



Problem Gambling Screening Guide

*Guidelines for Integrating Evidenced Based Gambling
Screening and Assessment into Current Practice*

**A Clinical Guide for Behavioral Health Providers and
Medical Professionals**

Version 2.1



UNIVERSITY *of* MARYLAND
SCHOOL OF MEDICINE

The Maryland Center *of* Excellence
on Problem Gambling

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INTRODUCTION

The Maryland Center of Excellence on Problem Gambling (the Center) is a program of the University of Maryland School of Medicine and funded by the Maryland Department of Health’s Behavioral Health Administration. The Center’s mission is to promote healthy and informed choices regarding gambling with a goal of raising awareness to the potential harms of gambling and serving as a resource to Marylanders.

National research shows that most adults who gamble, do so responsibly; however, in the United States, an estimated 2 million adults (1%) will meet the criteria for severe gambling problems. The 2022 Statewide Gambling Prevalence (Study) in Maryland found that 90.4% of individuals residing in Maryland have gambled in their lifetime. Using the NODS and NORC Screen for Gambling Problems, 4% of Marylanders were identified as Disordered Gamblers, and 6.9% were identified as being at-risk of Disordered Gambling. These numbers may increase with the expansion of legalized gambling.

The Center is committed to enhancing the knowledge and expertise of behavioral health providers and medical professionals to address problems related to gambling and gambling disorder through increased screening, assessment, awareness, prevention, intervention, and treatment strategies. Part of the Center’s key initiatives is to bring attention to the impact gambling behaviors may have on one’s recovery, health, and overall well-being.

Each year the Center promotes **Gambling Disorder Screening Day**, an annual one-day international event recognized on the second Tuesday in March, in collaboration with March Problem Gambling Awareness Month. This Day was first promoted by the National Council on Problem Gambling (NCPG) and the Cambridge Health Alliance Division on Addiction to educate and support healthcare providers in screening for Gambling Disorder.

Many cases of Gambling Disorder go undetected due to insufficient screening and assessment. Gambling Disorder Screening Day addresses the critical importance to detect gambling related problems as early as possible and reduce harms. The Center encourages all health organizations and providers to participate in this annual event and incorporate an evidenced based gambling screening tool as a part of their regular practice.

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ABOUT THIS GUIDE

The goal of screening is to promote early detection of potential problems, reduce the risk of disease, and/or offer the most effective treatment. Integrating an evidenced based screening tool aids in identifying individuals who may require brief interventions or further assessment. This guide is available to encourage healthcare professionals to incorporate an evidenced based gambling screening tool into their regular clinical practice to assist with early detection and harm reduction.

NCPG estimates the national social cost of problem gambling is 14 billion dollars annually. These costs have an impact on the healthcare system, as persons experiencing gambling related problems are more likely to smoke and utilize the emergency department. Such factors can have an impact on one's Social Determinants of Health and will be referenced for further consideration.

Gambling harms may also include homelessness bankruptcy, divorce, loss of friendships, and unemployment. Often referred to as the hidden addiction, gambling cannot be detected through toxicology reports and lives in secret. Furthermore, Gambling Disorder has the highest rate of suicide compared to other Substance-Related and Addictive Disorders. It is imperative that gambling screening, assessment, and conversations are implemented to decrease these harms.

Starting the conversation can break down client barriers, reduce stigma and minimize possible harms related to gambling. The Center hopes this guide will serve as a comprehensive resource for Maryland's healthcare providers to recognize the significance of addressing potential gambling harms through evidenced based screening and comprehensive assessment.

This guide offers four evidenced based screening tools in the appendices. One evidenced based screening tool for adolescents is included, however, please note this guide is intended for those working with persons considered legal adults. Recommendations for brief interventions and gambling related resources for those seeking help in Maryland are contained within this guide.

As healthcare providers begin to address gambling with those they serve, it is encouraged to begin with the definition of gambling, offer examples of gambling, and incorporate an evidenced based gambling screening tool. Suggestions for integrating gambling related questions into a biopsychosocial assessment are included to assist providers should screening indicate further assessment is needed.

DEFINING GAMBLING

Gambling dates back to a time before written history. The Bible references the *casting of lots* to render an impartial, unbiased decision on important matters. In the United States, during the period of financial depression and following the Revolution, lotteries were a common means of obtaining large amounts of money and used to fund buildings at Harvard University and other Government projects. Today, State lotteries are the most common type of gambling in the country.

The Center describes gambling as the act of risking something of value (money or property) on an activity that has an unknown outcome. Gambler's Anonymous indicates that any betting or wagering for self or others, whether for money or not, no matter how slight or insignificant, where the outcome is uncertain or depends upon chance or 'skill,' constitutes gambling. *Unknown Outcome* is the common denominator when it comes to defining gambling, yet many fail to recognize the many forms of gambling which can include Bingo, Raffle Tickets, or Cryptocurrency.

Maryland has various forms of legalized forms of betting with the legal age starting at 18 years old for lottery and 21 years old to enter and wager at a casino, for example. Those that gamble before the legal age are at greater risk for development of problems related to gambling later in life. There is no age criteria or limit for a diagnosis of Gambling Disorder.

Gambling activities are normalized in our day-to-day; during our commutes we see billboards and hear advertisements for gambling as opportunities to win money. With legalized Sports wagering, it is a greater challenge to escape the odds. The potential harms are hidden from view, even from healthcare providers.

As a result, evidenced based gambling screening is replaced with a yes or no question – "do you gamble?". This closed question can lead to misunderstandings and misinterpretations as there are many forms of gambling which may not receive consideration in this form of questioning. Therefore, before implementing any questions related to gambling it is beneficial to review the definition of gambling and provide some examples.

Some Examples of the Types of Gambling

- | | |
|---|---|
| <ul style="list-style-type: none"> • Lottery <ul style="list-style-type: none"> ▪ Keno ▪ Scratch-offs ▪ Mega-Millions (across states) ▪ Morning, Mid-day, Evening drawings ▪ Video Lottery Terminals (VLTs) • Casino Games <ul style="list-style-type: none"> ▪ Electronic Gaming Machines (Slots, Poker) ▪ Table Games (Poker, Roulette, Baccarat, Craps) • Sports Betting <ul style="list-style-type: none"> ▪ Mobile and In-person ▪ Fantasy Sports ▪ Horse Racing | <ul style="list-style-type: none"> • Office or Workplace Pools • Electronic Sports (E-Sports) • Video Games <ul style="list-style-type: none"> ▪ Loot Boxes ▪ Skin Gambling • Simulated Gambling • Church & Community Fundraisers <ul style="list-style-type: none"> ▪ Casino Night ▪ Wheels of Chance • Bingo • Raffles • Pull Tabs • Dice or Card games • Day-trading • Cryptocurrency |
|---|---|

Any betting or wagering on an event or activity with an unknown outcome is considered Gambling. *Can you think of other types of gambling?*

Minimum Age for Popular forms of MD Gambling	
Casino Gambling: slots, table games	21
Sports Betting: in-person and mobile	21
E-Sports: Video Games	21
Lottery: keno, scratch-offs	18
Horse Betting: off-track betting	18
Fantasy Sports: daily, weekly, etc.	18
Bingo Halls	18/21

WHAT IS GAMBLING DISORDER

In 2013, the Diagnostic and Statistical Manual (DSM) 5 was released and changes to Gambling Disorder diagnosing were made. One such change was reclassifying and renaming Gambling Disorder as a Substance-Related and Addictive Disorder. Previously classified as an Impulse Control Disorder, Pathological Gambling, was classified with other diagnoses such as kleptomania. Gambling Disorder is now recognized as an addictive disorder by the behavioral health and medical community. It is the only non-substance addictive disorder in this classification.

