

IN PLAIN SIGHT: UNCOVERING THE LINK BETWEEN GAMBLING AND MENTAL HEALTH

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ON PROBLEM GAMBLING

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Objectives

- Identify the relationship between gambling and co-occurring mental health conditions: Participants will learn to recognize the impact of gambling among individuals diagnosed with psychiatric illnesses, such as mood and anxiety disorders.
- Recognize warning signs and behavioral indicators of gambling harm: Attendees will be equipped to identify clinical warning signs, including the psychological effects of "chasing losses" and the role of deception in maintaining gambling behaviors.
- Implement practical screening and support strategies: Participants will gain familiarity with validated screening tools, such as the Brief Biosocial Gambling Screen (BBGS), and learn how to initiate sensitive conversations about gambling harm with clients or loved ones.



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WHICH CAME FIRST?



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Approximately 21.2 million adults in the United States have a co-occurring disorder.

[According to SAMHSA's 2024 National Survey on Drug Use and Health](#)

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The Relationship: Gambling & Mental Health

According to NCPG, there is a high association between disordered gambling and substance use disorders, mood disorders, psychotic disorders, post traumatic stress disorder, suicide, and intimate partner violence.

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Co-Occurring Disorders with Gambling Disorder

Data from the National Comorbidity Survey indicates:

- 96% of individuals with gambling disorder have one or more co-occurring psychiatric disorders.
- More than 60% of individuals with gambling disorder have at least three psychiatric disorders.
- Studies have also found that people with gambling disorders had very high rates of personality disorders (more than 60 percent), mood disorders (almost 50 percent) and anxiety disorders (more than 40 percent).

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"It is rare to observe a disordered gambler without a comorbid condition, and it is often the comorbid condition that ultimately leads the individual to treatment."

(Afifi, Cox, & Sareen, 2006)

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Common Comorbidities



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Alcohol and Gambling Disorder

- Studies show 73% of those with a GD have an Alcohol Use Disorder (AUD) and 38% have a substance use disorder
- Those with gambling problems are 2-4x more likely to have an AUD
- Co-morbidity increases among younger males with them engaging in heavy gambling and frequent alcohol use 2x greater than females
- As the severity of a gambling problem increases, so does the probability of having an alcohol use disorder.
- More hours spent gambling, a wider range of gambling activities, and higher betting frequency (e.g., 3+ times weekly) are strong predictors of higher gambling disorder severity and substance use.

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Depression and Gambling Disorder

- Those experiencing gambling-related harm are 2x more likely to experience a Major Depressive Episode (Journal of Gambling Studies, 2021)
- Approximately 70–76% of severe gambling disorder report a lifetime history of depression.
- Individuals with more severe gambling, or "pathological" levels, show higher rates of depression (and anxiety).
- Nearly 17% (or 1 out of 6) of problem gamblers report attempting suicide, compared to 0.5% of the general population.



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Anxiety and Gambling Disorder

- Upwards of 50% of those diagnosed with GD also suffer from an anxiety disorder or symptoms of anxiety.
- One study (Kessler et al., 2008) found that anxiety disorders typically preceded GD and appeared to trigger gambling problems.
- Among individuals with severe gambling problems, there is a strong positive correlation with high anxiety scores.



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PTSD and Gambling Disorder

- According to NIH, up to 34% of individuals with GD also suffer from PTSD, a significantly higher rate than the 6.8% lifetime prevalence of PTSD in the general population.
- Clinical and community samples reported the following rates:
 - 24% (Toneatto & Pillai, 2016)
 - 19% (Ledgerwood & Milosevic, 2015)
 - 17% (Westermeyer et al., 2015)
 - 24% (Ledgerwood & Petry, 2006)



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Suicide and Gambling Disorder

Prevalence rates of those with GD:

- 31% *Suicidal Ideation (SI)*
- 17% *Suicidal Plans (SP)*
- 16% *Suicide Attempt (SA)*
- SI associated with: financial debt, chronic physical illnesses, depression, mood disorders, and alcohol use disorders
- SA associated with: being older, childhood history of sexual abuse, depression, mood disorders and alcohol use disorders



Armoon, B., Griffiths, M.D., Mohammadi, R. *et al.*

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Intimate Partner Violence and Gambling

- IPV is strongly linked to problem gambling.
- 36–38% of people with gambling problems perpetrate physical IPV and a similar percentage experience it.
- Partners of problem gamblers are 10.5 times more likely to visit an emergency room due to physical assault compared to partners of problem drinkers.
- Legalized sports betting has been associated with a 6–7 percentage point larger increase in IPV during, or immediately following, financial losses on bets compared to areas without legal betting.
- Gambling-related IPV includes physical, psychological, emotional, verbal, and financial abuse.

