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## You bet they're having fun! Older Americans and casino gambling

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### Abstract

This exploratory two-stage study of a small sample of older Minnesotans finds no evidence that casino gambling activities threaten their well-being. For most respondents, the social benefits were the most salient parts of this activity and they were well aware of the danger signs of problem behaviors. Social exchange theory explains why they visit casinos and how much they spend. The life course perspective explains their decisions based on past behaviors and is consistent with how they have lived their lives. We suggest that age norms determine the public's perceptions that casino gambling is problematic for older people. Results are consistent with cross-sectional surveys that find no evidence that older adults participate more often in or have greater problems with gambling than any other age group. Public concerns and media images may be based on socially constructed assumptions and fears. © 2002 Elsevier Science Inc. All rights reserved.

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### 1. Introduction

Popular opinion, fueled by the press and electronic media, suggests that gambling among older Americans, especially casino gambling, has reached epidemic proportions. It is commonly concluded that older people who frequent casinos are unable to gamble prudently and in consequence endanger their well-being by squandering their assets. Is this an accurate picture? We found that there is little empirical research or data to support the idea that casino gambling is particularly harmful to older adults.

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This study explored and described the gambling behavior of a convenience sample of Minnesotans. Respondents were asked why they went to casinos, what they did there, and how much money they spent. The questions were designed to determine if any of them exhibited signs of gambling problems and whether they knew of anyone they believed to have a gambling problem. The respondents talked about their attitudes toward gambling in general and about their gambling experiences over their lifetimes. This research was conducted in two phases: a mail survey and in-depth interviews. The study's purpose was to explore and describe the meaning of casino gambling for older people rather than its prevalence, which has been the focus of cross-sectional surveys. Although the sample was neither large nor random, the study is valuable in that we directly asked older people themselves about their gambling behaviors and motivation. The results of this preliminary study indicated that qualitative and ethnographic studies would be valuable in assessing the meaning of gaming activities and at what point gaming activities become risky behaviors. In addition, further research that documents lifetime patterns and compares age groups, especially older adults with baby boomers and young adults, will also be important for assessing the impact of changing attitudes and behaviors. Given the increase in gaming opportunities in recent years and the extensive participation of citizens of all ages, it is timely to examine this topic with a range of methods and in more depth.

In this article, we used three sociological perspectives to explain the casino gambling behavior of these older people. First, we used social exchange theory (Emerson, 1962, 1972) to explain decisions to visit casinos, how much money to spend, how long to stay, and how frequently to go. Second, we used elements of the life course perspective (Elder, 1974; George, 1993; Shanahan, Elder, & Meick, 1997) to support the position that seniors make their gambling decisions thoughtfully, based on past experiences and in accordance with the ways in which they have lived their lives. Third, we borrowed again from the life course perspective to suggest that age norms continue to determine for many people and especially for older people what behaviors are acceptable and what are not (Hazan, 1994; Neugarten, Moore, & Lowe, 1965).

### *1.1. Surveys on age and gambling*

The relationship between age and gambling has received relatively little attention from social science researchers. The few major studies that have examined gambling across age categories have found chronological age to be negatively related to gambling activities (Kallick, Suites, Dielman, & Hybels, 1979; Li & Smith, 1976; National Gambling Impact Study Commission, 1999). In a random sample of adults in Iowa, Mok and Hraba (1991) found this same negative correlation and also that people of different ages participated in different types of gambling. They found that with increasing chronological age in the 25–64 age group, came a shift from sports, home games, and bingo to casino games, investment speculation, and horse racing. Those 65 and older participated the least of all age groups in all types of gambling, except for bingo (Mok & Hraba, 1991; National Opinion Research Center (NORC) 1999). A recent study shows that although older adults have increased their

participation especially during the last decade in lottery and casino gaming, their participation rates continue to be lower than other age groups (NORC, 1999).

Feeney and Maki (1997) reported on intergenerational differences in annual random samples of Minnesota adults taken from 1993 to 1997. They found that age emerged as the most important demographic determinant of gambling behavior. Those over 70 years of age were almost three times as likely to be nongamblers compared to people between the ages of 18 and 34. Older Minnesotans also wagered on fewer activities. For all age groups the state lottery is the game most likely to be participated in followed by visits to tribal casinos and pulltabs. In 7 out of 10 games, the pattern of participation remained the same with the youngest adults participating the most and those over 70 the least. Minnesota Lottery surveys indicate that few older people visited casinos excessively. For example in a 1994 survey, about one-half of those visiting in the last 2 months visited just once, while another 36% made two or three visits. Only 4% reported going more than 10 times in the previous 2 months (Minnesota State Lottery, 1994).

Not only were there differences in gambling behaviors among Minnesotans but there were also striking differences in attitudes. Older Minnesotans were more likely than other groups to think that gambling should be made illegal, think that there was too much gambling, not support expanding gambling opportunities, and be less likely to perceive benefits from gambling. Those over 70 were three times as likely to say they were opposed to gambling for moral or religious reasons. On the other hand, Feeney and Maki (1997) reported that significant numbers of those morally opposed also reported gambling within the last year. However, they point out that older adults exhibit the greatest consistency between their beliefs and reported behavior. Feeney and Maki reported that they were impressed with the consistency and magnitude of the age differences they found, particularly on attitudinal factors. Laundergan and McTavish (1997) reported on the relationship between age and income for the Minneapolis–St Paul metropolitan area. They found that citizens with fixed incomes were less likely to gamble or have problems with gambling than were wage earners. They also found that persons over 65 were less likely to engage in gambling activities and that persons aged 75 and over even less likely than those between 65 and 74.