There are several reasons for this reclassification. Growing research reveals Gambling Disorder has common elements to substance use disorders. Some of the visible similarities include the devastating impact on families, preoccupation with the addictive behavior, and the financial consequences. Less obvious are the changes that happen in the brain.

Brain imaging studies and neurochemical tests have shown that gambling activates the reward system in much the same ways as substances. In fact, in persons who gamble, dopamine (the feel-good neurotransmitter) is released not only when winning, but also when experiencing near misses. Included in this guide is the DSM-5 diagnostic criteria for Gambling Disorder (See APPENDIX A), which includes ruling out other diagnoses, and specifications for levels of severity. Use of the DSM-5 can be considered the gold standard for making a formal diagnosis. Of note, the amount of money won or lost, and time spent gambling is not a part of a formal diagnosis.

Under further consideration by the American Psychiatric Association and recognized by the World Health Organization and ICD-11 is Gaming Disorder. This diagnosis should be taken under consideration in your own clinical work. It is described as a pattern of gaming behavior (digital-gaming or video-gaming) characterized by impaired control over gaming and an increased priority given to gaming over other activities to the extent that gaming takes precedence over other interests and daily activities. Please reach out to the Center for more information and resources associated with harms related to gaming, which does not include general use of the internet or social media.

Gambling Disorder Risk Factors

Current research related to gambling and gambling disorder continue to indicate the following factors (listed below) increase one's susceptibility to problems arising related to gambling:

- ❖ Male
- ❖ An early big win
- ❖ Single or Divorced
- ❖ Early age of starting gambling
 - *Under the Legal age to gamble*
- ❖ Member of an underserved community
- ❖ Adverse Childhood Experiences / Trauma
- ❖ Intimate Partner Violence / Domestic Violence
- ❖ Having mistaken beliefs about the odds of winning
- ❖ Living in a neighborhood with socio-economic disparities
- ❖ Proximity to or Working in a casino or other gambling venue
- ❖ History of risk-taking or impulsive behavior, competitiveness
- ❖ Personal History of substance use or other behavioral health disorder
- ❖ Family History of gambling disorder or other behavioral health disorder

These are factors to consider when thinking about what makes someone more at-risk for developing a gambling disorder. The list above is not all-inclusive. In fact, women that develop a problem with gambling usually do so later in life.

Risk Factors for Problematic or Disordered Gambling in Adolescents

- ❖ Possessing greater impulsivity
- ❖ Having parents with gambling problems
- ❖ Having an earlier age of first gambling activity
- ❖ Having areas of poor functioning, including family/social problems, medical, psychiatric, and/or substance use disorders

GAMBLING DISORDER AND SDOH

The Social Determinants of Health (SDOH) are the non-medical factors that influence health outcomes. They are the conditions in the environment where people live, learn, work and play that affect a wide range of health risks and outcomes. These broader set of systems shape the conditions of daily life and contribute to widespread health disparities and inequities. For example, people who do not have access to grocery stores with healthy foods are less likely to have good nutrition.

The World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) recognize five categories that should be considered to determine the social aspects that influence health outcomes:

- 1. Economic Stability:** The connection between one's financial resources, income, and their health. Key factors include poverty, housing instability, and food insecurity.
Persons experiencing harms related to gambling are most likely to seek treatment when they are financially devastated. The individual may no longer be able to afford to live on their own, despite a large income.
- 2. Education Access and Quality:** The connection between one's education to health and wellbeing. Key factors include early childhood education, language and literacy, and high school graduation.
Maryland's Prevalence Study (2022) found that those with a high school education or less are more likely to be at risk for gambling disorder.
- 3. Social and Community Context:** The connection between the characteristics of the contexts where one lives, learns, works, and plays and their health and wellbeing. Key factors include discrimination, racism, incarceration, social cohesion, and civic participation.
The U.S. Department of Justice has found that inmates are three to five times more likely to develop problems related to gambling.
- 4. Health Care Access and Quality:** The connection to ones understanding of health services and their own health. Key factors include health literacy, access to health care, and access to insurance.
People with gambling-related problems are more likely to smoke, consume excessive amounts of caffeine, be obese, and have more emergency department visits.
- 5. Neighborhood and Built Environment:** The connection between where a person lives (housing, neighborhood, and environment) and their health and wellbeing. Key factors include access to foods that support healthy eating patterns, crime and violence, and quality of housing.
Persons living in close proximity to or who are employed at a casino or other gambling venue are at greater risk of developing problems related to gambling.

As more research is done, the correlations between the SDOH and the risk factors for problems related to gambling will become more evident.

SCREENING FOR GAMBLING

The Center supports behavioral health providers and medical professionals to include an evidenced based gambling screening as part of their regular practice. It is important to note that before asking any questions about gambling, the definition of gambling and providing examples of the types of gambling should be reviewed with your client. Asking simply if the client does or does not gamble can create room for misinterpretation from both the clients' and healthcare professionals' perspective.

Evidenced based brief screening tools can be implemented at any phase of the treatment process. It is encouraged that gambling screens are incorporated into existing protocols required for admission and repeated during treatment plan reviews or yearly physicals.

The four brief evidenced-based gambling screening tools highlighted in this guide are described below and can be viewed at the end of this guide (See APPENDIX B, C, D, E). Incorporating gambling questions into a biopsychosocial assessment will be discussed and the DSM-5 criteria for Gambling Disorder is included in APPENDIX A.

Lie-Bet Tool:

The Lie-Bet questionnaire is a two-item tool that has been deemed valid and reliable for ruling out pathological gambling behaviors. If an individual answers yes to one or both questions on the Lie-Bet questionnaire, further assessment is indicated (See APPENDIX B).

Brief Biosocial Gambling Screen:

Is a three-question brief screening instrument that helps a person decide whether to seek a more formal evaluation or treatment for their gambling behavior. You can also use this with your clients to determine if a more comprehensive screen is necessary. This tool is developed by the Division on Addiction, Cambridge Health Alliance (See APPENDIX C).

