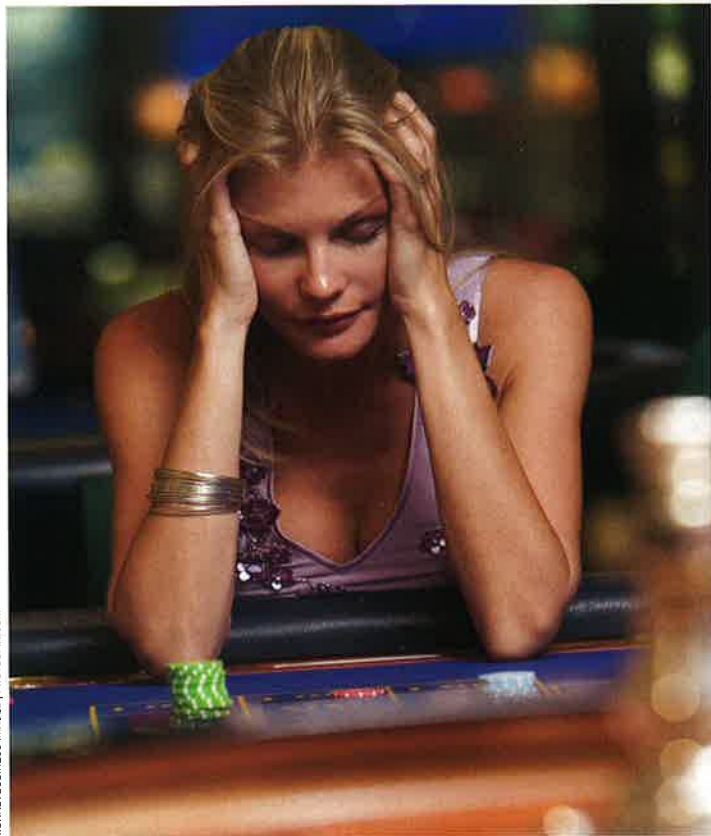


TIME TO START SCREENING FOR Gambling Problems IN ADDICTION SETTINGS

Fifty Percent of Problem Gamblers Have Drug and Alcohol Concerns

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The DSM-5 is coming, and that will require changes by addiction professionals. Not only is the dependency/abuse distinction for drugs and alcohol being eliminated, but gambling disorders are being recognized as an addiction, the first non-ingested addiction recognized by the American Psychiatric Association. This focus calls attention to the new addiction classification and also reflects that gambling affects more than the individual: it has an impact on families, communities and public health.

There are a number of reasons why an addiction program should screen for gambling problems. Studies have revealed that high comorbidity exists between gambling and substance disorders. Approximately 30 percent of individuals with drug and alcohol disorders also have gambling problems, and 50 percent of problem gamblers have drug and alcohol concerns. In fact, the emerging biological research into common pathways and common treatment was a major factor that led to the reclassification of gambling disorders.

An additional concern for persons in recovery is the phenomenon of switching or substitution of addictions. An individual may stop

drugging and drinking but then may seek another way to get the same buzz, the same feeling. Many will turn to other addictive behaviors such as gambling to provide this.

Gambling can be a relapse trigger for drug and alcohol use. For example, an individual with two months of sobriety may go to a casino where free drinks are available; this could provide an irresistible temptation. Addiction also can be viewed as a learned response: alcohol and drugs are used to celebrate positive events and mourn negative events. Similarly, winning or losing money can become a trigger for gambling.

Gambling is deemed to have the highest suicide rate of any addiction. It has been estimated that 20 percent of pathological gamblers have attempted suicide. Gamblers also show much higher rates of mood disorders, stress, ADHD, impulsivity and other mental health conditions than the general public.

Gambling is often referred to as an invisible addiction. There are no apparent outward manifestations. We cannot test for gambling through urine, blood or hair follicles. Self-report is the basis for obtaining gambling information, but often the client will not discuss gambling unless asked about it.

It is thus imperative that questions be asked in the assessment process about gambling. This can be a simple process. There are two and three question screens that have been used to determine whether full gambling assessment is necessary. The "Lie/Bet" test asks just two questions: "Have you ever lied to people important to you about how much you gamble?" and "Have you ever felt the need to bet more and more money?" A positive response to either question would warrant a complete gambling assessment.

Classifying gambling disorders as an addiction will, hopefully, encourage more people to seek help and reduce the stigma of gambling as a moral weakness or lack of will power. Problem gamblers can stop gambling and live fruitful, productive lives.

Help is only a phone call away. The national Help Line number is 800.522.4700, and many states utilize the 1.800.GAMBLER® number or a state number. Resources and help are available on a confidential, 24/7 basis. Addiction professionals can make this addiction less hidden and help their clients get started in recovery. It is as simple as asking the gambling questions, identifying problems and referring to treatment or self-help programs.

Additional information can be obtained from the following websites: www.npgaw.org and www.800gambler.org/GAW

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