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2008



problem gambling awareness week

community resource guide

2008 Oregon Problem Gambling Awareness Week

Community Resource Guide

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If you need problem gambling information in Spanish please see
section 6 of this document.

Department of Human Services, Addictions & Mental Health
Division 2008, January. 2008 Oregon Problem Gambling
Awareness Week Community Resource Guide, Salem, OR.

Preface

Oregon Problem Gambling Services is pleased to announce Oregon's annual Problem Gambling Awareness Week, March 3-9, 2008.

The purpose of the week is to increase public awareness and educate community providers about problem gambling. This year three levels of effort are planned:

1. NATIONAL

The National Council on Problem Gambling (NCPG) (www.npgaw.org/) and Association of Problem Gambling Service Administrators (APGSA) are co-sponsors of the National Problem Gambling Awareness Week, which is scheduled for March 9-16, 2008 (the week after Oregon's observance). The national campaign provides general guidance and materials (via the website above), and works to bring national media attention to problem gambling issues during Awareness Week and beyond.

2. STATE

Statewide efforts are being led by Department of Human Services (DHS) Problem Gambling Services Program in collaboration with the Oregon Gambling Addiction Treatment Foundation (OGATF) and the Oregon Problem Gambling Awareness Week (OPGAW) Committee. The main efforts on the state level include:

- ⌘ The OPGAW Planning Committee has produced this updated community resource guide.
- ⌘ DHS will host a statewide prevention training and OPGAW planning meeting in February 2008 for regional providers.
- ⌘ DHS has completed a youth prevalence study which will be released during OPGAW.
- ⌘ DHS will host a statewide advanced clinical training in April 2008.

- ⌘ DHS will pursue a Governor's Proclamation declaring Problem Gambling Awareness Week in Oregon.
- ⌘ The Lottery will purchase television, print, and radio ads on problem gambling for the week leading up to OPGAW.


3. LOCAL

Local efforts, by you and your partner agencies, are vital to the success of this project. Local efforts could include collaborating with such partners as Gambler's Anonymous (GA), mental health advocacy groups, treatment providers, other prevention professionals, school staff, community service groups, and others in your area. In addition, you can help get the word out in the schools by participating in the OPGAW middle school artwork search.

Key messages

In Oregon, there are three key messages to convey during Problem Gambling Awareness Week and throughout the year. In this resource guide you will find materials that support and explain these key ideas:

1. Problem gambling is a serious public health issue for Oregon.
2. Oregon's investment in addressing problem gambling reduces harm and helps the economy.
3. Help and treatment in Oregon is free, confidential, and it works.



Join Oregon Problem Gambling Awareness Week efforts and call attention to problem gambling during the week of March 3-9.

Purpose of this guide

Oregon problem gambling prevention and treatment experts have created this guide of user-friendly information about issues

Use the tools in this guide for your awareness efforts all throughout the year!



related to problem gambling. Use it as a source of practical information on gambling and problem gambling issues, and as a tool for planning and implementing activities to support your community's health.

Whether this is your first time being involved in Awareness Week or you are building on efforts from years past, your efforts make an important contribution to year-round awareness building about problem gambling.

What's new this year in the guide?

This resource guide includes updated facts and figures on gambling, as well as new educational materials and presentations for a variety of audiences. Other additions include:

- New sections on the faith community, the military and gaming trends
- Updated survey data on youth gambling in Oregon
- Tips for clinicians on making referrals to GA
- Model school program description
- College gambling survey
- Resources for decision makers
- Gambling Evaluation And Reduction Program (GEAR) manual in Spanish

OPGAW 2008 target activities

For Oregon Problem Gambling Awareness Week 2008 we encourage local prevention and outreach coordinators to commit to completing at least the three following target activities:

1. Make contact and share problem gambling awareness information with your local DHS Children, Adults and Families offices; their clientele may be at higher risk for gambling problems and should be screened and referred for treatment if needed. A list of Service Delivery Areas (SDA's) statewide can be found at: www.oregon.gov/DHS/localoffices/sdamanagers.shtml
2. Send the youth art search information to the middle schools in your area (the same folks to whom you sent the youth video and the awareness calendars) and encourage them to participate this year so their youths' art can be featured in the 2009 calendar. You'll receive the mailing labels from our office to make it easier for you!
3. Put a link to the new online Helpline in a prominent place on your website. The URL is:

www.1877mylimit.org

Need help? Call us!

Wendy Hausotter 503-945-9703; Greta Coe 503-945-6187

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Section 1

Section 1.

Facts on gambling and problem gambling

- 🎀 Quick facts
- 🎀 History of gambling in Oregon
- 🎀 Charitable and social gaming
- 🎀 Minimum legal ages to gamble in Oregon
- 🎀 Oregon and U.S. spending on gambling
- 🎀 Harmful impacts of problem gambling
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Quick facts

Gambling has become part of the Oregon landscape, culture, and economy. Oregon has more forms of legalized gambling and offers easier access to gambling than most other states.

Consider the following statistics from 2006-2007 (Moore, 2007):

Of the 1,986 gamblers that received publicly funded treatment in Oregon in 2006-2007, the following gambling related consequences were reported:

- ⌘ Average gambling debt: \$26,099.
- ⌘ 28.9 percent had alcohol-related problems.
- ⌘ More than 21 percent of clients reported committing crimes to obtain gambling money.
- ⌘ More than 21 percent had suicidal thoughts and more than 7 percent had attempted suicide.
- ⌘ 15.8 percent more gamblers were treated in 2006-2007 than were treated in the previous year.

Financial impacts

- ⌘ According to Earl Grinols, 2004, the average social-economic cost of problem gamblers was approximately \$3,000 each and \$11,000 for each pathological gambler – or an estimated social-economic cost in excess of \$449 million for Oregonians.
- ⌘ Those entering in Oregon treatment had an estimated combined debt related to gambling of more than \$37 million.

- ⌘ Nearly 62 percent of the problem gamblers who enrolled in treatment reported their game of preference was video poker followed by slot machines at 15 percent.
- ⌘ The statewide Problem Gambling Help Line received 2,435 calls for help or information and 91 percent resulted in referrals for service.
- ⌘ Nearly 50.3 percent of problem gambling clients worked full-time; the average annual household income was \$36,040.
- ⌘ Problem gamblers reported that their primary gambling location was lottery retailers (72.8 percent) followed by Indian Gaming Centers and casinos (14.8 percent).
- ⌘ Treatment programs that are within 50 miles of a casino treat more than twice the number of casino problem gamblers than other programs.

Oregon prevalence estimates

More than 74,000 Oregon adults (2.7 percent of adults) are believed to meet the criteria for being current problem or pathological gamblers (Moore, 2006).

One in every 25 Oregon teens (13-17 year-olds) experienced gambling-related problems; that's more than 10,000 Oregon teens (Carlson & Moore, 1998).

One in 10 teens is an "at-risk" gambler (he or she may be developing a gambling problem).

About 6,000 Oregonians over 62 years old (1.2 percent) are believed to meet the criteria for problem or pathological gambling (Moore, 2001).

History highlights: gambling in Oregon

Oregon is one of the top states in gambling revenue, and among the leaders in types of legal gambling available.

Recent history of legal gambling in Oregon	
1984	Oregon voters authorize a state-run Lottery. The Lottery begins with scratch tickets in 1985.
1989	Oregon becomes the only state that offers state-operated sports betting with the Sports Action lottery.
1991	Oregon becomes the first state lottery to offer Keno games every five minutes.
1992	Video Lottery is legalized. As of October 2004, 10,238 Lottery-operated video poker machines in more than 2,000 bars and taverns across the state.
1994	First Native American casino in Oregon opens (nine open as of 2005). Tribal casinos made possible by passage of the federal Indian Gaming Regulatory Act of 1988.
2003	Monday Night Football scratch-it tickets begin. Lottery Commission approves Three-Way Action Poker. Expansion of video lottery from five to six terminals per retailer. Introduction of 10 video lottery terminals in pari-mutuel establishments.
2004	Keno offered every four minutes. Lottery Click&Play computerized game implemented.
2005	Lottery implements video slot machines.
2006	Lottery exceeds \$1 billion in biennial revenues.
2007	Lottery offers gadget for Windows® Vista™ which relays the winning numbers, winner stories, Lottery alerts, jackpot alerts, and the Oregon <u>Amber Alert</u> .

Charitable and social gaming

Charitable gaming

“Charitable gaming regulated by the Oregon Department of Justice consists of bingo, raffle and Monte Carlo events in which the proceeds are used to fund the activities of charitable organizations. It does not include tribal casinos, which are federally regulated with local oversight provided by the Oregon State Police’s Gaming Enforcement Division.” (*Oregon Department of Justice*)

Social gaming (*see also the information for policy and decision makers section of this manual*)

“A ‘social game’ is one in which all the money wagered is returned to the players in the form of prizes. The house cannot take a ‘cut’ or percentage of the money or otherwise profit in any manner from the operation of a game. Social games in businesses, private clubs, or places of public accommodation can be conducted only if there is an enabling ordinance (usually a social gaming ordinance) by the local jurisdiction. Social games that are conducted in private residences are permissible.” (*Oregon Department of Justice*).

Minimum legal ages to gamble in Oregon

18:

- ⌘ Traditional Lottery games
- ⌘ Charitable gaming
- ⌘ Pari-mutuel betting (e.g., race track)

21:

- ⌘ Video lottery (includes video poker, video slots)
- ⌘ Tribal casinos

No minimum age:

Social gaming. Social gaming is allowed by city or county ordinance, and no minimum age is specified in state law. A 2006 review of Oregon social gaming ordinances found that only four jurisdictions had a minimum age.



Oregon spending on gambling

- ⌘ The Oregon Lottery had net sales of \$1.2 billion in fiscal year 2007 (Oregon Lottery, 2007).
- ⌘ Oregonians spent \$1.4 billion in 2005 on all forms of gambling, equaling \$395.95 per adult; this represents a 12.56 percent increase over 2004 (ECONorthwest, 2007).
- ⌘ Oregon's casinos garnered about 35 percent of all gambling dollars spent by Oregonians in 2005 (ECONorthwest, 2007).

Those entering in Oregon treatment had combined debt related to gambling of over \$37 million (Moore, 2007)



U.S. spending on gambling

- ⌘ During fiscal year 2006, U.S. lottery proceeds totaled \$57.4 billion (NASPL, 2006)
- ⌘ In 2002 US Consumers spent \$68 billion on legal gaming; that's seven times more than they spent on movie tickets (2002 Gross Annual Wager Report, 2002)

Harmful impacts of problem gambling

Most people can gamble without negative consequences. A small percentage who gamble suffer enormous social, economic and psychological implications. Individuals, families and communities all suffer from problem gambling and while it would be impossible to describe all of the repercussions associated with problem gambling, the following issues help to illustrate why problem gambling can be so destructive.

Snapshot: effects in Oregon

Problem gamblers experienced a complex array of mental health, social, financial, and legal issues – 21 percent indicated suicide thoughts, 29 percent alcohol-related problems, and 12 percent drug-related problems. The average gambling related debt of those in treatment was \$26,099 with 99 clients reporting gambling debts well over \$100,000. Fifty-seven percent reported they either jeopardized or lost a significant relationship or job because of gambling. More than 24percent committed illegal acts to obtain gambling money (Moore, 2007).

Effects of adult problem gambling on children

- ⌘ "Children of compulsive gamblers are often prone to suffer abuse, as well as neglect, as a result of parental problem or pathological gambling." (National Opinion Research Center, 1999).

- ⌘ Research consistently shows higher rates of pathological gambling in teens whose parents gamble excessively (Gupta & Derevensky, 1997; Jacobs, 2000; Wallisch & Liu, 1996).
- ⌘ Children of problem gamblers have been shown to have higher levels of use for tobacco, alcohol, drug use, and overeating than do their classroom peers (Gupta & Derevensky, 1997).
- ⌘ The National Research Council (NRC, 1999) reported on studies indicating that 10-17 percent of children of compulsive gamblers had been abused.

Domestic violence

- ⌘ The National Research Council (1999) reported on studies indicating that 25-50 percent of spouses of pathological gamblers have been abused.
- ⌘ Studies of 10 casino communities revealed that domestic violence rates increased with the opening of casinos (National Opinion Research Center, 1999).

Crime

- ⌘ About one in four (24 percent) clients enrolled in Oregon's gambling treatment system reported committing crimes to finance their gambling (Moore, 2007).
- ⌘ "As access to money becomes more limited, gamblers often resort to crime in order to pay debts, appease bookies, maintain appearances, and garner more money to gamble" (NRC, 1999).
- ⌘ Gamblers Anonymous (GA) studies report that approximately half of the members had stolen to gamble and more

Community Costs of Gambling Problems

Recent national estimates place the social-economic cost of approximately \$3,000 for each problem gambler and \$11,000 for each pathological gambler (Grinols, 2004). That's an estimated social-economic cost in excess of \$449 million for Oregonians.



than one-third had been arrested (Thompson, Gazel, & Rickman, 1996).

- ⌘ The majority of gambling-related crimes are non-violent; embezzlement, check forgery, credit card theft, fenced stolen goods, tax evasion, insurance fraud, employee theft and fraud are common gambling-related crimes.

Suicide/depression

- ⌘ Of clients enrolled in Oregon's gambling treatment system 21 percent had suicidal thoughts and about 7 percent had made suicide attempts (Moore , 2007).
- ⌘ A major depressive disorder is likely to occur in 76 percent of pathological gamblers (Unwin, Davis, & Leeuw, 2000).

Oregon Lottery® sales data

OREGON LOTTERY® SALES (06/25/06 - 06/30/07)

COUNTY	Video Lottery SM (% of total)	Video Lottery SM per capita (18 yrs and older)*	TOTAL SALES (% of total)	TOTAL SALES per capita (18 yrs and older)
Baker	.38	\$254.38	.38	\$367.22
Benton	.55	\$70.67	.69	\$124.93
Clackamas	10.30	\$321.83	9.86	\$436.13
Clatsop	1.56	\$467.86**	1.53	\$649.90**
Columbia	1.64	\$405.72**	1.75	\$612.07**
Coos	.73	\$126.94	1.02	\$252.05
Crook	.45	\$213.08	.47	\$318.09
Curry	.30	\$148.81	.39	\$271.41
Deschutes	3.73	\$273.46	3.66	\$380.01
Douglas	2.28	\$244.44	2.44	\$369.14
Gilliam	.02	\$173.56	.02	\$222.99
Grant	.14	\$212.88	.15	\$329.19
Harney	.03	\$46.73	.05	\$119.41
Hood River	.55	\$306.34	.54	\$430.85
Jackson	4.71	\$265.91	4.74	\$379.30
Jefferson	.41	\$232.85	.45	\$362.54
Josephine	1.98	\$269.14	2.09	\$402.75
Klamath	1.35	\$238.47	1.50	\$374.07
Lake	.12	\$183.16	.14	\$240.15
Lane	7.81	\$252.58	7.97	\$364.99
Lincoln	1.22	\$295.98	1.39	\$475.47
Linn	3.09	\$329.70	3.28	\$495.31
Malheur	.82	\$303.43	.85	\$441.19
Marion	7.37	\$281.76	7.53	\$409.57
Morrow	.12	\$127.96	.12	\$183.55
Multnomah	30.48	\$483.41**	28.95	\$650.02**
Polk	.69	\$117.17	.85	\$203.38
Sherman	.12	\$727.44**	.12	\$1,075.85**
Tillamook	.78	\$331.28	.83	\$500.99
Umatilla	1.28	\$207.78	1.42	\$328.20
Union	.41	\$188.32	.45	\$288.50
Wallowa	.06	\$103.05	.08	\$178.31
Wasco	.65	\$312.12	.70	\$475.22
Washington	12.22	\$289.21	11.81	\$395.95

continued next page

COUNTY	Video Lottery SM (% of total)	Video Lottery SM per capita (18 yrs and older)*	TOTAL SALES (% of total)	TOTAL SALES per capita (18 yrs and older)
Wheeler	0	0	.01	\$103.61
Yamhill	1.46	\$183.38	1.57	\$278.93

* Video LotterySM players must be 21 years of age or older. Oregon population figures by age group break at 18-19 years and 20-24 years. Oregonians 18-20 years of age, who are included in this per capita calculation, are not eligible to play Video LotterySM games.

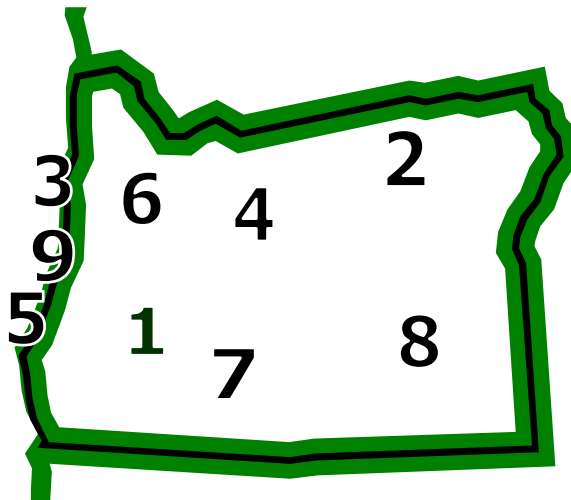
** Multnomah, Clatsop, Columbia and Sherman Counties are located near major population areas in Washington with easy access to Oregon Lottery[®] retailers. Per capita sales figures in these counties reflect "cross-over" sales.

Oregon tribal casinos data

Oregon Casinos by Date Opened (Source: ECONorthwest, 2006)

Casino	Date Opened	City/County	Tribe	VLTs/ Slots	Table Games	Bingo seats	Poker tables
1. Seven Feathers	Apr 1994	Canyonville/ Douglas	Cow Creek	1,100	22	400	7
2. Wildhorse	Nov 1994	Pendleton/ Umatilla	Umatilla	649	12	500	4
3. Chinook Winds	May 1995	Lincoln City/ Lincoln	Siletz	1,250	27	1,200	5
4. Kah-Nee-Ta	May 1995	Kah-Nee-Ta/ Wasco, Jeff.	Warm Springs	317	6	No	2
5. The Mill	May 1995	North Bend/ Coos	Coquille	540	8	800	No
6. Spirit Mountain	Oct 1995	Grande Ronde/ Polk, Yamhill	Grande Ronde	1,500	41	800	15
7. Kla-Mo-Ya	Jun 1997	Chiloquin/ Klamath	Klamath	323	6	No	No
8. Old Camp	Sep 1998	Burns/ Harney	Burns Paiute	100	3	60	3
9. Three Rivers	Jun 2004	Florence/ Lane	Coos, L. Umpqua, Siuslaw	274	6	No	No
Total				6053	131	3760	36

Every Oregon tribe operates a tribal casino.



Problem gambling on the web



Check the individual sections in this manual for more topic-specific web links and resources.

Oregon links

www.oregon.gov/DHS/addiction/gambling.shtml

State of Oregon Department of Human Services Addiction and Mental Health Division; information about problem gambling services in Oregon. Includes an online version of this toolkit, handout masters, and sample OPGAW presentations.

www.1877mylimit.org

Oregon Problem Gambling Helpline web site offers live chat, Instant Messaging, email or phone contact to certified gambling counselors 24 hours a day, seven days a week.

www.oregonlotteryhelp.org

The Oregon Lottery Help website offers information and tools for people with gambling problems, as well as loved ones.

www.gamblingaddiction.org

The Oregon Gambling Addiction Treatment Foundation; provides a variety of research reports on gambling in Oregon.

www.lanecounty.org/prevention/gambling/

Lane County Problem Gambling Prevention web site offers information on youth gambling, college gambling, resources and the latest news and research.

About/for youth

www.probablynot.net

Resources to increase awareness among youth, parents, and educators about youth gambling.

www.youthbet.net

For youth, this site from the University of Toronto is highly interactive and focuses on youth gambling and problem gambling.

www.youthgambling.com

International Center for Youth Gambling Problems and High-Risk Behaviors.

www.camh.net/egambling/issue14/jgi_14_messerlian.html

"Youth gambling: A public health perspective," by Carmen Messerlian and Jeffrey Derevensky. From the September 15, 2005 edition of *The Electronic Journal of Gambling Issues*, this paper focuses on the importance of addressing youth gambling prevention from a public health strategy.

www.ctprevention.org/necasa/gambling.pdf

"Talk to kids about poker" brochure from the Connecticut DMHAS Problem Gambling Services and Northeast Communities against Substance Abuse.

Help and treatment

www.1877mylimit.org/directory.asp

Oregon gambling treatment list of state-funded treatment providers.

www.oregonlotteryhelp.org/quiz.html

Treatment information; self-Assessment Quiz from the Oregon Lottery Help website.

www.gamblersanonymous.org

Official Gamblers Anonymous website.

www.gam-anon.org/

Gam-Anon. Support for spouse, family, or close friends of the problem gambler.

www.ncpgambling.org

National Council on Problem Gambling, Inc. website. Provides information on state affiliates, a counselor search, and other resources.

Problem gambling research

www.gamblingaddiction.org/

Oregon Gambling Addiction Treatment Foundation. A research and education resource for problem gambling prevention and treatment professionals.

www.gamblingandthelaw.com

Minimum legal ages to gamble throughout U.S. states and the world, information about and status of Internet gambling.

gamingresearch.blogspot.com

Alberta Gaming Research Institute Library Weblog. Provides a selection of Internet gambling research resources updated regularly.

www.geminiresearch.com/

The "Reports and Links" section offers a number of international research studies and reports available online.

govinfo.library.unt.edu/ngisc/reports/fullrpt.html

National Gaming Impact Study Commission Final Report, 1999.

www.responsiblegambling.org

The Responsible Gambling Council (Ontario) provides a collection of more than 2,500 articles, reports and documents on a "wide

range of gambling-related issues.” Click the “e-Library” link to reach the gambling prevention and awareness resource e-library.

General prevention/treatment resources

casat.unr.edu/bestpractices

Western Center for the Application of Prevention Technology (CAPT) provides information about building a successful prevention program, from needs assessment to program evaluation.

www.oregon.gov/DHS/ph/chs/youthsurvey/index.shtml

Oregon Healthy Teens (OHT) data. OHT is Oregon's effort to monitor the health and well-being of adolescents. An anonymous and voluntary research-based survey, OHT is conducted among 8th and 11th graders statewide.

www.social-marketing.org

Social Marketing Institute. “Social marketing” link offers educational papers and conference information related to social marketing issues.

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2 section

Section 2.

Problem gambling and vulnerable populations

- ⌘ Youth/teens
- ⌘ College students
- ⌘ Student athletes
- ⌘ Persons with addictions or mental health problems
- ⌘ Older adults
- ⌘ Ethnic Americans



Youth/teens and problem gambling

At the time of this manual's publication, results from a new statewide prevalence survey on Oregon youth and gambling were in the process of being analyzed. Those data, when available, will be included in this manual and posted on our website at egov.oregon.gov/DHS/addiction/gambling.shtml.

A variety of fact sheets and handouts on youth gambling are included in the following sections:

- ✂ Section 3: Gaming trends
- ✂ Section 4: Community education materials
- ✂ Section 8: Schools

College students

Gambling is one of the most overlooked issues on campus. For most college students, gambling is a social or recreational activity. It is fun and entertaining. However, it is not without risk. A certain percentage of college gamblers will go on to develop a gambling problem, which can be a major threat to academic success and financial well-being.

Quick facts:

- An estimated 5.6 percent of college students are problem gamblers, almost double the rate of the adult population (2.7 percent).¹
- A recent national survey of young people aged 14 to 22, found a 20 percent increase in monthly rates of card gambling. Cards, specifically poker, are the new game of choice replacing sports betting.⁴
- Those who play cards are also more likely than other gamblers to gamble on the Internet.⁴
- The average college student receives about 25 credit card solicitations per semester. (National Public Radio)

- According to the National Council on Problem Gambling, about 4.5 million of the nation's 15.3 million college students (29 percent) will gamble on sports this year. (National Council on Problem Gambling)
- A 2005 Harvard School of Public Health Study of colleges found that all the colleges surveyed had alcohol policies, yet only 22 percent had a gambling policy.

Gambling among athletes

- 72 percent of student athletes have gambled at least once since entering college; 45 percent of male athletes gamble on sports. ²
- One in 20 male student athletes admitted providing inside information for gambling purposes, betting on a game in which they participated, or accepting money for performing poorly in a game. ²
- Student athletes who gambled on sports with bookies gambled an average of \$225 per month. ²
- Twenty-eight percent of athletes have gambled on athletic events. ³

NCAA gambling rules for student athletes

- ⌘ "You may not place any bet of any sort on any college or professional sports event."
- ⌘ "You may not give information to anyone who does place bets on college or professional sports."



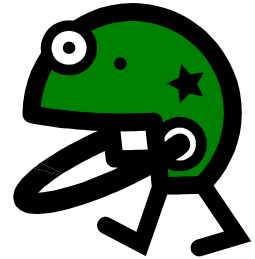
Athletes vs. non-athletes

Athletes and non-athletes gamble at about the same frequency (81percent).

6.2 percent of athletes are problem gamblers compared with 3.3 percent of non-athletes. ³

Signs of a problem sports gambler

- ⌘ Excessive use of Internet or phone bills to 900-number services
- ⌘ Obsession with point spreads or “fantasy” scores
- ⌘ Unusual interest in obscure games or shifting of allegiances of teams
- ⌘ Association with other sports bettors
- ⌘ Frequently borrowing money from friends or family
- ⌘ Defensive when questioned about gambling behavior
- ⌘ Debts, unpaid bills, financial troubles
- ⌘ After losing, desiring to bet again to win back losses



Getting wired: internet gambling

The Internet is one of the reasons for an increase in problem gambling among students in recent years. Internet access is readily available on campuses, and the convenience of online gambling can be appealing.

- More than 1,700 Internet gambling sites on which to place bets.
- Internet gambling is the fastest growing segment of the gambling industry.
- Very little oversight.

Problem or not? Telling the difference

No-Problem Gambling

Occasional gambler
gambling

Sticks to limits of money
to play with

Hopes to win but expects
lose

Can take it or leave it

Problem Gambling

Frequent, or spends more time

Plays with money that is needed or
borrowed

Expects to win; keeps playing to
win back losses

Life revolves around gambling

Potential consequences of college problem gambling

- Academic and Athletic Failure
- Crime
- Relationship problems
- Alcohol and substance abuse
- Debt
- Depression and Suicide

Treatment is available, free and confidential

- Problem Gambling Help line Number: 1-877-MYLIMIT
- Help line via chat/email/IM: 1877mylimit.org

For more on college problem gambling see Section 4 Community Education Materials

Sources:

¹Shaffer, H. J., and Hall, M. N. (2000). *Updating and refining meta-analytic prevalence estimates of disordered gambling behavior in the United States and Canada*. Boston: Division of Addictions, Harvard Medical School.

² Cross, M. E., Del Carmen Lorenzo, M., and Fuentes, M.J. (1999) *The Extent and Nature of Gambling Among College student Athletes*. Ann Arbor, MI: University of Michigan Department of Athletics.

³Rockey, 2002; Southeastern Conference (SEC) study.

⁴University of Pennsylvania, The Annenberg Public Policy Center. (2005, September). National Annenberg Risk Survey of Youth. Retrieved February 24, 2006 from the http://www.annenbergpublicpolicycenter.org/07_adolescent_risk/GamblingRelease20050928.pdf.

⁵Shaffer, h., Donato A., LaBrie., R., Kidman, R., and LaPlante, D. (2005). The epidemiology of college alcohol and gambling policies. *Harm Reduction Journal*, 2.

Oregon college gambling survey

Here is a summary of findings from a 2007 survey of University of Oregon students, the first such survey of college gambling in the state. A complete report can be found at www.lanecounty.org/prevention/gambling/college-survey-summary.htm



Summary of results *Lane County* *2007* **College Gambling Survey**

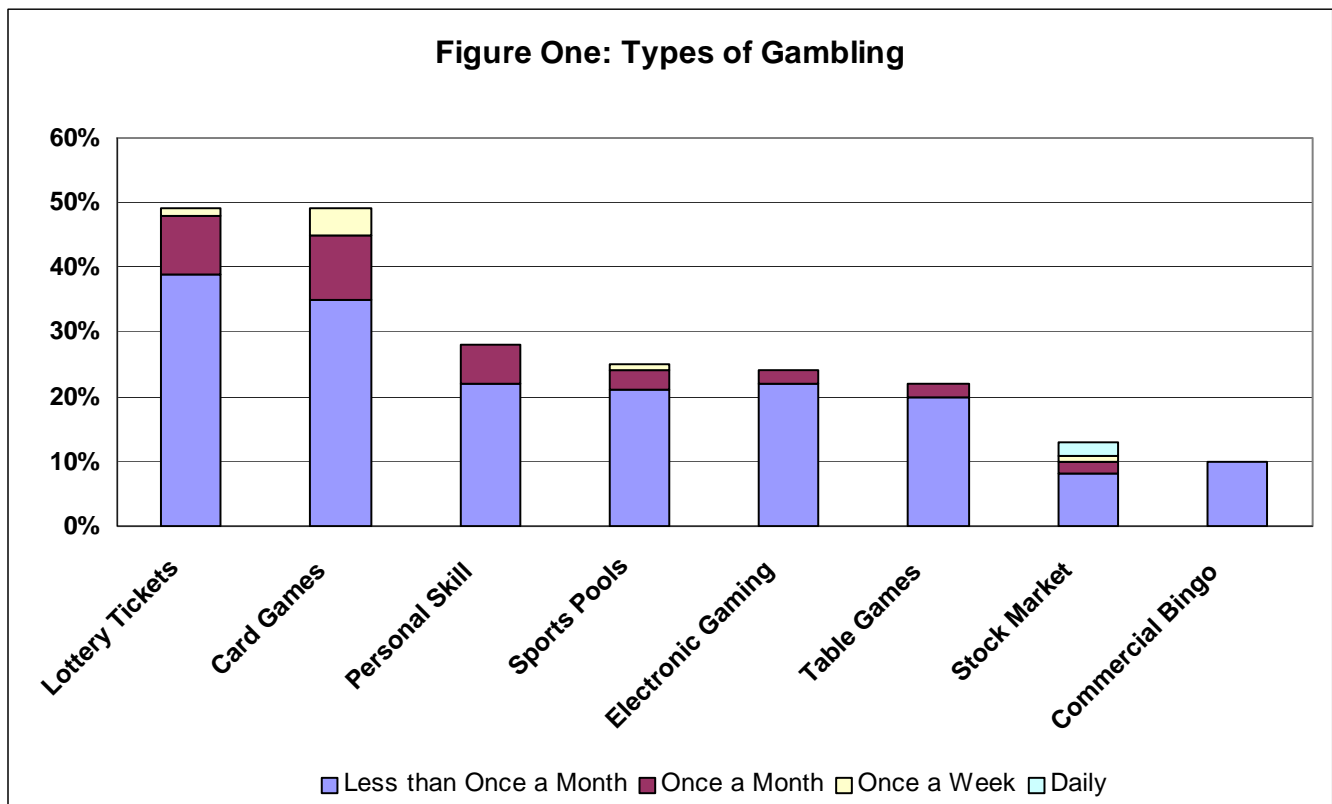
Lane County Health and Human Services commissioned a survey of University of Oregon students and it was conducted by Northwest Survey & Data Services (NSDS). Survey topics included gambling behavior, beliefs about gambling, gambling amounts and debts, reasons for gambling, and knowledge of gambling information and resources. The survey was taken by more than 400 students.

