



The Responsible Gambling Council’s Approach to Youth Gambling Prevention

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Gambling participation typically increases during adolescence and peaks in young adulthood, when risk for gambling problems is also increased (Delfabbro, King, & Griffiths, 2014; Volberg, Gupta, Griffiths, Olason, & Delfabbro, 2010). Gambling problems among youth are associated with a variety of issues including substance abuse, mental health problems, suicide attempts, and delinquent behaviours (Cook, Turner, Ballon, Paglia-Boak, Murray, et al., 2015). Prevention programs targeting this vulnerable group are critical for addressing this increased level of risk.

School-based gambling prevention programs are shown to have positive impacts. High school programs, including class curriculum and multi-media programs, improve gambling knowledge, decision making, problem solving, and attitudes, and decrease frequency and fallacies (Walther, Hanewinkel, & Morgenstern, 2013; Williams, Wood, & Currie, 2010). In post-secondary schools, mathematical instruction, brief gambling advice, and personalized feedback decrease erroneous cognitions and behaviour (Lostutter, 2009; Takushi, Neighbors, Larimer, Lostutter, Cronce, et al., 2004; Williams & Connolly, 2006).

The Responsible Gambling Council (RGC) is an independent, non-profit organization committed to problem gambling prevention. For 35 years, RGC has worked to reduce gambling risks by creating and delivering innovative awareness programs. It also promotes the adoption of improved play safeguards through research, standards development, and the RG Check accreditation program.

School-Based Programs

RGC delivers two school programs in Ontario. GAME BRAiN is a high school program that uses five interactive game show-style activities to educate and engage the entire school during an assembly. The games focus on the realities of gambling, losses, signs of a problem, how to avoid risks, and help resources. Two youth TV personalities use a variety of fun props to get students involved in friendly competition. GAME BRAiN also engages students using their Facebook and Instagram accounts, posting program messages as memes and running various contests.

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Know the Score 2 (kts2) is an interactive awareness program that informs and engages post-secondary students using an interactive quiz on gambling myths, signs of a problem, ways to keep gambling safer, and available services. The quiz can be completed online or at a display on campus that is staffed by students. Students can enter to win Beats headphones at each campus and a larger draw for a \$1,500 scholarship. Students are updated on the school tour and prize draws through the kts2 Facebook page.

RGC's school programs reach thousands of students and increase gambling awareness and knowledge. GAME BRAiN has been delivered to over 30,000 students in 94 schools since 2014. In 2017, the majority of participating students felt the program was informative (88.2%) and entertaining (88.3%; RGC, 2018a). The program increased knowledge about problem gambling (78.4%) and increased awareness of how to avoid problem gambling (75.9%) and where to get help (78.9%). Amongst teachers, 100% felt GAME BRAiN was informative and 85.7% agreed it is a good way to increase student awareness of problem gambling.

kts2 has been delivered 635 times to over 400,000 post-secondary students since 2001. In 2017-2018, the program increased awareness of all four messages. The majority of participating students felt the program increased their awareness of myths about gambling (83.4%), signs of problem gambling (78.4%), ways to keep gambling safer (80.3%), and problem gambling services (83.4%; RGC, 2018b).



The RGC is in the process of integrating new content into these programs to strategically address cannabis-related risks. Cannabis use is roughly twice as high among youth compared to those above 24 years (Statistics Canada, 2018). Further, those between 15 and 29 years report the most cannabis-related problems (Leos-Toro, Rynard, & Hammond, 2017). Gambling and cannabis use are also linked among youth. Cannabis use is associated with problem gambling among adolescents (Hammond, Pilver, Rugle, Steinberg, Mayes, et al., 2014) and young adults who gamble while high experience more harms as a result of their gambling (Cronce, Bitteringer, Di Lodovico, & Liu, 2017). By including cannabis content in our school-based programs, RGC will maximize their impact by providing youth with a more holistic understanding of how to avoid gambling in harmful ways (i.e. gambling while high).