Problem Gambling Severity Index:

An abbreviated version of the original tool called the Canadian Problem Gambling Index, it consists of nine items rather than 31. Clients can use it as a self-assessment tool, or it can be used as part of your regular screening process (See APPENDIX D).

Brief Adolescent Gambling Screen:

The three-item Brief Adolescent Gambling Screen (BAGS) was derived from the nine-item Gambling Problem Severity Subscale (GPSS) of the Canadian Adolescent Gambling Inventory (CAGI). The CAGI was the only assessment tool developed specifically for adolescents, containing items written by and for adolescents (See APPENDIX E).

Visit Website for additional evidenced based screening tools

<https://www.mdproblemgambling.com/for-treatment-providers/>

BRIEF INTERVENTIONS FOR GAMBLING

Once screening is completed, give feedback about the results. Become open-minded as you work to understand the client's perspective of their behavior. Engage in a conversation about the client's readiness to change. Discuss the pros and cons of maintaining or abstaining from gambling. Inform the person about safe limits regarding gambling and encourage them to take a break when gambling is no longer fun.

Additional Responsible Gambling Tips:

- Never borrow money to gamble.
- Don't gamble with money that is for essentials such as food or housing.
- Have a Plan: Decide what to do if you win or lose.
- Set limits on how much you're willing to lose and how long you want to play.
- Consider teaming up with a friend to help each other stick to a betting plan.
- Set a timer on your phone to keep track of time spent betting.
- Know the Game: Make sure you understand the odds and house edge.
- Remember: you're playing to have a good time – never chase your losses.
- Treat gambling as a form of entertainment and not a way to make money.
- Set a Limit: Mobile Apps allow you to set deposit limits, loss limits, and wager limits on daily, weekly, monthly maximum amounts.

The Center has several free awareness materials that can be displayed in your offices or lobbies which can be helpful to start a conversation about gambling. The Center's "Turtle Card" (APPENDIX G) is a business size card that gives examples of low and high-risk gambling. This card can be used during a brief intervention or as a tool for a group discussion.

Additionally, the Center uniquely offers Peer Support by those that have lived gambling addiction and recovery experience. Peers can be a vital resource for those impacted by gambling harms and for persons unsure if they want or need help. Individuals seeking help may be connected to the Center's Peers by a warm handoff directly from the Maryland helpline **1-800-GAMBLER**.

Screening is still the first step. If screened positive, and if the client is ready, further assessment is recommended. These tools are not used to form a diagnosis, the DSM-5 criteria should be referenced for symptoms. Next, this guide will discuss ways to incorporate gambling related questions into a biopsychosocial assessment. At the end of this guide, resources for referral are listed which include the Center's Certified Peer Recovery Specialists, Gambler's Anonymous, and information about no cost gambling treatment offered to residents of Maryland.

INTEGRATING GAMBLING INTO A BIOPSYCHOSOCIAL ASSESSMENT

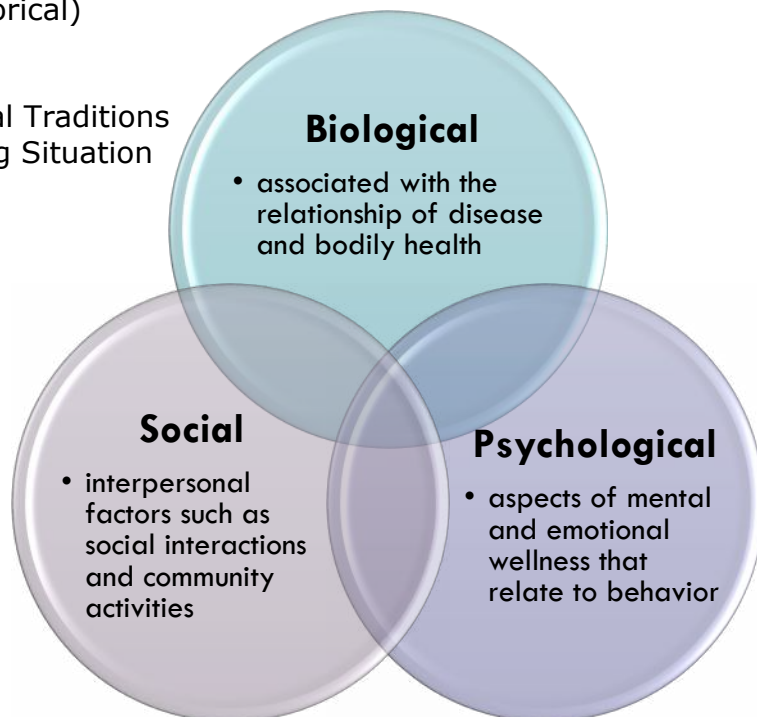
Biopsychosocial Assessments evaluate the biological, social, and psychological aspects that may be contributing to a problem or problems with a client. It is considered a holistic assessment, examining various aspects of a client's life, including culture, education and work history, family and marriage difficulties, and medical issues to better identify an individual's needs and treatment goals.

Many persons with lifetime gambling related problems report they have never received treatment for this specific issue. Research suggests that treatment-seeking samples generally display more severe gambling symptoms and may be more likely to present with comorbid conditions. Primarily evident are Anxiety Disorders, Trauma and Stressor Related Disorders, Cluster B Personality Disorders, Depressive Disorders, and other Substance-Related and Addictive Disorders.

Furthermore, according to the DSM-5, approximately 50% of those diagnosed with a gambling disorder have contemplated suicide; another 17% have attempted suicide. Given these statistics, it is critical to assess for gambling related problems, as they may contribute to a pre-existing behavioral health disorder and impact treatment outcomes.

This section of the guide will discuss ways to incorporate gambling related questions into the following aspects of your assessment with sample questions for each section:

- Behavioral Health (Mental Health, Substance Use, Gambling)
- Medical (Current and Historical)
- Employment History
- Education History
- Family History and Cultural Traditions
- Support System and Living Situation
- Financial Wellness
- Legal History



Behavioral Health (Mental Health, Substance Use, Gambling)

Various research has shown that persons with mental health and substance use disorders develop problematic gambling behaviors at a high rate. The relationship of developing such co-occurring disorders could be bidirectional. For example, loss of money due to gambling may increase symptoms of depression; alternatively, persons who have depression may gamble as a form of escape from painful feelings. Research reports that 96% of individuals with an identified gambling disorder have one or more co-occurring psychiatric disorders.

During an assessment, learning about an individual's personal history of mental health and substance use can will aid the development of treatment goals. The same is true for learning about an individual's gambling history.

Sample Questions: Gambling Behavior

- How old were you when you placed your first bet or wager?
- When did you place your last bet or wager?
- What types of gambling do you participate in?
- How often do you participate in these behaviors?
- How much do you wager on a daily/weekly/monthly/annual basis?
- If gambling is problematic, when did the problems begin?
- Have you had treatment for gambling in the past?
- Do you attend Gamblers Anonymous meetings? If so, how often?