### *1.2. Are older gamblers at risk?*

Today, there are extensive gambling opportunities in Minnesota. There are 17 tribal casinos where an estimated US\$2.5 billion is wagered each year (State of Minnesota Advisory Council on Gambling, 1996). Another US\$1.5 billion is wagered each year on charity games, mostly pulltabs, and over US\$370 million is spent on state lottery tickets. Surveys by the Minnesota State Lottery show that two-thirds of the state's adults bet in 1997. Gambling rates in Minnesota are very similar to those found in studies throughout North America (Feeney & Maki, 1997). Minnesota has experienced a growth of tribal casinos, lotteries, and other gaming opportunities similar to that of the country as a whole (Mason, 2000). Minnesotans are not unique in embracing gaming as an increasingly acceptable leisure pursuit (Hannigan, 1998; McMillen, 1996). Current gaming opportunities are consistent with the history of games of chance in Minnesota.

It is not surprising that older people in Minnesota enjoy going to casinos and participating in other types of gambling. They have grown up with a full range of legal and illegal forms of gambling. For many years, Minnesotans gambled illegally. There were nearly 9000 illegal slot machines in the state in 1947 when Governor Luther Youngdahl declared war on the “one-armed bandits.” Ultimately, the legislature recognized and legalized gaming ventures (Dawson, 1994). More recently, The Indian Gaming Regulatory Act was passed in 1987, followed by the Federal Indian Gaming Act of 1988. As a consequence of this assertion of Indian sovereignty, casinos in the United States, including Minnesota reservations, proliferated at a rapid pace during the late 1980s and throughout the 1990s (Mason, 2000). Currently, there is easy access to full-scale casino gambling for almost anyone wishing to participate (Abt, 1996; Eadington, 1996).

With greater access to casinos there has been an increase in gambling activity in all age groups. However, older people are underrepresented in studies documenting gambling participation (Feeney & Maki, 1997; NORC, 1999). There are indications that with increased access to games of chance, there is an increase in problem behaviors (Lester, 1994; Shaffer, Hall, & Vander Bilt, 1997). It is estimated that approximately 1–2% of adults in the general population have problems (past year) with compulsive gambling while another 2–4% have some or potential problems (Shaffer et al., 1997). Researchers do not agree on the extensiveness of the problem. They suggest that the range of findings and estimates may be a function of how the behaviors are defined, the methods of gathering information, the length of time a particular area has had gaming, and how many different kinds of ventures are available (National Gambling Impact Study Commission, 1999). Has there been a corresponding increase in gambling addictions among older people? Most prevalence studies on pathological gambling yield samples of problem gamblers too small to provide reliable demographic breakdowns. Existing data suggest that older adults are underrepresented (National Gambling Impact Study Commission, 1999) while baby boomers are overrepresented in treatment populations (Feeney & Maki, 1997).

In contrast to what these surveys indicate, however, media stories and professional (for example, see Glazer, 1998; Stegbauer, 1998) and family concerns suggest that gambling is very problematic for older people. Media images often portray older people as extraordinarily vulnerable and at risk. Stories about people with gambling problems are frequently stories about older people (Drazenovich, 1995; Gold, 1998; Kennedy, 1999; Levi, 1997; Pulley, 1999; Richmond, 1997; Vigue, 1998). Abt and McDowell (1987) show how newspapers shape public perceptions of gambling and conclude that coverage was inconsistent, incomplete, misleading, and had superficial focal points.

The scarcity of studies and lack of accurate knowledge about older gamblers are reflected in the recommendations of several writers who have assessed the status of research into gambling behaviors. “The elderly” are often identified as a subgroup to be studied more or are identified as a group at high risk that should be targeted for more research (Korn & Shaffer, 1999; National Gambling Impact Study Commission, 1999; Shaffer et al., 1997). Surprisingly, a recently published book on American gaming behavior omits any discussion of older gamblers (Pavalko, 1999).

### *1.3. New research perspectives*

Some researchers have suggested that approaches other than cross-sectional surveys might be more productive when looking at older adults and gaming. Research using qualitative methods to study gaming (see, for example, Kuhlmann, 1998) could help in explaining the relationship between age and gaming. Dickerson (1987) suggested the need to study the cultural, social, and legal context of all those who gamble and not just isolated clinical populations. In a similar theme, Lesieur (1987) has argued that more inductive strategies and ethnographic research will be productive in our process of discovery. Aasved and Schaefer (1995, p. 311) have pointed out that “social scientists have failed to regard gambling as a normative, recreational behavior worthy of empirical study.” They posit that although sociological and ethnographic studies of face-to-face interaction, communication, and life styles have been scarce, they would be valuable. More recently, Korn and Shaffer (1999) have suggested that older people may be a population segment that receives considerable health benefits from gaming activities. Researchers have also pointed out the need to examine the effect of gambling on depression, physical mobility, and quality of life (Korn & Shaffer, 1999; McNeilly & Burke, 2000).

At this point, there are no systematic data demonstrating that older people gamble at a higher rate or are more vulnerable to gambling addictions than other age groups. Apart from the scarcity of research, one of the reasons we know relatively little about older gamblers might be that gambling is a stronger moral issue for them than for younger groups. This moral stance, along with their greater emphasis on independence, may inhibit identification of problems and willingness to seek help if they need it. In addition, older people often have more money and live more isolated lives, which means it might take longer for problems to surface or be recognized (Feeney & Maki, 1997).

