. This leads to more objective data as participants are basing their answers on the same definition and also able to determine whether they have faced gambling related problems in their life.

The total received amount of 116 answers is a sufficient sample size to provide useful insight of awareness levels and opinions of the sample population and it provides applicable insight on the target group, Russian-speaking residents in Finland. Accurate percentages are impossible to convert to match the whole population of target group with a defined margin of error. Professor Ilker Etikan (2016) describes one of non probability samplings flaws in his article, which is possible bias due to the subjective nature of the chosen sample. While the questionnaire is an effective way, on the other hand, comparing the results of different questions will lead to valid conclusions that we can apply to the real-world situation.

Number of answers is lower for the follow up questions targeted for those who stated they have faced gambling related problems or that they are not sure. The sample size for these specific follow up questions is low, thus the data is less representative of the whole target group. The results for the follow up questions will still be analyzed and considered, but they will be considered as individual opinions.

4 RESEARCH ETHICS

Research ethics defines what is morally right and legal in the research. Ethics is the responsibility of the one who does the research (Huma & Nayeem, 2017). Research ethics guidelines are especially important to consider when research is conducting data on sensitive topics that deeply affect the personal aspects of the life of the participant of the research (Veselkova, 2000).

Researcher has certain ethical rules to follow. Participants of the research should be informed prior to participating concerning the purpose of the study, duration of research and confidentiality of provided information (Finnish National Board on Research, 2019) Researcher has the responsibilities, while participants have rights. Participants have the right to give or forbid permission for data collection and they have the right to quit from participating in the research anytime (Huma & Nayeem, 2017).

For this thesis, rules of safe data management were followed. No personal data was collected for the purpose of the research. Questionnaire can be completed anonymously by the participants and due to anonymity consent was not requested from the participants. All of the participants were made aware of the anonymity of the questionnaire and the purpose of data collection, by answering the questionnaire they were agreeing that the information received from them will be used for this thesis work and later will be published in the public domain. While advertising questionnaire it was important to use right wording in order to prevent misunderstandings. We were not trying to make it look as if among Russian speakers the issue of gambling problems is especially common.

Also, it is important to notice that minors were not participating in the study as according to the Lottery Act (2016), paragraph 14 minors are not allowed to receive gambling services in Finland and a person has to be at least 18 years old to play. Data will be stored only while it is getting analyzed and used for the research, after that all data will be permanently deleted.

5 RESULTS

In this chapter all the results of the research are presented. For better understanding of the results, charts are attached in this chapter and they represent received answers in percentage. Demographic refers to basic information about participants: gender composition, age, and place of residence. Results demonstrate level of awareness among participants, gambling problems among the participants and demand for services in Russian language.

5.1 Demographical characteristics of the respondents

Final results are received and analyzed. Questionnaire was open for participation for a period of 3 weeks. In the research 116 respondents participated. All the respondents are living in Finland and all of them are Russian-speaking people. Gender composition divided as follows; 98 participants of the research are women, and 18 participants are men. Figure 1. Demonstrates gender composition in percentage.

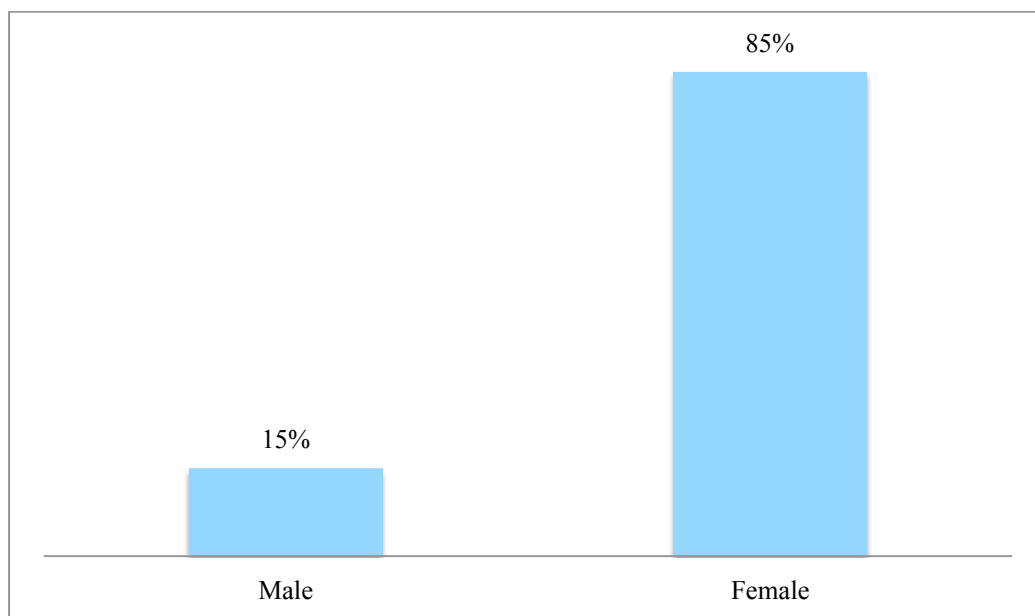


Figure 1 Representation of gender composition

Age of the respondents was divided into 4 age groups: 18-29, 30-44, 45-59, 60 and older. The biggest age group is 30-44 years old; 57 participants are belonging to this age group. To the youngest age group, ranging from 18 to 29 years old, belong 38 respondents of the research. Ranging from age 45 to 59 participated 18 respondents.

