

Strategies for Starting the Conversation: Developing and Implementing a Problem Gambling SBIRT

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ACKNOWLEDGEMENTS

- **University of MD Study funded by National Center on Responsible Gambling**
- **MD TEAM**
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Objectives

Understand the SBIRT model

Understand the rationale for a gambling SBIRT

including relevant research and clinical findings

Understand and be able to implement effective
strategies for administering a problem gambling SBIRT

Why screen for gambling problems

Individuals with substance use and mental health disorders are at higher risk for having a gambling problem

Rates of problem gambling among those in treatment for a substance use disorder range from 7 to 40% and even higher among those in medication assisted treatment (52.7%).

Gambling may become a sequential addiction for individuals recovering from a substance use disorder

Gambling can be a relapse risk factor even if it does not reach problematic levels itself

Why Screen for Gambling Problems

- Problem gambling has been found to be at least 2 to 4 times more prevalent among those with mental health disorders than in the general populations.
- Gambling and problem gambling may exacerbate psychiatric symptoms
- Per DSM5, 17% of those in treatment for GD have attempted suicide

Why Screen for Gambling Problems in SUD and MH Programs

- Gambling (even at moderate levels) may have an adverse impact on treatment outcome including increased likelihood of dropping out of treatment early, use of more expensive treatment options (inpatient psychiatry and inpatient detox), increased positive toxicology screens, more legal problems etc.

Why screen for gambling problems in Healthcare Settings

- 10 to 25% of individuals in general health care settings may be identified as at risk/problem gamblers and this group has increased rates of medical problems such as high blood pressure and other cardiovascular problems, gastrointestinal problems, obesity, sleep disturbance, chronic pain, accidents/injuries and greater use of emergency room services





Why screen for gambling problems in Healthcare Settings

- Those with gambling disorder report a range of poor health habits including more hours in sedentary activities such as watching TV, poor diet, more caffeine intake, poor dental care, postpone medical appointments due to financial concerns and poorer self-rated health.

Why screen for gambling problems among college students and young adults?

- Gambling participation increases through adolescence and peaks in young adulthood. 60-70% of young adults/college students have gambled in the past year.
- Among college students 5-14% meet criteria for problem gambling.
- Problem gambling significantly related to alcohol use, stimulant use and marijuana use.



Why screen for gambling problems among college students and young adults?

- College athletes may be at particular risk for gambling problems.
- In one study, twice as many students who had gambling problems considered or attempted suicide than those without gambling problems.

Why screen for gambling problems in situations of domestic violence (DV) or intimate partner violence (IPV)

- IPV 10 times as likely among emergency room admissions if partner has a gambling problem. (IPV was 6 times as likely if partner had a substance use problem and 50 times as likely if had both a gambling and substance use problem)
- Among those diagnosed with problem gambling in one study, over 50% reported either being victim of IPV or perpetrator.

Why screen for gambling problems in situations of domestic violence (DV) or intimate partner violence (IPV)

Rates were nearly equal for being either the victim or perpetrator of violence for those who had a gambling problem.

Children living in a home where gambling is a problem are 2 – 3 times more likely than their peers to experience parental abuse.



Barriers to Seeking Treatment

- In 2015, 10.8% of people aged 12 or older (23 million) who needed substance use disorder treatment received treatment at a specialty facility
- In 2016, one quarter of one percent (.25%) of people (14,375) who needed gambling disorder treatment received treatment at a publicly funded specialty facility.

Association of Problem Gambling Service Administrators, 2017



Barriers to Seeking Treatment

Low awareness of professional help services

Denial of problem severity

Cultural barriers and lack of multicultural, low-cost services

Shame, stigma, reduced self-esteem

Barriers to Seeking Treatment

- According to the National Comorbidity Survey Replication, of individuals with a lifetime history of pathological gambling, 49% received treatment for a mental health or substance use disorder, but **none, zero, not one** received any treatment for gambling problems.
- Ongoing education and promotion of help services required to increase awareness.
- Those who gamble may see gambling as a solution to problems rather than being a problem



What is SBIRT?