It has been suggested that age differences in gambling behaviors might be attributed to aging and cohort effects (McPherson, 1983; Mok & Hraba, 1991). An aging effect, for example, might be demonstrated in the decline in experimentation with gambling for purposes of self-identity and self-presentation. Increasing age may also produce less motivation to take risks for financial reasons. Drawing from Erikson’s theory of developmental stages it has been suggested that there are age-related needs connected to different types of gambling. Young people are attracted to experimentation, while middle-aged players want to increase their financial rewards and are willing to take the risks of investment speculation and casino games. Older people are less competitive and are motivated more to maintaining social relationships and not for the experience or money (McPherson, 1983). A cohort effect is reflected in the historical increase in the social acceptance of gambling especially among younger age groups and thus greater participation. In a similar discussion regarding age differences, Russell (1993) has reported generational differences related to the shift from an agricultural to an industrial and then to a personalized economy. She argues that the core value for baby boomers and younger Americans is self-interest, which means they are most concerned about issues that threaten them personally. On the other hand, older generations are more likely to view issues in terms of their perceived effects on the community. Therefore, while they may enjoy gaming activities they are willing to eliminate them for the common good.

Rather than continue to speculate about the behavior and motivations of older people, we asked older people themselves why they went to casinos and what they did there. We wanted to hear older adults describe their own behaviors. We wanted to know if they thought they might be developing problems and about their attitudes toward gambling in general.

## 2. Method

### 2.1. Data collection

Phase I of this study involved a mail survey. In February of 1998, every other older person on the mailing list of the Whitney Senior Center in St. Cloud, MN, was sent a questionnaire as an insert to the monthly newsletter, *The Whistler*. St. Cloud is situated on the banks of the Mississippi River in the heart of Central Minnesota. It is a growing regional business and service center with a population of 59,202 in 1997 according to the Minnesota State Demographic Center. St. Cloud is 65 miles northwest of Minneapolis–St. Paul. A total of 1000 questionnaires was mailed and 143 were returned. A few copies were made available at the front desk of the center for those who had not received the mailing but wanted to participate. Three responses were received from this source giving a total of 146. We are aware that the response rate (14.6%) is low but we knew from previous work with this population and with this method (no stamped return envelopes were included with the survey) that in order to obtain enough responses to produce meaningful results we would have to oversample. In addition, since we were looking for particular information, using secondary data that would have given us large numbers would have also failed to give us the information we sought.

The questionnaire contained several question types and also allowed the respondents to write comments. In addition, respondents were asked to indicate if they would be willing to do an in-depth follow-up interview. Thirty-four provided their names and phone numbers. One year after the survey, we were able to interview 22 of these respondents. The interviews took place in February and early March of 1999. We used structured interviews that covered six areas: current casino gambling behavior, other gambling behavior, problem gambling behavior, other addictive behavior, gambling history, and demographic information.

### 2.2. The sample

Table 1 presents the characteristics of all respondents. In both phases more women than men participated, the majority of the respondents were between 65 and 74 years old and the respondents were mostly married or widowed. The respondents in Phase II were more affluent than were those in Phase I.

The following demographic details were not requested in Phase I and apply only to the Phase II respondents. A total of 54.5% of the respondents were Catholic and 22.7% Lutheran. The remaining 22.8% were Methodist, Unitarian, or Presbyterian. This reflects the religious breakdown of the area in general. Only 1 of the 19 respondents for whom we have educational information had less than a high school diploma, and 59.2% had a bachelor's

Table 1  
Characteristics of respondents

	Phase I (n = 146)	Phase II (n = 22)
<i>Sex (%)</i>		
Male	28.1	40.9
Female	67.8	59.1
Missing	4.1	–
<i>Age (%)</i>		
60–64	13.0	4.5
65–69	25.3	36.4
70–74	32.2	31.8
75–79	18.5	4.6
80–84	8.2	13.6
85+	2.1	4.5
Missing	0.7	4.5
<i>Marital status (%)</i>		
Single	6.8	4.5
Widowed	24.0	31.8
Divorced	10.3	9.1
Married <sup>a</sup>	37.0	54.5
Missing <sup>a</sup>	21.9	–
<i>Income (%)</i>		
< US\$10,000	6.2	18.2
US\$10,000–20,000	23.3	4.3
US\$20,001–30,000	17.8	13.6
US\$30,001–40,000	17.1	18.2
US\$40,001–50,000	11.0	13.6
> US\$50,000	12.3	27.3
Missing	11.6	4.3
<i>Education (%)</i>		
Less than high school	–	4.5
High school	–	18.2
Technical school	–	4.5
Bachelor of Arts	–	27.3
Master's degree	–	22.7
PhD	–	9.1
Missing	–	13.6
<i>Religious affiliation (%)</i>		
Catholic	–	54.5
Lutheran	–	22.7
Other Protestant	–	22.8

(continued on next page)

Table 1 (continued)

	Phase I (n = 146)	Phase II (n = 22)
<i>Residence during early years (%)</i>		
Rural Minnesota		54.5
Minneapolis–St. Paul		18.2
Rural area, not Minnesota		13.6
Nonrural area, not Minnesota		13.6

<sup>a</sup> In Phase I, the high percentage of missing in the “marital status” category is accounted for by the omission of “married” from the questionnaire, although 37% of the respondents wrote it in.

degree or better. The educational level of these respondents is considerably higher than that of the older population of St. Cloud in general, as well as that in other research. Before they retired, 36.4% of the sample were engaged in the field of education at all levels from elementary school teacher to college professor. The other respondents were involved in a variety of occupations, and included homemakers, nurses, public utilities workers, sales persons, hospital workers, civil servants, and social workers. Only a little over 13% grew up outside the state of Minnesota. Almost 70% were raised in rural areas.

### 3. Results

#### 3.1. Phase I gambling behaviors: survey

Table 2 contains percentages for the number of casino visits in the preceding 12-month period by age, gender, and income for those who had visited casinos. Those who visited most frequently were predominantly male, while considerably more women than men were among the least frequent visitors.

