COD & Treatment Washington State

Problem Gambling: 1 in 5

October 12, 2015



Evergreen Council on Problem Gambling

Our Mission

The Evergreen Council on Problem Gambling is dedicated to increasing public awareness of problem gambling, expanding the availability of services for those affected by problem gambling, and encouraging research and programs for education, prevention, treatment, and responsible gambling.

Overview

- What is gambling?
- What is problem gambling?
- How is it like other addictions? How is it different?
- What are the prevalence rates?
- What addictions does it co-occur with?
- How is it diagnosed and treated?
- What are some of the risk factors?
- What resources are available?
- How is technology changing gambling?

What is Gambling?

gamble

[gam-buh I] verb (used without object), gambled, gambling

- 1.to play at any game of chance for money or other stakes.
- 2.to stake or risk money, or anything of value, on the outcome of something involving chance: to gamble on a toss of the dice.

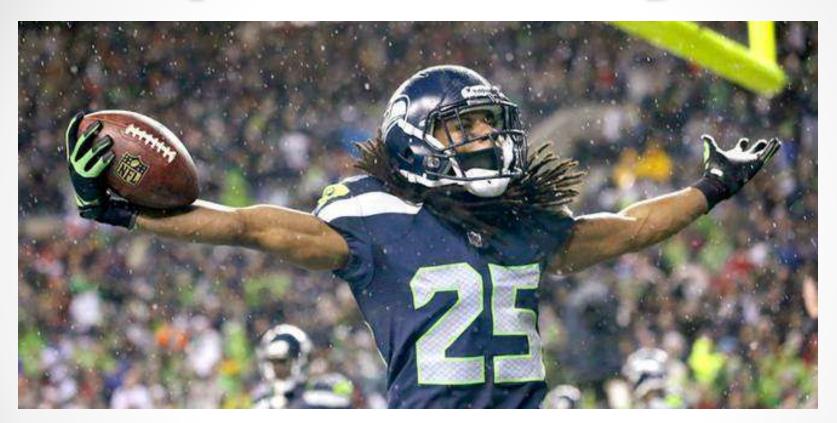
Gambling History

- 1st Wave Colonial Days: lottery funded public projects.
- 2nd Wave Pre-Civil War and Wild West: Gambling Halls and Riverboat Gamblers.
- 3rd (Current Wave) Began in the late 1930s in a desert town called Las Vegas.
- 4th Wave Social casino games & internet gambling

Gambling Today

- About 75-86% of all adults in the U.S. gamble at one time or another – 94% in WA.
- Legal gambling in the U.S. is a more than \$95 billion per year industry. [2010]
- Gambling is legal in all states but Hawaii and Utah.
- In U.S., 47 jurisdictions (44 states and D.C., Puerto Rico & U.S. Virgin Islands) run lotteries; 6 states have river boats; 36 states and Puerto Rico and U.S. Virgin Islands have casino gambling.
- Internet Gambling is the next venture; legal in DE, NV, NJ & Virgin Islands; plus CA Tribe Santa Ysabel.

Super Bowl Sunday



- In 2014, \$120 million was bet legally.
- AGA estimates nearly \$4 billion was bet illegally.

Gambling - A Personal Choice

- Most people can enjoy gambling for recreation and entertainment
- For some, gambling can become a problem that affects the individual, their families, employers and communities

Signs of Responsible Gambling

DO...

- Gamble only if it's fun
- Set a dollar and/or time limit and stick to it
- Accept losing as part of the game

DON'T...

- Don't borrow money to gamble
- Don't let gambling interfere with family, friends or work
- Don't gamble to win back losses
- Don't gamble as a way to cope with emotional or physical pain

What is Problem Gambling?

- Any pattern of behavior that compromises, disrupts, or damages family, personal or vocational pursuits.
- A problem gambler is anyone whose gambling is causing psychological, financial, emotional, marital, legal or other difficulties for themselves or the people around them.

