



Gambling: What's changed and what is the future

From the 1990's to 2025: admissions, games and Research progress

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Mr. Bauerkemper was the first director of problem gambling (1992 to 1996) for the state of Nebraska where he created the Gamblers Assistance program and pioneered the treatment of gambling counseling in Nebraska. In addition, he was appointed and served on the Nebraska's Commission on Problem Gambling. He served on the Board of Directors for the National Council on Problem Gambling from 2001-2008 and from 2012 to 2016 He most recently served on the National Councils' Legislative committee where he helped raise awareness of problem gambling in Washington DC. Mr. Bauerkemper has been providing counseling to gambling families since 1986. He has published research on the prevalence of problem gambling in the Nebraska Probation Department. He received the "First Step" award in 1999 and the Wisconsin Leadership award in 2016 for his work with problem gamblers. Mr. Bauerkemper is an internationally recognized expert on problem gambling and has provided training throughout the United States and Southeast Asia.



Why look at the past and what can we learn?

We will be looking at the demographic of those entering treatment from 1998 to present

To see gender breakouts

To look at age ranges and percentages

To see games played

To look at self reported debt when entering treatment

We will also look at how research has helped determine why gamblers enter treatment

We will look at how treatment has evolved

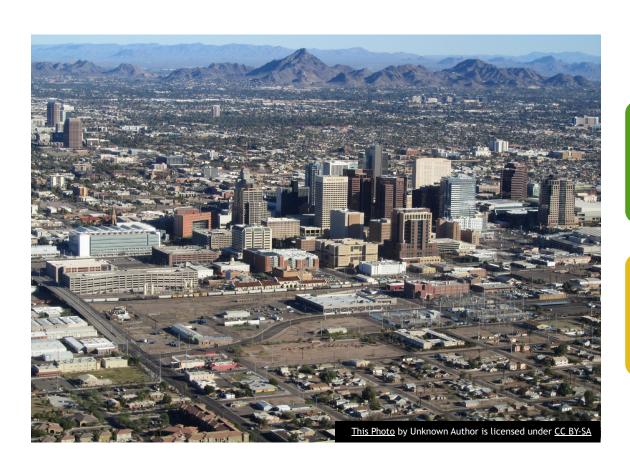
We will look into the future and what could be on the horizon for treatment

Data collected from Nebraska



- Special thanks to David Geier director of the problem gambling treatment program
- Juan Paulo Ramirez
 Statistics director for the state of Nebraska

Data Collected from Arizona



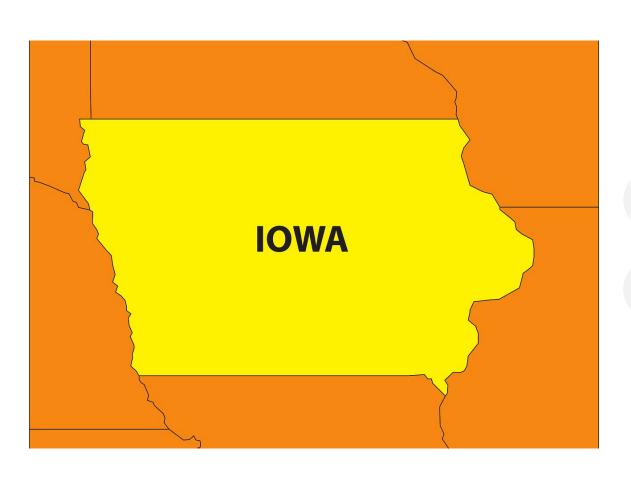


Special thanks to Kristin Cambell



Thank You for allowing me to be here today!

Data collected from Iowa Department of Public Health





Thanks to Katie Bee



Thanks to Eric Preuss



Data from the Department data collection system

How has the industry changed?

- 1980s Las Vegas and Atlantic city (off shore illegal) 2024 casinos in most US states 117 in Oklahoma
- 1980s 80% of the casino floor was table games 2024 80% of the floor is slots/similar games
- 1980s Cash was king bring cash to gambling venues 2024 cashless tickets... connections to bank accounts
 - 1980s Sports betting mostly local bookies 2024 in house sports wagering' apps and geo-fencing

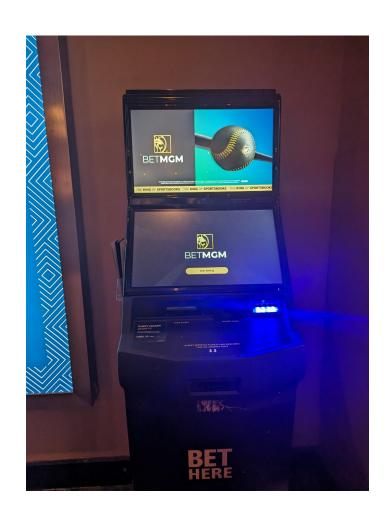
How has the industry changed?

