From sin to sickness: A sociological history of the problem gambler

Bo Jason Bernhard

University of Nevada, Las Vegas
INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps.
FROM SIN TO SICKNESS: A SOCIOLOGICAL HISTORY
OF THE PROBLEM GAMBLER

by

Bo Jason Bernhard

Bachelor of Arts
Harvard University
1995

Master of Arts in Sociology
University of Nevada, Las Vegas
1999

A dissertation submitted in partial fulfillment
of the requirements for the

Doctor of Philosophy in Sociology Degree
Department of Sociology
College of Liberal Arts

Graduate College
University of Nevada, Las Vegas
May 2002
The Dissertation prepared by
Bo Jason Bernhard

Entitled
From Sin to Sickness: A Sociological History of the
Problem Gambler

is approved in partial fulfillment of the requirements for the degree of

Doctor of Philosophy in Sociology

Examination Committee Chair

Dean of the Graduate College

Examination Committee Member

Examination Committee Member

Graduate College Faculty Representative
ABSTRACT

From Sin to Sickness: A Sociological History of the Problem Gambler

by

Bo Jason Bernhard

Dr. Fred Preston, Examination Committee Chair
Professor of Sociology
University of Nevada, Las Vegas

Long before medical and psychological experts determined that problem gambling qualified as a mental illness, moral experts determined that this problem could be "diagnosed" as a sin. This research examines pre-1915 gambling literature to determine the ways in which people who gambled too much were identified, named, and "treated" socially. Interestingly, virtually all of our current diagnostic criteria were identified by moral thinkers hundreds of years ago. Implications for the sociological history of problem gambling, the sociology of mental illness, and the sociology of religion and morality are discussed.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
<td>iii</td>
</tr>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>vi</td>
</tr>
<tr>
<td>CHAPTER 1 INTRODUCTION: NOTES ON THE SOCIAL CREATION OF THE PROBLEM GAMBLER</td>
<td>1</td>
</tr>
<tr>
<td>CHAPTER 2 LITERATURE REVIEW</td>
<td>8</td>
</tr>
<tr>
<td>The Medical Model</td>
<td>11</td>
</tr>
<tr>
<td>Castellani and <em>The Making of a Medical Problem</em></td>
<td>15</td>
</tr>
<tr>
<td>CHAPTER 3 METHODOLOGY</td>
<td>22</td>
</tr>
<tr>
<td>Historical Sociology as Methodology</td>
<td>28</td>
</tr>
<tr>
<td>The Case Study Method: Diagnosing Gambling,</td>
<td>33</td>
</tr>
<tr>
<td>Diagnosing Gamblers</td>
<td></td>
</tr>
<tr>
<td>Why Were These Words Recorded? Opening Passages</td>
<td>35</td>
</tr>
<tr>
<td>CHAPTER 4 THE DSM PATHOLOGICAL GAMBLING CRITERIA:</td>
<td>42</td>
</tr>
<tr>
<td>A HISTORY OF VOICES, A HISTORY OF VICES</td>
<td></td>
</tr>
<tr>
<td>The Diagnostic and Statistical Manual</td>
<td>42</td>
</tr>
<tr>
<td>Criteria Listed in the DSM Pathological Gambling Entries</td>
<td>48</td>
</tr>
<tr>
<td>Crime and Illegal Acts</td>
<td>53</td>
</tr>
<tr>
<td>Money Problems, Money Solutions: Debt, Credit, Borrowing, and Bailouts</td>
<td>68</td>
</tr>
<tr>
<td>Family and Friend Problems: Destruction in the Immediate Social Circles</td>
<td>74</td>
</tr>
<tr>
<td>Preoccupation</td>
<td>86</td>
</tr>
<tr>
<td>Chasing</td>
<td>89</td>
</tr>
<tr>
<td>Tolerance</td>
<td>92</td>
</tr>
<tr>
<td>Loss of Control</td>
<td>95</td>
</tr>
<tr>
<td>Escape</td>
<td>100</td>
</tr>
<tr>
<td>Lying</td>
<td>102</td>
</tr>
<tr>
<td>Restlessness, Irritability, and other Affective Issues</td>
<td>106</td>
</tr>
<tr>
<td>Work Problems</td>
<td>110</td>
</tr>
</tbody>
</table>
ACKNOWLEDGMENTS

This dissertation is for my mom, who is so special she gets this entire page to herself.

I hope to thank the rest of you in person, and across lifetimes.
CHAPTER 1

INTRODUCTION: NOTES ON THE SOCIAL CREATION OF THE PROBLEM GAMBLER

"The ruinous tendencies of certain vices have already been made known; the alarm has been sounded – the war has been waged. Their abominations have been revealed; and they, themselves, have shrunk from the scourge of truth and cowered beneath the scrutiny of indignant rectitude. But there is one Sin – one giant Sin – which has slain, and is still slaying, insidiously, its thousands – and its tens of thousands... The gambler enters his profane retreat and immolates money – money! that is a mere appendage of his sacrifice – he immolates principle, self-government, humanity, reason and all that makes life worth having; immolates all at the accursed shrine of greedy, baseborn covetousness. But who has raised against him the loud and protracted note of accusation? Who has lifted up the voice of impetuous and successive remonstrance? Who has assiduously burst open his haunt and unveiled the deeds wrought there? Who has brought against this vice the strong array of associated and virtuous hostility?"

-- Samuel Hopkins, Pastor of the First Congregational Church delivering a sermon on "The Evils of Gambling," April 19, 1835

Historically, the institution of religion has played a major role in defining and interpreting the lives of those who gamble – and especially those who gamble to excess. In fact, after reviewing the surviving historical literature I am convinced that no other social institution – not even any medical or psychological institution – has
made as substantial a contribution to our current understanding of the "appropriate" interpretive parameters for these lives.

How is this possible? After all, we are all aware – even if only peripherally – of the vast power of medical institutions, and "pathological gambling" has been accepted in the official diagnostic literature since 1980.

Some answers can be found deep in a "sociological history." Sociological histories, predictably enough, incorporate a sociological perspective into a journey through historical literature. By examining rare documents that outline the ways in which religious and moral views on gambling have been expressed historically, we can learn a great deal about the social creation of what we now term the "problem gambler."

As it turns out, long before medical experts embraced "pathological" gamblers as legitimately "sick," moral-religious experts were loudly and publicly labeling gamblers (and especially those who gambled excessively) as uniquely evil members of society. Importantly, these historic interpretations did not fade away, never to be heard from again. In fact, they remain prominently and powerfully "present" today, echoing throughout our own public and private discourses on gambling behavior.

These discursive contributions, of course, have not always been friendly ones from the perspectives of those who gambled too much.
Early moral-religious interpretations of their gambling activities tended to be colossally less than sympathetic, and this examination will present historical evidence that suggests that the church was perhaps the last place a problem gambler would have turned to when in need of a safe haven. The words of many of the sermonizers quoted here are often scathing and largely unequivocal. Some of this rhetoric suggests that excessive gamblers -- those whom we would likely label as “problem” gamblers today -- were to be loathed and condemned. This is particularly ironic given the religious right's public embrace of problem gamblers as a current-day political cause.

Unfortunately for the problem gambler, it is not as if these developments serve as mere historical footnotes today. In speaking with problem gamblers over the years, I have often encountered a specific line of questioning when patients are first exposed to the received medical view of their affliction.

Pathological gambling, they are informed, is now rigorously researched and widely accepted among mental health professionals as a largely medical disorder. Prestigious medical schools from Yale to UCLA are spending millions of dollars on research that explores this affliction's neurological and biological components. These medical experts are convinced that at least some of the foundations of pathological gambling can be illuminated via a medical model – rooted in the internal, and more specifically in genetics or biology.
Most problem gamblers find these medical explanations to be a source of profound relief. After all, being diagnosed as "sick" is preferable to being diagnosed as "evil," and upon reflection, many problem gamblers begin to embrace a friendlier conception of their own culpability. They begin to think about medical interpretations of their past behaviors, perhaps for the first time, but they are usually puzzled by one implication of these developments.

If pathological gambling is a medical problem, they often ask, then why is it that I am treated as a moral one?

It is this astute question – posed to me by the subjects of my research – that I attempt to provide a few answers to in this essay. A "short answer" might be simply this: because the older, more established religious interpretations of problem gamblers have generated more momentum and power than the relatively youthful medical interpretations that have developed in recent years.

In the social battlefields of public discourse, twenty years of medical interpretations do not somehow magically erase the inertia of hundreds of years of influential religious interpretations – especially when the current medical interpretations rely so heavily on the historic, moral ones. No matter how much we hail the recent advances of problem gambling science and medicine (and to be sure, many of these advances merit the hailing), it could easily be argued that they have not yet captured the public's intellectual and emotional
imagination in quite the same way that these moral-religious understandings have. We no longer think of problem gamblers as “sinners,” per se, but we do retain much of the moral disdain that was introduced and cultivated long ago by the kinds of thinkers examined in this dissertation.

These historic moral entrepreneurs attacked gambling in general, but when they start to talk about specific gamblers, the portrayals begin to sound remarkably similar to the profiles of individuals we now term "problem gamblers." Although it is always potentially challenging to project current-day definitional frameworks onto the past, I believe that in this instance, the preponderance of the evidence supports strong speculations on connections between the yesterdays and the todays of problematic gambling. To my reading, many of today's psychological understandings of the "problem" appear to be substantially derived from yesterday's religious interpretations of the "sin."

This project started as a paper I presented at the Pacific Sociological Association Meetings in Portland in April of 1999. In a session provocatively titled "Demons, Clowns, and Other Others," I presented the earliest foundations of this research to a packed house of apparently interested sociologists. I was startled by the enthusiastic attendance, but I confidently proceeded to deliver what I believed to be important theoretical and empirical work. The paper
was well received, and I was feeling fairly proud of myself until the second presenter got up and it became immediately apparent why most of the attendees were at the session. This second academic was speaking to "The Sociology of the Geek, Nerd, and Dweeb," a theme which resonated wildly with the standing room only crowd of academicians. It was like a church revival in there – a spirit and tone not unfamiliar to the themes of my own paper.

Amused and only slightly disheartened, I put the paper away, but over the years, in conducting research on problem gamblers, I kept finding that these historic characterizations seemed to reverberate throughout my subsequent work. Whenever I heard descriptions that purported to outline precisely how we might "identify" or "treat" problem gamblers, I thought of the thunderous bellows of a previous generation of thinkers. Whenever I heard problem gamblers describe the ways in which they were socially received by their families, friends, employers, and others, I was reminded of the sociological history I had previously examined.

In the end, these historical voices were too loud and too resonant to ignore, and I returned to their words as the foundation for my final graduate project. With the assistance of the University of Nevada, Las Vegas' library staff, we discovered far more documents than we knew existed. As with all of my favorite projects, the research began to follow me around. It got to the point where, in reading
through these incomparable scraps from history, I could "hear" these booming voices shouting out their moral objections to gamblers' lives. These voices were often very eloquent, occasionally humorous, and without exception passionate. The stories they tell allow us to see, perhaps for the first time, an extended sociological history of the problem gambler.
CHAPTER 2

LITERATURE REVIEW

One of the richest theoretical and empirical traditions in sociology, the sociology of deviance, attempts to explain and understand those who violate norms established by a given society. At base, this dissertation is an examination of the social processes of "problem defining," a topic long relevant to deviance theorists. Law enforcement officers, legislators, judges, psychologists, physicians, moral-religious thinkers, and even sociologists have attempted to define what, exactly, constitutes a "problem" population.

In sociology, the focus has centered on the social construction of morality and its attendant "rules." Sociologists like to analyze the degree to which moral judgments are buried deep within other, more "official" rules for behavior. In Becker's words, "(r)ules are the products of someone's initiative and we can think of the people who exhibit such enterprise as moral entrepreneurs" (1963:147). Becker divides moral entrepreneurs into two categories: rule creators and rule enforcers. Rule creators are those who act, often passionately, to
address some perceived "evil" in society. Although many rule creators are motivated by religious passions, not all are to be found in the pulpit (though according to Becker's thinking, all are motivated by "holy" thinking in the broadest sense). Rule enforcers, meanwhile, act to police the acts of the deviant, and are generally personified by law enforcement agencies (Becker 1963:147-163).

This work will focus on the category of "creators" – those who "make the rules" – as well as their ultimate relationship with those who run afoul of their notions of proper behavior – in essence, those who "break the rules." In this sociological history of the problem gambler, rule creators of long ago constructed a framework for understanding problem gamblers that remains resonant today – even if this framework now largely falls under a different institutional umbrella.

In this research, the concept of moral entrepreneurship will be used as a theoretical tool, to engage and assess the social processes associated with what many now call “problem gambling.” I argue that rules-creating moral entrepreneurs (in this instance, religious leaders and religiously-inspired moralists) outlined specific ways in which we were to identify – and then interpret and even “treat” – those who gambled too much. I make the further claim that the actions of these entrepreneurs remain influential today, as evidenced by the existence
of vestiges of their characterizations in the "pathological" gambling diagnostic literature today.

Often, medicalization processes rest upon universalizing assumptions of human behavior. Conrad and Schneider put it this way:

Moral entrepreneurs and other champions of deviance definitions can operate in any social system that has power and authority to impose definitions of deviance on the behaviors and activities of its members. One could expect to find champions of deviance definitions in schools, factories, bureaucracies, and religious and medical organizations - virtually in any system that has rules and authority... With medicine this application even transcends social and national boundaries. The labeling of a disease or illness, the medical designation for deviance, is usually considered to have universal application (1992:23).

In the problem gambling field, sufferers in diverse socio-cultural (and even historical) locations are assumed to possess similar characteristics. Like many historical sociological works, this dissertation will attempt to challenge these kinds of universalizing assumptions. This research represents an attempt to re-contextualize our understandings of problem gambling behavior - a topic of inquiry that has often been "de-contextualized" by the medical perspectives that inform our current understandings.
The Medical Model

As Conrad and Schneider astutely note, there are a number of sound reasons to challenge the assumptions of the medical model. For one thing, it has:

... emphasize(d) the internal and biophysiological environment and deemphasized the external and social psychological environment... the medical model of deviance locates the source of deviant behavior within the individual, postulating a physiological, constitutional, organic, or, occasionally, psychogenic agent or condition that is assumed to cause the behavioral deviance (1992:35).

The authors find this potentially problematic because "all medical designations of deviance are influenced significantly by the moral order of society and thus cannot be considered morally neutral" (ibid). These moral-medical (and distinctly sociological) factors will be examined in detail in this research.

Because some of the arguments presented here may be interpreted against a backdrop of the "medical model," the concept merits some introductory discussion here. In questioning whether we want today’s medical and psychological definitions to parrot yesterday’s moral objections, I do not wish to suggest that we need jettison today’s entire medico-psychological enterprise. On the contrary, I present the argument that despite their flaws, these professional clinical interventionists still represent our "best professional hope" at rehabilitating the problem gambler. What is more, I do not wish to suggest that all clinicians adhere to a strictly
medical model; however, even those who do not support a rigid medical interpretation find themselves (and their social worlds) profoundly influenced by the power of medical discourses.

The definitions and scope of the so-called medical model remain highly controversial. As is often the case with hotly contested debates, opponents characterize the "other side" as a straw figure, with little room for agreement in the middle ranges. In my experience, those who criticize the medical model describe an inflexible "model" that few physicians or psychologists would uncritically embrace. On the other hand, those whose livelihoods depend on the medical model often treat its detractors with unabashed scorn, claiming that these critics are patently uneducated, unscientific, or misinformed.

Listen to these sociological definitions of the medical model, each maintaining that they reflect the "true" nature of this approach:

"(The medical model suggests that) mental disorder is an illness that can be treated like any other disease" (Eitzen and Baca Zinn 1994:528).

"The medical model suggests that we can clearly define what mental illness is and unambiguously state that certain behaviors are pathological" (Sullivan and Thompson 1994:132).

"(The medical model) approach to understanding mental disorders is to view them as having the same basic nature as physical disorders" (Sullivan and Thompson 1994:129).

These quotes are representative of the kinds of definitions that criticize the medical model as overly intrusive, imposing, and inflexible. This model is often invoked in discussions of the field of
mental illness, where it is thought to be particularly (and inappropriately) pervasive. Having interacted with a wide variety of mental health professionals over the past eight years, however, I have yet to encounter a single one who believes at his or her core that the physically diseased and the mentally diseased are to be treated in the "same" way. Nor is this process an "unambiguous" one: in fact, in the introduction to their influential and widely-used textbook on abnormal psychology, Davison and Neale specifically state that "to study abnormal psychology, we must have what might be called 'great tolerance for ambiguity,' an ability to be comfortable with very tentative, often conflicting pieces of information" (1994:5). The authors also claim that "we share a strong commitment to a scientific approach but at the same time appreciate the often uncontrollable nature of the subject matter," and they insist upon interpreting the "abnormal" through a diverse assortment of Kuhnian paradigms (ix).

This hardly sounds like the staunch white-coated Dr. Science that is caricatured in some sociology texts. As is the case with the best scientific approaches, Davison and Neale note that conclusions are often tentative – and should always be open to counter-interpretations. While I am not saying that we cannot critique these "medical model" matters (an opinion that many of my colleagues in psychology share, incidentally), I do believe that many of the most
common medical model critiques are lacking in imagination and empirical rigor.

On the other hand, the counter-attacks coming from psychiatry (and science writ large) are often less than nuanced as well. Those who characterize critics of the medical model as simply “ignorant” or “unscientific” neglect the very important contributions that these kinds of challengers make.

One could even argue that these critiques of science and medicine in fact represent science at its finest, in that they are constantly questioning the field’s assumptions, constantly refining the field’s own measures, and constantly allowing for a more democratic and critical process to prevail. Ideally, this process will allow our tools and theories to become more refined over time.

In sum, my reading of these debates leads me to believe that sociological criticisms of "the" medical model are not irrelevant – though they can be, on occasion, unimaginative and poorly supported. One of the primary claims of this dissertation is that sociology can enhance our understanding of the worlds commonly considered to fall under the domain of psychology and/or medicine. These two fields can effectively supplement each other – which means that occasionally, they must criticize each other.

Toward these ends, I believe that within the spheres of mental illness studies, productive social change is best effected by bringing
the fields of sociology and psychology together – not by engaging in
the shrill talking-past-each-other pastime that so often dominates the
discourse.

This reminder is a vital one in problem gambling studies, which
has recently taken a distinct turn toward the biomedical. Though a
broader-based, sociologically-informed approach would be complex,
we can and must incorporate sociological understandings into our
psychological and psychiatric practices.

In my view, we might attempt to better understand these
sociological, psychological, and medical models by considering them
as frameworks of sorts – well equipped to reveal certain aspects of
these behaviors, but perhaps limited in their ability to bring others
into focus. While the medical model sharpens our ability to perceive
the local and the immediate causes of human suffering, the
sociological model helps us paint a more holistic portrait of these
afflictions.

Castellani and The Making of a Medical Problem

Castellani (2000) addresses many of these science and medicine
matters in Pathological Gambling: The Making of a Medical Problem,
the most comprehensive published attempt at presenting a history of
the problem gambling field. To my (admittedly sociological) mind,
Castellani’s research (and his approach to problem gambling in
general) is potentially of profound importance. His unique background as a clinician-researcher-sociologist has allowed him insight into the ways in which medical-clinical worlds intersect with social and sociological ones.

Castellani characterizes the pathological gambling field as careening haphazardly down a decidedly medical pathway. Castellani argues that the medical types have had their run, and that it is time for those representing a wider range of discourses to be included in the construction of knowledge about this problem. Probably the most important theoretical term in his analysis is "discourse," which he uses to describe the ways that we think about, talk about, and "do" medicine. The medical discourse, according to Castellani, has become too dominant in the problem gambling field, and it is time for other perspectives – including sociology's – to be incorporated into our understandings of this disorder.

While these contentions are nothing short of revolutionary in terms of their importance to this field, and Castellani's voice is an articulate and refreshing one, he stumbles a bit when he attempts to provide an alternative "solution" to this problem. He is not alone in this tendency: sociologists (and social critics in general) have a long history of faring better at the "deconstruction" component of critique than they do with the "construction" part. Castellani's construction model calls for an approach he terms the "bio-psycho-social" model.
This model is designed to incorporate a number of discourses into the processes of expertise production. Presumably, this approach will allow treatment professionals (or anyone else interacting with problem gamblers, for that matter) to be able to better address the diverse issues facing problem gamblers.

What Castellani apparently fails to notice, however, is that the "bio-psycho-social" model has long been used to describe the dominant approach in clinical psychology. He never notes this parallelism in his book, and he never attempts to specifically differentiate his approach from the one outlined in many introductory psychology textbooks. The model he suggests sounds more like a bio-psycho-social-sociological model, but his use of a previously-claimed term to describe it is problematic. While attacking the one-dimensionality of psychology and psychiatry, then, Castellani appears to unwittingly suggest a solution that on the surface may not present much by way of improvement.

Because problem gambling is still a relatively small field, I have spent a good deal of research time with many of the same clinicians Castellani has, and while their sociological acumen is less than stellar (due to differences in training, perhaps), they are not always that far off from incorporating broader views into their psychological practices. As a result, I am less pessimistic than Castellani is that a more sociological understanding can be incorporated into treatment setting.
At times, Castellani sets up a reductionistic straw man he calls the medical model and then a) attacks it for being reductionistic and b) marvels at its straw-like character. This is an easy trap to fall into as a sociologist — after all, we tend to revel in mocking the social tendencies of the powerful — but it is one trap that I hope to avoid in this work.

Other critics point out that Castellani has a tendency to uncritically accept arguments that are anti-gambling in nature, a serious weakness in a field plagued by unscientific work that bashes gambling (Volberg 2001b). This is particularly problematic when it is contrasted with the impressively critical perspective he maintains when examining the assumptions inherent in pro-gambling rhetoric.

Perhaps most importantly in the context of this research, I fear that Castellani, like many who spend much of their time in medical and academic centers, tends to overestimate the reach and power of the relatively small number of medical experts in the problem gambling field. While these experts (and their important medical interpretations) serve as central, even heroic, characters to those of us who devote our careers to studying these behaviors, it is important to remember that the general public could often care less about these “founding figures.” What is more, despite the increasing amount of attention that is devoted to this topic, the public remains largely unaware of medical interpretations of those who gamble too much.
Moral interpretations, on the other hand, are far more easily and readily “accessed” by the public when they think about problem gamblers. These moral discourses have proved far more powerful over time, and serve as a key subject of this study – especially as they have captured the public’s emotional and intellectual imagination.

Much as criticisms of the medical model need not slay the entire medical monster, I do not mean for these criticisms to imply that the rest of Castellani’s work has little use. On the contrary, his critique serves as an important contrast to the psychiatric and psychological perspectives that dominate the field.

For example, Castellani effectively argues that “something had to be done. Someone had to sit down and reconstruct the history of pathological gambling: determine its origins, establish its historical course” (2000:5). Later, he advocates “more sociologically minded research” in order to illuminate “broader-scale issues” (134) that shape the lives of those who fall under the “problem gambling” umbrella. These arguments resonate with my own thinking, and these kinds of broader-scale issues will be examined in this research.

Moreover, I have found the concept of “discourse” to be extremely useful as a framework for understanding these social and sociological processes. While the term has been used to mean a wide variety of things, Castellani’s conceptualization is useful here because it pertains directly to the subject matter. In his book, Castellani
outlines his definitions of the discursive worlds of the problem gambler as such:

There is no such thing as a single discourse having a single effect; there are only discourses. There is no such thing as action, only interaction. As such, each and every discourse we construct, including the medical model of pathological gambling, exists only as one possibility within a larger field of already existing discourses. There is no one individual discursive will or force, only a play of forces, a play of discursive actors. This is how I interpret my work. I call my interpretive framework discursive negotiations (2000:12).

Put simply, the term "discourse" is used when referring to the social study of language and its application. Discourses are often organized around common assumptions. In the problem gambling field, for instance, the discourses are often organized around common assumptions of universality. This concept of discourse provides a fruitful analytical alternative to strictly medical perspectives, and it will be employed as a tool of sorts throughout this research.

While Castellani notes that a wide variety of discourses contribute to our public and professional understandings of this "disorder," he spends very little time on a group of thinkers who have spoken to these matters for hundreds – even thousands – of years. If we were to rely solely on this historic account, we would only have a story dating back to approximately 1980 (when the disorder was first included in the Diagnostic and Statistical Manual). The story told here extends to times and places well beyond those commonly associated with this affliction.
Long ago, and for many, many years, the only people who contributed to these discourses were moral – not medical – leaders. Without understanding the discursive contributions of these moral entrepreneurs, we cannot adequately understand the so-called “medical discourse” – or any other discourse on problem gambling, for that matter.
CHAPTER 3

METHODOLOGY

"All sociology worthy of the name is 'historical sociology'"


In attending most of the increasing number of conferences that pertain to problem gambling matters, I have witnessed first-hand the dominance of psychological, psychiatric, and medical interpretations of problematic gambling behaviors. Despite the fact that sociological matters dramatically influence gambling behaviors (it seems obvious, after all, that problem gamblers in Las Vegas find themselves in a very different sociocultural place than do those in, say, Latvia or La Paz), relatively few academics with sociological backgrounds contribute to the current academic debates on problem gambling.

It need not be the case that those with psychological training present the dominant voices of expertise in these debates, of course. This analysis will attempt to add a sociological as well as a historical voice to our understandings of these complex behaviors.
What is less commonly understood about the problem gambling field is that its current state of affairs is not some "sort of autonomous creation," as Mills (1959:151) puts it. Rather, our current understandings of problem gamblers come from somewhere, and that "somewhere" can be effectively interpreted through lenses that are both historical and sociological. Because our current ways of thinking did not just magically appear on the discursive scene, we must complement our existing methodologies with those that allow us to see beyond-the-individual and before-the-now processes.

Volberg, who has long served as the problem gambling field's leading epidemiologist, nevertheless recognizes that quantifiable approaches need to be supplemented by methodologies that allow us to see phenomena not easily measured by numbers:

... many of the questions now being asked about gambling and problem gambling cannot be answered by single surveys... As we move forward, it will be important to use a variety of methods to provide insights that no single approach can yield. Since all scientific methods contain biases, multiple research techniques (including experimental, clinical, historical, ethnographic and survey approaches) are needed to resolve puzzles and discrepancies as well as to provide a much-needed depth of perception to the field of gambling studies (1996:126).

This "call" to a broadened methodology is always relevant, but it is perhaps most evident in a field that challenges some of our basic assumptions about more conventional methodologies. Volberg is very much aware that her common method of choice, the telephone survey,
can prove problematic when applied to a complex "real-world" social issue like problem gambling.

When I inform problem gamblers that we use telephone survey approaches to estimate prevalence, many find it amusing that academicians assume that their methodologies can effectively apprehend these behavioral phenomena. Problem gamblers, after all, are notoriously difficult to catch at home, and when they are at home, they are often extraordinarily skeptical of strangers who call them. After all, problem gamblers tend to accumulate debts, and one never knows if the stranger on the phone is calling to seek restitution. These methodological challenges have been exacerbated by the new "Caller ID" technologies, which allow anyone to "block" calls from strangers.

What is more, problem gamblers are accustomed to lying to everyone around them, and it is perhaps naïve to think that a survey interviewer would somehow be able to penetrate this well-crafted web of deceit. Because of these challenges, we need to realize that problem gambling, like all social and behavioral phenomena, should be approached from a variety of different methodological perspectives. Doing so not only broadens (and specifies) our understandings, it allows a more comprehensive human portrait to emerge.

Before I delve into the specific, "historical sociology" strategy I employ in this project, I wish to state that this is hardly the lone tool
that I rely on in drawing my conclusions. In fact, in a very meaningful way, the ideas and convictions I present in this work are derived from my own research experiences with each of the methodologies Volberg alludes to in the above passage.

For instance, I have served as the local site director for a large experimental drug study, and I am currently beginning work on a second one. Both of these projects were sponsored by wealthy and powerful drug companies wishing to examine the neurochemical and behavioral effects of drug treatments on problem gambling populations, and my experiences with those projects have profoundly informed my understanding of the "hard scientific" and medical approaches to this problem.

In pursuing other projects, I have spent hundreds of days and thousands of hours in clinical settings, directly observing problem gamblers and their families. These observations have convinced me that the "medical model" is not as oppressive as some sociological critics claim. After observing these clinical sites, I devoted half of my master's thesis to an ethnographic account of clients in treatment (Bernhard 1999). This ethnography examined the ways in which problem gamblers came to understand their own experiences "in action" (out gambling) and "in traction" (in the patient role).

Through the Howard Cannon Center for Survey Research at the University of Nevada, Las Vegas, I have worked on six different
surveys that have explored gambling and problem gambling behavior. These surveys have explored the gambling behaviors of senior citizens, homeless individuals, and the general population of Southern Nevada. I have come away from these research experiences convinced that, for all of its flaws, no other methodology in our current social scientific arsenal allows us to "get at" the macro level issues like surveys do.

All of these methodologies spend a great deal of time at the "today" level, with hopes of giving us a better snapshot sense of where problem gamblers are. Most of sociology, in fact, stays planted in this "snapshot" terrain. The problem with these approaches, to again quote Mills, is that "without the use of history and without an historical sense of psychological matters, the social scientist cannot adequately state the kinds of problems that ought now to be the orienting points of his (or her) studies" (1959:143). We might even be so bold as to suggest, alongside Professor Mills, that "every social science – or better, every well-considered social study – requires an historical scope of conception and a full use of historical materials" (ibid).

This sociological and historical expedition will attempt to take full advantage of a special collection of historical materials in order to provide a better context for our current conceptions. More specifically, I will attempt to understand where problem gamblers
have been, with hopes of allowing us insight into their "today world" as well.

To accomplish this, I have spent a great deal of time at the University of Nevada, Las Vegas' Special Collections Library, an impressive and fascinating center that for many years has attempted to collect any and all public literature pertaining to gambling issues. Some of this literature is very old; in fact, some of the oldest documents in the entire UNLV library collection are gambling-related and sit in Special Collections.

The written texts that I studied were all morally inspired and serve as the foundation for the arguments presented here. Many of these beautiful documents were tattered and extremely fragile. Some were so difficult to open that I had to ask for assistance to avoid damaging these rare works. A few obviously unexamined records escaped the printing houses uncut, and we were forced to carefully snip through the still-connected pages with a steady hand and a pair of scissors.

I believe it is important to note here the methodological importance of this "special collection:" in the end, this is a "uniquely UNLV" dissertation. Although comments of this sort generally appear in the acknowledgements section, it merits a repeat mention here: I could not possibly have been able to conduct this dissertation
anywhere else, and I cannot imagine conducting it without the kind assistance of the staff at Special Collections.

Historical Sociology as Methodology

In his widely-used textbook, Babbie notes, quite correctly in my view, that most of the research methodologies in the sociologists' arsenal are limited in the sense that they are "anchored in one point in time" (1998:325). Babbie points out that "this focus conceals the fact that social scientists are also interested in tracing the development of social forms over time" (ibid). As Conrad and Schneider (1992:35-36) emphasize, this "historical-social constructionist" approach is perhaps especially important in deviance research, where matters of context can determine whether an act is considered deviant or not.

It is not that sociology has never looked backward in order to look forward. In fact, it could be argued that the field of historical sociology has merely lost its way – and this after a most promising start. After all, August Comte and Max Weber both devoted considerable research energies to historical sociological research (on religious and moral matters, to boot!) – with a goal of enhancing our understanding of our current social universes.

As Schutt (2001:309) puts it, the "central insight" of the historical sociological approach lies in its ability to "improve our
understanding of social processes" by examining the historical processes from whence they came. In this project, the historical voices examined allow us insight into the current social reception of the problem gambler. Put another way, I will speculate on where they are by examining where they come from.

This sociological approach obviously shares certain characteristics with the approaches of historians, who attempt to "determine what happened in great detail and induc(e) from this history an explanation for why it happened" (2001:312). Sociologists, however, take this approach a step further (or, more accurately, in a different direction) "by seeking to develop general theoretical explanations of historical events and processes instead of just detailed, 'fact centered,' descriptions of them (Monkkonen 1994:8, cited in Schutt 2001:313). In the gambling studies field, this latter, "fact centered" approach can be seen in Wildman's excellent work "A Brief History of Gambling" (1998). My own work reflects this former, sociological commitment (and perhaps its consequent bias). Here, historical "facts" are not presented as a central component of this tale; rather, I am interested in drawing modest conclusions on the ways in which social discourses -- and not individual events -- developed over time.

As a result, I am not attempting to track, for instance, the number of crimes committed by problem gamblers in the 19th century.
Instead, I am focusing (and speculating) on what people *thought*, *articulated*, and *perceived* – not what they *did*, per se. I am also interested in how these historical and discursive processes inform our current, gut-level perceptions of those who gamble too much.¹

Within the parameters of historical sociological work, the methodological approach of "content analysis" can be used to quantitatively or qualitatively survey "voices from the past" (Schutt 2001:329). This process involves a series of stages (Weber 1985, cited in Schutt 2001:330):

1. **Identifying a population of documents or other textual sources for study.** In this work, data will be examined from UNLV's unique historical collection of religious and moral texts. All of these texts purport to interpret the lives of those who gamble, and in doing so, most tell us how to understand those who gamble to excess.

2. **Determine the units of analysis.** In this instance, the units of analysis will be specific speeches and written interpretations. The data in this study will be qualitative and historical.

3. **Select a sample of units from the population.** Because this collection is so rare, I will be examining *all* of the available Special Collections pre-1915 literature that deals with this subject matter. As

¹ Because this research examines the dynamic influences of oral and written texts, I have included an appendix on the ways that key words (such as "addiction" and "mania") have developed over time (see Appendix B).
such, no "sampling techniques" will be incorporated, and all 54 of the eligible documents that I could locate will be analyzed.

These methodologies are not without their own limitations. It is always important to remind ourselves that historical literature that survives may not be representative of the literature that does not. It is difficult to ascertain, for instance, the degree to which the surviving literature "truly" reflects widespread sociological phenomena. I do not believe, however, that this limitation paralyzes this research process, nor does it dictate that we avoid the remnants of the past that we can access in order to better understand our sociological present.

On the other hand, the benefits of these approaches cannot be ignored, especially in a field of study (such as problem gambling) traditionally confined to the present. Historical sociological research provides the sociological researcher with insights inaccessible via other methodological approaches, and emphasizes social processes as they develop over time. The fact that this kind of analysis does not inflict any harm on its subjects is no small consideration either, especially with a population as sensitive and as vulnerable as problem gamblers can be.

In all of the quotations presented here the emphases are the authors' own. In these religiously-inspired pieces, italicized printing and capitalized words were often used, perhaps to better mimic the cadences of the spoken word. Because these documents are often

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
based on actual sermons, we can access both oral and written
historical sociological articulations in our quest to better understand
the discourses on problematic gambling.

