

# Compulsive Gambling in Michigan

## Focus Groups

David Hartmann and Thomas Van Valey

Following the initial design of the project, one of the first steps in data collection was a series of focus groups. These were held with people having specific types of interest in the topic (e.g., individuals self-identified as compulsive gamblers or as spouses of compulsive gamblers, employees of the state criminal justice system, university students, and health care providers). These focus groups were held on four separate dates at four locations:

1. November 20, 1996, in Detroit, MI at the Novi Hilton
2. January 15, 1997, in Lansing, MI at the State Police Barracks
3. January 22, 1997, in Kalamazoo, MI at Western Michigan University
4. February 4, 1997, in Grand Rapids, MI at the WMU Grand Rapids Regional Center

Dave Hartmann and Tom Van Valey both conducted/observed the first focus group in Detroit. It included six individuals self-identified as compulsive gamblers or as spouses of compulsive gamblers, plus one health care provider. Dave Hartmann managed the Lansing group, which included six State Police officers (Mark Hoffman observed). Dave Hartmann and Tom Van Valey conducted the third group, in Kalamazoo, with five students from Western Michigan University (there were also two observers: Carol Groves from the Kercher Center for Social Research and Arlen Gullickson from The Evaluation Center). Dave Hartmann carried out the fourth group with five Grand Rapids-area health care providers.

As do most focus groups, the session began with a few minutes of introductions. The participants "told their stories," then responded to a series of issues that were raised. The first issue was types of gambling. "Recreational gamblers" were identified first. These are the people who will gamble every now and then, without getting hooked on it. "It's like somebody that takes a drink once in a while." Participants also indicated that this form of

**The Detroit  
Focus Group—  
Compulsive  
Gamblers**  
Tom Van Valey

gambling most likely makes up a large part of all gambling. Within the broad category of problem gambling the participants clearly distinguished between the "binge gamblers" and the "compulsive gamblers." As one participant put it, ". . . some people are binge gamblers. They only gamble when they go on vacation, and they only go on vacation once a year, whereas I was the kind of compulsive gambler who gambled every day."

There was also some discussion of "pathological gamblers," those people who will break the law to gamble or to support their gambling. There appeared to be consensus that these were the people with the most serious problem.

The next issue had to do with the range of activities on which people bet. The participants quickly listed a wide range: horse racing, lottery, casino, bingo, dice, bowling, after hours clubs (poker), office pools, liars poker, machines (both legal and illegal), sports, fantasy football (or baseball, or hockey, etc.), numbers, pull tabs, and bets with bookies (which themselves might cover a wide range), betting on the Internet. They even included the stock market.

In addition to the kinds of activities, the participants readily identified certain types of gambling with characteristics of the gamblers. For example, primarily female-oriented forms of gambling are bingo and slot machines, while male-oriented forms would include the use of bookies and sports betting. They thought that pools and casino gambling (primarily because of the ease of access), in contrast, were more or less generic, applying to males and females alike. There was also some discussion that gambling is inversely related to the social status of the individual. Nevertheless, they were also able to identify the forms of gambling that were the most popular: pools, sports betting, and lotteries.

There was also some discussion about the difference between betting based on some skill or knowledge (e.g., poker or horse racing) and betting based on luck (e.g., lottery and machines). While the participants agreed that there was a difference, they also indicated that gamblers often delude themselves into thinking that their betting is based more on skill than luck. Indeed, in this context, the notion of "a system" was introduced as the gambler's way to improve his/her odds. The participants agreed that

gamblers with a system were more likely to be problem gamblers than those without such systems. By the same token, gamblers who lie about their gambling (i.e., about how much they win or lose, about whether they gamble or not, or even about what they had for lunch) are more likely to be problem gamblers.

When asked about the reasons for gambling, the participants were able to identify several: to relieve depression, for the action or the "high," for the challenge, to alter one's mood, to get extra money, to prove something about yourself, for the social component, for competition, for entertainment. "I define it as a disease of more—that if one is good, two is better, and three is better yet." Along a similar line, some of the kinds of things that encourage people to gamble include easy credit, ease of filing for bankruptcy, state support of gambling (e.g., lotteries), support of gambling by other institutions such as the church (or MacDonal'd's), moral acceptance of gambling, the value placed on instant gratification, peer pressure, the media, ease of access, improved technology. A major issue was the encouragement of gambling by the gambling establishments themselves (including the state). It is simply part of today's society. As one participant put it, "Most gamblers that I knew held jobs, had families; they weren't doing gambling—they were just regular people . . . they were intelligent, and they were . . . looking to enhance their income, and without paying tax on this enhancement."

