

Annual Report
2014

2015 Plan for Problem Gambling Services



▶ **Set a limit and stick to it.**



▶ **Know the warning signs.**



▶ **Call or visit online for help.**



**OHIO CASINO
CONTROL COMMISSION**

October 15, 2014

Ohio Casino Control Commission
10 W. Broad St., 6th Floor
Columbus, Ohio 43215



Dear Chair Davidson, Executive Director Schuler and members of the Ohio Casino Control Commission:

On behalf of the Ohio Department of Mental Health and Addiction Services (OhioMHAS), I present the *SFY 2014 Annual Report — 2015 Plan for Problem Gambling Services*. This document details the work of hundreds of partners, including Ohio's behavioral health field and the state agencies that comprise Ohio for Responsible Gambling: Casino Control, Lottery and Racing Commissions. All of our organizations are working in tandem to ensure that Ohioans have quality prevention, treatment and recovery support services for gambling disorder accessible to them.

The establishment of a new system of care couldn't have happened at a better time. Since taking office, Gov. John R. Kasich has made it clear that he cares deeply about the issues of addiction and mental illness. His administration has demonstrated that behavioral health is a priority through support of fundamental health care reforms, and his leadership on prevention programs represents a strong focus on catching problem behaviors before they become health issues.

OhioMHAS created the Bureau of Problem Gambling within the Office of Prevention and Wellness so that we could tap into a strong statewide network of prevention programming that is concentrated on preventing or delaying behavioral health problems. Every person reached with prevention messaging has an improved chance of keeping gambling in the category of "fun" rather than "problem."

Thank you for your continued partnership and support to help make Ohio a place where behavioral health needs are met before serious problems occur. For questions or comments related to this plan or the Ohio continuum of care, please contact me or Stacey Frohnapfel-Hasson, bureau chief for Problem Gambling, at 614/644-8456 or email Stacey.frohnapfel@mha.ohio.gov.

Sincerely,

Tracy J. Plouck

Director, Ohio Department of Mental Health and Addiction Services

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Panda Project T-Shirt Design Contest Winner

Received the most votes via social media and was designed by Teghan Reed, PANDA participant and 7th grader from Mogadore Junior High in Summit County, Community Health Center, Akron



Bus advertisements

were developed by Lake-Geauga Recovery Centers for use on the Laketrans Bus System in Lake County (above) and by Recovery Resources of Cleveland for RTA buses in Cuyahoga County (below).



Foreword

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) is the cabinet agency responsible for providing problem gambling prevention, treatment and recovery services on behalf of Ohio citizens and the Ohio Casino Control Commission (OCCC), pursuant to ORC 3772.062(A-B).

The executive director of the commission shall enter into an agreement with the department of mental health and addiction services under which the department provides a program of gambling and addiction services on behalf of the commission.

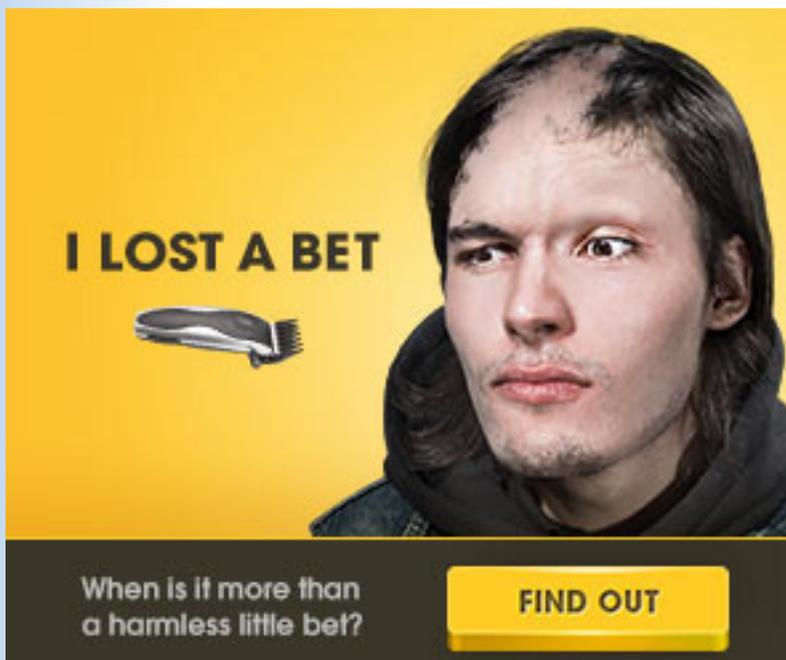
- (A) The executive director of the commission, in conjunction with the department of mental health and addiction services and the state lottery commission, shall establish, operate, and publicize an in-state, toll-free telephone number Ohio residents may call to obtain basic information about problem gambling, the gambling addiction services available to problem gamblers, and how a problem gambler may obtain help. The telephone number shall be staffed twenty-four hours per day, seven days a week, to respond to inquiries and provide that information. The costs of establishing, operating, and publicizing the telephone number shall be paid for with money in the problem casino gambling and addictions fund.

In addition, as stated in Sec. 5119.47 of Amended HB 59, 130th GA:

- (B) "The director of mental health and addiction services shall administer the problem casino gambling and addictions fund. The director shall use the money in the fund to support gambling addiction services, alcohol and drug addiction services, other services that relate to gambling addiction and substance abuse, and research that relates to gambling addiction and substance abuse. Treatment and prevention services supported by money in the fund under this section shall be services that are certified by the department of mental health and addiction services.

The director shall prepare an annual report describing the use of the fund for these purposes. The director shall submit the report to the Ohio casino control commission, the speaker and minority leader of the house of representatives, the president and minority leader of the senate, the governor, and the joint committee on gaming and wagering."

The 2012 Ohio Gambling Survey estimated that .3 percent of Ohioans could be problem gamblers with another .3 percent at moderate risk of gambling disorder. The Ohio Substance Abuse Monitoring Network examination of co-occurring substance use and gambling disorders estimated that approximately 25 percent of this specific population would have both disorders.



Ohio for Responsible Gambling released I Lost a Bet to help reduce problem gambling among 18-25 year-olds. The feature that allows web guests to send an anonymous email to a friend regarding gambling behavior resulted in 193 personal emails being sent.

Overview

In SFY 2014, a total of \$3.8 million from the Problem Casino Gambling and Addictions Fund was allocated to the 50 Alcohol, Drug Addiction and Mental Health/Alcohol, Drug Addiction Services (ADAMH/ADAS) county boards for planning, prevention and treatment services related to gambling issues. An additional \$335,000 from the Ohio Lottery Commission was granted to six regional behavioral health programs that work toward demonstration of best practices. Workforce capacity building continued with approximately 300 people attending the *Ohio Problem Gambling Conference: Ohio's Response to a Changing Landscape*. Another 500 behavioral health professionals sharpened their skills at regional trainings focused on problem gambling prevention, awareness and treatment models.

