CHAIR JAMES: Ms. Reilly?

MS. REILLY: My name is Christine Reilly, I'm executive director of the National Center for Responsible Gaming.

Madam Chairman, members of the Commission, on behalf of the National Center Board I want to thank you for inviting us to make recommendations to the Commission.

The National Center is a division of the gaming entertainment research and education foundation, which is an independent non-profit, founded in 1996, and we are affiliated with the University of Missouri, Kansas City, where our offices are based.

We are the first national organization devoted exclusively to funding scientific peer reviewed research on disordered and underage gambling. Our mission is to build the base of knowledge about this disorder in order to improve prevention, intervention, and treatment strategies.

Pathological and underage gamblers engage in a variety of gambling activities, and consequently our investigators do not confine themselves to particular forms of gaming when looking at why some people develop this disorder.

In short, our scope extends far beyond the individuals who have a problem with casino gambling.

To date our financial base includes 26 donors whose pledges total five million dollars. Five are gaming manufacturers or suppliers, and one is a major foundation. The other 20 contributors are casino companies.

However, our goal is to broaden our donor base, as all non-profit should, beyond casino companies, and even beyond the gaming industry. The Gaming Entertainment Research and Education

Foundation's classification as a 501C(3) by the IRS allows us to accept tax deductible contributions from foundations and individuals, as well as businesses and corporations.

Currently the NCRG is the single largest grant maker of peer reviewed scientific research on disordered gambling in the United States. Last week the advisory board of the NCRG approved eight new research grants, thereby increasing our total commitment to research to 2.6 million dollars.

Our grants program, which is highly competitive, offers support in all of the clinical disciplines, behavioral and social science, neuroscience, and epidemiology.

All aspects of our program, peer review procedures, evaluation criteria, and funding priorities are closely modeled on those of the National Institutes of Health.

Our recommendations to this panel cover three areas. Research issues, financial resources, and bridging research and practice.

First under research. We encourage you to recognize the importance of understanding disordered gambling behavior as a multi-dimensional problem, comprised of biological, psychological, and sociological factors.

Today scientists understand psychiatric disorders as complex phenomena that transcend the old nature versus nurture debate. In recognition of this complexity the National Center supports research equally in all of the critical domains.

However, neuroscience is the least understood discipline, and its role in mental health research has been met with suspicion despite the best efforts of the federal

government's decade of the brain initiative, which was proclaimed nine years ago by President George Bush.

Its intention was to foster appreciation in the advances in genetics, pharmacology, and brain imaging. Neuro science research, much of it funded by the National Institutes of Health, has started to yield effective treatment programs for psychiatric and addictive disorders.

The NCRG believes that disordered gamblers deserve to benefit from the same scientific and technological advances that are helping people who suffer from depression, alcoholism, and other disorders.

The NCRG encourages the Commission to resist the uninformed and out dated notion that brain research has no contribution to make in understanding disordered gambling.

Our next recommendation under research is to recognize the benefits of the META analytic approach to gauging national prevalence estimates. Back in '97 the NCRG funded the META analysis of prevalent studies by Harvard Medical School because of the insurmountable problems that are posed by a national prevalence study, including time, exorbitant expense, and the lack of consensus about which scale to use, the Harvard study found that there were 25 different instruments being used.

In the case of prevalence studies, the META analytic approach makes it feasible, also, to look at special populations, which I believe is of interest to this group.

The Harvard project on gambling and health is, we are funding the continuation of the META analysis to Harvard Medical School, and they have continued to incorporate new prevalence studies into their data base.

And, therefore, right now it is the most comprehensive and up to date data base of prevalent studies available, and we encourage you to encourage people, researchers, the public, to use this database, and to also note that it has been used by the National Academy of Sciences, the National Research Council in its current study of the social and economic impact of pathological gambling.

We hope that you will encourage an intellectual climate that challenges existing views and assumptions, and allows for a resolution of fundamental unresolved issues in the field.

Both our advisory board and peer review panels, which include some of the most distinguished scientists in the country have observed that the field of gambling studies is in conceptual chaos.

And partly because they have failed, researches have failed to confront the construct validity issue.

Does disordered gambling reflect a unique primary psychiatric disorder, or is it a secondary disorder, a cluster of symptoms associated with other disorders? The implications of this issue are potentially significant for measuring, preventing and treating disordered gambling.

Until the field decides to pursue this line of inquiry, related issues of nomenclature, and the need for an independent validation of screening and diagnostic instruments, such as SOGS, the DSMIV will remain unresolved.

Our contribution to this effort has been to lay out some cornerstone research priorities that we feel the field should follow to move on. And these priorities have guided our own research efforts, or our research funding.

