Historically, Minnesota’s focus on problem gambling has not taken into consideration how it may fit within the context of other addictions and mental illnesses. However, Minnesota’s Department of Human Services (DHS), the agency that provides oversight of problem gambling treatment in the state, is in the process of bringing a more comprehensive, team approach to the issue of problem gambling.

The goal of DHS is to ensure that the state’s problem gambling program is operating smoothly and that there’s an effective educational awareness campaign to individuals, family members and the public about the dangers of problem gambling. This includes oversight of the problem gambling helpline and problem gambling awareness campaigns. DHS is also responsible for producing policy standards for problem gambling treatment.

The state’s increased leadership role in bringing additional resources to problem gambling will impact both providers and those with gambling addictions. “We’re doing more with clinical resources and evidence-based treatment services as part of a greater strategic improvement process,” says Cynthia Godin, director of the Adult Mental Health Division at DHS.

One example is an emphasis on co-occurring mental illnesses that will be employed to address problem gamblers. “People may ...
Problem Gambling is a Statewide Effort

A variety of individuals and organizations in Minnesota work collaboratively to ensure that there are education, prevention and treatment resources available to help problem gamblers in Minnesota.

The Minnesota Department of Human Services (DHS) is responsible for providing a statewide network of qualified gambling treatment providers. The network is made up of counselors, outpatient programs and residential treatment services that can help individuals and family members address gambling problems. (The provider list is posted on the DHS website.)

The state of Minnesota has funds available to help anyone who needs treatment. These services can be accessed by calling the state’s problem gambling helpline (800-333-HOPE).

As part of its efforts to work with problem gamblers, DHS has created a Compulsive Gambling Advisory Committee, a group comprised of interested citizens, providers, individuals in recovery, state agency members and representatives from other organizations. The group meets quarterly to discuss issues around problem gambling. At the most recent meeting the group revisited strategic planning work that had begun last year to identify key areas needing attention throughout the state. Several sub-committees are working on projects related to treatment processes, awareness and professional training issues. New appointees will join the group at the next meeting in September.

Given our mission, Northstar is actively involved with DHS staff, the advisory committee, treatment providers, and gambling organizations around the state in conducting research, awareness and education programming. As the Minnesota affiliate to the National Council on Problem Gambling, we help to connect state efforts and national programming. We ensure that our information, resources and programming complement those of DHS and other groups to both avoid duplication and maximize results.

If you have ideas, suggestions or other input that you’d like me to share with any of the organizations involved in problem gambling in Minnesota, please send me an email at cp@northstarproblemgambling.org and I’ll be sure to deliver it to the appropriate people.

All of us work for the citizens of Minnesota.

Enjoy your summer!

Cathie Perrault
Executive Director
NPGA

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
State Bringing Comprehensive, Team Approach to Problem Gambling Awareness and Treatment
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“We’re doing more with clinical resources and evidence-based treatment services as part of a greater strategic improvement process,” says Cynthia Godin, director of the Adult Mental Health Division at DHS.

Per capita spending on problem gambling services in Oregon (highest in the country) (source: 2012 Survey of State Agencies Providing Problem Gambling Services (www.apgsa.org)

Per capita spending on problem gambling services in Minnesota (ranked 12th of 30) (source: 2012 Survey of State Agencies Providing Problem Gambling Services (www.apgsa.org)

National commercial gaming revenue in the U.S. in 2011 (source: Website of the American Gaming Association www.americangaming.org)

Percent of factors contributing to problem gambling problems in young adults attributable to genetics (source: “Genetic and Environmental Origins of Gambling Behaviors from Ages 18 to 25: A Longitudinal Twin Family Study,” King, S.M.; Keyes, Margaret; Winters,Kenneth; McGue, Matthew; Iacono William. Not yet published.

1-800-333-4673

The phone number to call for the Minnesota state problem gambling helpline available 24 hours a day, seven days a week. Also 1-800-333-HOPE.

come to problem gambling treatment, but it’s important to know what brought them there. Is it due to depression, anxiety, substance addiction or other factors?” says Cynthia.

“We’re looking at what gambling treatment providers are doing with assessments and interventions and seeking to make a connection between that and what other providers for substance abuse and other treatment fields are doing,” says Julie Pearson, clinical services policy supervisor with the Adult Mental Health Division at DHS. “We know that there is a considerable amount of crossover from our work with co-occurring disorders.”

DHS will also take an active role with current treatment providers in establishing best practices for treatment. “We know that certain therapies, such as cognitive behavioral therapy and motivational interviewing, have been shown to be effective in helping problem gamblers,” says Cynthia. “We are working with providers in the treatment field to develop a state certification that will ensure we have uniform and high standards, and are using evidence-based treatments.”

