

## **YOUR BEST BET: UNDERSTANDING PROBLEM GAMBLING©**

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### **RECOGNIZING A GROWING PROBLEM**

*Billy Q. began his gambling career playing card games with his friends when he was 15. By age 21, he was buying about \$100 a week in lottery scratch-off cards. Like many problem gamblers who play in lotteries, he preferred the instant results and the excitement and action of playing scratch-offs to the delay and disappointment involved in weekly grand-prize lotto games. About twice a month, he went impulsively to a cash station to withdraw money from his account and later from credit cards; then he spent the night playing dice. Typically, he lost as much as half of his paycheck. These dice games were always occasions for drinking 6, 8, even 10 beers during the night of gambling. His wife argued with him after these episodes, but usually she worked extra hours to cover their expenses and to bail Billy out. Every day he fantasized about winning back his losses. He thought about his biggest wins, a few thousand dollars, and how exciting that once felt. He hoped to buy his wife an expensive gift to make up for the hurt he caused her. He expected some big wins which would wipe out his accumulated losses, a phenomenon we call chasing. He has moved from the Winning Phase to the Losing Phase of gambling problems. He is at risk of destroying his marriage. His job is also on the line; if he misses another day because of his gambling, he will be fired. So, he is close to the Desperation Phase.*

*Jeremy Z. had a habit of going to the casino to “relax” just as he liked to drink and smoke pot to relax, as he described it. Actually, Jeremy craved action. As much as \$1000 passed through his hands in a night at the casino. He felt most alive and intense while engaged in his relationship with the roulette and the blackjack tables. He could block out all his worries. Often, when he fell behind for the evening, he bet more heavily to try, ineffectively, to win back what he lost. This pattern is known as chasing, which is essentially chasing a loss, spending good money after bad, in hopes of winning back what was lost. As the amount lost increases, the bets tend to become more impulsive, even desperate. Eventually, after spending whatever savings he had and whatever he could borrow from friends, he racked up \$25,000 in credit card debt because of gambling. He has slipped into the Losing Phase of the progression of pathological gambling.*

*Geraldine X. did not begin playing bingo until she started going to bingo hall with her seniors group. By the time nine months of this elapsed, she was playing 4-6 days a week, and she had begun to raid her retirement savings significantly to fund her excursions. She was too ashamed to tell her family and thought about ending her life. She thought her luck had turned bad, but it would return to her. She had moved so quickly through the phases of pathological gambling to the Hopelessness Phase.*

These gamblers share common symptoms: losing control of wagering, more impulsive bets, gambling for longer than intended, losing more than they could afford to lose, chasing losses with more wagering, devoting more and more time to gambling, seeking bail-outs through borrowing or having others cover their losses, increasing debt, alienation from loved ones, severe negative consequences from gambling. Their gambling has become compulsive and pathological.

About one half of all gamblers are cross-addicted to alcohol or drugs. About one quarter of alcoholics are also problem gamblers. When a problem gambler becomes abstinent from chemicals, but does not change his or her gambling, relapse may result. When a problem gambler stops gambling, but does not go into recovery for drinking and drug use, he or she is at risk for relapse. To reduce the risk for relapse, both kinds of addictions, as well as any mental health problems, must be treated simultaneously in integrated care.

## **GAMBLING ACTIVITIES**

Gambling is growing rapidly in the U.S.A. In 1974, \$17 billion was bet on racing, casino games, and other legal wagers. Today, some \$500 billion annually is wagered, with 80% of the public participating in gambling activities. The types of gambling are endless. Which of these do you do?

- a dart league at a local bar
- a church casino night
- an extended family sets up several mahjong games at a party
- betting on the horses or greyhounds at the track or at OTB
- betting on each hole in a golf match
- buying lottery tickets or scratch-offs when purchasing gas
- charity raffles
- investing speculatively in stocks, options, or commodities
- office sports betting pools, e.g., NCAA brackets
- placing bets with a bookie on basketball games or other sports
- playing numerous bingo cards two or more times a week
- roulette, slots, or blackjack in a casino
- saving up for a regular trip to a casino and gambling \$500-\$1000 each time

- senior citizens take a bus to a casino or bingo hall
- online betting, one of the fastest growing segments of the wagering industry, with “sports book” apps, online lotteries, online card games, and so on
- shaking dice
- students play poker once a week
- video poker

**Female Gambling.** Legalization of gambling and greater accessibility have led to increasing numbers of female and young problem gamblers. Women represent only about one third of pathologic gamblers. Female pathologic gamblers tend to be more depressed and more likely to gamble as a means of escape than male pathologic gamblers, who tend to gamble to seek excitement. The onset in female gambling tends to occur later in life, with a shorter (average, 3 years) history of gambling before the woman goes for treatment. The prognosis is generally better for women than for men.

