editorial

Gambling on an Aging Population

Wayne Skinner & Nigel E. Turner, Guest Editors

There is a paucity of research on gambling and gambling problems among older adults. This special issue attempts to take stock of the current situation and to point the way forward. It draws on work that has taken place over the past 5 years, much of it funded by Gambling Research Exchange Ontario (GREO) and by the Ontario Ministry of Health and Long-Term Care, including literature reviews, on-site casino intercept surveys, a general population survey of older adults, and interviews with key informants. The steering committee for this project included experts in prevention, treatment, public health, research, and knowledge exchange.

Because mental health and addictions among older adults are under-researched topics, little evidence is available to guide public policy and intervention practices. These gaps in the literature became glaringly apparent when we put together best practice documents for prevention (Turner, Wiebe, et al., 2018, current issue) and treatment (Skinner et al., 2018, current issue).

These lacunae in knowledge cannot be used as an alibi for failing to pass on guidance, evidence, and information to the public, policy makers, practitioners, and researchers who face these issues in their daily work. Yet, at too many points, we have had to fill in gaps by using research literature from other populations, which is far from the optimal way to build a useful knowledge base.

Stories of problem gambling date back to ancient history (Ferentzy & Turner, 2013 chapter 2; Turner, Howard, & Spence, 2006). A recovery movement recognized gambling as a compulsive disorder in the middle of the 20th century (see Ferentzy & Turner, 2013). But it was only in 1980 that pathological gambling was officially recognized as a mental health disorder, when it was classified in the *Diagnostic and Statistical Manual of Mental Disorders* as an impulse control disorder (3rd ed., American Psychiatric Association, 1980). Research on the disorder was sporadic until the 1990s, spurred on by the worldwide shift in government approaches to gambling: from prohibition to profiting from it as a substitute for tax increases (Rose, 1995). This shift was initiated in Las Vegas, which then spread to Atlantic City, Macau, and then worldwide, resulting in the establishment of a multibillion dollar legal gambling industry. Lottery games, often run by the state, led the spread

of gambling, followed by so-called video lottery terminals and finally full-scale casinos. The expansion of legal gambling, in particular casino gambling, during the 1990s has continued to the present day. This massive expansion in legal gambling also triggered the growth of research into problem gambling as academics and health care professionals began to take the issue of gambling problems seriously.

Because gambling research is a domain of recent vintage, it is not surprising that gambling problems among older adults has received little attention. Yet, recent decades have seen an explosion in gambling behaviours globally. Despite the demand for evidence and information to guide policy, practice, and knowledge generation, the well of materials to draw from remains quite shallow. This predicament is nowhere more evident than with the problem gambling behaviours of older adults.

This special issue surveys the state of knowledge in the field of problem gambling among this population. It includes best advice commentaries for prevention and treatment, commentaries that could perhaps more modestly be called "better" practices: Although we can identify better and worse practices in many cases, we have not yet arrived at the high ground from which we can talk assertively about "best" practices. Nonetheless, these are the modest evidential foundations presently available to guide policy and practice in research, knowledge exchange, prevention, and treatment. Recognizing the considerable gaps and deficiencies in the current state of knowledge is itself a call to action for leaders and experts in the field.

Although data to date suggest that older adults as a group gamble less than younger adult gamblers do, those older adults who do gamble are vulnerable to the same levels of harm as younger adult gamblers. We know it is not the amount gambled that defines gambling problems—some people can afford to lose more than others. Rather, it is the impact of the behaviour on the health and functioning of those who gamble and their concerned significant others that defines a gambling problem.

Even though the percentages of older adults in the general population who gamble problematically are low (1.9% with moderate to severe problems; see Van der Mass et al., 2018, this volume), this represents close to 200,000 people in Canadian society, in addition to spouses and other family members who may be negatively affected. One disturbing trend is that the highest rates of problem gambling are among the younger older adults (see Turner, van der Maas, et al., 2018, current issue). This finding might represent a cohort effect, in that those who grew up with wide-open legal gambling may be more comfortable with gambling, which suggests that gambling problems may increase as these adults age. The people with the most serious gambling problems are also more likely to have concurrent addiction, mental health, and physical health problems, not to mention troubled lives in other areas (e.g., financial, interpersonal, emotional; Blaszczynski & Nower, 2002). Gambling disorders and their comorbidities among adults living long enough to be called seniors and older adults continues to expand beyond any known measure and is emerging as an important area for study from a population health perspective. If these issues remain unaddressed, the prospect for aging adults is increasingly

worrisome in the absence of proactive, constructive efforts at prevention and effective treatment. Recently, evidence of a "grey tsunami" of multi-morbidities has been identified that increases dramatically as people age, beginning in the mid-adult years and building until the wave crests among people who are 80 and older (Ryan et al., 2018).

