

National News

AN INFORMATION RESOURCE FOR THE NATIONAL COUNCIL ON PROBLEM GAMBLING

SUMMER 2006 • VOL. 9, ISSUE 2

Executive Director's Letter 10 Free Gambling Information Resources on the Web



The worldwide web has revolutionized many aspects of our lives, and it has had a substantial impact on the problem gambling field. For many of us, "internet" and "gambling" are highly associated with each other. In fact, while the internet may have had some negative impact on substance abuse, for example by allowing kids to glamorize their drinking in their online profiles, you still can't get high via modem. But now you can deliver instantaneous, anonymous, high stakes and high speed gambling opportunities to your computer, and soon to your cell phone and PDA. Last year's Annenberg Survey found that 560,000 kids between 14 and 22 had gambled online for money in the past week. Helplines anecdotally report increasing calls from online poker players, and revenues from internet gambling reportedly reached \$12 billion last year. But the internet is also a powerful tool for health promotion, non-profit advocacy, information sharing and capacity building. With this in mind, here is a list of 10 free and easy to use gambling information resources on the web that includes blogs, podcasts, listservs and traditional websites.

The Gambling Issues International (GII) listserv. GII is a listserv or e-mail mailing list for professionals working in the area of problem gambling. List founder Nina Littman-Sharp says, "I began it in order

to offer the opportunity for those working in this area to network, share information and to generate new ideas to enhance our work." The list includes over 500 counselors, researchers, policy makers and professionals involved with gambling and problem gambling from around the world. To join, please send an e-mail to nina_littman@camh.net with your name, affiliation and e-mail address.

The Wager/BASIS. The Worldwide Addiction & Gambling Education Report is now part of the Brief Addiction Science Information Source (BASIS). The goal of the BASIS is to provide the general public, treatment providers, policy makers, and other interested individuals with free direct access to the latest scientific information and resources on addiction. Subscribe for free weekly emails with links to new science reviews at www.basionline.org.

Google News Alerts. Every hour, thousands of media stories are published. To help keep on top of stories relevant to our field, you can use a free tool offered by Google (similar tools are offered by all major search engines) to search these news clips. Once the search parameters are set, once a day an email with up to 20 headlines and a link to the text of the story is delivered to your inbox. Goto: www.google.com/alerts?hl=en to set up your own alert.

(Executive Director, continued on page 2)

NCPG Elects New Leaders

At its recent annual meeting, the National Council on Problem Gambling elected new officers to one-year terms. Dennis McNeilly, SJ, PsyD, was elected as President. Dr. McNeilly is Associate Professor and Clinical Geropsychologist in the Department of Psychiatry at the University of Nebraska Medical Center. (See President's Letter, p. 2.)

Seth Eisenberg, MD, of Northwestern Medical School becomes the Executive Vice President. Returning for another term as Treasurer is Caleb Cooley from Pikeville, KY. Thomas Moore, PhD, of the firm Herbert & Louis in Portland, Oregon is the new Vice President. The Executive Director of the Nebraska Council on Compulsive Gambling, Jerry Bauerkemper, was selected as Secretary. The NCPG Executive Committee is comprised of the above officers, plus two additional representatives of the membership. Joy Mitchell was elected as the Chair of the Affiliate Committee. Mitchell is the Executive Director of the Vermont Council on Problem Gambling. Tim Christensen,

Manager of the Gamblers Assistance Program at the Arizona Department of Gaming, will represent the At-Large board directors.

The Board also held At-Large elections. Six Directors were re-elected and two new Directors were elected, all to three-year terms. The new At-Large Directors are Ed Looney and Mia Moran-Cooper. Looney has been a Certified Compulsive Gambling Counselor (CCGC) for 16 years and is co-founder of the Council on Compulsive Gambling of New Jersey. He is frequently quoted in newspaper and magazine articles and has testified in over 100 court cases involving compulsive gamblers.

Moran-Cooper is a licensed social worker who has directed the Problem Gamblers Help Network of West Virginia since its start in 2000. She has served as the Chair of the National Problem Gambling

(New Leaders, continued on page 11)

President's Message



Dennis P. McNeilly, SJ, PsyD

One of the distinct advantages that an older adult discovers upon retirement is that one no longer has a boss to impress. That personal freedom, however, extends well beyond one's interactions with a former boss. As the older adult also soon learns, with age comes the ability to speak up for oneself. The older adult can finally say what has been on their mind

and heart—because one no longer has to impress or be evaluated. One has enough life experience to know the difference, which we might call wisdom. It might be said that with age comes one's ability to find one's true voice—the voice of the heart.

I believe the National Council on Problem Gambling's primary mission is to give a voice to problem gamblers and their families. Though NCPG might be only considered in its early middle age, it is my hope that NCPG's growing maturity as the national advocate for problem gamblers and their families also brings us the freedom to speak up and express our voices.

The National Council on Problem Gambling currently faces unprecedented opportunities and challenges. With the face of gambling opportunities continually changing from playing cards, horses and sporting events, to lottery tickets and keno, to slot and video poker machines, to the internet, cell phones and mobile gaming devices; so too do the challenges individuals potentially face in developing a problem with gambling. NCPG has tremendous resources and expertise among its affiliate and individual members, and problem gamblers are counting on us to share our vision, use our resources, and raise our voices, on their behalf.

As I step into the presidency of the National Council on Problem Gambling, I believe NCPG's future is intricately tied to our ability to serve as the access point for educational, assessment, treatment, advocacy and research information about problem gambling to federal health agencies, the national media, and private foundations in a timely manner. With the face of gambling constantly changing, so too must NCPG see the tremendous opportunities before us, so that we can express our wisdom and speak of problem gambling as a serious public health issue. With our collective voices raised, we can help to educate the public and policy makers about effective treatment for problem gambling and the possibilities for recovery. In order to do so however, we are currently taking stock of our history and development, as we undertake strategic planning for our future.

I plan to continue to work to help NCPG practically consider its immediate and future goals and help NCPG to gather those resources into an effective voice for problem gamblers. I welcome your joining me in that mission, as we continue to speak up for problem gamblers and their families.

Sincerely,

A handwritten signature in black ink that reads "Dennis P. McNeilly SJ PsyD". The signature is written in a cursive, flowing style.

(Executive Director, continued from page 1)

Gaming Research weblog. Run by Rhys Stevens at the Alberta Gaming Research Institute, this blog is a great resource for research, especially reports and studies not published in academic journals. You can sign up for an RSS or XML alert to notify you when new material is posted. Details at <http://gamingresearch.blogspot.com>.

NewsLink/NewsScan. The Responsible Gambling Council of Ontario offers a weekly digest summarizing news from around the world (Scan), and a quarterly newsletter of news, views and trends in gambling and problem gambling (Link) along with an extensive e-Library at www.responsiblegambling.org/latest_news_newscan.cfm

Youth Gambling International newsletter. Distributed by Dr. Jeff Derevensky's International Centre for Youth Gambling Problems and High-Risk Behaviors at McGill University, it provides a great compilation of youth-specific research and programs. To subscribe, go to www.youthgambling.com.

