



Transcript: The Nexus of Substance Misuse Prevention and Problem Gambling Prevention

Presenter: Rebecca Bishop
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REBECCA BULLER: Good morning, everyone. Welcome. We are going to get started in just a few minutes, when we get everyone into our Zoom room. So please just join us and hold steady for just a bit. Thank you.

All right. We're right at 10 o'clock, and we're going to get started. Let's just give it a couple more minutes, maybe one minute, because we've got lots to cover today. You have joined us for The Nexus of Substance Misuse Prevention and Problem Gambling Prevention. So hold on. We'll get started in just a minute.

And good morning. We're at 10:01, and we're going to go ahead and get started. You have joined The Nexus of Substance Misuse Prevention and Problem Gambling Prevention, presented by Rebecca Bishop.

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A few housekeeping items-- if you have technical issues and, please, if you're having problems individually, message Rebecca Buller, me, or Jen Winslow in the Chat section at the bottom of your screen. And we'll be happy to assist you. Questions for the speaker can be put in the Q&A section at the bottom of the screen. And we will help get those to our presenter.

You'll be directed to a link after the event. It's a short survey. And we'd really appreciate it if you could fill it out. It takes about three minutes. And it helps us to continue to provide high-quality, low-cost or no-cost training opportunities.

And finally, certificates of attendance will be sent out via email to all those who attend the full session. And it can take up to two weeks to receive those certificates. Just a quick reminder, if you don't see it in two weeks, double-check your spam or trash folder just in case. Sometimes they go there. And if you'd like to know more about what we're doing or information on upcoming events, please see our social media pages.



And now I want to introduce our presenter, Rebecca Bishop. Rebecca specializes in initiatives to improve the health, mental health, and well-being of youth in high-risk populations. She brings expertise in mental health promotion, health equity, cultural and linguistic responsiveness, community mobilization, and violence prevention and intervention.

Bishop has a history of applying a health and racial equity lens to substance use, youth development, violence and problem gambling prevention, as well as mental health issues. She leads EDC's Gambling Prevention Technical Assistance Center and has managed three regional planning processes across Massachusetts to learn about local knowledge, beliefs, and attitudes related to gambling, resulting in population-specific prevention strategies.

Bishop holds a master's in social work and mental health administration from Boston College Graduate School of Social Work and has a certificate in nonprofit management and leadership. I want to turn things over to Rebecca and say, thank you for being here. And go ahead, and you are in charge.

REBECCA BISHOP: Thank you, Rebecca. Bear with me here while I get the PowerPoint up and running. Perfect. Hello, everyone. I'm really excited to be here with you. As was already said, this is The Nexus of Substance Misuse and Problem Gambling.

In today's webinar, we are going to accomplish the following objectives. We're going to discuss this complex relationship between problem gambling and substance misuse. We're going to look at the characteristics that highlight this relationship.

We're going to look at challenges to addressing both of these issues. This includes exploring shared risk and protective factors. We know that's essential to prevention. Then we're going to look at collaboration, barriers to collaboration, as well as collaboration strategies for both this nexus, as well as these fields to move forward to address this nexus.

Let's start with looking at these two issues separately before we jump into this nexus. If we think about substance misuse, approximately 59% of the population has participated in substance misuse in the last month. And nearly one in seven young adults has had a substance misuse disorder.

If we look comparatively, when we look at problem gambling, only about 3% of the US population engages in problem gambling or has experience problem gambling. And nearly 1 in 10 young people has problems or developed problems related to gambling. As we see, substance misuse is far more known as an issue but also prevalent across the country. And when we think about problem gambling, it's only 3% of the population has this issue, partly because it's a new issue. But also, there's lots of efforts happening across the country that we'll get into to strengthen the systems.



Why do we care about this nexus? And why do we care about these two issues? We know this for substance misuse, but many of these things are also true for problem gambling. The youth brain, we know, is not fully developed until 25. So gambling can be dangerous for youth, just like gambling can be dangerous-- just like substance misuse can be dangerous for youth.

Youth who gamble early are far more likely to develop problem gambling later in life. We know this is also very similar for substance misuse. There's an article, actually, from a study that happened exploring the impact that gambling has on the human brain. And the way they described it is, "The brains of people anticipating a win at the roulette table"-- or any gambling, for that matter-- "is much like those taking euphoria-inducing drugs."

So again, gambling does have a direct impact on the brain, just like we know substance misuse does. So when we think about youth, this is really an important nexus for them. And it's an important nexus for prevention that we want to consider.

When we think about-- we know parental perceptions are really important to prevention. And the same goes for this nexus. In this particular study of parental perceptions of serious youth issues, you see here that there's a very high perception of harm for drug use, for alcohol use, for drinking and driving, all public health issues that are well-known. And there's been lots of work on them.

However, when you take a look at gambling, you see the parental perceptions are not as-- the perception of harm is extremely low, 40%. Gambling was the lowest issue, meaning parents didn't think it was that serious. Part of this is the reflection of that gambling is very much part of our society. There's many people that I talk to in my work at the Center of Excellence on Problem Gambling Prevention that doesn't even understand why gambling is a problem.

The question is often, what is this gambling thing? Why is it even a problem? And we know that when parents don't see something as a problem, we know that they don't talk to young people about it. There's not honest conversations. There's not warnings about this. And the reality is parents should see this just like they see any other risk behaviors.

Here's another study, a graph from another study that actually named risky behaviors. And once again, you see a similar trend. And also note this is both parents and teachers. So we talk about who has influence on young people. Both teachers, just like parents, identify drug use as a really risky behavior. Violence and bullying, alcohol use, even excessive video gaming both parents and teachers saw as a risky behavior.



However, once again, gambling is ranked the lowest, both among teachers and parents, lower among teachers, which is really interesting because there's a lot of gambling happening in schools. Actually, last year, I actually trained a group of resource officers who operate in schools because they're seeing kids on their phones gambling. They're seeing more fights or disagreements about gambling in schools. So this is something we want to address in this nexus.

And the other thing I would say is any other issues connected to low perception of harm we should also look at. There might not be studies. We might not have data. But this is clearly a challenge. And we know in perception, when there's a low perception of harm, we know that use or activity significantly increases.

