

The Impact Problem Gambling Has On The Military, Veterans, Their Families, and Career

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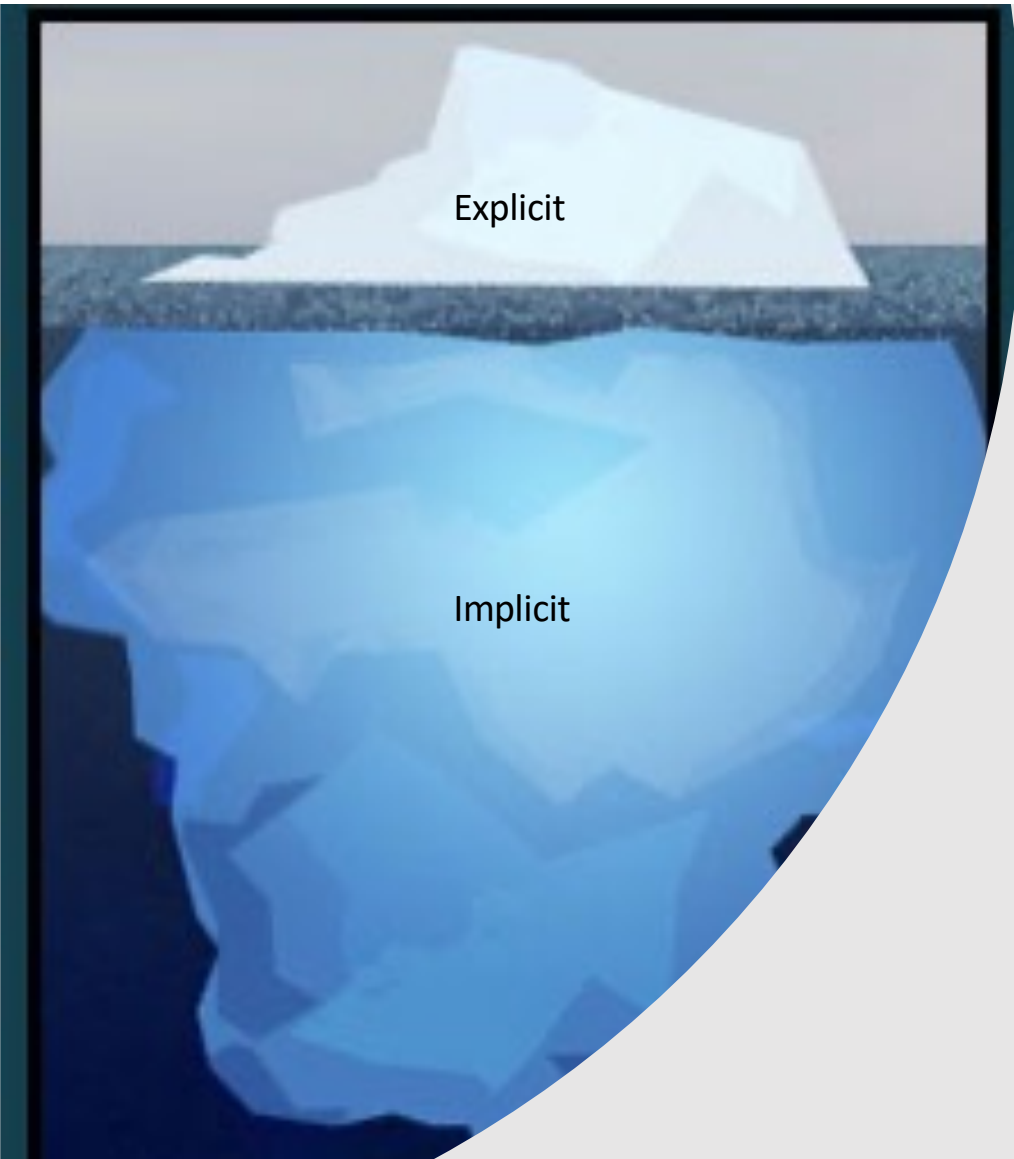
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Learning Objectives

- Discuss and develop a basic understanding of military culture.
- Learn how military culture can exacerbate problem gambling.
- Learn why service members are at risk for problem gambling behavior.
- Learn how to utilize key tenets of the warrior ethos to assist a service member or veteran struggling with problem gambling behavior.

