

## THE SOCIETY FOR THE STUDY OF GAMBLING NEWSLETTER

Number 13, May 1988

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The Newsletter is circulated twice a year to members of the Society. The subscription for *individual membership* is £ 10.00 per annum and cheques, etc. in favour of the *Society for the Study of Gambling* should be sent to: Mr Gerry Taylor, 41 Baginton Road, Coventry, CV3 6JX, UK.

Alternatively, subscriptions to the *Newsletter* are available at a rate of £5.00 per annum and remittances should be sent to the same address.

Subscriptions for up to 3 years are available at the rate currently prevailing. Overseas subscribers should remit in sterling.

[This Newsletter was produced on an Apple Macintosh<sup>1M</sup> and the main text is in Times 10 point. Our thanks to Apple<sup>TM</sup> (UK) for their assistance.]

## THE SOCIETY FOR THE STUDY OF GAMBLING

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The Society for the Study of Gambling was formed in 1977 to provide a forum for those concerned with research into gambling, to promote its scientific study especially as far as the psychological, social and economic aspects are concerned, and to inform and educate the public about these matters.

The membership of the Society is drawn from a wide circle of people who have an interest in various aspects of gambling. They range from social workers and psychiatrists who deal with 'compulsive gamblers', to members of the gambling industry. It is a condition of the Society that there should be freedom of opinion and practice among its members so that the Society does not take any particular stance in relation to gambling.

The Society holds regular scientific meetings which have, so far, always taken place in London. Further information concerning the Society can be obtained from the Honorary Secretary.

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**Acknowledgement:** Grateful acknowledgement is made to the British Medical Journal for permission to reproduce the article 'Pathological gambling and its treatment' by Jim Orford. This was first printed in volume 296, 1988, pp729-80.

# GAMBLERS ANONYMOUS: AN ETHNOGRAPHIC INTERPRETATION

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The basis for an understanding of problem gambling in this paper has been an ethnographic study of self-proclaimed compulsive gamblers in two Gamblers Anonymous (G A) groups. This research was conducted over a twelve month period and its main aim was to try to understand compulsive gamblers, as they saw themselves through their identification with the group Gamblers Anonymous. Great attention was paid to the role played by established members in relation to their expectations of newcomers. The leading reason for pursuing such an ethnographic approach was a general disappointment with previous research which always seemed to begin with the presupposition that compulsive gambling existed and needed to be treated. This is particularly true of most psychological investigations.

In essence it is argued that the psychological theorist makes scientific claims about a gambling environment, and searches for verification of those simplistic assumptions by making sense of communication that can be understood as meaningful – but only to that scientific position. Yet such an observer is by definition an outsider, which implies an ignorance about codes, rules, and norms that are so valued by gambling insiders. Consequently, much labeled action and body language is either ignored or misinterpreted when this academic discourse prevails.

Psychology immediately aligns itself with those disease-labelling agencies who view such gamblers as victims of a drive or of conditioning, rather than deliberating, reasoning actors. They are objects at the mercy of internal forces that are somehow out of control, or of powerful reinforcing contingencies that operate within the environment

It is possible to identify the medicalisation of compulsive gambling as a disease by following the path pursued by the medicalisation of alcoholism (Jellinek, 1963, Schneider 1978); after all, Gamblers Anonymous is directly labeled on Alcoholics Anonymous and their definition of the sick person. It is in the interests of the control agencies to ensure that compulsive gambling is publicly dealt with. The utilization of a 'disease model' provides a useful framework in this respect. Using the medicalisation of alcoholism as a model, the first hint of medical intervention was provided by Rush (1784) who completed what was probably the first clinical study of alcoholism. Quoted in Levine (1978), he stated that alcoholism was a disease of the will 'thereby providing the direct association between deviant physiology, deviant behaviour and inebriety, wrapped in the disease label. Zola (1972) believed this provided the collective, unifying battle plan for all those agencies opposed to alcohol. The attack then concentrated on the disease concept, and as Schneider (1978) commented: Disease however defined, is undesirable. It should be opposed, controlled, and if possible, eradicated, and by logical extension, so should all known or suspected causes of disease. (1978, p 363) Roman and Trice (1977) posit two possible consequences of this labelling. The alcoholic will seek out opportunities that allow affiliation with other labelled alcoholics, which then results in public reinforcement of the label. Alternatively, the alcoholic may become further integrated into a group of mainly non-deviants in the guise of public scapegoat. Here we can see how A A and indeed G A satisfy this need. Indeed this model has been applied to compulsive gambling by Rosecrance (1985).

## Methodology

A 12 month participant observation method was employed as a means to understand not only what Gamblers Anonymous was all about but more pertinently to find out why G A, although relatively successful in comparison to other treatment methods, was still underachieving. These observations were conducted through regular attendance at one G A group and less frequent attendance at one other group, both were within the South Wales area. Thirty-two meetings were attended within this period, with additional social functions

Name	Meetings Attended	%	Newcomer This Year	Stated Addiction	Still Attending
DI	45	97.8	No	BM	Yes
G1	44	95.6	No	FM	Yes
D2	40	86.9	No	BM/C	Yes
I	40	86.9	No	FM	Yes
W	6	85.7	Yes	FM	No
G2	6	85.7	Yes	FM	Yes
E1	39	84.7	No	BM	Yes
PI	15	75.0	Yes	FM	No
H	34	73.9	No	C	Yes
S1	28	71.7	Yes	FM	Yes
N1	16	69.5	Yes	FM	Yes
S2	31	65.2	No	BM	Yes
A1	22	62.5	Yes	FM	No
A2	27	58.6	No	FM	Yes
N2	12	54.5	No	FM/C	No
D3	18	54.5	No	FM	No
M1	9	52.9	Yes	BM	No
M2	13	52.2	Yes	BM	Yes
A3	7	38.8	No	C	No
S3	12	34.3	No	FM	No
R	13	28.3	No	BM	Yes
P2	10	21.7	No		Yes
E2	8	17.4	No		No
Visitors	5				
Transfers	2			BM,CB	
1Off Attenders	12			4BM, 2BM/C,6FM	

Key: BM Bookmakers; FM Fruit Machines; C Casinos; B Big.

TABLE 1: TOTAL ATTENDANCE AT G A MEETINGS (17.1.86 - 13.1.87)

Name Attendance	%	Relationship to GA Member	
T	40	86.9	Mother
A	37	80.4	Wife
I	8	80.0	Wife
G	18	62.1	Father
C	7	53.5	Mother
L1	7	53.5	Father
D	24	52.2	Mother
L2	12	37.5	Mother
P1	17	36.9	Father
P2	4	36.4	Father
P3	3	30.0	Wife
F	11	28.2	Fiancé
H	9	26.4	Father
E	8	23.5	Wife

20 people attended twice or less: 13 wives, 1 husband, 3 fathers, 2 mothers, 1 brother.

