GENDER DIFFERENCES IN GAMBLERS ANONYMOUS*

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ABSTRACT

Gamblers Anonymous (GA) has earned a reputation in the literature as a fellowship with very few women and as host to a recovery culture that marginalizes women's needs and concerns. A notable example would be the preponderance of "war stories"—recovery jargon for graphic and often disturbing accounts of one's life in active addiction—said to alienate many women. However, a 16-month study of GA in the Toronto area has found that this mutual aid organization has changed significantly over the last 10 to 15 years. The number of women in the Toronto area now stands at possibly 20% and rising, war stories no longer predominate, and other changes amenable to women have also taken place. There is good reason to believe that these shifts in GA's recovery culture have not been limited to Toronto. Still, this was a preliminary study, and these findings call for detailed quantitative verification.

*While this article has not been submitted elsewhere, sections from it were based on our final report: Ferentzy, P., Skinner, W., Antze, P. (2004) "Exploring Mutual Aid Pathways to Gambling Problems," Final Report submitted to the Ontario Problem Gambling Research Centre after a 16-month study of Gamblers Anonymous and Narcotics Anonymous. Funding this study was provided by the Ontario Gambling Research Centre.

INTRODUCTION

The increasing number of women with gambling problems, due at least in part to the proliferation of legalized gambling venues, invokes the questions pertaining to what steps, if any, Gamblers Anonymous (GA) has made to meet this challenge. This article provides a preliminary answer to that query. GA has been identified as having few women in its membership, as well as host to a recovery culture that is insensitive to women's needs (Mark & Lesieur, 1992). As well, female GA members have received little attention from the research community (Ferentzy & Skinner, 2003). Given the importance of Twelve Step fellowships to addiction recovery in North America, GA's under-representation of women has been identified as doubly important: as client referral for formal treatment often goes through GA, the lack of women in GA may affect the lower percentages of women making use of professional treatment as well (Spunt, Dupont, Lesieur, Liberty, & Hunt, 1998; Volberg; 1994; Volberg & Steadman 1989). Just over 20 years ago, Custer (1982) claimed that about 4% of GA members were women. Strachan and Custer (1993), however, noted more recently that at least in Las Vegas over half of GA members were women. Largely because of the recent proliferation of legal gambling venues, the number of women with gambling problems has been increasing (McAleavy, 1995; Spunt et al., 1998; Volberg, 1994). While GA still has fewer women proportionally than many other Twelve Step fellowships such as Alcoholics Anonymous (AA), this study indicates that its female membership is certainly rising. We have also noted a growing sensitivity to women's needs, and are not the first to have done so (Murray, 2001). Communications with GA members elsewhere in Canada and the United States suggest that the changes noted in this study have been taking place all over the continent. Perhaps the most striking observation pertaining to gender involves the differences in perception: while men and women in GA seem to get along very well, their respective views on many questions were found to differ remarkably.

Both Browne (1991, 1994) and Lesieur (1990) have discussed the way GA has been less focused on the Twelve Steps and psycho-emotional issues in general than AA, focusing more directly on abstinence and practical matters such as debts. While our study has found that this has been changing as well, GA remains ardently secular in orientation (though respectful of different religious beliefs and conceptions of "Higher Power"). Browne (1991, 1994) has argued that the absence of spiritual and psycho-emotional focus can alienate many women. Our findings give confirmation to this observation, which seems to have some support in literature (Crisp et al., 2000).

Mark and Lesieur (1992) have identified GA's "men's club atmosphere" as a deterrent to women's participation, and use the predominance of "war stories" (graphic and often disturbing accounts of one's addictive career) as a key example. Our findings confirm that women are less likely to appreciate war stories than men. Yet we have found that such stories are not nearly as dominant as they were

10 years ago, reflecting an overall change in GA's approach to recovery that has likely rendered this mutual aid organization better suited than it once may have been to women with gambling problems.

Yet this was a qualitative study, designed to generate hypotheses and preliminary observations. Given the importance of GA in recovery from gambling problems throughout North America, our findings call for detailed quantitative studies of GA's role in women's recovery.

METHODOLOGY

This qualitative, ethnographic study was preceded by the compilation of an annotated bibliography of Gamblers Anonymous and mutual aid as it pertains to gambling problems. The study took 16 months to complete, and involved two main components: participant observation and individual interviews.