MILITARY CULTURE = HISTORY + TRAINING + EXPERIENCES

- “Culture is the totality of ideals, beliefs, language, skills, practices, traditions, values, customs, and behaviors shared by a specific group.
- These cultural facets are reinforced by the institutional framework and affect individuals’ self-identity and their relationships with other group members”. (Capt. Lunasco et al., 2010).
- There is no unified military culture.
 - Sub-cultures
 - Collective vs. Individual
 - Reason for joining
 - Generational
 - Combat vs. Support
 - MOS

An iceberg floating in dark blue water. The tip of the iceberg is white and labeled 'Explicit'. The much larger submerged part of the iceberg is blue and labeled 'Implicit'. The image is framed by a black border on the left and bottom, and a curved grey area on the right.

Explicit

Implicit

Military Culture

Gambling in the Military

“[Gambling] is the child of avarice, the brother of inequity, and father of mischief. It has been the ruin of many worthy families, the loss of many a man’s honor, and the cause of suicide”

-George Washington

Gambling in the Military

- Gambling has been a part of the military since the Civil War
 - 1930's DoD introduced slots, until 1951 Anti-Slot Machine Act (CONUS)
 - Vietnam – Army / Air Force (1972 manipulation and embezzlement), Navy / USMC operated slots at clubs
 - 1980 Army / Air Force reinstated OCONUS slots at request of senior commanders and by customer demand
- Warrior Ethos
 - Honor, Core Values, Type A personality
- Accessibility
 - GAO report, 2017
 - OCONUS
- Article 134, UCMJ
- History + Training + Experiences = Culture

NOVEMBER 7, 1863.]

HARPER'S WEEKLY.

717



THE ARMY OF THE POTOMAC—GAMBLERS AT THE PROVOST MARSHAL'S HEAD-QUARTERS.—[SKETCHED BY A. R. WAUD.]

GAMBLERS IN THE ARMY.

How General Patrick deals with gambling we discover from the picture above.

Mr. Waud writes: "Some inveterate players,

belonging to the Ninety-third New York, were provided with a table, dice, and a tin cup for a dice-box, and, under charge of a guard, were kept at their favorite amusement all day, playing for beans, with boards slung on their shoulders with

the word GAMBLER written on them. They did not seem to enjoy it, an attempt to make the most of their time and play for greenbacks being nipped in the bud. Dinner was also denied them, on the plea that gamblers have no time for meals. Much

harm, no doubt, results from gambling; but it is useless to punish the men while it is so prevalent a vice with the officers.

Gambling has always been more or less prevalent in armies.

Gambling on Active Duty: Slot Machines

According to a 2017 report by the US Government Accountability Office (GAO) :

July 2016: 3141 slot machines on overseas US military bases (doubled since 2001 report)

2011-2015: Slots generated \$539 million in revenue, averaging \$108 million per year.

Low rates of screening for gambling disorder among active duty servicemembers is likely leading to underreporting and undiagnosed individuals with gambling problems.



Why do service men/women and veterans gamble?

- Social Facilitation, Emotional Regulation, Fun/Excitement, Money, Social Approval, Acceptance
- Overstimulated Gambler
 - Unpleasant emotional state. Gambles to dissociate from surroundings (PTS symptoms)
 - Attracted to fast-paced, less skilled forms of gambling, i.e., slot machines, electronic gaming
- Understimulated Gambler
 - Seeks arousal to compensate for lack of excitement
 - Attracted to gambling that requires close attention and “skill”, i.e., pari-mutuel wagering, table games.
- Intrinsic personality factors attribute



Active Military & Veterans

- At Risk for Problem Gambling and Disordered Gambling
 - Found to have elevated rates of problems with gambling compared to non-Veterans.
- Rates of problem gambling among active-duty military are 3.5x higher than general population (Kraus, S., Grubbs, J., 2022)
- 6.3 - 8.1% of service members endorse gambling problems
- 2% lifetime prevalence for any VA facility
- 2.3 - 9.9% prevalence for Vietnam Era Veterans

(Westermeyer et al., 2013)

Problem Gambling Among U.S. Veterans

- A national survey found 2.2% screened positive for at-risk or pathological gambling (Stefanovics et al., 2017).
- 4.2% of Iraq/Afghanistan Veterans exhibit at-risk/probable pathological gambling (Whiting et al., 2016).
- 10.7% of mental health treatment-seeking Veterans reported a lifetime history of gambling disorder (Westermeyer et al., 2013).
- 40% of Veteran gamblers seeking treatment reported a previous suicide attempt (Kausch, 2003).
- Among Veteran problem gamblers seeking treatment, high rates of SUD and lifetime suicidal ideation (15%) (Shirk et al., 2018).
- Veterans with gambling disorder and pain disorder were 1.9 times more likely to attempt suicide compared to Veterans with pain disorder alone (Ronzitti et al., 2019).