TABLE 2 GAM ANON ATTENDANCE (SIGNIFICANT OTHERS)

organized by G A allowing for more informal communication. Outside the actual meetings, 8 autobiographical gambling life histories were collected. These were supplemented with in-depth, semi-structured, follow-up interviews to explore points raised therein.

A total of 41 individuals attended at least one G A meeting although there was a select group ('clique') of 9 members whose attendance was far ahead of everyone else (see Table 1) within this observational period. However, just as there was an average attendance of 10 members per week, it must be noted that this was made up mainly by the clique. Indeed, it was discovered that of the total of 41 who attended, 12 came twice or less, 8 had left after becoming regular attendees and there were 4 more who now attended other groups. Others were spasmodic attendees perhaps only attending every 4 to 6 weeks, almost as a way of paying a penance. What did become evident was that the attendances of G A members were highly dependent upon the commitment and even the attendance (see Table 2) of Gam Anon members. The group as a whole was mostly made up of male gamblers; there were only 3 female gamblers involved in the entire 12 month period covering both groups. By contrast the majority of Gain Anon members were female (19 out of 28).

### **Group Dynamics**

The group was clearly structured around an informal hierarchical framework, status being awarded for attendance records and dramatic therapeutic recitations; i.e. the lower the depths to which one had sunk in the real world achieved greater admiration from fellow members, once they had escaped from their personal nightmare with the help of the G A recovery programme. These dramatic reconstructions were important in guiding the newcomer through the initiation or degradation (Garfinkel 1956, Cromer 1978) ceremony. Their responses in this first period within the group often determined whether they were potential recruits or undesirables. The groups were very insular in nature and only accepted recruits who fitted the ideal' type compulsive gambler identified by psychologists and folklore alike.

The criteria for establishing 'potentiality' is based initially on home conditions (established by house visit), demeanour, dress and overall attitude in the group and their 'problem'. It is not uncommon to hear a group discussion (which also serves group solidarity) about a new member from the week before who had not satisfied this. They then confront the gambler, if he or she returns, with piercing questions about their responses and attitudes. For example, on more than one occasion, undesirable recruits were scolded for being too blasé about their problem; 'You don't look or sound like a compulsive gambler to me' (Martin to Roger 14.6.86). Indeed it is clear that the group requires 'like' members to maintain its own continuation and to present a coherent and acceptable picture to the outside world. If the recruits' attitude was not amended, then the criticisms would continue until it did, or the recruit left (which often happened). When the latter happens, this merely serves to reinforce their original notion that he/she was not really a compulsive gambler which would be publicly announced the following week.

If the new member satisfies the recruitment requirements, he or she will be instructed on the path they must follow if recovery from compulsive gambling is to be effected. Most members will then relate how they followed this same path to recovery through personal therapies (a detailed account of their demise - what Goffman (1961) refers to as a public announcement of deviance in degradation ceremonies - to their present state of a gamble-free life). The new recruit is then required to give their own therapy. This is dissected and examined publicly by the group. To aid the conversion to the sick role of compulsive gambler, there are a number of leaflets available to help formulate the correct public image.

Returning to the hierarchical stratum, it is possible to identify five clear levels. These are seen as typical to both Gamblers Anonymous groups, even though none of these is officially recognised by participants. By using an analytic role-category framework as opposed to a lived role-category system (Goffman 1967), we are able to refer to those roles adopted within our own typological system rather than those the G A members may feel they are operating within.

- 1 potential recruit/undesirable (new arrival)
- 2 apprentice (accepted member- one year pin)
- 3 under manager (position of responsibility - 2nd year pin)
- 4 group manager (5 year pin)
- 5 director (5 year pin or longer)

These awards and responsibilities may vary from group to group but 3 is usually about two to three years, 4 is reached normally upon attainment of a five year pin and 5 my amount of years after the attainment of this 5 year pin.

The pinning ceremony is an interesting event - and might even be called a *rite de passage*. This is a special ritualized occasion for the individual member because it is the most formal episode he/she is ever likely to encounter in a G A career. This critical moment is in many ways a public shedding of the old gambling self in favour of the newly acquired G A identity, signified by the presentation of a 'pin'. The signification of the pin ceremony as a ritual is clear. It is 'performed for and to an individual who has altered his status in some way...' (Goffman, 1961, 67).

### **Career Passages**

As Goffman (1961) states, there are a number of stages the sick person must pass through. The test stage has been labelled pre-patient and is applicable to the 'pre-membership' phase encountered by G A recruits. In the light of the effect of the public labelling of the disease, the gambler tends to re-evaluate the concept of self. This is followed in turn by attempts to conceal these previously private facts from others while also trying to discover how much is known by the significant others, termed 'self disintegrative re-evaluation' by Becker (1956). Such a process is reliant on the gambler's knowledge of behaviour that is stereotypically associated with the sick role, applied by others, with reference to expected symptom displays attached at cultural and social levels.

The downward spiral of the self's sense of worth, in respect of identification with the label, accelerates upon entry to a 'like' environment. It is sought as a means of public escape - hence the arrival at G A. A clear distinction is made between what Goffman calls willing and unwilling patients although, in the case of compulsive gamblers, *potential* and *undesirable* recruits remain more relevant here. This will, of course, depend on the depth of penetration the label has had upon the old gambling self. This is enhanced by the proximity of a significant other (Mead, 1934). The role of this significant other in the moral career passage within G A is interwoven with the public announcement of the individual's problem as medically deviant, and the encouragement provided in the adoption of this sick role. Initially, the significant other may feel that the 'search for a cure' route is only a short-term passage, but is soon made aware of the seriousness of the complaint and its incurability through attendance at Gam Anon meetings. Where Goffman talks of the effects of hospitalisation on the in-patient resulting in either relief or concern, we may likewise see the same of G A and its new arrivals, or *recruits*.

### **Concluding Comments**

Throughout this review the role of Gamblers Anonymous and its part in the public designation of 'compulsive gambling' as deviant, has been highlighted. We have argued that the self preservation of the group may be a higher priority than the 'saving' of its members. Individual success may indeed occur - but more as a side effect than a specific aim. The primary function is in the provision of an alternative, legitimate and respectable career. So vital is this new-found career to most members, that it proves to be the guiding influence in their life, so much so that they become institutionalised. Continuance is dependent initially on acceptance of the deviant label. In conjunction with much publicly recognised and respected allies (Psychology and Medicine), it sets out to legitimate the deviant position of such gamblers and, by further recruiting the help of public control agencies and moral supporters en route, achieves this aim.

