NEW YORK STATE | **Office of Addiction Services and Supports**

2020 Annual Report on Problem Gambling

Prevention, Treatment, and Recovery Services

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2020 ANNUAL REPORT ON PROBLEM GAMBLING PREVENTION, TREATMENT, AND RECOVERY SERVICES

The mission of the New York State Office of Addiction Services and Supports (OASAS) is to improve the lives of all New Yorkers by leading a premier system of addiction services through prevention, treatment and recovery. OASAS provides statewide prevention programming targeting problem gambling, as well as treatment services and recovery services for persons who are affected by problem gambling.

OASAS is submitting this Report in accordance with Section 41.57 of Mental Hygiene Law. It details the delivery of problem gambling prevention, treatment, and recovery services and makes recommendations for program development.

Maintaining services and access to care during the COVID-19 Disaster Emergency

During the COVID-19 declared disaster emergency, OASAS' problem gambling treatment, recovery, and prevention providers, made quick pivots to continue operations by transitioning to virtual engagement for all services. Additionally, the OASAS vendor, the New York Council on Problem Gambling (NYCPG), pivoted to continue operations virtually without disruption. OASAS programs utilized telepractice services as a primary mechanism to keep service recipients engaged in care and connected to support services. The NYCPG and the seven Problem Gambling Resource Centers (PGRCs) utilized virtual platforms to continue to provide education and public awareness about problem gambling and treatment and recovery services.

Problem Gambling Treatment

The continuum of OASAS gambling programs include 29 outpatient programs and the 12 OASAS Operated Addiction Treatment Centers (ATC). All 12 of OASAS ATC's offer treatment for problem gambling. Despite the challenges of maintaining services during the COVID-19 emergency, OASAS programs continued to engage individuals in problem gambling services. In 2020, there were 541 admissions[1] for a primary issue with problem gambling with an additional 2,250[2] admissions who screened positive for problem gambling upon admission for a primary substance use disorder (SUD). Additionally, to further expand access to problem gambling services, in 2020 OASAS continued work with the NYCPG and the seven established regional PGRCs to further develop the network of private practitioners who provide for the treatment of problem gambling. These practitioners receive specialized training and are approved by OASAS to receive referrals for problem gambling treatment services through their respective PGRC. Through this collaborative effort, the network of approved private practitioners consists of 145[3] active clinicians throughout the PGRC system.

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[1] Data source: OASAS online problem gambling referral portal. OASAS Gambling Client Data System
[2] Data source: OASAS Client Data System
[3] Data source: OASAS online problem gambling referral portal

All 12 state-operated OASAS ATCs can admit and treat for problem gambling services. The ATCs are the only inpatient rehabilitation services and residential treatment programs for problem gambling. The ATC staff have developed collaborative working relationships with the PGRCs and participate in a monthly workgroup to discuss problem gambling case studies. Specific efforts in 2020 in the ATCs include:

- Over 50 ATC staff participating in the NYCPG Virtual Conference.
- The ATC's participated in the March 2020 problem gambling (PG) screening and the September Recovery Month PG Screening in collaboration with the PGRCs.
- Pivot from onsite trainings to virtual trainings for patients and staff.
- Increased number of staff members completing 60-hour problem gambling designation on their credential to provide PG specific treatment.

Services within the ATCs continue to be expanded and enhanced as more individuals with gambling problems enter treatment and more staff receive the problem gambling designation on their credential.

Regulatory Support and Program Guidance

In 2019, the Problem Gambling Treatment and Recovery regulations (Title 14 NYCRR Part 857) were revised. The amendments to Part 857 offer the ability for any certified OASAS treatment program to apply for a designation on their current operating certificate allowing them to provide treatment services to anyone affected by problem gambling. Designated providers are required to meet specific staffing and supervision requirements and implement policies and procedures addressing the service. In addition, providers were required to develop a gambling-free environment policy in order to provide a safe and sensitive environment for those seeking treatment for problem gambling. In 2020, OASAS continued to support designated programs to provide person centered gambling services in accordance with the Part 857 regulation.

OASAS also developed the program standards guidance tool for non-OASAS certified programs seeking to deliver problem gambling treatment services under the authority of Title 14 NYCRR part 824. This allows community-based treatment providers who do not currently have an OASAS operating certificate to apply to provide problem gambling treatment services in their community.