## **NORMAL GAMBLING**

What distinguishes normal from abnormal gambling? Normal gamblers set aside an affordable amount of *money* to gamble, considering it more or less an entertainment. They also set aside an amount of *time*. Their gambling does not detract from work or family *responsibilities*. Their expenditure on bets is only a small part of their expendable leisure funds in a realistic budget. Winnings are not set aside for more gambling. When they lose money, they do not feel the need to go back to try to win. The normal gambler has no potential influence on the outcome of an event, such as an athletic game. The gambling is not prohibited by an organizational policy, for example, an employer policy or NCAA regulations. He or she generally does not use alcohol excessively or other drugs when gambling. Note, alcohol or other drug use can affect a person's judgment and can interfere with his/her ability to control gambling and adhere to predetermined limits.

## **PROBLEM GAMBLING**

There are certain reasons for gambling that present a high risk for the development of problems:

- Gambling to relieve stress, loneliness, anger or depression
- Gambling to make up for a loss or series of losses (chasing)
- Gambling to impress others -- “ego,” to show off
- Gambling to cope with the death or loss of a loved one

*Problem gambling* occurs when one's motive for gambling becomes emotional or high risk, when the gambler begins to lose control as indicated by gambling more than intended, when spending far more time than intended, when gambling begins to be

preferred to other activities, and, often, thinking about getting back to gambling whenever unable to do so. It has the hallmarks of any addiction, namely, loss of control, compulsivity, tolerance, withdrawal when not in the activity, and preoccupation. As the gambler goes deeper into the pattern, the addiction of *pathological gambling* sets in. *Recent research suggests that gambling addiction operates in the brain in a way which is similar to cocaine addiction.* The addiction is marked by

- ✓ **Compulsive behavior**
- ✓ **A progressive course**, leading to deeper and deeper involvement in a gambling lifestyle, with suicide attempts in 25% of cases.
- ✓ **Irrational beliefs** such as believing in the ability to control the outcome of events, believing in special luck or luck as a real force (rather than pure mathematical odds), misperception of the odds of winning, and unrealistic fantasies about how winning will magically improve the gambler's life and make others feel better about his or her gambling.
- ✓ **Negative consequences** in the gambler's work, family, social, and financial life, despite which he or she keeps on gambling, such as committing illegal acts, borrowing heavily, racking up family debt, losing time from work or family life in order to gamble, arguments at home, etc.
- ✓ **Loss of control** over gambling, unsuccessful efforts to control, cut back, or stop gambling; binges, gambling until your last dollar was gone.
- ✓ **Preoccupation** with gambling, with obtaining money with which to gamble, with preferring gambling to other activities, with thinking about gambling.
- ✓ **Chasing losses**, going back after a loss in order to get back to financially even.
- ✓ **Tolerance**, the need to gamble with increasing amounts of money in order to achieve the desired excitement.
- ✓ **Withdrawal**, feeling restless or irritable when attempting to cut down or stop gambling.
- ✓ **Mood alteration**, gambling as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression).
- ✓ **Denial**, marked by lies to family members, therapists, or others to conceal the extent of involvement with gambling.
- ✓ **Bailouts**, with relying upon others to provide money to relieve a desperate financial situation caused by gambling.

If any of these characteristics of problem or pathological gambling describe you or someone you know, help is available.

## FROM WINNING TO DESPAIR

There is a sequence of steps through which the problem gambler passes in developing pathological gambling. Often, the problem begins with success; early winning encourages the person to believe he or she is lucky or has a special talent or a special winning system for placing bets. The feeling of **action**, that is, a high, excitement, escape, fantastic success, or exhilaration, becomes a driving force. The gambler thinks about how to get **into action**. The gambler maintains fantasies about past wins. The gambler fantasizes about how to spend winnings, enjoying the sense of accomplishment, luck, and the well-being that comes with those fantasies. If you have ever held a Lotto or Powerball ticket and, before the drawing of the winning number, you spent time daydreaming about how to spend the jackpot, you know how compelling and exciting *action* can be. Imagine having that in mind a great deal of the time.