Another feature is the desperate need to reproduce itself from within. To this end it has developed its own in-built self-preservation capacities. There is a marked ability to replace members, protect itself from undesirables and, most of all, to attract sufficient numbers of recruits. The latter part is aided by the application of the disease model which ensures that those few circuit agents, who doubt the seriousness of the problem associated with compulsive gambling, are reminded, usually in the form of relapses of the problem's compulsive face. Those who reject the G A career path and return to gambling are useful scapegoats for the group to utilize as examples of the need for group commitment. This group cohesion is never more apparent in the meetings than when the group encourages the younger recruits to accept more responsibility towards the group, for the time will come when the older members are no longer around, reinforcing the fact that G A careers are short lived.

We have attempted to address the role of major institutions as well as the more minor self-help and voluntary traditions within the 'treatment' of compulsive gambling. Gamblers Anonymous may be viewed as part of a self-help tradition that nonetheless has been supported by more formal and centralised organisations or traditions. The negotiations that are required to satisfy the public norms of respectability may take place in view of this judging audience, as in the moral crusades of the anti-gambling institutions or in the publicly private confines of a G A group. The uncontrollable urges and behaviour patterns so described by the early theorists merely ensure the moral condemnation of deviant gambling as a threat to the public norms of respectability and social order.

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## **THE CHANGING FACE OF COMMERCIAL GAMBLING IN AMERICA IN THE 1980s AND SOME COMPARISONS WITH GAMBLING IN THE UNITED KINGDOM**

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### **1 INTRODUCTION**

As professionals working with some aspect of gambling, we tend to develop an image of the effect gambling has on individuals, on their families, and on the society around them. And those of us who work in areas that are policy oriented, also tend to ask the question, time and again, if there are problems connected with what I am seeing, and what can be done about them to make things better.

If we could conjure up the concept of a collective consciousness among us, an agglomeration of all the images we have individually constructed, it would present a most interesting collage. One of the images in the collage would reflect the pleasures that are derived by the punter as he or she experiences the thrill of anticipation, the excitement of placing wagers, and the challenge of trying to select the correct outcomes to the contests at the root of the gamble. On the other hand, another image would outline the pattern of desperation that overindulgence in gambling has created for individuals who have become clearly over-extended, with no idea of how to get out from under. And some images would portray the families of problem gamblers, trying to figure out how to cope with what on the surface appears to be a disease, but a totally invisible one.

If we were to look elsewhere into this collective consciousness, we would see visions of casino dealers or slot machine manufacturing workers who are well served by the incomes and job opportunities that the gaming industries provide. We would see casino managers evaluating alternative strategies in the fields of personnel relations, marketing, finance and accounting to improve upon the performance of their own companies, for their own self-interest and for the benefit of all involved in their companies. We would see stockholders and owners of such companies enjoying the fruits of economic success, or apprehensive about difficulties on the horizon, and trying to plan on future income streams from their equity positions for their own later economic security.

But we might also stumble upon the knowledge of the casino dealer who has seen punters gamble far more than they could apparently afford, or of the casino manager who knows that this particular customer will be financially ruined by gambling losses within a year. Carried further, we might also see the loan shark with underworld connections who systematically victimizes those so foolish as to contract for credit at usurious rates with him.

We might also see in our collective consciousness the perceptions of a government official who notes that tax revenues which gaming operations pay are an important alternative to more orthodox revenue sources such as those based on tax increases. He might, in passing, note the growing dependence of his government on the continuing flow of gambling-related revenues into government coffers, and that this has become an indispensable revenue source, given the continuing pressure of public sector demands and the lack of alternative revenue sources available. On the other hand, he might be slightly aware that increases in gaming expenditures by patrons, redirect spending from other sectors of the economy which might generate tax revenues through value added or sales taxes, so that at least a portion of the gains are just ephemeral.

Finally, in all the corners of this collective consciousness, we might note apprehension, perhaps even paranoia, that intellectual, legal, or policy changes which might address what one person or one group sees as a problem will adversely affect the interests of other groups. Punters who come up with effective systems or schemes to beat the house; government officials who want to push through increased levies on commercial

gaming revenues; social workers who want to bring about changes in gambling laws as protections for problem gamblers and their families; industry officials who want to see the removal of constraints that limit their ability to increase sales; all these groups, while in pursuit of their specific interests threaten, and in turn are threatened by, the promotion of conflicting interests by other groups.

As we look around this collective consciousness, what is most striking are the contrasts: images that are strongly positive side by side with those that are revulsive. Gambling has the ability to create all these realities, some of them comforting for those who benefit; some of them discomfoting for those who suffer. To the disinterested observer, to the 'idealized academic', what emerges is the challenge of coming up with strategies for enhancing the benefits, mitigating the costs, and of sorting out the varying interests as they might be affected by changes in public policy.

More subtly present is the concern of how much direction should be given to the activity through public policy. For example, would a laissez-faire approach toward commercial gambling policy result in net increases in benefits to society that would outweigh the costs that would arise? Alternatively, can the legal and regulatory system be 'fine tuned' so that social costs associated with gambling are isolated and dealt with appropriately, or would strict prohibitions or significant constraints on commercial gambling work toward a better aggregate result for the affected society?

Commercial gambling, as it has expanded over the past three decades in America, in the U.K., and elsewhere throughout the world, has posed many challenges to all the participants in our collective consciousness experiment. For clearly, the trends have led to an increasing presence of gambling in society, an increased legitimization of commercial gaming industries, and a spreading popularity of gambling in an ever-evolving hybrid of forms. Though the direction is clear, there would be clear disagreement on whether such trends are good or bad for society at large, or whether even such an expression of sentiment is relevant in the public debate. However, since gambling is still prohibited in far more jurisdictions than it is allowed, and, where it is allowed, it is usually commercially restrained for a wide variety of reasons, the debates posed by the conflicting interests will repeat themselves time and again.