Signs of Problem Gambling

Do You Ever...

- Lose track of time while gambling?
- Spend more than you intend to on gambling?
- Become irritable when people interrupt or interfere with your gambling activity?
- Borrow from credit cards, friends, family or work to gamble?
- Gamble to escape stressful situations?

Have You Ever...

- Covered up or hidden your gambling activity?
- Neglected friends, family or a job because of gambling?
- Spend money to gamble then borrowed money to pay bills?
- Written a bad check to keep gambling?
- Lied about how much you lost?

Social v. Problem Gambling

Social

- Occasional gambler
- Sticks to limits of money/budget
- Hopes to win but expects to lose understands the advantage is with the house
- Can take it or leave it it's entertainment

Problem

- Frequent gambling or spends more and more time gambling
- Plays with money that is "borrowed"
- Expects to win; keeps playing to win back losses
- "Life" revolves around gambling

DSM-5 and Gambling Disorder

- Name is officially "Gambling Disorder"
- In DSM-5 it is the only "non-substance-related disorder" under the category of "substancerelated and addictive disorders"
- Moved from DSM-IV where it was "impulse control disorder"
- Was changed due to research involving brain imaging studies and neurochemical tests
- Other process addictions like internet and sex addiction were considered but work group members felt there was insufficient research data for them

DSM-5 Diagnostic Criteria: Gambling Disorder

Persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the following in a 12-month period:

- 1. Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
- 2. Is restless or irritable when attempting to cut down or stop gambling.
- 3. Has made repeated unsuccessful efforts to control, cut back, or stop gambling.
- 4. Is often preoccupied with gambling (e.g., having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble).
- 5. Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed).
- 6. After losing money gambling, often returns another day to get even ("chasing" one's losses).
- 7. Lies to conceal the extent of involvement with gambling.
- 8. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling.
- 9. Relies on others to provide money to relieve desperate financial situations caused by gambling.

In other words...

- 1.Tolerance
- 2. Physical withdrawals
- 3.Lack of Control
- 4. Preoccupation
- 5. Coping mechanism
- 6.Chasing
- 7.Lying
- 8.Loss of significant life opportunity
- 9. Uses other to support habit

Gambling v. Substances

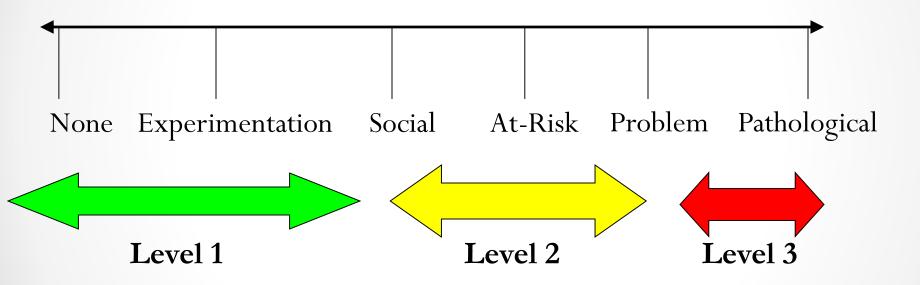
Similarities

- Loss of control
- Denial
- Depression
- Progressive/Toleran ce
- Chasing
- Blackouts
- Escape
- Similar Highs
- Brain effects

Differences

- Hidden addiction
- No "overdose"
- Huge financial problems
- No "UA" test
- Doesn't require ingestion
- Fewer resources available
- Public perception
- Higher rates of suicide attempts

Continuum of Gambling Behavior

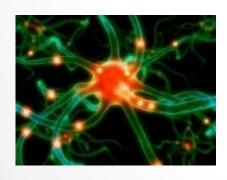


Gambling and the Brain



Similar to Meth

"Pathological Gamblers Demonstrate Frontal Lobe Impairment Consistent with that of Methamphetamine-Dependent Individuals," Kalechstein, Fong, Rosenthal, Davis, Vanyo, Newton (2007): Journal of Neuropsychiatry & Neurosciences