Screening

Application of a simple Test to determine if a Patient is at risk for or may have a gambling disorder

Brief Intervention

Explanation of screening results, information on responsible gambling, assessment of readiness to change, advice on change

Referral to Treatment

Patients with positive results on a screening may be referred to resources for further assessment and/or counseling or self-help resources

It is important to remember that a positive screen does not constitute a diagnosis, even if the screen suggests a high probability of problematic gambling behavior.

Goals for G/SBIRT

- ❖ Begin the conversation about the role, potential risks and impact of gambling on a person's health, recovery and overall well-being
- ❖ Create curiosity about the role of gambling
- ❖ Move from pre- pre- contemplation to contemplation
- ❖ Give clients permission to talk about gambling without fear of being given another label or problem

Rationale and Goals for G/SBIRT

- ❖ Begin to make connections between gambling behaviors and other major life areas or issues of concern
- ❖ Identify individuals who may have or are at high risk for developing gambling problems
- ❖ Assist individuals reduce or eliminate harmful gambling behaviors
- ❖ Enhance motivation for individuals for whom it is appropriate to accept information and/or referral to treatment services as indicated.

Chose a Screening Tool

Brief screens generally consist of 2-4 questions that typically only take less than a minute to answer. They are used to identify individuals who may have **possible** at risk or problem gambling. They are **not diagnostic**.

The 4 screens that will be presented have been found to work about equally well in identifying those at risk (Himmelhoch et al., 2015)

Lie/Bet

| | Yes | No |
|--|-----|----|
| Have you ever felt the need to bet more and more money? | | |
| Have you ever had to lie to people important to you about how much you gambled? | | |
| Scoring: A yes answer to one or both questions indicates the person is at risk for a gambling problem. Brief intervention and offer of referral for further assessment is indicated. | | |

Brief BioSocial Gambling Screen (BBGS)

| | Yes | No |
|---|-----|----|
| During the past 12 months, have you become restless, irritable, or anxious when trying to stop/cut down on gambling? | | |
| During the past 12 months, have you tried to keep your friends or family from knowing how much you gambled? | | |
| During the past 12 months, did you have such financial trouble as a result of your gambling that you had to get help with living expenses from family, friends or welfare? | | |
| Scoring: A yes answer one or more questions indicates the person is at risk for a gambling problem. Brief intervention and offer of referral for further assessment is indicated. | | |

NODS CLIP

| | Yes | No |
|--|-----|----|
| Have you ever tried to stop, cut down or control your gambling? | | |
| Have you ever lied to family members, friends or others about how much you gambling or how much money you lost on gambling? | | |
| Have there been period lasting 2 weeks or longer when you spent a lot of time think about your gambling experiences, or planning out future gambling ventures or bets? | | |
| Scoring: A yes answer one or more questions indicates the person is at risk for a gambling problem. Brief intervention and offer of referral for further assessment is indicated. | | |

NODS PERC

| | Yes | No |
|--|-----|----|
| Have there ever been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences or planning out future gambling ventures or bets? | | |
| Have you ever gambled as a way to escape from personal problems? | | |
| Has there ever been a period when, if you lost money gambling one day, you would return another day to get even? | | |
| Has your gambling ever caused serious or repeated problems in your relationships with any of your family members or friends? | | |
| Scoring: A yes answer one or more questions indicates the person is at risk for a gambling problem. Brief intervention and offer of referral for further assessment is indicated. | | |

Issues with Brief Screens

- They perform better in research studies than actual clinical practice
- They don't provide a definition of gambling
- They begin with diagnostic level questions used to define most severe levels of problem gambling
- Wording of items may seem harsh and stigmatizing (i.e. Do you lie?)
- How you ask may be as important as what you ask:
 - "You don't have a gambling problem do you?"

Solutions

- Add a brief definition of gambling with specific examples of common gambling activities

The following questions are about gambling. By gambling, we mean when you bet or risk money or something of value on an event whose outcome is uncertain. For example, buying lottery tickets or scratch-offs, gambling at a casino, playing bingo, shooting dice, betting on sports, or playing keno.

