

# Addressing Problem Gambling among Veterans and Active Duty Military

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## Learning Objectives

- Participants will be able to:
  - Understand the provision/scope for addiction screening in the Armed forces
  - Estimate extent of problem gambling among active duty and veteran populations based on available research
  - Identify risk factors for gambling disorder among military and veteran populations
  - Adapt treatment strategies to best align with military and veteran groups.

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# **Gambling Disorder Screening Provision Fiscal 2019 Defense Authorization Act**

## How Will This Work?

- Section 733 of the House Armed Services Committee Report 115-874 requires the Department of Defense (DoD) to incorporate medical screening questions specific to gambling disorder in the next annual periodic health assessment conducted by the Department as well as in the Health Related Behaviors Surveys of Active-Duty and reserve component servicemembers.
- The Secretary of Defense is required to submit a report to Congress on the findings of the assessment and surveys in connection with the prevalence of gambling disorder among servicemembers.

## History

- Slot machines on military installations since the 1930s
- Removed from domestic installations in 1951
- Approximately 3,141 video slots on installations in 12 countries
- Handle (amount put into the machines) of over \$1 billion per year.
- Total revenue 2011 – 2015 = \$538,900,000
- Annual revenues of more than \$100 million dollars to DoD department of Morale, Welfare & Recreation (MWR).





## History and Research

- DoD's 2002 Health Related Behaviors Survey of active-duty population – 1.2% met DSM lifetime criteria for pathological gambling
- DoD Health Related Behaviors Reserve Component Survey – 1.3% met lifetime DSM pathological gambling criteria
- U.S. Veterans have been found to have elevated rates of problems with gambling compared to non-Veterans. 10.8% lifetime problem or pathological gambling (Westermeyer et al., 2013)
- A national survey of U.S. Veterans found that approximately 2.2% screened positive for at-risk or pathological gambling (Stefanovics, Potenza, & Pietrzak, 2017)
- 4.2% of Iraq/Afghanistan Veterans exhibit at-risk or probable disordered gambling (Whiting et al., 2016)

## History and Research (Cont'd)

- Risk factors for gambling addiction include individuals who are male, young, prone to risk taking/sensation seeking, use and abuse substances, experience stress, depression and PTSD--all issues known to be more likely among military personnel.
- Risk Factors (Steenbergh, 2008)
  - Males
  - Ethnic minority
  - Low household income predicted frequent gambling
  - Frequent binge drinking
  - Physical fighting
  - Cigarette smoking
  - Tobacco chewing



# WHAT IS THE MILITARY

- Not just a job, a way of life
- Not a union or fraternal organization
- Tradition
- Each service has its own culture
- Shaped by national cultures including: geography, demographics, history and politics
- Governed by civilians
- Purpose

# WHY UNDERSTAND MILITARY CULTURE

- Veterans will identify with military culture after their service
- Values and identities continue to be critical and important
- Each Veteran will have their unique story – context of the Veteran's experience
- Develop therapeutic alliance
- Understanding the perspective and context of Veteran mental health conditions
- Improved treatment planning
- Appreciation for military service
- Learning military structure, differences of branches, rank, values and ideals

## Defining the VETERAN Population

- There are approximately 20.4 million Veterans of the U.S. Armed Forces alive today.
- 60% of Veterans living today served during times of war and served during personal time of adult identity development.
- Little less than half of Veterans have experienced combat.
- The Gulf War era Veteran, about 7.1 million, is the largest segment of the Veteran population surpassing Vietnam era Veteran in 2016.

# UNIQUENESS OF MILITARY CULTURE

- Military career places stress on members and families
- For most folks their job is what they do, military deeply defines who they are
- Military life offers a sense of community with clearly defined rules and expectations
- Share a unique bond, professional ethic, ethos and value system
- Sense of community and camaraderie unlike any other profession
- Fosters a warrior ethos that frowns upon any weakness and timidity
- Commanders responsibility for subordinates behavior

## Current Status of Addressing Gambling Disorder in DoD: Don't Ask, Don't Tell

(Government Accountability Office, 2017)

Less than 0.03 percent of the average number of service members in each year—were diagnosed with gambling disorder or were seen for problem gambling in fiscal years 2011 through 2015 in the Military Health System (MHS)

Table 3: Number of DOD and Coast Guard Servicemembers Who Were Seen by the Military Health System for Pathological Gambling, Gambling Disorder, and Problem Gambling (Fiscal Years 2011 through 2016)

Fiscal Year	Active-duty component						Reserve Component					
	Air Force	Army	Coast Guard	Marine Corps	Navy	Total	Air Force Reserve and Air National Guard	Army Reserve and Army National Guard	Marine Corps Reserve	Navy Reserve	Coast Guard Reserve	Total
2011	26	63	3	19	26	137	1	18	0	1	2	22
2012	21	53	4	22	19	119	3	15	0	0	2	20
2013	32	44	2	18	25	121	3	14	0	0	1	18
2014	31	55	0	10	32	128	1	15	0	0	1	17
2015	30	54	0	19	28	131	1	11	1	1	4	18
<b>Total</b>	<b>112</b>	<b>216</b>	<b>7</b>	<b>78</b>	<b>107</b>	<b>614</b>	<b>6</b>	<b>66</b>	<b>1</b>	<b>2</b>	<b>8</b>	<b>72</b>

