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BARRIERS TO TREATMENT FOR HISPANIC GAMBLERS IN ARIZONA

UNDERSTANDING BARRIERS TO GAMBLING TREATMENT FOR LATINOS IN ARIZONA

Identifying specific aspects of the Hispanic-Latino culture that hinder treatment for problematic gambling.

- 1. Acceptance of existing gambling as a problem.
- 2. Fear.
- 3. Stigma.
- 4. Educational Levels.
- 5. Marital Status.
- 6. Language
- 7. Transportation
- 8. Financial/socioeconomic concerns

UNDERSTANDING CULTURAL DIVERSITY AND PRIORITIZING BARRIERS

- 1. Belief system.
- 2. Disclosing the problem and asking for help
- 3. Finding professional services specifically for gambling in their language
- 4. Transportation
- 5. Limited knowledge and access to technology
- 6. Financial socioeconomic concerns

Understanding barriers to gambling treatment for Latinos in Arizona

While problem gambling can and does affect people across a worldwide spectrum in terms of background, often there are unique challenges that arise when it comes to providing gambling treatment to those of Latino communities, specifically in Arizona. Raising awareness through education and examination of such factors can benefit professionals in the field of gambling and/or addictions counseling.

Brief overview of gambling addiction and its impacts

According to the A.P.A: "Gambling problems, previously called pathological gambling, were considered an impulse control disorder until 2013, when the DSM-5 classified them as an addictive disorder. That made gambling addiction the first, and so-far the only defined behavioral addiction in the clinical section of DSM-5...like addictions to alcohol and drugs, gambling addictions are characterized by an increasing tolerance that requires more gambling as time goes on to feel satisfied. People with the disorder can also experience withdrawal that causes irritability when they try to quit."

Rates rise for people with other addictions and conditions. About 4% of people being treated for substance use also have gambling disorder, as do nearly 7% of psychiatric inpatients and up to 7% of people with Parkinson's disease. An estimated 96% of people with gambling problems have at least one other psychiatric disorder. Substance use disorders, impulse-control disorders, mood disorders, and anxiety disorders are particularly common among people with gambling problems (Potenza, M. N., et al., Nature Reviews Disease Primers, Vol. 5, No. 51, 2019)."

Brief overview of gambling addiction and its impacts

"The National Council on Problem Gambling (NCPG) estimates that about 80% of those with a gambling addiction consider suicide, while one in five actually attempts it. That's roughly twice the rate of other addictions...gambling often comes with a high incidence of secondary issues such as depression and anxiety, the NCPG has concluded that the most telling precursor of an addict's impending suicide attempt is the size of their debt."

Anton, A. (2012, September 16. *Why gambling can be more destructive to your health than drugs or alcohol.* Yahoo News. https://news.yahoo.com/why-gambling-more-destructive-health-drugs-alcohol-173540410.html

Common consequences of problem gambling may include, are not limited to: loss of relationships with family members and friends, loss of career and reputation, health problems, food and housing insecurity, financial devastation and compounding debt. (*Latino communities & problem gambling.* Know the Odds.

https://www.knowtheodss.org

Compared with Black and Asian population groups, Latinos are less likely to develop gambling addiction. Overall, the rate is 1%--however, they are more at-risk of developing a gambling disorder from problematic gambling and other addictive behaviors and mental health conditions, including anxiety, mood and/or personality disorders.

Gambling disorder is 4 times more prevalent among Hispanic American veterans; compared with the general population. Major depression, alcohol use disorder, and PTSD all influence gambling behaviors. (www.gatewayfoundation.org)

AZ Hispanic population grew nearly 16% from 2010 to 2020, faster than the overall population, which grew about 12%. There are 2.3 million Hispanic persons in Arizona according to 2021 U.S. Census Bureau data. Latinos make up about 33% of Arizona's total population of about 7.4 million. At 33%, Arizona has the 4th largest Hispanic population in any state in terms of percentage. www.azcentral.com

According to the UCLA Latino Policy & Politics Institute:

Half of Latinos in Arizona are housing cost-burdened, meaning they spend more than 30% on their incomes on housing.

Latinos are the most likely to live in overcrowded households, specifically children, after Native Americans. 11% of all Latinos and 28% of Latino children in Arizona live in overcrowded homes.