Australian Gaming Council website. Useful source for information with a focus on Pacific regions, including a Research Clearinghouse with 4,000+ reports as well as a good responsible gaming section. www.austgamingcouncil.org.au

DieIsCast weblog. An eclectic and intellectual commentary on gaming-related issues by Dr. David Schwartz, the Director of the Center for Gaming Research at UNLV. As Schwartz explains: "The classical Romans were obsessed with the idea of fortune, and believed themselves the slaves of an indifferent goddess. I think that, with the gradual erosion of Enlightenment rationality, we are getting closer and closer to them. I felt that Caesar's words reflect the reality of the world I'm living in today." The site, www.dieiscast.com, is RSS/XML enabled.

On Gambling podcast. National Public Radio, through their alt.NPR site, offers a weekly podcast (an audio file, typically an MP3 file, available online for downloading via an automatic "feed." You can then hear the podcast whenever you want from your computer or a portable media player). The host, Mike Pesca, covers a wide range of topics in an entertaining style. http://www.npr.org/rss/podcast/podcast_detail.php?siteId=4985916 for more information.

NCPG/NPGAW sites. We believe the NCPG site is the most widely visited problem gambling site on the web; we receive approximately one million hits and 70,000 visits per month, and over 2,000 sites have placed links to our site. The basic site contains links, map of state affiliates, upcoming events, counselor search, and conference registration, and the NPGAW site has a wide array of free public awareness materials, including PSA's, posters, brochures and flyers. www.ncpgambling.org and www.npgaw.org.

In the future we plan a comprehensive overhaul of the NCPG site, and I welcome your comments and questions on this or any other issue. Contact me at keithw@ncpgambling.org or 202.547.9204.

Sincerely,

Keith Whyte
Executive Director

Pioneers in the Field: Charles D. Maurer, PhD

Each issue of the NCPG National News will feature an interview by Executive Director Keith Whyte with a pioneer in the problem gambling field. We hope these profiles will help capture the extraordinary depth of knowledge, compassion and volunteerism that characterizes those involved with the National Council on Problem Gambling. It is also important to reflect on our past and assess current activities in light of our history in order to best fulfill our mission as the national advocates for programs and services to assist problem gamblers and their families.

Charles D. Maurer, PhD, ABPP, is a clinical psychologist in private practice in Seattle, Washington. He is an Assistant Professor in the Department of Psychiatry and Behavioral Sciences, University of Washington Medical School and in the Department of Psychology, University of Washington. He is Past President of the Washington State Council on Problem Gambling and the National Council on Problem Gambling. He provides individual and marital psychotherapy for a variety of issues in addition to performing general and forensic psychological evaluations.

Q: How did you get involved in problem gambling?

A: While a psychology intern at Brecksville VA Medical Center in 1972, I met the initial pioneers: Bob Custer, Dewey Jacobs, Alida Glen and my supervisor, Julian Taber. I also met Carol, my wife of 30 years, who did the first literature search on the issue in her role as Medical Librarian. After spending four years on active duty in the Air Force and becoming grounded in working with substance use disorders, we moved to Seattle. It was in 1979 that Bob Custer, on a VA site visit to Seattle, asked if I would agree to be invited to a Gamblers Anonymous meeting. That led to a thorough vetting process and a now 27-year relationship with GA. It was the members of the Seattle Tuesday night meeting that really taught me about gambling and problem gambling.

Over the subsequent years, I worked at creating a network of interested parties in the Northwest. There were many frustrations, but eventually a group formed in the late 80's and that led to the founding of the Washington State Council on Problem Gambling. We



became an affiliate of the National Council, which added to our legitimacy and we became a leader in the arena.

Q: How did you get involved with the National Council?

A: Given the absence of anyone nearby who knew anything about the issue, I obtained telephone supervision with Dr. Custer, visited the new treatment program in Maryland, began networking and was pointed to Monsignor Dunne and the National Council. Those connections were a lifeline for me and the gamblers that I worked with in my practice.

Once we established our Council and affiliated with National, I became a Board member and soon was first Chair of the HelpLine Committee, and then was on the Executive Committee. The Annual Conferences were a lifeline and led to even broader networks. After a three-year hiatus from the Board, I was encouraged to run for President and had a challenging and rewarding three-year term that led to advancing the NCPG in several areas. As a former mountaineer, I enjoy pushing limits and yet remaining stable. NCPG has some real parallels to climbing and we have more peaks to climb.

Q: How has the problem gambling field developed since you started?

A: There is not enough room to describe the growth in this field. You could not fill a file box with the existing research literature; back in the late 70's treatment resources were scarce, there were few affiliates, and few folks would acknowledge the scope and legitimacy of this personal, family and public health is-

ues. Since then we have gained prominence and respect. We have been accepted as advocates for this serious health issue. We have created successful and prominent National Problem Gambling Awareness Weeks and our first Forum in Washington, D.C. The introduction of HR 6009, the "Comprehensive Awareness of Problem Gambling Act of 2006," by Rep. Marty Meehan (D-MA) is evidence of our growth and development.

Q: What are some of highlights of the last 10 years?

A: Clearly the foundation of the NCPG has broadened, deepened and mature thanks to the collaborative efforts of Keith Whyte and the Board/Affiliates structure. Advances in clinical research and public policy have made it much easier for policy makers to advance this issue and for the rest of us to help problem gamblers and their families. We are now on the national and international public health screen and our persistent patience and efforts are being seen in real-time positive outcomes. Our connection with other national organizations has been critical to our advancement and our encouragement to broaden our fold, to be welcoming and to expand is central. As noted above, our involvement in multiple national endeavors, like NPGAW, the National Gambling Impact Study Commission and now with HR 6009 are significant accomplishments, with more to come.

Adapted from the A&E Behind the Actors Studio Bernard Pivot questionnaire:

What is your favorite word?

Collaboration

What is your least favorite word?

Resistance

What sound do you love? The wind rustling through leaves and branches

What sound do you hate? Cacophony

What profession other than yours would you like to attempt? Something with clear outcomes and done outdoors.

What profession would you not like to participate in? Politics

2006 NCPG Awards

At its recent annual meeting, the National Council on Problem Gambling presented its annual awards to the top programs and leaders in the nationwide problem gambling field. The 2006 Outstanding Contributor in the Field is the **Vanguard Compulsive Gambling Treatment Center/Project Turnabout**. Located in Granite Falls, Minnesota, this treatment center has demonstrated superior achievement in addressing issues of problem and pathological gambling.

The 2006 Government Award was presented to the **Louisiana Attorney General's Office** for their Gambling Treatment Referral Program. This innovative project provides non-violent, first time offenders with gambling problems with a supervised opportunity for treatment and rehabilitation.

Dr. David Hodgins of the University of Calgary received the 2006 Research Award the best original body of research on problem and pathological gambling. Dr. Hodgins has been involved in research on problem gambling for nearly a decade and his publications cover a wide range of topics. Each year, the National Council also recognizes outstanding work by graduate students. This year's 2006 Master's Thesis Award went to **Meredith Gillespie** for her paper Adolescent Problem Gambling: Evaluating the Role of Outcome Expectancies.

The 2006 Electronic Media Award went to **Twin Cities Public Television & Russell**

Herder for their production of 30 minute documentary titled "The Hidden Addiction." The **Connecticut Partnership for Responsible Gambling**—a joint initiative between the Connecticut Lottery Commission, the Connecticut Council on Problem Gambling and the Connecticut Department of Mental Health and Addiction—is also the recipient for an Electronic Media Award for their PSA "New Home" that was produced and aired through out several states in English and Spanish.

