

THE SAT REPORT

Satish Kedia, PhD, Institute for Substance Abuse Treatment Evaluation (I-SATE), The University of Memphis

The Problem Gambling Initiative in Tennessee

There is more money spent on gambling than any other legal form of entertainment in the U.S.; in 2002, revenues reached \$68.7 billion, with \$42.4 billion in lottery sales at \$168 per capita [1]. The increasing prevalence of gambling is causing serious consequences nationwide. In a national study published in 2002, 90% of respondents said they had gambled at some point in their lives, 82% in the past year, and 23% weekly. The National Gambling Impact Study Commission (NGISC) estimated that of the “125 million Americans who gamble at least once a year, about 7.5 million have some form of gambling problem, with another 15 million ‘at risk’ of developing a gambling problem” [2].

Approximately 2.5 million U.S. gamblers may be considered pathological while another 3 million are problem gamblers [3]. The National Council on Problem Gambling reports that patho-

logical gambling is characterized by: an increasing preoccupation with gambling, a need to bet more money more

frequently, a restlessness or irritability when attempting to stop gambling, “chasing” losses or gambling to win money that has been lost, and losing control of the gambling behavior in spite of serious, negative consequences [4].

Problem gambling may include but is not limited to pathological gambling; it is defined as gambling behavior that causes disruptions in any major area of life, including psychologically, physically, socially or vocationally. For some, problem gambling may develop into pathological gambling. Problem gambling has been called the “hidden addiction,” as there are few outward signs until it is too late. A person with



Highlights

- An estimated 155,788 Tennesseans are reported to be problem gamblers, with another 64,743 pathological gamblers.
- The Tennessee Problem Gambling Initiative, with a state appropriation from the Tennessee Legislature, has been expanded to include outpatient treatment services.
- There are three different publicly funded facilities for gambling treatment in different regions of Tennessee.
- In a preliminary study of gambling treatment in Tennessee, almost half (46.7%) of clients had not gambled in the last 30 days at the time of follow-up.

a gambling addiction will exhibit characteristics similar to those associated with substance addiction: altered brain chemistry, withdrawal symptoms, loss of control, and adverse relationships with family, school, coworkers, and the community as a whole.

Families with a problem gambler are more likely to experience divorce, domestic violence, and incidents of child abuse. According to the National Endowment for Financial Education (NEFE), “statistics show that the children of problem gamblers are more likely to do poorly in school, become depressed, have drug problems, and become gamblers themselves” [5]. According to a study done by the National Opinion Research Center at the University of Chicago, problem gambling conservatively “costs society over \$5 billion yearly in jobless benefits, increased crime and incarceration, and in medical treatment” [3].

Problem and pathological gamblers have an increased likelihood for mental and physical health problems, including digestive distress, depression, sexual dysfunction, anxiety, risky behaviors, substance abuse, and suicidal thoughts. They also have a higher likelihood for criminal activity. The impact of problem gambling in the workplace includes lost productivity/absenteeism, fraud, embezzlement, and theft. The financial difficulties created by compulsive gambling impact society on every level. The effects of financial disarray (including overdue or unpaid bills, multiple cash advances on credit cards, unexplained disappearance of cash, and constant bailouts by friends and family) are major motivating factors for problem gamblers to seek help.

Gambling Problem in Tennessee

In addition to the legalization of the lottery in Tennessee since 2004, Tennesseans have opportunities to gamble in casinos, horse tracks, and dog tracks and also have access to internet gambling, illegal gambling, and lotteries in the nearby states of Arkansas, Kentucky, Alabama, Missouri, Georgia,

Mississippi and North Carolina [6]. The close proximity to casinos in Tunica, Mississippi—only 30 miles from Memphis—is escalating gambling problems for residents in the southwestern part of the state. Additionally, Southland Park in West Memphis, Arkansas, only ten miles from Memphis, introduced machine gaming as recently as November, 2006, undergoing a \$40 million renovation to include over 900 electronic gambling machines [7]. Approximately 40-60% of casino gambling is funded through checking account and credit card cash advances performed at ATMs and through check-cashing services within the casino [1].

