Problem gambling: a community perspective

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Editor's Note: This Editorial from Victor Ortiz, MSW of the Massachusetts Council on Compulsive Gambling is part of our month-long Special Series on Gambling Disorders.

I have been a social worker and provider for nearly twenty five years, and have spent the last seven years in the area of problem gambling at the Mass Council on Compulsive Gambling. Currently, I serve as Senior Director of Program and Services, and direct state-wide efforts in the area of treatment development, trainings, and services of problem gambling. In November 2011, Massachusetts passed legislation for expansion of gambling. Although this created excitement for many focused on employment opportunities, it also created great concerns about the potential impact on public health.

My role has allowed me the opportunity to engage various communities throughout the Commonwealth, and witness firsthand the various challenges and concerns expressed by providers and community members. In my travels, I recall a conversation with a young woman who expressed her frustrations in her attempt to access problem gambling services. She lived in Sturbridge, MA and needed to travel over twenty miles to Worcester, MA in order to access care. While in Worcester, she was made aware that her health insurance was not accepted at the location, and was referred to a location that is over ten additional miles to Fitchburg, MA. For those of us who work on the front lines, this is a case too familiar and common. There are too many barriers to treatment: lack of public understanding of gambling disorders, shame and stigma, and cost/insurance; lack of access to conveniently located services represents an additional hurdle for people experiencing gambling disorders.

As Massachusetts continues in the mist of "the era of expansion gambling," there is great need to establish comprehensive services that address gambling disorder. Currently, there are very few treatment services and options for individuals suffering from gambling disorders. The gaps in treatment services and lack of options contribute to the great challenge of health disparities faced by various

communities. For example, the community of Springfield is one of many that faces such great challenges. Latinos in Springfield make up 38.8% of the population and face great challenges in the areas of education, unemployment, medical and behavioral health, addiction, and violence. In the area of education, Latinos in Springfield make up 63% of the overall student population, while facing challenges in the area of out-of-school suspensions, dropout rates, assessment scores, and graduation rates in comparison to non-Latinos. In the case of medical health, Latinos adults in Springfield have high rates of fair/poor health, chronic health conditions, HIV diagnosis, and lack of medical insurance. The challenges for Latinos in Springfield in the areas of education and medical health are just two of many examples of health disparity that are deeply tied to poverty. A resort casino is expected to open in downtown Springfield in 2017.

As we move forward in the "era of expansion gambling," we must carefully consider how gambling will impact those already burdened by poverty and health disparities. Also, treatment systems in those communities must also be evaluated and supported. One promising idea is to integrate gambling disorder services within existing treatment systems. Although this idea has some potential advantages, not having the pulse on the current challenges within existing systems and their surrounding communities can lead to multiple missteps and wrongful observations. I recall a conversation I once had with a treatment provider in Springfield, who informed me that he has a current case load of 120 clients. He raised the concern of *How are we going to integrate gambling disorder treatment into our practice with such a heavy volume of clients, while also haggling with insurance companies, a high degree of paper work, and high pressure to meet productivity metrics?* Unfortunately, he is not the only one who shares this sentiment. It has become a common cry by many providers in high-stress communities.

Although the challenges are great and treatment is very important, utilizing a public health approach to gambling provides many possibilities. A public health approach is an integrated strategy for better understanding gambling disorders that includes individuals, populations, and at-risk populations. Also, a public health approach views gambling on a continuum from none, to recreational, to highly problematic. Disordered gambling is interconnected with a variety of different issues that are among the issues faced by many in Springfield, MA (e.g., poverty, crime, education, unemployment, and health disparity) and other communities. A public health viewpoint creates an opportunity to address

gambling from a comprehensive perspective, which could lead to better outcomes. In this “era of gambling expansion,” implementing a public health approach that is community sensitive and tailored to ethic groups within their environments with the proper resources could be a valuable first step.



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Further Reading

Korn, D., & Shaffer, H. J. (1999) Gambling and the health of the public: Adopting a public health perspective. *Journal of Gambling Studies, 15*, 289-365.

Shaffer, H. J. & Martin, R. (2011). Disordered gambling: etiology, trajectory, and clinical considerations. *Annual Review of Clinical Psychology, 7*, 483-510.