



**Gambling behaviors among youth involved in Georgia
juvenile and family courts**

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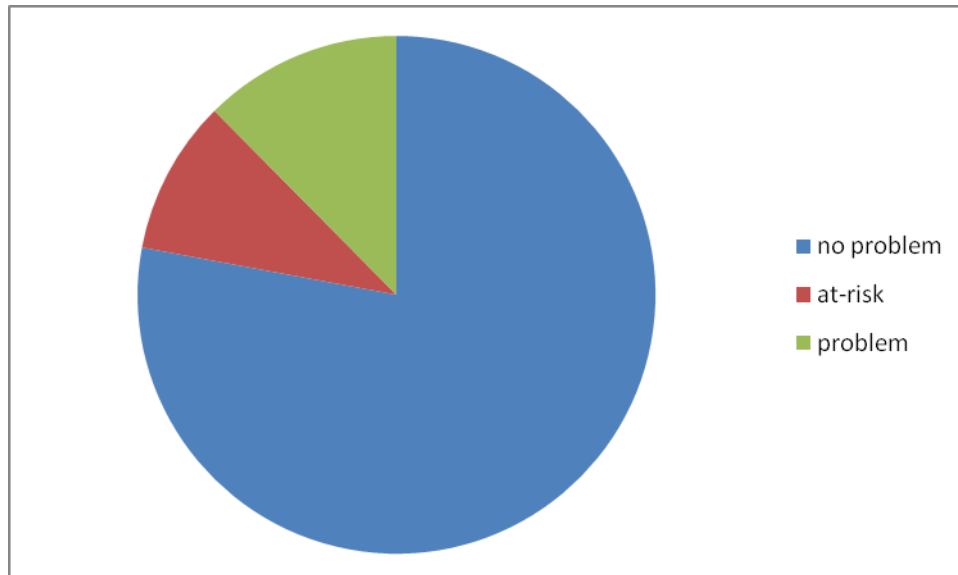
EXECUTIVE SUMMARY

During fiscal year 2008-2009, Georgia State University conducted an assessment of gambling behaviors and correlates of problem gambling among 145 juvenile and family court participants, ages 13-18 years. Prior to this study, the juvenile court population had been excluded from the literature on problem gambling among youth populations, whereas only incarcerated youth and youth from school and community samples had been represented. Because youth have higher rates of problem gambling than adults, and youth involved in the juvenile justice system may be at greater risk for problem gambling due to their potential involvement in other high-risk behaviors (e.g. substance use, delinquency) this summary report offers insight about the true burden of problem gambling within Georgia's youth population. Additionally, this report provides information about co-occurring behaviors and specific risk factors for problem gambling. These findings have utility in informing policy, resource dedication, and intervention efforts. This summary focuses solely on the results of the study, however an abbreviated version of the research methodology is located in the appendix and additional information may be obtained by contacting the author.

Key Findings

Prevalence of Problem Gambling

- Although the majority (78%) of these youth either did not gamble or had no gambling problems, an alarming 12.4% were assessed to be problem gamblers. Furthermore, the number of youth problem gamblers ($n = 18$) was more than the number of youth that were deemed at-risk for problem gambling ($n = 14$) which is not consistent with general youth gambling rates.



- Males had significantly higher rates of problem gambling severity than female participants, and African Americans had significantly higher problem gambling severity than Caucasian youth.

Non-significant risk factors for problem gambling

- Suicidal ideation was not predictive of problem gambling severity for these youth
- Lottery sales per capita nor county type (suburban, rural, or urban) predicted problem gambling severity in this population

Problem gambling, crime, and substance use

- 29% of youth reported committing gambling-related crime. Most frequent crimes endorsed included shoplifting ($n = 26$, 18%), sold or traded drugs ($n = 21$, 14%), and hustled at cards, dice, or another sport ($n = 20$, 13.8%). Nine youth (6%) reported that they had engaged in pimping or prostitution related to gambling.
- Both scope of gambling-related crimes that youth committed and youth substance use (alcohol, tobacco, and drug) predicted gambling severity, controlling for age, gender, and race.

