

***Underage and Problem Gambling Prevention
Basics and Overview of Prevention Strategies in
Maryland***

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Problem Gambling Helpline: ***1-800-GAMBLER (426-2537)***

Objectives

To understand:

Overview: The Maryland Center of Excellence on Problem Gambling

What is Prevention? Prevention models used in public health

How can models be used to prevent underage and problem gambling?

Learn the prevention strategies implemented by the Center

What can community members and clinicians do to get involved?

The Maryland Center of Excellence on Problem Gambling (the Center), promotes healthy and informed choices for individuals and communities regarding gambling and problem gambling.

Director: Mary Drexler, MSW
and 9 staff

The Center strategies include:

- Public Awareness
- Prevention
- Training
- Treatment
- Peer Recovery Support
- Public Policy
- Research
- Provider Referral List
- Maryland Helpline Services 1-800-GAMBLER

Gambling

The risking by any person of something of value upon the outcome of a contest of others, a sporting event, or a game subject to chance, understanding that the person or another person will receive something of value in the event of a certain outcome (Legal Information Institute, 2006).

What is Prevention?

Prevention is the promotion of constructive lifestyles and norms that discourage (drug use, problem gambling). It is the development of social environments that facilitate healthy lifestyles. Prevention is achieved through the application of multiple strategies; it is an ongoing process that must relate to each emerging generation (Maryland Behavioral Health Administration, 2017)

Prevention Principles

- Best practices based on sound theory and research
- Across the lifespan
- Knowledgeable and competent staff
- Services that are culturally appropriate
- Collaborative partnerships
- Evaluation

State Prevention System

- State prevention coordinator system
- The coordinator plans, delivers, coordinates, and monitors prevention services to meet the needs of a local subdivision
- The Coordinator is a resource for the community, identifying needs, developing substance abuse prevention projects, implements programs and obtains funding.
- In Maryland 24 substance abuse prevention coordinators, 1 gambling Prevention Manager.

Center for Disease Control (CDC) and Prevention

- Primary Prevention: Intervening before health affects occur or behavior is initiated
 - Reach youth to educate them about the risks of gambling before they are old enough to gamble
- Secondary Prevention: Screening to identify problems early on before signs and symptoms occur
 - Youth who gamble at a young age are more likely to gamble later in life
- Tertiary Prevention: Managing disease post diagnosis
 - Referral to treatment
 - Recovery support