Here is a little bit more data as we carve out this nexus and kind of think about it. This is data that looks at the percent of-- this looks at youth addictive behaviors by grade. And so we have alcohol, drugs, cigarettes by grade. We have both total use, as well as weekly use.

And very similar to the trends in the other graphs, we see that gambling is being used at the highest rates-- higher than alcohol, higher than drugs, cigarettes, and gambling. It's interesting. When I talk to people, when you talk about perceptions, and especially when people aren't educated about this nexus, hands down, if you ask people, people think these numbers are flipped. They don't think that gambling is happening at such high rates, especially among this grade.

So if we think about seventh grade, it's a transition year. Also note that alcohol is also higher than drugs for both total use and weekly use right. The rates of alcohol are higher than drugs.

This is really a call for parents and a call for all adults in young people's lives to not just say-- to not just talk about this as an important issue, but to also question, how are young people gambling? What are their thoughts and perceptions about this issue? And begin to address it just like substance misuse.

Why is this nexus important? We know that there are populations-- and we're going to get into more populations. I know we talked about youth. But we're going to get into more populations. These populations are impacted at and are at significant risk when you consider various dimensions of intersectionality.

Just as an example, we just talked about youth. If youth are at risk for alcohol, tobacco, cigarettes, other drugs, and they're at risk for gambling, if we just look at that alone, that's a lot of intersectionality and really elevates the level of risk for youth.



This nexus is not comprehensively being addressed around the country. We, certainly, at our center, certainly at Education Development Center, have connected with more and more states that are interested in addressing problem gambling along with substance misuse. But there are also many states that are not even thinking about addressing these issues.

Problem gambling can often be politically connected to thoughts and beliefs about the issue at the state level. And so if it's a state that is not interested in bringing gambling to their state, it might not even be an issue that they're willing to address.

There are populations impacted that are not being served.

One of the things we're doing in Massachusetts is we are specifically working with local communities. And we're specifically focusing on prevention. Both of those things, when you look at certainly the field of problem gambling-- both of those things have very little capacity.

So to my knowledge, Massachusetts is the only state working with local communities on this issue. And so if we think about the many other states that have local communities that may have this need, they're really not being addressed. And that's just, really, one small example. There's many, many examples of that.

Addiction is a significant health problem. And it's being partially addressed. We looked at brain development with problem gambling. The reality is that the same public health supports that we have for substance misuse-- it's going to be really important to think about them for problem gambling because these two issues are so closely connected. Addiction is addiction, right?

I'll also just give one more example. In Massachusetts, we work with-- one of the populations are people who are in recovery from substance misuse. And we work with them to try to delay or prevent an addiction to problem gambling. And so if we only address one and not the other, again, it highlights populations that get left out and don't get the services they need.

And then, finally, I can wave a flag the whole webinar. But there's a huge need for prevention for both this nexus, as well as problem gambling. It's going to be important to-- so this nexus feels new because not a lot of people know about it. Not a lot of people are addressing it.

But the good thing is we know prevention. And especially in the substance misuse prevention world, there's lots of prevention science to pull from, also the public health field. And so we want to pull those best practices that we know. And we want to apply it to both this nexus, as well as new public health issues, like problem gambling.

REBECCA BULLER: Rebecca?



REBECCA BISHOP: Yes.

REBECCA BULLER: We do have a question, and it was about one of the tables you showed recently. We have another Rebecca, who asked, in the table with the grade level use depiction, does cigarette category include vaping? Do you know if those included vaping?

REBECCA BISHOP: I do not know if they included vaping. This data is from-- it's about 10 years old, so I doubt it. But I don't know for sure. It's a really good question. Really good question, especially when vaping rate's so high. Are there any other questions? All right, perfect. Thank you for that.

All right. So let's move on to definitions and make sure that we're all on the same page with language. Sometimes this can get confusing. We'll start with problem gambling. So the term "problem gambling" really is describing any behavior that compromises, disrupts, or damages personal, family, or vocational pursuits, essentially negative consequences. If there's any gambling that results in negative consequences in anyone's life, it's problem gambling.

I'll just compare that for a second to substance misuse, very similar definition-- excessive alcohol or drug use that is used in an unintended way that results in negative impacts in a person's life. For the most part, this is-- and I'm speaking very broadly here. This is when somebody has developed a problem or they're on their way to developing a problem.

Now, when someone has actually developed the problem, that's when we refer to it as a gambling disorder or a substance misuse disorder. And the characteristic we know of a disorder is it's diagnosable in the DSM-5. There is a category for gambling, as well as substance misuse.

It is important to note that the categories in the DSM-5-- these are connected. So the gambling grouping of symptoms were developed after or mimic after the substance misuse ones. Again, I think this really illustrates the connection between these two issues. So let's just remember this moving forward. But this is language that we need to know as we continue looking at this issue.

More language-- and I'm going to focus on gambling because gambling is likely the new topic for folks on this webinar. This is called the gambling continuum. And here's what's different between problem gambling and substance misuse.

So in the problem gambling world, just because you gamble doesn't mean that you have a problem, whereas with substance misuse, once someone experiences substance misuse, it's obviously not-- they don't necessarily have a problem. But substance misuse in itself is an indicator. It is not necessarily the case in gambling.



So the gambling continuum starts with no gambling. There are many people that don't gamble. There's lots of reasons why they don't gamble.

And then there are recreational gamblers. Recreational gamblers are people who gamble for fun. This really is the large majority of the population. Very similar to alcohol and drugs, many people who misuse substances do not develop a problem. It's very similar for gambling. Many people who recreational gamble do so without negative consequences.

Once you move on to at-risk gamblers, this is where people may begin to start experiencing consequences. So at-risk gamblers are people who are either at elevated risk for problem gambling, and we'll get into those groups. Or they are people who may have experienced some level of problematic gambling. For example, they cannot decrease the amount that they are gambling. Or they may spend more money than anticipated when they're gambling. So these are just indicators. It means they're at risk.

We then see the category of problem gamblers, people who are experiencing some negative consequences. And then the final category are severe problem gamblers. Many times, these are folks who can fit into that DSM category that I just referred to. For the most part, we will talk about this group, the problem gamblers group.