Like all methodological approaches — even those that are more
quantitative in nature — this research project involved a certain
amount of “data selection” on the part of the researcher. Data that
“jumped out” at me might not have struck another researcher as
important. As such, it is important to remember that all social
research processes involve some selection of what constitutes
“relevant data.” This is true even of survey methods, as these
approaches require that the researcher sift through data in order to
locate the most salient points.

I have tried to keep duplication of quotations to a minimum.
On some occasions, though, multiple concepts were captured in a
single quote, and duplication was necessary. I have also tried to allow
the texts to “speak for themselves” as often as possible, in order to
better reflect the tone and spirit of these works.

I do not contend that this research — based on the only
documents available in Special Collections — speaks to any socio-
cultural environment beyond that of the Christian-dominated United
States and England. I would not be a very good sociologist were I to
deny that this research inevitably reflects the unique social
configurations found in these specific social laboratories. Once more,
though, this need not (and cannot, I would argue) paralyze the research process: as is the case with all research projects, we must proceed with the materials that we do possess and draw tentative conclusions about what they tell us.

Finally, a related and modest claim: I do not wish to suggest that this is the history of the problem gambler. It is but one – mine, for all its flaws and perspectives – and it is one that focuses on the social creation of the problem gambler via the discursive force that has been religious morality.

The Case Study Method: Diagnosing Gambling, Diagnosing Gamblers

"And, in order to show that these cases are not singular, let me relate a story concerning a Mr. Porter..."

-- Martin (1856:25), introducing his own version of a case study

Most often, psychiatrists attempt to diagnose the pathology (or lack thereof) of a single individual. In the literature, this is often demonstrated (and used as a pedagogical device) via a "case study" method, whereby an individual's life history is described in a way that brings to light his or her diagnosed pathology (see Ottmans, Neale, and Davison's Case Studies in Abnormal Psychology [1991] for a representative example of this approach).

Some might conclude that the case study method, used frequently by treatment professionals today, allows us to differentiate between today's and yesterday's epistemologies. I am not convinced
that this is an entirely fair assumption. Presumably, our more sophisticated approaches to knowledge collection today allow us a superior platform from which to interpret gambling and gamblers. At the same time, it might be useful to question, as we will throughout this work, whether there are distinct parallels to be drawn between moral-religious identification processes and the diagnostic processes of psychology.

Often, the moral-religious thinkers I examine here were attempting to “diagnose” what they deemed a large-scale “pathology:” the institution of gambling as a whole. In doing so, however, these religious thinkers almost always employed a type of “case study” method, in which the problematic behaviors of a given individual were documented. In most cases, these thinkers also told audiences how they were to “treat” this population—albeit in a broader, social-reception sense of the word.

Upon further examination, it appears that the moral-religious texts examined here employed what might reasonably be called their own “case study” approach. For example, over 150 years ago, Green describes his “methodology” in the following manner: “In the following pages we will endeavor to show what the gambler is, by holding up to view sketches of living instances, which, though imperfect, we doubt not can be recognized by many” (1847:227). Is this a somewhat modest and unrefined articulation of a case study method? After all,
these earlier analysts pointed to individual cases they had encountered, outlined their gambling misbehaviors in detail, and then proceeded to share their interpretations of these cases.

Of course, they were not called "case studies," per se, and they were not used in academic settings. In fact, the descriptions that were used were aimed at a far broader audience, and were certainly (some would say refreshingly) devoid of academic language. Green, for instance, once described "An Affecting Account of a Young Man Brought to Ruin and an Untimely Death by Gambling" (1847:20). While these historic case studies are not nearly as structured as their future counterparts would be, some might wonder whether this could allow us to better "observe" these complex behavioral phenomena without the constraints of these current approaches to presentation. This research, then, is guided by a belief that a broader idea of what constitutes a "case study" is a necessary tool in understanding how we have "diagnosed" these populations.

Why Were These Words Recorded? Opening Passages

Before we get into the substantive components of these works, it is important to attempt to address the methodological question of why these writings were documented, and what kinds of audiences these texts encountered. In the opening pages of many of these sermons and texts, information is presented that gives us an idea
about why these speeches and sermons became a part of the historic record.

Hocking answers the question in concise fashion in his preface: “because those who heard them have repeatedly expressed a wish to have them in a permanent form” (1898). Later in his preface, we are exposed to some sense of the reach of these sermons: “They were preached at intervals on the first Sunday evening in the month — when it is my rule to deal with ‘popular’ topics.” He goes on to say that “(t)he sermons are addressed to ‘the man in the street,’ and not to the scholar or the critic” (Hocking 1898:preface).

This is a potentially significant distinction, as the “to whoms” are ostensibly answered here. Hocking’s text — and all of the texts examined in this project, for that matter — do not address an academic audience, but rather a lay audience unencumbered by an ivory tower mindset. In essence, this means that these efforts reached out to a broader public than academic articles do.

This "big-audience" approach is important to note for at least two reasons. For one thing, this perspective means that these authors were attempting to affect broad-scale public perception, which is exactly what I am attempting to examine in this research. Secondly, it is important because the problem gambling literature has often neglected the ways in which non-medical approaches differ from (or converge with) academic and medical approaches. For example,
too often, we have relied on "official," medical configurations of the parameters of the "disorder" to ascertain prevalence rates in the general population. This approach practically ignores the reality that "problem gambling" is a negotiated disorder—that is, both the medical professional and the afflicted play a role in its ultimate and everyday definition. Because so few problem gamblers end up in the halls of medical facilities, we cannot neglect the contributions of those who do not encounter—or perhaps even reject—medical interpretations of these lives.

In a work appropriately titled *Shots from the Pulpit*, Savidge opens with this preface:

> During the past few months I have chosen living topics for my evening sermons. Large congregations have been patient enough to listen. Our city papers have published notes of these talks. I have proof that these printed reports have been the means of the conversion of some previous souls. Friends have advised me to bind these sketches together in this little book. I do so, believing in the marvelous power of truth. May these pages, written in the hurry of a busy life, be blessed to many hearts (1888).

We might wonder if this represents one way that a public discourse is achieved—via the "voices" of those who inhabit powerful social institutions, and in a way that resonates widely with the general public.

In an interesting twist, Beecher's (1844) book *Seven Lectures to Young Men on Various Important Subjects* begins with letters from his supporters:
INDIANAPOLIS, JAN. 9, 1844

REV. HENRY W. BEECHER,

Dear Sir. - The undersigned, having listened with great interest to a series of Lectures to Young Men, recently delivered by you in this city, are persuaded that the publication of them would be eminently useful to the public. They, therefore, respectfully request of you a copy of the Lectures for that purpose, under the conviction, that by a compliance with their wishes, you will confer a lasting benefit upon the young men of this country.

Very respectfully yours,

HUGH O'NEAL
S.M. HENDERSON
J.S. KEMPER
CHARLES W. CADY
ROBERT B. DUNCAN

This excerpt is followed by another letter:

INDIANAPOLIS, JAN. 15, 1844

REV. HENRY W. BEECHER,

Dear Sir. - The Lectures delivered by you in this city, during the present winter, have afforded much gratification to a numerous auditory; and will, we believe, have a beneficial influence in arresting the progress of the vices, against the prevalence of which they were directed. That their usefulness may be extended beyond the place of their delivery, permit us to request you to authorize their publication in a book form; confident as we are, that their merits will be highly appreciated by an intelligent community.

We are, dear sir, yours respectfully,

JOHN D. DEFREES, of St. Joseph,
W.T.S. CORNETT, of Ripley,
SAMUEL W. PARKER, of Fayette,
OLIVER H. SMITH, of Marion
JOHN DOWLING, of Vigo,
PINCKNEY JAMES, of Dearborn,
SAMUEL MERRILL, of Marion.
If these voices are to be believed, a "community" of thinkers has demanded the publication of these kinds of works. This is important when we remember that the purpose of this historical sociological work is not to track events, but rather beliefs, understandings, and social discourses. If these introductory passages are correct, these were moral issues that captured the public's intellectual imagination.

Just as importantly, these works are not abstract theoretical pieces conceived in the minds of professors atop the metaphorical "ivory tower," divorced from the lives taking place on the "floor level" below. Instead, they are decidedly public, and often staunchly "of the trenches." For example, in the introduction to Comstock's essay, J.M. Buckley delivers this unapologetic comment about the work's less-than-academic approach:

The reader will find that this work does not claim high literary merit. Its style is that of a man in earnest, who talks straight on, who tries to be understood, and to move the reader. No one but a person absorbed in a great work could write as he does. His very blemishes are an evidence of his sincerity (1883:vii).

One other prominent feature needs to be discussed here. Just as "former" problem gamblers constitute one of the most respected "expert groups" on matters of problem gambling policy today, these historic writings reflect a sympathy for -- and a perspective of -- the reformed. Green is revealed to be a former gambler-with-problems in the introduction to his work:

Very few of those who have employed their pens in opposition
to the vice which forms the subject of the following pages, have
had the advantage of speaking from personal observation and
experience... To many, however, it has long appeared very
desirable that some of those who, for years, have been
intimately identified with this desolating evil, could resolutely
come forward, and ‘speak what they do know, and testify what
they have seen,’ in relation to it. In the work here submitted to
the patronage of the community, this want is humbly attempted
to be supplied (1847:7).

On the next pages, this theme is developed further:

After having separated himself (and he trusts in God, forever)
from that class of persons called gamblers, the ordinary maxims
of prudence would probably have dictated to him to allude as
seldom and as sparingly as possible to his former course of life.
But believing, as he did, that by bringing to light, as he had it in
his power to do, the arts and machinations of gamblers, and the
miseries of that kind of life, he might render a great and lasting
service to others, he did not feel as if motives of delicacy in
regard to himself should deter him from making the attempt. He
has felt the more encouraged to embark in this undertaking,
from the wonderful success that has attended a similar course
in connection with the temperance reformation. Reflecting on
the well-known fact, that the simple narratives of reformed
inebriates have, in general, a far more powerful and extensive
influence than the most polished and eloquent discourses of
others, it occurred to him, that the adoption of a like course, in
reference to the formidable vice of gambling, might be
productive of equally gratifying consequences (1847:8-9).

This passage argues for the potential of the “been-there” view of
the reformed gambler. Like those working the “twelfth step” in
Gamblers Anonymous groups, this gambler endeavors to help others
who are affected by this problem. Green’s qualified expert voice was
thus added to the historic record.

It seems that these works were written to capture the moral
views of the general public, by “experts” (primarily moral, but also
experiential) who were uniquely qualified to do so. In the next
section, we will examine the ways these voices contribute to the sociological history of this vice.
CHAPTER 4

THE DSM PATHOLOGICAL GAMBLING CRITERIA:
A HISTORY OF VOICES, A HISTORY OF VICES

The Diagnostic and Statistical Manual

In a sense, the American Psychological Association's *Diagnostic and Statistical Manual of Mental Disorders* (less cumbersomely known as the "DSM") is the "bible" of psychiatric assessment. This important reference source outlines the key diagnostic criteria for any number of psychiatric disorders, from schizophrenia to pyromania to obsessive-compulsive disorder. In a work that focuses on the diagnostic "voices" from an early era, it is perhaps appropriate to examine the voices behind the more official DSM diagnosis.

Thanks in large part to the ground-breaking work of the late Dr. Robert Custer, the clinical "founding father" of the field, pathological gambling was incorporated into this official diagnostic literature in 1980. The DSM-III (3rd edition) listed pathological gambling as a "disorder of impulse control not elsewhere classified," thereby
marking pathological gambling's official entry into the annals of psychiatry.

It is difficult to overemphasize the importance of this development in the history of the medicalization of problematic gambling behavior. Among problem gambling experts, Custer's contributions are regarded with a near-reverential tone, and rightly so: this single clinician profoundly affected (at least indirectly) thousands of treatment professionals worldwide who now assist those with gambling problems. When one contemplates the total number of lives Custer's work has touched, the numbers grow exponentially. Indeed, it is difficult to imagine how the fields of problem gambling treatment and research would be constituted today if Custer had not worked so tirelessly to include these lives in the medical and psychological literature. Despite my own group-level sociological training, I am deeply impressed that Custer's lone voice stands as a tribute to how individuals can shape large-scale historic processes - processes that, in turn, shape our own lives today. In a very real sense, this work is an attempt to interpret the "Custers of yesterday": the voices that most profoundly influenced public and expert thinking on those who gambled too much.

While the DSM is not always put into practice in the way it is ostensibly intended (that is, to serve as a diagnostic screen for those whom the clinician encounters in practice), its importance in the
problem gambling field cannot be disputed. The research instrument that has dominated the literature in the field (Lesieur and Blume's South Oaks Gambling Screen [1987]) is based in the DSM diagnostic criteria. This means that virtually every state-funded (and international) study of problem and pathological gambling has used these identifiers to determine the scope of this social problem. As a result, public policymakers and gaming regulatory agencies have relied heavily upon the DSM in their efforts to implement problem gambling policy nationally and internationally. In addition, the most recent federally funded examination of gambling behavior in the United States (the National Gambling Impact Study Commission) insisted that the newest DSM criteria be used to ascertain prevalence rates (see National Opinion Research Center 1999). On a more everyday level, the DSM effectively captures the kinds of tendencies that clinicians seek out in potential problem gambling patients, even when they do not directly administer the instrument. The DSM remains a potent force in determining the social, political, clinical, and sociological landscapes that problem gamblers encounter.

In its excellent discussion on the origins and history of the DSM's operationalization of this disorder, the National Research Council (1999:25-27) provides a detailed look at how a diagnostic entry evolves. The original DSM-III diagnosis, for instance, was based in large part on Custer's own clinical observations of problem
gamblers, and did not (indeed, could not, due to a dearth of research on the topic) base its criteria upon empirical findings. As perhaps the only professional clinician devoted to treating this population, it made sense that Custer's "voice" dominated the parameters of the first listing.

As the field evolved and more clinicians and diagnosticians became involved with these patients, other individuals contributed to the discourse on what constituted pathological gambling. One of the most important voices was that of Richard Rosenthal, an M.D. from Southern California whose seminal work led to a more research-based analysis of these behavioral phenomena (see Rosenthal 1987, 1992). Another vital contributor was Henry Lesieur, whose dissertation work turned into *The Chase* (1984), an influential book that is still widely cited in the literature. Though his background is in sociology, Lesieur was and is a strong supporter of psychological approaches to these types of gambling activities (see Lesieur 1984:xiv). After Custer's seminal contribution, it was Rosenthal and Lesieur who ran with the definitional task and played a major role in the development of this diagnosis's trajectory.

Due in large part to a desire to "emphasize the similarity" of pathological gambling and substance dependence (National Research Council 1999:25), when the DSM-III was revised in the DSM-III-R, its criteria differed substantially from the earlier version (American
Psychological Association 1987). In fact, it has been claimed that the new criteria were developed “literally by copying the criteria, substituting ‘gambling’ for ‘use of a substance’” (National Research Council 1999:25).

In retrospect, it is easy to see why treatment professionals who longed for public and professional recognition of this newer disorder mimicked the diagnostic criteria of substance dependence. After all, these were the days of the ubiquitous “Just Say No” campaign, and the medical aspects of drug abuse were catapulted into the public consciousness. The potential for funding no doubt played a role as well, as it would prove easier to argue for grant monies and medical payments if this disorder was somehow “related” to a well-established medical menace.

The evolution of the DSM criteria did not stop with this second revision, however. Soon after the DSM-III-R (revised) was released, treatment professionals expressed frustration with the new operational definitions of the disorder. Some clinicians felt that the mimicry in the revision was excessive and longed for a return to Custer’s original criteria.

As a result, in the most current, DSM-IV edition, a compromise was reached that incorporated both the ground-breaking work of the original and the substance abuse-oriented contributions of the revision (National Research Council 1999:26). One new criterion, the
“escape” criterion, was added after Rosenthal conferred with other prominent clinicians, some of whom reported cases in which problem gamblers who gambled on machines did so to “get away” from their everyday, real-world feelings and problems. Another criterion dealing with “loss of control” was added after a series of conversations with treatment professionals at problem gambling conferences (ibid). While the number of treatment professionals who specialized in problem gambling was growing in the early 1990s (when the most recent revision of the DSM was completed), the field was still in its infancy, and experienced “experts” were few. The voices of these few experts, however, made a profound and influential contribution to our current medical understandings of this disorder.

In a very real sense, then, the history of the medical field of problem and pathological gambling is a “history of prominent voices.” The few treatment professionals who did have extensive experience with problem gamblers made noble efforts to describe and define the lives of problem gamblers, and these descriptions ultimately made their way into the official literature. This official literature, in turn, influenced thousands more thinkers and practitioners.

We now turn our attention to a different group of voices from another day. In my view, a history of voices can tell us a great deal about the history of this “vice.” The voices of Custer, Rosenthal, and Lesieur were (and are) seminal, central, and revolutionary, but they
were by no means the first to “diagnose” those who gambled too much, nor were they the first to come up with the criteria we employ to do so.

In this research, I will examine the voices of individuals who long ago deemed certain types of gambling behaviors problematic. As it turns out, many of these early thinkers were troubled by the same aspects of gambling behavior that bother clinical experts today.

Criteria Listed in the DSM Pathological Gambling Entries

"Who are the men now given so fiercely to this mania in our city?
Listen, I will tell you."

-- Holp, doing the diagnostic work (1887:105)

One of the primary points of this research is that thinkers from a different era also sought to describe the key characteristics that allowed us to identify, to use an early phrase, "when playing becomes desperate gambling" (Beecher 1844:117). The guiding frameworks in this chapter are the same as those published in the DSM’s listings of diagnostic criteria. Each of the DSM’s itemized diagnostic criteria will be examined in light of the historic evidence, in order to help us better understand how we have diagnosed this population yesterday and today.

Hence, the “guideposts” for this exploration are the criteria listed in the official diagnostic literature for pathological gambling. As I read through these historic works, I used the articulations of the
DSM entries to organize my thinking and my reading. To avoid redundancy, and to present an analysis that is more easily read and understood, I have collapsed certain diagnostic categories where appropriate. The following tables outline all of the DSM diagnostic criteria, and then lists the sections in this chapter that cover these criteria.
Table 1. DSM-III Pathological Gambling Diagnostic Criteria (1980)

<table>
<thead>
<tr>
<th>DSM Criterion Number</th>
<th>Description of the criterion in the Diagnostic and Statistical Manual</th>
<th>Section(s) in this chapter covering the criterion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Arrest for forgery, fraud, embezzlement, or income tax evasion because of attempts to obtain money for gambling</td>
<td>Crime and Illegal Acts</td>
</tr>
<tr>
<td>2</td>
<td>Default on debts or other financial responsibilities</td>
<td>Money Problems (Debt)</td>
</tr>
<tr>
<td>3</td>
<td>Disrupted family or spouse relationship because of gambling</td>
<td>Family Problems</td>
</tr>
<tr>
<td>4</td>
<td>Borrowing of money from illegal sources</td>
<td>Borrowing and Bailouts; Crime and Illegal Acts</td>
</tr>
<tr>
<td>5</td>
<td>Inability to account for loss of money or to produce evidence of winning money, if this is claimed</td>
<td>Money Problems</td>
</tr>
<tr>
<td>6</td>
<td>Loss of work because of absenteeism to pursue gambling activity</td>
<td>Work Problems</td>
</tr>
<tr>
<td>7</td>
<td>Necessity for another person to provide money to relieve a desperate financial situation</td>
<td>Money Problems (Borrowing and Bailouts)</td>
</tr>
</tbody>
</table>

Table 2. DSM-III-R Pathological Gambling Diagnostic Criteria (1987)

<table>
<thead>
<tr>
<th>DSM Criterion Number</th>
<th>Description of the criterion in the Diagnostic and Statistical Manual</th>
<th>Section(s) in this chapter covering the criterion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Frequent preoccupation with gambling or with obtaining money to gamble</td>
<td>Preoccupation</td>
</tr>
<tr>
<td>2</td>
<td>Frequent gambling of larger amounts of money or over longer period of time than intended</td>
<td>Tolerance</td>
</tr>
<tr>
<td>3</td>
<td>A need to increase the size or frequency of bets to achieve the desired excitement</td>
<td>Tolerance</td>
</tr>
<tr>
<td>4</td>
<td>Restlessness or irritability if unable to gamble</td>
<td>Affective Issues: Restlessness and Irritability</td>
</tr>
<tr>
<td>5</td>
<td>Repeated loss of money by gambling and returning another day to win back losses</td>
<td>Chasing</td>
</tr>
<tr>
<td>6</td>
<td>Repeated efforts to reduce or stop gambling</td>
<td>Loss of Control</td>
</tr>
<tr>
<td>7</td>
<td>Frequent gambling when expected to meet social or occupational obligations</td>
<td>Family and Friend Problems; Work Problems</td>
</tr>
<tr>
<td>8</td>
<td>Sacrifice of some important social, occupational, or recreational activity to gamble</td>
<td>Family and Friend Problems; Work Problems</td>
</tr>
<tr>
<td>9</td>
<td>Continuation of gambling despite inability to pay mounting debts, or despite other significant social, occupational, or legal problems that the person knows to be exacerbated by gambling</td>
<td>Money Problems (Debt); Family and Friend Problems; Work Problems; Crime and Illegal Acts</td>
</tr>
</tbody>
</table>

Table 3. DSM IV Pathological Gambling Criteria (1994)

<table>
<thead>
<tr>
<th>DSM Criterion Number</th>
<th>Description of the criterion in the Diagnostic and Statistical Manual</th>
<th>Section(s) in this chapter covering the criterion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)</td>
<td>Preoccupation</td>
</tr>
<tr>
<td>2</td>
<td>Needs to gamble with increasing amounts of money in order to achieve the desired excitement</td>
<td>Tolerance</td>
</tr>
<tr>
<td>3</td>
<td>Has repeated unsuccessful efforts to control, cut back, or stop gambling</td>
<td>Loss of Control</td>
</tr>
<tr>
<td>4</td>
<td>Is restless or irritable when attempting to cut down or stop gambling</td>
<td>Affective Issues: Restlessness and Irritability; Loss of Control</td>
</tr>
<tr>
<td>5</td>
<td>Gambles as a way of escaping from problems or relieving a dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression)</td>
<td>Escape</td>
</tr>
<tr>
<td>6</td>
<td>After losing money gambling, often returns another day to get even (“chasing” one’s losses)</td>
<td>Chasing</td>
</tr>
<tr>
<td>7</td>
<td>Lies to family members, therapist, or others to conceal the extent of one’s involvement with gambling</td>
<td>Lying</td>
</tr>
<tr>
<td>8</td>
<td>Has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling</td>
<td>Crime and Illegal Acts</td>
</tr>
<tr>
<td>9</td>
<td>Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling</td>
<td>Family and Friend Problems; Work Problems</td>
</tr>
<tr>
<td>10</td>
<td>Relies on others to provide money to relieve a desperate financial situation caused by gambling</td>
<td>Money Problems (Borrowing and Bailouts)</td>
</tr>
</tbody>
</table>

Crime and Illegal Acts

"(I)t consumes time, and produces sin, immorality, and crime" -- Spriggs-Smith, rhyming eloquently on the evils of gambling (1890:12)

Criminal activity was the first criterion listed in the first entry of pathological gambling in the diagnostic literature. In the most recent DSM-IV listing, crimes committed to support a gambling habit are still cited as diagnostic, which is probably not surprising: most would agree that a gambler who commits crimes to fund his or her gambling most certainly has a problem.

In the historical literature, descriptions of criminal acts committed to support a gambling habit are very common. In fact, this single criterion almost merits a chapter of its own here, so prevalent is its citation in these works. In order to support their arguments that the entire gambling enterprise was abominable, religious and moral thinkers often described cases in which individual gamblers (surely ones that we would label as problem gamblers today) broke the law. The associations in these works are clear: gambler-criminals are immoral souls, and criminal activity is a symptom we must use to track this kind of evil behavior.

The portraits that are painted by these historic thinkers would be very familiar to those who encounter and treat problem gamblers in current clinical settings. Hopkins refers to gamblers who "have... embezzled the treasures entrusted to their keeping, to feed therewith
their own passion and to sustain themselves in their mad devotion to vice" (1835:12). It is interesting that Hopkins relies on terms such as “passion” or a “mad devotion” to encapsulate these behaviors. Nowadays, our terms would no doubt be more medicalized, but the underlying “key behaviors” appear to be the same.

In 1890, Frayn says this of a prospective gambler: “(t)hat course will probably lead him through trickery, lying, embezzlement, forgery, to complete and irretrievable ruin” (16). To support his arguments about the “irretrievable ruin” he anticipates, Frayn points to a series of cases in which individual gamblers broke the law as a result of their gambling. “The law courts are constantly bringing to light stories of gambling leading up to embezzlement and other forms of dishonesty,” he claims, “on the part of those who have been the subjects of the confidence of their employers” (1890:22).

It is important to emphasize that these gambling-crime associations were not commented upon dispassionately; they were usually accompanied by harsh and judgmental rhetoric. Haines and Yaggy use the most ominous terminologies available to them when they describe the lifestyle of the gambler as follows: “(g)ambling... eventually lead(s) to crimes of the darkest hue” (1878:272). They then proceed to make the apparent claim that all types of crimes have gambling roots: “Every species of offense, on the black catalogues of
crime, may be traced to the gambling table, as the entering wedge to its perpetration" (273).

Rush links internal temptations to gamble with criminal acts in the following accusatory excerpt: "I must be permitted to remark, however displeasing the observation may be, that a gaming-table generally exhibits a scene of great immorality, where the most criminal passions rage uncontrolled" (1803:72). When invoking terms such as "passion" and "control," Rush joins current-day diagnosticians in relying upon inward-looking criteria to assess the state of gambling in general and certain problematic gamblers in particular. He also connects gambling, immorality, and "criminal passions" in a conceptual triad that continues to shape our understanding of the problem gambler today.

In 1906, Parry discusses a gambler who engages in behavior that spirals downward toward a criminal career, much as those trapped in this problematic pattern are said to do today: "The gambler, in innumerable cases, is born in the apparent innocency of his own home and is matured into a criminal..." (6). This progressive characteristic is cited as central in the diagnostic literature, and will be discussed in greater detail in a separate section.

Other moral-religious thinkers made similar associations between gambling, crime, and a progressive problem. Alexander (1899:80) says that "(t)he gambler's trade is usually linked with some
form of deception or fraud. Very often a young man’s first step in this
direction has blighted his career and started him on the path of the
criminal.” Years ago, this “path” got one labeled a criminal; today, the
criminal implications remain, but the new label of “pathological” has
been added to our available vocabularies.

The embezzlement threat appears to be a particularly
troublesome one to these thinkers, perhaps because it undermines
much of the "honest labor" ethic that permeates their rhetoric. Welsh
laments that “(t)hose who fall a prey to the gambling craving cannot
be trusted in office or profession” (1906:69). Here, this “craving” (an
inward-looking concept that foreshadows psychiatric approaches to
come) is particularly problematic because it leads to problems in the
workplace, another theme to which clinical practitioners would later
return.

Interestingly, with a problem population that is allegedly just
starting to be understood at the beginning of the 21st century, we
have significant evidence that moral (and in this case, criminological)
thinkers were singling out the "problematic" by using the same
identifiers a century earlier. Talmage, a dominant and oft-cited
contributor to the moral discourse on gambling in the 19th century,

speaks of the

... frauds which are committed in order to get money to go on
with the nefarious work. Gambling, with its greedy hand, has
snatched away the widow's mite and the portion of the orphans;
has sold the daughter's virtue to get means to continue the

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
game; has written the counterfeit signature, emptied the banker's money vault, and wielded the assassin's dagger. There is no depth of meanness to which it will not stoop (1872:167-168).

Here, stories are told of gamblers who committed crimes "to go on with the nefarious work" or as a "means to continue the game" - an act that then, as now, considered diagnostic of a problem-with-gambling. Passages like these also reveal the moral depths that problem gamblers inhabited in those days. The final sentence above tells us exactly where on our moral categorization schemes we can expect these gamblers to "go." While our current-day criticisms have certainly softened somewhat, gamblers who commit crimes are still faced with considerable public scorn, and problem gamblers are often received with moral disdain.

The issue of whether they deserve this judgment aside, it makes sense to speculate on whether the moral scorn that endures today can be traced back to these types of historic judgments. Long received socially as a moral problem, problem gamblers of today find themselves answering similar diagnostic questions when faced with an intake interview. Today, when a clinician "clicks off" the crime criterion in a diagnostic interaction, he does so in the unwitting company of a long history of thinkers.

Weems also cites a series of gamblers-with-problems who committed crimes to obtain gambling money. The behaviors of these gambler-criminals are related in the first person:
I went, and lost. Loss followed loss, so thick and heavy, that I presently lost my senses; and after playing away all my own money, I played away that of my clients! and even their bonds and notes, which they had given me for collection!! (1816:34)

In this selection, Weems cites behaviors of a gambler whom many practitioners today have encountered – one who chased losses (another criterion listed in the DSM), lost control (yet another DSM staple), and then began to “creatively rearrange funds” (a euphemism for embezzlement that nevertheless gets one qualified according to the DSM). This gambler would be well on his way to being diagnosed as a pathological individual today.

Other gamblers cited by Weems engaged in even more daring acts to support their gambling habit:

Unable to meet my father’s face – ruined by others, and caring not whom I ruined, I attempted to dig into the vault of one of the Charleston banks. After burrowing several weeks under ground, and often nearly suffocated by the falling in of the earth, I was caught and thrown into prison! Thus did the Devil (my curses upon him for it!) deceive and ruin me, by gambling.

Well then, said I, glory be to God for making it so little profitable to a man to be a villain (1816:35).

In Weem's tale, a familiar sociology of deviance perspective emerges. Invoking the Ultimate Good and Bad Guys effectively draws the "good vs. evil" parameters for these debates. In academic circles, these types of characterizations are often referred to as the "demonic possession" perspective (Goode 2001:78-79), due to the fact that deviant individuals were often thought to be egregious sinners whose
acts could be attributed to the supernatural work of the devil. In this passage, one of many we will encounter that draw a similar connection, gambling is associated with the work (or perhaps more accurately, the "play") of the Devil. The righteous, meanwhile, side with God against the "villains."

Based on these kinds of descriptions, it is easy to imagine where on the moral spectrum those who gambled excessively would have fallen. Those who were thought to be possessed by the devil obviously faced considerable moral scorn. By placing the excessive gambler in with the devil’s doings, a moral trajectory was virtually assured – one that continues to haunt the lives of problem gamblers today.

Weems then quotes a business clerk who began intercepting letters to obtain funds to support his gambling habit. Notably – and characteristically, according to many current clinician’s descriptions – it seems he never intended to "steal" the money because he anticipated winning and returning it to its proper place. Custer, who well understood the moral judgments problem gamblers often faced, often pointed to this common characteristic as evidence that problem gamblers are not an inherently evil group (1985). Sadly, Weems’ gambler’s tale ends in predictable fashion: "still buoyed up with the hopes to win, I went on gambling and losing; so that when the day of payment arrived, I had not a single dollar to remit" (1816:37).
In developing his own scathing criticisms of the gambling enterprise, Barnett claims that the potential for embezzlement looms over the head of the gambler. "No one would entrust his deeds, or the choice of his investments, to a gambler," he claims, "nor would he dream of appointing as his trustee or cashier any one who was bitten with the gambling mania" (1897:5). While Barnett eloquently refers to a "gambling mania" that "bites" these individuals, we know these processes by different names today. At the same time, our newer terminologies perhaps blind us to the fact that these characterizations were common long before we fitted them with a medical diagnosis.

Later on, Barnett takes his theoretical conception one step further, making a direct and bold allegation that these individuals are "prime" candidates behind the cases of embezzlement discovered by law enforcement officials:

...there is abundant evidence that gambling leads constantly to actual crime. Hardly a day passes without the police-court reports furnishing evidence that betting and gambling are one of the prime causes of embezzlement. Those who are comfortably off rarely steal for the pure love of money - it is almost always to relieve themselves of the financial obligations which betting or gambling have entailed (1897:5).

Talmage was a frequently-cited sermonizer whose contributions appeared to resonate with a vocal group of moral thinkers. In one of his sermons, Talmage points to a series of cases in which gamblers steal in order to "carry on" with their gambling:

Witness a cashier of the Central Railroad and Banking Company of Georgia, who stole one hundred and three
thousand dollars to carry on his gaming practices. Witness the forty thousand dollars stolen from a Brooklyn bank; and the one hundred and eighty thousand dollars taken from a Wall Street Insurance Company for the same purpose! These are only illustrations on a large scale of the robberies *every day* committed for the purpose of carrying out the designs of gamblers. Hundreds of thousands of dollars every year leak out without observation from the merchant's till into the gambling hell (1872:168).

All the officers of the celebrated Bank of the United States who failed were found to have expended the money embezzled for lottery tickets (1872:172).

God forbid that you, my reader, should ever take to yourself the lamentation of the Boston clerk, who, in eight months, had embezzled eighteen thousand dollars from his employer and expended it all in lottery tickets (174).

Once again, we would probably be well advised to question the methodology (not to mention the motives) of the "case studies" presented here. However, the accuracy of these stories is not what I am attempting to ascertain – and at any rate, establishing such a thing is probably impossible today. For the purposes of this study, what is important to focus upon are the *tones* of these tirades, as we attempt to speculate on the longer-term effects of moralizing discourses on those who gamble too much.

In Talmage's sermon, those who committed crimes for gambling money captured his attention and then served as defining characteristics in his analyses of gambling behavior. Today, clinicians employ a less-angry assessment strategy that nevertheless runs along parallel definitional lines.
In his diatribe-essay targeting the evils of gambling, Gulland devotes an entire sub-section to the notion that gambling is “A Cause of Crime” (1908). In this section, Gulland interviews “Sir Matthew Henry, Chief Commissioner of the Metropolitan Police” on the connections between gambling behavior and criminal behaviors. To this query, Chief Henry opines that “I believe it is responsible probably for almost as much crime as drink” (1908:43-44). These kinds of statements reveal that these moral discourses penetrated other social institutions of power as well.

Gulland (1908:44) then goes on to cite social statistics in support of his arguments on crime, though we might certainly question the source of this “research”:

From the records of the public press during the 12 years 1895-1907, the National Anti-Gambling League has compiled the following record of crimes and wrecked careers directly attributable to gambling: --

Suicides and attempted suicides .........................234
Bankruptcies.........................................................530
Embezzlements and thefts.................................3236

Notably, it appears that today’s National Coalition Against Legalized Gambling finds a forefather in this National Anti-Gambling League. In both instances, those with a moral-religious agenda found a home in anti-gambling social movement organizations. One hundred years later, critics of gambling are still citing similar potential negative effects of gambling behavior in their own current political battles. Meanwhile, psychiatric experts also cite these
behaviors as characteristic of a different, individual-level "gambling problem." Once more, it seems that many of our key criteria have remained consistent over the years.

