



Iowa Department of Public Health
Office of Problem Gambling Treatment and Prevention
October 2013

Gambling venues in Iowa

Over the past 20 years, Iowa has seen a dramatic increase in gaming opportunities. As of October 2013, Iowans can choose from 18 casinos licensed by the Iowa Racing and Gaming Commission, three tribal casinos, 2,400 lottery outlets, 3,350 social and charitable gaming licenses, as well as numerous internet and other illegal gaming opportunities. The cumulative effect of this increase is easy access to gambling in every county of the state.

Problem gambling defined

For most people, gambling is recreational. However, for some people, gambling leads to serious problems. Problem gambling means participation in any form of gambling activity that creates a negative consequence to the gambler or to the gambler's family, employer, or community. The adjacent table identifies the signs and symptoms of problem gambling.

Overview of services

Services funded through the Iowa Department of Public Health (IDPH) Office of Problem Gambling Treatment and Prevention are guided by a public health approach that considers the

biological, behavioral, economic and cultural determinants that influence gambling and health. This approach incorporates a balance of outreach, education, prevention, treatment, and recovery support efforts that work together to minimize gambling's potential negative impacts on individuals, families and communities, while recognizing gambling's availability, cultural acceptance and economic appeal.

Gambling Disorder (DSM-5) - Signs and Symptoms <i>Four or more of the following in a 12-month period</i>
1. Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
2. Is restless or irritable when attempting to cut down or stop gambling.
3. Has made repeated unsuccessful efforts to control, cut back or stop gambling.
4. Is often preoccupied with gambling (e.g., having persistent thoughts of reliving past gambling experiences, handicapping or planning the next venture, thinking of ways to get money with which to gamble).
5. Often gambles when feeling distressed (e.g., helpless, guilty, anxious, depressed).
6. After losing money gambling, often returns another day to get even ("chasing one's losses").
7. Lies to conceal the extent of involvement with gambling.
8. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling.
9. Relies on others to provide money to relieve financial situations caused by gambling.

IDPH contracts with eleven local agencies to provide problem gambling prevention, treatment and recovery support services in eleven service regions that together encompass all 99 Iowa counties. Problem gambling treatment programs must be licensed by IDPH and are selected for contracting through a competitive request for proposals process.

Funded problem gambling services include:

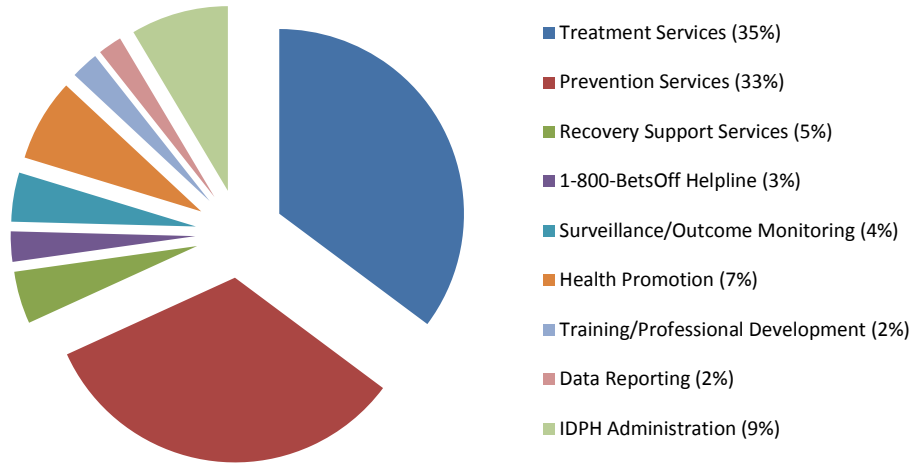
- **Counseling** for problem gamblers and those affected by the gambling of a family member.
 - Phone- and web-based counseling – defined as “distance treatment” – is available for eligible persons with barriers to accessing face-to-face treatment services.
- **Education and prevention** provide information on the risks and responsibilities of gambling and assistance for individuals at increased risk of problem gambling.
- **Helpline referral and education** through 1-800-BetsOff and www.1800betsoff.org.
- **Recovery Support Services** provide recovery supports like transportation assistance for persons receiving problem gambling counseling.
- **Training and professional development** for counselors providing treatment for problem gambling and common co-occurring disorders (substance use and mental health disorders).

Problem Gambling Prevention and Treatment Services				
State Fiscal Year	# of Prevention Hours	# of Clients Treated	# of Gambling Calls to 1-800-BetsOff Helpline	Traffic to 1800BetsOff.org
2005	3,447	1,009	2,756	-
2006	3,500	1,205	3,297	-
2007	5,963	1,146	3,613	-
2008	4,814	940	3,820	-
2009	5,816	905	3,435	-
2010	9,077	948	3,942	-
2011	7,435	789	3,695	6,156
2012	6,602	728	4,029	13,599
2013	7,682	678	4,122	14,353

Funding - IDPH receives an appropriation from the State General Fund for problem gambling services.