Table 3 gives percentages for reasons for visiting casinos by age, gender, and income. Four major reasons for visiting casinos emerged: 34.8% of the respondents said they went for fun and the opportunity to socialize with friends. Food was also a great attraction for many (24.4%) as was “something to do/curiosity” (24.3%). Also mentioned were the shows (10.4%). All of these reasons fell into the category of nonproblematic behaviors as discussed by Laudergeran, Schaefer, Eckhoff, and Pirie (1990) in their description of types of gamblers. Only 6.2% of the sample responded that they went to win or because they liked to gamble, which would place them in one of the categories used for identifying problem gamblers. Women were more likely to go for fun than were men and men tended to go to win or gamble or because they were curious or wanted something to do. The younger members of the sample went out of curiosity, for entertainment, and for the food. Those in their seventies went primarily for fun and those over 80 for entertainment, out of curiosity, and for something to do. When analyzing by income, we note that fun and the social aspects were most important to people with incomes between US\$10,001 and US\$30,000. For those in the US\$30,001–40,000 category, food was the main attraction, while those with incomes between US\$40,001 and US\$50,000 went for enjoyment, for something to do, and out of curiosity.

Table 2  
Frequency of casino visits in preceding year, Phase I<sup>a</sup>

	Once or twice	A few times	12+ times
All who had visited a casino ( <i>n</i> = 119) (%)	41.2	43.9	14.9
<i>Sex (%)</i>			
Male ( <i>n</i> = 32)	31.3	43.8	25.0
Female ( <i>n</i> = 81)	45.7	43.2	11.1
<i>Age (%)</i>			
60–64 ( <i>n</i> = 19)	42.1	42.1	15.8
65–69 ( <i>n</i> = 26)	42.3	46.2	11.5
70–74 ( <i>n</i> = 41)	29.3	56.1	14.6
75–79 ( <i>n</i> = 18)	55.6	27.8	16.6
80–84 ( <i>n</i> = 9)	66.7	33.3	–
85+ ( <i>n</i> = 3)	33.3	–	66.7
<i>Income (%)</i>			
<US\$10,000 ( <i>n</i> = 10)	60.0	40.0	–
US\$10,000–20,000 ( <i>n</i> = 27)	44.4	40.7	14.8
US\$20,001–30,000 ( <i>n</i> = 22)	40.9	54.5	4.5
US\$30,001–40,000 ( <i>n</i> = 19)	36.8	42.1	21.1
US\$40,001–50,000 ( <i>n</i> = 12)	33.3	58.3	8.3
>US\$50,000 ( <i>n</i> = 14)	42.9	21.4	35.7

<sup>a</sup> Of the total 146 respondents, 12.9% had never visited a casino and are not included in this table.

Almost one-third of the older adults in Phase I budgeted. One gentleman in his early seventies said that setting a budget was not necessary because “We know our limitations.” Fifty percent of those who budgeted limited themselves to less than US\$30, while 9% spent between US\$31 and US\$50, and another 35% budgeted over US\$50. It is interesting to note that 69% of those who reported having been discouraged from gambling by friends or relatives did not budget.

In Phase I, eight people (5.5%) were concerned that they might have gambling problems. Of the eight, four people were only occasional casino visitors, one went a few times a year, another monthly, and one a couple of times a month or more. Half of those who identified themselves as having problems were male, three were women, and one person did not specify sex. Three of the eight said they did not budget when they went.

Twelve respondents said they had been discouraged from gambling by relatives (mostly a spouse) or by friends. Among the reasons given for such discouragement were that gambling is a waste of money, that their relatives did not want them giving their money “to the Indians,” and that the relatives and friends were concerned that they might become addicted to gambling.

A little more than 20% said they knew people whom they believed might have gambling problems. The most common reason for their beliefs was that they suspected these friends or relatives could not afford to gamble as much as they did. The rest of these responses were

Table 3  
Reasons for visiting casinos, Phase I

	Win/gamble	Fun/social	Food	Something to do/curious	Shows
All who had visited a casino ( <i>n</i> = 115) (%)	6.1	34.8	24.4	24.3	10.4
<i>Sex (%)</i>					
Male ( <i>n</i> = 32)	9.4	28.1	25.0	28.1	9.4
Female ( <i>n</i> = 79)	5.1	38.0	22.8	22.8	11.4
<i>Age (%)</i>					
60–64 ( <i>n</i> = 19)	–	26.3	26.3	26.3	21.1
65–69 ( <i>n</i> = 25)	12.0	24.0	32.0	20.0	12.0
70–74 ( <i>n</i> = 41)	4.9	39.0	19.5	26.8	9.8
75–79 ( <i>n</i> = 17)	5.9	47.1	29.4	11.8	5.9
80–84 ( <i>n</i> = 9)	11.1	22.2	11.1	55.6	–
85+ ( <i>n</i> = 1)	–	100.0	–	–	–
<i>Income (%)</i>					
< US\$10,000 ( <i>n</i> = 10)	10.0	30.0	30.0	30.0	–
US\$10,001–20,000 ( <i>n</i> = 26)	3.9	57.7	11.5	26.9	–
US\$20,001–30,000 ( <i>n</i> = 21)	4.8	42.9	19.0	9.5	23.8
US\$30,001–40,000 ( <i>n</i> = 18)	16.7	16.7	27.7	22.2	16.7
US\$40,001–50,000 ( <i>n</i> = 12)	8.3	33.3	25.0	33.3	–
US\$50,000+ ( <i>n</i> = 14)	–	14.3	28.6	35.7	21.4

evenly divided among the following: the friend or relative could not stop; he or she spent too much time at the casino; or they went too often.