Types of gambling

Most students surveyed hadn't participated in any of the 13 types of gambling identified in the survey during the previous year. Nineteen percent had never gambled and 25 percent hadn't gambled in more than a year. More than 10 percent of the students said they had participated in eight types of gambling in the past year. Two of the eight types of gambling stood out – 49 percent of the students said they bought lottery tickets and 49 percent said they played card or board games for money. Twenty-eight percent said they bet on games of personal skill, such as pool, during the previous year.

Fig. 1 indicates that most student gambling was done less than once a month, or in some cases monthly. It was rare for a student to gamble on a weekly or daily basis. The only

“gambling” activity a fraction of students participated in daily was the stock or commodities markets, where 2.3 percent said they were active day traders, 80 percent of whom were men. Some students objected to categorizing stock market trading as “gambling.”



Student participation in gambling and the amount of gambling varied significantly between men and women. While 56 percent of students gambled in the last year, 72 percent of those were men and 47 percent were women. Similarly, 64 percent of men gamblers participated in three or more types of gambling, while 35 percent of women gamblers followed the same practice.

Fifty-one percent of student gamblers had never placed a bet for more than \$10 on any one day. However, 38 percent bet from \$10-\$100 on a single day, 10 percent bet from \$100-\$1,000, and one percent wagered more than \$1,000 on a single day. Women gamblers were more likely than male gamblers to have placed small wagers. Sixty-three percent of women never bet more than

\$10 on a single day, while 35 percent of men limited themselves to these small wagers. Forty-eight percent of the men bet \$10-\$100 on a single day, and two-thirds of all bets above \$100 were placed by men, even though the survey gathered information from 1.5 times as many women as men.

Attitudes toward gambling

Fourteen percent of students were opposed to gambling for moral or religious reasons. Most students (73 percent) disagreed that gambling is more skill than luck; 27 percent of students thought gambling was about skill.

Sixty-nine percent of students thought problems with gambling could be changed through willpower. Eighty-nine percent agreed that gambling is an addiction similar to drug or alcohol addiction. Fifty-eight percent thought treatment for problem gambling was usually successful.

Problem gambling behavior and debts

Twenty-four percent of student gamblers experienced at least one of the problems identified as a possible result of gambling. Male students were more likely to hold the attitudes or report behaviors associated with problem gambling than were female gamblers.

The most common problem, experienced by 13 percent of student gamblers, was the attempt to recoup gambling losses by returning to gamble another day. This behavior is a form of the gamblers fallacy (the idea that current losses will be balanced by future gains, or that the past and future are linked) and usually leads to gambling losses beyond what a person originally was willing to accept.

Thirteen percent of student gamblers, also spent time thinking about past gambling, planning for future gambling, or trying to think of ways to find money to gamble.

The third gambling-related problem was lying to family or friends to hide gambling behavior. This was less common than the first two problems, and was experienced by six percent of student gamblers.

The final problem behavior was the need to gamble with ever-increasing sums of money to achieve the same level of excitement. Four percent said this happened to them.

Students were also asked about another set of gambling behavior problems: borrowing money for gambling debts. Seven percent of student gamblers said they borrowed money for gambling debts, most commonly from relatives, followed by significant others, and finally, household money. Eleven percent of male gamblers borrowed money, compared to five percent of women.

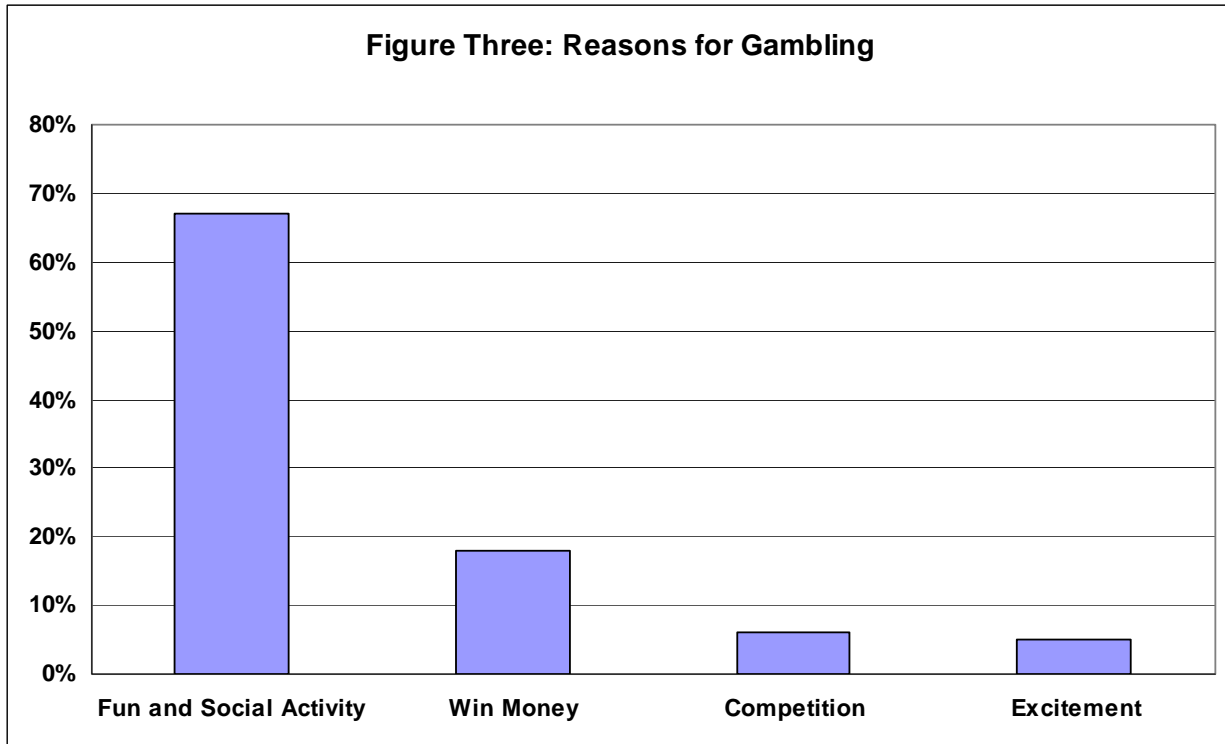
Students were also asked about using financial aid money to gamble. Sixty-five percent of the students surveyed received financial aid and two percent of those said they used part of their financial aid (typically less than 10 percent) for gambling during the past year.

Students were asked about athletics and sports betting. Six percent claimed to know of a coach or teammate who had placed a sports bet, less than one percent of respondents had been involved in fixing sports games and dealing with student sports bookies, or known of teammates who had been involved in sports fixing activities.

When asked if they had ever had a problem with gambling, 97 percent of respondents said no. Of the three percent who said they had a gambling problem, a majority said the problem was in the past. Although most students said they didn't have a gambling-related problem, 22 percent said they knew someone with a gambling problem, most often a parent or relative (38 percent). Respondents estimated that about 26 percent of the people they knew with gambling problems were students.

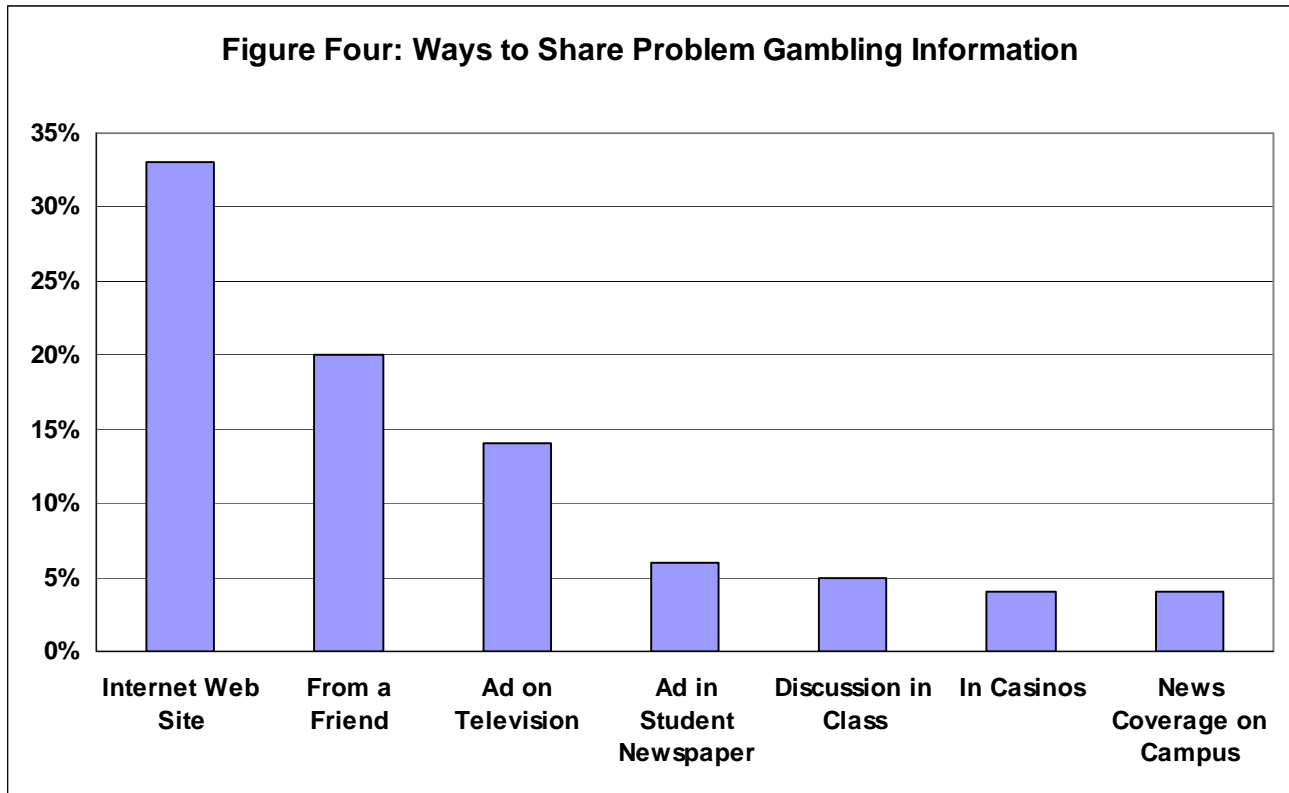
Reasons for gambling

Students who had gambled were asked to indicate their three main reasons for gambling. (See Fig. 3 below)



Although both men and women said the main reason for gambling was for fun and social activity, there were major differences between men and women. Seventy-four percent of women picked fun/social as their primary reason for gambling, followed by the desire to win money at 17 percent. Fun and social activity was the primary reason for 58 percent of the male gamblers, followed by 20 percent who gambled to win money and 12 percent who gambled for the competition factor. Only 1.5 percent of the women picked competition as a reason for gambling. Men were eight times as likely as women to gamble because it could be seen as competition.

Gambling information and resources



Students were asked to select from seven possible resources they would turn to if they or a friend had a gambling problem (Fig. 4). The most common resource was a parent or guardian (39 percent), with 42 percent of women and 35 percent of men making this choice. Next was the internet (26 percent) with Gamblers Anonymous third at 13 percent.

Students were split 49 percent to 51 percent on whether they knew where to go for information about problem gambling treatment. Thirty-two percent said they'd seen one or the other of two common gambling hotline numbers – about two-thirds thought they saw the number on television.

Student characteristics

When asked about drugs and alcohol, a majority of University of Oregon students said they used alcohol only. Eighty-five percent

of students use alcohol, 39 percent use it at least once a week and two percent using alcohol daily. Students who drank alcohol at least once a week were slightly more likely to engage in more forms of gambling, but were no more likely to have gambling problem behaviors or problems with gambling debts.

Cigarettes and illegal drugs had almost identical use patterns, with approximately 75 percent of students never using them, while five percent use them at least once a week, and another four percent use them daily. In addition, nine percent of students use prescription drugs that are not prescribed to them. As was mentioned earlier, only alcohol use has any relationship to gambling behavior.

When asked about credit cards, it was revealed that two-thirds of students (66 percent) have credit cards. Most students (55 percent) have one or two cards, while 11 percent have three or more. Additionally, almost all students receive credit card solicitations (83 percent), with 35 percent receiving solicitations at least once a week.

Conclusions

Gambling is a common behavior for University of Oregon students. In the past year, more than half of the students surveyed had gambled, most commonly the lottery, board games, or skill games.

Although gambling is fairly common, it is rare for students to gamble more than once a month. It is also rare for students to bet large sums of money, with most bets less than \$10. Bets higher than \$100 are rare.

Some students express attitudes and have engaged in behaviors that would indicate gambling problems. Approximately a quarter of student gamblers have one gambling problem or another, although it is rare to have multiple gambling problems.

Students gamble primarily for fun and excitement, with monetary reward as a minor goal.

Students are generally unaware of community resources available for help with problem gambling. However, they believe that gambling can be a type of addiction which can be treated. If they were looking for resources on gambling they would be most likely to look first at the internet.

Other than gender, no other demographic variable, including age or year in school, had any significant effect on gambling behavior. Alcohol had a minor negative effect on gambling behavior.

Lane County noted that one possible limitation of the survey was that the sample size was over-represented by females, who responded sooner to the email invitations than males before the survey was closed. Sixty-one percent of the sample was female, and 39 percent male. Others conducting similar surveys of college students in the future may obtain more representative results with a more equal sampling of males and females.

Oregon college problem gambling awareness program



Need

- An estimated 5.6 percent of college students are problem gamblers, almost double the adult population (2.7 percent).
- The average college student receives about 25 credit card solicitations per semester.
- Internet gambling sites are increasingly marketing directly to college students.
- Twenty-nine percent of college students gamble on sports each year
- Most colleges have policies and programs regarding alcohol, drugs and other issues related to student health, yet few have anything on problem gambling.

Overview

Interested Oregon colleges can select from the menu of options below to help them assess and address the problem of campus gambling. DHS Problem Gambling Services will provide materials, training and technical assistance at no charge to the campus, and may provide funding for a student liaison to help implement the program.

Eligibility

All four-year public and private colleges and community colleges are eligible to participate.

Program options

Campuses select from the following options, with DHS providing funding, training, technical assistance for implementation and evaluation:

- **Online survey:** A “turn key” electronic student survey provides a great deal of useful data, including assessing the extent of gambling on campus, the degree of problem gambling that exists, and students’ ideas on how best to address the issue on their campus.
- **Campus Awareness Campaign:** At the most basic level, a variety of problem gambling outreach materials are available for campuses to use in awareness efforts, including articles for the campus newspaper, table tents, posters, flyers, brochures, banners, and display materials for campus health fairs. Materials cover a wide range of topics, including: the signs of problem gambling, how to gamble responsibly, how to help a friend with a gambling problem, and where to find free treatment. Campuses wishing to go beyond the basics are given materials and/or technical assistance to create presentations to campus groups, PSAs for campus radio stations, program ideas and scripts for campus television productions, information for campus websites.
- **Staff and Student Training:** Specific groups on campus can be provided with training geared to their needs. Target groups could include counseling staff, health center staff, peer educators, resident assistants, coaches, instructors, financial aid counselors, to name a few. Depending upon their roles, training could encompass topics such as signs of problem gambling, basic assessment and referral, principles of responsible gambling, intervening with problem gamblers, the etiology and treatment trajectory of problem gambling, etc.
- **Curriculum Options:** Academic departments interested in including problem gambling issues in their syllabi, as a topic for lectures or student assignments or projects, will be provided

with sample materials which can be modified to suit their needs.

- Policy Development: Sample campus policies on issues such as limiting internet access, providing guidelines for on campus gambling activities, etc, are also available. DHS staff can consult on and help create language for new policies.
- Campus-specific adaptations: New or adapted products or processes can be developed as needed to fit specific needs and circumstances.

The overall goal is to provide campuses with information, tools and strategies they can use on an ongoing basis to help prevent and address problem gambling, in much the same way they typically attend to problem drinking or other behaviors that affect students negatively.

DHS program contact:

Wendy Hausotter, Problem Gambling Prevention and Public Health Coordinator
503-945-9703 wendy.hausotter@state.or.us

Gambling and persons with a history of alcohol issues

- ⌘ Problem drinkers were shown in one study to be 23 times more likely to have a gambling problem than persons without a drinking problem (Welte et al., 2001)
- ⌘ 29% of gamblers receiving treatment in Oregon in 06-07 had alcohol-related problems as well (Moore, 2007)
- ⌘ Pathological or problem gamblers had seven times the rate of alcohol dependence than non-gamblers and low-risk gamblers (NORC, 1999)
- ⌘ A 1999 study (Pasternak & Fleming, 1999) revealed that almost one in every three persons with a gambling problem also abused alcohol (compared to about one in ten without gambling problems), and about twice as many problem gamblers used tobacco
- ⌘ In a study of over 21,000 high-school students, (Proimos, DuRant, Pierce, & Goodman, 1998) regular cocaine use and anabolic steroids were significantly associated with a report of problems connected to gambling

Gambling and persons with a history of mental health issues

- ⌘ Individuals with concurrent psychiatric problems display much higher rates of disordered gambling than either adolescents or adults sampled from the general population (Shaffer et al., 1997)
- ⌘ There are strong associations between pathological gambling and depression (Becona, Del Carmen Lorenzo, & Fuentes, 1996)
- ⌘ Twenty-one percent of gamblers treated in Oregon in 06-07 reported having had suicidal thoughts and up to 1.7 percent had made a suicide attempt (Oregon DHS, 2007)

- ⌘ High rates of personality disorders (e.g., obsessive-compulsive, avoidant, schizotypal and paranoid) are noted in the research (NORC, 1999)

Problem gambling and older adults

- ⌘ The rate of problem gambling among Oregonian adults ages 65 and over is 1.2 percent, lower than any other age group in Oregon (Moore, 2001b); however, older adults who play at gambling facilities are six times more likely to be problem gamblers than other older adults randomly chosen from the same community, and 3.7 times as likely to be probable pathological gamblers (McNeilly & Burke, 2000)
- ⌘ Older adults are considered at increased risk due to factors such as loneliness, isolation, physical or mental illness, that are often more common to that population than among other age groups; additionally, in one study of older adults, the most likely reported motivations to gamble were: relaxation, boredom, passing time, and getting away for the day (McNeilly & Burke, 2000)
- ⌘ Compared to those older adults surveyed from senior centers, older adults surveyed from bingo events had higher South Oaks Gambling Screen (SOGS) scores and greater gambling frequency and expenditures (Ladd, Molina, Kerins, & Petry, 2003)
- ⌘ Among adults over 65 years of age, gambling is the most frequently identified social activity (McNeilly & Burke, 2001)
- ⌘ From 1975 to 1997, the number of American adults 65 years of age or older that had ever gambled increased by 45 percent (NORC, 1999)

Did You Know...?

Among adults over 65 years of age, gambling is the most frequently identified social activity.



- ⌘ From 1994 to 1998, the percentage of women 65 years of age or older who had ever gambled rose by 20 percent (NORC, 1999)
- ⌘ Some older adults may have cognitive impairment that interferes with their ability to make sound decisions
- ⌘ Many older adults may not understand addiction, making them less likely to identify a gambling problem; additionally, older adults appear less willing to seek assistance for a gambling problem than younger adults
- ⌘ There is also concern that gambling-related problems may be more difficult to identify because of increased isolation from co-workers, friends and family

Problem gambling among ethnic minorities

- ⌘ Minority populations most likely have much higher rates of pathological gambling than Caucasians (Moore, Jadlos, & Carlson, 2000, as cited in Moore, 2001)
- ⌘ Minorities spend about two and a half times more on gambling in a typical month than Caucasians (Volberg, 2001)
- ⌘ Ethnic minority groups (except Asians) are over-represented among individuals classified as problem gamblers (Volberg, 2001)

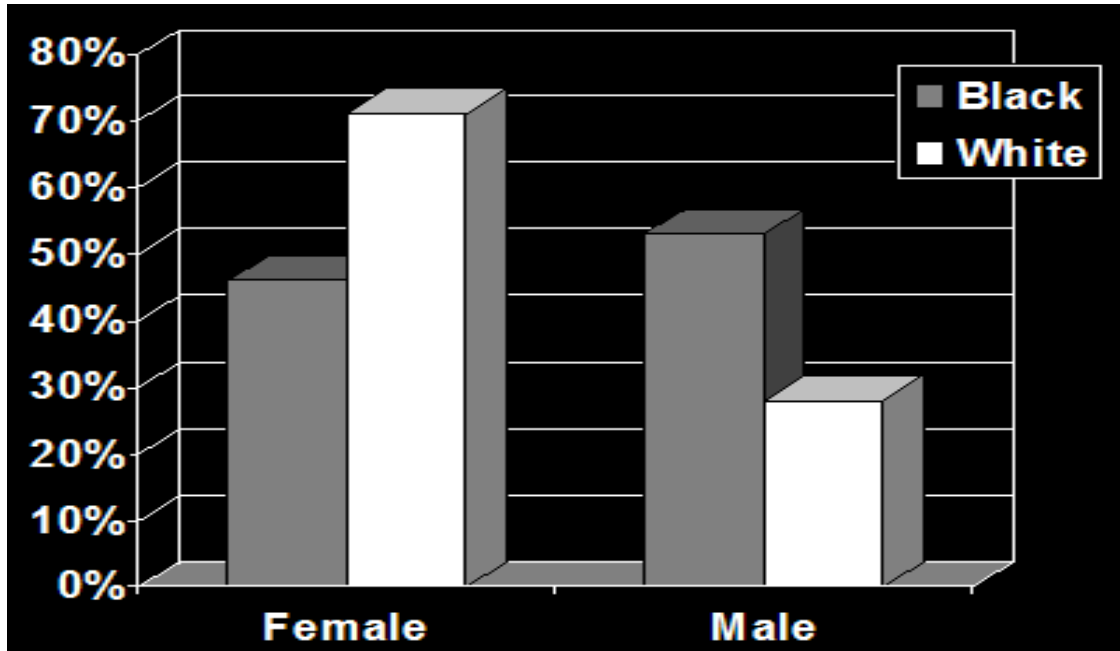
A 2007 Oregon survey of African American clients in treatment was conducted at an alcohol and drug inpatient treatment facility for women/children and through men's and women's groups at an outpatient treatment facility. Though the survey was small (59 respondents) and has not been studied for statistical validity and reliability, it provides the following useful and intriguing information about gambling in the African American community:

Preferred games: Caucasians vs. African Americans

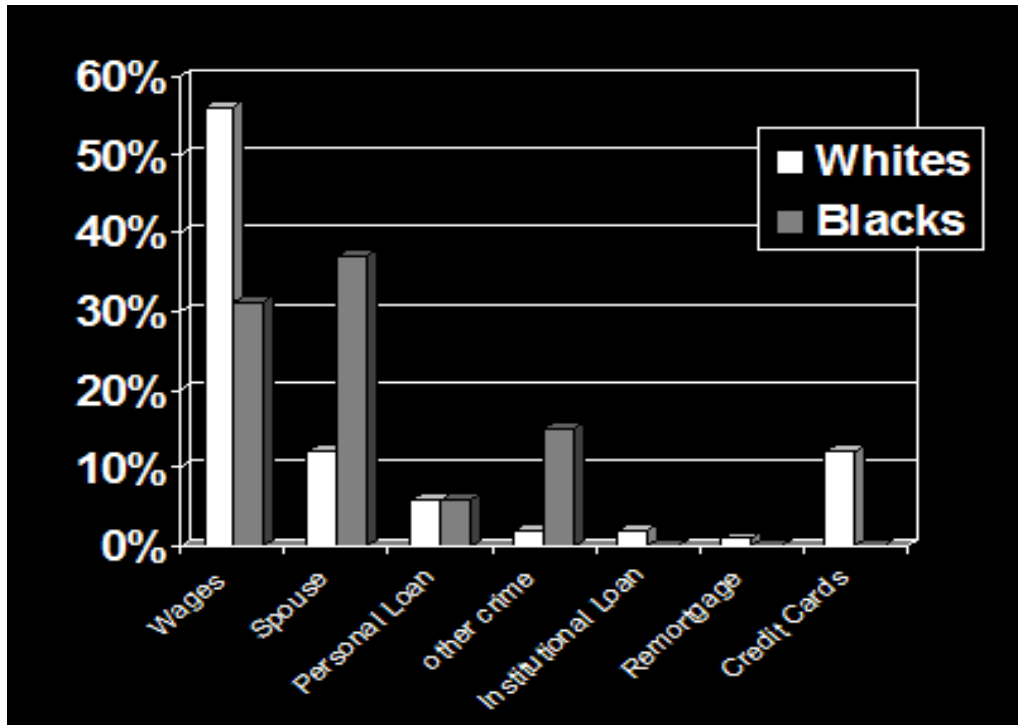
- Caucasians prefer video poker almost 2:1 over African Americans

- ❑ African Americans prefer Dominos about 5:1 over Caucasians
- ❑ Caucasians play scratch tickets far more than African Americans
- ❑ African Americans play dice far more than Caucasians

Treatment clients: Caucasians vs. African Americans



Source of gambling funds: Caucasians vs. African Americans



What are the implications for family treatment?

- ❑ African American relationships may be more enabling.
- ❑ Caucasian spouses/partners may be oblivious to their partner's gambling.

African Americans and treatment admission

- ❑ Minorities tend to perceive delayed admission as a form of rejection.
- ❑ Minorities have a history of being abused by bureaucracy and red tape. Complex rules, documents, etc. have historically been used to exploit African Americans. African Americans are turned-off by "red-tape."
- ❑ Research shows that delayed admission produces poorer outcomes in minorities compared to Caucasian clients in behavioral health and medical care services

Special thanks to Hubert Evans, CGAC II at Lifeworks NW for collecting and sharing this data.

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3

Section 3.

section

Gaming trends

- ⌘ Internet
- ⌘ Cell phone
- ⌘ Poker



Internet gambling: a casino in every home and office?



Today, anyone with a personal computer and modem, interactive television or a cell phone has the capacity to gamble, virtually creating their own personal casino. Internet gambling is becoming an increasingly popular form of gambling, and there are now an estimated 1,700 gambling websites on the Internet and the number is expected to grow.

The convenience of gambling at home, the ease of setting up a gambling account and the variety of forms of gambling - from traditional betting, to casino gambling, bingo and lotteries - makes online gambling very appealing; that appeal leads to increased risk of problems with this new form of gambling.

Risks of internet gambling

- ⌘ It is illegal
- ⌘ Too easy to access: the ability to gamble 24 hours a day
- ⌘ Too solitary: you can gamble in your own home undetected and unnoticed
- ⌘ Increased risk that children will find and use these sites
- ⌘ The absorbing nature of computers can lead people to lose track of time while gambling

- ⌘ gambling online enables an accelerated speed of play; for example, casino card games have an average rate of play of around thirty hands per hour, compared to online poker, which can average sixty to eighty hands per hour
- ⌘ persons presenting for gambling treatment who used the internet to gamble presented with more severe problems
- ⌘ decreased perception of the value of cash - i.e. players are forgetting that they are spending real money
- ⌘ a gambling site on the other side of the world may or may not be legitimate; there may be very little to prevent the provider of online gambling services from taking one's money and shutting down, or failing to pay winnings
- ⌘ credit card or account details may be vulnerable to capture, and funds may be vulnerable to theft by computer hackers
- ⌘ Internet gambling may be vulnerable to invasions of privacy. Information given to casino operators can be used for other purposes; for example, a service that uses telemarketing to convince people to bet on its football betting system may be willing to pay money for a list of Internet sports book players
- ⌘ online activity, which appears addictive in its own right for a minority of users, may interact synergistically with the propensity for problem gambling, and thereby increase the number of online problem gamblers

Young males at highest risk?