Qualitative Data

- Youth were asked how any crimes they committed were related to their gambling or gambling-related debt, and responses were organized based on problem gambling severity
- Non-problem gamblers most often reported that they had not committed gambling-related crime or did not gamble, and were most likely to equate gambling and crime

“crime is a way for people to make money and gamble”
“you win money from doing crimes”

- At-risk or problem gamblers had markedly different answers and generally discussed the relationship between gambling, money, and substance use

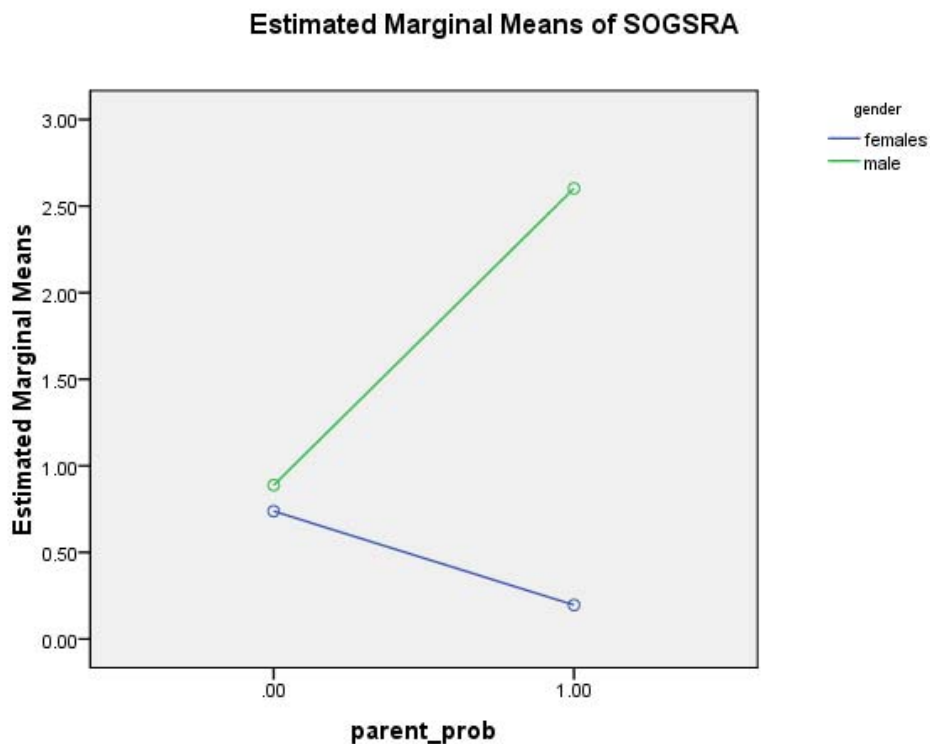
“needed to do whatever to get money for gambling and drugs”
“gamble to smoke weed”
“I was young and stupid and just wanted to drink so I broke into a house on a dare. Lame”.

- At-risk and problem gamblers also reflected on gambling as an easy way to make money

“hustling someone was easy and getting him to pay me when I was actually good at something and won”
“I used the money I got to gamble and get more money”.

Gender differences in gambling activities and familial risk factors

- Youth reported engaging in multiple types of gambling activities, including playing cards (23.4%), betting on sports (28.5%), playing dice (22.1%), the lottery (9%), slots (4.8%), and playing pull-tabs (19.3%).
- Scope of gambling activities was a significant risk factor for both males and females, but the effect was stronger for females, such that females engaging in a wider array of gambling activities are more at-risk to develop a gambling problem than both males with a similar breadth of activity and females who limit their gambling activities.
- 18% of youth also reported having at least one parent with a gambling problem. As noted in the figure below, having a parent with a gambling problem was significantly more of a risk factor for male youth than for female youth.



