

Governor's Behavioral Health Services Planning Council  
Problem Gambling/Gaming Sub-Committee  
SFY2023 Annual Report  
9/20/2023

The purpose of the Problem Gambling/Gaming Sub-Committee is to evaluate data and other research to guide policy directed toward reducing problem gambling and gaming and the impact on individual and community health.

The committee is represented by the following members:

**Chris Spera**, Faculty, Pittsburg State University

**Brian Rixon**, Clinical Director for Southwest Guidance Center, GBSHPC-PG Chair

**Dena Kemp**, Southeast Kansas Community Support Specialist, DCCCA

**Kevin Ford**, Outpatient Counselor Southwest Kansas, Mirror, Inc.

**Stephanie Roberts**, Owner of Change your Life Enterprises, Inc., ADAPT, Chair of the South-Central Problem Gambling Task Force, Wichita

**Shanti Ramcharan**, Aetna

**Carol Spiker**, Retired, Community Member

**Kristi Tummons**, SEKMHC

**Katherine Gibbons**, Problem Gambling Specialist, KDADS

**Ronna Corliss**, Problem Gambling Manager, KDADS PG Liaison

The guiding principles of the committee are inclusive of its vision and mission that all Kansans will be free from the impact of problem gambling and the public health of Kansans will be supported through a comprehensive system of services to address problem gambling and the co-occurrence with other addictions. The comprehensive system can parallel SAMHSA's Behavioral Health Continuum of Care Model – Promotion, Prevention, Treatment, and Recovery ensuring service components are in place that support individuals and allowing them to thrive.

To ensure the definition for problem gambling is understood, it is defined in the DSM 5 as a persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress, as indicated by the individual exhibiting four or more of the clinical criteria in a 12-month period. The nine clinical criteria are:

1. Needs to gamble with increasing amounts of money to achieve the desired effect.
2. Is restless or irritable when attempting to cut down or stop gambling.
3. Has made repeated unsuccessful efforts to control gambling.
4. Is often preoccupied with gambling.
5. Often gambles when feeling distressed.
6. After losing money, returns another day to get even (chasing 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.
9. Relies on others to provide money to mitigate financial situations caused by gambling.

The current prevalence of problem gambling in Kansas is based on a small national study that was conducted in the U.S. during November of 2018. These are the current prevalence rates for Kansas based on that national data and the 2022 Census, and the previous 2017 state survey:

- 63,597 adults are problem gamblers which is 2.9% of the adult population. This is the high end of the National average.
- 28,102 adults are pathological gamblers which is 1.63% of the adult population.
- Kansans like to gamble as 76% report gambling in the last year. (2017 KS Survey)
- Many Kansans misunderstand problem gambling as 77% believe it is a lack of willpower. (2017 Kansas Survey)

What does this look like when we look at the number of crisis calls or treatment enrollments?

- In FY21, the call center received **200** calls for help/services.
- In FY22, the call center received **230** calls for help/services.
- In FY23, the call center received **1122** calls for help/services.
- In FY21, **204** individuals received treatment, and **10** entered residential treatment.
- In FY22, **194** individuals received treatment, and **7** entered residential treatment.
- In FY23, **229** individuals received treatment, and **3** entered residential treatment.

If you compare the numbers to substance use disorder or mental health conditions, they look relatively small. Although the numbers seem small, the impact can be great. There are definitely red flags with those that have a gambling disorder according to national data:

- Only 1 in 10 ever seek treatment.
- 20% have attempted suicide.
- 44-70% exhibit a substance use disorder.
- 30% have committed illegal acts.
- 10-17% of children of pathological gamblers have been abused.
- The economic impact of disordered gambling can be in upwards of \$150,000.
- There has been a 34% increase in bankruptcies.
- 25-30% of those attending Gamblers Anonymous have lost their jobs.

Why problem gambling or why not problem gambling? Kansas legalized four destination casinos from 2009 – 2017, in 2022 they legalized sports wagering and in 2023 historical horse racing machines. All of these gambling activities and venues are state-owned and operated.

Consequently, Kansas has an increased duty of care to prevent and address gambling-related harm to individuals, families, and communities.

Kansas promotes healthy communities and problem gambling is a preventable and treatable public health issue that negatively impacts individuals, families, and communities. Providing the appropriate services for problem gambling makes sense.

Funding allocations for problem gambling services are derived from K.S.A. 79-4805 and the Problem Gambling and Other Addictions Fund. This allocation currently funds several problem gambling services.