In addition, a new Media Award was introduced this year. Called the People's Choice Award, it is voted on by the attendees at the NCPG annual conference. This year, the inaugural category was for public service announcements. Thirteen organizations submitted entries, and the winner was **Massachusetts Lottery/Council on Compulsive Gambling** for "Lose."

Reece Middleton, Executive Director of the Louisiana Association on Compulsive Gambling, received the Herman Goldman Award. This award is given to a person who, over the course of their lifetime, provides exemplary work on the national level in support of problem gamblers and their families. The Goldman Award is only given in exceptional circumstances and not necessarily awarded each year.



NCPG Dennis McNeilly with Master's Thesis Award winner Meredith Gillespie



Reece Middleton accepts the Goldman Award



Goldman Winners from L. to R.: Lori Rugle, Richard Rosenthal, Paul Ashe, Reece Middleton, Marvin Steinberg, Joanna Franklin, Henry Lesieur and Rena Nora



President Dennis McNeilly salutes the award winners

2006 Conference Evaluation Summary

The 20th Annual Conference on the Prevention, Treatment and Research of Problem Gambling, June 21–23, 2006 in St. Paul, Minnesota, had a total of 450 attendees (compared to 460 for the 19th Annual in New Orleans). The information below is based on 165 evaluations collected on site and via a web-based survey (a 37% response rate).

Overall participants were highly satisfied with the conference. The average response from our attendees, ranked on a scale of 1 to 5, one being disappointing, two poor, three average, four good, and five excellent, was 4.00. Based on the same scale, the average response to the question “How useful are the conference materials to you” was 3.9.

Attendees were also very pleased with the individual sessions, with an average rating of 4.29 for individual session content, 4.27 for effectiveness of speaker, 4.19 for application to practice, and 4.07 for use of audio/visual (by far the most common complaint was for presenters who did not provide handouts in advance).

The majority of participants (55%) identified themselves as counselors, another 17 percent defined themselves as administrators. While CEU's/Training were the most important reason to attend the conference for 56 percent of registrants, Networking (27%) was the next most widely endorsed reason. Many respondents circled more than one answer, so it seems likely that most attendees have multiple reasons for coming each year.

While many attendees (46%) were happy with the current length, 35 percent favored just two full days and 19 percent preferred a full three-day event.



Janet Soohoo and Ford Kuramoto presented on problem gambling issues in Asian communities



Pioneers in the Field met at the annual conference, L. to R.: Rena Nora, MD, Henry Lesieur, PhD, Durand Jacobs, PhD, and Richard Rosenthal, MD



Conference hosts Don Feeny and T. Lance Holthusen



Paul Bellringer's plenary speech

Thanks to our 2006 Conference Sponsors!

PLATINUM
Canterbury Park

GOLD
Harrah's Entertainment
International Game Technology

SILVER
Minnesota Department of Human Services
Minnesota State Lottery

Mohegan Sun
Project Turnabout/
Vanguard

BRONZE
Iowa Department of Public Health

Minnesota Institute of Public Health



Keith Whyte (second from right) receives a sponsorship check from Canterbury Park for the 2006 NCPG national conference

Gambling Addiction and Substance Addiction: How Different Are They?

Don Feeney, Research and Planning Director, Minnesota State Lottery

This article originally appeared in the Winter 2006 issue of "Northstar Roundtable," a publication of the Northstar Problem Gambling Alliance. It is reprinted here by permission.

Many problem gambling counselors were first exposed to addiction treatment through work with chemically dependent patients. But how much of that experience and training is really transferable? What skills can the new problem gambling practitioner bring with them, and what will they have to learn?

Nina Littman-Sharp of Toronto's Centre for Addiction and Mental Health believes that counselors coming from chemical dependency "have 75 percent of it." But, she adds, "the other 25 percent is what makes it interesting and fun."

Dr. Jon Grant, Professor of Psychiatry at the University of Minnesota Medical School, believes that some of the differences have a biological component. According to Grant, problem gamblers are sometimes found to have impairment in the area of the brain that helps with decision making. This condition is not found in chemically dependent patients, but it is often seen in those suffering from bipolar disorder, leading him to speculate that "this may be why bipolar medications (such as lithium) may work well in gambling but have not been helpful in chemical dependency." Grant has also observed problems with the serotonin (a chemical that transmits messages between nerve cells) systems in the brains of problem gamblers, a feature common to many people with impaired impulse control.

A recent study by a team of Brazilian and Canadian researchers suggests significant emotional differences between those suffering from alcoholism and pathological gamblers.¹ Dr. Hermanto Tavares and his colleagues studied 49 pathological gamblers and 101 alcoholics undergoing outpatient treatment. They found that the gamblers were more likely to suffer from depression while the alcoholics were more likely to experience anxiety. They conclude that alcoholics "turn to alcohol as a way to deal with their proclivity to negative emotions, in particular, anxiety. Meanwhile, (pathological gamblers) seem to turn to gambling as a way to cope with depressive feelings and lack of positive experiences in life." They also found that gamblers experienced more intense cravings, which the authors suggest place them at a higher risk for relapse.

While cautioning that general rules might not apply to all patients, the researchers believe that the findings suggest different treatment strategies. Alcoholics might benefit from being taught relaxation techniques and other methods to cope with negative emotions, while gamblers might be better served with treatments for "early relief of depression symptoms and replacement of the activity and joy once prompted by gambling."

Another study² compared the demographic and social characteristics of those seeking treatment for gambling problems and those entering an alcohol program in Winnipeg, Manitoba. The authors found that "gambling clients were significantly more likely to be married and employed full-time, to have a higher education and income, and to

own their own home, compared with alcohol clients. In turn, alcohol clients were more likely never to have been married, to have little formal education, and to be unemployed, with very low incomes."

Those who have treated both gamblers and substance abusers also note personality differences. "With chemical dependency, they come in on a drug and are slowed down a lot of the time," says Sandra Brustuen, Coordinator of the Vanguard Compulsive Gambling Program, an inpatient program in Granite Falls, Minnesota. "You have to pep them up. When I was doing CD treatment I would have to pull teeth to get assignments done. Nobody gave feedback and they didn't talk. In gambling, they talk about nothing, but they talk." Joanna Franklin, Director of Training and Development for Trimeridian, adds that, compared to substance abusers, gamblers are "clear-headed, sharp, functional souls."

The two populations can arrive for treatment in different physical condition as well. Certainly what Franklin describes as "the physical ravages of drugs and alcohol" are often apparent—Grant notes the importance of checking heart function with cocaine abusers and liver function with alcohol abuse—but there are more subtle differences as well. Brustuen finds that Vanguard's gambling clients "come in on many more medications and with many more mental health diagnoses." She notes that gamblers are very often sleep-deprived, a sentiment echoed by Littman-Sharp.³

Grant has found that medications sometimes exacerbate gambling problems, with the recently documented link between certain medications for Parkinson's disease and problem gambling being one example. He also notes that "nicotine use is huge in gambling" and urges an examination of lung function and nicotine cessation counseling. Finally, he points out that gambling tends to be a sedentary activity, leading to problem gamblers being more prone to type 2 diabetes. This observation is confirmed by Brustuen, whose program requires that every new patient undergo a complete physical examination.