Social Marketing

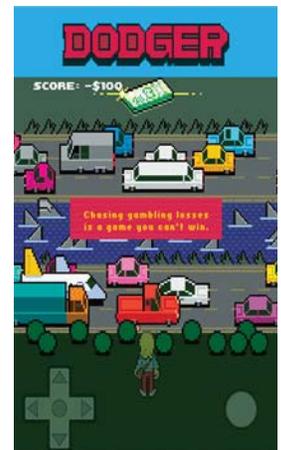
RGC has run three campaigns focused on youth 18-24 years. *Friends4Friends* (2005-2009) was designed to empower friends of youth who are at-risk of gambling harm by providing them with information on problem gambling and available supports. *Safe or Sorry* (2011-2013) used sex as a metaphor to frame gambling as a risky activity and encourage the use of low-risk gambling behavior.



Stop the Chase (2013-2017) showed that chasing losses can be dangerous and lead to gambling harm. These campaigns have included various online, print, and media elements. In 2016-2017, an online video game *Dodger* was developed to illustrate the futility of chasing losses (www.stopthechase.ca/#game).



There were over 65 million impressions in each year of the *Stop the Chase* campaign. In 2016-2017, the post-campaign general population survey (1,500 Ontarians) found that the campaign was impactful, particularly among young adults 18-24 and those with gambling concerns or harms (RGC, 2017). Awareness of the campaign was significantly higher among young adults with gambling concerns and with moderate or severe gambling problems.



The campaign resulted in behaviour change among 47% of the viewers, most thinking about someone else's gambling (25%). Significantly higher rates for several actions (i.e. thinking about their own gambling, cutting down on gambling, and stopping gambling) were reported by young men, those with concerns about their gambling, those who chased losses, and those with moderate or severe gambling problems.

Keys to Success

RGC's youth-focused prevention initiatives are effective because they include comprehensive content, employ strategic delivery, and involve youth.

Our programs target non-problem gambling rather than problem gambling since most youth are gambling at non-problematic levels. Our programs also cover topics related to gambling: budgeting, social gaming, video gaming, and soon cannabis use. Since youth tend to engage in gambling alongside other potentially risky behaviours, prevention interventions will be more relevant and impactful if they address these companion behaviours as well.

Our programs use both school-based and province wide delivery channels, including online, print, television, and radio advertisements. We use these tools to target youth where they are, increase program reach, and reinforce messages.

RGC involves youth in program design (pilot testing, feedback surveys) and delivery (peer-to-peer, interactive). Youth involvement benefits youth by increasing their skills and giving them a voice, and it benefits programs by ensuring appropriateness and relevance.

If you'd like to learn more about RGC's youth strategy, please reach out: sashas@rgco.org.

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Incorporating Personalized Feedback into Gambling Disorder Treatment

Jeremiah Weinstock, PhD, Saint Louis University

Part of standard clinical practice in treating psychological disorders is an initial assessment of the client's psychosocial functioning, behavior, and diagnostic status. Frequently this information is collected through clinical interviews and formal questionnaires. But what happens to this data once it's collected? How is it used? Many times this information is catalogued and used to generate reports to funding agencies, to seek reimbursement, to engage in program evaluation, and plan treatment. However, should this information shared back to the client in a formal manner? Can this information be used as an intervention itself? The answer to both of these questions is yes! In fact, the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct requires psychologists to make reasonable efforts to share with individuals results from an assessment (ethical standard 9.10).

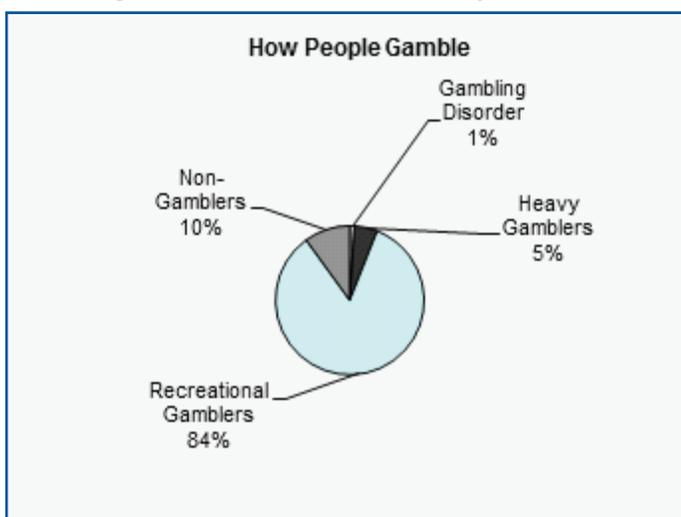
Empirical Support for Personalized Feedback

