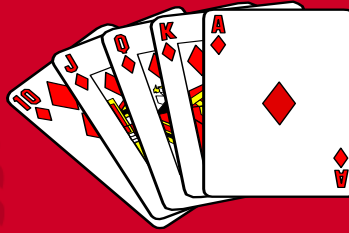


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Center for Gambling Studies



A Syndemic Approach to Problem Gambling

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Introduction

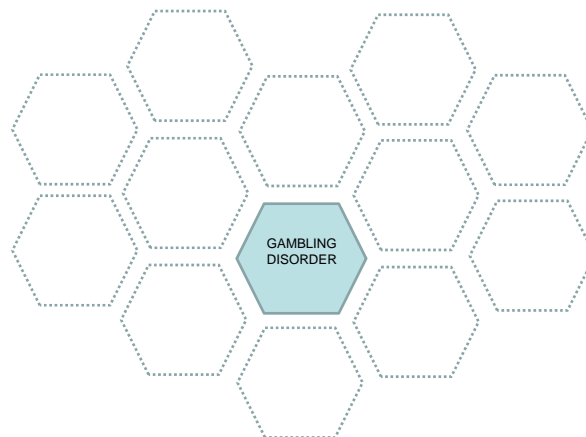
- **Syndemic Approach:**
 - Idea of the syndemic framework was born out of clinical and research experience.
 - Provides guidance for:
 - incorporating typically overlooked signs and symptoms into routine screenings at key entry points; and
 - accounting for the multifactorial nature of the disorder.
- This presentation will:
 - Provide **general overview** of gambling disorder and its evolution;
 - **Discuss** etiological screening tool that informed the syndemic framework;
 - Explore the **components of the syndemic model** for gambling to incorporate gambling disorder into the treatment of comorbid conditions.

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- Syndemic: “interacting, co-present, or sequential diseases and the social and environmental factors that promote and enhance the negative effects of disease interaction” (Singer, Bulled, Ostrach, & Mendenhall, 2017, p. 941).
- Additive effect on the person, community across systems.
 - Prevalence in NJ: Additive effect
- Used primarily with HIV and related conditions (violence, substance use etc.)
- Etiological variables (i.e. GPQ) suggest other aspects of the syndemic system.

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The Gambling Syndemic



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Health

In nationally-representative samples:

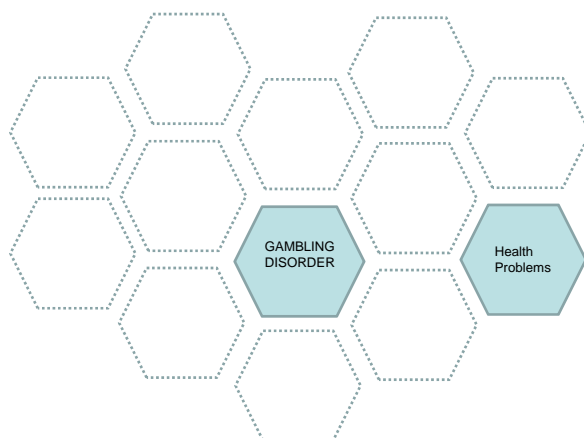
- Problem/pathological gambling is uniformly associated with **poorer health measures among both younger and older adults**. (Desai, Desai, & Potenza, 2007).
- Higher rates of **obesity, arthritis, angina** (Pietrzak et al., 2007)[NESARC], **insomnia** (Bonnaire et al., 2017), **tachycardia, angina, cirrhosis, and other liver diseases** (Morasco, et al., 2006). [NESARC]

Syndemic Systems:

- Primary care, emergency room, community health settings
- Sleep disorder clinics
- Obesity management programs
- Screening: SBIRT for Gambling and referral

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Homelessness

Few studies to date:

- 25% of homeless met criteria for disorder and 10%, for lifetime problems, in a Canadian sample. (Matheson, Devotta, Wendaferew, & Pederson, 2014).
- 46% of homeless were sub-clinical problem and 12% met criteria for gambling disorder in a U.S. epidemiological sample (Nower, Eyrich-garg, Pollio, & North, 2015).
- 12% of British homeless population met criteria for gambling disorder, compared to 0.7% in general population (Sharman, et al., 2015).