When asked about the possibility of stages in the gambling process, the participants were quick to point out that the process begins with social and recreational gambling. At some point, perhaps associated with a big win, an analysis stage occurs next (when the gambler is trying to rationalize the process). This is often followed by a stage characterized by anger or desperation (because the gambler is committing substantial portions of his/her resources). Next is compulsion and then bottoming out. Denial is also part of it. After all of these comes the process of recovery, and the gambler is often forced into it (by a friend, family member, employer, or other). Very few realize that they need help all by themselves.

Some of the consequences of compulsive gambling noted include marital/family problems, employment problems, legal

problems, financial problems; even health can be an issue. Indeed, it appears that multiple problems are likely, especially among those people who have been compulsive gamblers for a long period of time. Self-destructiveness is at the extreme.

When asked where gamblers go for help, Gamblers Anonymous was mentioned by several participants, along with the Veterans Administration, other treatment centers, and state and national councils (like the Michigan Council on Problem Gambling). Common referral sources were family members, churches, therapists, a gambler's telephone hot line, even regular medical doctors.

In this same vein, the participants clearly indicated that there is a need for more treatment programs and facilities that focus on problem gambling as well as more people trained to deal with problem gambling (along with other kinds of addictive behaviors). One participant was quite graphic about the need for treatment in the context of explosive growth:

. . . you're putting in all these casinos everywhere, and everybody looks at the up side. But out of all those casinos, there's still gonna be that 1 or 2 percent of people that get hooked, and they're gonna be walking around with nothing. They're gonna be devastated. And the only way it's gonna hit the forefront is gonna be like an O.J. thing. There's gonna have to be something like this crazy dude walkin' around with his gun and shootin' people. It's gonna have to be a compulsive gambler that goes completely nuts before somebody says, 'Hey, maybe we ought to put in a treatment center for these guys.'

The introduction for the student group made it clear that the point of view of younger people was important because anecdotal evidence indicates that people begin gambling before they are 21 years old. Thus, the first topic of discussion was the types of gambling that are important to college students. The participants quickly identified casino

**The Kalamazoo  
Focus Group–  
University Students**  
Tom Van Valey

gambling (in Mt. Pleasant), presenting it primarily as a social activity. " . . . it's just like the place to go, you know; possibly pick up some women or whatever, and just go and have fun." In addition, they identified the lottery, sports gambling, card games, and pools (e.g., the Super Bowl and the basketball championships) as popular types of gambling. As one student put it, "It's huge. I mean, it's unbelievable how many different pools—even at high school. I mean, there are huge, huge pools for the NCAA tournament. And, I mean, starting at—even at such a young age as 14 up through 18 in high school . . ."

When asked about the connection between gambling and drinking, the students reported that the two often occur together, although there was some support for the position that drinking was the more important social activity for most students. They also indicated that there appears to be a trend for people to start gambling at younger ages (5th and 6th grades). When asked why, they pointed to the proliferation of electronic games and computers, the access to gambling activities (like the NCAA pools), the legalization of gambling, and the fact that young people see so many adults routinely involved in it.

With respect to motivating factors, the participants suggested that novelty is one important element, especially for casino gambling, but it wears off. They also indicated that among college students, some people gamble to relieve depression or to feel good about themselves. Greed and the "thrill" of winning were also major motivating factors—the possibility of actually winning a large amount of money. Along with the social aspects of gambling (gambling is a way to be "cool"; it is a symbol of adulthood, the fame and status associated with winning), the possibility of winning a lot of money seems to be particularly attractive to young people, even though most of them do not gamble much money at any one time. "Everyone wants the Big Pot—to change your life." Other motivations for gambling included the competitiveness among college students and the excitement associated with it, especially if you are winning.

With respect to the kinds of people that engage in different kinds of gambling, the students indicated that, in addition to college students, casino gambling appears to draw from all segments of society, especially the older generations.

**State Police  
Focus Group**  
David J. Hartmann

However, they also noted that there appears to be a clear gender difference in other forms of gambling, such as sports betting.

