# Kansas Problem Gambling Treatment Enrollments FY12

## Introduction

The State of Kansas is home to over 1,700 lottery retail outlets, three lottery-owned casinos and five tribal casinos (four Class III and one Class II). While gambling brings hundreds of millions of dollars in revenue to the state, it is a statistical certainty that a percentage of the population will develop gambling problems. To help address these problems, two percent of the revenue from the three lottery-owned casinos is designated for the Problem Gambling and Addictions Grant Fund, a portion of which is used to treat problem gamblers and concerned others. The Kansas Department for Aging and Disability Services (KDADS) is the agency responsible for the administration of these services.

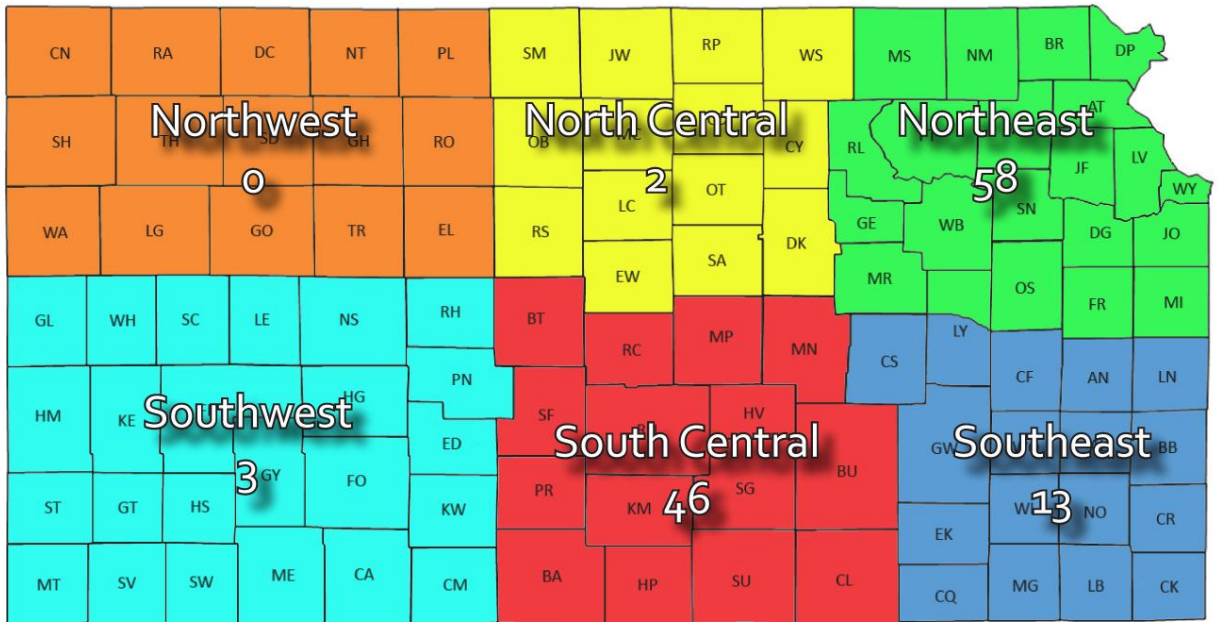
Studies of other states have shown that it could take as long as five years after the introduction of casinos for the full extent of problem gambling to become evident. As such, it is vitally important that the state take a comprehensive look at problem gambling in order to make informed decisions about prevention and treatment efforts. KDADS, in partnership with Greenbush, presents this report with the goal of providing detailed data about problem gambling treatment enrollments, to drive effective decision-making.

The State of Kansas has funded problem gambling treatment through a network of providers including 44 Kansas Certified Gambling Counselors since February 2011. Since that time, 158 individuals have enrolled in treatment. Thirty-six people enrolled between February 1 and June 30, 2011. This report will examine the 122 individuals who enrolled in Fiscal Year 2012, which spans from July 1, 2011, to June 30, 2012. The report presents Kansas problem gambling treatment statistics as novel data to be used primarily as a baseline for comparison in future years. These data were culled from treatment intake and assessment forms.