1980s Horse racing many tracks in us betting only in-house 2024 simulcasting, apps fewer tracks and many have class 3 gaming in-house

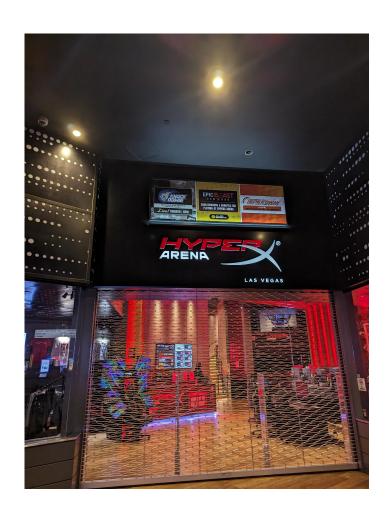
1980s No internet games 2024 Gamblification of games on every mobile phone

1980s Poker rooms prevalent especially on east cost 2024 poker rooms connected to gaming industry

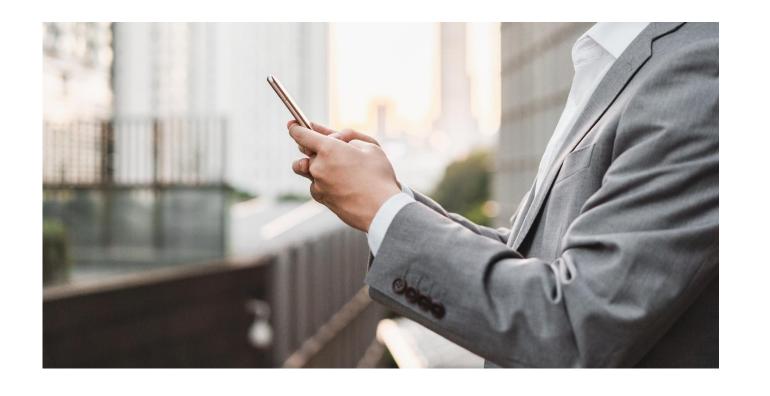
What else????????



Sports
betting
devise at
luxor Casino



Gambling gaming room at Luxor casino Ls Vegas Nevada



Sports gambling device in many states

DSM has changed

- DSM III
 - **1980**
 - First time gambling listed as a diagnosis
 - Impulse disorder (mental health)
 - DSM IV
 - Starting to look at pathways and severity
 - DSM 5
 - Current version
 - ► No crime as a symptom
 - Severity spelled out

Persistent and recurrent maladaptive gambling behavior indicated by 5+ of the following:					
Preoccupation	Planning next venture, handicapping, getting \$				
Tolerance	Gambles with amounts of \$ to get same effect				
Withdrawal	Restlessness/irritability when stopping				
Escape	Relieving stress and/or dysphoric mood				
Chasing losses	After losing money, returns to "get even"				
Lying	Conceals extent of involvement to others				
Loss of Control	Unsuccessful efforts to control behavior				
Illegal acts	Forgery, fraud, theft, embezzlement				
Risked Sig. Relationship	Jeopardized/lost important relationship, job, educational, or career opportunity				
Bailout	Reliance on others to provide money				
Gambling behavior is not better accounted for by a manic episode					

Criteria for Pathological Gambling DSM III and IV

DSM 5 312.31

Preoccupation with gambling

negative moods

Gambling to escape from problems or

Need to gamble with increasing amounts of money

Chasing losses

Unsuccessful attempts to stop gambling

Lying to conceal the extent of gambling involvement Restlessness or irritability when attempting to stop gambling

Relying on others for financial bailout

Over a 12 month period, not part of a manic phase of bipolar

DSM 5 and (R) has added severity to the diagnosis

01

Mild: A person must have four or five of the criteria to met this severity standard 02