When we get into risk and protective factors, this at-risk gamblers group will be really important. For example, in the gambling space, youth are in this category. People who experience substance misuse are in this category.

I just point this out because as we get into conversation, again, I just want to pay attention to the language. Like any continuum, people can move back and forth between this continuum. Perfect. I went through many of this. I won't focus on it.

The other thing I just want to name to make sure people know-- I keep using the language of "gambling." I want to make sure everybody knows what that means. Here are examples of gambling. Just take a look. I often-- sorry, my screen is delayed here.

Some people are often surprised about things like bingo. Yes, bingo is still gambling. There are lots of charitable categories that places like church may have that. It's still gambling, right? I just want to pause here. I'm wondering if there are any questions about what I've said so far.

REBECCA BULLER: I'm not seeing any in the Q&A. And I think we've got some people making comments, sharing comments. But no, no questions.



REBECCA BISHOP: Perfect. And it sounds like there is some familiarity with gambling as well, which is exciting, and people really getting the connection between addiction. Addiction is addiction.

REBECCA BULLER: It is. Also, there is one quick question. Would gaming, like loot boxes, et cetera, be included?

REBECCA BISHOP: Yes. Alexis, thank you for that. Absolutely. There's a whole new category of gambling-- not new, but I know I mentioned video gaming. Within video games, there are things called loot boxes, which basically is something people can purchase without knowing what's in it.

And the hope often is, I can get more x, whatever I need to play this game. Sometimes it's kind of like bucks that you can spend in the game. Sometimes it's longer life or more weapons or whatever kind of game you're playing. But the reality is if you put up money, and you don't know what the outcome is, it's essentially gambling. So yes, those are huge.

The other kind of gambling I'll just bring attention to-- it's on here-- is sports betting. Sports betting is rapidly increasing in this country. And I'll just give you an idea of how big sports gambling is. If you go on ESPN.com, they have their own section for sports betting. This is big money. And this is things that youth will have access to. Youth at all ages will have access to it. So great question.

This is time. We have a trivia question. Trivia question-- if you flip a penny, and it comes up heads four times in a row, and the next flip is more likely to come up tails than heads. True or false? I'll say this again. If you flip a penny, and it comes up heads four times in a row, the next flip is more likely to come up tails than heads. True or false?

I see falses, but I see some trues. I see some falses. All right. 50-50, nice. Absolutely, to an extent. So I love how everybody is thinking. It's a false, just like everybody is saying.

And for those of you who said yes or to an extent, here's why. There is no relationship between the previous outcomes and the next flip of the penny. There's only two sides of the penny. Someone said it. It's 50-50. They are absolutely unrelated events. The penny is just as likely to come up heads as it is tails.

Part of why I point this out-- this is probability-- is one of the ways and one of the risk factors for gambling, one of the ways to say, is this gambling, to know if you're gambling, is to explore probability. And it's actually a really good thing. It's a protective factor if you understand this because you know it's not about feeling good. It's not about a dream.



Some people say, oh, my hand is scratching. I'm going to be lucky. It's not about any of those things, no superstition. It's about probability. And the numbers don't lie.

The reason the lottery is so popular is because there's so many people that don't know this, that don't care about the odds, that don't consider the odds. And the reality is with gambling, it's important for you to do that so that you can be realistic with yourself about what's actually likely to happen.

And we know people who understand gambling is connected to odds-- it's a protective factor. So those are often the people who say, you know what? I'm going to go to the casino, or I'm going to gamble here. But I'm only taking x amount of dollars. Once that's gone, I'm done.

It's not people who think, that's what I feel. It's happening. I feel it. It's coming. It's not that superstition piece. So this is an important element of gambling, knowing the odds.

Here is one more. Before I go on to that, let me just check the comments. Law of averages. Yeah. So, Sally, I love what you're saying when you're talking about gambling often makes people feel good. And it's that dopamine.

So earlier on the slides, it was this comparison of what happens in your brain is something similar to what happens when someone engages with substances. And it's the dopamine. We're going to get into this a little more. But our brains have the same chemical reaction. And it feels good.

REBECCA BULLER: Rebecca?

REBECCA BISHOP: Yes.

REBECCA BULLER: There was a quick question, too, in the Q&A that says, what relationship exists between autism, ADHD spectrum, and drug, gambling, risk taking, and addiction?

REBECCA BISHOP: Very interesting. So I cannot say for sure. But I will say, in the gambling space, people with disabilities are a risk-- are a group that's at high risk for developing problems with gambling. And when we talk about this nexus, we know that these two issues often co-occur at the same time. This is what we're talking about today.

We also know-- and we're going to get into this more. We know mental health also often co-occurs with these issues. So I don't necessarily know the research on specifically ADHD. But certainly, it is a category. Having a disability puts you at higher risk for these things. Thank you for that. Any other questions before we go on to the next question?

REBECCA BULLER: I don't see any.



REBECCA BISHOP: All right. Perfect. Next question-- gamblers who lose large amounts of money just don't know how to gamble. Gamblers who lose large amounts of money just don't know how to gamble. True or false?

Nice. Nice. I love that somebody laughed. Believe it or not, we actually have a quiz, like a 10-question quiz, we do with folks when they're learning about problem gambling. And you'd be surprised.

Most folks had false or disagree. You guys are actually correct. And it's really the answer that I thought would be really helpful for all of us as we're thinking through this. Skill and knowledge play a small part in some types of gambling, such as certain card games. But for the most part, gambling is a game of chance. And the gambler has very little control over the outcome.

This underscores, really, again, what we were saying about odds. But what I found is the language is helpful for people. Pointing out that skill and knowledge right have very little to do with gambling-- pointing those out specifically.

I mentioned ESPN earlier. And if you talk to people who are interested in sports, those may be some folks who they often look at stats of players. They want to look at their past performance to be able to try to figure out what they're going to do in future performances.

And the reality is it doesn't matter the gambling activity. If we stay firm to knowing the odds, if we're clear about skill and knowledge, just only plays a small part that the person who's gambling has very little chance or control over the outcome. It will put us in a really good place to look at gambling realistically, if that makes sense.