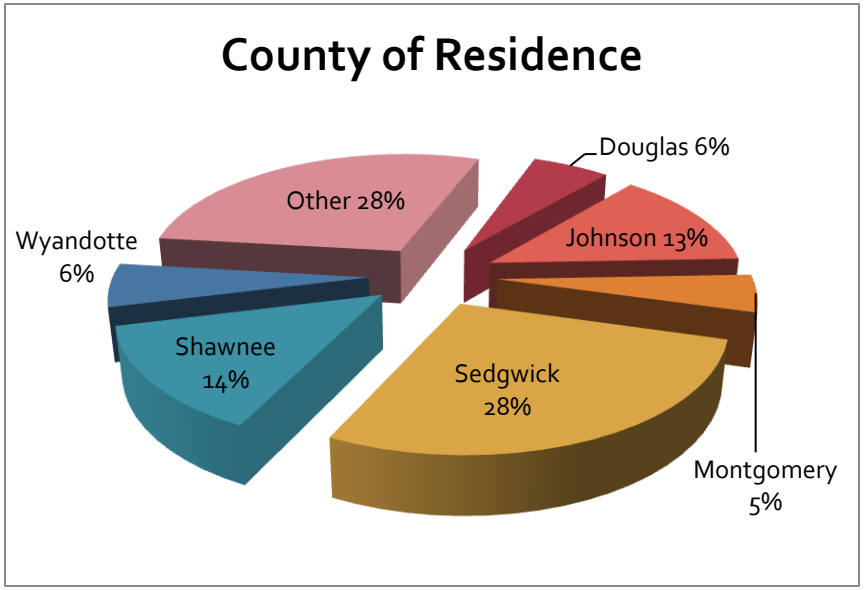
## Index

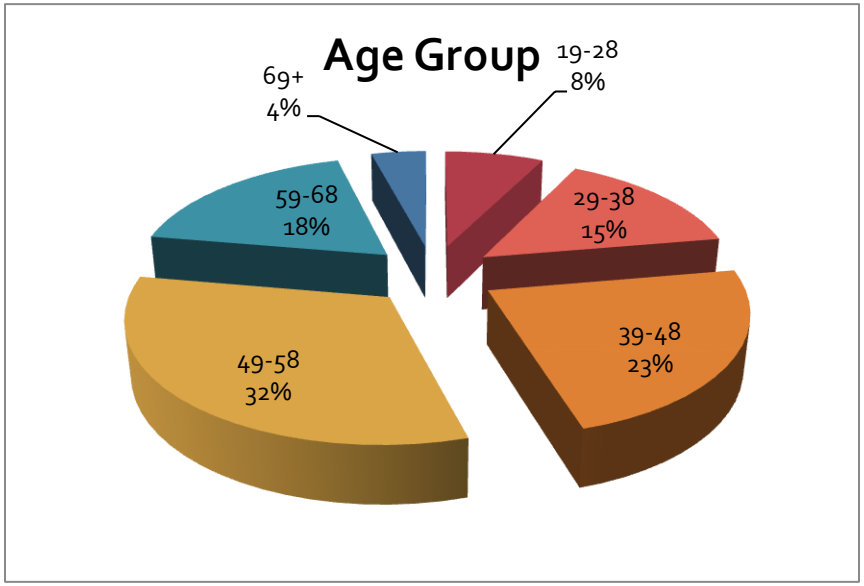
## Demographics

# FY12 Problem Gambling Treatment Enrollments by Kansas Lottery Regions



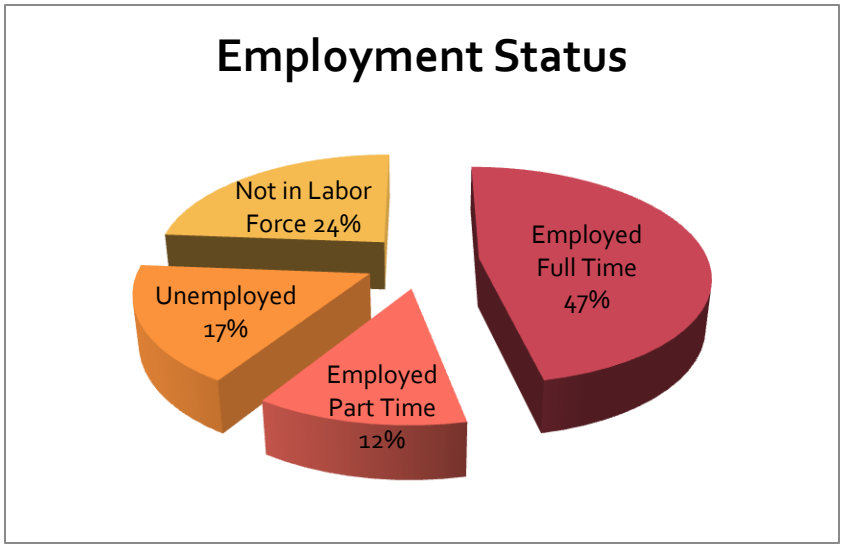
As shown by the pie chart on the right, Sedgwick, Shawnee and Johnson counties were the individual counties home to the largest portion of those in problem gambling treatment, accounting for 55% of the total number. Douglas, Wyandotte and Montgomery counties also showed relatively high numbers. While Douglas and Wyandotte are in close proximity to casinos in the Kansas City area, it seems likely that the Montgomery and Labette numbers were high due to the counties' close proximity to casinos across the Oklahoma border.