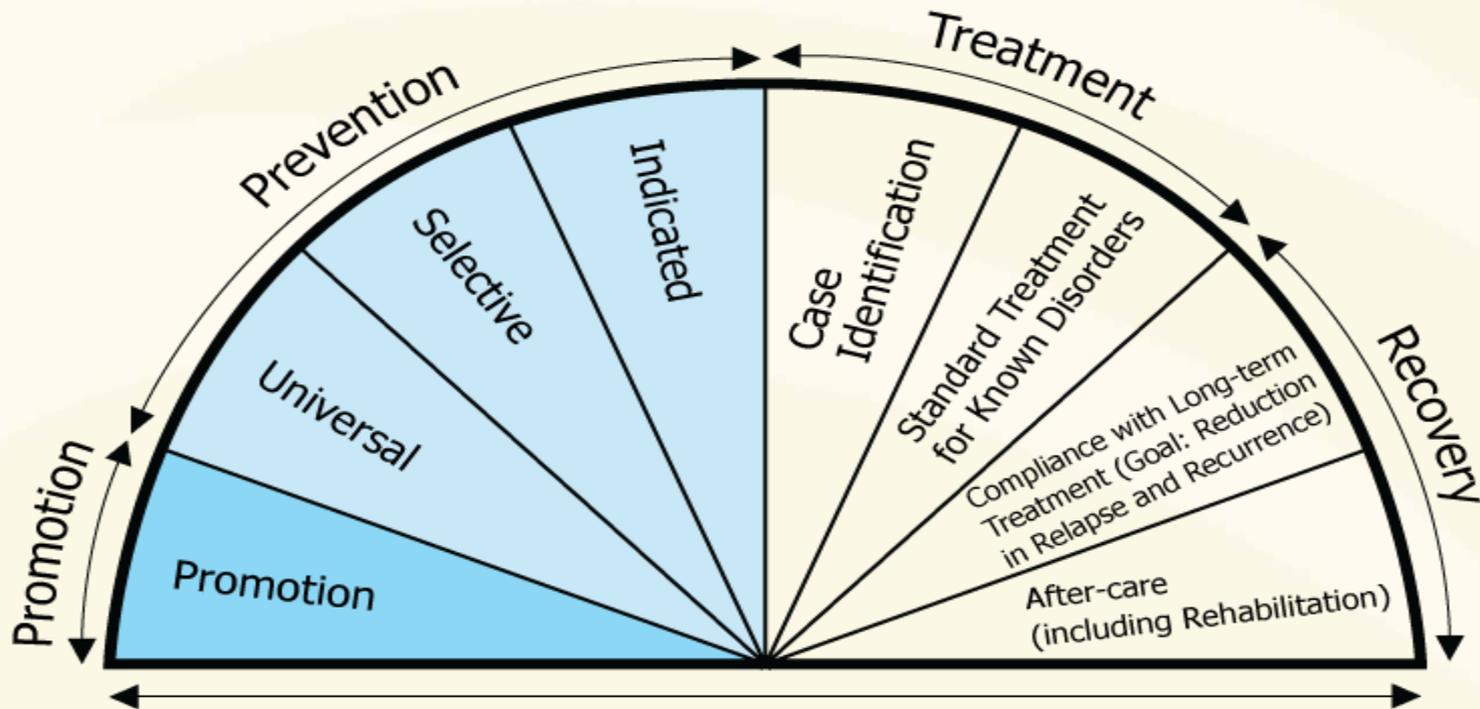
Institute of Medicine (IOM) Prevention Strategies

- Universal: Interventions that target the general population (Encourage immunization, Laws that you have to be 21 to enter a casino)
- Selective: Interventions that target those at greater risk (providing programs to children of parents with gambling disorder)
- Indicated: Interventions that target those who are engaged in high risk behavior or have symptoms of a disease to prevent heavy or chronic use or problems (youth arrested for gambling in a casino are sent to screening and counseling)

Is it Universal, Selective, or Indicated?

- Youth caught in school betting on dice are sent to an education program.
- Passing legislation that all casino employees must take training to recognize customers that may have signs of gambling distress.
- Youth who have contact with juvenile services for substance abuse are automatically screened for gambling problems.

Institute of Medicine (IOM) Behavioral Health Continuum of Care Model



Individual Versus Environmental Prevention Strategy

- Individual Strategy: focus on changing individual behavior and attitudes. Focus on teaching young people refusal skills for risky behavior, health classes, health fairs, etc. (costly and difficult to implement community-wide)
- Environmental Strategy: strategies focused on changing the context around gambling. Focus on health and safety of the environment (policy change, reducing access, and availability of gambling, training for those that sell lottery tickets, enforcement of laws)

(source: community science, 2019)

Is It an Environmental Strategy or Individual Strategy?

- Gambling prevention curriculum used in schools.
- Zero tolerance school policy on student gambling at a college.
- Town hall meeting on gambling risks.
- Increasing the cost of minimum lottery ticket purchase.
- Posting the 1-800-GAMBLER helpline number on every slot machine.
- Educating seniors at senior centers on safe gambling practices.

Six Prevention Strategies (Center of Substance Abuse Prevention)

1. Information dissemination: awareness and knowledge of a problem through outreach including health fairs, presentations, newsletters, public service announcements, and websites.
2. Education: life skills groups, parenting classes, Maryland Smart Choices is an education program.
3. Alternative Strategies: social, recreational, or leadership events that build skills and give youth focus instead of gambling.
4. Problem Identification and Referral: Providing skills and education to youth that may have experimented with gambling. It is not screening or treatment (example: Employee or student assistance programs)

Six Prevention Strategies (Center of Substance Abuse Prevention) (Continued)

5. Community-Based Process Strategy: focus on capacity building to encourage collaboration, networking, and coalition building among organizations to address a problem (in this case, problem gambling)
6. Environmental Strategy: Changes in laws, policies, service delivery to influence the incidence (new cases) and prevalence (measure of all individuals affected by a disease) of gambling.

