



**Iowa Department of Public Health
Office of Problem Gambling Treatment and Prevention
September 2016**

Gambling and Gaming in Iowa

During State Fiscal Year 2016, Iowans seeking to gamble could choose from 19 casinos licensed by the Iowa Racing and Gaming Commission, three tribal casinos, 2,400 lottery outlets, and 2,739 entities holding social, charitable, and amusement gaming licenses. These venues were in addition to a broad range of social media and smartphone gambling-like games and applications, as well as numerous Internet and other illegal gaming opportunities.

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 one or more negative consequences to the gambler, their family or loved ones, employer, or community. The adjacent table lists signs and symptoms that can help determine if an individual should seek help for gambling behaviors.

Gambling Disorder – Diagnostic Criteria¹	
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.

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 the potential negative impacts of gambling on individuals, families and communities, and recognizes gambling's availability, cultural and social acceptance, as well as monetary appeal.

¹ American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

IDPH contracts with 11 local agencies to provide problem gambling prevention, treatment and recovery support services in 11 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:

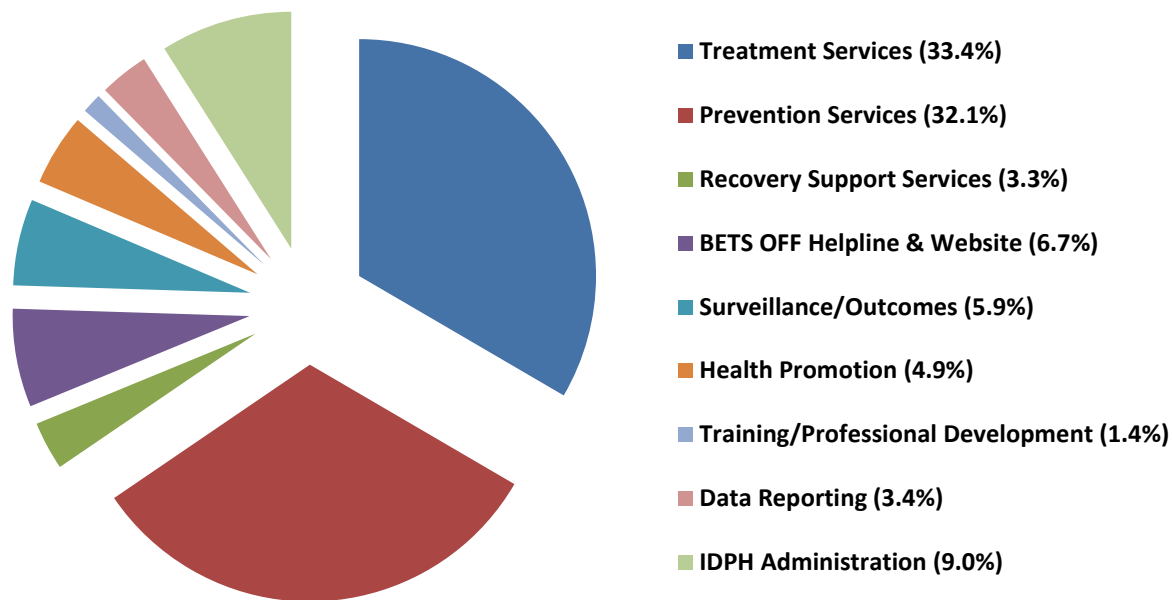
- **Counseling** for problem gamblers and those affected by the gambling of a family member. This includes e-therapy (phone, secure web-based portals, and video-conferencing), which is available for eligible persons with barriers to accessing face-to-face treatment services.
- **Prevention Services** providing information and education on the risks and responsibilities of gambling and assistance for individuals at increased risk of problem gambling.
- **Helpline referral and education** through 1-800-BETS OFF and www.1800BETSOFF.org, including a live chat option initiated in 2014.
- **Recovery Support Services** providing helpful supportive services like transportation assistance for persons receiving problem gambling counseling.
- **Training and professional development** for counselors providing treatment for problem gambling and common co-occurring conditions like substance use and mental health disorders.

Problem Gambling Services - Utilization				
State Fiscal Year	# of Prevention Hours	# of Clients Treated	# of Gambling Calls to 1-800-BETS OFF Helpline	Traffic to www.1800BETSOFF.org
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
2014	7,710	602	5,417	11,208
2015	8,781	888	6,311	9,524
2016	9,282	697	5,792	9,689

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

Problem Gambling Services - Expenditures				
Activity	2017 Budget	2016 (Actual)	2015 (Actual)	2014 (Actual)
Treatment Services	947,700	640,305	771,557	853,542
Prevention Services	909,758	956,104	921,933	999,027
Recovery Support Services	93,729	45,636	57,024	51,234
1-800-BETS OFF Helpline/Website	190,440	87,580	114,100	88,967
Surveillance (BRFSS)/Outcome Monitoring	167,460	170,580	90,591	145,872
Health Promotion	138,634	375,829	122,372	136,776
Training/Professional Development	38,360	107,383	121,958	78,359
Data Reporting System	95,163	231,196	106,679	85,731
IDPH Administration Costs	255,370	271,697	268,408	372,813
TOTAL	2,836,614	2,886,310	2,574,622	2,812,321

SFY 2017 Problem Gambling Services Budget



Gambling Prevalence in Iowa

In SFY 2016, IDPH funded the [Gambling Attitudes and Behaviors: A 2015 Survey of Adult Iowans](#) by the University of Northern Iowa Center for Social and Behavioral Research (UNI-CSBR). The purpose of the survey, a follow-up to similar 2011 and 2013 reports, 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 was completed by a random sample of 1,825 adult Iowans, weighted to reflect the Iowa adult population. The survey provided the following information:

- Gambling rates among adult Iowans: The 2015 prevalence rates of gambling among adult Iowans were: 87.6 percent lifetime (ever), 68.1 percent during the past 12 months, and 39.1 percent during the past 30 days. The rate of gambling behavior in the past 12 months in 2015 was lower than 2013, but comparable to 2011 (68.1 percent vs. 68.9 percent). It is estimated that almost 1.6 million adult Iowans gambled during the past 12 months.
- At-risk problem gambling prevalence among adult Iowans: 12.6 percent of adult Iowans (294,222) reported experiencing at least one symptom associated with problem gambling during the past 12 months. Of these at-risk Iowans, 6 percent reported they were currently having gambling problems.
- Gambling activities in the past 12 months: The most common gambling activities in the state were lottery (38 percent) and raffle tickets (37 percent), followed by scratch tickets and pull tabs (32 percent), slot machines (24 percent), and card games with friends or others (not at casinos) (14 percent).
- Impact of problem gambling on others: The negative physical, emotional and financial consequences of problem gambling can affect family, friends, coworkers and others.
 - About one in five adult Iowans (22.6 percent) said they know a person whose gambling may be causing problems (financial, physical, emotional).
 - 15.2 percent (355,325) reported being negatively affected by other's gambling behaviors.

In SFY 2015, IDPH funded the [Iowa Youth Survey 2014: Problem Gambling Report](#) by the Iowa Consortium for Substance Abuse Research and Evaluation (University of Iowa). The report, which is a follow-up to a 2012 report, addresses four questions on youth gambling behaviors, using 2014 Iowa Youth Survey (IYS) data gathered from more than 76,000 6th, 8th, and 11th graders:

- Who gambles among 6th, 8th, and 11th graders in Iowa? 25 percent of all students reported gambling at least once and males were more than two times more likely to demonstrate lifetime gambling than females (37.2 percent vs. 14.6 percent).
- What are the significant types of gambling among youth? 14.1 percent reported playing cards with friends or family for money/possessions, followed by sports (12.4 percent), skill games (10 percent), and video games (8.1 percent).

For SFY 2017, IDPH expects to contract with the Iowa Consortium for Substance Abuse Research and Evaluation for a follow-up report using data from the IYS administered in October and November 2016.

Treatment Effectiveness

IDPH contracts with UNI-CSBR to monitor and analyze problem gambling treatment outcomes. The [IGTO: 2015 Report](#) found significant improvements for persons who received state-funded treatment.

Highlights:

- Clients who received four or more services within the first 30 days after admission were more likely to complete their treatment plan compared to those who did not.
- Clients who received e-therapy were more likely to complete their treatment plan than were those who did not.
- Clients who received one or more Recovery Support Services (RSS) were more likely to complete treatment compared to those who did not.
- Clients who received one or more RSS received significantly greater numbers of services overall and had longer lengths of services compared to those who did not.
- The average number of days from first contact to Admission was 7.4 days. Interestingly, the number of days waiting for services was not associated with retention (length of service) or outcome (discharge status).
- 92 percent reported fewer signs and symptoms of problem gambling at discharge.
- Among those who entered treatment having gambled during the past 30 days, the mean number of days gambled decreased from eight days at admission to less than one day at discharge.

IDPH has again contracted with UNI-CSBR to collect and monitor data in preparation for the Iowa Gambling Treatment Outcomes 2017 report planned for SFY 2018.

Education and Prevention First

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 health promotion campaign to encourage Iowans to evaluate their gambling behavior and seek help if they have a problem. Includes collaborative health promotion activities with the Iowa Lottery and Iowa Gaming Association during:
 - Problem Gambling Awareness Month – each March
 - Responsible Gaming Education Week – each August
- Educating employers about the cost of problem gambling to their businesses ([Gambling in the Work Place Tool Kit](#)).

- Partnering with state-regulated casinos to train employees and educate and inform patrons ([Self Exclusion Tool Kit](#)).
- Partnering with the Iowa Lottery to inform players that help is available for problem gambling.
- School-based prevention efforts for high risk youth (www.idph.iowa.gov/igtp/prevention).
- Educating the problem gambling treatment and prevention workforce on regional, statewide, and national trends and best practices to improve service delivery and outcomes.

The effectiveness of IDPH education and prevention efforts can be seen in the following:

- About nine in 10 adult Iowans said they are either slightly (20 percent), moderately (42 percent) or extremely confident (28 percent) that they would recognize the signs of gambling problems.
- Almost nine in 10 Iowans (88 percent) are aware of the 1-800-BETS OFF helpline; however, only 41 percent were aware of the www.1800BETSOFF.org Website.
- 90 percent of Iowans reported it was important to have public funding to educate adults about the risks of gambling.
- 94 percent admire the courage of people who seek help for a gambling problem.

IDPH Efforts to Increase Service Accessibility and Efficiency

In SFY 2016, it is estimated that approximately 29,155 adult Iowans met criteria for a gambling disorder. State-funded problem gambling services were provided to approximately 2.3 percent of those Iowans. While this is greater than the national average (0.18 percent)², it suggests there is a significant gap between the number of Iowans who need services and the actual number who receive those services. IDPH continues to work with providers to support an efficient network of care that reaches all Iowans in need. One example of those efforts is the continued enhancement and expansion of the use of recovery support services and e-therapy services (phone, video and Web-based treatment options). While it may not be feasible to offer treatment in every Iowa community, use of e-therapy helps Iowans with barriers to accessing and attending face-to-face treatment, regularly participate in treatment and receive the help and recovery support they need.

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² Marotta, J., Bahan, M., Reynolds, A., Vander Linden, M., & Whyte, K. (2014). 2013 National Survey of Problem Gambling Services. Washington DC: National Council on Problem Gambling.