Participant Observation

The principal investigator was present at 42 GA meetings, observing interaction and discourse before, during, and after meetings, and participating in activities such as the celebrations of one or more years of abstinence. Groups involved consented to his presence and there was never any deception regarding his reasons for attending. In order to eliminate research bias, observational strategies were revised in response to data collected. Decisions pertaining to what may or may not be relevant were mainly determined empirically. The objective was to study GA narratives from the viewpoint of members themselves, and to learn about the social field, GA's social organization. Our "grounded theory" approach (Glaser, 1978) allowed for a direct recursive link between theory and practice: data collected was analyzed and immediately used to develop better informed strategies for data collection and ongoing analysis. Our approach to interview protocol development was guided by similar considerations.

Individual Interviews

Twenty-three GA members were interviewed, four of whom were interviewed twice. All but two interviewees completed the South Oaks Gambling Screen to ensure that they qualified as pathological gamblers. With written consent from the participants, interviews were audio-taped. Interviewees were remunerated. Efforts were made to ensure that the sample reflected group composition with respect to gender, race, and social class. Theoretical sampling guidelines (Glaser, 1978) were also employed. The latter involved beginning with experienced members who were more knowledgeable about GA's main ideas. Later, participants were chosen insofar as they seemed to reflect significant facets of GA culture and ideology. The final six interviews were again conducted with "old-timers" because these interviews involved questions that were more

focused on perceived problems within GA and required a longer history of involvement and subjective knowledge of GA. The interview format was semi-structured, and both the protocol and interview style were designed to enable subject's stories to surface without prodding. Our approach involved rarely claiming knowledge of which issues (and hence questions) are most pertinent, so the interview process was shaped, within broad confines, by the stories each interview participant wanted to tell using the participant's own words. This allowed us to revise our protocol throughout the tenure of the study in response to what had been learned.

The research proposal *Ethics Review* was submitted to the Ethics Committee of CAMH (Centre for Addiction and Mental Health) and the University of Toronto. One key issue addressed was the consent of mutual aid groups for an investigator to be present. Because of the principle of anonymity, written consent was not feasible for group observation and permission was explicitly sought. For individual interviews, written consent was required, both for the interview itself and for audio-taping. For both group and individual documentation, no identifying information was reported and all information was subject to the Centre's guidelines for confidentiality.

DISCUSSION

Described by the research community as an almost exclusively male domain, GA's female membership in the Toronto area now stands at perhaps 20% and rising. This estimate is based upon meeting observations and upon information gathered from interviews with members (answers ranged from 10 to 30%). As mentioned, these preliminary findings suggest a need for more substantive verification. GA seems to have taken measures to better accommodate women, and relations between the genders seem very amicable. Still, some women complained about the preponderance of a "boys club" atmosphere and, overall, men and women tend to perceive gender issues quite differently. Despite recent changes, both men and women interviewed stated that female newcomers were less likely than males to remain in GA.

The emphasis on "war stories" is exemplary of what may be called an ardently masculine recovery culture. The retelling of one's life as a compulsive gambler, normally with an emphasis on the horror and degradation, is undoubtedly a good way to impress upon others the importance of abstinence. It may be cathartic for the speaker. Yet there is clearly a tough-love dimension to it: members, especially new members, are kept in line through fear—negative reminders of what needs to be avoided and overcome if they are to make their lives more manageable. Though such stories have a place in Twelve Step recovery, many of our participants felt they should not be given a prominent place in GA meetings. An emphasis on past horrors can detract attention from the positive aspects of recovery: emotional, spiritual, and situational.

GA members have informed us that over 10 years ago "war stories" dominated discourse at GA meetings. As mentioned, researchers have claimed that this alienates many women (Mark & Lesieur, 1992), and our study has found this to be accurate. Our women participants in particular reported they were put off by repetitions of the same stories, and many consider the preoccupation with such tales as a means of staying in the past, avoiding the present, and thereby circumventing emotional and spiritual growth. As one woman put it:

And, you know, if you stay stuck there you're not gonna make it to the other side. So a lot of times I've gone to meetings, Peter, and the same people come in and say the same thing. It's like: I could put one of those, you know the recorders, on the chair, and just push it. Because that's exactly what they say. So they've come in and, as much as this has kept them where they need to be kept, they haven't moved-other than it's another week without gambling. It's like: what has changed? You know? (#4, female GA member)