Trauma-related Conditions

- PG often co-occurring with depression, anxiety, PTS, and TBI (also, MST)
- Role of positive gambling expectancies
- Higher rates of dissociation (Najavits et al., 2010).
- PG produces greater traumatic stress symptomatology (Green et al., 2017).
- Higher physiologic arousal in face of similar trauma exposure (Green et al., 2017).
- PTS occurred first in 72% cases (Najavits et al., 2010).
- PG behavior decreased w/ PTS tx, prolonged exposure therapy concurrent naltrexone (Najavits et al., 2010).

Causes

Low social support
upon return from
deployment

Link between several
aspects of military
experiences and PG
(stress, hyperarousal)

Most robust
associations w/ PG
severity were from
post-deployment
measures (Whiting et
al., 2016)

“less than 10 percent
of people with
gambling problems
seek help, due to the
shame, stigma and
misunderstanding of
gambling disorder”
(GAO, 2017).

Warrior Ethos

“The honor code”

- “Some say that self-preservation is the strongest instinct of all, not only in humans but in all animal life. Fear of death. The imperative to survive. Nature has implanted this in all living creatures.
- The Warrior Ethos evolved to counter the instinct of self-preservation. Against this natural impulse to flee from danger ”. (Pressfield, 2011)



Warrior Ethos – Before During After

- Sense of purpose
 - Identity
 - Morality
 - Belonging
 - Honor
 - Sacrifice
- Prevent asking for help
 - How does the Warrior become the Veteran
 - Suffer in Silence
 - Pride in “Embracing the Suck”

CHALLENGES WHEN TRANSITIONING FROM MILITARY SERVICE TO CIVILIAN SECTOR

- Military Service

- Cohesion with buddies
- Accountability and control
- Targeted aggression
- Tactical awareness
- Lethally armed
- Emotional control Detached and uncaring
- Non-defensive driving, Aggressive driving
- Discipline and obeying orders

- Civilian Sector

- Withdrawal from others
- Lack of control
- Inappropriate aggression
- Hypervigilance
- “Locked and loaded” at home
- Detached and uncaring
- Aggressive driving
- Giving orders leads to conflict (no clear “chain of command”)



Barriers to treatment

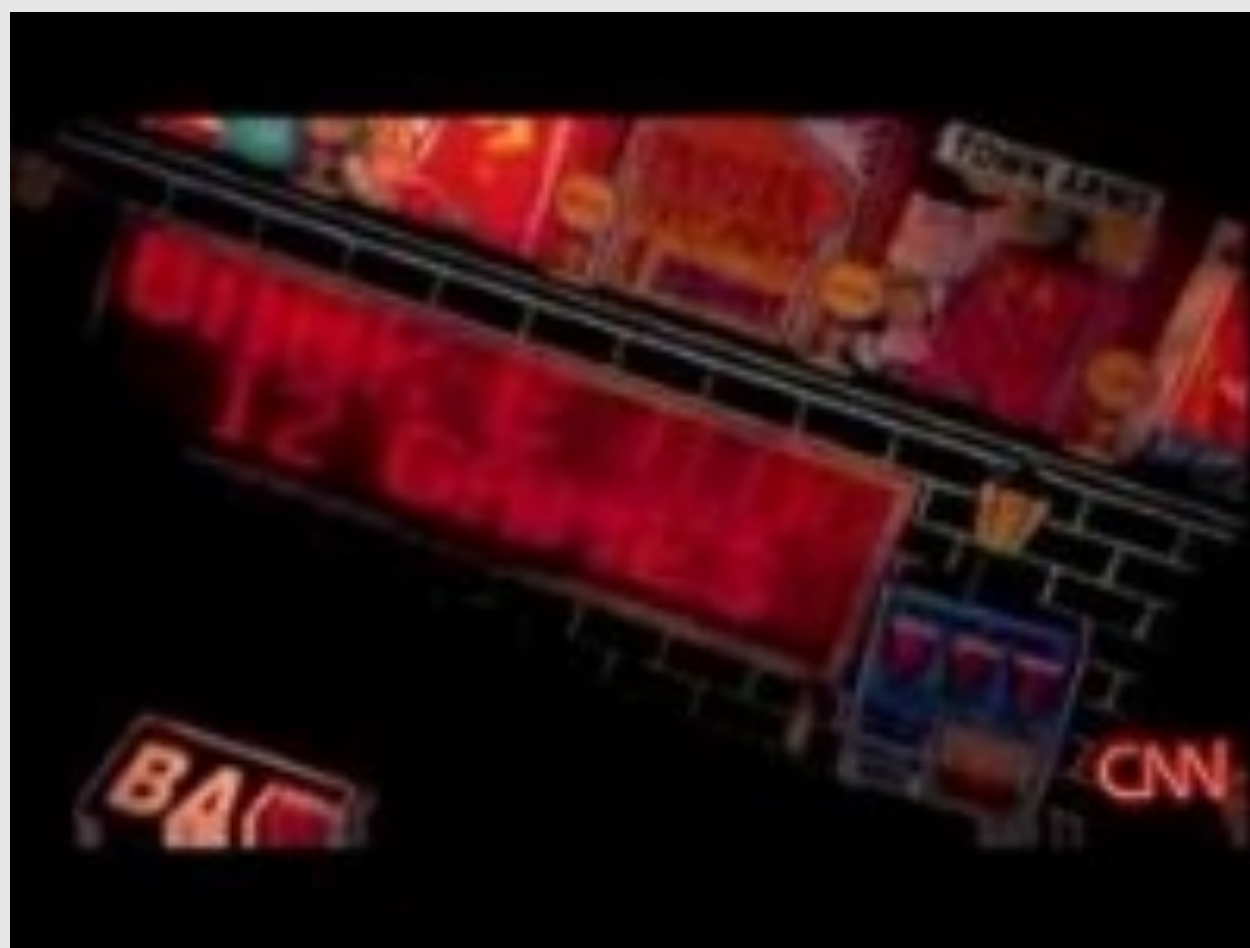
- Selfless service – Identifying a problem that needs treatment is contradictory.
- Courage – Danger and fear is a way of life
- “Secrecy, Stoicism, and Denial are crucial for success of the warrior” (Hall, 2011)
- Stigma – Internal and External
- No formalized treatment