The *Ohio for Responsible Gambling* (ORG) partners — including OhioMHAS and the Casino Control, Lottery and Racing Commissions — jointly released a statewide campaign aimed at reducing problem gambling among 18-25 year-olds. To date, the *I Lost a Bet* campaign has drawn 146,383 unique visitors to the website and resulted in hundreds of thousands of impressions via billboards and social media. Using the feature that allows web guests to send an anonymous email to a friend regarding gambling behavior, 193 emails were sent with links to helpful resources. To emphasize community-based awareness of gambling issues, county boards and their service providers took part in *I Lost a Bet* and the broader audience-based *Until* problem gambling campaigns, along with dissemination of locally developed messaging.



Workforce Capacity Building

► Ohio's Strength in Workforce

While still in a building phase, Ohio has gained national attention for the state's use of highly qualified professionals in gambling services to train and lead a new group of behavioral health specialists to become experts in the prevention and treatment of gambling disorder. Sessions were offered at the December 2013 *Mental Health & Addiction Conference: Coming Together for a Healthy Ohio* and the *Ohio Prevention Education and Early Childhood Conference* in June 2014. Listed below is a summary of the workforce development activity undertaken in the past fiscal year.

March 2014 Problem Gambling Conference

At the March 4-5, 2014, *Problem Gambling Conference: Ohio's Response to a Changing Landscape*, the majority of the 300 attendees were professionals self-identified with the following credential categories: LICDC/LCDC¹ – 66, LPC/CC – 34, LSW/LISW – 61, NCGC – 8, OCPS – 32, Nurses – 10, Psychologists – 3. National and internationally respected keynote speakers, breakout session topics and extensive networking opportunities allowed for significant growth in the problem gambling field. Plenary speaker Henry R. Lesieur, PhD, PsyD, said of Ohio's event, "Thank you for inviting me to a wonderful conference... The state is on to bigger and better things as there was much enthusiasm in the room. The people I talked to were interested in addressing the issue in a nice way."



300

professionals attended
the March 2014 Problem
Gambling Conference

► Prevention Workforce Capacity Building

In Toledo, Columbus, Cincinnati and Cleveland, contractor Derek Longmeier, MBA, OCPSII, of Drug-Free Action Alliance, provided training on prevention topics including working with community groups and environmental strategies. Prevention seminars were also held as part of community events and conferences hosted by a number of professional organizations including working with community groups and environmental strategies.

¹LICDC: Licensed Independent Chemical Dependency Counselor/Licensed Chemical Dependency Counselor, LPC/LCPC: Licensed Professional Counselor/Clinical Counselor, LSW/LISW: Licensed Social Worker/Licensed Independent Social Worker, NCGC: Nationally Certified Gambling Counselor, OCPS: Ohio Certified Prevention Specialist

Expansion of Prevention Credential to Include Problem Gambling

Signed into law on June 16, 2014, by Governor John R. Kasich, HB 483 expanded the scope of practice for prevention professionals from “alcohol and other drug prevention services” to “prevention services.” This will allow prevention professionals to provide prevention services as they relate to gambling disorder and other behavioral health disorders. The Ohio Chemical Dependency Professionals Board (OCDPB) is currently aligning its administrative rules to account for these changes. To read the changes, go to <http://ocdp.ohio.gov/pdfs/HB%20483%20Relevant%20Sections.pdf>.

HB483
expanded the scope of
practice for Prevention
professionals and created
a Gambling Disorder
Endorsement

► Treatment Workforce Capacity Building

Contractor Jennifer Clegg, LSW, MSW, OCPS-II, NCGC-II/BACC, of Recovery Resources, led training sessions for Ohio’s professionals seeking education to treat individuals with gambling disorder. Stage 1 and 2 Identification and Treatment of Gambling Disorder and Advanced Disordered Gambling Training: Family Therapy and Mindfulness were offered in Akron, Athens, Cleveland, Columbus and Dayton.

Supplementing the state-funded training in SFY 2014 were Heather Chapman, PhD, NCGCII, BACC, Director of the Gambling Treatment Program and Deputy Director of the Veterans Addiction Recovery Program at the Louis Stokes Cleveland Veterans Administration Medical Center, and Rory C. Reid, PhD, LCSW, Assistant Professor of the Department of Psychiatry Research Psychologist and Neuropsychology at UCLA Resnick Neuropsychiatric Hospital University of California.

Endorsement for Treating of Gambling Disorder

After years of committed work by the behavioral health field, state leaders and the Ohio General Assembly, HB 483 enacted a provision that authorizes the OCDPB to create and offer a Gambling Disorder Endorsement for professionals qualified to treat gambling disorder. The OCDPB is currently working to update its administrative rules to incorporate these changes with an anticipated effective date of on or around January 1, 2015.

The endorsement will be available for individuals who hold an active LCDC II, LCDC III, LICDC or LICDC-CS license. Additional requirements for this new endorsement will include:

- ▷ Completion of 30 hours of gambling disorder training
- ▷ Completion of 100 hours of gambling disorder direct clinical experience prior to the first renewal of the endorsement
- ▷ Completion of six hours of gambling disorder training at each renewal

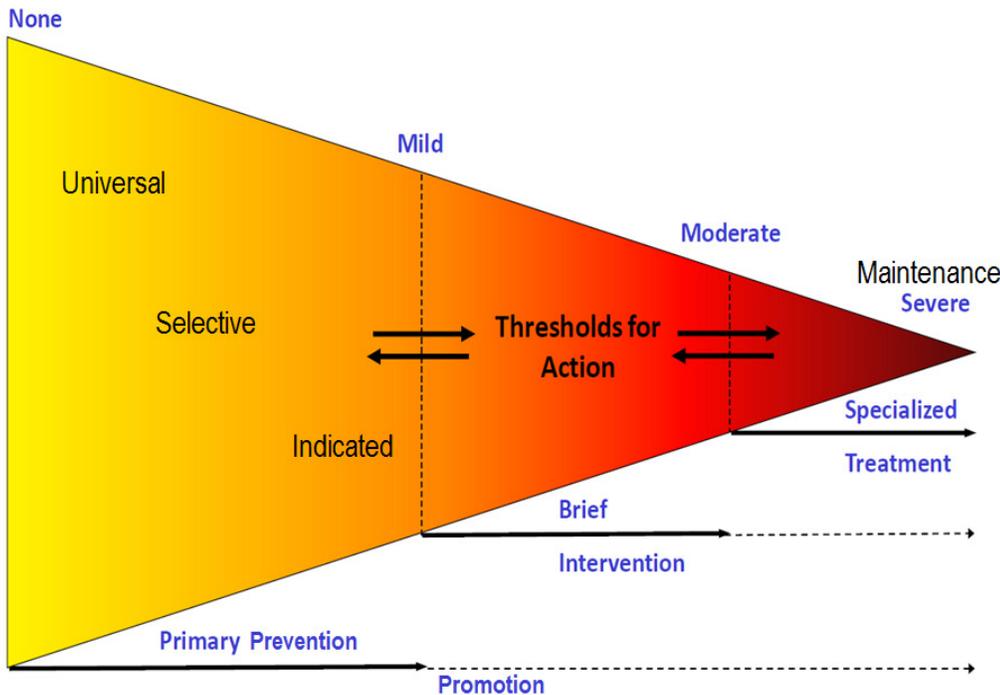
The Board is currently finalizing the requirements for gambling disorder training and continuing education and will provide further information when available to allow individuals the opportunity to obtain these hours prior to the launch of the endorsement. The training that has been offered through OhioMHAS and Recovery Resources over the last four years and at the annual conference will apply to the relevant hours of education needed for the endorsement.

