

# National News

AN INFORMATION RESOURCE FOR MEMBERS OF THE NATIONAL COUNCIL ON PROBLEM GAMBLING

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## President's Message: Moving Forward



As 2008 moves through the lingering fall and into the cold of winter, many people are concerned about the dramatic and unnerving directions of the national and global economies, and the instability of the financial markets here and abroad. Normally, watching the markets and monitoring the economy is a spectator sport for most of us. Regrettably, for far too many of us this time around, we are in the middle of the action, whether it relates to concerns over our jobs, our mortgages, our 401-K programs, the financial status of our adult children, or the future of our great nation and our role in it.

Not-for-profit organizations such as the National Council on Problem Gambling are also not exempt from implications related to the current economic crisis. In recent years, the National Council has been fortunate to secure its operating funding from a combination of sources, including the annual National Conference that typically

generate surplus revenues; dues from the 35 State Affiliate Councils on Problem Gambling; Membership fees from individuals, organizations, and corporations; helpline reimbursements; sponsorships; and various other sources. As we move into 2009, NCPG's staff and the Board will be carefully monitoring each of these revenue sources to insure that the services offered by the National Council will indeed be able to go forward without interruption.

We also need to anticipate the kinds of issues that deep economic recessions might imply for problem gamblers and their families. Obviously, more individuals and families are going to be confronting harsh economic times for the remainder of 2008 and well into 2009 than any time in recent years. Some of these people may unwisely turn to gambling as a way to try to catch up and make things right. Some may take the attitude that they are already financially buried, so gambling losses will not make much of a difference anyway. And some might try to escape from their very real financial problems at

*(President, continued on page 2)*

## Executive Director's Letter: Changing Seasons



As summer fades into fall here in Washington, D.C., the National Council on Problem Gambling has been busier than ever. We continue to pursue new ways to connect directly with members across the nation, as I firmly believe that strong state affiliate and local individual membership is the key to building a strong national voice for programs and services to assist problem gamblers and their families. We had an unprecedented response to our last call for newsletter articles, and hope that members will continue to write in to share their perspectives, ideas and information. As we shift our communications to an electronic format—which not only saves thousands of dollars in printing costs but enables much greater flexibility—we will unveil in the coming months a number of new ways to receive information from NCPG. For example, members will now receive a reminder when the agenda, minutes, materials and a complete downloadable audio recording of each Board meeting will be available in the Members Section of the NCPG website. To access these files, and many other features, members should contact Melissa Martin at the national office to set up their account password if they have not done so already.

Our exploration of new communications technology is not limited to membership. I'm pleased to announce that NCPG has begun to develop a pilot project to provide access to the Helpline via text message. As you may know, text messaging is one of the most popular forms of communication for cell phone users under age 25. There are approximately 263 million cell phone subscribers in the U.S. More than 15 percent of U.S. households have only a mobile phone and an estimated 70 percent of mobile phone owners use text messaging. Users send over two billion text messages every day. During the pilot program cell phone users will be able to contact the Helpline via text message and will also be able to subscribe to a positive, motivational daily text message to help individuals with gambling problems achieve and sustain recovery. The content will be developed and evaluated by Dr. Lia Nower.

NCPG is also proud to join the McGill Youth Gambling Centre's annual holiday lottery public service campaign. For several years McGill has worked with Canadian lotteries to encourage parents not to give lottery products to children for the holidays. This positive, non-judgmental message is important as research shows that the majority of adolescents gamble at least occasionally, and that approxi-

*(Executive Director, continued on page 2)*

**inside 3** Book Review

**5** A View from the Bench

**6** Featured Program

**14** New Technology Solution for Problem Gambling

**20** The Counselor's Corner

(President, continued from page 1)

home into the fantasy world of the casino, the slot parlor, or the sport betting site. My hunch is that the demand for services for problem gamblers and their families is going to increase in these harsh economic times, and therefore the services provided by the National Council and all of its Affiliates will be more important than ever.

So, for the National Council and all of the State Affiliate Members, we cannot just “hunker down” in order to survive the tempest. We need to focus on those activities, services and programs that create value for our various constituencies. The mission of the National Council 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.” More than ever before, the National Council will be focusing its efforts on this mission, and ensuring that the organization has the resources and directions necessary to fulfill this mission.

Since the adoption of the Strategic Plan early in 2008, and the reduction in size and the re-structuring of the Board in June of this year, the NCPG Board has been meeting by telephone conference calls monthly. Slowly but surely, we are coming to consensus on how the National Council should be re-organized in order to help it perform at the top of its potential in the immediate and intermediate future. We are hopeful that decisions that we will make in the near future will solidify this reorganization and provide a strong platform for the National Council not only through these trying times, but on the

other side of the recession when, figuratively (and hopefully in reality) the springtime of recovery will spread its warm sunshine upon us.

In the meanwhile, we need to focus on all of the valuable services that the National Council does so well. On an ongoing basis, we offer significant value by way of the Hotline number (1-800-522-4700), a 24-hour confidential national hotline (which receives over 20,000 calls per month); information provided on the National Council’s website ([www.ncpgambling.org](http://www.ncpgambling.org)), which has received more than half a million hits in each of the last two months; as well as materials and other support services made available directly to people in distress, as well as for the 35 State Affiliate Councils who are the front line of problem gambling services throughout the Nation. On an annual basis, the National Council will be offering the **23rd National Conference on Problem Gambling**, June 25–27, 2009 at the Hyatt Regency in Indianapolis, Indiana (*if you can attend, please plan on doing so*); and the National Problem Gambling Awareness Week in March 2009 (*if you can participate, please plan on doing so*).

All of these efforts need the support of the entire membership of the National Council on Problem Gambling, as well as those individuals and organizations outside the NCPG that both understand and are concerned about the negative consequences associated with problem gambling in society. As with the current state of the economy, we can no longer just “be on the sidelines” as passive observers. Reducing the incidence and severity of problem and pathological gambling will be good for society at large, and for all of the affected segments of society. This is an objective that we can all agree with and, with much effort and good will, we should be able to bring this desirable outcome about.

Sincerely,



Bill Eadington, Ph.D.  
President

(Executive Director, continued from page 1)

mately 10 percent have gambled more often than twice per week. And as we all know, the earlier a child starts to gamble the more likely they are to develop a gambling problem.

Lottery products are popular presents because they are affordable and easily obtainable, and while the minimum age to play is generally 18, many lotteries have regulatory exemptions that allow minors to receive tickets as gifts.

Finally, the fall is also the time for the Board of Directors, Committees and staff to review the goals and objectives of the current year and prepare for the coming year. For the first time, every NCPG member was sent planning materials and invited to make recommendations for our 2009 goals. The Board will meet November 15 and 16 at the offices of the Nevada Council on Problem Gambling to formally review the NCPG 2007–2014 Strategic Plan and our past performance, as well as to develop the 2009 goals and budget. Upon approval they will be circulated to the members and posted on the website.

We deeply appreciate the support of all our members and look forward to working with you. Please feel free to contact me or any NCPG staff member with any questions or comments.

Sincerely,



Keith Whyte  
Executive Director

## National News

NATIONAL COUNCIL ON PROBLEM GAMBLING

The *National News* is published by the National Council on Problem Gambling.

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# BOOK REVIEW: **All or Nothing**

## Author: **Preston L. Allen**

*All or Nothing*, by Preston L. Allen.  
252 pp. Akashic Books. Paper, \$14.95.

Book Review: The Gambler  
(Reprinted from the *New York Times*, June 15, 2008)

By Andrew Hultkrans

“There are only two kinds of gamblers: the lucky and the broke,” says the compulsive wagerer at the center of Preston L. Allen’s casino noir “All or Nothing.” Known simply as P (protagonist? Preston?), he’s been one or the other his entire adult life. A Miami school bus driver with a large family and an even larger jones, he squanders his paychecks and scrounges loose change from school bus seats, then loses it all at South Florida Indian casinos, mostly to slot machines, the crack cocaine of gambling. P is not above wishing for his young son’s life-threatening allergic reactions, believing the child utters winning numbers while slipping toward a coma. He plays, he loses and, with the Sisyphean regularity of the certifiably insane, he returns to play again. Above all, he lies — to his wife, his bosses, his children, himself.

Even those well acquainted with the generic vices — substances, sex — often don’t understand gambling, which seems so nakedly suicidal as to preclude the grace period of bliss and denial necessary to cultivate a deep-rooted addiction. As with Frederick and Steven Barthelme’s disarming gambling memoir, “Double Down” (1999), the chief virtue of “All or Nothing” is its facility in

enlightening nonbelievers, showing how this addiction follows recognizable patterns of rush and crash, but with a twist — the buzz is in the process, not the result. “That’s what people don’t understand about gamblers,” P explains. “We gamble to gamble. We play to play. We don’t play to win.”

Nevertheless, just as he’s finally lost his family, P does win — and big. This leads him to Vegas, where he plays in big-stakes poker tournaments, sporting the requisite black Stetson of the “whale,” or perennial high-roller. Even when his fortunes improve, P senses his spiritual bankruptcy, eventually attaining a form of sobriety through solitaire. He still haunts the casinos, however, as a sort of Ghost of Jackpots Past, dispensing funds and cryptic wisdom to desperate gamblers. (That he sleeps with some of them complicates his newfound saintliness.)

As a cartographer of auto degradation, Allen takes his place on a continuum that begins, perhaps, with Dostoyevsky’s “Gambler,” courses through Malcolm Lowry’s “Under the Volcano,” William S. Burroughs’s “Junky,” the collected works of Charles Bukowski and Hubert Selby Jr., and persists in countless novels and (occasionally fabricated) memoirs of our puritanical, therapized present. Like Dostoyevsky, Allen colorfully evokes the gambling milieu — the chained (mis)fortunes of the players, their vanities and grotesqueries, their quasi-philosophical ruminations on chance. Like Burroughs, he

is a dispassionate chronicler of the addict’s daily ritual, neither glorifying nor vilifying the matter at hand. Yet he never wallows like Lowry nor amuses like Bukowski. His spare, efficient prose could be called medium-boiled, but at times it seems overly casual, tossed off. While this makes for “realism” and easy digestibility, it prevents Allen from scaling the heights (and plumbing the depths) of his literary forebears.

No contemporary addiction narrative is complete without a 12th step in the third act, and “All or Nothing” follows the program, however reluctantly. At Gamblers Anonymous meetings, P refuses to sugarcoat — or fully accept — recovery: “Being rescued” from gambling “is like living death. If you believe in luck, you feel empty when you stop believing. Now you know there is no luck. ... You no longer believe.” In a curious inversion of the “Higher Power” concept — “There are no atheists in a casino,” Allen writes, in the novel’s finest line — gambling recovery entails losing faith, not gaining it.

As another 12-step commonplace has it, unrepentant addicts wind up dead or in jail. And in a novel that traces the jackknife reversals of the gambling life, it would be unwise to bet on a clean getaway for P. “Addiction is not a tragedy,” P concludes. “It is a love story with abuse in it. We love, and it abuses us.”

*Andrew Hultkrans is the author of “Forever Changes.” He is at work on a book about surveillance in America.*

### Note from the Editor

We would like to welcome any article that you may find interesting to place in our newsletter! To submit an article, please send it to [melissam@ncpgambling.org](mailto:melissam@ncpgambling.org).

We would like to say “Thank You” to all the Members listed below who have graciously taken the time out of their busy and hectic schedules to write an article for this newsletter. If, by chance, we have forgotten to mention your name, we sincerely apologize in advance!

AGEM  
Nora Bock  
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Alice Savage  
Phil Townshend  
Richard Wood  
Arnie Wexler  
Sheila Wexler

# Responsible Gambling in California

*Submitted by: Esther Garcia, California Department of Justice, Bureau of Gambling Control*

In March 2007, the California Department of Justice, Bureau of Gambling Control established the Responsible Gambling Assistance Program (RGAP) to carry out mandates in the California Code of Regulations. The RGAP staff receives and maintains Self-Exclusion patron forms and information, which gambling patrons voluntarily Self-Exclude from all licensed gambling establishments in California. Participants of the statewide program are not required to maintain residence in California. There are three terms for Self-Exclusion, which include one year, five years, or lifetime.

Tool kits were created for California gambling establishments and patrons: "Employee Responsible Gambling Training," "Impact on Family," and "Self-Exclusion Participant." Each tool kit includes helpful information on how to recognize a problem gambler, how to approach someone who may have a gambling problem, tips on how to gamble responsibly, and methods of recovery. Information con-

tained in each tool kit is provided by the California Department of Alcohol and Drug Programs, Office of Problem Gambling as well as Gamblers Anonymous/Gam-Anon.

Two brochures were created in an effort to educate the public on problem gambling. The RGAP brochure was created for employees of licensed gambling establishments, listing information on how to help individuals with gambling problems and several treatment resources in California. The Charitable Gambling brochure was created for patrons who attend fundraisers using "controlled games."

Since inception in March 2007, the Self-Exclusion Program has processed 201 lifetime participants, 64 five-year participants, 96 one-year participants, and 14 have expired without renewing. The total number of Self-Exclusion participants has more than doubled in 2008 and continues to grow.

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## My Car Drives Itself to the Casino

*Submitted by: Gary Lange*

I have often heard this capricious phrase from clients in the early stages of recovery: "I don't know how I ended up there; my car must have driven itself to the casino!" Denying the power of the obsession/addiction often leads the problem gambler to almost believe their vehicle has mysterious powers and acts on its own. Those who want to quit gambling can attend Gamblers Anonymous, psychotherapy, attend supportive groups, and take medication, but still are amazed how easily they can find themselves inside of a casino and placing a bet. Staying away from all gambling environments is a major first step in recovery.