In trying to summarize, one of the students said, "There is no solution to gambling. . . . gambling is only one of many options that are available to the college student. Just like alcohol, it is a part of college life. However, there doesn't seem to be as strong a support structure for gambling as there is for alcohol." The sentiment that gambling was an important issue was clear. The students indicated that people do need to become aware of gambling, because it can produce problems as serious as alcohol (although lots of people do not seem to realize it). As gambling becomes more common, though, more people are likely to become aware of the potential problems. Therefore, like alcohol, problem gambling will be increasingly recognized and treated.

This focus group was conducted on January 15, 1997, at the State Police Headquarters in Lansing, Michigan. Participating detectives were from the Criminal Investigation Division, and most were assigned to the Organized Crime Team. Because their professional experience focused heavily on particular aspects of gambling in Michigan, a modified protocol was used for this group. Our concentration was on the nature, extent, and repercussions of illegal gambling, especially those linked to organized crime. There was less emphasis on the personal experience of gambling (attractions, life cycle of gambling) and more on the negative impacts of gambling that would involve interventions on the part of law enforcement or other parts of the criminal justice system.

We opened the group by asking about the range of gambling activities that participants were professionally concerned with. The working definition of relevant gambling activity for these men revolves around the idea of organization as a business. Although there are exceptions, as one respondent put it, "Organized conspiracy is our criteria." A second joined in, "Another thing is the continuing criminal enterprise, that they don't just do it as a one-time or a two-time thing. They continue the enterprise just for that purpose. . . . the people we target, that is their source of income."

As in the other groups, a discussion of types of gambling ensued, again with the special restriction that we would discuss the types of gambling they most often see as leading to legal interventions. Sports betting was mentioned most often and was the basis for the majority of anecdotes. Illegal numbers was also mentioned. Numbers was thought to compete with the legal lottery games in Michigan, and one respondent remarked that he thought numbers activity had actually expanded with the growth of the lottery. Better odds and the ability to make small bets were thought to be attractions of the numbers racket. An additional factor may be the tradition of play in some areas of the state—one participant talked about “generation after generation following numbers.” The legitimization of the winning number through use of the legal lottery numbers may also be an inducement for expanded popularity.

But if numbers play is a recognized illegal activity, it is not one that attracts a large share of official attention. One respondent said, “A bigger issue than that (untaxed income), particularly in a numbers situation—’cause no one really attaches a lot of importance to illegal numbers in Michigan—is the amount of revenue they suck out of a community or out of an area on a weekly basis.”

Another illegal gambling activity that the police often deal with is video poker. This was believed to be a widespread activity wherein the machines are marked “for amusement only,” but bar owners and other proprietors do pay off to known patrons. The distributor of the games and the proprietor generally split profits. The complexity of identifying and proving that the operation is illegal was stressed. “Well, the problem is—the experience that we’ve had, it’s run the gamut. You have some distributors that distribute other vending equipment such as jukeboxes and an array of things, and the video poker may just be one part of their operation or equipment they supply. I think we can almost universally say that when those distributors of video poker machines start installing and they have a multitude of different accounts around the state, they will tell them right up front, “You can use this game legitimately or you can use it as a gambling device and make all kinds of money, where you will not make that money if you stick to legitimate purposes.”

A final set of gambling activities, the 800 number betting lines to overseas locations, gives a flavor of the sophistication of the operations the police must cope with and the jurisdictional complexity of the necessary approaches. Federal, state, and even international levels are involved. One respondent pointed out that these problems are getting even tougher as the technology changes. "Especially as they start dealing with computers and the Internet. I mean, you try and figure out where these accounts are and how—you know, who's involved. I mean, they can be in any number of countries, any number of states. You know, it's gonna make it all that much more difficult."

The group then discussed the types of people who have gambling problems and concluded that all types are involved. Several comments suggested that gambling is reaching into more and more parts of the social environment. The following quote is instructive. "A definite percentage are women. You see all through the state. There are a lot of sports bars, and we've had a lot of gambling there. It either starts there or takes off because of—you know, they've got 20 TVs, different games going on, all talking sports. Sports bars have generated a lot of interest in sports gambling."

The discussion continued that there is a range of "low level" or "recreational betting" such as on poker machines in bars, or a neighborhood with a tradition of numbers playing, or working class participation in parlay cards at work or lodges. While people may lose money they can ill afford to, the betting tends to be smaller. "Then you go up to the sports betting that some of the guys are involved with and they're structured. You're talking about big dollar bets. A lot of losses. A lot of professional people in there that have the ability to place large bets and then some nonprofessionals that don't have it, and they usually get hurt pretty bad. And that's probably when they start coming to us, when they've got a really big tab."