It is estimated that there are 64,743 pathological and 155,788 problem gamblers in the state [8]. In a 2004 survey of adult Memphians, 12.5% of participants fit the criteria for problem gamblers, and more than 6% for pathological gamblers, while another survey of university students found that 5% exhibited pathological gambling symptoms [9].

Problem Gambling Initiative in Tennessee

The Tennessee Gambling Initiative, with a state appropriation from the Tennessee Legislature, has been expanded to include outpatient treatment services. As part of this expansion, the hours for the Tennessee REDLINE (1-800-889-9789), a Tennessee hotline for those with substance abuse and/or gambling problems that provides access to referrals and resources, has been extended to 24 hours a day, seven days a week, promising increased identification of those in need and an increased capacity for referrals to screening, assessment, and counseling services.

The Bureau has awarded contracts to four agencies to provide gambling treatment, information, and referral services, with special attention to outreach. The University of Memphis Gambling Clinic in Memphis, Buffalo Valley Inc. in Hohenwald, and Helen Ross McNabb Center in Knoxville each provide outreach and outpatient treatment services, while the Tennessee As-

sociation of Alcohol, Drug & other Addiction Services (TAADAS) maintains a current database of Tennessee providers and disseminates information to treatment professionals, policy makers, and anyone needing help for an alcohol, drug and/or gambling problem. The Institute for Substance Abuse Treatment Evaluation (I-SATE) at The University of Memphis has also been contracted to conduct outcomes evaluations.

The Gambling Clinic at the University of Memphis provides for the needs of pathological gamblers throughout West Tennessee. Helping individuals and families overcome their gambling problems, The Gambling Clinic provides low-cost, outpatient services for individuals experiencing gambling problems. Their program is designed to help individuals use personal strengths and resources to resolve gambling difficulties. Created through current research, it utilizes guided self-change and motivational approaches to aid individuals in controlling their gambling.

The program consists of five treatment phases that emphasize a careful consideration of the pros and cons of change and problem solving activities to guide the replacement of the problem behavior with alternative behaviors. The treatment also uses personalized feedback about the addictive behavior and encourages the individual to make choices about treatment goals in order to better fit treatment to the individual's expectations and willingness to change. All assessment and treatment activities in the clinic are constantly evaluated and modified based on evidence collected by researchers. The Gambling Clinic can be reached at 901-678-3491, and the clinic's newsletter, "Odds and Ends," may be accessed online at www.thegamblingclinic.memphis.edu.

Buffalo Valley Inc., located in Hohenwald, Tennessee, helps compulsive gamblers in Middle Tennessee deal with their addictions. In addition to the center's work with substance addiction, it offers outreach and education sessions and treatment interventions. Buffalo Valley is committed to reaching the residents in its area through distributing fliers, brochures, and other

10 Indicators of a Gambling Problem

1. You have often gambled longer than you had planned.
2. You have often gambled until your last dollar was gone.
3. Thoughts of gambling have caused you to lose sleep.
4. You have used your income or savings to gamble while letting bills go unpaid.
5. You have made repeated, unsuccessful attempts to stop gambling.
6. You have broken the law or considered breaking the law to finance your gambling.
7. You have borrowed money to finance your gambling.
8. You have felt depressed or suicidal because of your gambling losses.
9. You have been remorseful after gambling.
10. You have gambled to get money to meet your financial obligations.

The National Council on Problem Gambling has identified these criteria for problem gamblers. If you or someone you know answers "Yes" to any of these questions, consider seeking assistance by calling the Tennessee REDLINE at 1-800-889-9789.

gambling literature, as well as by providing screening for individuals with co-existing disorders. The treatment center's motto, "People helping people, help themselves" is personified in the easily accessed information the center provides online, including a new portal for help, a "Help Me Stop Gambling" Chat Room. This Chat Room supports gamblers on the road to recovery and gives them an opportunity to ask clinical questions. The Chat Room is available at www.buffalovalley.org. Buffalo Valley, Inc. may also be contacted at 1-800-626-6709 (ext. 163).

