

## OLDER ADULTS AND PROBLEM GAMBLING

Despite several studies finding that gambling decreases as one ages, older adults are an at-risk population due to the increased potential of adverse outcomes and problems related to gambling compared to younger populations. Fixed incomes, limited ability to make future earnings, decline in physical health, changes in cognitive functioning, and social isolation make older adults especially vulnerable to gambling related problems.<sup>1</sup>



Participation in gambling activities on a monthly or more frequent basis is associated with higher odds of having problems with gambling.<sup>2</sup>



Problem gambling in older adult populations is related to poorer mental and physical health.<sup>3</sup>

In a systematic literature review, life-long prevalence rates of problem gambling in adults 60 or older were found to be between **0.01% and 10.6%**.<sup>6</sup>



Casino bus tour usage among older adults (over age 55) is associated with higher odds of problematic gambling levels.<sup>2</sup> Additionally, older adults who engage in gambling as a significant part of their recreational activity are at a greater risk for problem gambling.<sup>4</sup>



Problematic gambling behaviors among older adult populations are hypothesized to emerge as a result of efforts to alleviate anxiety stemming from the loss of physical health, loss of social supports, in addition to the depression that emerges from these losses.<sup>5</sup>

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## PHYSICAL HEALTH AND PROBLEM GAMBLING

- Compared to older adults without a history of regular gambling, older adults who engaged in problem gambling behaviors were found to be significantly more to have past-year diagnoses of arthritis or angina.<sup>7</sup>
- Older adults (over age 55) who are classified as either being at-risk for problematic gambling or who engage in problematic gambling already, are significantly more likely to experience arteriosclerosis and any other heart conditions compared to older adults who do not engage in problematic levels of gambling.<sup>3</sup>



## MENTAL HEALTH AND PROBLEM GAMBLING

- Older adults (over age 55) who are classified as being at-risk for problematic gambling are significantly more likely to have a generalized anxiety disorder or a substance use disorder, compared to older adults who either do not gamble or who gamble infrequently.<sup>8</sup> Additionally, older adults who meet at least 1 criteria for a gambling disorder diagnosis are more likely to develop a mental illness.<sup>8</sup>
- In a large study of older adults, those who engaged in problem gambling behaviors were found to be significantly more likely than older adults who have no history of regular gambling to have mood (39.5% versus 11.0%), anxiety (34.5% versus 11.6%), and personality (43.0% versus 7.3%) disorders.<sup>7</sup>

Older adults classified by problem gambling screening instruments as at-risk or problem gambling are significantly more likely to have generalized anxiety disorder or a substance use disorder.<sup>8</sup>

## SUBSTANCE USE AND PROBLEM GAMBLING

- In a sample of over 10,500 older adults, those who engaged in problem gambling were found to be significantly more likely than older adults who have no history of regular gambling to have alcohol (53.2% versus 12.8%), nicotine (43.2% versus 8.0%), and drug (4.6% versus 0.7%) use disorders.<sup>7</sup>
- Older adults who gamble are roughly 2 times more likely to engage in alcohol use.<sup>9</sup>

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## DISABILITIES ASSOCIATED WITH OLDER AGE AND PROBLEM GAMBLING

A **disability** is a condition that causes functional impairment, limits activities, and restricts participation in some activities.<sup>10</sup>

Individuals receiving disability benefits have high rates of disordered gambling (26% according to one study<sup>11</sup>) and gambling behavior in this population is associated with poorer health functioning.<sup>11</sup>



### NEUROCOGNITIVE DISORDERS

**Parkinson’s Disease (PD):** The association between PD and gambling disorder is well documented in the literature.<sup>12</sup> Gambling disorder prevalence rates in persons with Parkinson’s disease (PD) range from 6% in PD patients not receiving dopamine agonist (DA) treatment to 17% among those on DA treatment.<sup>13</sup> The psychological profile of PD patients may have a role as a risk factor since impulse sensation-seeking personality traits and addiction proneness characterized PD patients who develop GD.<sup>12</sup>