Prevention

► Resources

For the second year, the State of Ohio dedicated a majority of resources to awareness and prevention of problem gambling in line with the expansion of casino-like venues statewide and the policy implications of the 2012 Ohio Gambling Survey. The 50 county ADAMH/ADAS boards were allocated a total of \$2.273 million for prevention services (60 percent of total allocation) with an option to request a waiver to use more or less dollars for prevention. Ten waivers were approved, of which three shifted additional dollars to prevention and five shifted funds to treatment (two with adjusted amounts pending).

New partnerships were forged that allowed dissemination of information to wider audiences that included veterans, seniors, teens, young adults/college students and the general public. Collaborative relationships to expand outreach were formed with the Ohio Treasurer’s Office Smart Money Choices program, county Adult Protective Services offices, Ohio Association of Senior Centers, colleges and universities, and other groups that invited presentations. On a state and community level, primary prevention is occurring to universal or broad audiences, to selective audiences of people who have some risk factors for problem gambling, and to indicated audiences of high-risk individuals who have some detectable signs that can lead to gambling disorder.



Annual Report 2014

► **50**
county mental health and addiction services boards shared the state allocation of \$2.273 million for Prevention services

► **21**
community coalitions are spreading a responsible gambling message in schools and other organizations

► **2.04 Million**
Ohioans were reached with Gambling prevention messages during SFY2014

► Community-Based Prevention

At the ADAMH/ADAS county board regional level, prevention of problem gambling took many forms. See the highlight map on pages 10-11 for specific outreach and prevention activities. Some community-based campaigns piggybacked on *Until* and *I Lost a Bet* as mentioned above, and others were keyed to local needs assessment with content and strategies aimed at reaching specific audiences. Twenty-one community coalitions have started to spread a responsible gambling message as part of their programming in schools and partner organizations. This is a 100 percent increase over last year!

Ohioans Reached with Prevention Messages in SFY 2014: 2.04 million

Treatment

► Treatment Data

With a full year of funding allocated to the ADAMH/ADAS boards in SFY 2014 for community services, a marked increase in clients screened for problem gambling and then diagnosed and/or provided treatment for gambling disorder began to be seen in the numbers reported:

Ohioans Screened: 25,966

Ohioans Diagnosed/Treated: 924 = 3.6%

The 2012 Ohio Gambling Survey estimated that 2.8 percent of Ohioans are at some level of risk to be problem gamblers. The Ohio Substance Abuse Monitoring Network examination of co-occurring substance use and gambling disorders estimated that approximately 25 percent of this specific population would have both disorders. The current rate of identification and treatment of gambling disorder – 3.6 percent – is consistent with the findings of the two Ohio studies, especially when considering that most people getting screened for problem gambling have entered an addiction services agency because of a substance abuse issue at this time. It is important to note that the clinician is concurrently reducing the impact of problem gambling when treating clients with a wide array of co-occurring disorders, including PTSD, depression, bi-polar, and others where gambling is used as a coping mechanism.

► Ohio Problem Gambling Helpline: 1-800-589-9966

According to statute (ORC 3772.062(A-B)), the Ohio Casino Control Commission, in conjunction with OhioMHAS and the Ohio Lottery Commission, establishes, operates, and publicizes “an in-state, toll-free telephone number Ohio residents may call to obtain basic information about problem gambling, the gambling addiction services available to problem gamblers, and how a problem gambler may obtain help.” OhioMHAS contracts with a 2-1-1 call center to provide the Helpline services. The Problem Gambling Helpline has a dedicated phone number with qualified referral and crisis intervention specialists answering the phone 24 hours a day. The Department maintains a list of agency service providers, as well as individuals in private practice who are qualified to provide treatment for gambling disorder. This list is continuously updated and shared with the Helpline staff. Monthly reports on calls received provide insight into the concerns of citizens who reach out for counseling and referrals for themselves or loved ones. Partners in ORG use the Helpline number on all materials, websites, and advertising and require its use on constituents’ marketing related to problem gambling. The Helpline received calls from 9,727 people during SFY 2014.

25,966

Ohioans were screened for problem gambling during SFY2014

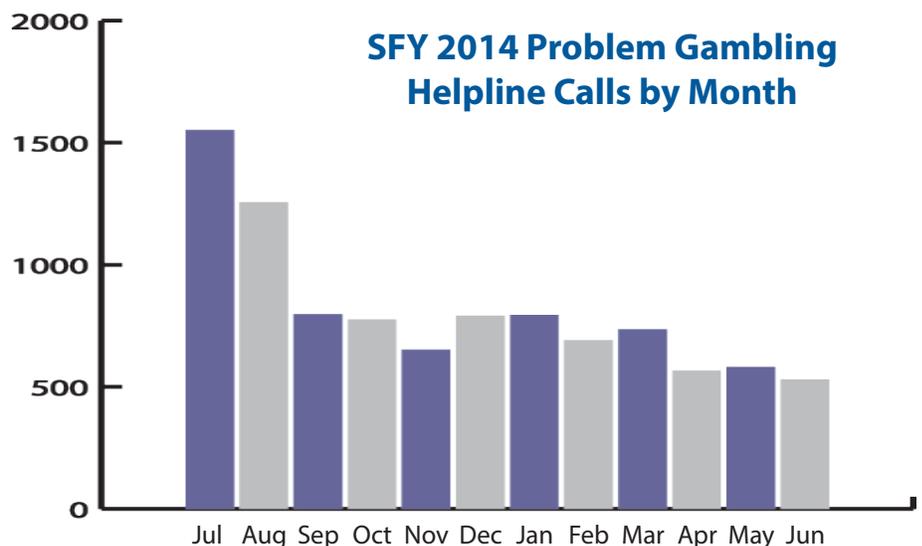
9,727

citizens called the Ohio Problem Gambling Helpline

Top Ten Counties for Calls

Cuyahoga	1490
Hamilton	966
Franklin	845
Lucas	351
Montgomery	318
Summit	248
Butler	132
Lorain	111
Mahoning	94
Wayne	92

Counties with 40 or more calls: Allen-43, Clark-64, Clermont-45, Delaware-40, Fairfield-51, Jefferson-41, Lake-78, Licking-40, Medina-60, Portage-44, Stark-86, Trumbull-60 and Warren-78



Problem Gambling Helpline - Types of Gambling Calls

Type of Gambling	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total	%
Bingo	3	3	2	3	1	0	1	0	4	1	2	1	21	0.20%
Cards/Dice (Non Casino)	10	7	7	6	4	3	6	2	4	1	4	1	55	0.53%
Casino Slots	90	127	113	110	110	99	114	91	142	124	87	110	1401	13.43%
Casino Tables	60	73	73	66	63	57	75	81	103	85	74	70	880	8.43%
Horsrace Betting/ Racino	7	12	9	7	2	8	5	4	5	4	0	5	103	1.00%
Internet Gaming	4	9	7	3	4	1	3	3	4	2	3	2	96	1.01%
Keno	1	1	1	5	6	3	2	2	1	4	1	0	27	0.26%
Lottery Games (Pick 3, Powerball etc.)	47	74	38	35	40	49	36	49	41	32	37	18	496	4.75%
Lottery Scratch-Offs	46	59	36	24	33	47	44	41	52	33	38	25	478	4.58%
Not Applicable	390	805	534	523	398	513	513	451	435	304	362	349	5577	53.43%
Other – Gambling														3.28%
Unknown/Would Not Disclose	797	35	12	12	5	11	11	6	13	14	21	13	950	9.10%
TOTAL														100.00

Consumer Affairs Topics

116 - Contest/Sweepstakes/Lottery Complaints
 46 - Gambling Establishment Complaints
 26 - Gambling Regulation
 737 - Gambling Self Exclusion Programs
 8 - Misc.

