

Beyond the Minority: Problem Gambling among Asian Americans and Pacific Islanders in California

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ABSTRACT

Gambling is not new to Asian Americans and Pacific Islanders (AAPI), but rather a long-standing social activity found in many Asian and Pacific Island countries and AAPI ethnic enclaves in California. Some people may gamble to a degree that causes harm to themselves, people close to them, or the wider community.¹ The California Office of Problem and Pathological Gambling directed the first ever gambling survey in 2006 to capture the extent and impact of problem gambling in the adult population of California. Administered by the National Opinion Research Center (NORC) at the University of Chicago, a random-digit-dial telephone interview was conducted with 7,121 adults living in California. This presentation will compare gambling behaviors between the 502 AAPI respondents and the non-AAPI respondents. Overall the lifetime prevalence rate of problem and pathological gambling for AAPIs is 2.6% compared to 3.7% for the total sample. In multivariate analyses, however, AAPIs who prefer using an AAPI language on a day-to-day basis have 2.8 times the odds of being problem/pathological gamblers as non-AAPIs. Thus, while overall prevalence rates are lower for AAPIs compared to non-AAPIs in California, less acculturated AAPIs appear to be at higher risk, suggesting a need for tailored screening and interventions.

BACKGROUND

Gambling in California

- ◆ Gambling = "placing a bet on an outcome of a game of skill or chance, or playing a game in which you might win or lose money of value."²
- ◆ Legal gambling in California (CA) includes state lottery, commercial card rooms, tribal casinos, horse race wagering, and charitable gambling.
- ♥ Expansion of legalized gambling in California has grown exponentially with revenues rising from \$2.5 billion in 1997 to an estimated \$13 billion in 2004.³

Defining Problem and Pathological Gambling

- ♥ Problem gambling = "gambling that significantly interferes with a person's basic occupational, interpersonal, and financial functioning."⁴
- ◆ Pathological gambling = impulse control disorder in DSM-IV and characterized by continuous/periodic loss of control, increased frequency and amounts, preoccupation of obtaining money to gamble, and continuation despite adverse consequences.
- ◆ Overall lifetime prevalence rate of problem and pathological gamblers in general U.S. adult population is between 2–5%.⁵

Asian Americans and Pacific Islanders (AAPIs) in CA

- ◆ In 2005, AAPIs made up 12% of the total California population with 4.5 million Asians and 245,000 Pacific Islanders.⁶
- ◆ Gambling can be traced back to the first Chinese and Japanese immigrants in CA in the early 1900s. Gambling, including cards or mahjong, is often considered part of the culture and a symbol of the AAPI ethnic identity.⁷

Past Studies of AAPI Problem and Pathological Gambling

- ◆ 1997 San Francisco NICOS's Chinese Health Coalition community survey: 15%=problem gamblers and 21%=path gamblers.⁸
- ◆ 2002 University of Connecticut's community survey: 59% of Laotians/ Cambodians/Vietnamese = path gamblers.⁹
- ♥ 2006 UCLA Gambling Studies Program's LA Casino survey: 10% of AAPI casino patrons = path gamblers.¹⁰

RESEARCH QUESTIONS

1. What is the lifetime prevalence rate of problem and pathological gambling among AAPIs in California?
2. What are some of the predictors or risk factors for being a problem or pathological gambler among AAPIs in California?

METHODS

- ♥ **National Opinion Research Center (NORC), University of Chicago** administered a random-digit-dial telephone survey of CA residents 18 years+.¹¹
 - From Oct. 2005-April 2006, telephone interviews conducted in English and Spanish; Interpreters available for AAPI languages.
 - Total of 7,121 CA adults participated in interviews; 502 adults identified as Asian American, Native Hawaiian or Pacific Islander (AAPI).
- ♥ **Secondary Data Analysis:** Descriptive statistics and logistic regression using Stata IC version 10.
- ♥ **NORC DSM-IV Screen for Gambling Problems (NODS)¹¹**—assesses for lifetime & past year: Score of 3+ indicates problem/pathological gambling.
- ♥ **Acculturation**—Three-item construct created from being AAPI or non-AAPI and/or preferring to use an AAPI or non-AAPI language in day-to-day activities.