**Alzheimer’s Disease and Related Dementias:** The association of PG with dementing disorders has been described in the case review literature. However, there is no comprehensive study of how many patients with dementia gamble problematically.<sup>14</sup>

**Huntington’s disease (HD):** Persons with HD may be a risk group for developing problematic gambling based on case reports in this patient population.<sup>15</sup> At this moment, it is unclear whether the scarcity of reports of gambling problems in the HD literature is caused by a lack of attention for this phenomenon, or whether there really is no increased prevalence of the disorder among HD patients.<sup>16</sup>

**Neurocognitive disorders** include Parkinson's disease, Alzheimer's disease, and related dementias, among others.

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## LONELINESS AND ISOLATION AND PROBLEM GAMBLING

- ◆ Loneliness and isolation are concerns among the older adult population. These concerns are amplified by findings that predict problem gambling in older adults are greater among those reporting loneliness.<sup>5,17</sup>
- ◆ Loneliness has been shown to account for part of the relationship between marital status and problem gambling for older men but not women.<sup>18</sup>
- ◆ Unpartnered older men are more likely to engage in gambling out of loneliness than women.<sup>18</sup>



## IMPORTANT CONSIDERATION: GAMBLING IS NOT NECESSARILY BAD FOR ALL OLDER ADULTS

- ◆ Gambling has been shown to be associated with some beneficial outcomes for older adults. Researchers have found:
  - Gambling is positively associated with social support among older adults.<sup>9</sup>
  - Gambling provides older adults with social engagement opportunities and entertainment.<sup>19</sup>
  - Among gamblers aged 65 years and older, it was observed that past-year gamblers reported more often good or excellent well-being compared with nongamblers.<sup>21</sup>
- ◆ Some studies have found that older adults with cognitive impairment are just as likely as those without cognitive impairment to report gambling and problem gambling behavior.<sup>20</sup>

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## PREVENTION AND TREATMENT OF PROBLEM GAMBLING

- **Prevention.** Because older adults are considered an at-risk population for gambling related harm, measures need to be taken to inform the public, gaming operators, and policies makers about best practices to prevent problem gambling among older adults:

Offer accessible leisure and entertainment alternatives in social settings; encourage older adult to balance gambling with other leisure activities; educate them on how gambling works (e.g., probability, random chance etc.); provide education on myths surrounding gambling (gambler’s fallacy, illusion of control); educate older adults n how to gamble safely (e.g., set limits, let losses go, form a budget); provide “problem gambling” warning signs; and encourage older adults to assess themselves with self- reports on problematic gambling levels.<sup>21</sup>

- **Treatment.** If an older adult develops a gambling problem, the literature suggests that problem gambling can be successfully treated with several different treatment modalities. As older adults with problem gambling tend to have other health conditions it is important to note that treatment for problem gambling has been found to be effective with individuals dealing with several different comorbidities. Engagement in treatment may be difficult for older adults with cognitive decline such as dementia, acquired brain injury, and Alzheimer’s disease. Treatment initiatives aimed at older adults need to examine problem gambling holistically, as there may be other disorders or medications to treat those disorders that might complicate, confound, or impact treatment.<sup>22</sup>

### Key Findings

- Evidence indicates that problem gambling among older adults is a significant public health issue in the United States and other developed countries.
- Problem gambling in older adult populations is related to poorer mental and physical health as well as substance use problems.
- Older adults are vulnerable to traumatic brain injuries, cognitive decline, physical and social changes making them susceptible to more severe problems related to gambling compared to younger peers.
- Despite our knowledge that gambling is a leisure activity of interest to older adults and this population is at-risk for developing gambling related problems, there is a substantial gap in our knowledge about prevention and treatment approaches for problem gambling that might be effective for older adults, with a specific lack of studies focused on prevention.<sup>22</sup>

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