

**Testimony and Related Materials  
Prepared for the National Gambling  
Impact Study Commission**

**September, 1998**

**by Roger Svendsen,  
Minnesota Institute of Public Health  
Anoka, MN 55303**

## INTRODUCTION

I would like to begin my testimony this morning by reflecting back on a situation that occurred in my family about two and a half years ago.

It was early in February of 1996 when my 17 year-old son said, "Well, you won't be having to have a birthday party for me this year." I responded, "Why is that?" He answered, "I'll be going to the casino on my birthday." It was clear that my son was among a growing number of young people in Minnesota for whom going to a casino on one's 18th birthday is a new rite of passage.

I had several reactions to hearing my son's proclamation. Fear, apprehension and anxiety were all present. My first thought was, if I ignore it, he will forget about it. Then I thought I could tell him that he wouldn't have a good time, or how dumb it is to gamble his money away. I even thought that I could just forbid him to go. But none of these responses seemed realistic or helpful.

Even though large numbers of people in the United States regularly gamble, this type of situation is new for most parents. Most people have not done much thinking about gambling or taken the time to examine their beliefs about whether, when or how much to gamble. In years past, gambling was not as popular, visible or available as it is now. New forms of gambling such as state lotteries and casinos have arrived so rapidly that some people simply haven't had time to consider their choices. The result has been silence around the issue of gambling and silence is not helpful, especially in an environment that promotes gambling through TV, radio, print, and billboard advertising.

So I chose to have a serious discussion with my son. I told him of my concern over his winning as well as his losing. I told him that many compulsive gamblers experienced an early "big win." We talked about the "characteristics of low-risk gambling". We talked about the odds of winning and about gambling as recreation rather than a solution to financial concerns. Most of all, we began the process of helping him develop a personal set of guidelines to decide whether, when and how much to gamble.

Although he didn't go to the casino on his birthday, he did go shortly thereafter. And while I can't guarantee that he'll never experience a problem, he is at least aware of the risks associated with gambling, has discussed guidelines for low-risk gambling, and knows that help is available for people with problems.

I don't think I'm alone in my concern for preventing gambling problems among young people or people of any age. There is not much empirical evidence about the most effective ways to prevent gambling problems. However, there is a growing awareness of the best ways to reduce the risks of other problem behavior. Much of what we have learned from efforts to prevent alcohol, tobacco and other drug use problems can be useful in our efforts to prevent problems caused by gambling.

This is an especially important challenge as gambling opportunities grow in our country. In the short amount of time that I have today, I would like to briefly discuss the following:

- A Continuum of Gambling Behavior
- Gambling as Recreation with Risk,
- The Need for Setting Personal Guidelines for decisions about Whether, When and How Much to Gamble, and
- A Comprehensive Planning Model for Gambling Problems.

In addition, I would like to leave you with the following:

- A Sample of Prevention Activities in Minnesota and
- Special Populations Information.

## GAMBLING: RECREATION WITH RISK

Gambling has rapidly become an acceptable and regular form of recreation throughout the United States. Each of us has choices to make about the many forms of gambling available. Some people choose not to gamble in any form for a variety of reasons. Some are morally opposed to gambling, some think it's simply foolish, and others may have a family history of gambling problems, chemical dependency or some other addiction and they just do not want to take the risk. For many people, gambling is a social or recreational activity, something that is fun and different to do. And for others, gambling becomes uncontrollable and is no longer a choice. Pathological gambling is destructive to families, friendships and careers.

Gambling joins boating, walking, fishing, exercising, reading, traveling and attending movies, plays, concerts and sporting events as favorite recreational activities of people throughout the United States. Many of these activities involve some level of risk. Safe boating requires use of a life jacket. Safe traveling requires use of seat belts. Even reading for pleasure requires a well-lighted environment to reduce eye strain. People who choose to gamble also need to anticipate risks and take action to reduce or eliminate the risks as much as possible.

Recreational gambling requires an understanding of the characteristics of low-risk gambling, as well as the signs of a gambling problem. It also requires that each person develop a set of personal guidelines for choices about whether, when, and how much to gamble. These guidelines can provide direction for teaching appropriate behavior to others and also serve as the basis for intervening when someone's gambling behavior is risky, unhealthy or inappropriate.

## GAMBLING BEHAVIOR CONTINUUM

BEHAVIOR	<i>Rare/Non</i>	<i>Casual Social</i>	<i>Heavy Social</i>	<i>Problem</i>	<i>Pathological/Compulsive</i>
GOALS	Support the decision not to gamble as healthy and positive	Establish and support guidelines for low-risk gambling	Prevent low-risk behaviors from becoming high-risk	Reduce current high-risk behaviors	Provide treatment and aftercare services to eliminate problem behavior

## CHARACTERISTICS OF LOW-RISK GAMBLING

Decisions about gambling need to be made with the following characteristics of low-risk gambling in mind.