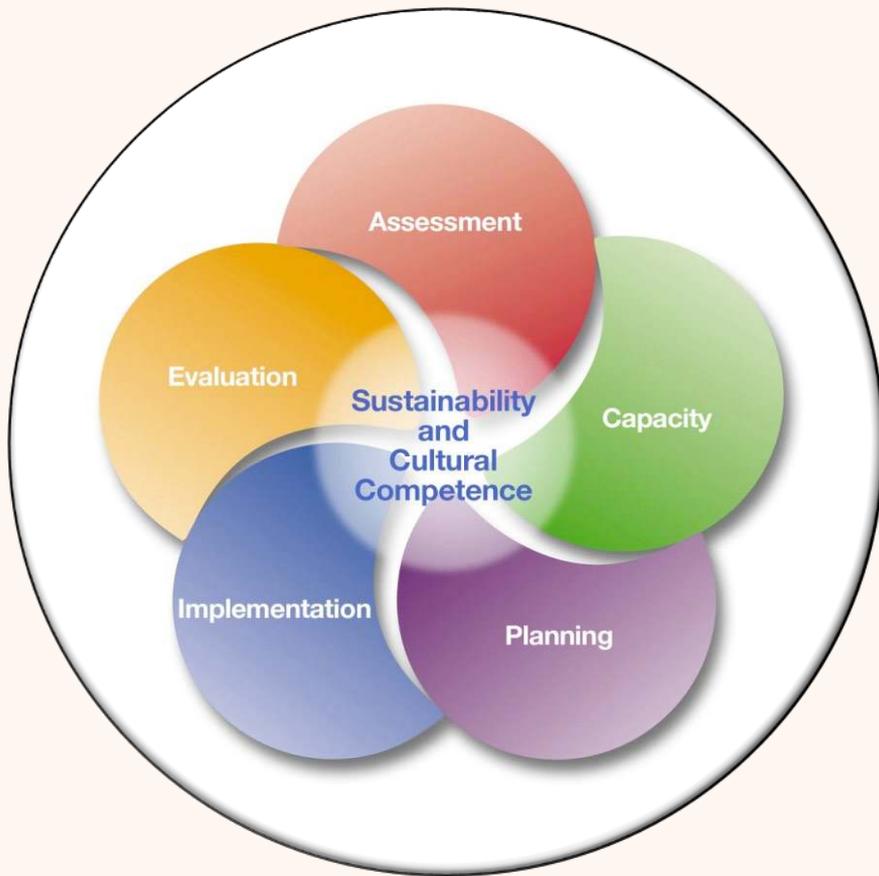
Seven Strategies for Community Change (Community Anti-Drug Coalitions of America, CADCA)

1. Providing Information: health promotion, community outreach
2. Enhancing Skills: providing training to increase knowledge of participants
3. Providing Support: providing alternative activities
4. Enhancing Access/ Reducing Barriers: assuring services, transportation, housing, cultural and language sensitivity
5. Changing Consequences: providing incentives, disincentives for behavior (tax breaks, awards, free service).
6. Physical Design: Changing the physical design or structure of the environment to increase or decrease community behavior (signage, outlet density, lighting).
7. Modifying/ Changing Policies: Formal change in written procedures or laws impacting an increase or decrease in behavior.

Strategic Prevention Framework (SPF)

- Maryland has been requiring the use of the model through the 24 Maryland jurisdictions, substance abuse prevention offices since 2006.
- A large federal grant called SPF was received by State Department of Health in 2008. In 2015, the continuation grant was received for 10 counties.
- The grant is used for underage drinking and binge drinking prevention.
- Implemented through coalition building.