From the first phase of this study, we concluded that the respondents on the whole did not go to casinos as frequently as they might have done, given the ease of access to these facilities. (Tour buses leave the senior center weekly for all-day excursions to casinos in the area.) Those who went did so for reasons that are socially acceptable for the most part.

### 3.2. Phase II gambling behaviors: interviews

Table 4 reveals that all of the interviewed respondents had visited a casino at least once during the preceding year. Fifty-nine percent of the respondents visited casinos twice a year or less, while 27.3% went 12 times a year or more, and the remaining 13.6% visited a few times a year. With this small a sample, it was difficult to draw any meaningful conclusions although it did appear that those who visited most often were men. No clear patterns by age and income existed.

Table 5 contains the respondents' reasons for visiting casinos. What they enjoyed most about their visits were the social aspects. They liked having a place to meet and socialize with others in a safe, controlled environment. Several mentioned the food as an important reason for their attendance. Others mentioned having a "day out." A total of four people mentioned

Table 4  
Frequency of casino visits in preceding year, Phase II

	Once or twice	A few times	12+ times
All who had visited a casino ( <i>n</i> = 22) (%)	59.2	13.6	27.2
<i>Sex (%)</i>			
Male ( <i>n</i> = 9)	55.6	11.1	33.3
Female ( <i>n</i> = 13)	61.5	15.4	23.1
<i>Age (%)</i>			
60–64 ( <i>n</i> = 1)	100.0	–	–
65–69 ( <i>n</i> = 8)	50.0	25.0	25.0
70–74 ( <i>n</i> = 7)	71.4	–	28.6
75–79 ( <i>n</i> = 1)	100.0	–	–
80–84 ( <i>n</i> = 3)	33.3	66.7	–
85+ ( <i>n</i> = 1)	–	–	100.0
Missing ( <i>n</i> = 1)	–	–	100.0
<i>Income (%)</i>			
US\$10,000–20,000 ( <i>n</i> = 3)	33.3	33.3	33.3
US\$20,001–30,000 ( <i>n</i> = 3)	66.7	33.3	–
US\$30,001–40,000 ( <i>n</i> = 4)	75.0	–	25.0
US\$40,001–50,000 ( <i>n</i> = 3)	100.0	–	–
>US\$50,000 ( <i>n</i> = 6)	50.0	–	50.0
Missing ( <i>n</i> = 3)	33.3	33.3	33.3

reasons related to gambling as motivation for their visits. Five said the best part for them was playing the slot machines or blackjack. Only one person mentioned “winning” as the best part. Surprisingly, a few mentioned that they did not really like any aspect of gambling but went to accompany a spouse, other relatives or friends.

In Phase II, 22.7% gambled less than US\$10 per visit, 13.5% spent between US\$10 and US\$25, while 22.7% spent between US\$25 and US\$50, and 9.1% spent over US\$50 but less than US\$100. One person spent between US\$100 and US\$200. Two men spent US\$200 or more—one of them averaging US\$500 per visit. All except two of the respondents planned in advance what they were going to spend.

None of the respondents in Phase II believed they had a gambling problem, although there were several whose responses suggested that they suspect they could have if circumstances were different. Cornelia, age 70, for example, commented that “It’s fun to win. I’m glad I don’t live close to a casino.” Stan, who was in his early seventies and one of the three respondents who spent over US\$100 per casino visit said: “I don’t think I have a gambling problem that couldn’t be dealt with by simply not going. For me, it would be a mistake to have it (a casino) more readily available.”

Almost all of the respondents in Phase II said they knew at least one person whom they suspected of having a gambling problem. They were all able to clearly identify risky

Table 5  
Reasons for visiting casinos, Phase II

	Win/gamble	Fun/social	Food	Something to do/curious	Shows
All who had visited a casino ( <i>n</i> =22) (%)	22.7	36.4	18.2	22.7	–
<i>Sex (%)</i>					
Male ( <i>n</i> =9)	33.3	33.3	11.1	22.2	–
Female ( <i>n</i> =13)	15.4	38.5	23.1	23.2	–
<i>Age (%)</i>					
60–64 ( <i>n</i> =1)	100.0	–	–	–	–
65–69 ( <i>n</i> =8)	25.0	25.0	37.5	12.5	–
70–74 ( <i>n</i> =7)	42.9	28.6	14.3	14.3	–
75–79 ( <i>n</i> =1)	–	–	–	100.0	–
80–84 ( <i>n</i> =3)	–	33.3	33.3	33.3	–
85+ ( <i>n</i> =1)	100.0	–	–	–	–
<i>Income (%)</i>					
US\$10,000–20,000 ( <i>n</i> =3)	–	33.3	33.3	33.3	–
US\$20,001–30,000 ( <i>n</i> =3)	–	33.3	66.7	–	–
US\$30,001–40,000 ( <i>n</i> =4)	50.0	–	25.0	25.0	–
US\$40,001–50,000 ( <i>n</i> =3)	–	66.7	–	33.3	–
>US\$50,000 ( <i>n</i> =6)	50.0	16.7	16.7	16.7	–
Missing ( <i>n</i> =3)	–	33.3	–	33.3	33.3

gambling behaviors. These included too frequent visits to the casino, neglect of other responsibilities, and spending too much money on gambling.

#### 4. Analysis

##### 4.1. Are older people capable of weighing the costs and benefits of casino gambling?

Social exchange theory suggests that people make rational choices that maximize rewards and minimize costs. This theory states that when costs exceed benefits most people will reevaluate their circumstances to the extent that they might discontinue activities that are no longer advantageous to them (Emerson, 1962, 1972). The responses of this group of older Minnesotans suggest that they employ such an approach to their gambling activities.