Only 3 participants are from the smallest group of respondents, 60+ year olds. Figure 2. Represents age of the participants in the percentage.

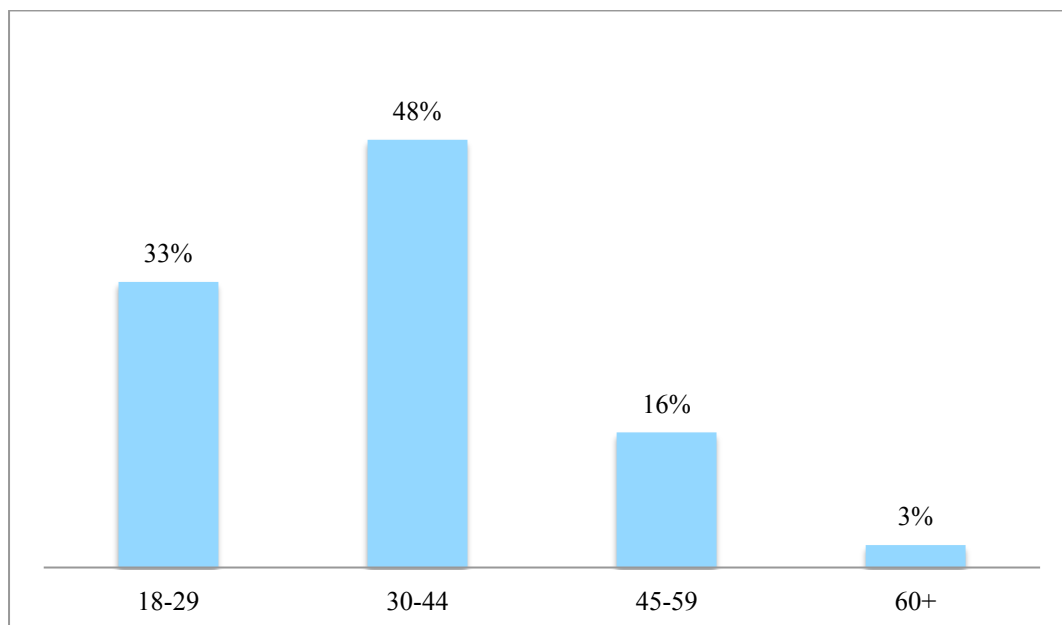


Figure 2 Representation of age groups

5.2 Russian-speaking residents with gambling problems

The results showcase that facing gambling problems is not uncommon among the target group. Out of 116 people participated 49 stated that they have a Russian-speaking close one that has or had gambling problems during their life in Finland. It means that nearly half of the respondents personally know a Russian-speaking resident with gambling problems. FIGURE 3. Demonstrates the received answers in percentage for the question: Do you personally know Russian-speaking person in Finland who has or has had a gambling problem?

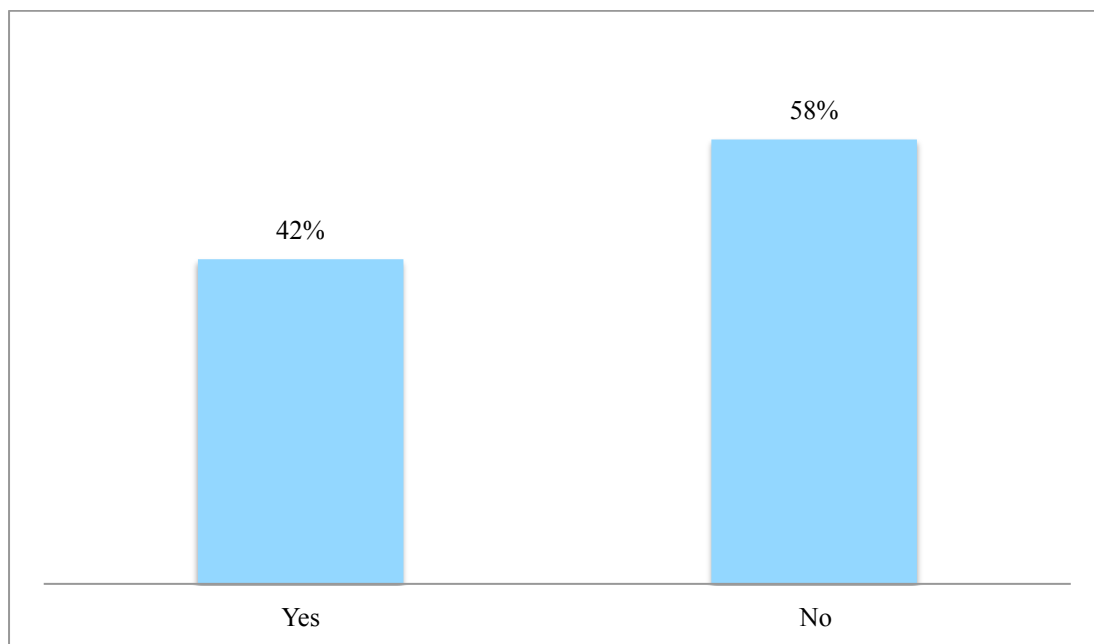


Figure 3 Representation of the personal awareness

Considerable percentage of the participants have experienced gambling problems themselves: 14 respondents out of 116 stated that they have had gambling problems at some point in their life and 9 respondents stated they are not sure if they had gambling problems. These 9 respondents did identify some signs of problem gambling in their behavior in the follow up questions such as hiding from loved ones the fact that they gamble, and gambling affected their financial situation and relationships. FIGURE 4. demonstrates the received answers in percentage for the question “Have you ever faced gambling problems”