Responses to the question, "How do you feel about war stories?," were divided into four categories: 1) positive, 2) positive with qualification, 3) negative with qualification, 4) negative. Of the 12 men asked this question, nine fell into the first category, three into the second, and none into the third and fourth. Of the seven women asked this question, only one fell into the first category, three into the second, one into the third, and two into the fourth. Clearly, female GA members tend to relate to their past addictive episodes, and those of others, differently than the men. Overall, the trend in GA seems to be accommodating the women's perspective on this question, as all longstanding members we asked agreed that war stories are far less frequent now than they had been 10 or 15 years ago.

Some meetings explicitly discourage war stories, not so much because they should have no place but because they are now perceived as the type of monologue that should occur only once in a while. So even the "positive" endorsement given by many male members has to be taken in the current context: these stories are appreciated today as a sub-theme in GA discourse and not, as before, the mainstay.

War stories have other effects. Graphic tales often cause some members to think that, since their misfortunes were not so extreme, maybe they do not need help or are not true compulsive gamblers. Money can be an issue, especially for women. Members reported that, on average, male GA members bet larger amounts, and we have also been told that some men undermine the seriousness of smaller bets (even in cases where these bets were made by someone with less money at their disposal). For this reason, there is a strong counter-tendency in GA to emphasize that the amount of money gambled is relative and not an absolute indicator of the seriousness of someone's gambling problem. Bingo, for example, often involving relatively small wagers and played mainly by women, is perceived as not serious by some of the (mostly male) card players or horse bettors. Due to constant reinforcement of official GA principles (Gamblers Anonymous International Service Office (GAISO), 1999), this attitude is changing. But old habits die hard, as one woman explains.

Even though I am a woman, I'm sort of more accepted by the men in the room because the gambling that I did was more of what used to be termed the "male" gambling. I played craps and card games and that. It wasn't, you know, what they refer to as women's games. (#19, female GA member)

Clearly, the implication of the amount one bets is relative to how much one can afford. Yet this is emphasized constantly at meetings, suggesting a lack of awareness among some members. While the latter message is often directed at newcomers, that does not explain everything. Interviews have confirmed that "war stories" are sometimes delivered in a competitive fashion, not only in terms of tragedy but also in dollar figures. As women in GA are apparently far less likely to have been high stake gamblers, they are often made to feel less significant or deserving of being at GA. Usually this happens without intent, but not always. Hence many GA members, male and female, emphasize that the amount bet is not, on its own, an indicator of compulsion as amounts must be measured against a gambler's situation (what they can afford). The presence of women has probably had an important effect this way: there seems now to be more general awareness of this aspect of problem gambling.

The decline of war stories represents a larger change in GA: more emphasis on the emotional and spiritual side of recovery, exemplified by how more and more GA members are taking the Twelve Steps seriously. Women interviewed tend to believe that their influence has been partly responsible for these changes. According to one of the few women in the Toronto area with over 10 years experience in GA:

As the women came in and they brought a sense of sensitivity to the rooms—there's some guys that were sensitive, and this allowed them to come out a little bit more, you know? (#4, female GA member)

According to another female member (with just over five years in GA):

In the conferences and things like that I find more women taking leadership role, in running events. And nurturing events—always making sure there's food there and things like that. So I think it has added a bit of a feminine touch. I think sometimes things are a little more emotional in the meetings, which is also very good. (#17, female GA member)

Women with whom we communicated have claimed that their presence has led to more sensitivity, emphasis on emotions, and a broader conception of the meaning of recovery. Interestingly, one woman said that the section called "How was your week?" wherein members are asked at the start of a meeting to discuss life issues, recent events, and their overall mood—was first introduced

by women. Another woman, more experienced and far more knowledgeable about GA, said that this is untrue. So it could be that women sometimes exaggerate the impact they have had.