- Low-risk gamblers know that over time nearly everyone loses. The recreational benefits of gambling are found in the excitement of taking a chance, the thrill of winning and the fun of being with friends while gambling. Rarely is financial gain one of the benefits.
- Low-risk gambling is done socially, with family, friends or colleagues, not alone. It is often combined with other forms of entertainment.
- Low-risk gambling is done for limited amounts of time, both in frequency and duration. While no one can accurately predict when problems will develop, we do know that as one gambles more frequently and for longer periods of time, the risk increases.
- Low-risk gambling always has predetermined, acceptable limits for losses. Any money spent on gambling needs to be considered entertainment. Given the wide range of income and expenses for people, an acceptable amount for a gambling loss could range from zero dollars a year to several thousand dollars a year.

## SETTING PERSONAL GUIDELINES

Even though large numbers of people in Minnesota and throughout the United States regularly gamble, there are few generally accepted guidelines for participation. Making choices about gambling based on the suggestions that follow is likely to reduce the risk of developing a gambling problem.

1. *The decision to gamble is a personal choice.*

No one should feel pressured to gamble. Many people will choose to gamble socially, for a limited period of time and with predetermined limits for losses. Others will simply have no desire to gamble. Some people with a family history of gambling problems or other addictions may choose not to risk gambling at all. The bottom line is that no one should feel that she/he has to gamble to be accepted.

2. *Gambling is not essential for having a good time.*

The real value of social activities is being with friends and taking time out from the pressures of daily living. Gambling should not be seen as necessary for having fun and being with friends. Gambling can be an enjoyable complement to other activities, but shouldn't be seen as the only method of socializing.

3. *What constitutes an acceptable loss needs to be established before starting to gamble.*

People need to expect that they will lose more often than they will win. The odds are always against winning. Any money spent on gambling needs to be considered the cost of entertainment. Money that is needed for basics such as food, clothing, shelter, education or child care should not be used for gambling. People should only gamble money they can afford to lose and avoid betting where the level is out of their range. For those who choose to gamble, it is essential to know when to stop.

4. *Borrowing money to gamble should be avoided and discouraged.*

Borrowing money from a friend or relative, writing bad checks, pawning personal possessions, taking out loans, or borrowing from any other source of funds with the intention of repaying with gambling winnings is always high-risk and inappropriate.

5. *There are times when people should not gamble.*

- When under the legal gambling age.
- When the gambling interferes with one's work or family responsibilities.
- When in recovery from compulsive/pathological gambling.
- When in the early stages of recovery from other addictions such as chemical dependency.
- When the form of gambling is illegal.
- When the gambling is prohibited by an organizational or employer policy.
- When trying to make up for a gambling loss or series of losses (chasing).

6. *There are certain high risk situations during which gambling should be avoided.*

- When feeling lonely, angry, depressed or under stress.
- When coping with the death or loss of a loved one.
- When trying to solve any personal or family problems.
- When trying to impress others.

7. *Use of alcohol or other drugs when gambling is risky.*

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.

The choices people make about gambling sends clear messages to others. A person can be a positive role model for young people and friends if one chooses not to gamble or if one chooses to gamble in a low risk, legal and appropriate manner.

