

Gambling and Comorbid Process Addictions - Part I

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Summary and Objectives

Participants will be able to identify different process addictions and how they interact to make recovery more complicated when they occur concurrently. Therapists will be able to better support clients who are trying to develop goals and priorities.

Participants will be able to:

- 1) Identify 5 questions and 5 categories that can help a person identify problematic behavior.
- 2) Identify an idiosyncrasy for at least three different types of process addictions.
- 3) Identify at least three differences between healthy sexuality (sexual positivity) and toxic sexual behaviors (sex addiction).
- 4) Describe the difference between Avoidant/Restrictive Food Intake Disorder and Anorexia Nervosa
- 5) Identify the six components of the addiction cycle.
- 6) Describe how co-addictions can be fused and describe three different stages of that process.

How to know if something is problematic

Ask five simple questions:

1. Are you keeping your promises?
2. Are you OK with what you're doing?
3. Are you in control of your behavior?
4. Is everything OK?
5. Are you protecting others?

Five categories in the assessment:

1. commitment violations
2. values conflict
3. diminished self-control
4. negative consequences
5. lack of social responsibility

Herring, B. (2017). A framework for categorizing chronically problematic sexual behavior. *Sexual Addiction & Compulsivity*, 24(4), 242–247.

What are process addictions? Examples?



OCD vs. Addiction

OCD

- Obsessions
- Unwanted thoughts and images
- Avoidance of triggers
- Compulsions
- Rituals to control obsessive thoughts

ADDICTION

- Intense urges for the substance or behavior
- Using more to get the same effect
- Inability to stop despite negative consequences
- Withdrawal symptoms
- Chronic
- Remission

What is addiction?

According to American Society of Addiction Medicine (ASAM):

Addiction is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment, and an individual's life experiences. People with addiction **use substances or engage in behaviors that become compulsive and often continue despite harmful consequences**. Prevention efforts and treatment approaches for addiction are generally as successful as those for other chronic diseases

[https://www.asam.org/docs/default-source/quality-science/asam's-2019-definition-of-addiction-\(1\).pdf?sfvrsn=b8b64fc2_2](https://www.asam.org/docs/default-source/quality-science/asam's-2019-definition-of-addiction-(1).pdf?sfvrsn=b8b64fc2_2)

Addiction is characterized by **inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems** with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves **cycles of relapse and remission**. Without treatment or engagement in recovery activities, addiction is **progressive** and can result in disability or premature death.

https://www.asam.org/docs/default-source/public-policy-statements/1definition_of_addiction_long_4-11.pdf?sfvrsn=a8f64512_4

Gambling Disorder (DSM-5)

- A. Persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting **four (or more)** of the following in a 12-month period:
- Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
 - Is restless or irritable when attempting to cut down or stop gambling.
 - Has made repeated unsuccessful efforts to control, cut back, or stop gambling.
 - Is often preoccupied with gambling (e.g., having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble).
 - Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed).
 - After losing money gambling, often returns another day to get even (“chasing” one’s losses).
 - Lies to conceal the extent of involvement with gambling.
 - Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling.
 - Relies on others to provide money to relieve desperate financial situations caused by gambling.

Clinical Practice (screening)

- 1) Normalize gambling. “The majority of Americans have gambled at some point in their lives. If you’ve done it, how do you like to do it?”
- 2) “When you lose, do you ever try to win back the money you lost?” (Chasing & perhaps a loss of control)
- 3) “That must be tough to talk about with your wife/husband/partner.” (Their response will suggest if they are hiding their behavior.)