Sample Questions: Mental Health and Substance Use

- Do you feel guilt or shame about gambling?
- Are you less depressed/anxious when gambling?
- How has gambling impacted your emotional and mental health?
- Has gambling been used as an escape from certain events, situations, memories, thoughts, etc.?
- What has the "ripple effect" of gambling been on your emotions, sleep, relationships, productivity, etc.?
- Are other behaviors correlated to gambling behaviors? (e.g., alcohol use, tobacco, other drugs, video gaming, shopping, etc.)

Per the DSM-5, of those with an identified Gambling Disorder, 50% have contemplated suicide and approximately 17-20% have attempted suicide. There is still stigma that gambling is a money problem and that persons are not responsible, this can be internalized and lead to thoughts of being worth more dead than alive. Healthcare professionals are urged to inquire about gambling if persons are expressing thoughts of self-harm.

Sample Questions: Safety

- Do you feel unsafe as a result of your gambling?
- Has a gambling experience ever led you to feeling suicidal?
- What is the impact of your gambling on thoughts of suicide or self-worth?
- If you have attempted suicide in the past, was gambling a factor?

Family History and Cultural Traditions

As with other behavioral health disorders and medical diseases, family history has an impact on health outcomes. The risk of developing a Gambling Disorder increases if problematic or disordered gambling occurs in the family. Witnessing the behaviors associated with gambling activities in the household or amongst peers in the neighborhood leaves an impression on a developing mind.

Gambling occurs at higher rates within minority populations, who for cultural reasons may be less likely to seek treatment. Furthermore, those that have cultural values and beliefs that favor gambling such as those associated with "luck or fate" are more at risk. The forms of gambling that are favored by cultures differ and can include wagering on horses to card games.

Problems related to gambling not only impact the individual; families and friends of a person with a Gambling Disorder are also affected. Your client may be suffering from the financial consequences of their own or their significant others gambling behaviors. The Center recognizes that having conversations about gambling not only help to identify the individual with a problem but may assist in identifying the individual impacted by someone else's gambling.

Sample Questions for the individual client:

- What was your first gambling experience?
- What are your family's attitudes toward gambling?
- What is gambling's role in family activities/traditions?
- What is the role of gambling in cultural traditions?
- Do the forms of gambling played have any cultural connections?
- Cultural attitudes towards gambling problems (Disorder vs. "bad habit" etc.)
- Cultural views toward help and help-seeking.
- Beliefs about ability to "control luck" or outcomes?

Sample Questions for a loved one impacted by gambling:

- What impact has gambling had on you and your family?
- How long have you been aware of your loved one's gambling?
- Do you feel unsafe as a result of your loved one's gambling?
- What is the current money management plan in the home?
- Have you had any money-related arguments around gambling?
- Has gambling ever played a role in domestic violence?
- Would you feel safe playing a part in overseeing the finances or taking the lead role?
- Who are some of your supports?
- Have you ever attended a Gam-Anon meeting?

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Support System and Living Situation

Approximately 7-10+ persons are impacted by one's addictive disorder, these persons can include family, friends, and employers. Therefore, treatment can also be effective for loved ones whether the person in active addiction seeks help or not. We want to consider who is the persons support system, who do they call on for help when needed. Support may include aspects or religion, spirituality, and other connection to community.

Individuals may be residing with others, "couch surfing" due to the inability to afford to live alone. Homelessness is another possible consequence of disordered gambling. This guide is combining questions about a person's support system as this may impact their living situation. Reference page 13 for sample questions specific to loved ones.

Sample Questions:

- Factors limiting treatment options, such as transportation.
- How has gambling impacted the lifestyles of those closest to them?
- How has gambling interfered in relationship roles or responsibilities like parenting, house chores, and bill paying.
- Any tensions, arguments or trust issues in relationships related to gambling?
- Lying or hiding gambling from any relationships? Any way to improve transparency?
- Are family or friends willing to participate in the treatment process? Is the client willing to involve them?

Sample Questions: Spirituality

- How has gambling impacted the sense of spirituality?
- Are there spiritual strengths that can enhance recovery?
- What aspects of spirituality might clients want to develop as part of recovery from gambling?

Legal History

All States, except Utah allow some form of legalized gambling. Yet, the legal consequences of gambling go beyond underage gambling, illegal betting, or bookmaking. Embezzlement, theft, and fraud are crimes more commonly seen among those with an identified Gambling Disorder. Although "illegal acts" is no longer a diagnostic criterion for Gambling Disorder, those with problematic gambling seek solutions to continue their behavior, often with a confidence they will return the money.

"Understanding Joy: The Devastation of a Gambling Addiction" is a revealing documentary on the destructive nature of gambling addiction. Produced by the Center, this documentary tells the story of Joy, a mother who once held a job as a bookkeeper for a small business in Western Maryland. Joy shares her story with fellow inmates at the Maryland Correctional Institute for Women, serving a sentence for her second conviction of theft after stealing more than \$100,000 from her employer.

Temptation lurks inside the prison, where inmates wager candy, shower gel, potato chips and other commissary items, between themselves and with staff like correctional officers. Studies indicate that the rate of problematic gambling is higher among prison inmates than the population at large. Additionally, researchers for the U.S. Department of Justice have found that inmates are three to five times more likely to develop a gambling problem.

Sample Questions: Legal

- Did gambling play a role in any crimes?
- Have you done anything illegal due to gambling?
- Did you commit a crime to get money for gambling?
- Have you taken money from work to gamble (whether it was paid back or not)?
- Have you “borrowed” money from family members or friends without their knowledge or permission?
- If ever incarcerated, did gambling play a role in the time spent in jail or prison?
- If you have violated parole/probation in the past, was gambling a factor?

Financial Wellness

Talking about money can be seen as taboo, and the impact finances can have on mental health may not be readily addressed. Poverty-related stress occurs when the constant obstacles of meeting basic physiological (e.g. food, housing) and security needs (e.g. healthcare, safe community) accumulate, causing significant mental and emotional strain.

Persons experiencing gambling related problems may begin to borrow money from friends and family, take out lines of credit, or cash advances. These actions are likely to sustain gambling activities, possibly with confidence that the money borrowed will be returned. Such behaviors can exhaust those they seek support from financially and emotionally.

Financial destruction is a key reason those with severe gambling disorder symptoms seek treatment. Financial restitution is often a part of recovery from gambling addiction. Unique to Gambler’s Anonymous, Pressure Relief Groups are offered to help their members develop a plan to resolve debt and improve their financial situation by avoiding taking on more debt and develop healthier spending habits.

Having a professional on staff that feels comfortable discussing financial health is recommended as well further education. Resources for financial assistance are given at the end of this guide. The Center’s Certified Peer Recovery Specialist are also available for additional information and support.

Sample Questions:

- How do you spend your money?
- What do you like to purchase when you get paid?
- Does monthly income cover ongoing expenses?
- Is income stable every 2 weeks or month?
- Are you receiving any public benefits?
- Do you have any debt due to gambling?