Gambling among youth in detention facilities

- Twenty-nine youth in the sample had spent time in detention facilities, and 70% of these youth reported gambling while in detention. Furthermore, these youth had significantly greater problem gambling severity than did youth who had not spent time in a detention facility.

- Youth reported betting on sports, dice, and card games, and reasons for gambling included boredom, respect, fun, and to get snacks. Two youth reported that they thought gambling in detention was “really cool! Especially when the jco’s [juvenile correctional officers] do it”

Discussion and Implications

The major goals of this study were to document the rate of problem gambling for a juvenile court involved population, examine the risk factors for problem gambling specific to these youth, examine the co-occurrence of problem gambling with criminal activity and substance abuse, and to explore gambling behaviors of youth who have spent time in detention facilities. The results indicate that gambling is a salient and problematic issue for many youth involved in Georgia courts. Not only are the rates of problem and at-risk for problem gambling two to three times higher for these youth compared to school samples, problem gambling also co-occurs with many of the issues courts are already dealing with, such as substance use and crime. Finally, youth who have spent time in a detention facility reported the highest rates of problem gambling within this study, indicating the need for interventions to target this population.

The findings can lend insight to professionals working within the Juvenile Justice System on how to prevent and treat this potentially detrimental problem in this population. Furthermore, the costs of problem gambling are estimated to be about 5 billion dollars per year in the United States, making it one of the most resource intensive yet preventable and treatable addictions (Zorland, Mooss, Perkins, & Emshoff, 2008). Because problem gambling is a public health issue that affects people from all walks of society, addressing it at all ecological levels is necessary to reduce the social and economic costs associated.

- As predicted, the problem gambling rates for youth involved with Georgia juvenile, juvenile drug, and family courts were more than twice the rates found in school samples, and the number of youth who were classified as problem gamblers was greater than the number of youth who fell into the “at-risk” category identified by the SOGS-RA. This may indicate that court-involved youth are less likely to remain social or leisure gamblers without becoming problem gamblers. These youth need to be educated on problem gambling behaviors and signs and responsible gaming to keep them from developing addictive or dangerous gambling habits.
- Consistent with study hypotheses, males and African American youth had higher problem gambling scores than their female and Caucasian counterparts, respectively. These group differences can lend courts insight about the potential risk for problem gambling among their youth based on their court’s demographic breakdown. However, too much weight should not be placed on these differences, as some research has found that gambling rates among all youth are increasing.
- This study did not find suicidal ideation to predict problem gambling severity. The youth in this study who are dealing with feelings or thoughts about suicide may cope in different ways not pertaining to gambling, such as using substances or committing crimes. Future research

should focus on suicidal ideation and other mental health issues as they pertain to risky behaviors in general (problem gambling, substance use, and crime).