Women interviewed said that the overall culture of recovery—acceptance of women, the range of topics discussed—has changed in ways that are better suited to women. Still, the preponderance of a "boys club" is mentioned—by the women, not by the men. The difference in perception is notable. As mentioned, women interviewed have stated that the increased participation of women has brought more awareness of feelings into the rooms of recovery, and that issues beyond gambling are now more commonly discussed by men as well as women due to greater female influence. Conversely, with one exception, male members interviewed were unable to identify any serious effect that the increased number of women has had on GA's culture of recovery. This applies to open questions about the influence of women. When asked directly about whether women have helped to bring more talk of feelings and life issues into the rooms, male members were inclined to grant that this is possible or even likely. Without prodding, however, only one male member said so. The men may mention that men are more inclined to watch their language, or at least to apologize after using a profanity. They may even be sensitive to the fact that many women may not wish to discuss some things in front of men, for example having engaged in prostitution to support their gambling. For this reason, some men suggested that meetings for women only should be formed. (In fact, at least one women's meeting has been formed in the Toronto area, but it was poorly attended and eventually closed down.) But beyond such observations, men had little to offer about the influence women have had on GA's recovery culture.

So while the relations between the sexes tend to be amicable, there seem to be some differences in how these relations are perceived. The men we have interviewed talked about the women as kindred spirits—fellow problem gamblers who in this respect are no different—while the women were likely to qualify this association with issues they considered specific to gender. The men at times took a defensive posture when responding to questions pertaining to the influence of women: the idea they often convey is that there is nothing wrong with having women in GA. So some men still seem to think that the presence of women requires justification, which in turn suggests that some, maybe more than a few, men are uncomfortable with women being at the meetings. According to one male member.

And when the women came in, they made the room a very comfortable place to share and talk about gambling issues. I don't think they lessen the group at all. And I think that the group is doing well. (#6, male GA member)

Further, issues pertaining to gender matter more to the women than to the men. One interview with a male member, very active in every aspect of the program and among the most knowledgeable in the Toronto area, produced this insight:

Interviewer: Are issues related to gender often discussed?

Respondent: Only by a female.

Interviewer: I see.

Respondent: I mean that I recall. (#16, male GA member)

There is good reason to believe that women have had an influence along the lines they claim, even if some may exaggerate the extent. First, when asked directly, even the men were inclined to agree. Also, changes to GA's recovery culture seem to have taken place at about the same time that more women began to attend. Lastly, there is the simple fact that many of the changes are consistent with the needs of women gamblers, at least as far as can be ascertained through the available literature. Browne (1991, 1994) suggested that the involvement of women in GA was hampered by its neglect of spirituality and interpersonal and psycho-emotional issues. Lesieur (1988) has identified the need to discuss a range of compulsions and issues (rather than merely the targeted addictive behavior) as important to women. Crisp et al. (2000) found that male gamblers tended to identify "external concerns" (for example, legal matters or those related to employment) as important, while women were more concerned with interpersonal issues. Crisp et al. (2000) suggest that male gamblers prefer informationsharing and cognitive restructuring, whereas women are more likely to respond well to psychotherapy or other forms of supportive counseling.

Our own interviews with women in GA, along with many informal discussions before and after GA meetings, have given some confirmation to these generalizations about gender. So the many recent changes in GA's recovery culture could have been tailor-made for the accommodation of women. This is not to suggest that these changes are due solely to the influence of women. The Twelve Steps, for example, on their own entail a broader conception of recovery—and we have found no evidence to suggest that men have been any less active than women in bringing Twelve Step awareness to GA. Further, some of the changes are consistent with cultural trends throughout North America. Greater awareness of the Twelve Steps along with the emerging culture of male sensitivity have surely played a role in GA's recent transformation. Yet given that these changes are consistent with the sensibilities of many women in GA and that, as mentioned, the timing of the changes seems to have coincided with the increase in female participation, it is safe to assume that women must have had some influence.

CONCLUSION

Gamblers Anonymous is growing and maturing, one result of which seems to be an atmosphere far more amenable to women's participation than some of the (now dated) literature would suggest. To whatever extent GA has earned a reputation as a men's club, among those responsible for treatment and referral and perhaps among members of the public as well, many women with gambling

problems may needlessly be steered away from determining for themselves whether or not this mutual aid organization is appropriate for them. The preliminary findings in this study suggest that GA is fast becoming a much better place for women than it once may have been. Large scale, quantitative analysis would be required to verify these observations. This presents itself as a research priority: given the importance of Twelve Step approaches to recovery from addictions in North America, GA's role in the recovery efforts of women with gambling problems is likely to grow in the coming years.

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