The next topic was the effects of gambling. Again, most examples and experience were drawn from sports betting. For example, "They (sports bettors) get so deeply in debt that they can't pay. And you have situations where they've been threatened and they don't have any alternative but to

come to us. I guess from my experience, we've dealt with people who've paid thousands and thousands of dollars in gambling debts and they still owe thousands and can't pay it. It affects their family, it affects their job."

When pressed for the nature of the effects, a participant said, "(There was an individual who lost) I'd say at least \$100,000 or more than that over probably a 4-year period. It totally consumed his life. . . . It bankrupted him." Another continued, "I can give another example. The guy already went to prison and came out. This guy worked for . . . his brother's business. He was the comptroller and was in a position to have control of the money. He siphoned out \$565,000 and spent almost virtually all that money on gambling—sports gambling in this case. So, in that case, he almost killed his brother's business. It's taken 7 years to replace that money. It was a very successful business, but was hanging on by a thread until they finally replaced those monies. So that affected—it almost wiped out—he had like 40 employees that would have lost their jobs."

Another participant continued about a man with a minimum wage job who ran up significant gambling debts (again, on sports) and was ". . . encouraged by the bookie to do whatever it takes to get the money. One of the suggestions was to commit insurance fraud. . . . There's another example. We've done investigations in the past on groups of individuals who travel all over the country and do breaking and entering and those types of things. And their weekend activity—when they come back to Michigan, and they finally go to a casino and that's where they spent their (money)."

So if illegal gambling activities are the focus of law enforcement, the legal-illegal distinction becomes less important when the effects of gambling are discussed. Law enforcement officers see and deal with effects on families, on business, and on crime to pay for gambling. The types of gambling include, but are not limited to sports betting with both legal and illegal types being mentioned. One participant summed up the problem very well. "I sit here thinking, you know, where are we going? We're gonna have a lot of legitimized gambling, not only in Michigan but, you know, the surrounding states. And then we have the illegal part. But the bottom line is that people are going to get into debt." Another continued, "There was a man down in Texas

that was robbing banks . . . The reason he was robbing those banks was because he had a gambling debt. Now the last sentence (of the news story) didn't say "illegal gambling" or "legal gambling" or whatever, you know. A Livonia police officer was robbing a bank. Another gentleman, a prosecutor, who was very well thought of—but he embezzled \$140,000 and ended up shooting himself in a motel room. These are stories within the last couple of months. . . . We all think that it's a victimless crime. But not only the family . . . ”

The increase in legal gambling was certainly thought to contribute to the opportunity for problems. A related problem is the possibility that there is a growing tolerance for gambling behavior, even that with negative effects. One officer remarked that they try to prosecute cases with obvious victims because of the notion that gambling itself, even illegal, is tolerable. One officer said, "What really put the foothold is the darn lottery. And now, to confound the problem, are the casinos—especially the deal in Detroit." Another continued, "And that's the problem we have to confront when we take cases to court. That's the first thing that comes up from the defense. The state gambles, so—" When the moderator pressed the point, saying, "Certainly judges aren't receptive to that argument. Juries, yeah, that I could see," the participant answered, "You get both. Judges are people too. You've gotta convince them as well. They might have their neighborhood card game that they go to as well. And they sit there and say, 'Well, gee. That's rather hypocritical if I'm going to sentence somebody who enjoys another form of gambling.'"

Several participants suggested that the state's role in gambling also suggests a state responsibility. "The state has got their foot in the door here with the start of the lottery and now these casinos are gonna be all over. I think that the state, by legalizing it, has really created a lot of problems for people in the state of Michigan." Again, the law enforcement perspective is tightly focused on criminal implications. The discussion continued, "Let 'em go to Canada. You'll find that prostitution will pop up around the casinos. You'll find narcotics will be in the back door. You'll find loan sharks or whatever. You'll find all kinds of illegal activity. We've already experienced some at Mount Pleasant, all these things I've just mentioned." Another

officer concurred, saying, "That will be a major concern, a problem, to keep organized crime out of these casinos. You know, keep 'em legitimate."