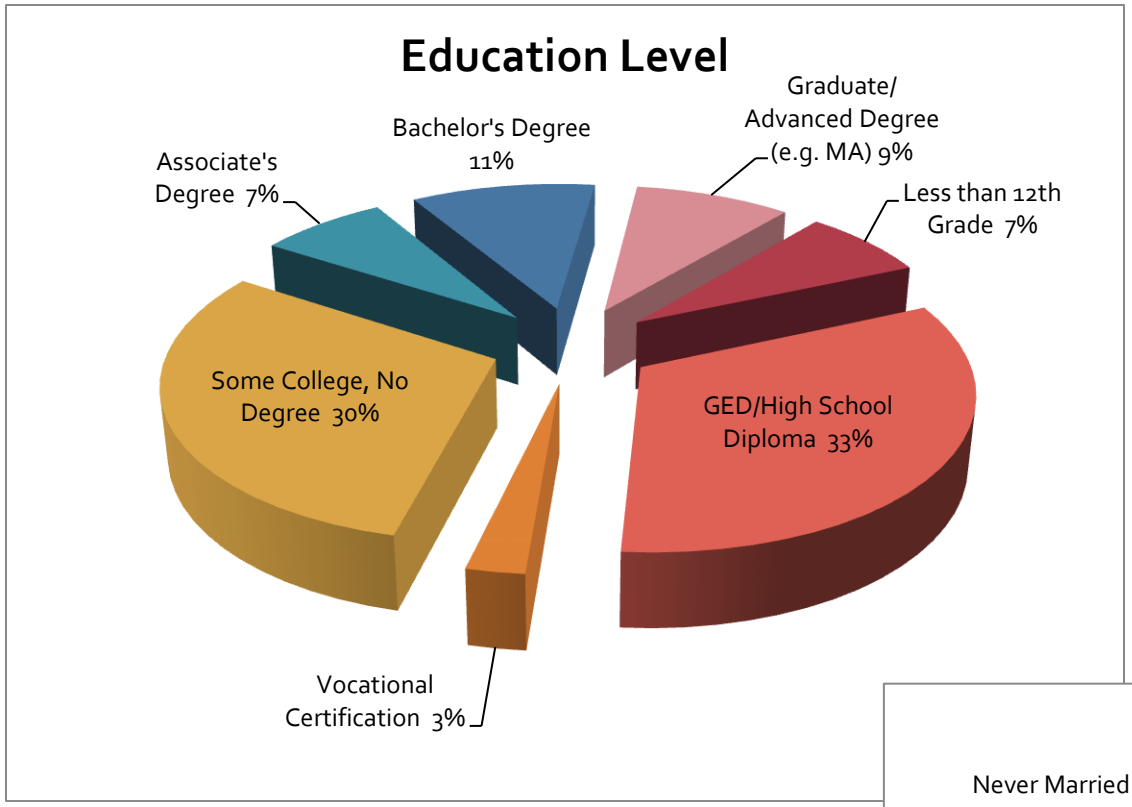




The data shows 59% of those seeking treatment in Kansas were female and 41% were male. However, this figure should not be taken to mean that more females than males have gambling problems in Kansas, as it is possible that females are more likely to seek treatment than males. The mean age was 49, and the median age was 51. For comparison purposes, those in treatment were assigned to 10-year age categories. Individuals in treatment

were most likely to be in the age range of 49 to 58. Breaking down the age categories by gender, younger people in treatment (those between 19 and 38 years old) were more likely to be male. The 39 to 48 age range was almost evenly split between males and females. Those in treatment between the ages of 49 and 68 were more likely to be female. The majority of those in treatment (83%) were white, followed by African-Americans at 8%. Seven percent said they were of Hispanic or Latino origin.

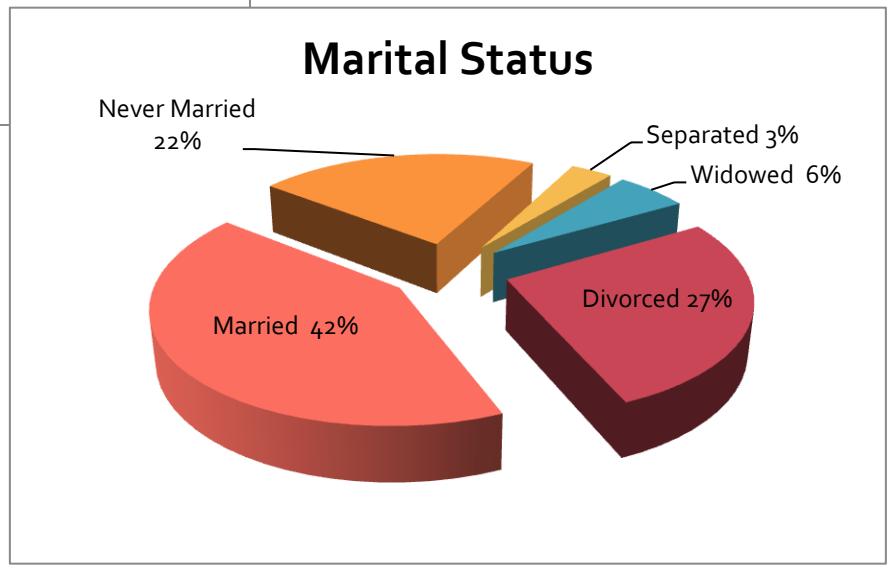



The largest portion of those in treatment (47%) were employed full-time, followed by those not in the labor force (i.e. disabled, retired, etc.) at 24%. A full breakdown is shown in the pie chart at left. Income level data was not collected. The highest education level attained varied widely among those in treatment, with the largest portion (33%) being high school graduates. Nearly as many (30%) had some college credits but no degree. Twenty percent (20%) had a bachelor's degree or higher. Of those in treatment, the largest group (42%) were married at the time of admission, while the second largest group (27%) was divorced. (See charts on next page.) Twenty-three percent (23%) of those in treatment said they had been previously treated for problem gambling. A similar amount (20%) said they had been treated for substance abuse problems previously. More than half (52%) said they had been treated for mental health issues in the past. Twenty percent (20%) had enrolled in the voluntary self-exclusion program prior to admission into treatment.