Despite that Latino men in Arizona have higher labor force participation rates than other groups, and Latina women are 2nd to Black women on labor force, almost half of all Latinos in Arizona live in poverty or low-income conditions. 20% of the households live under the federal poverty line, another 27% are considered low-income.

Latinos have the third lowest median household income of any racial group in Arizona.

Latinos are more likely to be uninsured. 18% compared to that of 11% of Arizonans overall. Among origin groups, a 3rd of Guatemalans are uninsured. Noncitizen Latinos are the most vulnerable with close to half (46%) without health insurance.

According to the UCLA Latino Policy & Politics Institute:

A third of Latinos and over half of Latino children in Arizona are covered by Medicaid.

Latinos in Arizona have lower levels of education compared to the Arizona average and on-par with Latinos nationally. August 1st, 2023. UCLA. *Latino policy and politics institute*. https://latino.ucla.edu/research/15-facts-latinos-arizona

A 2016 study showed that 83% of Hispanics living in the U.S. gambled in the last year while 22% gambled within the last week (Campos, Camacho, Pereda, Santana, calix & Fong, 2016)

Overall rate of substance use of Hispanics who met criteria for dependence or abuse of alcohol or drugs and in need of treatment was 10.1% (van Wormer & Davis, 2013).

Common to see gambling when treating substance use and trauma (Smith, 2015)

https://www.opb.org/news/article/problem-gambling-oregon-latino-hermiston/

Latinos are the fastest growing minority group in the U.S. due to rapidly increasing birth rates (Arredondo, Gallardo-Cooper, Delgado-Romero & Zapata, 2014)

Latino communities oftentimes do not have access to culturally responsive mental health services, including treatment for problem gambling (van Wormer & Davis, 2014)

Latino communities face many barriers to accessing services, such as lack of insurance, lack of transportation, mistrust with mental health providers, lack of bicultural/bilingual services, uninviting environments, etc. (Arredondo et al., (2014); Falicov, (2014); van Wormer & Davis, (2014)

Latino communities are being impacted by problem gambling at higher rates and in some states, even lead all other ethnic groups (van Wormer & Davis, 2014)

https://www.evergreencpg.org/wp-content/uploads/2020/10/Iniguez-LATINX.pdf

FAMILISMO:

Immediate and extended family ties are extremely important in Latino communities. Family members are influential in the development of young children and adolescents, and family time is strongly encouraged and valued. Latino families tend to rely on caring for their own, handling health concerns in multigenerational houses.

Many Latino individuals gamble frequently when their family and community members are together. Gambling provides an easy way to socialize, and thus, frequent gambling among family members is culturally accepted.

PERSONALISMO:

Often, doctors can be more focused on the test results or medical facts than a person in front of them. Poor bedside manner can make patients uncomfortable, less willing to open up to the doctor about his or her concerns. For many Latinos, these friendly and personal relationships must be made before serious health care discussions can begin. *According to the Dimensions of Culture Organization*, health care without "personalismo" causes a number of issues, including:

- Reduced preventive screenings
- Delayed immunizations
- Errors in medical histories
- Usage of harmful remedies
- Not following recommendations
- Decreased satisfaction with health care

Latinos traditionally value personal connections with others, and that must be present between any problem gambler and a person prepared to guide him or her to recovery. Gambling addiction is already a disorder people are afraid to talk about. People are ashamed and afraid they are to blame for what is really a diagnosable condition.

SIMPATIA:

Simpatía, valued in Latino culture, is the harmony and agreement sought in relationships. In most cases, Latinos tend to avoid confrontation with others. This desire for pleasant social relationships without conflict can make individuals avoid necessary conversations about addiction or problems within the household."

Sometimes, in order to maintain simpatía, Latinos will concede to the desires of others in order to convey agreement and to maintain a harmonious relationship. Some Latinos will comply with others even if they disagree because they want others to think well of them." - (Rodriquez, 2008)

"A woman may disapprove of her sister's gambling, but she will not say so. A son may be worried about his father's gambling, but he will not question it. By avoiding conflict, gambling addictions are allowed to go unaddressed, and consequences may continue to accumulate.

Gillette, H. (2013, September 18). What is personalismo and why is it important in health care? Voxxi. Retrieved from http://voxxi.com/2013/09/18/hispanic- personalismo-health-care/

MACHISMO & MARIANISMO:

Traditional gender roles have long defined how male and female Latinos interact, both at home and in the community. Men are supposed to be tough and are expected to be the heads of the household. They are not supposed to be emotional, and they do not talk about their problems or flaws easily. Women, however, are traditionally supposed to be submissive to men, especially their husbands at home. They are to cook, clean, take care of the children and support the husband.