- Neither county type nor per capita lottery sales predicted youth problem gambling severity. The lack of a significant difference for urban vs. rural youth might reflect the fact that Georgia's legal gambling opportunities are similar for both urban and rural areas (e.g., no casino gaming opportunities exist). Youth gambling may not be influenced by lottery sales because, for the majority of the sample, playing the lottery is illegal, and most youth reported gambling in unregulated activities (cards, sports pools, etc.). Additionally, this finding may also indicate that legal adult gambling (playing the lottery) has little or no effect on youth problem gambling. In sum, the findings indicate that urban and rural youth share similar levels of risk for problem gambling, and point to the need for juvenile and family court systems to screen all youth for gambling problems, regardless of what circuit/jurisdiction the court serves.
- The scope of gambling-related crimes youth committed predicted the severity of gambling problems. The proportion of youth (29%) engaging in any gambling-related crime found in this study was higher than rates of gambling-related crime reported by school samples. Furthermore, the scope of crimes reported ranged from petty crimes such as shoplifting, to far more serious crimes of prostitution and pimping. These findings indicate that problem gambling and crime co-occur and that problem gambling may exacerbate the delinquency issues courts are already addressing.
- Substance use also significantly predicted problem gambling severity. In juvenile drug courts and family courts a main reason for youth involvement is possession or use of drugs or alcohol. Gambling and substance use co-occur often for these youth and they should be addressed together to conserve limited resources allotted to courts, as well as educate youth on the dangers of both.
- Although there was a limited response rate, qualitative data from this study seems to demonstrate the relationship between gambling, substance use, and crime, as many youth reported engaging in crimes to get money to gamble or use substances, or committed crimes while under the influence to get quick money for gambling. Interventions should be implemented because, for some youth, decreasing problem gambling may lead to a decrease in the delinquent acts they commit, specifically, those related to gambling. This decrease may, in turn, lead to a decrease in substance use within this population, given the cyclical nature of the three behaviors as reported in the qualitative data.
- Scope of gambling activities predicted problem gambling severity for both males and females; however the effect was stronger for females. This indicates that females who engage in multiple gambling activities may be at greater risk for developing problem gambling than both females who limit the type of gambling they engage in and males who gamble. Scope of gambling activities can be used as an indicator of potential problem gambling for both females and males, and those working with these youth should stay attuned to any mention of gambling activities these youth discuss. Furthermore, the notion of responsible gaming

and the dangers of gambling must be addressed with these youth to prevent them from developing serious and debilitating gambling habits.

- This study found that the impact of having a parent with problem gambling was significantly different for males and females, and the impact was more negative for males. Group discussions and treatment meetings may need to be different for males and females when gambling problems within the family unit are discussed. Furthermore, court staff should be aware that parental history of problem gambling can be a risk factor for all youth, although may be a larger risk factor for males. To better attend to these youth and their families, information packets should be sent home to all parents regarding the signs and dangers of problem gambling for youth and adults. Future research in this area should examine whether these gender differences hold up when youth report that other family members, friends, and significant others have gambling problems.
- Youth who had spent time in a juvenile detention facility had higher SOGS-RA scores than their peers. Furthermore, 70% of youth who had spent any time in detention centers gambled while there, indicating that gambling is a typical, socially accepted part of being in detention. Qualitative response to items about gambling in detention further explicated these findings. Because youth indicated that they gambled out of boredom and for snacks, more structure needs to be implemented into detention center facilities so that youth have healthy activities to engage them. Not only should youth be screened for problem gambling upon exiting detention centers, treatment for youth in detention needs to be provided and advertised to youth and their families. Furthermore, the only two female problem gamblers in the study had spent time in detention. Although the sample of youth who spent time in detention centers was quite small ($n = 29$), this finding may indicate that experiences in detention centers may be a serious risk for developing problem gambling in females; however, more research is needed on this topic.
- Youth also reported having gambled with juvenile correctional officers, detention center staff. Detention centers need to have strict policies about gambling within their facilities and should implement these policies with consequences for youth and staff. Finally, only one participant reported seeking out help for problem gambling while in detention. Though based on a limited number of participants who reported spending time in detention, these findings suggest that treatment options for problem gambling may not be widely advertised by detention centers or even available. Again, youth in detention need to be made aware that treatment for any addiction or problem is available to them, and staff must be trained to handle these problems.

Conclusions

There is a dearth of research on problem gambling behaviors of youth outside school samples. Specifically, youth involved in juvenile and family courts are a unique and relevant population in which many risk factors for problem gambling are compounded (criminal activity, substance use). Although adolescence is a period of experimentation with risky behaviors, including gambling, the rates of problem gambling for this population are extremely high and worrisome. Presumably, problem gambling behaviors are just a “phase” for some of these youth and they will return to gambling without indication of a problem as they mature into adults. However, for those

youth who are involved in the criminal justice system, risk factors for developing a gambling problem are compounded, thus making prevention and interventions crucial for this population.