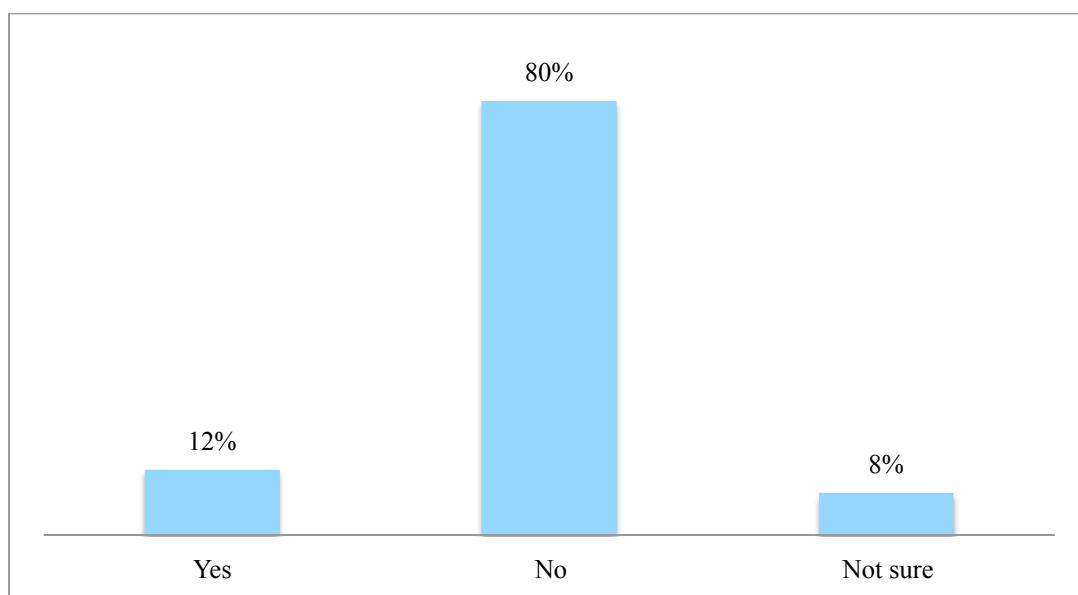


Figure 4 Presence of gambling problems among respondents

Follow up questions included 4 common symptoms of gambling problems. According to the results out of 9 participants who stated that they are not sure if they had gambling problem, 8 participants stated that they had to lie to hide involvement in gambling and gambling affected their financial situation and relationships negatively. One participant stated that they had to sell items in order to get money for gambling. Out of 14 respondents who stated that they had faced gambling problems, only 1 person was seeking professional help.

5.3 Seeking for professional help

Most common reason why participants with gambling problems were not looking for professional help is because they were thinking that their problem was not serious, 12 respondents stated that they were not looking for help because of this reason, while 5 respondents did not know where they can get help, 3 respondents do not trust help services and 3 respondents thought they can solve it on their own. Figure 5. Demonstrates received answers in the percentage.

On the question “What would motivate you seek professional help” most of respondents who experienced a gambling problem stated that if they would know it will not affect them in the future, meaning it will not be registered in any data base.,9 respondents out of 23 stated that knowing the fact it will not affect them in the future would motivate them to seek for professional help.

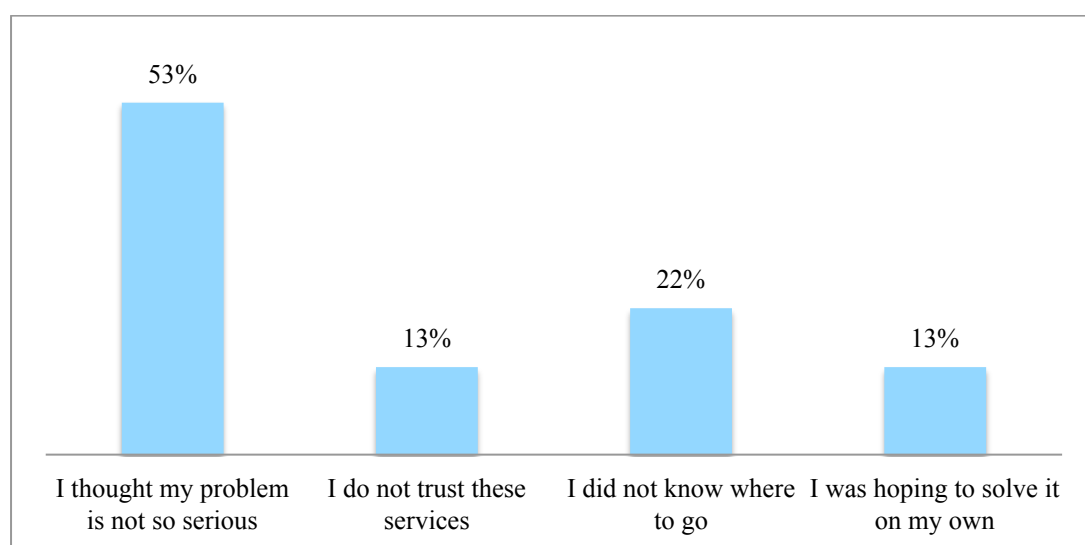


Figure 5 Reasons for not seeking professional help.

