Northstar Establishes Social Media Presence

Northstar is getting social. With a new presence on Facebook and Twitter, as well as a blog, Northstar is positioned to reach its audiences and disseminate information more efficiently than ever before. In the future, Northstar may also use YouTube to capture video presentations and interviews with experts from the problem gambling field.

Northstar’s social media outlets can be found at the following addresses:

- Facebook: www.facebook.com/pages/Northstar-Problem-Gambling-Alliance/142615222475869
- Twitter: twitter.com/MNProbGambling
- Blog: minnesotaproblegambling.blogspot.com/

“We’re excited about the ability to get our messages out in a more timely, cost-effective way,” says Cathie Perrault, Northstar executive director. “We encourage our constituents and others to keep up-to-date with us on the various social media platforms, and to provide feedback and suggestions as appropriate.”

What do problem gamblers value most in their interaction with gambling counselors? Jerry Bauerkemper, BS, CCGC, executive director of the Nebraska Council on Compulsive Gambling, addressed these issues in a series of focus groups conducted in 2003-04 and 2009-10. His findings were presented at the Minnesota Problem Gambling Conference on May 3.

Goals and Process

The overall goal was to provide a glimpse into what’s important from a client’s perspective for a successful client-counselor relationship in problem gambling treatment. The research team met with four focus groups in 2003-04 and five in 2009-10, involving about 140 participants overall. All participants had received problem gambling treatment, with length of involvement ranging from one month to a full year.

Group Demographics

The following table summarizes some of the key demographic attributes of the focus groups:

<table>
<thead>
<tr>
<th>Participant Characteristics</th>
<th>2003-04 Groups (4)</th>
<th>2009-10 Groups (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female / Male</td>
<td>66% F  34% M</td>
<td>35% F  65% M</td>
</tr>
<tr>
<td>Received 1-3 months of treatment</td>
<td>11%</td>
<td>42%</td>
</tr>
<tr>
<td>Received 9-12 months of treatment</td>
<td>11%</td>
<td>13%</td>
</tr>
<tr>
<td>Employed Full Time</td>
<td>87%</td>
<td>42%</td>
</tr>
<tr>
<td>Largest Age Category</td>
<td>35-44 years, 28%</td>
<td>25-34 years, 33%</td>
</tr>
<tr>
<td>Largest Education Segment</td>
<td>Some College 52%</td>
<td>Some College 48%</td>
</tr>
<tr>
<td>Preferred Game of Choice</td>
<td>Slots 55%</td>
<td>Slots 58%</td>
</tr>
<tr>
<td>Largest Segment by Debt Level</td>
<td>Over $20,000 29%</td>
<td>$5,000 - 10,000 58%</td>
</tr>
</tbody>
</table>

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FROM THE EXECUTIVE DIRECTOR

All In a Name

While a newsletter is only as good as its content, it helps for it to have a name. At long last, we have one. And with that, I welcome you to the summer edition of … drum roll … Northern Light.

In our early years, the newsletter was called The Roundtable, which effectively reflected the fundamental concept on which the Alliance was built: a way to bring together people and entities involved in some way with gambling, and promote discussion and commitment from all parties to help individuals with gambling problems. (See also Birth of an Alliance from the Winter 2011 edition of our then-nameless newsletter.)

However, as we’ve moved beyond our pioneering years, our work has shifted to an emphasis on awareness and education about problem gambling. We’re effectively “shining a light” on the issue to a broad audience of individuals, community leaders, organizations and legislators with defined goals for reducing stigma, increasing access to help and ensuring long-term funding for treatment and education.

This edition of Northern Light highlights some of the presentations from the 8th Annual Minnesota Conference on Problem Gambling, hosted by NPGA on May 3. It included informative sessions on public policy, treatment methods, treatment standards and working with the financial challenges of problem gamblers and their families.

A special thanks goes to the Minnesota State Lottery and the State of Minnesota for sponsorship of this conference, and the Earle Brown staff for their excellent service to all our guests. As well, we appreciate all the vendors, speakers and attendees who made the event a vibrant learning opportunity.

Here’s to continued good work, and a long and enjoyable summer!

Cathie Perrault
Executive Director
NPGA

THE 2011 MINNESOTA PROBLEM GAMBLING CONFERENCE

Keith Whyte, executive director of the National Council on Problem Gambling, came from Washington, D.C., to talk about the status of problem gambling programs, funding and legislation across the country.