TOTAL = 934

Mental Health/Addictions

27 - Families/Friends of Compulsive Gamblers Support Groups
 90 - Gambling Addiction Hotlines
 118 - Gambling Addiction Prevention Programs
 593 - Gambling Counseling/ Screening /Treatment
 878 – Gambling/Addictions Support Groups
 15 - Mental Health/Crisis Intervention Hotlines
 14 - Mental Health Evaluation/Treatment
 37 – Misc.

TOTAL = 1772

Caller Demographics

38% Female • 35% Male • 27% Unknown
 22% age 18-44 • 46% age 45 and older
 56% calling for self • 44% calling for family/friend
 Average number of years gambling for caller = 1-3 years

46%
 of callers who reported
 their age were 45 and older

2015 Problem Gambling Strategies by Board Area

Allen/Auglaize/Hardin — Problem gambling prevention billboards and community support group launched.

Ashland — Providing evidence-based practices Life Skills training to elementary school children.

Ashtabula — Did an Environmental Analysis in Ashtabula County about gambling concerns.

Athens/Hocking/Vinton — Billboard campaign and problem gambling education through residential and driver intervention programs (DIP).

Belmont/Harrison/Monroe — Started screening all clients for problem gambling.

Brown — All clients being screened for problem gambling with the South Oaks Gambling Screen (SOGS) and SOGS-RA (adolescents).

Butler — Screened 1,300 clients for problem gambling.

Clark/Greene/Madison — Problem gambling prevention billboard campaign.

Clermont — Using *Playing It Safe* prevention curriculum and *Until* problem gambling prevention campaign.

Columbiana — Screened 2,555 and ran radio/newspaper campaign for problem gambling prevention.

Cuyahoga — Fielded *Hit Me* problem gambling prevention campaign and began five-week curriculum in juvenile detention center.

Defiance/Fulton/Henry/Williams — Screened behavioral health clients and conducted community education on problem gambling.

Delaware/Morrow — Delaware County PEACE (Prevention Education in All Classroom Environments) Collaborative conducting education.

Erie/Ottawa — Receiving Stacked Deck training for problem gambling prevention training in schools.

Fairfield — Held a community gambling summit and professional education session; conducted media outreach.

Franklin — Education for current clients and joined existing community coalitions to share knowledge and help sustainability.

Gallia/Jackson/Meigs — Coordinated multi-media ad campaign and services through Health Recovery Services.

Gauga — Community prevention/awareness presentations and trainings on problem gambling for human services professionals.

Hamilton — Community-wide media campaign, extensive client screening and student survey results.

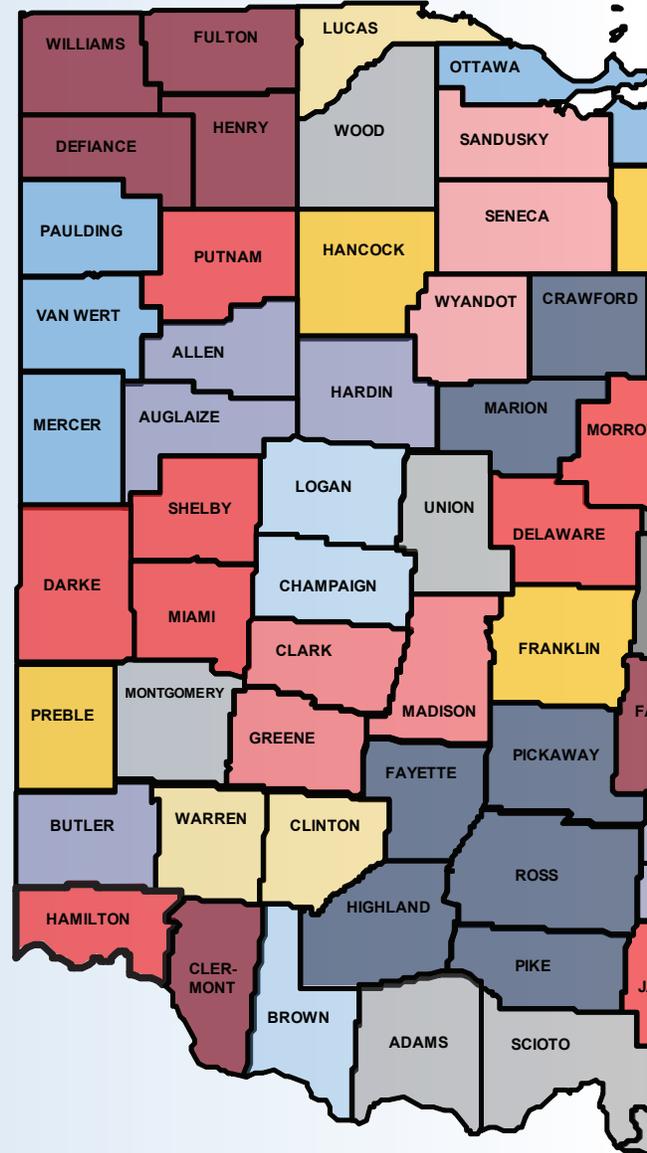
Hancock — Capacity-building training on problem gambling for behavioral health professionals.

Huron — Screened 789 clients for problem gambling.

Jefferson — Awareness campaign is generating referrals for treatment.

Lake — Using *Playing It Safe* problem gambling prevention curriculum.