5.4 Awareness of support services

According to the results of the analyzed questionnaire, most of respondents are not aware of available services for people with gambling problems in Finland provided both in Finnish and Russian language. Figure 6 is demonstrating the answers that were received on the question in percentage: Do you know available services in Finnish language for people with gambling problems? According to the results 93 of respondents are not aware of such services, 22 of respondents stated that they are aware.

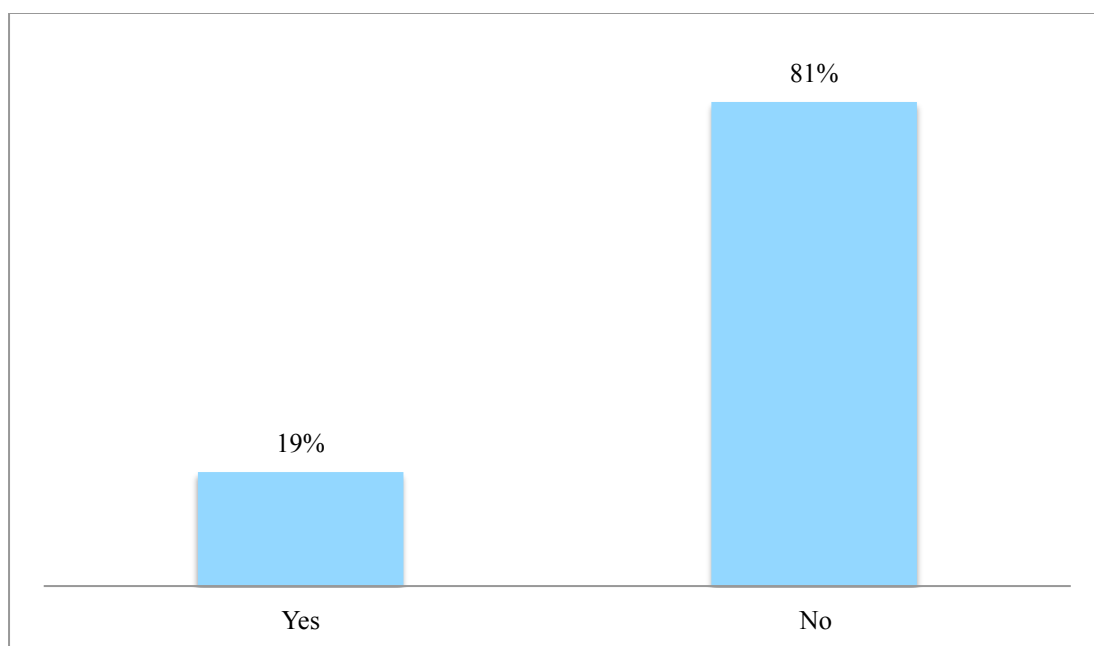


Figure 6 Representation of how many respondents are aware of support services provided in Finnish language

Even a lower number of respondents are familiar with available services for people with gambling problems provided in Russian language. Figure 7. Demonstrates the percentage of the answers for the question: Do you know available services provided in Russian language for people with gambling problems? According to the received answers 102 respondents are not aware of services for people with gambling problems provided in Russian language and only 13 respondents know such services.

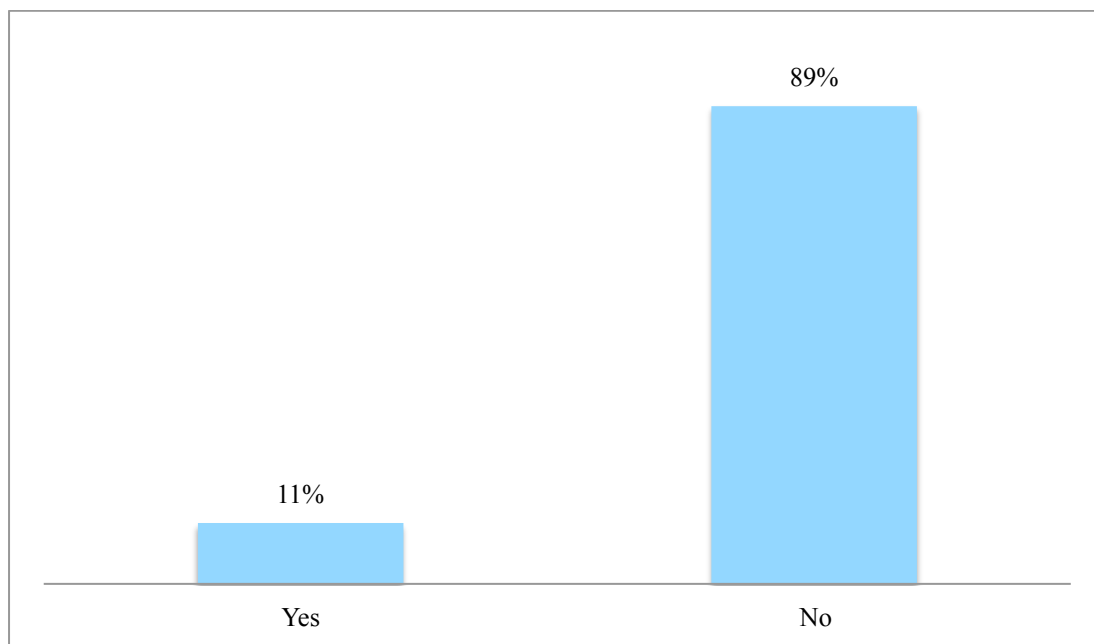


Figure 7 Representation of how many respondents are aware of support services provided in Russian language

In line with overall low awareness of available services very few respondents stated that they have heard of Mapeli project. Out of all the participants only 13 stated that they are aware of Mapeli project. Figure 7. demonstrates the answers in the percentage for the question: Have you ever heard of Mapeli project?