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- Define the debt. To whom and how much? What is the debt from?
- Are there any home equity or payday loans? Are there any credit card advances?
- Have you ever filed for bankruptcy due to gambling?
- Are bills being sent to somewhere other than the home?
- Are there post office boxes opened that loved ones do not know about?
- What financial as well as emotional impacts has your gambling had on you?
- What financial as well as emotional impacts has your gambling had on your loved ones?

Employment and Education History

Research supports that those that begin gambling at a younger age are more likely to experience problems related to gambling as an adult. Reminder, this guide is directed to those working with legal adults and Gaming Disorder is still under review by the American Psychiatric Association. This section of the assessment will also offer suggestions that require further consideration.

It is expected that to appreciate a person's background in this section it will take many conversations, sample questions are provided to begin such discussion. Persons enter into the education system and workforce at varying ages and possibly by different means. The military is one such way and persons in this community are at greater risk of experiencing gambling problems.

It is estimated that as many as 56,000 active-duty members of the Armed Forces meet the criteria for gambling disorder. Furthermore, just over seventy-five percent of veterans with at-risk or problematic gambling reported that they had made attempts to either cut down, control, or stop gambling. Research finds that veterans are 2-3x more likely to have a gambling related problem than the general population.

Sample Questions:

- Do you find yourself making impulsive decisions?
- Have you ever been reprimanded at work or school for missing deadlines?
- Have you ever missed work or school to engage in gambling activities?
- Have you or do you currently participate in any sports or other competitive activities?
- Would you characterize yourself as competitive? Have difficulty dealing with loss?
- Have you ever participated in workplace gambling or office pools?
- If in the military, were you ever in combat?

Sample Questions: Gaming

- What types of games do you play with your friends?
- How often do you form new relationships with fellow online users?
- How often do you choose to spend more time online over going out with others?
- Have you ever purchased a loot box while playing video games?
- If you have skins within video games, have you ever gambled with them?
- How often do your grades or work suffer because of the amount of time you spend online?

250 W. Pratt Street, Suite #1050 | Baltimore, MD 21201 | 667-214-2120

www.MdProblemGambling.com | HELPLINE 1-800-GAMBLER

Medical (Current and Historical)

Mentioned earlier was the Social Determinants of Health (SDOH), the non-medical factors that contribute to health care costs and impact on health outcomes. Questions related to the SDOH may be conducted in medical settings and should be considered here. Questions concerning past and present medications and medical conditions are included in this part of the assessment.

Healthcare professionals should be aware that disordered gambling has been associated with an increased risk to developing stress-related conditions, such as hypertension, sleep deprivation, cardiovascular disease, and peptic ulcer disease. While there is no FDA-approved pharmacotherapy for the treatment of Gambling Disorder treatment of conditions that occur alongside Gambling Disorder may help relieve symptoms.

When inquiring about a person's medical history it is important to understand the potential side effects of different medications. Specifically, dopamine agonists which may lead to compulsive behavior such as gambling. Dopamine agonists are most often used to treat Parkinson's disease (e.g., Mirapex) and Restless Legs Syndrome (e.g., Requip) but are also prescribed for other conditions. Abilify is another dopamine agonist which is commonly used to treat schizophrenia, has been found to increase gambling related behaviors.

Important to mention persons with gambling disorder may spend hours at a time gambling. Of Marylanders, 35.3%, gamble for 1-2 hours at a time, 29% gamble for 3-5 hours and another 6% gamble for 6-12 hours. This form of distraction can cause lapses in taking life-sustaining medication, like for high blood pressure or diabetes, at the appropriate times. Additionally, the amount of money that is lost gambling will have an impact on a person's ability to afford their medications.

Sample Questions:

- How does gambling affect physical health, and how does physical health affect gambling? Include a review of sleep and other concerns.
- How does gambling affect diet and exercise, and how does diet and exercise affect gambling? Include a review of diet and physical activity.
- Do you gamble in order to not worry about your medical problems?
- Does your chronic pain feel better when you are gambling?
- Does gambling impact your ability to pay for medication?
- Do you gamble to try to get money to pay for your medication?
- Do you not take, or forget to take, your medication when you are gambling?
- Do you forget to eat while gambling?
- Have you lost bladder control while gambling?
- Have you ever had chest pain while gambling, or thought you were having a heart attack?

RESOURCES FOR HELP AND TREATMENT

The Resources shared in this guide are not limited to the growing number of local and national resources available. The selected resources were chosen based on those most utilized by individuals and loved ones impacted by gambling harms locally and nationally. We encourage you to reach out to one of the Center's Peers or **1-800-GAMBLER** if the resource you need to support your recovery is not found in this guide.

Center Resources

Free Gambling Help and Treatment

The Center, in partnership with The Maryland Department of Health's Behavioral Health Administration, manages the Maryland Problem Gambling Provider Referral Network Directory. The Directory lists behavioral health providers throughout Maryland who offer free counseling for both individuals and loved ones impacted by Gambling Disorder and related harms. You can find the Directory on the Center's websites; it is also utilized by the Maryland Problem Gambling Helpline staff (1-800-GAMBLER).

<https://www.mdproblemgambling.com/find-a-counselor/>

Certified Peer Recovery Specialists

The Center employs Certified Peer Recovery Specialists that have lived experience with gambling addiction. Peers are available to provide individual support to the person with a Gambling Disorder and offer referrals to appropriate resources such as those listed below. The Center's Peers spread awareness of the Center's mission by providing gambling awareness presentations to psychoeducational groups often eliciting conversations about gambling activities they have been a part of or witnessed in their family. A regional map with their contact information is included (See APPENDIX F).

Self-Help Groups and Fellowship

GA Maryland Intergroup

This Gambling Help site is a resource for those needing information about Gamblers Anonymous regional to Maryland, the District of Columbia, and Northern Virginia

- Main Website: <https://dmvgamblinghelp.org/>
- Maryland Hotline: 888-520-8755
- Email: MarylandIntergroup@gmail.com
- Learn more about Pressure Relief Groups by contacting: MarylandMeeting@gmail.com

Gambler's Anonymous (GA)

A fellowship of men and women who share their experience, strength, and hope with each other that they may solve their common problem and help others to recover from a gambling problem. The only requirement for membership is a desire to stop gambling.

- Main Website: <https://gamblersanonymous.org/ga/>
- Maryland Hotline Number: 855-2CALL-GA (855-222-5542)
- U.S. Meetings: <https://www.gamblersanonymous.org/ga/locations>
- Virtual Meetings: <https://www.gamblersanonymous.org/ga/virtual-meetings>

Gam-Anon

A 12 Step self-help fellowship of men and women who have been affected by the gambling problem of another. All meetings are open to anyone who is affected by the gambling problem of a family member, loved one or friend.