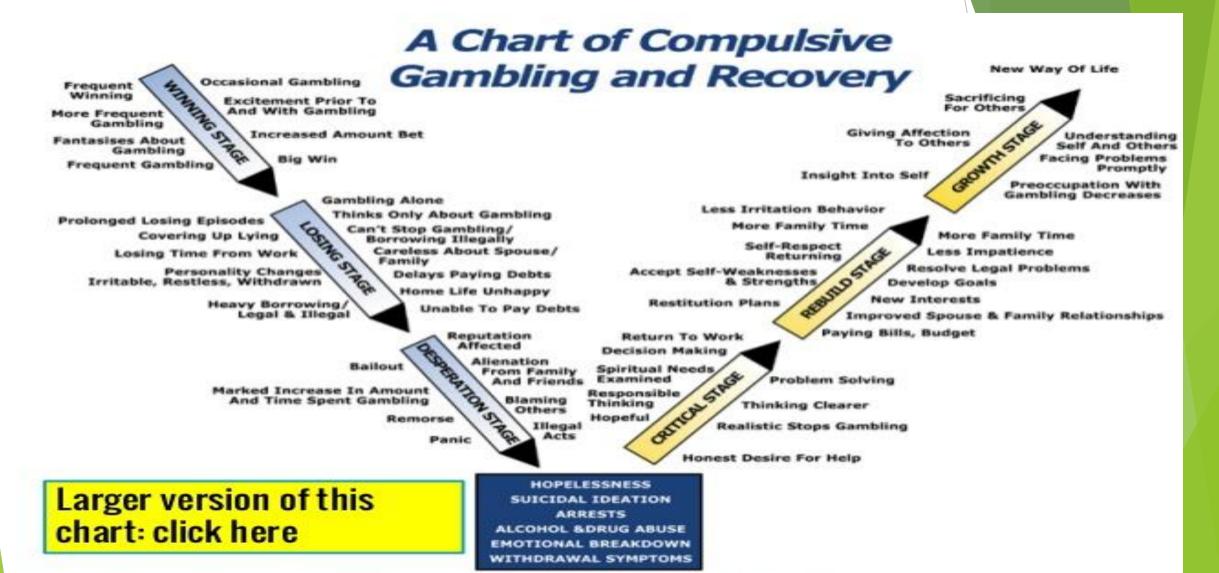
Moderate: A person must have six or seven of these criteria to meet this level of severity

03

: Severe: A person must have eight or all nine of these criteria to meet this level of severity

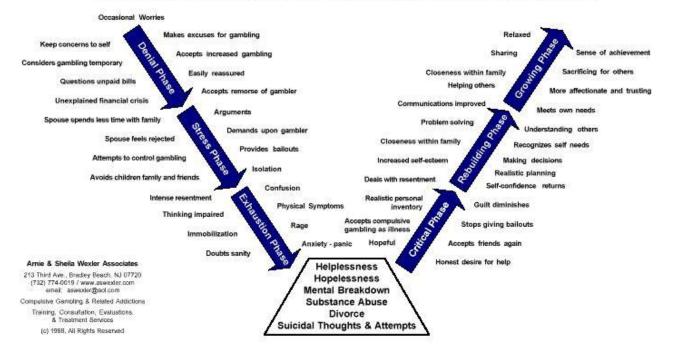
So lets look at the past

- Dr. Robert Custer provided the first look into gamblers
 - 45 year old white males
 - Military veterans
 - Most of them "Action Gamblers"
 - Book When Luck Runs Out
 - Action and Escape Gamblers
 - Action Gamblers -sports, horses, poker
 - Escape gamblers- scratch offs, pull tabs, lottery, slots



Source: Written by Robert L. Custer, M.D. image source: Council on Compulsive Gambling of New Jersey, Inc.,

A Chart on the Effects of Compulsive Gambling on the Spouse



Screenings Custer's "V" chart for spouses is virtually the same as in 1980 (REALLY?)

Today we look at gamblers differently: Pathways Model

Pathways model (Blaszczynski, Nower 2002)

Three subgroups of gamblers

Behaviorally conditioned problem gamblers (mixed gambling games)

Emotionally conditioned problem gamblers (games of chance- slots, bingo, pull-tabs

Antisocial, impulsivist problem gamblers (semi skillful gambling- sports horses poker

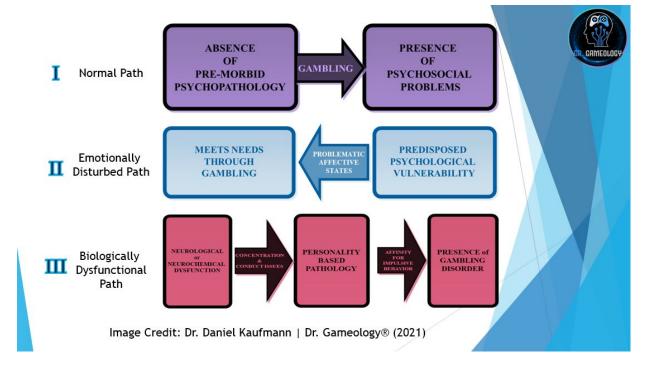
The pathways model has been researched and revised over time.