Profile of the Gambling Disordered Veteran

- Younger Veteran's slightly higher risk
- Male
- BIPOC
- Served in Navy (USMC)
- VA primary source of medical care
- More likely to be retired
 - 30% unemployed, 20% Social Security Disability, 13% Service Connected
- Divorced, separated, or single (88%)
- Genetics account for 35-54% of gambling liability.
 - Children of gambling parents were 3x-12x more likely

Why does this Matter?

- Veterans have a suicide rate higher than those who did not serve.
- Veterans have a higher rate of problem gambling.
 - Increased risk for suicide that GD poses for veterans
- When both are a concern, the number is too high not to address.
- **Help is available.**



Impact on Family And Career

- Conflict among family, i.e., heightened anger, poor communication and perceived support. IPV and child abuse.
- Isolation and disengagement, hypervigilance.
 - Coupled with PTS, more amplified.
- Financial stress, loss of money, property, savings, housing.
- Service member discipline and shame.
- Security clearance.
- Stigma, internal and external.
- Loss of promotion/loss of rank.

Helping a Servicemember or Veteran

- Veterans are often treated in substance abuse treatment programs
- Individual therapists are often not qualified to treat gambling disorders
- Servicemembers Tricare
- Veterans are rarely referred to qualified non-VA providers (Mission Act)
- Most VA Mental Health Service Lines are not aware of the residential treatment program in Cleveland

Screening (Brief)

Lie-Bet Tool to Rule Out Problem Gambling - The Lie-Bet questionnaire is a two-item tool that has been deemed valid and reliable for ruling out pathological gambling behaviors. If individuals answer yes to one or both of the questions on the Lie-Bet questionnaire, further assessment is indicated.

NODS-Clip - National Opinion Research Center Diagnostic Screen for Gambling Disorders, Loss of Control, Lying and Preoccupation screen, is a three-item screen derived from the NODS.

NODS-PERC - National Opinion Research Center Diagnostic Screen for Gambling Disorders, Preoccupation, Escape, Risked Relationships and Chasing Screen, is a four-item screen derived from the full NODS.

Brief Bio-Social Gambling Screen (BBGS) - A three-question brief screening instrument that helps a person decide whether to seek a more formal evaluation or treatment of their gambling behavior.

Clinicians can also use this with their clients to determine if a more comprehensive screen is necessary. This tool is developed by the Division on Addiction, Cambridge Health Alliance.