Carter also alludes to the National Anti-Gambling League in his own arguments against gambling: "A record kept by the National Anti-Gambling League for about 5 years (shows) that within that period 321 embezzlements ... were directly attributed to gambling habits, and the list is by no means an exhaustive one" (1908:32). Interestingly, in this instance we see that more "rational" (or at least statistical) strategies were also invoked by these moralizing thinkers. When it fits their arguments, those seeking to buttress their anti-gambling arguments embrace a rational-scientific-quantification discourse.

Like Gulland and Carter, Hogge also relies on a collection of statistical data. This time, the criminal data are collected from an "investigation" of a prison population.

the evidence of a prison chaplain, who carried out an investigation into the crimes of the prisoners in one of the largest gaols in the kingdom... He found that 92 per cent of the prisoners were there owing to the blighting influence of the drink habit, but that considerably more than half had acquired their drinking habits through having previously contracted the gambling mania (1904:1-2).

Again, because the goals of this research are not purely historical in nature, I do not seek to accurately ascertain the prevalence rates of criminal activity. Because this research is
sociological and historical, I wish to study the discourses and vocabularies that various social institutions have employed in their attempts to “name” and identify those who gambled excessively. What is interesting in these cases is that the “social scientific” discourse and the “religious” discourses are not necessarily mutually exclusive—contrary to what is commonly expressed in methodology textbooks (see Babbie 1998:17-34 for a representative “clear-break” description of the religious and the scientific worldviews). In the above instance, moral thinkers rely on social statistics to support their moral positions, thereby conflating moral and scientific worldviews.

Note, too, that Hogge refers to a “gambling mania” here. He could hardly have called it “pathological gambling” yet, so he does the best he can to explain and capture it. Importantly, he draws conceptual links with gambling and alcohol, a association that mental health professionals continue to probe today. Moreover, there probably is not a single academic researcher in the problem gambling field who has not used alcohol problems as a useful “friend or foil” in his or her own conceptual frameworks (see Volberg 2001a:87-89). Whether they are relied upon by medical or academic professionals, it is important to remind ourselves that these conceptual connections do not just appear on the scene: they "come from" a place with a rich sociological history.
Once more we can see the power of these moral discourses by noting that they penetrated the thinking of those who represented other, ostensibly objective organizations. To cite another example, Hogge quotes the opinions of several esteemed figures in the legal field to support his arguments against gambling.

The Right Hon. Lord ALVERSTONE... speaking from the Bench at Lincoln, recently said: -- 'His Majesty's judges had continually to observe how many cases of embezzlement and fraud depended on the miserable habit of betting'

Mr. Justice WILLS expressed it thus: -- 'When I first came upon the Bench I used to think drink was the most fruitful cause of crime; but it is now a question whether the unlimited facilities for illegitimate speculation, on the part of people who have no means of embarking on it, are not a more prevalent source of mischief and crime even than drink.

And Mr. Justice GRANTHAM said: -- 'Gambling with bookmakers is the cause of more crime and misery than anything else in the land.'

Nearly all the Judges have publicly made similar statements (1904:2).

Of course, whether "nearly all the Judges" held similar beliefs will most likely never be definitively established; however, these passages do allow us to speculate on the power and reach of these moral discourses. These passages suggest that these were not just rants from the pulpit that never left the church. They "escaped" to other social institutions, interacted with the codes and needs of those institutions, and shaped judgments that would affect virtually all corners of the problem gambler's universe. In the above passage, the
criminal justice discourse and the moral discourse interactively inform the judgments that emerge from a range of social institutions.

By quoting others with allegedly similar views, these moralizers portray their "belief battles" as popular causes, which is no small matter: after all, the causes and beliefs of the populace are precisely what we are attempting to examine here. Later, Hogge uses this very strategy to summarize his own beliefs about the connections between gambling and stealing.

(T)he late HUGH PRICE HUGHES went to the root of the matter when he said that it 'stands in precisely the same relation to stealing that dueling does to murder. In both cases, the consent of the victim and the chance of being the successful criminal does not alter the moral character of the act' (1904:4).

These judges and the "late Mr. Hughes" were not the only individuals Hogge enlists in his battles. Hogge also quotes "a public officer," who states that

in his experience... betting runs intoxicating drink very hard in being one of the greatest primary causes of the social and moral ruin and degradation of the great majority of persons who commit crime and ultimately get into the hands of the police (1904:5).

Once more, a gambling-alcohol connection is made, and both vices are alleged to contribute significantly to criminal activity. Interestingly, both gambling abuses and alcohol abuses were evolving into fields of moral, legal, and psychological inquiry by this time. These discourses informed each other – or, put another way, they were achieved "interactively," as Castellani (2000) might put it.
Comstock, whose job in an early "vice squad" (one that appears to have been motivated by moral crusades) presumably allowed him insight into these matters, describes a series of cases in which gambling habits led to criminal ones:

One trusted clerk on Broadway, while receiving a remarkably large salary for filling a most responsible position, managed in a few weeks’ time to secure over $10,000 from his employers to gamble with in this way.

Another bank cashier stole over $35,000, according to his own confession, spending from $400 to $500 in these schemes.

A bright young man was sentenced by his Honor Recorder Smuthe, of New York, to two and a half years’ imprisonment on his plea of ‘guilty’ to stealing $175 worth of jewelry from a friend. His excuse was that he had imbibed a taste for gambling.

Last year a young man, conscience-stricken, delivered himself to the police in Chicago, confessing that he had stolen $3000 from his employer with which to gamble.

... A young man was brought to my office, who, before he left, confessed to stealing over $1300 in small sums from his employer, for the purpose of gambling in lottery and policy. He had spent in all $1800, and had not a penny to show for it (1883:64).

Overall, it is clear from these “case studies” that gamblers with criminal problems have existed for some time. Despite potentially severe adverse consequences, these individuals continued to gamble, and in a way that ultimately got them into a lot of trouble. Historically, exhibiting these kinds of behaviors got one entangled with the criminal justice system – but just as importantly, these behaviors got them diagnosed by moralizing thinkers as “evil.” Today,
the criminal justice ramifications remain somewhat consistent – but the attendant diagnosis has been altered to incorporate a conception of a pathology.

Money Problems, Money Solutions:
Debt, Credit, Borrowing, and Bailouts

"Not contented with losing that which he had in his pocket, he borrowed of those with whom he played ..." (Martin 1856:32)

Another class of diagnostic criteria takes aim at the degree to which the gambler encounters problems with his or her money. These "money troubles" have been operationalized by criteria which focus on the accumulation of debts, the borrowing of money to gamble, and post-gambling episode "bailouts." All are alluded to in the historic literature.

Intuitively, debt would seem to play a natural role in any sociological account of the lives of problem gamblers. Sociologists, long enamored with the vicissitudes of class in society, might be well advised to contemplate an affliction unique in the medical annals for its direct financial consequences. Psychological diagnosticians, meanwhile, have pointed to accumulation of debt as a pathological criterion, allowing us to single out and identify those who have problems with gambling.

As it turns out, debt has long been a major trouble in the lives of those who gamble to excess. Carter tells a story of gambling
leading to the incurring of debts, which in turn leads to a bankruptcy—a pattern commonly found among those who are labeled as pathological today. Carter cites “the superintendent of a well-known public company... Against debts of 38,000 pounds there were assets amounting to 250 pounds only, and the bankrupt attributed to his failure to betting and gambling (sic)” (1908:33). This description is awkwardly worded, but the implication is apparent: here was an individual who so indulged his gambling cravings that he stole from his own company to support them. Yet again, and long ago, this was deemed a “problem” by those entrusted with the task of finding and interpreting such things.

Talmage describes a case that is all too familiar to those who spend time with problem gamblers today:

John Borack was sent as mercantile agent from Bremen to England and this country. After two years his employers mistrusted that all was not right. He was a defaulter for eighty-seven thousand dollars. It was found that he had (gambled and) lost in Lombard street, London, twenty-nine thousand dollars; in Fulton street, New York, ten thousand dollars; and in New Orleans, three thousand dollars. He was imprisoned, but afterwards escaped and went into the gambling profession. He died in a lunatic asylum (1872:164).

One interesting aspect of this early reference to debt defaults is that an association is made between these behaviors and the gambler’s ultimate commitment to a mental institution. While Talmage is among the most moralistic of the thinkers examined here, his words nevertheless invoke references to a more dispassionate (and
presumably medicalized) approach to classifying human behavior – in this case, by noting this individual's history of institutionalization.

This discursive strategy reminds us that moral and medical discourses do not act as discrete "chapters" in this sociological history; rather, they constantly overlap and interact. When it was useful for them to do so, these moralizing thinkers co-opted the medicalizing rhetoric of another social institution. It appears that we were already starting to conceptualize this population as worthy of mental hospitalization, a trend that continues to shape thinking on this population today.

Chapin observes a number of gamblers who lose massive amounts of money, piling up debts (and hence personal troubles) in the process: "What means it that they should let that credit tarnish and die?" (1847:305). He later draws a connection with credit – a connection that many who intervene upon the lives of problem gamblers today must address: "Credit is strained to its utmost tension – debts are contracted that involve and harass through life" (1847:307). At the very least, it seems we have discovered a distinct historical parallelism. How many current problem gamblers have lamented that the debts they have accumulated will probably "harass through life"? How many current clinicians have heard these laments and counted them as quantitative evidence of a gambling problem?
Predictably, these debt problems often snowball and entangle the gambler's life with a criminal justice system. Martin, for example, tells us about an individual who gambled excessively "and was imprisoned for debt" (1856:15-16). On occasion, then, gamblers' troubles evolve into a complex assortment of problematic acts. Take, for instance, a hypothetical gambler who chases losses, incurs debts, and breaks laws to obtain more gambling money — resulting in a score of 3 (enough for a "problem gambling" diagnosis according to the National Opinion Research Center's [1999] typology) for these episodes alone. Then, as now, we interpret complex interactive behaviors like these as sound evidence of a problem in the gambler's life.

Some of the money problems encountered by problem gamblers necessitate creative money solutions. The acts of borrowing money to gamble and seeking bailouts to get out of gambling troubles are also included in the DSM's classification scheme. Borrowing presumably involves asking for money before going out to gamble, while a bailout usually entails an asking for money to solve problems that have come up after the gambling act.

In either case, medico-psychological diagnosticians have decided that individuals who ask for money from others are engaging in problematic gambling behavior. I have heard clinicians say that these criteria are perhaps uniquely effective in identifying the problem
gambler, as the “normal” population rarely, if ever, needs to seek out other people’s money to gamble. Historically, those who have devoted time and thought to gambling behavior have “agreed” with this assessment.

With some irony, Alexander describes a gambler who “would be horrified at the idea of stealing. But he can borrow the money from a friend, or borrow it from the till of his employer, and return it from his certain winnings. But the borrowed money is lost” (1899:80). Once more, we see that a cycle is created that leads to a series of problems for the gambler who plays too much. To get out of a financial bind, "he" turns to others for bailouts, a strategy that only further ensnares the struggling gambler.

Beecher also relates a general story of “the gambler,” and in doing so, he describes a life tale that sounds familiar to many problem gamblers who rely on other’s generosity: "He rushes on, puts up his whole purse, and loses the whole! Then he would borrow; no man will lend. He is desperate..." (1844:108). Like so many today, this gambler asks others to rescue him from a "deplorable" situation. In the end, those who would come to his aid tire of his acts, and social turmoil results. The observation that this pathway to desperation was identified over 150 years ago should not surprise us by now; however, it is perhaps surprising that our “diagnostic strategies” have remained largely unchanged over the years.
Martin is similarly troubled by those who engage in borrowing to gamble: “Not contented with losing that which he had in his pocket, he borrowed of those with whom he played ...” (1856:32). He also tells a story in which “(a)t that first sitting (the gambler) lost all his own money and eight pounds of his employers” (1856:23). Here, it is unclear as to whether Martin’s gambler embezzled or (only slightly more rightfully) borrowed. In either case, however, those who use other’s money to gamble have earned the attention of those seeking to target the problematic nature of gambling behavior.

Then, as now, these borrowing acts have had disastrous results. In 1816, Weems relates the following “case study,” told in the first person, in which these acts earn the gambler the scornful remonstrance of those whom he has betrayed over money:

Thus, in place of going home rich, rich in money, and far richer still in my own esteem and that of my neighbours, I am completely beggared; and so heartily despised, that I do not suppose there is one among them all who will ever trust me again, so much as even to sell a raccoon skin (33).

Upon borrowing (or to use a favorite Gamblers Anonymous euphemism, “creatively redistributing”) funds from those around them, the gambler finds himself in a series of binds. No one will trust him, and broken bonds of friendship and love plague his immediate social circles. These binds were sufficient enough to catch the attention of the moralizing thinkers of yesterday, as well as the diagnosing thinkers of today.
Family and Friend Problems: Destruction in the Immediate Social Circles

"Poor dear woman, she turns off with a sigh to get the wine; but breathes out, as she turns, the half stifled sigh, that her husband would but quit gambling, and then she would be happy."

-- Weems, fretting about the family problems of those who cannot seem to quit gambling despite severe consequences (1816:42)

Today, psychologists who focus on gambling problems describe the effects on the gambler's immediate social circles as a particularly devastating consequence of this affliction (see Custer 1985:122-145 for a psychological profile, see Volberg 2001a:12-13 for a more sociological perspective). A journey through the historic literature reveals that negative family and social effects have long troubled those who encountered excessive gamblers.

Disrupted family relationships were among the most often-cited characteristics of the gambling "sin" in historic times; interestingly, family troubles are what often compels problem gambling experts to diagnose a "sickness" today. The sin-to-sickness social trajectory, then, rears its head once more. It is easy to see why devastating a family structure would arouse the interest of both moral and psychological thinkers who are interested in separating out those who have a "problem." Of course, to note these connections is not to dispute the utility of the criterion: most would agree that a gambling habit that leads to turmoil on the home front should be diagnostic of
some kind of "problem," and without a problem diagnosis, there can hardly be an effective problem intervention.

As Steinmetz succinctly puts it, "(w)hen the gamester is fortunate, he enjoys his success elsewhere; to his home he brings only consternation" (1870:50). Taking things an important step further, Churchill links the pain of the family with sin: "once the evil spirit enters into a man and gets firm hold of him, it is not long before the inmates of his own household, and his relatives, become sufferers" (1894:28).

Martin describes the impact of gambling on the family in general terms: "(it) renders children a sorrow and burden to their parents, converts loving husbands into heartless brutes" (1856:24). He then calls gambling "a practice to which many a broken-hearted relative can point, saying, That ruined my son, my brother, my husband" (ibid). In these instances, gambling problems lead to family problems, a process that has long alarmed those who study gamblers. Based on these kinds of descriptions, it makes sense to draw parallels between the individuals Martin calls "ruined" with those whom we today label as a "problem." Both, after all, engage in destructive acts that lead to troubles in one's immediate social circles.

This tendency to diagnose this individual and family problem is seen in a 1756 work that addresses "Gaming -- some part of the ill consequences attending that dangerous diversion, and how ill it
becomes a married man in particular to indulge himself in it" (The Husband 1756:214). This work goes on to describe “people drawn to the destructive amusement” (ibid) in a way that might seem familiar to those who live with and study problem gamblers today. It also tells us about gamblers who

... will tell you that they play only to divert themselves – and doubtless there are many who fit down with no other view – but every looker-on at a gaming-table must be convinced, by the various attitudes of the parties engag’d, how much it is in the power, of the turn of a card, or the cast of a dye, to convert this miscall’d pleasure into a real and most painful follicitude (1756:216).

Clearly, we are seeing a separation of those who do indeed just “divert themselves” and those who have problems. In this piece, the problems discussed all come back to haunt the family; in particular, the author laments “the many lonely hours, sometimes whole nights, the wife of a gamester passes” (1756:218) and proceeds to scold husbands who indulge in these sinful behaviors.

Talmage’s incomparable, booming voice contributes this to the discourse on family problems and gambling problems: "(the gambler inflicts) anguish to his wife, shame to his children, and eternal wasting away to his soul. He pays in tears and blood, and agony, and darkness, and woe" (1872:163). Make no mistake about it: these gamblers are to be identified (in this case by their family problems), and their “souls” are to be associated with the “darkest” of evils. Having “diagnosed” these gamblers as evil, it is not difficult to
envision a consequent social “treatment” that is less than sympathetic.

Later, Talmage describes a hypothetical “case study” of the problems the gambler faces in the home.

Notice also the effect of this crime upon domestic happiness. It hath sent its ruthless ploughshare through hundreds of families, until the wife sat in rags, and the daughters were disgraced, and the sons grew up to the same infamous practices, or took a short cut to destruction across the murder’s scaffold. Home has lost all charms for the gambler. How tame are the children’s caresses and a wife’s devotion to the gambler! How drearily the fire burns on the domestic hearth! There must be louder laughter, and something to win and something to lose; an excitement to drive the heart faster and fillip the blood and fire the imagination. No home, however bright, can keep back the gamester. The sweet call of love bounds back from his iron soul, and all endearments are consumed in the flame of his passion (1872:169).

In reading through these kinds of portrayals, it is difficult to avoid the conclusion that these sinners of yesterday are the problem gamblers of today. The “sinners-to-somebodies” evolution represents a very real transformation, but yesterday’s assessments have not yet disappeared from the discursive scene. One can almost feel the morally-inspired passion conveyed by these “voices,” and problem gamblers today readily recognize their legacies in their own social receptions. Moral-religious leaders, it would seem, have played a central role in the social creation of the problem gambler.

Like many clinicians and academics who describe the “careers” of problem gamblers today, Weems alludes to a transformative progression of gambling behavior (“from harmony to disharmony,” we
might say) – one which catapults him far, far away from scenes of domestic bliss:

The memory of home and of his tender parents and sister, which had ever, heretofore, been his heaven, was now his bitterest hell – after such an injury done to them, and with such a load of infamy on himself, how could he ever see their faces again! (1816:16)

We can see that these passionate voices from the past reinforce the notion that the excessive gambler’s acts merit a scornful social reception. No wonder “he” feels so sinful; he was faced with remonstrance wherever he turned, and wherever he turned, he found individuals, groups, and social institutions whose belief systems were shaped by these moral-religious diagnoses. According to many clinicians today, this overwhelming sense of remorse leads many to contemplate suicide – as was the case, in fact, with Weems’ subject, who decides to go to his back yard and hang himself. Once more, we see that social receptions – including, of course, those presented by members of the gambler’s most immediate social circles – contribute significantly to the self-image (and the pain) of the problem gambler. This pain did not only “come from” inside the gambler, it did not only "come from" the family – it came from a long history of judgmental and influential moral discourses.

To cite another example, Weems also speaks of a case study in which a son takes his father’s horses (many of which his father had
bought on credit) into town. The horses were sold, but this was where
his troubles began:

I... got upwards of thirty hundred dollars! a sum which would
have made my poor old Father and the family happy. But alas!
the Devil put it into my head, that at the gaming table, I might
easily turn my thirty hundred into sixty hundred dollars. And,
poor, stupid creature! brainless, shell-headed fool, I went,
played, and was ruined (1816:35).

Weems’ gambler was then "unable to meet (his) Father’s face"
and turns to illegal activity to solve his problems (ibid). This episode
alone nearly qualifies this gambler for “pathological” status under the
current DSM guidelines.

In many of these instances, the devil wins out – and the
gambler is the clear loser – in a moral battle for the “possession” of
the individual who gambles excessively. Note, too, that these acts are
associated with stupidity and brainlessness, revealing a skin- (or,
perhaps more accurately, a skull-) inward emphasis. Even today, we
tend to look inward before we look broadly around us – a sociological
“look” that might reveal that large-scale social processes and
institutions are informing our understandings and experiences of
these behaviors.

Other prominent moralizing thinkers share this skin-inward
emphasis when it comes to identifying and interpreting the beast that
gambling could become. Breeden, for example, says that “Gambling is
not only a menace to, but a withering blight upon, the home. When it
becomes a rooted passion in the heart, there is no room for the
flowers of domestic joy and peace" (1899:455). Whether we call it a "rooted passion in the heart," or whether we rely on the colorless words of a doctor, it seems that familiar problems continually confront these populations.

Predictably, many family descriptions reveal specific gender role expectations prominent in this day. Frayn reveals the fundamental roots of his concern when he alleges that gambling "unfits a man for the duties of a husband and father; it saps the very foundations of manhood" (1890:21). Once more, the language here is unequivocal. It is difficult to imagine an individual more despicable than one whose "very foundations of manhood" were sapped by succumbing to an urge to gamble excessively.

In that same year, Spriggs-Smith lamented "the ruined homes" (1890:3) ostensibly caused by gambling behaviors, and then proceeded to place his criticisms of gambling against a broader backdrop of the appropriate male role in the home. In what must have been particularly damning indictments of masculinity and family obligations, Spriggs-Smith alleges that

It is by its inherent, corrupting influence, undermining the religious life of the nation, polluting its moral purity, diverting its resources for honest trading, and destroying not only the character of those who traffic therein for truthfulness, honesty, and manliness, but the absolute well-being of the families to which they belong (1890:5-6).

It is clear that Spriggs-Smith believes that gambling activity "undermines" much that is moral and good, including "religious life,"
"truthfulness, honesty, and manliness," and the "well-being of the family." These are stern words, and it would appear difficult to misinterpret their implications. Implicit in this argument are a complex constellation of assumptions pertaining to the proper behaviors for a "good" man—which were effectively contrasted, of course, with those of the gambler. We will return to a more sociological examination of the construction of "evil" populations later on in this work.

Forty years earlier prior to Spriggs-Smith's assessments, Green asks of the gambler: "Has he a wife and family? They are shamefully neglected" (1847:13). He then proceeds to relate that the gambler "destroy(s) the love of home" and "render his domestic circle a scene of misery" (ibid). With a few notable exceptions, these authors operate under the assumption that the excessive gambler is male, and this assumption is by no means a dated one: even Custer's seminal work When Luck Runs Out describes the generic problem gambler as a man. Researchers have only recently turned their attention to female problem gamblers, an oft-neglected group of players. Perhaps this bias reflects the "true" gender distribution among those who gamble problematically. Alternatively, perhaps we are only now jettisoning our prejudiced notions of who, exactly, the problem gambler is. As we have seen, however, the weight of hundreds of years of assumptions cannot easily be cast aside.
Neglect of the family also bothers Comstock, who tells us that we can identify his target population when we see a "laboring man (who) will spend the week's wages in gambling, leaving his wife and children to starve..." (1883:57). He then turns his attention to other family disruptions: "(t)he young man will rob even his own parents" (ibid). The markings of those who gamble too much are socially and interactively emerging, and doing so in a discourse of disdain.

Listen to the words of Breeden, who describes "(t)he wretched man upon whose soul the powers of darkness have secured a mortgage in the game of chance will leave his family in semi-starvation, even in sickness unto death, and hasten like a moth to the candle of destruction" (1899:457). The diagnosis of "wretchedness" is very rarely invoked today, however, the mechanics of the diagnosis can still be found even in our most advanced of instrumentations. Unfortunately for the problem gambler, though, while the wretchedness diagnosis is no longer socially acceptable, the subtleties of public discourse are far less forgiving. Problem gamblers today find themselves constantly ruminating over how he or she could have fallen to such moral depths, even as medical explanations (purporting to avoid moral judgment in favor of scientific objectivity) gain widespread respect and application.

Hence, here (and everywhere), moral discourses intersect with family discourses. Understandings about proper moral behavior
inform understandings about proper family life, and vice versa. As Castellani (2000) likes to say, the discourses (in this case, moral-religious and family ones) interact: each discourse informs the way we think about, talk about, and “do” the other.

Interestingly, the male role was not the only one to be addressed in these historic and discursive family contexts. Moral-religious thinkers also invoked scenes of feminine beauty and fairness that come crashing down due to a gambling habit. Posnett, painting a dramatic portrait of a domestic scene in the mid-19th century, also cites family destruction as an important identifier:

A fair and beautiful young mother, with two or three little children clinging to her apron, but on whose faces gaunt famine was writing its sad lines, said in my hearing, for she was the wife of a gambler, 'We're fair hungered to death by it' (1863:6).

These destructive (and later, diagnostic) effects on the children of problem gamblers were added in another “case study” portrait, described in detail by Chapin:

A tearful and deserted wife – a sobbing, pitying child – keeping watch with the lone night-lamp, till the breaking of the morning. Again, and haggard misery would creep into the picture, adding the keenness of deprivation to the sting of grief – pressing heavily upon the bowed, crushed spirit of that wife – mingling the drought of slighted, abused affection with the tears of starved and shivering childhood” (1847:311).

Often, while reading through these aged passages, it was difficult for me to avoid the conclusion that these moral-religious thinkers were far more eloquent than those who produce the sterilized
medical descriptions of today. Take the descriptions of Beecher, for instance, who articulates the impact on the family of an "inveterate gambler" in a uniquely passionate and articulate way:

it destroys all domestic habits and affections. Home is a prison to an inveterate gambler; there is no air there that he can breathe. For a moment he may sport with his children, and smile upon his wife, but his heart, its strong passions, are not there. A little branch-rill may flow through the family, but the deep river of his affections flows away from home (1844:116).

The language has changed, but there is much that remains the same. Many of these moral thinkers pointed to the damage inflicted upon family as damning evidence that this "problem" was a powerful one not easily escaped. Of course, these beliefs are often shared by treatment professionals who wish to characterize these gamblers as caught in the throes of an addiction.

Chapin also alludes to what we might call "addiction thinking" today. He notes that the attraction of gambling can be so powerful that it can lead to dramatic problems in both family and friend circles: "What means it... that, despite the remonstrance of friends, wife, children, parents, they should become fixed, chained, doomed to the gaming-table?" (1847:305). Chapin's usage of "chain" imagery is intriguing, as he seems to grapple with the challenges of what, exactly, to call this phenomenon that so binds these individuals.

Note also that he alludes to the "remonstrance" of those whom the gambler cares about - a grim and painful reality for those who
gambles too much today as well as yesterday. This remonstrance does not, of course, come from nowhere: as often as not it was articulated in the pulpit, in a way that both reflected and shaped moral codes of the day.

In 1835, Samuel Hopkins extends his analysis to wider social circles surrounding the gambler:

They have betrayed the confidence of unsuspicious friendship... Partners in business and partners in life they have robbed to appease the cravings of their gross desires... They have been schooled by this vice until they could scoff at the crushed affections of a wife - look, without emotion, upon the sufferings of their offspring - laugh at a father's anguish - and hiss at a mother's tears (12).

It appears, then, that "sinning" gamblers faced no shortage of moral disdain in the their social and familial universes. This phenomenon has been termed "jeopardizing significant relationships" by the DSM, but the Manual was hardly the first text to single out these behaviors. While we no longer dare to be so overt in our moral judgments of those who gamble too much, these historic conventions of discourse continue to follow the problem gambler around.
Preoccupation

"It is a passion that grows upon him. It absorbs every other consideration. The surrounding world becomes reduced to a small, intense centre before his wild, fixed eyes; and that centre is the gaming-table"

-- Chapin (1847:304), on the absorbing passion of gambling

In these moral-religious writings, stories abound in which the "mania," "passion," or some other Named Tormentor completely consumes the individual who gambles. Problem gamblers, especially when approaching "bottom," are often described as thinking about little else outside of their gambling universes. Today, a preoccupation with gambling bothers those who are trained to worry about their psychological health. Many years ago, a preoccupation with gambling bothered those who were trained to worry about their moral well-being.

Rush describes a "mad pursuit" of gambling in which the individual is overcome with his passion. This is clearly a story of preoccupation: "When the heart is once thoroughly possessed of this passion, every thing is sacrificed to its gratification. In the mad pursuit, health and constitution are gradually destroyed by irregular hours, and disorderly conduct" (1803:71). In the next sentence he refers to gamblers who endure "sleepless nights, corroding passions," and other phenomena that indicate a severe inability to elude their own haunting ruminations (ibid).
Others describe a state of being “under the power of the gambling spirit,” in a way that completely dominates the thinking patterns of the gambler.

Men who have been under the power of the gambling spirit, have declared that when they have been under its spell, when the chances were now on this side and now on that, they were utterly unable to occupy themselves with any other employment or with any other thought (Frayn 1890:15).

Steinmetz also speaks of those whose minds are overcome by this madness of preoccupation: “Being always preoccupied, gamesters are subject to a ridiculous absence of mind” (1870:49). These preoccupation issues and cognitive problems are now deemed pathologically diagnostic; of course, they were conceived long ago by other kinds of thinkers.

Frayn’s passage includes a cogent articulation of preoccupation, but it also reveals the elusive nature of the Naming Game. These are very eloquent descriptions, and Frayn gamely uses terms like “spirit” and “spell” to describe what many psychiatrists now think of as a “disorder” or “mental illness.” The underlying themes, however, appear to be similar regardless of how (or whether) we “name” them.

Take, for instance, this description of the “passions,” “lusts,” “temptations” — and ultimately preoccupations — of the gambler in the mid-19th century:

every passion is absorbed in one; and that one burning at the highest flame. He thinks of nothing else, cares only for this. All other things, even the hottest lusts of other men, are too cool to be temptations to him; so much deeper
is the style of his passion... Death might groan on one side of the room, and marriage might sport on the other – he would know neither. Every created influence is shut out; one thing only moves him – the game (Beecher 1844:109-110).

Alexander alludes to preoccupation problems that many problem gamblers today find maddening. He marvels at the gambler's ability to lose himself in his thinking about gambling: "he was so fascinated with it... that he now finally and deliberately gave up all attempts at any other business or occupation" (1888:28). Later, he specifies that he is concerned about gambling because it "takes a man's thoughts and interests away from his vocation and keeps his mind occupied with the chances of winning" (1899:79).

Of course, gambling as a recreational activity was particularly problematic when it forced individuals away from their labor. As such, being preoccupied in a way that interfered with one's work constituted a double sin to these early thinkers. Interestingly, this behavior is scored as a "double affirmative" (or a "2") on the DSM scale. This "evil ethic" theme will be revisited in a later chapter.

Green tells the story of a gambler who becomes immersed in gambling, a progressive development that troubles him – and still troubles experts today. This gambler's

... whole soul becomes absorbed in the darling vice; and the love of parents, of country, and of his fellow-men, and all the pleasure which he may have formerly taken in literary and scientific pursuits, are completely lost sight of, and soon become annihilated (1847:12).
Using descriptions far more eloquent than any clinical patient history I have read, Chapin says this of a gambler-with-problems: "Once engaged in it, heart, soul, sense, become enlisted, and all the duties of life are sacrificed to this dream of dreams" (1847:303). Once more, a central diagnostic criterion finds its roots in moral rhetoric. Those whose behaviors run counter to accepted moral norms have always been "at risk" of having a "mental illness" label adhered to their existence. It appears that gamblers, whose morality has constantly been questioned throughout history, are now facing a psychological scrutiny that reflects and reveals these generations of moral judgments. Given this history, it is not difficult to see why moral discourses continue to affect the lives of problem gamblers and those around them.

Chasing

"He continued to play in hope of recovering himself"

-- Martin (1856:22), describing the chase

In The Chase (1984), Henry Lesieur's pioneering and compelling sociological tale of the problem gamblers he encountered during his graduate student days, story after story is told of gamblers who lose money gambling, only to return later to "win back" their losses. This is classic "chasing" behavior, and it has come to serve as one of the central diagnostic aspects of problem gambling behavior. Castellani
(2000), also a sociologist, goes so far as to cite chasing as the central sub-behavior throughout his accounts of problem gambling behaviors.

In looking through the historic literature on gambling and gamblers, I discovered that long before voices such as Lesieur and Castellani contributed their understandings of chasing behavior to the public debates on problem gambling, moral thinkers noted this tendency in their own analyses.

Steinmetz even cites it as indicative of mental problems: "In the madness of gaming the player stakes everything after losing his money – his watch, his rings, his clothing; and some have staked their ears, and others their very lives" (1870:57). In a passage that could have been lifted from a current-day clinician’s notes, Alexander describes the chasing gambler succinctly: "He has risked his money and lost it. To retrieve his fortunes he must risk more" (1899:80). Often, this distinctive betting pattern leads to emotional distress, as Martin relates in his own examination of the gambling behaviors he observed in his day: "When a loser, he became anxious to win back" (1856:31). Of course, this anxiety, coupled with a strong desire to retrieve his own losses, can lead to a destructive series of events:

when he had just completed the loss of his last acre ... and was proceeding down the stairs to throw himself into a carriage to convey him home to his house in town, he resolved upon having one more throw to try to retrieve his losses, and immediately returned to the room where the play was going on (Martin 1856:25-26).
Predictably, Martin’s gambler goes on to become “beggared” and “penniless” (ibid), and the lesson to be learned is clear: chasing behavior is indicative of a problem — and more specifically, of a morally weak soul. Today, it indicates to professional analysts the presence of an addiction in the mind and body. Years ago, it indicated to professional analysts the presence of a moral impurities in the mind and body.

One case, related by Weems in 1816, shows that the chasing act (or the gambling act, for that matter) may exist outside of the realm of the monetary:

He first ventured the money which his father had given him for the journey. This dollar after dollar, he soon had the pain to see all taken from him. With aching heart he then ventured the two dollars which his mother had secretly given him at parting. These were quickly snapped up. Miserable at loosing (sic) so much, but still hoping to recover it, he beted (sic) a barrel of his father’s flour! This also was soon lost — growing more and more desperate, he betted a second — a third — a fourth — and so on, until the whole was gone (Weems 1816:15).

Gamblers have been “chasing” for a long time, a behavior that today would be classified as potentially pathological in nature. Once more, we can see that problem gamblers have been around for a long time, and that our moral and our psychological judgments rest upon strikingly similar foundations.
Tolerance

The tolerance diagnostic criterion has been borrowed in a fairly direct way from the substance abuse field. Generally speaking, tolerance refers to a need to engage in a behavior more frequently in order to achieve a desired “state” that used to be reached with less frequent indulgence. For example, a problem drinker might need four shots of whiskey to get to a “place” that used to be reached with two drinks.

With gamblers, tolerance can be measured both in terms of time and money. Whereas one hour of play used to “do the trick,” three are now necessary; alternatively, while risking five dollars a hand used to be sufficient to achieve excitement, now only betting twenty dollars a hand will satisfy the urge. In either case, it is widely believed that this development serves as a sign of a severe problem.