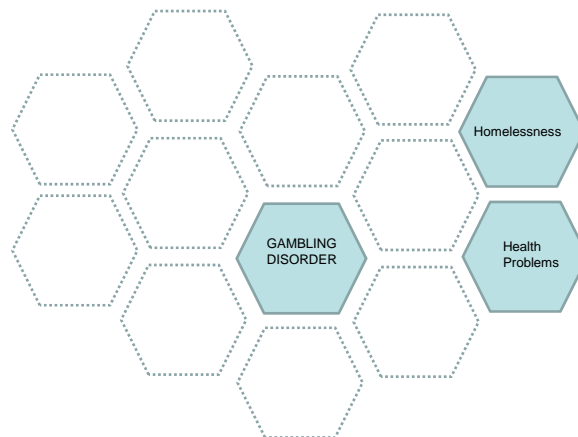
Syndemic System Targets:

- Homeless shelters, soup kitchens, Salvation Army, food pantries
- Unemployment office
- Church/community outreach workers

Screening: SBIRT for Gambling, NODS-PERC

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Criminality/Bankruptcy

- High proportions of those with gambling disorder commit crimes (removed from DSM).
- Economists in U.S. estimate removal of gambling venues and opportunities would result in significant decreases in bankruptcy filings (Barron, Staten, & Wilshusen, 2002; Boardman & Perry, 2007; Nichols, Stitt, & Giacomassi, 2000).
- In Denmark, problem gamblers nearly 3 times as likely to be charged for economic offenses, 2 times as likely for violent crimes and 4 times as likely for drug offenses (Laursen et al., 2016).
- In an Australian women's prison, 64% of those surveyed were problem gamblers and one in six were incarcerated due to gambling related offenses (Riley, Larsen, Battersby, & Harvey, 2017).

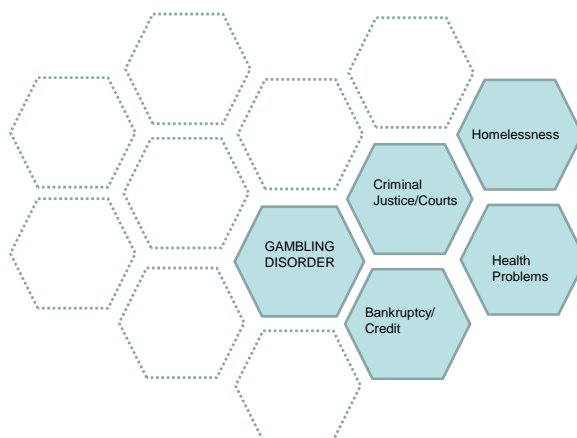
Syndemic System Targets:

- Drug courts, Judiciary (criminal, bankruptcy)
- Probation/parole, Prosecutors/defense attorneys
- Consumer credit counseling agencies

Screening: SBIRT for Gambling, PGSI, NODS-PERC, gambling behavior screen

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Substance Use/Co-Morbid Addictions

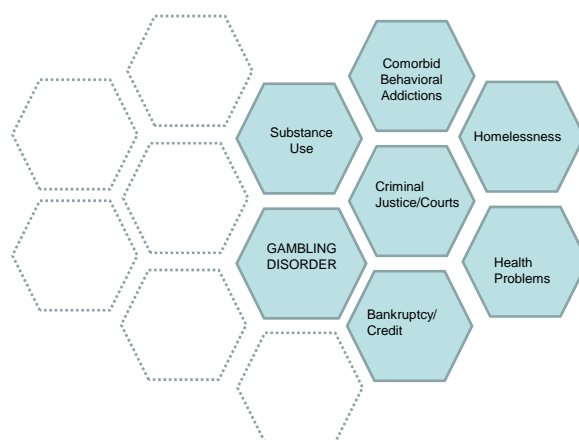
- It is well established there is a high comorbidity between gambling disorder and substance misuse worldwide: (Bonnaire et al., 2017; Dufour et al., 2016).
- In a national study in the U.S., **more than 73% of disordered gamblers met criteria for an alcohol use disorder**, 38% for a drug use disorder, 60% for nicotine dependence, 50% for a mood disorder, 41% for an anxiety disorder, and 61% for a personality disorder (Petry et al., 2005).
- Another U.S. study reported **higher rates of alcohol, nicotine, and marijuana** use among problem gamblers (Barnes et al., 2015).
- Among cocaine users **18.4% were considered at-risk gamblers**, of whom 7.8 % had problems gambling and 10.6 % were moderate-risk gamblers; problem gamblers were also more likely to report problems with alcohol (Dufour et al., 2016).