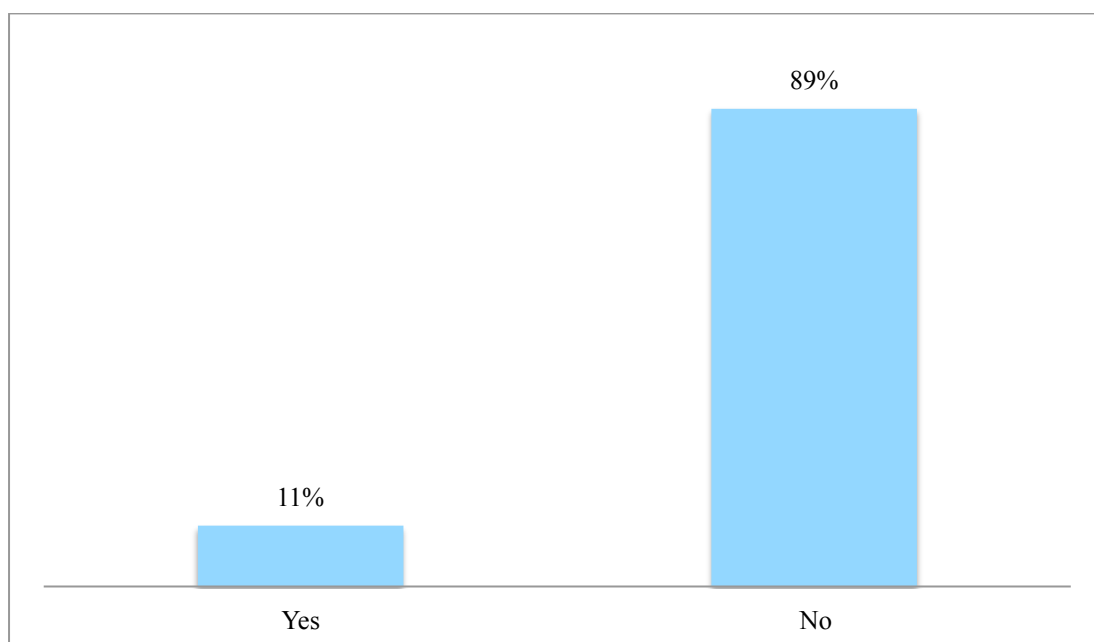


Figure 8 Representation of the participant's awareness of Mapeli project

5.5 Demand for services in Russian language is high

According to the results, demand for services in Russian language in Finland is high among the participants. If they would have choice between social services provided in Russian language and services provided in Finnish language, most of the participants would go to services provided in Russian language: 49 respondents stated that they would rather use services provided in Russian language, 41 respondents stated that language of provided services is not important for them and 24 respondents stated that they would rather go to services provided in Finnish language. Figure 8. Demonstrates received answers in the percentage.

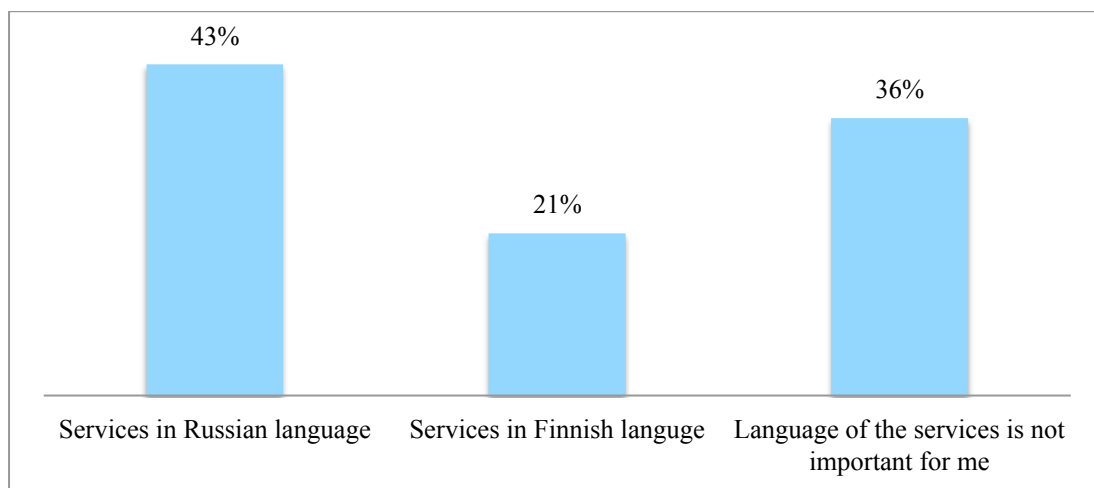


Figure 9 Representation of the participant's preferences of services provided in different languages.