While it is difficult to find precise articulations in which tolerance is specifically referenced, a number of historic case studies alluded to the “increasing time, increasing money” characteristic in the context of gambling problems. For example, Martin describes the gambler’s desire to gamble more and more in a lengthy passage that alludes to all kinds of diagnostic criteria:

F----, when not yet twenty years of age, was situated in a highly respectable and even professedly Christian family, who had occasionally a social gathering of friends and an evening party. Cards were almost invariably introduced, and a quiet friendly rubber was much enjoyed. No harm was thought to be in it.
The stakes were small, indeed, considering the position and circumstances of the individuals, the stakes were but trifling. F---- before this had but little knowledge of cards, but now they seemed pleasing to him. His taste was gradually excited. A few games with those in the house, and with one or two friends, for mere trifling stakes or even for nothing, served to whet his appetite, and he began to enjoy and relish the games with which he now became acquainted. F---- had now become known to residents in the village, and many invitations to Christmas parties were willingly accepted. In almost every instance cards were introduced, and F---- of course joined with the others. Money was always played for, except in peculiar cases, the amounts, usually small, became now and then considerable. The excitement gradually increased... His former caution gradually wore off. The stakes became larger and the game more exciting (1856:30).

While many refer to the tendency to wager "(l)arger stakes and still larger" (as Talmage does in 1872:182), some do so in a way that is particularly parallel to our current understandings of these processes. Frayn actually predicts a progressive tolerance when he says that "the sums involved in many cases may be small, but the principle is there, and the little of to-day may be, and most likely will be more to-morrow" (1890:22).

Later, Frayn expands upon this theme by describing a case in which "(y)ou began it by a quiet game and a few pence on the issue, to give a little extra piquancy to the whole thing! Now you are going on and getting more deeply involved" (1890:26). He concludes this discussion with a nod to the dangers inherent in problematic gambling as well as an abstinence model: "Put the accursed thing far away from you! Flee it as you would a plague!" (ibid).
Others comment on the increasing time that the gambler spends on his favorite activity. Alexander describes a gambler who "was in the habit of staying out for several days and nights at a time, a thing which he had never done before... He was more reckless than he had ever been" (1888:31). Chapin (1847:303) speaks of "(t)he young man, who, after the labors of the day are over, enters the gaming-house to try his fortune for an hour, is led on to try it for two hours – for three – for a whole night." What was once an act that took one hour of time now "needs" two or three – or an entire night. Of course, many problem gamblers and clinicians today would quickly recognize this tolerance process, and they would likely point to it as evidence of a developing (or, to put it in more conventional medical terms, "progressing") gambling problem.

Chapin (1847:305-306) later alludes to "the young man, who, from spending an hour at the gaming-table, advances to spend the night, and then to encroach upon the hours due his employer." In doing so, he clearly cites a tolerance development as indicative of the perils of an activity that "encroaches upon" his work life – another affirmative checkmark in the listing of diagnostic criteria.
Loss of Control

"[l]t is certain, when once it gets possession of the mind, there is no vice that tyrannizes over its miserable votaries, with more uncontrolled sway."

-- Rush, looking inward to understand gamblers who lose control (1803:71)

Another hallmark of addiction pertains to the loss of control over one's own behavior. Problem gamblers, like other addicts, are seen to forfeit a certain degree of control over their gambling activities, and psychiatrists characterize this tendency as evidence of a disordered mind. They were not the first to do so. In attempting to capture the evils inherent in the act of gambling, historic moral thinkers also described a number of instances in which control was lost.

Often, a loss of control manifests as a failed attempt to quit gambling. Steinmetz relates a case (apparently reported in newspapers) in which the following scene developed:

Having one day lost his money, he uttered frightful imprecations against his body and against his soul, swearing that he would never play at cards again. Nevertheless, a few days later, he began to play again with those in his apartment, and on a dispute respecting discarding, he repeated his execrable oaths. And when one of the company told him he should fear the Divine justice, he only swore the more, and made such confusion that there had to be another deal. But as soon as three other cards were given him, he placed them in his hat, which he held before him, and whilst looking at them, with his elbows on the table and his face in the hat, he so suddenly expired that one of the party said – 'Come, now play,' and pushed him with his elbow, thinking he was asleep, when he fell down
dead upon the floor (1870:53-54).

This represents a classic (if atypical) episode in which the gambler repeatedly tries to stop and cannot. Many others remarked upon this tendency as well. In 1856, Martin describes the gambler's mindset as follows: "I must do it and I cannot help it" (19). At this stage, his gambling life and times can be interpreted as "a straw carried along by a current" (ibid). While the words are a bit more graceful than those of today's professional diagnosticians, the picture painted here is a familiar one to any who have encountered problem gamblers.

Like Martin, Beecher also invokes a maritime theme to illustrate the concepts of the gambler's loss of control and progression:

The victim of excitement is like a mariner who ventures into the edge of a whirlpool for a motion more exhilarating than plain sailing. He is unalarmed during the first few gyrations, for escape is easy. But each turn sweeps him further in; the power augments, the speed becomes terrific as he rushes toward the vortex, all escape now hopeless. A noble ship went in; it is spit out in broken fragments, splintered spars, crushed masts, and cast up for many a rood along the shore. The specific evils of gambling may now be almost imagined (1844:115).

Indeed they may! This imagery is as vivid as it is relevant to the world of a current-day problem gambler, who admits to "powerlessness" upon entering a twelve-step program. These powerless concepts, however, are by no means original – they were "invented" long ago, by thinkers with a moral agenda.
Hopkins often uses terminologies that evoke similar imagery. One of his favorite terms is "eddying" (1835), implying that gamblers get "caught up in a current" and lose control, much as a sailor in a storm would. Thinkers like Hopkins, who did not have our current discursive frameworks to draw from, nevertheless got quite creative in referring to salient frameworks from their own day.

Many of these thinkers appeared to believe that once "caught" in the current, the gambler's fate is doomed. In a passage that explicitly references "self-control," Frayn describes what happens when the ship careens out of control:

He may not all at once become a wreck, but if the power of self-control has gone, the possibility of a wreck is there: he is like ship without a helm, it only wants a rock-bound coast and a hurricane blowing from the sea to make her destruction sure. So it is with the man who has been robbed of his self-control, by whatever cause, it only wants to opportunity and the temptation to make him a moral wreck (1890:14-15).

Here, the figurative shipwreck becomes the figurative moral wreck, and the salient seafaring frameworks are applied to a real-life moral interpretation. Note in particular Frayn's use of "progressive" vocabularies: the gambler is described as "not all at once becoming" a problem, but the fate seems to be sealed over time. Of course, many addiction specialists today claim that problem gamblers lose control in a similar fashion and are hence "doomed" to a progressively destructive lifestyle unless they are intervened upon by a medico-psychological treatment.
Other early thinkers claim that nobody can control the gambler-with-a-problem, so powerful is this gambling "spell":

The informal spell is on him; a giant is aroused within; and though you bind him with cables, they would part like thread; and though you fasten him seven times round with chains, they would snap like rusted wire, and though you piled up in his path, heaven-high, Bibles, tracts, and sermons, and on the top should set the cross of the Son of God, over them all the gambler would leap like a roe over the rocks, on his way to perdition (Talmage 1872:161-162).

In losing control, then, the gambler-with-a-problem rejects the way of the "good" (personified by the Ultimate Moral Authority), thereby placing him in "with sin." This could not have been a happy fate for the gambler who engaged in these specific acts.

In many cases, this loss of control was associated with a loss of morality. In 1890, Frayn put it this way:

Real moral power is always diminished by the presence of excitement of any kind. Where the excitement by its very origin and nature tends towards the right, the person under its influence can hardly be accredited with the deliberate exercise of judgment, and the weighing of motives and issues which a moral act requires... the experience of that excitement brings about more or less complete moral paralysis. Now that is almost exactly the condition of the gambler (15).

Make no mistake about it, these moral diagnosticians were attempting to ascertain "exactly the condition of the gambler," and they devoted a great deal of commentary to precisely this task. For these diagnosticians as well as today's, one of the most problematic aspects of this condition was revealed by a loss of control over gambling behaviors.
Later in his sermon, Frayn describes the morally problematic gambler as follows: "he enters into some gambling transaction, and is caught by the excitement that attends it. All the tendencies of that excitement are towards evil; the very foundations of his moral nature are shaken" (1890:16). He concludes by drawing an analogy with the ultimate form of human powerlessness and loss of control: "He yields himself to (his?) power and becomes a slave" (1890:17).

Other thinkers relied on a different analogy to illustrate the loss of control prominent among those who gamble too much. To moral commentators determined to describe these behaviors, it appears to have been tempting to draw parallels with the loss of one's senses. Haines and Yaggy, for instance, associate these behaviors with deafness: "He combines the deafness of the adder with the desperation of a maniac, and rushes on, regardless of danger - reckless of consequences" (1878:273). Welsh, meanwhile, invokes the loss of eyesight to portray these processes: "this gaming passion is ... proved blind and foolish" (1906:69). In both cases, the loss of sensory faculties involves a loss of moral faculties.

It is clear that moral thinkers have long been noticing a loss of control among those who gamble. The way that Beecher puts it evokes a Dostoevskyan *Gambler* scene: "He loses; loses again; loses all his winnings; loses more. But fortune turns again; he wins anew. He has now lost all self-command" (1844:108). Whether it is called a
"loss of self-command" or a "loss of control," we can see that these types of behaviors have been with us for some time.

Escape

Alexander, when speaking of "the effects of this (gambling) practice upon individual character," specifically cites "its distracting, dissipating influence" (1899:79).

In using the DSM diagnostic criteria as "guideposts" in this journey through the historic literature, I expected that some diagnostic characteristics would be more prominently mentioned than others. I would have expected that crime, family destruction, and work problems would be cited, for instance, because they tend to be visible and dramatic when revealed.

One characteristic that I did not expect to find in this early literature was a description of an "escape" gambler. My expectation was based on recent observations that this type of gambler was to be found sitting in front of a machine, escaping from "real life" into a videoed version. My expectation was wrong. Long before video games swept the gambling universe, gamblers turned to gambling activity as a form of escape, a characteristic that diagnosticians today cite as problematic.

In fact, a thoughtful reading of a book authored by Cotton in 1674 appears to locate an escape gambler. Cotton sees a gambler encountering "an enchanting witchery" (1), suggesting images that
would resonate with current escape gamblers who argue that they “lose themselves” in a zombie-like state. In an interesting passage, Hogge also seems to allude to many of the same "zoned out" qualities that practitioners (and problem gamblers) describe in escape gambling. On those who gamble on horse races, he presents us with this challenge:

weigh it up – the paralysis of the intellect, the mind wandering along the line of the racecourse... think of that, and then recollect what the mind of man has carved out for himself by supreme effort from the inexhaustible quarry of life, and compare the two things (1904:31).

Here, Hogge points to a perceived “paralysis” of a mind that is distracted by the activities at the track. Importantly, this diagnosis is coupled with a moral judgment. He is describing an escape gambler, but he does so by invoking phrases like “paralysis of the intellect.” He articulates the judgment that the intellectual energy “wasted” on gambling might be best expended elsewhere – just as many clinicians do today.

In tones even more similar to our current conceptualizations of escape, other early thinkers seem to observe an act that allows the gambler get away from the “routine” of everyday life. This characteristic was as troubling years ago as it is to today’s practitioners: “The betting habit ministers to the natural love of excitement. Life for many is exceedingly monotonous, and anything which relieves its dull, weary routine is attractive” (Carter 1908:36).
In these instances, the gambler plays to get away from the “dull, weary routine” of life – an act that concerns clinical experts who diagnose those who may suffer from pathological gambling.

Like Carter, Savidge makes a similar connection between gambling activity and the desire to “get away” from the everyday. "Some men gamble for the pleasure and fascination there is in it. 'Life,' you know, 'is such a humdrum affair' that they must have something interesting" (1888:155). This “something interesting” is gambling, but this is not perceived as a productive or moral endeavor by those who observed it historically.

Today, we worry about those who gamble to “get away” from their everyday life – so much so that we count it as a diagnostic criterion for a serious pathology. Ours is not the first era to identify this act as problematic, however, and we would be well advised to explore the ways that yesterday's moral objections subtly re-emerge in our current medical views.

Lying

“I venture to affirm that the passion for gaming has led many to be dishonest.”

-- Chapin, on those for whom a gambling “passion” leads to sinful acts (1847:306)

It is becoming apparent that each of these “criteria” have been historically cited as proof of the afflicted’s immorality – just as today,
they are used to prove a pathology. It makes sense that “lying” would be used to diagnose yesterday’s sinners; interestingly, it is also used to help us diagnose today’s sicknesses.

Martin feared that gambling “would inevitably lead to dishonesty and to all its attendant and consequent evils” (1856:16). He then cites “many instances” in which gambling “drives men to dishonesty” (1856:22). Put yet another way, “Gambling finds a man a cully, and leaves him a knave’ !!!!” (ibid).

This emphasis on knavery is perhaps a bit difficult for the current reader to decipher, but thankfully, Hopkins provides a more thorough explanation of what it all means: “To be a knave is bad. But to be a knave and a drone, too, to be a drveling, useless knave, to be given to a knavery of pure sordidness – which shows no daring and no valor and no fortitude – this is creeping down to the lowest condition of knavery” (1835:8).

Clearly, knavery was a key diagnostic concept for Hopkins.

Nowadays, "knavery" has been replaced with more acceptable medical terms that describe the elaborate facades of lies that are erected by the pathological gambler, but the fundamental wrongdoing remains strikingly similar. Then, as now, the problematic gambler’s deceitful constitution troubles those who spend “diagnostic time” with him.
It is important to re-visit these historical characterizations because they help us understand why excessive gambling and immorality are so readily associated. Hopkins' above passage makes it quite clear that we are dealing with individuals inhabiting the "lowest condition" in a moral society. This specific moral judgment, interacting with the context of a broader societal code, must have created social problems for those whose gambling was deemed excessive.

Hopkins later describes what we might call the gambler's "lying heart": "Thus he has ever a heart for fraud, a heart greedy of dishonest gain; a heart full of covetousness; a heart to practice deceit whenever he dare" (1835:9). Once more, a skin-inward analysis produces a predictable diagnosis; this time, though, the focus is on the heart instead of the mind.

As usual, Talmage puts it succinctly and passionately: "the (gambling) sin is the source of uncounted dishonesties" (1872:166). Dishonesty, it seems, lies at the root of so many of the frustrations expressed with gambling activity. In and of itself, however, is dishonesty indicative of a pathological condition, or is it merely inconvenient to those who must deal with it? Do we "diagnose" problems because they are medically valid, or because they trouble our moral sensibilities? We do both, of course, but too often we
accept the former explanation without devoting much thought to the latter one.

In describing the gambler's moral and behavioral trajectory, many of these thinkers chronicle a pattern of lying that eventually entangles much the gambler's social universe. This gambling passion becomes all-consuming, and its attendant problems become numerous. Eventually, as Green long ago put it, the gambler's "whole attention is taken up in maturing plans of deception" (1847:18).

In his moralizing lecture, Beecher notes that the gambler "becomes unfaithful to promises" (1844:115), a reality to which many a spouse (or employer) of the problem gambler would today attest. He goes on to say that "(gambling) is, even in its fairest form, the almost inevitable cause of dishonesty" (1844:118). Comstock articulates a similar theme when he speaks of "men seduced to dishonesty" by gambling (1883:65), insinuating that the gambling activity leads to the lying activity. Meanwhile, Breeden unambiguously states that "(g)ambling leads directly to dishonesty" (1899:457).

This explicitly causal theorizing merits further discussion here. Notably, almost all of the DSM criteria refer to behaviors that are caused by gambling. They are not underlying, preexisting pathologies that somehow create a gambling problem. With the exception of a few characteristics (escape, notably), we are studying effects of gambling activity, not causes. The "diagnostic criteria" we have access to today
are the same ones we have had access to historically – a development that is not surprising when we consider that we are still without a "diagnostic thermometer" that can somehow accurately probe the internal workings of the "sick" gambler.

Predictably, and once again, this diagnostic criterion is associated with sinfulness and evil, rather than sickness and sympathy. As Beecher angrily puts it in his examination of gamblers, "Will man never learn that the way to hell is through the valley of DECEIT?" (1844:128). These sorts of unequivocal "evil diagnoses" had to have plagued the existences of those they referenced.

**Restlessness, Irritability, and other Affective Issues**

While the DSM uses words like "restlessness and irritability when unable to gamble," or "stress and anxiety," earlier thinkers seem to be speaking a language that describes similar emotional problems. In the section on preoccupation, we have already heard about gamblers who tended to get emotional when they were away from gambling settings. In this section, we will explore more fully the emotional issues faced by gamblers with problems.

Many passages allude to the emotional distresses experienced by this population. In describing one gambler, Martin speaks to "(t)he void which his losses create, aches and aches, without relief or remedy" (1856:17). This was a gambler in emotional pain because of
his gambling, a feature that garners diagnostic attention on today's psychological instrumentations.

While we now focus on the concept of "irritability" in the pathological gambler, it seems that this was previously noted by astute observers who watch gamblers "in action" as well as when they are away from the games. In a succinct description of "irritability when unable to gamble," Churchill talks about those who get controversial, and want to make a bet, at almost every statement made, till their very society begins to pall on their friends. They seem no longer able to enjoy social intercourse and the friendly interchange of thought, which goes so far in making life pleasant and agreeable. To them such life is insipid and dull; they find it lacks the stimulating excitement of having 'something on' (1894:31).

Another thinker notes an emotional disturbance he calls a "feverish excitement," but when he describes what he means by this, it becomes clear that these behaviors could well be categorized under the current headings of restlessness or anxiety. "It is a feverish excitement; -- excitement of the worst species; excitement often carried to the highest pitch; excitement of such a nature that it renders every other work and every other pastime insipid" (Hopkins 1835:10).

Many of these excerpts allude to an "excitement" rather than a restlessness, but when they expand upon these descriptions, they sound very much like restless souls. For instance, Hopkins references a "habitual frenzy" and a "maddening passion," but once
more, he is describing something we recognize today as a different behavioral phenomenon. "Then - see! how quickly he is a man of habitual frenzy - how soon it comes to pass that he cannot abide life save in the tumult, the stormings, the eddyings of his maddening passion" (1835:10-11). This "man of habitual frenzy" fits many of our most common addiction conceptions, for he "cannot abide life" without his intoxicant of choice. This gambler's entire life becomes a "frenzied" one - which would seem to indicate a state which might be described as a "restlessness if unable to gamble" if we were applying our current diagnostic framework.

Hopkins continues by commenting that the "kind of excitement which gambling produces is most dangerous and injurious" and that some men are "driven" by their quest for this feeling (1835:12). In a discussion that lasts four pages, he alludes to a mental state of "excitement" that is "injurious both in kind and in degree" (14). Later, he comes to a conclusion that "(i)t is better, we repeat, to sink into utter dullness than be thus excited" (15). Years ago, these emotional states indicated to moralizers that they were in the presence of a sinning gambler. Now, this constellation of emotional attributes is thought to be indicative of a mental illness.

Characteristically, Talmage seems to be looking inward at a "stimulant" that leads the gambler to an emotional "reaction" that is "deplorable and wicked." While he was obviously not targeting
specific neurochemical processes (as we do today), in a quest to identify the restlessness and anxieties that plagued the problem gambler, his attention was facing inward nevertheless.

This sin works ruin, first, by unhealthful stimulants. Excitement is pleasurable... We must at times have excitement... But anything that first gratifies this appetite and hurl it back in a terrific reaction is deplorable and wicked. Look out for the agitation that, like a rough musician, in bringing out the tune, plays so hard he breaks down the instrument! (1872:159-160).

In a later, more general passage, Talmage expresses his fears about gambling by using epidemic-type terminologies, and in doing so he cites these emotional issues as central. “Betting... is fast becoming a national habit... there are in the country tens of thousands of quick, nervous, sanguine, excitable temperaments ready to be acted upon, and their feet will soon take hold on death” (1872:180-181). These “excitable temperaments” have come to be considered under the “restlessness” rubric, but it is clear that these temperamental tendencies have bothered generations of thinkers who contemplated the meanings of gambling problems.

Interestingly, a notion now firmly considered from within the parameters of the medical model (whereby neurochemical origins of the excitable “action” sensation are sought and dissected) was similarly firmly entrenched in religious and moral discourses. Whereas medical researchers today seek to locate the chemicals
associated with the sickness, moral "researchers" of yesterday sought to locate the temperament and emotions associated with the sin.

Work Problems

"They are too lazy to Work, and too proud to Beg"

-- A "Minister of the Church of England," singing on the sins of gamblers (1718:11)

In this literature, a number of instances are cited in which a gambler loses his job or sees his job performance deteriorate markedly upon developing a gambling habit. This characteristic has revealed to many the presence of a gambling problem. To Frayn's critical eye, for example, gambling

incapacitates for any and every serious employment. It has brought ruin to people of every station; to the clerk at the desk; to the assistant at the counter; to men who held positions of trust and responsibility under others; and to men who were directors of prosperous businesses of their own; while men who inherited large wealth from a careful ancestry, have been brought to beggary and shame, and have handed down to their children a hard lot and a tarnished name (1890:21).

Sounding a similar call to moral concern, Chapin says that gambling "begets neglect of business," and cites this aspect as a particularly objectionable one in the context of gambling problems (1847:303). Later, he speaks of gamblers who "neglect their usual labor, leave the hammer idle on the bench, the store uncared for, the office vacant" (305). A gambler who "leaves the hammer idle on the bench" was found to be particularly problematic for understandable
sociocultural reasons in Chapin’s day; however, we might wonder today why we continue to cite this consequence as medically diagnostic.

In discussing the social circles affected by gambling, Comstock says that “(t)he young man will rob even his own parents, to say nothing of trusting employer, in order to follow this goddess” (1883:57). Friends, family, and employers beware: those who are tempted by this evil goddess will stop at nothing to indulge their gambling habit. His evildoings will extend into his workplace, according to Comstock, in an effort to continue gambling problematically.

Comstock also finds gamblers who are to be singled out for another work-related reason. He warns that “(t)he promise of getting something for nothing, of making a fortune without the slow plodding of daily toil, is one of Satan’s most fascinating snares” (1883:56). Many others agreed that gambling was evil because those who engaged in it embraced this something-for-nothing mindset. This was a mindset that ran stubbornly counter to work ethic norms of the day, which are summed up neatly by Newman: “All industry, all trade, all legitimate business, is based on the law of something for something” (1883:102).

Breeden looks inward to the mind of the gambler when he says that gambling “insults labor and destroys motives to honest industry”
(1899:456). Carter shares this inward-looking emphasis, focusing on what he calls the "betting fever": "The betting fever unfits for honest work. Unreliability and recklessness are the marks of the betting man" (1908:32-33). Like diagnosticians turning to the DSM today, both of these thinkers looked to the minds and motivations of gamblers in search of their work problems.

In sum, most of these thinkers agreed with Beecher, who saw gamblers as souls who progressed toward a state in which work was adversely affected: "(g)amblers are seldom industrious men in any useful vocation... (the gambler) grows unsteady, neglects his work" (1844:115). These kinds of observations served not only to identify the sinful gambler, but also to establish the immoral nature of the actor, who did not toil as these prominent moral experts would prefer.

Up until this point, work-related themes have been referenced often, and they will continue to play an important role in this sociological history. In a chapter that puts forth a "sociology of evil," the "ethic issue" will be re-visited. As it turns out, the "evil diagnoses" that burdened the excessive gambler of yesterday were based in large part upon a specific notion of how work was to be accomplished. To the degree that these gamblers deviated from that norm, they were perceived, labeled, and treated as particularly (and predictably) sinful.
CHAPTER 5

"ASSOCIATED FEATURES": A SOCIOLOGICAL HISTORY OF OTHER PROBLEM GAMBLING CHARACTERISTICS

In the DSM entries for pathological gambling, a wide variety of behavioral phenomena are discussed at some length, but for one reason or another do not merit inclusion in the itemized lists of diagnostic criteria. Still, these "associated features" and other characteristics play an important role in problem gambling identification, interpretation, and treatment. These secondary characteristics are articulated alongside the diagnostic criteria listings in each of the DSM volumes (see Appendix A for the entire descriptions of all of the DSM entries)

The DSM describes pathological gambling features as matters-of-fact, with a tone of dispassionate certitude. Nowhere is it suggested that these judgments are derived from moral ones – when this research shows that this is perhaps the very realm we need to examine to understand these typologies.

In this section, we will continue our examination of the DSM pathological gambling diagnosis by exploring the allusions to
"associated features" and other related aspects of problem gambling behavior. As it turns out, even these secondary characteristics are to found throughout the historic literature.

For instance, the DSM explicitly warns that problem gamblers are "big spenders," while Frayn alludes to a "spendthrift" phenomenon among the population he observes (1890). Meyer, in describing his own "life staked at cards," self-describes his spending habits as such: "I always won, but I never kept my winnings long. Racing and betting and the lavish generosity to friends soon stripped me of my booty" (1895:12). Meanwhile, Black attacks gamblers because they are "wasteful" with their money (1895:115). Chapin also associates specific spending patterns with problematic gambling when he claims that "extravagance" is a "kindred vice to gaming" (1847:307). Tabor connects these "extravagant" acts with sin and immorality when he describes this population as "pursuing their extravagant course of wasteful splurging and immoral dissipation" (1911:116). As so often happens, the moral diagnoses and medical diagnoses converge.

The DSM tells us that we can expect the pathological gambler to be "often overconfident." Weems observed this in the gamblers he had problems with nearly 200 years ago. He speaks of

... the fatal confidence with which a successful gambler is naturally inspired. This winning, night after night, for a week together, he ascribes to some grand secret which he has lately found out in his play, and therefore is very sure now, that he shall always win (1816:43).
Whereas the DSM informs practitioners that pathological gamblers display an "inability to stay within a budget," Tabor speaks on the problematic matter of budgeting when he observes that "few among them seem able to content themselves within conservative bounds in the use of their legitimate incomes" (1911:116).

The Manual suggests that these gamblers "have the attitude that gambling causes and is also the solution to all their problems." Spriggs-Smith, meanwhile, criticizes those who "have sought at the gambling table the means to rescue themselves from an embarrassing position" (1890:17). Martin also explores this tendency to look to gambling for solutions, when in reality it leads to problems: "If, then, the gambler make gain of money his plea for gaming, we say, there is no prospect of ultimate gain. Loss of money, not increase, will be the result" (Martin 1856:29). He then goes on to challenge this kind of thinking: "But if he persist that money may be gathered by gambling, we can only answer him in the words of our Savior: 'What is a man profited if he shall gain the whole world and lose his own soul? Or what shall a man give in exchange for his soul?'" (ibid). Even if the gambler wins money (and hence solves problems), then, he is told that he ultimately loses in a far more ominous (and decidedly moral-religious) setting.
The DSM also warns against gamblers who lose track of time. In referring to gamblers, one minister says that the problem with this population is that they do not stay within a time budget:

(Gamblers) will be very likely to devour much Time wherever they are allowed: which is a very important Consideration... For when Time fails, nothing can be done. I would therefore ask such as at any time are about to set themselves to Gaming, what Time they propose to spend in it?... here, alas! very few are true to their Time assigned. For even they who spend the longest Evening in Gaming, do too often entrench upon the next Morning too (Minister 1718:5).

Nearly three hundred years ago, then, moral observers were remarking on the problematic tendency of gamblers to mis-budget their gambling time.

The DSM calls this disorder "incapacitating," and predictably, this is a common theme among early moral thinkers. Green says of the gambler: "he is more and more incapacitated" (1847:13), while Frayn claims that gambling "incapacitates for any and every serious employment" (1890:21).

Some are more eloquent. Talmage remarks upon a case in which he observes that "(a) few years have passed, and he is only the wreck of a man" (1872:183). Weems sees it all fall apart for an incapacitated female gambler: "Her bloom, her beauty, her fame, fortune, all, all, sacrificed to the most detestable of vices!" (1816:22).

According to the DSM description, pathological gamblers "may lose what he/she has accomplished or attained in life." To these earlier thinkers, this riches-to-rags process was clearly observable in
their own day. Talmage cites one of dozens of “case studies” in this literature tracking a similar progression:

An only son went to New Orleans. He was rich, intellectual, and elegant in manners. His parents gave him, on his departure from home, their last blessing. The sharpers got hold of him. They flattered him. They lured him to the gaming-table... fully in their grasp, they fleeced him; and his thirty thousand dollars were lost. Last of all he put up his watch and lost that (Talmage 1872:170)

The DSM voices inform us that we might watch out for an “association with fringe and illegal groups.” After describing the sinful gambling act, Weems expresses a very similar diagnostic concern: “And in the company of THIEVES and PICKPOCKETS!” (1816:22).

Hence, even the secondary concepts associated with gambling problems today were cited by the moral thinkers of this earlier era. We now turn our attention to a handful of “associated features” that were more commonly referenced in the historic literature.
Progression, Chronicity, Careers, and Trajectories

"The craving for excitement grows upon a man by indulgence, and if no restraint be exercised, it will in time overmaster the man and bring him into a condition in which he may be said to be possessed by the devil."

-- Newman, diagnosing the progression of the sin (1906:530)

"But as one evil step naturally leads to another, the man who has progressed thus far does not stop there."

-- Green, commenting upon a gambler sliding down a progressive trajectory (1847:17)

Sometimes, in reading through these lengthy historic pieces, connections between these aged moral-religious perspectives and our current medical thinking were less readily made. On many occasions, however, the similarities were so striking they seemed to jump off of the page. For instance, a 200-year old passage from Rush claims that progressiveness is central to this gambling affliction, just as professional diagnosticians do today: "(gambling) as all vice is in its nature progressive" (1803:71).

The story of a problem gambling "trajectory" that is chronic and progressive has been a central feature throughout the problem gambling field's history. In the DSM-III, the first edition to include pathological gambling, an opening statement informs practitioners that this is a disorder that covers those "who are chronically and progressively unable to resist impulses to gamble."

One would have to conclude that Spriggs-Smith is talking about his era's problem gamblers when he remarks that "(t)he gambling
world presents us with many sad pictures of a gradual decline and final ruin" (1890:6). They engage in a series of destructive and deteriorating behaviors – in a fashion that gradually leads to "ruin."

In a particularly descriptive passage, Parry seems to be agreeing that the slide is a gradual and downward one: "Coming from Colorado to Chicago, one travels apparently on a level, and yet so deceptive is the grade that without knowing it the traveler has descended over five thousand feet" (1906:6). So it is with gambling, Parry concludes – a slow, progressive, deteriorating journey. Little by little, we can track the gambler’s fall from the good graces of his or her community.

The Rev. C.W. Andrews also envisions a relatively plodding progression: “At first a man is ‘drawn away’ by his own desire – no more. Simply drawn from his habitual course into something he has never done before. Then ‘enticed’ by definite gain” (1908:39). In Andrews’ tale, the gambler progresses from one level to another in his gambling “career.”

Others insist that a far more rapid progression characterizes the gambling cycle. Hopkins sees the gambler as a person who gets caught in a type of downward spiral:

The poison acts with greater and still greater power, till it fills every vein, fires the whole system, and subjects the very spirit. The victim continually craves the stimulus of his depraved habit, till, by and by, life becomes insupportable without it and insupportable with it. I am aware that this is a sketch of the gambler in his dotage – a gambler in the last
stages of his progress – a gambler whirling upon the lowest, swiftest, narrowest convolution of the whirlpool; but he gets there speedily. The eddy is a strong one. And it is but a little way from its slow and lulling motion, to the point where its victim is dashed upon changeless ruin (1835:10).

Hopkins then continues with an angrier and harsher assessment:

How much more detestable, then, does the vice appear when it has passed the point of initiation and become a living passion which will and must be fed! ...Then – see! how quickly he is a man of habitual frenzy – how soon it comes to pass that he cannot abide life save in the tumult, the stormings, the eddying of his maddening passion. And – see! – how he is first led, then coaxed, then driven, then lashed, and at length, goaded by its power. His passion is his tyrant (1835:10-11).

We can see that in Hopkins' world, those for whom "his passion is his tyrant" suffered in a way that was progressive in nature. We might speculate on whether they suffered in part because people like Hopkins clung to the views that they did. It is clear that the gambler is "much more detestable" to Hopkins (and most likely to his audiences) when he enters into a realm we now describe as pathological. As is the case with so many of these characterizations, upon "diagnosing" the problem gambler, we learn how to "treat" this individual – by listening to the descriptive phrases of these "expert" speakers. The "detestable" nature of a population that gambled too much was socially achieved in this manner, and this disdain has not completely disappeared from the public discourse on gambling behavior today.
Beecher tracks a gambling progression from the non-monetary to the monetary:

After the relish of playing for a stake, no game can satisfy them without a stake. A few nuts are staked; then a bottle of wine; an oyster-supper. At last they can venture a sixpence in actual money - just for the amusement of it... If properly plied, and gradually led, he will go to any length, and stop only at the gallows. Do you doubt it? let us trace him a year or two further on... (1844:106-107).

In devoting the rest of his essay to "tracing him," Beecher paints a picture that includes action seeking, loss of control, borrowing, suicidal thoughts, remorse, preoccupation, lying, and family problems - much as a portrait of a problem gambler today might. Beecher then uses an eloquent analogy to illustrate how he perceives the progression of the gambler: "Certainly; there are always ripe apples before there are rotten. Men always begin before they end; there is always an approximation before there is contact" (1844:119).

Whether we say that they progress "from ripe to rotten," from virtuous to sinful, from normal to pathological, or from healthy to sick, the concept of progression stands imposingly as a key identifying feature.

Later, Beecher appears to invoke vocabularies similar to the "downward spiral" rhetoric used by Hopkins (as well as today's treatment professionals). Beecher remarks that "(t)here is a downward climax in this sin. The opening and ending are fatally connected, and drawn toward each other with almost irresistible attraction. If gambling is a vortex, playing is the outer ring of the
Maelstrom" (1844:122). He then describes a series of "scenes" in which the gambler deteriorates in this fashion (1844:122-124).

Breeden also puts this theme to use when he speaks of "the downfall and utter ruin of many an otherwise noble young man" (1899:454). Haines and Yaggy, meanwhile, also like the "vortex" idea: "Like a mighty maelstrom, its motion, at the outside, is scarcely perceptible but soon increases to a fearful velocity; suddenly the awful center is reached - the victim is lost in the vortex" (1878:273). In these historic tales, control is progressively lost, and sin takes over as the defining aspect of the gambler's constitution. Interestingly, in today's tale, control is progressively lost and sickness takes over as the defining aspect of the gambler's constitution.

Green emphatically argues that the problem-in-the-gambler is not a sudden development, but rather a multi-phased development-in-progress: "It was not by one step, or in one moment, that he attained his present character. No! he has passed through scenes fearfully depraving; he has corrupted others, and cannot fail to have corrupted himself" (1847:226). Today, this "corruption of self and others" forms one of the central axes of the pathological gambling diagnosis; it is because of suffering in these realms that many problem gamblers seek help.