### Phase I. Winning

- Action-seeking [men] -- *enjoys the euphoria and competition* -- or escape-seeking [women] -- *enjoys the time away, relief or numbing from an abusive or stressful lifestyle, difficult relationships, alcohol-impaired partner, loneliness, or boredom*
- It's fun, excitement, spend larger blocks of time gambling, both men and women are *attracted to the high*, the adrenalin rush, the ACTION, which is like a trance, an anesthetic, a shift in identity.
- 50% experience a *big win* (mostly the action-seekers) that hooks them.
- Flushed with success, *self-esteem centers on gambling prowess*
- Begins to borrow to keep gambling, but is able to recoup losses

### Phase II. Losing

- Chasing losses, *increased time gambling*, misses work
- Reduced self-esteem, uses borrowings or credit to try to bolster self-esteem by gambling
- Unpaid bills, covering up, *concealment* of the fact of gambling itself, alibis
- *Concealment* first of losses, later of the family money that has been consumed, finally of the disaster of going into heavy debt (males usual end up in heavier debt than females)
- *Concealment* by overstating expenses, understating income, borrowing but saying it's for other reasons, diverting household or business monies, inventing fake expenses to explain missing money
- Sometimes making book or otherwise going into the gambling business
- *Bail outs with promises to quit gambling or to pay back quickly*
- This phase can extend for years
- DISCOVERY CYCLES lead to ever narrowing options
  - Getting Jammed Up - no way to get \$ except borrow or steal, can't pay obligations, blames the lack of funds on unexpected expenses or other reasons, looks for bail out
  - Facing the Music - a crisis caused by not paying bills
  - Getting Caught - family discovers the monetary crisis, leading to confrontation, separation

### Phase III. Desperation

- *Obsessed* with getting even or just being in the action, often despite depressive feelings that do not remit
- Loses much of the money intended for paying debts or bills
- *Gambles full time or in every available moment*, increasingly recklessly and without skill

- Fraud, forgery, as gambler exhausts legitimate sources of funds, embezzlement, criminal activity
- Panic about losing the action
- Moody, depressed, irritable, misses sleep

### Phase IV. Hopelessness

- Realize they can't catch up, careless gambling
- Just want to be in action
- Suicidal thoughts and 25% attempt suicide
- Hopelessness

You can see that gambling is a progressive disorder which leads to a deepening involvement and preoccupation that can become all-consuming. This progression used to take 15 years or more for card players or horse-race bettors. But it can go much faster these days with the availability of online betting, betting apps, bingo halls, video poker, casinos, and lotteries. By identifying the type of gambler and the phase of gambling, as well as the level of motivation to stop gambling, the counselor can target therapeutic interventions more carefully in order to help the gambler begin the process of recovery.

## FAMILIES

When one member of the family has a gambling problem, the family is never an uninjured party. Members of the family are forced to respond. Often, however, they are in the dark about how much has been lost, how much gambling has taken place, and how much of an impact it has upon them. The family adapts while gambling comes to control the family reality, the experiences members have with each other, the way the family system operates. In the winning phase, the family reaps rewards. Members minimize, rationalize, and deny the problem.

Later, manipulated by the concealment and lies, blaming themselves for the problem, and fearing discovery by the extended family, the family members try to take control. They avoid get-togethers because of owing extended family members money. The gambler tries to silence the family pain with gifts when he/she wins and with promises to quit after he/she is discovered or jammed up. The family **Enables the** gambling by gambling along with the gambler; by hiding the problem, denying it to others; by helping pay off debts; by bailing out the gambler from arrest or a loan shark; parents of gambler may pay off losses, lend money, or deny the seriousness of the problem; parents may accept the gambler's blame of them.

Eventually, the family reaches **emotional exhaustion**. They no longer want to bail out the gambler, become resentful, feel victimized. After all, they are in debt, experiencing loan defaults, repossessions, and creditors calling, and they may not understand why. Separation and divorce are frequent impacts.

Of course, every family is different. The course we described is common. Some families confront the problem head on and insist the gambling stops. Often, however, it does not and elements in the pattern above will occur.

**Children.** The basic needs of children may not be met. Parents may be distracted from them. Since material possessions become important to kids, giving gifts is often the way the gambler reconciles and shows love after absences. Children in these families are at increased likelihood of developing later gambling problems. High-school aged children are at risk for school failure because they focus on working and taking care of themselves. These children may live with a fear of family breakup, the parent disappearing, or of some calamity occurring.