In this environment of significant differences of interests and opinions, a statement can be made as to the relevance of gambling-related research. First, it is critically important that credible information about the actual effects of gambling be established. Too often, policy makers must respond in a vacuum, where nothing but anecdotal information exists, or the only statistics around are clearly incredible and self serving. Second, the influence of policy alternatives on social behaviour must be realistically estimated. Gambling problems would not disappear if gambling industries were forced out of legal existence; in the same fashion, masses of the population would not be destroyed if gambling opportunities existed openly in every community. In either extreme, we could gauge the direction of change on each of a number of important social and economic indicators, but based on what we know now, we would be unable to measure the extent of change which is, ultimately, the important consideration.

## **2 CONCEPTUALIZING THE SOCIAL EFFECTS OF GAMBLING**

Because the experience with gambling of so many of us individually is narrowly based in our professional or personal areas, it is quite difficult to establish a broad foundation for analysing the social costs and benefits of gambling. One approach is to compare gambling to the way modern societies view a similar commercial product, alcohol. There are many parallels that can be drawn between legalized commercial gambling as an activity, and alcohol consumption and production. It is widely agreed that alcohol consumption, especially in excess, is a major cause of worker absenteeism, of fatal and injury accidents on the highways, at the workplace, and in the home, and of shortened life spans due to alcohol-related diseases. Yet its presence in most societies is pervasive, and in spite of all its apparent costs, society tolerates it with only a modicum of regulatory constraint on individual choice. Furthermore, the experiment in the United States with Prohibition in the 1920s pointed out the futility and costs of trying to legislate a problem out of existence when there is a strong consumer demand for the commodity. As with gambling, there have been over the years various opportunities in the liquor industry for entrepreneurs to expand their markets, for social workers to try to mitigate the plight of those who are damaged by alcohol and their families, and for policy makers to try to 'make things better' through refinements in laws and regulations. As with gambling, there are conflicting economic and social interests, especially in those areas where potential change in statutes or regulations could have significant impacts on some of the interested parties. Also, as with gambling, not the least important

economic interest is the government, which might have become highly dependent on liquor-related taxes and levies.

Another parallel can be made with respect to presently illegal drugs, such as cocaine, marijuana and heroin. Though seldom raised to legal or tolerated status in society, drugs have a broad-based following in many modern societies. The extent of illegal drug markets reflects the high level of individual satisfaction that consumers derive from drug use, at least in the short run; yet, there is no question that long term consequences of drug use creates severe hardship and loss for users and those associated with them. One might argue that since most societies still prohibit and penalize drug use and drug dealing (and indeed view drug dealing as a most heinous crime), that such societies have therefore collectively decided the social costs indeed exceed the benefits that individuals who would otherwise choose to imbibe in legal drug use could generate. However, one would not have to go back too far to find a situation where commercial gambling shared much the same illegal and condemnatory status, in the belief that the social damage it could do in terms of destroyed financial status, compromising indebtedness, ownership disruption and family suffering significantly exceeded the pleasures that would be derived from those who would choose to participate in legal gambling activities.

This analysis therefore tries to examine some of the recent trends concerning gambling in America in recent years from a number of perspectives, and tries to examine them in the light of their implications of a changing social consciousness and changing social conscience toward gambling. It looks closely at a number of major trends in the legal commercial gaming industries in America and tries to interpret them in a manner that would be useful for those concerned about appropriate public policy.

The decade of the 1980s has brought with it a number of significant changes to the commercial gambling industries in the United States. Some of these changes have been continuations of previous trends, such as the relatively steady growth of the casino industries in Nevada and Atlantic City, the decline of pari-mutuel horse racing and betting in many parts of the U.S., and the spread of lotteries into new states throughout the country. Other changes have been more subtle, though probably no less important, and it is on these that this analysis concentrates. Among the most important of these changes are:

- a the increasing legitimacy of commercial gambling industries in both private sector and public sector operations throughout the United States.
- b the broadening participation of players in commercial gambling, especially in lotteries and destination resort casino operations;
- c the decline of the relative importance of table game revenues in comparison to slot machine revenues in casinos;
- d the growth of popularity of long-odds wagers with extremely large jackpot pay-out in lotteries, exotic horse race betting, and casino gaming;
- e the expansion of hybrids of legal gaming in various jurisdictions under previously non-existent structures, such as Indian gaming, low limit blackjack, and charitable casinos;
- f the evolution of case law dealing with the pathological gambler, and pathological gambling as a defense for criminal actions.

### **3 CASINO LEGITIMIZATION**

Since the mid-1960's, the casino gaming industry in the United States, along with regulatory and governmental bodies that oversee it, have pursued directions which have generally improved the image of commercial gaming to outside observers, and increased the degree of sophistication of casino gaming and related operations. With the advent of legal casino gaming in Atlantic City in 1978, and the spread of destination resort casinos to a number of countries throughout the world over the last two decades, more sophisticated and rational management and marketing processes in casinos and destination towns with casinos have evolved, and have enhanced both the image and efficiency of casinos and other gaming operations world-wide. To fully appreciate this, the low esteem in which casino gaming and the State of Nevada were held in the early 1960s and before must be noted.

As early as the Kefauver Congressional hearings on organized crime in 1951, the casino industry in Nevada was cast, with good reason, as a haven for mobsters, shylocks, and ne'er-do-wells from throughout the country and from abroad. Organized crime figures were closely identified with certain casino operations, and major incidents of profit skimming by gaming operators, gangland violence, and corruption of public officials

by gaming industry interests were all perceived as part of the unsavoury package Nevada had bought when it allowed casinos into its legal commerce. The State's efforts at regulation, when they were present, were seen as feeble and ineffective, or corrupted by the same evils that permeated the industry.

In response to the belief that the casino industry in Nevada was extensively corrupt, and that state officials were either unwilling or unable to cleanse the industry of undesirables, Federal authorities tried to intervene in gaming regulation in Nevada a number of times in the 1950s and 1960s. They argued this was necessary to protect the public's interest by either closing down the gaming industry, or by trying to demonstrate that in fact casino operations were no more than fronts for organized crime which gave them a basis for expanding into other socially undesirable activities, such as drugs, prostitution, political corruption and pornography.

By the early 1960s, many Nevada officials had become convinced that stronger casino regulation was necessary for a number of reasons, not the least of which was to protect the autonomy of the State from unwanted intervention by Federal authorities. The State Gaming Control Board and Gaming Commission were established to address such concerns, and Nevada increasingly realized that its economic interests were closely intertwined with the improving image of casino gaming.

It was not until the late 1960s that general perceptions toward Nevada's gaming industry began to change appreciably. This was partly due to the entrance of Howard Hughes into the Nevada scene as a major purchaser of Las Vegas casinos and casino-hotel complexes. For all his eccentricities, Mr Hughes was acknowledged to be an astute businessman whose reputation was, by Nevada standards, quite clean. Between 1967 and 1970, he acquired a number of casino properties in Las Vegas and Reno, and in so doing bought out a number of owners with unsavoury reputations.