Characteristically, Talmage describes a progressive journey that is both dramatic and prescient. In describing a specific gambler's life
story in detail, Talmage often cites several diagnostic criteria that we
would later officially embrace via psychology and psychiatry.

I have for the last seven months gone fast down the broad
road. There was a time, and that but a few months since,
when I was happy, because I was free from debt and care.
The moment of the first steps in my downfall was about the
middle of last June, when I took a share in a company, bought
lottery tickets whereby I was successful in obtaining a share
of one-half of the capital prize, since which I have gone for
myself. I have lived and dragged out a miserable existence for
two or three months past. Oh, that the seven or eight months
past of my existence could be blotted out; but I must go, and,
er, this paper is read, my spirit has gone to my Maker, to give
an account of my misdeeds here, and to receive the eternal
sentence for self-destruction and abused confidence. Relatives
and friends I have, from whom I do not wish to part under
such circumstances, but necessity compels. Oh, wretch!
lottery tickets have been thy ruin (Talmage 1872:174-175).

It is safe to say that Talmage was describing the life of a
gambler with a severe problem in this passage. This gambler is quite
remorseful, and like many who suffer similar pangs of remorse today,
he entertains thoughts of suicide.

Other early moral thinkers seem to believe that this is a chronic
condition that worsens inexorably over time. When Beecher describes
the career of the problem gambler, he tells of a gambler for whom
"years have passed on" in his attempt to outline the long road that
these gamblers encounter (1844:124).

Green describes a gambler for whom:

A few years roll away... His health grows feeble; he is more
and more incapacitated to follow his associates through their
various routines of midnight revelry, and they desert him.
His long habits of life render him unfit to return to any honest mode of procuring a livelihood, and by degrees he sinks lower and lower towards destruction (1847:13).

Saying that the disorder is "chronic and progressive" essentially invokes a vocabulary of a "career" (Becker 1963:25-40). In passage after passage, these thinkers detail social processes that are both chronic and progressive – which, when put in layman's terms, means that they last a long while, and they involve a downward spiraling. What is interesting here is that moral thinkers tracked similar enduring deteriorations many years ago, though their objectives were not medical in nature. It seems that everywhere one turns in the DSM, an identifying criterion with a long and recorded history is found.

Riches-to-Rags: The Loss of Money

"(These gamblers) have been reduced from opulence, to poverty and wretchedness"

-- Rush (1803:71), tracking the downfall

In a classic summary, the aforementioned "Minister of the Church of England" states that "many Persons have, by the extreme Vanity of ungoverned Gaming, both ruined their Estates in this World, and their Souls in the other" (1718:5). Psychiatric and psychological experts would later rely on this "ruining of estates in this world" as a diagnostic tool of sorts. While we no longer worry about souls in the "other" world in quite the same way, we do worry about those who
lose their estates in this one – so much so that we have decided to include it in our list of indicators that gambling has become a psychological problem.

Of course, we cannot say that “losing money” alone is indicative of a mental illness. The DSM accesses this matter these via more general terms (such as “may lose what he or she has accomplished or attained in life”), but the loss of money looms throughout the diagnosis.

Many riches-to-rags stories caught the attention of those who long ago sought to explain the problem gambling monster. Martin tells the story of “Mr. Porter, a gentleman who, in the reign of Queen Anne, possessed one of the best estates in the country of Northumberland, and lost it in twelve months” (1856:25). Talmage relates this “case study” of a gambler: "A young man, having suddenly heired a large property, sits at the hazard-table, and takes up in a dice-box the estate won by a father's lifetime sweat, and shakes it, and tosses it away" (1872:161).

Weems relates this riches-to-rags story about a "young Lawyer... from the neighborhood of Norfolk, Virginia." This individual's "prospects were promising – a large bag – numerous clients – rising fast in the world – and should, no doubt, soon have made (a) fortune." As is the case in most of Weems’ tales, the Devil intervened and tempted, and a predictable downward spiral resulted:
"I went, and lost." Since then, he says, "I have never dared to shew my face at a Court-House, nor to ask a suit; but have strolled about like a vagabond" (1816:33-34).

Frayn describes a case in which the gambler's downward fall encompasses riches and relatives alike: "He has a good social position to maintain, he holds an appointment both lucrative and honourable, he has a wife and little ones, dearer to him than he can tell, but now all these are as nothing!" (1890:16-17). Weems shared this concern not just for the financial well-being of the gambler, but also for the potential impact on the family: "To rid himself at once of his wretchedness, he went to a Gaming-table, which quickly swallowed up his estate, and reduced his young wife and little son to poverty" (1816:12).

These are the riches-to-rags tales commonly heard in the life trajectories of problem gamblers today and yesterday. Importantly, Weems saw them as evidence of the work of the devil, who "found them rich; he left them beggars" (Weems 1816:40). What was once the "devil's work" is now often thought to be a disease's work. Regardless of whether these acts reflected the doings of the devil or an "undoing" rooted in a disease, money losses have long functioned to identify those who gambled too much.
Alcohol Problems and Gambling Problems

"These gamblers truly fulfil the memorable words of the great prophet: 'They are drunken, but not with wine; they stagger, but not with strong drink.'"

Posnett, connecting the dual evils (1863:18-19).

It should be noted that this "sin to sickness" progression is not unique to pathological or problem gamblers. Most notably, the field of alcohol abuse provides a useful parallel framework in these contexts. In their chapter on alcoholism, Conrad and Schneider note that current experts use terminologies that are remarkably similar to ancient descriptions (1992:76). Conrad and Schneider proceed to argue that alcoholics have been "redefined from willful and vicious to helpless and sick" (1992:81). Trice and Roman present a similar argument in their classic article on "delabeling" those who have alcohol problems (1970), an argument extended to problem gambling in an article by Preston and Smith (1984). Szasz, of course, has also written extensively on the moral undertones of drug and alcohol addiction (1985).

The parallels extend beyond the realm of the theoretical into the realm of the empirical. Some of the earliest recorded references to gambling problems also addressed the matter of concomitant alcohol problems. An critical 1828 report on gambling behaviors offered this assessment: "(gambling) is intimately connected with Intemperance" (Report:14). Parry, who combines moral and medical rhetoric more
often than any other thinker in this collection, quotes a doctor who outlines medical case histories in which “gambling (is) accompanied with much drinking” (1906:18).

Others were less specific in their claims that "dual diagnoses" were common in an earlier era. In 1718, a minister of the Church of England wrote that “Gaming ... “tis, in truth, the Mother of many Vices” (4). Green sounds a similar call when he references “this mighty (gambling) evil, which is at once the parent of innumerable other vices of the most disgraceful character!” (1847:11).

Many years later, these “dual-diagnosis” questions still nag at those who encounter these populations. In the DSM pathological gambling entry, substance abuse and dependence is listed as a “complication” and with the “associated features and disorders.” Long ago, thinkers whose concerns were moral in nature explored these very same associated features.

In An Exhortation in Christian Love, we see another early reference to the double troubles of drinking while gambling: “At such Diversions, great Companies are gathered together, many with their Minds elevated with strong Liquors, to see the Creatures of God abused, which he hath graciously given us for our lawful, not unlawful Use; laying Wagers concerning them...” (1770:12). Interestingly, this unnamed thinker appears to have uncovered an drinking-and-gambling strategy now employed by casinos everywhere.
Rush, meanwhile, notes that when gambling is "accompanied with the intempered use of ardent spirits" it "plunge(s)" him into "ruin" (1803:71). In his moralizing work, Spriggs-Smith addresses at one point "the great temptation to, and increasing vice of, betting, thereby entailing untold misery in the homes and lives of our fellow subjects, next in importance for evil to the great sin of (in)temperance, with which, alas! it is too often allied" (1890:9-10). Haines and Yaggy make a similar (albeit more deterministic) statement when they say that gambling "almost inevitably leads to intemperance" (1878:273). Castle articulates an interesting solution to this sinful partnership: "Take away the liquor and gambling will quickly die a natural death" (1911:46).

In outlining his primary objections to the evils of gambling, Mackenzie points out that "the habit of gambling is very often allied with, and is even an incentive to, the practice of other vices" (77). In a similar spirit, Chapin states that one of the main reasons he objects to gambling and gamblers is "because of the vices which are likely to accompany it" (1847:305). Later on, he makes a direct connection:

The gamester and the drunkard – how often joined in one individual! ... In all the degrees and mutations of gaming, from the fearfulness of the first trial, through the eagerness and excitement of hope, the flush of triumph, and the frenzy of despair, intemperance is a vice that naturally, very naturally, accompanies it (1847:306).

In an interesting passage linking the troubles of alcohol and the troubles of gambling, Breeden was perhaps among the first to note a
connection between drinking alcohol and losing one's faculties at the gaming tables:

Gambling is associated with and followed by a whole brood of dire evils and flaunting vices. It provokes the thirst for strong drink. The terrible reaction of an exciting 'winning' or a destructive and heavy 'loss,' calls for a stimulant; this 'enemy in the mouth' not only dissipates depression, but 'steals away the brains,' and goads its unreasoning victim to return to the gaming table. It not only calls for stimulants but entraps its victims in other meshes (1899:454).

We can see, then, that a number of these early thinkers commented upon gambling and alcohol. Other thinkers used alcohol more as an interpretive framework for the gambling problem discourse – in essence, they were treating gambling as alcohol. To these thinkers, the gambling problem was very much like the alcohol problem, and they frequently outlined these similarities. In the passages that follow, alcohol provided a useful lens for those who wished to understand how gambling problems developed.

Hughes also aims for this more familiar conceptual model when he says that "Gambling, like drunkenness, becomes at last an overpowering appetite, which the victim is helpless to resist" (1889:260). Beecher (1844:113) makes a series of interesting connections between various activities that are engaged in for a sensation of "intense thrill": "The inebriate obtains it by drink and drugs; the politician, by the keen interest of the civil campaign; the young, by amusements which violently inflame and gratify their appetites." He draws a parallel between gambling and these activities
by citing the former's "EXCITABILITY" factor (ibid, caps in original). Comstock also enjoys the "grouping game" when it comes to sins and sinners. He says that "Intemperance and lust have been called twin-devils. We must add another to their foul company. For the passion for gambling is as remorseless as either of the others" (1883:57).

Others used alcohol as a conceptual model, but wished to stress that gambling was a more dangerous problem. Tabor cites a report in which it is claimed that "It is a vice that blunts the moral consciousness and takes even stronger hold on the individual than drink" (1911:139). Hogge makes a similar argument when he says: "The Right Hon. Sir HENRY CAMPBELL-BANNERMAN wrote, only a few weeks ago: -- "I long ago formed the opinion that betting and gambling come next to drink (and doubt even if they come below it) in the measure of the curse they bring upon society" (1904:2).

Hogge also quotes other "experts" in an effort to compare these dangers:

Mr. ROWNTREE, while not venturing to suggest that they contribute in equal proportions, nevertheless states that, in his opinion, Betting and Gambling come perilously near Drinking as contributory causes. In this view he is supported by Mr. JOHN HAWKE, the Hon. Sec. Of the National Anti-Gambling League, whose close acquaintance with the detailed miseries which the evil produces provides an unquestionable warrant for his opinion. He states that 'gambling is becoming a worse evil, and a more serious cause of poverty than drink' (1904:1).

Breeden also claims that the passions of drink are less troublesome than those associated with gambling: "It is the
unanimous testimony of ministers of the gospel that it is far more
difficult to lead a man who has become infatuated with the gambling
mania to a life of uprightness and virtue than to lead a drunkard from
his cups" (1899:456). Hobson seems to think that this represents a
defining and unique aspect of gambling behavior: "(p)erhaps no other
human interest, not based on purely physical craving, arouses so
absorbing a passion: alcoholism itself scarcely asserts a stronger
dominion over its devotees" (1905:9).

Talmage, as usual, brings a broad and dramatic brush to the
analytical table, but in doing so he manages to group this population
with an impressive variety of miscreants. He remarks that:

this (gambling) sin works ruin first, by unhealthful
stimulants. Excitement is pleasurable... The Chinaman
gets it by smoking his opium, the Persian by chewing
hashish; the trapper in a buffalo-hunt; the sailor in a
squall; the inebriate in the bottle, and the avaricious at
the gaming table" (1888:147).

Those who gambled too much, then, were often perceived
alongside those who drank too much. In the years that followed,
these connections would be more rigorously (but perhaps not more
enthusiastically) examined by those whose training and biases lay in
the medical realm.

Cognitive Distortion/Distorted Thinking

For psychologists, looking at “cognitive factors” essentially
entails an examination of the thinking of the afflicted. Predictably,
observers of gambling behavior have long speculated on the thinking problems of those possessed by the gambling spirit. With characteristic conciseness, Parry claims that gambling has "always enfeebled the mind" (1906:21).

He describes a cognitive (and social) deterioration in detail in a separate section:

The card party causes the atrophy of the social faculties. The social intellect is today so sapped that conversation has become an insipid drivel. The thread of thought that should knit together a company in rational conversation and fellowship cannot be sustained two consecutive minutes. Men and women in social life have lost the power of connected thought (1906:10).

Others seem to feel that the activity disrupts cognitive processes by its very nature, an interesting consideration in the context of mental pathologies. Hobson states that "it inflicts a grave damage on the intellect... The essence of gambling consists in an abandonment of reason, an inhibition of the factors of human control" (1905:5). According to this interpretation, gambling entails a loss of the "factors" of reason and control - characteristics that psychiatrists would seem to find noteworthy. If all gamblers engage in these behaviors, though, is this still a "pathological" behavior?

Steinmetz talks about a loss of cognitive ability as well: "In some cases the effect of losses at play is simply stupefaction. Some players, at the end of the sitting, neither know what they do nor what they say" (1870:54). Comstock, who claimed expertise both legal and
moral, has this slightly more developed take on cognitive transformations:

Cool judgment and forethought are displaced by the feverish excitement of getting something for comparatively nothing. Like intemperance and lust, this passion once aroused leads to the abandonment of honest calling and renders a man a vagrant in mind and conduct (1883:58).

Comstock then goes on to articulate a theme often heard in Gamblers Anonymous and treatment meetings: that when gambling, the thinking of the problem gambler "goes to mush" or becomes increasingly hazy. Comstock observes that "(r)eason is allowed no place in his judgment... His infatuation blinds his eyes to the wisdom of his ventures... His golden promise has completely blinded moral perception." The gambling activity, then, "blinds" the gambler to moral and rational thinking patterns that are deemed desirable. In the context of this discussion, we might ask, how much of that which we consider "desirable" is socially created? The use of technical terms such as "cognitive" may distract us from the commonsense realization that the notions of "what we think" and "how we think" are profoundly affected by "big" sociological factors.

Gender Patterns

It is common to note that the gender balance for problem gamblers appears to be weighted toward men (National Research Council 1999:115, see also American Psychological Association 1980,
1987, 1994), but it is important to remember that women have their own history of gambling problems, some of which are documented in the early literature.

In poetic fashion, Martin describes a female gambler for whom “Her morning sleeps are not able to repay her midnight watchings” (1856:15). When speaking of specific gambling locations, he worries that “many a virtuous woman is ruined there; that the worst of the female sex are gathered there” (Martin 1856:21).

Gulland wishes to reveal that this “evil” is taking some interesting demographic turns: “Of late years the evil has obtained an increasing hold over women and children” (1908:39). Tabor sounds a similar warning cry when he says that

the evil reaches even to women and young boys... Can anything be more deplorable than the practice followed by some women of sending young boys to the booking booths with money to place bets, thus early training them to the knowledge and love of gambling? Can anything be conceived more vile than to hold out temptations to weak women afflicted by the gambling mania to steal their husband’s money, set aside probably for rent, and to squander it on the race track? (1911:123).

In this instance, we are told that these acts are evil, and that they are especially “deplorable” in women (and in “young boys” – one wonders whether the young girls of the day might have been indulging as well). While gambling was wrong in all environs, Tabor’s moral conscience is especially bothered when females engage in it.
Stough seems to expect more of women on this moral matter as well, for he laments "that so many mothers and sisters have descended morally to the plane of common gamblers" (1912:85). He concludes with the following:

It is rather hard to declare that some of the loveliest of women, among them even some church women, are in the eyes of the law (then certainly in the eyes of Christians and all moral people) nothing but gamblers. When men play for a jackpot of silver and women play for a silver creamer, there can be no difference in the world except in the shape of the silver! (1912:85).

The gambling stakes may have changed, but have our defining characteristics of those who gamble too much remained the same – at least on this moral dimension? Problem gamblers, who still feel strongly that they have "descended morally," continue to be faced with a considerable number of moral challenges (not to mention challengers) in their social universes. These moral-religious elements were fixtures in society long before today's problem gamblers ever laid a bet. As sociologists like to point out, the forces which shape our social lives are often broader and farther-reaching than we imagine. Today's problem gamblers share a legacy with their "evil", "immoral" kin from the literature: a social universe shaped by the moral-religious response to gambling.
Invisibility Issues

One of my favorite Gamblers Anonymous sayings points out that problem gamblers are less easily identified than alcoholics because “you can’t smell the cards on our breath and we don’t go around bumping into walls.” This “visibility issue” has moved some to refer to this as an “invisible addiction.” Practically, this is no small matter of concern, because it could well be that problem gamblers, unencumbered by the interventions that might result when, say, a co-worker comments upon an alcoholic’s smell at work, are caught later in their “careers.” The “luxury” of invisibility may not pay off in the long run, as problem gamblers can potentially slip further downward before they are “caught.”

I had always assumed this “invisibility” factor to be of recent vintage. That is, I had thought that this realization had been informed by careful GA and medical observations, and that it was based in a more or less systematic methodology. As it turns out, people were commenting upon the affliction’s invisibility long ago.

As Steinmetz notes, “(w)hat is visible, however, is nothing in comparison to the secret agony. It is in his heart that the tempest roars most fiercely” (1870:50). Gulland puts it this way: “Betting and gambling do not always leave the obvious marks on men which some other vices, such as intemperance or impurity, inevitably produce” (1908:43). Green also remarks on a case in which invisibility was
achieved by a gambler with problems: "still he had managed it so that none who knew him in private life, had any knowledge of the business in which he was engaged" (1847:21).

This characteristic is noted by Talmage as well: "Intemperance soon stigmatizes its victim – kicking him out, a slavering fool, into the ditch, or sending him, with the drunkard’s hiccough, staggering up the street where his family lives. But gambling does not, in that way, expose its victims" (1888:61). Here, Talmage describes the potentially destructive consequences of invisibility: it allows those who gamble problematically to escape detection. He describes community members who doubt that these matters are problematic, only to be victimized by gambling-related crime and embezzlement. One member of Talmage’s community did not support Talmage’s crusade against gambling and gamblers:

... not knowing that his first book-keeper, though receiving a salary of only a thousand dollars, was losing from fifty to one hundred dollars a night. The president of a railroad company refused to patronize the institution, saying: ‘That society is good for the defense of merchants, but we railroad people are not injured by this evil.’ Not knowing that, at that very time, two of his conductors were spending three nights of each week at faro tables (1888:145).

This anecdote probably served as a reminder to any doubters in Talmage’s audience that they needed to heed his calls to adamantly oppose gambling and gamblers on moral grounds. Pointing to its often-missed nature also served as a diagnostic criterion of sorts, allowing us to “see” that which is often invisible. Because these
wrongdoers are not easily seen, the damage they cause can accumulate secretly. These "invisibility issues," however, were not so imperceptible that some of the earliest moral thinkers on record were unable to see and interpret them.

Physiological Manifestations

Despite the invisibility issues that appear (or do not appear) to affect the problem gambler's lifestyle, many have sought to locate more visible physiological manifestations of this disorder. In fact, much of current research in the field is devoted to locating markers that are visible to those with an expertise in the physiological. Many early thinkers also claimed to have seen distinct outward markings of the gambling problem, and described them in their own words. Interestingly, these of-the-body matters are used as evidence that a sinful (or possessed) character looms within the gambler. Today, of course, we use them as evidence that the afflicted is "sick."

Chapin talks of "(t)he physical injuries that this pursuit works upon him – the derangement and prostration of his bodily energies, caused by intense excitement, unnatural vigils, overwrought anxiety, intemperance, and strife" and then proceeds to say that the "injuries he inflicts upon his soul" are greater (1847:309). Later, he describes the gambler as looking physiologically defeated: "His frame worn – his cheek pale, very pale – his eye wild and fevered – his lips parched and
steeped in inebriety – his hopes crushed – his very life only the motion of excitement and of passion” (1847:310).

Martin also spoke at some length on these physiological matters. He uses the device of “quoting” others who note these symptoms. First, he quotes “Steele” as saying that “There is nothing that wears out a fine face, like the vigils of the card-table and those cutting passions which naturally attend them” (1856:15). Later, he quotes "Saurin" in similar fashion: “we sometimes see men whose relaxed and trembling hands are too feeble to hold a box of dice or a hand of cards, supported by others, and gaming with a part of themselves, as they cannot do so with the whole” (1856:33). He claims that “(w)e see it in those hollow eyes – in those haggard looks – in that pale complexion” (1856:34).

Whether or not we can accurately “see” this population in a reliable way remains a point of contention in the field of problem gambling studies. What is clear now is that many early thinkers were certainly attempting to do so long ago.

Abstinence

“Get up! Escape! Flee!”

-- Martin, telling gamblers to quit (1856:34)

As is the case with other addictions, clinicians have often suggested that an abstinence model, in which the gambler refrains
from all gambling activity, provides the best treatment option for this population (Custer 1985:219). Gamblers Anonymous is even staurcher in its advocacy of an abstinence model.

In reading through these early passages, it seems that many fear that the potential alternatives to abstinence are nothing short of life-threatening. Chapin, for instance, tells the gamblers in his midst to "(e)scape for your lives from that gulf to which you are hastening" (1847:316).

On other occasions, the abstinence language is more substantial and even sophisticated. Martin urges a renunciation familiar to those who know the twelve-step model today: "For the sake of your body, soul, and spirit, give up gaming. For the sake of kindred and friends, give up gaming. For the sake of society and of your country, give up gaming; and renounce it immediately" (Martin 1856:33-34). "Abstain from gambling because it is bad," Martin seems to be telling his followers. Today, we say "abstain from gambling because it is bad for you," invoking a discursive framework of health and mental illness that effectively conceals our previous moral judgments.

One alternative to the abstinence strategy is a model of moderation and control, but Parry (like many clinicians today) feels that this approach can do more harm than good. He asks "Can the Card Be Controlled?" and seems to suggest a definitive answer:
Cards have never been controlled. They have always stimulated unhealthy excitement. They have always caused an exhilarating velocity of passion toward ever greater hazards and increased longing to take advantage of other men (1906:21).

It appears that to Parry that the only logical – and moral – answer is to stay away from gambling’s grip by avoiding its excitements and passions. Parry’s “velocity of passion” is specifically referenced as a detrimental aspect of gambling behavior. Our prose is no longer as graceful as our forethinkers, but many of our concerns are quite consistent.

Others are more eloquent in their descriptions. Heath, who says that these things must be avoided, admonishes the gambler as such: “If you must have excitement, go into the jungle and hunt tigers and wild elephants. That, at least, can risk no one’s life but your own!” (1905:235). In this exhortation to abstain, we see the language of “social circle destruction” evoked to justify it.

I should note here that to many of these thinkers, the abstinence model applied to everyone. Chapin draws parallels with alcohol when arguing against gambling at all:

But why does the temperance pledge wisely prohibit it? Because one draught may kindle the inclination for another – because every drunkard had his first draught; and therefore, in order that no evil may come in, it is wisely forbidden even to introduce by one step: ‘Shut the door against its first overture,’ is the mandate – ‘Touch not, taste not, handle not!’ So, especially to the young and the easily-tempted, I would say respecting cards, dice, and the like. Every gamester had his first game – alas! it was not his last” (1847:296).

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
According to this way of thinking, abstinence was advisable in all cases. To those who do not currently gamble, Martin similarly argues for an all-encompassing abstinence model:

Again I entreat those of my young brothers who have not commenced gaming, to maintain the utmost distance from all play. Is it difficult, in some company, and in some circumstances, to abstain entirely? It may be difficult – no doubt it is – but it will be far harder to leave off when you have commenced, even though disgrace and ruin may be staring you in the face (1856:33).

“Avoid it, elude its grip:” these are the messages that we have long sent to our gamblers. The general public has decided to ignore these absolutist admonishments, but the problem population, as usual, is still haunted by their moral themes and implications. The idea that we need forswear all gambling activity has a long history, and we might contemplate whether this history affects our current perspectives on the “proper” way to do treatment.

Epidemiology

“How many have been deceived!”

-- Spriggs-Smith, wondering aloud (1890:17)

“In the present day it is the vice of the masses.”

-- Newman, providing his own answer (1906:52)

Those who rely upon a more or less medical model often attempt to quantify the number of individuals who suffer from a given affliction. The problem gambling field is no different, as an increasing
variety of attempts have been made to establish prevalence rates nationwide (National Opinion Research Center 1999, Shaffer et al. 1997) as well as in Nevada (Volberg 2002). The science of epidemiology – less cumbersomely thought of as the “counting” science – is thus an important component of current-day thinking on problem gamblers.

The reader who has come this far will not be surprised to learn that epidemiological efforts substantially predate our current attempts to count problem gamblers. Barnett claims that this was the very reason he spoke out: he wished "to draw attention to the nature and prevalence of the disease (of gambling)" (1897:21).

Even in 1718, a sermonizer wonders about prevalence questions: “How many Young Heirs have fall’n a Prey ... How many Apprentices have ruined themselves, and robbed their Masters, to feed these cruel and insatiable Horse-Leeches?” (10). Many moral experts enthusiastically stepped forward to address this counting question.

Chapin says that this is a problem “that is widely prevalent, and especially in large cities and their vicinities” (1847:297). Like many problem gambling academics today, he wonders if “measuring” the specifics of this group might present methodological challenges: “Who can estimate it? Who can speak of it in its fullness and its depth?” (1847:311).
That very year, Green felt that he could “estimate it.” He opens up his dissuasive by saying that “(t)he sin of gambling, against which my present efforts are directed, is as great and widely spread as any, which, at this time, exists among us” (1847:11). In 1899, Alexander provides us with a slightly more specific attempt: “tens of thousands of young men in this great city of ours, that have been sucked into that maelstrom, and how few of them have ever come up again to take their place in the ranks of true men and good!” (80).

Most, however, are more general in their outlook. Beecher (1844:105), preaching out of Indianapolis, Indiana, says that "(o)ur land... is full of gambling in all its forms.” On the next page, he continues his tirade against gambling by pointing to "the universal prevalence of this vice" (1844:106). More than a century and a half before the National Gambling Impact Study Commission was established by Congress to study the “prevalence of this vice,” moral-religious thinkers were contemplating the same counting matters.

Haines and Yaggy provides a description of prevalence that is startlingly similar to a description of gambling’s reach in America today – minus the “evil” diagnostic overtones, of course:

This alarming evil is as wide-spread as our country. It is practiced from the humblest water craft that floats on our canals up to the majestic steamboat on our mighty rivers; from the lowest groceries the curse the community, up to the most fashionable hotels that claim respectability; from the hod carrier in his bespattered rags, up to the honorable members of congress in their ruffles (1878:273).
Other moral thinkers pointed to a perceived increase in these social rates. In their view, the incidence rates associated with these problems were rising. "The question of whether drink or gambling is doing the greater harm is academic rather than practical; but one thing seems clear, drinking probably is decreasing, gambling without doubt is increasing" says "The Head Constable of Liverpool, in his Annual Report, 1908" (Gulland 1908:38). In similar fashion, Hogge cites evidence from "a recent writer in the Nineteenth Century, who declares that betting and gambling have increased to an alarming extent during the last fifteen years" (1904:5), while Barnett says "(o)n all sides we have abundant evidence of the increase of betting and gambling" (1897:3).

In order to add weight to his epidemiological efforts, Parry employs the expertise of "A physician," whom he quotes as saying, "No one but those employed like me by the society I serve know the extent of gambling both in and out of church membership" (1906:18). What is most interesting here is that here these discourses converge, and the expertise of the moral judgers supplements that of the medical practitioner. While the two versions often find themselves coming into conflict in history, obvious overlaps can be seen when gambling behaviors are debated.
"I am a Man, or rather a mad-Man. I am the thing, sir, they call a Gambler."

-- A gambler with problems, speaking in Weems (1816:34)

“It transforms men to brutes, desperadoes, maniacs, misanthropists, and strips human nature of all its native dignity.”

-- Haines and Yaggy (1878:275), ringing in with all sorts of names for those who gamble too much

“The genus gambler is a hydra-headed monster.”

-- Breeden, getting into the typologizing spirit (1899:452)

In 1899, a curious observer wondered about a matter that has intrigued many thinkers before and since. Alexander mused that “(t)here must be something in human nature that inclines strongly toward this (gambling) habit” (69). That “something” has been articulated in a range of ways by a wide variety of thinkers, all of whom attempt to capture accurately the dimensions of this complex problem. Long before mental illness experts named this as a “disease,” “disorder,” or “addiction,” moral experts contributed their own names to these discourses.
Then, as now, gamblers-with-problems and gambling “experts” alike succumbed to the temptation to “name” this behavior. As a result, one of the key questions suggested by this research might be: would a behavioral phenomenon by any other name look the same? Act the same? Be the same? Would we talk about it in the same way? These “naming matters” are no small issue; sociologists, after all, have adamantly and famously insisted that naming matters when attempting to understand human behavior.

At this point in this sociological historical journey, we might ask: if these thinkers spent such a great deal of time describing the symptoms of this behavior, what did they call the affliction itself? How did they name it?

In examining this literature, it becomes apparent that thinkers have long sought to summarize excessive gambling behavior by using a few choice words, and they have generally looked inward (usually, either “brain-ward” or “soul-ward”) to locate its essence. We can observe this tendency as early as 1718, when a minister of the Church of England worried that “(t)hese Games ... do exceedingly amuze and entangle the Mind” (6).

Indeed “these games” do, as a number of problem gamblers and clinicians will attest today. Later on in his speech, this same minister returns to his theme of “the Power of these Games upon the Minds of Men” (6), looking inward to capture the essence of a behavioral
phenomenon he finds disturbing. Today, he is joined by a wide variety of thinkers today who also seek to explore the inner workings of this phenomenon. In this section, we will explore the wide variety of “names” assigned to these complex behavioral phenomena.2

The Gambling Passion

Many who sought to name this set of behaviors called it a “passion.” The aforementioned (but ironically unnamed) minister was partial to this term, referring to a “Passion, which the Devil many times blows up in Gamesters” (1718:10). Frayn also spent some diagnostic time with gamblers for whom “gambling becomes a passion” (1890:17). Parry warns his audience of gamblers who “become a victim to its deteriorating passions” (1906:6). Later, in attempting to locate the proper vocabulary to capture these behavioral phenomena, Parry heads down a road traveled today by many psychological assessors. Parry alludes to what we now designate “loss of control” when he calls it an “uncontrollable passion for gambling” (1906:17).

When he spoke on the gambling “passion,” Tabor’s contentions were marked by diagnostic certitude: “that gambling is a passion is gaining a strong and almost universal hold upon this nation in some form or other is beyond question” (1911:116). Seventy years earlier, 

2 See Appendix B for an in-depth discussion of the evolution of these terms in the
Beecher (1844:115) condemns the gambler's "passion for play" as particularly sinful. He also refers to gambling as a "strong passion" (1844:116) and speaks of "when playing becomes desperate gambling" (1844:117). Like many psychological and moral thinkers, Beecher sought to distinguish the more innocuous activity ("play") from the less acceptable one ("desperate gambling"). Psychology and religion are not the only social institutions to have participated in this good-vs.-bad dichotomizing process, but none have done it more effectively with problem gambling populations.

Three years later, Green speaks of the particularly destructive period "(w)hen a young man has imbibed a passion for (gambling)" (1847:12). To Whitworth, this passion is something to be "possessed" rather than "imbibed," but it is a "baneful passion" nevertheless: "(o)ne of the most baneful passions that possess men and women at the present day is the passion for gambling" (1906:51). Breeden joined this impassioned chorus when he describes a gambler in whom "a passion is called forth and developed which demands gratification. Indulge it he must even though it takes him among vilest associates and into most disreputable places" (1899:454). All of these descriptors refer to cases in which changes or shifts from the norm have taken place; whereby notable and marked differences have
differentiated a given population – in this case, those who gambled too much.

While Steinmetz strayed a bit from the “passion” term, his words nevertheless conjure up similar imagery: “This infatuation may be simply ridiculous; but it has also a horrible aspect” (1870:50). Williams, a “Reformed Drunkard and Gambler” according to the title of his book, states that “I was perfectly infatuated with the game of faro, that game of chance which has ruined so many men, both young and old” (1896:58). These subtle differences in wording cannot mask the parallels in concept: these were people whose passions for gambling became problematic.

The Gambling Habit

Others simply referred to these gambling behaviors as an unfortunate, and diagnostically sinful, “habit.” When we turn to a work authored in 1718, we find references to a gambling “habit” in a description of problematic behavior: “if he plays till he wrangles and affronts his Company; or if he plays too long, so that he exceeds the Reason and Intention of Diversion... we may, without scruple, term his Habit of Gaming a base and pernicious Vice” (Minister:4). It is difficult to read these passages and avoid the conclusion that these were problem gamblers, whose lack of “reason” and “scruples” have bothered both moral and psychological scrutinizers.
In 1890, Spriggs-Smith quotes Charles Kingsley as saying "Of all habits, gambling is the one I hate most and have avoided most. Of all habits, it grows most on eager minds... Of all habits, however much civilised men may give way to it, it is one of the most intrinsically savage" (14). Significantly, this rhetoric draws on language that focuses on the "growth" of this disturbance – in much the same way that we now focus on a "progression" with this disorder. It also emphasizes the ways in which the affliction grows "on minds." Perhaps most damningly, this passage contrasts these behaviors with civilized (and presumably virtuous) conduct by placing gamblers in with "savages." It is not surprising that this is the behavior that this author "hates most" – nor should it be surprising to us when moral leftovers remain from this era.

Others chimed in with their condemnations of this horrible "habit." Carter refers to this as a "gambling habit" throughout his work (1908). In 1897, Barnett insists that "the gambling habit breaks down the moral character" of "men" (4). Meanwhile, Tabor observes gamblers at the race track and describes these immoral "others" as such: "here do they congregate like deer to the 'salt-lick,' together with multiplied thousands of other young men who have fallen into the pernicious habit of living in an abnormal whirl of excitement, a mad rush for money" (1911:128). In Tabor's mind, this is an immoral
habit, and one based in a dangerous “excitement,” a theme to which we will return later in this section.

