

Linking Advocacy, Education and Public Awareness for Problem Gambling Services Across the States

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A (Very) Brief History

➤ Gambling (especially related to divination) is one of the oldest activities.

- Why do dice have pips and not numbers?

Recognizable dice date back to 1,300 BC but the Hindu-Arabic number system only originated 700 AD—2,000 years later!!!!

➤ Americans may be more prone to take risks—immigrants, pioneers, entrepreneurs...

➤ But we also have a deep rooted tradition of viewing gambling as a sin—gamblers (especially addicts) were seen as godless, greedy, guilty...

➤ As a result, gambling is generally prohibited unless a certain form has been specifically legalized.



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Why A National Issue?

- **Presence:** Legal in 48 states.
- **Participation:** 85% of American adults have gambled at least once in their lifetimes:
 - 65% at least once in past year;
 - 30% at least once in past month;
 - 15% at least once in past week.
- **Profit:** Legal gambling alone = **\$95 billion per year.**
- **Prevalence:** 2-3% meet criteria for a gambling disorder = **4-6 million adults + 500,000 adolescents per year.**
- **Problems:** personal financial, emotional and physical harm, cost to society from gambling-related crime, bankruptcy, divorce, etc...= **\$6.9 billion per year.**
- **Perception:** Large majority of the public believes problem gambling is a serious issue.

Federal Government (Generally, Hopefully or Frighteningly) Reflects Our Linkage

- Not a single cent of the \$3.55 trillion Federal budget is dedicated to problem gambling.
- As a result, what programs we have been able to get are generally ad-hoc, one-time and use extremely scarce discretionary funds:
 - National Institute of Mental Health project
 - National Gambling Impact Study Commission
 - Center for Mental Health Services contract
 - Center for Substance Abuse Treatment
 - Addiction Technology Transfer Centers & Sponsor Midwest Conference
 - National Clearinghouse for Alcohol and Drug Information
 - Problem Gambling Toolkit (BKD 535)
 - Ongoing National Institutes of Health research

About NCPG

- The national **ADVOCATE** for programs and services to assist problem gamblers and their families.
- Founded in 1972.
- **NEUTRAL** on legalized gambling.
- National grassroots non-profit with chapters in 35 of 50 states, including MA.
- Work with & link together government, gaming industry & community.



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Core Linking Programs

- Helpline Number (800.522.4700) & Network
- Nat'l Problem Gambling Awareness Week
- Annual Conference on Problem Gambling
 - 24th June 9-12, Portland, OR
 - **25th June 30-July 2, Boston, MA!!!!!!**
- Public Awareness & Media
- Certification Administration
- **ADVOCACY!**



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Comprehensive Problem Gambling Act of 2009

- **Authorizes** Federal health agencies to address PG and **appropriates \$71,000,000** for grants.
- Introduced in House June 2009 as H.R. 2906.
 - 54 sponsors as of 5/6/10.
- Senate version to be introduced May 2010.
- Advocacy tools:
www.ncpgambling.org/advocacy
- Legislative information: <http://thomas.loc.gov>



New England House Delegation

- Massachusetts: 4 of 10 (Capuano, Frank, McGovern, Olver)
- Connecticut: 3 of 5 (Courtney, DeLauro, Murphy)
- Maine: 0 of 2
- New Hampshire: 0 of 2
- Rhode Island: 1 of 2 (Kennedy)
- Vermont: 1 of 1 (Welch)
- **9 of 22 = 40%**



Section 3: SAMHSA Authorities

Designates Federal lead.

Improve coordination and collaboration among states.

Synergistic benefit from coordinated approaches.


Provide technical assistance and guidance to states.



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Section 4: Public Awareness

- Modeled after other successful public health initiatives.
- Create common themes to augment existing state and local community efforts.
- Appropriation of **\$200,000** per year for **5 years** = **\$1,000,000** total.
- National Problem Gambling Awareness Week
- www.npgaw.org



**Chances are,
one of the clients
you'll see today has
a gambling problem.**

You can't smell it on their breath or see it in their eyes, but one in 10 primary care patients may have a gambling problem.* Three simple questions can help reveal this hidden addiction. Ask your adult patients:

- Do you gamble?
- Have you ever lied about how much you gamble?
- Have you ever felt the need to bet more and more money?

Problem gambling could present as headaches, stomachaches, anxiety, depression or sleep disturbances. Catch the underlying problem and utilize local resources. A referral to gambling treatment can make all the difference. For complete diagnostic criteria and a more comprehensive screening tool, log on to www.npgaw.org or call the National Council on Problem Gambling HelpLine, 1-800-522-4700, for additional information and help making a referral.

**NATIONAL
PROBLEM GAMBLING
Awareness Week**

*Patamak N, A.X. and Fleming, M.F. 1998. Prevalence of gambling disorders in a primary care setting. Archives of Family Medicine (8):515-520.



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Section 5: Research

- States unable to fund meaningful research independently.
- Encourages collaboration between universities and existing programs to identify policies and services that produce positive outcomes.
- Supports the goal of improving efficiency and effectiveness of problem gambling services.
- Appropriation of **\$4,000,000** per year for **5 years** = **\$20,000,000** total.



Section 6: Treatment

- Competitive grants encourage public/private partnerships.
- Intended to fill gaps in services.
- Appropriation of **\$10,000,000** per year for **5 years** = **\$50,000,000** total.



Summary

- Modest but historic first step to meet identified needs.
- Fills gaps in policy and programs only the Federal government can address.
- Expands and supports existing programs which have demonstrated effectiveness.
- Supported by numerous national, state and local organizations.



Advocacy, Education & Public Awareness

- To bring Federal agencies and resources;
- To promote efficient and effective services;
- To raise public awareness AND increase understanding/reduce stigma...
- **We MUST** join together to ensure **PROBLEM GAMBLING** concerns are incorporated into all **GAMBLING** and **HEALTH POLICY** decisions.



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