Research from diverse areas of clinical psychology suggests that providing written feedback to clients about their psychosocial functioning and diagnostic status is an effective method to improve treatment engagement, increase client satisfaction, and enhance treatment outcome. Meta-analyses suggest these effects are in the moderate to large range (Poston & Hanson, 2010). For example, the relationship check-up, a couples assessment and feedback intervention, has significant effect on couples' functioning and leads to improved mental health of individuals within the relationship (Fentz & Trillingsgaard, 2017). In another example, meta-analyses finds that providing feedback, especially if it incorporates normative information, leads to significant reductions in college student drinking and negative consequences (Cadigan et al., 2015; Tanner-Smith & Lipsey, 2015). Many times the personalized feedback in these college student drinking interventions is presented in the context of a motivational interview. Others have adapted it as a stand-alone computerized intervention that does not include any therapist contact (Carey, Scott-Sheldon, Elliott, Bolles, & Carey, 2009). Personalized feedback interventions have also been adapted and tested as an intervention for gambling problems. Predominately, these studies examine college students with gambling problems and find that stand-alone personalized feedback interventions lead to a reduction in gambling behavior and gambling-related problems (e.g., Larimer et al., 2012; Martens, Arterberry, Takamatsu, Masters, & Dude, 2015; Petry, Weinstock, Morasco, & Ledgerwood, 2009). The mechanism of action theorized for these personalized feedback include correction and alignment of perceived norms with actual norms, raising awareness about one's behavior, and build discrepancy between current behavior, values, and goals.

What Does Personalized Feedback Look Like?

Content of personalized feedback intervention varies widely and is typically presented at the start of treatment. It may also be helpful to revisit the feedback report at client termination as a way to review progress made during therapy. Many feedback reports include normative prevalence information about behavior or psychiatric disorder along with the individual's diagnostic status. See Figure 1.

Figure 1 – Normative Prevalence Information



Source: Jeremiah Weinstock, Saint Louis University

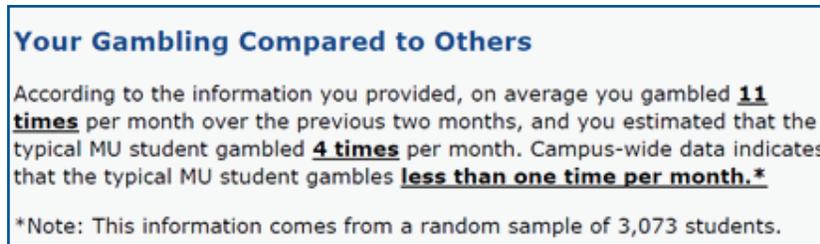
Out of the 9 gambling disorder symptoms, you endorsed 5.

An individual with gambling disorder is someone who endorses 4 or more symptoms and is experiencing serious problems related to their gambling.

Here is a chart of how people gamble. What do you make of this chart? Where do you fit in?

Combined, this information allows for comparison of one's self to the behavior or diagnosis. Personalized feedback may also include individual gambling frequency versus normative information. See Figure 2.

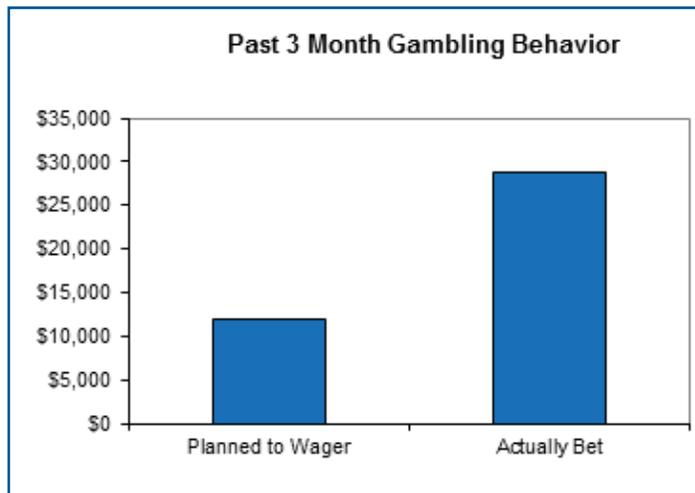
Figure 2 – Normative Feedback on Gambling Frequency