Solutions

- Add a gateway question
 - Have you gambled at least 5 times in the past year?
- OR
- How often do you....
 - Positive – once a month or more often

Putting Screening Together

Heinlein et al, 2021

The following questions are about gambling. By gambling, we mean when you **bet or risk money or something of value** on an event whose outcome is uncertain. For example, buying lottery tickets or scratch-offs, gambling at a casino, playing bingo, shooting dice, betting on sports, or playing keno.

Brief Biosocial Gambling Screen:

1. Have you ever gambled at least 5 times in the past 12 months?

Yes

No

If yes continue and ask following 3 questions. If no stop screening.

2. During the past 12 months, have you tried to hide how much you have gambled from your family or friends?

Yes

No

3. During the past 12 months, have you had to ask other people for money to help deal with financial problems that had been caused by gambling?

Yes

No

4. During the past 12 months, have you ever felt restless, on edge or irritable when trying to stop or cut down on

Yes

No

Screening Stepwise Feedback Instructions

Low Risk: An individual has answered “no” to all questions.

Provide individuals with their score, give feedback on their risk level and give literature regarding Gambling Disorder in case their behavior worsens or they have affected family/friends with whom they want to share.

Screening Stepwise Feedback Instructions

Moderate Risk: An individual has responded “yes” to question 1, but has said “no” to all other questions. Give the low risk intervention. Additionally, the clinician should discuss with the participant the continuum of gambling behaviors (e.g., recreational, at risk, problem, disordered), risk factors associated with moderate and problem gambling (e.g., medical issues) and guidelines to reduce risk for gambling problems.

Screening Stepwise Feedback Instructions

High Risk: An individual has responded, “yes” to question 1 *and* has said, “yes” to at least *one* other question.

Combine low and moderate risk intervention.

Additionally, review risk factors for problem gambling and options for further assistance including self-help materials, referral for further evaluation and referral to Gambler’s Anonymous or a recovery support specialist.

Brief Interventions

- Consist of a time-limited conversation (3-5 min.) between a person who is at risk for problem gambling and a provider
- Are motivation enhancing discussions focused on increasing awareness and insight about risks of gambling behaviors
- Are not intended to treat gambling disorder

Brief Interventions

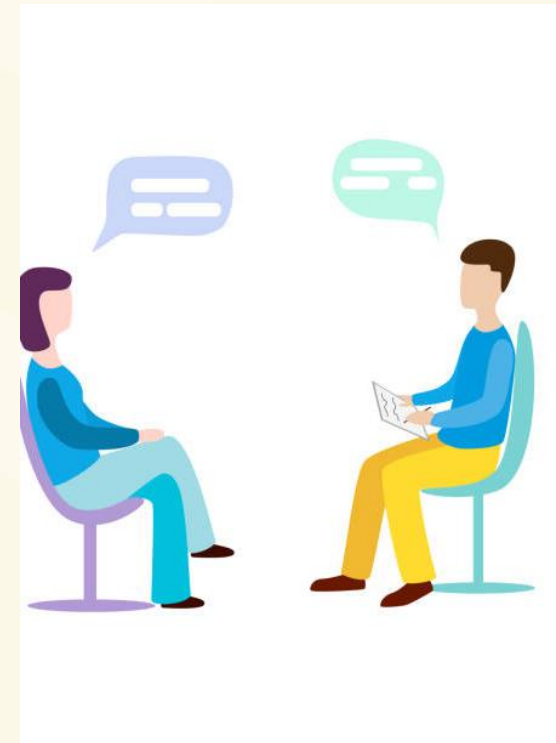
- Can be used to encourage/motivate those with more serious gambling problems to accept further assessment and treatment
- Designed to empower a patient to take action
- Provide an open forum for a patient to talk candidly about their gambling behavior without external judgment

Brief Interventions Using Motivational Interviewing

- Five General Principles of MI
 - Express Empathy
 - Develop Discrepancy
 - Avoid Argumentation
 - Roll with Resistance
 - Support Self-Efficacy

Raise the Subject and Provide Feedback

- The provider will raise the subject and provide feedback (ask open-ended questions and affirm) and continue to ask permission to take the next step
 - I appreciate your answering those gambling questions. I'd like to go over your answers and give you some feedback. How does that sound to you? Remember everything we discuss is confidential.