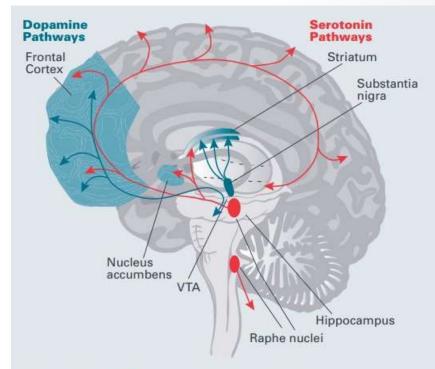


Similar to Cocaine

"Functional imaging of neural responses to expectancy and experience of monetary gains and losses," Breiter, Aharon, Kahneman, Dale, Shizgal (2001): Neuron, 30(2) 619-639

Gambling and the Brain

- Pathological gamblers have blunted response to rewards as well as losses
- Shown by "diminished mesolimbic prefrontal cortex activation" during rewarding and punishing events
- Similar to SUDs
- Diminished sensitivity to dopamine before addiction ever presents



The mesolimbic-prefrontal circuit in the brain is influenced by neurotransmitters such as dopamine and serotonin, and mediates mood and social behavior, pleasure processing, influences motivated behavior related to rewards and risk taking, and thus affects judgment and decision making processes.

Source: National Institutes of Health

Addiction Prevalence

- 1 in 10 Americans right now have an alcohol or drug problem
- 30-40% of people at some point in their lives have a drug or alcohol problem
- 70-88% or problem drug users receive NO treatment
- Less than 8% of problem gamblers seek treatment
- Prevalence of PG can go up to 20% with a co-occurring disorder

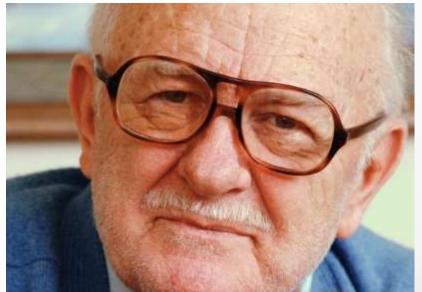
Who's the Addict?











Co-Occurring Disorders

With Problem Gambling, comorbidity is the **rule**, not the exception

- ~75% have a history of alcohol use d/o
- ~40% have a history of substance use d/o
- ~60% have a history of nicotine dependence
- ~50% have a history of a mood disorder
- ~40% have a history of an anxiety disorder
- ~60% have a history of a personality disorder

Table 2. Lifetime co-morbidity of CIDI/DSM-IV pathological gambling (PG) with other lifetime CIDI/DSM-IV disorders and temporal priorities in age of onset (AOO)