6 DISCUSSION

The results provide important insight on how common problem gambling is within the target group, as previously we only had data available only considering the whole population of Finland. According to the Finnish Institute of Health and Welfare (2019) 3% of the population in Finland can be identified as people with possible gambling problems. According to these figures gambling problems can be seen as a considerably common phenomenon in Finland. However, in the research conducted for this thesis work, the number of respondents stating they have experienced gambling problems vastly exceeds the number we were expecting. Based on the provided signs and symptoms of problem gambling, 12% of the respondents state they have experienced a gambling problem at some point in their life. The number is very high and based on these services for problem gambling are very relevant and much needed in Finland.

According to the results 12 respondents that stated that they experienced gambling problems were not seeking professional help as they were considering their problem is not serious enough for support services. Peluuri(2019) has faced the same issue when potential service users with gambling problems were not seeing their problem as an issue and reach out for help only when the problem has reached a critical point and person has tremendous debts. Respondents that were not seeking for professional help stated that knowing that provided support services are anonymous would motivate them to seek professional help. Gainsbury and Hing(2013) in their research also mention anonymity concern as one of the factors why people with addictions are not seeking for help. This concern demonstrates that social field organizations in Finland should promote more anonymity of their services.

Many of the respondents (43%) stated that they would rather receive services in their language if they were available. This further validates that there is a demand for services targeted to Russian-speaking problem gamblers in Finland. According to the questionnaire conducted by Helsinki University in 2019, Russian-speaking residents from older age groups tend to often seek health services abroad. During the past year 28% of age 50 and above Russian-speaking residents had visited abroad for health

services, with language barrier stated as one of the biggest reasons. (Kemppainen et al, 2019) These results indicate that given the option of services in Russian language, the target group would be more encouraged to seek professional help for problem gambling in Finland.

The objective of this research was to measure the awareness of available services for people with gambling problems among Russian-speaking residents in Finland. The Mapeli project has a very specific target group, and they aim to raise awareness concerning gambling problem and professional help among Russian speakers living in Finland. The project is active on social media and uses it to market their services, thus Facebook was an effective way to target their key target group and measure awareness concerning their services and the project itself. Considering how common gambling problem is among the Russian-speaking residents, only 19% are aware of available services for gambling problems in Finland. Expectedly, even fewer of the respondents knew about available professional help for problem gambling in Russian language: 89% of the respondents answered that they are not aware of such services. Even if respondents had either faced gambling related problems or have a close one who has been in this situation, most of them answered that they do not know what kind of services are available in Finland to seek help from. Target groups awareness concerning the Mapeli project itself is in line with the other results, as only 11% had heard of the project and their services.

7 CONCLUSION

During the research respondents were active to participate, this can be due to active advertising of the questionnaire in the Facebook groups for Russian-speaking people living in Finland. Another reason for such activity can be due to the promotion of the questionnaire on the Mapeli project Facebook account where people interested in the topic of gambling problem were interested to help the research.

One of the main concepts for receiving reliable data in this research was significant participation of the target group members. In the closing of this research, we can draw the following main conclusion on the topic after analyzing results of the current research, previous conducted research, and relevant literature: Russian-speaking residents in Finland is a very big group and among them there are people who potentially have gambling problems and need professional services in Russian language.

As Dudko (2004) review shows it is common that people experiencing a gambling problem tend to deny that they are having any sort of problem and thus are not active in looking for professional help and researching available options. This is why it is important to raise general awareness regarding not only available services of professional help, but also the signs and symptoms of the problem among the target group. Mapeli is the only service in Finland that provides sensitive services for Russian speaking residents with gambling problems, and it is important for them and their activities to be known among the target group. In this role the Mapeli project has an important mission to make their services known and spread awareness on problem gambling.

Most of the respondents who stated that they have or have had gambling problems also stated that they were not seeking for professional help. As gambling addiction belongs to the ICD-11 system developed by the World Health Organization (World Health Organization, 2018), it is very important to raise awareness concerning the issue among the target group so that people would know that only professionals can efficiently help and that there are help services in Finland provided even in Russian language. Many participants perceive that there is a need for services in their native

language and they would prefer services in Russian language, if they were available. Available services in the native language can help integration of people with insufficient level of Finnish language. According to the Cultura-fund (2017) families where both parents Russian-speakers have difficulties to access services provided in Finnish language and in order to avoid social exclusion services in native language can be very useful. Cultural background is one of the factors why people with gambling problems are not seeking professional help (Gainsbury & Hing, 2013). Considering this reason, culturally sensitive services are especially important when working with minorities.

To summarize the results of this research, gambling problems are a considerable issue to Russian speaking residents in Finland and to their close ones. A large majority of the respondents are not aware of available services for gambling problems, especially the ones provided in Russian language. This is problematic, since a large portion of the target group of this research perceives that there is a need for services in their native language. An individual with a gambling problem is not likely to seek professional help for a number of different reasons, even when their quality of life is affected. The language barrier is one of the issues Mapeli and some other service providers can solve by raising awareness on the gambling problem in Finland and the professional help services they provide.

Results of this research demonstrate that Mapeli project and other projects that help people with gambling problems, are needed and they play an important role for the society. There are beliefs that stop some people from seeking professional help. It is important for social field organizations to promote anonymity and cultural sensitivity of their services.