The first is genetic studies. Genetic studies are going to help us make that distinction between is there a pure pathological gambler as distinguished from somebody who has other kinds of psychiatric problems, and for whom the gambling is a consequence of that disorder.

Two, the development and validation of behavioral and cognitive tests to simulate the gambling state for use in lab settings. These can be used in neuro chemical, functional imaging, and other cognitive and behavioral studies.

And, third, neuro science research that will eventually yield a gold standard against which to measure the accuracy of instruments such as the SOGS, by revealing the biological markers of this disorder, neuro science will provide truly independent standard which diagnoses by clinicians cannot provide.

Under financial resources we hope that you will encourage support for high quality research by the federal government and the foundation community. This field has been compared to the under developed state of alcoholism research in the late ’60s, early’70s, and clearly an infusion of funds is needed.

There is one incentive that might spark the interest of other funding agencies that are already concerned about addictions, and already concerned about mental health problems, is that Dr. Howard Shaeffer has noted that the study of problem gambling permits a study of addiction without the confounding influences of exogenous drugs.

In other words, looking at the addictive experience of the pathological gambler without the foreign substances gives you a clearer sense of what is going on.

The study of pathological gambling permits scientists to consider the possibility that addiction results, in part, from a dependency on the shifts of neuro chemistry associated with shifting subjective states.

We hope that you will also encourage all segments of the gaming industry to support the NCRG. The casino industry is to be commended for providing venture capital to launch innovative scientific research on disordered gambling.

Our original donors set the bar when they provided unprecedented support for gambling research. Other segments of the industry can make a powerful statement by joining NCRG's current donors as responsible corporate citizens.

Along these lines we encourage the Commission to recognize the important role that the private sector plays in supporting research. Although the federal government, mainly through NIH, will continue to be the main source of funding for health research, foundations and non-profit organizations serve a unique purpose.

We have flexibility, accessibility, and the ability to respond quickly to a constantly changing environment. Moreover, we can offer seed money for preliminary studies that are eventually funded at the federal level.

Finally, under financial resources, please encourage public policy makers at the local, state, and federal level to support studies that are based on scientific peer reviewed research. Too of ten prevalent studies are commissioned and selected by government agencies without the benefit of academic peer review.

The Harvard study, for example, found that only 40 percent of the available prevalent studies were subjected to peer review, and they wondered whether this absence of rigorous review explains the lack of progress in methodological development in gambling studies.

The Commission should encourage government entities to use only the leading scholars, as recognized by their peers, and major funding sources, to consult on the development of requests for proposals, and to review proposals according to the rigorous criteria used by the National Institutes of Health, and the NCRG.

Finally, bridging research and practice. Encourage the improvement of training and elevation of standards for clinicians. As the growing knowledge base about disordered gambling changes the way we treat the disorder, it will obviously also affect the way in which health care providers are educated and tested.

Organizations that provide training and certification in the addictive disorders should be encouraged to find ways to stay in touch with developments in the field of disordered gambling research.

Encourage collaboration between researchers, clinicians, and institutions, to strengthen the national network of help lines currently in existence. The national help line number offers an important form of early intervention.

However, the existing system needs to be strengthened and expanded. Furthermore, the potential of help line data for research should be mined. The data could serve as an early warning mechanism by alerting researchers and clinicians to shifting trends in gambling abuse.

The gaming entertainment research and education foundation has commissioned a proposal from the Massachusetts Council on Compulsive Gambling, and the Texas Council on problem and Compulsive Gambling, to develop a standard system for call-in data collection, retrieval, and analyses.

A standardized system, if adopted by all providers nationally, would enable both the organizations and the researchers, to organize, examine, and interpret call-in data on a national basis, something that we cannot do now, because everybody uses different categories in their data collection.

Encourage dialogue between scientists, clinicians, and the public about disordered and underage gambling research. The disconnect between science and the people in the field, it is a common problem in all health related disciplines.

We have found that there are ways to bridge the gap without sacrificing quality or accessibility. For example, we -- Dr. Howard Shaeffer led several successful workshops for us in Las Vegas and Biloxi last year, and they had unusually diverse audiences, everything from academic researchers to counselors, to gaming industry personnel, and members of the public.

And I think he proved that this can be done. The science is very complicated, and very difficult, but with a gifted teacher it can be done.

And this success inspired us to hold the conference that we held last week at George Washington University, new directions in gambling addiction research.

Over 150 people from various backgrounds gathered for stimulating dialogue about cutting edge research being funded by the National Center for Responsible Gaming. And this

enthusiastic response has encouraged us to consider this as an annual event.

We hope that the Commission will encourage the replication of such efforts by all interested organizations, and challenge us to find creative ways to link science and the public through Web sites, publications, and public forums.

Thank you.

CHAIR JAMES: Thank you.