By educating court staff on relevant risk factors for problem gambling among youth they work with, such as spending time in detention facilities, gambling in a wide range of activities, being a male and ethnic minority, and having a parent with a gambling problem, early screening and intervention can get these youth the help and attention they need. By recognizing that crime, substance, use and problem gambling all go together, court systems can work towards addressing them in a holistic manner to save resources and time. Although youth problem gambling is an important issue in itself, affecting thousands of adolescents and young adults nationwide, brief curricula and interventions have been developed that can be incorporated into existing programs targeting substance use and other issues because they address over-arching concepts, such as life and coping skills in addition to specifics on safe gambling. Communities must share the burden of problem gambling with the juvenile justice system by increasing public awareness that gambling problems do affect youth and through getting youth involved in social marketing strategies themselves. The National Council for Problem Gambling (<http://www.ncpgambling.org/>) provides tools for parents, youth, treatment providers, and community members to get involved.

Limitations

- Although all juvenile and family courts in Georgia were contacted, they self-selected into the study; therefore, systematic differences may exist between courts that chose to be in the study and courts who refused participation. The same selection bias is true of the individual youth who chose to participate with their parent's permission. Because of the lack of a representative sample, the problem gambling rates and results found in this study may not be generalizable to other states and other courts.
- The cross-sectional design also is a limitation as it is able only to capture information at a single time point; it was not possible to assess how problem gambling rates and risk factors for these youth change and evolve over time. Furthermore, the sample size of 145 lent sufficient statistical power for detecting even relatively modest main effects in multiple regression analyses, but power for moderation analyses was limited
- The JJGS is a self-report measure, meaning that youth may be biased in how they answered the questions and may have been reluctant to divulge about their gambling behaviors, especially given the court/legal setting data collection took place in. Furthermore, the JJGS was also the only method of collecting data on both the independent and dependent variables in the study, thus effects might be inflated due to shared method variance.

Future directions

- An ecological approach to addressing problem gambling both for youth involved in the juvenile justice system and persons in the general community can work towards alleviating the negative outcomes that problem and pathological gamblers often face.
- At an individual level, youth who enter juvenile and family courts should be screened for problem gambling using the two-item Lie-bet measure during the initial intake and referred to appropriate treatment if necessary (Johnson, Hamer, Nora, Tan, Einstein, & Engelhart, 1988). Unfortunately, screening youth and discovering they may have a gambling problem

remains irrelevant unless proper treatment and interventions can be provided. For those states in which there are currently no professionals who have been trained to treat problem gambling, training sessions need to be developed, and the Juvenile Justice System should require that at least one representative per court participate in such a training to develop a competent workforce to treat youth problem gambling.

- Because court systems already address substance use and delinquency, and given the co-occurrence of these problems with problem gambling, it should not be resource intensive to include weekly sessions on identifying signs of problem gambling and how to remain a responsible gambler, as well as education on gambling probabilities and odds of winning.
- Such resources can be found at the National Council for Problem Gambling as previously mentioned; however, there are a number of brief interventions that have been developed and can be found online. Although they have not been proven evidence-based practices as of yet, they are available and can be used to begin the discussion about gambling with these youth. Examples include the Facing the Odds program (Harvard Medical School Division on Addictions, 2006), Clean Break (The McGill Youth Gambling Research and Treatment Clinic in Quebec, 2006) and The life skills, mathematical reasoning, and critical thinking curriculum (Turner, Macdonald, & Somerset, 2008). Those courts that are proactive about dealing with gambling problems will no doubt serve as models for other courts.
- In spite of the fact that many youth experience risk factors for problem gambling, most do not go on to develop a problem. Increasing awareness of gambling risks and problems associated with gambling can serve to change societal norms about problem gambling in youth. Additionally, campaigns involving youth and community members can allow youth to make their own decisions about gambling.
- Individual and group diagnoses and gambling interventions remain only a small part of the solution to such a widespread issue, and viewing problem behaviors among impressionable and vulnerable populations, such as children and youth, from a deficit and risk based perspective may be damaging and stigmatizing.

