

FINDING ANSWERS

Addiction Redefined As a Chronic Brain Disease

The American Society of Addiction Medicine (ASAM) has adopted a new definition of addiction, concluding that addiction is a chronic brain disorder and not simply a behavior involving drugs, gambling, alcohol or sex. The declaration comes after a four-year process that involved more than 80 experts, including addiction authorities, addiction medicine clinicians and leading neuroscientists, and extensive discussion with the National Institute on Drug Abuse (NIDA).

According to Dr. Michael Miller, past president of ASAM, the new definition emphasizes that the "disease is about brains, not drugs. It's about underlying neurology, not outward actions."

The new definition describes addiction as a primary disease that is not the result of emotional causes or psychiatric problems. It's also considered a chronic disease, much like diabetes or cardiovascular disease, suggesting that it needs to be monitored and treated over the course of a person's life.

Gambling Among MINNESOTA PUBLIC SCHOOL STUDENTS DECLINES

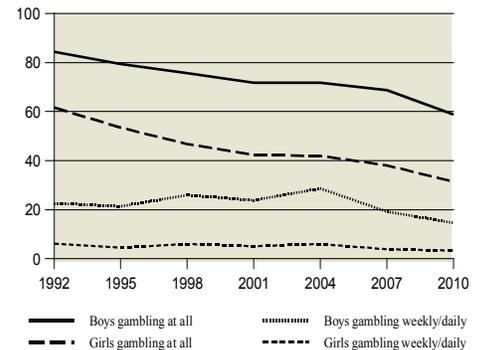


A new study of gambling rates among Minnesota youth reflects a continued, gradual decrease in the overall rate of gambling among students in 9th and 12th grades. However, the rate of frequent gamblers, defined as those who gamble daily or weekly, has remained substantially unchanged. The analysis of gambling behavior from Minnesota public school students spans the period from 1992 to 2010, and is one of few such gambling trend analysis studies of its kind.

"The data suggests that youth gambling is not an epidemic as some have feared," says the University of Minnesota's Randy Stinchfield, Ph.D., a clinical psychologist and the study's lead researcher. "Gambling for most youth is an infrequent and inconsequential pastime."

Rates of gambling frequency from 2010 data indicate that the majority of boys (51% of 9th graders and 69% of 12th graders) reported gambling in the past year, whereas

Gambling Behavior Among Minnesota Youth



a smaller percentage of girls (23% of 9th graders and 42% of 12th graders) reported gambling in the past year. In terms of frequent gambling, a small but significant number of boys (12% of 9th graders and 18% of 12th graders) reported gambling weekly or daily while a smaller number of girls (3% of 9th graders and 4% of 12th graders) reported gambling weekly or daily.

The results beg the question as to why youth gambling has decreased over the years.

"While our data doesn't provide the answer

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Cathie Perrault
Executive Director
NPGA

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We thank all our members, donors, volunteers and affiliates who have contributed to our mission.

Become a member today. Visit www.NorthStarProblemGambling.org to join us.

FROM THE EXECUTIVE DIRECTOR

Membership and Mission

In September, I participated in the MARRCH Conference at the RiverCentre in St Paul. MARRCH is the Minnesota Association for Research and Resources in Chemical Health. It is the primary organization for alcohol and drug addiction professionals in the state and their annual conference is a major educational and networking event. Many alcohol and drug counselors stopped at the Northstar information booth at the conference and commented on how they were seeing more gambling problems in their client population. They were very interested in materials and training opportunities that would allow them to learn more about problem gambling so they could improve their clinical skills and make appropriate referrals for gambling clients.

Sharing information on problem gambling among professionals in health and human services is part of the mission of the Northstar Problem Gambling Alliance. As a private nonprofit agency, we work to distribute important information on problem gambling issues to a wide variety of audiences, and we strive to link together Minnesota agencies, professionals and the recovering community. We conduct community awareness campaigns, provide professional training, and advocate at the legislature for funding for prevention, education, research and treatment.

