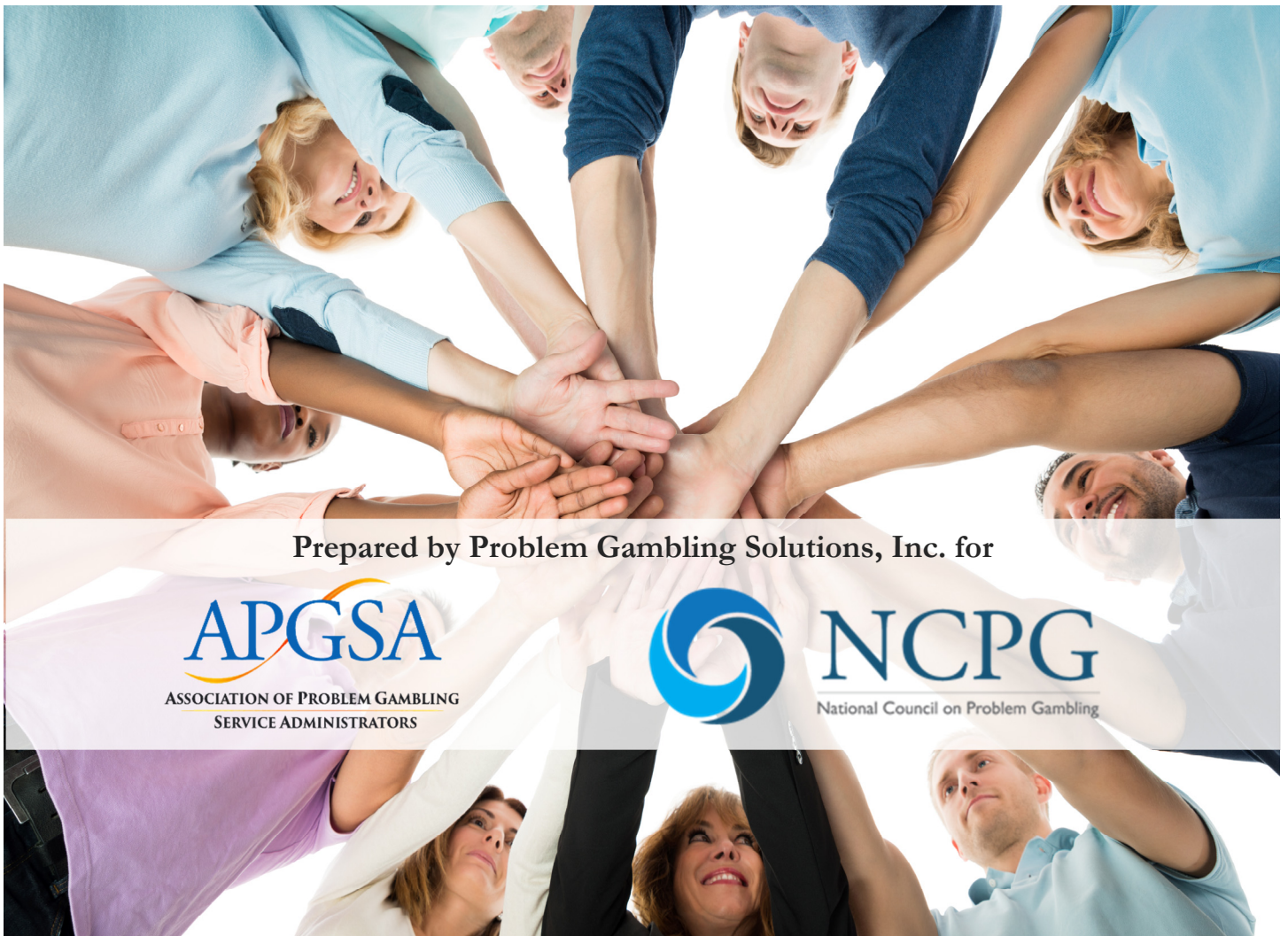


# 2016 Survey of Problem Gambling Services in the United States

## Executive Summary



Prepared by Problem Gambling Solutions, Inc. for

**APGSA**  
ASSOCIATION OF PROBLEM GAMBLING  
SERVICE ADMINISTRATORS

 **NCPG**  
National Council on Problem Gambling

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# INTRODUCTION

This report presents the only national compilation of comprehensive information gathered about problem gambling services in the United States. Unlike other mental health and addiction services, there is no federal agency designated to fund and guide programs and policies addressing problem gambling in the U.S. This void has created the need for non-governmental entities to gather national data to better inform individual state efforts and track national trends.