Jerry Bauerkemper, executive director of the Nebraska Council on Problem Gambling, presented findings from focus groups that highlighted the keys to a successful client-counseling experience.

Sandy Brustuen (shown), coordinator of the Vanguard Compulsive Gambling Program, along with Sara Croymans and Shirley Anderson-Porisch from the University of Minnesota Extension, provided insights into helping clients experiencing financial challenges.

Jane Nakken spoke about the counseling technique of motivational interviewing.

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
FINANCES and the Problem Gambler

Not surprisingly, financial hardship and financial challenges are often among the issues faced by problem gamblers and their families during recovery. A session on this topic was presented at Northstar’s annual conference and included tips and suggestions for both counselors and problem gamblers.

The discussion centered on the methods used at Project Turnabout/Vanguard, the only residential treatment program in Minnesota that deals exclusively with problem gambling. Vanguard provides its clients and their families a monthly financial lecture. It emphasizes avoiding bailouts, and focuses on identifying income and assets, establishing a spending plan, determining a debt repayment plan and encouraging communication among family members regarding personal finances.

In addition to the lecture, there’s a one-on-one meeting during the final week of treatment that helps gamblers develop a personal financial recovery plan. The goal of the plan, which is not meant to supersede professional/legal advice, is to identify strategies to address the financial realities of each specific situation.

The recovery plan:
- Compares expense and debt obligations with income
- Identifies debt list (balance, payment and status)
- Suggests strategies to change income, change expenses, or both when expenses exceed income
- Encourages identification of trusted family member/friend to assist management of personal finances
- Provides a resource list of current, reliable and free financial resources
- Allows for follow-up telephone consultation with financial counselor during transition/re-entry to life after treatment program

The implications of recovery plans for practicing gambling counselors were also discussed. Some of the more important implications included:
- Identifying someone to assist in financial management appears to be a factor in success
- Involving family members in a one-to-one setting, providing the client with a safe environment for sharing information
- The one-to-one setting also provides an opportunity for the practice of communication skills and financial management strategies

Many of the important strategies for financial planning for recovering gamblers are included in a handbook called Problem Gamblers and Their Finances: A Guide for Treatment Professionals. This handbook is available to treatment providers free of charge from the Northstar Problem Gambling Alliance by calling (612) 424-8595 or emailing Linda@northstarproblemgambling.org.

Not surprisingly, financial hardship and financial challenges are often among the issues faced by problem gamblers and their families during recovery.
Tell us a little bit about your practice
I have been a licensed psychologist for 27 years and been focused on gambling therapy for the past seven years. I see problem gamblers individually or sometimes with a family member, and usually work with clients in weekly sessions for about three months and then every other week until around six months.

What are the biggest challenges in dealing with problem gamblers?
People tend to underestimate the power of gambling addiction. There's a tendency for people to think, “Now that I’ve decided to quit, that’s all I need,” or “Now that I’ve been to a couple of sessions, I’m good and I know I’ll never gamble again.” I see that attitude as a very clear warning that someone has a high chance of relapse. People need to be very respectful of the power of a gambling addiction.

Is there a time when people are less likely to relapse?
From my experience, the first period of time when people come to see me is right after a crisis – they’ve just spent an entire paycheck, lost their home, spouse just found out they’ve gambled away 401K money, etc., – and for about three weeks, the thought of gambling is slightly nauseating. They’re so guilt-ridden, so scared, so upset. That’s the “honeymoon” period, but revulsion towards gambling again eventually fades.

What happens after the “honeymoon” period?
From three weeks to about three months, some people really struggle as the urges return. However, this varies. For some, it’s fairly easy but for others it’s so tough that they relapse. Once a problem gambler gets out to three months of clean time, they are often able to look back and think, “What the heck was I thinking?” Then it’s a matter of maintaining, and every day clean helps you. The urge slowly fades away, but never disappears.

Do you feel that people are beginning to see you earlier in their addictions than in the past?
Yes. I think that’s due to a growing awareness that problem gambling exists, that it is a serious issue, that it’s a serious mental health issue, that there is a way to treat it and that there is hope. I think that’s also reflected by the increasing number of Gamblers Anonymous meetings.