Some of DHS’s goals for the next six to twelve months regarding problem gambling include the following:

1. Continuing a strategic planning process, which began in December, to establish standards relating to problem gambling treatment

2. Ensure that the problem gambling treatment crisis helpline has measurable outcomes in place that can be reported back to the state advisory committee on compulsive gambling

3. Create a public awareness campaign for the next two years that reaches the public and new stakeholders who might not have been aware of problems associated with gambling

4. Build a strong partnership with gambling treatment providers, the advisory committee, the general public and other stakeholders to continue to improve problem gambling treatment services in Minnesota

“What Minnesota is doing is very exciting,” says Cynthia. “There’s a lot of work to be done but there are great benefits to having everyone work together. And ultimately, it’s a real benefit to those in need of these services.”
In addition to the usual full day program for the professional audience, this year’s conference included an evening program in which the general public was invited to partake.

The theme of this year’s conference was Recovery-Oriented Care, Recovery-Oriented Communities. Presenters discussed the concept of recovering communities being all-inclusive, regardless of the specific substance or activity and behaviors involved. We also discussed how gamblers are helped by AA, Alanon and other fellowship groups, and detailed which self-care resources effectively cross over from one addiction or behavior to others.

For the first time, the 2012 Minnesota Conference on Problem Gambling took place over a two-day period.

Jim Wuelfing, CPP-R, NRPP, talked about the role of community organizations and recovery support services in a recovery-oriented system of care.

A panel from Project Turnabout/Vanguard discussed the use of a multi-discipline approach to the treatment of problem gambling. The panel included Sandi Brustuen, NCGC II, LADC, director of the Vanguard program; Sheryl Anderson, NCGC, LADC, problem gambling counselor; Jennifer Briest, MSW, LGSW, CGC, Vanguard’s clinical social worker; and Marti Paulson-Strommen, ICARN, director of Healthcare and Intake Services.

Attorney John Apitz, JD, from the law firm Messerli & Kramer teamed up with Minnesota Recovery Connection executive director Nell Hurley to discuss advocacy and how to effectively reach Minnesota legislators.

Dr. Randy Stinchfield, University of Minnesota clinical psychologist, presented the latest research on the gambling patterns of Minnesota youth.

Nell Hurley and Jim Wuelfing teamed up for a how-to session on recovery coaching, its design, development and practice.
The following questions can help you examine your interactions with gambling and determine if you might have a problem. Most problem gamblers will answer yes to at least seven of these questions. We encourage you to explore these questions and share them with family and friends as a way to learn more about problem and compulsive gambling. If you need help, www.NorthstarProblemGambling.org provides access to additional tools and resources. Or call the Minnesota Problem Gambling Helpline at 1-800-333-HOPE at any time.

Source: Gam-Anon International Services

Gambling Questionnaire

1. Did you ever lose time from work due to gambling?
2. Has gambling ever made your home life unhappy?
3. Have you ever felt remorse after gambling?
4. Did you ever gamble to get money to pay debts or otherwise solve financial difficulties?
5. Did gambling cause a decrease in your ambition or efficiency?
6. After losing, did you feel you must return as soon as possible and win back your losses?
7. After a win did you have a strong urge to return and win more?
8. Did you often gamble until your last dollar was gone?
9. Did you ever borrow to finance gambling?
10. Have you ever sold anything to finance gambling?
11. Were you reluctant to use “gambling money” for normal expenditures?
12. Did gambling make you careless of the welfare of yourself and your family?
13. Did you ever gamble longer than you had planned?
14. Have you ever gambled to escape worry or trouble?
15. Have you ever committed, or considered committing, an illegal act to finance gambling?
16. Did gambling cause you to have difficulty sleeping?
17. Do arguments, disappointments or frustrations create within you an urge to gamble?
18. Did you ever have an urge to celebrate any good fortune by a few hours of gambling?
19. Have you ever considered hurting yourself as a result of your gambling?

Source: Gam-Anon International Services
Pilot Site Allows Recovering Gamblers to Support Each Other Online

One of the challenges for recovering gamblers living in less populated areas is finding conveniently located recovery groups such as Gamblers Anonymous. However, a new pilot program created by Minnesota’s Project Turnabout, the state’s only residential gambling treatment program, is providing an online option for its alumni/recovering gamblers to easily – and safely – chat with others facing the same challenges.