Data released in October 2006 by the Annenberg Public Policy Center show that more than one million young people currently are using Internet gambling sites on a monthly basis. Among males 18 to 22, Internet gambling doubled in the past year. The new data were released by the National Annenberg Risk Survey of Youth, which has tracked gambling among young people ages 14 to 22 since 2002. Based on the survey's most recent estimates, approximately 850,000 males ages 18 to 22 gamble online at least once a month. The corresponding number for males between 14 and 17 is 357,000. Among the 18- to 22-year-old age group, weekly use of Internet gambling sites increased from 2.3% in 2005 to 5.8% this year, a statistically significant increase. Full survey results may be found at www.annenbergpublicpolicycenter.org/Releases/Release_iGamble20061002/Release_iGamble_20061002.pdf

Tips for safer internet gambling

- ⌘ Only spend what you can afford to lose
- ⌘ Keep track of the amount of time that you play—decide on a time limit and stick to it
- ⌘ Keep track of your spending while playing
- ⌘ Remember that the numbers on the screen are real money
- ⌘ Avoid chasing your losses
 - If you're a parent who gambles online, keep your password safe and consider using software to block access to gambling sites from minors
- ⌘ Look for sites with options where you can set your own spend and session limits.

- ⌘ If you are having a problem, request to be self-excluded from the site; there is also software that blocks access to all online gambling sites –see www.gamblock.com for more details

Youth and online gambling

The US Federal Trade Commission is concerned about youth gambling on the Internet and wants teens and parents to understand the risks associated; parents should tell their children that:

You can lose your money. Online gambling operations are in business to make a profit. They take in more money than they pay out.

You can ruin a good credit rating. Online gambling generally requires the use of a credit card. If kids rack up debt online, they could ruin their credit rating - or their parent's.

Online gambling can be addictive. Because Internet gambling is a solitary activity, people can gamble uninterrupted and undetected for hours at a time. Gambling in social isolation and using credit to gamble may be risk factors for developing gambling problems.

Gambling is illegal for kids. Every state prohibits gambling by minors. That's why gambling sites don't pay out to kids and go to great lengths to verify the identity of any winner.

Parents should also actively monitor their children's use of any internet sites, including those involving gambling. Although not a 100 percent guarantee of protection, there is software that blocks access to online gambling sites. See www.gamblock.com for more details.

Websites for more information on internet gambling

Managing Internet Gambling in the Workplace
www.firstmonday.org/issues/issue8_4/fox/

eGambling issue on Internet gambling:
www.camh.net/egambling/archive/pdf/EJGI-issue5/EJGI-issue5-complete.pdf

GAO report on Internet gambling
www.gao.gov/new.items/d0389.pdf

Internet gambling: legal issues
www.gamblingandthelaw.com/antigua.html

Wikipedia overview of Internet and online gambling issues
en.wikipedia.org/wiki/Online_gambling

Newshour: legislation banning fund transfers for online gambling
www.pbs.org/newshour/bb/business/july-dec06/gambling_10-16.html

CBS 60 Minutes story on Internet gambling
www.cbsnews.com/stories/2005/11/17/60minutes/main1052420.shtml

American Gaming Association factsheet on industry issues
www.americangaming.org/Industry/factsheets/issues_detail.cfv?id=17

Washington State Gambling Commission factsheet
www.wsgc.wa.gov/faq/internet_gambling.pdf

Media Awareness article on Internet gambling and youth
www.media-awareness.ca/english/teachers/wa_teachers/safe_passage_teachers/risks_gambling.cfm

FTC guidelines for parents regarding youth online gambling
www.ftc.gov/opa/2002/06/onlinegambling.htm

APA advisory on Internet gambling

www.psych.org/news_room/media_advisories/internetgamblingadvisory11601.pdf

Annenberg Public Policy statement on online gambling and youth
www.annenbergpublicpolicycenter.org/Releases/Release_iGamble20061002/Release_iGamble_20061002.pdf

Sources (all accessed online on Nov. 18, 2006):

www.gamcare.org.uk/site.builder/onlinehelp.html

www.ftc.gov/opa/2002/06/onlinegambling.htm

www.annenbergpublicpolicycenter.org/Releases/Release_iGamble20061002/Release_iGamble_20061002.pdf

www.aic.gov.au/publications/tandi/tandi88t.html

www.impactlab.com/modules.php?name=News&file=article&sid=7254

en.wikipedia.org/wiki/Online_poker

www.ncpgambling.org/media/pdf/igambling_statement.pdf

Gambling on the cell phone: the next big marketing target?

Cell phone gambling is still getting off the ground but, thanks to its convenience and a receptive 20 to 35 year-old age bracket, the sector is primed for growth. Global revenues from cell phone based casino games will grow at an accelerated pace through 2008, expanding by nearly 50 percent from 2006 to 2007, and will likely total over \$2.2 billion by 2010 (more than five times the revenues generated in 2004).

Mobile Device Casino Games Revenues Worldwide, 2004-2010 (millions and % growth vs. prior year)

2004	\$420.0
2005	\$479.6 (14.2%)
2006	\$677.0 (41.2%)
2007	\$1,006.8 (48.7%)
2008	\$1,455.6 (44.6%)
2009	\$1,886.6 (29.7%)
2010	\$2,226.2 (18.0%)

Source: visiongain, November 2005

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www.eMarketer.com

Cell phone users in the UK who were surveyed regarding the appeal of cell phone gambling overwhelmingly cited convenience as a benefit (70%), with smaller numbers saying that it was less intimidating and allowed for more discretion.

Cell phone gambling is currently illegal in the United States.

Sample cell (aka mobile) gambling websites:

www.cellgambling.com/

www.gambling-mobile.com/

Poker and youth: an overview

If you've been watching television or been to the mall lately, you may have noticed that poker has become a big trend. From TV shows to poker kits in toy stores, the interest in poker (particularly the Texas Hold'em game) continues its popularity, causing concern among public health experts about the rise in youth gambling.

Many prevention experts believe that education about the risks and consequences of youth gambling is key in helping youth, parents, educators, and communities make informed and responsible choices about gambling.

"All in": fast facts on the poker craze

Tidbits on a trend

- ✂ The U.S. Playing Card Company produced more than 1 billion poker chips in the last three years, nearly half of them since 2004 (U.S. Playing Card Company, 2005)
- ✂ Worldwide online poker revenue jumped to more than \$1 billion last year, up from \$365 million in 2003 and is expected to hit \$2.4 billion in 2005 (Christiansen Capital Advisors, 2005)
- ✂ The "World Poker Tour" series on cable's travel channel drew an average of 1.5 million viewers in 2004 (Nielson Media Research, 2004)
- ✂ In the last two years, the number of products has continued to increase. A search on the word "poker" on Amazon.com in 2007 (Coe, 12/20/07) revealed:
 - 11,395 links in "Sports & Outdoors"
 - 1,374 links on "Apparel"
 - 2,068 links on "Toys & Games"
 - 288 links on "Software"
 - 354 links on "Video Games"
 - 673 MP3 Downloads

2004 Survey of 16 and 17-Year-Olds

42%: Played poker in the previous month.

37%: Watched the World Poker Tour on TV.

(U.S. Playing Card Company, 2004)

Youth and poker: five "A's" for alarm

In substance abuse prevention, there are many well-known "risk factors" that increase the likelihood for a youth to develop a problem behavior. There are several similar factors that may also contribute to problem gambling among youth. The following list outlines many of the risks involved with youth poker playing; many of the points apply to all forms of gambling.

Availability

- ✂ High availability to kids
 - poker kits/toys in stores
 - poker games at schools/in homes
 - video games

- o Internet

⌘ Societal availability:

- o "Social gaming" ordinances in many cities (allows for such games as poker in public and private places)

Age

- ⌘ Easy to start early: available to even the youngest youths (video and handheld games, poker kits, etc.)
- ⌘ Pathological gamblers and youth in general report early gambling in the home and with family members (Dickson et. al, 2002)

Accessibility

- ⌘ Kids can play right from their own homes
 - o Poker nights
 - o poker kits sold to anyone
 - o lack of monitoring on Internet
 - o trend toward mobile gambling: handheld games, software on cell phones
- ⌘ Greater access is shown to increase gambling, money spent, and rate of problem gambling (Dickson, Derevensky, & Gupta, 2002)

Advertising

- ⌘ More positive messages than ever:

- o TV shows
- o school casino nights
- o poker tournament fundraisers
- o Internet banner ads

Acceptability

- ⌘ More accepted than ever among youth
 - o poker viewed as "cool"
 - o 44% youth gambled because friends did (Dickson et. al, 2002)
- ⌘ Ways to gamble/play poker are more attractive than ever
 - o video games
 - o handheld toy games
 - o first generation to use Internet
- ⌘ Gambling often viewed by adults as harmless
 - o seen as healthy alternative to youth drug or alcohol use
 - o problem gambling often seen as a "victimless" habit
- ⌘ Gambling has become a family activity: 80-90% of parents report knowing their children gamble for money and do not object (Ladouceur, Vitaro, Cote & Dumont, 2001)

4 Section 4 Resources

Section 4.

Community education materials

- 🎀 Signs of a problem gambler
- 🎀 Teens and problem gambling
- 🎀 For parents: signs of a problem in kids
- 🎀 Parents: talk to your teens about the risks of gambling
- 🎀 For educators: signs of a problem in students
- 🎀 College student gambling
- 🎀 Older adults and gambling
- 🎀 Problem gambling and the workplace
- 🎀 Handout for primary care providers
- 🎀 Handout for mental health providers
- 🎀 Ten rules of responsible gambling
- 🎀 Myths and facts about problem gambling
- 🎀 Gambling Education and Reduction (GEAR) Program



*Free PDF brochures on these topics are available at:
<http://egov.oregon.gov/DHS/addiction/gambling.shtml> click
on "Resources"*

Signs of a problem gambler



Is someone you know...?

- ❑ Preoccupied with gambling (i.e. reliving past gambling experiences, planning the next venture, or thinking of ways to get money with which to gamble).
- ❑ Secretive about his/her gambling habits, and defensive when confronted.
- ❑ Increasing bet amounts when gambling in order to achieve the desired excitement (high).
- ❑ Trying unsuccessfully to control, cut back, or stop gambling.
- ❑ Restless or irritable when not gambling.
- ❑ Gambling to escape problems.
- ❑ "Chasing" losses with more gambling
- ❑ Lying to family and others about the extent of gambling.
- ❑ Committing crimes to finance gambling.
- ❑ Jeopardizing or losing relationships, jobs, education or career opportunities because of gambling.
- ❑ Relying on others to bail him or her out to relieve a desperate financial situation caused by gambling.

If any of these statements sound like someone you know, that person may have a problem with gambling.

Help is free, confidential, and it works.

**Call 1-877-MYLIMIT or go to
1877mylimit.org**

What's the big deal? teens and problem gambling



Most young people don't consider themselves "gamblers." Yet most of today's teens have been gambling for years - not the way adults gamble -- at bingo halls, bars or racetracks -- but through casual betting with friends or family.

What is gambling?

Gambling is "the act of risking money or something else of value on an activity with an uncertain outcome."

Playing cards or video games for money, buying raffle tickets, betting on who's going to win the next game of pool, or wagering your favorite CD on the outcome of a sports event - it's all gambling.

For most of you, it's just for fun. It's a way of making the game more challenging, more exciting. But for some of you, gambling becomes a serious problem.

What is problem gambling?

Problem gambling is any gambling behavior that has a bad effect on your life or the lives of people close to you, parents, brothers and sisters, your friends.

If your gambling is causing you to fall behind on your schoolwork, have arguments with family or friends, or worry about money you have lost, it is considered to be "problem gambling."

What are the signs of problem gambling?

People don't usually start out as problem gamblers. Somewhere along the way, though, the casual bets stop being "just for fun" and begin causing problems.

Modified from information from the Alberta Alcohol and Drug Abuse Commission.

How would you know if your betting was becoming a problem?

It may be a problem if you:

- ⌘ Spend more time or money gambling than you intend.
- ⌘ Go back another day to try to win back your losses.
- ⌘ Feel badly about the way you gamble or about what happens when you gamble.
- ⌘ Tell others you've been winning money from betting, when you really haven't.
- ⌘ Want to stop betting money, or gambling, but don't think you can.
- ⌘ Hide signs of betting or gambling from your parents, friends or others.
- ⌘ Are being criticized for your gambling or told you have a gambling problem.
- ⌘ Argue about money and gambling.
- ⌘ Skip school or work to gamble.
- ⌘ Borrow gambling money from someone and don't pay them back.

Free teen brochure download:

<http://egov.oregon.gov/DHS/addiction/gambling.shtml> **click on Resources**

Who is at risk for gambling problems?

Anyone who gambles can develop a gambling problem. If you begin at a young age and if gambling is a frequent activity in your home or among your friends, you are at greater risk for developing a problem. You may not experience any problems at first, but problems may develop later on.

Often, people with gambling problems have troubles in other areas of their lives that they need to sort out, such as feeling lonely or arguing a lot with parents.

Where can you go for help?

If you are worried that you or someone you know may have problems related to gambling, call the Oregon Gambling Help Line at **1-877-MYLIMIT** or **go to 1877mylimit.org** or contact your counseling office. You will be able to talk to someone who can answer your questions and help you decide if you need further counseling.

For parents: signs of a possible gambling problem in kids



- ⌘ Asking for/ borrowing money from the family
- ⌘ Gambling "stuff" at home (lottery tickets, betting sheets)
- ⌘ Unexplained debts, or windfall cash/new items (like new clothes or jewelry)
- ⌘ Spending unexplained time away from home, work, or school
- ⌘ Behavior change (seems distracted, moody, sad, worried, nervous, etc.)
- ⌘ Withdrawal from the family
- ⌘ Less involvement in outside activities
- ⌘ Unusual amount of time spent watching sports on TV and/or reading newspapers or magazines having to do with sports
- ⌘ Overly upset at conclusion of sporting match
- ⌘ Telephone calls from strangers and higher phone bills
- ⌘ Bragging about winnings
- ⌘ Intense interest in gambling conversations
- ⌘ Playing gambling type games on the Internet
- ⌘ Money or valuables are missing from your home

***If you suspect your child has a gambling problem,
CALL 1-877-MYLIMIT or go to 1877mylimit.org
for free and confidential help.***

***Free Parent Brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml
click on Resources***

Parents: talk to your teens about the risks of gambling



Worried about your kids using alcohol, tobacco and other drugs? Most parents are, so they talk to their kids about those risk behaviors because that's one of the things that research tells us works for prevention. However, you may not have discussed another risky behavior that more and more kids are engaging in – gambling. Unlike the eyeball rolling that a discussion of alcohol, drugs or tobacco will likely evoke, kids have not “heard it all” when it comes to gambling—in fact, they have probably heard nothing in school or elsewhere about the potential risks.

Kids are exposed to gambling every day. All they have to do is turn on the TV to see poker tournaments, or walk into a mini-mart or grocery store to see people buying lottery tickets. Even churches and schools often use gambling for fund-raising, so the gambling message is everywhere. As responsible parents you can give your kids the full story about gambling, and this brochure can help guide you in that process.

What are the signs of a possible gambling problem?

Some of these signs will sound very familiar—they are also “signs” of adolescence or being in the teenage years. But if they occur in an ongoing pattern, or if you have reason to be concerned about your teen’s gambling, here are some indicators to look for:

- Asking for/borrowing money from the family
- Unexplained absences from school
- Sudden drop in grades
- Unexplained debt
- Carries or possesses gambling materials, such as dice, playing cards, or other gambling materials
- Says gambling is one of the best ways to make easy money
- Borrows money from family/friends to pay gambling debts

- Takes desperate measures to get more money for gambling, such as stealing from family
- Gambles with money that is suppose to be used for something else such as lunch, bus fare, etc.
- Neglects family/friends
- Frequent mood swings" usually high when winning and lower when losing
- Lies to people about gambling
- Displays large amounts of cash and other material possessions
- Gambles to escape worries, frustrations, or disappointments

Reasons teens gamble

Teens indicate that there are many reasons why they gamble, including:

- To escape problems
- To overcome loneliness, boredom, etc.
- To get easy money
- To impress others
- To be the center of attention
- To make friends

Why talk about gambling?

Teens who understand gambling and its risk are less likely to develop a gambling problem. Parents can protect their kids by helping them gain this understanding. Besides, you already communicating some sort of message about gambling through your own behavior. Talk directly with your teen about gambling to make sure that you are communication exactly what you want them to know.

How do I bring it up?

Here are some tips for starting the conversation with your teen:

- Look for a natural way to raise the topic. For example, discuss gambling after seeing a commercial for a gambling product or casino, or after you find out that a friend has won or lost money gambling.

- Ask questions first. Find out what your child thinks and feels about gambling before offering your own opinions or giving information.
- Be patient. Several discussions may be needed before your teen understands the ideas that you want to communicate.
- When you talk with your teens about drugs or alcohol, include problem gambling in the conversation as another potentially risky activity.

Two more points to make when you talk to your teen

1. Gambling is not a way to make money. Games run by casinos, racetracks, internet sites, and lotteries are all designed so that most people lose money in the long run. Games are designed to make a profit for the house, not the player. Many problem gamblers do not understand this. They believe that they are blessed with special skills or special luck that will allow them to “beat the odds”. They often “chase losses,” betting more money in the belief that they will “win back” the money they have lost. Teens need to understand that these beliefs are illogical and dangerous.

2. Gambling carries risk and problem gambling can lead to serious consequences throughout life, including the loss of huge amounts of money, destruction of a career, legal problems, and the loss of friends and family.

More prevention tips for parents

- Set the example you’d like your teens to follow—if you gamble, do so for fun and in moderation
- Spend quality time with your teen
- Talk to your teen about the risks of gambling
- Set consistent boundaries and consequences
- Know their friends
- Encourage involvement in the arts, sports or other constructive activities
- Avoid hosting or participating in gambling parties involving young people; if you are involved in such an event make sure

information about problem gambling and where to get help is provided

Treatment is free and confidential

If you are worried that you or your teen may be having problems related to gambling, help is available. Throughout Oregon help and treatment is free, confidential, and it works.

Call the toll-free Oregon Gambling Help Line at 1-877-MYLIMIT or go to 1877mylimit.org

***Free teen and parent brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml click on
Resources***

Material in this section was adapted from:
www.responsiblegambling.org/articles/teensBrochure.pdf.

For educators: signs of a possible gambling problem in students



- ⌘ Unexplained absences from school
- ⌘ Grades are dropping
- ⌘ Asking for/borrowing money from peers
- ⌘ Large amounts of money in student's possession
- ⌘ Intense interest in gambling conversations
- ⌘ Displaying money or other material possessions (e.g., cars, clothes, jewelry)
- ⌘ Behavior change (e.g., is day dreaming, anxious, moody, less participative, appears tired in class)
- ⌘ Using gambling "lingo" in his/her conversation (e.g., bookie, loan shark, point spread, underdog or favorite, exaggerated use of the word "bet")
- ⌘ Spending unusual amount of time reading newspapers, magazines, and/or periodicals having to do with sports
- ⌘ Selling personal belongings
- ⌘ Bragging about winnings
- ⌘ Lying, cheating, or stealing in school

If you suspect your student has a gambling problem,

CALL 1-877-MYLIMIT or go to 1877mylimit.org

for free and confidential help.

Don't wait for the problem to get worse!

***Free educator brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml click on
Resources***

College student gambling



Gambling in Oregon has changed dramatically over the past several years. It is more accessible, more accepted, and more glamorized than ever before.

Reality TV shows portray gambling as sexy, as an easy way to get rich, and as a harmless activity for anyone with a sense of excitement.

The truth is, gambling is a fun and entertaining activity for most college students that play for social or recreational reasons. However, it can cause problems and for some those problems are harsh.

About 1 in every 20 college students will develop a gambling problem (Shaffer, 2001). They usually start out gambling for fun and with friends. Then they get sucked in by either believing they can make money gambling or by gambling as a means to cope with loneliness, stress or depression.

Every semester students drop-out because of gambling problems. They find themselves in a financial mess, they are stressed-out, they miss class, and they often feel angry, shameful, and depressed.

Fortunately, many college problem gamblers do get past their gambling problem and back on track. Often it takes a friends intervention or their own reality check. Skilled help can be found at the campus counseling center and/or health center. Oregon also has a statewide toll-free gambling helpline (1 877 MYLIMIT) and an online helpline at 1877mylimit.org. Counselors at the helpline or on campus can offer assistance and help people make changes.

Recreation?

For most college students, gambling is a social or recreational activity. It is fun and entertaining. It does not cause problems.

For college student who choose to gamble recreationally, the following tips will help insure that gambling does not lead to problems:

- ⌘ If you choose to gamble, do so for entertainment purposes
- ⌘ Treat the money you lose as the cost of your entertainment
- ⌘ Set a dollar limit and stick to it
- ⌘ Set a time limit and stick to it
- ⌘ Expect to lose
- ⌘ Don't use your credit card to gamble
- ⌘ Create balance in your life
- ⌘ Don't increase your bets to recoup lost money
- ⌘ Don't gamble as a way to cope with stress, loneliness, or depression
- ⌘ Become educated about problem gambling

Risks?

Gambling can be risky for those who spend a lot of time gambling and do not stay involved in other activities.

The following are some signs of a possible gambling problem:

- ⌘ Gambling more often
- ⌘ Gambling for more money
- ⌘ Gambling for longer periods of time
- ⌘ Gambling in spite of negative consequences, such as large losses or poor grades
- ⌘ Gambling as a way to cope

Recognizing gambling problems among your friends

- ⌘ Unexplained absences/sudden drop in grades
- ⌘ Change of personality/visible changes in behavior
- ⌘ Possession of a large amount of money; brags about winnings
- ⌘ An unusual interest in sports scores or stats
- ⌘ An intense interest in gambling conversations
- ⌘ Unexplained financial problems or clues about financial problems (borrowing money)

How you can help friends

- ⌘ Tell the person what he or she has done that has raised your concern and how you feel
- ⌘ Tell the person what you'd like to see him or her do including talking to another trusted person and/or getting professional help
- ⌘ Tell the person what you are willing to do; this may include being available to talk again, or assisting in finding help
- ⌘ Do not lend money or in any way support continued gambling as a solution

"The scholarship I received for school is gone from gambling."

-- 20 year-old college student Helpline caller

"I'm concerned about my roommate. She pawned her personal belongings for money to gamble."

-- College student Helpline caller

"A guy in my fraternity, who gambled a lot, took this semester off to work full-time and pay off his debt."

-- College student at problem gambling lecture

Free college brochure download:

egov.oregon.gov/DHS/addiction/gambling.shtml click on Resources

Older adults and gambling



Gambling, or playing a game of chance for money or other stakes, has become a popular activity for people of many ages—and seniors are no exception. While experts agree that most adults can gamble without a problem, prevalence studies conducted in Oregon find that 2.7 percent of the general population¹ and 1.2 percent of the older adult population become problem or pathological gamblers².

Gambling opportunities for Oregonians are plentiful. Tribal casinos, Lottery products, sports betting and Internet gambling are more available than ever. The increase in the number of people with gambling problems corresponds to the increase in availability of gambling opportunities. Studies estimate that over 6,000 Oregonians, age 62 years or older, currently have a gambling problem.



Concerns about older adults and problem gambling

Older adults' gambling differs from younger age groups because:

- ⌘ People coping with big changes or losses are more vulnerable to developing gambling problems; many older adults face life transitions and losses (deaths, retirement, illness, isolation).
- ⌘ Older adults who have gambled away their retirement savings don't have working years to make up their losses.
- ⌘ Many older adults may not understand addiction, making them less likely to identify a gambling problem.

1 Volberg, R. (2001, February). Changes in gambling and problem gambling In Oregon: results from a replication study, 1997-2000. Salem, OR: Gambling Addiction Treatment Foundation.

2 Moore, T. (2001, April). Older adult gambling in Oregon: an epidemiological survey. Salem, OR: Oregon Gambling Addiction Treatment Foundation.

- ⌘ Older adults appear less willing to seek assistance for a gambling problem than younger adults.
- ⌘ Many older adults hide their gambling because of the stigma associated with it and health professionals rarely assess for problem gambling.
- ⌘ Many older adults have easy access to gambling and are drawn to gambling to fill their time or to be with other people.
- ⌘ A larger proportion of older adults, compared to younger adults, have cognitive impairment, which may interfere with their ability to make sound decisions.

Problem gambling—signs and symptoms

Problem gambling is a term that indicates a person’s gambling compromises or damages their personal, family, or vocational pursuits. Problem gambling has a broad severity spectrum and its cause appears to be related to several factors. Below are some of the more common signs and symptoms of problem gambling:

- | | |
|---|--|
| ⌘ Gambling to calm nerves, forget worries, or reduce depression | ⌘ Getting into arguments about gambling |
| ⌘ Losing interest in other things, such as food | ⌘ Going without basic needs in order to gamble |
| ⌘ Talking about, thinking about, or planning to gamble and not doing other activities | ⌘ Needing to gamble more and more money in order to get the desired effect |
| ⌘ Lying about gambling habits | ⌘ Health problems related to gambling like headaches, irritable bowel anxiety and depression |
| ⌘ Gambling alone or gambling more often | ⌘ Having financial problems caused by gambling |

Getting help

If you think you or someone you know may have a gambling problem, help is available. Untreated problem gambling can cause serious physical, emotional and financial problems, especially among older adults. In Oregon, treatment for problem gambling is free. Treatment options include telephone counseling, in-person individual counseling, and group counseling.

**Call the confidential, 24-hour phone number below for information or help at no cost:
1-877-MYLIMIT or go to 1877mylimit.org**

Free seniors brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml *click on Resources*

Material in this handout is adapted from Elder Health Tips, Spring 2001, published by the Massachusetts Department of Public Health.



Problem gambling and the workplace



Just a generation ago, legal gambling was largely confined and problem gamblers were viewed as societal misfits. Now gambling is part of our mainstream culture and we know that most problem gamblers are ordinary hard working people. More than 72,000 adult Oregonians are problem gamblers and almost all are employed.

What is problem gambling?

A problem gambler is anyone whose gambling is causing psychological, financial, emotional, marital, legal, or other difficulties for themselves and the people around them.

Problem gambling may be an isolated case of overspending, or a pattern of excessive gambling when upset, or it may be an ongoing problem with continual losses and mounting debts. At the extreme end of this range is pathological gambling, where people are unable to control their gambling much as those addicted to alcohol are unable to control their drinking.

Sometimes the gambling problem is transient and goes away; sometimes it plateaus and maintains for years, and sometimes it progresses to catastrophic levels. Regardless of the course, problem gamblers usually experience intense shame, financial strife, and family problems.

Co-workers - the first line of defense

Gambling and gambling-related activities are frequently carried out during work hours. The workplace is used as a shield to hide the problem gambling from family members. This leaves managers and co-workers as the first line of defense. The challenge is to identify the problem gambler before he or she becomes desperate. To this end, it is important that all employers

and employees develop a greater awareness of the signs associated with a gambling problem.

Workplace signs of a gambling problem

- ⌘ **Work performance deteriorates**; the person is preoccupied, has trouble concentrating, is absent or late for meetings and misses assignment deadlines.
- ⌘ **Frequent unexplained absences** or disappearances from work.
- ⌘ Eager to organize and participate in **betting opportunities**.
- ⌘ **Pay is requested in lieu of vacation time**, large blocks of vacation time are not taken.
- ⌘ **Frequently borrows money**, argues with co-workers about money that is owed to him or her.
- ⌘ **Complains about mounting debts**.
- ⌘ **Excessive use of the telephone and internet** for personal matters.
- ⌘ **Experiences mood swings**, often related to winning and losing streaks.
- ⌘ **Credit card or loan bills are mailed to work** rather than home.
- ⌘ **Increasingly spends more time gambling** during lunch hours and coffee breaks.
- ⌘ **False claims are made** against expense accounts.
- ⌘ **Theft of company property**.



Effects on the workplace

Although not often recognized, problem gambling is a significant workforce issue. The effects of a gambling problem almost always spill over into the workplace. This occurs through either the

gambler themselves or a family member who is living with the effects of a gambling problem. The workplace is primarily affected through lost time, lost productivity and, in desperate situations the gambler may resort to theft, fraud, or embezzlement.

Lost time

Individuals with gambling problems can become completely pre-occupied with gambling. The workday is often spent either in the act of gambling, planning the next opportunity, or plotting to get money for gambling.

Family members also become pre-occupied, worrying about finances and holding the family together. There are feelings of anger, frustration, resentment, isolation and desperation. Family members (spouses, children, parents) feel like their life is consumed by the problems they are facing.

Lost productivity

As a result of lost time, the company's productivity is damaged. The gambler becomes unreliable, misses project deadlines and important meetings and produces work that is of poor quality.

Physical and emotional health problems associated with excessive gambling can further diminish work performance and attendance. Depression, anxiety, high blood pressure, or stress-related illness can surface in individuals with gambling related problems and their family members.

Suicide and suicide attempts are high among individuals with gambling problems. Stressed family members are also at risk of suicide. The emotional, financial or legal problems can appear to be so severe that suicide looks like the only "way out."

Theft, fraud and embezzlement

Employees with severe problems may commit theft, fraud or embezzlement. Money is the gambler's key to action. Once all

legitimate avenues to obtain cash are exhausted, the gambler, in desperation, may resort to illegal acts to acquire cash.

The workplace becomes a primary avenue for the gambler to illegally finance their gambling. Gamblers do not see this activity as stealing. They see it as "borrowing money" and plan to replace it when they win.

What can supervisors do?

Express concerns in a caring and supportive manner. Do not diagnose the problem or tell the individual what to do. Be clear, non-judgmental and speak only for yourself.

- *I've been noticing changes in your work, and I am concerned about you.*

Use work-related observations.

- *I see you coming in very late from lunch every day, too distracted to work all afternoon.*

Be positive.

- *You are a conscientious person with a history of doing good work.*

Explain how the problem affects you.