7.1 Professional development

During the whole process of the research, I was very motivated to work on it. As a Russian-speaker myself I was very interested to carry out a research concerning Russian-speaking residents in Finland. Interest in the topic and relevance played a big role in the development of my research. Now I am certainly more aware of the importance of the help services for people with gambling problem and I also understand the content of this issue in Finland thoroughly.

As research was progressing confidence in the own abilities to carry out the research independently has grown. Time management was an important thing to develop in order to keep working efficiently. After this process I am more realistic about the time required for different stages of the research. Research ethics was an important aspect to consider during the biggest part of the thesis work: research implementation. During the planning of the questionnaire, it was important to always remember that working with personal information requires consent from the participants and safe data management from the researcher. Not everyone wants to share their experience on such a sensitive topic and because of this reason it was important to develop a way of collecting information without personal interaction with participants and without collecting their personal data. Problem solving skill was developing as well throughout the process, especially considering the current Covid19 situation when things are constantly changing, and researchers need to adapt. This work helped me to develop professionally more, knowledge that I received is very important for me as for a future social work professional. Now I am more interested and aware of the specificity of work with people with addictions : how to accurately define the problem and how to help.

7.2 Recommendations

To further understand the target group and their needs, Mapeli can use this research in order to develop their services and increase awareness among Russian-speaking residents in Finland concerning gambling problems. Also, as could be noticed from the Peluuri annual report (2019) many people with gambling problems seek for help only when the life situation becomes deplorable, that is why it is important to raise awareness concerning the issue not only for gamblers, but also for close ones of the player. Awareness of available services is an important area to focus on in the future for the Mapeli project. The results demonstrate that there are many Russian-speaking residents in Finland who are facing gambling related problems themselves or personally know someone who is potentially in need of professional help. Especially awareness of services in Russian language is low among the target group, which could hinder their willingness to seek professional help. The Mapeli project could utilize available social media channels more for this purpose, as the target group could be reached easily via closed Facebook groups that were used in this research.

Certainly, further qualitative research on the topic could be conducted to better understand the target group; What are motivating factors that encourage Russian-speaking residents to seek for professional help and what can their loved ones do to assist them. The questionnaire that was conducted with this thesis work also gathered some answers to in-depth questions targeted to those who have potentially faced a gambling problem, but due to the small sample size research could be continued for more reliable data.

It is difficult to overcome a gambling problem without widespread informatization among the population, which social field organizations and different social and health institutions should undertake. The problem is common not only among the target group but among the general population of Finland, also people with gambling problems are not reaching out for help often. Being aware of signs and symptoms of the problem, support services and guaranteed anonymity could help potential service users and their loved ones. It is important to make sure that there are support services and people know where to turn with their problem in order to receive professional help before it is too late.

REFERENCES

- Addictionlink. (2020). Treatment of gambling addiction. Retrieved from:
<https://paihdelinkki.fi/en/info-bank/articles/gambling-other-behavioural-addictions-and-their-treatment/treatment-gambling>
- American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders*. Arlington: Wilson Boulevard.
- Anderson, C. (2015). *Creating a Data-Driven Organization: Practical Advice from the Trenches*.
- Belanovsky, S. A. (2001). Deep interview: study book. *Problems of increasing the adequacy of quantitative instrumentation* (pp.157-158). Moscow.
- Beredinova, S.V. (2018). Prevention and correction of fears.
- Black, D.W. & Shaw, M.C. (2011, January). *Gambling addictions in the family*. Iowa University, US.
- Blaszczinski, A. & Nower, L. (2002). A pathways model of problem and pathological gambling. *Abingdon*, 97, 487-499.
- Taylor C. S. (2013). *Validity and validation: Understanding Statistics*.
- Culutra-fund. (2017). Suomen Venäjänkieliset tassa ja nyt. Retrieved from:
https://culturas.fi/wpcontent/uploads/2018/05/%20Suomen_venajankieliset_tassa_ja_%20nyt_A4_WEB_002.pdf
- Department of Statistics (2020). Retrieved from: <https://www.stat.ee/et/uudised/eesti-elanikud-raagivad-231-eri-emadeelt>
- Dickerson, M. & O'Connor, J. (2005). *Gambling as an addictive behaviour: Impaired Control, Harm Minimisation, Treatment and Prevention*.
- Dudko, T. (2004). *Formation of gambling addiction in youth and people of mature age*.
- European Migration Network. (2019). *Statistics 2019*. Retrieved from:
http://www.emn.fi/files/2024/EMN_tilastokatsaus_2019_EN_naytto.pdf
- Etikan, I. (2016, January). *Comparison of Convenience Sampling and Purposive Sampling*. *American Journal of Theoretical and Applied Statistics*. Retrieved from:
article.sciencepublishinggroup/html/10.11648/j.ajtas.20160501.11.html