The Gambling Spirit

Another popular term employed by the thinkers responsible for this literature is the "gambling spirit." Carter refers to "'the gambling spirit,' as Arthur Henderson, M.P., has said" (1908:33), and then later, in his own voice, argues for a “campaign against Gambling” by insisting that “The gambling spirit, as we have seen, conflicts with Christ’s teaching of love, service, and sacrifice” (1908:35). This spirit, of course, runs counter to Christ’s teachings, leaving us no doubt as to the morality of those whose souls it has taken over. Gulland also quotes another thinker, “Mr. J. Ramsay Macdonald, M.P.” who opines that “The gambling spirit is a menace” (1908:43). Once more, we can see a strategy in which these thinkers enlist the support of others, giving the audience a sense that these are sentiments that extend beyond the pulpit. This was no mere scheme – surely they did indeed influence the thinking of a wide variety of thinkers and social institutions.

In speaking to “the temptation to indulge this gambling spirit” (1899:74), Alexander uses vocabularies of temptation and indulgence, just as today’s problem gamblers often do. Whereas before the temptation was to sin, today we generally avoid these heavy religious
Nevertheless, for the problem gambler today the moral scrutiny remains, however subtly, on the discursive scene.

On a number of occasions, Parry launches from discussions of this "spirit" into a veritable naming frenzy, during which he uses "the spirit of gambling" (1906:7), "the spirit of desperation" (1906:15), the "card miasma" (1906:10), and the "blighting curse" (1906:7) to encapsulate these behaviors. He also quotes a gambler who tells him that "you cannot imagine the hellish fascination of the game" (1906:15), and then alludes to "the fire of our lust and greed which is unquenchable until the whole structure is brought to ashes" (ibid). These are not today's precise words of addiction and mental illness, but they conjure up similar imagery nevertheless.

The Gambling Excitement: Action-Seekers of Yesterday

Not long ago, the pioneering clinician Robert Custer spoke eloquently about the need for "action" among those he encountered who gambled too much. For several of these historic thinkers, the excessive gambling behaviors they observed seemed to involve a desire for what Hocking cleverly calls "the mad excitement" (1898:85). Tabor, in talking about horse racing, speaks of an "excitement that cannot reasonably be accounted for" (1911:122). In Tabor's passage, it is notable that "reasoned" behavior is contrasted with these kinds of
gambling behaviors — in a within-the-mind focus that would characterize virtually all subsequent thinking on the topic.

Later, in a passage that makes the current-day reader cringe, Tabor refers to these excitement gamblers as "rivaling wild Indians, by their antics and noise, yet before and after this crucial portion of the struggle, these same persons were the personification of order and decorum" (1911:122). Clearly, Tabor wishes to distinguish the good from the bad, and to do so, he contrasts those who behave with "order and decorum" (the "good") with "wild Indians" (which presumably any early 20th-century reader would associate with excitability and the "bad").

In Carter's work, the Rev. C.W. Andrews includes an "anti-gambling sermon outline." In this document, he claims to get inside of the head of the gambler to see "his" motivations: "I must have excitement, -- or money, -- or 'a good time'" (1908:39). This "need" has led those with psychological training to seek out the rhetoric of addiction, cravings, and "loss of control." For these early thinkers (who lacked the psychological training of the Namers who would come later), their diagnostic energies were devoted to linking these behaviors with the more-familiar moral typologies of their own day.

Barnett, italicizing for emphasis, makes a distinctly moral connection between this kind of "excitement" gambling and wastefulness, which was deemed particularly sinful in his day:
The wasting of intellect and energy which ought to be devoted to the good of the individual or the community... An enormous waste is continually going on. As some one has said, 'excitement and enthusiasm are means of propulsion towards useful ends, and if that motive power is frittered away on rubbish, there remains nothing over for the moments when it is urgently wanted.' Our stock of energy is limited; and it is no wonder, when such tens of thousands of people waste their vital force on such worse than paltry aims, that they have no sufficient in reserve to carry through the work which lies at their door (1897:13).

This argument ties into the common theme that gambling undermines work ethic, a most objectionable offense in those historic times – and perhaps even today. In order to criticize those who gambled in a morally objectionable fashion, many characterizations of gambling behavior in the 19th and early 20th centuries alluded to this commonly-held belief in a specific kind of work ethic. In the next chapter, I will speculate on what these types of connections have meant for those whose gambling behaviors ran afoul of societal norms.

Beecher uses an interesting analogy to describe the mindset of the gambler-seeking-excitement: "Gambling is founded upon the very worst perversion of this powerful element of our nature. It heats every part of the mind like an oven" (1844:114). Welsh also speaks eloquently when he refers to "the sting of sublimated excitement" associated with "the haunting risk of disaster, the unspeakable elation of victory, the gigantic vicissitude of triumph and defeat, the
tumult and frenzy and divine sweat, the very scorn of humanity and all that touches it” (1906:67-68). In Hobson’s view, gambling can become a “fevered excitement” for those who play excessively (1905:10). Ford also focuses on a specific subtype of gambler when he notes that when “playing for a stake beyond his means” – in essence, turning “normal playing” into a problem – “(t)he excitement added to the game is painfully strong” (1903:43).

Regardless of how they named this set of behaviors, it was clear that the “action-seeking” excitement gambler spelled trouble for those around him or her. Moralizing thinkers were eager to comment upon these perversions, and thinkers whose training lies in the psychological field have joined them in our current discourses today.

The Gambling Mania

Other observers attempted to link more explicitly these gambling behaviors and the encroaching mental illness categorization terminologies. To many, this was nothing less than a “mania,” and one that could have both moral and medical implications. Tabor, for instance, preaches on “the gambling mania, ‘America’s greatest curse” (1911:116). Later, he skewers “the rapidly growing mania for taking risks in hope of gain” (124), and then “the hold this mania has” on gamblers (ibid). Holp makes it clear at the beginning of his sermon that he is speaking to “the antagonists of this mania” (1887:101).
Hopkins chimes in with this robust assessment: "The gamester is infatuated. Gaming is a passion, a mania. It is a feverish excitement" (1835:10). Hughes, meanwhile, diagnoses one individual by informing us that "the gambling mania took possession of him" (1889:260). This label also resonated with Carter, who calls it "(t)he gambling mania" (1908:31). These thinkers were joined by the slightly more creative voices of Parry, who more specifically names a "card mania" (1906:7), and Barnett, who speaks of scores of people who have been "bitten with the gambling mania" (1897:5).

Moralities become manias. Sins become sicknesses. Parallels between moral judgments and medical judgments were starting to be drawn in these eras, and while we do not often think of the moralities inherent in our current pathologies, this examination seems to suggest that we should.

The Gambling Addiction

In 1847, Chapin poses a straightforward and prescient question about those who gambled problematically: "Who is addicted to this vice?" (309). The Naming Powers That Be have ever since (and long before) attempted to answer this very question. The concept of gambling as an "addiction" can therefore be traced to a long history of "Namers," not all of whom worked in the medical or mental illness field.
In a fascinating early passage, Green uses familiar terminologies while purporting to track a history of gambling problems: “in many parts of our country, the people are almost as much addicted to this vice as some of the ancient Germans, as described by the Roman historian” (1847:11-12). In a footnote on that same page, Green then expands, painting a remarkable portrait of an ancient problem gambler:

Some among the ancient semi-barbarous nations, after losing all their property by gambling, including their horses and armor, frequently staked their liberty, and became the slaves of the winners, remaining in servitude for life, unless their masters emancipated them (1847:12).

Were these the first gambling addicts? Rosenthal (1998, cited in National Research Council 1999:9) has also wondered about this connection, noting that the root of addiction is “dict,” which has long connoted servitude and slavery. Literally and figuratively, we have thought of and "treated" those who gamble too much as enslaved. "Problem" or "addicted" gamblers have existed as long as gambling has. Only our technical terminologies, it seems, have changed.

Holp warns his audience about an Evil Entity who befriends the addict: "I have been informed, that within the past week or two, Satan is closing his strong right hand with a firmer grip upon our fair city. Men addicted to gambling are now unusually fascinated with poker" (1887:105). This passage is important because it couples the language of addiction with the language of sin and evil – and this

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
association remains a potent one in the public's current thinking on those who gamble too much.

Chapin, in citing his own experience with problematic gambling, contributes this attempt at encapsulation:

For twelve years I was addicted to the vice of gambling... For more than two years past I have been happily divorced from that vice, and have been humbly endeavoring to lead a new life; and most truly can I say, that I would not give one hour of such pleasure as I now experience, for all that I ever realized while enslaved by that odious and destructive vice (1847:316).

The addiction rhetoric, then, has long incorporated a sense of a loss of control, even enslavement. Other thinkers, while not explicitly using addiction terminologies, nevertheless refer to ideas that we now hold to be central to any conceptualization of addiction.

Frayn, for example, liked to use a "snare" metaphor – a construct that probably would resonate with those who currently believe that people who gamble too much are "caught" in the powerful throes of an addiction. Frayn says that "(s)ome of you are, perhaps, already entangled in the snare. You thought there was no harm in it, and now are caught by the fatal fascination" (1890:26). Medical experts, who tend to lack their predecessors’ expressive flair, now label this phenomenon in far more sterilized terms. Nevertheless, parallels are definitely there for the drawing; it is obvious that today's doctors did not "invent" these terminologies, nor did they emerge wholly from a stock of clinical experiences with their patients.
Instead, they grew out of a stock of “knowledge” and understandings cultivated by the moralists of the past.

In his sermon, Chapin also speaks to the difficulty of escaping from the forces that bind the addicted. In particular, he talks about people who have “become fixed, chained, doomed to the gaming-table” (1847:305). Holp also speaks of these gamblers as bound by “chains,” indicating that he, too, was impressed by the strength of this affliction (1887:105). Other early moral thinkers liked to use “chain” metaphors to articulate the degree to which those who gambled too much felt “trapped.” In 1889, Hughes relates the following tale: “(a)t last I discovered the chain of adamant which bound him to the depths of hell. It was gambling” (261). These discoveries were long ago contemplated by thinkers from a powerful social institution – one that usually cared more for morality and hell than it did for medicine and healing.

Haines and Yaggy also use metaphors that imply that the excessive gambler is “trapped” in the grip of something extraordinarily powerful:

- gambling for amusement is the wicket gate into the labyrinth, and when once in, you may find it difficult to get out... If you regard your own, and the happiness of your family and friends, and the salvation of your immortal soul, recoil from even the shadow of a shade reflected by this heaven-daring, heart-breaking, soul-destroying, fashionable, but ruinous vice (1878:275).
Do not go anywhere near this, these moral thinkers seem to say, foreshadowing an emphasis on an "abstinence" model that dominates many medical treatments in the field today. Whereas today medical explanations are invoked to implore problem gamblers to abstain from gambling, it appears that yesterday we used different (but certainly powerful) motivators to urge these populations to "recoil" and abstain from these sinful temptations.

These authors also join those who believe that escape is exceedingly difficult, if not impossible:

if he is once taken in the coils of this vice, the hope of extricating himself, or of realizing his visions of wealth and happiness, is exceedingly faint. He has no rational grounds to expect that he can escape the terrible consequences that are inseparably connected with this sin (Haines and Yaggy 1878:276).

Newman appeals to a less rational source of the entrapment: "What a spell it throws over the imagination! No serpent ever charmed a bird with greater power, no fowler ever set a snare from which it was so difficult to escape" (1883:106). To these early thinkers, the grip of problematic gambling is as powerful as it is sinful, and those who are trapped are to be condemned as ensnared evil entities. Lacking a comprehensive medical framework to describe these behaviors, writers were left to their own expressive moral devices. Many were quite creative in describing acts that continue to challenge the vocabularies of social scientists today. Today, many still conclude that those who have these problems are "ensnared," but
the consequent doomed existence pertains more to a medical eternity (of "once an addict, always an addict") than the moral eternity of hell and damnation.

The Gambling Disease

Other thinkers were even more explicit in shifting the focus of analysis to what we now call a "disease model." This tendency can be seen as early as 1674, when Cotton calls "gaming" an "itching disease." In 1844, Beecher condemns the gambling activity thusly: "It diseases the mind, unfitting it for duties of life" (115). Throughout this literature, we can see that the gambling "disease of the mind" intrigued and bothered those whose job it was to diagnose the moral plagues that similarly contaminated the soul.

These aspects of gambling behavior are referenced in the context of a disease framework well over 100 years ago. During a historic period in which the "disease model" was replacing the "sin model," on certain occasions the two apparently contradictory ways of thinking converged. In thinking about these social processes, though, we should note that even today these two discourses are less than mutually exclusive: both interact to inform our understandings of how the problem gambler "really is" and how we are to "treat" him or her. While we still tend to regard those who gamble too much through
moral lenses, we may also conclude – perhaps begrudgingly – that they are in need of medical or psychological attention.

Like many who adhere to a version of the “disease model,” other early thinkers also look inward to systemic causes of human behavior. Beecher seems to think that gambling is like a "poison," implying that those who gamble too much are, in a sense, very much "ill." Beecher's language draws on a medical discourse that was probably gaining in power in his day and his world: "(t)hey are like snakes coiling around snakes, poison and poisoning; like plague-patients, infected and diffusing infection; each sick, and all contagious" (1844:117). While Beecher's general criticisms were unabashedly moral in nature, his "supporting evidence" drew on different discourses and social institutions in order to get his points across.

Haines and Yaggy also seem to believe in this systemic, body-inward look at gambling behavior. They claim that gambling “poisons its victims with vice” (1878:272). It appears, then, that this is a bodily matter, one that we must look inward to define. We might ask whether it need be this way. Is it not just as reasonable to look outward, to the decidedly external and social systems rather than the internal ones? After all, it is clear that “big” social factors have contributed forcefully to these defining processes. Is it not possible that social systems associated with powerful religious and medical
institutions have played as much of a role in telling us "what this is" as rigorous scientific, medical, or psychological research?

In pointing an accusatory finger at the press (which came under attack long ago for reporting betting lines – an attack today embraced by anti-sports-gambling activists), Spriggs-Smith refers to a broader gambling conspiracy. He claims that these betting lines are partially responsible for “spreading this disease of covetousness for illgotten gain among the masses of our countrymen, with its concomitant evil, idleness, which is nothing less than a dead sea, which swallows up all virtues” (1890:9). Once more, what is most notable about this passage is its contention that those who gamble too much suffer in a way similar to those who are diseased of body.

Perhaps the most passionate articulation of a "disease model" comes from a passage in Stough's (1912) anti-gambling tirade. Harry Brolaski, author of *The Fool and His Money*, is quoted at length in this work. In a letter written to Stough, Brolaski looks inward to understand insidious processes that have infested the bodies of those he has observed. In doing so, he invokes vivid vocabularies of the germ, and leans heavily on the concept of progression.

Gambling is a disease, in my opinion, and from my twenty-two years' experience, I must say that when it is inoculated into the system of the child, the gambling germ grows and grows until when that child reaches the age of twenty-five, he loses his sense of right and justice and expands his sense of greed (1912:99-100).
Barnett even articulates a call for quantification, a hallmark of any examination of disease at the macro level. As he sees it, "(t)he object of this paper is... to draw attention to the nature and prevalence of the disease" (1897:21). Barnett calls it a disease, but just as importantly, he relies on the vocabularies of disease by stressing the importance of establishing its prevalence. Just as we can "count" the rates of those who suffer from, say, heart disease, we can also count those who suffer from this gambling affliction.

Spriggs-Smith relies on medical experts to explore the sins and diseases of gambling behavior:

What the late Dr. Macfayden said were the very-day effects of the 'liquor traffic' may with truth be said to be the effects of the evil habit of betting and gambling: 'I arraign the drink traffic, and I say it consumes money, and it produces poverty; it consumes health, and it produces disease and death; it consumes clothing, and produces rags; it consumes labour, and produces taxation; it consumes mind and thought, and it produces imbecility, idiocy, and insanity; it consumes time, and produces sin, immorality, and crime; it consumes soul and spirit, and it produces in return, burnt-up dead spirits, that cannot look up into their Heavenly Father's face, and that cannot plead with Him as a son ought to plead with a father,' to which we add: it leads its victims to set at naught a Saviour's love, resists the Holy Spirit's strivings, and rejects the Word of God (1890:11-12).

Amazingly, in this passage a single thinker alludes to an impressive collection of terms that have been used to describe those who gamble too much. Psychiatric judgments (such as "insanity") are referenced in conjunction with moral judgments (indicting the "soul" of the gambler). Nowadays, the official rhetoric is more medical than
moral, but the moral judgments of yesterday have not gone away: as any problem gambler can attest, he or she is still commonly received with moral interpretations, even as those in white coats articulate a different, kinder view.

Many of these early contemplators of gambling behaviors used the most salient vocabularies of morality and medicine to describe these peculiar populations. As Breeden puts it,

Its poison is insidious. Once in the system, like malaria, it chills and fevers and unfit for life and shatters the constitution... It feeds the passion for nervous excitement by bringing together the greatest number of demoralizing stimulants. These are intensified as the stakes increase, and the habit grows until a desperate mania, or a horrible insanity, robs character of purpose, piety, and purity, and brings the end of a blasted life (1899:456).

"Like malaria," then, these gambling populations can be understood as suffering from a disease. At the same time, moral overtones permeated their understandings of this population - a combination that continues to shape public thinking on these groups of gamblers today. Little did these early thinkers realize that theirs would be pioneering cries in a long history of voices on those who gambled too much.

We might wonder whether the tendency to perceive much of today's "cutting-edge work" as wholly novel is misguided. At the very least, we should recognize that intelligent analysts were devoting serious intellectual energies to detailed descriptions of these phenomena long ago.
Gambling, Madness, and Mental Illness

"I hesitate not, therefore, to say, that gambling is an evidence of the greatest folly, the greatest stupidity and madness of which the mind of man is capable."

-- Weems' take on the mind of (gambling) man (1816:26)

Throughout this work, we can see that the emerging discourse of mental illness effectively seeped into the rhetoric of moral judgment – and as I have noted, it could certainly be suggested that the two approaches had many ideas in common. While the field of problem gambling studies has taken its share of criticism for its wide variety of names (e.g., "compulsive" vs. "problem" vs. "pathological" vs. "addictive" vs. "disordered," etc.), these definitional differences were even more pronounced historically.

Martin tells us that gambling makes "the sane lunatic" (1856:24). He also says that this activity has "given a patient to many sick-beds, a maniac to many a madhouse" and notes that its associated "excitement often becomes delirium" (ibid). These rhetorical strategies can be employed to imply that these populations belong to a "madhouse" environment – in addition to a morally questionable location.

Here, we can recall the previously-referenced tale of John Borack, who Talmage tells us ends his days by dying "in a lunatic asylum" (1872:164). In Talmage's tale, the moral and the medical had clearly begun to merge in the field of problematic gambling.
Tabor, in a passage devoid of the political correctness of today’s discourses, cites an instance in which people were gambling “to such a degree of insane excitement as to rival escaped lunatics” (1911:121). Meanwhile, Rush informs us that with the gambler, "the mind is deeply contaminated" (1803:72). Again, these skin-inward perspectives ignore the potential fact that the gambler’s social universe (a skin-outward thing) was partially “contaminated” by those who raised moral objections to him or her. “Contamination,” however, can come from within (e.g., biologically) and without (via the social processes that define the contaminant) – in fact, this is the reality with all afflictions in the human world.

In an interesting passage one might not expect out of the mid-19th century, Chapin attempts to locate the root of these problems in what we might call a complex “explanation cocktail” of substance abuse, mental illness, and the brain: “O, there have been those who have rushed so madly into this (gambling) ruin, it would seem as if the first draught they had quaffed there in that haunt of sin had been fiendishly drugged, and some burning insanity had fallen upon their brain” (1847:305). Even in this early day, thinkers attempted to find explanations for these gambling “insanities” in the brain – a research strand that continues to be enthusiastically pursued today.

Weems shares this brain focus when he, too, describes a "madness" that troubles his moral mind: "Oh wretched men! What
words can speak the madness of our gamblers" (1816:40). For Frayn, gambling similarly becomes... a "madness" (1890:17) for those who gamble too much according to the socially-defined definitions of his day.

As it turns out, one of the most dominant current mental illness paradigms finds a historic precedent in this literature. Comstock articulates a position that sounds very much like what is now termed the "diathesis-stress model" (Davison and Neale 1990:ix), although the "trigger mechanism" is Satan, not any biological underpinning:

In very many cases this passion lies dormant. The first trap of this kind Satan is permitted often to set in church and charity fairs. Here he sets in motion for the first time that which, when thoroughly aroused, sweeps, with the fury of a tornado, morals, motives to honest and industrious pursuits, lofty ambitions, and noble living into the vortex of vice... Here is often sown the seed from which in after years comes desolation, which renders the mind ungovernable and destroys it for useful purposes (1883:58).

A "seed and a trigger": this is one (admittedly oversimplified) way of thinking about the diathesis-stress model. Note, too, that we see an approach that tracks a specific progression, another common practice in the abnormal psychology literature as well as the moralizing literature on abnormalities.

Even the most recent addition to the medico-psychological lexicon, "disordered gambling" (Shaffer, Hall, and Vander Bilt 1997) finds a historical precedent here. These authors have recently implored the problem gambling field to endorse "disordered gambling"
as the "official" name, reasoning that there is "ordered" (read: normal) gambling to contrast with the "disordered" (read: sick) gambling. These academics were not the first thinkers to embrace this term in the context of excessive gambling.

In reflecting upon a destructive gambling career, one gambler articulated his gambling experience in the following manner: "like one who had swallowed a slow poison, I felt myself disordered. And though I could not explain the symptoms, I found that my purity, peace, and joy, were all gone" (Weems 1816:36).

It is interesting that once again, we see the use of what are now considered cutting-edge medical terminologies (such as "disordered" and "symptoms") in the context of a moral-religious "diagnosis." While the Diagnosing Powers have changed somewhat, it seems that the underlying criteria for diagnoses have not.

These comments reveal once more that instead of serving as mutually exclusive discourses, the knowledges associated with "mental illness" (and presumably, science) and with "religion" (and presumably, spirituality) overlap in certain social settings. Because deviant behavior provides a common "turf" for these two discourses, this overlap is probably to be expected, and it lends credence to the notion that our "current," medical understandings are derived from our "historical," religious ones.
Despite our common understanding of these spiritual and scientific "ways of thinking" as necessarily oppositional, it appears that they have co-existed somewhat comfortably in certain social settings. This makes sense when one takes into consideration the subtle and interactive processes involved in discourses that shift and slide over time. It would be difficult, if not impossible, to "accomplish" discursive shifts (say, from a predominantly religious worldview to a predominantly scientific one) in a way that is absolute, sudden, or discrete.

Because of this, the "institutions" of religion and psychology are better understood as overlapping and interactive discourses which have both contributed powerfully to our current understanding of this population. Religious leaders often invoke vocabularies of mental illness, and psychiatrists (however subtly) invoke terminologies that recall moral undertones. To date, we could certainly argue that in the problem gambling field, moral thinking is still winning. I believe that the medical model has yet to fully "catch on" in social worlds beyond the field's circle of experts, and as a result, the moral-religious model remains the more prominent social force in our public discourses on problem gamblers' lives.
Speculations on the Normal and the Pathological

In this essay, a recurring theme has been that a diverse range of people have contributed their opinions on how we might define, interpret, and "treat" those who are "bad" or "abnormal" in some way. Those who were able to articulate their views from a vantage point supported by powerful social organizations (such as those affiliated with science or a church) were more often able to see their opinions in print – and ultimately “out” in the social discourse.

Hence, the good-and-the-bad battles are long and storied, and they are just as prevalent in gambling behavior commentaries as they are in any other social-behavioral discourses. These early thinkers struggled with the “normal” and “pathological” too, and Parry, at least, is troubled by the implications of his diagnostic power:

My own heart is not brave. I am speaking out against the conduct of people who are very dear to me... How often, as they see the pastor come towards the house, they have rushed to clear the tables of the cards, especially if it is an elder's house! There is the hiding, the deception, the feeling of shame, the flushed countenance in meeting the pastor at the door and the false cordiality of his reception. The pastor knows it all. He is not welcome. It grieves him to live between the ice that is in the heart of the hostess and the open fire that shines in her greeting face. Oh, that they feared God as they fear their pastor! The pastor's heart wants their sincere love, but it is filled with sorrow in the presence of this shamming (1906:8).

In this passage, at least, we see a conflicted moral mind at work. As Conrad and Schneider have noted, moral entrepreneurs are
not necessarily malicious types seeking to demonize for demonization's sake:

the claims of most moral crusaders have humanitarian overtones; they truly think that they know what is good both for themselves and other people. But the crusader or crusading group is also often a self-interested participant in the deviance-defining process. The crusader (or the group) is not only crusading for a moral change in social rules, but there also may be a hidden agenda which is of equal or greater import and not immediately obvious (1992:22).

Moral crusaders often genuinely believe that they are fighting for a just cause, and this belief fans the flames of their passionate rhetoric. This process is not always a unidimensional or unambiguous one, however. In the above passage, we can see that Parry was not always comfortable with the ways in which his own words were received. He saw with his own eyes the powerful stigmatization process that we will discuss in greater detail in the next section, and it pained him to a significant degree. In the end, though, he is guided by a belief that a "fear of God" must dictate our social behaviors and norms. Ultimately, these gamblers' acts run counter to the goodness of God, the goodness of their pastor, and the norms of their communities. These were no small things for the early problem gambler to be up against. It is little wonder that beliefs such as these continue to penetrate our thinking on those who gamble too much today.

After an careful reading of all of the early literature I could find, one of the most interesting discoveries for me is that even in these
early days, inward-looking descriptions dominated the thinking of those who sought to find the "abnormal" or the "problematic" or the "sinful." Perhaps predictably, there are virtually no acknowledgements that external, social processes play a role in determining what is deemed "bad" and what is not.

Unfortunately, a "skin-inward" perspective effectively blinds the reader to the larger-scale social processes that affect public perceptions of gamblers. In this case, we are less likely to recognize the influence of the powerful – but decidedly external – social institutions of medicine and religion in shaping our discourses on gambling problems.

In a quotation that effectively captures this moral-medical dichotomy (and affinity), Posnett observes in 1863 that "(un)happily, (gambling) possesses a strange and marvelous fascination over its spell-bound victims, leading them onward under its terrible bewitchment, from which escape is almost impossible, to certain and hopeless perdition" (5-6). This particular passage on "fascination" is compelling because it invokes the familiar vocabularies of demonic possession (e.g., "bewitchment" and "perdition"), and it also hints at many of our current conceptualizations of the disorder (such as "spell-bound," a term I have heard problem gamblers themselves use when describing the ways they were mesmerized by video gambling devices). The consistencies between our historic and demonized
conceptualizations and our current and more medicalized ones are quite striking. We would be well advised to think of this history when we consider the lives of the problem gamblers we encounter today.
CHAPTER 7

SHOTS FROM THE PULPIT: A SOCIOLOGY OF EVIL,
IMMORALITY, AND REMORSE

"Gambling is the source of all evil whatsoever."

-- Holp, leaving little room for misinterpretation (1887:115)

"It is the almost universal testimony of ministers of religion,
that gamblers seldom attend places of worship."

-- Churchill, revealing his perspective on
the sources of the gambler's evildoings (1894:24)

As I have stated throughout this dissertation, we can better
understand the reasons why excessive gambling is still regarded
through a moral lens by examining the harsh rhetoric of these early
authors. Having established that a wide variety of "identifiers" and
"names" were invented long ago by the moral Diagnosers of the Day,
we might ask, "What did they do with these diagnoses?" One answer
is sociological, and it is not a pleasant one. The answer speaks to
where social receptions come from, and as usual, we find that we can
locate some of their origins in institutions that helped shape public
thinking.
To most of these moral thinkers, gambling constituted an unequivocally and uniquely evil vice. The egregiousness of gambling and gambling acts are described in a wide variety of ways and in a wide variety of contexts, but most were scathing in character. In this chapter, we will speculate on the relationships between the social construction of evil and the social worlds that problem gamblers encountered – and, in my view, continue to encounter.

My intent is certainly not to valorize these objections to gambling on a moral level. Nor do I wish to endorse any permutations of this kind of staunch anti-gambling rhetoric. In fact, as a Las Vegan myself, I have spent a great deal of time attempting to explain to those who could not (or would not) understand how residents of a gambling community could address the "morality matters" of gambling in a mature fashion. What I do seek to accomplish is more modest: I wish to subject these kinds of critiques to a socio-historical examination, in order to reveal their fundamental assumptions and longer-term social effects.

For instance, what did it mean when excessive gamblers heard a minister of the Church of England say that "(t)hese (gambling) things are manifestly Evil" (1718:8)? What did it mean when this same minister bellowed that "CHRISTIAN GAMING is the most absurd thing you can mention" (1718:8-9), and later, "a Christian needs not go a begging for (gambling) Pleasure at the Devil's Doors" (1718:9)?

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.
These kinds of characterizations were not limited to the earliest commentators who judged the moral and behavioral merits of gamblers who played problematically. Before I embarked upon this research project, I expected to discover a good deal of condemnatory language, but I was often startled by the harshness of the rhetoric that pervaded these sermons. Virtually all of these thinkers, after outlining who these individuals were, contributed opinions (which probably coalesced into social receptions) dictating how we were to interpret and receive these individuals. As we have seen, these social receptions were rarely sympathetic.

Gambling as a Uniquely Evil Vice

"In gambling you have run into the worst of sins"

-- Weems, informing the gambler of the uniqueness of his wrongdoing (1816:41)

Many of these thinkers not only criticize the gambling enterprise (and gambling people in particular), they describe gamblers as uniquely evil beings. While it is not possible to establish whether gambling was widely considered the "worst of sins," as Weems puts it in the above quotation, we can learn much about the morality of those who sinned in this way by "studying the studiers" – by examining the words of the diagnostic experts of yesterday.

The list of speaker-authors who portrayed gambling as an especially sinful vice is long, and the words used to describe gamblers
are often angry. In a footnoted reference in his sermon, Beecher tells us unequivocally that "(n)o vice is worse than gambling" (1844:126). On the surface, this would seem to be a remarkable statement. *No* vice is worse? We are all at least vaguely familiar with the ways in which historic religious thinkers demonized those who indulged other, more famous types of "vices," and it seems fairly strange to think today that these gamblers were deemed worse than the entire lot of them.

In a different section, Beecher explains:

I have no language strong enough to mark down its turpitude, its infernal capacity. After hearing many of the scenes not unfamiliar to every gambler, I think Satan might be proud of their dealings, and look up to them with that deferential respect, with which one monster gazes upon a superior (1844:119).

For a man who claims to "have no language strong enough" to mark the gambler, Beecher gives it an admirable linguistic try. In the above section, he tries to convey to his audience the uniquely evil nature of "every gambler" – but as we have seen, when he (and all of these thinkers, for that matter) describes the individuals he targets, he tells a story that sounds quite like our current "problem gambler." In Beecher's world, the problem gambler was an individual of whom "Satan might be proud," a fate that could not have been pleasant for those Beecher (and presumably Satan) identified. It seems obvious that one who Satan "looks up to... with that deferential respect" would
only inhabit the coldest, darkest sectors of the moral spectra of the day.

Others differ in their exact articulations, if not their spirit: Green tells us that "(g)ambling is a sin of the deepest dye – one that strikes at the root of every good and virtuous feeling known to our nature" (1847:12), while Hughes says that "it is impossible to exaggerate the evils of gambling" (1889:260). These are unequivocally harsh terms – letting us know that we must place these sinners in with the most immoral of souls.

Beecher finds absolutely nothing redeeming in those who gamble problematically:

In almost every form of iniquity there is some shade or trace of good. We have in gambling a crime standing alone – dark, malignant, uncompounded wickedness! It seems in its full growth a monster without a tender mercy, devouring its own offspring without one feeling but appetite (1844:120-121).

Unlike other "forms of iniquity," not even a "trace of good" can be identified in the gambling act. Churchill seems to agree with Beecher when he says that "the effects of gambling are all evil, unmitigated by any redeeming qualities" (1894:22).

Later, Beecher again sounds the alarm -- this time directing it at the gambler himself: "To every young man who indulges in the least form of gambling, I raise a warning voice!" (1844:120-121). No wonder those who qualified according to this categorization scheme cowered in remorse and shame. Small wonder they continue to do so
today – despite the fact that overt outbursts such as these are no longer as common as they once were.

Weems is just as harsh in his diagnostic assessments of this problematic population. In speaking to gamblers, he delivers the following challenge: "Ye wicked and slothful servants! ... you are engaged in the most horrible warfare that rational beings can ever undertake" (1816:38).

In bold print set off from the rest of the text, Carter proclaims that "(t)he evil has assumed gigantic proportions." He then introduces his sub-chapters with titles such as "The Evil at Work," "The Nature of the Evil," and "Remedies for the Evil" (1908:31). There is little room for misinterpretation here – gambling wrongdoings are inherently evil, and in need of "remedy." Today, our remedies have changed, as have our "remedy structures," but much that pertains to the social reception of the problem gambler remains familiar.

Alexander makes this bold statement about the evils of gambling: "I know of scarcely any habit which, is so inveterate as this, or so destructive to all the best elements of a true man" (1899:81). Here, the pernicious effects of this "habit" are well documented by an individual entrusted with the assignment of providing his community with such assessments.

Others also shared this "diagnostic certitude" about the special egregiousness of the act. In a passage that attempts to connect
conceptually the immoral character of the gambler with his longings within, Hogge (1904:28) states that “nothing leads more to the moral degradation of character than the craving for gambling.”

Why these harsh diagnoses? Why was gambling so evil? Spriggs-Smith gives us a logical and concise answer:

The practical lessons to be gathered from the words that head my paper, are that to practice this habit is an unmanly act; what is unmanly is dishonourable; what is dishonourable is prejudicial to the commonwealth; what is prejudicial to the commonwealth is dangerous to commerce; what is dangerous to commerce is destructive of society; what is destructive of society is injurious to its members; what is injurious to them saps the vitals of religious life (1890:6).

Gambling appears to be a kind of moral and societal cancer, and surely those who gambled excessively inflicted the greatest degree of harm. Gulland adds these complaints to the list of behavioral ills and immoralities: “It is a dangerous and unsocial form of excitement; it ruins character, demoralises industry, spoils sport, it breeds callousness, selfishness and strife, and tempts men to crime and self-destruction, while it works special injustice to women and children” (1908:42).