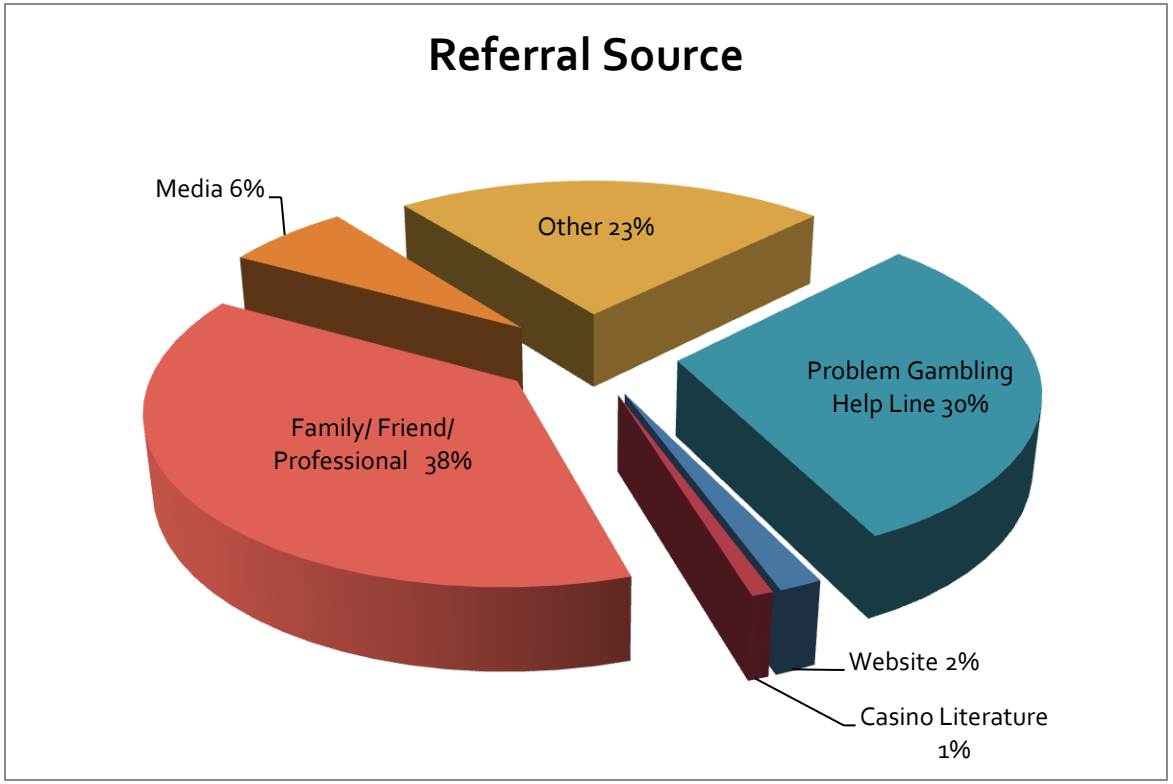

## Other Demographic Information:

- 59% in treatment were female, 41% male
- 7.4% of those in treatment were veterans
- 95.1% lived at a private residence
- 40 was the median age at which their problems with gambling began

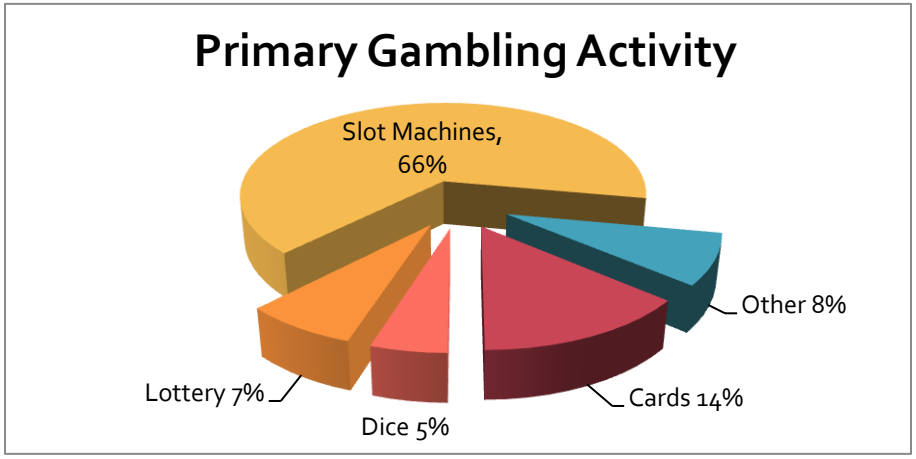


## Admissions and Referrals

Those admitted for problem gambling treatment were referred for treatment by a variety of sources, with the largest category being "Family Member, Friend or Professional" at 38%. The second-largest source of referrals for problem gambling treatment was the Kansas Problem Gambling Help Line, which was cited as the source of referral for 30% of those in treatment. Casino literature and the problem gambling website were cited as the referral source for a small portion of those in treatment, but it is possible that these sources led them to call the Help Line.