Also note that with substance misuse, these elements do not exist at all. However, yeah, I think the comparison is really interesting. My background is in substance misuse prevention, among other things. And when I came into the gambling space, I had absolutely no idea.

I also see another question. It says, is the kid's arcade claw game gambling? John. So the kid's arcade game, you put money in, and you try to get a reward. You don't know for sure. So in our definition where the outcome is uncertain, absolutely. It is gambling.

We often talk about Dave and Buster's, Chuck E. Cheese. These are all companies created by the industry, really, to get families involved in gambling. It's also fun. There are many times you can participate in these things, again, and not experience negative consequences. But it is important if we're going to talk about prevention to talk about how young people are prepared to play these games and think they're harmless. That's not by accident.



All right. We'll go ahead and move on if there's no other questions. Perfect. So the intersection, let's go ti--

REBECCA BULLER: Sorry. Rebecca, one just came in.

REBECCA BISHOP: No worries.

REBECCA BULLER: Of course, they always happen that way. Bill also wants to know, has legalized gambling and the lotto increased acceptance and problems with gambling?

REBECCA BISHOP: So yes is the short answer. Legalized gambling-- so I'll say a couple of things. One is cities and states are the largest beneficiaries of gambling because licensing fees-- it's really expensive for anyone to come into a city and set up a gambling shop. And cities and states get those taxes and revenues.

And so because of that, they promote. They set up systems. They support it. When casinos are built, it's closely connected to community development. So there's people in communities that get resources. So yeah, the acceptability about gambling has significantly increased in this country.

When you think about the impact of COVID on state budgets and, really, the need to look for dollars and look for more money and resources, many states have turned to sports betting. Many states have expanded gambling, even outside of sports gambling. So absolutely. And then there was another-- can you say the question one more time? Because I think there was one more piece besides the lottery.

REBECCA BULLER: Sorry. Do we lose more than we gain from legalization? That's from Bill. And Bill, did we answer the first question fully, or your previous question? Maybe this is a rhetorical question. Do we lose more than we gain from legalization?

REBECCA BISHOP: Yeah, no, it's a good question. It's a good question. And so I talked about beneficiaries. Here's the other consideration. In Massachusetts, we're really lucky that we have-- we're really lucky in Massachusetts. We have some of the largest amount of prevention dollars compared to other states.

And the reason we do is because when gambling was expanded in the state, there were some mechanisms they built into the legislation that guaranteed funding for prevention. And so, technically speaking, this is similar in some ways in the substance use world. So technically, it is gambling revenues that go into a fund that fund prevention activities in Massachusetts.

And so, to your point, there are benefits of expanded gambling. There certainly are. There's no question. But there are also harms. And I think we're



really lucky in Massachusetts because the state acknowledges those harms, says, we know there's going to be harms that come from this. And it's our responsibility to set up the state in a way that can make sure people who need help get the help that they need.

So I encourage everyone to have this conversation. States should have the conversation. Organizations should have the conversation, the cost-benefit analysis. And then decide where you want to roll your sleeves up and begin to address the issue. But I think it's a really important question, so thank you.

REBECCA BULLER: Rebecca, one more quick question. Larry's wondering, in those figures for sports gambling, does it include high school sports? Or is it professional sports only?

REBECCA BISHOP: So thank you, Larry. When it first came out, that was everyone's question. So to my knowledge, it does not include high school sports. But it does include college sports, which I think is risky. It's risky. So it's a good question.

There are lots of people who feel like that because colleges and universities make so much money off the backs of college students that college students should be allowed to not just participate in gambling. But they should also have access to more dollars, basically. I think it's really interesting. Great question. Thank you.

All right. As we move on into the intersection, keep the questions coming. We will answer them. I really like how everybody's thinking about these issues, certainly thinking strategically about gambling.

All right. Let's look at this intersection more. So co-occurrence rates are between 25% and 63%. Different studies say different things. It's actually a really high co-occurrence rate. Even if we look at the bottom 25%, that's still pretty significant. And if you go all the way up to 63%, that's very similar. And I think up to this point, we've seen many similarities in these two issues.

When we look further at comorbidities, problem gambling rates among those who misuse substances are 4 to 10 times that of the general population. Here is that connection that I mentioned earlier. So when we look at risk, we know people who misuse or have a history of misusing substances are very at risk. But if they add gambling or begin to gamble, not only are they more likely to develop a problem, but they're 4 to 10 times more likely to develop a problem.

If you think about it for people who are in recovery from substance misuse, this means they are not safe. We just talked about how gambling is looked at as a normal activity. We know ESPN is even talking about this. So sports can potentially get people who are in recovery from substance misuse-- can potentially expose them to something dangerous for them. So this is significantly higher risk.



I'm just looking at the chat. Sally making the connection between cigarettes and how long it took her. Absolutely. So this is significant risk.

I have to tell you, so I've been doing work in problem gambling for about five years. And when we first started doing our community assessments, I remember-- this is us in prevention. We thought there might be a connection between problem gambling and substance misuse, but we really weren't sure.

And so we started doing focus groups with people in recovery. And I have to tell you, they were like, there's definitely a connection. They knew immediately. So I think this highlights not just risk, but how unsafe people are in our communities. We believe that there's lots of supports currently, so just looking at it different perspective.

All right. Here are some other things that contribute to this nexus between these issues. Let's go back to prevention for a second and think about how we traditionally address issues within substance misuse. In substance misuse and prevention, when we are addressing underage drinking and we want to impact retail availability, we often go partner with liquor stores, package stores.

In the problem gambling space, there is potentially room to partner with lottery stores. We always get stories and stories about how people buying lottery tickets impacts the community. And it's in multiple ways.

Something else to explore-- social availability, family and Fridays. We know that people get access-- so young people get access to gambling through family and friends. We know that young people get access to alcohol and drugs from family and friends. So again, a way to address both these issues in a similar way.

Also, enforcement and adjudication-- so what does that look like? So we know on the substance misuse side, young people who get caught misusing substances or participating in something illegal-- there's lots of diversion courts for them. Well, on the problem gambling side, there's room for that. I don't remember what state. But there's actually a state that was working with the courts for young people who got caught in casinos or gambling illegally.