That same issue of state responsibility led to a discussion of resources to help problem gamblers. As a whole, participants were not aware of many places they could turn for information or to refer people to. Law enforcement regularly deals with people with significant problems, so a referral network would be a welcome resource. As one participant put it, "I was sitting here thinking that the whole bottom line was that where does the gambler seek help and what time in his life does he seek help." Another continued, "I wouldn't know right now where exactly to send somebody."

This gap is starting to be addressed, but the progress has been slow. One officer said, "We've got a meeting coming up where the fellow that does our substance abuse (training) is just going to be going to a school for gambling addiction, going to a seminar or something. So we've got him incorporated to come in and do that presentation to our folks. But that's a first. I mean, we haven't been exposed to that."

At this point in the group, the moderator introduced a person who is helping to organize and inform on the issue of helping resources for gambling problems. This individual briefly described the hopes and plans of this effort. The group was very receptive to the idea of a referral network and applauded the idea of working with judges to get help for problem gamblers. The alternative is continued recidivism, from their perspective. "And we have seen that happen (without treatment). Bail him out. He's into a loan shark. He's in big trouble. We bust the loan shark. And a year later he's calling us back, saying, 'I'm in trouble again.'" Another officer suggested that law enforcement has tended not to focus on the gambler at all. They simply use the gambler as a witness or a tool to go after extortion or other criminal activity. This leaves the gambler with the same problem and the same propensity to again get in trouble. "The gambler himself tends to get looked at as the victim and not [as] the person who's responsible."

Programs involving education, treatment, and even the equivalent of Employee Assistance Programs at businesses like casinos were held up as models to pursue. The whole treatment perspective was a welcome new insight to many of the group members, and a willingness to work on referrals was present.

Especially since budget restrictions often signal a reduced law enforcement presence on nonviolent crimes, addressing root causes is a necessary approach. The moderator summarized, "That's interesting. The resources are cutting back; it's becoming a low priority. The culture is saying maybe it's not so bad and at the same time gambling is growing by leaps and bounds." A group member responded, "That's exactly it. I mean, we go to the legislature to justify our budget . . . We've gotta persuade the legislators that this is a problem. This is something, you know, that the State Police should be involved in."

That idea of documenting the case for resources brought up a discussion of the need for a better understanding of the links of gambling to other crimes. While officers see the link routinely, systematic research and documentation, as in the substance abuse field, is lacking.

A final summary to the range of issues discussed was made at closing by one participant. The issues of problems, changing culture of legitimation, and lack of treatment and referral resources were summarized. "I think we're in a great period of change for this state with this new situation (of legal gambling), and we're gonna face a lot of problems. And if we have to meet 'em, everybody has to be educated. . . . If somebody came to me and said, 'I need help. I've got this situation,' I want to be able to say, 'Okay. Here's a number that you can call.'"

We are deeply indebted to these officers and to the participants in the other focus groups. Through their honest and thoughtful discussion, we have gained needed insight into the scope and nature of gambling in Michigan.

This focus group was conducted on February 4, 1997, in Grand Rapids, Michigan. Since all participants were from the Grand Rapids area, issues surrounding regional variation were not addressed. Also, because these professionals

**Therapist and  
Counselors  
Focus Group**  
David J. Hartmann

were in private practice, they tended to see a middle to upper class client base; so again, issues of generalizability are significant. As with the state police group, because therapists have a particular professional involvement with gambling, the protocol was modified to reflect their emphasis. We hoped to address issues of the nature of gambling problems, patterns of presentation and recovery, and types of resources available to assist problem gamblers. We expected a more psychological rather than social forces perspective to dominate and consequently asked specifically about those perspectives.

As with the other groups, we opened by asking about the range of gambling activities that participants were professionally concerned with. A significant difference in perspective from the gamblers group became evident. While the gamblers group tended to define themselves and their problem around gambling, the therapists tended to see gambling as one of several manifestations of a deeper underlying issue such as a manic-depressive diagnosis, obsessive/compulsive characteristics, or simply one of a broad range of addictive behaviors. Most of their clients present a range of problems including substance abuse, and gambling is considered to be a secondary or tertiary problem. This perspective dominates among the therapists and is either present or becomes accepted by their clients. One participant said, "In my experience, none of the people I've worked with that actually did have a gambling problem ever presented that as the presenting problem." Two other participants agreed.