I invite each and every person interested in helping those impacted by problem gambling to join the Northstar Problem Gambling Alliance. Your membership fee provides financial support for community outreach to increase awareness and understanding of this addiction. And your involvement and input can help identify opportunities for us to reach out more effectively.

In the next few weeks we will be conducting our fall membership drive. I hope you will consider becoming a member and getting involved in our efforts. Please visit www.NorthStarProblemGambling.org for full membership information.

Northstar Problem Gambling Alliance is a nonprofit agency whose mission is to help those affected by problem gambling in Minnesota. We do this by promoting awareness and understanding of the issue via our website, newsletter, community education programs, sponsorship of the Minnesota State Conference on Problem Gambling, and training of professionals in preventing and treating problem gambling.

Northern Light is funded by a grant from the state of Minnesota. Designer: ESD Graphics. Writer: Bill Stein

*Minnesotan Receives***INTERNATIONAL ADDICTION RESEARCH AWARD**

Jessie Breyer, Psy.D., a member of the Psychology faculty at Century College in White Bear Lake, received the 2010 Durand Jacobs Award

for her paper, “Young Adult Gambling Behaviors and their Relationship with the Persistence of ADHD.” The Durand Jacobs Award, bestowed by the International Centre for Youth Gambling Problems and High-Risk Behaviours at McGill University in Montreal, recognizes outstanding work related to the psychology of addictive behaviors, and is dedicated to Dr. Durand Jacobs’ lifelong efforts to help mentor students.

Dr. Breyer began her work in the field of addiction at the University of Minnesota’s Department of Psychiatry in 2001. She worked for Ken Winters, Ph.D. and Randy Stinchfield, Ph.D. on a variety of research studies examining the impact of addictions on adolescents and adults. These studies included: investigating the influence of longitudinal ADHD on gambling and substance use in young adults; studying the effectiveness of a brief intervention for substance use in adolescents; and testing the validity of a gambling treatment outcome measure. Dr. Breyer has co-authored several articles and poster presentations in the field of addiction, and was a recipient of the NIAAA/NIDA Early Career Investigators Award in 2009.

“The field of addiction is something that’s always fascinated me,” says Dr. Breyer. “I’m interested in understanding why people continue to do things when there are so many unfavorable consequences to their behavior in the form of losing money, jobs, relationships, etc.”

Dr. Breyer’s work with Dr. Winters found that individuals reporting childhood ADHD symptoms that persisted into young adulthood were more likely to become problem gamblers than study participants with no ADHD or those with non-persistent ADHD. However, those with persistent ADHD were no more likely than other groups to engage in gambling.

In addition to sharing her passion for psychology as a professor, Dr. Breyer also aspires to do clinical work. She particularly enjoys working with young adults and veterans.

“I’m interested in understanding why people continue to do things when there are so many unfavorable consequences to their behavior in the form of losing money, jobs, relationships, etc.”

40,000

The estimated number of active duty service members with a gambling problem. Source: *National Council on Problem Gambling from June 2010 brief.*

69

Percent of 12th grade boys in Minnesota who reported gambling at least once in the past year. Source: *2011 study conducted by Dr. Randy Stinchfield from the University of Minnesota Medical School.*

18

Percent of 12th grade boys in Minnesota who reported gambling weekly or daily. Source: *2011 study conducted by Dr. Randy Stinchfield from the University of Minnesota Medical School.*

10

The percent of people with gambling problems who report incidences of violence directly related to their gambling. Source: *www.betterhealth.vic.gov.au.*

1

The number of phone calls someone concerned about their gambling behavior or the gambling behavior of someone else needs to make to receive help and guidance. The number is 1-800-333-HOPE.



COUNSELORS VISIT PASTURE

to Hone Skills



Equine-assisted
psychotherapy
(EAP) and equine-
assisted learning

The focus of EAP is not on riding or horsemanship, but rather on non-verbal communication, assertiveness, creative thinking and problem solving, leadership, work, taking responsibility, teamwork and relationships, confidence and attitude.

At first thought, a secluded horse pasture 35 miles north of the Twin Cities is about the last place you'd expect to find a group of therapists honing their craft.