- Finlex (2020). Lottery act, paragraph 14, 2016. Retrieved from:
<https://www.finlex.fi/fi/laki/ajantasa/2001/20011047>
- Finnish Institute of Health and Welfare. (2005). Suomalaisten rahapelaaminen, 6.
- Finnish Institute of Health and Welfare. (2019). Rahapelien pelaaminen riskitasolla on vähentynyt – peliongelmat ovat yhtä yleisiä kuin ennenkin. Retrieved from: <https://thl.fi/fi/-/rahapelien-pelaaminen-riskitasolla-on-vahentynyt-peliongelmat-ovat-yhta-yleisia-kuin-ennenkin>
- Gothoni, R. (2012). Ethical principles in exploratory and developmental work. Retrieved from:
<http://libguides.diak.fi/c.php?g=656123&p=4611984#4>
- Gustafsson, B. (2010). Gapro care project, 6.
- Hayes, C. S. & Levin, E. M. (2012). Mindfulness and acceptance for addictive behaviors, 216-217.
- Hinchliffe, S. A. (2015). Defining the "Defined"—Problem Gambling, Pathological Gambling, and Gambling Disorder: Impact on Policy and Legislation, 22-23.
- Huma, P. & Nayeem, S. (2017). Research Ethics
- Burke, J. R. & Christensen, L. (2014). *Educational Research: Quantitative, qualitative, and mixed approaches. 5th edition.*
- Kantar TNS Online Track (2019). Research: language situation in Ukraine. Retrieved from: <https://tns-ua.com/news/doslidzhennya-movna-situatsiya-v-ukrayini>
- Kumar. R. (2011). Research Methodology, (3), 12-19.
- Laura Kemppainen et al, (2019). Yli 50-vuotiaat venäjänkieliset Suomessa : Terveys, osallistuminen, palvelut ja digiteknologioiden käyttö. Helsinki
- Mapeli project. (2020). Retrieved from: <https://www.mapeli.fi/o-proekte?lang=fi>
- Miller, N. J. (2002). *Handbook for economy lectures.* University of York.
- National Council on the Problem Gambling, (2000). A Guide for treatment professionals.
- Ontario Problem Gambling Research Centre (2018). Conceptual framework of harmful gambling. Retrieved from:
<https://www.greo.ca/Modules/EvidenceCentre/Details/conceptual-framework-of-harmful-gambling-third-edition>
- Osipov, M. (2009). Gambling as a deviant behavior: psychological and social roots, 88-89.

Peluuri (2019). Annual report. Retrieved from:

<https://www.peluuri.fi/en/peluuri/annual-report-2019>

Peluuri (2020). Local professional services for gambling problem. Retrived from:

<https://www.peluuri.fi/en/get-help/local-services-and-peer-support>

Gainsbury, S., Hing, N., & Suhonen, N. (2013). Professional Help-Seeking for Gambling Problems: Awareness, Barriers and Motivators for Treatment.

Sawrikar, P. (2017). *Working with Ethnic Minorities and Across Cultures in Western Child Protection Systems*. Routledge

Suomen Venäjänkielisten Yhdistysten Liitto FARO (2020). Retrieved from:

<https://www.faro.fi/yhdistys/meista/>

Susanna Loeb at al, (2017). Descriptive analysis in education: A guide for researchers.

Tilastokeskus. (2020). Population structure on 31 December. Retrieved from:

http://www.stat.fi/tup/suoluk/suoluk_vaesto.html#ulkomaidenkansalaiset

Tracy, S. J. (2018). Qualitative research methods, 43(1), 80-120.

<https://doi.org/10.5613/rzs.43.1.6>

Truhan, E. A. (2019). The problem of validity results when using personality inventories. *Journal of the Belarusian State University. Philosophy and Psychology*, (1), 134–140.

Venderstoep, S. W. (2009). Research methods for everyday life, Blending Qualitative and Quantitative approaches, 75-79.

Veselkova, N. (2000). Ethical research. Retrieved from:

<http://ecsocman.hse.ru/data/613/180/1217/014.VESSELKOVA.pdf>

World Health Organization. (2016). International statistical classification of diseases and related health problems, (10), 326.

APPENDIX 1. Questionnaire questions

1. Age

- 18-29
- 30-44
- 45-59
- 60+

2. Gender

- Male
- Female

3. Do you permanently living in Finland?

- Yes
- No

4. Do you personally know Russian-speaking person who has or had gambling problems in Finland?

- Yes
- No

5. Have you ever had gambling problems?

- Yes
- No
- I am not sure.

5.1 Have gambling affected your financial situation negatively or relationships with loved ones?

- Yes
- No

5.2 Have you had to lie to hide involvement in gambling?

- Yes
- No

5.3 Have you ever had to sell items in order to get money to gamble?

- Yes
- No

5.4 Have you ever had to borrow money from someone in order to gamble?

- Yes
- No

6. If you ever had gambling problems, did you seek for professional help

- Yes
- No

6.1 Why did not you seek for professional help?

- I thought my problem is not so serious
- I did not know where I can receive help
- I thought I can handle it by myself
- I could not find services in my own language
- I do not trust these services.
- Another reason:

6.2 What would motivate you to seek for professional help?

- If I knew it will not affect me in the future
 - If relatives would force me
 - If I knew where to go
 - If loved ones would support me
 - If situation would be hopeless
 - Another reason:
7. Do you know what services are available for people with gambling problems in Finnish language?
- Yes
 - No
8. Do you know what services are available for people with gambling problems in Russian language in Finland?
- Yes
 - No
9. Do you know about Mapeli project?
- Yes
 - No
10. When you have a choice between social services in Russian or Finnish language, which one you would rather go to?
- Social services provided in Russian language.
 - Social services provided in Finnish language.
 - Language is not important for me.