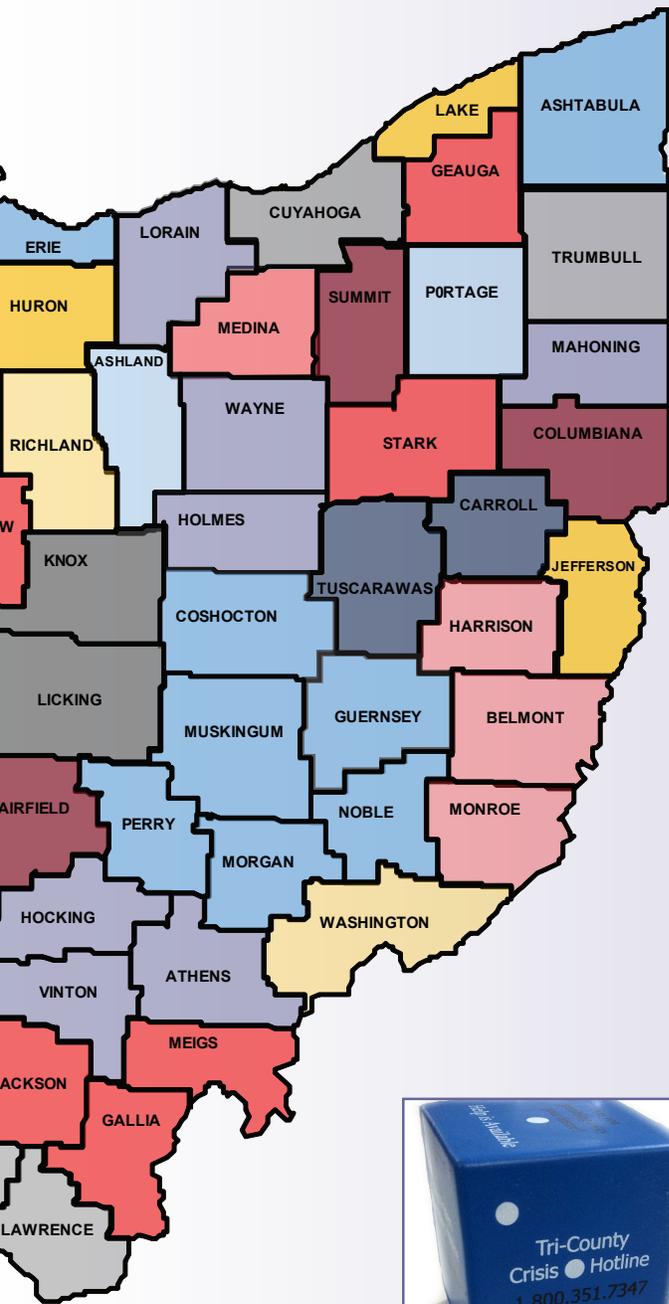
Licking/Knox — Created playitsafeohio.org website and online marketing effort for problem gambling prevention.



Web and mobile advertisements

The ADAMHS Board of Montgomery County created the web banner ad far left and Hamilton County did the mobile ad at immediate left. Pathways of Licking County presented a media campaign and website resource called "Play It Safe" (below).





Promotional items

Tri-County ADAMH (Miami, Darke, Shelby) used promotional dice (right) to get the word out on their hotline number, and Wood County advertised on pucks (below) at the Bowling Green State University hockey games.



- Logan/Champaign** — Education materials are in the community and problem gambling prevention has been added to school curricula.
- Lorain** — Screened 859 clients using Canadian Problem Gambling Index.
- Lucas** — Problem gambling awareness campaign using bus signs and community presentations; screening clients.
- Mahoning** — Meridian added gambling education to DIP and addiction programming; booth at Canfield Fair, began church outreach.
- Marion/Crawford** — Problem gambling prevention at youth-led events; client screening by Marion Area Counseling Center.
- Medina** — Information dissemination on problem gambling and screening addiction services clients.
- Mercer/Paulding/Van Wert** — Alternative activities and information dissemination related to problem gambling.
- Miami/Darke/Shelby** — Engaged in community outreach via billboards, fairs and festivals; working to send education kits to physicians.
- Montgomery** — Building Problem Gambling Community Coalition; developing Risky Business curriculum; finalizing planning.
- Muskingum Area/Six County** — Screened 456 clients; problem gambling prevention through Club SAVE in elementary schools.
- Portage** — Community presentations, media prevention campaign and gambling disorder treatment at Townhall II.
- Preble** — Distributed problem gambling materials at health fairs; screened clients.
- Putnam** — Presentations at community and professional meetings, health fairs; added EHR screening for problem gambling.
- Richland** — Added gambling discussion to student alcohol/drug addiction prevention presentation.
- Ross/Paint Valley** — All addiction clients being screened for problem gambling.
- Scioto/Adams/Lawrence** — Billboard campaign and problem gambling education materials distributed.
- Sandusky/Seneca/Wyandot** — Problem gambling education to residents and surveyed Terra State Community College students.
- Stark** — Screened 1,800 for problem gambling; conducted community and campus assessment.
- Summit** — Problem gambling media campaign reached at least 50 percent of residents; youth presentations on risky behaviors.
- Trumbull** — Problem gambling prevention/outreach through health fairs, schools and media campaign; client screening.
- Tuscarawas/Carroll** — Added gambling issue to youth-led prevention in schools; education shared at community events.
- Union** — Screened 190 clients for problem gambling.
- Warren/Clinton** — PRIDE survey included student gambling questions; screening of 1,165 clients.
- Washington** — Clients are being screened and treated for problem gambling.
- Wayne/Holmes** — Gambling added to high school prevention discussion and education at two county fairs.
- Wood** — Billboards, ads, promotional items at Bowling Green State University games; brochures distributed at community events.

Best Practice Programs Update:

► Prevention and Treatment

Since 2002, problem gambling prevention, identification, and treatment services have been offered at five addiction agencies in Athens, Cincinnati, Cleveland, Toledo and Youngstown; treatment and prevention services for problem gambling were added in Columbus in 2011. These programs are supported with funding from the Ohio Lottery Commission, supplemented in many areas with additional funds from county boards' OhioMHAS problem gambling allocations. As of Sept. 30, 2014, the six best practice programs have served the numbers of individuals as follows:

Screened: 5,032

Diagnosed/Treated: 264 = 5.2%

Educated: Approx. 17,000 agency clients, college students, community members, criminal offenders

5,296
Ohioans were screened, diagnosed and/or treated by best practice programs in these six counties: Athens, Cincinnati, Cleveland, Columbus, Toledo and Youngstown

► Statewide Performance Measures Update

MEASURE	QTR 1	QTR 2	QTR 3	QTR 4	TOTAL
No. exposed to problem gambling prevention messaging					2.04 million (quarterly data N/A)
No. of community coalitions engaged in problem gambling prevention					21 [Drug-Free Community & PG-specific Coalitions] (quarterly data N/A)
No. who called the Helpline	3,605	2,220	2,222	1,680	9,727
No. screened with approved tools		14,355		11,611	25,966*
No. with gambling disorder diagnosis/treated		682		242	924*
No. with continuing care plan and reduction in life-damaging consequences					[will be gathered for first time in SFY 2015]

*Partial-year data



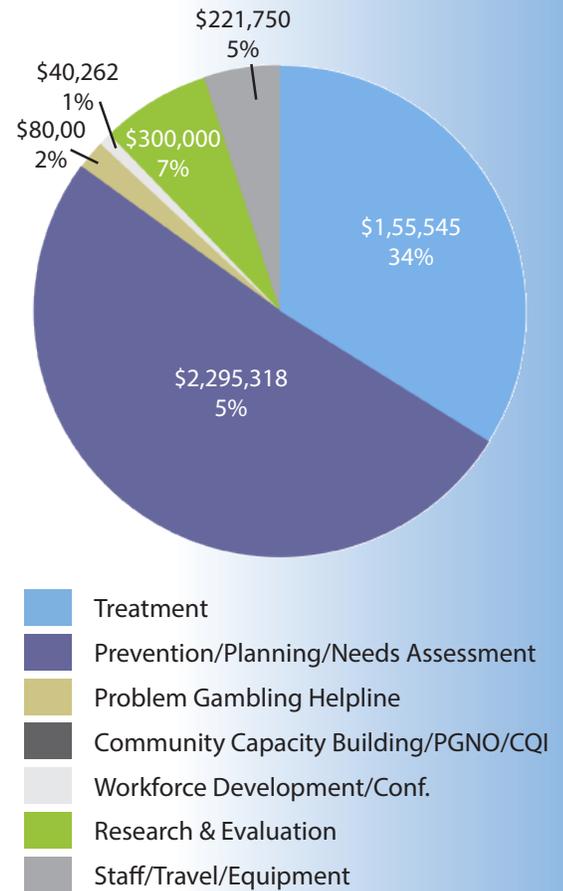
Billboards

Trumbull County focused on the consequences of problem gambling to families.