When asked if at least some of their clients are more concerned about their gambling than other problems, the two therapists who answered said no. When asked about individuals who do define their problem as a gambling problem, one said, "I don't think those people make it to therapists." Another continued, "I think they might see that as their primary problem because that's what got them into trouble. Whereas therapists often say 'Is this a symptom of something else,' they don't want to hear that and so you see 'em one time and then they're out the door." There appears to be a conflicting perspectives problem that might prevent proper assistance for some clients. The moderator suggested that a closer working relationship with groups that accept the fundamental rather than symptomatic

importance of gambling problems might be possible (e.g., Gamblers Anonymous or the Michigan Council on Problem Gambling). A participant remarked, "I don't think it's happening. I've never gotten a referral from them—from GA to the therapist, I mean. It's like the infancy of AA where they would never use a therapist. I've gotten more support from that now." Several then commented on the traditional lack of coordination between self-help groups and therapists. A potential class bias was also mentioned for the lack of referrals and coordinated work. "I think—you know, because we're in private practice and we're probably getting at least working class and upper middle class people—" The implication is that people with different income and education levels may also have different orientations to professional help.

Another part of the issue may be the notion of a "billable diagnosis." Some of the GA participants had remarked about lack of insurance coverage. Here, a therapist said, "I think we have to be really clear about that because there are some insurance companies that won't pay for a diagnosis." Another continued, ". . . even for substance abuse." And another, ". . . behavioral problems."

This discussion led to a worry that it is indeed difficult to know how many people actually have a diagnosable gambling problem. "But looking at this, it's really hard to get a figure on what we have in terms of—the figure of problem gambling." There was some murmuring of agreement with that statement so the moderator asked about the South Oaks, the DSM-IV, and other screens. A relative lack of familiarity with standardized screening instruments was admitted, though discussion quickly established that the DSM-IV diagnostic criteria were well known and used in practice.

Perhaps because of the middle class nature of the clientele, most of the clients tended to gamble in casinos, although one participant had clients who bet with bookies. Significant problems tend to be associated with running up debt and interfering with family and job responsibilities. One participant said, "In most of the cases, even at the end, it's just like the denial with an alcoholic. It was never seen as a problem until either the money ran out or it caused some other problems."

Michigan-based casinos were seen as an increasing venue for these problem gamblers although, again, many of the wealthier ones could also go to Las Vegas or Atlantic City if local options were unavailable. For others, however, “I think what’s especially—I would call them more working class people. They seem to really think that this (a local casino) is a—they can do this in a weekend.” Another continued, “As a matter of fact—or a day. I know people who do day trips, I mean with a group of couples. I mean it’s really becoming—it’s like a social event. For many people it’s not problematic.” But for others it is. “I’ve noticed with clients that they’re not as impressed with the exterior and all the amenities (of the casino). What they’re impressed with is their credit line.” Another added, later in the session, “I think it’s undeniable—I’ve lived here all my life. It’s undeniable that more people that I know gamble now because of the proximity of casinos. That is an undisputable fact.”

The social legitimacy of gambling was also perceived to be changing. “The casinos give it legitimacy to the family system. So a lot of people can go for the fun and entertainment . . . and that would not have been true with the bookies going in and playing on the sports or more of the hide-away things.” This has also led to a broader cross-section of gamblers as opportunity increases and social stigma declines.

One of the dimensions we wanted to explore with therapists was the issue of motivation to gamble—what brings people to gambling? Because of their professional training, therapists were particularly attuned to this dimension. Not surprisingly, motivations for gambling were thought to be diverse. For example, “I think they come into it (gambling) with a certain set of dynamics which it does something to help them feel more adequate, more in control, that sort of thing.” Another continued, “It’s pretty wide, especially for the non (nonproblem gambler)—like where it’s not a family history of it or it’s not a cultural thing in the family. The people—I mean, I’ve known people, have dealt with people who kinda began innocently. I mean, their family didn’t do it. . . . I mean they did it for fun. You know, it became a social thing, then it became a hobby, then it became a real interest, then it became a habit . . . .”

The impact of casinos on decreasing social stigma and making gambling accessible to a broader clientele was stressed. One participant said, "I think with women, the casinos have given them another place to be social." Another continued, "It's easier to go into a casino versus going into a bar alone." And a third, "So for women, in terms of the prevalence of that gaining for women, I think it's just a more socially acceptable place to go. They can do entertainment for a number of hours, sometimes gain money and sometimes lose money, and I think this just started that way."