In 2006, the Association of Problem Gambling Service Administrators (APGSA) began sponsoring national problem gambling service surveys. This report is the fifth in the series and the second to be co-sponsored by the National Council on Problem Gambling (NCPG). NCPG spearheads efforts to address problem gambling at the national level, while state level efforts are primarily delegated to NCPG state-based affiliate chapters (referred to in this report as “Affiliates”).

The 2016 Survey of Problem Gambling Services in the United States included two surveys: one designed to collect information on publicly funded problem gambling services from the 50 states and the District of Columbia, and the other to capture information on problem gambling services delivered by NCPG Affiliates.

This effort represents the most comprehensive collection of information on problem gambling services in the United States. Information was gathered about the services funded by state agencies with legislated or line-item budgets identified for use in addressing problem gambling, and about efforts of NCPG Affiliates. Problem gambling services provided directly by entities such as tribal governments or state lotteries, privately funded entities such as health insurers or casino companies, and community organizations such as Gamblers Anonymous, were not collected in this survey.

## WHO ARE APGSA AND NCPG?

### **The Association of Problem Gambling Service Administrators (APGSA)**

is the national non-profit membership organization of state administrators of public funds for problem gambling services. APGSA was formed in 2000 to “support the development of services that will reduce the impact of problem gambling.”

**The National Council on Problem Gambling (NCPG)** is a private non-profit organization whose mission is to “lead state and national stakeholders in the development of comprehensive policy and programs for all those affected by problem gambling.”

Both APGSA and NCPG offer state memberships and do not have a position for or against legalized gambling.

## SURVEY OBJECTIVES

**The objectives were to collect multi-purpose data that can be used to:**

- Assist federal and state governments in assessing the nature and extent of problem gambling treatment, prevention, and research services provided by state-supported systems and systems funded by NCPG Affiliates.
- Analyze problem gambling service trends and conduct comparative analyses; generate a national directory of state agencies and NCPG Affiliates with problem gambling service oversight responsibilities.
- Explore for associations between state level variables of interest, including size and scope of gaming industry, estimated numbers of problem gamblers, numbers of persons enrolled into state support and NCPG Affiliate supported gambling treatment, problem gambling helpline call volume, and total funding investment into problem gambling services.

## HIGHLIGHTS

The total number of states that reported publicly funded problem gambling services increased from 35 in 2006, to 37 in 2010, to 39 in 2013, to 40 in 2016.

## FUNDING

The total amount of public funding allocated for problem gambling services in the U.S. increased 20%, from \$60.6 million in 2013 to \$73.0 million in 2016; on a state-by-state basis, the amounts ranged from \$0 (ten states plus the District of Columbia did not provide any dedicated funding for problem gambling services) to \$8.47 million in California.