The Helen Ross McNabb Center in Knoxville, Tennessee, cares for the needs of the public in 20 counties across East Tennessee. Their new Intensive Outpatient Program for Problem and Compulsive Gamblers offers counseling for men and women age 18 and older who have problems with gambling or a gambling addiction. It is based on a 12-step model that includes group counseling, motivational interviewing, and cognitive behavioral therapy, along with other supportive therapies. The goal is to achieve abstinence from gambling behaviors over a period of time. Participation lasts from 6 to 8 weeks and includes aftercare and other wraparound services to help ensure stabilization. The program is conducted by a trained clinical social worker with experience in addictions. It is located at the CenterPointe Adult Services facility in Knoxville and can be reached at 865-523-4704 (ext. 3408) or may be accessed online at www.mcnabbcenter.org.

Internet Gambling Targeted

According to an October 13, 2006, *Washington Post* article, internet gambling is "an activity enjoyed by as many as 23 million Americans who wagered an estimated \$6 billion last year" [10]. Industry experts say there are an estimated 2,000 Internet sites that take bets for sports and poker. American players have fueled Internet gambling, supplying \$6 billion of the \$12 billion in revenues generated annually.

A significant change has now occurred in U.S. law, and internet gambling has been sharply curtailed. An anti-gambling bill was attached to a larger measure addressing port security this past summer to ensure its passage. Congress passed the provision, which outlaws payments to Internet gambling sites by banks and credit card companies. With President Bush's signature on October 13, 2006, the Unlawful Internet Gambling Enforcement Act became a law. It instructs U.S. banks regarding what they must do to prevent the use of their financial instruments (credit cards, checks, etc.) to pay for internet gambling.

Preliminary Results of Gambling Treatment Outcomes in Tennessee

Preliminary results indicate that Tennessee gambling treatment services have been effective in helping clients toward recovery. Of the clients treated in state-funded facilities for gambling

problems, 15 completed a 6-month follow-up interview. The results for those clients are as follows:

- Almost half (46.7%) of clients had not gambled in the last 30 days at the time of follow-up.
- At admission, 93.3% admitted to having gambled more than they had intended; however, only 6.7% reported doing so at follow-up.
- Treatment also had a positive effect on employment. Two thirds (66.7%) of clients were unemployed when they entered treatment; however, six months later, a large majority (86.7%) were employed.
- Clients also saw an improvement in relationships, as the number of clients who reported arguing with others over how to handle money fell from 73.3% to 6.7%.
- Although over a fourth (26.7%) of clients had been arrested when they entered treatment, no one had been arrested in the 30 days prior to follow-up.

Over the last 18 months, the Problem Gambling Initiative in Tennessee has enabled:

- Distribution of approximately 42,000 brochures/pamphlets
- Screenings for over 3,200 individuals
- 86 public service announcements to local media
- Treatment services for 89 individuals
- Over 26 community informational meetings
- 81 calls to the Tennessee REDLINE related to gambling problems
- 52 referrals made through the Tennessee REDLINE for gambling problems

Resources for Battling Gambling Problems

It is crucial that problem gamblers receive appropriate and specific care tailored to their conditions. Consulting with a professional who is certified in dealing with problem gambling may be helpful. In Tennessee, contact the Tennessee REDLINE at 1-800-889-9789 for help or referral resources 24 hours a day, 7 days a week. There are also three different publicly funded facilities for gambling treatment in different regions of the state. Additionally, Gamblers Anonymous (GA) holds meetings in Memphis, Knoxville, Nashville, and Chattanooga. The National Council on Problem Gambling (NCPG) and the National Endowment for Financial Education (NEFE) collaborated to produce a book, *Personal Financial Strategies for the Loved Ones of Problem Gamblers* (NEFE, 2000) that may be another valu-

able resource. Also, information about National Problem Gambling Awareness Week (March 5-11, 2007) is accessible online at www.npgaw.org. This campaign is intended to educate the general public and medical professionals about the warning signs of gambling addiction and to provide information about help available locally and nationally.