Exploring social and community norms-- so we just talked about problem gambling and how many people see this as a normal activity. We know there's lots of stigma-related efforts in substance misuse. I think about attitudes favorable to use. It's the same exact thing.

Also, promotion-- if we think about positive risk-taking, this is an issue that you can address with both substance misuse and problem gambling. Actually, in Massachusetts, we have a problem gambling-- a initiative focused on youth and their caregivers called PhotoVoice. And we specifically focus on positive



risk-taking, not just telling young people, don't gamble, but replacing it with something, acknowledging that young people will take risks already. And that's something that can be addressed.

I also think about substance misuse programs who are already addressing some of these things. It could be really easy to continue to address the same thing with a small change.

Pricing-- this low price, high demand. Right now, we know this is true for drugs and alcohol. There's lots of efforts to keep prices out of certain place for demand. Certainly, I think about underage drinking, where the alcohol that's cheap gets put in a different place, like maybe behind the counter, so it's not easily accessible.

When it comes to pricing for problem gambling, so many young people get free access to gambling on phones because you can gamble right on your phone, the internet, low to no cost. What is also true is a lot of young people have access to their parents' credit cards. So pricing is a big deal. If someone ever wanted to address how to keep prices a little bit higher so that it's out of youths' reach, it would be really interesting.

And then low perceived risk-- we talked about this earlier with the graphs that we looked at. And increasing perception of harm is certainly something that could happen for both issues, substance misuse and problem gambling.

In the PhotoVoice project that I talked to about a little earlier, this is what we do. We actually address substance misuse and problem gambling. And we talk about increased perception of harm.

Young people have also identified-- one of the things, for example, young people identified-- areas in your community that are not cleaned up and inhibit young people from playing there. You'll often, on the ground, see needles. You'll see smoking paraphernalia. You'll see drug paraphernalia. You'll see gambling paraphernalia. You'll see scratch tickets.

Scratch tickets are all over the place when you talk about littering. And it contributes to many of these things that we just talked about here and makes people think, it's just part of being an adult-- an adult.

I encourage you guys to keep this if you are ever interested in addressing these things. It is a cheat sheet that is very, very helpful. Early on when doing this work, it was hard to identify these things. So keep this if it's ever possible.

The other thing I'd just encourage if you have a youth group that you're already working with, and you bring in either speakers or you talk about different topics-- that's a great way to introduce problem gambling. Just pick a day. We're going to talk about a new topic. And then let the youth draw connections because they, in my experience, are really good at doing that.



Any questions before we move on to this?

REBECCA BULLER: We do have a question. It popped up in the chat. We've got one in Q&A. April asks, do we know what extent grocery store-- looks like California scratcher ticket machines are monitored by employees and if they intercede when they see youth accessing them? Do they card youth who look like they may be too young? So for Minnesota, I don't know what that is, but maybe you do.

REBECCA BISHOP: Yeah. So thank you for that. So I know you're talking about the vending machines. They're in grocery stores. I know at my grocery store, once you go through the line, you pay for your food. They're often right there. And in my experience, in Massachusetts, they are not manned. People are not watching them. I think it's a great opportunity for intervention. That's a really good point.

And in terms of, are they carding, it's a really good question. And this is when I encourage folks to begin with the community assessment. In casinos, often casinos have very good systems to make sure people are the age they're supposed to be in order to play games in the casino. But what you are talking about is there are lots of opportunities in communities for people to gamble. And you're right. And there is not as much enforcement, at least in my experience that I've seen, in some of those community options.

For example, lottery tickets-- I've never seen anyone carded to get a lottery ticket. I see the signs that say, you have to be x years old. But there's also not initiatives, necessarily-- you know how we do underage drinking, where you see if people can buy alcohol if the store will allow them? That could also be really interesting in the gambling space when we're thinking about prevention. You could get a really good handle on, are they carding? Do they care? Do they not care?

The other thing I would just call attention to are relationships among young people. It's really important that they are taught that there's ways to have fun without actually gambling. And so explore young people's norms and what they think is normal. Because when we did that in Massachusetts, there were all types of youth groups that were gambling together. And because nobody had talked to them, they didn't even think it was a problem. So thank you for that question. Really good point. Any other questions?

REBECCA BULLER: Yes. Well, Bill just says, thank you for the discussion and the direction of the analysis. Marcia is asking, I work with the older population. Some of these folks are treated very well in casinos until their money runs out.

REBECCA BISHOP: Yeah, yeah.



REBECCA BULLER: And then Billy Foster says, to purchase a lottery ticket in Mississippi, they have to scan your driver's license to complete the purchase. So that's interesting.

REBECCA BISHOP: Very interesting. And it's a good-- I think, folks, take note. If it's a problem in your state, take note. Where they do that is really smart.

As it is connected to older adults, this is a population at elevated risk. This is typically the group that casinos target or a group that casinos target. They often have the shuttles from their housing development or from their senior center. They have organized trips to casinos. And there are many people that use casinos for their interpersonal development. It's often, I don't have anybody at home, or, I don't have many friends, so I go to the casino to have fun. It can be risky for them. And to your point, if they're not being treated properly in the casino that, too, is a challenge.

There are some-- they're not quite prevention programs. It's more intervention. But there are some intervention programs that operate inside casinos, where there could be some opportunity to engage older folks, either if they're having trouble or if they just need some support. So thank you.

REBECCA BULLER: I think that's it for right now.

REBECCA BISHOP: Perfect. Moving on. So continuing to look at this nexus, interesting things that I found in the literature I thought were interesting just to highlight. Some types of gambling may be more likely to co-occur with substance use disorders-- for example, slot machines. In the gambling treatment space, there's lots of knowledge around the mechanics of different types of gambling and how the mechanics impact either your brain or how people think. If people are interested, say so. I can make sure I get you information about it.

I think the thing to highlight here is if there are certain types of gambling that people are gravitating to, you just might want to take a look at that. Don't assume all gambling is created equal, because it's not. We did identify certain types of gambling that maybe some have more access than others. Some you need to go to certain places. Other times, you don't.

And then there are games of skill. These are those games where you may need some kind of knowledge or skill to play it. So I would just be aware of that.