						Temporal priority in onset					
	Prevalence ^a				PG first		Other first		Same year		
	%	(s.e.)	ORb	(95% CI)	%	(s.e.)	%	(s.e.)	%	(s.E.)	
I. Mood disorders											
Major depressive disorder or dysthymia	38.6	(9.1)	2.5*	(1.1-5.7)	20.5	(10.6)	73.5	(11.1)	6.1	(5.8)	
Bipolar disorder	17.0	(7.1)	4.6*	(1.5-14.2)	29.2	(16.4)	46.3	(21.5)	24.5	(14.4)	
Any mood disorder	55.6	(9.7)	3.7*	(1.5-9.0)	23.1	(9.0)	65.1	(11.7)	11.7	(6.9)	
II. Anxiety disorders											
Panic disorder		(6.7)	4.9*	(2.2-10.8)	10.7	(9.5)	81.8	(16.1)	7.5	(6.6)	
Generalized anxiety disorder	16.6	(7.0)	2.8*	(1.0-7.9)	9.3	(9.4)	79.8	(14.3)	10.9	(10.8)	
Phobia	52.2	(8.8)	3.2*	(1.4-7.2)	0.0	(-)	100.0	(0.0)	0.0	(-)	
PTSD	14.8	(7.8)	2.3	(0.6-8.4)	49.5	(27.3)	50.5	(27.3)	0.0	(-)	
Any anxiety disorder	60.3	(9.1)	3.1*	(1.4-7.0)	13.4	(7.3)	82.1	(7.9)	4.5	(4.3)	
III. Impulse-control disorders											
ADHD	13.4	(8.1)	1.8	(0.4-7.3)	0.0	(-)	100.0	(0.0)	0.0	(-)	
Oppositional-defiant disorder	15.4	(6.8)	1.9	(0.7-5.7)	0.0	(-)	100.0	(0.0)	0.0	(-)	
Conduct disorder	24.9	(8.2)	3.1*	(1.2-7.8)	0.0	(-)	100.0	(0.0)	0.0	(-)	
Intermittent explosive disorder	27.0	(9.0)	3.1*	(1.1-8.3)	0.0	(-)	100.0	(0.0)	0.0	(-)	
Any impulse control disorder	42.3	(10.5)	2.2	(0.9-5.3)	0.0	(-)	100.0	(0.0)	0.0	(-)	
IV. Substance use disorders											
Alcohol or drug abuse	46.2	(10.7)	4.5*	(1.8-11.0)	18.7	(10.0)	70.9	(11.3)	10.4	(7.0)	
Alcohol or drug dependence	31.8	(9.4)	5.8*	(2.4-14.4)	44.3	(16.7)	55.7	(16.7)	-	(-)	
Nicotine dependence	63.0	(9.0)	3.9*	(1.7-8.5)	61.3	(11.5)	33.0	(10.8)	5.7	(4.2)	
Any substance use disorder	76.3	(7.9)	5.5*	(2.3-13.5)	36.2	(12.2)	57.4	(11.6)	6.4	(4.5)	
V. Number of disorders											
Any disorder	96.3	(2.6)	17.4*	(4.2-73.0)	23.5	(10.7)	74.3	(10.5)	2.2	(2.2)	
Exactly one disorder	22.0	(10.2)	10.1*	(1.5-65.6)							
Exactly two disorders	9.9	(6.5)	9.1*	(1.3-65.2)							
Three or more disorders	64.4	(10.4)	30.0*	(7.6–118.7)							

College, Alcohol & Gambling

- Disordered gambling students report higher alcohol use, poorer academic performance, more mental health symptoms, and greater suicidal ideation (Crockford & el-Guebaly, 1998; Lesieur et al. 1991; Takushi et al., 2002; Whiteside, et al., 2005)
- Frequent gamblers are more likely to engage in other high-risk behaviors, including alcohol and other drug use (DeJong, DeRicco, & Anderson, 2006)
- Frequent gamblers are more likely to engage in heavy episodic drinking (DeJong, DeRicco, & Anderson, 2006)
- 35.4% of college students under the age of 21 reported engaging in casino gambling in order to obtain alcohol more easily (Giacopassi, Stitt, & Nichols, 2006).

Potential Risk Factors of Gambling Disorder

- Parent or family member with gambling problem
- Substance Use Disorder
- History of alcoholism
- Anxiety Disorder
- Early "big win"
- Early exposure while brain is developing (age 25)
- There is no evidence of "addictive personality," but impulsivity varies from person to person
- Studies suggest perceptions of money may contribute
- Studies suggest hormones in telescoping of addiction; personality, metabolic factors

Screening Tools LIE / BET

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

Treatment

- State program funding is about \$724,000 per year.
- In fiscal year 2013, 532 clients received services at an average cost of \$1142 per client
- The treatment retention rate in the most recent 12 months was 57%
- People with gambling problems have a readmission rate of about one in seven.
- Washington State retention and readmission rates are similar to rates nationally.
- ~30 treatment providers across WA State