In therapy, I initially join the "recovering" gambler in behavioral contracts, which involve commitments, and specific plans for safety. For example, a client may agree to this kind of an agreement: "I commit to you my therapist or sponsor, that I will drive this specific route to the pharmacy, this route to the supermarket and then directly home. I expect to be home by 4:30 at which time I'll call you." While this scenario seems incredibly simplistic, it seems more crucial, in my experience, for gamblers than other addicts and alcoholics. Since pathological gambling is an Impulse Control Disorder, monitoring these impulses and setting up safe plans is often necessary. Being able to trust another,



make commitments and get "through" visceral urges are important steps in recovery. To accept one's powerlessness (as in GA's first step) and begin relying on a greater Power (Steps 2 and 3) are prodigious steps for many problem gamblers.

Abstinence is a major factor in assisting gamblers to get rested, nourished and more prepared to deal with anger, guilt and sadness. The floods of these feelings may need careful monitoring. As appropriate, family members can help decrease the chances of further financial losses and contracts for safety. Spouses, parents and friends tend to be very slow to trust especially since the gambling was often been so deeply concealed.

Over time, many recovering gamblers are particularly friendly, generous, and quite willing to "carry the message to other problem gamblers who still suffer." They even come to humorously accept that their car is just an inanimate object that *only goes where it is driven*, just as they only go where THEY are driven!

### New Northstar Website

The Northstar Alliance on Problem Gambling, the NCPG state affiliate chapter in Minnesota, has launched a new website at [www.northstarproblemgambling.org](http://www.northstarproblemgambling.org).

Northstar and NCPG Board Member Don Feeney reports: "We're using a host called nonprofitoffice.com. Their rates are very reasonable (a sliding scale based on the size of the organization) and their system is very easy to use — anyone can do edits, updates, and additions with very minimal technical training. If you know of any affiliates or other organizations that are looking to set up a web page, this would be a good starting point."

# Problem Gambling and Family Court in Nevada: A View from the Bench

*Submitted by: Judge Cheryl Moss*

*Judge Cheryl Moss has been a Family Court Judge in Clark County, Nevada since January 2001. During her first year on the bench, Judge Moss made it a priority to develop a program where she and her judicial colleagues could refer out litigants for problem gambling assessments.*

With the help of her mother, Dr. Rena Nora, Clinical Professor of Psychiatry, University of Nevada School of Medicine and Medical Director, Outpatient Problem Gambling Program, Veteran Affairs Southern Nevada Healthcare System, and Carol O'Hare, Executive Director of the Nevada Council on Problem Gambling, Judge Moss put together a referral network of professionals who are certified to perform problem gambling assessments.

Judge Moss has regularly lectured on problem gambling to family law attorneys at continuing legal education seminars. She discusses with attorneys what problem gambling is, how it can impact on child custody cases and marital waste in divorce cases, and how an attorney can seek out information to determine whether problem gambling within a family or the marital community exists.

For example, one can subpoena player's card records from a casino to show how much was played on a given day, what time and for how long a gambler was using a particular gaming machine.

In divorce cases, the problem lies with spouses sharing the same card or swapping the other spouse's cards and inserting them in the gam-

ing machines. Consequently, one cannot tell who was actually using the player's card at any given time (unless the other spouse can prove he or she was at work instead of gambling).

Another possible sign of a gambling problem is daily ATM withdrawals, particularly if the withdrawals are actually at a casino or bar. Again, there would be a proof problem if the accused spouse alleges that the other spouse or someone else was using the ATM card. The judge might evaluate the regularity of the withdrawals, the actual amount withdrawn, and how large were the amounts that were taken out. Bank statements would evidence ATM withdrawals.

Credit card statements can also serve as evidence of cash advances. Receipts of payday loans as well as pawn shop tickets are additional evidence. Sworn testimony from family members constantly loaning out money ("bailouts") to the gambler is another form of evidence.

A good number of gamblers cash their paychecks at the cashier's cage. One casino gave out one token for a free bar drink each time a gambler cashed his or her paycheck. The long lines snaked around the cashier's cage on payday. Some casinos gave out "lottery-type" chances to win a big money prize if they cashed their paychecks at their place. Drawings would be held later that day, and so the gambler would have to hang around and maybe gamble while they wait for the big drawing.

Las Vegas, Nevada is a gambling Mecca. Nevada's divorce rate has historically been known to be the highest in the nation. Judge Moss is currently one of ten judges handling domestic relations cases in a county of nearly two million people.

Judge Moss has encountered frightening stories of parents leaving their very young children unattended in a casino for several hours until hotel security picks them up. She has heard cases where minor children were left home alone completely unsupervised and left to fend for themselves while one parent worked and the other parent was out gambling.

The judge has handled cases where parents who actually worked as 21-dealers and other table games openly admitted to already having a gambling problem in her courtroom and were already in counseling and treatment. The judge has had cases where a parent with no history of a criminal record received a felony conviction for a "first offense" because of problem gambling. Judge Moss has even seen several veteran attorneys lose their license to practice law because of a gambling problem.

Judge Moss believes that addressing problem gambling starts with awareness and educating the public. In her career as a family court judge, awareness and educating the public are not possible without substantive knowledge and actual courtroom experience.

The National Council on Problem Gambling hosts continuing education conferences annually. Statewide conferences are also held annually. Judge Moss encourages those who have attended these conferences to spread the word and tell their peers and colleagues who are interested in learning more about problem gambling to check out these educational opportunities.

## NotAGame.org Website Gets New Look

*Submitted by: Linda Graves, Problem Gambling Program Manager, Washington State*

The website developed for Washington State Problem Gambling Program by Jones Advertising, Seattle, targets parents of teen gamblers. The site has a new look and interactive components. The site addresses the fact that many parents won't permit their kids to smoke cigarettes or drink alcohol, but they do allow, and sometimes even encourage, them to gamble. Some of the risks associated with gambling are illustrated through the use of cards. The new site layout portrays the look of a poker table. Highlighted information is obtained by clicking on the back of what looks like a playing card, and the card flips at the click.

The site also allows the viewer to watch the new 30-second television ad. The ad highlights two facts: There are risks associated with teens gambling and that 1 in 7 teens that gamble develops gambling related problems.

In addition to a variety of information about gambling, the site also offers an interactive place where questions can be answered. The answers will not be in real time to allow for editing, but within 48 hours a problem gambling counselor will address questions with the answers posted on the site. There is an archive where the latest questions can be read.

To view this website, go to [www.notagame.org](http://www.notagame.org).

### Teen Gambling Related Problems

- Bets or sells personal items for gambling
- Steals or borrows money to gamble
- Misses school or work for gambling
- Has problems at home or school due to gambling
- Tries to quit gambling but can't.

## Knoxville Gambling Problems

*Submitted By: Matthew Orbell*

The Helen Ross McNabb Center in Knoxville, Tennessee offers free services for people suffering from problem gambling. According to the University of Memphis Institute for Substance Abuse Treatment Evaluation more than 155,000 people in Tennessee are problem gamblers and another 64,743 suffer from pathological gambling. Despite these numbers and the low cost of the treatment it offers, McNabb is struggling to get clients in the door.

Outreach has therefore become a central part of McNabb's gambling program. However, the process of outreach has not been altogether straightforward. One problem seems to be a lack of public demand for such services. This may seem odd given the high numbers of problem gamblers referenced above. Nevertheless, a major symptom of this lack of demand is the dearth of treatment providers in East Tennessee who work with problem gamblers; in fact, McNabb's program is the only one of its kind in the area. At first glance, it may seem that this supply shortage would leave unanswered a large demand for services. However, before there can be a demand for services, problem gambling must first be acknowledged by the general public as being a problem. Without such acknowledgment, we cannot expect those who suffer from the problem to come forward or to be encouraged to come forward by their loved ones.

While it is certain that word is still spreading with regard to the McNabb gambling program, it is also probable that pathological gambling may not yet be widely recognized by the general public as a condition for which treatment is available. This is in sharp contrast to drug and alcohol addiction; while these are widely accepted by both practitioners and the public alike as common and treatable, that is not the case for pathological gambling. Indeed, while pathological gambling is increasingly being understood by service providers as a true addiction, the DSM IV-TR still categorizes it as an Impulse Control Disorder.

Uncertainty about the diagnostic veracity of pathological gambling when coupled with the fact that almost all forms of gambling in Tennessee are illegal exacerbates McNabb's outreach problems. The illegality of most forms of gambling in the state means that much of the gambling that goes on in Knoxville is "underground." Reaching this "underground" segment of the population has proven to be a difficult task; fears of being caught in an illegal activity no doubt inhibit many problem gamblers from seeking help — even if they do recognize that they need it. Fears of this kind could be mitigated if there were more programs serving problem gamblers. After all, people being treated at drug and alcohol facilities are not arrested for seeking treatment even though they have engaged in illegal drug activity; in fact, in many cases people are referred to treatment by the courts.

The agency does have a very small handful of clients currently seeking treatment for problem gambling. Currently, only a single therapist working out of McNabb's residential facility is responsible for provid-

ing gambling services to the entire East Grand Division. Due to the low number of referrals, this challenge is being met and clinical services are being provided to anyone seeking help. At this time, the two greatest challenges faced by this program are first, learning how to insert the message of its availability into the underground world of gambling in Knoxville; and second, bringing practical knowledge to the public with regard to the opaque world of problem gambling. When these tasks are accomplished, it is likely that the state will need to seek out other treatment providers to assist serving this population as the demand for services may outweigh the available supply.

*For more information about the McNabb program, contact Matthew M. Orbell, M.Ed., Master's Professional Counselor, Helen Ross McNabb: CenterPointe Addictions Services, 5310 Ball Camp Pike, Knoxville, TN 37921, 865-523-4704 ex. 3421, Matthew.Orbell@mcnabb.org.*

### New AFM Website

A brand new website, [www.getgamblingfacts.ca](http://www.getgamblingfacts.ca) — the first web resource of its kind that provides extensive information on how gambling really works — was recently launched by the Addictions Foundation of Manitoba (AFM).

This resource was developed as an attempt to fill in the gaps in information that currently exist. "Legal gambling is an accepted form of entertainment," said Laura Goossen, an AFM Director, in her launch speech at the event. "However, we also know that gambling and its related issues are not always well understood by the general public or by many who play these games."

These gaps are much greater for people with language barriers. Therefore, a number of language choices are available on the website: Chinese Simplified, Chinese Traditional, English, French, Filipino and, in the near future, other Asian languages.

There are many "secrets" or little known details on how gambling works. The website clearly answers such questions as: How do casinos generate profits? How does gambling work? How much will a player eventually pay for gambling?

"Right now, there is no other web resource out there that provides this much insight on the topic of gambling," explained Esther Tran, a Prevention Education Consultant with the AFM. "getgamblingfacts.ca is truly a powerhouse of information."

In some sections of the website, an interactive approach is used to attract and teach viewers about the main subject of interest — how gambling really works. A website viewer from San Francisco commented on his experience with the interactive segments: "Great graphic interface and good information in terms projected amounts of money spent."

[www.getgamblingfacts.ca](http://www.getgamblingfacts.ca) is a free website. It is best viewed with a screen resolution of 1028 x 764 pixels and a Flash program of 8.0 or higher.

# GAM-GaRD: A new social responsibility tool

Submitted by: Professor Mark Griffiths (Nottingham Trent University, UK); Dr. Richard Wood (GamRes Ltd., Canada); and Jonathan Park (University of Salford, UK)

During late 2006 to mid-2007, in conjunction with Camelot Group Plc (the UK National Lottery operator), we helped to develop a more effective process for developing socially responsible games. The new gaming risk assessment tool GAM-GaRD (Gambling Assessment Measure – Guidance about Responsible Design) is an innovative assessment tool that will help gaming companies design games that reduce the risk for vulnerable individuals.

We have done lots of research on structural and situational characteristics including the things that get people to gamble in the first place (such as advertising, the accessibility of products, the use of inducements, design of the gambling venue, etc.) and the individual characteristics of gambling types and products that get people gambling repeatedly (such as the speed of the game, the use of 'near win' features, how quickly money is paid back to the punter, the use of lights, colours and sounds on a slot machine, etc.).

GAM-GaRD was developed through a combination of examining the current state of research on structural and situational characteristics worldwide, and by employing a team of leading world experts, in terms of researching responsible gambling issues and treating problem gamblers. The advisory panel comprised the IGRU team and other world experts from the US (Dr Henry Lesieur), Canada (Dr Robert Ladouceur, Dr Jeff Derevensky), Australia (Dr Alex Blaszczynski), and Germany (Dr Gerhard Meyer). Final testing of the measure compared the results to the known risks associated with established games. GAM-GaRD is now available under licence to the whole gambling sector (see <http://www.gamgard.com>).

GAM-GaRD can be used to identify the structural and situational characteristics of games that present the greatest risks for excessive play. GAM-GaRD provides each game tested with a total score that gives a 'traffic light' rating (i.e., green = low risk for vulnerable players; amber = medium risk for vulnerable players; red = high risk for vulnerable players). GAM-GaRD identifies which elements of a game, if any, are problematic so that they can be 'adjusted' to make the game safer or can be combined with other external measures of social re-

sponsibility in an effort to reduce overall harm. GAM-GaRD was designed so that it can be used to assess any gambling type game by anyone with a basic knowledge of the features of the game. For example, the measure can be used by game developers, responsible gaming personnel and game regulators.