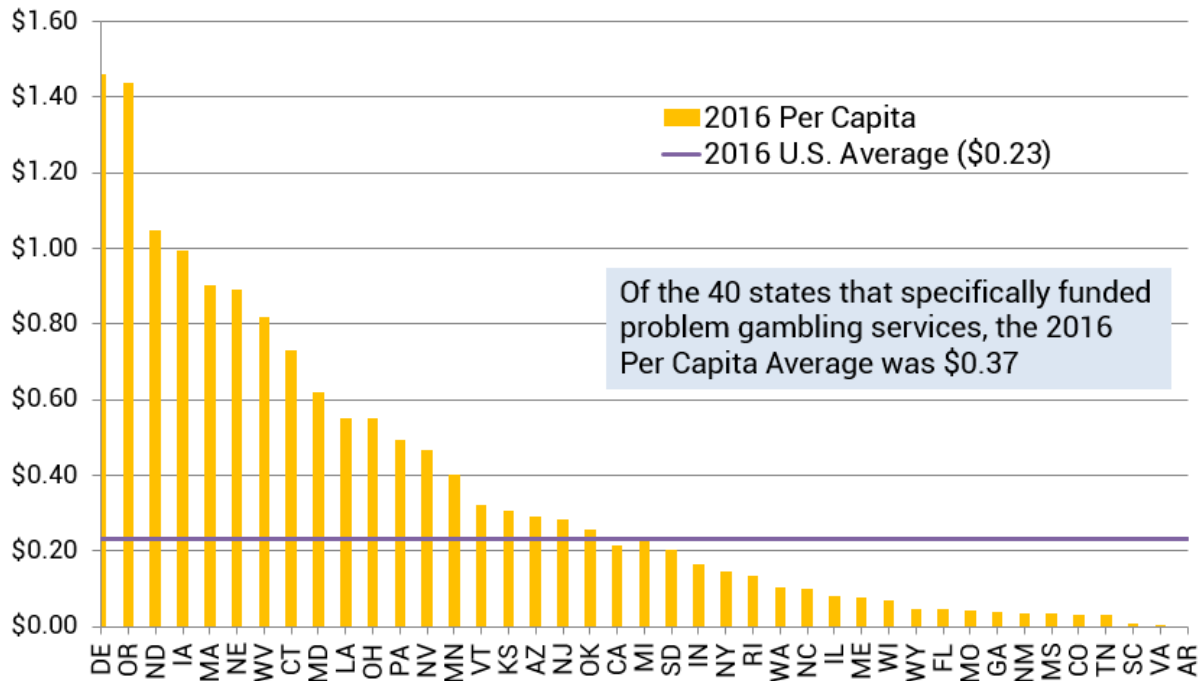
For those 40 states that invest in problem gambling services, per capita allocations for problem gambling services ranged from \$0.01 in South Carolina to \$1.46 in Delaware. The average per capita allocation for problem gambling services in the 40 states with publicly funded services was 37 cents. When the 10 states without dedicated funding are included, the national average drops to 23 cents per capita.



The average per capita funding level across all states with public funding increased between 2013 and 2016 from 32 cents to 37 cents. Since the 2013 survey, 25 states increased funding levels, seven had no change in funding, and nine reported cuts in their problem gambling service funding, including one state, Arkansas, that eliminated all funding.

At the time this survey was conducted, there were 33 states with active NCPG Affiliate Chapters. Other states had problem gambling councils without official NCPG affiliation and from this group two were included in the Affiliate survey (New Hampshire and Texas). NCPG Affiliate budgets were dramatically smaller than the state agency budgets in most states—including three states where Affiliates had less than \$100 in revenue in state fiscal year 2016. The mean NCPG State Affiliate per capita budget was 13 cents and the median was three cents.

## 2016 Per Capita Allocation Problem Gambling Services Allocation by U.S. State Agencies

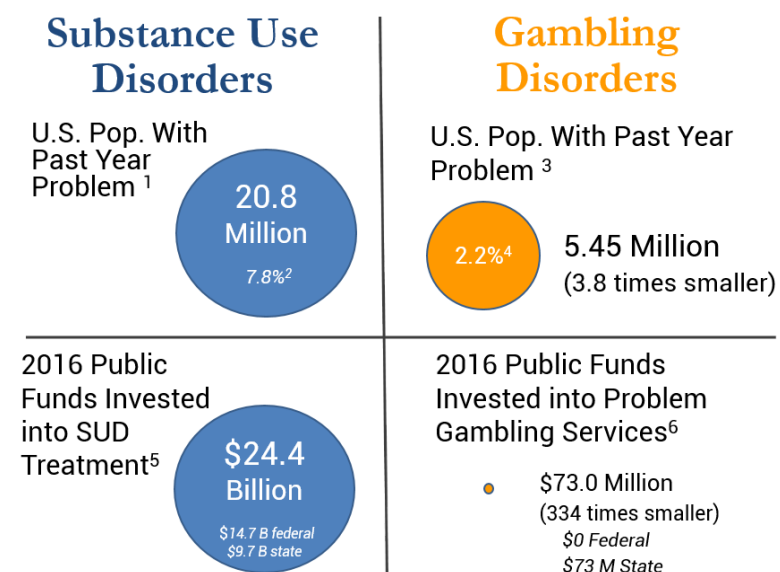


Note: Includes only funds line itemed for problem gambling services and passing through a state agency. Missing states do not fund problem gambling services through legislative actions or utilize state agency budgets line itemed for problem gambling services.