From their responses to the initial questionnaire and the clarity with which they expressed themselves in the personal interviews, we have no reason to suspect that any of them suffered from impairments that would have prevented them from weighing the costs and benefits of their casino gambling activities. They were active, energetic, and involved; their list of activities was impressive. Although we did not know the educational level of three of the interviewees in Phase II, only 1 of the remaining 19 had less than a high school diploma. As a group, they were highly educated: two had a PhD, five had a master's degree, and six had a bachelor's degree. We

are aware, however, that this sample was not representative of the older US population as a whole. Interviewing a sample of older casino gamblers that is not as highly educated or as actively involved in the community might have yielded different results.

Almost all of the older people we interviewed echoed the sentiments of one woman in her early seventies who said: “I am smart enough to know that I won’t win any money.” The reasons most of them went to the casinos had little to do with winning or even enjoyment of gambling. They were almost unanimous in their view of gambling as entertainment and in the knowledge that over the long haul they were never going to win. One woman in her late sixties said: “It has to be looked at as entertainment. (You) can’t look at it as if you are going to win or regain your losses.” A retired teacher suggested “Gambling is like alcohol—it’s fine if you don’t take it to the limit. Some people win, but they are few and far between. It’s another form of entertainment.” A 65-year-old man viewed gambling strictly as entertainment. He said: “Money lost is entertainment money.”

The greatest advantages of casinos to these older people were the social aspects. They enjoyed having a safe, controlled environment in which to meet and socialize with others. They liked watching people. Some were happy to be able to go to a place by themselves without feeling conspicuous because they were not part of a couple or a group. Many commented on the low cost and high quality of the food. Others said they enjoyed having “a day out.” Only three of the respondents mentioned that they enjoyed the excitement of the casino. Five said the best part for them was playing the slot machines or blackjack. Only one person mentioned “winning” as the best part of going to the casino. Several said they did not really like any aspect of gambling but went to accompany a spouse, other relatives, or friends. For the majority, the perceived benefits of their trips to the casino were unrelated to either gambling or winning. They viewed this activity in the same way as other voluntary activities in which they deliberately chose to engage; they saw it as both sufficiently rewarding and socially engaging. These older people’s reasons for visiting casinos reflected their view that this is an activity that fits into their current life styles with its emphasis on leisure activities with family and friends.

There is also evidence of their practical approach to casino gambling. For example, several respondents viewed the coupons and other incentives that the casinos gave them as ways to finance their trips without digging too deeply into their own pockets. (Although, some respondents reported that they received fewer incentives from the casinos, such as double coupons, than had been the case in the past.) One woman took special advantage of the incentives sent to her during her birth month. Others were well aware that the excitement of casino gambling was only temporary and indicated that for them it had lost some of its appeal since their initial few visits. Several respondents had been in the habit of making trips to Las Vegas over the years but now chose to go to local casinos since they are closer and cheaper in the long run. They said they were able to go to the shows and get to see big name entertainers at a very affordable price and a very convenient location. It is obvious that the local casinos, through their use of special incentives and the featuring of certain entertainers, target older adults. It is also evident from our interviews that these casino visitors only responded when they saw this as good and affordable entertainment.

The interviews also included a number of questions designed to identify lifelong patterns of risk-taking behaviors of any type that might contrast with the idea of a rational approach to gambling. With a couple of exceptions there was little evidence to support the idea that these older people were “risk takers” or that they ever had been. The questionnaire included items about other risky behaviors such as alcohol and tobacco consumption. Although almost all of them had smoked tobacco products at some point in their lives, some for many years, most had quit years ago. Only two continued to smoke. Almost the entire sample enjoyed alcohol on occasion, but they were quick to point out that this was a purely social activity indulged in with friends and family on an occasional basis. A couple of respondents reported drinking daily, but that consisted of a maximum of one or two drinks. One woman, a recovering alcoholic who did not gamble, was especially aware of addictive behavior. As she pointed out:

I played slots on a cruise ship in 1960 and won \$100. I decided that I would keep away (from it) because I felt that it was too easy to think “I can never lose” and I thought I could become easily addicted — just like taking one more drink.

The oldest respondent, an 88-year-old widow described herself as “. . . a gambler in life. I will take chances and they worked out beautifully until I was 88 years old.” She reported that she now goes to the casino only about once a month and regretted that “she can’t stay so long because I have to watch the smoke — but it’s still exciting.”

Responding to the questions regarding risky gambling behavior among their friends and relatives, several of the respondents said that even though their friends or relatives may gamble more than they themselves were comfortable with, they did not believe that these people risked their financial security. In other words, even though they spent a lot of money on gambling, they could probably afford it. For example:

(I) have a sister-in-law who plays far too much bingo. This is not an obvious financial problem. (Widow in her early seventies)

(I) have a friend who has a good bit of money who plays high stakes machines and goes often. She loses more than she wins. She doesn’t see it as entertainment. She can’t not buy pull tabs — sometimes as much as \$300–400 a night. (retired teacher, late sixties)

My wife’s sister and brother-in-law may have problems. They think nothing of blowing \$75 at the casino and they also play bingo. They probably have enough income, but it doesn’t seem constructive. (69-year-old male)

She plays the slots at the casinos 2 or 3 times a week. I think she has enough money to do it. I don’t know if she wins or loses, but don’t think it creates a hardship. (male, early seventies)

It is clear that this sample of older casino visitors made a clear distinction between how *they* conducted themselves at the casinos as compared to the behavior of others who gambled more heavily and who might have real problems. Only a few viewed themselves as being at all vulnerable. If there was any risk-taking it was very controlled.