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Serious Mental Illness and Gambling Disorder

- Individuals with Serious Mental Illness (SMI) experience significantly higher rates of gambling disorder compared to the general population.
- Studies indicate that those with psychosis are roughly four times more likely to have gambling problems.
- Approximately 5.3% to 10.1% of individuals with SMI have been identified as at-risk or problem gamblers.
- Studies estimate that 15% to 19% of individuals with schizophrenia or schizoaffective disorder meet the criteria for problem or pathological gambling.



Sankaranarayanan, A., Ramanathan, P., Mathew, R. *et al.*

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Serious Mental Illness and Gambling Disorder

- It is not about the *Amount of Money gambled*; rather it is about seeing yourself as normal and connecting with the rest of the population on equal footing.
- Gambling can provide an illusion of acceptance and belonging.
- Can be a “safe” space for socialization and a relief for loneliness and boredom.
- Acts like a substitute for employment offering a feeling of being useful and productive.
- Those diagnosed with a serious mental illness long for a “cure”, something that will make the pain go away for good.
- Gambling can provide a paradoxical sense of regulating emotions and pain (*similar to cutting*).
- Gambling can provide relief to intrusive thoughts.
- Offers a structure for daily life – Something to do with idle time.

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MD Prevalence Data



- Maryland's MGM National Harbor Resort had the highest gaming revenue in 2022, outside of Nevada that year for any commercial casino.
- Males, racial minorities, lower education
- Higher rates of alcohol, tobacco, and substances among those with probable pathological gambling
- Gambling considered to be a "self-soothing behavior" for those with depression and anxiety, having "strong associations" with probable pathological gambling



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MOST COMMON FORMS OF GAMBLING IN MARYLAND

- Lottery & Instant Games
- Casino Gaming
- Sports Betting
- Horse Racing
- Bingo



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The Hidden Connection



The hidden connection between gambling and mental health lies in a toxic cycle where addiction causes severe emotional distress, including high rates of anxiety, depression, and suicide ideation; while simultaneously acting as a dysfunctional coping mechanism for those same issues.

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Gambling: An Unhealthy Coping Strategy

- **Escape** – to avoid life's challenges
- **Excitement** – for the thrill and rush
- **Ego** – to boost self-worth
- **Economics** – seen as an investment or way to make money
- **Entertainment** – using it as a hobby



(Lori Rugle's 5 E's of Gambling)

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ACCORDING TO THE DSM-5-TR

Evidence shows that *“gambling behaviors activate reward systems similar to those activated by drugs of abuse and that produce some behavioral symptoms that appear comparable to those produced by the substance use disorders.”*



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According to the DSM-5-TR

- There are other behavioral conditions (e.g., internet gaming, shopping, exercise) that are similar to substance-related disorders, but do not involve ingesting a substance, however **only gambling disorder** has been thoroughly researched and has empirical data for it to be included under Substance-Related and Addictive Disorders.
- Both share characteristics like tolerance, withdrawal, and negative life consequences, but process addictions rarely have physical signs.
- Process addiction centers on actions.



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Warning Signs & Behavioral Indicators

- Thinking about gambling all the time
- Minimizing the amount of time/money spent
- Continuing to gamble despite unaffordable losses
- Gambling with the intention of “making money”
- Unable to set and/or stick to limits
- Borrowing money
- Gambling longer than intended



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Chasing Losses

- According to the DSM-5-TR: After losing money gambling, often returns another day to get even.
- A pattern of “chasing losses” can emerge, marked by an urgent need or compulsion to gamble—often with higher stakes or increased risk—in an attempt to recover previous losses. The person might abandon any structured approach, trying to win back all lost funds at once. While temporary chasing is common among many, a persistent, long-term pattern of this behavior is a hallmark of gambling disorder.