Two other clusters of gamblers has emerged:

Impulsive gamblers without cognitive-related distortions

Gamblers without impulsivity or gambling related cognitions

Mr.Gaetan Devos et al 2020



Pathways model

Screenings have changed: 1980s GA screen

South Oaks gambling screen (first screen for adults then adolescents)

Nods screening tool (primarily used for public surveys)

Developed for national survey to help determine prevalence Lie bet screen (two question screen used first by legal system)

Two questions must answer yes to both

Brief biosocial gambling screen (Gebauer, LaBrie, & Shaffer, 2010)

3 questions any 1 answer warrants further assessment

Problem gambling severity index ((Ferris & Wynne, 2001)

Canadian tool

9 Questions Scored

DID YOU KNOW?

PEOPLE CAN BE ADDICTED TO GAMBLING

ABOUT 3 OUT OF 100 PEOPLE HAVE **GAMBLING PROBLEMS**

GAMBLING PROBLEMS OFTEN **GO UNDETECTED**

RECOVERY FROM **GAMBLING PROBLEMS IS** POSSIBLE

Brief Biosocial Gambling Screen

A "yes" answer to any of the questions means the I person is at risk for developing a gambling problem.

1. During the past 12 months, have you become restless, irritable or anxious when trying to stop/cut down on gambling?

NO

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

3. 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?

NO

Cambridge Health Alliance Readiness for Gambling Expansion (CHARGE)





Stages of change

Precontemplation

Contemplation

Preparation

Action

Maintenance

Prochaska, DiClemente

We started out thinking Gambling is for degenerates

Will power is key to recovery

Gamblers have a compulsive nature

All a person has to do is stop...easy

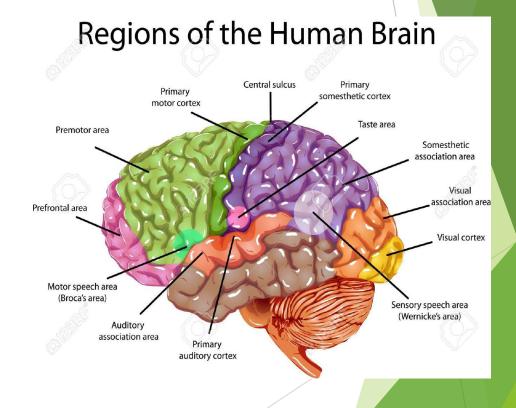
Gambling is a sin.... Las Vegas is sin city

Those who gamble to much are crazy to begin with

Now we know Disordered gambling is a Brain disease

A study has found that a part of the brain that controls fear may prevent gambling, even when the estimated benefit is greater than the cost. Conversely, those whose amygdala's, containing the brain's fear responses, are damaged were found to gamble even when the odds are against them, like problem gamblers.

California Institute of Technology and the University College of London



Disordered Gambling is a Brain disease



Online gambling triggers the release of dopamine, serotonin, and other feel good neurotransmitters, according to the Journal od Addiction Medicine by Jocelyn L. Topf and colleagues from Yale University School of Medicine.



This is important as we know online gambling has risen dramatically since Covid.

Slot machine vs table games



The type of gambling considered the most addictive?



SLOTS



Hold on!

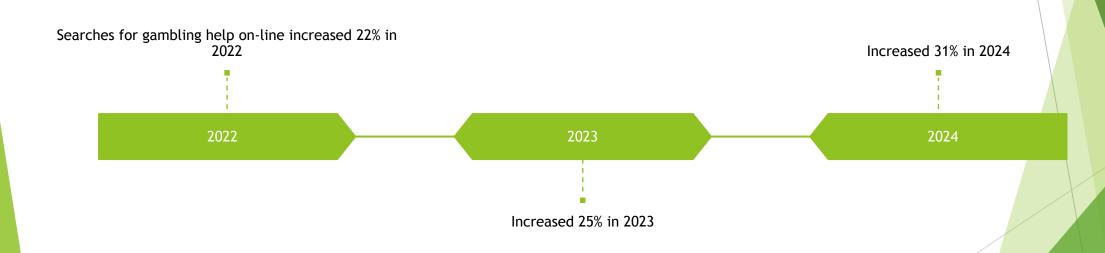


Online gambling is on the rise and online gambling research tells us it is highly addictive up to 77% of online gambling exhibit at least 2 of 4 criteria



More research needed but many online gamblers play multiple games and both online and bricks and mortar gambling

People searching for help for sports wagering problems up



- 1998 Iowa data
 - Males entering treatment 59%
 - Females entering treatment 41%
 - Mostly males differed from many mental health diagnosis
 - Not a lot of gambling class 3 gambling outside of a few states
 - Marketing was to mostly male population as they were seen as more in need and more severe
 - Most gamblers entered in Custer's hopelessness stage

So... what does the admission data tell us about patients?