Money plays a significant role in addiction. Franklin comments that "I've never met an addict who had their finances in good working order." But, as the University of Minnesota's Grant puts it, finances are "a bigger deal for gamblers," adding that financial issues are a major cause of relapse. Littman-Sharp also mentions that cognitive disorders—erroneous beliefs about the way gambling works—are a much more significant issue for gamblers. She adds that gamblers often have a lot more family problems, as there's often been a "huge revelation that was a disastrous surprise for the people around them."

Then there are differences in the way addictions are seen by others in society. Brustuen notes that for many their "gambling has been such a secret" that important people in their life aren't aware of it. She sees many fewer court-ordered treatment referrals for gambling than for alcohol or drugs.

Franklin also expresses frustration with a legal and social system that treats problem gamblers differently than people with substance addictions. "By and large, without physical injury being involved, (drug addicts and alcoholics) get a second chance, a third chance, but gam-

(Addictions, continued on page 7)

Featured Program

Center of Recovery (CORE)



Each issue of the newsletter will highlight a program on prevention, education, treatment, enforcement or research of gambling and/or problem gambling. We encourage readers to submit programs for consideration; please

contact the NCPG office for more information.

The Center of Recovery (CORE) was established in 1999 in Shreveport, Louisiana. With the development of CORE-South in New Orleans, it became a multi-phase, seamlessly integrated treatment approach combined of individual counseling, non-intensive outpatient, intensive outpatient and residential treatment for problem gamblers with a family component all under one roof. Unfortunately, CORE-South had to close due to Hurricane Katrina. It has taken almost a year, but because the Louisiana Association on Compulsive Gambling was totally convinced of the efficacy of this approach they moved these components to the original residential treatment program in Shreveport. The only basic differences are that the locations of the IOP and CORE are proximate, but not on the same campus. The LACG-IOP is an evening program at the present time. Both these aspects may change in the future.

CORE currently operates with 23 staff and volunteers. They serve all of Louisiana and will accept referrals from other states and foreign countries. Treatment for all Louisiana residents is free of charge, and a modest upfront fee is charged to non-residents. The program is designed to provide insight, encouragement and proven strategies for regaining stability and helping the problem gambler achieve and maintain stable recovery. With the LACG-IOP the primary care is accomplished in four phases and trigger recognition with coping skills are taught and practiced sequentially during these stages. Discharge planning is addressed throughout primary care for both CORE and the LACG- IOP.

Over 1,300 people from more than 20 states and one foreign country have received treatment with encouraging results. Louisiana Tech University evaluated 626 client records and found that those who completed treatment were less likely to gamble and had improved financial, employment and relationship status. The average number of treatment days per client was 30, and the number of days in treatment was directly and positively related to outcome effectiveness. A follow up evaluation is tentatively scheduled for 2007.

Contact CORE at 635 Stoner Avenue, Shreveport, LA 71101, phone 318.424.HELP (4357), fax 318.424.4355, e-mail gamling@shreve.net.

(Addictions, continued from page 6)

blers don't. They don't have the same protection that (chemical) addicts have when they go public with their problem. They are court-martialed, they are suspended, they are fired, they lose security clearances, they lose bonds, they lose licenses because society sees them as bad, not as sick.

"A major who had given his life to the military got in trouble because of gambling," Franklin continued. "Had it been a drug or alcohol problem, they would have instantly sent him to one of several different treatment programs. Because it was gambling, he was court-martialed."

Littman-Sharp points out that different types of addicts tend to be involved in different types of criminal activity and may therefore face different legal issues. Offenses such as "driving while intoxicated" and "possession of an illegal substance" are unique to chemical addictions, and violent crime is frequently associated with illegal substances. On the other hand, several studies⁴ have found that when gamblers commit crimes to support their addiction, they are likely to be non-violent, "white collar" crimes.

The differences between the addictions require differences in treatment programs. Franklin stresses that "direct translation from drugs and alcohol to gambling doesn't work. You can't just pull out the words 'drug' and 'alcohol' and plug in the word 'gambling' and be good to go with a treatment plan." She believes that while abstinence and 12-step programs are suitable for the overwhelming majority of substance abusers, they are sometimes less appropriate for gamblers. "The minute I stopped the 'one size fits all' approach I really started getting better results."

Brustuen only has to go as far as Vanguard's exercise room to see the differences between those being treated for gambling addiction and the substance abuse patients who share the facility. "The gambler's exercise has to be limited and structured. Gamblers want to run five miles a day or they want to pump iron for an hour a day, or they want to do push-ups in their rooms for a half-hour. We can't just let them exercise on their own because some become compulsive exercisers. Even playing volleyball has to be structured. People get so competitive they end up injuring themselves. You really need to watch the games they play—even board games—be-

cause of their competitiveness and wanting to get into action." Substance abuse patients require many fewer restrictions.

She also believes that therapeutic groups for gamblers need to be smaller than those for chemical dependency. The ideal size, she says, is between eight and ten; when a gambling group gets to be more than 15 people "we begin to notice more behavior problems and more chaos, and addictions feed off chaos." She believes that gambling groups work best with two staff present because of the difficulty in keeping gamblers focused.

Brustuen notes that when working with gamblers "you really have to have good boundaries. With alcoholics, you can almost be their friend. You can be warm. You can be soft. With gamblers, you're going to get burned because they're going to take that warmth and softness and use it. You can't talk to a gambler about your family or anything personal because that's going to come back to bite you."

In addition, she believes that aftercare needs to be longer for gamblers. "The longer (substance addicts) are chemical free the better

(Addictions, continued on page 8)

(Addictions, continued from page 7)

their chances of recovery are. Gamblers continue to relapse years after treatment.” As a result, Vanguard’s aftercare “growth group” has no limits on duration. “A lot of our old-timers come and sit in every two or three months just to keep it fresh for them.”

A complicating factor is the considerable overlap between the two populations. A recent survey of 43,000 U.S. households found that almost three-quarters of those with a lifetime history of problem gambling also had experienced an alcohol use disorder while more than one in three had a history of drug use.⁵ While the two addictions may not have occurred simultaneously, it is clear that when treating one addiction, the existence of a different prior or concurrent addiction needs to be considered.

When faced with co-occurring substance and gambling addictions, Vanguard and its sister chemical dependency program attempt to assess which addiction seems most dominant at the time and places the patient accordingly. “We also take into account the chemical used and the withdrawal from it,” says Brustuen. “This may be cause to refer to a chemical dependency unit first. If we find out about abuse of chemicals during (gambling) treatment we will have the person undergo an assessment of their chemical use. At that time we will make a determination of whether to have the person finish gambling treatment or be transferred to our chemical dependency unit.”

At the University of Minnesota, Grant prioritizes multiple addictions by determining which one is impairing the person the most. “If a person says, for example, that they only drink because of their gambling, then initially the focus should be on the gambling.” Alternatively, “if the substance use is only mild, and they function fairly well overall, it’s possible to deal with both problems simultaneously.” However, in his experience, severe substance abuse makes complying with gambling treatment difficult, and in these cases the substance abuse should be dealt with first.