(suggested by Dr. James Walsh)

What are the characteristics of a Sex or Love Addict?



a.k.a. – problematic sexual behavior, sex addiction, love addiction, compulsive sexual behavior, etc. – no formal name other than ICD-11's **Compulsive Sexual Behaviour Disorder**



Sex Addiction

Behavior that is focused on sex rather than a person or relationships

- Porn
- Masturbation
- Hook ups
- Prostitution
- Cyber sex / phone sex

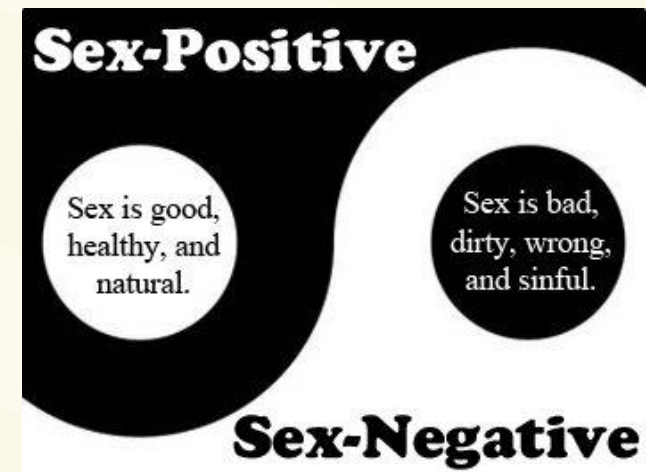
Love & Relationship Addiction

- Attraction/desire for someone to the detriment of one's self
- Setting aside one's own needs and wants to the needs and wants of the other person
- Unhealthy dependence
- **Love addiction** = 1 person
- **Relationship addiction** = often goes from 1 relationship to another



What's the difference between sex positive and sex addiction?

Sex-positivity is "an attitude towards human sexuality that regards all consensual sexual activities as fundamentally healthy and pleasurable, encouraging sexual pleasure and experimentation."^[1] Generally, there is no moral distinctions among types of sexual activities, which is a reflection of someone's personal preference. ^[2]



1. Gabosch, A. (2014, December 8). *A Sex Positive Renaissance*. <https://allenagabosch.wordpress.com/2014/12/08/a-sex-positive-renaissance/>

2. Ivanski, Chantelle; Kohut, Taylor (2017). "[Exploring definitions of sex positivity through thematic analysis](#)". *The Canadian Journal of Human Sexuality*, 26(2), 216-225. doi:10.3122/j.ctt1182217.62612. PMID: 148225212

Sexually Positive

The Right to Party
(Beastie Boys)



Sex Addiction

Alcoholism



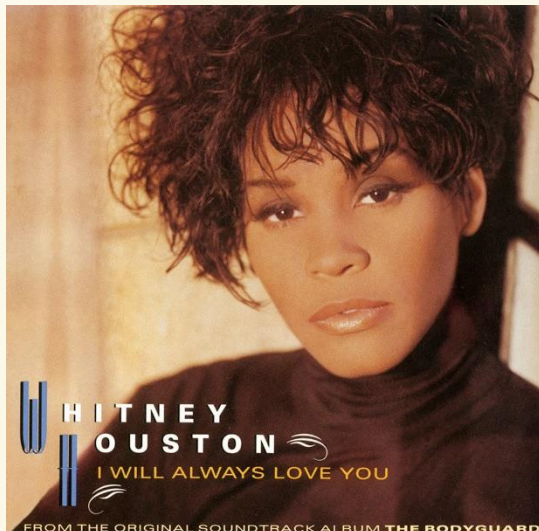
VS.

Sexually Positive

Love Addiction

I Will Always Love You
(Whitney Houston)

Fatal Attraction



VS.



Clinical Practice (screening)

- 1) “When was the first time you saw pornography? Was there anything memorable about it?” (Looking to see if the client was shamed.)
- 2) “When you were younger, did you ever play doctor? Was it just being curious, or was there some physical contact?” (Looking to see if the client engaged in behavior that was inappropriate for their age. Either they may have been abused, or the other person may have been abused and was reenacting that abuse on the client.)
- 3) “When was the first time you had any sort of physical contact other than a kiss on the cheek?” (Looking to see if their experiences were age appropriate/common)
- 4) “Before the age of 18, were you ever sexual with someone who was more than 1 or 2 years older or younger than you?” (Example – 13 yo with a 17 yo girlfriend. Use the car battery with the TV remote control example – those types of experiences can be too much physically, emotionally, and neurologically for a young person.)