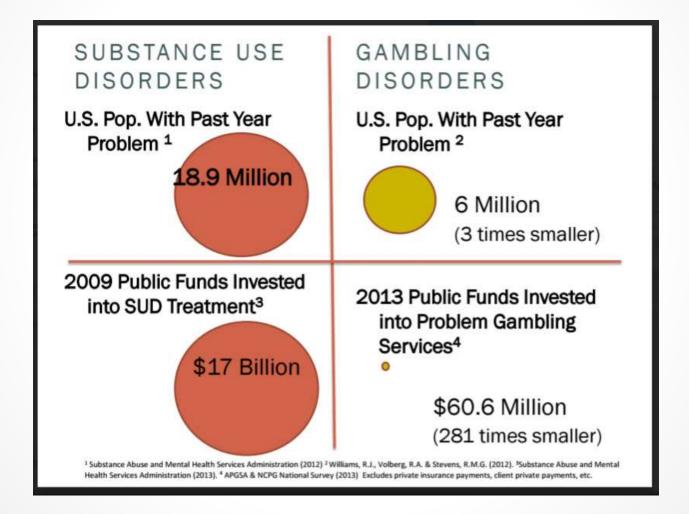
Treatment Types

- Outpatient
- Intensive outpatient
- Residential (not in WA)
- Peer Support
- Behavioral therapy
- Cognitive therapy
- Cognitive-behavioral therapy
- Motivational Interviewing
- GA Meetings
- Prevention
- Exercise

Relapse Among Disordered Gamblers

TABLE 2 Main Reason for Relapse by Gender						
Main Reason for Relapsing		Women %	Overall %			
Optimism about winning	24	21	23			
Need to make money	22	7	17			
Unstructured time or boredom	17	7	13			
Giving in to urges, habit, or opportunity	9	15	11			
Dealing with negative situations or emotions	7	18	11			
Socializing or fitting in	7	11	8			
Seeking excitement or enjoyment	5	8	7			
All other answers	8	12	9			

Funding Discrepancies



Therapeutic Justice

- Trying to bring a stand-alone Problem Gambling Court to Washington proved impossible during times of budget deficits.
- The Judge in Pierce County Drug Court agreed to have all current participants assessed using the NODS and SOGS.
- More than 20% of those entering Felony Drug Court assessed as problem or pathology gamblers.
- Originally, problem gambling track was "Opt-In"
- In 2012, the Presiding Judge, together with Prosecuting and Defense Counsel, determined that the success of the program indicated that Assessments would be a regular procedure and those who assessed for PG would be mandated to be in the program.

Why Include PG in Drug Court?

- Addressing part of the problem is not effective long term.
- Treating all problems increases chances for a successful outcome/recovery.
- Successful completion can prevent someone from having a felony on his/her record for life.
- For every dollar spent on treatment, the community saves between \$8-\$13 in other services.
- Helping people regain their place as productive members of society helps all of us.