What kinds of therapeutic approaches do you employ?
I try to tailor therapy to the needs of the client. Ninety percent of the time it falls into the cognitive therapy realm … trying to get people to understand how their brains are tricking their mind, i.e., making them think they’re going to win, that it’s OK to lie, etc. But I also emphasize a behavioral component. For example, I think it’s very important that you have someone hold your money for you. Because that changes the behavior of “I’ve got money in my pocket; I can go gamble.” You can’t respond quite so impulsively.

What do you sense about the attitudes of your clients? Do they see their gambling addiction as a moral weakness or disease?
The people I see tend to say things like, “I don’t know what’s wrong with me.” They tend to beat themselves up, which you can
I help them understand that all the hurt and financial trouble is not something the gambler is choosing to do ... that this is not something they do with the intention of hurting the family, though that’s the effect. I emphasize that it’s a condition, a treatable condition. For a spouse, the often-secret activities of a problem gambler – and the loss of a lifetime of savings – are comparable to the betrayal of an affair. The gambler needs to give the family and spouse time to rebuild trust. The family needs time to heal.

What are the demographics of your clients?

At least 50 percent of my clients are women. Most of my clients are in middle to older age ... the 50-60 age group seems most common. They are rarely younger than 30. However, my oldest client was 83 and I have had several clients who were 18.

Why do you think that more than 50 percent of your clients are women?

I think women, in general, are more open to counseling and therapy. I also think women are more likely to be escape-type gamblers in comparison to men, who seem more likely to be action gamblers. Action gamblers may be less likely to seek counseling because of their action orientation. But action gamblers also tend to be young men and they, as a group, have been long noted to be less likely to seek help for any behavioral condition. (See sidebar at right for a comparison between action gamblers and escape gamblers.)

How do they find out about you?

The 800 helpline has been a tremendous resource for my clients. But it seems that more people are going online now, looking up the providers and contacting me directly.

Are you seeing many online gamblers?

I’m surprised at how few online gamblers I see. If they’re middle-aged, online gamblers tend to be sports betters. If they’re less than 25, they tend to be online poker players. But I don’t see very many of either of those categories, and, as mentioned above, we’re often talking young males and they are less likely to come in for therapy.

The Two Primary Types of Gamblers

There are two primary types of gamblers: Action and Escape. Each gambles for different reasons and has unique characteristics and behaviors.

**Action Gamblers**

Action gamblers are often assertive, persuasive, loud and energetic, and as a group are usually men. They see themselves as friendly, sociable, gregarious and generous. They are typically younger men who are focused on the thrill of winning. They tend to play skill-based games such as horse and dog racing, sports betting, black jack and poker. “It’s a win-based, action-based process where they want to be part of the game and involved in the process,” says Jerry Bauerkemper, BS, CCGC.

**Escape Gamblers**

Escape gamblers gamble as a form of coping and as an escape from physical or emotional pain. They are more apt to play “luck” games such as the slot, video poker or Keno machines. The vast majority of escape gamblers are women who may seem very ordinary and quiet. “They want their universe to shrink down to just them and the machine,” according to Jeff Cottle, MA, licensed psychologist. Escape gamblers are more likely to seek professional help and have a better opportunity at long-term recovery.
Problem Gambling Treatment
From a Client’s Perspective
continued from page 1

What They Said
The following critical elements emerged from an analysis of the focus group discussions:

Immediacy
Like most addicts, when problem gamblers decide to get help, it needs to happen right away. This translates into the need for fast admission processes, and for private counselors to be available to answer their calls without resorting to voice mail. Gamblers are less likely to act if they have to leave a message.

Communication Skills
It was important to gamblers that counselors had personal experience with gambling so that they could discuss issues in an intelligent, knowledgeable manner and establish a good rapport. They also valued communication skills that included listening, compassion, confidence, honesty and sincerity. They did not want to be coddled.

Competency
While the gamblers interviewed were less concerned about the therapist’s “title” or “certificate,” they still wanted professionalism and competency in the area of problem gambling. In general, the more training a counselor receives, the more effective they’ll be.

Clinical Approaches
Participants said that “homework” as a part of therapy, whether in the form of workbooks (preferred by action gamblers) or reading assignments (preferred by escape gamblers), keeps clients on task and accountable, particularly in individual sessions.