It is important to note that a 'red' rating does not necessarily imply or mean that a game should not be introduced into the marketplace. If a game is identified as having some problematic features there are a number of options and strategies that can be considered and implemented:

- **Change one or more of the individual characteristics of the game to lower the overall score:** It is possible to use the measure to identify the specific problematic features of the game in order to adjust the game accordingly. For example, if the game scores high on event frequency, then measures can be introduced to slow the game down, and lower the overall score. If a game scored high on continuity of play then breaks could be put in place between the end of one game and the start of another.
- **Employ more market protection and preventative strategies:** If a game scores highly, other protective and preventative responsible gaming initiatives might be introduced to limit, control, or minimise the affect of the game. For example, an online game may be restricted in terms of the hours that it is made available, or weekly spend limits could be introduced. Players who lose a certain amount might be prompted to reconsider whether they wish to continue playing. Other socially responsible strategies may be avoiding placing gaming machines in socially deprived areas, away from younger players, or where alcohol is prevalent.
- **Abandon the game:** In some cases, the game may be abandoned or require such serious modifications that the game becomes unfeasible, unprofitable and/or unattractive to players.

This first version of GAM-GaRD incorporates the most contemporary and up-to-date research findings in the field of international gambling studies, and direct clinical experience from those working with problem and 'at risk' gamblers.

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## AGEM Takes a Big Step Forward in 2008

Submitted by: AGEM

2008 has been a banner year for the Association of Gaming Equipment Manufacturers (AGEM), the trade organization representing the leading global gaming suppliers and one of NCPG's biggest supporters. Under the direction of new Executive Director Marcus Prater, AGEM is forging ahead with renewed energy, a new focus, expanded membership and a heightened commitment to representing its members both domestically and internationally.

As the former Senior Vice President of Marketing for AGEM charter member Bally

Technologies, Prater has had a busy first few months at the helm of the organization. He has invigorated AGEM with a number of important new initiatives, such as a major push to increase the organization's membership from 32 members to 58 members in just the past eight months.

On the educational front, AGEM has recommitted its funding of \$300,000 for the ongoing development of an enhanced slot technician curriculum at the College of Southern Nevada (CSN) that will allow CSN to provide the gaming industry with the well-

trained slot technicians it needs for today and in the future.

Working together for the benefit of the gaming industry is an important theme that continues to drive the purpose and philosophy of AGEM. During the past year, the organization has undertaken a variety of successful special events at such key gaming trade shows as the National Indian Gaming Association (NIGA) event, the Canadian Gaming Summit and the Southern Gaming Summit. These are all a prelude to this year's  
*(AGEM, continued on page 9)*

# A College Study

*Submitted by: Florida Council on Compulsive Gambling*

The Florida Council on Compulsive Gambling (FCCG) released the results of its latest prevalence study, *Gambling and Problem Gambling Prevalence among College Students in Florida* in October, 2008. The study reflects the responses of 2020 students from seven Florida universities surveyed between December 2007 and February 2008.

With results revealing that 14.5 percent of Florida college students are at risk for gambling problems, it is clear that for many students gambling is not just harmless fun. This figure is more than double the rate previously reported for Florida adults (7.1%). In addition, the number of Florida college students classified as problem and pathological gamblers (5.2%) was more than four times that reported by adult and elder populations in the state. Based on the survey results, approximately 50,000 students statewide are experiencing significant to severe problems related to gambling.

While playing the lottery (39.9%), emerged as the most popular form of gambling among college students, card playing among male students, (49.3%) exceeded all other forms of gambling. Undoubtedly, the glamorization of Texas Hold'Em poker through the televised World Series of Poker tournaments has played no small part in fueling the popularity of this activity.

The survey also revealed some troubling information about students' efforts to seek help. Those with gambling problems indicated that

they would be less likely to turn to family members for help and more likely to not seek help at all.

It is clear that there is a need to put information about problem gambling in front of college students and a good place to start is the college campus itself. The Florida Council on Compulsive Gambling has created a program, Students Against Gambling Addiction, (SAGA), to assist colleges and universities in doing just that. By utilizing the relationships students have with their peers, resident advisors, financial aid counselors, student-athlete coaches, educators and other university personnel, SAGA offers practical insight and understanding about gambling addiction and identifies avenues students can take to access help for themselves and others. The FCCG has distributed the SAGA program to 60 colleges and universities in Florida for implementation across the state.

Educating parents about the warning signs of problem gambling and the resources available for individuals in need of help is another key element in addressing the issue. To that end, FCCG will work with campuses to assist in providing information to parents about problem gambling and college students during fall and spring orientation events.

A copy of the college study can be accessed at the FCCG website, [www.gamblinghelp.org](http://www.gamblinghelp.org).

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## The New York Council on Problem Gambling 2008 Prevention Symposium Summary

*Submitted by: Michelle Hadden*

This event served as an ideal platform to effectively address the issues being faced by chemical dependency and problem gambling prevention programs and to develop a comprehensive plan to address the infusion of problem gambling services into existing programs in New York State (NYS). With the expansion of problem gambling prevention services on the horizon, input from professionals in the field is valuable for ensuring that appropriate services and trainings are available to meet the needs of the field, as well as to create a smooth transition for newly funded programs.

Invitations were distributed to all Council on Addictions of New York State (CANYS) members as well as to the 19 existing OASAS funded problem gambling prevention programs. Fifty-three professionals from 33 organizations attended both the training and discussion to form an Advisory Committee.

The morning program was intended to inform the audience of what the NYS Office of Alcoholism and Substance Abuse Services (OASAS) current plans are for problem gambling prevention in NYS and to begin exploring what is happening in other states. A brief overview of problem gambling prevention was presented for those audience members who were either new to the field or have not yet begun to deliver problem gambling prevention services.

The 53 participants who comprised the Advisory Committee were further broken into groups for the purpose of discussion during the

afternoon session. Groups were predetermined by participants' role within their organization. Six groups were formed including: 1) Executive Directors of agencies without a problem gambling prevention program, 2) Executive Directors of agencies with a problem gambling prevention program, 3) Problem Gambling Prevention Specialists, Coordinators or Managers I, 4) Problem Gambling Prevention Specialists, Coordinators or Managers II, 5) Clinicians, Student Assistance Counselors, and other tertiary prevention providers, and 6) Other staff in substance abuse prevention programs (including Training Managers, Prevention Managers, and an Adventure-Based Counselor).

Each group was asked to discuss six questions and record their responses. The six questions are listed below. For a copy of the responses, please visit [www.nyproblemgambling.org](http://www.nyproblemgambling.org)

1. As prevention professionals and/ or program directors, what further research and training is needed on problem gambling throughout NYS?
2. What are the most preferred types of training for prevention agencies? (i.e. in-person, online, home study, half-day, full-day, multi-day, panel, discussion-based, lecture, etc.)
3. What resources are needed to effectively infuse problem gambling into existing alcohol and substance abuse prevention programs? (i.e. technical assistance, staff, funding, curriculum, "how to" type manuals, etc.)

*(Symposium, continued on page 9)*

# Implementing Rapid Cycle Changes in Your Organization

Submitted by: Jay Ford, PhD, NIATx Director of Research

In the last newsletter, I encouraged you to experience your organization from the customer's perspective by conducting a walk-through of the intake process. For those who did, you probably identified organizational processes that could be improved to enhance customer service. The next step is to ask yourself how a change to one of these processes would fix a key problem or issue in your organization. Once the process has been identified, it's time to make changes to address the key problem. When making changes, answer the following questions:

1. What are we trying to accomplish?
2. How will we know if a change is an improvement?
3. What changes can we test that may result in an improvement?

**What are we trying to accomplish?** This question ensures that you've identified a promising change that addresses an important organizational issue. For example, you might improve the intake process or increase client engagement. However, the process does not stop at identification. You need to take steps to understand the significance of this issue for your organization. And that leads to the second question.

**How will we know if a change is an improvement?** What will the results be? Is it a shorter intake process or increased client engagement in services? To answer this question, you will need to ensure that systems are in place to measure the impact of the change. Four initial steps include: 1) Select and define the measure (e.g., number of sessions attended after admission); 2) Collect baseline data for the selected measure (e.g., client engagement); 3) Determine a target population and location for the change (e.g., all problem gambling clients at the main office); and 4) Establish a clear aim (e.g., improve the average number of monthly sessions per client from three to six). A clear aim allows you to understand whether the change is an improvement. Now you are ready for the last question.

**What changes can we test that may result in an improvement?** While the exact change will be unique to your organization, making rapid-cycle changes ensures that small-scale changes are tested, the results verified, and decisions made within short time frames. The Plan-Do-Study-Act (PDSA) process is designed so that you can focus on each element of the change process.

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*(Symposium, continued from page 8)*

4. What activities would you like to see at the state level and how would these activities support your local level work?
5. Many problem gambling prevention activities have been focused on raising individual and community awareness, what other prevention activities are individuals, schools, and communities ready to receive/ implement?
6. What organizations, coalitions, and/or individuals have the knowledge and expertise to help move the field of problem gambling prevention forward in NYS?

After this event, the information was compiled into a full report, which was presented to both the Governor's Office and the NYS OASAS. Each participant received a copy of the report, as well as all prevention providers attending The New York Council on Problem Gambling's Annual Conference.

1. **PLAN the Change:** Identify the aim of the change and identify which results will make the change an improvement. In this stage you should consider what steps you need to take to prepare for the improvement. Why is this change important to clients, staff, and the agency? Who needs to be involved? When do various actions need to happen? Remember to use what you learned in your walk-through exercise to guide your change plans.
2. **DO the Plan:** The purpose of the DO step is experimentation. Try the change for a short period of time (e.g., two weeks) and in a limited area (e.g., for a few patients). Document any problems and unexpected observations and start analyzing the data you are collecting about the change. Remember to change only one thing at a time so that you can track the data associated with the change and determine which change is making an impact.
3. **STUDY the Results:** Complete your data analysis and compare your predicted results with your actual results. Ask what worked well and what did not. Did the change result in an improvement? Why or why not? Summarize what you have learned.
4. **ACT on the New Knowledge:** Use the results of the STUDY stage to decide on your next steps. Was the change beneficial to clients, staff, and the organization? Should the change be increased in scope or tested under different conditions? Should the change be adopted, adapted, or abandoned? What will the next PDSA cycle be?
5. **REPEAT:** Consider what barriers you faced, what you would do differently in the future, and what went well and should be repeated. Begin a new cycle, adapting the change as needed, in order to continue making improvements. Your changes should stay true to the Plan-Do-Study-Act (PDSA) cycle.

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*(AGEM, continued from page 7)*

spectacular "A World Celebration of Gaming" extravaganza to be held at The Orleans Arena on November 18 during the Global Gaming Expo (G2E) trade show in Las Vegas. This star-studded, invitation-only affair will feature special musical guest Kenny Loggins and is jointly sponsored by AGEM members Aristocrat Technologies, Bally Technologies, International Game Technology (IGT) and WMS. The event is a remarkable demonstration of cooperation between these gaming equipment suppliers and is a testament to AGEM's philosophy of joining together to create benefits for every company within the organization as well as AGEM-member customers.

AGEM is at the forefront of the problem gambling issue as well. The organization is a strong supporter of educating the public and the industry about the many aspects surrounding problem gambling. That is why AGEM contributed \$20,000 to the Annual Conference on Problem Gambling, organized by NCPG and hosted by the California Council on Problem Gambling.

It has indeed been a most productive, challenging and exciting 2008 for AGEM, its members and the gaming industry. Looking toward the future, AGEM is poised to provide the leadership, programs and opportunities that will benefit its members and the gaming industry as a whole, both now and in the future.

# A Better Tomorrow in More Ways than One

*Submitted by: Paul Del Vacchio*

*Life moves so quickly and thankfully all due to recovery; I can make the very best of each and every moment. I continued to be blessed in every aspect of my life. Almost 8 months ago I resided inside the California Prison System serving a sentence for crimes I committed because I never admitted I am a compulsive gambler. I am compulsive gambler and 8 months removed from my incarceration my life continues to get better.*

I have secured a position as the Community Outreach Director for A Better Tomorrow located in Murrieta, California. A Better Tomorrow is an intensive inpatient and outpatient recovery treatment center treating people with gambling, drugs and alcohol addictions. We are a CARF (Commission on Accreditation of Rehabilitation Facilities) which is the level of accreditation for an addiction treatment center. A Better Tomorrow treatment staff holds high credentials, mostly master level degrees and, through continued education/experience, is able to provide the most innovative treatment options currently available. Our relapse prevention and family components surpass the industry standards to provide successful long-term recovery and increased productivity of each participant.

A Better Tomorrow also realizes that those who are battling addictions use up a disproportionate amount of resources. They miss more working days and they are often less productive than fellow workers. They place more claims against workers compensation, unemployment, health and life insurance benefits. Their addictions result in more automobile accidents, emergency room visits, and 911-emer-

gency calls. Their actions exacerbate the problems of overcrowded court dockets, probation systems, jails, prisons and juvenile detention facilities.

Our intensive outpatient program, in conjunction with our sober living facilities, provides a stable, loving and caring environment. Our clients are able to obtain the goal of long-term recovery. We believe in personally guiding each and every client through each and every step in becoming clean and sober. We also acknowledge and will strive to help the client work on resolving any underlying core issues, which may include anxiety, depression, bi-polar disorder, etc. In that attempt, we will provide traditional addiction treatment for adults and their families with an emphasis on maintaining long-term recovery through innovative methodologies and individualized treatment planning.

The process of recovery is just that — a process that takes time. Usually, the addiction is all-consuming and has taken some time to reach this level. This is where A Better Tomorrow comes in, because we understand the process needed to formulate a much better way of life. We have outstanding programs that will commence this better way of life and when a client completes the program we stand by as they are integrated into the rigors of life. We can and will help anyone with the desire to stop the addictive behavior. We are very proud to offer a comprehensive problem gambling tract and we have staff that is experienced in all levels of addiction.

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## How Gam-Anon Can Help the Gambler and the Family

*Submitted by: Bobbie C.*

After attending Gam-Anon for a number of years, I know personally how much this program has helped me, my gambler, and our family. I learned (and continue to learn) how my actions and words do play a part in the recovery occurring in our family. I recognize that I didn't cause the gambling nor could I stop it. However, I did have a part in the gambling problem.