Other evidence to support the idea that these respondents weighed and measured the costs and rewards of casino gambling carefully is found in the number of times they visited casinos and the limits on how much money they allowed themselves for gambling. Most of them were

infrequent visitors, with only a few going to casinos more than once a month. In addition, those who could be termed “frequent gamblers” exhibited no common characteristics and included three men and three women. All of the men fell into the US\$50,000 income bracket. Two of the men were married and one was divorced, two of the women were widowed and one was married. Five of the six had at least a bachelor’s degree. Only one of the six, a widow with an annual income of less than US\$20,000, might be considered at risk financially but she limited her gambling money to US\$50 a visit.

Just three of the respondents spent more than US\$100 when they went to the casino. Two of these were men who went 12 or more times a year. They spent US\$200 and US\$500, respectively, each time they went. Both were in the US\$50,000 plus annual income bracket. Six of the respondents either did not gamble at all when they went (going for other reasons) or gambled “nickels and dimes.” Two women said they never used their own money (so apparently gambling with other people’s money did not count!). Five of them spent less than US\$20 each visit and six spent between US\$30 and US\$50. All of the respondents except two planned in advance what they were going to spend. Several said they only took limited money with them, none used ATM machines or charge cards. Only two had ever cashed checks at casinos. Just two of the respondents reported ever spending more than they planned and both of these said this occurred when they were at the casino with other people who were winning and did not want to leave. Only one respondent reported feeling at all guilty when she lost (she gambled about US\$30 a time). Others reported that while they did not like losing, they did not feel guilty when they did since they viewed the money they lost as they would any other money spent on entertainment. In summary, the picture we have in this study of older casino visitors is that they were well able to measure the costs and benefits of casino gambling for themselves (and for others), that they did not place themselves in financial jeopardy, and would stop going if they felt threatened. They appeared to be aware of risky behaviors in themselves and others. Perhaps, it is because they were aware that this activity involves risk and invites criticism from friends and family, they were overly cautious in their gaming attitudes and behaviors. Their responses may also be a reflection of their relatively high educational levels as well as a Midwestern penchant for understatement. Overall, these respondents did not view themselves as gamblers but more as wise shoppers for affordable entertainment.

#### *4.2. How do life experiences influence casino gambling behavior?*

Inherent in the life course perspective is the idea that early experiences have effects throughout people’s entire lives. Few have demonstrated this as clearly as Elder (1974) in *Children of the Great Depression* in which he found that it is not just living through major historical events that matters but the age at which one experiences them. Later work by Elder and his colleagues suggests that it is not only history but social context that places limitations on opportunity (Shanahan et al., 1997).

All of the respondents were of an age that they would have experienced the effects of the Depression. Even those born at the end of the 1930s, were raised by parents who had to struggle to make ends meet during very hard times. Although this group of respondents’

recollections of the depression may not be first hand, its effects on their attitudes and values were as strong as for the older respondents who experienced it as small children, teenagers, and even, in one case, as a young adult. They said that when they looked back, it seemed almost inconceivable how difficult life was, especially in the rural communities where the majority of them grew up. They have never forgotten what it meant to be poor and to have to do without. They were taught to work hard for their money and not to waste anything. Their parents instilled in them the importance of thrift and this has remained with them. They do not spend what they do not have. They do not risk their economic security. As an 88-year-old widow said: “Old people are not foolish; they have worked hard for their money. They grew up in the Depression and don’t throw money away.”

Almost all of these respondents were raised in families in which playing card games was a normal and frequent activity. They report that in the rural areas (where over two-thirds of them spent their early years) there was little else to do for fun and even if there had been, no money was available to pay for entertainment. Card playing was a major social activity in these communities. None of these older adults recollected their parents, relatives, or their parents’ friends played cards for money, other than pennies. They simply did not have the money. Cards were also a common activity in the families of the respondents who grew up in cities. Again, none of them recalled that this was done for money. It is interesting to note that although almost the entire sample grew up with card playing (sometimes for pennies) as a commonplace activity, they did not see this activity as gambling. In addition, many of them also grew up with bingo as a community and church fundraising activity, but this was not viewed as gambling either. Only one person had parents who did any form of gambling for real money. This man grew up in California and twice a year his parents would go to Las Vegas to gamble. After he reached the age of 12, he accompanied them on these trips. It may or may not be coincidental that this particular respondent was the most frequent casino gambler in the sample and also spent the most money, about US\$500 per visit.

It seems logical to suggest that seeing their parents, friends, and relatives playing games of chance as normal and accepted social entertainment when they were young was instrumental in the respondents’ acceptance of and participation in casino gambling in later life. Similarly, it makes sense that the absence of monetary stakes of any consequence as part of these games during childhood and the general shortage of funds as they grew up contributed to their reluctance to gamble more than they can afford in later life. Almost all of the respondents, in both phases, indicated that they set limits on how much they spent. Many made sure they enforced their limits by only taking predetermined amounts of cash and by refusing to obtain more funds by cashing a check, using a credit card, or using the ATM. One woman reported that her husband said when they have to use credit cards or ATMs, that is when they will quit going.

Their early experiences affected the gambling behavior of these older people in that for the most part they gambled with the same fiscal restraint that had influenced their entire lives. In addition, their acceptance of and participation in casino gambling arose from their childhood experiences with games of chance and their view of them as social activities, not gambling. Their definition of this activity is compatible with their current retirement lifestyles that emphasize enjoyment of new and old activities with family and friends.