The links of accessibility and acceptability to eventual problem gambling were also stressed. "Maybe it starts with a kind of interest or hobby, and then it becomes a pattern, and then it becomes maybe a sense of wanting social connections. . . . They make it very convenient. I mean, we're talking about these hotels. One of the things you can do—if you drink in these casinos and you don't have to drive back to your hotel because they offer one-stop shopping." Another continued, "Yes. The longer you stay—well, a woman I know who goes with a group—and I'm sure she would never think of it as a problem for her. She goes with a group and she really likes to stand at the slot machines. Well, her husband gets tired. He goes back to the hotel. And she doesn't have to be concerned about drinking or her safety. It's very conducive. It's seductive." Another, "That's a good word for it."

In addition to these paths into gambling, participants stressed that the chasing of losses becomes a motivation at some point for a great many gamblers. One summarized, "Sure. Chase winnings or chase losses. I mean, it's kind of a fine line, you know, as far as the motivation or the compulsion to keep winning and keep winning, or, 'I've gotta gain it back. I've gotta gain it back.' I mean, compulsion is driving in either one of these scenarios." Another continues, "It's a life of its own. Chasing the gains they made, but they're also chasing the loss of that; but it was never their money." When asked what they are chasing, one responded, "The arousal. The excitement, yeah. That's the addiction." Another continued, "That's the addiction, yeah. Sometimes the money becomes secondary to the arousal and the excitement." It is important to realize that this description closely parallels that of the problem gamblers

themselves in our focus group. This notion of the compulsion and the chase are clearly central to the experience of problem gambling for many people.

Also like the gamblers and the police groups, the therapists note that a problem is often defined only when someone else complains or an obvious deficit in family or job or health occurs. "When it becomes a problem in everyday life. When it affects relationships, when it affects work, when it affects function." Another added, "In terms of functioning it would be in terms of the total preoccupation."

The next topic concerned the motivation to change on the part of the gambler. The therapists again stressed that they did not generally see the client who recognized his problem and was bottomed out and ready to change. The cycle of deceit and family problems and debt and illegal activity discussed by both the gamblers group and the police group was not a presenting scenario with the clients of these therapists. They talked more about straining of the social networks rather than breakdowns. One must wonder if these clients are indeed different or simply at an earlier stage of the more serious pattern. One therapist said, "I've never had a gambler bottom out much. They seem—they've gotten close . . . but then they pull back for awhile. . . ." Again, as opposed to the model of the increasingly isolated problem gambler, two therapists described a very social and interactive pattern. "There's a gregariousness about a lot of them. They're very social—you know, some of them. I'm just thinking of a lot of these people who are—it's a group . . . it's not like the drinkers who can sit in their room alone and drink themselves into oblivion. You can't do this with gambling 'cause more often than not you're gonna be out with people. It's just slightly different. I mean, you can be alone and still be in a group and be isolated. But so much of it's got a social connection to it." Another continued, "And I wonder if that isn't one of the dynamics about it. It seems like a lot of these gamblers, when they win they've gotta tell someone. They've gotta show somebody what they've won. So maybe that's a piece of it."

Among solutions discussed were education and prevention efforts such as we now sponsor for substance abuse. There was wide agreement on the appropriateness of an information-based approach to young people. There was

some worry about allowing the government that sponsors and supports gambling to also be in charge of forming the antigambling or (at least) the gambling information message. The difficulty of forming the message at all was stressed. One participant said, "I want to say one more thing about education. Keep in mind that this is a state that has never been able to agree on curriculum per se. I mean, we can't even decide on what should be taught in grade three and come to an agreement. I always thought it was multiplication tables, but no. So what is there to say? If we can't even agree on basic core curriculum, we could never agree on what to say about gambling. I think prevention could really work in helping people make choices, but we can't do that anymore. . . . And as long as we've got an instant gratification society—is it (the prevention message) gonna do any good? I don't know."

Others thought prevention was certainly worth a try. "It may stop the progression. And because we know that a lot of this—the onset is insidious. It's slowly over time. There are the warning signs. There are the things that could be problems, that could signal trouble. It may cause some people before they're in that total compulsive thing and that arousal to say, 'Wait, you know, I do see some of this.'" Another, "Or even the checklist (of symptoms) available somewhere or published somewhere. Just as an awareness, you know." And another, "I kind of agree . . . in that the government or the casino operators corporation—you know, but there is some responsibility that lies there for basic education, for basic—you know, like 'This could be problematic and here are some signs that it might be.'"