5JLO Problem Casino Gambling and Addictions Budget

	SFY 2014	SFY 2015 (est.)
Allocations to County		
ADAMH/ADAS Boards	\$ 3,788,863	\$ 3,788,863
Problem Gambling Helpline	80,000	80,000
Infrastructure/Capacity Development		
PG Prevention Training & Resource Center	30,262	49,800
Evidence-Based Practice & Outcomes Grants		1,238,900
CQI Field Agent		45,000
March Conference Support	10,000	10,000
Problem Gambling Network of Ohio (PGNO) Grant		20,000
Operations		
Personnel	211,000	211,321
Memberships, Marketing, Travel, Education	32,750	32,750
Research		
System Review Analysis		40,000
2012 Ohio Gambling Survey (Kent State raking)	40,000	
2016 Ohio Gambling Survey	230,000	230,000
Statewide Youth Survey	30,000	30,000
Total 5JLO Expenditures	4,452,875	5,776,634
Race Track Relocation Fee		500,000
Cash Reserve	2,907,827	3,108,018

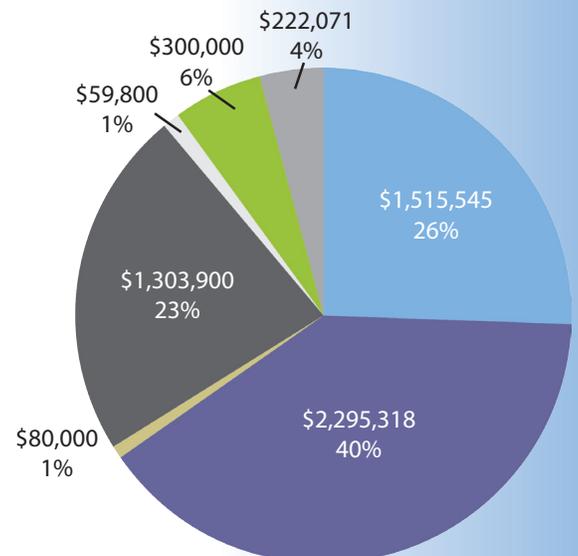
SFY 2014 Funding Breakdown



5T90 Ohio Lottery Commission (Interagency Agreement) Budget

	SFY 2014	SFY 2015
PG Treatment Training	50,000	50,000
March Conf. support	10,000	10,000
Best Practice Programs x 6 Support	275,000	375,000
Total 5T90 Expenditures	\$335,000	\$435,000

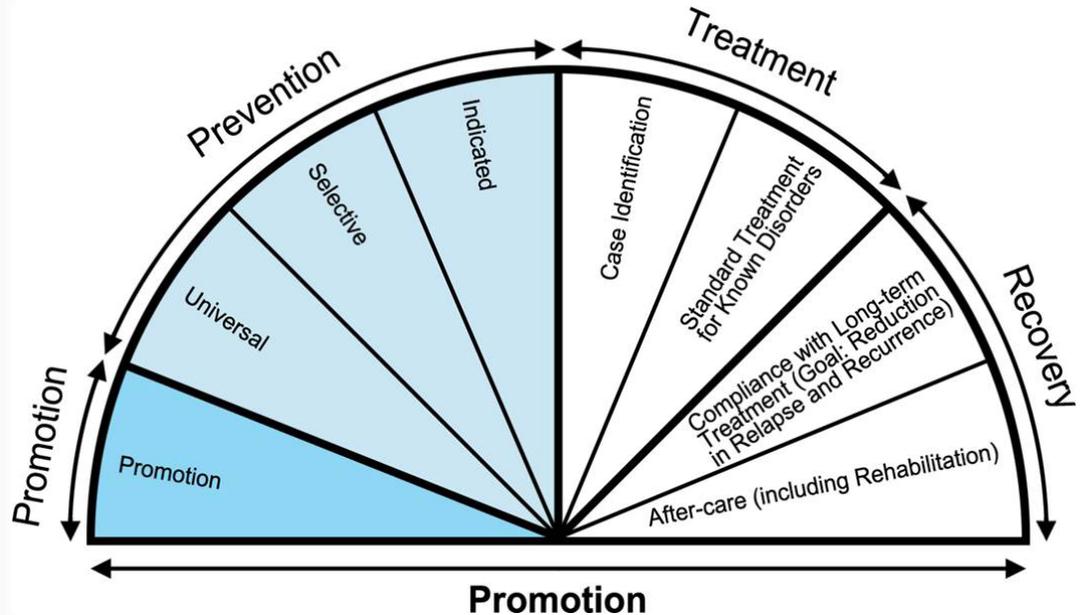
SFY 2015 Funding Breakdown



2015 Plan for Problem Gambling Services

Overview

The State of Ohio continues to build strategically on a continuum of care designed to prevent or delay the onset of problem gambling and provide early intervention and identification, and provide treatment of gambling disorder, and recovery support services for those in long-term recovery. The Continuum of Care model below provides a visual representation of behavioral health and wellness efforts.



Source: Committee on Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Young Adults, 2009.

All related efforts by OhioMHAS and the behavioral health field are designed to strengthen this system of care so that anyone who can benefit from prevention or treatment of problem gambling has access to appropriate services. For SFY 2015 and beyond, the department requires the county ADAMH/ADAS boards to include their plans for problem gambling services in their annual Community Plans.

Evaluation

The department will be taking significant steps in SFY 2015 to engage in an appropriate evaluation to ensure that the work underway and in planning stages will lead to a high-quality system of care for prevention, treatment and recovery of gambling disorder that is effective and valued by all Ohioans.

State System Review

OhioMHAS will contract with an expert in the problem gambling field who has done state system reviews across the nation. The contractor will be familiar with Ohio's current service system and will provide review and analysis and will make recommendations for improvement and sustainability. This work will take place throughout SFY 2015 with a final report due prior to June 30, 2015.

Continuous Quality Improvement

On a micro level to ensure quality control, consistent service delivery, and data collection, the department will engage a professional with expertise in Continuous Quality Improvement (CQI), who will work directly with ADAMH/ADAS boards and their service provider agencies. The CQI Field Agent will also meet with Bureau of Problem

Gambling staff and the state's experts in prevention and treatment of gambling disorder to capture and quantify what quality services look like and then to provide training and technical assistance to the field for enhancement of services. This contractor will serve the current system, as well as new programs brought up under the OhioMHAS Office of Prevention and Wellness Request for Proposals currently underway. More information on the RFP follows.