Notes

- People with strong religious convictions and those who are married tend to abstain from pornography more often than those with less religious convictions and those who are unmarried.
- Research is mixed on the benefits and detriments of pornographic use (Willoughby et al., 2017)
- In March 2023, 3 sites in the top 15 visited websites were adult sites. Top site was xvideos.com, with 2.9 billion visits (Similarweb, 2023).
- Men are four times more likely than women to report having watched pornography in the past month (44 percent vs. 11 percent) (Cox et al., 2022).
- Average 1st exposure to pornography for boys is 13 years old and 16 years old for girls (Lim et al., 2017).

Notes (cont'd)

- Sex / Love / Relationship addictions are intimacy disorders that often involve some form of disassociation and a hijacked reward system. They have very little to do with sex.

Eating Disorders

- **Pica** (non-food substances)
- **Rumination Disorder** (repeated regurgitation – spit out, rechew, and/or re-swallow the regurgitated food)
- **Avoidant/Restrictive Food Intake Disorder**
lack of interest in eating or food; avoidance based on the sensory characteristics of food; concern about aversive consequences of eating
 1. Significant weight loss (or failure to achieve expected weight gain or faltering growth in children).
 2. Significant nutritional deficiency.
 3. Dependence on enteral feeding (feeding tube) or oral nutritional supplements.
 4. Marked interference with psychosocial functioning

Anorexia nervosa

- Restriction of food
- Unlike **Avoidant/Restrictive Food Intake**, there is a fear of gaining weight or of becoming fat, or persistent behavior that interferes with weight gain, as well as specific disturbances in relation to perception and experience of their own body weight and shape.



Bulimia Nervosa - binge eating followed by inappropriate compensatory behaviors

- self-induced vomiting
- misuse of laxatives, diuretics, or other medications
- Fasting
- excessive exercise



Binge-Eating Disorder – lack of control over eating

1. Eating much more rapidly than normal.
2. Eating until feeling uncomfortably full.
3. Eating large amounts of food when not hungry.
4. Eating alone because of feeling embarrassed by how much one is eating.
5. Feeling disgusted with oneself, depressed, or very guilty afterward.

Thinspiration / Thinspo



Thinspiration / Thinspo

Pro-Ana

Pro-Mia

BEFORE!



AFTER!

Assessments / Screeners

Gambling

- South Oaks Gambling Screen (SOGS)

Sex Addiction

- Internet Sex Screening Test
- Sexual Addiction Screening Test (SAST - R V2.0)
- Compulsive Sexual Behavior Disorder Scale (CSBD-19)

Eating Disorders

The **SCOFF** questions

- Do you make yourself **S**ick because you feel uncomfortably full?
- Do you worry that you have lost **C**ontrol over how much you eat?
- Have you recently lost more than **O**ne stone (14 lb) in a 3-month period?
- Do you believe yourself to be **F**at when others say you are too thin?
- Would you say that **F**ood dominates your life?

- 1) Are you satisfied with your eating patterns?
- 2) Do you ever eat in secret?
- 3) Does your weight affect the way you feel about yourself?
- 4) Have any members of your family suffered with an eating disorder?
- 5) Do you currently suffer with, or have you ever suffered in the past, with an eating disorder?

- A 'no' to question 1 is classified as an abnormal response
- A 'yes' to questions 2-5 is classified as an abnormal response
- Any abnormal response indicates that the client needs further assessment.