Perhaps the first conclusion from this special issue is the need to expand and deepen the evidence base for gambling and gaming problems in particular within the context of the health and well-being of older adults in general. This evidence base has to aspire to include the most rigorous scientific approaches, but also needs to draw on diverse forms of knowledge, including qualitative research, practice-based evidence, social values, and culture- and diversity-based wisdom.

In sharing the work presented in this special issue, we hope to provoke dialogue and commentary and to stimulate research and knowledge exchange to better address gambling disorders among older adults.

We would like to acknowledge how productive it has been to work together on this large collaborative project, in which we divided into working groups and reconvened to share progress and obtain feedback. Serving as coordinator, referee, and champion of this work, John McCready deserves special recognition and a toast of gratitude from all of us for his persistent, patient, and respectful guidance of this adventure. John himself would want to point out that we have reached our destination because we have all contributed in so many diverse ways to getting here.

There are five papers in this special issue from the original project funded by GREO and the Ontario Ministry of Health and Long-Term Care. We have taken the liberty of listing all of the co-authors to highlight the collaborative nature of this work and to express our gratitude for their colleagueship:

- Mark van der Maas, Robert Mann, Nigel Turner, Hayley Hamilton, Salaha Zaheer, Tracy Schrans, and John McCready examine the prevalence of gambling problems among older adults in Ontario. Their data suggest that 1 in 50 adults over the age of 55 is a problem gambler (van der Maas et al, 2018, current issue).

- Flora Matheson, Travis Sztainert, Yana Lakman, Sarah Jane Steele, Carolyn P. Ziegler, and Peter Ferentzy, working out of Dr. Matheson's Justice and Equity Lab at St. Michael's Hospital Centre for Urban Health Solutions in Toronto, offer a scoping review of the literature on prevention and treatment of gambling problems among older adults, pointing out the paucity of studies on gambling in this population (Matheson et al., 2018, current issue).

- Nigel Turner, Mark van der Maas, John McCready, Hayley Hamilton, Tracy Schrans, Anca Ialomiteanu, Peter Ferentzy, Tara Elton-Marshall, Salaha Zaheer, and Robert Mann examine the prevalence of problem gambling adults over the age of 55 at gambling venues. They report that 7% have severe gambling problems and another 20% have moderate problems. In addition, they report on the proportion

of revenue derived from problem gamblers, as well as some nonlinear findings regarding distance and busing, namely, that problem rates were highest among those who lived closest and those who lived farthest from the gambling venue. Similarly, bus use was associated with more problems, but the effect peaked at four bus rides per year, rather than five or more (Turner, van der Maas, et al., 2018, current issue).

- Nigel Turner, Jamie Wiebe, Peter Ferentzy, Nadine Kauffman, Salaha Zaheer, Trudy Smit Quosai, Travis Sztainert, Robert Murray, Hayley Hamilton, Sherald Sanchez, Flora Matheson, John McCready, and Robert Mann developed best practices guidelines for the prevention of gambling problems among older adults, which they then vetted with a representative group of key informants (Turner, Wiebe, et al., 2018, current issue).

- Wayne Skinner, Nina Littman-Sharp, Jane Leslie, Peter Ferentzy, Salaha Zaheer, Trudy Smit Quosai, Travis Sztainert, Robert Mann, and John McCready examine the meagre research literature available to guide the identification and treatment of gambling problems among older adults. They then extend their reach more broadly with expert advice and evidence from addiction treatment in the full adult population, as well as more general knowledge that exists about the special needs of older adults and the challenges faced by an aging population (Skinner et al., 2018, current issue).

- Finally, we include a paper that was not part of the original project, but which also pertains to the topic of problem gambling in older adults. Eric Thériault, Joan Norris, and Joseph Tindale examine the use of various responsible gambling strategies among older adults and their relations to problem gambling risk levels. Their results reveal high levels of use of some responsible gambling strategies among older adults. However, they found that the use of responsible gambling strategies was unrelated to problem gambling risk level (Thériault et al., 2018, current issue). Longitudinal studies are needed to determine if the adoption of responsible gambling strategies might prevent their progression towards higher levels of harm.

Finally, we want to thank Sherry Stewart and Vivien Rekkas for their active support, patience, and wise guidance in the intricacies of producing this special issue.

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