Data Collection for SFY 2015

Reporting for problem gambling services for SFY 2014 was in paper form. For SFY 2015 and beyond, all prevention program entries, semi and annual reports and outcomes reporting will be entered electronically in the Proving Ohio's Prevention Success (POPS) system for all entities that receive problem gambling services funding; this will also include treatment of problem gambling data entry for SFY 2015 only.

An update of the Ohio Behavioral Health (OHBH) Module to include treatment of problem gambling outcomes will be completed and available for use in SFY 2016. Until then, problem gambling treatment outcomes and demographics will be collected in POPS for SFY 2015. In SFY 2016 and beyond, problem gambling treatment data will be entered into OHBH for an account of diagnoses, services, client demographics and outcomes.

Capacity Building

Evidence-Based Practice (EBP) and Outcomes Demonstration Grant Projects

For SFY 2015, the department has released an extensive request for proposals designed to enable innovative boards and provider agencies to review existing service models, implement strategies, and evaluate efforts for best outcomes. Currently, few evidence-based practice models for prevention and treatment of gambling disorder exist. Further, to illustrate the benefits of outcomes collection, pilot programs will gather data that describes both the demographics of people with gambling disorder and the ongoing results of treatment for the disorder.

The goal for this \$1.2 million in funding is to support the development and implementation of evidence-based practice models for prevention and treatment of gambling disorder and/or to incentivize service systems that prioritize data collection toward achievement of effective outcomes. The funds will be awarded in September 2014 for use through the fiscal year. It is anticipated that year two funding will be available for the most promising projects to incentivize work toward nationally recognized evidence-based practices in problem gambling prevention and/or treatment.

Regional and Online Trainings and State Conference

Regional training schedules for prevention and treatment professionals will be announced in the fall of 2014.

Prevention

For awareness and prevention of problem gambling, plans are to focus training on the front line work being done in communities, potentially best practices from other states. To further support Ohio's efforts towards fostering an evidence-based best practice model for prevention, there will be a concentration on developing the "**Smart Bet**" curriculum for 18-25 year-olds. This will be disseminated statewide via regional Training of Trainers for a consistent roll-out of the model, and resources will be posted to the online DFAA Problem Gambling Prevention Resource Center.

Treatment

The foundational Stage 1 and 2 training sessions for treatment of gambling disorder will again be offered regionally, along with new seminars to provide hands-on experiential training in treatment, care planning, and continuing care planning. This focus has been requested in the evaluations of gambling treatment trainings over the past year.

 **1.2 Million**
in funding will support evidence-based practice models for prevention and treatment and incentivize data collection



Online training sessions will be written and posted for free access to enhance both prevention and treatment professionals' education related to gambling disorder.

Ohio Problem Gambling Conference

The annual Ohio Problem Gambling Conference will again take place over 1.5 days in Columbus and will be sponsored by the Ohio for Responsible Gambling (ORG) partners. The conference will highlight Problem Gambling Awareness Month. Plans are underway to develop an exciting, educational agenda featuring renowned speakers in the field of problem gambling prevention, treatment, and research. This event hosts experts in the most current science-based practices from Ohio and beyond to breed enthusiasm and creativity for the state system of care.

Prevention/Awareness Plans

Statewide and Community Problem Gambling Awareness and Prevention Campaigns

The Ohio for Responsible Gambling partners are committed to ensuring that Ohioans have a constant, consistent message that gambling can be fun entertainment, but too much gambling can cause problems for an individual or a family. To ensure that an effective, targeted message of safe and responsible gambling is disseminated, the Ohio Lottery Commission will fund an extension of the *I Lost a Bet* statewide campaign for SFY 2015 on behalf of ORG.

At the community level, ADAMH/ADAS boards and provider agencies launched a number of local best practice campaigns after assessing needs with surveys and community forums. Billboards, t-shirts, websites, newspaper ads, and other creative methods were enlisted to get the word out that responsible gambling makes sense. Samples of awareness messages developed throughout the state can be seen through this publication.

Problem Gambling Awareness Month

Representatives from the behavioral health field and ORG will convene in late summer-early fall 2014 to put together an exciting package of resources and tools that will make Awareness Month events and activities relatively turnkey in the community. OhioMHAS Office of Public Affairs will coordinate the resulting toolkit and release so that any organization/community that wants to shine a light on problem gambling awareness can do so by utilizing the simple-to-use resources. In SFY 2014, a localizable press release/editorial template for Problem Gambling Awareness Month was posted on the OhioMHAS website. The 2015 resources will provide templates for a broader strategy aimed at prevention of problem gambling.

Development of "Smart Bet" for 18-25 year-olds

The *Smart Bet* curriculum, originally released by Invitation Health Institute of Minnesota, will be developed into a useable prevention model for prevention of problem gambling for ages 18-25. The roll-out across the state will include a Training of Trainers seminar, materials and handouts. Vendor Drug-Free Action Alliance will undertake this work on behalf of OhioMHAS and the ORG partners.

Treatment Plans

Intake and Retention

As more Ohioans receive screening for problem gambling – either because they came to a service agency with a substance use, mental health or gambling disorder – the challenge of engaging that client in treatment continues to be raised. This concern has been noted in other states and countries, and Ohio has joined the conversation to troubleshoot the issue and work toward best practices in intake and retention. The addition of a Continuous Quality Improvement expert who will work face-to-face

Tip #1
Set limits on time and money spent.

Know your limits, so you can have fun and stay in control while gambling.
Find more safe gambling tips at PlayItSafeOhio.org.

Concerned about your gambling?
Confidential support is available in Licking and Knox Counties. Call 2-1-1 or 1-800-544-1601.
Brought to you by Pathways of Central Ohio and Mental Health and Recovery for Licking and Knox Counties.

with agency staff should improve overall identification and retention. In addition, OhioMHAS staff is calling individual ADAMH/ADAS boards and provider agencies to help troubleshoot these concerns. As a possible step toward developing an Ohio remedy, OhioMHAS and the behavioral health field will consider reaching out to NIATx in SFY 2016 for training and technical assistance since they have implemented a number of similar studies in other states. NIATx is a national leader in process improvement for better outcomes and has worked in Ohio on many behavioral health projects.

Screening, Brief Intervention and Referral to Treatment (SBIRT) Pilot

In SFY 14, OhioMHAS was awarded a five-year, \$10 million grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) for a statewide SBIRT initiative to better address the needs of Ohio's adults in emergency departments, primary care and community health settings. In SFY 2015, the department plans to use carryover funding to seed a pilot SBIRT site where questions will be added to the screenings to identify potential gambling problems. The initial site will be in Youngstown with a potential to expand to all Ohio sites or 30,000 patients screened per year. It is anticipated that the pilot would begin in fall 2014.

Best Practice Programs

As mentioned above, Ohio's problem gambling best practice programs have received supplemental funding from OhioMHAS through the Ohio Lottery Commission for a number of years. For SFY 15, the two state agencies have agreed that based on numbers served for gambling-related diagnoses, increases in funding are warranted for Maryhaven in Columbus and Center for Chemical Addictions Treatment (CCAT) in Cincinnati. Both agencies will receive an additional \$50,000 for a total of \$75,000/year, equal to the funds received through this compact by Recovery Resources of Cleveland. The six funded programs serve as the lead agencies in the state for professionals qualified to treat gambling disorder and for use of best practices in identifying and treating this population.

