

White  
Paper:

**EXECUTIVE SUMMARY**

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**Key Findings from SEIGMA  
Research Activities & Potential  
Implications for Strategic  
Planners of Problem Gambling  
Prevention and Treatment  
Services in Massachusetts**

This white paper summarizes descriptive statistics from a large baseline population survey, a descriptive analysis of data from a problem gambling helpline, and key findings from an online focus group that the SEIGMA team recently conducted with a group of mental health and substance abuse treatment providers across the state. It also discusses the potential implications that these findings have for strategic planners of problem gambling prevention and treatment services in Massachusetts.

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## EXECUTIVE SUMMARY

To complete an evaluation of problem gambling services in Massachusetts, the SEIGMA research team collected information from a variety of sources and planned a number of research activities to better understand service provision for problem gambling in Massachusetts. This white paper summarizes findings from three research activities for which full or partial analyses are complete: (1) descriptive statistics from a large baseline population survey, (2) a descriptive analysis of data from the MCCG problem gambling helpline, and (3) key findings from an online focus group that the SEIGMA team recently conducted with a group of mental health and substance abuse treatment providers across the state.

These analyses have a number of potential implications for state strategic planners as they attempt to finalize and implement their plan for problem gambling services in Massachusetts. The tables within this white paper summarize key findings and associated implications for strategic planners. Common themes from these tables include:

- Utilizing information about gambling behavior and problems in Massachusetts to tailor prevention messages and target outreach efforts
- Using at-risk and problem gambling prevalence estimates and information about concerned others to estimate treatment volume and plan for treatment-seekers
- A need for improved data collection regarding help- and treatment-seekers in the Commonwealth
- A need for improved problem gambling service administration—clinical supervision, best practices, standardized practices, evaluation, etc.

Based on these themes, we recommend that strategic planners focus on three short-term activities. These include (1) utilizing many of the findings presented in this paper to tailor prevention messages and target outreach efforts; (2) improving data collection about individuals who seek help or treatment for a gambling problem; and (3) collecting additional information to aid in selecting evidence-based and promising practices in problem gambling prevention, intervention and treatment and adapting these practices for use in Massachusetts.

A number of the potential implications presented in this white paper concern using findings from the research activities summarized here to tailor prevention messages and target outreach. For example, knowing the gambling formats in which Massachusetts adults most frequently participate may aid strategic planners in tailoring prevention messages so that they reflect common gambling behaviors. Likewise, knowing common gambling motivations may aid strategic planners in developing prevention messages that reflect these motivations. Demographic differences in gambling participation and problems may aid strategic planners in targeting outreach efforts to vulnerable populations and tailoring messages so that they are culturally appropriate. These are just a few examples. Strategic planners should consider how best to utilize the findings presented into existing prevention messaging efforts (e.g., billboards and public service announcements). MA DPH and agencies such as the MCCG are already expending resources on these efforts, and tailoring messages may increase the reach and impact of their efforts.

A second recommendation is to improve data collection regarding help- and treatment-seekers in the Commonwealth. Although many of the mental health and substance abuse treatment providers who participated in the online focus group summarized here reported having treated one or more individuals with gambling problems in the past year, currently no single data source captures the number of individuals in

Massachusetts who have sought treatment for a gambling problem. Numbers of calls to the MCCG Problem Gambling Helpline provide critical insight into the number of help-seekers in the state. Similarly, the number of treatment referrals made by helpline responders aids in estimating the number of individuals who may seek treatment. However, there is currently no mechanism in place to assess whether or not these individuals actually sought treatment after the call. Understanding current needs is critical to maintaining resources for this population in the short term and planning resource and service provision over time.

Lastly, at the present time, only one of the state's newly licensed gambling venues is operational (Plainridge Park Casino in Plainville, Massachusetts). The state's larger resort-style casinos will not open their doors until 2018. The lengthy amount of time between licensure and operation provides strategic planners with a window in which they can collect and synthesize additional information and use that information to implement improvements to the problem gambling treatment system in Massachusetts that are based on evidence-based and promising practices. Strategic planners should seek information regarding best practices in problem gambling prevention, state models for administering problem gambling services (including clinical training and supervision), screening best practices, effective treatments, and evaluating treatment outcomes. Many of the articles referenced in this white paper may be useful to state strategic planners as they embark on this process.

Although working on the three recommendations listed above is possible in the short-term, additional research activities may be necessary to inform decision-making. Most notably, future research is needed to better understand individuals with gambling problems. The literature provides some insight into the broader population of problem gamblers, including the nature of the problems they face, their desire for help, and the barriers they face in help- and treatment-seeking. However, studies of this population are limited in number. While the longitudinal cohort study (the Massachusetts Gambling Impact Cohort Study) currently underway in Massachusetts will shed light on how gambling problems may develop and evolve over time, additional qualitative research may be needed to clarify the lived experiences of Massachusetts residents who are experiencing gambling problems. Such efforts may include focus groups with problem gamblers who have and have not sought help or treatment for a gambling problem. Additionally, key informant interviews with selected providers, patients with gambling problems, and concerned others may enable a deeper understanding of the challenges and barriers that these groups face and may shed light on possible solutions.

Additional research may also be needed to better understand current screening processes and determine how best to standardize problem gambling screening in different practice settings across the Commonwealth. As stated earlier in this white paper, providers report using a wide variety of screening tools in a variety of different ways with their clients. Establishing a standardized screening process will likely be an essential effort to effectively monitor the number of problem gamblers currently in the Massachusetts treatment system. However, more information is needed about providers' comfort using problem gambling screening tools with clients, barriers they face in using such tools, and perceptions about the impact on or effectiveness of these tools within their treatment practices. As strategic planners work to standardize screening practices, they should consider piloting tools with treatment providers to ensure effective implementation and widespread use of standardized tools.

Lastly, strategic planners may benefit from having additional information about support groups such as Gamblers Anonymous and Gam-Anon. The findings presented in this white paper indicate that MCCG and treatment providers are referring clients to these resources. However, very little information is available regarding the number of individuals who attend Gamblers Anonymous meetings in Massachusetts. Understanding this may further clarify help-seeking behaviors in the state.

Over time, the SEIGMA team will conduct additional research activities and analyses, making findings available as these emerge. Findings from these activities and analyses may reveal additional information relevant to strategic planners. We fully anticipate that the SEIGMA team will release additional white papers in the future that summarize findings and identify potential implications for improving problem gambling service provision in Massachusetts.