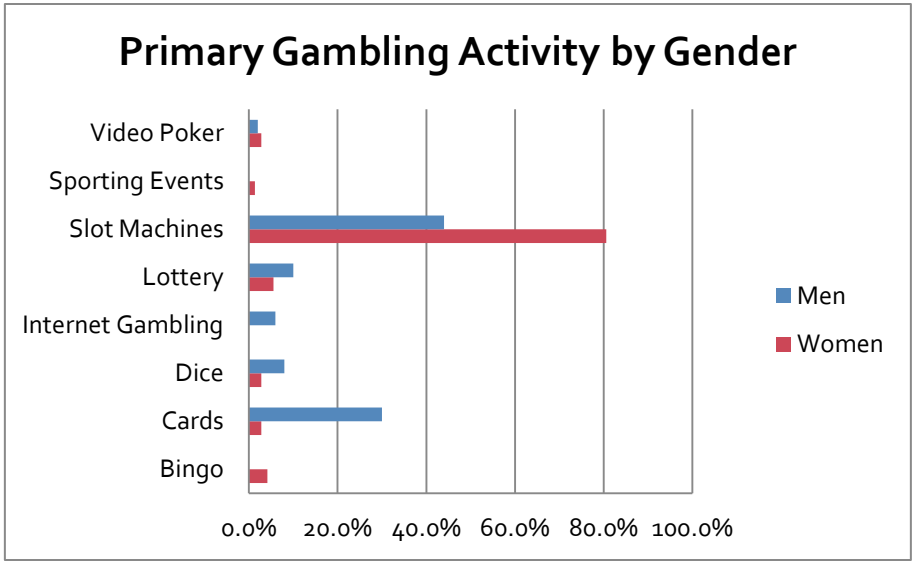


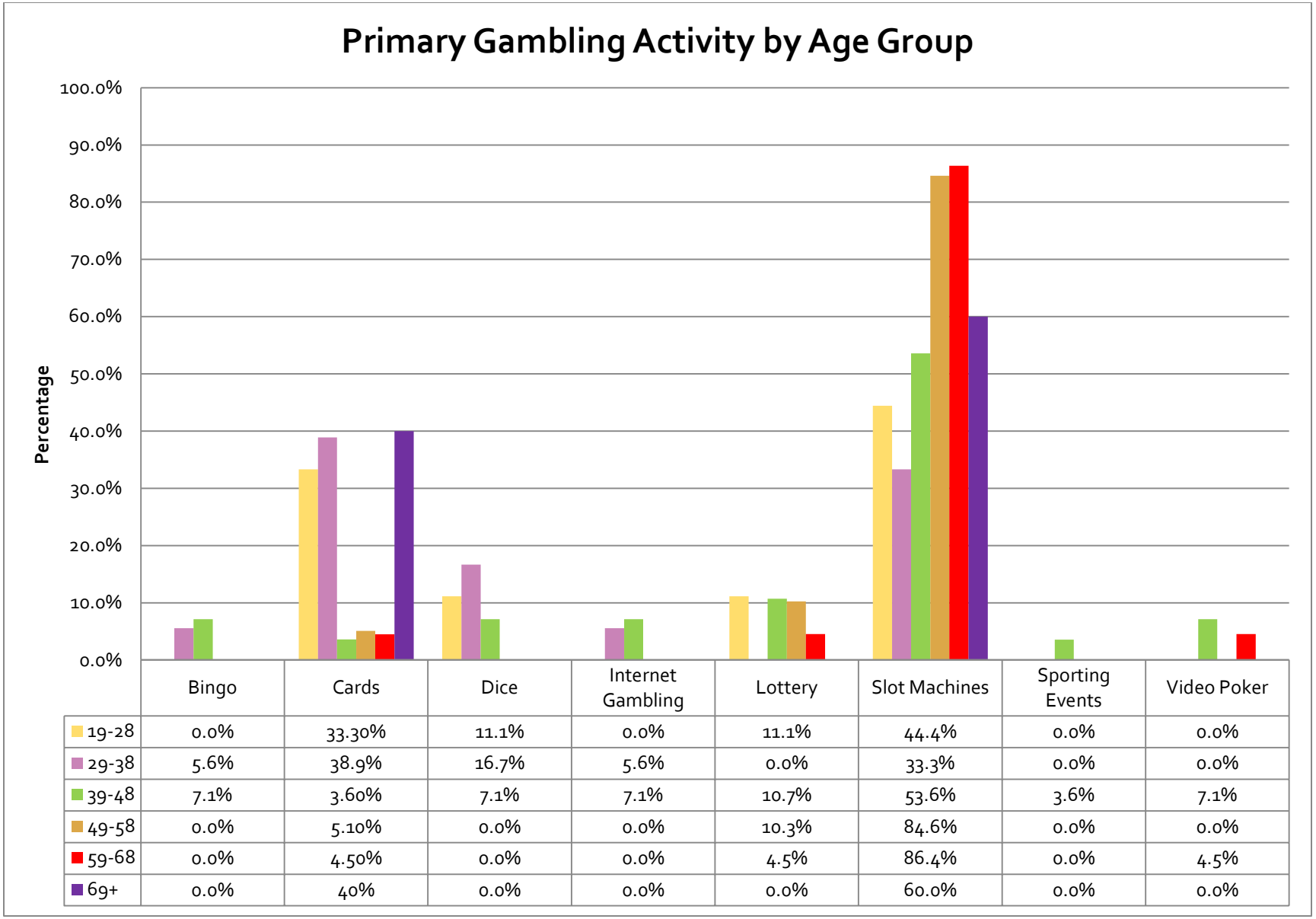

As mentioned previously, 122 individuals seeking treatment were admitted in FY 2012, compared to 36 in February-June 2011. The average number of new individuals seen each month was 7.2 in FY 2011 vs. 10.2 in FY 2012. This figure should continue to increase as more Kansans become aware that no out-of-pocket cost treatment is available.




## Primary Gambling Activity

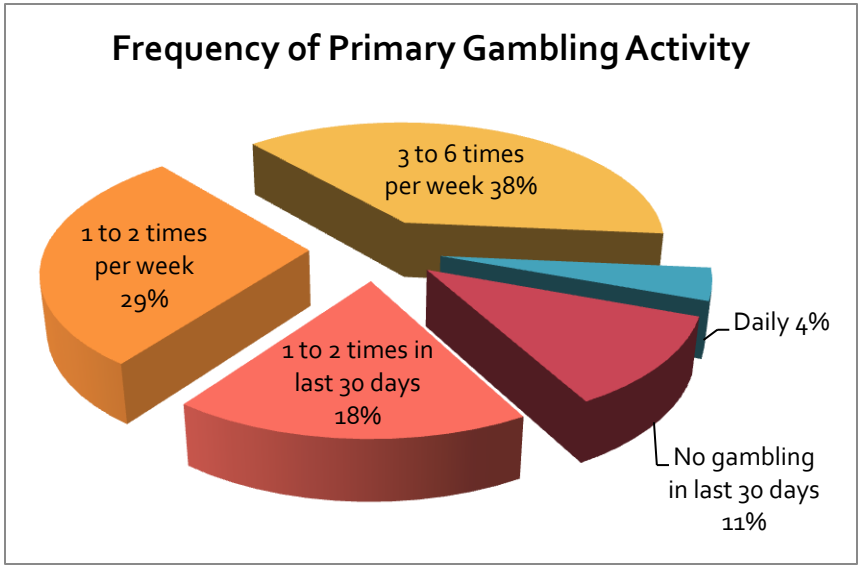
Slot machines were listed as the primary gambling activity by a wide margin. Eighty of the 122 people in treatment (66%) said slot machines were their main form of gambling, followed by card games (including poker, blackjack, and others) at 14%; lottery or scratch-off tickets at 7%; and dice games at 5%. When examining by gender, 81% of women listed slot machines as their primary gambling activity, followed by lottery or scratch-off tickets at 6%. Men showed a wider range of primary gambling activities, but slot machines were still the number one activity at 44%. Men were much more likely than women to list card games as their primary gambling activity. Slot