Eating Disorders - continued

- Eating Attitudes Test (EAT-26)
- Compulsive Exercise Test (CET)
- Eating Disorder Examination Questionnaire (EDE-Q)

<https://www.nedc.com.au/assets/files/Resources/NEDC-Video-Handout.pdf>

Gaming Addiction Screeners

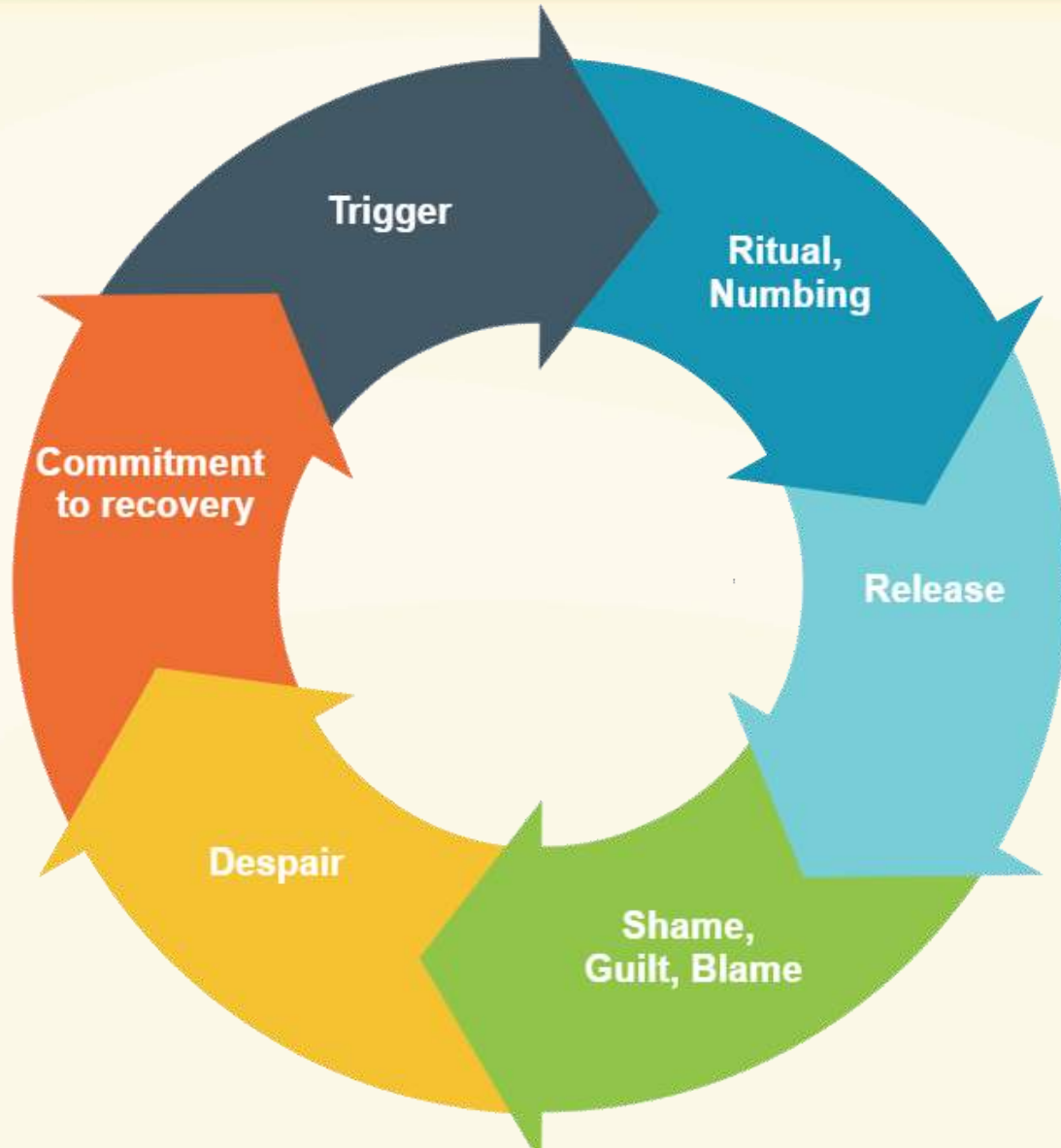
- On average 2.5 screening tools published annually from 2013 - 2020.
- Coverage of DSM-5 and ICD-11 criteria was inconsistent,
- These assessments appeared more reliable
 - AICA-S
 - GAS-7
 - IGDT-10
 - IGDS9-SF
 - Lemmens IGD-9

Challenges with different addictions?