Appendix

Method

Participants

Participants included 145 youth (ages 12-18 years) currently involved in Juvenile, Juvenile Drug, or Family Drug/Dependency Courts in Georgia. Juvenile Drug Courts are courts that offer an alternative to imprisonment through a mandatory, structured program which consists of accountability, community service, and rehabilitation to break the addiction-crime cycle. Youth involved with Family Drug/Dependency Courts generally have suffered abuse and neglect at the hands of parents who are using and/or manufacturing illegal substances. There are currently 10 Juvenile Drug Courts and 11 Family Drug/Dependency Courts in Georgia (Judicial Standing Committee on Drug Courts, 2008). Additionally, there are eight Juvenile Courts listed in the Georgia.gov directory (Administrative Office of the Courts of Georgia, 2008). A total of 9 courts participated, including 1 Juvenile Court, 7 Juvenile Drug Courts, and 2 Family Drug/Dependency Courts and represented 10 different Georgia counties. Courts were identified by counties they served and were labeled as suburban, urban, or rural growth (University of Georgia College of Family and Consumer Sciences, Housing and Demographic Research Center; 2008). Not represented in the sample were courts located in “urbanizing” regions of the state, meaning an area with an expanding population due to the growth of viable job opportunities and infrastructure improvements (there were 2 juvenile courts in these types of communities).

Individual participants ($N = 145$) were between the ages of 12 and 18 years old and were mostly male (69%) (See Table 2). The majority of participants identified as being Caucasian (44.8%), with other racial/ethnic groups represented including African American (32.4%), Multi-racial (9.7%), Hispanic/Latino (7.6%), and Native American (1.4%). Four percent of youth did not report their race/ethnicity. The majority of youth was involved in a juvenile or juvenile drug court (78%) as opposed to a family court, and most lived with someone they identified as either their mother or father (85.5%). Youth mainly reported that receiving a high school diploma was their next educational goal (70.3%), although receiving a general equivalency diploma (8.3%), trade or technical certificate (4.1%), and joining the military (5.5%) were also endorsed. Finally, youth reported varying reasons for court involvement. The most common reasons included drugs (40%), fighting (12.3%) and truancy (11.6%). Other reasons listed included theft, gang involvement, weapon possession, ungovernable/unruly, runaway, and unsure.

Table 2

Participant demographics

		Frequency (N)	Percentage
Region	Urban	55	38%
	Suburban/Rural	90	62%
Gender	Males	100	69%
Age	12-15 years	67	46.2%
	16-18 years	78	53.8%
Race/Ethnicity	Caucasian	65	44.8%
	African American	47	32.4%
	Multi-racial	14	9.7%
	Hispanic/Latino	11	7.6%

Measures

Youth completed the Juvenile Justice Gambling Survey (JJGS), a composite measure including questions related to problem gambling behaviors and risk factors, substance use, delinquency, and consequences of problem gambling (See Appendix). Measures included are listed individually below.

Demographics. The first section of the JJGS included demographic questions. These included: age, gender, race/ethnicity, education, living situation, and reason for court involvement.

South Oaks Gambling Screen, Revised for Adolescents (SOGS-RA). The SOGS-RA (Winters, Stinchfield, & Fulkerson, 1993) is the most widely used assessment tool, specifically on youth in non-school samples (Lieberman & Cuadrado, 2002; Westphal, et al., 2000). Examples of the 12 SOGS-RA items include: *Have you ever gambled more than you planned to?* and *Have you ever skipped or been absent from school or work due to betting activities?* Responses to this measure are either affirmative (“1”) or negative (“0”). Scores are summed to create a total score, and respondents are placed into categories based on the DSM-IV criteria as outlined by the American Psychiatric Association (1994). On the SOGS-RA a score of 4 is indicative of problem gambling and a score of 2-3 indicates a person at-risk for developing a gambling problem (Winters, Stinchfield, & Fulkerson, 1993). Reliability for this study ($\alpha = .85$) as well as validity in other studies for the SOGS-RA have been documented (Winters, et al., 1993). Specifically, Winters, Stinchfield, and Kim (1995) found that SOGS-RA scores were significantly related to measures of gambling frequency and the amount of money gambled (construct validity), and scores significantly discriminated between regular and non-regular gambling status (discriminant validity).