Screening (Diagnostic)

DSM V Screen for Pathological Gambling- This Pathological Gambling criteria screen is from the Diagnostic Criteria from the DSM-V manual. Four or more “yes” answers indicate a diagnosis for Gambling Disorder. Less than 4 indicates a potential problem and/or at-risk indicators which may warrant further support, education and treatment services.

NORC Diagnostic Screen- The NODS is based on the DSM-V criteria for Pathological Gambling and assesses for both lifetime and past-year problem gambling.

South Oaks Gambling Screen- The SOGS is a lifetime measure of problem gambling that has been found to be reliable and valid. This 16-item screening tool places individuals in one of three categories: Non-problem, Problem Gambler, Probable Pathological Gambling.

South Oaks Gambling Screen- Revised for Adolescents - This instrument is composed of 12 items and has been found to be valid and reliable for detecting gambling problems among adolescent populations.

South Oaks Gambling Screen (Spanish)- This was developed by Henry Lesieur, Ph.D., and Sheila Blume, M.D., as a screen for compulsive gambling. Translated into Spanish.

Problem Gambling Severity Index- An abbreviated version of the original tool called the Canadian Problem Gambling Index, consisting of nine items rather than 31. Clients can use it as a self- assessment tool, or you can use it as part of your screening process.

Talking to Servicemembers and Veterans

- Do
 - Keep politics out
 - Be mindful and curious of what branch of service
 - Be curious of their lives outside of military (hobbies, interests, family)
 - Let them tell you their story when ready; respect their process
- Don't
 - Ask, “Did your friends die?” or “ Did you see people die?” or “Did you kill anyone?”
 - Don't assume everyone was in combat (<10%)
 - Make assumptions about one's military career. Remember veteran is expert.

Key points

It's ok not to understand military/combat experience

Let the veteran know you cannot understand

Advise veteran you have no expectations for them to tell you unless they want/choose to

Ask the veteran for their help in clarifying or understanding terms



Questions to ask

- Tell me about your military experience. *Let them guide the conversation
- When/where did you serve?
- What unit were you in?
- How has military service affected you?
- Has anyone in your family served?

Beneficial Key Tenets

- Crawl, Walk, Run, i.e., New Operational Environment
- Structure initial sessions as boot camp or military school. Provide info and skills, built upon previous session
 - Education – Delve into diagnosis – View from MOS hazard/training/environmental adaptation – Physiological changes – Place in a military or operational context to allow further understanding
- Fight or Flight – Diaphragmatic breathing – Fundamentals of marksmanship
- Motivation for practice assignment – PT (Psychological training)
- CBT
- FOB model
- Commander's intent
- BDA Assessment and “Embracing the suck”

Next Steps

- Increase screenings for Problem Gambling (PG) during routine visits and follow up.
- Complete screenings after deployment and before re-enlisting
- Further awareness among MH professionals who serve vets
 - Increase awareness of co-morbidity (PG & Psych. Cond.)
- Offer education and information about gambling related harms
- Provide a safe space to discuss need for support/help
- Offer alternatives to gambling on base and at program sites
- Social support protective against at-risk gambling

Treatment concerns

- Veterans are often treated in substance abuse treatment programs
- Individual therapists are often not qualified to treat gambling disorders
- Veterans are rarely referred to qualified non-VA providers (Mission Act)
- Most VA Mental Health Service Lines are not aware of the residential treatment program in

Cleveland

Resources

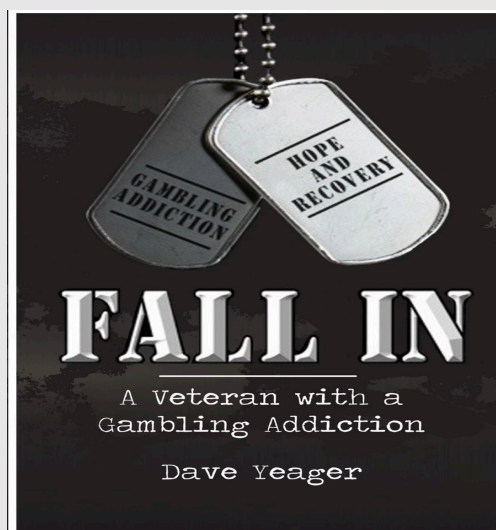
<https://www.ddap.pa.gov/Get%20Help%20Now/Pages/Problem-Gambling.aspx>

<https://nyproblemgambling.org/resource-lib-item-category/veterans-and-armed-forces/>

<https://www.maketheconnection.net/symptoms/gambling/>

<https://www.mirecc.va.gov/visn16/problem-gambling-guide.asp>

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