Other commentators on gambling’s evils focused on the “work aspects” (or lack of work aspects) of gambling behavior. According to Barnett, who italicizes for emphasis: "Gambling is immoral because it is taking, or striving to take, without giving anything in return" (1897:15). This something-for-nothing ethic was referenced in the section on work problems, and one still hears this objection to
gambling voiced today — evidence, perhaps, of the staying power of these discourses. To these thinkers, the gambler does not properly "earn" his money. As Savidge puts it, "If I am ever called to officiate at the funeral of a gambler I shall not call him a fine fellow — he is a robber for he takes what he never earned" (1888:155).

Some of the passages in these works provide a chilling reminder of where, exactly, gambling was to be considered in the morality typologies of the day. Black equates gambling with slavery, as "utterly and forever wrong" (1895:120-121). In a statement that immediately grabs the attention of a current reader, he urges that moral thinkers need to unite against gambling as they once did against slavery: "the gambling-hell must go the way of the slave-mart and the slave-ship" (ibid).

Remarkably, this was not the only slavery-gambling association I found in this literature. The conceptual connection to slavery is also drawn by Posnett, who claims that the battle to "remove" gambling needs to be similarly "inspired by Christian sentiment" (1863:22-23). He invokes the fight against slavery to let his readers and listeners know how dramatic the battle against gambling must be:

What of slavery, that sum of all villainies...? Was not the majesty of the law rightly invoked both in Great Britain and the United States, by such men as Wilberforce and Abraham Lincoln, to overthrow that pestilent and life-and-liberty-destroying monster? (ibid)
Hughes also draws this parallel when he says, "(l)eet us, then, in the name of God and humanity, combine heartily to abolish Slavery, ... Gambling" and other sins (1889:xiii). In these remarkable passages, the horrors and evils of slavery are equated with the horrors and evils of gambling. While we would certainly want to question whether such a moral connection is at all appropriate, we would inevitably do so through our current moral and sociocultural lenses.

What is interesting sociologically is that these two evils have since traveled dramatically divergent social pathways. To say the least, gambling has not "gone the way of the slave-mart and the slave-ship." Quite the contrary, gambling as a general activity has never been so widely accepted. If we were to track these sociological moral trajectories, then, gambling as a general activity has "gone" in one direction, while slavery has gone in another. Even the most extreme gambling critics today would not dare draw parallels between gambling in general and the abominations of slavery in particular. While these direct connections are no longer made, it does allow us insight into the scale of immorality that gambling was alleged to inhabit, and it allows us to better understand why those who gamble to excess today are received as a moral menace.

It is important to point out here that the church has not always been consistent in its support for the proper "side" of the slavery debate. Similarly, it is important to note that the church has shifted
its perspectives in the gambling world as well, and it has not always
been on the "supportive side" of gamblers with problems. The history
of this central social institution must not be forgotten. Most
importantly for our purposes here, these moral-religious
condemnations are still present in the lives of the current-day
problem gambler - just ask any one of them to describe his or her
social reception today, and echoes from these historic
characterizations will reverberate throughout their descriptions.

Gambling, God, and Satan

"When I talk to you about card-playing in your home I am
trying to pound through your head that every pack of cards is but
another stepping-stone to hell."

-- Professional baseball player-turned-preacher
Billy Sunday (in Ellis:438), articulating his
position on the morality of gambling

As we have seen, quite often the moral objections expressed by
these authors were based on specific beliefs about gambling, God, and
Satan. Spriggs draws this connection by stating unequivocally that
"(m)orally, (gambling) is unchivalrous and unchristian... I say the
devil is the only father of it" (1890:14-15).

Parry returns to the theme of the evils of gambling by
comparing the "good" and the "bad" thusly:

Christians must be distinguished from the world. Stanley
in Africa had authority over the natives because he was
distinguished from them - he was wearing shoes and they
were not. That little distinction gave him power to rule them. The Christian, to have power in the world, must be marked (1906:20).

In this passage, gambling is referred to as a “mark” of the non-Christian, allowing us to distinguish Christians from an obviously inferior “rest of the world.” Parry uses these types of behavioral distinctions to reveal how the Christian can and must set himself off from the damned: “That is what these doubtful amusements are doing; they are cutting the Christian’s wings off that he cannot fly to the high places of the Spirit” (1906:20-21).

Alexander sums up his moral objections to gamblers as follows: “The gambling spirit is the direct opposite of the Christian spirit... The gambling spirit is a manifestation of that Satanic taint” (1899:78). Later on, Alexander concludes his essay by blasting “a passion which is equally destructive to faith in God and love for men” (1899:83). Note that by using terms like “habit” and “passion,” he links what he deems an uncontrolled, immoderate personal behavior with the strongest moral judgment.

Some point directly to the “rules” and “laws” established by religion – a topic often examined by sociology. Holp claims that “eight out of ten of the commandments of Sinai every gambler breaks into atoms” (1887:114). In claiming that “the evil is in the motive,” Ford states that “(g)ambling is wrong because it is invariably the expression of covetousness; and covetousness is condemned as an evil thing both
by the law of God and by the general consensus of human opinion” (1903:26-27). Interestingly, the “law of God” is considered alongside “the general consensus of human opinion” – the latter serving, of course, as the focal point of this research. It is my contention that the two were intimately intertwined in Ford’s day – and that they continue to be effectively partnered today.

Martin states that “the lecturer beholds in it imminent danger and positive transgression of God’s law...” (1856:3-4). When attempting to explain why this constitutes such a “transgression,” Martin relates the story of a father speaking to his son. This son asks his father which of the ten commandments gambling violates, and the father replies “None in letter, but the whole law in principle and spirit” (1856:23), leaving little doubt as to where this activity was to be placed on the Christian moral continua.

In Haines and Yaggy’s work, this ominous future is touted as the fate of the gambler: “(t)he gamester forfeits the happiness of this life and endures the penalties of sin in both worlds” (1878:275). In both worlds! In this excerpt, those who gamble problematically in this world are certain to endure punishment in the next as well. Chapin also draws connections between the hells of this world and the ones to be anticipated in the next: “O, truly is the gaming-house denominated a ‘hell’ ... O, draw the veil, it is indeed a hell!” (1847:307-308).
In a manner consistent with much of deviance theory, we can see that Satan, that personification of moral-religious evil, was a major character in these behavioral descriptions. Consider the warnings of one concerned moral thinker, who tells his audience "(g)o not to Horse-racing, Cock-fighting, throwing at Cocks, Gaming... (they) lead to Destruction, and are the Devil's Baits to catch unwary Souls; and that they are his Baits to draw into his Snares, ye may know by the Consequences which they produce" (*Exhortation* 1770:21). The author goes on to tell us that “God is angry with the Wicked every Day...” and that gambling activities (among other activities) are not “agreeable to a Christian Life” (ibid).

Years later, Beecher concludes with this harsh warning to those who play with Satan:

> Your feet stand on slippery places, whence in due time they shall slide, if you refuse the warning which I raise. They shall slide from heaven, never to be visited by a gambler; slide down to that fiery abyss below you, out of which none ever come. Then, when the last card is cast, and the game over, and you lost; then, when the echo of your fall shall ring through hell, -- in malignant triumph, shall the Arch-Gambler, who cunningly played for your soul, have his prey! Too late you shall look back upon life as a MIGHTY GAME, in which you were the stake, and Satan the winner! (1844:130)

With words such as these reverberating in the minds of gamblers in these days, it is not difficult to imagine how strong the stigma must have been.
Notes on the Social Construction of Public Receptions

"How much more hateful when it has taken such hold of its victim (which it is not long in doing,) that he hungers and thirsts for the excitement of his secret sin!"

-- Hopkins, expressing how hateful it is to indulge one's hungers and thirsts (1835:10-11)

“One of the most effective ways of dealing with the evil publicly is to expose the utter folly of the whole thing.”

-- Gulland, going to the public to tell them all about the evil (1908:40)

“The public sentiment of Chicago is so strong that it has driven Carter Harrison, the mayor, to take strong measures against the gamblers of that city.”

-- Holp, describing a successful shaping of a public reception (1887:104)

Because so much of the “problem” of the problem gambler is social in nature, the social reception of the problem gambler needs to be a vital consideration when considering his or her sufferings. While we should note that the label does not necessarily "cause" the deviant act, we cannot be oblivious to the social roots of this human problem. In this section, I will examine the ways in which these early moral thinkers contributed to the creation of receptions both public and social.

Hopkins' entire sermon reads like a scathing and unequivocal indictment of gamblers - and especially those in his midst who gamble in ways similar to the "problem gamblers" of today. After outlining who they are, he proceeds to tell his audience precisely what their social reception should look like:
My hearers – without a question, this vice which I have pointed out is foul. For the life of you – hate it. It should be hated... it should be resisted. It should be made to feel the severest scourgings of public indignation (1835:13).

In a subsequent tirade, his words reveal a sophisticated understanding of the power of social receptions.

There is mighty power in decided public opinion... (and) the power of public opinion is doubled when it is in the right; for its energies are nerved and sustained by the impulses of approving conscience. And the power of public opinion is trebled, when it rears itself against vice (1835:15).

These words provide, essentially, a sort of blueprint for a social reception. “Decided public opinion” can be a powerful thing, especially when it is grounded in “the right” and focused intently on a specific, ostracized type of individual. Put another way, stubborn and moral-based social receptions can effectively spoil the social universes of the stigmatized.

Later, when speaking about the gambler, Hopkins recognizes that the power of stigmatization can be effected both from within and from without. In other words, stigma is "achieved" via the interactions between one's self-concept and the conceptions of "others" in the stigmatized person's social circles. As Hopkins puts it (with notable sociological acumen), this individual “has a foe without and a foe within”:

When he is beset by popular indignation, he has a foe without and a foe within. Let the gambler suffer this persecution. Lay upon him the biting lash of public odium. Let him be conscious that—if he continue what he is – he must bear the
superadded curse of unrestrained abhorrence; that whatever else may be tolerated, there can be no tolerance and no courtesy for a vice so foul as his (1835:15).

Hopkins concludes his tirade by making clear once again how we are to receive this population:

Let the gambler know that he is watched, and marked; and that, as a gambler, he is loathed. Let the man who dares to furnish a resort for the gambler know that he is counted a traitor to his duty, a murderer of all that is fair, and precious, and beloved among us. Let the voice of united, incensed remonstrance be heard – heard till the ears of the guilty tingle (1835:17-18).

Examining these kinds of statements allows us to better understand why moral leftovers continue to shape the social worlds of the problem gambler. In listening to problem gamblers describe their existences today, it becomes clear that these historic remnants cling to our current-day discourses. This is why what psychiatric experts insist is a "medical problem" is still commonly interpreted as a moral one. When a wider, sociological and historical view is revealed, we can see that no other social institution has contributed its expertise to these discourses as long as religion has – nor has any other social institution voiced its influential opinions in so enthusiastic a fashion.

It is difficult to overemphasize the intensity of this rhetoric. It is impossible to imagine that the social effects would be minimal for this population when Weems, for example, calls gambling the "Giant Cruelty" and comments none-too-subtly: "It is not easy to conceive of any vice more hateful to God than Gambling; because none can be
conceived MORE DIAMETRICALLY OPPOSITE TO THE VERY END OF OUR CREATION! (1816:11, caps in original).

Weems then continues by telling his audience where these individuals “belonged” on the moral-evolutionary scale: “But alas! the Gambler is blind to all... beautiful ideas, and stupidly insensible to... divine impulses. Sordid, groveling wretch!... Far, far he lives below the dignity and worth of the poorest animal” (1816:11). It could not have been a happy fate when those whom Weems’ sermon targeted learned that they were “far, far below” even the lowest species in the animal kingdom. He then gives an informative lecture to those whose gambling behaviors ran afoul of the social norms of the day:

These, O gamblers, are your barbarous deeds. And shall not God visit for crimes like these? Yes, he will visit. He does visit. No gambler has ever been a happy man. Never on any Sinner was more awfully fulfilled that curse, ‘no peace to the wicked’ than on the Gambler... His sin not only leads to hell in the end, but is a hell on the road (1816:17).

Weems’ church could not have been a comforting site of refuge for this “wicked” population. He then continues on a tirade that explicitly references "reputation, so dear to all" (ibid). Weems then proceeds to describe a social construction of these gamblers' reputations. Astutely noting that virtually all of us yearn to be accepted socially and publicly, Weems plays off of this desire in an angry passage:

the public smile, so highly prized by all, with him is turned into public scorn, pointing at him with curses as he walks.
along the street while his former friends, ashamed, turn their backs; and, virtuous parents tremble to see him in the company of their sons (1816:20).

Once more, a social reception is explicitly outlined, and one that was no doubt shaped by (and reflected in) these kinds of outbursts. As we think about how these populations are received and treated today, we might wonder about the degree to which this sociological history accompanies our current social assessments.

Beecher delivers a call to action to combat the evil inherent in gambling: "Shall such astounding iniquities be committed out amidst us, and no man care? Do we love our children, and yet let them walk in a den of vipers?" (1844:120). Act now and demonstrably, Beecher seems to say, and by all means protect the children from these evils. Upon hearing these words, it is not too difficult to imagine how a gambler in his audience might be received.

Hughes also gives hints as to how a community might construct a social reception: "The time has come to boycott all gamblers... We must agitate for the rigid exclusion of such enemies of mankind. We must make it as impossible for them as it would be for a pirate, to be elected" (1889:266). He then speaks of this process as a "cleansing" one. This is where a social reception comes from, and this is where we must look when attempting to understand the current world of the problem gambler.
In a scornful conclusion, Breeden shares this harsh assessment of gambling in America:

When once the American people realize the enormity of this sin, they will drive it from the land with the besom of destruction. In the mean time it is the imperative duty of the press, pulpit, and platform, to agitate. May the agitation go on and increase in volume and velocity until the reign of devils is summarily cut short — until this cloud, one of the darkest that ever dropped over the earth’s fair face, is lifted and dispersed (1899:457).

Others left the realm of the macro to articulate in more specific fashion their beliefs about the futures and fates of gamblers. Talmage’s finale includes this impassioned description of what is to happen to the “ruined” gambler:

To the gambler’s death-bed there comes no hope. He will probably die alone. His former associates come not nigh his dwelling. When the hour comes, his miserable soul will go out of a miserable life into a miserable eternity. As his poor remains pass the house where he was ruined, old companions may look out a moment and say — ‘There goes the old carcass — dead at last,’ but they will not get up from the table. Let him down now into his grave. Plant no tree to cast its shade there, for the long, deep, eternal gloom that settles there is shadow enough. Plant no ‘forget-me-nots’ or eglantines around the spot, for flowers were not made to grow on such a blasted heath. Visit it not in sunshine, for that would be mockery, but in the dismal night, when no stars are out, and the spirits of darkness come down horsed on the win, then visit the grave of the gambler! (1872:184-185).

In this instance as well as the others, it would be difficult to misinterpret the implications of this rhetoric. The fate of the problem gambler was not to be a pleasant one, in this world or the next.

We have seen an impressive amount of evidence that indicates that those quoted were describing gamblers whom we now label
“problem gamblers.” In this section, we have heard powerful descriptions that dictated how they were to be received. In the next section, we turn to a particularly tragic consequence of these social and sociological processes.

Remorse and Suicidal Impulses: A Sociological View

"His Mother from the window look'd
With all the longing of a Mother;
His little Sister, weeping, walk'd
The green-wood path to meet her Brother

No longer from thy window look;
Thou has no Son, thou tender Mother,
No longer walk, thou lovely Maid
Thou hast alas! no more a Brother."

-- Weems unsympathetically summarizing the suffering and the suicidal thoughts that plague the problem gambler (1816:16)

In contemplating the social receptions and the "evil" of the problem gambler, one cannot avoid thinking about the affliction's most tragic consequences. A number of researchers have attested to the suicidal thoughts that problem gamblers have today (Custer 1985:231-232, National Research Council 1999:134-137). What is interesting is that a surprising number of earlier theorists (and possibly, a handful of empiricists) also linked excessive gambling and suicide. By examining these historic tales of suicides and suicidal thinking, we can perhaps speculate on the sociological reasons why this population is so commonly plagued by suicidal impulses.
In a long and increasingly passionate passage, Beecher's tone and substance allow us insight into the sociological world of the suicidal impulse of the problem gambler:

'I have gambled away my money and my salvation! I have broken my old father's heart! Good God! what a wretch I have been! I am not fit to live. I cannot go home. I am a stranger here. Oh! that I were dead! Oh! that I had died before I knew this guilt, and were lying where my sister lies! Oh God! Oh God! my head will burst with agony!' He stalks his lonely room with an agony which only the young heart knows in its first horrible awakening to remorse — when it looks despair full in the face, and feels its hideous incantations tempting him to suicide. Subdued at length by agony, cowed and weakened by distress, he is sought again by those who plucked him. Cunning to subvert inexperience, to raise the evil passions, and to allay the good, they make him their pliant tool.

Farewell, young man! I see thy steps turned to that haunt again! I see hope lighting thy face; but it is a lurid light, and never came from heaven. Stop before that threshold! -- turn, and bid farewell to home! -- farewell to innocence! -- farewell to venerable father and aged mother! -- the next step shall part thee from them all forever. And now henceforth be a mate to thieves, a brother to corruption. Thou has made a league with death, and unto death shalt thou go (1844:108-109).

This Beecher passage is worth quoting at length because it effectively summarizes the lengths to which this type of moralizing rhetoric could go. Beecher seems to be taunting the gambler-with-problems here, urging him to "bid farewell" to this earth. These words mock the suicidal gambler, almost imploring him to commit the ultimate act of self-destruction. Given this kind of rhetoric, and given the power of the social institutions associated with religion and morality, is it any wonder that some did just that? And might
lingering remnants of this type of thinking continue to haunt problem gamblers today?

It is important to note that "suicidal impulses" come from places sociological as well as psychological. Even today, powerful and wide-ranging work by social scientists such as Putnam (2000) shows us that social bonds can positively affect physical and mental wellbeing. Social connectedness, it turns out, is generally very good for you.

Durkheim's work famously established that those who live in societies where social connectedness was prominent tended to commit suicide less often than those who resided in societies in which connectedness was not the rule (1951). This is a "sociology of suicide" (an apparent paradox, as suicide would seem to be the most individual of acts) – and an important consideration when contemplating complex social phenomena such as those associated with problem gambling.

These broad findings have important implications for the problem gambler yesterday and today. It is clear that those who gambled too much were faced with strong opposition from thinkers in the pulpit (who constituted a fairly powerful bunch in the social historical scheme of things). These condemnations must have led to strong stigmatization and ostracism – and hence, a lack of social connectedness. Is it not conceivable that those who gambled too
much felt ostracized by a community led by moralizing thinkers? Surely, the ostracism was severe, and the consequent social isolation could well have served to foster a suicide-prone environment. Sociologically speaking, this is precisely where "suicidal impulses" come from – a "big social place" in which isolation, rather than connectedness, is the rule.

In searching through these sermons, I was struck by a discovery of story after story of individuals ending their own lives after nightmarish gambling escapades. Mackenzie considers it so central to the gambling enterprise that he devotes an entire chapter to the topic of "Why Gambling Leads to Suicide" (1902:61-67), as does Horsley (1905:84-91). These descriptions of suicide are consistent with the current psychological profile of the problem gambler, who is said to be beset by suicidal impulses.

The quantity of suicide cases in this literature is perhaps the best evidence yet that these were the individuals we would consider problem gamblers today. After all, this would seem to be an objective matter, and it would be most difficult to classify a suicidal gambler as anything other than a "problem" gambler.

The early "case studies" in which gamblers take their own lives are as numerous as they are graphic. Martin tells a story of a gambler who feels so guilt-ridden about his gambling that he takes his own life: "Unable to meet his friends after they became acquainted
with his position, and impotent to bear the reproaches of his own conscience, he twice in one day attempted his life, and ultimately succeeded in severing the vital thread” (1856:16).

On the next page, he continues with a description of another horrific suicide “scene”:

A terrible scene occurred here last Monday. A young man... had just lost everything he possessed at play, blew out his brains while sitting at the gaming table... A week only previous to this event an English officer destroyed himself under like circumstances at Homberg” (Martin 1856:17).

Martin goes on to claim that these occurrences are “by no means unfrequent” (1856:17). Others attempt to put a more quantitative point on it: Gulland and the National Anti-Gambling League claim that gamblers committed suicide exactly 234 times “during the 12 years 1895-1907” (1908:44).

Some case studies described in this literature allude to the suicidal thoughts – or "ideations" – commonly referenced by those in the problem gambling field today. In 1835, Hopkins quotes a gambler who says that

for me, to live – to live despised by those whom I esteem and love – to live, after having sacrificed to a vile propensity the happiness of a beloved, amiable and virtuous wife, the well being of six innocent children, the good-will of a numerous circle of estimable friends, would be a most horrid supplice. To live is impossible (inside cover).

This description then evolves into a detailed account of his suicide attempt; this gambler swallows poison, and then a "piece of opium as large as a hazel nut." These attempts fail, and the gambler
survives, allowing a broader audience to listen to his narrative (Hopkins 1835:inside cover).

In that same introductory section, Hopkins describes "(t)he first idea of the man, who, forgetting his duty to his family, his friends and society, has abandoned himself to the most delirious of all passions, Gambling, and thereby lost more than he possessed, is almost in every case Suicide. Self destruction is an horrible thought" (1835:inside cover). This was a horrible thought, indeed -- but one that apparently occurred to gamblers with problems long ago.

Weems seems to revel in tales of gambler suicides. He describes in graphic detail a harrowing scene of death and destruction resulting from gambling problems. His story starts innocently enough: "Gilmore was a young man of as noble a soul as ever inhabited the manliest form. His countenance, as sight of his friends, was always brightened with a joy which they never can forget" (1816:12-13).

"Gilmore," however, developed many problems with his gambling, and soon was deeply in debt. He rearranged funds from an uncle's business in order to obtain money to gamble, and then lost all of that money as well. His troubles did not end there.

Unable to meet his uncle's frown, he skulked to his own home, where the sight of his injured wife and little beggared boy filled up the measure of his wretchedness. The melancholy looks of one, and the trembling cries of the other, overcame him; and the next morning, while his wife kneeling at the fire, was toasting a crust of bread for his breakfast,
and his boy was weeping on the floor, he took down his gun, placed it against his forehead, and touching the trigger with his toe, scattered his brains over the ceiling, and fell by the side of his child half drowned in his father's blood! (1816:12-13).

This passage captures vividly the remorse and regret felt by the gambler whose acts create troubles in his family. These are often the most difficult ramifications to encounter, and they plagued those who gambled too much then and now. The suicide description is a spectacular one, but it is far from the only one featured in this literature.

Later on, Weems describes a gambler who ends his life thusly: "going to his wagon in the back yard, he took a halter from one of his horses, and went and hung himself" (1816:16). Weems follows these tales with another about a different gambler, "Drisden Harwood of Maryland:"

as he was crossing South River Ferry, he suddenly sprang up on one of the seats of the boat, and throwing up his arms with the wild looks of a madman, called out aloud, "Farewell World! Farewell World! Here go I, poor Drisden Harwood!" and plunged at once into the dark blue wave, whence he never rose again. It was generally thought that he had purposely filled his pockets with stones to prevent his rising (1816:21).

On the next page, Weems tells us about a Miss Braddock, who "very deliberately hung herself over the door of her chamber" (1816:22). In all of these cases, Weems serves as a sort of moral ringmaster, telling horrific tales of tragedy with considerable
enthusiasm. One cannot envision a problem gambler in Weems' presence who felt comforted by his rhetoric or demeanor.

As he so often does, Talmage provides us with a series of cases in which the gambler's misadventures turn tragic. He wonders "(h)ow many railroad agents, and cashiers, and trustees of funds, it has driven to disgrace, incarceration, and suicide!" (1872:168), and he provides evidence to support his musings. For instance, he tells a story in which "(a) man committed suicide in New York, and upon his person was found a card of address giving a grog-shop as his boarding house, three blank lottery tickets, and a leaf from Seneca's Morals, containing an apology for self-murder" (1872:173).

Talmage later reports that "One lottery in London was followed by the suicide of fifty persons who held unlucky numbers" (1872:173). Even if these stories represent embellishments (and there is reason to suspect that they may), it is the fact that suicides are thought to be defining characteristics that is of interest here. Once more, it seems we have discovered two historic parallels: 1) in the thinking and acting of those who committed these acts, and 2) in the thinking and acting of those who defined and interpreted these acts and actors.

Others use language that points to widespread suicidal activity among gamblers. Rush tells a story about hundreds of gamblers who "ended their days by self-murder" (1803:72). Savidge claims that ",(a)fter a lottery in England there were fifty suicides of those who had
held unlucky numbers" (1888:156). Alexander (1899:82) also links excessive gambling to suicide, and Frayn contributes this to the discourse on gambling behavior and self-murder:

Gambling becomes a passion, a madness, and not unfrequently ends in suicide! How often do we read in the reports of self-murder which come to us, some significant explanation of the rash act by the record of losses in gambling! It has been said, on good authority, that during the last ten years, there have been no less than 2,000 suicides from this cause in Monte Carlo alone, besides hundreds of others in other places who have chosen death rather than face shame and beggary, the only choice indeed that was left to them (1890:17).

Hocking also references Monte Carlo's "'suicides' cemetery,' where they bury out of sight the hapless victims of their pernicious systems. That fact," he claims, "is eloquent in itself" (1898:90). Meyer claims that in Monte Carlo, "(g)uards constantly patrol the terraces and grounds watching for intending suicides, and yet there are from 100 to 125 suicides every year" (1895:8).

Once more, we return to Weems to get a sense of a broader "sensibility" when it comes to suicide and society. Listen to this passage: "I say when a man who has any sensibility left, finds himself in so wretched a state as this, the true state of every gambler, what wonder that he should sink under the burden, or, goaded to desperation, should fly to a mill-pond to end all his troubles!" (1816:20).

What wonder, indeed. Facing social universes that condemned their gambling existence as a particularly sinful one, is it any wonder
that some gamblers felt such profound shame that they ended their lives? Ironically, rhetoric like Weems' could have had a dramatic—albeit subtle and easily missed—impact on the suicidal impulse.

This is the sociological connection between the “sinnifying” of gamblers and the suicide rates of those who gamble too much. The "causal reasoning" is neither direct nor absolute, but there is a great deal of analytical work to be done with the suicidal thoughts of problem gamblers and the sociological environment that they face.

More broadly, we might ask whether "shame" or "guilt" or "remorse"—all internally felt emotions—come from a sociological place. Is it not understandable that gamblers would feel extremely remorseful when faced with these condemnations? And might some of those remorseful gamblers feel so unworthy and uniquely evil that they decide to take their own lives?

If the answers are not yet clear, consider the words of Chapin, after describing the devastation encountered by a collection of problem gamblers in his tale: “Let no one lay the flattering unction to his soul, that the life of a gambler, under any circumstances, is a happy one” (1847:315). These lives were not, by any measure, happy ones. The question remains: could it be, perhaps, that gamblers were less than pleased with their station in life in large part because stigmatization works?
As Volberg reminds us, we must not forget to include sociology when addressing these matters: "the particular social and historical conditions that have given rise to the emergence of problem gambling as a medical issue must not blind us to alternative ways in which problem gambling can be viewed and addressed by society" (2001a:43). In this spirit, we might contemplate how a "historical sociological" approach might illuminate "alternative ways" of thinking about gambling problems and suicidal tendencies.

One wonders what the fate of the problem gambler would be today had he not been subject to the harshest of criticisms and judgments from these historically powerful social forces. These questions are, of course, a bit optimistic and probably naïve: after all, we have subjected any number of populations to harsh social judgments, and we can no more rescind these assessments than we can turn back time to visit an earlier era. At the very least, though, the "arrival" of the problem gambler on our current sociocultural scene mandates that we examine the social origins of the construct.
CHAPTER 8

CONCLUSIONS

This dissertation represents an attempt to explore public perceptions as well as public receptions of problematic gamblers. The primary arguments that emerge from this research develop along three distinct (but interrelated) themes:

1. A Sociological History: The first implication of this research is socio-historical. It has been established here that the “problem gambler” – or at least the gambler with familiar problems – was to be found in our communities for some time. He or she may not always have been understood through the lens of any medical or psychological model, but the overwhelming number of historic tales relying on familiar vocabularies suggests that his or her existence can be documented over hundreds of years.

2. A Sociology of Mental Illness: The second implication speaks to deviance theory and research, and specifically the matter of the medicalization of mental illness. This research has shown that today’s psychological interpretations and yesterday’s religious
interpretations of problem gamblers rely on the same "identifying criteria" in order to single out those whose gambling behaviors overstep the bounds of the normal. Put another way, it is clear that the characteristics that these historic, religiously-inspired thinkers intend for us to get upset about are the very same symptoms that psychiatrists today suggest are diagnostic. There is hardly a single characteristic cited in the official literature that is not similarly cited by the moral-religious thinkers of yesterday. This might lead us to challenge our current, psychological terminologies, as it would seem that we would want more from them than a mere parroting of yesterday's moral objections.

3. A Sociology of Religion and Morality: A third implication is that current religious views (especially those of the religious right) hailing the church as a liberating social force for problem gamblers are misinformed at best, dangerous and disingenuous at worst. At the very least, a careful examination of these historical discourses reveals that churches have not always been comforting sites of refuge for gamblers with problems. This does not make them solely "responsible" for the problem gambler, but it should make us pause for a few considerations. Because so many of the current "problems" of the problem gambler can be located in their social reception, and because religious institutions and their moral judgments are primarily responsible for developing the parameters of this social reception, a
significant part of the blame for the "social creation of the problem gambler" must lie at the feet of these powerful social institutions.

More concisely and connectedly, my points are these: first, problem gamblers have a long and recorded history – as evidenced by antique writings peppered with terminologies that are remarkably similar to those we use today. This history, however, leads us to a second point: perhaps this similitude tells us that we should question the assumptions in mental illness treatment and research that allow for this moral-psychological conceptual consistency to be achieved. This moral view, in turn, brings us to a third point, and one that is especially relevant in today's socio-political environment: if yesterday's moral objections, and hence today's enduring moral stigma, were launched as shots from various pulpits, perhaps we should also challenge our current understandings of the social institutions of morality and religion.

This research, then, potentially challenges not just religious institutions, but also those of psychology and psychiatry. To those who would moralize from pulpits today, we might ask: "Where is the rigorous examination of your own participation in the social creation of the problem gambler?" To those who treat problem gamblers, we might ask, "Is it problematic to medicalize a moral problem? And is that what we are doing with problem gambling?"
Where do DSM vocabularies come from? Where do the social receptions of the problem gambler come from? The answers, it appears, are far more complex and wide-ranging than we might have believed. They do not just come from a progression of psychiatrists who have refined their instrumentation over the years. Ultimately, the place they come from is sociological and historical. Most importantly, these historical discourses exert considerable influence over our current social life.

A Sociological History

There is a tendency – often most pronounced among academics – to consider one’s ideas as wholly novel, when in fact they find their foundations in a long history of thinkers and thoughts. I certainly do not wish to fall into this trap. This work of course rests on the critical shoulders of Szasz (1985), Trice and Roman (1970), and Preston and Smith (1984), among many others.

Even on a topic as "cutting-edge" as pathological gambling, it turns out that many intelligent and discerning observers commented on these matters long before our current band of experts did so. All of the "cutting edge" criteria we point to in the DSM have been articulated previously, but in a different social context. This social context cannot be ignored when attempting to understand the current social station of the problem gambler.
In reading through these excerpts, one might wonder: why study such inflammatory and seemingly ancient rhetoric when attempting to understand social and behavioral phenomena in the 21st century? The concern is a legitimate one, for it seems tempting to address the immediate, well, *immediately*, and return to history for amusement purposes only.

In this instance, however, the past is the immediate, and in no small way. What I am suggesting we take from these historical matters is the idea that history *matters*. After reading through more than a thousand pages of historic literature, and after spending more than a thousand hours with problem gamblers, I have come to believe that these historic articulations continue to shape our current "problem gambling" worlds. Furthermore, I believe that we must recognize these historic roots in order to better understand the lived experiences of those whose lives are shaped by these stigmas.

It appears, then, that contrary to what one might expect from all of the recent attention devoted to this idea, problem gambling is a construct with a rich and deep sociological history. While much of the current literature on this topic is devoted to outlining the medico-psychological manifestations of problem gambling, what is often missing is a socio-cultural analysis that places these behaviors in a broader context.
Even studies that develop a social history of pathological gambling tend to focus only on the historical developments of the medical view. In this view, pathological gambling comes from people like Custer, or Rosenthal, or Lesieur – thinkers whose seminal statuses are deservedly well established. Insightful and important as they were, however, our definitional conventions do not find their ultimate source in the works of these individuals. Instead, they arise from the collective voice of historic speakers who have contributed to the discourses on gambling and problem gambling behavior. As it turns out, the places the DSM criteria "come from" are far more complex – and far more interesting – than we might have originally imagined.

If we take a sociological look back, we can see that virtually all of the diagnostic themes of today were prominently referenced long before medical experts arrived on the discursive scene. Crime and illegal acts, debt and money problems, family and friend problems, preoccupation, chasing, tolerance, loss of control, escape, lying, restlessness and irritability, and work problems have all been used as operationalization ideals to guide us in our quest to find those whose gambling is a problem.
A Sociology of Mental Illness

When I started reading these works, I did not expect to discover so many themes of similitude. At first, I planned to use these historic writings to provide an introductory background to a broader research project. As I read, I realized that this background story was a story in itself, and it merited a more substantial analysis.

It has become clear to me that our mental illness diagnoses have not just "replaced" our moral diagnoses; in this instance, I would argue that our mental illness diagnoses are our moral diagnoses of yesterday. Even where it would appear that psychology could claim to play the central role in shaping our understanding of this disorder (e.g., in determining the diagnostic language that we use to identify these gamblers), we can see that these criteria have been effectively "borrowed" from previous eras and earlier social institutions. Sociologists have long charged that the field of mental illness has a tendency to treat those whose behaviors are immoral as mentally ill. On the matter of the mental illness diagnosis of pathological gambling, the research presented here supports that view.

This research also has broader implications for scientific and non-scientific perspectives. In the most conventional account, science is hailed as constituting a spectacular break from religious worldviews. The Enlightenment illuminates the Dark Ages, and clear thinking bursts free from its medieval constraints. In the process,
science replaces religion as the ultimate path to truth. The new accomplishments of science mark a dramatic step forward, away from the previous misunderstandings, and new "breakthroughs" are trumpeted in a way that implicitly and explicitly belittles the understandings – and the epistemologies – of the past.

What if these "breaks" were murkier than we believed, though? With the behavioral phenomena associated with excessive gambling, it appears that there is little rhetorically and thematically that separates the "scientific" from the "religious." While scientific rhetoric often couches its terms in more rational terminologies, we have seen that religious thinkers can invoke these "fact-based" rational tones as well. At the same time, scientific rhetoric can and does rely on the moral assumptions of a previous era. What is striking is that these ostensible opposites appear to share so much in common.