- Main Website: <https://www.gam-anon.org/>
- Maryland Hotline Number: 888-230-1123
- Maryland Meetings: <https://www.gam-anon.org/meeting-directory/us-meeting-directory/maryland>
- U.S. Meetings: <https://www.gam-anon.org/meeting-directory/us-meeting-directory>
- Virtual Meetings: <https://www.gam-anon.org/meeting-directory/virtual-meetings>

SMART (Self-Management And Recovery Training) Recovery Meetings

A global community of mutual-support groups. At meetings, participants help one another resolve problems with any addiction (to drugs or alcohol to gambling or over-eating). Using a science-based approach emphasizing self-empowerment and self-reliance. SMART can be used both as a stand-alone program or in combination with other recovery paths.

- Main Website: <https://www.smartrecovery.org/>
- U.S. Meetings: <https://meetings.smartrecovery.org/meetings/location/>
- Phone Number: 440-951-5357

Gambler's In Recovery

An International Noticeboard for People Seeking Recovery from a Gambling Problem. Gamblers, Family and Friends in Recovery (GFFR) was born out of the need to support compulsive gamblers, and families and friends affected by someone's gambling, who were no longer able to attend face-to-face meetings during the Covid-19 pandemic. The sole purpose of all meetings listed on this site is to help compulsive gamblers and family and friends to recover.

GFFR has no interest in replacing or being in conflict with any of the great organizations that currently support compulsive gamblers and the families and friends of gamblers. The goal is to support the great work that worldwide programs already achieve.

- Main Website: <https://gamblersinrecovery.com/>

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www.MdProblemGambling.com | HELPLINE 1-800-GAMBLER

Problem Gambling Screening Guide

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Recovery Road Online Fellowship

Recovery Road Online is not affiliated with any group or organization, but our program is based on the original principles and traditions of successfully founded Twelve Step Programs. Members of Recovery Road aspire to have meetings available every hour to quickly guide a new person into a meeting, in a group or private setting, with available members. Thankfully, today, there is immediate help for both the gambling addict, usually called a compulsive gambler and those affected by someone's gambling.

- Main Website: <https://recoveryroadonline.com/>

Maryland Organizations

Maryland Coalition of Families (MCF)

A State-wide nonprofit dedicated to connecting, supporting, and empowering families who are experiencing behavioral health problems.

Family peer support is all about connecting families through shared experience. When someone you love has a behavioral health issue, it can be life-changing to hear from and talk with someone who has gone through similar experiences. Through family peer support, MCF helps families feel less isolated and help them to become their own advocates.

- Main Website: <https://www.mdcoalition.org/>
- For Gambling Help: <http://www.mdcoalition.org/who-we-help/problem-gambling/>
- Email: help@mdcoalition.org
- Phone Number: 410-730-8267

Maryland Council on Problem Gambling (MCPG)

Affiliate of the National Council on Problem Gambling and the Center's key partner in Maryland. MCPG advocates for support to reduce the harms associated with problematic gambling and serves Maryland's faith-based communities.

- Main Website: <https://www.marylandproblemgambling.org>
- Email: MarylandCouncilPG@yahoo.com

Maryland Alliance for Responsible Gaming – Voluntary Exclusion Program (VEP)

Maryland Lottery and Gaming operates voluntary exclusion programs for people who wish to ban themselves from Maryland casinos, the Maryland Lottery, electronic instant bingo halls, sports wagering, or daily fantasy sports. Signing up for the Voluntary Exclusion Program must be done in person. When there are extenuating circumstances, an exception may be granted in advance by the MLGCA Responsible Gaming Program Director, allowing an applicant to mail a notarized application.

- Main Website: <https://www.mdgamblinghelp.org/voluntary-exclusion-program>
- Email: responsible.gaming@maryland.gov
- Phone: 410-230-8798

National Alliance on Mental Illness (NAMI) - Maryland

NAMI is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

NAMI Maryland provides educational resources and events, statewide outreach, advocacy, and affiliate organizational support. Local NAMI affiliates offer free peer support, education, and outreach programs, and engage as mental health advocates in their communities.

- Main Website: <http://namimd.org/>
- Phone Number: 410-884-8691
- NAMI Warm-Line: 1-877-878-2371
- Crisis Text Line - Text "NAMI" to 741741
- Email: info@namimd.org

CASH (Creating Assets, Savings, and Hope) Campaign of Maryland

The CASH Campaign provides direct services that help people achieve their financial goals. These programs include free tax preparation, financial education, financial coaching, public benefits screening, and more! The CASH Campaign promotes economic advancement for low-to-moderate income individuals and families in Baltimore and across Maryland.

- Main Website: <https://cashmd.org/>
- Phone Number: 410-528-8006
- Email: info@cashmd.org

Consumer Credit Counseling Services of Maryland (CCCSMD)

A certified nonprofit provider of budget, credit, and debt counseling. CCCSMD has helped thousands of people who are struggling to pay their bills sort through the confusion, create a realistic budget to achieve their goals, and start on the road to financial security.

- Main Website: <https://cccsmd.org/>
- Phone Number: 1-800-642-2227
- Email: info@cccsmd.org

Maryland Voluntary Lawyer Service (MVLS)

MVLS directly helps Marylanders facing legal challenges, while also fighting to change systems that harm people living in or near poverty. MVLS accomplishes this through pro bono representation, community engagement, and legislative and administrative advocacy. Our volunteer attorneys and tax professionals help individual clients resolve their life changing civil issues.

- Main Website: <https://mvslaw.org/>
- Phone Intake: Mon-Thurs 9 am to 12 pm Call: 410-547-6537 or 800-510-0050
- Email: info@mvslaw.org

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Maryland Legal Aid (MLA)

Provides life-changing civil legal assistance to eligible residents in every part of the State. As a private, non-profit law firm, MLA provides a full range of free civil legal services to low-income people statewide, in Baltimore City and in Maryland's 23 counties, from 12 office locations.

- Main Website: <https://www.mdlab.org/>
- Regional Contact information: <https://www.mdlab.org/contact-us/>

Maryland Center for Legal Assistance (MCLA)

A wholly owned subsidiary of Maryland Legal Aid, the Maryland Center for Legal Assistance operates the District Court Help Resource Centers in Baltimore City, Glen Burnie, Upper Marlboro, and Salisbury and the Maryland Courts Help Centers in Annapolis and Frederick. The Maryland Courts Help Centers provides free limited legal services.

- Main Website: <https://www.mdcla.org/>
- Phone Number: (410) 260-1392

National Resources

GamFin

Gambling-related financial problems? GamFin can help. Providing financial counseling for individuals and families in financial distress. Their financial counselors can help you gain clarity, find a path forward, and help restore hope.

- Main Website: <https://www.gamfin.org/>
- Phone Number: (800) 311-9667
- Email: support@gamfin.org

The National Council on Problem Gambling (NCPG)

The organization was founded in 1972 by Msgr. Joseph A. Dunne and Dr. Robert Custer, among others. The Council established two principles that remain in effect today: that the organization would be the advocate for problem gamblers and their families, and that it would take no position for or against legalized gambling.