Gender, culture, and age often impact drugs of choice, gambling participation, and substance misuse patterns. It's really important to note this because it's going to tell you-- based on your community or the population that you serve, it's going to tell you what to focus on.



Just as an example, so one of the populations we work with is the AAPI community. That's the Asian and Pacific Islander community. I've learned a lot since being in this field about the Asian populations and things like Chinese New Year and how connected gambling is to a lot of their cultural events. And many of the groups that we work with are really doing hard work to think about, how do we disrupt this thing that's been in our culture for years and years and years?

There are some cultures-- I have one of my colleagues who works with us. He's from Puerto Rico. And he often talks about chicken fighting, how that is-- cockfighting, how people are often gambling with that, how connected it is to his culture, how people use it not just for economic gain, but it's part of the infrastructure of the country. So many of these things are-- it's just really important to know the population that you're addressing and the population that you're dealing with.

Recreational gamblers and substance misuse problems-- sorry, recreational gamblers with substance misuse problems started gambling at early ages and were more likely to gamble in hopes of winning money and gambled more heavily. So this is a group we haven't quite talked about. But let's just think for a second. And if you hear noise in the background, my son is here. School ended last week, so bear with me.

So let's look at recreational gamblers. These are people who gamble without consequences. So recreational gamblers with substance abuse problems-- so this is a category we have not thought about. But they often gamble at early ages. And they gamble in hopes of winning money.

So if you're gambling in hopes of winning money, it's often a risk factor because you're not thinking about the odds. You're not thinking about what's realistic. You're really just hoping luck is on your side.

And you see they gambled more heavily. So just know, just because someone recreationally gambles, it does not mean that they're safe from all harm. It's really important that you look at these segmented populations. And you're saying, OK, what is their real risk? So just be aware.

The other thing is, obviously, gambling at earlier ages-- we know that that's a risk factor for both gambling and substance misuse. Any questions here about any of these pieces that I highlighted?

REBECCA BULLER: Yes. Well, Bill's got a couple of comments in the questions. He mentions that many residential facilities allow buses to transport seniors to gamble. And sometimes they're allowed a limited amount of money to spend. Sometimes accessing the powers of attorney is needed. Escape and ritual is motivational.



Oh, and then he also says, this is a really complex and complicated multilevel and interwoven issue. Yeah. I think especially with these this older adult population, people have some really strong feelings about the concerns that we have.

REBECCA BISHOP: Absolutely. Thank you, Bill. Bill, you're absolutely right. This is complex and complicated. And this is why one, we're highlighting this nexus, but really encouraging people to take your time and really think about what this means for your community. And that is accessing powers of attorney, which for me infers more money. It means the money they first went with might not have been enough. Or the money maybe they had left was not enough. They had to access more, which is a risk factor right there.

Imagine if people who work in these residential facilities or the people who go to the casino with these older adults-- imagine if they're trained in what to look for. Imagine they have the opportunity to do some level of intervention or get them some support. Yeah.

REBECCA BULLER: Obasi also says, how much does the lack of social interaction and engagement contribute to older adults' gambling behavior?

REBECCA BISHOP: A lot. The older adults, certainly, that we've spoken to-- they see often going to the casino or other gambling venues-- they see it as entertainment. And you're right. They look at it like, well, I can talk to people there. I'm in my house. I'm by myself. I'm lonely. Well, let me go to the casino, where there's more people.

And let's be honest, the casino has done a really good job of making the casinos a destination because there's not just slot machines. There's not just gambling there. There's often live shows. There's eating, massive restaurants.

There's a casino here in Massachusetts. There's actually a movie theater, shared parking structure, shared garage parking space. Then you walk in. You see the movie theater, and then there's the casino. So there's lots of things to do. So it is. It absolutely contributes. Great connection.

REBECCA BULLER: That's it for now.

REBECCA BISHOP: Perfect. Let's move on. All right. Continuing to explore behaviors associated with comorbidities to this nexus, people with substance use disorders may use gambling to support their drug habits. When we were working with, again, people in recovery from substance misuse and we did focus groups, we heard lots of stories about this, people who didn't have money to get high on substances.

And so this one guy, he told this story. He had a friend, couldn't get money to get high on substances. So he would go to the dumpster. And he would find



scratch tickets that weren't scratched, and he would scratch them. And it would hold him over until he could get drugs.

Be aware of this. But also think about how to use this information in your prevention initiatives. Everyone can be involved regardless where they are in the spectrum.

Gambling can be a substitute activity that may become exacerbated upon abstinence from drugs. I've actually seen this happen when I worked close to a treatment program. And this was actually somebody who was in recovery, had significant clean time, had moved on, was in a master's program, and somehow ended up gambling and developed a really significant problem with it. So be aware.

This is also why it's helpful to address these two issues together. Because especially for high-risk populations, you can keep them safe. And it's kind of like a double check-off, for lack of a better word, because it really has them check their bases.

People with substance use disorders were more likely to use substances before or while gambling to enhance performance, ease the pain of losing, or enhance the joy of winning. If we think about it, gambling and using substances often happens in the same place. We know at the casino, people have access to free alcohol as long as they're gambling. If we think about family functions, when alcohol comes out, also, often, gambling comes out.

I know in my community, the Black, African American community, if the cards come out, the alcohol is coming out, and the money comes out. So just note that. This is often why in treatment programs, substance misuse treatment programs, they are not allowed to gamble. So be aware of that as well.

Gambling can be a reinforcer of drug use and an obstacle to success and treatment. So if gambling is not on anyone's radar, and someone's in treatment but they are gambling, that can inhibit their progress.

One of the people in recovery who became a gambling ambassador, he was doing some peer-to-peer work educating others about this nexus. And he actually came to one of our TA meetings. And he had to have a one-on-one with himself and say, what are you doing? You can't be educating people about this nexus and buying scratch tickets. And he often talks about his journey to realizing this.

People with a history of problem gambling and substance use disorder histories were more likely to have attempted suicide at some point in their lives, yet another public health issue that puts people at risk, especially this nexus, people who are impacted by this nexus. Separately, if we took these issues-- problem gambling, substance misuse-- suicide co-occurs with both of



these. So when we put this nexus together, that level of risk significantly increases.