In the meeting that I regularly attend, we have a Step Study every third week. At this meeting, we read in-depth about a particular step and then ask some soul-searching questions of our group about how we are working this step. The questions are from one of our Gam-Anon pieces of literature. These questions are well thought-out, and in answering them we are given the opportunity to grow emotionally because we are recognizing areas that need work.

Personally, I have found situations where I needed to be more mature, learning to take responsibility for my own actions and not look to blame another for the negative things that had happened in my life. I finally realized that I, too, had been making choices. Too often I chose to be passive and not deal with the problem. I had labeled myself "the victim." Since removing that label from my forehead, I now choose to see my part in what's going on in my life. And, actually, it's very freeing. I am benefiting and so is my family.

The program of Gam-Anon is available to loved ones and friends of compulsive gamblers. I see recovery in others in so many ways. Yet, there are also those who attend for a week or two and don't come back. Of course, I don't know the reason for them not coming back, but I believe often it's because they had attended the meeting hoping to

find a way to fix the gambler. We can't offer them that. What we can do is offer suggestions on what to do and what not to do regarding financial and emotional issues, as well as to encourage them to see their part in the problem. There they will find a group of people who understand their situation. Hopefully they hear something that will make them one day want to return.

Facing ourselves as we really are isn't usually fun. It takes work to deal with our shortcomings. At the same time our positive qualities become more evident and boost our self esteem. As with other 12-Step programs, when we work our Gam-Anon program we change for the better.

I am grateful for my program and for all the positive changes that are now part of my life. I encourage anyone who is thinking of attending a Gam-Anon to come and see if this program can help you.

# Canada's Responsible Gambling Council Launches RGC Centre for the Advancement of Best Practices

*Submitted by: Susan Saundercook, Responsible Gambling Council*

Last Spring, the Responsible Gambling Council (RGC) announced the creation of the RGC Centre for the Advancement of Best Practices. The Centre was set up to promote the identification and adoption of best practices in responsible gambling and prevention programs.

The Centre's research focuses on workable measures likely to reduce problem gambling. Examples of this include: best practices in self-exclusion programs, the management of electronic gaming machines and player cards and pre-commitment. "We talk a lot about the need for gamblers to make informed decisions, but what about those who are making decisions about responsible gambling programs?" asks Jon Kelly, CEO, Responsible Gambling Council. "The decision-makers also need strong analysis and solid information. That's why we decided to contribute our analytical skills to help inform these critical decisions."

## Setting Voluntary Standards

In upcoming months, the Centre will be testing and publishing the Responsible Gambling Index — an independent standard for responsible gambling initiatives that governments and gaming providers have put into place in their venues. RGC has invested considerable time and resources in the development of the Index over several years and will pilot the standards in a gaming venue in 2009.

**Responsible Gambling 'Think Tank'**  
RGC has a well-established history of bring-

ing together diverse groups and interests in the pursuit of a common goal. The Centre will continue to expand this role, bringing together problem gambling specialists, gaming providers, researchers and gamblers with firsthand experience of problems to seek a shared understanding and solutions to gambling-related problems.

"The Responsible Gambling Council's multiple roles in prevention, information dissemination and best practices research has allowed us to have contact and discussions with broad range of individuals and organizations," says Monica White, Director, RGC Centre for the Advancement of Best Practices.

An important part of this collaborative process is the Expert Forum. RGC has hosted a number of forums over the years on various topics in problem gambling prevention. The 2007 forum focused on Self-Exclusion. RGC believes very strongly in bringing together a whole range of experts. In the case of the Self-Exclusion Expert Forum, this included security staff, operators, management, problem gambling specialists and, of course, the people who have had firsthand experience of self-exclusion.

"The Centre believes that bringing together all perspectives leads to stronger discussions on key issues," says Monica White. "These discussions are a key part of our research, and in turn, lead to practical, workable solutions."

"The Expert Forums are already having an impact," continues White. "Several provinces

implementing changes to their self-exclusion programs are referring to the results of the Expert Forum and the subsequent report."

## Expert Forum 2008

This year, the focus of the forum will be 'Pre-commitment and Player Cards: The role of technology in supporting informed player decision-making.' Pre-commitment refers to setting money or time limits before a gambling session. This could mean presetting time and money limits, cooling off periods, restricting access to gambling at particular times, or other options.

## Building on Success

The Centre builds on, and substantially expands, the current scope and operations of the Responsible Gambling Council.

The Council has initiated a range of successful programs as well as analytical and 'best practice' studies in recent years, including a review of self-exclusion in Canada and a comprehensive assessment of the relationship between electronic gaming machines and problem gambling.

RGC has established a reputation for its balanced and thoughtful positions on issues that are frequently volatile and misunderstood. The Centre also builds on the unique history of the Council, which was established by compulsive gamblers in 1983 and evolved into a professional organization that continues to maintain strong links with those who have experienced gambling problems firsthand.

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## It's Time for 'Heads-Up' About Youth Internet Gambling

*Submitted by: Ron Rice*

*"Young man, I want you to think twice before you do that again!"*

Many of us remember the days when we were in high school in our communities, a time we witnessed many acts of boys and girls 5–6 years younger than us at the time. Remember? In every case, we were quick to say something, a short comment, to the youth that were currently in grade school or middle school. Whether or not we knew the young person, we felt it our duty, as part of our community, to give a kind "heads-up" to a very young person walking on a potentially dangerous path.

This is the mission of S.A.G.E., a new educational initiative that will present a one-period talk to a large 8th grade classes in middle schools in Missouri and Kansas. It is time to alert the 8th graders about the risks of casual gambling in their schools, their neighborhoods, and, *most important*, in the quiet of their homes on the INTERNET!

In the same way that D.A.R.E. introduced their successful program to visit schools in 1983; our roll-out will begin very early in 2009. S.A.G.E. (Students Aware of Gambling Excesses) will focus exclu-

*(Heads-Up, continued on page 14)*

## When to Stop

*Submitted by: Marilyn Lancelot*

On June 26–28, I attended the 22nd National Conference on Problem Gambling in Long Beach. I felt privileged to listen to workshops describing ways to improve prevention of gambling problems and different treatment strategies. I appreciated the discussions by leading researchers in the field; counselors, psychologists, and attorneys, and gained an appreciation on how the councils work diligently with casinos to save lives from the gambling addiction.

Gambling has become the nations' leading form of recreation and the money wagered is more than the combined total spent on all other forms of entertainment. I am aware that most people can gamble and not use money or time that interferes with their family life or their employment. Unfortunately, a percentage of people who gamble develop an addiction that is progressive and destructive, and may create problems such as divorce, loss of employment and homes, bankruptcy, and suicides. Some compulsive gamblers are serving prison sentences for crimes committed to support their addiction.

I destroyed my life with gambling and joined a support group where I found hope and strength. I needed someone to show me how to stop, not tell me, "Just stop!" I have not gambled for more than 17 years and have turned my life around. Years ago, there were very few women in the support groups and when one did attend she didn't return, so a couple of females came to my apartment one night and we started a women's group. The women stayed and we felt safe and formed a bond among us. A short time later, we published a Women Helping Women Newsletter which has been on-line for more than ten years. Women from around the world are reading the Newsletter. They live in places where there are no support groups nor are there counselors trained to treat compulsive gamblers. The Newsletter

allows the women to share experiences through the computer. Many of them write articles for the Newsletter and send messages to each other discussing ways to stop gambling. Through this communication, we share some of the reasons we gambled and how we can avoid these issues. I've learned through Women Helping Women that I'll never stop learning.

While serving a prison sentence for a crime I committed, I began writing a journal, which last year became a book, *Gripped by Gambling*. The book has been read by women around the United States and Canada, as well as many some foreign countries. My story details the steps that enabled me to stop gambling and how my life changed. Today, I lead a normal life and enjoy my freedom from gambling. I am re-visiting favorite hobbies from past years and renewing old acquaintances. I've changed my thinking processes and am learning to set healthy boundaries and how to prioritize. I can say, "I'm sorry, I'm wrong, and thank you." I don't lie any more. I not only hear you but I'm looking at you and listening to what you say. I have no need to escape from life today and I can look in the mirror and love the woman looking back at me.

The gambling addiction is not prejudiced. It affects rich and poor, young and old, and it knows no racial barriers. I receive letters daily, from teachers, college students, nurses, accountants, grandmothers, and housewives all wanting to stop gambling. The number of problem gamblers increases daily and this hidden addiction tears at the fabric of society. Addictions are the most untreated treatable mental illnesses and there is help. I want to be there when a hand reaches out. Gambling is here to stay and so am I.

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## 'United We Stand, Divided We Fall' Missouri Musings after the Kentucky Conference

*Submitted by: Nora Bock*

I'm not a renowned researcher. I'm not a practicing clinician. Nor am I a brilliant trainer in this growing field of problem gambling. I am a lowly state administrator, still somewhat green behind the ears at that. So, it was pretty clear to me up front what topics I was NOT in a position to discuss in this guest article! After scratching my head, I found my thoughts wandering back to my recent trip to the great state of Kentucky, where I had the privilege of participating in the NCPG's Gambling Counselor Symposium, as well as, attending the MidCentral Alliance on Problem Gambling. Both were enriching experiences and stand among several valuable occasions that have caused me to take stock of the state of gambling affairs here in Missouri. [To digress momentarily, I want to take this opportunity to offer "shout outs" to the NCPG and Tim Christensen for facilitating the fruitful symposium, and also to Mike Stone and his affiliates for putting on a great event, despite Mother Nature's best efforts!]

Though due to some very positive personal events, I was quite disappointed to have missed both the National Council's annual conference in sunny California and the Midwest Conference on Problem Gambling (held, relatively speaking, in my own backyard — St. Louis,

Missouri). However, these missed events enabled me to take advantage of Kentucky's offering, presenting me with opportunities to network with and learn from some great people!

So, after the aforementioned process of elimination and some free association, I settled on my Kentucky experiences on which to base this article. I'll admit to engaging in some blatantly desperate attempts for content and creative inspiration by googling "Kentucky" to see what might get the keyboard clicking. Then, there it was ... the light bulb moment! I discovered that "United we stand, divided we fall" is Kentucky's state motto. (It also happens to be a prominent motto on Missouri's state flag ... nice coincidence.) The phrase has been attributed to Aesop, although has been used throughout history as a battle charge, song lyric, as well as, national and state mottos. While I risk having this phrase branded as "cliché," it does seem to fit well the field of problem gambling and those stakeholders within.

We are a small, yet diverse group comprised of researchers, problem gambling professionals, advocacy organizations, and affected individuals. Given this diversity and the extreme variation in how states

*(United We Stand, continued on page 16)*

# New York State Continues to Expand Problem Gambling Services

*Submitted by: Rebecca Martell*

New York State Office of Alcoholism and Substance Abuse Services (OASAS) Commissioner Karen M. Carpenter-Palumbo has recently awarded funding for 12 additional problem gambling prevention programs in New York to change parental and community attitudes, norms and expectations related to gambling activities and behaviors. The awards, which total \$702,000, expand problem gambling prevention services statewide to a total of 32 community based programs.

“More than 30 years of research tells us that we need to change parental and community attitudes, norms and expectations, increase law enforcement efforts and be aware of implied messages and advertisements regarding gambling,” the Commissioner said.

In addition, OASAS has also awarded an expanded problem gambling and chemical dependency helpline contract to the Mental Health Association of New York City effective January 1, 2009. The toll-free helpline will operate 24 hours a day, seven days a week. It will enable individuals to access problem gambling and chemical dependence services, including prevention, treatment and recovery, in their community. The helpline will be primarily staffed and supervised by master’s level or higher professionals who have experience and training in crisis intervention, motivational interviewing and problem gambling and chemical dependency issues. Field placements of master’s level or higher students will be implemented through collaboration with Hunter College and New York University schools of Social Welfare in order to expand the knowledge of these students in problem gambling and chemical dependency issues. Additional

addictions coursework and training will be required of all helpline operators in order to further develop a talent management pool of addiction professionals. In addition, helpline callers will receive a call back within 48 hours of their initial contact to provide support and assurance of referral connections. Evaluation and potential research projects will also be coordinated through collaborative efforts.

Commissioner Carpenter-Palumbo recently received two awards at the National Council on Problem Gambling’s Annual Conference in Long Beach, Calif. The first award received was the National Council on Problem Gambling’s Media Award for OASAS’ 2007 statewide public awareness efforts focusing on underage gambling and black and Hispanic males ages 18–29. To view these media campaigns, please visit <http://www.oasas.state.ny.us/Gambling/index.cfm>. Commissioner Carpenter-Palumbo also received the National Government Award for her leadership in addressing problem gambling in New York State.

OASAS currently funds 32 prevention programs and 25 treatment programs across New York State. Currently, over 600 people have been credentialed to treat problem gambling. New York State offers a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) with a gambling specialty, Credentialed Prevention Professional (CPP) with a gambling specialty and is currently in development of a Credentialed Problem Gambling Counselor (CPGC) credential. Also in final stages of development are Problem Gambling Treatment Regulations for Outpatient Problem Gambling Clinics.

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## Online Chat for California Problem Gamblers

*Submitted by: Suzanne Graupner Pike*

Since July 2008, San Diego Center for Pathological Gambling (SDCPG) has been offering gambling treatment online via “live chat” on the Center’s website, [sandiego-rx4gambling.com](http://sandiego-rx4gambling.com). It is the only online gambling treatment service with a licensed psychologist who is a certified gambling counselor using live chat in the US.

Now open to ALL residents of California who have gambling problems — not just those in San Diego County — online treatment via live chat is convenient, with flexible scheduling on home computers, is confidential and is more affordable than traditional office visits. It saves on gas and users can use credit cards to pay online through PayPal.