2000-2003 gender data

Males entering treatment averaged 55% Females entering treatment averaged 45%

Generally the same demographics as 1998
Women entering slightly more often with Escape gambling primary

Men still Action gamblers

2003-2007

Men entering treatment 45%, 54%, 53, 54%, 57%, 53%

Women entering treatment 55% 46%, 43%,47%, 46% 46%

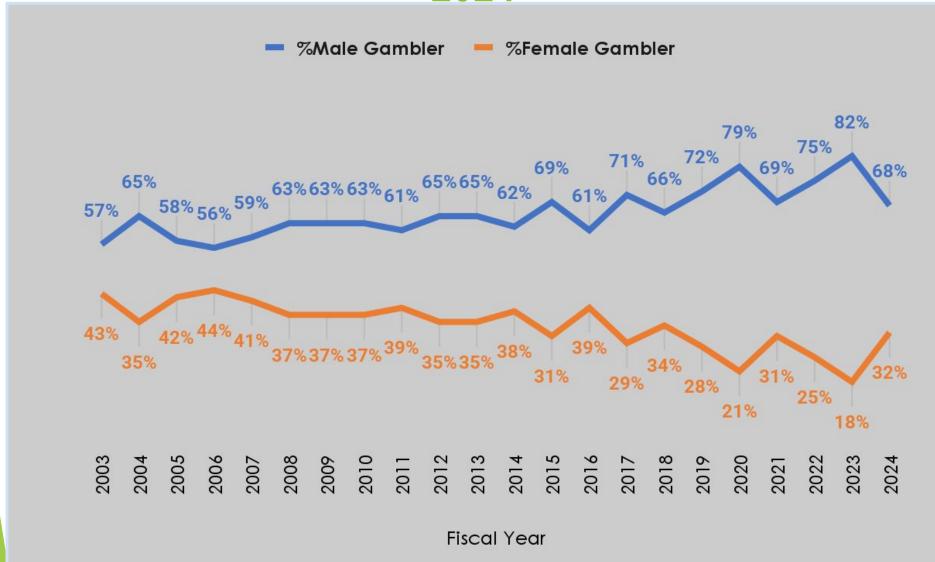
One anomaly in the data 2003

- Slots introduced to Iowa
- (my opinion- treatment less successful for women due to treatment modality different for slot players vs sports gamblers
- GA was mostly men and some men and women not comfortable

- Men entering treatment 54%, 54%, 48%
- Women entering treatment 46%, 46%, 52%
- What changed?
- Similar numbers but from 2010 2020 number flipped to women 55% men 54% average
- Casinos moved from 80% table games to 80% slots from 2010 to present

2008-2010-202

Nebraska Gambler Gender Distribution: FY 2003 - FY 2024



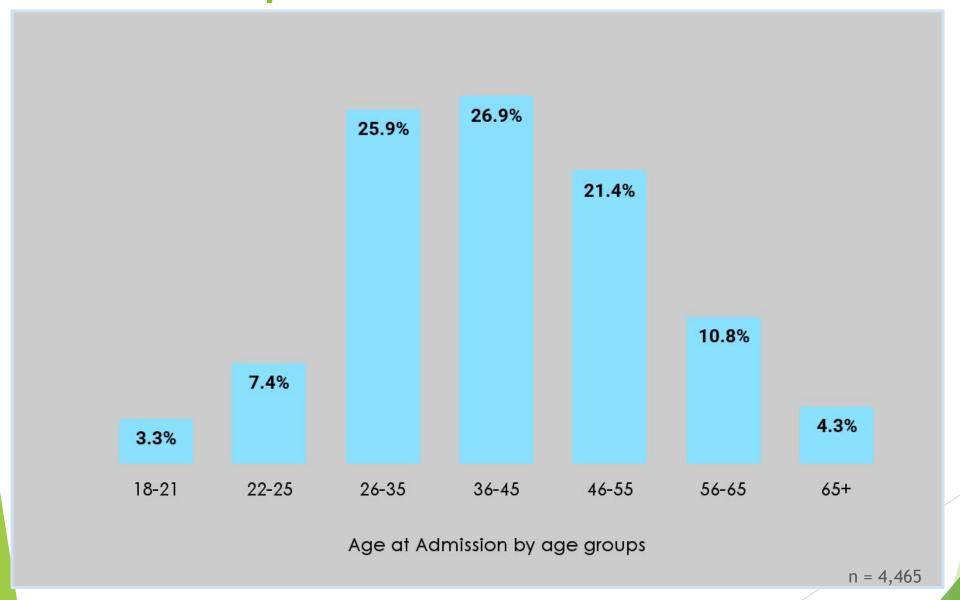
In 2003, the percentage of male gamblers was 57%, and female gamblers was 43%. By 2024, male gamblers accounted for 68%, while female gamblers had dropped to 32%.