Recovery

OASAS continues to work toward developing a recovery network for problem gambling. The PGRC network maintains relationships with local Gamblers Anonymous and Gam-Anon groups for referrals. They are also connecting with current Recovery Centers and developing relationships to provide educational information. In 2020, NYCPG solidified its relationship with Friends of Recovery, (FOR-NY). This led to collaboration and co-facilitation of a webinar held during Recovery month in September and ongoing discussions on how to best serve individuals in recovery from problem gambling.

Gambling LOCADTR Tool

In 2019, a Level of Care for Alcohol and Drug Treatment Referral (LOCADTR) tool specific to problem gambling was developed to help clinicians determine the best level of care for those seeking help for problem gambling and is required when treating a person with a primary diagnosis of problem gambling. Guidance documents to accompany the LOCADTR and implementation of problem gambling treatment services were also developed. During 2020, OASAS continued to expand and enhance the efficacy of the tool by developing the LOCADTR for Gambling Concurrent Review Module. When released, this module will be the next component of the Gambling LOCADTR and is required by providers and Medicaid managed care plans when determining continued stay for level of care.

Prevention

Problem gambling prevention efforts continued in 2020 with public awareness, training initiatives and media literacy. The OASAS prevention provider system continued to conduct awareness presentations for communities while making adjustments to navigate the COVID-19 emergency. In 2020, OASAS' vendor, NYCPG conducted needs assessments in all regions of New York State to identify the types of gambling that are prevalent, special populations to be considered, partners in the community, and problem gambling treatment and recovery resources available. The needs assessments also examined community readiness and barriers to treatment. Recommendations were made for each region to address problem gambling. The PGRCs will implement these recommendations in their respective regions with the support of NYCPG. Furthermore, OASAS intends to use this information to inform its statewide problem gambling prevention efforts.

To provide culturally relevant problem gambling support and services, OASAS continues to fund three problem gambling prevention programs in New York City geared toward specific communities and ethnic groups: Latino (Bronx), Jewish (Brooklyn), and Asian-American/Asian (Manhattan). Efforts continue to include needs assessment, information dissemination, presentations to school administration, and virtual speaking engagements in the community. Each of the Problem Gambling Prevention programs works collaboratively with their local PGRC.

- **Education and Training**

    Statewide public awareness and the cross training of behavioral health professionals is an important and continuous effort. Due to the COVID-19 emergency, education and training efforts were provided virtually and were widely attended.

• **Provider Training**: Working through the NYCPG, twenty-three self-study courses received 1,188 registrations. Fifteen live webinars were held with 2,192 participants in attendance. In addition, NYCPG hosted 24 problem gambling clinical supervision sessions reaching 272 behavioral health professionals that specialize in gambling treatment.

• **Statewide conference:** In October 2020, the NYCPG Annual Conference was held virtually with 576 individuals in attendance.

- **Statewide Public Awareness**

Throughout 2020, NYCPG engaged in continuous outreach virtually via social media, email, press releases and website updates targeting audiences of parents/caregivers, those adversely affected by problem gambling, and professionals in the fields of prevention, treatment, and recovery. The effort to raise awareness of problem gambling and connect individuals to the resources needed was constant despite the barriers posed by the pandemic.

- **Problem Gambling Awareness Month**: Problem Gambling Awareness Month occurs in March of each year. OASAS, in collaboration with its partners of the Responsible Play Partnership (NYS Gaming Commission and NYCPG), provided and promoted activities aimed at bringing awareness to problem gambling. Activities included a PG screening day webinar, press releases, newsletters, and statewide social media efforts. In addition, OASAS launched radio Public Service Announcements and a problem gambling awareness video in both English and Spanish. These efforts were designed to reduce stigma and highlight resources available to New Yorkers struggling with problem gambling.

- **Media campaigns:** During the last quarter of 2020, NYCPG launched two public awareness campaigns. The first campaign targeted New Yorkers struggling with problem gambling and included warning signs and help resources. The second campaign targeted parents/caregivers of youth aged 12-17, encouraging them to start a conversation about the risks and consequences of underage gambling. These campaigns were successful in reaching 7 million and 8 million people respectively.

- **You(th) Decide:** The You(th) Decide program aims to empower youth to make educated decisions regarding gambling and prepare communities to work together to prevent underage gambling. At the close of 2020, there were 22 OASAS prevention providers working with youth in 22 counties.

- **Know the Odds**: Originally developed as a public awareness campaign, Know the Odds has become a web-based educational resource that includes e-

books, infographics, and videos, as well as a blog and social media pages dedicated to outreach. In 2020, the total reach of these efforts was 39,336 individuals.