Sessions last the traditional 50–60 minutes and patients have the capacity to download a copy of their session for their records. Negotiations are underway with several insurance companies to accept payment for services on plans for which I am a participating provider.

For research purposes, patient demographics, a brief mental health screen and a complete SOGS are obtained online before treatment is begun. Homework assignments are conducted via email and fax.



Emergency medical information and psychiatric referral information is obtained along with consent for treatment before actual treatment begins, as it would in an office setting. Site is a secure site.

I am requesting you immediately begin the referral process from California sites other than San Diego County, which requires only office visits. The use of the Online Chat Service expands treatment options to gamblers who would otherwise not have access to treatment services since there are areas in California that are not serviced by certified gambling treatment providers or gambling treatment centers.

SDCPG has been invited to be involved in a national research study on online treatment. As part of this study, data collection from referral sources, like 1-800-GAMBLER, and the number of referrals made from these sources will be made over the period of the study. As “home” to one of the few Certified California Counselors, SDCPG is open to referrals from the Hotline to this new online gambling treatment program from throughout the state of California. We hope for your cooperation and participation in helping California gamblers get healthy again.

# New Technology Solution for Problem Gambling

Submitted by: Phillip Ryan

Delegates to the recent European Gambling Conference in Slovenia in July this year, gained their first insight into a new technology solution aimed at eliminating underage and problem gambling from both the internet and venue based gambling.

The device, referred to as a Player Protection Key, is essentially a biometric USB Key. Gamblers are provided with a Key at no cost, once they have proven their age and identity, and are then able to place their financial loss limits within the Key. They also scan their fingerprint into the Key to ensure no one else can use the Key.

The Player Protection Key solution was developed in Australia by Responsible Gaming Networks and is ideal for internet gambling where every player has a USB connection on their computer. It also can be used with electronic gaming machines, slot machines, fixed odd betting terminals, lottery terminals and interactive TV sets.

Phillip Ryan, Chief Executive Officer of the company, presented a paper at the European Conference on Gambling Studies and Policy Issues, titled "Beyond smartcards to smart technologies."

"This Key has a range of significant advantages over plastic cards and smartcards. In particular, it eliminates underage gambling and it also eliminates card sharing amongst gamblers, particularly problem gamblers, due to its built-in biometric scanner" Ryan said.

"The Key doesn't require venues or gamblers to purchase a card reader for every gambling machine or their home computer; it stores a massive 32 Gigabytes (32,000,000k) of information compared to only the 64k or 128k of data which can be stored in smartcards, and it can easily be used in either a cash or cashless gaming environment."

Ryan is currently in dialogue with a range of national and state governments across the world over the adoption of Player Protection Key system in their casinos, gambling venues and across the internet.

He told NCPG that he has already commenced dialogue with legislators on Capitol Hill in Washington to demonstrate how the adoption

of Player Protection Keys is an ideal solution to allow responsible gambling over the internet for U.S. citizens, due to its ability to eliminate underage gambling, and ensure players keep to their financial limits.

The Player Protection Key addresses the increasingly strong push by governments around the world to introduce player pre-commitment solutions to address problem gambling.

Pre-commitment is based upon the premise that players can make more rational buying decisions away from a gambling environment. In this way, it is believed they are less likely to be captured by the intensity of a gambling experience in a venue and lose more money than they had originally budgeted.

The Government of Singapore recently mandated that their two new casinos must provide player pre-commitment technology solution to all players, including any tourists visiting the country, when they open in 2012.

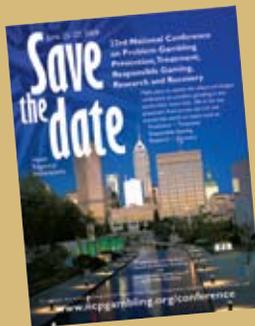
In Australia, the Government of the State of Victoria has recently announced that all poker/slot machine players must be provided with pre-commitment technology solutions by 2010; and two other state governments in Australia recently announced trials of pre-commitment.

The Government of Norway recently removed all gaming machines, only to return them with player pre-commitment. However, the Government of Norway went further than any other current government, by also mandating a universal financial loss limit beyond which no player could exceed.

Ryan said his company's marketing activities were targeted at the governments controlling the gambling industry, rather than gambling operators. "However, I must say I am becoming increasingly surprised at the number of operators from across the globe starting to see responsible gambling is able to provide brand differentiation for them in the industry, not only with their customers, but also with the governments who are issuing or renewing licences in their industry".

Contact details: [p\\_ryan@responsible.com.au](mailto:p_ryan@responsible.com.au), Responsible Gaming Networks, GPO Box 20, Melbourne, Australia 3001.

Promote the **23rd National Conference on Problem Gambling**, June 25–27, 2009 at the Hyatt Regency in Indianapolis, Inc. by downloading this colorful flyer to email to your groups!



For a downloadable PDF, go to [www.ncpgambling.org/conference](http://www.ncpgambling.org/conference)

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*(‘Heads-Up,’ continued from page 11)*

sively on 8th graders in public, Catholic, and private middle schools in Mid-America.

School teachers, advisors, and parents have realized the serious growth trends with youth gambling in middle schools, and in some cases, 5th and 6th grade. Much of this growth the last two years is due to the convenience of youth to gamble in their homes, and at their peer's home as well. It has been said that.... "There is a casino in every home," and now on the iPod too!!

Our mission at S.A.G.E. is urgent. This challenge is growing fast. We admire all the current professional efforts underway in the four corners of our country. S.A.G.E. will join the many efforts to alert our youth with the potential serious consequences of careless gambling.

# Pt. 1, Responsible and Reasonable

Submitted by: Sue McNabb

The Merriam Webster Dictionary defines “entertainment” as an “amusement” or “diversion.” Gaming in the United States exceeds all other forms of entertainment combined, with revenue in excess of 50 billion dollars. The primary objective of responsible gaming programs is to keep gaming within the parameters of “amusement” by providing a safety net.

Responsible gaming programs are often a result of legislative requirements that are attached to the gaming regulatory statutes and rules in the various gaming jurisdictions. Most jurisdictions establish responsible gaming regulations when gaming is legalized in the jurisdiction; others enact the legislation subsequent to the legalization of gaming within the jurisdiction. Most programs evolve as a result of the three major prongs of responsible gaming development: regulatory compliance, changes in technology, and the internal commitment of the casino licensees.

There are several examples of casino-driven responsible gaming programs. The state-of-the-art program is Harrah’s Code of Commitment launched in 2000 that produced company-wide, all premise self-exclusion and self-restriction programs with time limit options of one year, five years, or permanent. Harrah’s was the first commercial casino to officially address problem gambling.

The recently launched Ambassador Program has raised the bar for a casino-initiated program. In this program, all front of house personnel are trained to listen to customers. These employees might hear a statement such as, “This is no longer fun” or “I just lost the rent money” or some such woe. The Ambassador Program is workable for the casino because it does not assume that behavior is the trigger to recognizing a gambling disorder. Casino employees are neither trained therapists nor gambling treatment counselors. This program does not put employees in the position of having to recognize the “signs and symptoms” of a gambling disorder. Many state statutes, including those in Louisiana, do require that casino employees be trained to recognize signs and symptoms of problem gambling. This requirement puts an employee in a position for which



most have limited training and uses indicators that employees often feel are vague or subjective. As a result, the employee might be reluctant to report an incident.

Under the Ambassador Program, employees are trained to listen and report indicators that are objective and illustrated in situational training examples. Both front and back of house employees report what they have heard to Ambassadors who are on the floor 24/7. Ambassadors have additional intensive training in intervening and dealing with sensitive customer issues related to indicators. Because of the clearly established procedures for dealing with potential problem gambling situations, the employee response to the program has been overwhelmingly positive. Following a test of the program at Harrah’s New Orleans property from June to August 2004, an employee evaluation of the program found overwhelming approval of the clear-cut guidelines, roles, reporting procedures, and feedback to front line employees.

Additionally, responsible gaming programs such as Harrah’s commitment program provide positive risk management benefits to the licensee. One major risk management benefit of the intensive reporting and documentation requirements of the program arises in the area of customer disputes. The responsible gaming log is a company-wide reporting document of incidents related to problem gambling. Often someone on the brink of financial ruin resulting from gambling beyond his or her means will challenge gaming operation results. The best defense in customer disputes is documentation.

Additional benefits of casino commitment programs such as the one discussed above are in managing financial risks inherent in the casino industry. The technology required by a company-wide program also helps control areas such as customer credit risk, check cashing risk, casino player card benefits and comps, and W2G jackpots. It is never to the benefit of the casino’s bottom line to extend credit to someone who is “betting the farm” and the rent check and is on the edge of financial devastation. If a problem gambler is in serious financial trouble, he should not be offered credit, comps, or other enticements to participate in gaming.

As far as the National Consumer Credit Standards are concerned, the credit risk starts at the time the line of credit is approved.

In the above-cited Zayas article, the author quotes a “profound statement” by a colleague, “We always have to assume that every casino credit customer will eventually go badly. The key is to make sure the customer’s lifetime losses exceed the final write off.” This statement might sound brutal, but it is brutally honest in that it further illustrates a benefit to the licensee in monitoring potential problem gamblers. Allowing a problem gambler to continue to play is simply not sound business practice. Further, in some jurisdictions, sending marketing information, extending check cashing privileges and credit to an excluded person is a violation of responsible gaming rules and statutes.

A further benefit of a company-wide program is in reducing the risk of compliance violations. A simple risk/benefit analysis will show that the risks of harboring an additive gambler far outweigh the benefits to the bottom line. Bad press, regulatory offenses, and growing fines have a negative impact on the licensee. It becomes obvious that listening to the customer’s indicator of a potential problem carries its own rewards.

*This is the end of Responsible and Reasonable, Part 1. Stay tuned for our next newsletter to catch Part 2!*

# Buckets Without Bottoms

Submitted by: Phil Townshend

I recently completed a Churchill Fellowship/Sabbatical that took me to the NCPG in the Long Beach, the ECGS in Slovenia, meetings in the UK and visits to casinos in Macau. From discussions with a range of stakeholders in the gambling sector about approaches to gambling, I noticed a theme where public health people are critical of treatment providers as not dealing with the real social issue, researchers are critical of public health and treatment as not being well informed or evidence based and treatment providers criticise public health and researchers as not being connected with the real problem.

Each describe the others as financial bottomless buckets, always needing a bit more money to deal with the problem, and, of course, all these assertions are correct. However, there is a cheap and effective intervention which is almost universally left out the mix, that is, social activism. Social activism works in concert with research, treatment and public health, and in our experience may be the important connective tissue that makes these other approaches work together as an effective whole.

The law in New Zealand defines gambling as a public health issue rather than focusing on gambling as an individual problem. From this it follows that treating people with gambling problems is something that as a caring society we have to do, but treatment alone is never going to solve a public health problem, to do this requires wider social change. Public health and social marketing campaigns contribute to this, but social activism has been the vital factor in achieving success.

An important part of social activism is the orchestration of the media. In the news and comment media we have targeted the connection between gambling and crime, corruption in the gambling industry, and the social costs of gambling. By law, slot machine gambling in New Zealand exists to fund community groups and we have focused on the inefficiency and inconsistency of this funding model.

Another aspect of social activism is having a voice in the political processes. In this context, the most important voice is the consumers, particularly those individuals and families affected by gambling.

Social activism relies on empowering consumers, and we have found that politicians and the gambling industry find it difficult to counter eloquent and assertive consumers in the way they can discount treatment and public health providers and researchers. Social activism requires leadership and coordination. Consumers can't be expected to coordinate their strategies themselves and they need help to stay safe when dealing with the media. Treatment providers need to be coached into perceiving each intervention as a small public health intervention and public health providers need treatment providers and consumers to gain credibility.

A combined approach coordinated by social activism has bought about changes in public opinion in New Zealand that have been independently established through multiple surveys of attitudes to gambling since 1995. Public opinion has changed to the degree that both the numbers participating in all forms of gambling and their spending has decreased and a steadily increasing majority of adults see gambling, particularly on slots, as a socially harmful activity. As a result, the slot machine industry has publicly accepted that it has a social contract with the community and that to be sustainable it must provide its product in a socially responsible fashion. The industry has recently announced far-reaching host responsibility interventions that will be independently verified and include a commitment player tracking and feedback technology.

I believe that most jurisdictions would find it difficult to replicate New Zealand's achievements dealing with slot gambling as there are some local features that have enabled this to happen. These are principally national and local government that is neither dependent on gambling revenues nor a significant gambling provider, a system of funding treatment, research and public health that is not under the control of the gambling industry and a legislative environment that focuses on public health rather than revenue gathering. For anyone interested in starting down this track, the first step is to have regard for social activism and bring about changes in the funding structure that give activists some independence.

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*(‘United We Stand,’ continued from page 12)*

address problem gambling, one could easily conclude that unifying such a group would be a bit like herding cats! However, what joins us to each other is that we all have a vested interest in seeing this field grow, promoting awareness, securing resources, educating treatment providers, and ultimately, improving the lives of those negatively impacted by problem gambling. Growth of any kind can be slow and at times even painful. For some, facing the national programmatic inconsistencies, the lack of federal recognition and support, and the ongoing struggle to keep (or put) problem gambling on the radar, could be discouraging. This discouragement could lead to abandonment of “the cause.” However, it's *in spite* of these challenges that we

must hang together! Gains are being made thanks to the many dedicated people who contribute to this growing field. And what impresses me the most about the problem gambling arena is how willing all are to share knowledge, offer support, initiate grassroots efforts, and go the extra mile to advance the mission of improving people's lives!