RESULTS

Figure 1. AAPI's Continuum of Gambling Behavior (n=502)

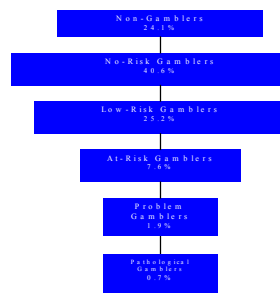


Table 1. Descriptive Statistics of Lifetime Problem/Pathological Gambling among AAPI Adults in California (n=502)*

	LIFETIME NODS			p-value
	Low Risk	At-Risk	Prob/Path	
Gender				
Male	74	17	9	p=0.045*
Female	68	27	5	
Age				
18-29 yrs old	58	35	9	p=0.017*
30-39 yrs old	76	15	9	
40-49 yrs old	75	16	10	
50-54 yrs old	75	25	—	
65 yrs old and over	70	18	13	
Birthplace				
US Born	64	26	10	p=0.180
Foreign-Born	74	19	7	
Day-to-Day Language				
Non-AAPI Language	71	25	4	p=0.007*
AAPI Language	70	17	13	
Education level				
HS diploma or less	43	46	11	p<0.000*
Some college/tech school	69	20	11	
College grad	77	18	5	
Grad or prof school	86	9	5	
Marital Status				
Married	73	20	7	p=0.800
Divorced/Separated/Widowed	66	25	9	
Never Married	67	25	8	
Employment				
Employed	77	18	5	p<0.000*
Retired	47	28	25	
Other	60	32	8	
Household Income				
<\$25,000	62	26	12	p=0.391
\$25,001-\$50,000	74	12	14	
\$50,001-\$75,000	72	24	4	
\$75,001-\$100,000	74	21	5	
Over \$100,000	69	25	7	
Smoking				
Smoker	63	27	10	p=.213
Non-Smoker	74	20	7	
Lifetime Depression				
Yes	54	30	16	p<0.000*
No	77	19	5	

* Weighted percentages, significance level at p<0.05.

RESULTS (continued)

Table 2. Odds** of Being a Problem/Pathological Gambler by Acculturation Level among CA Adults who Gamble (n=3,608)

	Odds Ratio	95% Confidential Interval	p-value
Acculturation			
High (Non-AAPI & uses non-AAPI Lang)	1.00		
Mid (AAPI & uses non-AAPI Lang)	0.93	0.33, 2.64	0.887
LOW (AAPI & uses AAPI Lang)	2.83	1.07, 7.47	0.036*
Gender			
Female	1.00		
Male	2.43	1.56, 3.77	0.000*
Education			
Less than HS	1.00		
HS degree	0.45	0.25, 0.82	0.009*
Some College/Tech School	0.39	0.22, 0.72	0.002*
College degree	0.29	0.14, 0.64	0.002*
Grad/Prof School	0.15	0.06, 0.37	0.000*
Employment			
Employed	1.00		
Retired	1.51	0.72, 3.26	0.271
Other	1.74	1.07, 2.84	0.026*
Lifetime Depression			
No	1.00		
Yes	2.83	1.88, 4.26	0.000*

*Level of significance at p<0.05 **Multivariate logistic regression analysis adjusting for covariates gender, age, education, employment, marital status, HH income, religion, depression, smoking, general health, & drinking.

DISCUSSION

- ◆ Among AAPI respondents, the lifetime prevalence rate of pathological gambling is less than 1% and the lifetime prevalence rate of problem gambling is 1.9%. The prevalence of lifetime at-risk/problem/pathological gambling is 7.6%.
- ◆ While the lifetime prevalence rate for AAPIs (2.6%) is lower compared to the total CA sample (at 3.7%), AAPIs who prefer using an AAPI language on a day-to-day basis are 2.8 times more likely to be problem/pathological gamblers than non-AAPIs. AAPIs who prefer using a non-AAPI language, however, are not more likely to be problem/pathological gamblers.
- ♥ Other predictors for being a problem/pathological gambler include gender, education level, employment, and meeting criteria for lifetime depression. Age, marital status, household income, religion, general health status, drinking and smoking were not significant predictors.

LIMITATIONS

- The public use data file aggregates the Asian American, Native Hawaiian and Pacific Islander groups into one category. Analyses stratified by sub-group may have revealed higher rates in some AAPI groups and lower rates in others.
- The AAPI sample was under-represented. Although sampling weights technically corrected for this under-representation, weights may not adequately account for potentially biasing causes (e.g., reluctance of some AAPIs to participate in telephone interviews).

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