Franklin recalls being asked to see a client in a chemical dependency program. “In five minutes it was clear this client had had a gambling problem for most of his life. He

had been through addiction treatment nine times by the age of 63 for alcohol dependence. He had been treated by some of the best addiction professionals, he had been treated by mental health professionals—but no one caught the gambling connection. No one asked the important but simple questions found on the South Oaks Gambling Screen. This client had been treated for his addiction problem but never for his gambling problem. His untreated gambling disorder led to relapse after relapse with his alcohol problem.

“Once treated for his gambling problem he continued in quality recovery for some years until his death,” she continued. “When he died he was sober and abstinent.

“If a dually diagnosed client isn’t treated for both disorders he is not treated effectively for either.”

¹ Tavares, Hermano, Zilberman, Monica L., Hodgins, David C. and el-Guebaly, Nady. Comparison of Craving Between Pathological Gamblers and Alcoholics. *Alcoholism: Clinical and Experimental Research*, 29:8 (2005) 1427-1431.

² Wiebe, Jamie M.D., Cox, Brian J. A Profile of Canadian Adults Seeking Treatment for Gambling Problems and Comparisons With Adults Entering an Alcohol Treatment Program. *Canadian Journal of Psychiatry* 46:418-421 (June, 2001).

³ Sleep Deprivation and Problem Gambling. Northstar Roundtable, Winter 2004:1-2

⁴ See, for example, Blazczynski, Alex, McConaghy, N. & Frankova, A. Crime, Antisocial Personality, and Pathological Gambling. *Journal of Gambling Behavior*, 5:137-152 (1989).

⁵ Petry N.M., Stinson F.S., Grant B.F. Comorbidity of DSM-IV pathological gambling and other psychiatric disorders: Results from the national epidemiologic survey on alcohol and related conditions. *Journal of Clinical Psychiatry* 66(5): 564-574 (2005)

Journal Now Accepts Problem Gambling Articles

The American Academy of Addiction Psychiatry (AAAP) at its December meeting moved to now accept problem gambling articles in their journal. The *American Journal on Addictions*, the official journal of the AAAP, is published five times per year and is indexed/abstracted in Alcohol and Alcohol Problems Science Database (ETOH), Current Contents/Social and Behavioral Sciences, Excerpta Medica, EMBASE, Index Medicus, MEDLINE, National Criminal Justice Reference Service Database, Psychological Abstracts, PsycLIT, PsycINFO, Research Alert and Social Science Citation Index.

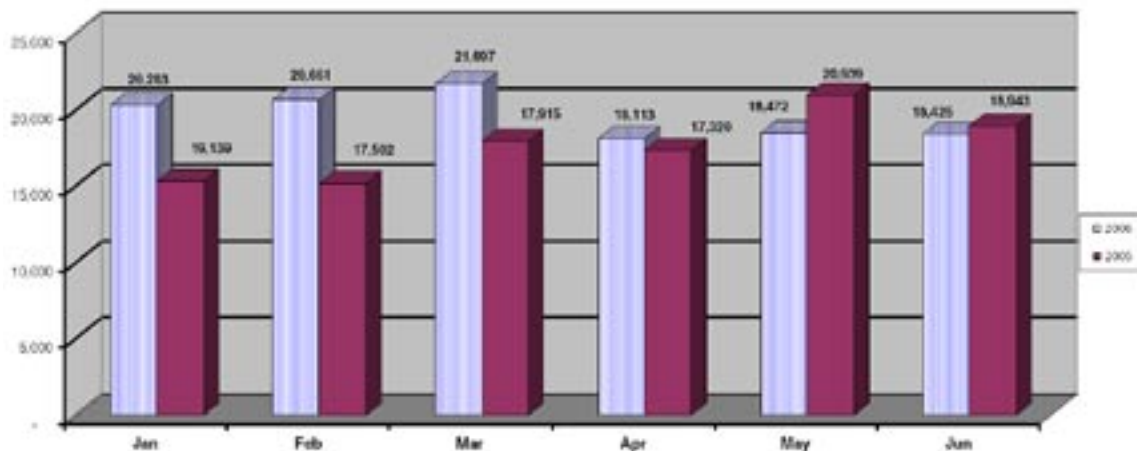
The *American Journal on Addictions* welcomes new manuscript submissions. The *Journal* publishes special overview articles, original clinical or basic research papers, clinical updates, book reviews and letters within the area of addictions. For information and instructions, please visit www.aaap.org. The *Journal* continues to recruit new reviewers, including those for gambling articles. If you are interested in becoming a reviewer, contact the *Journal* office at 215.822.3109 or e-mail aja@aaap.org.

NFATTC Series on Problem Gambling

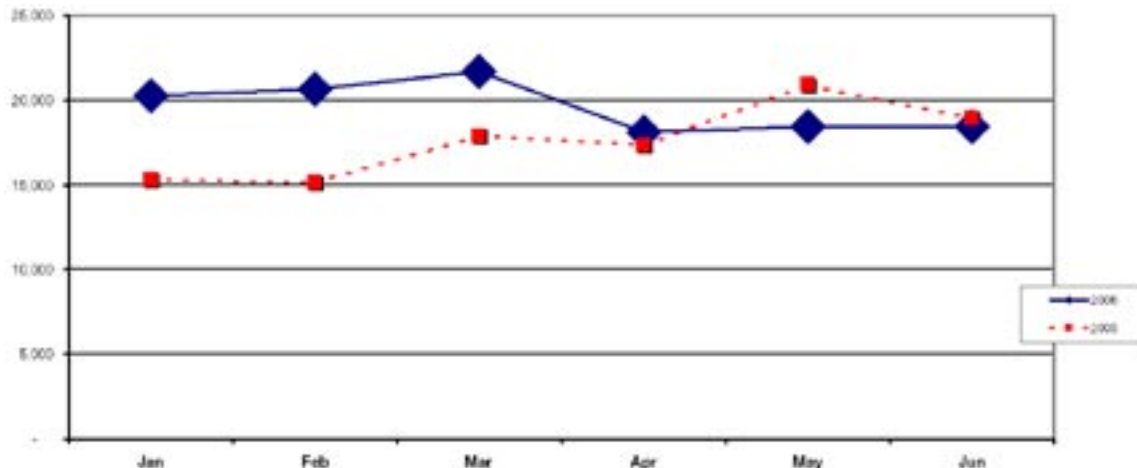
The National Addiction Technology Transfer Center’s Eye on the Field eNewsletter recently reprinted a three-part series of articles on problem gambling by Dr. Steve Galon of the Northwest Frontier ATTC. The articles, which focus on the Northwest, but are relevant nationwide, provide a good general overview and will be of special interest to substance abuse counselors. They can be found in the *Addiction Magazine*, Vol. 9, Issues #1-3 at www.nfatcc.org.

National Helpline (800.522.4700) Call Data 2006

Helpline Network Call Volume Total Calls, 2nd Quarter



Helpline Network Call Volume 2005 vs 2006, Month-to-Date



National Newsletter Submissions

NCPG encourages submissions for the newsletter from their members.

Min. Words: 150/
Max. Words: 1,000.
All requests must be submitted by **September 15, 2006** for the next issue.

Send your submission to melissam@ncpgambling.org or via mail to: NCPG, Attn: Melissa Martin, 216 G Street, NE, Suite 200, Washington, DC 20002.

If you have questions, contact Melissa at 202-547-9204 or melissam@ncpgambling.org.