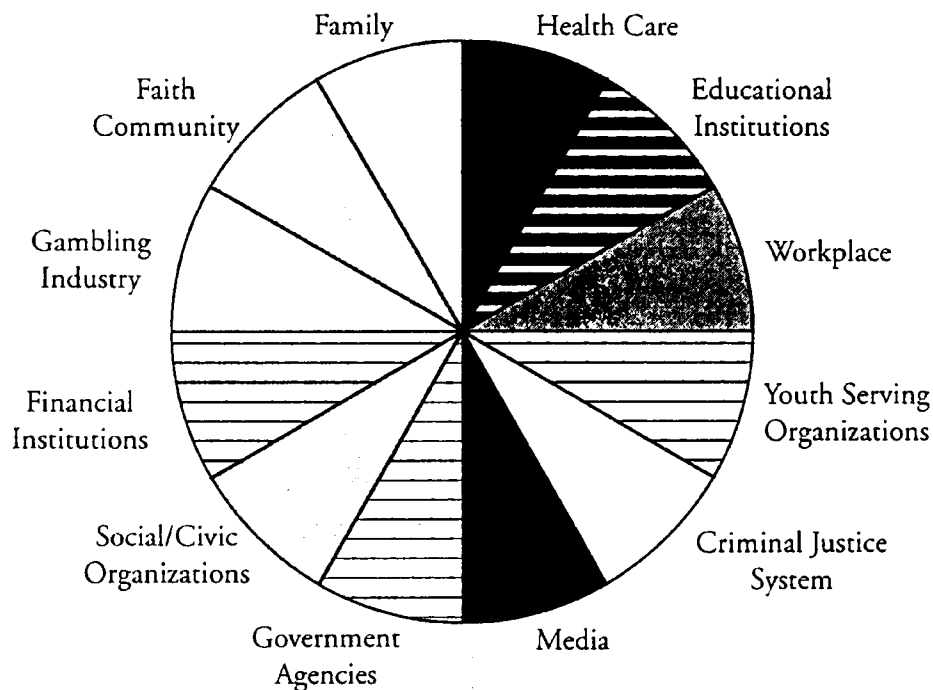
## OVERVIEW OF A COMPREHENSIVE PLANNING MODEL FOR GAMBLING PROBLEMS

There are few industries in the United States that have seen more growth over the past several years than gambling. As the opportunities to gamble have continued to increase, so has the number of people who develop gambling problems. As both opportunities to gamble and the incidence and prevalence of gambling problems increase, it is important that efforts be initiated to develop a comprehensive plan or model that will:

1. Provide assistance to people troubled by gambling problems;
2. Develop a framework for providing public awareness, education and prevention programs;
3. Utilize resources that already exist within the community; and
4. Enlist the support and involvement of many sectors of the community.

### COMMUNITY ROLE

In many communities, efforts to reduce or prevent gambling problems have either been ignored, are just being initiated or have been left to law enforcement agencies. Yet current research from other areas such as alcohol and other drug problems, indicates that effective programs involve multiple groups within a community. The circle below identifies a number of these groups. Each group has a unique and important role to play.



These community groups are rarely found in equal pieces working together as illustrated in the circle. Many communities have some sectors missing, some play larger roles than others, and often they are scattered all over. As planning begins, it is important to identify all the potential groups within a community and begin the process of all working together toward a shared goal.

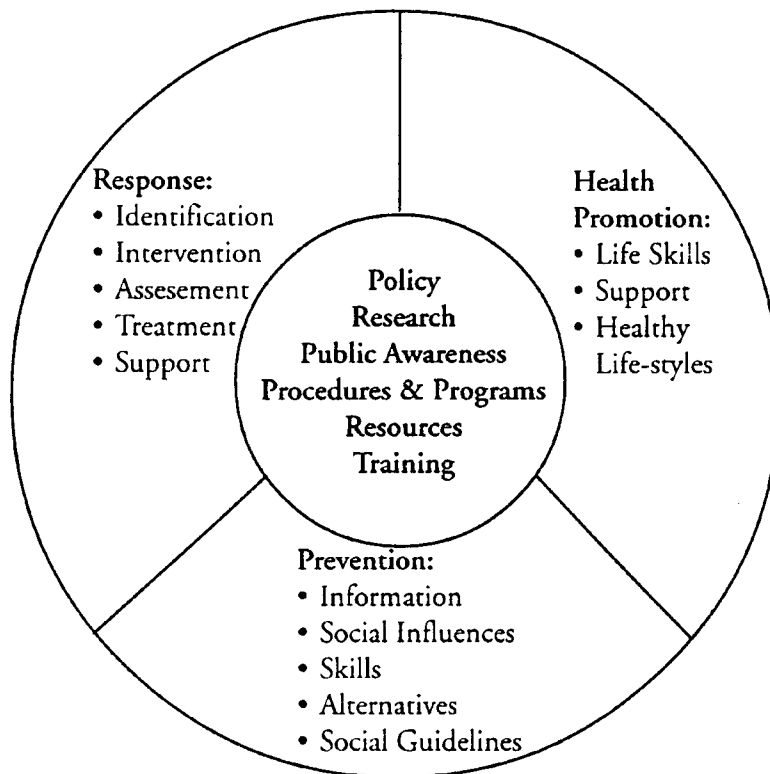
It is also important to be aware of the range of gambling behavior in any community. The Gambling Behavior Continuum below identifies five populations within any community that are all different and require a specific prevention message or type of problem intervention:

### GAMBLING BEHAVIOR CONTINUUM

BEHAVIOR	<i>Rare/Non</i>	<i>Casual Social</i>	<i>Heavy Social</i>	<i>Problem</i>	<i>Pathological/ Compulsive</i>
GOALS	Support the decision not to gamble as healthy and positive	Establish and support guidelines for low-risk gambling	Prevent low-risk behaviors from becoming high-risk	Reduce current high-risk behaviors	Provide treatment and aftercare services to eliminate problem behavior

### PLANNING MODEL

The planning model presented below is a comprehensive approach to gambling problems. The model includes three major components: **responding** to identified problems, **preventing** future problems, and **promoting** positive and healthy behavior. Each component is related to the other and of equal importance. The figure below represents these components.