Sources:

1. National Problem Gambling Awareness Week (NPGAW). (2006). Problem gambling information—Facts and figures: Gambling and spending. The National Council of Problem Gambling (NCPG) and the Association of Problem Gambling Service Administrators. <http://www.npgaw.org/problemgamblinginformation/factsfigures.asp>
2. National Gambling Impact Study Commission. (1999). NGISC final report. <http://www.ncfpc.org/specialngisc.html>
3. National Opinion Research Center (NORC). (1999). Gambling impact and behavior study report to the National Gambling Impact Study Commission. University of Chicago. <http://cloud9.norc.uchicago.edu/dlib/ngis.htm>
4. National Council on Problem Gambling. <http://www.ncpg.org.sg/>
5. National Endowment for Financial Education (NEFE), and the National Council on Problem Gambling (NCPG). (2000). *Personal financial strategies for the loved ones of problem gamblers*. NEFE, Greenwood Village, CO.
6. Tennessee Lottery. "About Us." <http://www.tnlottery.com>
7. Heard, Kenneth. Betting machines open for moola at Southland. *Arkansas Democrat Gazette*. 11/10/06. <http://nwanews.com/adg/News/172513>
8. Kedia, S. (2004) Gambling addiction: A growing public health problem in Tennessee. *The SAT Report*, 1(3)1-4. I-SATE: The University of Memphis.
9. Whelan, J.P. (2004, October). Personal communication.
10. Branigin, William. "Bush Signs Bill to Enhance Port Security: Measure Also Includes Provision Restricting Internet Gambling." *The Washington Post*. 10/13/06.

Help Available in Tennessee

Help for problem gamblers and their loved ones is available in Tennessee. Call the 24-hour, toll-free Tennessee REDLINE at 1-800-889-9789 for confidential assistance regarding treatment.

Treatment for problem gambling is available through:

- West Tennessee - The Gambling Clinic at The University of Memphis, 901-678-3491; www.thegamblingclinic.memphis.edu; e-mail: gambling@memphis.edu
- Middle Tennessee - Buffalo Valley, Inc., 1-800-626-6709, (ext. 163); www.buffalovalley.org; e-mail: stopgambling@buffalovalley.org
- East Tennessee - Helen Ross McNabb Center, 865-523-4704 (ext. 3408); www.mcnabbcenter.org; e-mail: questionsaboutgambling@mcnabb.org
- Gamblers Anonymous (GA) meetings in Memphis, Knoxville, Nashville, and Chattanooga



316 Manning Hall
Memphis, TN 38152-3390
www.isate.memphis.edu
901.678.1753

We would like to acknowledge Dr. Stephanie W. Perry, Herb Stone, and Larry Post from the Bureau of Alcohol and Drug Abuse Services, Tennessee Department of Health, for their support of this project. I appreciate the valuable comments of Herb Stone, Rodney Bragg, and Dr. James Whelan on an earlier draft of this report. My gratitude is extended to the I-SATE project team: Hannah Johnson, Julie Grady, Kimbrelly Leonard, Priyanka Jani, and Saroj Jamode.

THE SAT REPORT is copyrighted © 2007 by the Institute for Substance Abuse Treatment Evaluation (I-SATE), The University of Memphis. Suggested citation: Kedia, S. (2007). Tennessee's Problem Gambling Initiative. *The SAT Report*, 2(1), 1-4. Institute for Substance Abuse Treatment Evaluation (I-SATE), The University of Memphis.