- *I had to reassign two of your projects, because you missed three deadlines.*

Be clear about your position.

- *I need you to perform your job duties to the best of your ability, your performance has been slipping and without corrective actions your job is in jeopardy.*

Respect personal boundaries.

- *I don't want to pry into your life, but I had to let you know I am concerned. I would be happy to talk to you about anything that is troubling you or assist you in making an EAP appointment.*

When a gambling problem is known, provide information, not advice.

- *Here is some information about available problem gambling resources. Another resource available to you is our EAP Professional; here is their name and number.*

Be prepared for denial or a hostile reaction.

- *It must be uncomfortable to hear this. It's difficult for me to bring it up, but I am concerned about you.*

What can organizations do?

A proactive response from your organization will help reduce the negative impact problem gambling can have within the workplace. The following are some measures to consider.

⌘ Policy statements

Incorporate the topic of gambling into relevant policies. Most companies have policies on Internet use, phone use, and disallowed activities during work hours. When reviewing policy statements make sure the policies are sufficiently comprehensive to address problem gambling issues, e.g., Internet gambling.

⌘ Provide awareness training

Without awareness, problem gambling will not be detected. The signs of a gambling problem are seldom identified as gambling related. Training can help employees and employers to identify and assist the problem gambler.

⌘ Make financial counseling available

Financial issues can be just as serious as a mental health disorder. It is important that financial counseling be made available to employees who are in a fiscal crisis.

⌘ Monitor the money stream

Some occupations involve direct contact with money while in other occupations, money can be "moved." These occupations might be considered high risk for the problem gambler and a monitoring system can protect employee and employer.

What Resources are Available?

Problem Gambling Help Line: 1-877-MYLIMIT

The Problem Gambling Help Line provides help to people with gambling problems and their families. Callers receive confidential, professional service from trained counselors. The line operates 24 hours a day, seven days a week and is free of charge. The Help Line provides: Information, consultation, crisis intervention services, follow-up services, referrals to publicly funded problem gambling counselors and self-help groups. There is also an online version of the Helpline that offers help by email/chat/IM at **1877mylimit.org**.

State funded professional, confidential, and effective treatment

Counseling services for gamblers and their families are available free of charge in Oregon. All services are offered by experienced counselors working in outpatient centers. Contact the Problem Gambling Help Line (call 1-877-MYLIMIT or go to 1877mylimit.org) for more information about Oregon's problem gambling treatment system.

Oregon's Gambling Evaluation And Reduction Program (GEAR)

Oregon's Gambling Evaluation And Reduction Program, GEAR, is designed to provide gamblers with the tools and support to change unwanted gambling patterns without traveling to a counselor's office. GEAR combines phone consultation with certified counselors, workbook exercises and referral resources to give participants the tools and motivation to make good choices about if and how much to gamble. For more information, call 1-877-278-6766.

Gamblers Anonymous (GA)

Gamblers Anonymous provides people with an opportunity to share their experience, support and hope in order to stop gambling. They discuss 12-step recovery. The only

membership requirement is a desire to stop gambling. A list of local meetings is available by calling the Problem Gambling Help Line.

Gam-Anon

Gam-Anon provides a supportive environment for the spouses, relatives, or close friends of problem gamblers to share their experiences. There is no membership fee. Participation in Gam-Anon will help you to realize you are not alone. Gam-Anon is particularly important for immediate support in a calling crisis. A list of local meetings is available by calling the Problem Gambling Help Line.

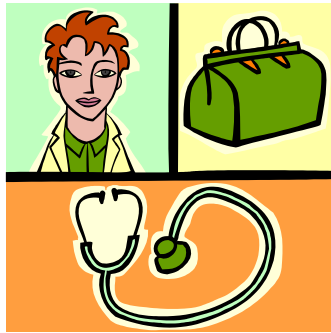
Problem gambling educational resources

The Oregon Department of Human Services, Problem Gambling Services Unit, loans books, journals, videos and other resource materials on problem gambling. To find out what materials are available call 503-945-6187.

Free workplace brochure download:

egov.oregon.gov/DHS/addiction/gambling.shtml *click on Resources*

Material in this section was adapted from Saskatchewan Health and the Nevada Council on Problem Gambling.



PLACE YOUR BETS:

ASSESSING FOR PROBLEM GAMBLING PAYS OFF

Primary Care Providers

Jeffrey Marotta, Ph.D.

If you treat adult patients, you've provided care to someone who has a gambling disorder – whether you knew it or not. Although 1 in 10 primary care patients may have a gambling problem,¹ you won't find patients volunteering information about their gambling behavior. Instead, they present with secondary symptoms such as depression, anxiety, sleep disturbances, headaches, or other somatic symptoms associated with stress.

Although most health care providers are aware of problem gambling, studies find that very few ask their patients about problem gambling.^{2,3} Data from multiple sources suggests that problem gambling poses a threat to public health. Increased awareness and early intervention are the keys to reducing the personal, family, and social costs of problem gambling.

Physicians can play an integral role in this process by recognizing early signs of problems, motivating patients to seek help, and readily providing useful referral resources such as the number to the Oregon Problem Gambling Helpline (call 1-877-MYLIMIT or log onto 1877mylimit.org). We are fortunate in Oregon to be home of an award winning problem gambling treatment system. In Oregon, treatment directed at problem gambling, for both gamblers and family members, is fully subsidized by revenues generated by the Oregon Lottery.

How big is the problem?

Persons seeking medical care generally have higher psychiatric co-morbidity rates than the general population. This is true for chemical dependency and for problem gambling. Studies conducted in Oregon found past-year prevalence rates in adults of 1% for pathological gambling and an additional 1.7% for problem gambling.⁴ However, the prevalence of problem gambling among persons entering a primary care setting appears to be closer to 10% (6.2% for pathological gambling and 4.2% for problem gambling).¹ The incidence rate of problem gambling is expected to grow as gambling becomes more culturally accepted and legalized gambling opportunities expand.⁵

How is problem gambling associated with patient health?

Problem gambling affects not only the gamblers and their family finances, but also their mental and physical well-being. Similar to other addictive behaviors, gambling is often considered a precipitating factor in a variety of health problems. Several studies have documented the relationship between problem gambling and specific health issues found in general medical care.⁶ The three broad categories of co-occurring conditions include mental health problems, chemical dependency problems, and stress related problems. Problem gamblers have been identified as being at increased risk of dysthymia, major depression, anti-social personality disorder, phobias, and chemical dependency. Studies identify problem gamblers as being at increased risk for cardiac arrest due to sustained stress and hypertension. Additionally, problem gamblers present with higher rates of stress-related physical problems, including migraine headache, tension headache, irritable bowel syndrome, peptic ulcer, GERD, insomnia, sexual dysfunction, myalgias, and neurotic dermatitis.

What is problem gambling?

Gambling is a widespread activity, with 86% of the general adult population having some gambling activity over a lifetime.⁵ While the majority of people gamble, a small minority has a gambling problem. Pathological gambling (Table 1) represents the most

severe pattern of excessive or destructive gambling behavior and is the only gambling related disorder for which there are formal diagnostic criteria. Problem gambling is a term that has different meaning depending on the context. Used colloquially, problem gambling describes any form of gambling that results in functional consequences. In the scientific literature, problem gambling refers to less-severe forms of dysfunctional gambling as differentiated from pathological gambling. This article uses the former meaning of the term except were noted otherwise.

Although pathological gambling had originally been conceptualized as a chronic and progressive disorder, new evidence suggests there are multiple courses the disorder can follow.⁷ Sometimes the gambling problem is transient; sometimes it plateaus and maintains for years; and sometimes it follows a progressive course. Regardless of the course, it is common for a problem gambler to experience mental and physical health problems.

Table 1. DSM IV Diagnostic Criteria for Pathological Gambling

A. Persistent and recurrent maladaptive gambling behavior as indicated by 5 (or more) of the following:

- (1) Is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)
- (2) Needs to gamble with increasing amounts of money in order to achieve the desired excitement
- (3) Has repeated unsuccessful efforts to control, cut back, or stop gambling
- (4) Is restless or irritable when attempting to cut down or stop gambling
- (5) Gambles as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings helplessness, guilt, anxiety, depression)
- (6) After losing money gambling, often returns another day to get even ("chasing" after one's losses)
- (7) Lies to family members, therapist, or others to conceal the extent of involvement with gambling
- (8) Has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling
- (9) Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
- (10) Relies on others to provide money to relieve a desperate financial situation caused by gambling

B. The gambling behavior is not better accounted for by a manic episode.

Problem gambling treatment

Research concerning the treatment of problem gambling is early in its development, but has benefited from the body of evidence on other addictive and impulse disorders. Multiple pharmacological approaches to reduce problem gambling behaviors or craving have been evaluated in small pilot studies, including lithium carbonate, carbamazepine, clomipramine, naltrexone, and fluvoxamine. Use of serotonin re-uptake inhibitors seems to be promising but multisite, double-blind studies are not yet published. Consequently, there are no FDA approved medications for problem gambling yet. Gambler's Anonymous (GA) is a self-help fellowship based on 12-step principles, similar in approach to other addictive disorders. Drop-out rates are very high among GA utilizers. Regular GA participation can be greatly facilitated by directive and supportive physicians or other health care providers. A number of psychosocial approaches have been used to treat gambling disorders: behavioral, cognitive-behavioral, psychodynamic, and addiction based. While no best practice exists, most problem gambling treatment programs employ cognitive-behavioral and addiction based change techniques. As with other psychiatric disorders, a combination of treatment methods is often most useful, such as GA with professional psychosocial treatment. Co-morbid chemical dependency, affective, or anxiety disorders need to be treated and stabilized by health care professionals in conjunction with specialized behavioral treatment for the gambling disorder.

To screen or not to screen

Screening for gambling-related history and symptoms is justified because of the prevalence and potential severity of problem gambling, the potential to improve patient outcomes, and the low costs and low risk associated with asking about problem gambling. Simple asking and advising have been proven to be effective interventions in the allied field of alcohol abuse.⁸ Early intervention of problem gambling through screening and motivating help-seeking may reduce the harm of problem gambling on individuals and their families.

Problem gambling screening procedures

Surveys have found that health care providers see problem gambling as a medical issue and that they have a mandate to intervene when such issues arise.³ The trick is catching the gambling problem. If patients present with symptoms that could be related to sustained stress, when you assess for behavioral conditions, include questions on gambling. If gambling is a frequent activity, then consider utilizing a simple screening tool - the Lie-Bet Questionnaire.⁹ This questionnaire is valid and reliable for ruling out pathological gambling behaviors.

The Lie-Bet questions

- 1) Have you ever felt the need to bet more and more money?*
- 2) Have you ever had to lie to people important to you about how much you gambled?*

If a patient answers yes to one or both of the questions on the Lie-Bet questionnaire, further assessment is indicated. Either make an assessment, based on the clinical interview, using the DSM-IV criteria provided in Table 1 or provide self assessments such as the SOGS or NODS. Patients suspected of manifesting a gambling problem should be encouraged to seek specialized treatment and provided with a referral for such services.

Resources for clinicians

Oregon operates a 24-hour confidential problem gambling helpline 1-877-MYLIMIT. Operators are certified problem gambling counselors and can assist callers with general information about problem gambling, crisis-intervention, motivational interviewing, and referrals to state-funded gambling treatment providers in their area. There is also an online version of the Helpline which offers help via chat/email/IM and can be accessed at 1877mylimit.org. Oregon has 25 outpatient PG treatment centers, two short-term residential treatment programs, one longer-term residential program and a structured self-change program that utilizes workbooks and telephone counseling. Over 2,000 individuals are treated each year in

Oregon's system of state-funded problem gambling treatment centers. About 75% of the problem gamblers who enroll in Oregon's treatment programs report significantly reduced or no gambling at 90-days post-discharge.¹⁰ In Oregon, problem gambling treatment is free, confidential, and effective. What a wonderful resource to have at your disposal. Let's use it!

Free clinician brochure download:

egov.oregon.gov/DHS/addiction/gambling.shtml click on Resources

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Mental Health Clinicians



ARE PROBLEM GAMBLERS IN YOUR CASELOAD?

Jeffrey Marotta, Ph.D.

If you are a practicing mental health clinician, chances are you've provided care to someone who has a gambling disorder – whether you knew it or not. Epidemiologic findings suggest that 1 in 10 persons with psychiatric disorders may have a gambling problem.¹ Persons struggling with mental illness appear at high risk for using gambling as a mechanism to avoid the uncomfortable thoughts and feelings associated with mental illness.

During my years as a practicing clinician, I had very few clients with a presenting complaint of gambling too much. Even after clinical assessment and engagement I would not have portrayed 10% of my caseload having, or at high risk of developing, a gambling problem. Now that my professional focus is on problem gambling I better appreciate the pervasive and elusive nature of gambling disorders.

Clients with active gambling problems often seek therapy not for their gambling problem but for help with related symptoms such as depression, anxiety, sleep disturbances, or for functional problems with relationships, school, or job. These clients may not conceptualize gambling as part of the problem but rather as part of the solution. Gambling may be offering them hope and possibility – a big win to provide needed cash or needed validation. Gambling may create a feeling of normalcy – the excitement of gambling can change the perceived valence of underlying anxiety from feeling “bad” to feeling “good”. Gambling may serve as a powerful opioid with the ability to tame emotional and physical pain. Gambling may be viewed as “my only

recreation” or an excuse to leave an unpleasant home or work environment. With so many reasons to hold on to gambling, it is understandable why few clients self-recognize the nature or extent of their gambling or, if they do, disclose it to their therapists.

Although most mental health providers are aware of problem gambling, studies find that very few clinicians ask their clients about problem gambling.^{2,3} Increased awareness and early intervention are the keys to reducing the personal, family, and social costs of problem gambling. Psychologists and other mental health professionals can play an integral role in this process by educating clients about risks associated with gambling, recognizing early signs of problems, and by motivating clients to address unhelpful gambling behaviors.

How big is the problem?

Studies conducted in Oregon found past-year prevalence rates in an at-large community sample of adults at 1% for Pathological Gambling and an additional 1.7% for problem gambling.⁴ The prevalence of problem gambling among persons entering a primary care setting appears to be closer to 10% and for those entering an alcohol and drug treatment agency the rate is between 10% to 30%.⁵ Based on this information, one can speculate that the prevalence of problem gamblers within a mental health setting could be at least 10%.

What is problem gambling?

Gambling is a widespread activity, with 86% of the general adult population having some gambling activity over a lifetime.⁶ While the majority of people gamble, a small minority has a gambling problem. Pathological Gambling (Table 1) represents the most severe pattern of excessive or destructive gambling behavior and is the only gambling related disorder for which there are formal diagnostic criteria.⁷ Problem gambling is a term that has different meaning depending on the context. Used colloquially, problem gambling describes any form of gambling that results in functional consequences. In the scientific literature, problem

gambling refers to less-severe forms of dysfunctional gambling as differentiated from Pathological Gambling. This article uses the former meaning of the term except where noted otherwise.

The causes of problem gambling are complex and may emanate from diverse sources – a mix of individual traits, social and economic circumstances, and the overall community environment that presents or encourages gambling opportunities.⁶ Although Pathological Gambling had originally been conceptualized as a chronic and progressive disorder, new evidence suggests there are multiple courses the disorder can follow.⁹ Sometimes the gambling problem is transient; sometimes it plateaus and maintains for years; and sometimes it follows a progressive course. Regardless of the course, it is common for a problem gambler to experience mental and physical health problems.

Table 1. DSM IV Diagnostic Criteria for Pathological Gambling

- A. Persistent and recurrent maladaptive gambling behavior as indicated by 5 (or more) of the following:
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 - (5) Gambles as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings helplessness, guilt, anxiety, depression)
 - (6) After losing money gambling, often returns another day to get even (“chasing” after one’s losses)
 - (7) Lies to family members, therapist, or others to conceal the extent of involvement with gambling
 - (8) Has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling
 - (9) Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
 - (10) Relies on others to provide money to relieve a desperate financial situation caused by gambling
- B. The gambling behavior is not better accounted for by a manic episode.

Problem gambling treatment

At present there are no universally agreed upon “best practices” nor standardized models of treatment specific to gambling. A review of the best treatment studies indicates the following:

Cognitive-behavioral treatment (CBT) approaches, even when delivered via a manual and involving only minimal therapist

contact, have the most empirical support, compared with no treatment. CBTs, generally brief and delivered on an outpatient basis, have been shown to strengthen motivation.

Pharmacotherapy (most commonly Nalmefene, Naltrexone, Welbutrin, and selective serotonin reuptake inhibitors [SSRIs]) may be an important adjunct to verbal interventions. However, the body of knowledge on problem gambling treatment has not determined which specific type of CBT or medication is most effective, for which individuals, under what circumstances, or whether other approaches have better efficacy.

The initial intervention should strive to increase the individual's commitment to treatment and resolve treatment-disrupting ambivalence as much as possible. The relatively high rates of support group dropout and treatment non-completion among problem gamblers suggests that more effort should be made to strengthen the client's commitment to change. Interventions consistent with the motivation stage of change model would be appropriate.

Gambling-treatment outcomes can be improved by addressing the factors contributing to treatment failure.¹⁰ Several predictors of poor treatment outcome include gambling-related cognitive distortions and beliefs about randomness, impulsivity or sensation seeking, biological vulnerabilities, and negative affect or mood symptoms.

Screening

Screening for gambling-related history and symptoms is justified because of the prevalence and potential severity of problem gambling, the potential to improve client outcomes, and the low costs and low risk associated with asking about problem gambling. Early intervention of problem gambling through screening and motivating help-seeking may reduce the harm of problem gambling on individuals and their families.

Problem gambling screening procedures

When conducting a biopsychosocial assessment, include questions on gambling. If gambling is a frequent activity, then consider utilizing a simple screening tool - the Lie-Bet Questionnaire.¹¹ This questionnaire is valid and reliable for ruling out pathological gambling behaviors.

The Lie-Bet Questions

- 1) Have you ever felt the need to bet more and more money?*
- 2) Have you ever had to lie to people important to you about how much you gambled?*

If a client answers yes to one or both of the questions on the Lie-Bet questionnaire, further assessment is indicated. Either make an assessment, based on the clinical interview, using the DSM-IV criteria provided in Table 1 or provide self-assessments such as the South Oaks Gambling Screen (SOGS) at <http://www.npgaw.org/tools/screeningtools.asp>

If a client's primary diagnosis is Pathological Gambling, the treating clinician should have specialized training and competence in working with problem gamblers. If not, a referral is warranted. When treating a client with a co-occurring gambling disorder, whether a gambling disorder is treated first, second or simultaneously is a matter of clinical judgment based on the relative intensity or emergent nature of the various disorders present. Counselors need to remain cognizant of the risk of underemphasizing a co-occurring gambling problem that is in need of immediate attention. When treatment planning for a client with a co-occurring gambling problem, seek consultation from a colleague with problem gambling expertise.

Resources for clinicians

Oregon operates a 24-hour confidential problem gambling helpline 1-877-MYLIMIT or 1877mylimit.org. Operators are certified problem gambling counselors and can assist with general information about problem gambling, crisis-intervention,

motivational interviewing, and referrals to Oregon state-funded gambling treatment providers in their area. There is also an online version of the Helpline which offers help via chat/email/IM and can be accessed at 1877mylimit.org. Oregon has 25 outpatient problem gambling treatment centers, two short-term residential treatment programs, one residential treatment program, and a structured self-change program that utilizes workbooks and telephone counseling. Over 2,000 individuals are treated each year in Oregon's system of state-funded problem gambling treatment.¹²

Free clinician brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml *click on Resources*

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10 rules of responsible gambling



1. **If you choose to gamble, do so for entertainment purposes**
 - *If your gambling is no longer an enjoyable activity then ask yourself why are you still “playing”?*
2. **Treat the money you lose as the cost of your entertainment**
 - *Treat any winnings as a bonus.*
3. **Set a dollar limit and stick to it**
 - *Decide before you go not only what you can “afford” to lose, but how much you want to spend. Do not change your mind after losing.*
4. **Set a time limit and stick to it**
 - *Decide how much of your time you want to allow for gambling. Leave when you reach the time limit whether you are winning or losing.*
5. **Expect to lose**
 - *The odds are that you will lose. Accept loss as part of the game.*
6. **Make it a private rule not to gamble on credit**
 - *Do not borrow money to gamble.*
7. **Create balance in your life**
 - *Gambling should not interfere with or substitute for friends, family, work or other worthwhile activities.*
8. **Avoid “chasing” lost money**
 - *Chances are the more you try to recoup your losses the larger your losses will be.*
9. **Don’t gamble as a way to cope with emotional or physical pain**
 - *Gambling for reasons other than entertainment can lead to problems.*
10. **Become educated about the warning signs of problem gambling**
 - *The more you know, the better choices you can make*

If you can't follow these suggestions, you may need to contact the Oregon problem gambling Help Line:

1-877-mylimit or 1877mylimit.org

Myths and facts about problem gambling



MYTH: You have to gamble everyday to be a problem gambler.

FACT: A problem gambler may gamble frequently or infrequently. If a person's gambling is causing psychological, financial, emotional, marital, legal, or other difficulties for themselves and the people around them, then they have a gambling problem.

MYTH: Problem gamblers gamble at any opportunity on any form of gambling.

FACT: Most problem gamblers have a favorite form of gambling that causes them problems. Some gamblers also engage in secondary forms of gambling, but these are not usually as problematic.

MYTH: Problem gambling is not really a problem if the gambler can afford it.

FACT: Problems caused by excessive gambling are not just financial. If a person's gambling is interfering with their ability to act in accordance with their values, then there is a problem. For example, too much time spent on gambling means less time to spend with family, friends, and others. It can lead to relationship breakdown and loss of important friendships.

MYTH: Problem gamblers are irresponsible people

FACT: Many problem gamblers hold, or have held, responsible community positions. In addition, even people with a long history of responsible behavior are vulnerable to developing a gambling problem. When a person is having a problem gambling episode, that person is unable to control their gambling and in this compromised state their actions look like irresponsible behavior.

MYTH: Children are not affected by problem gambling.

FACT: Surveys show that about 10% to 15% of American and Canadian youth have experienced gambling-related problems, and 1% to 6% of these individuals may satisfy diagnostic criteria for pathological gambling. Additionally, children of problem gamblers have been shown to be at a higher risk of developing health-threatening behaviors. This includes alcohol and drug use, problem gambling, eating disorders, depression and suicide.

MYTH: Partners of problem gamblers often drive problem gamblers to gamble.

FACT: Problem gamblers are skilled in finding ways to rationalize their gambling. Blaming others is one way to avoid taking responsibility for actions, including actions needed to overcome the gambling problem.

MYTH: Financial problems are the main reason that problem gambler's relationships break down.

FACT: It is true that money problems play an important part in ending relationships. However, many non-gambling partners say that the lies and lack of trust is the biggest cause.

MYTH: Parents of problem gamblers are to blame for their children's behavior.

FACT: Many parents of problem gamblers feel hurt and guilty about their son's or daughter's gambling behavior, but they are not to blame.

MYTH: If a problem gambler builds up a debt, the important thing to do is to help them get out of the financial problem as soon as possible.

FACT: Quick fix solutions are often attractive to everyone involved and may appear to be the right thing to do. However, "bailing" the gambler out of debt may actually make matters worse by enabling gambling problems to continue.

MYTH: Problem gambling is easy to recognize.

FACT: Problem gambling has been called the hidden addiction. It is very easy to hide as it has few recognizable symptoms, unlike alcohol and drug use. Many problem gamblers themselves do not recognize they have a gambling problem. Problem gamblers often engage in self-denial.

Adapted from Chris Lobsinger's Problem Gambling Pages.

5

Section 5

Section 5.

Oregon problem gambling services

- ⌘ Service delivery overview
- ⌘ Helpline online
- ⌘ Website
- ⌘ List of recommended speakers



Oregon problem gambling services

Service delivery overview

*Addictions & Mental Health Division
500 Summer Street NE E86
Salem, Oregon, U.S.A. 97301-1118*

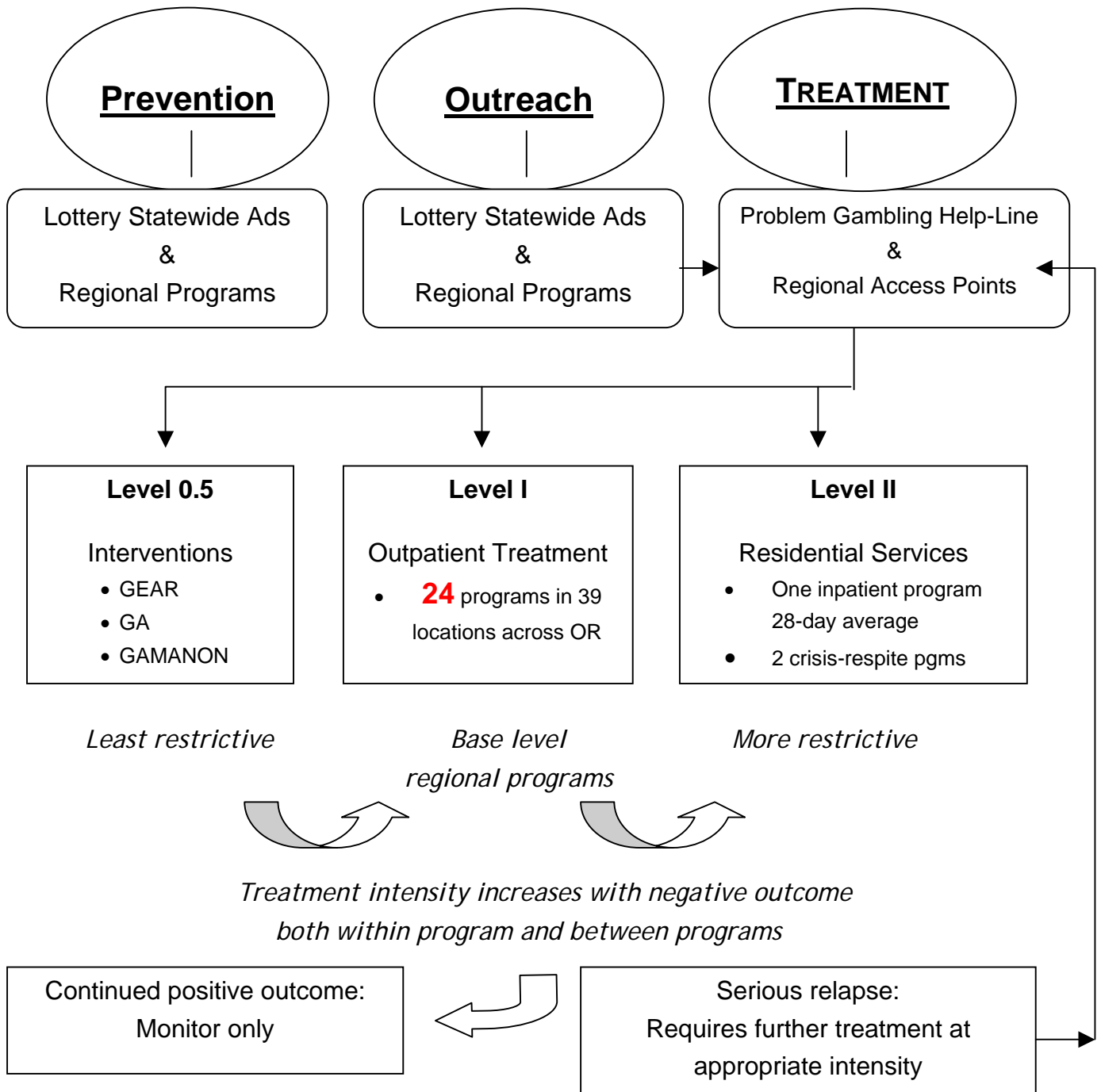
I. Philosophical Approach: Public Health Paradigm
Oregon's Problem Gambling Services are guided by a public health paradigm and approach that takes into consideration biological, behavioral, economic, cultural and policy determinants influencing gambling and health. It incorporates prevention, harm reduction and multiple levels of treatment by placing emphasis on quality of life issues for the gambler, families and communities.

Funding

Oregon's Problem Gambling Services funds come from Legislative action transferring 1% of the Oregon State Lottery's net proceeds into a Gambling Treatment Fund. The Department of Human Services has administrative responsibility over these funds. Additionally, approximately \$1.2 million of the Oregon Lottery's annual operating budget goes toward the production and purchase of ads and educational materials addressing responsible play and problem gambling.

Service delivery overview

Oregon's Problem Gambling Services are broken down into three broad service areas: prevention, outreach and treatment. Within and between these service areas program design follows the framework recommended by the Institute of Medicine's (IOM) Continuum of Care. The diagram below depicts Oregon's Problem Gambling Services.



Prevention

Problem gambling prevention programs are directed at avoiding or reducing the emotional, physical, social, legal, financial and spiritual consequences of disordered gambling for the gambler, the gambler's family, and the community. Oregon's prevention efforts are guided by the Center for Substance Abuse Prevention's

(CSAP) six core prevention strategies and delivered by three separate, yet related, administrative bodies.

1. Department of Human Services' (DHS) Problem Gambling Services promote healthy public policy and develop collaborative relationships between various stakeholder groups.
2. County Governments develop and implement regionally specific prevention plans that include measurable goals and objectives that empower communities and strengthen community action.
3. The Oregon Lottery allocates about \$1.2 million annually for public awareness and education programs designed to provide clear and consistent messages regarding healthy and unhealthy gambling behavior. These campaigns use television, radio and print media.

Outreach

Common outreach activities include case finding among high-risk populations, which include screening for gambling problems within mental health programs, alcohol and drug abuse programs, corrections departments, and at-risk youth programs.