Raise the Subject and Provide Feedback

- Be sure to listen reflectively and let the patient give you as much information as they want.
 - I really appreciate your honesty, that says a great deal about your commitment to look at any factors that might be affecting your health and well-being. Let me be sure I understand ...(restate what patient has said)
- Validate and affirm. Also a good time to ask for any other concerns patient may have about their gambling.

MATERIALS WERE ITERATIVELY ADAPTED

- **Patients wanted materials that were:**
 - Easy to read
 - Relatable
 - Eye catching
- **Clinicians recommended:**
 - MI elements for those screening high risk

LOW RISK FOR GAMBLING

MAKE A
CHANGE TODAY!

S *Set*
L *Limits*
O *On*
T *Time &*
S *Spending*

Problem Gambling

You Could Be At Risk.

1-800-GAMBLER

24/7 Confidential Helpline
HelpMyGamblingProblem.org

MEDIUM RISK FOR GAMBLING

What is Gambling?

When you bet or risk money or something of value, to win money or something of value. This can include, but is not limited to, casino games, keno, slot machines, sports, horse racing, lottery tickets and even bingo.

Gambling can be fun. But for some, gambling can get out of control. Problem gambling can result in:

- Financial Problems
- Legal Problems
- Family Conflicts
- Stress
- Problems at Work
- Emotional Problems

Gambling AND YOUR Health

We Can Help

1-800-GAMBLER

24/7 Confidential Helpline
HelpMyGamblingProblem.org



Gambling AND YOUR Health



**Are You Suffering
from Problem Gambling?**

1-800-GAMBLER

Who's at
Risk?**Low Risk**

"I only buy tickets a few times a year when the jackpot is over \$500 million."

**Medium Risk**

"I go to the casino once a month. I can afford to spend \$100, sometimes a bit more. I look forward to casino night all month and get kind of mad when I miss it."

**High Risk**

"I bet on sports all the time. I love the way I can bet on almost every play. We have money problems and my wife gets upset about how much time and money on spend on sports."

**Consider**

your own gambling. Can you relate to any of these experiences in the past 12 months?

- ☐ I feel moody when I try to cut down or stop gambling.
- ☐ I tried to stop gambling and could not.
- ☐ I used gambling to escape bad feelings.
- ☐ I went back to gamble to win back money
- ☐ I lost the day before.
- ☐ I lost or risked losing a job, relationship or schooling option.
- ☐ I felt the need to spend more money than usual.
- ☐ I spent a lot of time thinking about gambling.
- ☐ I had money problems because of gambling.
- ☐ I needed others to give me money to help me pay my gambling debts.

*Did you say "yes" to any of the above?
You may be more at risk for a gambling problem than others*

**DON'T
Gamble
WITH
YOUR Health**

Gambling problems may lead to emotional problems, such as anxiety or depression and increase risk of relapse for those in recovery from a substance use disorder.

Did you know that adults with a gambling problem are 2-3 times more likely to develop a major depressive disorder?

Gambling problems may also worsen physical health problems, such as: high blood pressure, stomach problems, headaches, heart problems, sleep problems.