- **Talk2Kids:** This comprehensive multimedia marketing campaign urges parents/caregivers to talk to their young children ages six to ten about the risks and realities of underage gambling. The goal of the campaign is to encourage adults who interact with children to have discussions about gambling so that youth can be more informed and make healthier decisions. The campaign consists of a 30-second PSA, educational videos, commercials on streaming media services, digital advertising, printable materials, and social media.

- **PGRC Awareness –** The general public and provider community continue to be informed about the PGRCs and the array of services they provide. In 2020, this occurred through meeting and conference attendance, education and training, and overall community networking.

2020 New York State Problem Gambling Prevalence Survey Overview

- In 2021, OASAS released the results of the 2020 New York Problem Gambling Prevalence Survey. OASAS contracted with RTI International to conduct a survey to provide information on New York State adults participating in past-year gambling activities. Deliverables included providing estimates of New Yorkers with problem gambling behaviors. The survey also provided information on New Yorker's attitudes and behaviors toward gambling, awareness of resources for problem gambling services, and other substance use and mental health concerns. Estimates for recreational and problem gamblers were provided statewide and among sociodemographic groups based on gender, age, and race/ethnicity.

- Data for the New York Problem Gambling Prevalence Survey were collected between July 24 and December 21, 2020. Overall, 3,845 surveys were completed (580 by mail and 3,265 by web), for an overall weighted response rate of 27.9%. Survey respondents were classified as non-gamblers, recreational gamblers, and problem gamblers based on responses to survey items matched to the nine Diagnostic and Statistical Manual of Mental Disorders (DSM–5) criteria for problem gamblers.

- An overview of the main findings indicate that non-gamblers represented 70.6% of the New York population with recreational gamblers and problem gamblers

representing 25.1% and 4.3%, respectively. Of the New York State population who gambled in the past year, 85.4% were considered recreational gamblers with the remaining 14.6% classified as problem gamblers. Among all gamblers, playing different aspects of the lottery remained the most popular activity.

- The survey included questions regarding the amount of time individuals spent engaged in gaming activities such as playing video or computer games. Gaming was the second most popular activity overall.

- Men are more likely to be problem gamblers (16.6%) compared with women (12.5%). The youngest age group, 18–24, had the highest percentage of problem gamblers (24.8%) compared with their older counterparts. In contrast, the 25-29 age group had the lowest percentage of problem gamblers at 7.5%. Problem gambling among Non-Hispanic Black gamblers (25.1%) was more prevalent compared with Hispanic gamblers and their other racial and ethnic counterparts, particularly Non-Hispanic White gamblers (12.4%).

- Regarding education, the percentage of problem gamblers among those with a high school degree or less is 21.8% whereas the percentage of problem gamblers among those with a graduate degree is 5.4%. Likewise, the percentage of problem gamblers among New Yorkers with the lowest income (less than $30,000) is at 24.1% whereas the percentage of problem gamblers among the highest income group (greater than $75,000) is 11.2%.

- All survey participants were asked whether they experienced any mental health issues within the past year. There were no significant differences in mental health issues between non-gamblers, recreational gamblers, and problem gamblers. The percentage of each type of gambler with or without mental health issues is consistent with their overall percentages within the population.

- Regarding substance use, although problem gamblers represented 4.3% of the New York State population overall, they comprise 14.7% of the population for those with an alcohol, tobacco, or other drug problem. Among problem gamblers, 13.4% do not believe gambling can become an addiction while only 8.6% of recreational gamblers and 5.9% of non-gamblers do not believe that gambling can become an addiction.

Recommendations

OASAS makes the following recommendations for future development of problem gambling prevention, treatment, and recovery services:

1. Continued work with treatment providers to increase the numbers of individuals seeking and completing treatment for problem gambling.
2. Increase treatment options for family members using evidence-based practices such as Community Reinforcement approaches.
3. Develop a gambling track within one or more of the OASAS operated Addiction Treatment Centers (ATCs).
4. Continued statewide public awareness campaigns and community capacity building efforts.
5. Continued focus on preventing underage gambling and adult-onset problem gambling and disorder.
6. Implement early intervention services such as Gambling Screening, Brief Intervention, and Referral to Treatment.
7. Consider development of research plan / institute for ongoing research into gambling prevalence, and effective prevention, treatment and recovery programs and strategies.