Additionally, the Oregon State Lottery's awareness campaigns generate thousands of calls to the Problem Gambling Help-Line.

Treatment Delivery: A Stepped Care Approach

A frequent access point to treatment begins with a call made to the state's **Problem Gambling Help-Line (877-My-LIMIT)**.

The Help-Line is staffed 24-hours a day by professional counselors with problem gambling expertise. In the summer of 2007, a new **interactive chat, email service** began. This interactive service is available at the website, 1877mylimit.org.

Callers or chatters are informed that **problem gambling treatment services in Oregon are free of charge and confidential**. When appropriate, counselors conduct brief

assessments and motivational interviews with callers. The counselor then makes referrals based on screening information, clinical judgment, and available resources. To facilitate a successful referral, Help-Line counselors use three-way calling to place the caller in contact with the referral agency, and offer follow-up calls to provide further support.

New: Oregon problem gambling helpline goes online!

home about sitemap privacy

Need Help...
Have Questions?
LIVE CHAT HELP
a gambling counselor
is currently
ONLINE
click here

Oregon Problem Gambling Helpline

Do I Need Help? I Need Help! Directory Contact

Free Confidential Help!

If you are (or someone you know is) gambling too much, you can call the Oregon Problem Gambling Helpline or chat live online with a certified gambling counselor. All information shared is confidential and this service is FREE to Oregon residents.

The Oregon Problem Gambling Helpline has been in operation since 2001. Trained professional staff members are available 24 hours a day, 7 days a week to listen, educate, answer questions, and refer people to free confidential treatment services.

Our staff is available through Live Chat, by Instant Messaging, Email or you can reach us by phone at 1-877-MY-LIMIT. We're here to help!

Copyright © 2007 1877MYLIMIT.ORG

Email...chat...instant message

If you are (or someone you know is) gambling too much, you can call the Oregon Problem Gambling Helpline or chat live online with a certified gambling counselor. All information shared is confidential and this service is FREE to Oregon residents.

- Information on problem gambling and who is at risk.
- Access to provider across the state and treatment options.
- A list of all gambling treatment providers across the state.
 - List of GA meetings in Oregon



Problem gambling services website

<http://egov.oregon.gov/DHS/addiction/gambling.shtml>

Data & studies

The data on our site include:

- Oregon Healthy Teen Survey
- Treatment Referrals
- Help line calls
- Lottery Sales
- Oregon Problem Gambling Treatment Program Evaluations
- Oregon problem gambling prevalence studies
- National Studies

Problem gambling services

What type of services does Oregon offer? This section provides an overview of the different levels of treatment that lottery dollars provide to Oregonians. Additionally, this section includes provider service elements and Oregon Administrative Rules that relate to Gambling Treatment.

Prevention and outreach

Are you providing prevention and outreach services in your community? Linked to this section on our website is the CSAP Strategic Prevention Framework Model that our prevention providers follow when developing their implementation plan and providing services.

Problem Gambling Services (PGS) meetings

Unable to attend the PGS meetings in Salem on a regular basis? Not to worry. The minutes are posted on our web.

DHS media

Are you curious what type of media the state office has released each year? Find out on our website under the sub-category "Media." It lists all DHS media within the past three years.

Educational resources

Have you ever wondered what kinds of resources the Problem Gambling Services Resource Center has to offer you?

- Oregon Lottery materials
- Resource catalog of library books and videos
- Resource guide for prevention professionals
- Problem Gambling Awareness Week materials
- Community resource guide
- Pre-made gambling presentations on numerous topics and populations
- And much more

Potential speakers/interviewees on problem gambling



Problem Gambling; Oregon Treatment Overview

Paul Potter, DHS Problem Gambling Services Manager
503.945.9709 paul.d.potter@state.or.us

Problem Gambling; Oregon Prevention Overview

Wendy Hausotter, Problem Gambling Public Health and Prevention Coordinator
503.945.9703 Wendy.Hausotter@state.or.us

Problem Gambling; Latino Population

Janese Olalde, Treatment Specialist
503.945.7815 janese.c.olalde@state.or.us

Problem Gambling Policy and Service Development

Jeff Marotta, Ph.D., Consultant
503.706.1197 problemgamblingsolutions@comcast.net

Problem Gambling; Family and Women Specialty

Marcia Mattoso, Treatment Counselor
503.639.5583

Prevalence and Other Data

Thomas L. Moore, Ph.D., Herbert & Louis
503.625.6100 tlmoore@herblou.com

Gamblers Anonymous

William Cohen
541.944.6133 billyco@charter.net

GEAR (Gambling Evaluation And Reduction) Program

Michele Tantriella-Modell, emergence
541.741.7107 mtmodell@4emergence.com

Help Line

Michele Tantriella-Modell, emergence
541.741.7107 mtmodell@4emergence.com

Oregon Lottery

Carole Hardy, Assistant Director for Marketing
503.540.1000 carole.hardy@state.or.us

Oregon Gambling Addiction Treatment Foundation

Thomas L. Moore, Ph.D., Acting Executive Director
503.625.6100; info@gamblingaddiction.org

Oregonians for Gambling Awareness Organization

Ronda Hatefi, Executive Director
541.688.7101 dhatefi@msn.com

6 Section 6

Section 6.

Spanish language resources

- ⌘ Signs of a problem gambler
- ⌘ Offering help (for the family)
- ⌘ Responsible gambling tips
- ⌘ Sample public service announcement
- ⌘ Spanish South Oaks Gambling Screen (SOGS)
- ⌘ Website links



Señales de un jugador problemático



¿Alguien que usted conoce está...?

- ⌘ preocupado con el juego (es decir, revive experiencias de juegos pasados, planea la siguiente aventura o piensa en formas de conseguir más dinero para poder jugar)
- ⌘ comportándose de manera reservada respecto a sus hábitos de juego y actuando de manera defensiva cuando se le confronta
- ⌘ aumentando las cantidades de sus apuestas cuando juega, con el fin de obtener la emoción deseada (la sensación de estar "intoxicado" o "high")
- ⌘ tratando sin éxito de controlar la cantidad de tiempo que pasa jugando, jugar menos o dejar de jugar
- ⌘ irritable o inquieto cuando no puede jugar
- ⌘ jugando para escapar los problemas
- ⌘ "cazando" pérdidas jugando más
- ⌘ cometiendo delitos para financiar sus apuestas
- ⌘ poniendo en peligro sus relaciones, o perdiendo sus relaciones, trabajos, oportunidades de capacitación o profesionales debido al juego
- ⌘ dependiendo de otros para que lo saquen de apuros o le ayuden ante una situación financiera desesperada que fue causada por el juego

¿Cree que usted o alguien que usted conoce tiene un problema con el juego?

Ayuda es gratuita y confidencial.

Lláme a 1-877-278-6766.

¡No espere hasta que el problema empeore!

Para la familia del jugador problemático: ofrezca su ayuda



Solo el pensar en hablarle a alguien acerca de su problema de apuestas puede ser algo intimidante, pero el saber como comenzar puede ayudarlo a usted a tener el valor para iniciar la conversación, a así poder ayudar a la persona que itiene este problema. Primero, escoja un lugar cómodo en donde no vayan a ser interrumpidos, después mantenga la concervación simple y al punto.

- ⌘ Dígale a la persona lo importante que es para usted y que usted está preocupado(a) por él o ella.
- ⌘ Mencíónele a la persona exactamente lo que a usted le preocupa de lo que él o ella haya hecho.
- ⌘ Explíqueme a la persona como su comportamiento les afecta a otros -- sea específico.
- ⌘ Háblele con claridad de lo que usted espera que la persona haga ("Quiero que hables con alguien acerca de tu problema de apuestas.") y de lo que ellos pueden esperar de usted ("Ya no te voy a sacar de tus problemas de dinero.")
- ⌘ Después de que usted le haya dicho a la persona lo que usted ha visto y cómo se siente, deje que le responda. Escúchele sin juzgarlo.
- ⌘ Dígale a la persona que usted está dispuesto a ayudarle, pero no intente darle consejos.
- ⌘ Ofrézcale información a la persona, pero no le aconseje que hacer. Aliéntelo a que llame a la línea de ayuda.

Un jugador compulsivo no necesariamente necesita "tocar fondo" para que decida obtener ayuda. Para recibir información específica de cuándo y cómo afrontar a una persona que usted conozca con este problema, lláme al 877-678-6766 (877-2-STOP-NOW).

Esta información está proporcionado por la loteria de Oregon.

Como no perderlo todo: jugar responsablemente



- ⌘ La decisión de jugar en una elección personal
- ⌘ Fíjese un límite de cuánto va a gastar
- ⌘ Cuando llegue a su límite, deje de jugar; no sienta la tentación de pedir dinero prestado o de sobrepasar su límite
- ⌘ Entienda que tanto ganar como perder son partes del juego; es más fácil si tiene la esperanza de ganar pero cree que vas a perder.
- ⌘ El dinero que necesita es sólo eso: para necesidades. Esta información está proporcionado por la lotería de Oregón.
- ⌘ Jugar no es necesario para pasarla bien
- ⌘ Entienda que todas las formas del juego tienen el potencial de formar un hábito
- ⌘ El juego no es un buen sustituto para el alcohol o las drogas
- ⌘ Si pierde, no se moleste en cazar las pérdidas con más apuestas para "recuperarse"; acepte las pérdidas como el costo del entretenimiento

¿Cree que usted o un ser querido tiene un problema con el juego?
Ayuda es gratuita y confidencial.

Lláme a 1-877-278-6766.

¡No espere hasta que el problema empeore!

Sample public service announcement: Spanish



30 Seconds

¿USTED O UN SER QUERIDO APUESTA MÁS DE LO PLANEADO?
¿SIENTE LA NECESIDAD DE “VOLVER A GANAR” EL DINERO
PERDIDO?

PARA ALGUNAS PERSONAS, EL APOSTAR SE HA CONVERTIDO DE
UNA ACTIVIDAD DIVERTIDA EN UNA PESADILLA. PARECIDO A LA
ADICCIÓN DE ALCOHOL Y DROGAS, AL APOSTADOR ADICTO ES
DIFÍCIL CONTENERSE, AÚN CUANDO SE ESTÉ DESTRUYENDO A SU
FAMILIA O A ÉL MISMO.

EL PRIMER PASO PARA AYUDAR A ALGUIEN CON UNA ADICCIÓN AL
JUEGO ES CONOCER QUE UN PROBLEMA EXISTE. TOME EL PRIMER
PASO. LLÁME A 1-877-278-6766. EL TRATAMIENTO ES GRATIS,
CONFIDENCIAL, ¡Y SÍ FUNCIONA! 1-877-278-6766.

###

South Oaks Gambling Screen: Spanish



1. Indique en cual de las siguientes clases del juego Ud. ha participado durante su vida. Para cada clase del juego, conteste: "nunca," "menos de una vez por semana," o "una vez por semana o más."

- | | Nunca | Menos de una vez por semana | Una vez por semana o más | |
|----|-------|-----------------------------|--------------------------|--|
| a. | _____ | _____ | _____ | He jugado a cartas por dinero. |
| b. | _____ | _____ | _____ | He apostado en las carreras de caballos o de perros, en las peleas de gallos o de otros animals (en el hipódromo, en la pista, o con un corredor de apuestas). |
| c. | _____ | _____ | _____ | He apostado en los deportes (con quinielas, con un corredor de apuestas, o en jai alai). |
| d. | _____ | _____ | _____ | He jugado a juegos de dados por dinero. |
| e. | _____ | _____ | _____ | He jugado en un casino (legítimo o no). |
| f. | _____ | _____ | _____ | He jugado a números o a la lotería. |
| g. | _____ | _____ | _____ | He jugado al bingo por dinero. |
| h. | _____ | _____ | _____ | He jugado a la bolsa (acciones, opciones de compra). |
| i. | _____ | _____ | _____ | He jugado a las máquinas (tragaperras, poker, u otras). |
| j. | _____ | _____ | _____ | He jugado al boliche, al billar, al golf (u otro juego de habilidad) por dinero. |

k. _____ He jugado a "pull tabs o a juegos de papel aparte de la lotería.

l. _____ He participado en alguna forma de apostar todavía no mencionado (indique cuales son, por favor).

2. ¿Cuál es la mayor cantidad de dinero que Ud. ha apostado en un solo día?

- | | | | |
|-------|------------------------------|-------|------------------------------------|
| _____ | nunca he apostado | _____ | más de \$100 y menos de \$1,000 |
| _____ | \$1 o menos | _____ | más de \$1,000 y menos de \$10,000 |
| _____ | más de \$1 y menos de \$10 | _____ | más de \$10,000 |
| _____ | más de \$10 y menos de \$100 | | |

3. Indique cuales personas en su vida han tenido (o tienen) un problema con el juego.

- | | | | |
|-------|---------------|-------|---|
| _____ | padre | _____ | madre |
| _____ | hermano(a) | _____ | abuelo(a) |
| _____ | esposo(a) | _____ | hijo(s) |
| _____ | otro pariente | | un amigo u otra persona importante en su vida |

4. Cuando Ud. juega, ¿cada cuándo vuelven para recobrar el dinero que ha perdido?

- _____ nunca
_____ algunas veces (menos de la mitad del tiempo)
_____ la mayoría del tiempo
_____ siempre

5. ¿Alguna vez ha pretendido Ud. haber ganado dinero cuando en realidad perdió?

- _____ nunca
_____ sí, algunas veces (menos de la mitad de las veces que he perdido)
_____ sí, casi siempre

6. ¿Cree Ud. que ha tenido un problema con el juego?

- _____ no
_____ en el pasado, sí; ahora, no
_____ sí

7. ¿Alguna vez ha jugado Ud. más de lo que quería?

- _____ sí _____ no

8. ¿Hay alguien que ha criticado su manera de jugar?

- _____ sí _____ no

9. ¿Ha sentido Ud. lleno de remordimientos debido a su manera de jugar, o a las consecuencias de su juego?

- _____ sí _____ no

10. ¿Alguna vez ha querido Ud. dejar de jugar, pero no se creía capaz de hacerlo?

- _____ sí _____ no

11. ¿a discutido Ud. con la gente en su casa sobre su manera de manejar el dinero?

- _____ sí _____ no

12. ¿Ha discutido Ud. con la gente en su casa sobre su manera de manejar el dinero?

- _____ sí _____ no

13. (Si Ud. ha contestado *sí* a la pregunta número 12): Estas discusiones—han tenido que ver con su juego?

_____ *sí* _____ *no*

14. ¿Ha pedido Ud. un préstamo de dinero de alguien, y luego no pudo devolver el dinero a causa del juego?

_____ *sí* _____ *no*

15. ¿Ha perdido Ud. tiempo de su trabajo (o de la escuela) a causa del juego?

_____ *sí* _____ *no*

16. Si Ud. ha pedido dinero prestado para jugar o para pagar las deudas resultando del juego, ¿de quien ha pedido (o de dónde ha sacado) el dinero? (Indique *sí* o *no*.)

- | | | |
|--|-----------|-----------|
| a. de los fondos de domicilio | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| b. de su esposo | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| c. de otros parientes | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| d. del banco, de la caja de ahorros, de
compañías de préstamo, del "credit union" | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| e. de las tarjetas de crédito | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| f. de un usurero | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| g. por cobrar las acciones, los bonos, u otras
fianzas | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| h. por vender sus posesiones o las de la familia | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| i. por extender unos cheques sin fondos o
firmar cheques falsos | _____ | _____ |
| | <i>sí</i> | <i>no</i> |
| k. de una línea de crédito con su corredor de
apuestas | _____ | _____ |
| | <i>sí</i> | <i>no</i> |

Muchas gracias por completar este cuestionario.

Scoring rules for Spanish SOGS

Scores are determined by adding up the number of questions that show an **"at risk" response**, indicated as follows. If you answer the questions above with one of the following answers, mark that in the space next to that question:

Questions 1-3 are not counted

___ Question 4: "sí" (any "yes" response)

___ Question 5: "sí" ("yes", either one)

___ Question 6: "sí" ("yes", either one)

___ Question 7: "sí" ("yes")

___ Question 8: "sí" ("yes")

___ Question 9: "sí" ("yes")

___ Question 10: "sí" ("yes")

___ Question 11: "sí" ("yes")

Question 12 is not counted

___ Question 13: "sí" ("yes")

___ Question 14: "sí" ("yes")

___ Question 15: "sí" ("yes")

___ Question 16a: "sí" ("yes")

___ Question 16b: "sí" ("yes")

___ Question 16c: "sí" ("yes")

___ Question 16d: "sí" ("yes")

___ Question 16e: "sí" ("yes")

___ Question 16f: "sí" ("yes")

___ Question 16g: "sí" ("yes")

___ Question 16h: "sí" ("yes")

___ Question 16i: "sí" ("yes")

Questions 16j and 16k are not counted

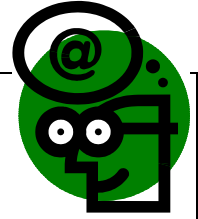
Total = _____

(20 questions are counted)

**3 or 4 = Potential
pathological gambler
(Problem gambler)

**5 or more = Probable
pathological gambler

Web sites in Spanish ~ sitios web en español



www.cop.es/colegiados/M-13641

Juego patológico (ludopatía) en España. Más información y enlaces sobre el juego patológico; artículos (dirigido a los profesionales) de investigaciones sobre el juego patológico. (Pathological gambling – a site from Spain. More information and links about pathological gambling; articles for professionals on studies related to pathological gambling.)

www.lanecounty.org/prevention/gambling/espanol

El sitio web del Condado Lane; las páginas en español están destinadas a proporcionar información confiable y verdadera acerca del juego problemático a la comunidad. (Lane County's website; the Spanish pages are dedicated to providing reliable and accurate information to the community about problem gambling.)

7 section

Section 7.

Information for policy and decision makers

- ⌘ Policy change: big impacts
- ⌘ Policy spotlight: social gaming
- ⌘ Information resources for decision makers



Policy change: big impacts



Broad interventions with potentially the greatest community impact, gambling-related policy changes affect the whole environment in which gambling happens.

Why gambling-related policy change matters

One way to prevent gambling problems, among young people and even the population as a whole, is to establish public and institutional policies that reduce overall rates of under-age gambling and promote harm reduction measures. This is commonly referred to as the “environmental approach” — changing the community and policy environment to promote health and reduce social problems associated with problem behaviors. This “environmental approach” has been shown to be very effective with alcohol and tobacco prevention efforts.

Gambling-related policies can affect these community “risk factors” that have been shown to increase the rate of gambling among young people:

- ⌘ Availability/Accessibility: Greater accessibility of gambling is shown to increase youth gambling, money spent on gambling, and numbers of problem gamblers (Dickson, Derevensky, & Gupta, 2002). Availability of gambling can be determined by policies that specify who can gamble, where gambling can occur, and types of gambling that may occur.
- ⌘ Advertising: Gambling is heavily advertised and readily available to youth. Youth who recall advertising are more likely to play (Dickson et al., 2002).
- ⌘ Awareness: Parents and family members are not aware of the dangers inherent in children regularly engaging in gambling activities; educators are not aware of the prevalence of children gambling on a regular basis (Dickson et al., 2002). Gambling-related policies can help educate the

community on the risks of gambling and acceptable and legal youth behavior.

Partners in prevention: examples of effective alcohol and tobacco policies:

- ⌘ Prohibiting sales of tobacco/alcohol to minors (proven to reduce underage availability/accessibility)
- ⌘ Taxes on tobacco/alcohol (proven to reduce consumption)
- ⌘ Limiting number of alcohol outlets (proven to reduce availability/accessibility)

Gambling-related policies might include, among other changes:

- ⌘ Stipulating age minimums to gamble
- ⌘ Limiting gambling types and stakes
- ⌘ Limiting locations at which to gamble

How to get started

What are your local gambling-related policies?

- ⌘ Schools: Visit our schools section, or your local college/university website. See also: gamblingprevention.blogspot.com/2006/10/oregon-school-gambling-policies.html
- ⌘ Workplace: Most employers have a manual that lists prohibited activities. Find out if, and how, gambling is included.
- ⌘ Community: Look at your local jurisdiction's ordinances pertaining to gambling. "Social gaming" is a recent hot topic in local communities. See our segment on social gaming policy in the following pages.

Are there issues/problems that seem to be arising from existing policy? Find out from the local paper if there's been any news on this issue.

Is there community support for change? If you have funds, you could do a formal poll/survey. Since most of us don't, find out from the local paper if there's been any news on this issue.

Do you have allies? Community groups can be very supportive, and have much more influence than one person. If you don't have a gambling-related coalition in your community, consider taking this issue to a substance abuse or related prevention coalition.

Do you have help? Policy work is time-consuming. See if there's anyone else in your community that is also interested in this issue, to help research, craft language, and provide information.

How much can you participate? Public employees have restrictions on what they can and can't do (see "Policy Prudence" box below). Once a policy is up for consideration, public employees must only be in a position of providing information—not actively campaigning for or against the issue. Keep in mind that members of the community are not subject to these rules.

Reference:

Dickson, L.M., Derevensky, J.L., & Gupta, R. (2002). The prevention of gambling problems in youth: A conceptual framework. *Journal of Gambling Studies*, 18, 97-159.

Policy spotlight: social

CAUTION!

Public Employees: Policy Prudence

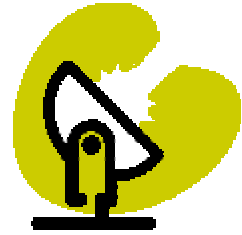
Policy work can be risky business for public employees. While allowed to provide information about problem gambling anytime, active campaigning on pending policies is a no-no. For a good primer on state law, see *Restrictions on Political Campaigning by Public Employees, ORS 260.432*

(<http://www.sos.state.or.us/elections/publications/restrictions.pdf>). Be sure to check your local jurisdiction's guidelines as well.



gaming

A recent trend and hot topic, social gaming is making waves across local jurisdictions across the state. Find out what the issue is and ways to address social gaming concerns.



What is “social gaming”?

A “social game” is one in which all the money wagered is returned to the players in the form of prizes. The house cannot take a ‘rake’ or portion of the money played. Social games in businesses, private clubs, or places of public accommodation can be conducted only if there is an enabling ordinance (usually a social gaming ordinance) by the local jurisdiction. Social games that are conducted in private residences are permissible.”

(Oregon Department of Justice)

Definition in depth

Oregon Revised Statutes cover state laws surrounding social gaming www.leg.state.or.us/ors/167.html

Oregon Revised Statutes (ORS) 167.117:

“ (7) ‘Gambling’ means that a person stakes or risks something of value upon the outcome of a contest of chance or a future contingent event not under the control or influence of the person, upon an agreement or understanding that the person or someone else will receive something of value in the event of a certain outcome. ‘Gambling’ does not include...(c) social games...

For more info...

The full text of these and other gambling-related statutes is available at:
<http://www.leg.state.or.us/ors/>



A person who gambles at a social game of chance on equal terms with the other participants therein is a person who does not otherwise render material assistance to the establishment, conduct or operation thereof by performing, without fee or remuneration, acts directed toward the arrangement or

facilitation of the game, such as inviting persons to play, permitting the use of premises therefore and supplying cards or other equipment used therein.

(21) 'Social game' means:

(a) A game, other than a lottery, between players in a private home where no house player, house bank or house odds exist and there is no house income from the operation of the social game; and

(b) If authorized pursuant to ORS 167.121, a game, other than a lottery, between players in a private business, private club or place of public accommodation where no house player, house bank or house odds exist and there is no house income from the operation of the social game."

Oregon Revised Statutes (ORS) 167.121:

"Local regulation of social games. Counties and cities may, by ordinance, authorize the playing or conducting of a social game in a private business, private club or in a place of public accommodation. Such ordinances may provide for regulation or licensing of the social games authorized. [1974 c.7 §3"

Social gaming laws: concerns and recommendations for local jurisdictions

(The following is a paper that outlines potential community concerns as related to social gaming, and ways to address the issue through policy. You may choose to use the information in this paper to create your own, or simply to extract pieces of it to provide further information on social gaming to your community.)

PRIMARY CONCERN: SOCIAL GAMING MAY BE CONTRIBUTING TO THE BROADER ISSUE OF PROBLEM GAMBLING FACING MANY OREGON CITIZENS, FAMILIES, AND COMMUNITIES.

1. Youth are able to engage in organized gambling in social gaming establishments, because there is no legal age minimum in the state of Oregon.

ORS 167.117 defines social games. Regulation, per ORS 167.121 (www.leg.state.or.us/ors/167.html), is conducted on a local level per city/county ordinance. Many local jurisdictions do not stipulate age minimums.

- a. Several cases of youth as young as middle school age have been reported gambling in local premises offering social gaming
- b. Research shows that the earlier in life people begin to gamble, the more at risk those people are for developing gambling problems later in life
- c. One in 25 Oregon teens meet the criteria for being problem gamblers (Carlson & Moore, 1998)
- d. Some consequences of problem gambling among youth include, but are not limited to:
 - School problems and/or dropout
 - Use of alcohol and/or drugs
 - Depression and later suicide
 - Debt
 - Family and social problems

2. There are few resources to enforce social gambling laws.

Per ORS 167.127, unlawful gambling is a class C felony. However, unless specifically reported (and often even if reported), this law is not consistently enforced. According to a Eugene Register Guard story appearing on 09/08/06, local law enforcement officials note that, "when blackjack was the game of choice...a brief ordinance was all the regulation that was needed...but Texas Hold 'em has soared in popularity over the past few years....with regular dealers, wide-ranging betting limits, pot "rakes," tournament fees and other variables, the old blackjack-inspired rules have become inadequate to keep the

action in line....the current gambling scene is difficult to regulate, at best."

www.registerguard.com/news/2006/09/18/a1.poker.0918.p1.php?section=cityregion

3. The current social gambling ordinances do not require operators to conduct harm-mitigation efforts (e.g., help line information, training for dealers and other employees to intervene with their customers who are suspected as being problem gamblers).

- a. In Oregon, 2.7 percent of adults are problem gamblers (Moore, 2006)
- b. Surveys of problem gamblers in Oregon treatment programs in 2006 showed (Moore, in press):
 - One in four (23%) problem gamblers commit crimes to finance gambling
 - One in three (29%) problem gamblers have concurrent alcohol problems
 - One in 10 (12%) problem gamblers have concurrent substance abuse problems
 - Family and employment problems are highly reported
 - The average gambling-related debt was \$26,099

POTENTIAL MITIGATIONS: INCREASED REGULATIONS AND ENFORCEMENT TO PROTECT CITIZENS FROM UNHEALTHY AND/OR ILLEGAL SOCIAL GAMING.

- 1. It is the position of _____ that social gaming ordinances should include an age minimum to participate. The minimum age should be 21 years to:**
 - a. coincide with most casinos and Lottery line game age minimums, and,
 - b. be consistent with Oregon Liquor Control Commission licensed establishments, thereby more feasibly enforceable.
- 2. It is the position of _____ that laws governing social gaming should be enforced with consistency in**

order to protect consumers, employees, and the community from the harm caused by problem gambling.

- a. Premises desiring social games should be required to obtain a social gaming license with their local governing jurisdictions. These licenses should require renewal on a minimum of annual basis, provided social gaming premises are in compliance with gaming and OLCC (if applicable) laws.
- b. Social gaming premises should post at a minimum ORS 167.117(7c), (16), (21), (22), ORS 167.121, and the local jurisdiction's social gaming ordinance/code in a conspicuous place to ensure transparency of the law among customers and purveyors.

3. It is the position of _____ that responsible gambling information and problem gambling resources may be provided free upon request to local social gaming premises.

- a. Oregon Lottery retailers are required to post problem gambling help line information, and social gaming purveyors could benefit from providing this information as well. Materials are available free of charge from the _____ Program, or Oregon Problem Gambling Services.
- b. Any ordinance adopted should allow for (not necessarily require) card dealers and management to reserve the right to cut off play to any person who appears to be exhibiting signs of a gambling problem. The rationale for this allowance is law surrounding liquor provision: establishments that furnish liquor are required to not "sell, give or otherwise make available any alcoholic liquor to any person who is visibly intoxicated" (ORS 471.410(1)).

Further information is available by contacting:

(fill in your contact information here)

Information resources for decision makers

The following are organizations that may be of interest to decision makers, policy makers, legislators:

Oregon system information and data (*see also sections one and five of this manual*):

State of Oregon DHS Problem Gambling Services
egov.oregon.gov/DHS/addiction/gambling.shtml

Oregon Gambling Addiction Treatment Foundation
www.gamblingaddiction.org/

Oregon Lottery
www.oregonlottery.org/

Oregon Casinos
www.oregon.com/casinos/index.cfm

Oregon Problem Gambling Helpline
www.1877mylimit.org/

Policy-related national organizations

Association of Problem Gambling Service Administrators
(APGSA) www.apgsa.org/State/index.aspx

The APGSA is made up of administrators from states with publicly-funded problem gambling prevention and treatment systems. The APGSA Web site provides an overview of publicly funded programs in the United States, including a member states map and a quick reference table provides information on each member's program structure.

National Council on Problem Gambling www.ncpgambling.org

The National Council on Problem Gambling mission is to increase public awareness of pathological gambling, ensure the widespread availability of treatment for problem gamblers and their families, and to encourage research and programs for prevention and education. NCPG's Web site includes member information, awareness materials, a directory of certified problem gambling counselors and links to state affiliates.

National Council of Legislators From Gaming States

www.nclgs.org/

The National Council of Legislators from Gaming States (NCLGS) is an organization of state lawmakers that meets on a regular basis to discuss gaming issues. NCLGS members share or are on legislative committees that regulate gaming in their state. NCLGS does not promote or oppose gaming but is primarily concerned with regulation of the industry. The Web site includes information on various committees and their activities, research information, links.