Don't gamble with your health and
**MAKE A CHANGE
TODAY**

MEDIUM RISK FOR GAMBLING


| <i>Who's at Risk?</i> | <i>Consider</i> | DON'T Gamble WITH YOUR Health |
|--|---|--|
| Low Risk "I only buy tickets a few times a year when the jackpot is over \$500 million." | <i>your own gambling. Can you relate to any of these experiences in the past 12 months?</i> | Gambling problems may lead to emotional problems, such as anxiety or depression. |
| Medium Risk "I go to the casino once a month. I can afford to spend \$100, sometimes a bit more. I look forward to casino night all month and get kind of mad when I miss it." | <ul style="list-style-type: none"><input type="checkbox"/> I feel moody when I try to cut down or stop gambling.<input type="checkbox"/> I tried to stop gambling and could not.<input type="checkbox"/> I used gambling to escape bad feelings.<input type="checkbox"/> I went back to gamble to win back money<input type="checkbox"/> I lost the day before.<input type="checkbox"/> I lost or risked losing a job, relationship or schooling option.<input type="checkbox"/> I felt the need to spend more money than usual.<input type="checkbox"/> I spent a lot of time thinking about gambling.<input type="checkbox"/> I had money problems because of gambling.<input type="checkbox"/> I needed others to give me money to help me pay my gambling debts. | <hr/> <i>Did you know that adults with a gambling problem are 2-3 times more likely to develop a major depressive disorder?</i> <hr/> |
| High Risk "I buy lottery tickets every time I get gas or stop by the corner store. I spend at least \$50 a week on tickets. We have money problems and my wife gets upset about the number of tickets I buy, so I hide them from her." | <i>Did you say "yes" to any of the above? You may be more at risk for a gambling problem than others.</i> | Gambling problems may also worsen physical health problems, such as: high blood pressure, stomach problems, headaches, heart problems, sleep problems. |
| | | Don't gamble with your health and MAKE A CHANGE to your gambling habits TODAY! |

| | | | | | | | | | | | |
|------------------|--|---|---|---|---|---|---|---|---|----|---------------------------------------|
| NOT MOTIVATED | On a scale of 1-10, how ready are you to make a change to your gambling habits? | | | | | | | | | | READY TO MAKE A CHANGE TODAY |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

Readiness to
Change
(Enhance
Motivation)

- Readiness to change
 - On a scale from 1 to 10, with 1 being not at all ready and 10 being very ready, how ready are you to change any aspect of your gambling behavior?
 - This is a visual strategy that helps a patient identify what motivation already exists toward making a change.
 - Helps elicit Change Talk

HIGH RISK FOR GAMBLING



Understanding Your Gambling

Should you think about changing your gambling habits?

Gambling can be fun. But for some, gambling can get out of control. Problem gambling can result in financial problems, legal problems, family conflicts, problems at work and stress. Gambling may also lead to emotional problems, such as anxiety or depression.

DID YOU KNOW?

Adults with a gambling problem are 2-3 times more likely to develop a major depressive disorder.

Gambling problems may also worsen physical health problems, such as: high blood pressure, stomach problems, headaches, heart problems, sleep problems.

NOT MOTIVATED

On a scale of 1-10, how ready are you to make a change to your gambling habits?

1 2 3 4 5 6 7 8 9 10

READY TO MAKE A CHANGE TODAY

If you are ready to **CHANGE** your gambling **HABITS** complete the back of the worksheet to make a plan.

HIGH RISK FOR GAMBLING

Negotiate a plan and follow-up

Gambling Change Plan

I would like to
CHANGE
my gambling
HABITS
in the following ways:

Gamble Only Days Per Week/Month

Gamble Only Dollars Per Week/Month

| | | |
|--|------------------------------|-----------------------------|
| I would like to call the help line to talk to someone about my gambling. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I would like to talk to a counselor to help me change my gambling. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I would like a referral to a counselor trained to understand problem gambling. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| I would like to attend a Gambler's Anonymous meeting. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Others who can help me change my gambling are:

family members | friends | spiritual advisors | others

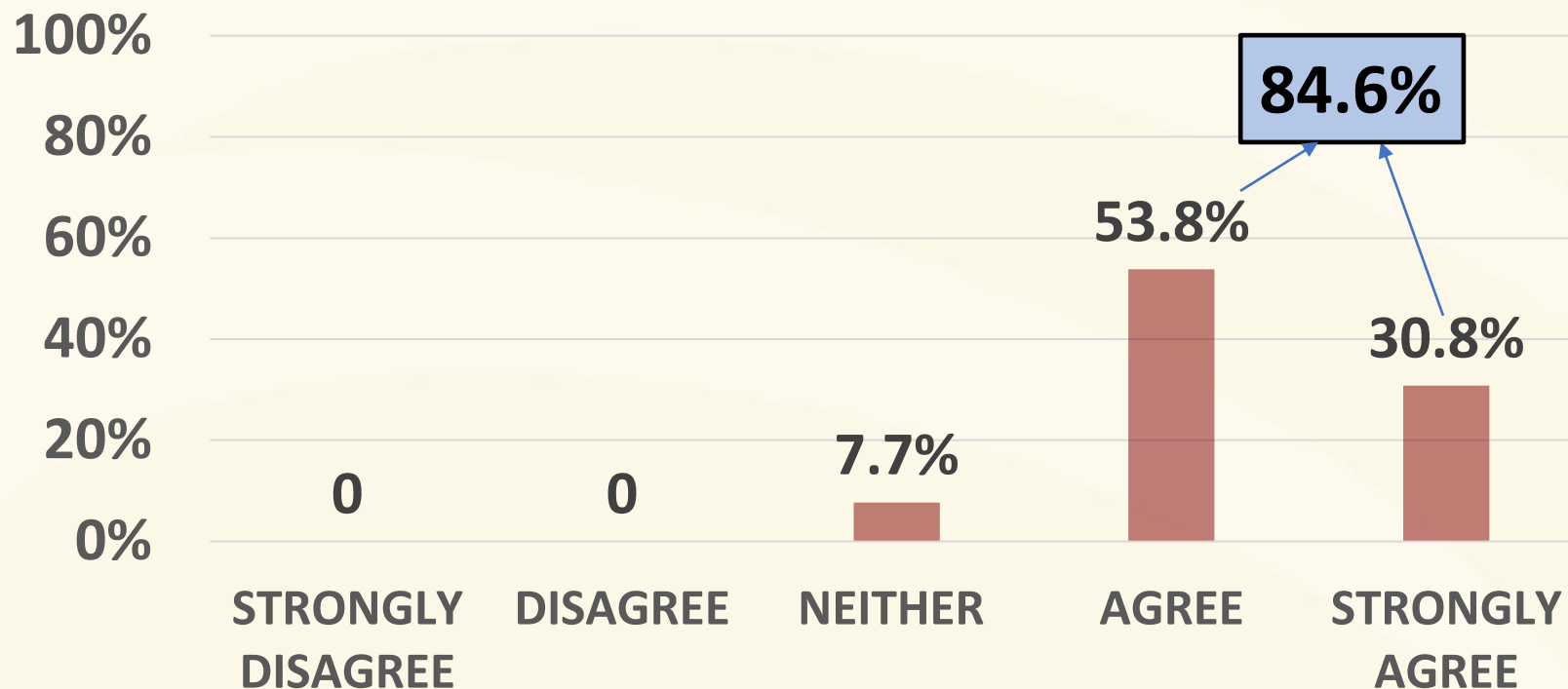
My follow-up plan is:

