

Comments To The Surgeon General of the United States Regarding the Report on Substance Abuse, Addictions and Health

National Council on Problem Gambling
January 20, 2016

The National Council on Problem Gambling (NCPG) is pleased to provide comments to the Surgeon General on the upcoming Report on Substance Abuse, Addictions and Health. NCPG's vision is to improve health and wellness by reducing the personal, social and economic costs of problem gambling. Our purpose is to serve as the national advocate for programs and services to assist problem gamblers and their families. Our mission is to lead state and national stakeholders in the development of comprehensive policy and programs for all those affected by problem gambling.

Gambling addiction is a significant public health concern characterized by increasing preoccupation with gambling, a need to bet more money more frequently, restlessness or irritability when attempting to stop, "chasing" losses, and loss of control manifested by continuation of the gambling behavior in spite of mounting, serious, negative consequences. The American Psychiatric Association defines gambling disorder as: "Persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress" that meets at least four of nine criteria.¹

The past-year prevalence rate of problem gambling in adults in the US is 2.2%.² In addition to those presenting with the disorder, millions of individuals representing spouses, children, parents, family members, employers, neighbors and the general community are negatively impacted by this disorder.

The new DSM 5 Substance-Related and Addictive Disorders category includes gambling addiction, "reflecting evidence that gambling behaviors activate reward systems similar to those activated by drugs of abuse and produce some behavioral symptoms that appear comparable to those produced by the substance abuse disorders." It is likely that the prevention of gambling addiction will reduce costs and consequences of other disorders, as "at a minimum, the rate of problem gambling among people with substance use disorders is four to five times that found in the general population."³

Several of the high risk populations identified in the current SAMHSA Strategic Plan have been found to be at higher risk for gambling problems. Adolescents are one such group, as 2.1% of youth are classified as past-year problem

¹ American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. Washington, DC: American Psychiatric Association (2013).

² Williams, R. and Volberg, R. Population Prevalence of Problem Gambling, Ontario Problem Gambling Research Center (2012).

³ Problem Gambling Toolkit for Substance Abuse Professionals. SAMHSA (2009).

gamblers, and another 6.5% meet two to four criteria for pathological gambling and are therefore considered at-risk for a gambling problem.⁴ Adolescents with gambling problems are twice as likely to binge drink and to use illegal drugs. In addition, student behavior surveys have consistently shown that gambling participation is correlated to elevations in all known risk factors, and decreases in all known protective factors, for youth as they relate to substance use and anti-social behaviors.⁵

Other high-risk groups include males (prevalence of problem gambling in men has been found to be 2 to 3 times higher than in women) and racial/ethnic minorities; individuals with a family history of gambling (elevated rates of problem and pathological gambling have been found in twins of males with gambling problems); veterans and individuals with disabilities.⁶

Gambling addiction is an emerging public health priority given the unprecedented amount of existing and expanding gambling. Legalized gambling is now available in 48 states and 80% of adults gambled at least once in the year; 15% at least weekly. The estimated six million adult problem gamblers are five times more likely to have co-occurring alcohol dependence, four times more likely to abuse drugs, three times more likely to be depressed.⁷

As problem gambling is integrated into health systems, treatment for gambling problems will reduce social costs generated by untreated problem and pathological gamblers and may provide cost savings for states through improved recovery rates and decreased demand on traditional public sector substance abuse and mental health systems. Individuals with gambling problems report committing crimes to finance their gambling at extremely high rates, and studies of arrestees find rates of gambling problems 3 to 5 times higher than the general population.⁸ Undetected and untreated gambling problems may exacerbate relapse and recidivism. By providing recovery and therapeutic approaches that are appropriate for problem gamblers and their families, it is hypothesized that recovery rates will increase for a wide variety of health and substance abuse disorders.

Comments Submitted by:
Keith Whyte, Executive Director
730 11th St, NW, Suite 601
Washington, DC 20001
202-547-9204
keithw@ncpgambling.org

⁴ Welte, J, Barnes, G, et al. The Prevalence of Problem Gambling Among US Adolescents and Young Adults: Results from a National Survey. *J Gambl Stud* (2008) 24:119-133.

⁵ 2008 Youth Survey, Arizona Criminal Justice Commission (2008).

⁶ Advancing Health Through System Reform-Problem Gambling. NCPG (2009).

⁷ Advancing Health Through System Reform-Problem Gambling. NCPG (2009).

⁸ Gambling and Crime Among Arrestees: Exploring The Link. National Institute of Justice (2014)