## GETTING HELP

*With Billy Q., when he lost, he was sure his luck would change, so he bet more. When he came for help, he was desperate to keep his job and marriage. It took several months of outpatient cognitive and motivational therapy, family therapy, and Gamblers Anonymous (GA) meetings before he fully accepted that he could no longer gamble.*

*Jeremy Z. had rationalized that his life was stressful. In marital and individual therapy and GA, he learned that the "stress" came from his own reactions and that he had unresolved painful feelings which led to his anxiety. These feelings could be resolved and he could handle his tensions in new ways without gambling. His wife attended Gam-Anon in order to learn to avoid reinforcing or cooperating with Jeremy's addiction and in order to develop her own life without centering her emotional reactions around his gambling.*

*Geraldine X. believed that she could never be understood or accepted by her family. The belief was challenged in therapy. Once her family came in to support her emotionally, she began to recover.*

It is doubtful that one theory will explain all aspects of gambling. Many problem gamblers have genetic markers suggesting they need excitement or novelty in order to feel a sense of joy and reinforcement equal to what others feel. But many gamblers do not have this need. Further, virtually all gamblers develop the feeling of *Action* and the cognitive distortions, or thinking errors, which enable them to rationalize continuing this high-risk behavior. Hooked by the big win, they may believe in their special luck or skill.

Generally, therapy can help the gambler and the family to recover. The goals of treatment are abstinence from gambling, ending the fantasy life which involves imagining the high or action that comes from gambling, taking responsibility for the debts and harm which have accumulated as a result of gambling, and honesty and transparency with family and others.

Sometimes, improvement is rapid, but often it takes more than one series of treatment sessions or an extended period of time in order to bring about major changes.

Often, we may need to try several different approaches in order to make a difference. So, families need to be patient yet persistent in their dedication to improving family life.

Gamblers Anonymous is similar to Alcoholics Anonymous and Narcotics Anonymous. By working with other gamblers who are in recovery, the gambler is encouraged to accept that the addiction is an illness, thereby giving up the beliefs which have maintained the problem and using the support of the group and a GA sponsor to help see him or her through the rough spots on the journey of recovery. GA membership should be viewed as a long term commitment. Evidence suggests that those who stick with GA will have about a 50% rate of total abstinence from gambling.

Medication does not usually affect the addiction *per se*, but gamblers sometimes have bipolar or depressive or other symptoms which can be helped by medication.

*Motivation to change is crucial for treatment success.* Motivational enhancement techniques increase the probability of continuing with treatment. We identify where the patient is in the sequence of stages in the process of change so we can match our interventions to the patient's motivation. The principles of motivational interviewing as used by therapists can be informative for families as well. These include:

- (1) expressing empathy for the gambler's emotional quandary between needing to gamble on the one hand and guilt or shame on the other,
- (2) setting realistic goals, in small enough steps that at least some progress in the right direction can be attained,
- (3) avoidance of confrontation toward the patient, arguing, or butting heads, since that increases defensiveness,
- (4) understanding the inevitable resistance to change,
- (5) supporting the patient's *self-motivation for change*.

Educating the family is essential. Family members need to understand this addiction, to express their own perceptions of the situation, and to learn how to detach from the addiction. The hope, support, and empathy they receive will help them work on their own recovery from having been embroiled in this lifestyle.

Inpatient rehabilitation programs are similar to drug treatment programs. Programs specific for pathologic gambling have been emerging since the 1970s.

Family Therapy is central to the treatment of gambling. We want to help the family to avoid any unintentional enabling. We want to assess where is the family in the process of change. Have family members learned dysfunctional thoughts as they adapted to living with a gambler? Have they learned about gambling addiction? Have they had a chance to ventilate their feelings, identified their needs, explore their options? Are the actions they are taking likely to help? We will want to reassure the kids that it's not their fault and examine how it's impacted them.

Behavior therapy is central to treatment. We need to recognize the *positive consequences* of gambling and reasons to keep gambling: enjoying the company of fellow gamblers, escape from problems, not having to think of debts, winning, euphoria,



feeling like a big shot, using gambling skills. We also identify *negative consequences*: losing, arguments, guilt, having to lie and deceive, spiritual degradation, years of debt, loss of family, legal problems, arrest. We also identify triggers to problem gambling, educate the patient about the relapse process. Early in recovery, these triggers could stimulate relapse.

- ▶ *Event Triggers* - ads, access to gambling, friends still gambling, winning or losing, having available funds, financial problems or overwhelming debt, being accused of gambling, intoxication
- ▶ *Cognitive Triggers* - thinking gambling will make me happy, I'll only bet a little, I deserve some fun, it's been months in recovery and I can handle it now {a common self-deception which virtually never is true}, there's no way I can work myself out of debt, I'll win and I'll return the money I borrowed
- ▶ *Emotional Triggers* - euphoric recall of wins and action [sometimes triggered by hearing about a win], anger, conflict, boredom and emptiness, hopelessness, disappointment, resentment, loneliness, or even feeling celebratory feelings, and, especially, feeling criticized