IDPH Problem Gambling Services State Fiscal Year Budget				
ACTIVITY	2014 (budget)	2013 (Actual)	2012(Actual)	2011 (Actual)
Treatment Services	1,095,085	794,831	819,437	1,080,645
Prevention Services	1,026,517	1,057,141	908,837	864,532
Transitional Housing	-	-	-	79,560
Recovery Support Services	142,743	50,999	36,106	-
1-800-BetsOff Helpline	82,300	80,195	80,440	77,382
Surveillance (BRFSS)/ Treatment Outcome Monitoring	133,800	113,939	38,679	111,737
Health Promotion	225,000	227,222	200,000	350,700
Study of Internet Poker (SF 526)	-	-	-	2,500
Training/Professional Development	75,200	78,217	333,832	38,042
Data Reporting System	65,000	67,766	105,184	177,000
IDPH Administration Costs	265,969	269,778	519,108	406,902
Appeal Board Claims	-	-	-	33,897
TOTAL	3,111,614	2,740,089	3,041,623	3,222,897

FY 2014 Problem Gambling Treatment and Prevention Services



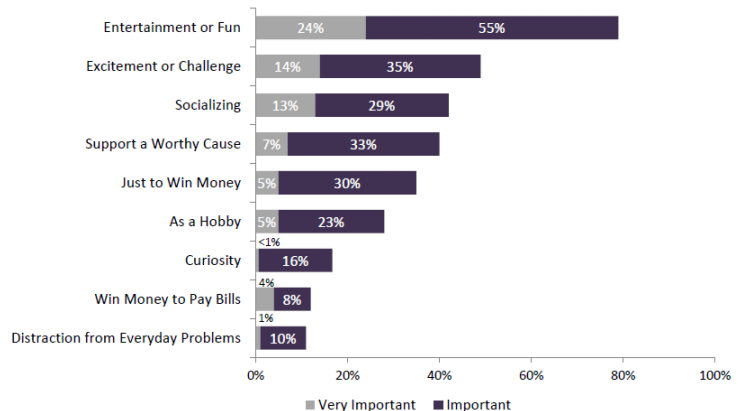
Gambling Prevalence in Iowa

In 2011, IDPH funded the [*Gambling Attitudes and Behaviors: A 2011 Survey of Adult Iowans Survey*](#) conducted by the University of Northern Iowa Center for Social and Behavioral Research (UNI-CSBR). The primary purpose of the survey was to collect data from adult Iowans about:

- Types and frequency of gambling activities,
- Prevalence of problem gambling, and
- Awareness and opinions of publicly-funded gambling treatment services.

The survey questionnaire was completed by a random sample of 1,700 adult Iowans weighted to reflect the Iowa adult population and provided the following information:

- **Gambling rates among adult Iowans:** The prevalence rates of gambling in any form among adult Iowans were: 91% lifetime, 69% during the past 12 months, and 42% during the past 30 days. The most common gambling activities during the past 12 months were: raffle tickets (42%), Iowa Lottery tickets (38%) and slot machines (24%). About half of adult Iowans said they seldom gamble and 4% said they gamble often or very often.
- **Problem gambling prevalence among adult Iowans:** 14.5% of adult Iowans reported experiencing at least one symptom associated with problem gambling in their lifetimes and 12.1% reported at least one symptom during the past 12 months. Men were significantly more likely than women to report having experienced gambling problems.
- **Reasons for gambling:** The main reasons adult Iowans gave for gambling were for entertainment or fun (79%) followed by excitement or challenge (49%). See the chart for other reasons given.



- Impact of problem gambling on others:

The negative physical, emotional and financial consequences of problem gambling can affect family, friends, coworkers and others. More than 1 in 5 adult Iowans (22%) said they have been negatively affected by the gambling behavior of someone they know. Specifically, those who said they were negatively affected were as follows:

- Negatively affected by a family member's gambling: 9%
- Negatively affected by a friend/coworker's gambling: 11%
- Negatively affected by gambling behaviors of someone else they know personally: 15%

About 1 in 3 adult Iowans (34%) who have ever experienced symptoms of problem gambling said they had personally been negatively affected by someone else's gambling behavior.

In SFY 2013, IDPH initiated a pilot study with UNI-CSBR as a preliminary investigation of gambling behaviors and attitudes among Iowa college students. College gambling (as with all youth gambling) is a mostly hidden phenomenon that may require specialized education, prevention, and treatment. Key findings included:

- Almost seven in ten participants (68%) had gambled in the past year and 10% met at least one DSM-IV criteria for potential problem gambling.
- Among students who reported gambling in the past year, 14% said they gambled more than monthly.
- The majority of students who reported gambling in the past year said the largest amount of money they had ever gambled with, lost, or won in a single day was \$50 or less.
- Most students who reported gambling said they did so because it was a source of entertainment or fun.
- Males gambled at a much higher rate than females.
- Problem gambling was perceived by all participants as different from other addictions such as substance abuse, in part because gambling was not perceived to impact physical health and wellness.
- Among the survey and focus group participants, little was known about treatment for gambling problems.