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Hail Mary

- Commonly used to describe a desperate, last-ditch effort with a low probability of success.
- Refers to any action or plan attempted in a situation when the chance of success is very low, requiring what might be described as a miracle.
- *Fun Fact: The term became popular and widespread after Roger Staubach of the Dallas Cowboys threw the game-winning touchdown in 1975. It's reported that he said, "I closed my eyes and said a Hail Mary."*



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Psychological Effects of Chasing Losses



Intense/volatile emotional strain (guilt, anxiety, panic, despair)



Irrational decision-making (reduced inhibition and impulsivity)



Dopamine dysregulation (creating a "compulsive loop")



Risk desensitization



Cognitive distortions



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The Role of Deception

- Deception is a central role in maintaining gambling behavior.
- Acts as a protective barrier (allowing the habit to continue despite severe negative consequences)
- Internal deception (self-deception)
- External deception (lying to others)

Outcome: The reality of the addiction is hidden from self and others, thereby maintaining the illusion of control, resulting in ongoing gambling.

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Common Forms of Deception

Minimizing – admitting to a small part

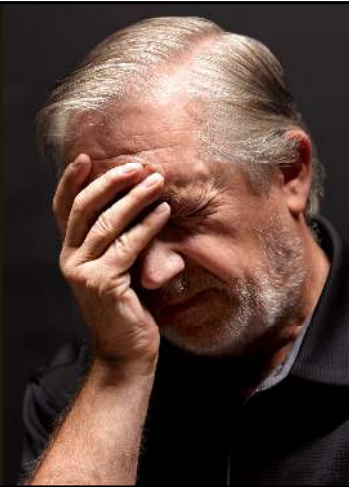
Blaming – shifting blame

Ostrich Defense – avoiding talks about money



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WHAT HAPPENED AND HOW DID WE GET HERE?



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Gambling: Effects on the Brain

Serves as an escape from issues, problems, grief, trauma, depression and anxiety.

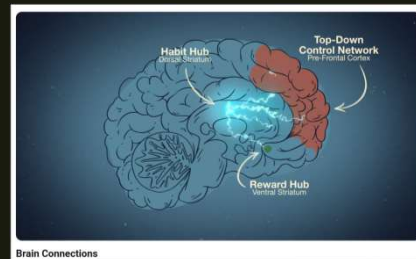
Produces a trance-like state of awareness

Loss of time and spatial awareness

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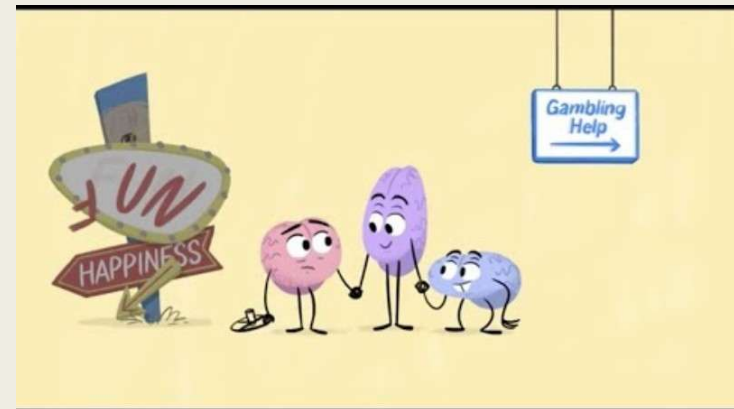
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BRAIN CONNECTIONS



Brain Connections

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Allow SBIRT to be your Quick Guide

- S – Screen (Lie-Bet, BBGS, NODS-PERC)
- BI – Brief Intervention (for at-risk individuals)
- RT – Referral to Treatment (for severe use)

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Lie-Bet

- 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?

(Johnson et al., 1997)

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Brief Bio Social Gambling Screen (BBGS)

- **Withdrawal:** During the past 12 months, have you become restless, irritable or anxious when trying to stop/cut down on gambling?
- **Deceiving:** During the past 12 months, have you tried to keep your family or friends from knowing how much you gambled?
- **Bailout/Need Money:** During the past 12 months, did you have such financial trouble that you had to get help with living expenses from family, friends or welfare?

**Used for National Screening Day during PGAM*
(Gebauer et al., 2010)

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NODS-PERC

- 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?