Each problem gambling conference, APGSA meeting, or other gambling-focused event serves as a stimulus to ask myself, “What more can and should I do here?” While resources are always in short supply, obstacles are not. Despite that, the mere exposure to those like you reading this article is motivating and helps me advance, albeit by baby

steps, the aspects of the field of problem gambling within which I am involved. I believe problem gambling-focused events are just plain good for all of us! They are the manifestations of strong commitment to a cause, yet serve as catalysts for continued advancement. And, most importantly, they bring us *together!* There is strength in numbers and power in shared knowledge. If the field of problem gambling is to ever rise to the importance and recognition as have addictions or mental health, we must continue to band together — in our councils, in our states, in our nation — as a “united front” so that our own specific interests don't split us into factions for whom the original mission has been lost.

# Pt. 1, Crossing the Line: When Gamblers Turn to Crime

Submitted by: Hale Humphrey-Jones, PhD, and Melvin A. Slawik, MSW

As states become more and more dependent on revenue from gambling, other entities are legalizing gambling as fast as the political process will allow. While many may travel to the gambling sites such as Atlantic City or Las Vegas once or twice a year, the availability of a casino within an hour's drive creates the potential for monthly, weekly, or even daily ventures. Availability has been shown to increase gambling related crimes.

While many individuals engage in recreational gambling without crossing the line into illegal activities, for some, gambling becomes a stepping stone to desperation and crime. Gambling related crime is one of the least understood side effects of gambling. Several studies have looked at the prevalence of problem gambling and found that there is a very high percentage of problematic gambling in the correctional systems. Rates range from 17–60 percent.

Most offenses are income producing, such as theft, fraud, larceny, and embezzlement. The same research indicates that for pathological gamblers the gambling led directly to criminal activity. Meyer and Stadler found that 88 percent of pathological gamblers admitted to having committed a criminal offense. According to the National Epidemiologic Survey on Alcohol and Related Conditions, pathological gambling is among a set of disorders for which the likelihood of violent behavior is elevated.

Turner, found a significant correlation between ADHD symptoms and problematic gambling among the prison population. This finding supports the premise that such Impulse Control Disorders may predispose individuals to commit crimes to support gambling.

Lesieur found that addiction, along with its compulsive pressures, is often associated with criminal activity. In support of this finding, we administered the NORC gambling assessment to 56 members of the Key program for drugs and alcohol in the Gander Hill Prison and got a 36 percent positive response, indicating a connection among other addictions, gambling, and crime

Many cross-addicted gamblers deal drugs or engage in prostitution to support their combined habits. Drugs and prostitution are both highly correlated with violent crimes.

According to Turner, 44 percent of those in prison have some sort of gambling related problem that lead to their incarceration. Therefore, more and more GA meetings are being organized inside prison systems. The following is a description of one such meeting: Names are fictitious.

Immediately upon entering the large, grey activity room. the cacophony exploded in our brains, making concentration close to impossible. Yet, the inmates appeared unaffected by the deafening noise. Is it possible to become desensitized to the unavoidable no matter how distracting? The concrete floor and walls offered no cushion from the loud voices and scraping chairs, giving no respite from the constant din.

Attempting valiantly to speak above the clatter, they read from the GA combo book, discussing the 12 steps. Then, each spoke briefly about their gambling issues.

All shared a propensity for action gambling, in particular dice and a card game called spades. They played in the streets, in homes, in casinos and in prison. They all seemed to crave an escape from themselves through gambling along with drugs and alcohol.

Toes tapped, legs shuffled, and fingers twitched in constant movement. The Mental Health Counselor estimated that 60 percent were diagnosed with ADHD or bipolar disorder. Many were on medication. Telling their stories, a majority revealed that their families had initiated them into gambling.

Fred was in his 20s, with light brown hair and a quick smile. His legs moved incessantly and he said he loved the action of the craps table.

*I played craps and cards as long as I can remember, but my first time in a casino was on my 21st birthday with my parents in Atlantic City. They gave me money to play slots, but I slipped away and found a craps table. I was broke in half an hour, went back and told my folks I lost it on a Wheel of Fortune machine. They gave me more money and I went back to the table. I lost again, but I didn't care. All I wanted was the action. After that, I just wanted to get money to go back to those tables. I sell drugs in the street, anything to get money to gamble. If there is a heaven, it is in a casino.*

A tiny man who called himself "Trashcan" spoke up in an excited high voice.

*They call me "trashcan" because I put anything I can in my body. Man, I don't care what it is as long as it takes me out of myself. I love casinos; they are like Mardi Gras. I shoot dice in the street, in jail, anywhere I can. I can bet on anything, poker, boxing matches, and football games. It's all good.*

Matt was in his 40s, with thinning hair and a quiet voice edged with sadness.

*Sometimes I would have to beg for change at gas stations to make my way back down the Atlantic City Expressway to Delaware, just to do it all over again. Everything I owned was in the backseat of my car.*

*Through my drug abuse I have lost a lot of friend to overdoses, suicides and incarceration. Through gambling I have witnessed the same. For myself in my addiction, I was never happy and I welcomed an end to the madness, I just wasn't able to bring an end to it, until eventually I was arrested.*

*The next fix of heroin, roll of the dice, or pull on the handle of the slot machine could be my last if I don't choose to live today, I now realize that path I took was heading to destruction, and there would be no way back.*

The stories were all very similar and very familiar.

*This is the end of Crossing the Line, Part 1. Stay tuned for our next newsletter to catch Part 2!*

# Is the Media Promoting Gambling?

Submitted by: Arnie and Sheila Wexler

You would not expect to open your local newspaper and get a price list of illegal drugs for sale; but that's just about what you can get today when you open your local newspaper to the sports pages all over the country. True, you don't see drug prices but you do see lines and point spreads on sporting events. Illegal drugs can't be bought legally in any state. You can't place a legal bet in America, except in Las Vegas. I know it's in because it sells newspapers.

There are ads in newspapers for 800 and 900 numbers that sell information to gamblers. Some of these ads read : "Get the game of the month free," "We pick 75% winners," "Last week we went 11 for 12," and "Get our lock of the week."

I still can't believe that newspapers carry ads from these so-called handicappers, who are really scandicappers. It's also interesting to note how often the information is incorrect.

I remember going to speak at Northwestern University a few years ago. That day I read in USA Today that Danny Sheridan wrote: "Northwestern was a million to one to win the Big 10." Well, they did win the Big 10 and went to the Rose Bowl. I also remember when the Dallas Morning News had a gorilla in the Dallas Zoo make football picks for them. The gorilla's picks were doing better than the sports writers.

If you read the Sports Illustrated story, written by Tim Layden in April of 1995 about gambling on the college campus, you now know what every youth on a college campus knows; gambling is running rampant on every college campus. Odds and point spreads have become a normal topic of conversation amongst these students. Gambling is as available as a can of beer or a pack of cigarettes and the student bookmakers get the lines they use straight out of their local newspapers.

In 1982, I was involved with trying to help a compulsive gambler who was an ex-college star athlete. He owed \$350,000 in gambling debts. It all started five years before when he played a football ticket for \$5. No doubt the person providing the football ticket got the lines from their local newspaper.

Picture the following scenario: A young man uses the lines and odds from his local newspaper and uses it to set up a bookmaking operation in the local town pub. A law officer comes in and arrests the bookmaker and players. The next day the headline in the paper says: "John Doe Arrested for Bookmaking and Hank Smith Arrested for Illegally Betting." Hypocrisy you say? The very newspaper that carried the lines now is carrying this headline.

It seems to me that the message we are sending the youth of America is: Education is not necessary. You will be able to make your life fortune by pulling a slot machine, buying a lottery ticket or winning a bet on a game.

The NCAA understands this issue as they have discussed taking away press credentials at the Final Four, from newspapers that carry the lines.

(Media, continued on page 19)

# National Helpline Report 3rd Quarter 2008

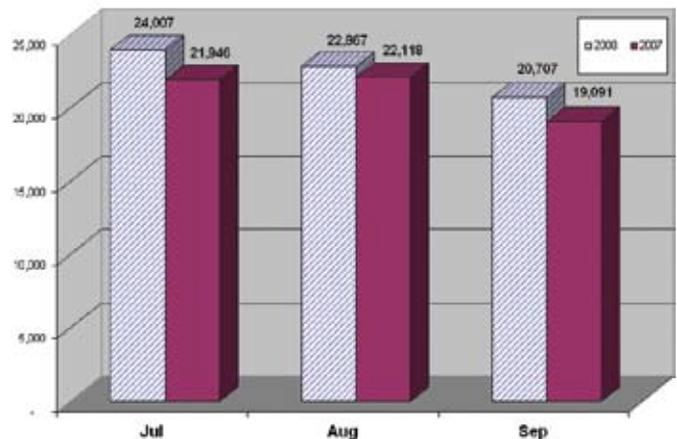
In each issue of the National News, the National Council on Problem Gambling will provide an overview of the calls placed to the National Problem Gambling Helpline Network (800-522-4700) for the previous months along with a summary of the total calls received year-to-date.

The National Problem Gambling Helpline Network is a single nationwide point of access network comprised of 27 call centers, with several centers answering calls for multiple states. Each call center is staffed with professionals who are fully trained to deal with problem gambling calls including those in crisis situations.

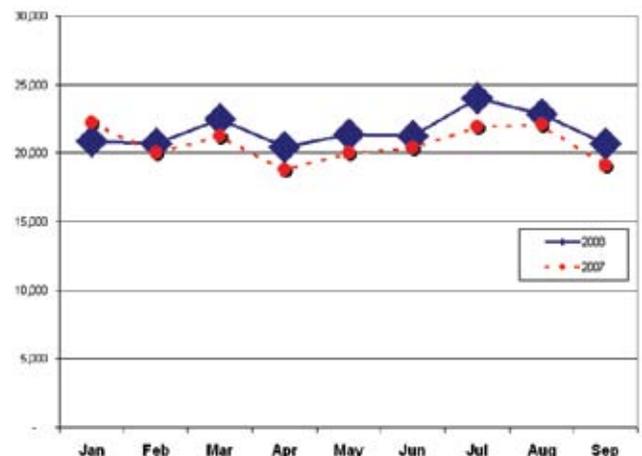
Since January 2008, the National Helpline has received over **194,000** calls. The month of **July depicted the highest call volume with more than 24,000 calls placed to the National Helpline; a 9% increase from July 2007. Overall, this quarter saw an 7% increase in calls volume in comparison to July through September 2007.**

The National Problem Gambling Helpline Network is a 24/7, 100% confidential resource that provides hope and help to problem gamblers and their loved ones. The helpline number (800-522-4700) can be dialed toll free anytime and anywhere in the United States as well as from various parts of Canada and the U.S. Virgin Islands.

## Helpline Network Call Volume – 3rd Quarter 2008



## Helpline Calls 2007 vs 2008 Month-to-Date



# Age and Residency Verification: The Responsible Way to Play

Submitted by: Cheryl Sullivan, GTECH

Age verification in self-service validation is an issue of great importance in the lottery industry — one that GTECH takes very seriously. With the increasing popularity of self-service lottery play, age verification is more important than ever. The company designs self-service products to include age-verification solutions as part of its ongoing commitment to responsible gaming. GTECH's self-service product design efforts are constantly evolving to ensure the latest in age-verification solutions are incorporated. These solutions transcend technology using a holistic approach to ensure only players of legal age use lottery self-service devices. This approach includes using driver's license bar-code reading technology, player cards, and best practice guidelines. It is important to note that a player's personal information is not stored on the machine and is only used to verify the correct age to play.

## Driver's License Bar Codes

The majority of governments are adopting PDF 417 bar codes as a standard feature on driver's licenses and other forms of identification. These bar codes allow for the storage of information, such as an individual's age and address. GTECH's current point-of-access products allow for player age verification through the reading of a driver's license or similar player identification card utilizing the date-of-birth field located within the bar code or magnetized stripe on the player's identification card. When a player approaches a self-service device, he/she scans his/her license through the bar code reader. If the player is determined to be 18 years of age or older, the device will be activated. If the device is not able to verify the player's age, the player is directed to the retailer for further verification.



## Player Card

The popularity of consumer membership cards for vendors across all industries has significantly increased over the past few years. Whether it's a consumer's CVS Extra-Care Card®, gym membership card, or a Borders® Book Rewards Card, player card use is widespread. GTECH has developed and deployed player cards with the capability to verify age using a remote player middleware database. This database can easily integrate with any lottery central system.

## Best Practices

In addition to essential technological controls used to support age verification, GTECH offers an array of best practice guidelines for prohibiting lottery sales to those who have not reached legal age to buy lottery tickets. Guidelines cover terminal placement, prevention programs, and consumer alert tactics, among other industry best practices developed by GTECH for the lottery industry.

Responsible gaming is a cornerstone of self-service lottery sales. By developing self-service products that prevent underage ticket purchases, lotteries can demonstrate their commitment to responsible gaming.



(Media, continued from page 18)

Sports betting is a big problem for compulsive gamblers. I used to run a national hotline and 47 percent of the callers were sports bettors. Because compulsive gambling is an Impulse Control Disorder (as stated by the American Psychiatric Association), reading the lines in the newspaper can often trigger a gambling binge. Some recovering compulsive gamblers can't buy a newspaper because of the anxiety it causes. I don't see much difference between casinos serving free drinks to an alcoholic or newspapers putting lines out for compulsive gamblers to read.

Years ago, only some newspapers carried the line. Now you can rarely pick up a newspaper that doesn't. You also never heard electronic media discussing odds. Today, it is common to hear such a discussion. Recently someone told me that they heard a commen-

tator on a national TV football game say: "They covered the spread."