The key takeaway is that the percentage of men seeking counseling has generally increased, while the percentage of women seeking help has declined.

	-	2012-2015	2016-2020		2021-2022	
				>	(Covid)	
•	18/24	4%	18/24	6%	18/24	3%
>	25/34	17%	25/34	25%	25/34	48%
>	35/44	<u>19%</u>	35/44	<u>24%</u>	35/44	<u>27%</u>
•	totals	40%		55 %	60%	
>	45/54	27%	45/54	27%	45/54	6%
>	55/64	23%	55/64	15%	55/64	23%
	65+	9%	65+	9%	65+	11%

Age entering treatment

Nebraska Gambler Age at Admission by Age Groups: FY 2003 - FY 2024



Average age at admission: 41.3

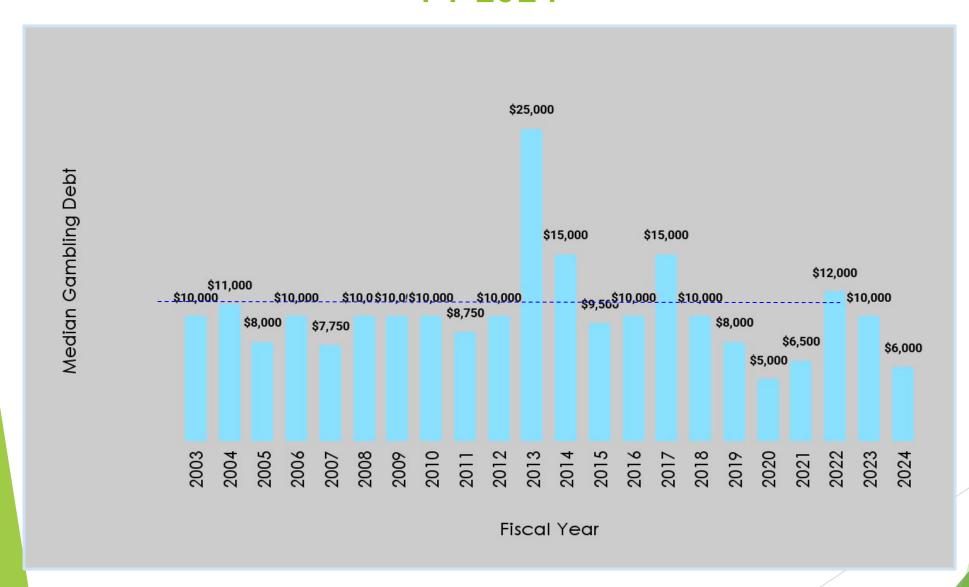
Median age at admission: 40

The majority (74.2%) of individuals admitted into long-term counseling are between the ages of 26-55.

Self Reported Debt (average percentage)

	> 20)12-2015	2016-2020	2021-2022 (Covid)
>	\$1-4999	6.5%	13.5%	28.5%
	\$5,000-9,999	9.1%	11.72%	7.5%
	\$10k -24,999	17.85%	17.72%	28.65%
	\$25K -4,999	11.55%	15.04%	19.95%
	50K -99,999	12.57%	14.86%	10.00%
	\$100K -250K	14.00%	12.54%	12.20%
	\$250K +	4.6%	2.88%	00.00%
	Unknown	10.00%	4.8%	00.00%

Nebraska Gambler Median Gambling Debt: FY 2003 - FY 2024



- Accumulated gambling debt: \$38M (does not include outliers)
- Average gambling debt: \$13,550 (does not include outliers)
- Overall median gambling debt: \$10,000
- On average, 66% of gamblers hold gambling debt.

The overall trend indicates that gambling debt has fluctuated but remained relatively stable, except for a key spike in 2013.