- Main Website: <https://www.ncpgambling.org/>
- Help by State: <https://www.ncpgambling.org/help-treatment/help-by-state/>
- Call or Text: 1-800-522-4700
- Chat Online: [ncpgambling.org/chat](https://www.ncpgambling.org/chat)

National Association of Administrators for Disordered Gambling Services (NAADGS)

National leadership in prevention, education, clinical care and recovery. The organization was formed in 2000 under the name of Association of Problem Gambling Service Administrators (APGSA) to support the development of services that will reduce the impact of problem gambling in the United States. In 2021 the APGSA adopted a new name, NAADGS.

Central to this mission, NAADGS conducts the only national survey of problem gambling services in the United States providing information on funding, types of services, administrative structures, state profiles, and state contacts.

- Main Website: <https://naadgs.org/>

The International Center for Responsible Gaming (ICRG)

Since its founding in 1996, the ICRG has launched a thriving field of study to explore gambling disorder and responsible gambling and has funded some of the most important research in the United States and around the world. Advancing research, education and awareness to improve the health and well-being of persons and communities affected by the continued growth of the industry.

- Main Website: <https://www.icrg.org/>
- Email: info@icrg.org

International Problem Gambling and Gaming Certification Organization (IPGGC)

Formerly known as the International Gambling Counselor Certification Board (IGCCB), IPGGC was established in 1984 to offer voluntary international certifications. These certifications assure a body of qualified and competent professionals working with individuals with at-risk, problematic, and disordered gambling and their families and concerned others. Certification standards established by the IPGGC represent the current best practices in the field of disordered gambling and gaming treatment.

- Main Website: <https://ipggc.org/>
- Email: certification@ipggc.org

APPENDIX A - DSM 5: GAMBLING DISORDER CRITERIA



The Maryland Center of Excellence
on Problem Gambling

DSM 5: Gambling Disorder

Substance-related and Addictive Disorder

Diagnostic Criteria: 312.31 (F63.0)

- A. Persistent and recurrent gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting four (or more) of the following in a 12-month period:
1. Needs to gamble with increasing amounts of money in order to achieve the desired excitement
 2. Is restless or irritable when attempting to cut down or stop gambling
 3. Has made repeated unsuccessful efforts to control, cut back or stop gambling
 4. Is often preoccupied with gambling (e.g., having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble)
 5. Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed)
 6. After losing money gambling, often returns another day to get even ("chasing" one's losses)
 7. Lies to conceal the extent of involvement with gambling
 8. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
 9. Relies on others to provide money to relieve desperate financial situations caused by gambling
- B. The gambling behavior is not better explained by a manic episode

SPECIFY IF:

Episodic: Met criteria at more than one time point with symptoms subsiding between periods of gambling disorder for at least several months

Persistent: Experiencing continuous symptoms, to meet diagnostic criteria for multiple years

In early remission: After full criteria for gambling disorder were previously met, none of the criteria for gambling disorder have been met for at least 3 months but for less than 12 months.

In sustained remission: After full criteria for gambling disorder were previously met none of the criteria for gambling disorder have been met during a period of 12 months or longer.

Current Severity: MILD: 4-5 criteria met.
MODERATE: 6-7 criteria met.
SEVERE: 8-9 criteria met.

SCORE: 0= No problem 1-3 = "at risk" Mild= 4-5 Moderate= 6-7 Severe= 8-9

Individuals presenting for treatment of gambling disorder typically have moderate to severe forms of the disorder. Up to half of the individuals in treatment for gambling disorder have suicidal ideation, and about 20% have attempted suicide.

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APPENDIX B - LIE-BET

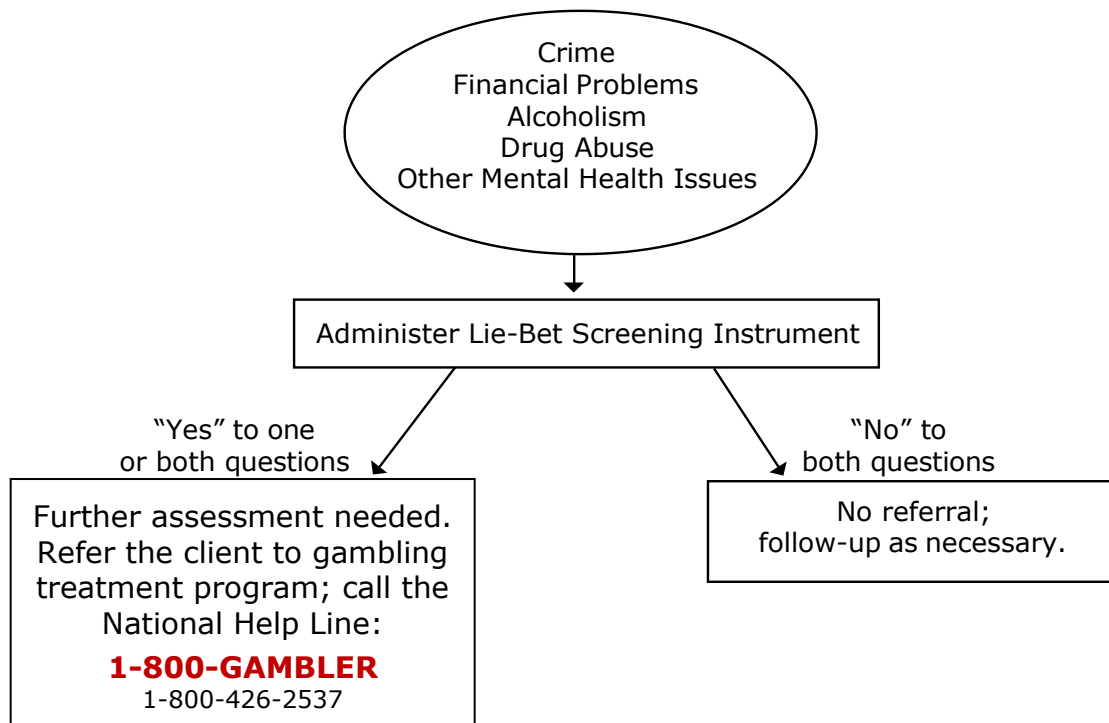
LIE-BET TOOL TO RULE OUT PATHOLOGICAL GAMBLING

Historically, clinicians have indicated that another series of questions added to the intake process would be difficult to include. The instrument will be useful in clinical settings where clinicians have limited time and often are required to collect a great deal of information from each patient. A two-question survey will hopefully be met with less resistance and allow us to establish a “foot hold” within the intake process.

The Lie-Bet tool (Johnson et al., 1988) has been deemed valid and reliable for ruling out pathological gambling behaviors. The Lie-Bet’s two questions consistently differentiate between pathological gambling and nonproblem-gambling and are useful in screening to determine whether a longer tool (e.g., SOGS, DSM-V) should be used in diagnostics.