Years ago, I was on a TV show with Howard Cossell (ABC Sports Beat). The topic was: Does the media encourage the public to gamble? Bobby Knight, Indiana basketball coach, said: "A newspaper who published point spreads should also publish names and addresses of services that render to prostitutes. They practically have the same legality in every one of our states, and I can't see why one is any better than the other." On the same show, former baseball commissioner Bowie Kuhn said: "Anything that encourages gambling on team sports bothers me. We all look hypocritical, but than why are we putting up the odds unless we are trying to encourage it." David Stern, NBA commissioner said: "We don't want the week's gro-

cery money to be bet on the outcome of a particular sporting event."

I would like to pose a few questions:

- Do point spreads in newspapers cause a proliferation of gambling?
- Do people see point spreads in the newspaper and think it is legal to place a bet?
- Does the media entice people to gamble?
- Does the media have any responsibility for the increase in numbers of compulsive gamblers in America?
- Does the media give the appearance that it promotes and condones gambling?

I think the responsible thing to do would be for newspapers to carry a public service message.

## Pt. 2, Clearing Away the Financial Fog

*Submitted by: Brian H. Farr, MA, LPC, NCGC-II*

*Continued from Clearing Away the Financial Fog, National News Summer 2008 (Vol. 11, Issue 2, pg. 15).*

**When is the best time to introduce these financial worksheets?** The timing will be different with each client and will require clinical judgment. Some clients are very worried about their finances in early sessions. These individuals will benefit from the simple structure of all three worksheets and the quick clarity they can achieve. Other clients will need encouragement to face the financial reality of their lives. Counselors will need to look for small openings of willingness with these reluctant clients, and then introduce one worksheet and see how it goes. Like most clinical work, developing financial awareness requires persistent trial and error.

**What about gamblers with serious debts?** Financial reality for these clients can be very painful, but fantasy is more dangerous. When these individuals stop gambling, they give up their dream/hope of a Big Win. They need help right now. The worksheets described in this article provide a tangible beginning, and prepare clients for the fuller benefits of GA's Pressure Relief or other forms of financial counseling.

**Why do these worksheets clear away the financial fog?** The answers to this question are numerous: accurate information is empowering; reality is an honest teacher; accountability requires awareness and awareness develops with practice. Clients learn new behaviors by doing new behaviors. Again and again, I have seen clients become more engaged in the recovery process as they track their spending and develop honest awareness of their household cash flow. By putting pen to paper, clients move into the action of creating financial clarity, and move away from the financial fantasy world of compulsive gambling.

**When reading this article, did you ask yourself if you are qualified to talk about personal finances?** Many counselors who attend my workshops express similar con-

cerns. Typical counseling education programs provide minimal or no training for the exploration of personal finances. Very few families talk openly about money with their children, so most of us become adults with financial literacy problems. And this culture itself is funny about money: Americans have more secrets in their wallets than they do in their underwear.

The good news for you and your clients is that these three worksheets are very simple. No complicated financial calculations are required. By asking direct questions and helping clients record the answers, you will open the doorway to financial clarity. Like many counseling techniques, these worksheets might be uncomfortable when you first use them. With practice however, successfully supporting clients as they struggle with new financial behavior will quickly become part of your gambling counselor's tool kit.

**Remember Debra?** Her personal finances were a foggy tangle when she began treatment. She easily admitted her gambling had been a 'problem' for three or four years. When we did her financial history, however, she discovered that her money problems actually started in her early 20's. "No one ever asked me to track my spending," she said after carrying the small slip of paper in

her wallet for a month. Writing down every dollar she spent was revolutionary for her.

Debra quickly went from unconscious confusion to healing clarity. Individual dollars had value in a way that she had never experienced before. The Monthly Snapshot helped her envision a new financial future. She had never understood how her income and expenses could fit together and create long-term financial stability. Writing the actual numbers on paper, tracking and refining those numbers during the early months of treatment, these were the actions that cleared her financial fog. These actions gave her a stable foundation for long-term recovery.

Gambling clients arrive for treatment with an enormous variety of financial problems. Many clients will return to gambling again and again, while others will catch hold of recovery. In my experience, those clients who clear the financial fog experience more success in their efforts to break the cycle of compulsive gambling.

Print **FREE** copies of the three financial worksheets described in this article. Go to [www.bhfarr.com](http://www.bhfarr.com), click on the "Workshops" tab and scroll to the bottom of the page. Open each worksheet (PDF) and print as many as you need. If you have problems with the file, contact me directly at [brianhfarr@gmail.com](mailto:brianhfarr@gmail.com).

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## Expressive Journaling

*Submitted by: Alice Savage*

Journaling is a very common exercise suggested to clients, and those who care about them, to express their emotions, thoughts, and regrets. Many clients have never experienced the task of journaling and shy away from the idea. In my practice, when suggesting that my clients journal, the first thing I ask them to do is go and get a 3-ring binder, notebook paper, crayon sharpener and the biggest box of crayons they can find. Often I hear, "Crayons? What are the crayons for?" Explaining the process, I instruct them to open the box of crayons and pick the first color that expresses what is going on inside them and start writing. The next thing I tell them is that they can change the colors as often as their feelings change.

For those who journal on the computer, suggesting they make the background the color of feeling works just as well.

*(Journaling, continued on page 21)*

## Useful Actions to Control Urges to Return to Gambling at the Start of Treatment

Submitted by: David Frederick, PhD, NCGC-I

Since not every one gambles excessively, there are underlying motivations unique to each individual which drive the urge to self-medicate by gambling. When an individual initiates psychotherapy/counseling which may extend over many weeks, strong urges to gamble can be expected to continue unabated for a while. Clients have found one or more of the following actions helpful to control their urges to gamble:

(1) The first one is derived from the Alcoholics Anonymous injunction: After coming to these AA meetings for a while, and you have an urge to drink again, do not remember the wonderful taste and the good times you had when you were drinking, but remember the last drink that was so awful it drove you here to these meetings. So when an urge to gamble arises, the gambler is urged to remember his last bet which led to him calling for help.

(2) It is pointed out that most video lottery stores have an ATM in them, and many even post the letters ATM prominently outside their place of business. In a brief discussion with the gambler, it is acknowledged that the gambler usually goes to gamble with money in pocket, expects to come home with more money, hence does not need an ATM machine. It is pointed out the machines cost the gambling facility over \$10,000, incur expenses of maintenance and online bank connection, etc., that they are not there out of the goodness of the heart of the facility. Rather, they are there for the gambler to quickly and fully max out their credit card and/or to drain their bank account totally with a debit card, for the benefit of the lottery store owner. So, whenever you see an ATM symbol at a gambling establishment, know that it is there for the benefit of the gambling establishment and not yours.

(3) When you have the urge to gamble, think back to when you were there: What were the expressions on their faces? Did the other gamblers appear to be happy and enjoying themselves? Typically, the

client will recall people did not look happy. So, when the gambler has an urge to gamble, he/she is urged to remember how it was for others, and how it probably was for him/her.

(4) As soon as possible after the intake evaluation, the statistics/psychology of gambling are reviewed with the client to show that when they go to the grave, their net from gambling will be negative. To do this, a progression of situations are described: gambling among friends where no money leaves the room but merely gets redistributed; five-card draw poker in a gaming situation where each of five players starts with \$10, hence \$50 in the room, the pot for each hand is \$5 with the State getting its 20 percent cut (\$1), so the game ends after about 50 hands with no money left in the room; the probability of whether after a penny is flipped 10 times and comes up heads every time the penny will come up preferentially heads or tails on the 11th flip; roulette without and with green 0, and green 0 where the gambler loses nothing in the former situation and 2/38 each time, on average, in the latter situation; and finally video slot machines. In the last description, a graph is drawn which shows how, in spite of wins of various sizes from time to time, the overall trend is downward at the rate at which the State takes money due to a payout rate of less than 100 percent. Additionally, the gambler is asked how much is bet each play, how many seconds per play, and how much they typically lose in each session. I then predict within about 20 percent how long they played.

Can we guarantee, statistically, the gambler will go to the grave with net gambling losses? No. There is an infinitesimally small, but non-zero, probability otherwise. I then ask the gambler, if you won that (very large) pot, would you pick up your money, go home, and never play again? Inevitably, the person will say, no. This is where the psychology comes in. The client is given the graph to take home and look at from time to time as a reminder they cannot come out ahead.

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*(Journaling, continued from page 20)*

Many of my clients have had a new experience with journaling in color. Many have decided to draw pictures along with the words to express their emotions even further. One client told me that she began one segment of her daily journal in pink as she wrote about a friend. However, as she neared the end of a sentence she began to get angry and switched to bright red. As it turned out, she realized that the person had repeatedly asked for favors taking up much of my client's time which she resented.

Often when we write in journals and look back at them we do not read them in the same emotion as they were written. By writing in

color the emotion is right there along with the words. When revisiting our past journal entries it is a simple way to see, in color, the healing process and how the emotions, thoughts and regrets changed, even when writing about the same person, incident or time.

This idea came about when I was doing a group of heavily-medicated patients in a hospital who were not able to use their expressive skills very well. Hoping to engage them, I brought to group a box of 72 crayons and asked them to pick the color they were feeling and if they could, why. It was a very interesting group and I have used that technique many times since.

## Gambling Patient Placement Criteria: SOTP or GPPC

*Submitted by: Colin Hodgen, MA*

Six NCPG members in Nevada are developing a modular tool to provide consistent and coherent patient-placement criteria tailored to the needs of pathological gamblers. Led by Denise F. Quirk, of the Reno Problem Gambling Center, the initiative is to build and validate a toolkit for screening, assessment, treatment planning, termination of treatment, and outcome tracking for gambling clients. This toolkit is based on a consistent set of placement guidelines called the Gambling Patient Placement Criteria (abbreviated GPPC® and pronounced as “gypsy.”) These criteria are modeled on and are seamlessly compatible with existing DSM-IV (TR) diagnostic criteria and the American Society of Addiction Medicine (ASAM) revised patient placement criteria (PPC-2R). The GPPC® also conforms to NIDA/SAMHSA “SMART” guidelines for treatment planning that is specific, measurable, attainable, realistic, and time-limited.

It appears that up until now, the assessment and placement of pathological gamblers has been more art than science, relying on best available resources or by a comparison of substance-related placement criteria. At one point or another, practitioners may have felt like lookouts up in the crow’s nest of the good ship “Treatment.” We’re torn between the need to see through the fog in the moment and the need for reliable navigation in the long term. We may have heard or uttered the words, “That’s the way we’ve always done it,” or “I’m too busy to worry about that right now.” Consistent and coherent patient placement guidelines would allow for the transition from seat-of-the-pants to state-of-the-art in the evaluation and treatment of pathological gambling.

The so-called “GPPC® Initiative” consists of a Project Manager and six experienced, Certified Problem Gambling Counselors (CPGC) in Nevada working at various levels from Prevention/Intervention/Psychoeducation through residential treatment. Using a state-funded

grant, the team has been able to develop and distribute the instrument and toolkit to every CPGC and CPGC-Intern in Nevada, other practitioners qualified to diagnose and treat pathological gambling, and other practitioners concerned with the disorder. Ongoing evaluation and feedback groups, facilitated by the GPPC® team, have begun to provide a means to empirically evaluate practices and procedures most effective in the treatment of pathological gambling.

Here are some of the questions the GPPC® can allow us to answer: 1) How do we accurately, reliably and consistently determine gambling patient placement? 2) How do we link screening, assessment, treatment and outcomes? 3) How do we justify and track adjustment of Level of Care in treatment? and 4) How can we harvest significant data for current and future research?

As you can see, this tool is emerging at a critical point in the professional development of pathological gambling treatment and its providers. The GPPC® Initiative provides a rich opportunity for academic, treatment-provider, community, and industry involvement in the development and implementation of this procedural tool. Now is the time to raise the bar of professional practice and institute meaningful, criterion-referenced approaches to prevention, intervention and treatment, based on the input and expertise of experienced professionals in the field. We can continue with Seat-of-the-Pants (SOTP) or we can move forward with Gambling Patient Placement Criteria (GPPC).

*We welcome your participation, comment, and support by contacting Denise Quirk, or any of these other members of the team: Janelle Baclayon (Project Manager), Paula Chung, Lynne Daus, Colin Hodgen, George Howell, and Dianne Springborn. We may be reached through the GPPC® Initiative at 1-877-979-4772 (toll-free) or at [www.thegppc.com](http://www.thegppc.com).*

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## Group Therapy as an Affordable Treatment Option

*Submitted by: R. Fairlie Brinkley, LCSW, CAO, NCGC-II*

Residential treatment for those who can afford it has proven to be an effective treatment model for problem gamblers and at the heart of that modality is group therapy. Group therapy is a cost-effective approach, but very few programs offer group treatment to gamblers. In fact, the vast majority of addiction treatment centers not only do not offer help to problem gamblers, but usually fail to recognize the problem gambler’s hidden addiction at all. There are two significant reasons. First, for most patients, there is a more easily diagnosed disorder such as alcohol, sex, crack cocaine, food, pain pills, etc.



Secondly, most treatment centers do not provide an atmosphere conducive to self disclosure of a gambling problem.