Source: Matthew Martens, University of Missouri

My own clinical work with clients diagnosed with gambling disorder frequently incorporates personalized feedback that goes beyond normative information. Feedback about an individual's gambling behavior including frequency, amount intended to wager, amount wagered, time spent gambling, and net result of gambling provide a comprehensive summary. The information is based upon data collected from the gambling timeline followback, a retrospective calendar that assesses frequency and intensity of gambling behavior over the past three months (Hodgins & Makarchuk, 2003; Weinstock, Whelan, & Meyers, 2004). Information about a client's gambling losses per hour (e.g., \$267) and projecting gambling losses over extended periods of time (e.g., \$464,000 over the next five years) can be calculated from this data. Graphs depicting how much an individual intended to wager versus what he or she actually wagered can capture loss of control. See Figure 3.

Figure 3 – How much did you intend to wager versus what you wagered?



What are your impressions of this graph?

Source: Jeremiah Weinstock, Saint Louis University

Combined with other information, such as income, one can also calculate percent of income spent on gambling (e.g., 113% over the last three months). Finally, other information collected during an intake can also be incorporated into the feedback report, such as diagnostic status, measures of gambling self-efficacy and gambling-related cognitions, and screening results for other comorbid conditions (e.g., PHQ-9 for depression, AUDIT for hazardous drinking, Dyadic Adjustment Scale for marital satisfaction). Feedback reports can range from about three to five pages and includes graphs and other visual aids so as to provide a broad picture of the client's functioning without overwhelming the individual with statistics and numbers.

How is it Presented to the Client?

The goal of the personalized feedback report is to raise awareness and help motivate clients to make more informed decisions about their gambling behavior. It is not about shaming or making clients feel bad. Therefore, how the feedback is presented is as equally important as the information that is presented. Feedback is to be shared in a manner that is consistent with motivational interviewing and allows the client to digest and respond to the information provided. Therapist behaviors that are empathetic, supportive, and non-judgmental while also allowing the client ample time to process and potentially experience distress and discrepancy are highly desirable. A good starting point is to inform the client where the information in the personalized feedback report comes from (i.e., “information you provided during the intake assessment”). As the therapist and client work their way through personalized feedback report, the therapist can ask open-ended questions to solicit the client’s reactions. Questions such as, “What patterns do you see here?” and “What’s your reaction to this information?” are good starting points. In addition, utilizing reflective listening can deepen the conversation and allow time for the client to explore and process the information being provided. Common reflections include, “You had no idea you were gambling away this much money,” “Your gambling has gotten so out of control”, and “You are feeling really ashamed right now.” From a motivational interviewing perspective, change talk often emerges during and after review of a personalized feedback report. Therapists need to be on the lookout for change talk in order to amplify and reflect those thoughts and feelings back to the client.

Conclusion

In summary, personalize feedback can be an effective tool to create motivation to change in individuals with addiction-related disorders. More specifically, evidence is emerging that it is an efficacious approach for gambling disorder, especially with college students. Going a step further our ethical code requires us to make reasonable efforts to share assessment results. While verbal feedback satisfies this requirement, written and personalized feedback has the potential to be all the more powerful in helping us facilitate change within our clients.

Copies of the gambling timeline followback and templates for a personalized feedback report are available from the author via email at jeremiah.weinstock@health.slu.edu.

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The 2018 Holiday Campaign



Each year, McGill University's International Centre for Youth Gambling Problems and the NCPG ask lottery corporations to support our responsible gambling campaign and help raise awareness regarding the risks of underage lottery play during the holiday season.

Whether or not it is legal for minors to participate in lottery games in your area, a responsible gaming message during the holidays is always welcomed. In past years, the campaign has been endorsed by the World Lottery Association and NASPL.