(Volberg et al., 2011)

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Brief Interventions

-  Give feedback about the screening results.
-  Remain open-minded, inviting the client to share their experience, while remaining non-judgmental.
-  Listen to gain perspective.
-  Engage in a conversation about readiness to change.
-  Have client identify pros and cons of maintaining or changing current gambling behavior.

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Give Examples

Low Risk Gambling is Done:

- As a form of recreation, not to make money or make up for previous losses
- With limits on time, frequency, and duration
- In a social setting with others, not alone
- With money you can afford to lose

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High Risk Gambling

When You Are:

- Coping with grief, loneliness, anger, or depression
- Under financial pressure and stress
- Recovering from mental health or substance use disorders
- Using alcohol or other drugs
- Under legal age to gamble



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Maryland Center of Excellence on Problem Gambling's Certified Peer Recovery Specialists



William (Will) Hinman, CPRS, RPS
Peer Supervisor/ Outreach Coordinator
Southern Maryland
Cell: 443-717-2439



Ken Wolfson, CPRS, RPS
Northern Maryland
Cell: 443-690-9811



Kenny Crawford, CPRS
Eastern Maryland
Cell: 443-717-1137



Carin Miller, CPRS, RPS
Western Maryland
Cell: 410-299-1308



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Maryland's No Cost Treatment

If you or any member of your family is struggling with harms associated with gambling, help and counseling is available for Maryland residents impacted by gambling harms at **no cost** regardless of insurance coverage or ability to pay.

<https://www.mdproblemgambling.com/find-a-counselor>



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The Broad Impact

- One person's severe gambling problem is estimated to negatively affect the lives of at least 7 other people, including family, friends, and colleagues.
- Affected others often experience severe financial strain, emotional distress, and damaged relationships.
- Affected family members are more frequently women.
- Affected close friends are more frequently men.



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Affected Others - Gambling Harms

Gambling harm is defined as *"any initial or exacerbated adverse consequence due to an engagement with gambling that leads to a decrement to the health or wellbeing of an individual, family unit, community or population."*

- Reduced quality of life
- Emotional and relationship (most common)
- Financial
- Health



Langham et al., 2016



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Family and Relationships

- **Trust Erosion & Emotional Distress:** The foundation of trust is destroyed by lies, secrecy, and broken promises; leading to intense anger, shame, and betrayal.
- **Relationship Breakdown:** This disorder causes high rates of separation, divorce, and isolation. Family members often experience high levels of anxiety and depression.
- **Children and Partners:** Family members often face "role reversal" where partners take on all financial burdens. Children may suffer from neglect as the individual focuses entirely on their addiction.



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Financial and Legal

- **Financial Devastation:** Families often face ruined credit, depleted savings, and foreclosure, taking years to recover from the economic damage.
- **Illegal Activity:** To fund the addiction, individuals may turn to theft, fraud, embezzlement, or borrowing money from friends and coworkers.
- **"Hidden" Damage:** The rise of online gambling means losses are often concealed until a major financial crisis emerges.

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Other Impacts

Physical Health Toll

- **Health Issues:** Family members frequently experience high stress, insomnia, ulcers, and anxiety-related illnesses.

Wider Community and Workplace Effects

- **Productivity Loss:** Gambling disorder leads to absenteeism, theft, and decreased focus in the workplace or in school.



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SAMHSA's Guide to Providing Care for those with Co-occurring Disorders

1. Use a recovery perspective
2. Adopt a multi-problem viewpoint
3. Develop a phased approach to treatment
4. Plan to address the client's cognitive/ functional concerns
5. Use support systems to maintain and extend treatment effectiveness



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Best Practice Guidelines

- Safety first
- Culturally Competent
- Evidenced-Based
- Sets limits of confidentiality
- Client-Centered
 - *Treat the person not the reimbursement.*
- Client-Matching
 - *Treatment modality*
 - *Length of treatment*
 - *Therapist*
- Holistic / Comprehensive
- Ethical
- Self-Care...
 - *Time with Friends/Family*
 - *Time away from work*
 - *Massage/Spa day*
 - *Listening to music*
 - *Meditation*
 - *Therapy*
 - *Supervision*
 - *Reading*
 - *Walking*



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Thank you!



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