In 1969, the Nevada legislature passed the Corporate Gaming Act, which allowed for the first time publicly traded corporations to own and operate Nevada casinos. In the next few years, the entrance of major corporations into Nevada gaming, such as Hilton, MGM Corporation, Ramada, Hyatt and Holiday Inns, considerably improved the image of casinos in the State. They also introduced relatively sophisticated management, accounting and marketing techniques as a new generation of professional managers entered the casino industry with Business School training and extensive experience in other industries.

From 1978 to the 1980s, as Atlantic City became established as the second largest concentration of casino gaming in the world, the degree of scientific management and the further corporatization of the industry continued, but at a much greater pace than before. New Jersey established a much more extensive regulatory structure than Nevada had ever possessed, and in spite of some early licensing controversies, the Atlantic City regulatory structure was put forth as being far more effective than Nevada's in fulfilling the mandate of keeping the gaming industry clean of organized crime and other undesirable traits and influences.

The overall effect of these trends has been to change the public perception of the casino business from one which is socially threatening because of the people involved in running it, to one which provides entertainment to a wide variety of customers and effectively is not a threat to anyone but the player who cannot control his losses. It is because of this changing perception of casino gambling, along with governmental desires for new revenue sources, that casinos and other forms of commercial gaming have become far more prevalent in the American scene in the 1980s.

#### **4 EXPANDING CUSTOMER MARKETS**

Though the image of commercial gambling in the United States has been most influenced by the reputation of casino gambling, it has not seen the greatest increase in participation by punters or expansion into new jurisdictions. On both counts, that honour would have to go to lotteries. Over the last 20 years, 24 states in the United States have established lotteries, all of them run through government agencies or lottery commissions. The primary justification for legalization has been that the individual states needed to raise revenues that could be earmarked for particular pressing needs, such as education or support for the elderly. Furthermore, the general public have often demonstrated a distinct aversion to tax increases, and state revenues generated by lotteries could be considered a voluntary tax and, as such, easier to sell to the voters.

Lotteries have probably introduced more individuals to gambling in America than any other form of commercial or social gambling. Aggregate lottery sales in the United States in 1986 exceeded \$10 billion, and

more than 60% of the U.S. population live in jurisdictions where lotteries are legal.

When the modern lotteries first began appearing in 1960s and early 1970s, they were often viewed as safe forms of 'soft' gambling, especially when compared to casinos. This was because they were passive and therefore uninteresting to most potential problem gamblers. Furthermore, they were to be operated by the state rather than by private enterprise, thus making infiltration by organized crime or other undesirable elements less likely, and also keeping the issue of policies related to the social good close to the politically appointed lottery commissions.

In practice, however, the push for greater revenues over the years has encouraged state operated lotteries to pick up many of the characteristics that would have been expected of private sector commercial gambling. For example, as popularity in existing lottery games waned, new forms of games would be introduced, such as instant lotteries, daily pick-three and pick-four numbers games, and lotto. The maximum prize in many games was pushed upward and the odds simultaneously shortened, and payout schedules were experimented with to find those which had broadest player appeal, and could therefore generate greatest sales. Heavy media marketing was undertaken in many jurisdictions, and many advertising campaigns played off the seductive themes such as: 'Someone has to win the lottery; why shouldn't it be you?' (This was in spite of the fact that the odds against winning a top prize which would pay off in excess of \$3 million would often be less than one chance in 10 million.) Special promotions were staged to bring together previous winners, mainly to emphasize the point that the typical player could realistically expect to win because all previous winners were just typical players. In some states, experiments with video lottery terminals were undertaken; these ranged from machines which would dispense instant lottery scratch-out tickets to others that would offer the player inter-active video games that would result in winning or losing.

Thus, modern lotteries have evolved into a form of gambling which is far less passive than the original lotteries in the 1960s and early 1970s. Furthermore, if past trends continue, it is likely that lotteries could continue to evolve in the direction of electronic casinos. It is likely that the future evolution of the lottery in America will eventually depend on the spread of video lottery devices and whether or not they are legally classified as lotteries, which are legal, or as slot machines, which by statute are not.

Though they are still geographically constrained to Nevada and Atlantic City, casinos in America have also been broadening their customer markets. Realizing quite some time ago that the desire to gamble is not the only inducement to attract customers, American casinos also provided amenities usually associated with first class destination resorts, such as luxurious accommodations, haute cuisine, high quality entertainment, extensive convention and conference facilities, and other forms of indoor and outdoor recreation. The casino industry in America, and far that matter in many parts of the world, has evolved into a destination resort based industry. Thus, even though the greatest portion of revenues for American casino corporations still comes from the casino floor, increasing emphasis is being placed on the other activities. As a result, casino-hotel complexes are trying to attract new groups who previously had little interest in casino gaming, but who might be enticed by the idea of a destination resort with a wide variety of activities that can be pursued, including gambling.

## **5 THE GROWING IMPORTANCE OF SLOT MACHINES**

One of the most pronounced changes in the American casino industry for the last decade has been the rapid growth of gross revenues generated by mechanical and electronic gaming devices in casinos, and the relative stagnation of table game revenues. In the mid-1970s it was not uncommon for table games to generate 60% of gaming revenues in a typical casino, with machines contributing 40%; today the percentages are more or less reversed. Furthermore, in some 'grind' or downmarket operations, gaming device revenues can generate upwards of 80% of a casino's total win.

The dynamics of the gaming device market is a result of a number of factors. New technologies in electronic and electro-mechanical machines have allowed manufacturers to alter odds and pay-out structures to offer stupendous jackpots of millions of dollars. Linking of multiple machines to single jackpots, and even the linking of machines in different casinos through a centralized computer system, have done the same thing. Multiple coin machines and higher denomination machines with lower hold percentages have increased the general attractiveness of the chances offered. High quality graphics resolution has made video gaming devices the games of choice for many casino visitors. Popular new games, such as video blackjack, video poker, and

simulated horse racing and dog racing, have integrated greater elements of player participation, interaction and excitement into many gaming devices. Furthermore, competition among casinos for market share has insured that technological and marketing improvements in gaming devices are quickly introduced to the public. As a result of these changes, the old view that slot machines were only for women and other unsophisticated players has changed and continues to change. In the modern American casino, the serious slot machine player has become a major customer type, worthy of active and aggressive marketing efforts.