Lie-Bet Screening Instrument

- 1) Have you ever felt the need to bet more and more money?
- 2) Have you ever had to lie to people important to you about how much you gambled?



Reference: Johnson, E.E., Hamer, R., Nora, R.M., Tan, B., Eistenstein, N., & Englehart, C. (1988). The lie/bet questionnaire for screening pathological gamblers. *Psychological Reports*, 80, 83-88.

APPENDIX C - BBGS

Brief Biosocial Gambling Screen

Overview

Brief screens can help people decide whether to seek formal evaluation of their gambling behavior. The 3-item BBGS is based on the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (**DSM-IV**) criteria for **Gambling Disorder**.

Scoring

A “**yes**” response to **any single item** indicates potential gambling-related problems and the need for additional evaluation.

1. During the past 12 months, have you become restless irritable or anxious when trying to stop/cut down on gambling?
 Yes No
2. During the past 12 months, have you tried to keep your family or friends from knowing how much you gambled?
 Yes No
3. During the past 12 months did you have such financial trouble as a result of your gambling that you had to get help with living expenses from family, friends or welfare?
 Yes No

www.icrg.org

www.divisiononaddiction.org

Call, Text 1-800-GAMBLER or chat

www.HelpMyGamblingProblem.org

APPENDIX D - PGSI

Problem Gambling Severity Index

This self-assessment is based on the Canadian Problem Gambling Index. It will give you a good idea of whether you need to take corrective action.

Thinking about the last 12 months...

1. Have you bet more than you could really afford to lose?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
2. Still thinking about the last 12 months, have you needed to gamble with larger amounts of money to get the same feeling of excitement?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
3. When you gambled, did you go back another day to try to win back the money you lost?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
4. Have you borrowed money or sold anything to get money to gamble?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
5. Have you felt that you might have a problem with gambling?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
6. Has gambling caused you any health problems, including stress or anxiety?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
7. Have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
8. Has your gambling caused any financial problems for you or your household?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.
9. Have you felt guilty about the way you gamble or what happens when you gamble?
0 Never. **1** Sometimes. **2** Most of the time. **3** Almost always.

TOTAL SCORE

Total your score. The higher your score, the greater the risk that your gambling is a problem.

Score of 0 = Non-problem gambling.

Score of 1 or 2 = Low level of problems with few or no identified negative consequences.

Score of 3 to 7 = Moderate level of problems leading to some negative consequences.

Score of 8 or more = Problem gambling with negative consequences and a possible loss of control.

Ferris, J., & Wynne, H. (2001). The Canadian problem gambling index: Final report. Submitted for the Canadian Centre on Substance Abuse.

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APPENDIX E – BAGS

Brief Adolescent Gambling Screen (BAGS)

Overview

The Brief Adolescent Gambling Screen (BAGS) was derived from the Gambling Problem Severity Subscale (GPSS) of the Canadian Adolescent Gambling Inventory (CAGI).

Scoring

Not in the past 12 months = 0

Sometimes = 1

Many times = 2

All of the time = 3

In the past 12 months....

1. How often have you skipped hanging out with friends who do not gamble/bet to hang out with friends who do gamble/bet?
2. How often have you felt that you might have a problem with gambling/betting?
3. How often have you hidden your gambling/betting from your parents, other family members or teachers?

A score of 4 or more is recommended for surveys where the goal is to estimate the prevalence rate. For clinical settings or for identifying individuals who need further assessment, a score of two or more is recommended to minimize false negative errors.

Stinchfield, R., Wynne, H., et al (2017). Development and Psychometric Evaluation of the Brief Adolescent Gambling Screen (BAGS). *Frontiers in Psychology*, 8:2204. doi: 10.3389/fpsyg.2017.02204

APPENDIX F - PEER MAP

Peer Recovery Support Specialists



The Maryland Center of Excellence on Problem Gambling

The Maryland Center of Excellence on Problem Gambling (the Center) offers Peer Recovery Support Specialists to help individuals seeking to limit, control or stop their gambling. The Center's Peers have lived experience with addiction and have been in recovery a minimum of two years. They are trained in how to assist those seeking help with gambling behaviors by providing access to treatment, connecting them to resources, and supporting them with encouragement during the recovery process.

If you, or someone who know, is struggling with problems due to gambling behavior, call the Maryland Helpline today at 1-800-GAMBLER or visit HelpMyGamblingProblem.org



Central Maryland

James (Jim) Nowlin, CPRS, Certified Peer Recovery Support Specialist
 ☎ 410-299-1791 ✉ jnowlin@som.umaryland.edu



Northeast Maryland

Kenneth (Ken) Wolfson, CPRS, CRC, RPS, Certified Peer Recovery Support Specialist
 ☎ 443-690-9811 ✉ kwolfson@som.umaryland.edu



Western Maryland

Carin Miller, CPRS, CRC, Certified Peer Recovery Support Specialist
 ☎ 410-299-1308 ✉ carin.miller@som.umaryland.edu



Southern Maryland

William (Will) Hinman, CPRS, CRC, Certified Peer Recovery Support Specialist
 ☎ 443-717-2439 ✉ whinman@som.umaryland.edu



Eastern Shore

Kenneth (Kenny) Crawford, CPRS, CRC, Certified Peer Recovery Support Specialist
 ☎ 443-717-1137 ✉ kenneth.crawford@som.umaryland.edu



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APPENDIX G - TURTLE CARD

KEEP GAMBLING FUN AND PROBLEM FREE



Set a limit on how much time and money you will spend and stick to it.

View gambling as entertainment, not as a way to make money.

Balance gambling with other leisure activities.

If you gamble and spend more time and money than you can afford, a good strategy is to take a break. Consider seeking help if this is a concern.

Problem Gambling Helpline, Toll-Free, Confidential 24/7

1-800-GAMBLER

www.helpmygamblingproblem.org

Low Risk Gambling Is Done:

As a form of recreation, not to make money or make up for previous losses.

With limits on time, frequency, and duration.

In a social setting with others, not alone.

With money you can afford to lose.



High Risk Gambling – Situations When You Are:

Coping with grief, loneliness, anger or depression.

Under financial pressure and stress.

Recovering from mental health or substance use disorders.

Using alcohol or other drugs.

Under legal age to gamble.

Maryland Problem Gambling Helpline – 1-800-GAMBLER

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University of Maryland College Park, Division of Student Affairs, Recreation and Wellness
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www.MdProblemGambling.com | HELPLINE 1-800-GAMBLER

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<https://www.who.int/news-room/questions-and-answers/item/addictive-behaviours-gaming-disorder#:~:text=Gaming%20disorder%20is%20defined%20in,the%20extent%20that%20gaming%20takes>

**All weblinks were last accessed on February 28, 2025*

Do You Have a Gambling Problem?

- Have you ever felt the need to bet more and more money?
- Have you ever had to lie to people important to you about how much you gamble?

Scan the QR Code to Take a More Detailed Screening



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