National Problem Gambling Awareness Week

March 1-7, 2009, has been designated as the Seventh Annual Problem Gambling Awareness Week by the National Council on Problem Gambling. The purpose of this week is to educate the general public and health care professionals about the warning signs of problem gambling and raise awareness of about the help that is available both locally and nationally.

Data from the National Council on Problem Gambling's research shows that 2 to 3 percent of the United States population will have a gambling problem in a given year. These percentages directly represent 6 million to 9 million Americans. These numbers do not take into consideration the impact of problem gambling on the health of family members directly involved with the gambler. Just as smoking impacts the smoker and everyone else nearby, problem gambling hurts the gambler and can also hurt the gambler's family members, employers, and others in the gambler's community.

Problem gamblers often have stress- related symptoms such as migraines, insomnia, stomach ailments, and even cardiac distress says Keith Whyte, executive director for the National Council on Problem Gambling in Washington, D.C. Unfortunately many doctors end up only treating the symptoms of these problems. An article published by the National Council, entitled Health Awareness reveals that a study of gambling disorders published in in the Archives of Family Medicine found that 10 % of all patients entering the primary health care setting met the criteria for problem gambling. Few of the thousands of problem gamblers who receive medical interventions each year are ever diagnosed with a gambling disorder. This is serious since the Diagnostic and Statistical Manual of Mental Disorders IV reveals that 20% of the individuals in treatment for pathological gambling are reported to have attempted suicide.

Gambling problems are often missed in the mental health setting as well. Gamblers frequently are at high risk for depression as well as drug and alcohol use, but their gambling addiction goes unscreened. Like me, most professionals were trained to screen for alcohol and drug use, but there was absolutely no mention of screening for a gambling problem when we were in school.

Physicians and mental health professionals can work to eliminate the problem of missing this diagnosis by simply adding a two question lie/bet screening to all intakes. Intake forms should ask: Have you ever lied about how much you gamble? Have you felt the need to gamble more and more money? These questions help the problem gambler and the health care provider to begin talking about any gambling addiction.

Problem Gamblers in West Virginia are quite blessed. Every problem gambler and/or their loved ones are entitled to a FREE two-hour consultation with a counselor who has extensive training in the treatment of gambling problems. Continued individual counseling is also free to the gambler and their loved ones if no insurance coverage is available. Those with more severe problems may enroll in an intensive outpatient program. Callers in WV may simply call 1-800 GAMBLER to locate these free services. Wheeling also has three Gamblers Anonymous (GA) meetings and a Celebrate Recovery (Christ Centered 12- Step program) available to offer peer support. For more information about these groups please contact my office at 304-242-8095 or christcounselor@juno.com

As a therapist I have found that clients who combine these groups with individual counseling have the best chance of success. Sometimes it is helpful for problem gamblers to see themselves in others. It helps to talk to others who have been there and really understand the nature of this intense addiction. Family members can be of greater support once they understand the complexity of this illness as well. Clients have often told me it was easier for them to get off of drugs than to kick this habit.

There is no shame in getting help for a gambling problem, but denying the problem and continuing to hurt yourself and your family is the "REAL SHAME"!