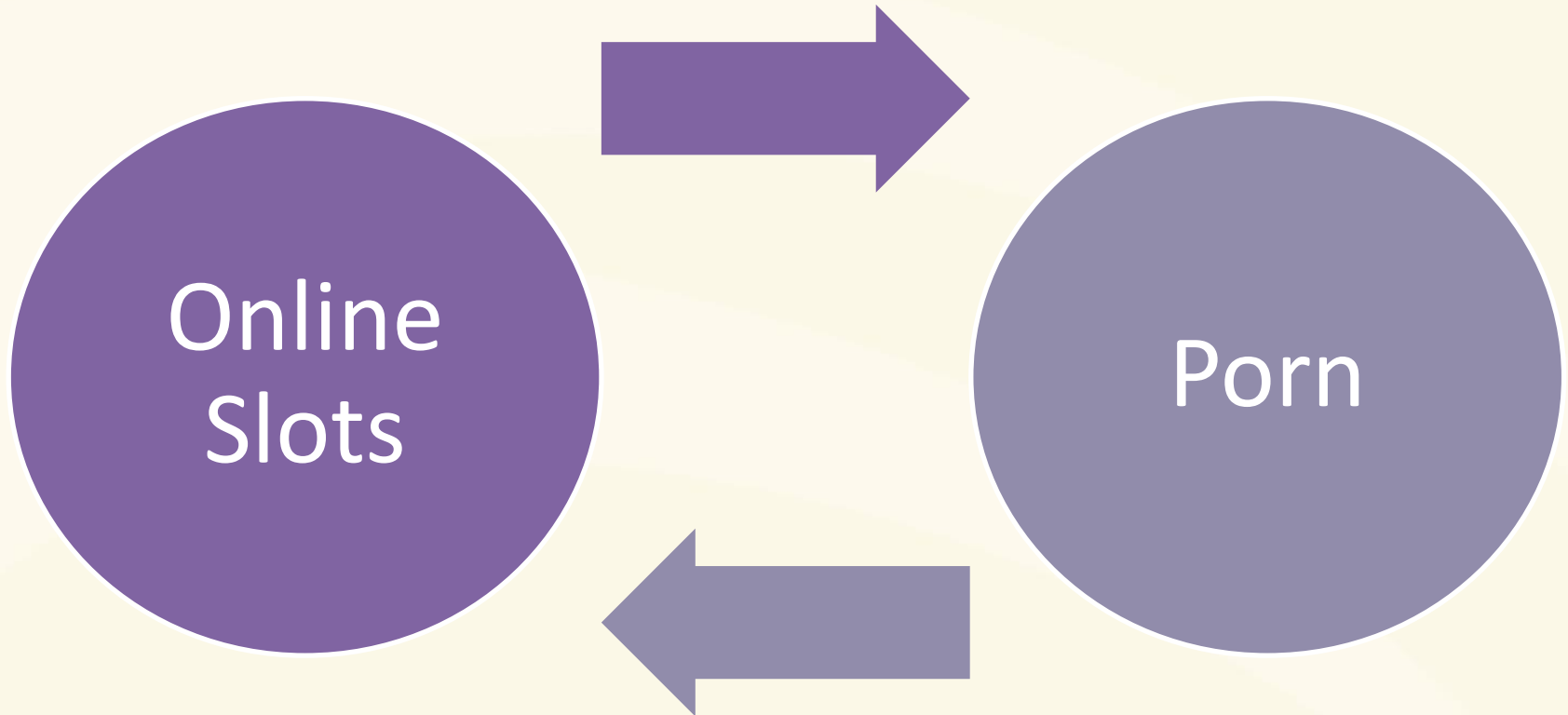


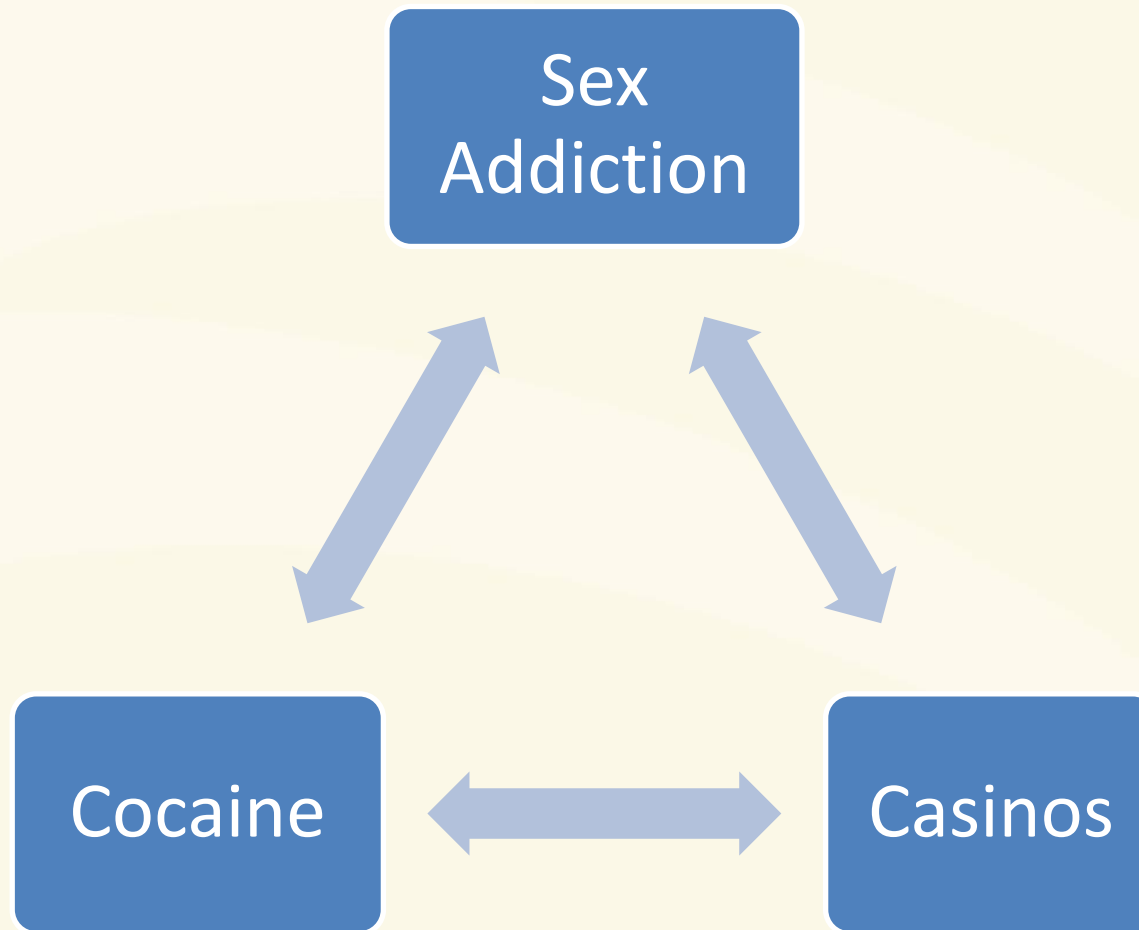