NYC Gambling Disorders Clinic Goes Online

The Columbia Gambling Disorders Clinic at the New York State Psychiatric Institute recently launched a website. The site provides information on how to get free treatment for problem gambling at the Clinic, which is located in Manhattan. Visitors can find out more about problem gambling, and take an online Problem Gambling Self-Assessment that helps determine the severity of their gambling problem. The site also provides information for teens with problem gambling. Visit the site at www.ColumbiaGamblingDisordersClinic.org.

The Clinic, funded by the New York State Office of Alcoholism and Substance Abuse Services, and provides free treatment for adults, teens and families. Contact the Clinic at 212.543.6690.

New Online Responsible Gaming Tool

Last month, Ethel, LLC announced the launch of ProblemPoker.com, a site directed toward encouraging responsible gambling and helping individuals stop gambling online. With the advent of online gambling, and in particular the dramatic increase in the number of online poker players, gaming companies have successfully brought the casino table to millions of homes. The site seeks to remove that casino table from the home by offering a six-month gambling self-exclusion program. The program revolves around a powerful internet filtering software program, which will guard a user's computer from any content offering online wagering activities. Once a user installs the program, it cannot be removed during the exclusion period. Using experiences with Bayesian Networks, classification techniques, probability and statistics, and proprietary heuristics, ProblemPoker's gambling filter has an accuracy rate of 95–99 percent, with a low over-blocking rate. The founder of Ethel, LLC, developed the idea of a website devoted to helping users refrain from online gambling after personal experiences with gambling addiction.

Individuals can sign up for the six-month gambling self-exclusion program at www.problempoker.com. In the future, the site will be offering additional subscription options and additional software features.

Affiliate Profile

Nebraska Council on Compulsive Gambling

The Nebraska Council on Compulsive Gambling (NCCG) was founded in 1992. Their mission is to increase public awareness of problem and pathological gambling, to increase the availability of treatment services for problem and pathological gamblers and their families, and to encourage programs for education and prevention. They have five staff and volunteers and their website address is www.nebraskacouncil.com

NCPG Executive Director Keith Whyte recently sat down to talk with the NCCG Executive Director Jerry Bauerkemper.

KW: *Tell us a little bit about NCCG's programs?*

JB: The NCCG is a not for profit agency located in Bellevue, Nebraska. The NCCG provides public outreach, advocacy, 24/7 helpline and counselor training programs in Nebraska.

The NCCG provides advocacy education to the Nebraska legislature to increase the funding base for services and insure gambling related services are on par with mental health and substance abuse treatment in Nebraska.

Helpline services are 24/7/365 live answer. Helpline staff is extensively trained and well equipped to handle the over 2500 helpline calls received each year. Clients are matched with one of our 16 state-funded gambling specific treatment programs. A new service in 2006 is our treatment voucher service. Callers with financial issues can receive up to six (6) free counseling sessions at a state approved treatment facility. This new program reports a 30 percent early success rate for clients who without the voucher would have refused counseling services.

The NCCG provides 120 hours per year in gambling specific training in Nebraska. Nebraska has a state administered counselor certification program. The state Gamblers Assistance Program contracts with NCCG to provide both "core" and "advanced" trainings. Counselors in the state of Nebraska are some of the most highly skilled gambling specific counselors as the result of this rigorous training program. The majority of our certified counselors have over 200 hours of training on all aspects of problem gambling.

KW: *There is obviously a demand for counselor training not just in Nebraska but across the country. How has NCCG helped meet that need?*

JB: NCCG provides training programs in several other states. In cooperation with entities like the Oklahoma Association of Problem and Compulsive Gambling, the NCCG trainers provide core and advanced trainings. All trainings are approved by the NCPG Education Committee. Our training program has proven to be very successful with our training staff going to Kansas, Wisconsin, Arizona, Delaware, Oklahoma, South and North Dakota and Iowa to provide training for the various affiliate council training programs.

KW: *You've been a prominent supporter of national advocacy efforts through your work on the Affiliates and Executive Committees; tell us about your experience at the state level*

JB: Our legislative advocacy program is very successful. In 2006, the legislature mandated the Nebraska Lottery to provide 5 percent of all their lottery ads and promotions be directed to help problem gam-

blers and their families. The Nebraska lottery has been very cooperative in this venture and has been and continues to be an excellent partner in helping problem gamblers.

We also believe that these programs "spill over" outside of our state to the national level, so we are proud to be a member of the NCPG and we benefit greatly because of our affiliation. The NCCG adapted our original bylaws and mission statement from the NCPG helping us to gain our not for profit status.

Our helpline gets a tremendous price break on the cost of an 800 number by using the 800.522.4700 national number. The NCPG provides us with national advertising of that number through its corporate affiliations with gaming entities, and national TV, radio and magazine contacts. Advertising we cannot afford.

The NCPG has an extensive list of board members and affiliates who are experts in the field of pathological gambling. The NCCG has used many of the NCPG experts to provide training in Nebraska. Nowhere else in the United States is there the number and quality of experts that flock to one place like the NCPG annual conference. Staff at the NCCG never miss this conference.

KW: *You mentioned other ways of utilizing the NCPG network?*

JB: For example, the NCCG, the Kansas Association on Problem Gambling and the Missouri Council (all NCPG affiliates) got together in 2004 and created the Midwest Conference on Problem Gambling and Substance Abuse. The councils brought on state representatives from Iowa, Nebraska, Kansas, and Missouri as well as gaming entities from all four states to help fund and support the conference. The Addiction Technology Transfer Centers for each state quickly came on board. A CSAT training grant was obtained and the first conference was held in August 2004. We are now planning our third annual Midwest conference and have added the Oklahoma affiliate and the state of Oklahoma gamblers assistance program to our conference committee. This year, we anticipate 300 attendees.

The NCCG utilized our affiliation with the NCPG and our other state affiliates to leverage government and private support for this conference and it has become a huge success. Without the NCPG and its support the conference would not be a reality today.

KW: *What do you see as challenges and opportunities for NCCG in the future?*

JB: The NCCG has a total operating budget of \$200,000. Our outreach advocacy and public education programs could easily be more successful with additional dollars. The silver lining of our lack of resources is that we have learned to partner with other agencies and corporations to get our message out. Gamblers in Nebraska still struggle to find our services and insurance doesn't pay for counseling and yet many families are in recovery and our Gamblers Anonymous groups are flourishing. GA has been an extraordinary help in understanding the benefit of our helpline and treatment services. In fact, GA has a meeting in our office and in the offices of several of our treatment programs. Cooperation is the key, and they have been very cooperative.

UCLA Gambling Studies Program

The UCLA Gambling Studies Program (UGSP) was founded in 2005 by an unrestricted gift from the Annenberg Foundation and is part of the Semel Institute for Neuroscience and Human Behavior at UCLA. The Program is devoted to understanding pathological gambling, its causes, natural history, cultural factors, and the obstacles to successful treatment. The mission of the program is to translate research findings into cost-effective, evidence-based methods of prevention, education, and treatment. A direct result of this work will be a reduction in the individual and societal damages caused by pathological gambling.