Increased state problem gambling service funding levels were significantly associated with:

- total spending on gambling within a state;
- state revenue from gambling;
- number of types of legalized gambling;
- the estimated number of adult problem gamblers within a state; and
- the number of problem gamblers treated.

*In the U.S., substance use disorders are about 3.8 times more common than gambling disorders, while public funding for substance abuse treatment is about 334 times greater than public funding for all problem gambling services (\$24.4 billion versus \$73.0 million, respectively).*



<sup>1</sup> 2015 National Survey on Drug Use and Health. <sup>2</sup> Estimate based on ages 12 + <sup>3</sup> Williams, R.J., Volberg, R.A. & Stevens, R.M.G. (2012). <sup>4</sup> Estimate based on ages 18+. <sup>5</sup> SAMSHA Spending Estimates – Projections for 2010-2020. <sup>6</sup> 2016 Survey of Problem Gambling Services in the United States.

## SERVICES

Across all states, there is a lack of uniformity regarding what types of problem gambling services are funded. Among those states that fund problem gambling services, the most commonly supported services provided by state agencies and NCPG Affiliates were, respectively, problem gambling awareness programs, counselor training, helplines, and problem gambling treatment.

### AWARENESS:

Thirty-six public agencies and 34 NCPG Affiliates reported providing public awareness services. The most common methods of public awareness among state agencies were via website (38 states), printed material (33 states) and informational sessions (32 states). The most common public awareness efforts from Affiliates were informational sessions (27 states) and via social media (26 states).

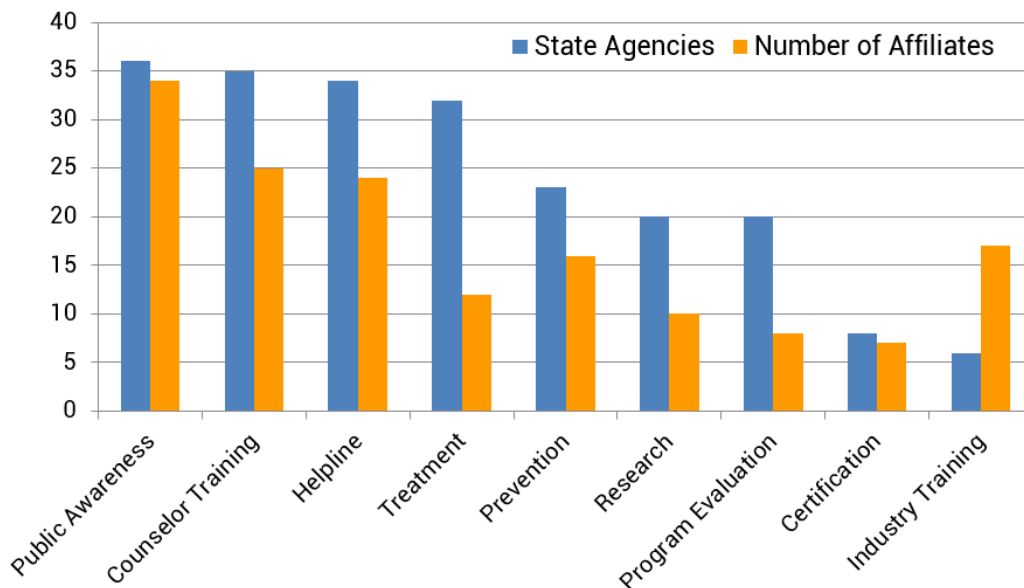
## TREATMENT:

In 2016, about one quarter of one percent of people (14,375) who needed gambling disorder treatment received publicly funded care from a gambling treatment specialist. These figures are revealing when compared to substance use treatment statistics that find 10.8 percent of people aged 12 or older (2.3 million people) who needed substance use treatment received treatment at a specialty facility in 2015.

The average cost of problem gambling treatment, per client treatment episode, was \$1,333 in 2016; by comparison, in 2006 the average cost of substance abuse treatment per client treatment episode was \$1,583 (Etner et al.,2006), a figure that has likely risen.

The only variable that was significantly associated with increases in gambling treatment utilization was higher spending on problem gambling services.