For SFY 2014, to understand changes in Iowa gambling issues, including those related to the proliferation of Internet gambling options, IDPH has contracted with UNI-CSBR to update the 2011 Adult Attitude and Behaviors Survey.

Treatment effectiveness

IDPH contracts with UNI-CSBR to monitor and analyze problem gambling treatment outcomes. The [*2012 Iowa Gambling Treatment Outcomes System: A Paired Sample Analysis of Treatment Outcomes*](#) found significant improvements for persons who received state-funded treatment. Highlights:

- Gambling losses in the past 30 days: Among respondents who completed treatment, those reporting losses of \$500 or more in the past 30 days decreased from 47% at admission to 4% at discharge and 7% at follow-up.
- Change in gambling activities: At six-month follow-up, 90% of respondents said their gambling activities were much less now compared to when they entered treatment.
- Change in financial situation: 73% of respondents who completed treatment and 64% of respondents who left without completing treatment said their financial situation was better now than it was when they entered treatment.

- Current problem gambling symptoms: The number of symptoms respondents reported decreased from 4.7 symptoms at admission to 0.5 when they completed treatment.
- Changes in quality of life: 54% of those who completed treatment strongly agreed their life was better six months following treatment compared to when they entered treatment.

Prevention First: equipping Iowans to understand the risks and responsibilities of gambling

Problem gambling education and prevention services inform Iowans about the risks and responsibilities of gambling. This work takes place on many fronts. Examples include:

- A multi-media health promotion campaign to encourage Iowans to evaluate their gambling behavior and seek help if they have a problem
- Educating employers about the cost of problem gambling to their businesses
- Partnerships with state-regulated casinos to provide training to employees and education and information to patrons
- Partnership with the Iowa Lottery to inform players that help for problem gambling is available
- Prevention efforts through schools for youth who are considered at high risk

This multi-faceted prevention program has provided Iowans the resources to realize the benefits of regulated gaming and understand the potential harm that can come with it. For example:

- Despite a significant increase in gambling options in Iowa, there has been a slight decrease in the prevalence of pathological gamblers from 1995 to 2012¹.
- Two-thirds of adult Iowans say they are extremely or moderately confident that they would recognize the signs that a friend or family member has a gambling problem.
- 90% of adult Iowans are aware of the 1800-BetsOff Helpline.
- 94% of adult Iowans admire the courage of people who seek help for a gambling problem.
- 79% of adult Iowans say it would be very or fairly easy to talk with someone if they have a gambling problem.
- Nearly 1 in 4 (24%) of those who have experienced one or more problem gambling symptoms during the past 12 months said they have talked with someone about their gambling.

IDPH efforts to increase service accessibility and efficiency

In SFY2013, state-funded problem gambling services were provided to approximately 3.2%² of Iowans with a problem gambling disorder. This is significantly greater than the average of other states with publicly-funded problem gambling treatment (0.42%)³ but illustrates a significant gap between those who need services and the actual number served. IDPH continues to work with contractors to create a more efficient network of care that reaches Iowans in need of treatment. One example is the enhancement and expansion of standardized statewide distance treatment using phone and web-based tele-health options. While it's not feasible to offer treatment in every Iowa community, distance treatment options help Iowans with barriers to face-to-face treatment get the help they need.

¹ Black et al., *Prevalence of problem gambling in Iowa: Revisiting Shaffer's adaptation hypothesis*, [Annals of Clinical Psychiatry](#), vol 24 no. 4 (2012)

² Based on an estimated past year pathological gambling prevalence rate of .6% (Gonnerman, M. E., Jr. & Lutz, G. M. (2011) and the 2011 U.S. Census Bureau Population Estimates for Iowa.

³ 2010 National Survey of Publicly funded Problem Gambling Services, Association of Problem Gambling Service Administrators.

Service system transition plan

Four years ago, IDPH initiated a transition to a comprehensive and integrated resiliency- and recovery-oriented system of care for Iowans with addictive disorders. This system transition focuses on coordination and collaboration across problem gambling and substance use disorder education, prevention, treatment, and recovery support. All efforts are consistent with the 2008 legislative directives in SF 2425 and HF 811 and with state and national healthcare reform to-date.

Below is a listing of specific system transition categories and examples of progress made:

- **Program licensure standards** – Separate problem gambling and substance use disorder program licensure standards were combined into one integrated set of standards effective July 1, 2010.
- **Practitioner credentialing** – The integrated program licensure standards specify basic requirements for problem gambling and substance abuse treatment counselors.
- **Training/professional development** – IDPH’s annual Governor’s Conference on Substance Abuse and annual Prevention Conference both include tracks on problem gambling.
- **Local collaboration** – Nine of the eleven state-funded problem gambling agencies also provide substance abuse prevention and treatment services.
- **Funding and funding methodologies** – Problem gambling reimbursement rates and methodologies were aligned with substance abuse services effective July 1, 2011.
- **Services and supports** – The distance treatment approaches used in problem gambling services are being implemented in IDPH-funded substance abuse treatment settings.
- **Outcome and performance measures** – Measures are being aligned between problem gambling and substance abuse services.

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