Not all Latino men and women today choose to live this way, but many still believe in the machismo and marianismo roles."

Latino communities & problem gambling. Know the Odds. https://www.knowtheodds.org

Men may not be quick to talk about their addictions, as they believe it may expose flaws that make them appear to be less of a leader and less masculine. As head of the household, however, they will look out for their family members and take action when they sense the problem of another, such as the addiction of a son or daughter.

Women, traditionally caretakers for their family members, can be slow to address their own problems when they must be responsible for taking care of others and their homes

Narrowing the Gap

Minimizing barriers:

Providing information and resources. Partner with Community Organizations. Provide Translators. Address legal barriers. Promote Cultural Sensitivity.

Participate in cultural events. Find an opportunity for you or your organization to join in cultural events in your region. These may be arts and entertainment displays, holiday celebrations or other occasions celebrating the Latino culture.

Participate in inclusive local events. Check your city and county's calendars for local events that will bring together local residents of all ages and cultural backgrounds. You can raise awareness about problem gambling to a variety of individuals, with resources for each demographic.

Narrowing the Gap

Language:

Treatment and support for problem gamblers is limited. In the United States, many of the options currently available are only for English-speaking residents. Non-English-speaking Latinos who rely on Spanish, Portuguese or other languages have fewer resources available to them and can often only attempt to struggle with English materials and speakers.

If a Latino individual lacks confidence in his or her English skills, he or she may not feel comfortable speaking to a counselor about problem gambling, and t here is a risk that their descriptions of symptoms and consequences have not been properly translated."

Flores, V. (2011, August 29) Cultural elements in treating Hispanic/Latino populations. http://www.attcnetwork.org/learn/education/documents/Cultural. Elements.in.Treating.Hispanic.Latino.Populations.

Narrowing the Gap

Language:

Sponsor the production of Spanish-language awareness materials. Reach members of the Latino community with Spanish-language materials that raise awareness of problem gambling, whether you buy advertising space in the community newspaper, produce radio and television for Spanish radio stations, or drop off brochures, flyers, and posters around town.

Latino communities & problem gambling. Know the Odds. <u>https://www.knowtheodss.org</u> https://www.evergreencpg.org/wp-content/uploads/2020/10/Iniguez-LATINX.pdf

Building a bridge:

To bridge the treatment gap existent within Latino populations in Arizona for problem gambling, counseling professionals can overcome such barriers to treatment through continuing cultural awareness, engagement, and education.

Understanding barriers to problem gambling treatment for Latinos in Arizona is an important tool when it comes to providing for this unique population and its challenges.

Gamblers Anonymous (Jugadores Anonimos) in Arizona Brief History

The first Spanish-speaking meeting of Jugadores Anonimos was established approximately in 2000.

From the beginning, the first group and other Spanish-speaking groups that were formed, were part of the Arizona Gamblers Anonymous' fellowship. However, as Spanish-speaking G.A meetings increased, the founders of those meetings considered necessary to separate their fellowship from Gamblers Anonymous; they decided to apply to the International Gamblers Anonymous Board to grant them their own area in Arizona.

Once the process was completed, Jugadores Anonimos continued to assist their members with Spanish-speaking meetings only. Resources in Spanish were obtained from Mexico and Spain. Through individual donations from members of the fellowship, funds were collected and continue to be collected, to provide those resources in Spanish to each person who attends those meetings. From 2007 until 2016, approximately, there were 7 meetings available, one every day of the week.

Gamblers Anonymous (Jugadores Anonimos) in Arizona Jugadores Anonimos Present Day / Arizona

As attendance to meetings decreased, it became a challenge to find recovering Spanish-speaking gamblers that wanted or could facilitate the meetings; eventually, few meetings had to close for lack of attendance and facilitators (room secretaries). Currently, there are two in-person meetings, one in Tempe and one in Glendale. Two online meetings are available usually on Mondays and Friday.

Attendance to Spanish-speaking G.A meetings continues to decrease; currently, the fellowship struggles to maintain steady attendance, and to find members in recovery that are willing and able to make a commitment to facilitate meetings.

During 2007 -2016, attendance increased to approximately 60 members; currently, there may be about 20 to 25 people that attends those meetings regularly.