North American Association of State and Provincial Lotteries

www.naspl.org

The association represents 51 lottery organizations. Its mission is to disseminate information about state and provincial lottery organizations through education and communications and to advocate the positions members on general policy. The Web site includes links to state members, information and resources, reports.

American Gaming Association

www.americangaming.org/

The American Gaming Association represents the casino entertainment industry. It provides information about industry to the public, regulators, elected officials and the media. The organization sponsors a public information campaign, addresses legislative and public policy issues relevant to casino gaming, and works to serve as a clearinghouse for casino industry information.

National regulatory agencies

Association of Racing Commissioners International, Inc.

www.arci.com/

The Association of Racing Commissioners International, Inc., is a non-profit corporation founded in the 1930s to uphold uniform pari-mutuel racing rules and practices. The ARCI serves as a resource for pari-mutuel rulings, including equine medication issues. The ARCI works to preserve the integrity of horse racing, jai-alai, and dog racing.

North American Gaming Regulators Association

www.nagra.org/

The NAGRA was created in 1984. Members are federal, state, local, tribal and provincial government gaming regulators.

National Indian Gaming Commission

www.nigc.gov/

The National Indian Gaming Commission is an independent federal regulatory agency charged with the regulation of gaming on Native American land, specifically to protect tribes from corrupt influences, including organized crime. Also to make sure

tribes receive the benefits of Indian gaming and to ensure that fair playing practices protect tribes and players. The NIGC maintains a list of gaming tribes on its Web site.

National policy-related information:

Pew Research public opinion (2006)

pewresearch.org/pubs/314/gambling-as-the-take-rises-so-does-public-concern

Institute for the Study of Gambling and Commercial Gaming

www.unr.edu/gaming

Located at the University of Nevada, Reno, the institute was created in 1989 as the first academic research center dedicated to promoting the examination of gambling and commercial gaming, the impact of gambling on society, and how related issues might be addressed.

8

Section 8

Section 8.

Schools

- 🎗 School policies
- 🎗 Oregon youth gambling survey data
- 🎗 Oregon Healthy Teens data
- 🎗 Connecting the dots
- 🎗 Majoring in wagering
- 🎗 Casino nights
- 🎗 Announcement: youth video
- 🎗 Health education standards
- 🎗 Oregon Dep't of Education tips for partnering with schools
- 🎗 Model school program



schools section



Successful prevention efforts are those that are comprehensive, multi-faceted, employ multiple strategies, and are committed to changing the conditions in which problem behaviors thrive.

By promoting healthy choices and reducing risks, we can go a long way to helping improve students' academic performance.

This section is aimed for educators, prevention coordinators, school counselors, and other public health professionals who would like more tools to help implement problem gambling prevention strategies in school-based settings.

Included in this part of the guide are data, handouts, and information pieces that primarily are here to help you **1) promote education** to help influence healthy choices, and **2) encourage development and enforcement** of school-based gambling policies.

A selection of school gambling policies

Research shows that limiting the availability and accessibility to problem behaviors limits the likelihood of that activity to occur. And since about one in four Oregon teens report gambling at school there is much opportunity to influence the context in which gambling occurs.

A sampling of school gambling policies can be found at:
gamblingprevention.blogspot.com/2006/10/oregon-school-gambling-policies.html

Oregon youth gambling survey

In 2005 and 2006, eight regions across Oregon surveyed 2,479 youth regarding gambling. Though the survey is not scientific, it provides a valuable touch point for gambling behaviors among Oregon youth (see also: Oregon Healthy Teens survey later in this section). The instrument was developed by the Oregon Problem Gambling Prevention Committee in 2005, and a Lane County Health & Human Services survey analyst was consulted during its development. Once developed, regional problem gambling services prevention coordinators were invited to use either the hard copy or online versions of the survey. Surveys were disseminated in classroom settings in the following regions: Grant, Harney, Jackson, Lane, Malheur, Marion, Polk, and Washington counties. The surveys were completed during a classroom-based youth gambling prevention activity, and respondents were assured of confidentiality. There were no formal instructions for completing the survey. Once completed, the surveys were sent to Oregon Problem Gambling Services for compiling.

Key findings (see graphs which follow):

Cards and sports bets are favorites

Survey results indicate the most preferred types of gambling were card games (42 percent), games of personal skill (40 percent), and sports bets (34 percent).

Teens bet in homes and at school

By far the most popular place to gamble was at home. About two in three (64 percent) said they gambled at home, followed by a friend or family member's house (48 percent), and at school (24 percent).

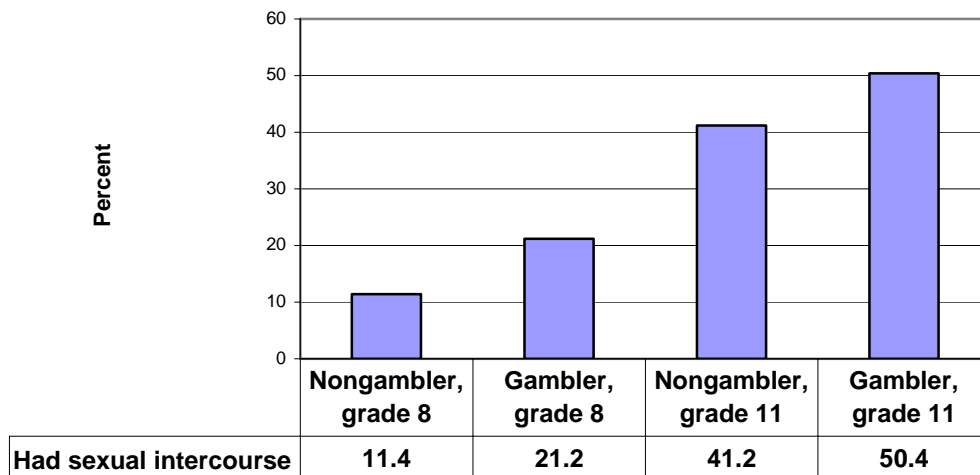
*For more information about the survey, contact:
Julie Hynes, Oregon Problem Gambling Prevention Consultant,
(julie.hynes@co.lane.or.us / 541.682.3928).*

Oregon Healthy Teens Survey 2006

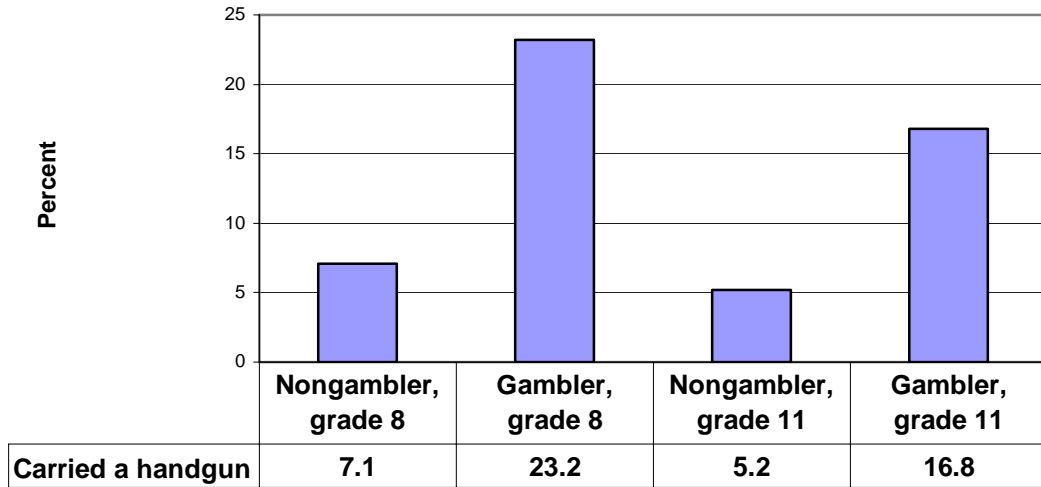
Oregon Healthy Teens Survey: youth gambling is risky

Oregon Healthy Teens (OHT) is Oregon's anonymous and voluntary research-based survey monitoring the health and well being of adolescents. The graphs which follow indicate that students who gamble are significantly more likely to participate in other risk behaviors. At present, gambling is too often seen as a harmless way for youth to spend time, and is even touted as a healthy "alternative" to drugs and alcohol. The OHT data indicate that gambling is one of many activities that carry risk and should be addressed as such in school and community prevention efforts.

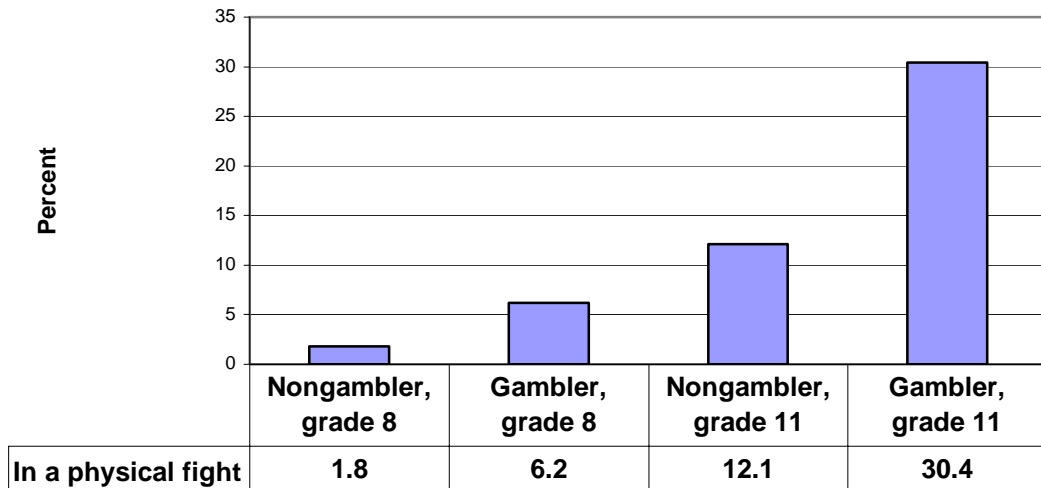
Have you ever had sexual intercourse?



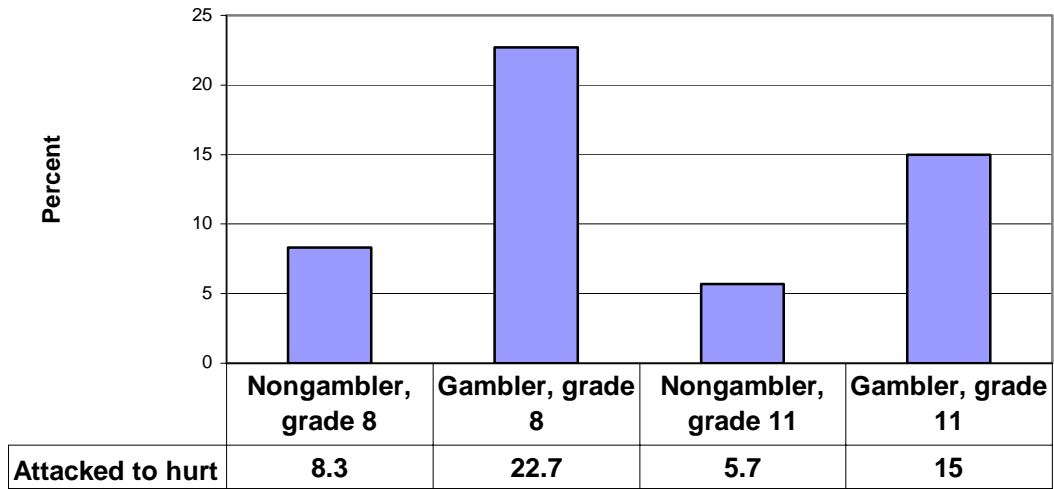
Have you carried a handgun during the past 12 months?



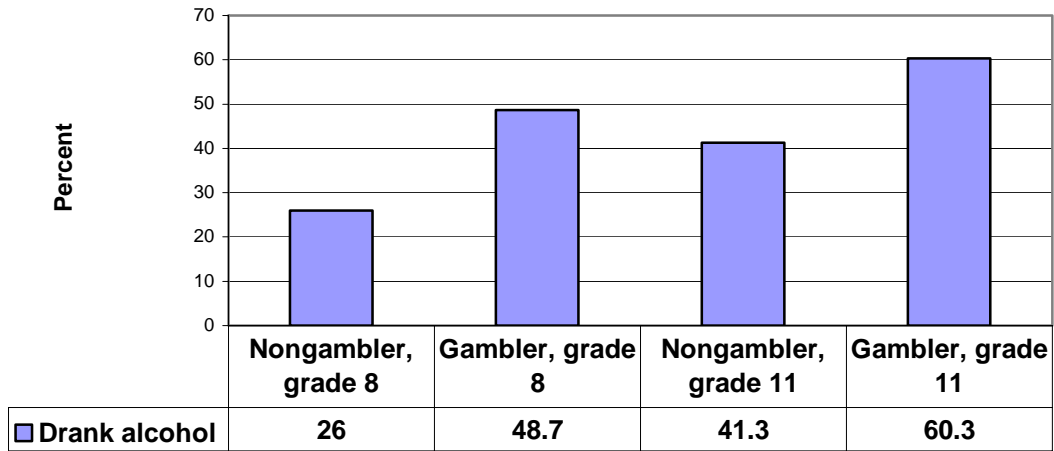
Were you in a physical fight during the past 12 months?



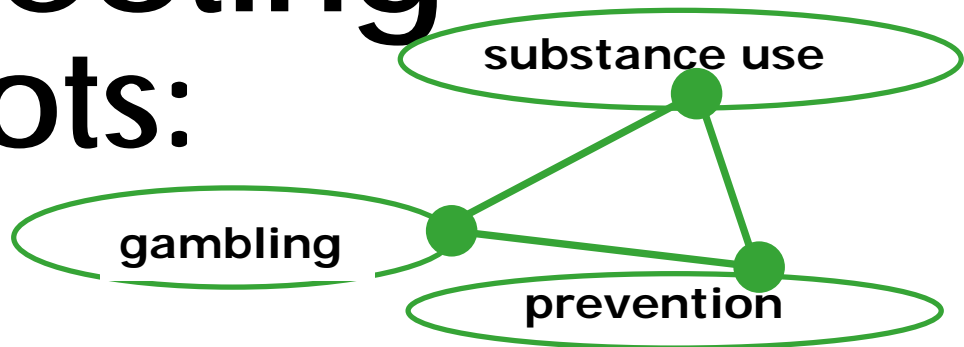
Have you attacked someone with the idea of seriously hurting them during the past 12 months?



Have you had beer or wine or hard liquor to drink during the past 30 days?



connecting the dots:



Why you need to include problem gambling in your substance abuse prevention curriculum.

Kids who gamble are twice as likely to use alcohol or used marijuana (Oregon Healthy Teens 2005 data, 30-day use among 8th & 11th graders) and are more likely to be involved in other risk behaviors such as fighting, weapons, etc. (Oregon Healthy Teens 2006 data)

One in 25 Oregon teens meet the criteria for being problem gamblers. Problem gambling is easy to hide and often mistaken for other behavioral and academic issues.

Problem gambling shares the same risk factors as alcohol and drug problems.

Approaches to prevent problem gambling and substance abuse are very similar.

Gambling is everywhere— on TV, stores, and in schools. Young people need to learn there are risks involved, and make healthy decisions.

See the connections? Now connect with us.

Oregon Problem Gambling Services can provide you with free, evidence-based, easy to use materials.

-
- In-class presentations
- Educational materials
- Integration of problem gambling into approved curricula

Contact Us!

Oregon Problem Gambling Services
503.945.6187 /
Greta.L.Coe@state.or.us

Majoring in wagering?

If they're not smoking, drinking, or using drugs, what's the big deal?



With the increasing availability, accessibility, and acceptability of gambling, more young people are gambling than ever. What may seem like harmless fun can actually develop into a serious problem for some people.

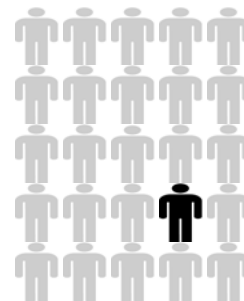
As educators or counselors, you play an important role in the prevention of problem behaviors among your students.

Three key points about youth gambling:

- 1. Gambling is not a safe alternative to alcohol or drug use.** Many people think that poker among friends is totally safe because young people are not drinking or smoking. The truth is, while most people don't have problems when they gamble, more young people are developing problems with gambling. Consequences of problem gambling include more than lost money. Depression, social withdrawal, and school dropout are just a few of the consequences of a gambling problem.
- 2. Many teens already have gambling problems.** It may only be a harmless bet of a dollar or two, but it can become a lot more serious. An Oregon study showed that one in every 25 teens (4 percent) have a gambling problem. An additional 15 percent are at risk for developing a gambling problem.
- 3. Teens are only a few years away from being adults who can gamble legally.** Honest education about gambling is important to preparing young people to make responsible choices.

Why should I be concerned about my students?

- Problem gambling affects school performance and increases the dropout rate.
- Many problem gamblers say they started out gambling at an early age--approximately 10 years old.
- About one in every 25 Oregon teens already has a gambling problem.
- Young people often don't have well developed coping or decision-making skills.
- Young people can easily hide a gambling problem.
- There are no needle marks, drowsy walking, bloodshot eyes, or other tell-tale signs so that others can get help.
- The problem typically develops over several years. Without prevention efforts now, small problems can escalate into serious consequences down the line.



One in 25
Oregon teens meet the criteria for problem gambling. Is there a problem gambler in your class?

How we can support you.

Problem gambling prevention can supplement your current classroom activities—not add more work for you!
Problem gambling activities/info that “plug in” to existing substance abuse prevention curriculum

- Educational materials
- Free youth gambling awareness video (featuring Oregon teens) and educational guide
- Presentations to educators, administrators, and parent groups
- Problem gambling awareness artwork search (visit www.lanecounty.org/prevention/gambling for examples)

Free educator brochure download:
egov.oregon.gov/DHS/addiction/gambling.shtml
click on Resources

We can help!

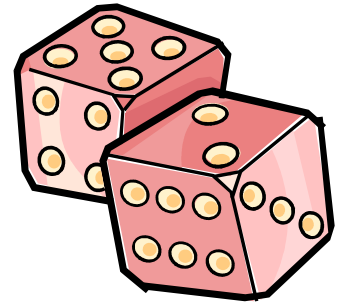
Contact Greta Coe, Oregon Problem Gambling Services, at 503.945.6187



PLANNING A CASINO NIGHT?

I'm planning a casino night for my school. What do I need to know?

Casino nights or other related nights are often fun and can make money for those who sponsor them as fundraisers. But consider another side: problem gambling. Four percent of Oregon teens (one in 25 teens) already have problems with gambling, and an additional 15 percent are considered "at risk." Youth who gamble excessively are prone to problems in school, work, and with peer and family relationships. Those who take gambling too far may commit crimes to finance their gambling, are more at risk for alcohol and drug abuse, and are much more likely to commit suicide.



"But these events are harmless compared with kids drinking or using drugs."

As with alcohol and substance abuse, accessibility, availability, and acceptability are key factors in increasing the rate of youth gambling and associated problems. The reality is that there is little difference between an addiction to a substance and an addiction to gambling; the consequences are often every bit as devastating.

"Yes, but no one's exchanging real money!"

That may be true. But think of it this way: would you consider holding a mock-tail party for kids with non-alcoholic umbrella drinks? Probably not, because it gives kids the wrong message. The same is true for casino nights or other school organized gambling activities. Even while real money isn't being used, casino nights or other gambling related activities and fundraisers promote a behavior that is dangerous and sends the wrong message that gambling is risk-free.

“So...how can we still have a successful event AND attract the kids?”

Students and parents have offered us a number of suggestions that would be both effective and fun. These alternatives include activities like:

- ⌘ Movie night
- ⌘ Video game night
- ⌘ Board game night
- ⌘ Game show madness
- ⌘ “Survivor” theme
- ⌘ “Fear Factor” theme
- ⌘ “Amazing Race” theme
- ⌘ Whodunit mystery night
- ⌘ Athletic center activities (swimming, racquetball, Sumo wrestling, etc.)
- ⌘ Silent auction (for fundraisers)
- ⌘ “The Bachelor” theme / date auction (for fundraisers)



If you still decide to have a casino night, we have valuable resources for you to help educate people about gambling, including free brochures and posters, as well as info on:

- ⌘ Real odds & probabilities of gambling
- ⌘ Responsible gambling tips
- ⌘ Resources for people with gambling problems

Contact us for useful, REAL, and fun information!



Free youth problem gambling awareness video featuring Oregon kids!

“You mean, gambling can be addictive?”

Here’s a great, free resource to help kids understand that gambling is not a risk free activity. The video features kids from urban and rural

Oregon talking about gambling—their thoughts and beliefs, what they

have observed, advice they have to give, and more. The video is brief and humorous, using a “mythbusters” theme. It comes with a facilitator’s guide that includes discussion questions and key points to cover.

The information

Middle school students will learn:

- **What is gambling?**
- **Gambling is not risk free**
- **How to recognize problem gambling**
- **How to get help**

Video Stats:

- Under 8 minutes.
- Geared toward middle school students.
- Supplements your classroom gambling prevention education.

Order a FREE video

Contact Greta Coe at
503.945.6187 or
Greta.L.Coe@state.or.us to
order your copy!



What it is: to educate young people about the risks and pitfalls that can occur.

What it’s NOT: to pass judgment on gambling being a “good” or “bad” activity.

The idea is to encourage kids to adopt “street-smart” awareness when faced with choices about gambling activities at school, on the Internet, at home, or with friends.

Oregon revised health education standards

Note: this is the first time problem gambling has been mentioned in these standards, which are important because they form the basis for curriculum development; the inclusion of problem gambling will make it more likely that the topic will be addressed in school curricula.

6-8

Health Skills and Concepts Instruction aligned to the Oregon Health Education Standards **PROMOTION OF MENTAL, SOCIAL AND EMOTIONAL HEALTH**

KNOWLEDGE	SKILLS → The filled in boxes below are skills that we felt are most appropriate to teach the concept on the left. Some concepts do not have a skill associated with it. That is because it is heavily based on knowledge. By no means do empty boxes signify no skill with its' associated concept. Feel free to add skills as needed.						
Promotion of mental, social and emotional health concepts	Accessing Information	Self Management	Analyzing Influences	Interpersonal Communication	Goal Setting	Decision Making	Advocacy
Explain how to build and maintain healthy family and peer relationships.				Demonstrate effective communication skills that encourage healthy relationships.		Make decisions that enhance or establish healthy relationships.	Advocate for healthy communication skills within relationships
Identify qualities that contribute to a positive self-image.			Analyze influences that may affect self-esteem (e.g., peers, media, adults).		Set goals around increasing positive self-image.		
Identify personal stressors at home, in school and with peers.		Practice managing personal stressors at home, in school, and with			Develop achievable goals to handle stressors		

KNOWLEDGE **SKILLS** → The filled in boxes below are skills that we felt are most appropriate to teach the concept on the left. Some concepts do not have a skill associated with it. That is because it is heavily based on knowledge. By no means do empty boxes signify no skill with its' associated concept. Feel free to add skills as needed.

Promotion of mental, social and emotional health concepts	Accessing Information	Self Management	Analyzing Influences	Interpersonal Communication	Goal Setting	Decision Making	Advocacy
---	-----------------------	-----------------	----------------------	-----------------------------	--------------	-----------------	----------

		peers.			in a healthy way.		
Recognize diversity among people, including disability, gender, race, sexual orientation and body size.		Demonstrate appropriate ways to respect and include others who are different from yourself.					Advocate respect for diversity.
Identify how emotions change during adolescence.	Identify school, home and community resources for mental and emotional health concerns.						
Identify the causes, effects and symptoms of depression, including suicide.	Identify school and community resources that can help a person who is depressed or contemplating suicide.			Communicate to a peer ways of accessing help in a critical situation.			
Explain eating disorders and symptoms.			Identify how food choices are influenced by culture, family, media, technology, peers, body				

<p>KNOWLEDGE</p>	<p>SKILLS → The filled in boxes below are skills that we felt are most appropriate to teach the concept on the left. Some concepts do not have a skill associated with it. That is because it is heavily based on knowledge. By no means do empty boxes signify no skill with its' associated concept. Feel free to add skills as needed.</p>						
<p>Promotion of mental, social and emotional health concepts</p>	<p>Accessing Information</p>	<p>Self Management</p>	<p>Analyzing Influences</p>	<p>Interpersonal Communication</p>	<p>Goal Setting</p>	<p>Decision Making</p>	<p>Advocacy</p>
			<p>image and emotions.</p>				
<p>Identify different types of addictive behaviors, including drug use AND PROBLEM GAMBLING.</p>	<p>Identify school and community resources that provide support for addictive behaviors.</p>		<p>Identify the influences that may encourage young people to try addictive drugs and participate in addictive behaviors.</p>			<p>Use a decision making model to avoid or refuse addictive substances and/or behaviors.</p>	

Oregon department of education top 10 tips for working with schools

1

The best times to approach schools would be the months of October, late January, February and early May.

2

If possible, approach a school with an internal partner, for example a teacher or parent you already have a relationship with. This will legitimize you even more!

3

Working with schools should be a partnership. Explain what you can offer and why you benefit from working with schools.

4

Ask yourself- "Why Should They Care?" When you share your thirty-second spiel over the phone or with a person in the hallway, you need to be to the point. Why are your prevention services important?

5

Use local (school or county) data if possible to talk about prevention in their school.

6

Know the education language. The word "standards" to someone in public health means something very different to a teacher.

7

Align what you are offering to curriculum standards, school policies, raising test scores, increasing attendance, etc.

8

Understand that many teachers and other school staff are overwhelmed. Don't add something to their plate. Consider having them do what they do, but in a different way.

9

Schools are stressed. There is overall a lack of funding, support, resources and pressure to raise test scores. If you can offer a solution (for example, be a resource) you're in!

10

Ask questions. If you don't understand something, explain that you come from a different perspective and schools are a different beast!

10 elements of a model school problem gambling awareness & prevention program

1. Restrictions on gambling included in school's policies and procedures
2. Problem gambling awareness posters, brochures posted in buildings
3. School counselors (and appropriate others) have received an in-service on problem gambling and be able to help or refer a student who needed help or information
4. Problem gambling addressed as part of the healthy choices or ATOD curriculum; included in risk/healthy choices activities and events (teen mazes, assembly speakers, etc.)
5. School utilizes promising practice curricula for problem gambling
6. Fundraisers involving gambling would be minimized or, if used, would always include awareness information about problem gambling
7. Gambling is incorporated into examples in classes such as math (probability/risk), social studies (costs/benefits to society of gambling), health (see #4)
8. In-service on problem gambling provided every five years to school staff
9. PTA or PTO knowledgeable about problem gambling
10. School observes annual problem gambling awareness week in conjunction with local problem gambling prevention and outreach coordinator.

9

Section 9.

9 for Section 9

The faith community and problem gambling

- ⌘ The role of the faith community in addressing problem gambling
- ⌘ Core competencies for clergy
- ⌘ Research on problem gambling and the faith community
- ⌘ A model for a congregational team addiction ministry





The role of the faith community in addressing problem gambling

(Note: This section does not purport to be an exhaustive analysis of problem gambling and the faith community—not all religious groups are reflected, and the views expressed or adapted herein are not necessarily endorsed nor recommended.)

The following is adapted with permission from articles on the faith community and addiction from: Impact! Newsletter, vol. 18, No. 2, March 2000 Minnesota Prevention Resource Center www.emprc.org/impact_issues/mar_2000.pdf

Problem gambling is significant and cuts across age, race, gender, culture, geographic area and social and economic backgrounds. There are opportunities to deal with or prevent gambling problems in faith communities.

Members of faith communities often provide a sense of belonging to one another. In addition, they accept that they have responsibilities toward each other, their faith and themselves. They look to and respect the opinions and guidance of their faith leader. This creates an environment that is ideal for addressing gambling problems.

Prevention and recovery are key roles

The faith community has two clear roles in dealing with gambling problems: prevention and recovery. Prevention focuses on those who do not have specific gambling problems. The goals of prevention are to:

- Support abstinence as a healthy and positive decision.
- Delay the onset of first and experimental gambling by young people.

- Prevent low-risk patterns of gambling from becoming high risk.
- Reduce current high-risk gambling patterns.

A ministry of prevention can support young people. This can be done in several ways, including teaching parents skills to communicate with their children about risk behaviors such as gambling. Many studies have revealed how great a deterrent parents can be. Though they often feel powerless, parents often have more influence over their teens than they realize. Unfortunately many parents miss the chance to prevent or delay their children's gambling because they don't know how.

Ministries of prevention can help adults clarify their own guidelines for gambling, equipping parents to give clear, consistent, age-appropriate messages to their children. There are more ways that faith communities can address their goals of prevention. These include strategies to:

- **Provide important information that members need to make healthy decisions about gambling.** While information alone is not likely to prevent problems, it is an important part of a comprehensive prevention effort. People of all ages need accurate information about responsible gambling and/or how to prevent gambling problems, and where to get help if a problem develops. It is equally important that people learn of their faith tradition's beliefs and teachings about gambling.
- **Teach members to identify and counteract social influences that encourage problem gambling.** Help people recognize the power of advertising, and the influence of friends or co-workers.
- **Encourage and support gambling-free activities and situations for members.** These activities go beyond physical skills, heavily stressing personal, social and spiritual dynamics.