The median gambling debt dropped significantly in 2020 to \$5,000, possibly due to COVID-19 lockdowns reducing in-person gambling.

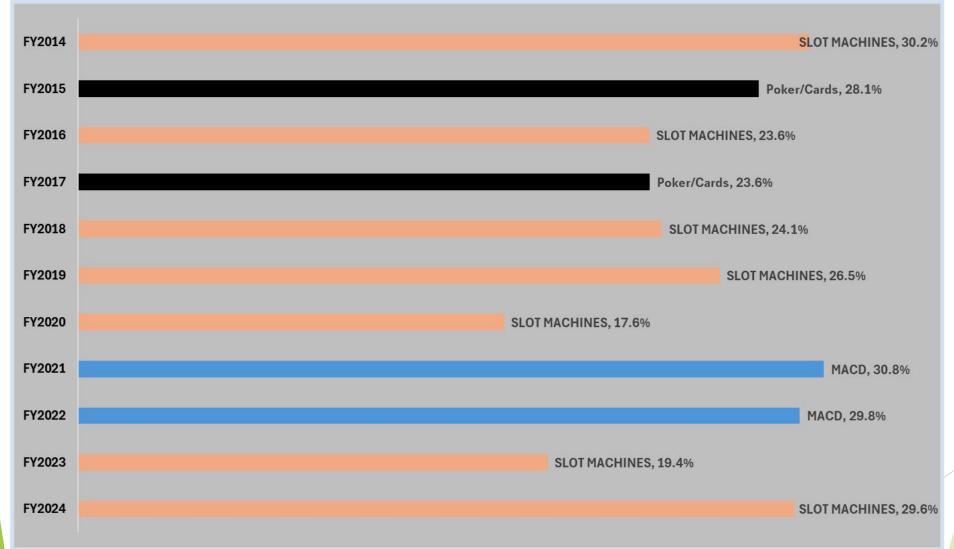
Game of choice Gamblers choose up to 3 games they played prior to treatment

2012-20	2016	-2020	2021-2022
			(Covid)
Scratch off	17.35%	17.86%	51.95%
Slots	32.45%	27.82%	31.45%
			(online?)
Fantasy spor	rt 0%	.74%	0%
Sports	4.82%	5.32%	1.2%
Video poker	6.2%	5.7%	2.4%

Game of choice Gamblers choose up to 3 games they played prior to treatment

	2012-2015 (Covid)	2016-2020	2021-2022
Bingo	4.47%	3.8%	0%
Cards	5.8%	6.32%	1.4%
Casino/table 10.45%		11.94%	29.4%
Internet	2.65%	3.92%	10.55%
Keno	1.04%	1.68%	0%
Lottery	10.42%	10.58%	8.15%
Other	1.65%	2.4%	0%
Racetrac	k 1.72%	1.96%	0%

Nebraska Preferred Gambling Activity: FY 2014 - FY 2024 (*)



Slot Machines have been the preferred gambling activity for 7 out of the last 11 years.

Mechanical
Amusement
Cash Devices
(MACD) were the
preferred
gambling activity
during the
pandemic.

(*) Preferred gambling activities were classified using different options before FY2014

Arizona

Now let's look at some Arizona data

How many Arizonans entered treatment

►2024=992 2023=948 2022=816

►2021=512 (pandemic) 2020=774 (pandemic)

2019=887

2018=842 2017=875

2015= 875

► 2016-the #'s are not accurate because of the transition to an electronic system

Problem Gambling (AZ Descriptive Stats)

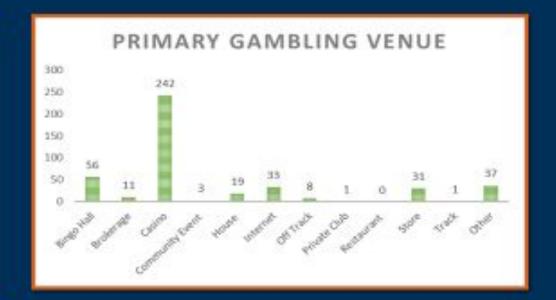


Primary Gambling Problems (Arizona statistics)

- Clients Served (FY 2020):
 - N=774

Reported Gambling Activities Causing the Most Problems				
Lottery	17	5.3%		
Slot Machines	180	55.7%		
Horses/Dogs/Animals	2	0.6%		
Sports Betting	1	0.3%		
Bingo	1	0.3%		
Cards	63	19.5%		
Video Poker	22	6.8%		
Internet	7	2.2%		
Stock Market	0	0.0%		
Other	6	1.9%		
Unknown	24	7.4%		

