PROBLEM GAMBLING PREVENTION
MASSACHUSETTS CENTER OF EXCELLENCE

Intersections

Substance Misuse and Problem Gambling Prevention

Introduction

Gambling disorders are highly comorbid with other mental health and substance use disorders. Understanding the overlap between these two behavioral health problems offers an opportunity for prevention specialists to share data, create effective strategies, stretch limited resources, develop new contacts and build relationships, and avoid duplication of efforts.

Intersections

Its important to understand the intersection between problem gambling and substance misuse. Including how often the two co-occur. For example:

- **Ninety-four percent** of people with gambling problems will have at least one co-occurring mental health or addiction disorder (including alcohol and nicotine dependence, depression, anxiety, and obsessive-compulsive disorder.
- Problem gambling rates among those who misuse substances are **4 to 10 times** more likely than that of the general population.
- In a survey of youth and addictive behaviors, gambling occurs at **higher rates** than alcohol, tobacco, and other drug use.
- In Massachusetts, students who reported any lifetime alcohol use had **133% and 109%** increased odds of gambling in the last 12 months compared to never users. (MYRBS & MYHS 2023)

Similarities and Differences

These two behavioral issues have many similarities and—perhaps more importantly—key differences.

Similarities

Definitions for both substance use disorders and problem gambling include use and behavior that result in a negative impact on a person's life. Individuals with gambling problems or substance abuse disorders both report difficulties reducing, limiting, or abstaining from their behaviors.

Individuals in both groups often deny or minimize the extent of their addictive behaviors and report patterns of escalation in their addiction.

Key Differences

Gambling is often a hidden addiction.

One can't physically overdose on gambling or be tested for it.

Fewer resources are available for the prevention and treatment of gambling problems.

Concepts and Definitions

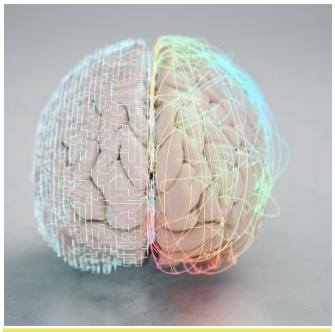
(Definitions are listed in the order they appear in this document)

Co-occurrence	Term used to describe the presence of two or more events happening at the same time, but not necessarily linked by a cause-and-effect relationship. In the context of addiction, it can refer to the simultaneous incidence of substance misuse and another distinct behavior, event, or condition. (DSM-5-TR)
Risk Factor	Characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes. (SAMHSA)
Protective Factor	Characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events. (SAMHSA)
Resilience	Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands. (APA Dictionary of Psychology)
Adaptive Coping	Adaptive coping includes cognitive and behavioral efforts to manage stressful conditions or associated emotional distress. Like social resources, adaptive coping operates as a protective factor that decreases the adverse effects of life stressors when they occur and that can also reduce the likelihood of stressor occurrence. (Science Direct)
Emotional Intelligence	Emotional Intelligence (EI) is the ability to manage both your own emotions and understand the emotions of people around you. There are five key elements to EI: self-awareness, self-regulation, motivation, empathy, and social skills. (Mental Health America)

Brain Development: Problem Gambling and Substance Misuse

"Research shows that children introduced to "harmless betting" by age 12 are four times more likely to engage in problem gambling later. A teen's brain, with an underdeveloped logic center, isn't wired yet to weigh risk and make healthy choices. So that "win" on an online game today can lead to the negative side effects of real-life gambling tomorrow."

Teen Gambling. It's a Risk
Massachusetts Office of Problem Gambling Services (OPGS)
https://www.mass.gov/info-details/teens-gambling-its-a-risk



A Word About Risk and Protective Factors

Risk factors tend to be positively correlated with one another and negatively **correlated** to protective factors. In other words, people with some risk factors have a greater chance of experiencing even more risk factors, and they are less likely to have protective factors. Risk and protective factors also tend to have a **cumulative effect** on the development—or reduced development—of behavioral health issues. People with multiple risk factors have a greater likelihood of developing a condition that impacts their physical or mental health; people with multiple protective factors are at a reduced risk. Though preventive interventions are often designed to produce a single outcome, both risk and protective factors can be associated with **multiple outcomes**.

Risk and Protective Factors (SAMHSA)

Shared Risk and Protective Factors

How can prevention professionals address both issues? We can begin by understanding the shared risk factors underlying both problems as well as the protective factors that buffer the impact of risk factors. Risk factors increase the likelihood of substance misuse or problem gambling. Protective factors mitigate risk by reducing the impact or by encouraging healthy strategies to cope or respond. The following are risk and protective factors that can influence both problem gambling and substance misuse.