As illustrated in the planning model, reaching the goals identified earlier requires that a comprehensive effort be based on **policy and research information**, with specific **procedures and programs** to implement policy. Each part of the circle will require its own level of **public awareness**. The plan must also identify **resources** to assist in its implementation and provide **training** to all involved persons so they understand their roles.

### Response

Response focuses on providing assistance to problem gamblers, their families, and other people affected by their gambling. The goals of response are to:

- *Reduce* current high-risk behaviors;
- *Provide* treatment and aftercare services to eliminate problem behaviors;

The primary role for a community in the area of response is to develop a system to:

- *Identify* those individuals who are in need of assistance;
- *Intervene* in a positive and helpful way;
- *Assess* the level of gambling problems;
- *Match* the needs of the individual with appropriate community resources, and
- *Support* the individual and family throughout the process of recovery.

People within the community can take several steps toward fulfilling these roles:

- *Observe and identify* specific behaviors that are causing physical, spiritual, family, emotional, work, legal, financial, or social problems that result directly from a person's gambling;
- *Document* those specific behaviors;
- *Share concern* with the person in a caring way;
- *Refer* the person for assistance when appropriate; and
- *Provide ongoing support* for the individual and their family as he or she works to change problem behavior.

While some community professionals are trained to provide problem gambling assessments, counseling, treatment or other therapy, most rely on specialized resources for these services. Each part of the community circle that includes professionals should develop procedures for staff to follow when responding to specific gambling problems and for supporting the gambler and his/her family both during and after treatment. Clear procedures will insure that people with gambling problems receive systematic and professional assistance.

## PREVENTION

As the word suggests, prevention focuses on specific gambling problems and is directed toward those who currently do not have a gambling problem. The goals of prevention are to:

- *Support those who choose not to gamble*;
- *Prevent low risk patterns* of gambling from becoming high-risk; and
- *Reduce current high-risk patterns* of gambling.

There are several categories of prevention efforts that are essential to the goals of prevention. These include strategies to:

- *Provide important information that people need to make choices about whether or not to gamble.* While information alone is not likely to prevent problems, it is an important part of a comprehensive prevention effort. People of all ages need accurate information about the potential for developing a gambling problem. They also need to be exposed to individuals who choose not to gamble as well as those who model low-risk, legal and appropriate choices about gambling.



- *Assist people to identify and counteract social influences* that encourage excessive or high risk gambling. People of all ages can be helped to recognize the persuasive power of advertising, as well as the influence of friends, family, or co-workers.
- *Provide people with instruction and practice in personal and social skills to resist pressures to gamble in a high risk manner.*
- *Encourage and support a variety of alternative activities and situations that do not involve gambling.*
- *Assist people to establish guidelines for low-risk, legal, and appropriate gambling.* Communities can provide opportunities for people of all ages within families, social institutions, religious organizations, and other community groups to discuss and develop guidelines for low-risk gambling. Communities can also provide support for those individuals who choose not to gamble as well as those whose lives have been affected by gambling problems.

## HEALTH PROMOTION

As with prevention, health promotion is directed toward those who do not have a gambling problem. It recognizes the need to go beyond just focusing on specific problem behaviors and what not to do and begins to promote behavior that is positive and healthy. The goals of health promotion are to:

- *Support* those who choose not to gamble.
- *Encourage* the healthy development of individuals.

The following efforts are recommended for effective health promotion:

- *Initiate activities that develop life skills* that will promote a positive, balanced, healthy life-style.
- *Develop programs that encourage development* of personal, social, and spiritual support systems.
- *Carry out strategies that promote healthy life styles* including good nutrition, stress management, and lifelong exercise and activity.

The three components of the model form a solid foundation for planning an effective community program. Each component is important and can improve the health of individuals within the community. Despite the relevance and importance of each component to the well-being of the community, many communities develop these components separately and in a predictable sequence. A system of response to gambling problems precedes efforts to prevent specific gambling problems. General health promotion strategies and programs often follow implementation of specific prevention efforts. Clearly, each component can be understood as part of a more encompassing conceptual model of health promotion. Yet, practically all communities work on each component separately. A challenge of government officials and professionals in developing comprehensive community-based program efforts is to encourage a blending of these program components in both theory and practice.