Examples –

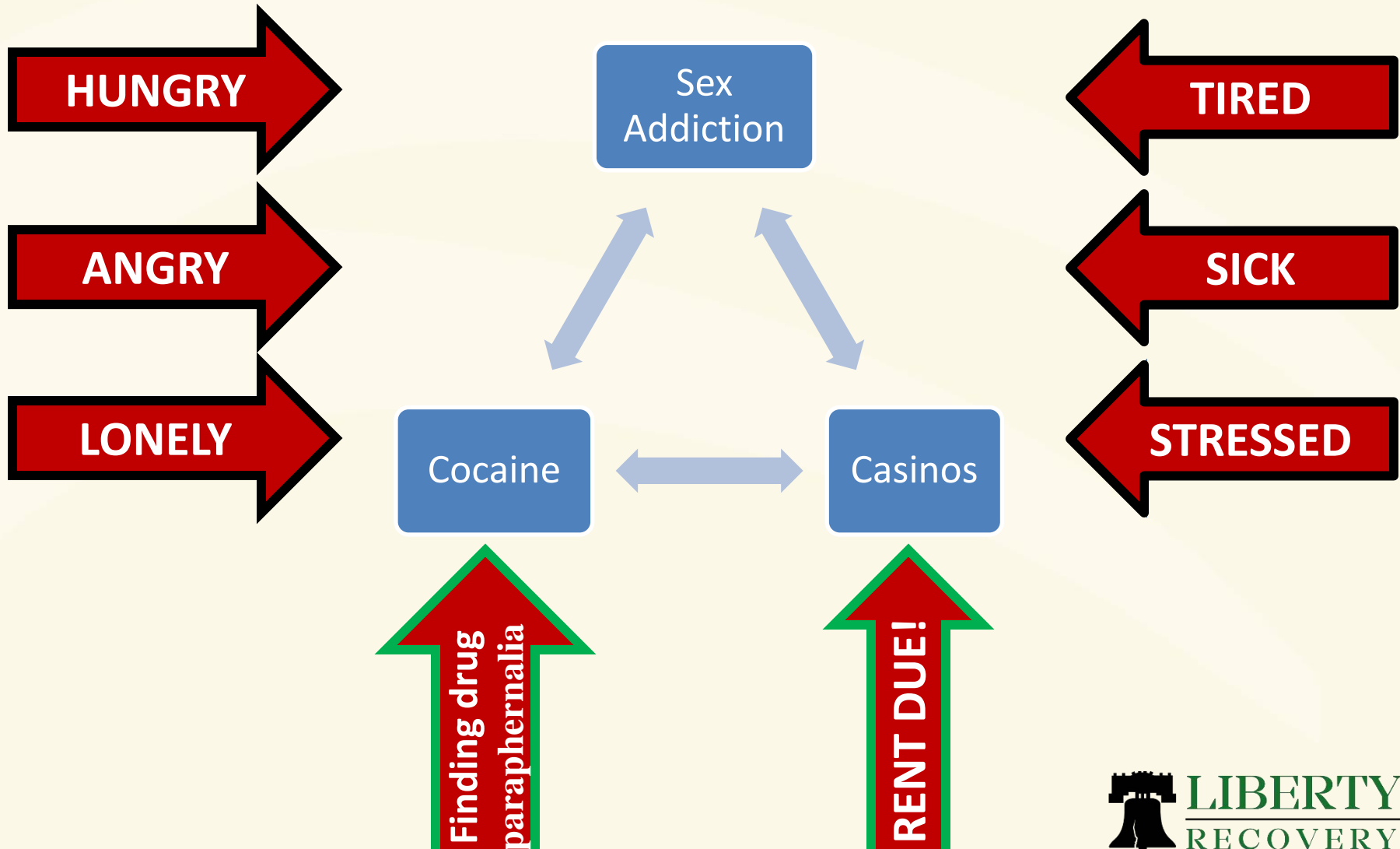
- shooting heroin can kill a person within seconds
- scratch-offs make Wawa very difficult for some people