The assumptions of today's mental illness models, and the criteria used to diagnose, are not as dispassionate as this model's proponents might suggest. No matter how adamantly a current-day diagnostician insists upon the reliability of his pathological gambling diagnostic measures, they are "reliable" only because they parallel other diagnoses – diagnoses which inevitably draw upon a moral discourse that has existed for many, many years. When the diagnostician determines that a given patient qualifies as experiencing work problems, or family problems, or preoccupation issues, he or she
relied on moral judgments that long ago deemed these problem-worthy. While we certainly may want insist upon the validity of many of these criteria (after all, one who has broken the law to gamble surely has a "problem"), one thing is clear: the DSM pathological gambling criteria are not based solely on empirically measured objective assessment. They also reflect a longstanding and often parallel sociological history of moral assessments of similar populations.

A Sociology of Religion and Morality

A problem gambler with a sense for the poetic might contend today that "gambling and tokes might make me broke, but words, in the long run, will hurt me." Over the years, moral-religious thinkers have devoted an impressive amount of verbiage to the marking and the stigmatizing of the problem gambler, and these words continue to shape their social reception today. To repeat the contention that opened this dissertation: no other social institution – not even any medical or psychological institution – has made as substantial a contribution to our current understanding of the "appropriate" interpretive parameters for these lives. Even where we might conclude that a medico-psychological institution has played a vital role, it turns out that these contributions originally “come from" a socially constructed morality judgment.
Words, in the end, can hurt you. To recap, these speakers have allowed their audiences to view these gamblers through all sorts of condemnatory linguistic lenses: "evil," "sin," "wickedness," "monstrous," "infernal," "pernicious," "ruinous," "turpitude," "sordidness," "knavery," "wretchedness," "sinister," "cursed," "abominable," "vile," "foul," "dark," "black," "Satan," "hell," "disgrace," and so on (and on, and on). Such a rich and eloquent variety of vocabularies! They are today subsumed, of course, under the "official" medical umbrellas. Much as we hear complaints of multiple names (such as "compulsive" or "problem" or "addictive" gambling) complicating matters today, the available descriptors were far more diverse – and far more damning – in the sociological yesterdays.

While as a culture, we no longer attach such harsh moral stigmas to "normal" gambling, those who gamble to excess do not (and perhaps cannot, at least for the foreseeable future) escape a moral stigmatization that lingers from the past. We no longer use such imputative language, and we no longer condemn them as uniquely evil sinners, but even the most "enlightened" of thinkers tend to regard problem gamblers with some measure of disdain or moral condescension today.

When viewed through a sociological lens, the pain of these public stigmas are at least as important a cog in the problem gambling machinery as any medical or psychological pain. Stigmas
hurt in a manner inflicted from places far and near. Furthermore, these stigmas are not just imposed externally, for the self-stigmatization processes that problem gamblers engage in can prove even more painful than those of their social circles. Of course, having come this far, one caveat begs to be mentioned: "self-stigmas" are also informed by moral guidelines established by social forces larger than we tend to envision.

Sociologists would emphasize that the "inherent" evil of a given act is in fact subject to a diverse range of historic and cultural influences. That which is "evil" in one era may even be heroicized in the next. The sociological point is this: social processes that shift across time and culture profoundly affect our moral views.

Of course, it must be noted once again that some of these diatribes attack the activity of gambling in general, and do not necessarily directly implicate the individual problem gambler. However, it is important to remember that we cannot possibly "separate out" the gambling activity writ large from the individuals who indulged in it. Surely those who gambled to excess felt singled out by the wrath of those who criticized the generic activity of gambling. It is difficult to imagine how it could be otherwise.

More specifically, those who gambled in a far more destructive manner than the "average" gambler would certainly experience these "evil diagnoses" differently. As I have said, the social creation of those
who gambled problematically has been shaped in large part by the staunch moral entrepreneurship of these early religious thinkers. This is troublesome because of the central role that religion (and its attendant notions of morality) have played in the social construction of various social "problems" – in this instance, the "problem gambler." Given this long and potentially powerful social history, is it any wonder that the most heinous of gamblers singled out by religious thinkers are today singled out by psychological ones?

These social effects extend beyond the linguistic realm. As I mentioned in the section on alcohol problems, Breeden (1899:456) claims that "(i)t is the unanimous testimony of ministers of the gospel that it is far more difficult to lead a man who has become infatuated with the gambling mania to a life of uprightness and virtue than to lead a drunkard from his cups." While the alcohol and gambling parallels have emerged as a significant story here, it is important to note another powerful implication of this quote. This passage reminds us that historically as well as today, "ministers of the gospel" have served not only as interpreters of moral life – but also in a more direct fashion as "clinical figures" who advise those who come to them with life problems. Even today, the clergy play an important clinical role in many societies.

As such, the words of these sermonizers serve as more than "just mere rhetoric" (though I hope that this research has established
the power of words in shaping stigmas). They have interpreted and treated the suffering of problem gamblers via a direct and indirect intervention. Because medical and psychological practitioners admittedly intervene upon only a small fraction of the problem gamblers out there, we would be well advised to consider these other, less professionalized types of "intervention strategies" that affect the lives of problem gamblers.

I do not wish to characterize these moral-religious authors as exclusively unidimensional thinkers. With some notable exceptions, these were not solely gambling bashers with narrow worldviews. In fact, on many occasions I was surprised at the sophistication – and occasionally the sociological sophistication – of their words. Some moved with considerable agility between the individual level of analysis and the societal level of thinking, as Frayn did, for instance: "The effects which gambling produces upon character are as complete and appalling in their nature as those which are seen in the sphere of political economy" (1890:14). On rare occasions some moral thinkers were refreshingly self-critical, taking to task the churches that raised funds through gambling events (see, for example, Mackenzie 1902:72). Some were moving benevolently toward an interpretation of this population in which "saving" these sinners was deemed a worthwhile endeavor (see, for example, Andrews 1908:39). As the
medical and moral discourses converged, "healing" and "helping" perhaps took precedence over vilifying.

I should also point out the obvious fact that not all religious contributions to the social order are negative. Some sociologists have noted that religion can play a positive role in maintaining social order, while others have insisted that religious leaders have often inspired rebellious social movements that ultimately proved beneficial (see Stark and Bainbridge 1996:1-7).

I also wish to emphasize that not all current religious thinkers are darlings of the religious right on the matter of gambling behavior and policy. In fact, I have had a number of enlightened conversations with contemporary religious leaders who deplore the extreme views of their right-leaning counterparts. Today, houses of worship serve an important purpose for Gamblers Anonymous, as meetings are often held in churches and many adherents cite their "higher power" as a healing force.

These developments, however, should not blind us to the fact that religious contributions to the discourses surrounding problem gamblers have contributed significantly to the harsh social receptions that the problem gambler has faced. While it has become politically useful for some religious leaders to be sympathetic to the plight of this population today, a review of the surviving literature reveals that a
sympathetic problem gambling posture has not always pervaded moral-religious thinking.

In my view, before the religiously-inspired anti-gambling organizations focus their accusations elsewhere, they would be well advised to direct a critical eye toward their own complicit actions in the social creation of the problem gambler. I have never heard a single religious thinker consider the ways in which religion, as a social and institutional force, has played a central role in the creation of today's "problem" gambler. Elsewhere, I have called this social force the effective "Public Stigmatizer Number One" on the matter of gambling to excess (Bernhard and Thompson 2001:130). No other social institution has played a more important role in affecting the ways in which these populations have been received, and this legacy continues to shape public thinking (and public acts) today. Only by examining where these types of judgments come from can we fairly understand where they are, and only by putting these yesterdays and todays into a proper context can we speculate effectively on potential tomorrows.

Concluding Thoughts

Before we conclude, I wish to reiterate two caveats to this sociological and historical journey. First of all, saying that problem gamblers are subjectively or "socially created" does not deny the
objective reality of their suffering. I have spent far too much time in the presence of problem gamblers who are genuinely hurting to cast any doubts on their pain. This is a group beset by suicidal impulses and thoughts, which to my mind dictates that we should not get so bogged down in the semantic and abstract clouds that we lose sight of the lived realities experienced in the grounded world below. At the same time, it is important to note that these ground-level lived realities are profoundly influenced by social and sociological perceptions. By understanding these entrenched – but larger-than-the-individual – social and sociological processes, we can help the problem gambler better understand his or her plight.

This leads me to my second point. In revealing that a significant portion of the "official" medical and psychological diagnosis of pathological gambling is grounded in the religious and moral values of yesterday, I fear that this analysis will be interpreted as a complete rejection of the so-called "medical model" or the tenets of psychology. I do not wish for this research to be understood in this light.

Any cursory observation of the problem gambling treatment scene will reveal that the model's adherents constitute the core "micro-activists" in the field. Sociologists are not currently clamoring to help problem gamblers deal with their social problems. While criminologists certainly focus on the "problem" component of the problem gambling phenomenon, they are rarely willing or able to take
their analysis directly to the lives of their research subjects. Nor are political scientists devoting their research energies to the amelioration of the problems these troubled individuals face in the everyday.

Clinical psychologists and medical practitioners, on the other hand, are out "in the trenches" with problem gamblers, and most are sincere in their hopes of offering their most informed expertise to their clients. Theirs is hardly an easy or economically rewarding job. In what other psychological or medical field would one be able find an entire field of clinicians who have donated so much time to their clientele – a group which by definition suffers from an affliction that devastates financial resources? In attending a wide variety of problem gambling conferences over the years, I have been consistently impressed by the generosity and willingness to learn that these practitioners exhibit.

As such, I believe that so-called "medical model" adherents represent our best and most realistic hope for an effective professional treatment intervention. Hence, my second caveat is this: bringing to light the moral nature of certain psychological judgments does not mean that we need jettison the entire psychological enterprise.

I do believe, however, that sharpening our attention to the beyond-the-individual level of analysis can profoundly enhance the micro-level interventions of psychologists and medical practitioners. In fact, I firmly believe that there is a great deal of promise in
something like a "clinical sociology" (see Rebach and Bruhn 1991, Bruhn and Rebach 1997) that complements our more conventional medical and psychological understandings. Ideally, sociological understandings could provide assistance via a one-of-many-tools-in-the-tool-chest approach. "Multidisciplinary research" needs to be more than a buzzword uttered exclusively in the halls of academe; it must be a mindset that is incorporated into effective interventions in the social world.

A clinical sociological perspective could be used, for example, to better understand how the specific norms of local communities affect perceptions (and hence social receptions) of problem gamblers. I have traveled widely to lecture to problem gamblers all across the country, and I have been struck by how many of them talk about the unique social, political, and cultural climate that they confront in their hometowns. At the very least, more research needs to be conducted on the ways in which these sociological factors challenge the tenets of the medical model (a model which, to the extent it relies on solely inward-looking examinations and one-size-fits-all categorization schemes, can stagnate).

A clinical sociological perspective could also help problem gamblers better understand the nature of their affliction by noting, for instance, that the explosion of gambling on the American scene has happened at virtually the exact same moment in history as an
explosion of access to credit. These parallel developments – coincidental by any rational account – nevertheless provide problem gamblers with unprecedented access to money that is not theirs. When I observe problem gamblers in treatment, many bring in multiple applications for new credit cards – or actual credit cards already delivered – and laugh at the absurdities inherent in a system that encourages this kind of spending. A clinical sociology could move beyond an individual-level analysis to address class – one of sociology’s favorite analytical constructs. Specifically, treatment should incorporate a more holistic series of tools by relying on the expertise of credit counselors, for instance.

In a similar vein, a clinical sociology could insist upon participation by legal experts. This research has shown that many of the earliest recorded instances of gambling problems were discovered via their "capture" in the criminal justice system. Today, there is no evidence to suggest that these "captures" are any less common than they were yesterday. Parole officers, detectives, police officers, lawyers, judges, and all administrative staff need to be educated about the nuances of problem gambling cases. This more-holistic intervention approach just might "capture" problem gamblers in a softer safety net.

Sociological perspectives could also enhance our understandings of technology, the economy, gender roles, and any
number of classic constructs. It is in this "clinical sociological" spirit that this research may be applied. By better understanding the social creation of the problem gambler over time and at a societal level, the clinician can help the problem gambler better understand his or her social reception. Problem gamblers can see that they are not alone; on the contrary, people have been engaging in these kinds of destructive acts for many years. Finally, all parties involved can better understand the reasons this "medical problem" is in everyday life received as a moral one.

I wish to state once more that by no means am I able in this space to tell the "whole" tale of that which has transpired in all of these moral-religious writings, nor is this the definitive sociological history of the problem gambler in society. If anything, this examination has made me realize how rich this literature is, and how deep its implications are. On a number of occasions (and thanks in no small part to the assistance of my dissertation committee), I found myself striving to confine this project's focus to the elements that I deemed relevant to this story. Perhaps another researcher can pursue other strands suggested by these works. I certainly hope to return to them in the future.

In today's socio-political discourses, there is a tendency to look for a single "guilty party" responsible for the problem gambler. Many on the pro-gaming side would seem to prefer explanations that locate
the problem within the individual him- or herself. According to this way of thinking, gambling problems are simply part of a broader constellation of problems that these individuals experience. The problem is "in the individual," not "in the casino" or at the racetrack. Many on the anti-gaming side, on the other hand, would like to place the exclusive blame on the gaming industry. This, too, represents an oversimplification, as we have seen that many institutions (including those affiliated with religious bodies) have contributed to the current "problems" of the problem gambler.

Of course, any approach that seeks to characterize culpability in such a reductionistic fashion engages in fallacious thinking: no behavioral problem, after all, can be fully understood without a responsible examination of the social institutions that contribute to its manifestation. Reducing the complexity of the suffering of the problem gambler to a single site is not only irresponsible; it is disingenuous when it comes from social institutions that are themselves partially to blame.

As an academic who has spent years reading the problem and pathological gambling literature, I have delighted in locating so many precursors to current strands of thought in the field. I even found a thinker whose goals ostensibly matched mine. I have sought, as Alexander did just over one hundred years ago, "to determine if we can, (the foundations of) the disrepute in which gamblers and
gambling are generally held” (1899:68-69). While social perceptions of gambling have shifted dramatically in the last few hundred years, social perceptions of problem gamblers have been slower to change. Individuals who gamble too much are still likely to encounter the kind of ignominy typically reserved for transgressors, not people who have a sickness. While gambling itself has been transformed from the pastime of reprobates to the socially acceptable activity it is today, those who gamble too much still feel the moral censure engendered by early moral-religious thinkers.

Today’s problem gamblers are nearly as affected by Hopkins and Hobson, Hogge and Holp as those gentlemen’s contemporaries were. The rhetoric of gambling espoused by early moral voices has permeated our socio-cultural fabric. The current medical and scientific discourses are similarly affected: echoes of the condemnatory anti-gambling language first deployed from the last few century’s pulpits appear even in the latest diagnostic scales and screens. Today’s problem gamblers, like all of us, interact in a social universe with a long history. The forces that shape the texture of their social lives – and color their social receptions – operate largely beyond their everyday consciousness. These moral themes are of central importance when considering the sociological history of the problem gambler.
APPENDIX I

LISTINGS OF DSM CRITERIA

DSM-III CRITERIA FOR PATHOLOGICAL GAMBLING

Disorders of Impulse Control Not Elsewhere Classified:

Pathological Gambling

The essential features are a chronic and progressive failure to resist impulses to gamble and gambling behavior that compromises, disrupts, or damages personal, family, or vocational pursuits. The gambling preoccupation, urge, and activity increase during periods of stress. Problems that arise as a result of the gambling lead to an intensification of the gambling behavior. Characteristic problems include loss of work due to absences in order to gamble, defaulting on debts and other financial responsibilities, disrupted family relationships, borrowing money from illegal sources, forgery, fraud, embezzlement, and income tax evasion.

Commonly these individuals have the attitude that money causes and is also the solution to all their problems. As the gambling increases, the individual is usually forced to lie in order to obtain money and to continue gambling, but hides the extent of the gambling. There is no serious attempt to budget or save money. When borrowing resources are strained, antisocial behavior in order to obtain money for more gambling is likely. Any criminal behavior –
e.g., forgery embezzlement, or fraud – is typically nonviolent. There is conscious intent to return or repay the money.

**Associated features.** These individuals most often are overconfident, somewhat abrasive, very energetic, and "big spenders"; but there are times when they show obvious signs of personal stress, anxiety, and depression.

**Age at onset and course.** The disorder usually begins in adolescence and waxes and wanes, tending to be chronic.

**Impairment.** The disorder is extremely incapacitating and results in failure to maintain financial solvency or provide basic support for oneself or one's family. The individual may become alienated from family and acquaintances and may lose what he or she has accomplished or attained in life.

**Complications.** Suicide attempts, association with fringe and illegal groups, and arrest for nonviolent crimes that may lead to imprisonment are among the possible complications.

**Predisposing factors.** These may include: loss of a parent by death, separation, divorce, or desertion before the child is 15 years of age; inappropriate parental discipline (absence, inconsistency, or harshness); exposure to gambling activities as an adolescent; a high family value on material and financial symbols; and lack of family emphasis on saving, planning, and budgeting.

**Prevalence.** No information.

**Sex ratio.** The disorder is apparently more common among males than females.

**Familial pattern.** Pathological Gambling and Alcoholism are more common in the fathers of males and in the mothers of females with the disorder than in the general population.
Differential diagnosis. In social gambling, gambling with friends is engaged in mainly on special occasions and with predetermined acceptable losses.

During a manic or hypomaniac episode loss of judgment and excessive gambling may follow the onset of the mood disturbance. When manic-like mood changes occur in Pathological Gambling they typically follow winning.

Problems with gambling are often associated with Antisocial Personality Disorder and in Pathological Gambling antisocial behavior is frequent. However, in Pathological Gambling any antisocial behavior that occurs is out of desperation to obtain money to gamble when money is no longer available and legal resources have been exhausted. Criminal behavior is rare when the individual has money. Also, unlike the individual with Anti-social Personality Disorder, the individual with Pathological Gambling usually has a good work history until it is disrupted because of the gambling.

Diagnostic Criteria for Pathological Gambling

A. The individual is chronically and progressively unable to resist impulses to gamble.

B. Gambling compromises, disrupts, or damages family, personal, and vocational pursuits, as indicated by at least three of the following:

1. Arrest for forgery, fraud, embezzlement, or income tax evasion because of attempts to obtain money for gambling.
2. Default on debts or other financial responsibilities.
3. Disrupted family or spouse relationship because of gambling.
4. Borrowing of money from illegal sources (loan sharks).
5. Inability to account for loss of money or to produce evidence of winning money, if this is claimed.
6. Loss of work because of absenteeism to pursue gambling activity.

7. Necessity for another person to provide money to relieve a desperate financial situation.

C. The gambling is not caused by Antisocial Personality Disorder.

DSM-III-R CRITERIA FOR PATHOLOGICAL GAMBLING

Impulse Control Disorders Not Elsewhere Classified:

Pathological Gambling

The essential features of this disorder are a chronic and progressive failure to resist impulses to gamble, and gambling behavior that compromises, disrupts, or damages personal, family, or vocational pursuits. The gambling preoccupation, urge, and activity increase during times of stress. Problems that arise as a result of the gambling lead to an intensification of the gambling behavior. Characteristic problems include extensive indebtedness and consequent default on debt and other financial responsibilities, disrupted family relationships, inattention to work, and financially motivated illegal activities to pay for gambling.

Associated features. Generally, people with Pathological Gambling have the attitude that money causes and is also the solution to all their problems. As the gambling increases, the person is usually forced to lie in order to obtain money and to continue gambling. There is no serious attempt to budget or save money. When borrowing resources are strained, antisocial behavior in order to obtain money is likely.

People with this disorder are often overconfident, very energetic, easily bored, and "big spenders"; but there are times when they show obvious signs of personal stress, anxiety, and depression.

Age at onset and course. The disorder usually begins in adolescence in males, and later in life in females. It waxes and wanes, but tends to be chronic.

Impairment. The disorder is extremely incapacitating and results in failure to maintain financial solvency or provide basic support for oneself or one's family. The person may become alienated from family and acquaintances.
Complications. Psychoactive Substance Abuse and Dependence, suicide attempts, association with fringe or illegal groups (more common in males), civil actions, and arrest for typically nonviolent crimes involving only property are among the possible complications.

Predisposing factors. Among the predisposing factors are inappropriate parental discipline (absence, inconsistency, or harshness); exposure to gambling activities as an adolescent; and a high family value placed on material and financial symbols and a lack of family emphasis on saving, planning, and budgeting. Females with this disorder are more likely than others to have a husband with Alcohol Dependence or who is absent from the home.

Prevalence. Recent estimates place prevalence at 2%-3% of the adult population.

Sex ratio. The disorder is more common among males than females.

Familial pattern. Pathological Gambling and Alcohol Dependence are more common among the parents of people with Pathological Gambling than in the general population.

Differential diagnosis. In social gambling, gambling is with friends, and acceptable losses are predetermined.

During a manic or hypomanic episode, loss of judgment and excessive gambling may follow the onset of the mood disturbance. When manic-like mood changes occur in Pathological Gambling, they are generally related to winning streaks, and they are usually followed by depressive episodes because of subsequent gambling losses. Periods of depression tend to increase as the disorder progresses.

Problems with gambling are often associated with Antisocial Personality Disorder, and in Pathological Gambling antisocial
behavior is frequent. In cases in which both disorders are present, both should be diagnosed.

Diagnostic Criteria for 312.31 Pathological Gambling

Maladaptive gambling behavior as indicated by at least four of the following:
1. Frequent preoccupation with gambling or with obtaining money to gamble.
2. Frequent gambling of larger amounts of money or over longer period of time than intended.
3. A need to increase the size or frequency of bets to achieve the desired excitement.
4. Restlessness or irritability if unable to gamble.
5. Repeated loss of money by gambling and returning another day to win back losses.
6. Repeated efforts to reduce or stop gambling.
7. Frequent gambling when expected to meet social or occupational obligations.
8. Sacrifice of some important social, occupational, or recreational activity to gamble.
9. Continuation of gambling despite inability to pay mounting debts, or despite other significant social, occupational, or legal problems that the person knows to be exacerbated by gambling.

DSM-IV CRITERIA FOR PATHOLOGICAL GAMBLING

Impulse-Control Disorders Not Elsewhere Classified:

Pathological Gambling

Diagnostic Features

The essential feature of Pathological Gambling is persistent and recurrent maladaptive gambling behavior (Criterion A) that disrupts personal, family, or vocational pursuits. The diagnosis is not made if the gambling behavior is better accounted for by a Manic Episode (Criterion B).

The individual may be preoccupied with gambling (e.g., reliving past gambling experiences, planning the next gambling venture, or thinking of ways to get money with which to gamble) (Criterion A1). Most individuals with Pathological Gambling say that they are seeking "action" (an aroused, euphoric state) even more than money. Increasingly larger bets, or greater risks, may be needed to continue to produce the desired level of excitement (Criterion A2). Individuals with Pathological Gambling often continue to gamble despite repeated efforts to control, cut back, or stop the behavior (Criterion A3). There may be restlessness or irritability when attempting to cut down or stop gambling (Criterion A4). The individual may gamble as a way of escaping from problems or to relieve dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression) (Criterion A5). A pattern of "chasing" one's losses may develop, with an urgent need to keep gambling (often with larger bets or the taking of greater risks) to undo a loss or series of losses. The individual may abandon his or her gambling strategy and try to win back losses all at once. Although all gamblers may chase for short periods, it is the long-term chase that is more characteristic of individuals with Pathological Gambling (Criterion A6). The individual may lie to family members, therapists,
or others to conceal the extent of involvement with gambling (Criterion A7). When the individual's borrowing resources are strained, the person may resort to antisocial behavior (e.g., forgery, fraud, theft, or embezzlement) to obtain money (Criterion A8). The individual may have jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling (Criterion A9). The individual may also engage in "bailout" behavior, turning to family or others for help with a desperate financial situation that was caused by gambling (Criterion A10).

Associated Features and Disorders

Distortions in thinking (e.g., denial, superstitions, overconfidence, or a sense of power and control) may be present in individuals with Pathological Gambling. Many individuals with Pathological Gambling believe that money is both the cause of and solution to all their problems. Individuals with Pathological Gambling are frequently highly competitive, energetic, restless, and easily bored. They may be overly concerned with the approval of others and may be generous to the point of extravagance. When not gambling, they may be workaholics or "binge" workers who wait until they are up against deadlines before really working hard. They may be prone to developing general medical conditions that are associated with stress (e.g., hypertension, peptic ulcer disease, migraine). Increased rates of Mood Disorders, Attention-Deficit/Hyperactivity Disorder, Substance Abuse or Dependence, and Antisocial, Narcissistic, and Borderline Personality Disorders have been reported in individuals with Pathological Gambling. Or individuals in treatment for Pathological Gambling, 20% are reported to have attempted suicide.
Specific Culture and Gender Features

There are cultural variations in the prevalence and type of gambling activities (e.g., pai go, cockfights, horse racing, the stock market). Approximately one-third of individuals with Pathological Gambling are females. Females with the disorder are more apt to be depressed and to gamble as an escape. Females are underrepresented in treatment programs for gambling and represent only 2%-4% of Gamblers Anonymous. This may be a function of the greater stigma attached to female gamblers.

Prevalence

The limited data available suggest that the prevalence of Pathological Gambling may be as high as 1%-3% of the adult population.

Course

Pathological Gambling typically begins in early adolescence in males and later in life in females. Although a few individuals are "hooked" with their very first bet, for most the course is more insidious. There may be years of social gambling followed by an abrupt onset that may be precipitated by greater exposure to gambling or by a stressor. The gambling pattern may be regular or episodic, and the course of the disorder is typically chronic. There is generally a progression in the frequency of gambling, the amount wagered, and the preoccupation with gambling and obtaining money with which to gamble. The urge to gamble and gambling activity generally increase during periods of stress or depression.
Familial Pattern

Pathological Gambling and Alcohol Dependence are both more common among the parents of individuals with Pathological Gambling than among the general population.

Differential Diagnosis

Pathological Gambling must be distinguished from social gambling and professional gambling. Social gambling typically occurs with friends or colleagues and lasts for a limited period of time, with predetermined acceptable losses. In professional gambling, risks are limited and discipline is central. Some individuals can experience problems associated with their gambling (e.g., short-term chasing behavior and loss of control) that do not meet the full criteria for Pathological Gambling.

Loss of judgment and excessive gambling may occur during a Manic Episode. An additional diagnosis of Pathological Gambling should only be given if the gambling behavior is not better accounted for by the Manic Episode (e.g., a history of maladaptive gambling behavior at times other than during a Manic Episode). Alternatively, an individual with pathological Gambling may exhibit behavior during a gambling binge that resembles a Manic Episode. However, once the individual is away from the gambling, these manic-like features dissipate. Problems with gambling may occur in individuals with Antisocial Personality Disorder, if criteria are met for both disorders, both can be diagnosed.

Diagnostic Criteria for 312.31 Pathological Gambling

A. Persistent and recurrent maladaptive gambling behavior as indicated by five (or more) of the following:
(1) is preoccupied with gambling (e.g., preoccupied with reliving past gambling experiences, handicapping or planning the next venture, or thinking of ways to get money with which to gamble)
(2) needs to gamble with increasing amounts of money in order to achieve the desired excitement
(3) has repeated unsuccessful efforts to control, cut back, or stop gambling
(4) is restless or irritable when attempting to cut down or stop gambling
(5) gambles as a way of escaping from problems or of relieving a dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression)
(6) after losing money gambling, often returns another day to get even ("chasing" one's losses)
(7) lies to family members, therapist, or others to conceal the extent of involvement with gambling
(8) has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling
(9) has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling
(10) relies on others to provide money to relieve a desperate financial situation caused by gambling

B. The gambling behavior is not better accounted for by a Manic Episode.

APPENDIX II

OXFORD ENGLISH DICTIONARY DISCUSSION

The analyses presented have often relied upon language as "data." Because of this emphasis, I wish to include a brief discussion on the history of a handful of key terms that were used as "names" for various types of gambling behavior. All of these discussions rely heavily on the word histories given in the Oxford English Dictionary (or OED). Interestingly, to illustrate its definitions, the OED cites usages from rare historic works. Because the works cited in this dissertation are also relatively rare, it is difficult to ascertain whether certain uses outlined in this research actually predate (or even negate) some of the uses cited in the OED. While I make no claims to be a linguist, and these language matters could well merit a dissertation of their own, what follows is a basic summary of certain relevant word histories.

The term "addicted" has often been used to imply that an individual was particularly "given or inclined" or "attached" to something. The sentences cited in the OED include references to individuals "addicted" to things like "evil," "wine or strong drinke (sic)," "Merchandise," "useful reading," and "stealing." Because of this
connotation of "strong devotion," it is easy to see why medical experts began to attach it to substance abuse. Apparently, this word became attached to "drugs" around the beginning of the 20th century. Like many of the terms discussed in this research, it appears that the word has become more medicalized with age.

The term "passion" has long connoted an "overpowering feeling," one "by which the mind is powerfully affected or moved." What is most interesting to me is that many of the historic uses of the term incorporate a sense of powerful pleasure and pain. Because this term has often been used to describe an almost impulsive loss of control over one's pleasures, it is again easy to see why this term was used to describe gambling, as in the "gambling passion." As I have pointed out, we have since medicalized the "loss of control" over gambling behaviors.

Predictably, the term "spirit" has a long and complex history. This entry alone takes up about 25 pages of discussion in the OED. Long associated with interactions between the supernatural and the natural, the gambling "spirit" was perhaps used because gamblers in the natural world appeared to be possessed by something that was at least partially supernatural. Historically, this word was often associated with "terrifying" or "evil" entities. As such, this term probably encapsulates the "demonic possession" approach commonly cited in deviance literature.
probably encapsulates the "demonic possession" approach commonly cited in deviance literature.

The "manias" that are referred to in these works were most likely invoked to describe "mental derangement" or "madness," terms that transformed into the common mental illness phraseology of today. As we have seen, the encroaching medical way of thinking began to invade the rhetoric of moral thinkers during these periods. Similarly, the term "disorder" appears to have enjoyed more general usage in the past, only to be later officially incorporated into medical language. The word has long referenced a "violation of recognized order" or "irregularity." Once more, however, "irregularities" have been medicalized, and those who are deemed "out of order" are interpreted and received as a medical problem.

Finally, the term "gambling" merits some attention here. Many early thinkers actually used the term "gaming" when referencing gambling activity – a strategy now commonly employed by the gaming industry. Virtually all of the references in the OED describe the act of "play(ing) games of chance for money," with one interesting exception. In instances where a "gamester" is referenced, the term incorporates those who attempt to cheat at the games.

It will come of no surprise to readers who have come this far that the OED notes that the word has long been used as a "term of reproach." Those who gamble are no longer regarded with this kind of
moral disdain, but to those who gamble problematically, these historic characterizations are all too familiar.
APPENDIX III

SELECTED IMAGES FROM THE HISTORIC LITERATURE

Because the imagery presented in these historic works is so vivid, I decided to include some actual images from these works. Most of these images are "cover shots," while a few are taken from the texts inside. It is my hope that the following pages convey in their own way the "passions" and "spirits" of the day.

IMAGES:

246: Weems' classic title page, including an illustration of a gambler with problems. The caption of the illustration reads: "Thrice accurs'd CARDS and DICE! You have been my ruin!"
247: Green’s title page, in which he promises to outline the “arts and miseries of gambling”
248: One of Talmage’s covers, promising to describe the combustible nature of gambling, among other social ills
249: Carter’s cover, describing why he is “against strong drink and gambling”
250: Spriggs-Smith’s cover, informing readers that gambling is “an enemy of our youth”
251: A sample page from Posnett’s work. The illustration shows the family of a gambler with problems. The caption reads: “We are fair hungered to death!”
252: Posnett’s memorable cover
253: Hogge’s cover; note that the price is “one penny”
254: Hopkins’ title page, promising to tell us about the “evils of gambling”
255: Title page of the piece on Williams, a “reformed drunkard and gambler”
256: Savidge’s appropriately-titled cover
"The Lord is a God of knowledge, and by His actions are weighed."—1 Sam. ii. 3.

GAMBLING:
AN ENEMY OF OUR YOUTH.

BY THE
REV. W. J. SPRIGGS-SMITH,
浙江省 A. L. 736, 赤信士會

PRICE, ONE SHILLING.
spell-bound victims, leading them onward under its terrible bewitchment, from which escape is almost impossible, to certain and hopeless perdition. The heart of the gambler all the world over, gets hardened into adamant, and before he is aware of it becomes possessed, not only with seven, but seventy times seven, devils. "The turf," says the *Pall Mall Gazette*, "has degenerated into a dishonest gambling hell." The late Lord Beaconsfield described it as "a vast engine of national demoralization." A fair and beautiful young mother, with two or three little children clinging to her apron, but on whose faces gaunt famine was writing its sad lines, said in my hearing, for she was the wife of a gambler, "We're fair hungered to death with it."

Now, if what I have said be true, and if,
Thrilling Experience
OF THE
WELSH EVANGELIST
R. G. WILLIAMS,
REFORMED
DRUNKARD
AND
GAMBLER
OR
FORTY-EIGHT YEARS IN DARKNESS AND SIN
AND
ELEVEN YEARS IN THE LIGHT
AND LOVE OF CHRIST JESUS.
BIBLIOGRAPHY


Carter, Henry. 1908. Against Strong Drink and Gambling. Bristol: Rose and Harris.


Haines, Thomas Lewis and L.W. Yaggy. 1878. The Royal Path of Life, or "Aims and Aids to Success and Happiness. Chicago: Western Publishing House.


VITA

Graduate College
University of Nevada, Las Vegas

Bo Jason Bernhard

Local Address:
5355 S. Rainbow Blvd. #264
Las Vegas, NV 89118

Degrees:

Bachelor of Arts, Sociology, 1995
Harvard University, Cambridge, MA

Bachelor of Arts, Psychology 1995
Harvard University, Cambridge, MA

Master of Arts, Sociology 1999
University of Nevada, Las Vegas

Special Honors and Awards:

Outstanding Graduate Student Award, Department of Sociology, 1999
GREVA Assistantship, 1999
Phi Kappa Phi Honor Society, 1999
Presidential Award, University of Nevada, Las Vegas, 2001-2002
National Council on Problem Gambling, Journal Member, 2002
Shannon Bybee Award, Nevada Council on Problem Gambling, 2002

Dissertation Title: From Sin to Sickness: A Sociological History of the Problem Gambler

Dissertation Examination Committee:
Chairperson, Dr. Fred Preston
Committee Member, Dr. Jim Frey
Committee Member, Dr. Ron Smith
Graduate Faculty Representative, Dr. Daniel Allen

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.