Over the past eleven years, participation has continued to grow. In 2017, 55 lotteries in the US and around the world supported the campaign. In an effort to continue to grow the campaign, we have made a number of changes for 2018:

- Non-lottery organizations can now participate in the Holiday Lottery Responsible Gaming Campaign.
- Lotteries can elect to participate at one of three different levels of involvement. The higher the level of participation, the more campaign activities the organization will implement.

Participation in the Holiday Campaign is FREE! To join the Campaign as a participant see www.ncpgambling.org/holiday. All participants have access to additional campaign resources. We encourage you to reach out to your local problem gambling advocacy group or state health agency to partner with them in this important effort.

Participants must sign up by November 28, 2018 to be included in the official press release and campaign announcements. NCPG members who participate in the Campaign are also eligible for NCPG's Holiday Lottery Campaign Award. If you have any questions or concerns regarding the campaign, please contact lynette.gilbeau@mcgill.ca or caith@ncpgambling.org.

We look forward to your participation!



Centre News

Student Awards

The Centre has extremely talented and committed graduate students. Two of the Centre's students have recently won awards for their work.

- Jeremie Richard's entry won best Master's Poster at the 17th Annual McGill University Education Graduate Student Society (EGSS) Conference. His poster titled "The stimulating nature of gambling behaviours: Identifying the relationship between stimulant use and gambling among adolescents" looked at the association between the use of stimulant drugs and gambling among high-school students.
- Yaxi Zhao was awarded the NCPG Outstanding Master's Thesis Award for her dissertation titled "*Adolescent multiple engagement in addictive behaviors and the role of parents.*"

Newsletter Award

In July, at the NCPG Conference in Cleveland, Lynette Gilbeau, Editor of our newsletter, accepted the award for best Corporate Newsletter.

Conferences

Centre work was disseminated at various conferences over the last several months:

NCPG 32nd Annual Conference in Cleveland, July 2018

- Dr. Derevensky provided the keynote address titled "Youth gambling issues: Yesterday, today and tomorrow."
- Loredana Marchicha (PhD candidate) presented a paper titled: "Investigating emotion regulation, anxiety and dispositional mindfulness in a gambling context."

12th European Conference on Gambling Studies and Policy Issue in Malta, September 2018

- Dr. Derevensky participated in a panel discussion with Drs. Blaszczynski, Griffiths and Potenza discussing different issues and perspectives related to gambling research.
- Dr. Derevensky delivered a research talk examining mobile gambling among adolescents.
- Loredana Marchicha (PhD candidate) presented a paper titled: "A comparative analysis of Canadian University policies toward alcohol, drugs and gambling use."



Loredana Marchicha presenting in Malta

In Memoriam



The Centre remembers Nancy Petry who passed away in July, 2018. Nancy joined the faculty of the University of Connecticut School of Medicine in 1996 after receiving her PhD from Harvard University and completing a postdoctoral fellowship at the University of Vermont School of Medicine in clinical addiction research. She developed unique methodologies to treat addictive disorders with a treatment known as "contingency management". Nancy was internationally known for her work in behavioral treatments and impulsivity disorders. During her career at UConn, she wrote and published over 300 original articles and single-handedly wrote a number of books in the areas of pathological gambling, contingency management, behavioral addictions, and internet gaming disorders. Despite her enormous successes during her career, Nancy was very modest and willing to mentor and help others in their careers. She trained a large number of post-doctoral fellows during her 22 years on the faculty, many of whom have become successful faculty members at academic institutions around the country.

The Centre remembers Jim Pappas who passed away in October, 2018. Jim was the former Executive Director of the Pennsylvania Council on Compulsive Gambling, having retired in September 2018. He had served as a board member and past president of the council since the board was founded in 1984. Jim was also a certified gambling counselor and had presented workshops, seminars and training throughout the states of Pennsylvania, Delaware & New Jersey on compulsive gambling issues. Jim was always highly supportive of many of the Centre's initiatives. His efforts, especially in Pennsylvania, will be missed.