In summarizing their thoughts, one therapist returned to the theme of complex motivations but a definite, identifiable contributing factor in state sponsorship of gambling and the legitimation of the activity. "I just think one of the critical pieces that I'm hearing and saying, which we touched on it before—we call it a collusion effect or a contagion effect, or whatever. But here I see it growing stronger and stronger that there is a social aspect of this, where it's a legitimate, fun, group thing to do. Entertainment is growing and growing. That is going to—my clinical intuition is that that is gonna heighten the incidence of people who normally would

**Focus Groups  
Summary**  
David J. Hartmann

not be problem gamblers to be taken down that insidious path where they become problem gamblers.”

In sum, the therapists group saw problem gambling as a significant and growing problem in Michigan. They tended to see root causes in increasing acceptance and social legitimization of gambling as well as easier access for traditionally excluded groups like women. Problem gambling itself, however, was generally seen as a manifestation of a deeper disorder that requires identification and treatment. Approaches to addressing these issues must involve awareness, education, and a strong prevention message.

As we expected and hoped, the four focus groups evidenced a variety of backgrounds and opinions with regard to gambling in Michigan. The strength of the focus group approach is that we could look for and tease out those differences, in light of the known experiences of the participants. The perceptions and insights of a group of college students, a group of therapists, a group of State Police officers, and a group of recovering gamblers and family members would not have come out in a general population survey. Yet each of these groups had much to tell us about gambling. We are grateful to these individuals for the time they gave us and even more so for the wisdom they shared.

Specifically, the problem gamblers group showed a remarkable ability to express the plight of the gambler and the family, job, and health problems related to the pathology. These individuals tend to see the problem as a disease requiring treatment, social support, and abstinence. Stages of the problem and the need to honestly desire help were stressed. Family members shared this disease model and the need for helping resources in the state.

The student group had less direct experience with significant gambling problems, but were aware of very young people entering into the early stages of gambling participation. While this particular group did not have many personal problems or know many associates with problems, they did describe a culture of acceptance of gambling and the socialization around it. The legal-illegal distinction was not stressed, since many saw a tacit acceptance of gambling as a whole in their environment.

The State Police group focused on the interactions of law enforcement with gambling. The distinction of legal and illegal gambling was quite important to these men when it came to the types of gambling they tend to scrutinize. But that distinction was far less important when it came to the legal implications of gambling problems. Gambling debt and the pursuit of winning lead to family, job, and crime problems both as victims (of extortion, for example) and as perpetrators (to secure funds to pay debts or gamble anew). From the perspective of these officers, all types of gambling are linked in contributing to an environment where gambling-related problems, especially those involving criminal activity, will become an increasingly significant problem in Michigan.

The therapist and counselor group also saw problem gambling as a significant and growing problem in Michigan. They tended to see root causes in increasing acceptance and social legitimation of gambling as well as easier access for traditionally excluded groups like women. Problem gambling itself, however, was generally seen as a manifestation of a deeper disorder that requires identification and treatment. Approaches to addressing these issues must involve awareness, education, and a strong prevention message.

In sum, members of these groups told us that (1) gambling is a significant and growing problem in Michigan, although its size is unclear; (2) problem gambling is a disease requiring prevention, treatment, social support, and abstinence; (3) control of gambling-related problems is becoming more difficult, due to gambling's increased social legitimacy, public acceptance, and technological sophistication (e.g., off-shore phone lines and Internet opportunities); (4) the state is compounding the problem through its sponsorship of the lottery and casinos; (5) more women and young people are gambling because of socially acceptable opportunities such as casinos; (6) there is some help for problem gamblers, but not enough. More should be done in the areas of education and prevention as well as in establishing a referral network of helping resources; (7) illegal gambling and excessive gambling are not victimless. They lead to debt, bankruptcy, crime, poor support of families, and poor job performance; (8) problem gambling is often a manifestation of some

deeper psychological problem; and (9) support groups and many therapists still do not work well together.

All the groups added to our understanding in particular ways, as discussed above. They all tended to agree on certain points as well: that access to gambling is easier, that social approval of gambling is perceived to be increasing, that there is insufficient understanding of the problems associated with gambling, that among those problems are disruptive effects on individual health and well-being and on families and workplaces, that criminal involvement may be related to gambling in ways we are not fully able to document, and that necessary remedial actions will include a widening net of services and referrals for problem gamblers and a clear and strong educational program.