The Denver Youth Survey. A selection of 19 items pertaining to delinquency and crime were selected from the Denver Youth Survey (DYS) (Huizinga & Esbensen, 1990). Youth were asked which behaviors they engaged in to pay gambling-related debt or to get money to gamble with ($\alpha = .92$). Items were summed to create a total “scope of gambling-related crime” variable. Items from these measures included: *Have you ever taken something from a store without paying for it?* and *Have you ever gone into or tried to go into a building to steal something?*

Additional items. Finally, additional questions were also developed by the researchers to inquire about suicidal ideation, substance use, types of gambling activities, and gambling behavior while incarcerated. These items reflected risk factors and correlates of youth gambling found in the literature, but that were rarely formally assessed for in youth gambling studies, specifically in a criminal justice population. Suicidal ideation was measured as a continuous variable with “0” reflecting never had thoughts about suicide and “4” representing suicidal thoughts almost every day. Furthermore, substance use was also measured as a continuous variable with “0” indicating no use and “4” indicating use almost every day. Values for tobacco, alcohol, and drugs were summed to create the total substance use score. Similar to the gambling-related crime scale, the gambling activities scale ($\alpha = .73$) was summed to create a total “scope of gambling activities” variable.

Open-ended questions were also included to gather qualitative information on gambling-related crime, gambling activities and motivation to gamble in juvenile detention. Questions included: *How were these illegal activities related to your gambling?* , *What types of gambling activities did you participate in while in juvenile detention?*, *What prompted your gambling*

while in juvenile detention?, and Is there anything else you would like to share regarding your experiences gambling?

Procedure

Courts were initially recruited to participate in the study by two Georgia State University researchers at the Georgia Annual Drug Court Conference held in May 2008. After the conference, email and phone call follow-ups were made to all 29 juvenile and family courts in Georgia. Of these courts, 10 courts declined participation, and 9 remained unreachable after ten unreturned contacts. Reasons given by court personnel for declining participation included reports of no problem with gambling; too busy to accommodate; and new court staff wanted to build rapport prior to asking youth to engage in research. Some Family Dependency Courts also did not work directly with youth, and thus chose not to participate. Finally, three courts initially agreed to participate, but did not cooperate in setting specific data collection dates.

Data collection occurred from October 2008 - March 2009. Courts that agreed to participate worked with the two researchers to set a specific date in which both youth and their parents would be present in some court-affiliated setting. Once a date was set, recruitment flyers were sent to the court for staff to post in general locations so that parents and children would be aware of the study prior to the set date.

Judges and court coordinators decided on convenient dates; specifically those in which youth and parents had to see a judge for progress updates, or when youth and their parents had to attend mandatory group treatment. The researchers met at a courthouse or treatment center and the presiding judge or researcher announced the research study, including the survey's confidentiality and compensation¹. Following the announcements, researchers approached families in a waiting area or classroom where parents and youth who volunteered to participate were given the parent consent and child assent forms. Following the consent process, youth were given the JJGS measure either in a separate room or the courthouse waiting room. The survey took approximately 20 minutes to complete. When youth had completed the survey, they were thanked and given a \$10 Target gift card for their time and participation.

¹ This study was funded by the Georgia Department of Behavioral Health and Developmental Disabilities from 2007-2009 and is part of a much larger initiative to address problem gambling in Georgia through research, public awareness, outreach, and workforce development.