An important aspect of the program, which is available at no charge to Project Turnabout’s alumni via the organization’s website, is that it is secure, meaning people are more willing to share information with each other knowing that it’s for their eyes only. “This is not counseling, but rather a way for people going through similar post-treatment challenges to share their feelings with each other,” says Mike Schiks, CEO of Project Turnabout. While there may be other online self-help groups available for gamblers, this site is believed to be the first one exclusively for alumni of a treatment center.

“An important aspect of the program is that it is secure, meaning people are more willing to share information with each other knowing that it’s for their eyes only.”

Online support programs for self-help groups are considered to be largely untapped by the recovery community. “Online support programs can be particularly beneficial in areas where there are not enough GA groups or other self-help support services,” says Cathie Perrault, executive director at Northstar Problem Gambling Alliance. “States like Minnesota that are primarily rural can benefit greatly from these kinds of online programs.”

TWINS STUDY SHEDS LIGHT on Role of Environment and Genetics on Problem Gambling in Young People

It’s been well established that genes play a major role in predicting gambling disorders but there have been considerably fewer studies examining the role of genetics in young adults. Recent research performed by a group of Minnesota researchers assessed the role of genetic and environmental factors in the behavior of gamblers between the ages of 17 and 24. The study used data from the Minnesota Twin Family Study, a longitudinal study of 1400 twins (identical and fraternal) conducted by researchers at the University of Minnesota. Studies of identical twins provide the best opportunity to separate

Roger Svendsen was honored with NPGA’s fourth annual Outstanding Service Award for his special dedication to helping problem gamblers and their families. Roger is well known throughout the state of Minnesota and nationally for his long-term work in prevention and education for alcohol and other drugs, tobacco and gambling. While with the Minnesota Institute of Public Health (MIPH, now known as Invitation Health Institute), Roger helped develop and operate the problem gambling helpline. He was the director of the Problem Gambling Resource Center, served on the board of the National Council on Problem Gambling, been a member of the governor’s advisory council on problem gambling, and served as director of the Northstar Problem Gambling Alliance for two years. Roger has also co-authored several publications related to gambling, and has taught addiction courses as a community faculty member at Metro State University and Century College in Minnesota.

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Dr. Jon Grant, Professor of Psychiatry at the University of Minnesota and co-director of the Impulse Control Disorders Clinic at the University of Minnesota, will be leaving Minnesota to become the director of addiction research at the University of Chicago. Dr. Grant has made significant contributions to the field of gambling research during his combined 11 years in Minnesota. We caught up with Dr. Grant for a few moments prior to his leaving to reflect on the progress that’s been made in the field and how he sees it evolving in the future.

What have you found to be the most interesting part of your research with problem gambling over your time here?

I think the most interesting – and rewarding – part of the research is how well gamblers can ultimately do. As devastating an illness genetic and environmental factors. The findings suggest that the role of non-shared environmental influences (i.e., environmental influences that effect one twin but not the other such as college peers; these are distinguished from shared environmental influences such as parenting) takes on significantly greater importance at age 24 than at age 17. The role of genetics in gambling behavior was also higher at age 24 than at age 17, but was less significant.

“Our study suggests that different types of environmental influences affect the gambling behavior of young adults at different stages of their development,” says Serena King, Ph.D., Associate Professor of Psychology at Hamline University and lead investigator for the study. Specifically, the relative influence of shared environmental factors (such as parenting) decreased substantially as study participants moved into their twenties. The study also found essentially no differences in the role of genetics in predicting gambling behavior between men and women.

From a public health perspective, the study suggests that efforts for prevention and intervention should focus on non-shared environmental factors including peer relationships.

In addition to Dr. King, collaborating researchers included Margaret Keys, Ph.D., Ken Winters, Ph.D., Matthew McGue, Ph.D. and William Iacono, Ph.D. The research was supported by a research grant from the National Center for Responsible Gaming.

How will your work focus be changing?

It really won’t be a change in any huge way. I’ll still be doing research, largely on gambling, as well as other addictions. I think the difference is that Chicago is a much bigger city with different forms of gambling, different socio-economic issues that affect gambling, different ethnic racial groups, etc. So it’s basically the same thing I’ve been doing but on a slightly bigger stage.

What parting words might you have for those who care about problem gambling in Minnesota?

Minnesotans can be very proud of everything that’s being done for gambling, both in understanding it, funding for research, and the high quality of gambling treatment for people who otherwise couldn’t receive it. I think Minnesota has historically been a leader in problem gambling and will continue to lead the way. My hope is that the political powers in the state recognize what a valuable treasure this is in Minnesota.
Upcoming event

13th Annual NCRG Conference
Exploring New Trends in Recovery, Research and Responsible Gaming
September 30-October 2, 2012
Las Vegas, NV
For more information visit: www.ncrg.org/public-education-and-outreach/conference