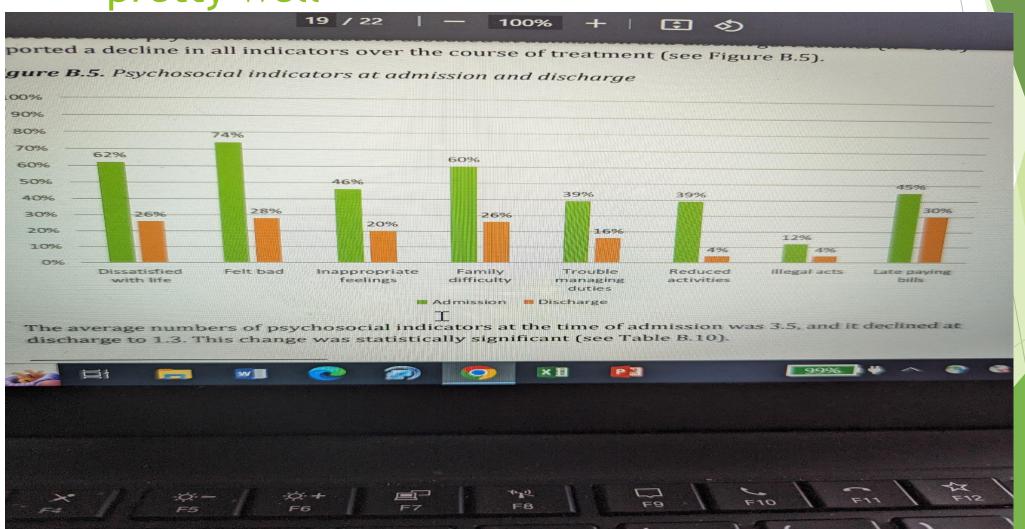
Average Time-Course: 13 Sessions





Now let's look at how we are doing in helping those seeking recovery!

Results admission and discharge: we are doing pretty well



Who pays for gambling treatment

1990-2015 100% of all patients seeking treatment were self pay or state funds

2015 to present 2022 50% of all patients entering treatment in lowa used insurance that pays for gambling treatment.

Sometimes higher deductible so lowa will pay for the deductible until the insurance kicks in

Helps Iowa change the focus of treatment dollars to additional care needs

The general public has no idea gambling treatment is covered

Health care plan covers Gambling treatment

Yes: Male 12% Female 7%

Unknown Male 79% Female 89%

Are there medications to help Disordered Gamblers?



1986/87 No medication studies were conducted and no medications given to gamblers in recovery



2024

Naltrexone has the most potential for treatment of problem gambling

•

N-Acetyl Cysteine

N-Acetyl Cysteine

- Results: 83.3% of responders experienced reduced leveled or stopped gambling
- 28.6 of Placebo responders reduced of stopped gambling
- Study repeated in 2017 83% reduced gambling for additional 6 weeks
- 72% of placebo respondents went back to formal levels of gambling



Where is Gambling and disordered gambling headed

Where do I think we are headed?

Here are my ideas...



Gambling and gaming

- More gaming games are becoming gambling games
- No stigma between gambling and gaming
- Younger adults are NOT going to casinos at the rate of previous generations
- Al will begin to influence your gaming choices by figuring out your preferences and steer you to games that will keep you playing

Online gambling

- More and more people are choosing online gambling
- Online gambling has less stops and less responsible gambling messages
- Online gambling has proven to be highly addictive
- Sports gambling and gaming will take in more money as people turn to online games. Non- traditional sports and games will become popular as traditional games like football and basketball lose popularity
- Gaming will replace sports as the most popular sporting events to watch and bet
- The federal government in a deficit economic position will turn to taxing gaming for additional revenues
- Let's not forget the effects of Bit-coin as it is changing the way we pay for gambling

What Does the future hold for gambling and disordered gambling (my thoughts)

Counselors:

More funds available for treatment of gambling (short term)

Bill in congress to fund gambling treatment and research (the first federal bill)

Insurance companies are now mandated in many states to fund gambling treatment

More states are legalizing different types of gambling (more revenue)

Training for counselors has gone online as well as in person

Short term sports betting patients will increase and counselors will need to be trained to meet this non traditional group

Al counseling will make it to the online arena and more people will choose this form of therapy as the years go on. Face to face relationships are becoming less and less important Where are we headed your turn

Where do you think we are headed?

There are many forms of gambling and many faces of addiction





Each different but all in need of your assistance and guidance





Thank you and...

Lets be prepared for the future and help those affected and afflicted!