In group therapy settings, clients felt it was helpful when half the session was devoted to therapeutic discussion.

Keeping family members informed of what was going on with treatment was considered important. The groups also felt it was helpful for families to have their own, open-ended groups and their own individual sessions. The importance of family involvement has been proven to be effective in the treatment of alcohol or other drug addiction, and in the comprehensive treatment of a range of mental health issues.

Other Strategies
In some areas, problem gamblers are allowed to sign up for “self-exclusion” at a gambling establishment (casinos, racetracks, etc.). While this strategy may be helpful to some, the focus groups generally indicated that self-exclusion was not particularly beneficial for various reasons. This included lax enforcement, the ability to reverse the exclusion, ability to gamble in other states, etc. However, family members considered this to be more effective because it stopped promotional mailings from arriving through the mail.

Twelve-step groups have long been an important component of addiction treatment. While primary treatment can provide education and therapy, involvement with a twelve-step group can provide the ongoing fellowship and support necessary to prevent isolation. Counselors need to be familiar with the process and guidelines for both Gamblers Anonymous and Gam-Anon so they can properly refer clients to these resources.

Jerry’s full presentation can be viewed on our website at www.NorthstarProblemGambling.org.
“Mary” was a poster child for the warning signs of compulsive gambling. It would have been obvious to anyone that she had a serious problem. But not to Mary. At least not until one day in 2009, as she sat in her car outside a Minnesota casino. A decade before, Mary had discovered gambling could be a “wonderful way to totally escape.” In the years since, she had also found it to be a path to mental and financial ruin. But on this day, as she stared through her car window at the casino, she could think of only one thing: “I’m sick and tired and of being sick and tired.”

“I went for eight or nine months without gambling, but that was because I didn’t have access to any money,” she says. “Finally, things were better, and I wondered what would happen if I went back to the casino. I found out. Within four days, I had overdrawn my bank account and they closed it out. I was out of control again.”

Mary began “borrowing” funds from the company where she was president and chief executive, and because of her position there, she was able to take the money and pay it back without anyone knowing. That worked until she realized she had taken more than she could repay. Even at that point, with the walls closing in on her, Mary says “I didn’t want to admit I was a compulsive gambler. I didn’t want to say it out loud. It’s hard to admit you’re a liar and a cheat and a thief.”

But she did. Instead of getting out of her car and going into the casino, she went to work. And she told her business partner everything that was going on. With the support of her company, she went to a meeting of Gamblers Anonymous and found a sponsor. But she also realized she needed more help than GA would provide. She checked into the Keystone Treatment Center in Canton, S.D., and spent a month there. “The people at GA took me under their wing, and they didn’t treat me like a ‘bad person,’” she says. “And the people at Keystone saved my life.”

“I kept thinking I was something special, that my situation was unique,” Mary says. “But I wasn’t, and it wasn’t.”

“I was out of control again . . . I didn’t want to admit I was a compulsive gambler”

After leaving Keystone, Mary returned to Minnesota to embark on her aftercare program. One of the first things she did was meet with her company’s board of directors. “I was terrified,” she says. “But they gave me a second chance. These were people I had lied to, and had manipulated. They wanted me to prove I was committed — but they gave me a second chance.”

After 18 months in recovery, Mary remains committed. “I’m paying back what I owe, and I go to GA meetings a couple of times a week,” she says. “It’s so important; it’s essential to me to have recovering people in my life.”

She’s where she is today, Mary says, because of two reasons. “It’s my higher power, and because of some very kind people who saw good things in me, but knew I needed help.”

“When I first went to GA,” she explains, “I couldn’t believe these people had been compulsive gamblers. I couldn’t understand it, because they were happy. Now I know.”

“I couldn’t limit the time or the money I was spending on gambling.”

It hadn’t always been that way. At first, Mary had a lot of fun playing the slots. “But I quickly discovered I had no control,” she says.

Once she started gambling in the late 1990s, it wasn’t long before Mary was visiting the casino three or four times a week, burning through several hundred dollars each trip. She took cash advances from her credit cards, then couldn’t make the payments.

Northstar Problem Gambling Alliance • Become a member today • www.northstarproblemgambling.org
Save These Dates
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5:00 p.m. to 8:30 p.m.
August 26, 2011
9:30 a.m. to 1:00 p.m.

Revitalizing the Therapeutic Relationship
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