

Keshani, I.M. et al.: Clinical consensus statements on change techniques for gambling treatment: A Delphi study with clinicians
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SUPPLEMENTARY MATERIAL

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Supplementary Material 1

Reflexivity statement

IK is currently completing a doctorate in clinical psychology in Australia. He is British and from a mixed-Asian background (South Asian and South-East Asian). Born and educated in the UK, his education was based on a Western conceptualisation of knowledge including in the fields of Western Philosophy and Psychology. Recently, he has become more aware of the roles that membership, or perceived membership, of specific groups (e.g. colour; sex; gender; sexuality; race; nationality; social class etc.) have in how power is held and transmitted; the continued legacy of colonialism on power in society, and its impact on identity; and the challenges of attempting to subvert traditional dominant narratives. IK has had experience of working psychologically with a wide range of people from a range of ethnicities in both the UK and Australia, however not frequently in relation to individuals experiencing gambling harms. From IK's perspective, his Western clinical training and lived experience of belonging to a minority ethnic group creates a tension in ways of knowing and being which he believes inherently influences the coding, thematic output and language in themes and subthemes generated in this analysis.

Supplementary Material 2

Table S1.

Clinical consensus statements on effective change techniques for gambling treatment according to Australian and New Zealand gambling clinicians

Statement	
1	Relapse prevention is effective in bringing about clinically helpful change in individuals with problem gambling
2	Motivational enhancement is effective in bringing about clinically helpful change in individuals with problem gambling
3	Goal setting is effective in bringing about clinically helpful change in individuals with problem gambling
4	Information provision is effective in bringing about clinically helpful change in individuals with problem gambling
5	Cognitive restructuring is effective in bringing about clinically helpful change in individuals with problem gambling
6	Information gathering is effective in bringing about clinically helpful change in individuals with problem gambling
7	Financial regulation is effective in bringing about clinically helpful change in individuals with problem gambling
8	Plan social support is effective in bringing about clinically helpful change in individuals with problem gambling
9	Problem solving is effective in bringing about clinically helpful change in individuals with problem gambling
10	Decisional balance is effective in bringing about clinically helpful change in individuals with problem gambling

Note: These clinical consensus statements represent the consensus agreements of Australian and New Zealand gambling clinicians who participated in this Delphi study. Clinical consensus statements are not clinical practice guidelines and should

not be used as such. These consensus statements can, however, facilitate the selection of change techniques to be included in gambling interventions and guide future research.

Table S2.

Statements on change techniques that did not meet criteria for consensus

Statement
Mindfulness is effective in bringing about clinically helpful change in individuals with problem gambling
Stimulus control is effective in bringing about clinically helpful change in individuals with problem gambling
Self-monitoring is effective in bringing about clinically helpful change in individuals with problem gambling
Feedback on assessment is effective in bringing about clinically helpful change in individuals with problem gambling
Behavior substitution is effective in bringing about clinically helpful change in individuals with problem gambling
Exposure is effective in bringing about clinically helpful change in individuals with problem gambling
Social skills training is effective in bringing about clinically helpful change in individuals with problem gambling
Imaginal desensitisation is effective in bringing about clinically helpful change in individuals with problem gambling
Social comparison is effective in bringing about clinically helpful change in individuals with problem gambling