The Fourth Wave: Social Casino Games & the Freemium Model

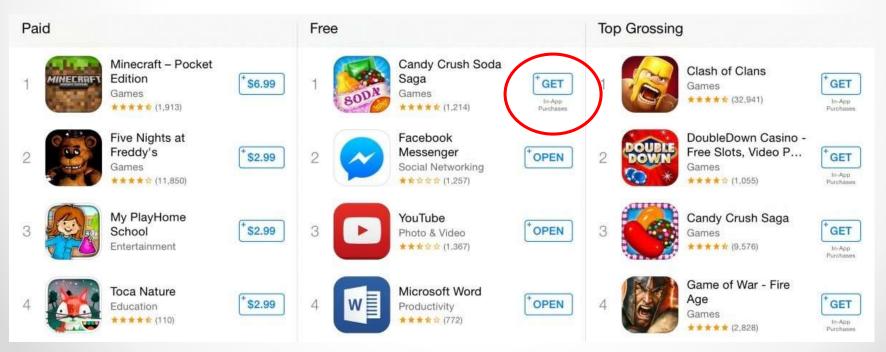


The Fourth Wave: Social Casino Games & the Freemium Model

- There are 1.3 billion monthly active users on Facebook
- One quarter of them more than 375 million people play at least one Facebook-connected game in an average month
- 735 million game invitations are sent each day
- 14% of social gamers play at work for at least 1 hour a day*
- Social casino style games will generate ~11% of Facebook revenue in 2014; it's a \$2.7 billion worldwide industry
- Annual market for virtual goods \$15 billion annually
- At age 13 eligible for a Facebook account or to download the apps (though who's checking?)

The Fourth Wave: Freemium

- Freemium = "free" + "premium"
- Give away a product for free to a large group, relying on a small group paying to play to subsidize the rest of users that don't ("conversion rate" 2-5% of users)
- Not all freemium is apps or games –The New York Times online, for example, is a freemium model – you can read 5 articles per month and then must subscribe.
- Freemium apps account for 98% of the revenue in Google Play; 92% iTunes



The Fourth Wave

Order Date	Order	Titles included in order	Total Price
08/04/13	MGWJ5D9N	Candy Crush Saga, Extra Lives	\$10.54
08/03/13	MGWJ57W0	Candy Crush Saga, Extra Lives, Candy Crush Saga, Unlock Next Episode	\$10.78
08/03/13	MGWJ55YT6B	Candy Crush Saga, Extra Lives	\$10.54
07/29/13	MGWJ47WT	Candy Crush Saga, Extra Lives	\$9.70
07/29/13	MGWJ472W	Candy Crush Saga, Extra Lives	\$10.78
07/28/13	MGWJ4184S5	Candy Crush Saga, Extra Lives	\$10.52
07/28/13	MGWJ3Y2QJQ	Candy Crush Saga, Extra Lives, Candy Crush Saga, Unlock Next Episode	\$10.78
07/26/13	MGWJ3QLD	Candy Crush Saga, Extra Lives	\$10.78
07/25/13	MGWJ3JNKN3	Candy Crush Saga, Extra Lives	\$10.78
07/22/13	MGWJ30SFJ4	Candy Crush Saga, Extra Lives, Candy Crush Saga, Extra Moves	\$10.78

Total: \$236

Report a Problem

Done

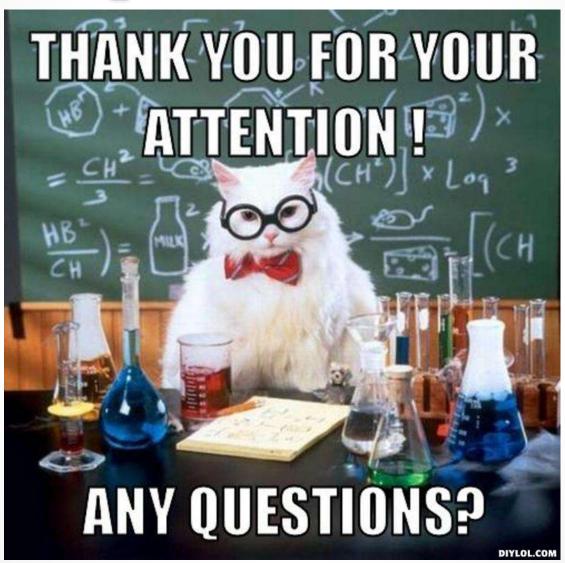
"I became a slave to the unstoppable force of Candy Crushing micropayments. It was so easy. It didn't even feel like I was spending money." - Ashley Feinberg

The Fourth Wave



British Member of Parliament Nigel Mills apologized after he was caught playing Candy Crush during a committee hearing.

Questions?



Thank You!

Kristin West

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