## Number of States Using Public Funds for Specific Problem Gambling Services



Note: Data limited to reports from state agencies that had a budget line specifically assigned for problem gambling services.

## HELPLINE:

The survey identified 30 organizations that operate problem gambling helplines. It is common for more than one gambling helpline number to be marketed in the same state.

“Calls for help” to problem gambling helplines were significantly associated with higher levels of:

- total spending on gambling within a state;
- state revenue from gambling;
- number of types of legalized gambling;
- the estimated number of adult problem gamblers within a state; and
- the number of problem gamblers treated.

## PREVENTION:

This is the first year in which prevention activities have been specifically surveyed. Twenty three state agencies and 16 Affiliates reported providing prevention services.

The most commonly reported prevention activities, shared by both state agencies and NCPG Affiliates, were problem identification and referral (21 state agencies and 15 Affiliates), coalition building (17 state agencies and 14 Affiliates), and policy change efforts (14 state agencies and 13 Affiliates).

## RESEARCH & EVALUATION:

Results of each of the past four National Problem Gambling Services Surveys indicate that spending on research and evaluation systems has been very low. In 2016, APGSA Survey respondents reported an average of 1.8% of their budgets was spent on “research” (defined as prevalence studies, risk behavior surveys, issue research), and an average of 1.7% was spent on program evaluation.



**Only 17 states funded one or more full-time state employee positions dedicated to administering problem gambling programs.**

## STRENGTHS & NEEDS

When asked to rate a list of 10 possible strengths of their state’s problem gambling system, the collaborative relationship between the state agency administering problem gambling programs with the state Affiliate had the highest average rating, followed by having protected funds for problem gambling services.

When asked to rate a list of needs, the highest average rating was for improved integration of problem gambling into behavioral health services, followed by national guidance on best practices to address daily fantasy sports and other forms of internet-based gambling. Fifty-seven percent (57%) of state agency key informants rated the need for increased funding as “very needed” or “critically needed,” compared to 83% of Affiliate key informants.

The gaps in prevention services most listed by states, both by state agencies and NCPG affiliates, were 1) funding, 2) community readiness (low awareness of problem), and 3) staffing and coordination.



## DISCUSSION

Gambling is one of the few activities that the United States federal government has largely left alone from a regulatory standpoint, as gambling regulation has for the most part been left up to state and local governments. Correspondingly, the U.S. federal government does not provide states with funds to address problem gambling and disallows states from funding problem gambling treatment with the federal funds invested in substance use disorder treatment (\$14.7 billion in 2016). The result is poor funding for problem gambling services and a patchwork of gambling-related policies and programs across the United States.

In many states, efforts to garner support for gambling expansion have resulted in language to address problem gambling within legislative measures, which typically offer to dedicate a portion of gambling revenues, taxes, or fees to fund problem gambling service efforts. Less commonly, political controversy over legalized gambling and public concerns have motivated state agencies and/or state legislatures to use non-gambling related funds to support problem gambling services. Some states, such as Alaska, Hawaii and Utah, offer few, if any, legalized gambling opportunities and therefore are less motivated to develop speciality services and programs to address problem gambling.

Results from this survey found a positive correlation between the number of dollars gambled within a state, the amount of state revenue derived from gambling, and the level of funding for problem gambling services. However, on a state by state basis the relationships between these variables was not always present. This survey found the amount of dedicated funding for problem gambling programs in 2016 varied greatly, including 10 states that did not provide any dedicated funding. The consequence of disparate funding levels for problem gambling services across states is that there are extremely uneven levels of services for individuals with gambling problems across the country.

In states that do not fund specialized gambling treatment services, key informants stated that individuals with a gambling disorder who did not have coverage through private insurance were either referred to community supports like Gamblers Anonymous, or served within their publicly funded mental health and addictions treatment systems. Because few problem gamblers present for treatment, most mental health and addiction profession generalists have little to no experience working with problem gamblers. Conversely, most states with line-itemed problem gambling budgets have invested in training a workforce and developing an infrastructure to treat problem gamblers and implement problem gambling prevention and awareness programs.

Findings from this survey support the need to develop federal funding and guidelines that can fill gaps in America's safety net for problem gamblers and begin to address health service disparities for preventing and treating problem gambling.