2018 Durand Jacobs Award

The recipient of the 2018 Durand Jacobs Award is Sara Bartel for her paper titled “Is anxiety sensitivity a risk factor for, or complication of, alcohol misuse? A meta-analysis.” The Durand Jacobs Award recognizes outstanding work related to the psychology of addictive behaviors and is dedicated to the late Dr. Durand Jacobs' lifelong efforts to help mentor students.

Sara Bartel holds an Honours Degree in Psychology from the University of Saskatchewan. Currently a PhD student in the Clinical Psychology Program at Dalhousie University, she conducts and publishes research with members of the Personality Research Team and the Mood, Anxiety, and Addiction Co-morbidity Laboratory. Her PhD research investigates the impact of social network members on substance use. Previous publications include: “Heavy episodic drinking among romantic partners: Support for the partner influence hypothesis using a 3-Year longitudinal design” and “Do I know you? Altering hairstyle affects facial recognition.”

Congratulations Sara!



Abstract

Anxiety sensitivity (AS) refers to a dispositional tendency to respond to one's anxiety sensations with fear. A longstanding theoretical model implicates AS in alcohol misuse, suggesting that people higher in AS may be more likely to use alcohol to control, reduce, or eliminate feared anxiety sensations (i.e. the risk model); however, research examining this model is inconclusive. As the relationship between AS and alcohol misuse remains unclear, a second theoretical model suggesting that alcohol misuse may cause changes in AS has been proposed (i.e. the complication model). Objective: We sought to test whether AS is a risk factor for, and/or complication of, alcohol misuse by conducting a rigorous meta-analysis using random effect models. Method: Our literature search yielded 15 studies (N = 9,459). Studies were included if they used a longitudinal design, assessed AS and alcohol misuse at baseline, and assessed alcohol misuse and/or AS at follow-up. Results failed to support AS as a risk factor for, or complication of, alcohol misuse. As the link between AS and alcohol misuse may be better captured by another model, researchers are encouraged to test if the link between AS and alcohol misuse is pathoplastic and to test if the link emerges under specific conditions (e.g., elevated state anxiety).



Recent Publications and Presentations

REFEREED PUBLICATIONS

Richard, J., Potenza, M., Ivoska, W. & Derevensky, J. (in press). The stimulating nature of gambling behaviors: Relationships between stimulant use and gambling amongst adolescents. *Journal of Gambling Studies*.

Hayer, T., Primi, C., Ricijas, N., Ólason, D. & Derevensky, J. (2018). Editorial: Problem gambling: Summarizing research findings and defining new horizons. *Frontiers in Psychology*.

Mills, D., Milyavskaya, M., Heath, N., & Derevensky, J. (2018). Gaming motivation and problematic gaming: The role of needs frustration. *European Journal of Social Psychology*, 48, 551-559.

Mills, D., Milyavskaya, M., Mettler, J., Heath, N. & Derevensky, J. (2018). How do passion for video games and needs frustration explain time spent gaming? *British Journal of Social Psychology*, 57, 461-481.

Zhao, Y., Marchica, L. Derevensky, J. & Ivoska, W. (2018). Mobile gambling among youth: A warning sign for problem gambling? *Journal of Gambling Issues*, 38, 268-281.

BOOK CHAPTER

Derevensky, J. (in press). The preventing and treatment of gambling disorders: Some art, some science. In S. Sussman (Ed.), *Cambridge handbook of substance and behavioral addictions*. New York: Cambridge University Press.

CONFERENCE PRESENTATIONS

Derevensky, J., Zhao, Y., Marchica, L. & Ivoska, W. (2018). Mobile gambling among adolescents: Is this a problem? Paper presented at the European Association for the Study of Gambling, Malta, September.

Temcheff, C., Derevensky, J., Richard, J., Martin-Storey, A. & Paskus, T. (2018). Variations in severity of gambling disorder symptomatology across sexual identity among college student-athletes. Paper presented at the European Association for the Study of Gambling, Malta, September.

Marchica, L., Shaffer, H. & Derevensky, J. (2018). A comparative analysis of Canadian University policies toward alcohol, drugs and gambling use. Paper presented at the European Association for the Study of Gambling, Malta, September.

Marchica, L., Mills, D., Derevensky, J. & Montreuil, T. (2018). Investigating emotion regulation, anxiety and dispositional mindfulness in a gambling context. Paper presented at the National Council on Problem Gambling annual conference, Cleveland, July.