machines were the most popular choice across all age groups except 29-38. Those in younger age groups (19-28 and 29-38) also showed much interest in blackjack and other card games. Note that while the lottery was the third-highest among those in treatment for problem gambling, it was the most prevalent type of gambling for youth 18 and under according to 2012 Kansas Communities That Care school survey data.






| | Bingo | Cards | Dice | Internet Gambling | Lottery | Slot Machines | Sporting Events | Video Poker |
|---|---|---|---|---|---|---|---|---|
| 19-28 | 0.0% | 33.30% | 11.1% | 0.0% | 11.1% | 44.4% | 0.0% | 0.0% |
| 29-38 | 5.6% | 38.9% | 16.7% | 5.6% | 0.0% | 33.3% | 0.0% | 0.0% |
| 39-48 | 7.1% | 3.60% | 7.1% | 7.1% | 10.7% | 53.6% | 3.6% | 7.1% |
| 49-58 | 0.0% | 5.10% | 0.0% | 0.0% | 10.3% | 84.6% | 0.0% | 0.0% |
| 59-68 | 0.0% | 4.50% | 0.0% | 0.0% | 4.5% | 86.4% | 0.0% | 4.5% |
| 69+ | 0.0% | 40% | 0.0% | 0.0% | 0.0% | 60.0% | 0.0% | 0.0% |

For the primary gambling activity reported, the largest portion (38%) said they gambled three to six times per week. The second-largest portion (29%) said they gambled one to two times per week.