In contrast, table games in U.S. casinos have not fared as well. One reason for this is the unchanging, and somewhat ritualistic nature of most casino table games. In light of all the dynamic and electric evolution of gaming devices, the immutability of table games such as craps, blackjack and roulette is probably seen as a drawback by many players, especially new players. Furthermore, table games lack the ability to offer the phenomenally long odds or large pay-outs that characterize many gaming devices. As a result of the relative stagnation of table game revenues, accompanied with growing labour costs, many casinos have altered their mix of table games and devices, reducing the availability and thus the visibility of table games in the modern casino.

## **6 GIANT JACKPOTS**

The popularity of extremely large jackpots has not been constrained to gaming devices played in casinos. As mentioned above, it is also to be found among lottery games and exotic wagers offered at horse race tracks throughout the United States. One possible explanation for the emergence of this phenomenon is the general broadening of the market of participants in gambling games. New gamblers, who may be less committed to the efforts required in certain types of gambling than the more established clientele, the old-timers, are too impatient to learn the proper ways of playing some table games, or of learning the science of handicapping and predicting winning horses, dogs, or jai-tai players. Furthermore, they tend to look at the entire activity in a somewhat less serious vein than the old-timers.

It has been acknowledged many times that gamblers often concentrate on the size of the winning prize, and either disregard or just mis-interpret how unlikely the chances of winning actually are. Large jackpot prizes allow the player to fantasize just how their lives could be changed with the big win, and thus have a lot of appeal for the new and somewhat more casual gambler. The emergence of women as more important customers for casinos, racetracks and lotteries also contributes to the growing popularity of high pay-off bets and wagers.

## **7 THE EMERGENCE OF COMMERCIAL GAMBLING HYBRIDS**

Though most of the discussion on gambling policy in recent years has centred on questions of expansion and regulation of traditional commercial gambling, such as casinos, horse race wagering, and lotteries, other important changes are occurring on the periphery that are perhaps even more important in the long on. For example, poker parlours have long operated legally on a local option basis in California; typically, such operations have been fairly small, spartan, and appealing only for the regular. In recent years, a number of large poker casinos have been introduced in locations near Los Angeles that carry the ambience one would expect to find in Las Vegas. Furthermore, these operations have pushed to legalize new games, such as Chinese games, and have begun applying management and marketing techniques previously limited to the casino gaming industry.

Other hybrids of importance in this context are charitable casinos, as is found in the Canadian provinces of Alberta and British Columbia, and legal low-stakes blackjack, to be found in states such as Oregon, North Dakota, and Washington. Such games, which certainly parallel the games to be found in Nevada and Atlantic City casinos, are extremely popular where they are located, and are creating legal gambling opportunities where none existed before. In a similar vein 'Las Vegas nights', which provide low stakes casino table games as fund-misers for deserving charities on an irregular basis, are becoming increasingly popular in many parts of the country.

Finally, because of recent court findings concerning the ambiguity of state laws and jurisdiction on Indian reservations in the United States, commercial gambling operations on Indian lands have become both a major growth activity and source of considerable controversy among existing gaming industry officials and

regulators. A simplistic interpretation of the current legal status of Indian gambling is that if a state allows some form of gambling to be operated in the state, even if it is severely restricted and regulated, the same gambling form can be operated on Indian lands which by law are under Federal and not state jurisdiction, and the state has no basis to regulate such gambling. Though the most common games offered are Bingo and variants of Bingo, some ingenious entrepreneurs have been pushing the limits of current legal interpretations to create veritable casinos under the guise of Indian gambling.

The main implication of these hybrids is that gambling as a recreational activity is going to be exposed more and more to individual Americans even if there is not a dramatic increase in the presence of legal casino gambling. How this will affect existing commercial gaming industries at this time is conjectural. It is possible the increased exposure to gambling will create new customers who will find their ways into the casinos and race tracks that already exist. It is also possible that these new forms of gambling will satisfy the consumer demand for recreational gambling and undermine growth potential in places like Nevada and Atlantic City, which still hold geographic monopolies on wide-open casino gambling in the United States.

## **8 COMPULSIVE GAMBLING AND THE LAW**

It seems quite reasonable that such a rapid expansion in legal commercial gambling, which is being met with greater social and economic legitimacy, would trigger a higher incidence of problem gambling among members of society. Historically, society has viewed compulsive gambling first as an immoral activity, then as a result of a personality defect, and most recently as a medical illness. As these perceptions have changed, so has the legal system's interpretation of the culpability of the compulsive gambler. In the first case, he was to be treated as a common criminal; in the second case, he would be a person who, though guilty of crimes committed, was worthy of rehabilitation through treatment and professional counselling. However, gambling as a medical illness carries with it the implication that the ill person cannot be held accountable for the disease, and that the economic losses resulting from compulsive gambling may be the responsibility of the provider of gambling services rather than the gambler himself. If the gaming operator should be able to identify a compulsive gambler and still lets him lose large amounts of money (especially if it is someone else's money that was illegally taken), then the operator could be held fully liable by the damaged party and the courts could conceivably support this interpretation.

How well the problem gambler will fare under such a legal interpretation is more ambiguous. Courts have so far been willing to entertain the concept of compulsive gambling as a 'diminished capacity' defence if the crime committed was directly linked to gambling. However, they have been reluctant to extend the arguments to crimes committed elsewhere where the perpetrator claimed it was his gambling compulsion that motivated him to steal. There is still not much of a sense in the judiciary of distinguishing between the gambler who steals from the thief who gambles. Furthermore, there is broad scepticism that if precedent is established that compulsive gambling is successfully applied as a defence for criminal actions in non-gambling related crimes, it could be easily abused and seriously undermine the relationship between crime and punishment.

Finally, a successful defence of compulsive gambling as a disease is not automatically a reprieve for the individual. In a number of cases where the person was found not guilty by reason of a gambling illness, he was still declared a danger to society and incarcerated in mental hospitals.

## **9 CONCLUSIONS**

Because of its popularity with the general public, other positive effects such as job formation, income growth, regional economic stimulation and tax revenue generation, it is fairly easy to measure the economic benefits associated with the expansion of commercial gambling. However, it is far more difficult to ascertain the social costs that would occur in the same process. The following discussion covers only the area of compulsive gambling, but similar discussions could address other issues that might reflect possible social costs. First, however, it is important to note the areas in which our lack of information is still a major detriment to the formation of reasoned public policies that best serve the interests of society at large. In my opinion, the most important of these factors is the link between the availability of gambling, participation in gambling activities, and the generation of compulsive gamblers. After many years of speculation, and too many claims and counter-claims by experts in different facets of gambling, there still is a near-total void in understanding of the incidence of compulsive gambling in the population at large. Also, in spite of the efforts

of organizations such as Gamblers' Anonymous, and research by psychologists, psychiatrists and social workers involved with pathological gambling, it is still unclear how effective 'cures' for compulsive gambling problems are. Without good information about the extent of gambling related problems, and the ability of society to mitigate them through various types of treatment or regulatory policy, it is very difficult to come up with a 'correct' direction for public policy toward gambling.