Risk Factors	Problem Gambling	Substance Misuse	Protective Factors
Poor impulse control	■	◆	Adaptive coping strategies
High sensation seeking	■	◆	Emotional intelligence
Early use or exposure	■	◆	Resilience
Depression	■	◆	Interpersonal skills
Childhood trauma	■	◆	Social competence
Peer gambling / use	■	◆	Social bonding
Family history of addiction	■	◆	Parental bonding
Lack of parental objections knowledge	■	◆	Supervision
Familial attitudes	■	◆	School connectedness
Accessibility	■	◆	Coordination of resources
Lack of community awareness	■	◆	Community support
Social acceptance	■	◆	Opportunities for prosocial involvement in the community
Media, such as alcohol / lottery ads	■	◆	Recognition for prosocial involvement

Collaboration Strategies

Organizations can collaborate when working through the steps of the Strategic Prevention Framework (assessment, capacity, planning, implementation, and evaluation). The Substance Abuse and Mental Health Services Administration (SAMHSA) guide presents a way to understand and address behavioral health problems at the community level (SAMHSA, 2019). You can also find more collaboration tools in the resource section of the Massachusetts Center of Excellence on Problem Gambling Prevention – Filtering for Coalition/Partnership Building, Health Equity - https://mcoepgp.org/resources/?_sft_resource_topic=coalition-partnership-building.

Resources

The Massachusetts Youth Risk Behavior Survey (MYRBS) and Massachusetts Youth Health Survey (MYHS) https://www.mass.gov/lists/massachusetts-youth-health-survey-myhs

The 5 Stages of Community Engagement for Public Health from Pubic Health Communications Collaborative https://mcoepgp.org/resource/the-5-stages-of-community-engagement-for-public-health/

Communications to Promote Interest and Participation in Community Work from the Center for Community Health and Development at the University of Kansas https://mcoepgp.org/resource/communications-to-promote-interest-and-participation-in-community-work/

Advocating for Community Change Toolkit from the Center for Community Health and Development at the University of Kansas https://mcoepgp.org/resource/advocating-for-community-change-toolkit/

Risk and Protective Factors for Substance Misuse that Present in Childhood, SAMHSA (2024) https://www.samhsa.gov/sites/default/files/sptac-risk-protective-factors-substance-misuse-childhood.pdf

Safe States, Connections lab, Shared Risk and Protective Factors Model. Exploring Elements of Shared Risk and Protective Factors. https://www.safestates.org/page/ConnectionsLab

Digital and Social Assets, Let's Get Real about Problem Gambling Toolkit, from Mass Office of Problem Gambling Services https://www.mass.gov/info-details/lets-get-real-about-gambling-toolkit

LET'S GET REAL ABOUT GAMBLING

References

1. Price, A., Hilbrecht, M. & Billi, R. Charting a path towards a public health approach for gambling harm prevention. J Public Health (Berl.) 29, 37–53 (2021). https://doi.org/10.1007/s10389-020-01437-2.
2. Spunt B., Dupont I., Lesieur H., Liberty H. J., Hunt D. (1998). Pathological gambling and substance misuse: a review of the literature. Substance Use & Misuse 33(13), 2535–2560. Available at https://pubmed.ncbi.nlm.nih.gov/24234161/
3. Derevensky L.J. Youth Gambling. Nation Council on Problem Gambling Conference. July 2018. Available at http://youthgambling.mcgill.ca/Gambling2/en/PDF/NCPG.2018.6.28.pdf
4. UCLA Gambling Studies, Similarities and Differences: Gambling and Substance Use Disorders https://uclagamblingprogram.org/wp-content/uploads/2023/04/UGSP-Similarities-and-Differences-GD-and-SUDs.pdf
5. Abuse, S., & Administration, M. H. S. (2016). Impact of the DSM-IV to DSM-5 changes on the national survey on drug use and health. https://www.ncbi.nlm.nih.gov/books/NBK519704/table/ch3.t39/
6. Wanner B., Vitaro F., Carbonneau R., Tremblay R. E. (2009). Cross-lagged links among gambling, substance use, and delinquency from midadolescence to young adulthood: additive and moderating effects of common risk factors. Psychology of Addictive Behaviors, 23(1):91–104. doi: 10.1037/a0013182. https://psycnet.apa.org/record/2009-03284-021