1 _____
2 _____
3 _____

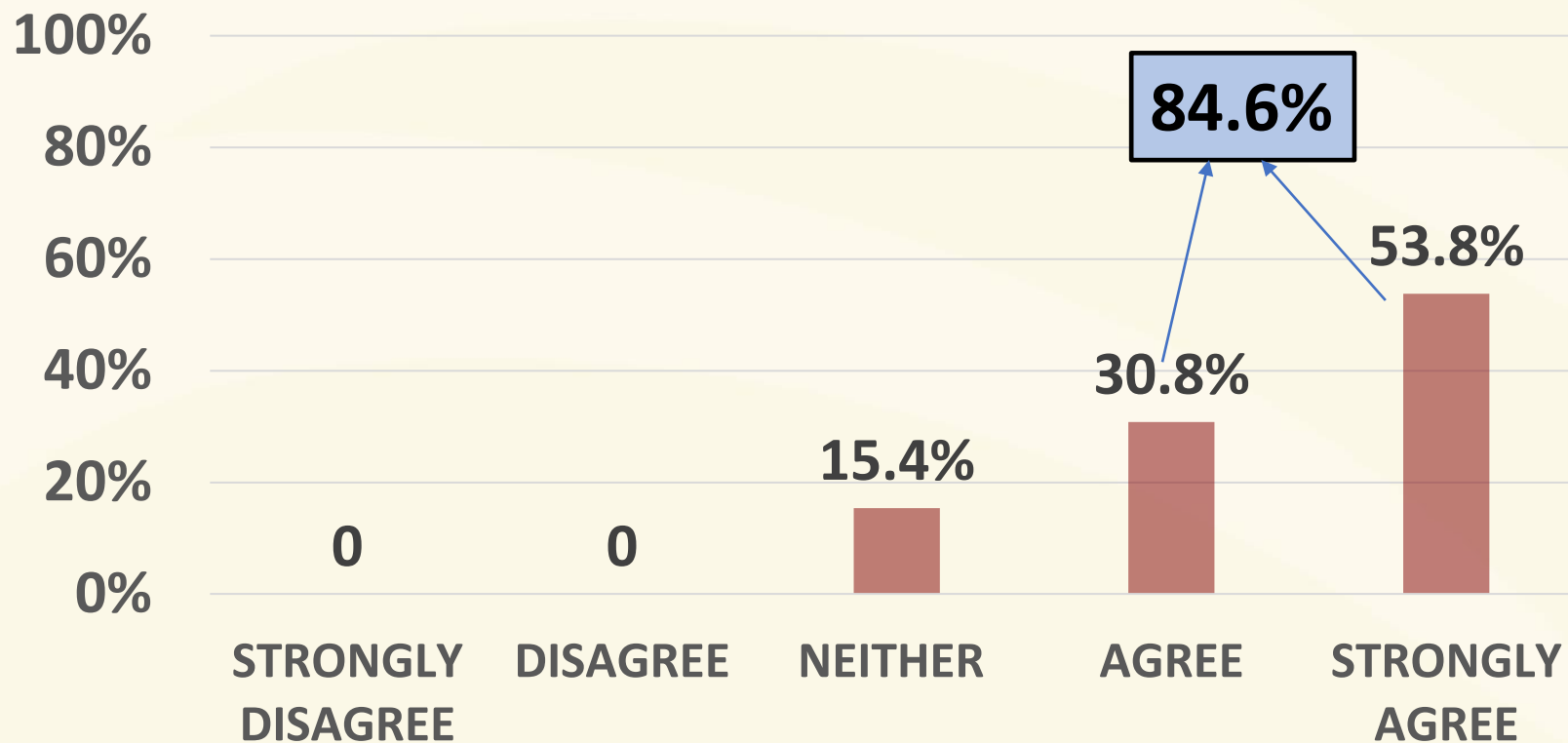
If you would like additional help, please call:

1-800-GAMBLER or visit www.helpmygamblingproblem.com

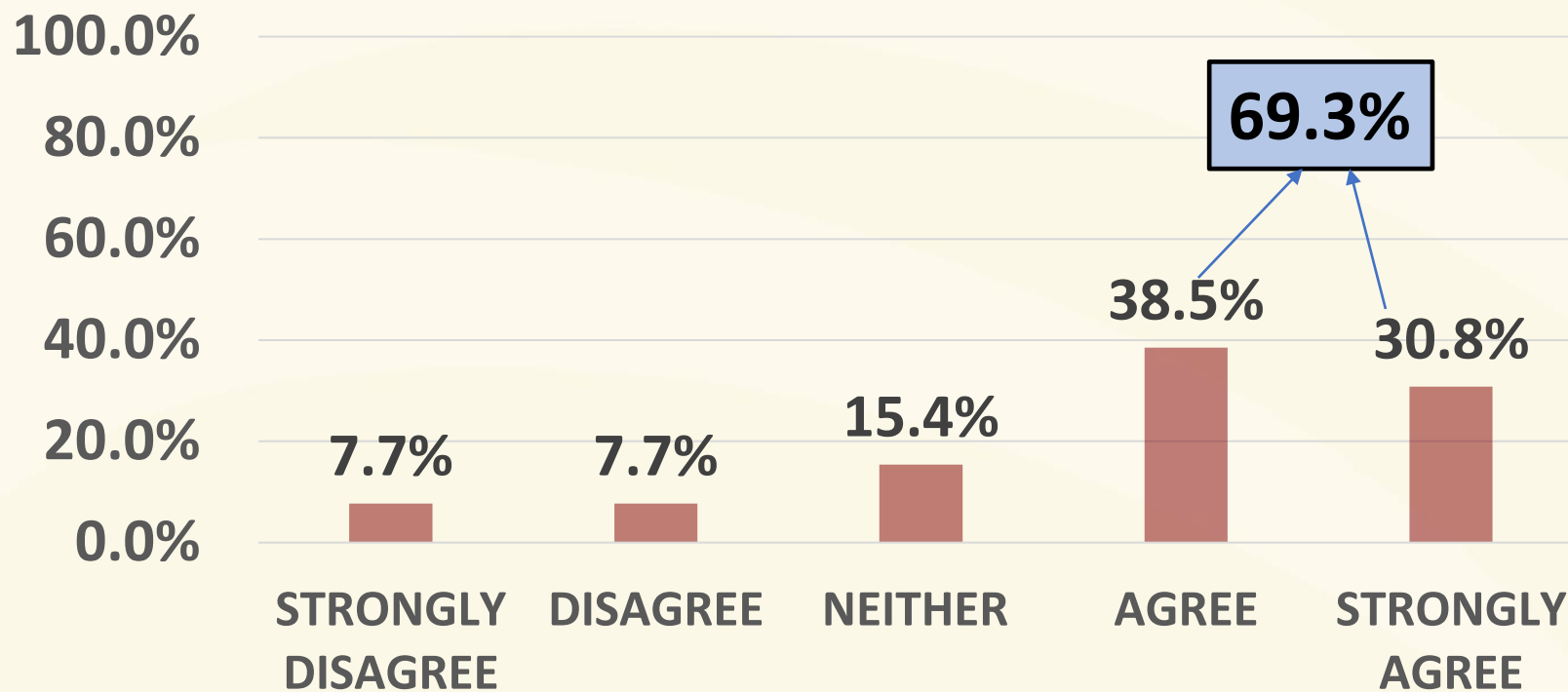
BETTER UNDERSTAND GAMBLING BEHAVIOR AFTER THE INTERVENTION?



IT WAS HELPFUL FOR ME TO LEARN ABOUT MY GAMBLING BEHAVIORS?



BETTER UNDERSTAND MY GAMBLING BEHAVIORS AFTER SBIRT INTERVENTION?





Tips for Successful Motivational Interviewing

- Have a non-judgmental attitude
- Be aware of your own pre-conceptions about gambling and gambling disorder
- Ask Permission
- Validate client honesty, willingness to discuss/answer questions, to think about this topic, awareness, etc
- Avoid using labels
- Assure your client that you are asking because you are concerned about their health/recovery/well-being
- Assure confidentiality
- Look for any indication of discomfort; acknowledge the discomfort (i.e. "You seemed to get annoyed about those questions.")
- Be compassionately persistent

Planning for G/SBIRT

- ✓ Involve all levels of staff in developing protocols, policies and procedures about how to best incorporate G/SBIRT into your agency/organization and how it can best fit into existing practices. The planning phase should be given sufficient time to elicit support and cooperation of staff at all levels.

Planning for G/SBIRT

- ✓ It can be most helpful to do a training of all staff at beginning of planning phase to increase organizational awareness of problem gambling and its connection to issue the agency is more familiar with.
- ✓ Initial and ongoing training/support to those involved in the entire G/SBIRT process is also critical to the success of this project.

Planning for G/SBIRT

- ✓ **Decide who will be screened.** Will screening be universal? Will a subset of clients be screened and how will they be identified?
- ✓ **When will screening be conducted?** At intake, at admission, during assessment or orientation (in college settings)? How often will screenings be conducted? Once? Every appointment? During treatment plan updates or progress evaluations?
- ✓ **Specify the roles** of staff and define the work flow. Who will implement the G/SBIRT? Who conducts initial screening? Who provides brief interventions or further assessment?

Planning for G/SBIRT

- ✓ **What screening instruments** will be used?
- ✓ **What intervention** or informational material will be used?
- ✓ **How are results of screening and intervention documented.**
Create simple and easy forms for documentation and evaluation purposes.
- ✓ **Follow-up** should include updated screening scores, outcomes of interventions and any treatment or referral utilization.
- ✓ **Create a resource/referral list** in your community.
- ✓ **Decide how project will be evaluated**

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Thanks and
Questions