As the former clinical director of a nationally known addiction treatment center, I had difficulty convincing the admissions department and the primary therapists to take the time to administer a gambling assessment such as the South Oaks Gambling Screen. I was successful, however, in developing an atmosphere that rewarded disclosure of a gambling addiction by offering a “gamblers only” therapy group facilitated by our most senior therapist and the support of a nearby Gamblers Anonymous Group that offered

*(Group Therapy, continued on page 23)*

## 'Connecting the Community'

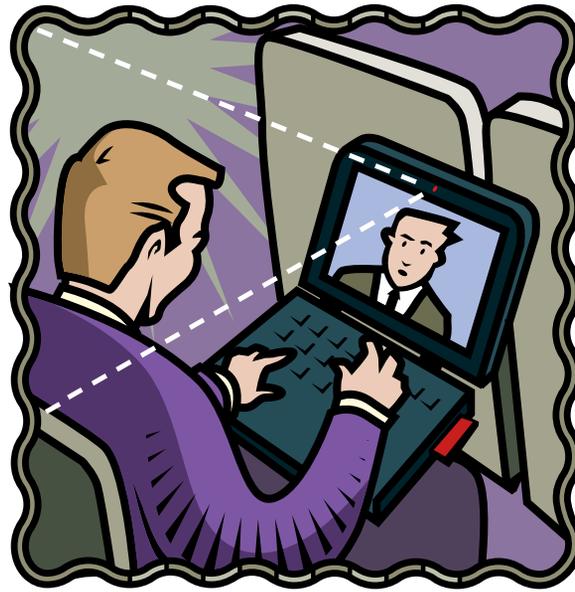
Submitted by: J. Craig Boydston, LCSW, NCGC-II

On June 28, 2008, I participated in a televised panel discussion with "Len G." a recovering compulsive gambler and GA group leader. I was the only visible panel participant because Len sat behind a screen to maintain his confidentiality, a GA tradition. The moderator was Lloyd Patterson who conducts biweekly "Connecting the Community" panels investigating a variety of topics of interest to the viewing audience. His venue is WSRE-TV, a public television station housed on the Pensacola Community College campus (Northwest Florida).

Lloyd opened the discussion by referring to the problem as the "scary side of gambling — when gambling becomes an addiction." He quoted from his source that over four million individuals (2 percent of the population) have gambling problems and many of them are low income. He noted the variety of gambling venues and specifically mentioned the Florida Lottery and the nearby casinos in Biloxi, Miss. He then gave the telephone number for viewers to call the station with their questions. He then asked Len to talk about when gambling got to be a problem in his life. Len noted that he had lost his business, his marriage and his money (bankruptcy) by age 25. He stated "the temptation never goes away." He stated it took him 20 more years to decide to seek treatment when he was about to lose his fourth marriage. He began by joining a GA 12-step program and started "relying on my higher power and my inner voice." He emphasized that the GA program is spiritual in nature.

Lloyd then asked "what do you consider to be the most important factor" in trying to cope with problem gambling? Len answered: "total loss of power to control it" and he added that he believed the gambling "routine" was the only answer to his problem. He emphasized that the problem gambler must go into recovery. He described the effect on the family and mentioned the problem of enabling by his family members. "Nobody told me I'd lost too much." He also cited the easy availability of credit. "One company sent me two MasterCard."

A caller, Brad, then asked "what motivates a person to continue?" Len clarified by defining the term "pathological" and stated the gambler will do anything, even of an anti-social nature to get money. "He always thinks things will turn around" but "there is never enough." Lloyd then displayed the "signs" to alert the gambler and family of



trouble (more and more time devoted to gambling, depression, withdrawal, etc.). Len emphasized to the viewing audience that many gamblers are depressed and it is important to ask about suicide.

Another caller, Ed, asked what percentage of gamblers are men and what percentage are women. He also asked if alcohol was part of the problem. This led to a discussion of co-occurring disorders, including drug and alcohol abuse and depressive disorders. ADHD in youth was also mentioned. Len stated "casinos have everything to offer someone with an addictive personality," and gave examples, including the machines, alcohol, women, etc. He reiterated the importance of recognizing the triggers to gambling, i.e. poker games "all over TV," sports betting, office pools.

The discussion closed with displaying of telephone numbers, including the state and national helplines and the GA helpline. This program had a large viewing audience and presented an excellent opportunity to heighten public awareness.

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*(Group Therapy, continued from page 22)*

rides to meetings and individual sponsorship to the residents. The therapy group was held in the owner's office which was furnished more as a library than a business office. This office was not available for other groups, thus it served to let the residents know that the group had the firm support of the owner. Also, unlike the other groups in the center, this group was open to the public which offered another opportunity unique to the gamblers. Finally, the Gamblers Anonymous meeting the group members attended was especially tolerant of gamblers with co-occurring disorders and supportive of professional help.

These simple, yet cost-effective accommodations, proved to be quite successful in promoting self-disclosure within the therapeutic community and provided an opportunity for members of the community at large to find affordable professional treatment.

## Recovery is Key: The Gambler and Non-Gambler

*Submitted by: Loretta A. Jasper*



Ten months ago, Liz began outpatient treatment for her gambling addiction. She retired six months prior to that from her lifelong employment as a respected accounts manager in a local bank. Her phone

call to me followed charges of embezzlement of \$150,000 by her former employer and Federal officials.

Liz was charged with embezzlement, and Mark, Liz's husband of 30 years, immediately withdrew his retirement fund and re-financed their home in order to pay the debt in full. The fear of imprisonment, embarrassment to them and to their adult children and grandchildren drove Mark to this action.

Was this a bail-out? Probably so. My role is to facilitate recovery, with whatever circumstances are presented.

Gambling is often the tip of the iceberg and Liz and Mark were no exception.

Mark has come to the weekly sessions at Liz's request with the exception of four sessions. I find that so unusual for a spouse to remain in session with the gambler for the duration.

Being in session together continues to provide both Mark and Liz with the neutral setting to begin talking with one another about each other after many years of untended feelings, memories and actions. Coming as a couple to the clinical sessions provides a venue for education related to the onset and progression of gambling addiction, triggers of relapse, effects of gambling upon each person, the recovery process for each, and the need to replace gambling with constructive and positive outlets. Coming together for sessions provides Liz and Mark with the opportunity to risk sharing and talking about touchy issues in the therapeutic and trusting setting. Even though there still may not be very much interaction beyond the session, each is beginning to plan for and initiate issues of interest and concern in the session.

There have been no gambling relapses (the tip of the iceberg). So what lies beneath the surface of the iceberg? How about:

- Liz having the primary care of the household as a child, given her mother's illness and younger sister's high emotional maintenance; and there not being a "place" in either parents' heart for her concerns.
- Liz learning to not add to conflict by stating her needs.
- Mark's active alcoholism until 10 years ago.
- Mark's verbal abusiveness to Liz while drinking; and, Liz protecting the children against Mark's abusiveness.
- Liz believing that Mark's alcohol and female colleague at work replaced her in Mark's life.
- Liz' pervasive depression, guilt and shame with her gambling, pending incarceration, and financial strain upon their retirement.
- Mark and Liz bringing the "no talk" rule into the marriage from their individual families of origin.
- Lack of tools to communicate concerns, needs and feelings.
- Liz had not gotten an apology from Mark regarding his abusive behavior related to his drinking, nor did she indicate to him that an apology was important for her.
- Liz was certain Mark was just putting up with her as indicated by his drinking, abusiveness, no apology, etc.
- Liz gambled to cover her loneliness and feelings of isolation and lack of self regard.

Yes, Liz and Mark continue to come to therapy together: one as the gambler; one as the spouse of the gambler. Questions are asked; concerns are processed; perceptions are reality checked; needs are stated; apologies are provided; tears are shed ... all without gambling or alcohol relapses.

The wonderment of having this couple continue to come together for therapy is that no session is completed without one or the other saying: "I did not know that about you."

Lack of communication is a major trigger of relapse in this relationship regarding alcohol and gambling.

Are we finished with therapy? Not yet. Are we moving ahead? Yes? Are Liz and Mark home free with each of their addictions? Do not know. All we can do is try, try, try and try our best in facilitating the recurrence of active relapse.

## Gambling: It's not about the money. Right!

*Submitted by: Roberta Boughton, MEd, MA, NCGC-I*

As a clinician working for many years with women gamblers, I must admit that I am confused. I read reports or hear at conferences that gambling is not about the money. I sit in group and someone says that it's not about the money and others nod in agreement. It makes me wonder whether I am in the right room. But then I wonder if there is massive denial and shame serving as a camouflage. Perhaps the connotation of avarice confounds the admission that gambling is about money.

A few things make me think that gambling is indeed about money. Research indicates that it is an early big win that hooks gamblers into the idea that gambling is an easy score. That win registers not just intellectually, but on a deep emotional level, possibly even rewiring the brain like a traumatic shock will do.

Second, it is the lack of money and pressure to recoup losses or resolve debts that serves as a trigger for lapses and ongoing play. As clinicians and researchers, we know that it is the financial devastation that ultimately brings gamblers into treatment.

Third, I wonder why gamblers move to larger and larger amounts of money they risk. As with any drug, there is a phenomenon of habituation. It's about trying to win more and finding diminishing returns from the investment. I sit in the casino and note that people win large amounts of money on the slots but remain deadpan, commenting only that they put considerably more into the machine. It's never enough to cover the mounting debts, so the excitement that gamblers pursue loses its charge.

On the other hand, it is clear that gambling is not a rational venture. An image I often offer clients who express confusion about how they are unable to maintain control and walk away with winnings, especially given a natural tendency to be cautious and conscious of money, is that of parking their brains on a shelf at the door of the casino. Gambling is driven by an emotional mind, not a wise mind. The emotions hijack the intellect and many escape via an altered state of consciousness.

So yes, gambling serves us in many ways. It provides an interlude from painful reality. It offers hope. It is a unique addiction in being fuelled by the belief that my life will become better if I do this — tomorrow will be a better day because I acted on my urges. No other addiction offers this promise. And the industry manipulates and encourages this fantasy with both promotional materials and the insidious workings of the slots to reinforce the behavior.

Gambling is like other addictive behaviors — over learned habits which serve to either reduce tension or create a high (akin to the effects of heroin or cocaine). So yes, perhaps gambling is not only about the money. The money becomes a conduit for altered states and escape. But still, bottom line, it is the pursuit of financial gain that is at the core of gambling. Sometimes this issues from poverty

and desperation, sometimes not. While the possession of money has different meanings, promising such things as power, security, freedom and independence to players, winning money is a key motivation for gambling. As counselors, I don't think we should necessarily nod our agreement that it's not about the money. While talking about money is still awkward and socially taboo ... it's important to challenge this discomfort in ourselves and our clients.

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# Bettor Choice Gambling Treatment Program

Submitted by: Donna Zaharevitz

Donna Zaharevitz, peer counselor with the Wheeler Clinic Bettor Choice Gambling Treatment Program, is breaking new ground with the recent start of a gambling treatment group at York Correctional Institute for Women in Niantic, Ct. Donna began working with the Department of Corrections (DOC) in December of 2007 to bring services to inmates with gambling problems. The staff at York were the first to accept. In April, Donna began facilitating a two-hour group every Thursday afternoon that was initially designed to be a four-week cycle for a maximum of 10 women. The group has been very well received, and is now in its 24th week as of this writing, serving the needs of 16 women, with a waiting list for future groups.

The women come from all walks of life; they are mothers, grandmothers, professionals, and homemakers. Some embezzled money to support their gambling habit, some sold drugs, others forged checks. With Donna's assistance, these women are beginning to understand their addiction and talk more openly about their experiences. They are writing empathy and apology letters to friends and family, identifying triggers and developing coping strategies. They are embracing recovery by discovering healthy alternatives to deal with life's stressors or past trauma. Donna provides group members with supportive resources inmates can use once they are released to keep them on the right path. Donna said, "I have presented to numerous community organizations and appeared on local and national television, but nothing has been as rewarding as the group at York." Also as of this writing, Connecticut DOC has approved a gambling program that is now being implemented at Osborn Correctional Institute for men with 10 men in attendance.

For more information about the Bettor Choice Gambling Treatment Program, call 860-586-9462 or [dzaharevitz@wheelerclinic.org](mailto:dzaharevitz@wheelerclinic.org).



## National Problem Gambling Awareness Week 2009

March 1-7

For more information, including fact sheets, press releases, etc., and suggestions on how to promote the week, visit [www.NPGAW.org](http://www.NPGAW.org)



National Council  
on Problem Gambling

## Calendar of Events

For more information on these events, please visit our website [www.ncpgambling.org](http://www.ncpgambling.org)

### November 2008

#### Counseling the Pathological Gambler (I and II)

Location: Web Based, On Demand

##### COUNSELING THE PATHOLOGICAL GAMBLER I:

This online course provides the opportunity for mental health practitioners, health care providers and addiction professionals to develop the skills necessary to effectively diagnose and assess the pathological gambler, provide individualized treatment, and define the necessary components for effective development of a gambling treatment program.

##### COUNSELING THE PATHOLOGICAL GAMBLER II:

This online course provides the opportunity for mental health practitioners, health care providers and addiction professionals to develop the advanced skills necessary to recommend or integrate effective treatment interventions.

Contact: Elizabeth George

Email: [info@nati.org](mailto:info@nati.org)

Phone: 218-722-1503

#### Delaware Council on Gambling Problems, Inc.:

##### Deepening Our Understanding of Cultural Competence: Going Beyond Political Correctness

Location: Hampton Inn, Wilmington, DE

Date: Thursday, November 13, 9:00 AM – Saturday,

November 15, 4:00 PM

Contact: Susan Edgar

Email: [wonderdog@dcgp.org](mailto:wonderdog@dcgp.org)

Phone: 302-655-3261

#### Cambridge Health Alliance, Division on Addictions:

##### NCRG Conference on Gambling & Addiction:

##### The Changing Landscape of Treatment, Responsible Gaming and Public Policy

Location: Mandalay Bay Hotel & Casino, Las Vegas, NV

Date: Sunday, November 16 – Monday, November 17

Contact: Jenna Toret

Phone: 781-306-8600



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### National Newsletter Submissions

NCPG encourages submissions for the newsletter from its members. Min. Words: 150/Max. Words: 1,000. All requests must be submitted by **December 1, 2008** for the next issue.

Send your submission to [melissam@ncpgambling.org](mailto:melissam@ncpgambling.org) or via mail to: NCPG, Attn: Melissa Martin, 730 11th Street, NW, Suite 601, Washington, DC 20001.

Questions?  
Contact Melissa at 202-547-9204 or [melissam@ncpgambling.org](mailto:melissam@ncpgambling.org).