And then, finally, polysubstance users were more likely to exhibit serious problem gambling than those with only one substance addiction. Again, elevating risk-- elevating risk. We also know polysubstance users are at elevated risk for a whole range of other things as well. Any questions about this before I move on?

REBECCA BULLER: We've got a couple of questions. Someone said, I heard that social media is made to work similar to a slot machine. Have you heard that in this work?

REBECCA BISHOP: Not necessarily social media, but-- not necessarily social media. I wouldn't be surprised. I don't know the kind of technology behind that. They certainly work in concert together.

So for example-- and I'm going to say this. If you're at risk, I would not do this if it were to put you at risk. But when I was looking early on trying to understand this, if you google "blackjack," just as an example, and you go on a blackjack site, you will get lots of pop-ups about other opportunities. And it's quick. It's like this.

So for me, it seems like it mirrors what happens on social media, how you can look up one topic, and all of a sudden, you have all these other opportunities to explore that topic in other ways, groups and conversations and all these other things. So it could be connected. It seems like they use some similar technology, but I'm not sure. Good question, though.

REBECCA BULLER: Yeah. We have a question. Is the history of trauma a significant risk factor for gambling issues?

REBECCA BISHOP: Great question. So one, I would dive in the literature. There's a lot about gambling that we're learning. I do know that we know trauma is certainly connected to the development of substance use disorders. And because mental health co-occurs with problem gambling, I would not be surprised if it's connected. But I would need to jump into the literature for specific connections.

Just as an example, the PhotoVoice project in Massachusetts that we work with young people and engage them in problem gambling prevention, I can't tell you how many times young people have been talking about issues related to gambling, related to their community, related to substance misuse. And trauma has come up incredibly often. So I would not be surprised.

REBECCA BULLER: I'm looking at our time and how much more you have left to present. And we're down to about 12 minutes or so. And I'm going to hold off questions at this point and let you get through the material.



REBECCA BISHOP: Perfect. Thank you for this. So we just talked about mental health indicators. They certainly are connected to this nexus. And we can imagine lots of ways to explore that.

I'm going to just move on because of time. Just to highlight this nexus, some things that are different versus the same about both substance misuse and problem gambling. Differences is that gambling is known as the hidden addiction. If someone scratches a scratch ticket, you have no idea that-- and they come into your house-- you have no idea they did that, whereas there are usually some smell or look or indicators you can see with substance misuse.

You cannot overdose on gambling. It's often where suicide comes in because people can't-- there's just a compulsion to keep going, keep going. And people cannot handle it after a while. There's no test for problem gambling. This is why it's so important for people to speak up and say, hey, I'm struggling, because there's no other way.

And then there are fewer resources for gambling than there are substance misuse. We've talked about this the entire webinar here.

Similarities-- you can see them here. I'll just call out a few. There's both legal and illegal forms for both of these issues we've been talking about. I encourage you guys to explore both of them. We talked about how both are regulated and promoted by the state, can produce negative consequences, how culture can influence the use of both. And then the following issues we talk about often-- tolerance, stigma, lack of services. And recovery is possible, the most important thing to remember.

Here is the continuum of care. It is very similar for both issues, both problem gambling and substance misuse. So there is opportunities to get involved. The one plea I would say here is because there are not many people who know about gambling and problem gambling, get treatment and folks in recovery involved in prevention efforts. We're early on, and there's lots of opportunities to address this and prevent it, really.

Shared risk and protective factors-- we have seen the multiple layers of risk for various populations. And so let's not forget about, really, we want to make sure everybody is served and gets the resources they want. And if we want to do that accurately, it's important that we focus on health equity, those populations that are marginalized or who are historically left out.

And if we want to really achieve or address health equity, we can't just address these issues in isolation. It's important that we improve access to conditions and resources that influence health. And here are some examples of that. It's very possible to do both. And a lot of that can happen through



environmental strategies. There's that prevention science that we want to continue to uplift.

Gamblers who seek treatment are generally white, middle-aged, while gamblers identified in the general population are likely to be women, minorities, and people with lower education. What are the implications of this? Because of time, I won't have you guys chime in.

But if we think for a second that the people in treatment are generally white and middle-aged men, while women, minorities, and people who have lower education are found in the communities, often what that means is women, minorities, and people with lower education are often not connected to treatment. And yet they have problems with gambling. And so that means that efforts to connect them to treatment need to be strengthened, but also prevention efforts.

I mentioned, in Massachusetts, we have resources. So we're kind of ahead of the game with prevention. At least we've gotten started. I strongly encourage folks to look at prevention when we think about this. Explore. Identify these populations in your community. Start having conversations about gambling and the impact that it has on them.

If there are treatment programs, have conversations with them. Who are you reaching, and who are you not reaching? All of this will push equity forward and make it so that more people have access to help.

The social ecological model-- we know that this model is essential to prevention. And it's essential to making sure that we can address various levels of our world. We can also use this to explore risk factors and see how to protect these various levels from experiencing negative consequences.

Here are some shared risk factors for this nexus. I encourage you guys to take a look. If you are addressing any of these risk factors for substance misuse prevention, you can also address them for problem gambling. This is how we can be efficient, as well as make sure what we do aligns with research. Because this is a, quote unquote, "new topic," problem gambling, let's try to address this with efficacy.

Here are some shared risk factors for youth. Someone asked about trauma, and here it is. Again, if you're working with young people and you're already addressing some of these or you want to, this is a great way to address both issues. Great way to address both issues.

Youth risk factors-- here are individual-level risk factors. If we look at this, these risk factors, it should be no surprise. Because if we think about it, we know with young people, the young people who are in trouble are often the young people who have-- the ones who are impacted by substance misuse.



They're impacted by gambling and mental health and a whole range of other things.

If we look at interpersonal domain, here are some risk factors for family and friends, very interpersonally related if you look at it. Lack of knowledge, peers who gamble, family history.

Here are the same risk factors for the community. I won't highlight these because we don't have much time. But these are things-- if you're already employing some of these strategies, figure out how to tweak them in a minor way, and you can address this other issue as well.

All right, protective factors. So these are also no surprise. The protective factors that protect young people against substance misuse are the factors that protect young people from problem gambling. Lots and lots of synergy here. And it's actually helpful for us.