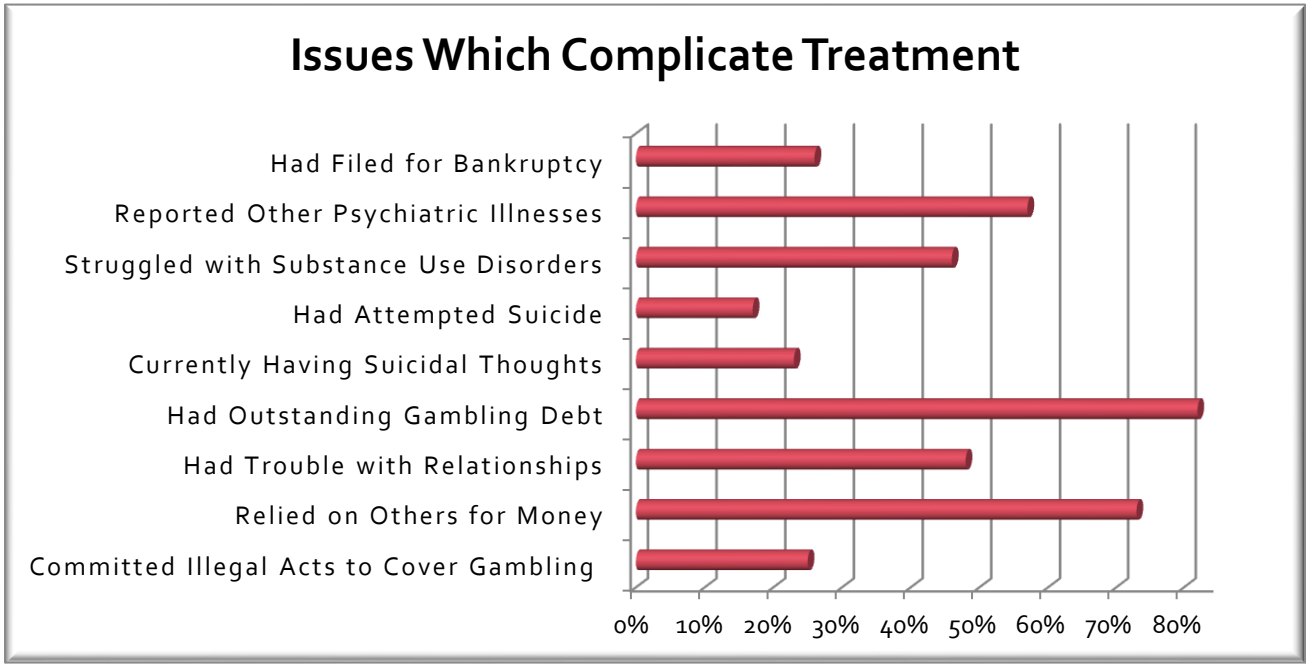
## Secondary Gambling Activity

Forty-four of the 122 people entering treatment in FY 2012 (36%) said they did not have a favored secondary gambling activity. Of those who did, the largest portion (30%) said they played card games (including poker, blackjack and others), followed by the lottery at 29%, and then slot machines at 13% (provided they were in the minority that did not list slot machines as their main form of gambling).

## Family History and Co-occurring Disorders

A history of problem gambling within the family is often reported by those entering treatment. Seventy-six (62%) of those entering treatment said their family had a history of gambling problems. Meanwhile, 65 (53%) said their family had a history of other behavioral addictions.

Nearly half (46%) said they also struggled with substance abuse issues. Of those who said they had substance abuse issues, 68% cited alcohol as their primary substance, while smaller percentages cited other drugs such as cocaine, marijuana or methamphetamine.



Seventy (57%) of those seen for treatment said they also suffered from other psychiatric issues. Of these, 37% reported depression and 21% said they suffered from bipolar disorder. Nearly one-fourth (23%) of all people seen for problem gambling treatment said they were currently suicidal or had thoughts about harming themselves. Most said these thoughts had not progressed into action, but 8% had made plans to hurt themselves and 17% had taken harmful action. Thirteen people (11%) said they had perpetrated violence against another person in the last year. Eight of the 13 said this violence was directed at their spouse or partner.

## Other Negative Consequences

The KCGCs asked those entering treatment to answer a number of questions related to behaviors often exhibited by people suffering from disordered gambling. In order to finance their gambling, 25% of those in treatment said they had committed illegal acts such as forgery, fraud, theft, or embezzlement in the past year. The majority (73%) said they relied on others to provide money to relieve a desperate financial situation caused by gambling in the past year. Nearly half (48%) said they were "always" or "nearly always" experiencing trouble (relationship, financial, legal, job-related, medical, or emotional) because of their gambling habits. Specific problems experienced by those entering treatment included the following:

- 78% had borrowed money from family/friends
- 72% had trouble paying household bills
- 63% of those in treatment had accumulated credit card debt
- 48% had written bad checks
- 45% had taken out payday loans
- 34% had defaulted on loans