Syndemic System Targets:

- State programs (mandatory screening) (NODS PERC)
- Private practitioners
- Drug courts
- Diversion programs

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Suicidality/Mental Health Disorders

- Studies have identified **significantly higher rates of suicidal ideation, suicide attempts, and completed suicides** in problem gamblers compared to other groups (Black et al., 2015; Moghaddam et al., 2015; MorganeGuillou-Landreat et al., 2016; Nower et al., 2004)
- Problem gamblers also have **elevated rates of mood and personality disorders** consistently across studies internationally (see Dowling, 2015, for a review).

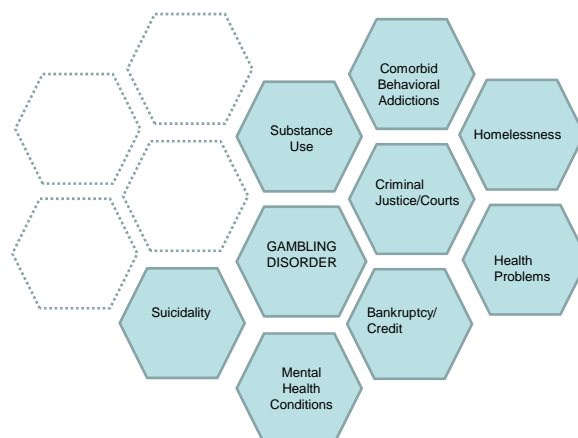
Syndemic System Targets:

- Crisis hotlines
- Police (mental health training?)
- Hospitals
- Mental health practitioners

Screening: SBIRT for Gambling, NODS-PERC or NODS-CIIP, GPQ

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Child Welfare / School Systems

- Child welfare system **does not screen for gambling** as a cause of problems in families.
- Gambling is **often not the presenting problem**.
- School counselors/administrators are not trained in identifying problem gambling and **may dismiss** as non-problematic.
- Children who gamble problematically (or have pg parents) have higher rates of **bullying, delinquency, truancy, substance use** (Räsänen, Lintonen, & Konu, A. (2015)).

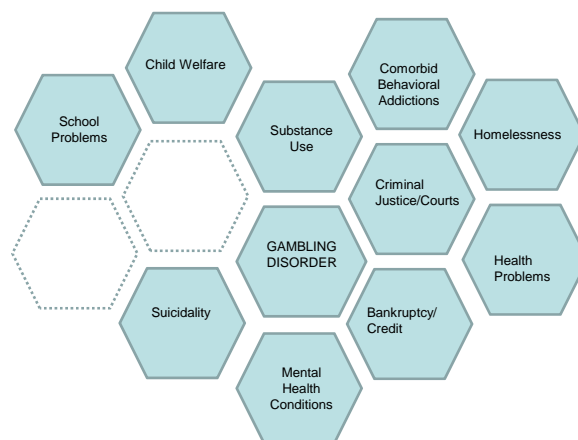
Syndemic System Targets:

- School system education: Superintendents, school boards, school counselors, teachers etc.
- Child welfare workers; intake screenings should include gambling.

Screening:

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Family Violence/Divorce

- Spouses/partners of gamblers are **ANGRY**.
- Studies have found that gambling initiated family violence perpetrated by **both** spouse/partner as well as gambler (Bellringer et al., 2016; Dowling et al., 2014, 2016, 2018).
- **Children are caught in the middle**, experience a host of adverse consequences including **social isolation, conduct disorder, emotional distress (depression/anxiety)** (Abbott, Cramer, & Sherret, 1995; Lesieur & Rothschild, 1989; Vitaro, Wanner, Brendgen, & Tremblay, 2008).
- Children of pg are **much more likely** to become pg or develop other addictions (Dowling et al., 2015, 2016).

Syndemic System Targets:

- Child advocates
- Family court
- Pediatricians
- Family violence services
- Diversion programs
- Child welfare workers

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Where Do We Start?

- In NJ... Youth and Emerging Adults
- Sports wagering is new and epidemic
- Highly intergenerational
- Mostly online
 - 24-7
 - Hard to police underage with willing parent participation
- Few counselors trained to counsel youth gamblers
- Anticipate future problems with widespread downshift in age of onset
- Need prevention and education in schools for counselors, teachers, principals/superintendents at all levels.
- Workforce development for counselors who understand sports wagering

Article: Nower, L. & Caler, K.R. (2018) Widening the Net: A Syndemic Approach to Responsible Gambling, *Sucht*, 64, 1-7. Winner of the 2019 Research Award, National Council on Problem Gambling.

Acknowledgements:

Kyle R. Caler, Ph.D., Assistant Professor, Sacramento State University



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