However, upon closer examination, you'd find that the unique interaction between horse and therapist provides the basis for a fresh way of thinking about human behavior and communication.

In late August, Northstar, in partnership with Acres for Life – A Center for Growth and Learning that provides equine-assisted psychotherapy and equine-assisted learning, presented two sessions designed to provide added dimensions to the way therapists work with their clients. The sessions were *Beyond Words: Realizing the Power of Nonverbal Communication* and *Revitalizing the Therapeutic Relationship*.

Equine-assisted psychotherapy is experiential in nature, meaning that participants learn about themselves and others by participating in activities with the horses, and then processing (or discussing) feelings, behaviors and patterns. The approach has been compared to the ropes courses used by therapists, treatment facilities and human development courses around the world.

“The use of horses for therapy has the advantage of utilizing living, social beings that are naturally intimidating to many because of their size and power,” says Lynn Moore, LADC. “Horses require focus, ‘mirror’ human body language, provide immediate feedback, are not judgmental, require trust and live in the moment.”

The environment creates a natural opportunity for some to overcome fear and develop confidence. Working alongside a horse creates confidence and provides wonderful insight when dealing with other challenging situations in life.

HARVARD STUDY ON PROBLEM GAMBLING SUGGESTS DECREASE IN PROBLEM GAMBLING

The focus of EAP is not on riding or horsemanship, but rather on setting up ground activities involving horses that requires the client or group to apply certain skills. Non-verbal communication, assertiveness, creative thinking and problem solving, leadership, work, taking responsibility, teamwork and relationships, confidence and attitude are several examples of the tools utilized and developed by EAP.

“I appreciated the reminder about the importance of paying attention to client language to learn more about how they process and file information.”

Session participants left with greater insight into the depth of information available when looking beyond words to other communication forms, such as body language, eye movement and voice tonality. It deepened their awareness of their personal communication styles and also provided tools to uncover blocks, bias, strengths and resources to help revitalize the therapeutic relationship.

“It was valuable to be in a new environment for learning, and to work through my own anxieties and sense of intimidation while staying open to the process,” says Pat Pardun, a family therapist and certified gambling counselor who attended both sessions. “I also appreciated the reminder about non-verbal communication – the importance of paying attention to client language to learn more about how they process and file information – and the importance and effectiveness of speaking to clients in their language and moving with resistance.”

For additional information on Acres for Life, please visit acresforlife.com.

According to a research paper published by problem gambling expert Howard J. Shaffer of Harvard University and his colleague Ryan Martin, the incidence of problem gambling has decreased from 0.7% to 0.6%. His recently published research paper titled “Disordered Gambling: Etiology Trajectory and Clinical Considerations,” published in the *Annual Review of Clinical Psychology*, also concluded that online gambling does not foster problem gambling.

Shaffer suggests that online gambling

does not constitute a greater risk of creating problem gamblers. Shaffer, in an interview with the *Chicago Tribune*, said, “People gambling on the Internet change from gambling more to less in weeks. The extent of Internet gambling for most is astoundingly moderate.”

Shaffer also said that current available evidence suggests that the rate of pathological gambling has remained relatively stable during the past 35 years despite an unprecedented increase in opportunities and access to gambling.

PROBLEM, PATHOLOGICAL GAMBLING RATES HIGH AMONG VETERANS

A recent study of veterans receiving care through the Department of Veterans Affairs revealed that about 8% of U.S. veterans are problem gamblers and an additional 2% are pathological gamblers. The study, funded by the VA Health Services Research and Development, was presented by Joseph J. Westermeyer IV, MD, at the annual meeting of the American Psychiatric Association.

The study revealed some findings about problem gambling among vets that are different than in the general population. For example, rates of problem gambling and pathological gambling were almost identical among male veterans and female veterans, whereas men typically outnumber women by a factor of two to three or more in the general population, according to Dr. Westermeyer. Another rather contrary finding was that people with more alcohol and drug problems tended to have fewer gambling problems. Most other research studies have shown that more substance problems are associated with more gambling problems.