- Provide members with **instruction and practice in personal and social skills that resist pressures to gamble excessively.**
- **Establish guidelines for safe, healthy and appropriate behavior** for members within the congregation¹, families, social institutions and the community. Congregations can provide opportunities for members of all ages to discuss and develop guidelines.
- **Establish and maintain community-based prevention efforts** that reflect diversity and address the unique needs, interests and concerns of each community.
- Support community policies that **restrict advertising and access to gambling by youth.**

A faith community should also address the issue of recovery. Because faith community leaders are involved in spiritual and pastoral care, it is easy to see their role in responding to individuals and families who are experiencing problems. However, all faith community members can play a helpful role. Referrals, support groups, social action and community involvement are some examples of activities that help support individuals through recovery.

The objective is to create a safe, caring environment where members or other persons served by the congregation can share their concerns. The primary role of the congregation regarding recovery is to develop a system to:

- Communicate to members that there is hope and help for gambling problems.
- Identify members in need of assistance, whether by self-referral, referral by a family member or friend, or by observing a person's behavior.

- Respond or intervene in a positive, helpful and confidential way.
- Match member needs to appropriate congregational or community resources.
- Support the member and member's family throughout the process of recovery.

Use local resources for assessment and treatment

Most faith communities rely on community resources for diagnosis, assessment and treatment of gambling problems. Congregations with a thoughtful plan in place find it easier to respond, refer and support members and their families before, during and after treatment. Hosting Gamblers Anonymous and Gam-Anon meetings can be helpful, as well as offering creative programs that support recovery and nurture spiritual healing and growth. Some faith communities are willing to help and support persons in need. They might do this by planning a special day of prayer and educational activities, and by acknowledging and celebrating recovery in a visible way.

¹Although this word may have Christian connotations, the authors noted that they used it to mean people of any faith congregating or coming together.

Barriers to faith community involvement

A number of factors may act as barriers to faith community involvement:

- There is inconsistency about whether gambling is harmful. Many members of the faith community consider gambling a moral weakness, sin or personal inadequacy. For others, gambling is accepted as a harmless activity, and promoted as a way to generate funds for good causes (raffles, bingo games, etc.)

- The focus on a medical model of treatment seems to place addictions, including gambling, beyond the direct attention of the faith community. Yet, even within the medical model, most treatment centers acknowledge the spiritual dimension with an emphasis on Gamblers Anonymous and other 12-step mutual help groups.
- Many congregations have not acknowledged the need to address problem gambling. This can be caused by a lack of education or preparation regarding the issue; demands on clergy and leaders for competing programs; the stigma associated with problem gambling; a lack of clergy and leadership guidelines about participating in activities that may be considered gambling; a negative experience in trying to help a family or individual with problems; a lack of awareness about problem gambling; or a lack of information on workable models for congregational response.

Congregations also offer many opportunities to share information and to develop essential skills for health and well-being. All these factors support the need for the faith community to assume an active role in addressing problem gambling.

A model for a congregational team addiction ministry

This model was presented in an *"Impact!"* newsletter article on the role of the faith community. It is presented as one example of an approach that could be taken.

STEP 1 - Congregation clergy, youth directors, social ministries staff and key lay people attend an introductory one-day training, *The Role of the Faith Community in Addiction Prevention*. They learn about the role of the congregation in prevention, intervention and recovery and how to take the first steps toward initiating a recovery ministry.

STEP 2 - Participants from the introductory training go back to their own congregation and conduct an exploratory meeting to determine interest in a recovery ministry.

STEP 3 - Congregational representatives conduct a survey to determine the needs of the congregation, to identify volunteers for the team and to gain support for the ministry.

STEP 4 - Representatives inventory the congregation to identify the resources of the congregation and to determine how to integrate the ministry into the life of the congregation.

STEP 5 - Team members attend a *Congregational Team Training*, which provides basic information about prevention, intervention and recovery; introduces them to community resource people and programs; and assists them in developing a preliminary plan for their congregation.

STEP 6 - Teams return to their congregation and initiate a team ministry, using a step-by-step guide that includes tools for assessing and planning congregational initiatives. The manual includes a ready-to-use survey, inventory, team planning forms, plus sample team brochures, handbooks and worship services.

STEP 7 - Congregational teams work with community resources and continue their relationships with other teams through ongoing consultation, support meetings and additional training.

Source: www.emprc.org/impact_issues/mar_2000.pdf

Core competencies for clergy and other pastoral ministers in addressing alcohol and drug dependence (and/or problem gambling) and the impact on family members

These competencies are identified by the Substance Abuse and Mental Health Services Administration (SAMHSA) as a guide to knowledge, attitudes and skills essential for ministers to meet the needs of persons with alcohol or drug dependence and their family members. Problem gambling has been added in parentheses where relevant.

1. Be aware of the:

- Generally accepted definition of alcohol and drug dependence (problem gambling)
- Societal stigma attached to alcohol and drug dependence (problem gambling)

2. Be knowledgeable about the:

- Signs of alcohol and drug dependence (problem gambling)
- Characteristics of withdrawal
- Effects on the individual and the family
- Characteristics of the stages of recovery

3. Be aware that possible indicators of the disease may include marital conflict, family violence (physical, emotional, and verbal), suicide, hospitalization, or encounters with the criminal justice system (financial crises for problem gambling).

4. Understand that addiction erodes and blocks religious and spiritual development; and be able to effectively communicate the importance of spirituality and the practice of religion in recovery, using the scripture, traditions, and rituals of the faith community.

5. Be aware of the potential benefits of early intervention to the:

- Addicted person
- Family system
- Affected children

6. Be aware of appropriate pastoral interactions with the:

- Addicted person
- Family system
- Affected children

7. Be able to communicate and sustain:

- An appropriate level of concern
- Messages of hope and caring

8. Be familiar with and utilize available community resources to ensure a continuum of care for the:

- Addicted person
- Family system
- Affected children

9. Have a general knowledge of and, where possible, exposure to:

- The 12-step programs – AA, NA, Al-Anon, Nar-Anon, Alateen, A.C.O.A., etc. (Gam-Anon, Gambler's Anonymous)
- Other groups

10. Be able to acknowledge and address values, issues, and attitudes regarding alcohol and drug use and dependence (gambling and problem gambling) in:

- Oneself
- One's own family

11. Be able to shape, form, and educate a caring congregation that welcomes and supports persons and families affected by alcohol and drug dependence (problem gambling).

12. Be aware of how prevention strategies can benefit the larger community.

Adapted from: Core Competencies for Clergy and Other Pastoral Ministers in Addressing Alcohol and Drug Dependence and the Impact On Family Members DHHS Pub. No. XXXX. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, [2004].

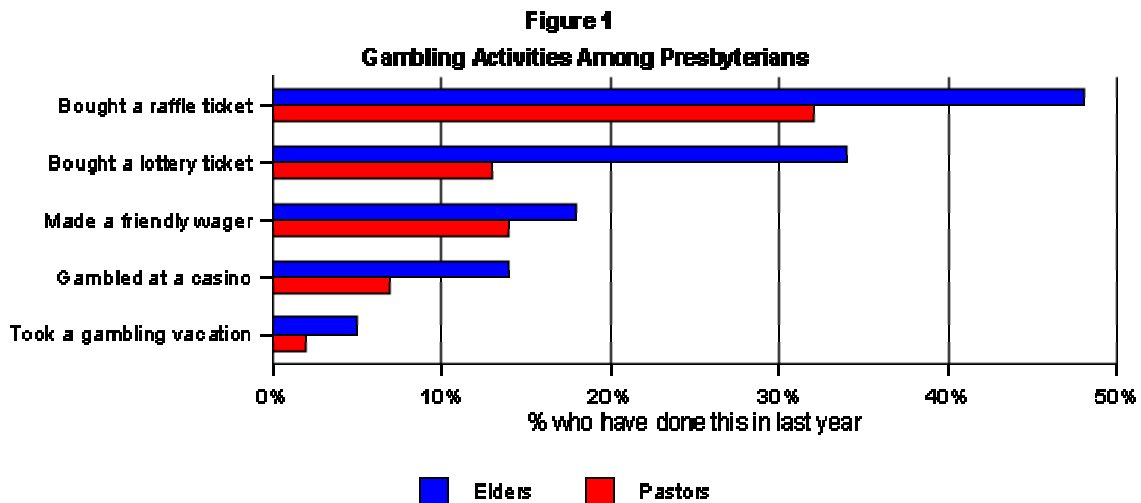
Research on problem gambling and the faith community

1. Presbyterian panel summary: Gambling and the Christian Faith: February 2000 Survey

Results based on a survey of 1,028 Presbyterian clergy: 812 from pastors and 216 from specialized clergy.

Access to legal gambling

- Around two in three members (64 percent) and elders (65 percent) and almost one-half of pastors (44 percent) and specialized clergy (49 percent) report participating in one or more forms of legal gambling in the year prior to the survey.



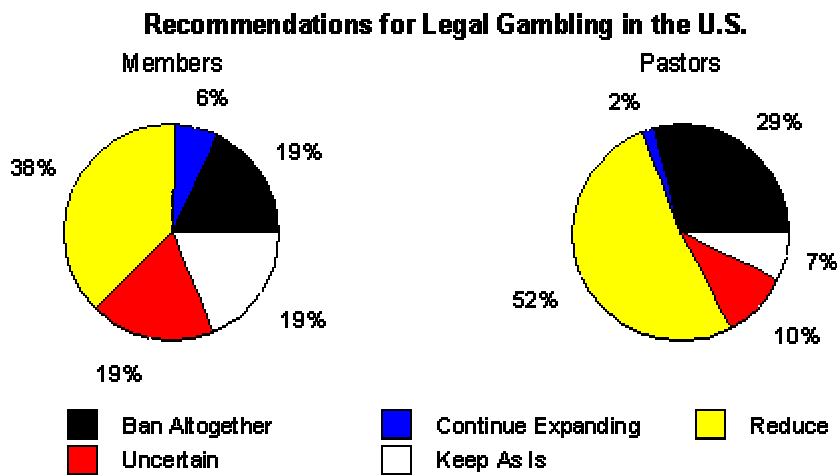
Approval and disapproval

- In every panel group, many more panelists disapprove than approve of legal gambling. Seventy-eight percent of pastors and 72 percent of specialized clergy disapprove of gambling, compared to 48 percent of members and 53 percent of elders.
- Panelists said they approve of gambling because of its entertainment value and as a source of government revenue.
- Fifty-five percent of members, 53 percent of elders, 41 percent of pastors and 48 percent of specialized

clergy agree that "gambling can be a form of entertainment that, if done in moderation, is no better and no worse than other activities"

- Panelists disapprove of gambling because they believe it is addictive and that it causes problems for families and less affluent individuals.
- Majorities in all groups favor banning or reducing gambling, although more in each group would rather see gambling reduced than banned. (see Fig. 2).

Figure 2

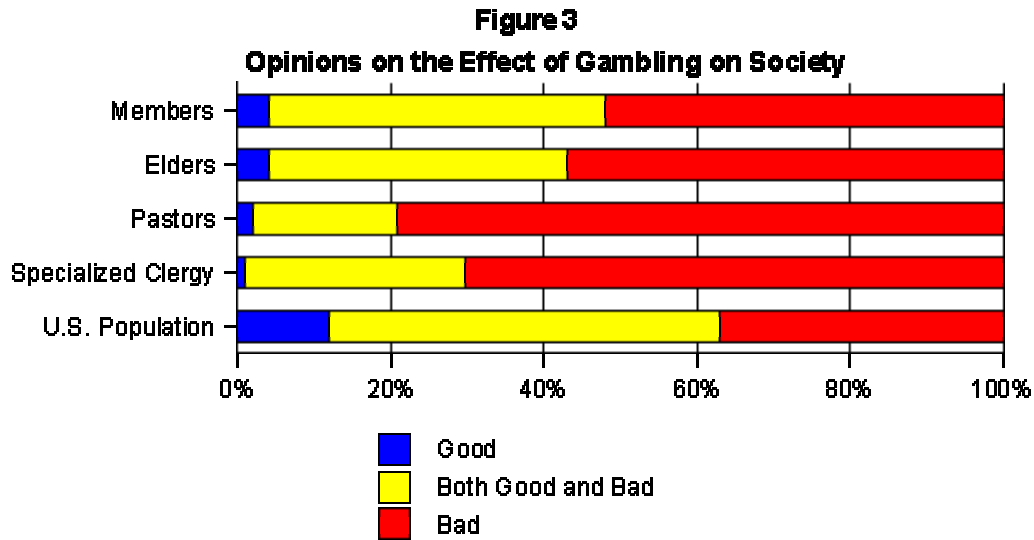


Problem gambling

- A third of members and elders know someone who has or has had a gambling problem.
- Sixty percent of pastors report that gambling has caused problems for one or more members in their congregation.

Social consequences

- Most of those sampled said that the effects of legal gambling are bad, rather than good for society. But, minorities in each sample think the effects are about equally good and bad. (See Fig. 3.)



The congregation

- Few have taken actions "to oppose, reduce, or ban gambling" locally during the last five years. The most common action taken by those who did was "to oppose additional legal gambling."
- Few congregations have ministries "to help individuals and families affected by compulsive gambling." Only two percent of members and elders and five percent of pastors report such ministries.

Source:

www.gamblingresearch.org/contentdetail.sz?cid=2096&pageid=839
<http://www.pcusa.org/research/panel/Gamble.htm>

2. Religion, spirituality and associations with problem gambling

New Zealand Journal of Psychology, Jul 2006 by Clarke, Dave, Tse, Samson, Abbott, Max, Townsend, Sonia, Et al

This study included the following summaries of research:

Religion and problem gambling

- Very little is known about problem gambling among people with Jewish, Islamic or Buddhist affiliations,

perhaps because these religions have traditions which strongly opposed gambling (Marlatt, 2002; Neusner, Brockopp, & Sonn, 2000; Rosenthal, 1975).

- A high level of gambling by Catholics has been noted in other studies and Catholic affiliation has emerged as a risk factor for problem gambling (Kallick-Kaufmann, 1987; Walker, 1992). These findings are consistent with the more permissive view that the Catholic Church has taken toward gambling by members and within society (Abbott & Volberg, 2000).
- In the 1999 New Zealand national survey (Abbott & Volberg, 2000) Catholics reported higher average weekly gambling expenditures than other religious groups. They also were over represented among track bettors and frequent participants in continuous gambling activities, in which winnings can be risked again immediately in the same session.
- As outlined in Abbott and Volberg (1999) most Protestant denominations historically have taken a strong moral stance against gambling and lobbied for legislative and other restrictions on gambling throughout the mid-19th and early 20th centuries.
- In the 1999 New Zealand survey, Methodists and a variety of fundamentalist Protestant denominations had a low rate of problem gambling. Large numbers reported never or rarely gambling and, relative to other religious groups, few reported gambling weekly or more often.
- Catholics and other Christians retained their respective high- and low-risk rankings when other social, cultural and demographic risk factors were

incorporated and controlled for in multivariate analyses.

- Problem gambling among some indigenous, ethnic minority and immigrant populations illustrates the importance of research on religious aspects that might lead to development of problem gambling in different cultural contexts (Abbott & Volberg, 2000). For example, in New Zealand people with non-Christian religious affiliations resemble Christians who are non- or infrequent gamblers -- and relatively few gamble regularly (Abbott & Volberg, 2000). However, those who do gamble regularly have a particularly high average expenditure and are at significant risk for problem gambling. Many people in the non-Christian religious category were recent migrants and Asian people. More than half of the problem gamblers were of Maori, Pacific or Asian ethnicity.
- Religious affiliation might play important yet different roles in fostering and protecting against the development of problem gambling in each of these groups.

Spirituality and problem gambling

- Some studies have found lower rates of addictive disorders among people with stronger religious and/or spiritual engagement (e.g., Kendler, Gardner, & Prescott, 1997).
- Spiritual factors and religious experiences have also been found to influence recovery from problem gambling, predicting abstinence from gambling and subjective well-being (Walsh, 2001).

- Some indication that spirituality is associated with gambling comes from studies of multiple risk factors of problem gambling. Clarice (2004) found that amotivation, which is displayed by a gambler who continues to gamble with no real purpose and with little sense of meaning, accounted for a significant, but small (7 percent) amount of variance in problem gambling, after controlling for gambling frequency, number of activities, parents' gambling, impulsivity, locus of control, and the motivations for rewards, stimulation, accomplishment, social esteem and tension release. Another study discovered that among other factors, people with problem gambling indicated that they lacked direction in their lives (Turner, Sharp, Zengeneh, & Spence, 2003).
- From studies of interventions for substance abuse and problem gambling (Orford 2001; Orford, Morison, & Somers 1996), there seem to be underlying processes common to different treatment programs and theoretical orientations that could explain recovery. In addition to support from others and the reinforcements of self-liberation such as day-to-day commitment to quit and self-control or willpower, moral reform seems to be important, at least for some people with severe substance abuse problems. Common processes include admission of having a problem and needing help, symbolic death, surrender and reeducation which lead to experiential peace (lack of negative affectivity), changes in beliefs, and character change towards conscientiousness, selflessness, humility, ego-reduction, and forgiveness.
- In programs such as Gamblers Anonymous, recovery from addiction is a long-term commitment that follows the processes of admission that there is a problem, resistance, ego-reduction, surrender,

compliance, re-education and maintenance. Abusers must genuinely want to solve their problems, to work hard, to make a commitment to avoid the addictive activities, and to honestly comply with formal or informal treatment plans (Sussman & Ames, 2001).

- In comparing recoveries from gambling problems to recoveries from alcohol problems, one study (Hodgins & el-Guebaly, 2000) ascertained factors perceived to initiate and maintain recoveries, the role of life events in recovery, and differences between natural and assisted recoveries. The major reason for people not seeking treatment for either addiction was the desire to handle the problem on one's own, which perhaps reflects the stigmatization, embarrassment, shame and loss of self-esteem associated with alcohol and gambling addiction. The recovered gamblers gave reasons for maintaining the changes which were similar to the reasons given by recovered alcoholics and drug abusers. These reasons include not liking to see themselves as having a problem, and self-liberating behaviours such as day-to-day commitment to quit and self-control or willpower, especially for naturally-recovered gamblers and drinkers.

Additional faith community resources

Note: These resources are listed only to show what can be found on a simple internet search; their inclusion should not be considered an endorsement or recommendation.

Sample sermons on gambling:

www.preachingtodaysermons.com/ezricprobwit.html

www.faithfulfriends.org/gambling.html

www.bibletruths.net/Sermons/BTS0007.htm

Other resources:

Gambling and Christianity article from About.com
atheism.about.com/library/FAQs/christian/blxtn_gambling.htm

Gambling and God's People A Pastoral Study Guide on Charitable Gambling (Catholic)
www.dow.org/documents/pastoral_gambling_jv.doc

Addiction and Recovery in the Faith Community:
www.taadas.org/Clergy/Considerations%20for%20Clergy.htm

"Change to Change" Christian video recovery program:
caringchurches.com/display_article.asp?objectID=12

Gambling Recovery Ministries: S. Indiana United Methodist
grmumc.org/index.html

Roundtable on Religion and Social Welfare Policy:
www.religionandsocialpolicy.org

Section 10

Section 10.

Screening & diagnostics

- ⌘ Lie-Bet
- ⌘ South Oaks Gambling Screen (SOGS)
- ⌘ SOGS for adolescents (SOGS-RA)
- ⌘ DSM-IV diagnostic criteria
- ⌘ Gamblers Anonymous 20 questions
- ⌘ NODS/NORC screening tool
- ⌘ Canadian Screening Tool

Included in this section are several screening / diagnostic tools. The South Oaks Gambling Screen (SOGS) is also available in Spanish in Section 7 of this guide. For alternate language formats of the SOGS, contact Greta Coe, AMH Resource and Technical Assistance Coordinator, at Greta.L.Coe@state.or.us / 503.945.6187.



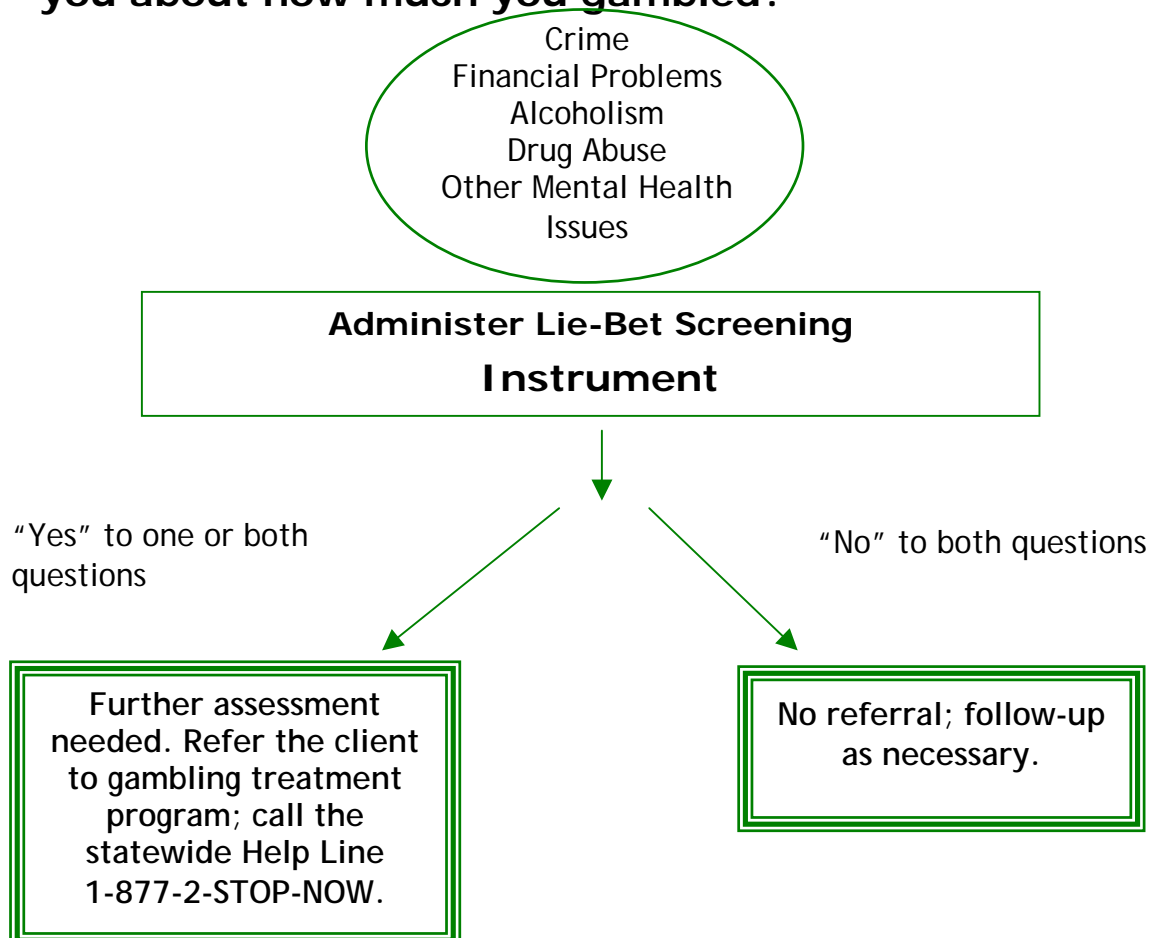
Lie-bet tool to rule out pathological gambling



The Lie-Bet tool (Johnson et al., 1988) has been deemed valid and reliable for ruling out pathological gambling behaviors. The Lie-Bet's two questions consistently differentiate between pathological gambling and non-problem gambling and are useful in screening to determine whether a longer tool (e.g., SOGS, DSM-IV) should be used in diagnostics.

Lie-Bet screening instrument:

1. **Have you ever felt the need to bet more and more money?**
2. **Have you ever had to lie to people important to you about how much you gambled?**



South Oaks Gambling Screen (SOGS)



1. Indicate which of the following types of gambling you have done in your lifetime. For each type, mark one answer: "not at all," "less than once a week," or "once a week or more."

Not at all	Less than once a week	Once a week or more	
_____	_____	_____	a. played cards for money
_____	_____	_____	b. bet on horses, dogs or other animals (in off-track betting, at the track or with a bookie)
_____	_____	_____	c. bet on sports (parley cards, with a bookie, or at jai alai)
_____	_____	_____	d. played dice games (including craps, over and under, or other dice games) for money
_____	_____	_____	e. went to casino (legal or otherwise)
_____	_____	_____	f. played the numbers or bet on lotteries
_____	_____	_____	g. played bingo
_____	_____	_____	h. played the stock and/or commodities market
_____	_____	_____	i. played slot machines, poker machines or other gambling machines
_____	_____	_____	j. bowled, shot pool, played golf or played some other game of skill for money

2. What is the largest amount of money you have ever gambled with any one day?

_____ never have gambled

_____ more than \$100 up to \$1000

___ \$10 or less

___ more than \$10 up to \$100

___ more than \$1000 up to \$10,000

___ more than \$10,000

3. Do (did) your parents have a gambling problem?

___ both my father and mother gamble (or gambled) too much

___ my mother gambles (or gambled) too much

___ my father gambles (or gambled) too much

___ neither gambles (or gambled) too much

4. When you gamble, how often do you go back another day to win back money you lost?

___ never

___ most of the time I lost

___ some of the time (less than half the time) I lost

___ every time I lost

5. Have you ever claimed to be winning money gambling but weren't really? In fact, you lost?

___ never (or never gamble)

___ yes, most of the time

___ yes, less than half the time I lost

6. Do you feel you have ever had a problem with gambling?

___ no

___ yes

___ yes, in the past, but not now

	Yes	No
7. Did you ever gamble more than you intended?	_____	_____
8. Have people criticized your gambling?	_____	_____
9. Have you ever felt guilty about the way you gamble or what happens when you gamble?	_____	_____
10. Have you ever felt like you would like to stop gambling but didn't think you could?	_____	_____
11. Have you ever hidden betting slips, lottery tickets, gambling money, or other signs of gambling from your spouse, children, or other important people in you life?	_____	_____
12. Have you ever argued with people you like over how you handle money?	_____	_____
13. (If you answered "yes" to question 12): Have money arguments ever centered on your gambling?	_____	_____
14. Have you ever borrowed from someone and not paid them back as a result of your gambling?	_____	_____
15. Have you ever lost time from work (or school) due to gambling?	_____	_____
16. If you borrowed money to gamble or to pay gambling debts, where did you borrow from? (Check "yes" or "no" for each)	_____	_____
a. from household money	_____	_____
b. from your spouse	_____	_____
c. from other relatives or in-laws	_____	_____
d. from banks, loan companies or credit unions	_____	_____
e. from credit cards	_____	_____
f. from loan sharks (Shylocks)	_____	_____
g. your cashed in stocks, bonds or other securities	_____	_____
h. you sold personal or family property	_____	_____
i. you borrowed on your checking account (passed bad checks)	_____	_____
j. you have (had) a credit line with a bookie	_____	_____
k. you have (had) a credit line with a casino	_____	_____

Scoring rules for SOGS

Scores are determined by adding up the number of questions that show an "at risk" response, indicated as follows. If you answer the questions above with one of the following answers, mark that in the space next to that question:

Questions 1-3 are not counted

___ Question 4: most of the time I lost, or every time I lost

___ Question 5: any "yes" response

___ Question 6: any "yes" response

___ Question 7: yes

___ Question 8: yes

___ Question 9: yes

___ Question 10: yes

___ Question 11: yes

Question 12 is not counted

___ Question 13: yes

___ Question 14: yes

___ Question 15: yes

___ Question 16a: yes

___ Question 16b: yes

___ Question 16c: yes

___ Question 16d: yes

___ Question 16e: yes

___ Question 16f: yes

___ Question 16g: yes

___ Question 16h: yes

___ Question 16i: yes

Questions 16j and 16k are not counted

Total = _____

(20 questions are counted)

**** 3 or 4 = Potential pathological gambler (Problem gambler)**

**** 5 or more = Probable pathological gambler**

South Oaks gambling screen: revised for adolescents (SOGS-RA)



The 12 scored items for the SOGS-RA from Winters, K.C., Stinchfield R.D. and Fulkerson, J. (1993a) are listed below.

a. How often have you gone back another day to try and win back money you lost gambling?

Every time/Most of the time/Some of the time/Never

b. When you were betting, have you ever told others you were winning money when you weren't?

Yes/No

c. Has your betting money ever caused any problems for you such as arguments with family and friends, or problems at school or work?

Yes/No

d. Have you ever gambled more than you had planned to?

Yes/No

e. Has anyone criticized your betting, or told you that you had a gambling problem whether you thought it true or not?

Yes/No

f. Have you ever felt bad about the amount of money you bet, or about what happens when you bet money?

Yes/No

g. Have you ever felt like you would like to stop betting, but didn't think you could?

Yes/No

h. Have you ever hidden from family or friends any betting slips, IOUs, lottery tickets, money that you won, or any signs of gambling?

Yes/No

i. Have you had money arguments with family or friends that centered on gambling?

Yes/No

j. Have you borrowed money to bet and not paid it back?

Yes/No

k. Have you ever skipped or been absent from school or work due to betting activities?

Yes/No

l. Have you borrowed money or stolen something in order to bet or to cover gambling activities?

Yes/No

Scoring rules for SOGS-RA

Each item is scored either 1 (affirmative) or 0 (nonaffirmative). Item "a" is scored 1 if respondent indicates "every time" or "most of the time" and is scored 0 otherwise. Calculations for broad and narrow rates come from Winters, Stinchfield and Kim, 1995.

Calculation of Narrow Rates

Level 0 = No past year gambling.

Level 1 = SOGS-RA score of _ 1

Level 2 = SOGS-RA score of 2 or 3

Level 3 = SOGS-RA score of _ 4

Calculation of Broad Rates

Level 0 = No past year gambling

Level 1 = Gambling less than daily and SOGS-RA score = 0, OR, less than weekly gambling and SOGS-RA score _ 1.