Source: DOD Military Health System Data Repository | OIG-17-114



## Post Traumatic Stress, Gambling, and Well-Being

- Greater negative emotionality (Ledgerwood & Milosevic, 2015).
- Greater use of gambling to cope with negative emotions (Ledgerwood & Milosevic, 2015).
- Greater emotional distress in general (Najavits et al., 2011)
- Greater suicidality (Najavits et al., 2011)
- Greater likelihood to seek mental health treatment (Najavits, 2010)
- Preference for PTSD treatment or both (Najavits, 2010)
- Large number of psychiatric comorbidities (Chou & Afifi, 2011)

## Connecting Gambling to Trauma Symptoms: Gambling as Solution to Trauma

- You have survived trauma, what has helped you manage this experience?
- What has helped you live with painful feelings?
- How do you manage your stress today?
- What activities help you feel safe or reduce anxiety?  
Gambling?
- What do you do if you have a nightmare?



## CO-OCCURRING DISORDERS

- 10 percent of Veterans using VA treatment services are problem or compulsive gamblers
- Veterans in treatment for PTSD may be as much as 60 times more likely to have a gambling problem as age matched members of the general population
- Among Veterans hospitalized in inpatient psychiatric units, 40% had some form of gambling problem
- Rates of depression among Veterans with pathological gambling problems have been shown to be as high as 76 percent
- Suicide is extremely common with 40% of Veterans seeking treatment for gambling have reported suicide attempts

## SUICIDE

- Veterans have a suicide rate 50% higher than those who did not serve in the military
- Veterans serving during the Iraq and Afghanistan wars between 2001–2007 Deployed: 317,581 total Veterans 1,650 total deaths 21.3% death by suicide.
- Suicide rate of female Veterans: 11.2 out of 100,000 Veterans. Suicide rate of male Veterans: 33.4 out of 100,000 Veterans.
- Suicide risk was higher among younger, male, white, unmarried, enlisted, and Army/Marine Veterans; however, predictors of suicide were similar between male and female Veterans



## Active Duty, Veteran, Domestic Partner Study (Zorland et al., 2010)

- 20% filed bankruptcy – Of those 40% attributed bankruptcy to gambling
- Over 30% of Path. and Problem Gamblers (P/PG) reported hurting or threatening another person due to gambling or gambling debts compared to 3.5% for non-problem or at-risk gamblers NP/ARG)
- Over 27% of P/PG reported hurting or threatening someone with a weapon due to gambling or gambling debts (2% NP/ARG)
- Nearly 25% P/PG threatened a partner or family member
- Over 31% P/PG reported being hurt or threatened by a partner/family member
- 35% reported gambling related criminal activity (64% path. Gamb.; 8% problem gamb.; 8% at-risk gamb.)

# Gambling Disorder Consequences

- 20% file for bankruptcy
- 50% current or lifetime substance abuse
- Veterans with gambling problems are 50% more likely to be homeless
- 35% involved in domestic violence
- 40% of veterans seeking treatment for gambling report a suicide attempt
- Career and family impact

# BARRIERS TO TREATMENT

- Approximately 60% of the military personnel who experience mental health problems do not seek help, yet many of them could benefit from professional treatment.
- The value placed on the actions of the group to achieve military objectives above all else.
- Requirement for operational readiness through good health, conflicts with the direct availability of mental health care.
- Reporting requirements – Relinquish weapons

## IDENTIFYING, ASSESSING AND TREATMENT OF PG IN THE MILITARY

- Incorporate gambling disorder questions in a systematic screening process (most wont seek help)
- Update guidance on how to deal with gambling
- Gambling problems may not be identified until they reach a critical point affecting the individuals readiness and have implications for national security, as well as harming the financial situation of the service member
- Lack of materials available to help support medical and non medical staff identify gambling disorder and adequately assess the problem.
- Treatment impossible w/o guidance. Prevention improves readiness and avoids administrative and disciplinary actions



## CRITICAL POINTS

- All assessments for Addiction and Mental Health issues with Military Personnel and Veterans should require assessing for Problem Gambling issues. (NDAA 2019)
- Problem Gambling can be a significant Co-Occurring Disorder issue and should be considered in all individuals with Depression, PTSD and TBI assessments and screens
- Military Health coverage should be included for this issue. In addition, more research is needed relative to the incidence of problem gambling in the military.



## Screening Best Practices

- Include brief screen on intake (and don't expect much)
- Also use subtle questions about gambling activities. Be Creative
- Train and provide support for clinicians conducting screens so that they feel competent to address gambling and problem gambling
- Repeat screen after relationship and trust established (at treatment plan updates?)
- Conduct screen in conjunction with psychoeducation on impact of gambling on recovery/problem gambling

## Best Practices in addiction treatment for Veterans

- Motivational Enhancement Therapy
- Behavioral Couples Therapy
- CBT Coping Skills Training
- Contingency management
- Community enforcement approach/ Environment of treatment
- 12 step facilitation
- Self help groups
- Building coping strategies vs trauma based therapy
- Medication management
- Mindfulness

## Additional VA Resources

- National Veterans Crisis Helpline: 1-800-273 – TALK (8255)
- Maryland Department of Veterans Affairs
- Baltimore VA Outpt Gambling Treatment Program
- Cleveland DVAMC Gambling Treatment Program
- [www.consumercredit.com/financial-education/military-veterans/](http://www.consumercredit.com/financial-education/military-veterans/)
- militarygamblesafe.org