Grants have been awarded to four community task forces, located in Southwest, South Central, Northeast and Southeast Kansas. The Northeast task force is currently not funded and inactive but will be seeking out new stakeholders to reignite efforts. The task forces are comprised of volunteers who serve both the gaming zone and market region in their designate areas. They are tasked with raising awareness about problem gambling/gaming, providing education about problem and responsible gambling/gaming, promoting the helpline services, and promoting the treatment resources available in Kansas.

The Kansas Coalition on Problem Gambling is also awarded grant funding. They are a not-for-profit organization of statewide stakeholders whose mission is to reduce the onset and progression of problem gambling. They have existed in the state since 1996.

Currently, one full-time gambling specialist works directly with the task forces, the communities they serve, and with the Coalition. Their work includes building collaborative partnerships, consultation and technical assistance, training and education, community outreach about the impact of problem gambling, available services and resources, data interpretation, monitoring grant deliverables, and outcome evaluation. The specialists serve on gambling initiatives at the local, state, and national level. **We look forward to KDADS expansion to provide an additional 3 FTE Problem Gambling Specialist in FY24.**

Funding supports crisis intervention and referral to treatment services that include a crisis phone line 24/7 365 days a year, statewide outpatient treatment services for the problem gambler and their family members and contracted residential treatment should it be medically necessary.

Funding for workforce development provides gambling-specific training for grantees, KDADS staff, and treatment providers. KDADS provides a process for gambling counselor certification. Currently there are 29 network providers and 11 non-network providers. Of the network providers, 9 can serve as clinical supervisors for the certification process, and 6 have obtained an International Gaming Disorder Certification.

The Sub-Committee members are a member of a task force, or a member of the Kansas Coalition on Problem Gambling, or a prevention specialist, or a treatment provider, or one or

more of these. They are involved in problem gambling initiatives throughout the state and sometimes daily. They are also employed fulltime so the time they give to the efforts of the subcommittee are greatly appreciated. The activities or initiatives that occur across the state are inclusive of all that is problem gambling efforts in Kansas.

The Problem Gambling Sub-Committee Activities include the following:

- ✓ Always thinking about membership recruitment.
- ✓ Statewide media campaign.
- ✓ Develop a legislative briefing with problem gambling/gaming information.
- ✓ Promote the national 1800 GAMBLER help line.
- ✓ Funding to implement a prevalence study.
- ✓ Members were involved as presenters or attendees in various presentations at the Kansas Prevention Collaborative Conference, the regional Midwest Conference on Problem Gambling and Substance Abuse, statewide workshops, and in community settings. Topics included problem gambling, sports betting and treatment of sports bettors, responsible sports betting strategies, Military and gambling, and problem gambling and suicide.
- ✓ The South Central Problem Gambling Task Force developed a creative campaign on gaming and shared that information with the subcommittee and the Coalition who then shared it statewide. The “Take a Break” (from gaming) Campaign addresses gaming and youth. It is currently being piloted in the Sedgwick County area.
- ✓ Problem Gambling Awareness Month occurs in March and is imitated by the National Council on Problem Gambling. The KCPG received a proclamation from the Governor recognizing PGAM. The subcommittee was involved in the promotion of this month-long event, encouraging providers to screen for problem gambling, and providing educational materials and other resources to consumers. KDADS provided tweets and other media during this event.
- ✓ Responsible Gaming Education Month occurs in September and is initiated by the American Gaming Association. The subcommittee was involved in the promotion of this month-long event, encouraging the education of responsible gambling strategies (time and money limits).

Activities that are being discussed with action plans in mind are:

- Sports betting
- E-Sports and the pervasiveness in Kansas
- Military and problem gambling
- Helpline Modernization Project
- Statewide media campaign

The committee has been busy. As they have engaged in these activities, there is always conversation and concern about how to address all the needs for problem gambling/gaming under the current funding.

There is concern about the legislation regarding the Problem Gambling and Other Addictions Fund. Although with increased funding in FY24, there is still concern that funding is not adequate to meet the needs of a program that is still developing. There are concerns about the pervasiveness of internet gaming, and sports betting and historical horse racing machines.

The legislation for the Problem Gambling and Other Addictions Grant Fund is written in K.S.A. 79-4805.