Richard, J. & Derevensky, J. (2018). The stimulating nature of gambling behaviours: Identifying the relationship between stimulant use, marijuana use, binge drinking and gambling among adolescents. Poster presented at the 29th International Congress of Applied Psychology, Montreal, June.

Richard, J., Derevensky, J. & Paskus, T. (2018). Trends in gambling behaviours among NCAA college student-athletes: A comparison of the 2004, 2008, 2012 and 2016 NCAA survey data. Poster presented at the 3rd annual Summer Institute for School Psychology conference, McGill University, Montreal, May.

Richard, J. & Derevensky, J. (2018). The stimulating nature of gambling behaviours: Identifying the relationship between stimulant use and gambling among adolescents. Poster presented at the McGill University Education Graduate Student Society conference, Montreal, March. Winner for Best Poster.

INVITED ADDRESSES

Derevensky, J. (2018). Gambling disorder and other behavioral addictions in elite athletes. Invited address presented at the International Olympic Committee Consensus Meeting on Mental Health in Elite Athletes, Lausanne, Switzerland, November.

Derevensky, J. (2018). Understanding youth gambling: The good, the bad, the ugly. Invited presentation at the 1st Southern Region Problem Gambling Conference, Orlando, October.

Derevensky, J. (2018). Responsible gambling or responsible gaming: Is there a difference. Invited panel presentation at the European Association for the Study of Gambling, Malta, September.

Derevensky, J. (2018). Youth gambling issues: Yesterday, today and tomorrow. Invited keynote address presented at the National Council on Problem Gambling annual conference, Cleveland, July.

Derevensky, J. (2018). The impact of the SCOTUS decision on sports gambling. Invited Pioneers in the Field presentation at the National Council on Problem Gambling annual conference, Cleveland, July.

Derevensky, J. (2018). What do we know about young athletes and gambling problems? Invited presentation at the 3rd Summit on Sports and Gambling, National Council on Problem Gambling annual conference, Cleveland, July.

Invited Addresses (Cont'd)

Richard, J., Derevensky, J. & Paskus, T. (2018). Understanding behavioral addictions: A school psychology perspective. Poster presentation at the 3rd annual Summer Institute for School Psychology conference, McGill University, Montreal, May.

Derevensky, J. (2018). The role of industry in gambling research. Presentation at the New Horizons in Responsible Gambling Conference, Vancouver, February.

Derevensky, J. (2018). Understanding youth gambling: Another high risk behavior. Invited address presented at the 21st Annual Kentucky Council on Problem Gambling conference, Lexington, Kentucky, February.

Derevensky, J. (2018). Working with youth gamblers: From research to prevention to treatment. Invited address presented at the 21st Annual Kentucky Council on Problem Gambling conference, Lexington, Kentucky, February.

UPCOMING CONFERENCE PRESENTATIONS

Derevensky, J. (2019). Videogame and online addictions: Cause for concern. Invited presentation to be delivered to the Canadian Paediatric Society and Canadian Academy of Child and Adolescent Psychiatry meeting on Lifelong Learning in Paediatrics, King City, Ontario, October.



Centre Fundraising Campaign

The Centre's ongoing fundraising campaign continues to grow with the support of corporate and private sponsors. Due to restricted government infrastructure funding, we have initiated a fundraising campaign to help us maintain our ability to develop and deploy empirically-based prevention and harm-minimization programs. The Centre is housed on McGill University's main campus in the heart of Montreal, Canada. McGill University is a public university and recognized charitable organization.

Donations can be made to:

The International Centre for Youth Gambling Problems
McGill University
3724 McTavish Street
Montreal, Quebec H3A 1Y2

Official letters of contributions and tax receipts will be forwarded

Upcoming Events

- **Discovery**
May 6-8, 2019
Toronto, Ontario
- **Ice North America**
May 13-15, 2019
Boston, Massachusetts
- **International Conference on Gambling and Risk Taking**
May 27-30 2019
Las Vegas, Nevada
- **31st NCPG National Conference on Problem Gambling**
July 19-20, 2019
Denver, Colorado

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