Gambling in the military is an issue that’s been closely followed by the National Council on Problem Gambling.

In its June 2010 brief on the topic, the NCPG noted there are likely at least 40,000 active duty service members with a gambling problem.

According to the NCPG, problem gambling is a hidden addiction that has not been adequately addressed by the military. The brief states “because compulsive gambling has an immediate association with financial matters, its effect on readiness and the overall mental health of service members has been largely overlooked and ignored.”

The NCPG encourages the military to develop clear policy and enforcement of existing rules and regulations regarding gambling. Current approaches appear focused on treating problems associated with problem and pathological gambling as punishable offenses with potentially little or no concern for the individual’s underlying treatable disorder.

To see an interview with Dr. Westermeyer and to read published communications on the subject of veteran gambling, please visit <http://www.NorthStarProblemGambling.org/veteran.html>.



Milestone birthdays are often a rite of passage. For Eddie, about to turn the legal betting age of 18, this would be no exception.

It was late in the evening on July 16, 2002, and outside the Mystic Lake Casino, Eddie and several friends waited anxiously for the clock to strike midnight. Eddie had already watched many of his friends celebrate their eighteenth birthdays at the casino, and he was excited that his day had finally come.

When midnight arrived, Eddie entered the casino, driver's license in hand. Once inside, he went straight to the blackjack tables. As he placed his first bet on the table – two \$1 chips – he immediately felt the excitement. The thrill was instantaneous – and lasting. Eddie played blackjack through the night, not leaving the casino until after sunrise.

“I fell in love when I got there and fell deeper in love with every bet,” says Eddie. “I won \$97 that first night and thought I could come back and win \$100 every night.”

Eddie was a frequent visitor to the casino for the remainder of the summer, only stopping when it was time to leave for college in Chicago. He returned

the following summer and became a mainstay at the casino, playing blackjack five days a week. “That second summer I won more money than I’d ever made in my life. I was enjoying myself, and I was making money.”

Eddie was enthralled with the casino environment. “I liked the people, the sounds and the holding of chips and cards in my hands. It was an escape and a place where I felt liked.”

When Eddie returned to college in the fall of 2003, fresh off a full summer of gambling, he found it difficult to focus. “I started wishing I was gambling, and didn’t do well in school.” He dropped out so that he could return to Minnesota and resume gambling. “I thought the way for me to make money was to gamble.”

Instead, he began to lose money consistently. “I was financially destroyed,” recalls Eddie, now 27. “I began to write bad checks, lie and steal ... I’d do anything I could do to get gambling money.”

Still, he was able to conceal the extent of his gambling. “While everyone knew that I gambled,” says Eddie, “they had no idea how much I bet, how long I spent at the casino, and how often I went.” Eddie

would gamble for two days nonstop, go home to sleep, and then return to the casino for another day or two. “I binge gambled very frequently,” says Eddie.

Eddie’s behavior eventually became a great concern to family and friends. One day in September 2004, his parents and friends staged an intervention. That same night, he began packing to go to Granite Falls for inpatient treatment at Project Turnabout.

Initially, Eddie was very confused. “The concept of an illness called compulsive gambling – let alone that it was something I had – was something I’d never heard of,” says Eddie as he reflects back on the gradual realization that he had a gambling addiction. “I knew I gambled too much, but never thought of it as an illness.”

“I kept trying to convince myself that I was not a compulsive gambler even though I had all the symptoms. Eventually, though, I began to gradually accept that gambling was causing so many of the problems in my life.”

If Eddie’s time in therapy at Granite Falls helped convince him that he had an illness, it was the time afterward that really helped him heal. “The inpatient treatment broke ground, but the 12-step meeting really helped build my recovery,” says Eddie.

Eddie has not gambled since beginning treatment and considers the three crazed years of gambling as “back then” – almost a lifetime ago. He is immensely grateful that he learned about his illness – and began to deal with it – at such an early age. “A lot of people I see in the 12-step programs are in their 40s and 50s. If I were dealing with this for 20 years, I’m pretty sure it would have killed me.”