- 60% had borrowed from other sources
- 26% had filed for bankruptcy

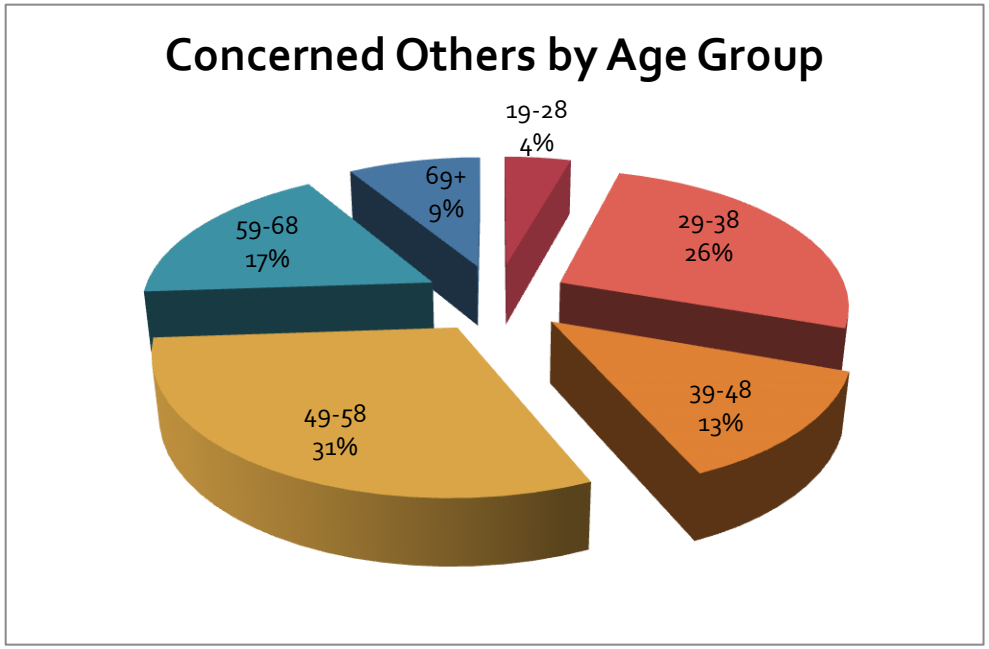
One hundred (82%) out of the 122 people who sought treatment for disordered gambling in FY 2012 said they had outstanding gambling debt. (This percentage is likely higher in reality because the 82% figure excludes those who were unsure of the amount of their gambling debt.) The mean amount of debt reported was $87,209.95, while the median was $15,000.00 and the mode was $20,000.00. All 100 together carried a combined debt of $8,720,995.

## Discharge Data

By the end of fiscal year 2012, 36 individuals had discharged from the program. Of these, 36% were discharged because they had completed the outpatient treatment services, while 28% left against clinical advice and 25% chose to decline additional treatment. The remaining 11% were seen for an initial assessment only. At discharge, 19% said they planned to participate in self-help programs such as Gamblers Anonymous or Alcoholics Anonymous. At the time of discharge, 21% said they had joined the voluntary self-exclusion program, while 79% had not.

## Concerned Others

In addition to treating people with gambling addiction, the state also offers no out-of-pocket cost treatment for those whose lives are affected by their loved ones' gambling problems. These individuals are termed "concerned others." Five concerned others enrolled in treatment in FY 2011, while 18 enrolled in FY 2012. The following statistics apply to all 23 from both years combined.




Similar to those treated for gambling addiction, the largest portion of concerned others (31%) fell in the 49-58 age range. The second-largest group (26%) belonged to the 29-38 category. This is a change from those in treatment for problem gambling, as the second-largest category among that group was 39-48. More than half (57%) were female, and the majority (74%) were married at the time of intake. Nearly all of the concerned others (91%) said they were referred for treatment by a family member, friend or professional, while the remainder said they were referred by the Help Line.

Concerned others qualified for treatment if they answered "Yes" to at least six out of a series of 20 yes/no questions, known as the GamAnon Twenty Questions. However, the vast majority answered "Yes" to many more than six of these questions. Examples of such questions include, "Is the person in question often away from home for long, unexplained periods of time?" and "Have you noticed a personality change in the gambler as his or her gambling progresses?" The mean number of "Yes" answers was 16, while the median was 17 and the mode was 20. It could be argued that the mean was artificially low because one person answered "No" to every question. Each of the others responded "Yes" to at least 11 of the 20 questions.

## Conclusion

The data reported here provides a summary of those individuals who entered treatment for disordered gambling, as well as concerned others who entered treatment. It is critical to understand how the individuals were referred to treatment, their gambling patterns, as well as demographics such as gender, age, county of residence, employment status, education level and marital status. The co-occurring issues reported are also significant with 46% also struggling with substance use disorders and 57% suffering from other psychiatric issues. Another alarming note is the negative consequences the gamblers reported which are summarized in pages 11-13. These issues complicate treatment and certainly make recovery that much more challenging. This report will provide excellent baseline data for comparison in future years.

Data examined for this report reveal a great concern: statistics indicate that there are many more Kansans who struggle with disordered gambling but have not yet sought help. A 1997 meta-analysis conducted by the Harvard Medical School found that approximately 1.14% of adults in the general population will have suffered from a clinical-level gambling problem within the past year. There was no significant variation in this figure across different regions of the United States and Canada. The population of adults in Kansas, according to the 2010 United States Census, is 2,147,686, meaning an estimated 24,484 adults in Kansas are considered to be pathological gamblers. In fiscal year 2012, astonishingly, only 122 (.5%) of those in need sought help. Considering the negative consequences of untreated disordered gambling, it is imperative that Kansas increases outreach efforts through public

awareness. Likewise, it is vital to the wellbeing of current and future Kansans that the state continue to increase awareness of the availability of no out-of-pocket cost treatment.