The SPF Process



Assessment

Profile population needs, resources, and readiness to address needs and gaps

Capacity

Mobilize and/or build capacity to address needs

Planning

Develop a Comprehensive Strategic Plan

Implementation

Implement evidence-based prevention programs and activities

Evaluation

Monitor, evaluate, sustain, and improve or replace those that fail

Needs Assessment

- Collection of quantitative (hard data sources i.e. number of people who call 1-800-gambler helpline, number of people in treatment for gambling disorders) and qualitative (focus groups and key interviews)
- Intervening Variables: constructs that have been identified as being strongly related to, and influencing the occurrence and magnitude of a health problem – in our case we will use the model to study gambling as a public health problem.
- Contributing Factors: Specific issues in a community that contribute to the problem (for individual strategies these are called risk factors)

Intervening Variables

1. Retail Availability
2. Social Availability
3. Enforcement and Adjudication
4. Social/Community Norms
5. Promotion
6. Pricing
7. Low Perceived Risk

Retail Availability

- Availability of gambling in your community
- How easy are gambling activities to access through casinos/retailers?
 - Failure to check IDs
 - Cutting off problem gamblers
 - Clerks are not trained
 - Product placement and characteristics

Social Availability

- Gambling activities available through families, friends, associates
 - Parents provide lottery tickets to minors
 - Kids steal lottery tickets from home
 - College students gamble at parties
 - Gambling is promoted in the workplace

Enforcement and Adjudication

- The impact of law enforcement practices and judicial processes on underage gambling and problem gambling.
 - Shortage of officers to enforce laws around gambling
 - No consequences for minors who try to buy lottery tickets
 - Gambling is not seen as a priority for law enforcement relative to drugs or other crimes
 - Judges sentence problem gamblers to jail instead of treatment

Social and Community Norms

- The acceptability or unacceptability of gambling behaviors in a community.
 - Gambling behaviors run in families.
 - Youth gamble to feel grown up.
 - Everyone gambles.
 - Gambling can be accessed through the internet so it is acceptable.

Pricing

- The cost of gambling and the extent to which changes affect gambling behaviors.
 - Lottery ticket costs are low.
 - Free play at casinos, hotel rooms, etc.

Promotion

- Attempts by gambling retailers/casinos to increase demand through marketing.
 - Gambling ads, billboards, etc.
 - Ads that appeal to youth.

Low Perceived Risk

- Beliefs about the likelihood of receiving a gambling-related violation or penalty or being harmed as a result of gambling behavior.
 - Low perceived risk of getting arrested.
 - Youth don't believe courts will punish them.
 - Parents have few rules around gambling activities.
 - Gambling is not addictive like alcohol and drugs

Capacity Building

- Recruiting coalition members to address gambling problems.
- Is community ready to address the problem gambling?

Strategic Planning

- Define problem based on data collected from needs assessment.
- Select evidence-based strategies
- Identify measurable outcomes for each intervention
- Complete logic model

Example: 33% of youth under 21 reported gambling in their lifetime. Needs assessment identified parents buy lottery tickets for youth, youth play poker for money at parties, youth gamble on the internet. Strategies may be: media campaign to raise awareness of parents that you must be 18 to play the lottery and gambling underage may result in negative consequences, educate youth about risks of gambling at parties and on the internet.

Implementation

- Increase awareness of the problem of underage and problem gambling.
- Bring in key stake holders and/ or form a coalition.
- Implement prevention strategies based on needs assessment.

Evaluation

- Monitor implementation. (process evaluation)
- Review evaluation data.
- Track long-term accomplishments (outcome evaluation)

The Center's Prevention Goals:

- Reduce the number of youth under age 18 reporting gambling behaviors.
- Reduce the number of people with gambling use disorders and/or those identifying negative consequences associated with gambling.

Overview of the Center's Prevention Efforts and What You Can Do To Help

Maryland Department of Aging

- Met with Rona Kramer, Secretary of Aging, in Fall 2019.
- Will provide a webinar to employees on gambling, tips for safe gambling and resources.
- Approved videos for use in senior centers.
- Other strategies to come at the State level.
- Peer Recovery Support Specialists outreach and presentations at senior centers across the State.