Problem Gambling Network of Ohio Capacity-Building Grant

In its role of providing support to problem gamblers, their families and the professionals who assist them, the PGNO has been granted funds from OhioMHAS to build capacity and strengthen infrastructure for this growing organization. PGNO serves as the advocacy arm for individuals and families that are affected by problem gambling, and is the Ohio affiliate to the National Council on Problem Gambling. A strong PGNO benefits Ohio citizens and the system of care for problem gambling services.

Research: Current and Future

2012 Ohio Gambling Survey Cluster Data Analysis

The 2012 Ohio Gambling Survey provided baseline measures for statewide problem gambling prevalence tied to general demographic factors. Additionally, this survey provided a number of attitudinal measures that will be useful as work continues with partners to bring better awareness of responsible gambling and how/when an individual or family should get help for a gambling disorder. The 2012 survey also collected 600 surveys for the geographic areas of Cincinnati, Cleveland, Columbus and Toledo. Analysis of the combined oversampled areas and the state sample is currently underway, and a final report is expected by November 2014.

Initial analysis added a further refined look at the correlate data for gambling prevalence, race/ethnicity, and age:

- ▷ 2.8% of Ohioans at some level of risk for problem gambling; about 250,000 people
- ▷ 18-25 yr. old White males at highest risk
- ▷ African-American males at higher risk ages 25-64 compared to White males
- ▷ African-American females at higher risk ages 18-64 compared to White females
- ▷ Older adults 65+ at lowest risk



▶ **2.8%**

of Ohioans are at risk for problem gambling (about 250,000 people). The highest risk is among White males ages 18-25

73%

of college students surveyed in Ohio's four largest cities reported participation in at least one type of gambling during the past year

College Student Gambling Targeted Response Initiative (TRI)

The purpose of the young adult College Student Gambling TRI was to provide accurate epidemiological descriptions of gambling behaviors and patterns of problem gambling among a segment of Ohio's youth population: college-aged individuals 18 - 25. The TRI was undertaken as part of the Ohio Substance Abuse Monitoring (OSAM) Network research model that regularly gathers substance abuse and addiction trend information via key informants throughout the state. For the TRI, data was collected through individual and focus group interviews from January through June 2014.

Full analysis of OSAM's College Student Gambling TRI is underway.

- ▷ 396 college students (18-25 years old) participated from campuses in Cincinnati, Cleveland, Columbus and Toledo
- ▷ 73.2% of students reported participation in at least one type of gambling during the past 12 months
- ▷ Lottery, sports betting (e.g. March madness pools) and casino gambling were the top three reported gambling types (49%, 24.2% and 24% respectively)
- ▷ There were 390 complete problem gambling screens collected (Canadian Problem Gambling Index)
- ▷ 18.2% screened positive for low-risk gambling (71 students); 5.9% screened positive for moderate-risk gambling (23); and 2.1% screened positive for problem gambling (8); 26% total of 18-25 year-old college students screened positive for some level of risk for problem gambling

Problem Gambling Workforce Capacity Survey

In August 2014, OhioMHAS, in partnership with the state's professional licensing and credentialing boards, fielded two Problem Gambling Workforce Capacity Surveys to assess the state's behavioral health professionals' and agencies' capacity to provide prevention and treatment services related to problem gambling. The surveys include questions related to the new gambling treatment endorsement for Licensed Chemical Dependency Counselors. Data analysis from the nearly 1,000 practitioners and 93 service agencies that completed the survey shows that approximately 250 professionals plan to apply for the Problem Gambling Treatment Endorsement in the next 12 months. Below are some highlights of the Practitioner Survey findings.

- ▷ 35 percent of practitioners screen for gambling disorders
- ▷ In the past year: the majority (80 %) reported treating 10 or fewer individuals for gambling disorder; approximately 29 percent reported not seeing any patients for gambling disorder; and only 4 percent reported seeing more than 20 patients for gambling addiction
- ▷ 357 participants reported offering treatment to persons with gambling disorder
- ▷ 37 percent of participants reported attending gambling addiction training, and 40 percent plan to attend training in the next 6 months
- ▷ Financial counseling is offered by 10 percent of counselors, and 55 percent include work with family members

Statewide Gambling Survey — Round Two

As initially stated with regard to the 2012 Ohio Gambling Survey, OhioMHAS plans to field a second statewide survey to track the impact of expanded gambling options in Ohio. The second statewide survey on problem gambling activity and attitudes will be developed in SFY 15 and launched in SFY 16 to provide enough responses to generate county-level estimates of at-risk and problem gambling prevalence. Administrative funds of \$230,000 are being set aside in each fiscal year to support the survey and analysis in SFY 17.

Statewide Youth Gambling Survey

An amount of \$30,000 is being set aside each year, SFY 2014 – SFY 2016 to support the inclusion of problem gambling questions on a statewide survey of youth related to risk factors for multiple problem behaviors. This will provide a baseline of attitudes and practices related to problem gambling for youth ages 14-18. Additional funds needed for the survey were approved as part of HB 483. The survey is expected to launch in SFY 16.

Conclusion

As Ohio expands access and fine tunes the quality of its service array, the incoming numbers are painting a clearer picture of gambling and who is at risk to develop a related behavioral health disorder. As evidenced by the 2012 Ohio Gambling Survey, the biggest correlates of risk for problem gambling were substance use and abuse and stress-related problems. Findings from the 2012 OSAM Co-Occurring Substance Abuse and Problem Gambling study and the 2014 OSAM TRI of college-age students support the correlate findings.

The fact that the vast majority of those being screened in the past year for gambling disorder are individuals who present for treatment for substance abuse and/or mental health issues aligns statistically with the two studies mentioned above. The approximate 25 percent of individuals with co-morbid substance abuse and gambling conditions is completely consistent with the TRI's finding that 26 percent of college-age students are at some level of risk for problem gambling – related to their high rates of risky health choices.

During the first six months of SFY 2014, the rate of gambling disorder being found in Ohio's screened population, 3.6 percent, is much higher than the rate expected based on the prevalence study of the general population, .3 percent. To reinforce the accuracy of this data, one can look at the rate of gambling disorder being identified in the six best practice programs – 5.2 percent. This comparison data illustrates that in the near term, Ohio's behavioral health system will continue to serve higher numbers of people with co-occurring behavioral health conditions, include gambling disorder. In the long term, the percentage of individuals presenting for treatment specifically for gambling problems will gradually increase, and clients will often show symptoms of related behavioral conditions, such as substance abuse and depression.

So, while the state is still in the early stages of building a quality system of care for gambling disorder, the numbers served are demonstrating consistent professional training and support for Ohioans in need. OhioMHAS and all its stakeholder partners pledge to continue the evidence-based system-building necessary to ensure an effective continuum of care to prevent or delay problem gambling behavior and to treat those diagnosed successfully for the stability of the family and the community.



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