*Problem gambling and addictions grant fund. (a) There is hereby established in the state treasury the problem gambling and addictions grant fund. All moneys credited to such fund shall be used for the awarding of grants under this section. **The state grant program will provide assistance for the direct treatment of persons diagnosed as suffering from pathological gambling and provide funding for research regarding the impact of gambling on residents of Kansas. Research grants awarded under this section may include, but need not be limited to, grants for determining the effectiveness of education and prevention efforts on the prevalence of pathological gambling in Kansas.** Moneys in the problem gambling and addictions grant fund may be used to treat alcoholism, drug abuse and other addictive behaviors.*

Legislation to legalize sports wagering in Kansas was passed in May 2022 and was enacted July 1, 2022. There exists in the legislation language that refers to a Problem Gambling and Addiction Grant Fund.

The 2% of the sports betting revenue that is credited to this fund is separate from the 2% casino revenue. The 2% is less any voided wagers, federal excise tax, promotional credits, and amounts paid as prizes. The first \$750,000 after July 1 each year will be credited to the White Collar Crime Fund to address any financial crimes that occur in sports betting; 80% is then credited to the Attracting Professional Sports to Kansas; next, 2% is credited to a Problem Gambling and Addictions Grant Fund; and the remainder goes to the State of Kansas. Lottery revenue estimates for sports wagering in 2023 sit at \$1.8 million and in 2025, that estimate is \$10 million.

The Committee was motivated to begin looking at problem gambling services as a whole to find where there were gaps in service and the need for funding to provide these services. These discoveries became the recommendations:

- Adhere to the legislative intent of the Problem Gambling and Other Addictions Grant Fund (PGOAF) to ensure problem gambling programs receive adequate allocations from the PGOAF to address prevention, treatment, research, and evaluation.
- Create a system of care that is customer/community centered, outcome driven and comprised of a highly competent workforce focused on best practices.
- Develop and implement research-based prevention and treatment strategies that address problem gambling and the co-occurrence with other addictions.
- Reduce the impact of problem gambling by providing resources that uphold prevention, treatment, and service efficacy.
- Infuse problem gambling language into all behavioral health programs and service.

“The state’s goal is to reduce gambling-related harms in Kansas and integrate mental health and addiction services by increasing the capacity of all Kansas BHS funded programs to address gambling and problem gambling /gaming through enhanced screening assessment, awareness, intervention, recovery, and health promotion strategies.”

The program is not there, the funding is not there, but the vision for problem gambling/gaming is still alive. The Committee’s overarching concern is preventing and mitigating harm caused by gambling/gaming. Funding has not and currently does not allow for a comprehensive program that is inclusive of the service components necessary to address problem gambling.

In looking broadly at the service components of the program, we are not where we could be and not where we should be based on funding allocations from the revenue that is credited to the PGOAF from casino gambling and now sports wagering. The vision for problem gambling/gaming services in Kansas are that these service components be adequately funded to first, prevent any harm from occurring because of gambling/gaming and then to mitigate any harm caused by gambling/gaming:

- ✓ **Prevention** – Funding one Gambling Specialist (FTE) and one Community Task Force in each of the 4 gaming zones. FIRST STEPS TAKEN IN 2023
- ✓ **Public Awareness** – Funding a broad spectrum, statewide media campaign in year one, to be adjusted annually thereafter based on data evaluation. FIRST STEPS TAKEN IN 2023.

- ✓ **Workforce Development** – Funding gambling-specific education and clinical supervision to become a Certified Gambling Counselor in Kansas. Funding for continuing education as needed.
- ✓ **Treatment** – Funding that will allow for enrollment growth as we begin to see the harm from internet gambling and sports wagering increase.
- ✓ **Crisis Intervention and Helpline Services** – Funding that will support the increase in calls for help pertaining to sports betting and gaming, and funding to support text and chat capability.
- ✓ **Research and Evaluation** – Funding to support consistent research and evaluation on the prevalence and harms of problem gambling. The last research and evaluation of problem gambling in Kansas was completed in 2017 prior to the SE casino opening and prior to legalized sports betting and Historical Horse Racing.

Scientific research is the foundation of public health knowledge. Health promotion and prevention are primary. Treatment is secondary. When public health is balanced, it considers both the cost and the benefit of gambling. It only takes into consideration the impact that disordered gambling has on the community, but is also includes how government, industry and the health care sector all respond to people struggling with a gambling problem.

Although we are moving forward with the additional funds set aside in FY23, Kansas is “behind the eight ball” so to speak and currently ill-prepared to address all aspects of problem gambling and gaming under the current funding structure. Research and evaluation guide policy and drive decisions about program needs.