COMPULSIVE GAMBLING

New casinos may bring major problems to Southeast Michigan

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Compulsive gambling is already a significant problem in Michigan and the opening of three new casines in downtown Detroit will undoubtedly lead more residents of southeast Michigan to addiction. But how many more victims will be claimed by problem gambling and how well prepared the state is to help them are questions with no easy answers.

Few are willing to give an estimate of the number of players who will become compulsive. Even Michigan's Department of Community Health, in charge of setting up treatment and prevention programs for the state, has yet to work up projections. But there is agreement among experts that the numbers are likely to be large.

experts that the national analysis of Consider that the National Gambling Impact Study Commission this spring concluded that the prevalence of compulsive gambling in the general population doubles within a 50-mile radius of a casi-

"Currently there are enough problem gamblers (in Michigan) to populate a city the size of Filint and enough pathological gamblers to populate an additional city the size of Kalamazoo," a study conducted by The Evaluation Center of Western Michigan University for the state lottery bureau concluded back in 1997. The study found that 3 percent of the state's popula-





tion had an ongoing gambling affliction at that time.

Comparing these numbers to a current estimated population of 4.73 million in southeast. Michigan's seven-county region, the conclusion is that casinos could lead to an additional 140,000 cases of compulsive gambling here. Although large, such an estimate clicited general agreement from those familiar with problem gambling. When the Michigan Council on Problem Gambling; Carla Spight, head of gambling the Michigan Council on Problem Gambling; Carla Spight, head of gambling the Michigan Council on Problem Gambling; Carla Spight, head of gambling the Michigan Council on Problem Gambling; Carla Spight, head of gambling the Michigan to manage its treatment network; and Lori Rugles, clinical director of Trimeridian Inc. of Indianapolis, who has been training therapists in the techniquee of treatment ing therapists in the techniques of the state has also contracted with The Treatment and support groups. Presently, the helpline receives about 1,700 calls per month.

The fact there is already a casino in the area, Casino Windsor just across the river, "may skew those numbers a bit," according to Jim McBrydo, who heads up Michigan's compulsive gambling programs for the Department of Community Health. In other words, many of those who are susceptible might already be hooked, resulting in samaler growth in the number of campulsive gamblers.

High risk area

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findings that indicate the existing problem may be even more serious. One study
of prevalence which examined compulsive
gambling in Michigan, New York, Connecticut, Wisconsin, Louisiana and 13
other states (Nevada and New Jerse
were not included) found that the highest

State unprepared

But Biller says he's not sure it's enough. For one, he said, the state's new network will provide treatment only to the most seriously addicted, known as "pathological gamblers." Left untreated, he less scrious "problem gamblers" will probably progress eventually to the pathological stage, he contended.

Problem gamblers seeking treatment will have to use their own insurance or pay for it out of pocket. Few insurance companies cover treatment for compulsive

gambling currently. Studies have noted compulsive gamblers often lose their jobs as a result of their addiction, losing bene-fits along with it. And many gamblers let insurance coverage lapse due to financial

insurance coverage lapse of the termination difficulty. Pathological gamblers who are treated in Mitchigan's "payer of last resort" system, Biller further argued, will receive a maximum of 12 sessions with recurse and long-term' problem. Twelve assions per yearmy to little for them, he said. Biller should know. He is a recovering compulsive gambler who has spent that 28 years in treatment and support of the period of the said of the action. He is also redicted with being the driving force behind much of the state's work to put a treatment network together.

Seeking help

ment network together.

Seeking help

Spight however counters that few gamblers will be turned away. To identify compulsive gamblers, the state will use the South Oaks Gambling Screen, a set of 20 questions about the gambler's behavior. (Examples: Have you ever hidden betting slips, lottery tickets, gambling money, I.O.U.s or other signs of betting or gambling from your spouse, children or other important people in your life? Have you ever berrowed from someone and not paid them back as a result of your gambling? Have you ever bortowed from work or school due to betting or gambling?) A score of three indicates a gambling problem. A score of five indicates the person is a "probable pathological gambler."

According to Spight, most gamblers who seek treatment score between 11 and 18 on the SOGS scale. So most will easily qualify for state treatment.

While Spight admitted 12 sessions may not be enough for a chronic, hardcore gambler, she said those treatment sessions will be "pooled." If one gambler does not use all 12, others seeking treatment will be able to draw on them, she said.

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Help is available for gambling addicts
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Camblers or family members can

Camblers or family more transcellar, Camblers or family members can contact the state's new treatment network through the Michigan Com-pulsive Gening Help Line at (1800) 270-7117. The help line office is open 24 hours a day. Cells are toll free.

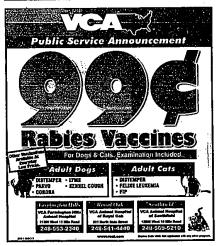
per 124 hours a day. Calls are followed.

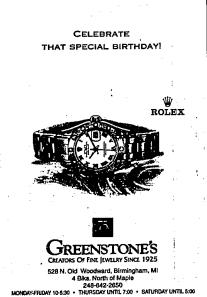
Gallers will be asked a series of cuestions from the South Daks Gambling Scroen, to determine the seventing Scroen, to determine the seventing of the compulsion, and from a "financial needs assessments." Those who qualify will be eligible for counseling free of charge.

Help is also swallable at:

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