Gambling Among Minnesota Public School Students Declines

continued from page 1



as to why gambling has declined, we can speculate as to the reasons,” says Dr. Stinchfield. One idea is that the novelty of gambling, introduced in Minnesota in 1990, has simply worn off. Another possible explanation is that youth today have so many things competing for their time, including smart phones, texting and various online activities. “It may be that the immediacy of doing something on the phone or internet is better than waiting for a poker game to get started,” hypothesizes Dr. Stinchfield. Future studies may include questions about other activities enjoyed by Minnesota youth to determine the relative role of gambling among other recreational choices.

A second analysis of the student data focused on the rates of gambling among American Indian public school students. This was undertaken because American Indians may be more at risk for problem gambling given that American Indians tend to exhibit higher rates of other addictions than the general population. Furthermore, casinos are located on American Indian reservations, increasing accessibility to gambling.

The study found that compared to their non-American Indian public school counterparts, American Indian students gamble more in general, gamble more frequently, and gamble in casinos more often. While the study did not measure problem gambling specifically, the findings suggest that more American Indian youth are at risk for becoming problem gamblers. Overall gambling participation rates

declined in the American Indian youth population from 1992 to 2010 just as they did with the larger population.

In the coming months, Dr. Stinchfield will study the gambling behavior of “out-of-mainstream” youth, such as students attending alternative learning centers and those living in juvenile correction facilities. “The anticipation is that these kids are at risk or involved in risky behaviors, and thus are going to have higher rates of gambling participation,” says Dr. Stinchfield.

“Data suggests that youth gambling is not an epidemic as some have feared . . . Gambling for most youth is an infrequent and inconsequential pastime.”

Future research may examine the risk and protective factors for youth. “We do prevention programs before we necessarily know the protective factors,” says Dr. Stinchfield. “One way to identify those at risk is to look for other behaviors – such as alcohol and drug use, number of sex partners, bully behavior, etc. – that may correlate with frequent gambling.” Such a finding might suggest that gambling prevention programs be part of a more generic high-risk behavior program.

The data for the study was obtained from a student survey administered by the Minnesota Departments of Education, Health, Public Safety and Human Services. The Northstar Problem Gambling Alliance provided financial support for the study.

If you’re interested in obtaining a copy of Dr. Stinchfield’s study, please email Linda@NorthStarProblemGambling.org.



Part-Time Positions at Northstar

Northstar is seeking candidates for two part-time positions. We are looking for a **student intern** to work on communications and community events. This is a paid internship and has flexible hours targeting approximately 10-15 hours per week. We are also looking for a **training manager** to promote and direct our community Speakers Network and professional training program. Detailed information on these two positions is available on www.NorthStarProblemGambling.org.

Would You Like to Receive This Newsletter Electronically?

If you’d like to receive *Northern Light* electronically as well as receive timely updates from Northstar regarding events, educational offerings and other news about the field of problem gambling, please submit your email address using the Contact Us form on our website.

Join the Northstar Problem Gambling Alliance

What does it cost to be a member of the Northstar Problem Gambling Alliance? Individual memberships start at just \$15 for students, \$25 for general community members and \$35 for professionals. We also offer organizational memberships and sponsorship opportunities for agencies, businesses and community groups. Members receive discounted admission to the annual Minnesota State Problem Gambling conference and options to attend other trainings at discounted rates. Members may also join the National Council on Problem Gambling at a reduced rate. Watch for our membership mailing later this fall and join us to support prevention and education on problem gambling.



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Join Northstar at the following events

Oct. 10-11
St. Louis County Health & Human Services, Duluth

Oct. 24-25
MN Corrections Association, Brooklyn Center

Oct. 27-28
MPRC Program Sharing, St. Cloud

Nov. 3-4
Marriage and Family Therapists, Brooklyn Center

Nov. 17-18
Allied Charities, St. Cloud

Northern Light

NORTHSTAR PROBLEM GAMBLING ALLIANCE

Fall 2011 • Volume Four



Changing Problem Gambling Behavior through:

AWARENESS

EDUCATION

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