One of the ironies of the United Kingdom's regulatory structure over casino gambling is the fact that, in the interest of protecting potential gamblers from their own weaknesses, casinos were significantly constrained in their marketing efforts on the basis that only unstimulated demand should be catered for. Because of this, they have not had the ability to appeal to a broader market of potential customers, as American casinos have done. Thus, the people who have joined casino clubs in the U.K., and have signed a document stating the desire to gamble in a casino, are on balance, far more committed to gambling than their American counterparts because there is really nothing else at a U.K. casino that could interest them. And once the gambler has walked through the casino doors, there is nothing left to protect him from his own gambling compulsions, if he is subject to such things, except the regulatory prohibitions against serving alcohol at the gaming tables, the prohibition against the casino granting credit, and the good will of the casino itself to protect the individual from self-ruination.

Among the realities of casinos in the U.K. are the facts that regulars', those who play in the casinos perhaps three or more days per week, make up the majority of customers in many casinos. Furthermore, many of these regulars are losing money at a rate that is not sustainable given their incomes and cash positions; thus, their survivability in the casino environment is limited. Whether or not such gamblers can be classified as compulsive is difficult. Whether or not they are ultimately financially ruined by the casinos is debatable, but this certainly cannot be dismissed. It is unknown whether any changes in rules or regulations imposed on casinos in light of potential social damage from compulsive gambling would be effective. Whether it is anyone's responsibility to even be concerned about this problem is also a fair question.

It has been said more than once by American casino operators that it is important to be able to identify the problem gambler in the casino and cure his problem, because such individuals contribute less than 10% of casino revenues and yet create more than 90% of the modern-day image problems for the American casino industry. If these statistics are correct (and there is no reason to believe they are any better than other compulsive gambling statistics), then the enlightened self-interest of the casino industry would encourage it to resolve the problem itself. On the other hand, if the 'regular' gambler is the backbone of the casino industry, and if among the regular gamblers are a high proportion of compulsive gamblers, then the gaming industry could not afford to cure him of his problem without sacrificing significant amounts of revenue.

To note the parallel with the alcohol industry once again, everyone acknowledges that alcoholism and alcohol abuse generate substantial costs for individuals, their families, and society at large. Yet the policy options are limited. Minor refinements in the law, such as stiffer drunken-driving penalties, seem to have limited effectiveness, but there doesn't seem to be a menu of policy alternatives that will acknowledge the realities of alcohol use in society as a matter of free choice of many responsible individuals, and at the same time mitigate the problems related to abuse.

With gambling, we don't even know how extensive problem gambling is, with estimates ranging from almost negligible to quite substantial. Professionals who work in gambling, whether from the casino industry, from the treatment professions, or from regulatory bodies or law enforcement, survive on anecdotal information because no one has been able to see the big picture. And it is even possible the big picture, as related to compulsive gambling, will remain always invisible. It is conceivable that compulsive gambling can only be classified retrospectively. Every gambler who is still actively chasing the big win might believe he is making rational calculated decisions, and thus it is difficult to claim to oneself that there is a problem there. But as long as that is the case, sorting out normal gamblers from problem gamblers is virtually impossible. And measuring the social costs that gambling imposes on society at large is even more nebulous.

## PATHOLOGICAL GAMBLING AND ITS TREATMENT

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*This article first appeared in the British Medical Journal, volume 296, pp729-80. It is reprinted with permission.*

Compulsive or pathological gambling is one of the addictive behaviour or dependency disorders.<sup>1</sup> The American Psychiatric Association requires four of the following to be satisfied for a diagnosis of "maladaptive gambling behaviour": preoccupation with gambling; often gambling larger amounts of money or over a longer period than intended; needing to increase the size or frequency of bets to achieve desired excitement; restlessness or irritability if unable to gamble; "chasing" losses by gambling again after losing; repeated efforts to cut down or stop gambling; often gambling when expected to fulfil social or occupational obligations; giving up some important social, occupational, or recreational activity in order to gamble; and continuing to gamble despite inability to pay mounting debts or despite other social, occupational, or legal problems that the individual knows to be exacerbated by gambling.

These criteria show that the problem is similar to other forms of addiction or dependence. Regular gamblers may show heightened psychophysiological arousal and altered states of attention or consciousness when gambling. Mood, behaviour, and somatic disturbances on ceasing to gamble have been reported and are akin to withdrawal symptoms experienced by those dependent on alcohol.<sup>2</sup> The condition is often associated with family discord and disruption and with feelings of despair by the person who is gambling, his or her family, or both. Various terms have been used to describe the problem, but "compulsive gambling" has the advantage of having been commonly used for some time.

The prevalence of compulsive gambling is not known. Those cases referred to medical or social agencies are thought to represent merely the tip of an iceberg, and no satisfactory epidemiological work has been carried out. Indirect estimates for British adults range from 40 in every 1000 people gambling more than once a week in ways that allow continuous betting (that is, excluding gambling such as football pools<sup>3</sup>) to two in every 1000 based simply on the number of very regular gamblers in betting offices in the Birmingham area.<sup>4</sup> The true figure probably lies somewhere between these extremes. Offcourse betting in betting offices and gambling on gaming machines in amusement arcades, pubs, and elsewhere are the two forms of gambling that most identified compulsive gamblers prefer. Almost all are men, apart from some bingo gamblers. Until recently most known cases have been adults, but some parents, teachers, and

probation officers have become concerned by an apparently large increase in the numbers of juveniles displaying signs of compulsive gambling on gaming machines available in amusement arcades and elsewhere; the control of these machines is being investigated by the Home Secretary.

Recognising compulsive gambling is as difficult as recognising problems related to alcohol. The problem is largely concealed, and patients are likely to present to the doctor with various social, psychological, and sometimes physical troubles. General clues that gambling may be part of a patient's problem include signs of family disharmony or difficulties (possibly a high consultation rate for several members of the same family); psychological symptoms including depression and anxiety; financial and legal difficulties; educational or occupational failure or difficulty; and higher than average alcohol consumption. Sometimes specific clues that gambling is important will come directly from the person concerned but it is more likely that a relative will raise the problem first. More often the clues will be less straightforward—a passing reference, a remark at the end of the consultation—and an opportunity needs to be found to test out the hypothesis by direct questioning.

