RESEARCH QUESTIONS
How is problem gambling (PG) related to depression, victimization, and violence in a predominantly African-American female substance abuser population?

PURPOSE
Despite the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) citing an association between substance abuse and increased risk for problem gambling, this study is the first to explore and describe the association of PG with depression, victimization, and violence in a sample of out-of-treatment, female substance abusers who are predominantly poor, young, and African American.

HYPOTHESIS
Female substance abusers with PG would have significantly higher rates of depression, victimization, and violent exposure compared to those who are non-problem gamblers (Non-PGs).

PARTICIPANTS
A total of 605 females (average age = 36 years) were recruited through community-based outreach methods for participation in one of two HIV-prevention programs in St. Louis, Missouri. The sample was predominantly African American (80%).

PROCEDURE
Participants completed a computerized risk behaviour (e.g., childhood victimization, violence) assessment at baseline and were assessed for psychiatric disorders one week later. Participants then received HIV-prevention counselling and were re-interviewed at 4 and 12 months.

MAIN OUTCOME MEASURES
The Washington University-Risk Behavior Assessment, the Computerized Diagnostic Interview Schedule (C-DIS), and Violence Exposure Questionnaire. The measures assessed violence and victimization as well as lifetime major depression and other psychiatric disorders (e.g., gambling problems, Antisocial Personality Disorder, substance use).

KEY RESULTS
The majority of participants (70%) did not experience any gambling problems; however, 21% could be considered at-risk for problem gambling, and 9% could be considered problem gamblers (PG). In line with the hypothesis, there was a trend of PGs (including those classified as at-risk for PG; 30% of sample) having higher lifetime major depression rates than non-PGs; however, this difference was not statistically significant. A similar trend was found with regard to being a victim of violence. PGs reported more violent antisocial acts compared to non-PGs, but there was no difference between the two groups when it came to non-violent antisocial acts. Even after controlling for sociodemographic variables (e.g., age, education), Antisocial Personality Disorder participants were three times more likely to be PGs compared to participants who did not have Antisocial Personality Disorder.

LIMITATIONS
These results cannot be generalized to other populations (even to other samples of substance users) given the sample’s unique characteristics. The number of PG participants was relatively small and did not allow for separate analyses to be conducted. Also, these data were collected from existing data and combined across two studies that were not designed to examine gambling. Thus, the measures employed were not ideal.

CONCLUSIONS
Findings underscore the need for increased attention to the role of PG in the lives of minority female substance abusers, given that nearly 10% of them met criteria for lifetime DSM-IV Pathological Gambling Disorder. Results also show that Antisocial Personality Disorder (specifically tendencies toward violence in the form of using drugs before fighting) is predictive of PG even after controlling for sociodemographic factors.

KEYWORDS: gambling motivation, recreation, United Kingdom, gambling frequency, coping