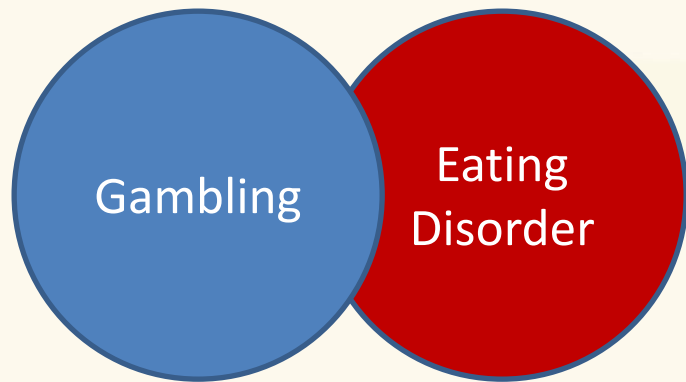
Addiction Cycle







Fusing Addictions



Binge



Partial

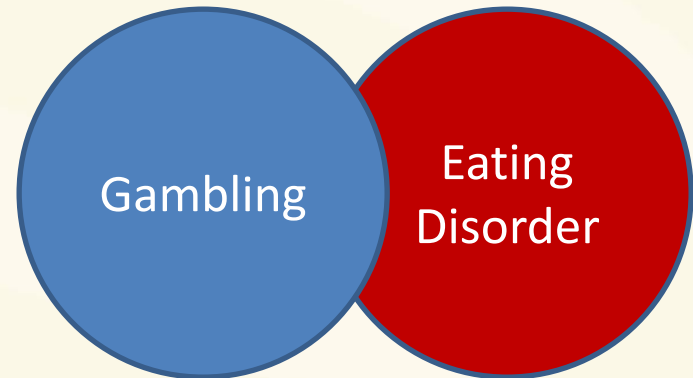
Full



Fusing Addictions

Binge –

- Episodic
- Functionally independent



Fusing Addictions

Partial Fusion –

- Addictions combined to make combination more potent than when each addiction is separate
- Addictions are independent part of the time



Fusing Addictions

Fully Fused –
Neither addiction is
sufficient to be used
separately



Gambling
Eating
Disorder

Treatment Concerns

- 1) Prioritize concerns. It is difficult to treat more than one addiction at a time while doing OP.
- 2) Clients will ideally have several years of sobriety from substance abuse before addressing process addictions, although this is often not feasible.
- 3) Treatment often needs to focus on stabilization before focusing on FOO issues and childhood trauma.
- 4) **Know when to refer out – especially for eating disorders.**
*****May need to refer to medical providers, but avoidance tactics are online**

Personal Opinion

- 1) All treatment needs to include some sort of somatic therapy, even if just learning how to slow down breathing. Clients need to learn they can tolerate their emotions.
- 2) In the long run, clients need more modalities than just CBT.
- 3) “Can’t be sober in one program if you’re not sober in another.” – NOT ALWAYS BEST SENTIMENT – may need different sobriety dates.

References

- Cox, D., Lee, B., & Popky, D. (2022). *How prevalent is pornography?* Institute for Family Studies. Retrieved April 10, 2023, from <https://ifstudies.org/blog/how-prevalent-is-pornography#:~:text=But%20there%20are%20massive%20gender,11%20percent>).
- Lim, M. S. C., Agius, P. A., Carrotte, E. R., Vella, A. M., & Hellard, M. E. (2017). Young Australians' use of pornography and associations with sexual risk behaviours. *Australian and New Zealand Journal of Public Health, 41*(4), 438–443. <https://doi.org/10.1111/1753-6405.12678>
- Similarweb. (2023). *Top websites ranking - most visited websites in March 2023*. Retrieved April 11, 2023, from <https://www.similarweb.com/top-websites/>
- Willoughby, B. J., Young-Petersen, B., & Leonhardt, N. D. (2017). Exploring trajectories of pornography use through adolescence and emerging adulthood. *The Journal of Sex Research, 55*(3), 297–309. <https://doi.org/10.1080/00224499.2017.1368977>

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