Level 2 = At least weekly gambling and SOGS-RA score _ 1 OR gambling less than weekly and SOGS-RA score _ 2.

Level 3 = At least weekly gambling + SOGS-RA score _ 2 OR daily gambling

Winters, K.C., Stinchfield, R.D., & Fulkerson, J. (1993). Toward the development of an adolescent problem severity scale. *Journal of Gambling Studies*, 9, 63-84.



DSM-IV diagnostic criteria

The following criteria are from the DSM-IV for 312.31 (Pathological Gambling):

A. Persistent and recurrent maladaptive gambling behavior as indicated by at least five of the following:

1. Is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)
2. Needs to gamble with increasing amounts of money in order to achieve the desired excitement
3. Has repeated unsuccessful efforts to control, cut back, or stop gambling
4. Is restless or irritable when attempting to cut down or stop gambling
5. Gambles as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression).
6. After losing money gambling, often returns another day in order to get even ("chasing" one's losses)
7. Lies to family members, therapist, or others to conceal the extent of involvement with gambling
8. Has committed illegal acts, such as forgery, fraud, theft, or embezzlement, in order to finance gambling
9. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
10. Relies on others to provide money to relieve a desperate financial situation caused by gambling

B. The gambling behavior is not better accounted for by a Manic Episode.

American Psychiatric Association. (1994). *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*. Washington, D.C.: Author.

Gamblers Anonymous 20 questions

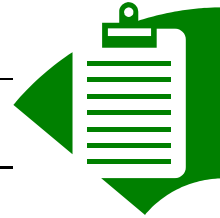


The following is a popular tool used to assess and educate people about problem gambling. Please note that the GA-20 is not recognized as a scientifically valid diagnostic tool. This screen is better thought of as an educational tool for raising awareness of problem gambling behaviors.

1. Do you find yourself constantly bothered by bill collectors?
2. Is the person in question often away from home for long, unexplained periods of time?
3. Does this person ever lose time from work due to gambling?
4. Do you feel this person cannot be trusted with money?
5. Does the person in question faithfully promise to stop gambling: beg, plead for another chance, yet gamble again and again?
6. Does this person ever gamble longer than he or she intended to, until the last dollar is gone?
7. Does this person immediately return to gambling to try to recover losses or win more?
8. Does this person ever gamble to get money to solve financial difficulties, or have unrealistic expectations that gambling will bring the family material comfort and wealth?
9. Does this person borrow money with which to gamble or to pay gambling debts?
10. Has this person's reputation ever suffered due to gambling, even to the extent of committing illegal acts to finance gambling?
11. Have you come to the point of hiding money needed for living expenses, knowing that you and the rest of the family may go without food or clothing if you do not?
12. Do you search this person's clothing or go through his or her wallet when the opportunity presents itself or otherwise check on his or her activities?

13. Do you hide the gambler's money?
14. Have you noticed a personality change in the gambler as his or her gambling progresses?
15. Does the person consistently lie to cover up gambling activities?
16. Does this person use guilt induction as a method of shifting responsibility for his or her gambling to you?
17. Do you attempt to anticipate this person's mood to try to control his or her life, seeking some stability in your own?
18. Does this person ever suffer from remorse or depression due to gambling? Sometimes to the point of self-destruction?
19. Has the gambling ever brought you to the point of threatening to break up the family unit?
20. Do you feel that your life together with the gambler has become a nightmare?

NODS/NORC screening tool



NORC DSM-IV Screen for Gambling Problems

The screen is set up to run first a lifetime screen for all items and then ask about the past year only for those items endorsed for lifetime.

How to score the items:

Lifetime: Add 1 point for every YES to any of the following items:

1 or 2, 3, 5, 7, 8 or 9, 10, 12, 13, 14 or 15 or 16, 17

Past year: Add 1 point for every YES to any of the following items:

18 or 19, 20, 22, 24, 25 or 26, 27, 29, 30, 31 or 32 or 33, 34

If gambler responds YES to more than one item in a response cluster (e.g., "8 or 9"), count them together as a single point.

Under the NODS typology

- a gambler who scores zero points is a lifetime or past-year Type B gambler, and
- a gambler who scores a 1 or 2 is a lifetime or past-year Type C gambler.
- Scoring a 3 or 4 would mean one is a lifetime or past-year Type D gambler, which corresponds to what certain studies have called a "possible pathological gambler" or "problem gambler."
- A gambler who scores 5 or more on the NODS is a lifetime or past-year Type E gambler; by DSM-IV criteria, this person is a "probable pathological gambler."

LIFETIME PROBLEMS

1. Have there ever been periods lasting two weeks or longer when you spent a lot of time thinking about your gambling experiences or planning out future gambling ventures or bets?
YES NO
2. Have there ever been periods lasting two weeks or longer when you spent a lot of time thinking about ways of getting money to gamble with?
YES NO
3. Have there ever been periods when you needed to gamble with increasing amounts of money or with larger bets than before in order to get the same feeling of excitement?
YES NO
4. Have you ever tried to stop, cut down, or control your gambling?
YES GO TO 5 NO GO TO 8

5. On one or more of the times when you tried to stop, cut down, or control your gambling, were you restless or irritable?
YES NO
6. Have you ever tried but not succeeded in stopping, cutting down, or controlling your gambling?
YES GO TO 7 NO GO TO 8
7. Has this happened three or more times?
YES NO
8. Have you ever gambled as a way to escape from personal problems?
YES NO
9. Have you ever gambled to relieve uncomfortable feelings such as guilt, anxiety, helplessness, or depression?
YES NO
10. Has there ever been a period when, if you lost money gambling one day, you would return another day to get even?
YES NO
11. Have you ever lied to family members, friends, or others about how much you gamble or how much money you lost on gambling?
YES GO TO 12 NO GO TO 13
12. Has this happened three or more times?
YES NO
13. Have you ever written a bad check or taken something that didn't belong to you from family members or anyone else in order to pay for your gambling?
YES NO
14. Has your gambling ever caused serious or repeated problems in your relationships with any of your family members or friends?
YES NO
15. ANSWER ONLY IF YOU ARE IN SCHOOL
Has your gambling caused you any problems in school, such as missing classes or days of school or your grades dropping?
YES NO
16. Has your gambling ever caused you to lose a job, have trouble with your job, or miss out on an important job or career opportunity?
YES NO
17. Have you ever needed to ask family members or anyone else to loan you money or otherwise bail you out of a desperate money situation that was largely caused by your gambling?
YES NO

PAST YEAR PROBLEMS: COMPLETE THIS SECTION ONLY IF YOU HAVE GAMBLED IN THE PAST YEAR.

18. [ANSWER ONLY IF 1=YES]
Since [current month][last year], have there been any periods lasting two weeks or longer when you spent a lot of time thinking about your gambling experiences or planning future gambling ventures or bets?
YES NO

19. [ANSWER ONLY IF 2=YES]
Since [current month][last year], have there been periods lasting two weeks or longer when you spent a lot of time thinking about ways of getting money to gamble with?
YES NO
20. [ANSWER ONLY IF 3=YES]
Since [current month][last year], have there been periods when you needed to gamble with increasing amounts of money or with larger bets than before in order to get the same feeling of excitement?
YES NO
21. [ANSWER ONLY IF 4=YES]
Since [current month][last year], have you tried to stop, cut down, or control your gambling?
YES GO TO 22 NO GO TO 25
22. [ANSWER ONLY IF 5=YES]
Since [current month][last year], on one or more of the times when you tried to stop, cut down, or control your gambling, were you restless or irritable?
YES NO
23. [ANSWER ONLY IF 6=YES]
Since [current month][last year], have you tried but not succeeded in stopping, cutting down, or controlling your gambling?
YES NO
24. [ANSWER ONLY IF 7=YES]
Since [current month][last year], has this happened three or more times?
YES NO
25. [ANSWER ONLY IF 8=YES]
Since [current month][last year], have you gambled as a way to escape from personal problems?
YES NO
26. [ANSWER ONLY IF 9=YES]
Since [current month][last year], have you gambled to relieve uncomfortable feelings such as guilt, anxiety, helplessness, or depression?
YES NO
27. [ANSWER ONLY IF 10=YES]
Since [current month][last year], has there ever been a period when, if you lost money gambling on one day, you would often return another day to get even?
YES NO
28. [ANSWER ONLY IF 11=YES]
Since [current month][last year], have you more than once lied to family members, friends, or others about how much you gamble or how much money you lost on gambling?
YES GO TO 29 NO GO TO 30
29. [ANSWER ONLY IF 12=YES]
Has this happened three or more times?
YES NO
30. [ANSWER ONLY IF 13=YES]

Since [current month][last year], have you written a bad check or taken money that didn't belong to you from family members or anyone else in order to pay for your gambling?

YES NO

31. [ANSWER ONLY IF 14=YES]

Since [current month][last year], has your gambling caused serious or repeated problems in your relationships with any of your family members or friends?

YES NO

32. [ANSWER ONLY IF 15=YES]

Since [current month][last year], has your gambling caused you any problems in school, such as missing classes or days of school or getting worse grades?

YES NO₃

33. [ANSWER ONLY IF 16=YES]

Since [current month][last year], has your gambling caused you to lose a job, have trouble with your job, or miss out on an important job or career opportunity?

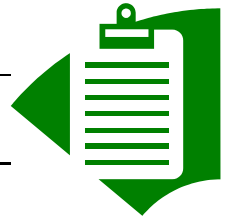
YES NO

34. [ANSWER ONLY IF 17=YES]

Since [current month][last year], have you needed to ask family members or anyone else to loan you money or otherwise bail you out of a desperate money situation that was largely caused by your gambling?

YES NO

Canadian screening tool



[Download PDF: Canadian Problem Gambling Index](#)

Thinking about the last 12 months...

1. Have you bet more than you could really afford to lose?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

2. Still thinking about the last 12 month, have you needed to gamble with larger amounts of money to get the same feeling of excitement?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

3. When you gambled, did you go back another day to try to win back the money you lost?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

4. Have you borrowed money or sold anything to get money to gamble?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

5. Have you felt that you might have a problem with gambling?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

6. Has gambling caused you any health problems, including stress or anxiety?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

7. Have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

8. Has your gambling caused any financial problems for you or your household?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

9. Have you felt guilty about the way you gamble or what happens when you gamble?

Never=0 Sometimes=1 Most of the time=2 Almost always=3

Scoring Instructions for the CPGI

Total your score. The higher your score the greater the risk that your gambling is a problem.

Score the following for each response:

- never = 0
- sometimes = 1
- most of the time = 2
- almost always = 3

Scores for the nine items are summed, and the results are interpreted as follows:

- 0 = Non-problem gambling.
- 1-2 = Low level of problems with few or no identified negative consequences.
- 3-7 = Moderate level of problems leading to some negative consequences.
- 8 or more = Problem gambling with negative consequences and a possible loss of control.

Non-problem gambling: Score of 0 on the CPGI.

This score means that there are no identified negative consequences of gambling. You may be gambling at low levels or not at all, or you may be gambling at social levels that are not problematic.

- Recommended Reading: Winning Ways to Keep Gambling Safe

Low risk gambling: Score of 1 or 2 on the CPGI

This score means that you are probably gambling at levels that are not leading to negative consequences. If you gamble frequently and/or have at least two of the vulnerability factors listed below, this score may indicate enough risk to be explored.

- Recommended Reading: Winning Ways to Keep Gambling Safe

Moderate risk gambling: Score between 3 and 7 on the CPGI

This score means that you are gambling at levels that may or may not be leading to negative consequences. This score indicates a level of risk that should be explored, particularly if you gamble frequently and/or have three or four of the vulnerability factors listed below.

- Recommended Reading: A Tool to Help Monitor your Gambling, Winning Ways to Keep Gambling Safe

Problem gambling: Score between 8 and 27 on the CPGI

This score means that you are gambling at levels that are leading to negative consequences. You may have lost control of your gambling behavior. The higher your score, the heavier your gambling, and the more vulnerability factors you have (see list below), the more severe your problem is likely to be. Examining your gambling behavior and its consequences is definitely encouraged.

- **Recommended Reading:** [Ontario Problem Gambling Helpline Contact Information](#), [Problem Gambling: The Issues, The Options](#), [How to Quit or Reduce Your Gambling: A Self Help Workbook](#)

Some vulnerability factors

- Mistaken beliefs about the odds of winning at gambling
- A 'big win' early in the person's gambling history
- A history of drug, alcohol, gambling or overspending problems
- A family history of drug, alcohol, gambling or overspending problems
- A history of mental health problems, particularly depression, stress or trauma
- Loneliness, chronic boredom or lack of leisure activities
- A habit of using gambling or substances to cope with negative feelings or events
- A tendency toward impulsive behavior
- Financial problems

11

Section 11

Section 11.

Problem gambling and the military

- ⌘ Prevalence
- ⌘ Access
- ⌘ History and rationale
- ⌘ Treatment
- ⌘ PTSD and problem gambling



Problem gambling and the military: fast facts

Prevalence

- The report "Gambling with Terrorism and U.S. Military Readiness" says many soldiers in overseas posts can ill afford access to gambling machines. People drawn to military life are predisposed to become gambling addicts, the report said. They're generally young and they're risk-takers.
www.ideals.uiuc.edu/handle/2142/229
- About 2.2 percent of military personnel have indicators of probable pathological gambling, compared with about 0.77 to 1.6 percent in the general population.
www.cnn.com/2007/US/05/22/military.gambling/index.html
- The military's best guess about the number of service members who are vulnerable to gambling addiction comes from the Pentagon's Survey of Health Related Behaviors Among Military Personnel. The 2002 survey indicated that about 1.2 percent of all service members, or about 17,500 persons, had reported five or more behaviors identified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). Exhibiting five or more of these characteristics is an indication of probable pathological gambling, according to the American Psychological Association. This rate roughly matches the incidence in the civilian population. The survey may even understate the problem, and not just because of the demographics of the military population. Because the report relies on people to self-identify their problems, the number of people with gambling addiction may be higher. Major factors preventing people from seeking treatment are shame and secrecy. This can be exacerbated in a military setting where rules governing client confidentiality may not apply.
www.liebertonline.com/doi/abs/10.1089/glr.2006.10.52

- For the Department of Defense (DoD), 6.3 percent of personnel had experienced at least one of the 10 gambling-related problems in their lifetime, 2.3 percent experienced at least three of these gambling-related problems, and 1.2 percent experienced five or more problems—the level constituting probable pathological gambling. The Marine Corps (7.9 percent) showed the highest rate of at least one gambling problem. Source: Survey of Health Related Behaviors Among Military Personnel, Department of Defense, 2002. www.selvesandothers.org/article13035.html
- The prevalence of individual gambling problems for the total DoD has not changed greatly since 1992. Increased preoccupation with gambling was most frequently reported in the 1992, 1998 and 2002 surveys. Source: Survey of Health Related Behaviors Among Military Personnel, Department of Defense, 2002. www.selvesandothers.org/article13035.html
- Gambling problems appear to be related to alcohol use. An estimated 11 percent of heavy drinkers had at least one problem associated with gambling in their lifetime, compared with 6.3 percent of military personnel overall, regardless of drinking level. Some 5.1 percent of heavy drinkers had five or more gambling problems. Source: Survey of Health Related Behaviors Among Military Personnel, Department of Defense, 2002. www.selvesandothers.org/article13035.html

Access

- There are thousands of slot machines on military bases overseas. The military says revenue from the slots — more than \$120 million per year — is used to fund recreation programs overseas, such as swimming pools, movie theaters and concerts. www.cnn.com/2007/US/05/22/military.gambling/index.html

- The four branches of the armed services operate more than 4,000 slot machines located at nine bases overseas. According to the New York Times (Oct. 19, 2005), approximately \$2 billion flows through military-owned slot machines at officers' clubs, activity centers and bowling alleys on overseas bases each year.
www.liebertonline.com/doi/abs/10.1089/glr.2006.10.52
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History and rationale

- Undersecretary of Defense Leslye Arsht told CNN that machines on bases and posts provide "a controlled alternative to unmonitored host-nation gambling venues and offer a higher payment percentage, making it more entertainment oriented than at typical casinos. Department of Defense policy authorizes the military services to operate gaming and/or other amusement machines in overseas locations only, unless prohibited by host-country laws or agreements."
www.cnn.com/2007/US/05/22/military.gambling/index.html
- Slot machines have been on some military bases since the 1930s. The machines were banned from domestic military bases in 1951, but enjoyed a resurgence in the 1960s. They were removed from Army and Air Force bases in 1972, after more than a dozen people were court-martialed for skimming cash from slot machines in Southeast Asia during the Vietnam War. Fifteen hundred machines remained on Navy and Marine Corps bases overseas, and in 1980 the Army and Air Force began restoring machines at many overseas bases. According to the military, approximately 4,150 modern video slot machines are on military bases in nine countries today.
www.liebertonline.com/doi/abs/10.1089/glr.2006.10.52
4

- Slot machines are "a very profitable operation," said Peter Isaacs, chief operating officer of the Army's Community and Family Support Center, which runs the largest slot machine program. "But we do not operate them strictly to extract profit. Our soldiers have told us they want access to the same games and gambling opportunities available to the civilians they are defending."

www.liebertonline.com/doi/abs/10.1089/glr.2006.10.524

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Treatment

PricewaterhouseCoopers, in a problem gambling report for the Pentagon, said there is "a general lack of accessible treatment for gambling addiction." These concerns were echoed in a research paper written by Navy and Marine Corps medical personnel last year, describing a gambling addiction program started in Okinawa in January 2003. Research showed that military personnel and their families are susceptible to gambling addiction. The report stated that in "...environments in which women may feel lonely and alienated - which is frequent in overseas locations where family and established friends are not available and spouses are often deployed - there may be an increased risk of developing a gambling problem." Another concern was the impact of limited confidentiality, which exists in military mental health treatment. "[M]any patients, particularly high-ranking active duty and general schedule employees had significant concerns about their confidentiality." Without confidentiality, many people with gambling addiction may never come forward.

www.liebertonline.com/doi/abs/10.1089/glr.2006.10.524

In one study chaplains said that one in three people who come to them for counseling have a gambling problem, but can't tell anyone because they fear dishonorable

discharge.

www.iht.com/articles/2005/10/19/news/gamble.php

Problem gambling and PTSD: fast facts

In a study of military veterans entering treatment for PTSD (Biddle et al., 2005), 17 percent met DSM-IV criteria for PG. In another study (Kausch et al., 2006), among 111 veterans entering a gambling treatment program, 64 percent reported a history of emotional trauma; 40.5 percent, physical trauma; and 24.3 percent, sexual trauma; most trauma had occurred in childhood.

In another study of treatment-seeking problem gamblers, similar associations were found and a significant gender difference was discovered, with women reporting more childhood abuse than men (Petry & Steinberg, 2005).

In an early study, Taber et al. (1987) found a 23 percent rate of major traumatic events in a sample of pathological gamblers seeking treatment. In a study of 843 elderly adults, 11 percent were identified as "at risk" gamblers, with PTSD symptoms one of the strongest predictors (Levens et al., 2005).

Among treatment-seeking pathological gamblers, 34 percent had a high level of PTSD symptoms with the latter assessed by self-report checklist (Ledgerwood & Petry, 2006).

PTSD among problem gamblers is estimated at 12.5 percent to 29 percent (Ledgerwood & Petry, 2006).

Studies have identified basic characteristics of those with trauma history (or PTSD) and pathological gambling. The common pattern appears to be greater pathology and

worse functioning among pathological gamblers with a trauma history (or PTSD) than those without. Taber et al. (1987) found increased depressive, anxiety and substance abuse symptoms, and greater personality style of avoidance among those with trauma. Petry and Steinberg (2005) found an association between greater severity of childhood abuse and both earlier age of gambling onset and more severe gambling problems. Ledgerwood and Petry (2006) found greater lifetime gambling severity, psychiatric symptom severity, impulsivity, and dissociation in high- versus low PTSD subjects.

Kausch et al. (2006) observed that history of trauma was associated with a greater frequency of suicide attempts and drug and alcohol dependence, more severe scores in measures of psychiatric distress, and limited effects on personality functioning.

PTSD is known to be under studied, under diagnosed and under treated relative to the more commonly diagnosed mood and anxiety disorders that commonly co-occur with it and/or are misdiagnosed instead of it (Davidson, 2001; Dansky et al., 1997). The reasons for this disparity include: more psychopharmacologic treatments available for mood and anxiety disorders than for PTSD (psychiatrists are more likely to focus on disorders other than PTSD), many addiction treatment professionals fear that if they diagnose PTSD they will have to treat it despite being untrained; and treatment programs do not routinely assess for PTSD (Davidson, 2001; Dansky et al., 1997).

A new study, funded by the Ontario Problem Gambling Research Center, is presently under way (Korn and Najavits, 2007) to more fully determine the connection between PTSD and problem gambling.

Source:

www.responsiblegambling.org/en/research/PTSD_PG_proposal.pdf

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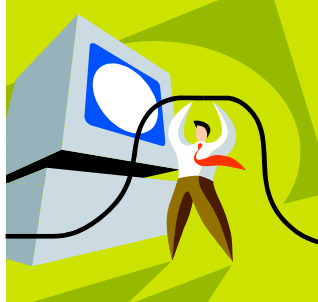
Section 12.

Recovery

- ⌘ What is recovery?
- ⌘ Recovery resources
- ⌘ For more information
- ⌘ Tips for clinicians on referring clients to GA



Recovery from gambling problems



There are many ways to recover from a gambling problem. From informal approaches to formal interventions such as Gamblers Anonymous and Gam-Anon meetings to group therapy meetings, one-on-one and family counseling, treatment programs, self-help books, internet support groups, and more.

Because every person is different, deciding which recovery process and method will work best comes down to an individual assessment. Variations in motivation, desired goals, personal beliefs, financial situations, stress levels, family situation, self-esteem and confidence levels, shame/guilt levels, employment, all have an impact on an individual's recovery process.

What is recovery?

Recovery is the gradual process of re-establishing control over one's life. It involves confronting the problems that have resulted from unhealthy gambling behavior and learning strategies to successfully manage life.

Recovery is often a difficult, complex and painful process. But, problem gamblers in recovery know it is worth it. Recovery saves lives.

Some problem gamblers stop on their own

Recent studies and clinical experience have shown that some problem gamblers can and do stop gambling on their own. Others reduce their gambling to non-problem levels. This is called "natural recovery". The problem is that, at present, we cannot predict who will naturally recover and who needs professional help.

Many problem gamblers cannot stop on their own

There are different forms of help available. Some problem gamblers prefer working with a professional counselor. Others respond more favorably to structured peer-support approaches such as those advocated by Gamblers Anonymous (GA). Yet others seek and receive effective help from other sources including their families, friends, doctors or clergy

Recovery resources

1. Treatment programs: Part of the process of treatment should be planning for recovery and relapse prevention.

- For a list of Gambling Treatment Providers throughout Oregon visit: 1877mylimit.org

2. Twelve-step recovery support: Gambler's Anonymous is a twelve-step organization for problem gamblers, operating on principles similar to AA and other such organizations. Gam-Anon is the organization for the family members of problem gamblers. GA and Gam-Anon meetings are not as widespread as other twelve-step programs, so interested persons should call the Problem Gambling Help Line to verify meeting status; the Help Line makes efforts to maintain up-to-date information on current meetings and can be reached at 1-877-MYLIMIT or go to 1877mylimit.org.

- For a list of Gamblers Anonymous meeting in Oregon visit: www.gamblersanonymous.org/mtgdirOR.html
- For a list of Gam-Anon meetings in Oregon visit: www.gam-anon.org/meeting.asp

"Tips for Clinicians: Referring A Client to GA" is included at the end of this section.

3. Online and web-based recovery

There are a variety of online and web-based resources for problem gamblers who prefer this approach; this list is not an endorsement of any of these sites but is provided as a convenient reference:

For more information

www.wanttostopgambling.com/

A site created by a recovering problem gambler that includes a self help guide and many other useful links and resources (www.wanttostopgambling.com/info2.cfm?info_id=21947)

Getting Past Gambling

www.gettingpastgambling.com/

A place to come and share experiences, to find support and strength, for those of us who are putting gambling behind us and finding new exciting and happier ways to live our lives.

Recovery Places

www.recoveryplaces.com/

This web site is intended to be a safe place to connect with others who are seeking to overcome or recover from all sorts of addictive behaviors.

Safe Harbor Compulsive Gambling Hub

www.sfcghub.com/cgsf1.html

Compulsive Gambler Room

I Stopped Gambling

www.istoppedgambling.com/

As an I Stopped Gambling member you will have access to a 24/7 online stop gambling chat room and message board.

Helpful stop gambling tips and useful stop gambling addiction resources will also be available.

Gam Care www.gamcare.org.uk/forum/index.php?tid=2272

Gam Care has now successfully launched a chat/support room for Forum members to talk 'live' with others. This new Forum gives you the opportunity to ask questions, share advice and support with other people working to overcome their own or somebody else's gambling problem.

Chat rooms with others, no professional intervention

12 Step Space

www.12stepspace.com/

A new community networking site catering to the needs of people interested in recovery.

The 12-Step Café Chat Room

www.12steps.org/chatroom.htm

Compulsive Gambling Recovery

health.groups.yahoo.com/group/compulsivegamblingrecovery/

Gambler Outreach

health.groups.yahoo.com/group/GamblerOutreach/

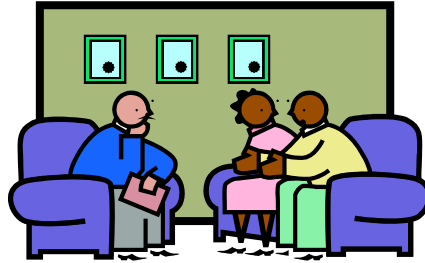
The Last Bet

health.groups.yahoo.com/group/thelastbet/

Sources: Nova Scotia Office of Health Promotion, Problem Gambling guide available at www.problemgamblingguide.com/

Tips for clinicians on making referrals to Gamblers Anonymous

Anonymous



Problem gamblers often state they are not comfortable sharing in a group setting. What they are feeling is an intense level of fear associated with the thought of sharing their gambling experiences with a group of strangers, since many have not spoken honestly about their gambling behavior for years.

If you want to most effectively use GA as a referral source, take the time to attend a meeting and observe how they are run. Call the contact person in the area and ask if you can attend a meeting. Explain why you want to attend. Don't just show up. Be aware that some groups may view the clinician's attendance as an effort to recruit clients so be sure not to have that as a motive, nor convey any messages along those lines, if you attend a meeting.

Here are some helpful tips in helping a client reduce the level of fear associated with attending their first Gamblers Anonymous meeting.

- Make sure your client understands you are not abandoning him or her. You can do this by continuing to see him or her on an individual basis to monitor the effectiveness, positive or negative, that GA is having on his or her recovery.
- Sometimes gamblers will say, "What if I see someone I know at the meeting?" It is important for the client to know that everyone at the meeting is there for the same reason and that members of GA have empathy for one another based on personal experience. There is an agreement to

hold confidential all information from a GA meeting. All new members are welcomed unconditionally.

- Clients need to know that no one in GA is going to tell them what to do. More important, if they choose not to speak at a meeting, that is their right. The only requirement for GA membership is a desire to stop gambling.
- Tell your client that all new members will receive a phone list of all active GA members in their area. This can be a welcome support tool.
- New members of GA need to feel safe. You can inform your client that personal anonymity and confidentiality are crucial to the unity of each group and GA holds this principle in the highest regard.
- The buddy system can also be helpful in someone getting to her or his first meeting. Introducing your client to a GA member prior to a first meeting can be comforting for the new member.

Cautioning your client in a couple of areas can also be helpful:

- Too often a new member of GA sees a gambling problem in terms of how much money is lost gambling. An individual may think or say, "I didn't lose as much as everyone else," therefore I can't have a problem. It is important for clients to know that the severity of a gambling problem is measured not by how much money is lost, but by the degree of negative impact that gambling is having on his or her life.
- Members may find the apparent emphasis on spirituality or religion disconcerting. However, spiritual or religious orientation should not be a concern for GA or Gam-Anon membership. It might be helpful to suggest that there are alternative ways of interpreting the idea of a "Power greater than oneself." For example, if the problem gambler was unable to stop gambling before GA and has now been able to abstain through regular meetings, he or she may view his or her GA group as a "Power greater than themselves." Likewise, a Gam-Anon member may be an atheist yet find

that a sponsor or group was helpful in overcoming problems. If positive change is occurring, the initial goal of GA is to experience and acknowledge that a power greater than oneself is at work in some form.

- Inform the client that although members of GA are brought together through a common problem, each person is in a unique situation and at different levels of recovery. Newer members may speak more about the negative impact that their gambling experiences had on them while longer-standing members focus their dialog on everyday living problems and how they are learning new coping strategies. New members do not have to agree with everything they hear in order to grow in the program.
- It is also common for newer members to experience a change in their belief systems. What someone may have disagreed with three months ago, can now become a belief that he or she holds. Members have often said, "Six months ago I honestly answered yes to 15 of the 20 questions. Today I can honestly answer yes to 19." Their beliefs or perceptions of their behavior can continue to change.
- Counselors should discuss and contract a time frame appropriate enough for the client to evaluate whether this group is beneficial. Too often clients will return to their counselor after their first GA meeting and say, "This is not for me." They may be right, but one or two meetings are not enough to make that evaluation. Eight weeks of regular attendance (at least once per week) should be sufficient for a client to determine if GA is helpful or not.

Source:

www.problemgambling.ca/Resources_For_Professionals/Information_for_Helping_Professionals/Helping/4_Setting_up_a_Treatment_Program/Working_with_Gamblers_Anonymous_and_Gam-Anon/page21798.html