Specific areas of interest include characterizing the neurobiological risk factors that contribute to pathological gambling; developing new approaches to the treatment and prevention of pathological gambling; assisting community treatment providers in moving empirically-supported treatment of pathological gambling into mainstream application and supporting public health policy initiatives to ameliorate social and cultural consequences associated with pathological gambling

The Program Co-Directors are Dr. Tim Fong and Dr. Richard Rosenthal. Dr. Fong is an Assistant Clinical Professor of Psychiatry at the UCLA Neuropsychiatric Institute and Hospital. Dr. Fong completed his undergraduate and medical school at Northwestern University in Chicago. He then came to UCLA and finished his residency in general psychiatry in 2002 and was the first accredited addiction psychiatry fellow at the UCLA Neuropsychiatric Institute (2002–2004).

Dr. Rosenthal has been treating gamblers and conducting research on problem gambling for the past 25 years. He co-authored the DSM-IV diagnostic criteria for pathological gambling and was co-investigator on the first genetic study of the disorder. In 1986, he founded the California Council on Problem Gambling, and in 1990 he created the first inpatient gambling treatment program in the state. From 1995–2000 he co-chaired the program committee for the National Conference on Problem Gambling. He has published approximately 40 articles and book chapters on the phenomenology,

course, and treatment of pathological gambling and on other impulsive and self-destructive behaviors.

Recent UGSP research projects include participation in a multi-site drug trial for the treatment of pathological gambling and completion of preliminary data that examines the effect of context on impulsivity in pathological gamblers. Since 2005, UGSP has also collaborated with local community mental health providers to initiate a series of research projects that examine the impact of problem gambling on Asian Pacific Islanders communities in Los Angeles. Finally, UGSP is heading up two clinical trials to examine the efficacy of self help workbooks and telephone counseling to pathological gamblers who live in California.

In addition, outpatient treatment for pathological gamblers and their families is provided through the UCLA Impulse Control Disorders Clinic. This is a teaching clinic that is staffed by psychiatry residents and supervision is provided by Dr. Fong. Dr. Rosenthal continues to treat pathological gamblers in his office in Beverly Hills and provides long-term psychotherapy and psychoanalysis as an important part of the UGSP treatment services.

UGSP is very active in educating the UCLA healthcare community about the consequences of pathological gambling. For instance, UGSP created a medical student elective for impulse control disorders and has created a seminar for undergraduate freshman to discuss gambling.

UGSP welcomes clinicians and researchers to establish ongoing relationships and collaborations. Interested individuals and organizations can contact UGSP by calling 310.825.4845 or by e-mailing uclagamblingprogram@mednet.ucla.edu.

For further information, visit the website: www.uclagamblingprogram.org (under construction through August 2006).

(New Leaders, continued from page 1)

Awareness Week since 2005. In April 2006, Moran-Cooper was named West Virginia Social Worker of the Year.

The returning At-Large Directors include Bo Bernhard, Tim Christensen, Dennis McNeilly, Rena Nora, Mike Stone and Bill Velardo. Dr. Bernhard is the Director of Gambling Research at the University of Nevada. He holds joint assistant professorships in the departments of sociology and hotel management. Dr. Nora is a Board Certified Psychiatrist and Distinguished Fellow of the American Psychiatric Association. She served as Chief of Psychiatry Service in the VA Healthcare System for over 20 years. Stone is executive director of the Kentucky Council on Problem Gambling, which is a part-time position. As principal of MKS Communications, he uses his education and experience to serve clients in education, golf and engineering. Velardo is with FB Resorts. He was President/CEO of the Mohegan Sun Hotel and Casino from 1996 to 2006. Velardo has 25 years of experience in the gambling industry.

National News

NATIONAL COUNCIL ON PROBLEM GAMBLING

The *National News* is published by the National Council on Problem Gambling.

National Council on Problem Gambling

216 G Street, NE, Suite 200

Washington, DC 20002

Office 202-547-9204

Fax 202-547-9206

ncpg@ncpgambling.org

www.ncpgambling.org

Executive Director: Keith Whyte

Program Manager: Linda Abonyo

Administrative Assistant: Melissa Martin

N A T I O N A L



PROBLEM GAMBLING
Awareness Week

NPGAW 2006...Best year ever!!!!

With more than 85 organizations and individuals nationwide reporting various activities held during the week, the 2006 NPGAW campaign has so far proved to be the best one ever.

2006 was also a year for many firsts:

- *Multilingual versions of existing materials developed*
- *Distribution of press releases and PSA's to thousands of newspapers, radio and TV stations nationwide*
- *NPGAW supported by several national organizations (NASW, NAADAC & NCADI to name a few)*

NPGAW is the only national grassroots public awareness effort that focuses on problem gambling. The goal of the campaign is to educate the general public and health care professionals about the warning signs of problem gambling and raise awareness about the help that is available both locally and nationally.

Save the Date March 5–11, 2007

This is your week...if there's something you want to see for 2007 TELL US!!! Any requests, suggestions or general feedback can be sent to npgaw@ncpgambling.org

To volunteer for the 2007 NPGAW Planning Committee, please contact Mia Moran-Cooper at 304.344.2163 or miamorancooper@problemgamblers.net

www.npgaw.org

"Goin' To Kansas City"



Present the

21st Annual Conference on Prevention, Research and Treatment of Problem Gambling:

Improving Practice and Managing Consequences for Problem
Gambling, Substance Abuse and Co-occurring Issues.

Save the Date!!!

June 9-11, 2007

Kansas City Marriott Downtown

200 W. 12th Street

Kansas City, MO

The National Council on Problem Gambling, the Missouri Alliance to Curb Problem Gambling and the Midwest Consortium on Problem Gambling and Substance Abuse have joined together to provide an exceptional training opportunity for addiction counselors across the region and around the world. The conference will take place over 2½ days, starting Friday morning and ending Sunday afternoon. Join more than 600 attendees to learn about the latest treatment techniques, innovative prevention programs, new research and cutting-edge responsible gaming policy.

Please check the Midwest Conference Web site (www.888betsoff.org/links/midwest_conference.shtm) or the NCPG Web site (www.ncpgambling.org) for the forthcoming 2007 information, including exciting opportunities for attendees and the Presenter Guide with detailed instructions for paper submission.



National Council *on* Problem Gambling

NATIONAL HELPLINE

1-800-522-4700

24 Hour Confidential

Membership / Supporter Form

The NCPG is the national advocate for programs and services to assist problem gamblers and their families

Name (Please Print Clearly or Type) _____

Company _____ Job Title _____

Address _____

City _____ State/Province _____ Zip/Postal _____

Phone _____ Fax _____ Email _____

Memberships

- | | | |
|--|---|----------------|
| <input type="checkbox"/> Individual Member | Includes full voting membership, the NCPG Newsletter, member certificate, bi-monthly subscription to <i>Addiction Professional</i> , discount on literature and conferences.