#### *4.3. How do these older adults view gambling in general?*

One of the most interesting findings to emerge from this research was that most of this sample disapproved of gambling in general, believed it would be no great loss if it were to be made illegal, and saw it as presenting grave danger to some groups of people. Yet, they participated in it themselves. For example:

It wouldn't bother me if it were made illegal. Too many young people have problems with gambling. (female, late sixties, gambles once a month, and spends US\$30 each time)

It's a lost cause. Last resort for entertainment. Kind of turns me off. It wouldn't bother me if it disappeared. Don't really see why people do it. (male, late sixties, gambles a couple of times a year, and spends US\$20 per visit)

I don't really think it should be legal — too many can't handle their money and the taxpayers end up supporting them. (70-year-old female, gambles a couple of times a year, spends US\$30 per visit)

I am aware that many people do suffer, so if it would help them I wouldn't mind if it were eliminated — no great loss. Really, it can cause great hardship . . . (female in late sixties, gambles a couple of times a year, spends US\$50 per visit)

I think gambling will run its course . . . gambling is okay, but if you don't have character you can overdo it — it's just like other addictions . . . (84-year-old female, gambles once a month, spends US\$100 per visit)

Gambling will break Minnesota . . . should never have started gambling. People can't afford to play — don't set limits-spend too much. (80-something-year-old female, gambles once a month, spends US\$50 per visit)

I would be happier if gambling were not here because of the social ills it causes. We could get along without gambling very well. The economic development is at the expense of some. (male, late sixties, gambles two to three times a year, spends US\$20 per visit)

The question that arises then, and one for which this research is unable to provide a definitive answer, is how did these older adults, who on one level disapproved of gambling, reconcile their participation in this activity with such disapproval? Did they simply not see themselves as gamblers? Did they view their casino visits in much the same way as they viewed their parents' card playing for pennies, i.e., not as a gambling activity? Or was it a form of denial? They did not see themselves as vulnerable. Rather, they saw the welfare of other groups of gamblers as being at greater risk as access to gaming increases. (The intergenerational differences noted by Russell (1993) are helpful in explaining why this might be the case.) Perhaps their history allowed them to see this activity not as a risky behavior but as a socially acceptable pastime in which they imposed deliberate boundaries to risk-taking. In addition, the behaviors and attitudes of these older adults may be a reflection of our national ambivalence toward gaming as well as its more recent normalization (Abt & McGurrin, 1992).

#### 4.4. *Why do we hold the perception that older gamblers are a danger to themselves?*

To understand the socially constructed perception that older gamblers are a danger to themselves, it is again helpful to refer to an additional component of the life course perspective—age norms. Early work by Neugarten et al. (1965) found that a representative sample of middle-class men and women age 40–70 indicated there were specific age ranges during which it was appropriate for certain behaviors to occur. These writers went on to suggest that such age norms were deeply embedded in our culture and are pervasive. Hazan (1994, p. 59) points out that “Using lower and upper age limits, we identify what is ‘permitted’ or ‘forbidden.’” The concept of age norms implies that sanctions are attached to “off-time” behavior in the form of disapproval or even stronger censure. Later research by Settersten and Hagestad (1996) found more fluidity in age norms than Neugarten et al. (1965) had earlier suggested. However, it seems safe to say that when people indulge in behaviors that are deemed inappropriate for their age, some societal discomfort arises. Indeed, as Hazan (1994, p. 59) states “The powerful stereotypical force of age-related attributes may be found in those cases where the age barrier is trespassed.”

Why would casino gambling among the elderly be viewed as an “off-time” activity? Perhaps part of the answer lies in the idea that as a society we do not really believe that older people should enjoy themselves too much, or if they do that they obtain such enjoyment from the more sedate activities suited to their age group. We may have rather traditional ideas about which activities are suitable for older people and which are not. Certainly, casino gambling fails to fit into the category of what many people would see as suitable activities for older people. Encounters with so many older people in a place also frequented by the young may cause some discomfort to younger persons. As a society, we do not mind older people having a good time and enjoying appropriate activities, but we are much more comfortable if when they do it *en masse*, they do it in senior centers, retirement communities, and the like. Otherwise, the rest of society is brought face to face with evidence of its own future. As Hazan (1994, p. 68) states:

The separation of the aged from society, the identification of ageing with ugliness, evil and horror, and the reluctance to engage in physical contact with the aged all indicate that ageing is perceived as a dangerous area located, as it were, between life and death.

This is especially the case when a significant number of older people suffer from visible physical problems. On any given day at any casino in Minnesota, a large number of older gamblers are on crutches, use walkers or wheelchairs, or tow portable oxygen tanks. Atchley (1997, p. 76) suggests that in the normal course of events it is usually fairly easy to “ignore healthy, vital older people.” In fact, he believes that we generally do not even notice them at all since they blend in with everyone else. But, faced with large numbers of older people in a casino setting, and especially faced with many who are frail or disabled in some way, we are unable to escape from a major collision with our own mortality. Does public disapproval of casino gambling among seniors and the viewing of older gamblers as a danger to themselves serve two purposes? Perhaps it is more than a way to discourage them from visiting casinos

“for their own good.” Perhaps it is also a means of removing them from the view of those who would rather not look at their own old and vulnerable future.

In this small exploratory study, we have found no evidence to support the idea that casino gambling activities threatened these older adults in any way. In fact, for most of them it was the social benefits of their casino visits that they enjoyed the most. If, however, the socially constructed view of older people as victims of their own inappropriate behavior becomes widespread, then the danger exists that some of them may adopt society’s view of themselves as being at risk, will bow to public opinion, and will discontinue their gambling activities. For this particular sample of older gamblers, however, we suggest that this will not happen. We believe that if and when they discontinue their visits to the casino, they will do so for other reasons. Perhaps the newness of the experience will have worn off or they will no longer find gambling to be a pleasurable activity. Perhaps it will become something they are no longer able to afford to do or maybe the incentives offered by the casinos will no longer be appealing. In other words, the discontinuation of visits to the casino in this sample of older people will only occur as the result of their careful evaluation of the costs and benefits involved.

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