Implications for prevention and intervention-- I guess this is the reminder that when addressing a new issue or an issue that is emerging that there's a continuum of evidence. Some have more evidence. Others have less evidence. And as best as we can, we want to pick up those elements that have evidence. And we want to apply that to what is new, essentially. We also want to make sure that we have evaluations when possible.

Here are some recommendations to consider because there is some evidence that is lacking, particularly on the problem gambling side. And we've been talking about this the entire time. Apply lessons learned preventing other behavioral health problems. I think we called attention to this earlier. Alcohol availability is connected to underage drinking like gambling availability is connected to underage gambling.

Another recommendation-- select promising strategies that make theoretical and practical sense. This is a communications campaign from Massachusetts. Drugs, alcohol, gambling-- different stories, same problem, applying those same strategies that we would otherwise in substance misuse to here. And make the connection for people. This is one of the good things about highlighting this nexus. People don't have to guess. Make the connection right away.

Finally, evaluate, evaluate, evaluate. As I just mentioned, document both the story of your intervention. What did you do? What worked? What didn't work? What components did you add? What did you omit? Why? And what were your expected outcomes? If you don't have dollars for an evaluator, if you document these pieces, you can give that later on to an evaluator to evaluate your work. Very helpful.

The other thing you want to do is you want to stay on message. There are some things that we know about substance misuse that we want to really pull



through here. We want to remember the levels of prevention. You want to be clear about your goal when identifying your level.

Again, as I mentioned, in the problem gambling, youth are really secondary prevention, whereas maybe substance misuse efforts, they're primary prevention. So you really want to focus. Remember these levels of prevention and act accordingly.

You also want to focus on your population-- universal, selective, and indicated. Interventions that target the general population we know are universal interventions. An example-- youth development programs. Those are programs that address any issue. They just want to make sure youth are healthy. This is a great place to address this nexus. We mentioned the media campaign already.

Selective interventions-- examples are interventions for children who have parents who have a gambling disorder. Another example-- as I mentioned, interventions for youth who are actively gambling. It puts them at risk.

And then, finally, indicated intentions. An example of this are interventions for people in recovery from substance misuse. We've been talking about this the entire time as well. So just be aware. It's really important to figure out where in this nexus you're targeting and what your goals are.

Finally, we want to adhere to what we know, SAMHSA's six prevention strategies. Let's not recreate the wheel for this. This can be information dissemination, giving out information about problem gambling at your substance misuse events or vice versa. The organizations who are funded for gambling give out substance misuse prevention information at their events. And you could do the same with education. For example, this webinar is a great example about this nexus.

Alternative activities-- regardless of the topic, we know young people need safe, healthy activities to participate in, just as an example. So don't recreate the wheel. Go here because we know evidence lives here. And then build on that.

And then here are some examples. I think I mentioned them-- substance misuse programs, including gambling prevention elements, and vice versa. Innovate by applying lessons learned from other behavioral health programs. The violence prevention, the suicide, as well as other issues lots of you guys mentioned in the chat.

Perfect. So challenges and opportunities to collaborate-- here are some barriers to collaboration. There's often different funding sources that tell you, no, you can only address this issue with this population. If you have other funding, that can either cushion or be a stopgap between this funding. It's really helpful.



It's also helpful if you find populations that are interested in another issue. You can potentially still use that funding and include education about this other issue. There's a lack of problem gambling funding across the country right now. There are efforts at the national level to change that. But it's really hard when you don't have funding to do the work, even if you want to.

There's a lack of prevention research slash EBPs in the gambling prevention world. Right now, we are doing the best we can looking at evidence and trying to kind of piece this together. But there are some gaps, and it's important to know that. And then, finally, lack of knowledge about this nexus.

Collaboration strategies-- so build awareness about this nexus. I really encourage everyone here, after this webinar, go tell one person about it. Ensure you're adding underage gambling questions to community surveys. Really, really important because this will give us local data about what is happening in local communities. And we just don't have that right now. Even in Massachusetts, we only have state-level data. We do not have local-level data.

Develop uniform prevention messaging so multiple issues can be addressed at once. This is so important. And this is what can help you, especially if you're not funded to address a particular issue. If you stay on message, you can really protect the young people in your community.

Moving on, build program and organizational capacity to address this nexus. We just identified a couple things in this webinar about problem gambling. There's lots more to know. And so it's really important to educate yourself, educate your organization, and think about what you need in order to be able to address the issue.

I won't highlight others because of time. But I strongly encourage you guys to take a look at this and figure out how you can partner. We know a lot of this comes from partnership.

Let's see. All right. We got to the end. Questions? Do we want to do questions or not, Rebecca?

REBECCA BULLER: Rebecca, we're going to have to, unfortunately, close out now because the time is at the end. So I just want to thank you so much for all the amazing information and really important information that you shared today. I do have a few last slides if anybody-- I know, folks, we're at the half-hour mark, the end mark. But if you can hang on for just a couple of minutes, I'm going to share a couple of upcoming trainings.

I encourage you also to follow and like our Facebook page. I did include a post as Rebecca was going through today. I put a post on there for people to be able to add additional resources that you identify on this issue. I know,



Ruth, you put in a few great articles. I was wondering if you might be willing to post those there. I posted the one that the Oregon folks put in the chat so you can get that there. So I encourage folks to use this as a place to share more information about the topic.

Upcoming trainings-- we do have a virtual substance abuse prevention skills training coming up in September. We also have one in July, but it is full. So if you're wanting to attend that, I encourage you to apply as soon as possible.

The next webinar in our nexus series will be on July 28, and that's the nexus with mental health promotion. We have an older adults webinar coming up on July 27 and one specific to girls and women, Substance Misuse Trends and Prevention Strategies, at the end of August. So I encourage you to register for those.

Before you leave and move on to something else, we'd greatly appreciate if you could give us some feedback through just a couple of questions that you will be linked over automatically to at the end of this as the webinar's closed out. So I know we're over time. But thank you again, everybody, for all of your active participation. And again, Rebecca, thank you so much for pulling together such an amazing webinar. Really appreciate it. Take care, everyone. Have a great day.