The general principles for treating compulsive gambling are the same as those for treating alcohol dependence or abuse<sup>5</sup>: good assessment, individual and family counselling, and consultation or referral if necessary. As with alcohol problems, specialist treatments such as aversion therapy or psychotherapy do not confer any advantage in most cases. The emphasis is now on a less specialised approach that is more within the realm of general medical practice: recognising the problem and addressing it openly and positively within an established and trusted relationship may be more valuable than the search for specialist treatment. Admittedly research evidence to support this view is lacking for gambling, which has been sadly neglected by researchers and practitioners.

Good assessment should include not only a detailed history of gambling behaviour and its consequences but also an assessment of the patient's thinking about his (or sometimes her) gambling.<sup>5</sup> A useful framework for this part of the assessment is the "stages of change" model that is proving so helpful with other addiction problems. This model proposes four stages: precontemplation (no recognition of the need for change in behaviour), contemplation (some recognition but no action), action, and maintenance.<sup>6</sup> The task of the

practitioner is to help the patient to move to the next stage, which has the distinct advantage of setting the patient and practitioner a modest but achievable task.

The need for a non-judgmental and positive attitude to counselling compulsive gamblers is basic. So too is the willingness to include family members whenever possible and, indeed, to be prepared to counsel individual family members even though the "identified problem gambler" is not accessible for treatment. Parents, partners, and children are all likely to need counselling in their own right; this kind of "unilateral" family work has achieved promising results in alcohol dependence. There are branches of the self help organisation Gamblers Anonymous in most areas of Britain, as well as Gam-Anon groups for relatives. This may be the most effective help for those excessive gamblers who can identify with this approach, but this does not apply to all and Gamblers Anonymous may be particularly unappealing to young gamblers. Finally, those who embark on treating a gambling problem and find themselves out of their depth should consider looking for help in the local mental health or clinical psychology services.

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## UPDATE

Walker, G. (1985)

'The brief therapy of a compulsive gambler', *Journal of Family Therapy*, 7,1-8.

'The conduct of [the] interview was determined by the prime tenet of brief therapy; that a problem's existence is maintained by precisely those measures intended to solve it. Accordingly a behavioural description of the problem was elicited which was interactional in nature. Enquiry was then shifted to a consideration of what had been tried to solve the problem. The pattern of interaction revealed was that of symmetrical escalation. Both Mr and Mrs D. had, in turn, intensified their approach in response to each set-back encountered as they sought to change the others mind. In their attempts to solve their problem they employed essentially the same approach - that of trying to get the other to see sense by force of argument. Both of them were responding by becoming more confirmed in their own beliefs....

In this case all therapeutic effort was focused on getting Mrs D. to alter radically the nature of her efforts to influence her husband's behaviour. In taking up the position 'you cannot change' all of her previous liabilities became assets. As all his wife's resistance to his behaviour was removed, Mr D. was left facing the unobscured consequences of his actions. Thus a situation was created whereby Mr D. could choose to stop gambling for his wife's sake whilst retaining his own beliefs; since altruism requires only the reordering of priorities he was able to set his wife's happiness above the rights or wrongs of his own conduct. Her change of tactics also allowed Mr D. to maintain his resistance to her understanding and thereby to secure her happiness by ceasing to gamble. Her sustained 'disbelief' allowed his continued ownership of the change he had wrought, against the odds. All of this was possible only because of the regard he bore his wife. In short, stopping the efforts to change his mind allowed him to make the desired change of heart, thereby fulfilling Mrs D.'s criteria for therapy, that he should choose to mend his ways.'

Saunders, D.M. and Turner, D.E. (1987)

'Gambling and leisure: the case of racing', *Leisure Studies*, 6, 281-99.

While betting on races of one kind or another has been extensively discussed by theorists who are interested in aspects of compulsive gambling and social policy, little attention has been paid to leisure perspectives in the study of betting populations. The present paper addresses the enjoyable and commonplace pastime of gambling as a leisurely pursuit, and focuses on the off-track betting office for a more detailed analysis of the variety of customer and staff groupings, career patterns, and life-styles. Such a typology is based on observations of five gambling environments within South Wales, and includes the identification of gambling bars as well as the more frequently recognized betting offices. The authors conclude that recent innovations in both technology and legislation have had, and will continue to have, profound effects on customers and the traditional small-time bookseller.

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## GAMBLING IN GAMES: AN INTERDISCIPLINARY WORKSHOP

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UK

### *Abstract*

The subject of gambling involves risk taking within game situations - usually, but not necessarily, involving some degree of financial investment. The purpose of our gambling workshop is to explore gaming perspectives as applied to a number of popular activities which involve betting with money. These include: roulette, poker, racing, lotteries, blackjack and gaming machines - to name but a few. Conventional discipline interests in these areas will be represented, especially Sociological, Psychological, Economic and Legal interpretations of gambling behaviour, betting strategies, game structures, social groups, and legislation surrounding gambling cultures and gambling institutions.

Some of the largest and most powerful commercial interests in game activities include institutions and organisations which are not usually associated with ISAGA - for example, casinos, amusement arcades, racetracks and betting offices. Previous ISAGA workshops have been pre-occupied with classroom contexts for games and simulations. We hope that this workshop will provide an interesting and new focus of interest for delegates, who may nonetheless see much relevance to teaching and training techniques which involve elements of competition and risk taking.

The workshop is to be divided into three distinct parts. First a plenary address which will place gambling within the general context of gaming and simulation. The second stage asks participants to play a series of different activities which aim to illustrate and explore various aspects of gambling. The third component involves presentations from the workshop organisers, who will discuss and build upon those gambling activities that were introduced in stage two. Discussions will include the following themes (it is emphasised that this list is not exhaustive):

- 1 gambling cultures
- 2 laws, roles and norms in gambling
- 3 the development of skill/chance strategies and systems
- 4 'cheating' and rule breaking
- 5 distinctions between amateur, experienced and professional players
- 6 experiences of winning and losing in game scenarios
- 7 issues of addiction and compulsion in gambling and gaming
- 8 new technology and communication systems
- 9 gambling, gaming and state/government policies

Whilst it is hoped that participants will stay for the entire workshop, attendance for all three parts is by no means compulsory.

For further information, contact Danny Saunders (address above).