*** Contact your local Affiliate for a discount on Individual Membership | \$75 |
| <input type="checkbox"/> Individual Member Plus | Includes all benefits of the Individual Member level, with the addition of a subscription to <i>International Gambling Studies</i> , a peer reviewed interdisciplinary journal in gambling studies. | \$100 |
| <input type="checkbox"/> Corporate Member | Includes full voting membership, NCPG Newsletter, membership plaque, Annual Report. All employees are eligible for discounted member rate at National Conference. | \$5,000 |

Support Opportunities

- | | | |
|---|---|----------------|
| <input type="checkbox"/> Supporter | Receives NCPG Newsletter "National News" Only. | \$25 |
| <input type="checkbox"/> Contributor | Receives NCPG Newsletter, thanks in newsletter, framed certificate. | \$250 |
| <input type="checkbox"/> Silver | Receives NCPG Newsletter, thanks in newsletter, framed certificate and Annual Report. | \$500 |
| <input type="checkbox"/> Gold | Receives all above as well as National Council's "Book of the Year." | \$1,000 |
| <input type="checkbox"/> Platinum | Receives all above, with membership plaque. | \$2,500 |

TOTAL: _____

Today's Date ___ / ___ / ___

Method of Payment: Check one

Check, payable to NCPG

Visa MasterCard AmEx

Money Order

Credit Card #

Exp. Date

Signature

NCPG is a non profit organization, Federal Tax ID # 51-0141872. Your contribution is tax deductible

216 G Street NE, Suite 200 • Washington, DC 20002 • 202-547-9204 • 202-547-9206 Fax
ncpg@ncpgambling.org • www.ncpgambling.org

Upcoming CEU Events

Women and Gambling

August 24, 2006 to August 24, 2006, 9:00am-4:00pm
CSB Bldg., 1st Fl., Rm. 105, 100 W. 10th St., Wilmington, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Women and Gambling

August 25, 2006 to August 25, 2006, 9:00am-4:00pm
Hampton Inn, Hwy. 1, Rehoboth Beach, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Summerschool on Prevention and Treatment

August 28, 2006 to August 29, 2006
AF Castle, Lund, Sweden
For more information, contact Morgana Sundtrom at margona@assissa.se or visit www.assissa.se/index.html

1st GREGRI Conference

August 31, 2006 to September 1, 2006
Global Remote and E-Gambling Research Institute,
De Meervaart, Amsterdam, The Netherlands.
For more information, contact Ynze Remmers at conference@gregri.org or call GREGRI at +31 20 689 59 89 or visit www.gregri.org.

2nd Asia Pacific Institute of Addictions

Many Roads, One Journey: Helping Families and Individuals Recover from Addictions
September 1, 2006 to September 5, 2006
For more information, visit www.apia.com.sg/home.html or contact Juliana Simon at (65) 6389 2389, fax (65) 6389 2988 or Conference Secretariat at (65) 6379 5261, fax (65) 6475 2077 or email Juliana Simon at admin@apia.com.sg.

Kentuckiana Fall Conference

Problem Gambling and Training
September 13, 2006 to September 15, 2006
Ramada Riverfront, Jeffersonville, IN
Up to 12 CEU/Contact Hours available. Applications will be filed with appropriate boards for psychology, CADAC, gambler counselor and social work certification. For more information, contact Mike Stone, Executive Director with the Kentucky Council on Problem Gambling, (502) 223-1823 or kmstone@mis.net.

International Conference on Gambling

Gambling and its Impacts: Policy, Practice and Research Perspectives
September 13, 2006 to September 15, 2006
Auckland, New Zealand
Check The Problem Gambling Foundation of New Zealand website, www.pgfnz.org.nz, or the Auckland University of Technology, Gambling Research Centre website, www.aut-grc.ac.nz for updates.

Marital and Family Issues in Gambling Addiction Treatment

September 14, 2006 to September 14, 2006, 9:00am-4:00pm
CSB Bldg., 1st Fl., Rm. 105, 100 W. 10th St., Wilmington, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Marital and Family Issues in Gambling Addiction Treatment

September 15, 2006 to September 15, 2006, 9:00am-4:00pm
Hampton Inn, Hwy. 1, Rehoboth Beach, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

State of Oregon: Problem Gambling Fall Clinical Workshop

If It's Not in the File, It Didn't Happen
October 4, 2006 to October 4, 2006
Optional Preconference Workshop 6 CEUs (free). Brochure w/registration form will be sent in August. For questions, contact Arlenia Elmore-Jeggliie at arlenia.elmore-jeggliie@state.or.us or (503) 945-9710.

State of Oregon Problem Gambling Fall Clinical Workshop *Views from the Cutting Edge*

Location: TBA
Brochure w/registration form will be sent in August. For questions, contact Arlenia Elmore-Jeggliie at arlenia.elmore-jeggliie@state.or.us or (503) 945-9710

Criminality – Learned Behavior or Inherited Traits?

October 5, 2006 to October 5, 2006, 9:00am-4:00pm
CSB Bldg., 1st Fl., Rm. 109, 100 W. 10th St., Wilmington, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Criminality – Learned Behavior or Inherited Traits?

October 6, 2006 to October 6, 2006, 9:00am-4:00pm
Hampton Inn, Hwy. 1, Rehoboth Beach, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Sobriety * Straight Up – Relapse Prevention

October 26, 2006 to October 26, 2006, 9:00am-4:00pm
CSB Bldg., 1st Fl., Rm. 105, 100 W. 10th St., Wilmington, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Sobriety * Straight Up – Relapse Prevention

October 27, 2006 to October 27, 2006, 9:00am-4:00pm
Hampton Inn, Hwy. 1, Rehoboth Beach, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Brief Treatment for Problem Gambling

November 16, 2006 to November 16, 2006, 9:00am-4:00pm
CSB Bldg., Red Cross Conf. Rm., 9th Fl., 100 W. 10th St., Wilmington, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

Brief Treatment for Problem Gambling

November 17, 2006 to November 17, 2006, 9:00am-4:00pm
Hampton Inn, Hwy. 1, Rehoboth Beach, DE
For more information, contact the Delaware Council on Gambling Problems, Inc. at (302) 655-3261 or visit www.dcgp.org.

To list your training schedule here, please send an email to melissam@ncpgambling.org with complete details as far in advance as possible.

Massachusetts Lottery Commits \$1 Million to Public Awareness Campaign

The Massachusetts Council has launched a public service campaign to raise awareness of problem gambling in the state, and State Treasurer Tim Cahill pledged \$1 million from the lottery advertising budget for this effort. The lottery's advertising agency, Hill, Holliday, Connors Cosmopolous, Inc. is leading the creative effort. The group has develop a radio ad, two television ads and three print ads, all of which focus on the costs and potential loss of both material possessions and family relationships due to problem gambling.

National Council on Problem Gambling

216 G Street, NE, Suite 200
Washington, DC 20002

Non-Profit Org.
U.S. Postage
PAID
Washington, DC
Permit No. 2422

NCPG Calendar of Important Dates

2006

- September 29– Strategic Planning Committee Meeting
October 1 St. Louis, MO
- October 27–29 Executive Committee Yearly Planning Meeting,
Dallas, TX

2007

- February 8–10 NCPG Midwinter Board of Directors Meeting &
Congressional Forum on Gambling in America

2007 (continued)

- March 5–11 NPGAW
- March 26 Bids to host 2009 National Conference due
- May 15 Affiliate checklist & dues deadline
- June 8 Annual Board of Directors meeting & committee
meetings
- June 9–11 21st Annual Conference on Prevention, Research &
Treatment of Problem Gambling, Kansas City, MO

Save the Date!!!

June 9-11, 2007

**Kansas City Marriott Downtown
200 W. 12th Street
Kansas City, MO**

We're Ready to Listen.

If you or someone you know
has a gambling problem, give us a call.
The National Problem Gambling Helpline
provides toll-free, confidential help
24 hours a day.

1-800-522-4700