The patient is taught to monitor and journal their urges and triggers, to anticipate the roller coaster ride they may experience trying to recover. We try to develop alternative coping strategies. Honesty with the therapist and group is essential. For instance:

- ▶ *Event Triggers* - avoid these triggers, enlist the support of others to stay away from them, cut up credit cards, make new friends, budget, learn relaxation training, get a sponsor in GA
- ▶ *Cognitive Triggers* - identify gambling thoughts, be prepared with positive new cognitions, use thought stopping techniques, plan ahead, remember your goals, recall the past negative consequences, rehearse new ways of coping
- ▶ *Emotional Triggers* - recognize these feelings, have outlet for talking about them

With persistent help, most gamblers can improve. But family members should come for help even if they have to come without the gambler's cooperation. Any step in the right direction may open the door to a new, more satisfying direction in life. IT'S YOUR BEST BET YET.

## RESOURCES

### *Organizations*

The National Council on Problem Gambling, Inc.  
P.O. Box 9419  
Washington, DC 20016  
(800) 522-4700

Gamblers Anonymous  
P.O. Box 17173  
Los Angeles, CA 90017  
(213) 386-8797

Gam-Anon  
P.O. Box 157  
Whitestone, NY 11357  
(718) 352-1671

### *Books*

Heineman, M. (1992). Losing your shirt. Center City, MN: Hazelden.

Lesieur, H. (1984). The chase: The compulsive gambler. Rochester: Schenkman Books.

## ABOUT THE AUTHOR

Don D. Rosenberg, MS, is a Licensed Psychologist at Shorehaven Behavioral Health, Inc., 414-540-2170. He holds a number of additional credentials including Certified Substance Abuse Counselor, Certified Employee Assistance Professional, Licensed Marriage and Family Therapist, National Board Certified Diplomate in Clinical Hypnotherapy. Shorehaven has a treatment team trained to assess and treat both problem gambling and substance abuse, as well as mental health and family problems in all age groups.

## THE TWELVE STEPS OF GAMBLERS ANONYMOUS

1. We admitted we were powerless over gambling - that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to a normal way of thinking and living.
3. Made a decision to turn our will and our lives over to the care of this Power of our own understanding.
4. Made a searching and fearless moral and financial inventory of ourselves.
5. Admitted to ourselves and to another human being the exact nature of our wrongs.
6. Were entirely ready to have these defects of character removed.
7. Humbly asked God (of our understanding) to remove our shortcomings.
8. Made a list of all persons we had harmed and became willing to make amends to them all.
9. Make direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong, promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the

power to carry that out.

12. Having made an effort to practice these principles in all our affairs, we tried to carry this message to other compulsive gamblers.

## TWENTY QUESTIONS FROM GA

### Are you a compulsive gambler?

Answer all 20 questions below and view our comments based on your answers.

|  |       |
|--|-------|
| 1. Did you ever lose time from work or school due to gambling?   | YesNo |
| 2. Has gambling ever made your home life unhappy?  | YesNo |
| 3. Did gambling affect your reputation?  | YesNo |
| 4. Have you ever felt remorse after gambling?  | YesNo |
| 5. Did you ever gamble to get money with which to pay debts or otherwise solve financial difficulties? | YesNo |
| 6. Did gambling cause a decrease in your ambition or efficiency?                                       | YesNo |
| 7. After losing did you feel you must return as soon as possible and win back your losses?             | YesNo |
| 8. After a win did you have a strong urge to return and win more?                                      | YesNo |
| 9. Did you often gamble until all your money was gone?   | YesNo |
| 10. Did you ever borrow to finance your gambling?  | YesNo |
| 11. Have you ever sold anything to finance gambling?   | YesNo |
| 12. Were you reluctant to use "gambling money" for normal expenditures?                                | YesNo |
| 13. Did gambling make you careless of the welfare of yourself or your family?                          | YesNo |
| 14. Did you ever gamble longer than you had planned?   | YesNo |
| 15. Have you ever gambled to escape worry, trouble, boredom, loneliness, grief or loss?                | YesNo |
| 16. Have you ever committed, or considered committing, an illegal act to finance gambling?             | YesNo |
| 17. Did gambling cause you to have difficulty in sleeping?   | YesNo |
| 18. Do arguments, disappointments or frustrations create within you an urge to gamble?                 | YesNo |
| 19. Did you ever have an urge to celebrate any good fortune by a few hours of gambling?                | YesNo |
| 20. Have you ever considered self-destruction or suicide as a result of your gambling?                 | YesNo |

<https://www.gamblersanonymous.org/ga/content/20-questions>