If you have a contact at a senior center in Maryland, please share it!

Maryland Association of Prevention Professionals and Advocates (MAPPA)

- Connection with Substance Abuse Prevention Coordinators across the State.
- Distribution of materials on problem gambling prevention across the State.
- Conducting underage and problem gambling prevention focus groups and key interviews across the State through June 30, 2020.
- Focus on: Perspectives on gambling in Maryland: Is underage and problem gambling a problem in your community? What types of gambling activities do you see in your community? Is it easy to access gambling activities? Are laws enforced around underage and problem gambling, etc.

MAPPA Focus Groups and Key Interviews

- Middle School and/or high school youth (ages 12-18)*
- College age/ working young adults (ages 18-25)
- Senior citizens (ages 60 and older)*
- Law enforcement (police, courts)
- Corrections*
- Substance abuse and/or mental health providers
- People in treatment and/or recovery from substance abuse, gambling, and/or mental health disorders
- School personnel (administrators, teachers, counselors, etc.)
- Healthcare providers (primary care, hospital, etc.)
- Persons of minority populations (African Americans, Asians, LGBTQ, etc.)
- Other Community Leaders

* Groups with a star are priority groups for focus groups and key interviews.

What can you do to help?

- If you would like to participate in a key interview or know any other person that meets the criteria to be interviewed, please contact us.
- If you would be able to get a focus group together of people in treatment and/or recovery together, we would be glad to come conduct the focus group. We may be able to provide small give aways and in some cases refreshments.
- If you can get a group together that meets the criteria for another type of focus group listed, please let us know. We will come out and conduct a focus group.
- If you know of a contact that you think may be interested in getting a group of people together for a focus group, please let us know.

My Life Foundation

- Problem gambling prevention materials and displays for the Asian population.
- Translation of the Center's materials to Korean.

If you know a group that would be interested in a presentation or exhibit targeting the Asian population, contact Taylor Yi, My Life Foundation Executive Director at tayloryi.mlf@gmail.com

National Alliance on Mental Illness, (NAMI), Maryland

- Survey of mental health providers
- Problem gambling prevention materials distributed at community events.
- Helpline staff trained to respond to calls from problem gambler and/or family members.

For those with a mental illness or a family member of someone with a mental illness in need of support, contact NAMI at 410-884-8691 or email adminassist@namimd.org

University of Maryland, Baltimore, School of Medicine, National Center for School Mental Health

- Conducting an analysis of school policies on gambling in Maryland.

Underage and Problem Gambling Prevention Youth Grants

- Grants for schools and/or youth groups to implement underage and problem gambling prevention strategies among their peers.
- Examples of projects include poster contests, social media posts, display tables, for problem gambling prevention.
- \$1,000 grants are available to schools and organizations in casino jurisdictions only: Allegany County, Anne Arundel County, Baltimore City, Cecil County, Prince George's County, Worcester County

For more information on youth grants, contact Heather Eshleman, Prevention Manager, heshleman@som.umaryland.edu or phone 667-214-2128

Resources for Adults on Problem Gambling:

Helpline: 1-800-GAMBLER

Website: helpmygamblingproblem.org

Peer Support: Call 1-800-GAMBLER and ask to speak to a peer. "Have the Conversation With Someone Who Has Been There"

Maryland Coalition of Families: Support for family members who have a loved one who is a problem gambler, 410-730-8267 or info@mdcoalition.org

Talk to MH or SA counselor

Call us at 667-214-2120 for provider referral, no cost treatment, peer support, or information on the voluntary exclusion program

Resources for Youth on Problem Gambling:

Helpline: 1-800-GAMBLER

helpmygamblingproblem.org

A resource for help with gambling problems

Baltimoredicezombies.org

A resource for teens

Talk to your parents, school guidance counselor, mental health counselor, or other trusted adult to ask for help.



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