

DSM-IV-MR-J# Criteria and Test Questions

To Identify Adolescent Problem Gambling

(#MR = Multiple response, J = Juvenile)

Dimension of Problem Gambling	Adolescent Criteria	Adolescent Test Questions	Response			
			Never	Once or twice	Sometimes	Often
1. Preoccupation	Preoccupied with gambling (e.g. thinking about gambling or planning next venture)	In the past year how often have you found yourself thinking about gambling or planning to gamble?	Never	Once or twice	Sometimes	Often
2. Tolerance	Needs to gamble with increasing amounts of money in order to achieve the desired excitement	During the course of the past year have you needed to gamble with more and more money to get the amount of excitement you want?	Yes		No	
3. Loss of control	Often spent much more money on gambling than planned	In the past year have you ever spent <i>much</i> more than you planned to on gambling?	Never	Once or twice	Sometimes	Often
4. Withdrawal	Restlessness or irritability when attempting to cut down or stop gambling	In the past year have you felt bad or fed up when trying to cut down or stop gambling?	Never	Once or twice	Sometimes	Often
5. Escape	Gambles as a way of escaping from problems or relieving dysphoric mood (e.g. feelings of helplessness, guilt, anxiety, depression)	In the past year how often have you gambled to help you to escape from problems or when you are feeling bad?	Never	Once or twice	Sometimes	Often
6. Chasing	After losing money gambling, often returns another day in order to get even ("chasing" one's losses)	In the past year, after losing money gambling, have you returned another day to try and win back money you lost?	Never	Less than half the time	More than half the time	Every time
7. Lies	Lies to family about gambling behavior	In the past year has your gambling ever led to: Lies to your family?	Never	Once or twice	Sometimes	Often
8. Illegal acts*	Committed unsocial or illegal acts, such as gambling with school dinner or fare money, stealing from the home or stealing from outside of the home	In the past year have you ever taken money from the following <i>without permission</i> to spend on gambling: School dinner money or fare money? Money from your family? Money from outside the family?	Never	Once or twice	Sometimes	Often
9. Risked job, education, or relationship	Has had arguments with family, friends, or others or truanted from school because of gambling	In the past year has your gambling ever led to: Arguments with family or friends or others? Missing school?	Never	Once or twice	Sometimes	Often
10. Bail out	N/A	N/A	N/A	N/A	N/A	N/A

*Adolescent version includes unsocial acts

Scoring System of DSM-IV-MR-J

DSM-IV-MR-J was developed for use with adolescents who have gambled in the past year. The items on the scale are scored as follows, based on the responses provided:

Item Number	“Yes” Answers (Responses which are designated with bold print on screening instrument)
# 1	“Often”
# 2	“Yes”
# 3	“Often”
# 4	“Sometimes” <u>OR</u> “Often”
# 5	“Sometimes” <u>OR</u> “Often”
# 6	“More than half the time” <u>OR</u> “Every time”
# 7	“Once or twice” <u>OR</u> “Sometimes” <u>OR</u> “Often”
# 8	“Once or twice” <u>OR</u> “Sometimes” <u>OR</u> “Often”
# 9	“Once or twice” <u>OR</u> “Sometimes” <u>OR</u> “Often”
# 10	N/A

⌘A respondent who scores four (4) “Yes” answers is classified as a “Problem Gambler.”

“It is increasingly the view of this author (S. Fisher) that a diagnosis of compulsive or pathological gambling is most appropriately made by the gamblers themselves, or by treatment professionals in a clinical situation. In a study of this kind, where individuals are “screened” for problem gambling *outside* of a clinical setting, the most appropriate term to use is *problem gambling*.”

Fisher, S. E. (2000). “Developing the DSM-IV Criteria to Identify Adolescent Problem Gambling in Non-Clinical Populations,” Journal of Gambling Studies 16 (2/3): 253-273.

SOGS-RA

(South Oaks Gambling Screen: Revised for Adolescents)

Please circle your answer.

1. How often have you gone back another day to try and win back money you lost gambling?	Every time Most of the time Some of the time Never	
2. When you were betting, have you ever told others you were winning money when you were not?	Yes	No
3. Has your betting money ever caused any problems for you such as arguments with family and friends, or problems at school or work?	Yes	No
4. Have you ever gambled more than you had planned to?	Yes	No
5. Has anyone criticized your betting, or told you that you had a gambling problem whether you thought it true or not?	Yes	No
6. Have you ever felt bad about the amount of money you bet, or about what happens when you bet money?	Yes	No
7. Have you ever felt like you would like to stop betting, but didn't think you could?	Yes	No
8. Have you ever hidden from family or friends any betting slips, IOUs, lottery tickets, money that you won, or any signs of gambling?	Yes	No
9. Have you had money arguments with family or friends that centered on gambling?	Yes	No
10. Have you borrowed money to bet and not paid it back?	Yes	No
11. Have you ever skipped or been absent from school or work due to betting activities?	Yes	No
12. Have you borrowed money or stolen something in order to bet or to cover gambling activities?	Yes	No

Scoring Rules for SOGS-RA

#1 "Every time" OR "Most of the time" = 1
#1 "Some of the time" OR "Never" = 0
#2-12: "Yes" = 1 "No" = 0

Calculations of Narrow Rates

Level 0 = No past year gambling

Level 1 = SOGS-RA score of 1

Level 2 = SOGS-RA score of 2 or 3

Level 3 = SOGS-RA score of 4

Calculations of Broad Rates

Level 0 = No past year gambling

Level 1 = Gambling less than daily and SOGS-RA Score = 0, OR, less than weekly gambling and SOGS-RA score 1

Level 2 = At least weekly gambling and SOGS-RA Score 1 OR gambling less than weekly and SOGS-RA score 2

Level 3 = At least weekly gambling + SOGS-RA Score 2 OR daily gambling

Winters, K.C., Stinchfield, R.D., & Fulkerson, J. (1993). Toward the development of an adolescent problem severity scale. Journal of Gambling Studies, 9, 63-84.

Ten Question Self-Assessment for Adolescents

1. Do you lose time from school due to gambling?
2. Have your grades dropped because of gambling?
3. Do you display intense interest in sports related literature or sporting events?
4. Do you make a few calls a week to sports phones, the lottery or contact gambling web sites?
5. Has gambling language or references increased in your conversation?
6. Do you flash large amounts of money or show an exaggerated display of clothes or jewelry?
7. Did you ever gamble to escape worry or trouble?
8. Have your family or friends noticed a change in your behavior or personality (e.g., irritable, impatient or sarcastic)?
9. Do arguments, disappointments or frustrations create within you an urge to gamble?
10. Did you ever do anything illegal to finance your gambling?

If after answering these questions, you think you need help...

Call 1-800-522-4700 The Kansas Problem Gambling Helpline

www.ksgamblinghelp.com

From: The New Jersey Council on Compulsive Gambling