



## ***GAMBLING TREATMENT PROGRAMS: EVALUATION UPDATE 2002<sup>1</sup>***

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### **EXECUTIVE SUMMARY<sup>2</sup>**

During this report period, July 1, 2001 to June 30, 2002, the gambling treatment and prevention programs in Oregon underwent significant change. Under the leadership of a newly appointed gambling services manager, a comprehensive plan was initiated that greatly expanded prevention and outreach efforts while supporting the transition to a more efficient treatment delivery mechanism based on a fee-for-service reimbursement. In addition to the innovative prevention and outreach efforts, two short-term residential respite programs were implemented, a self-paced and home-based intervention program was piloted, and significant enhancements to the statewide Helpline were made.

### **A RECORD SETTING YEAR**

Due in major part to the above changes, the enrollment of gambler clients increased nearly 40% and that for family clients approximately 66% over previous year enrollments. The total number of gambler clients enrolling in the 28 programs in the state was 1380 while 272 family members were enrolled in family specific counseling programs. A record setting 34,000 hours of gambling treatment services were delivered in the 2001 – 2002 fiscal year.

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<sup>1</sup> *This program evaluation has been funded by the State of Oregon, Department of Human Services, Office of Mental Health and Addiction Services. Questions regarding the State's problem gambling prevention and treatment efforts should be directed to Dr. Jeffrey J. Marotta, Problem Gambling Services Manager at (503) 945-9709 or Jeffrey.J.Marotta@state.or.us*

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<sup>2</sup> *The full 88 page report can be found at <http://www.gamblingaddiction.org/>*

## **TREATMENT ENTRY**

Approximately 28% of those enrolling into gambling treatment accessed the system through the Helpline. Approximately 10% came to the programs through recommendations of a past or current program participant and another 10% upon the recommendation of a family or friend. One of the goals of the treatment system was to ensure that treatment was available in a timely manner. Commendably, the average number of work days between first call to a program and first available appointment was less than four days and the reported average commute time to treatment was only 25.5 minutes.

## **CLIENT DEMOGRAPHICS**

The average age of gamblers enrolling in treatment was 43.4 years and males were significantly more likely to be younger than females. Males comprised approximately 53.4% of the gambler clients and only 30.5% of the family clients. Slightly over 90% of the clients were White and approximately 41% reported being married. The average annual household income was \$36,246. Over 71% of the clients reported they were employed full-time.

## **GAMBLING PATTERNS AND CONSEQUENCES<sup>3</sup>**

The primary gambling activity of both males and females was video poker (74%) followed by slot machines (10%), cards (5%), betting on animals (2%), Keno (2%), and bingo (1%). Approximately 70% indicated their primary gambling was at a lottery retailer and 22% at a casino or Indian gambling center. The average distance traveled to gamble was 13 miles. The average gambling related debt was \$22,840 with several clients reporting debts well over \$100,000. Approximately 24% of the gambler clients reported being divorced, separated or otherwise lost a significant relationship as a result of gambling. Fifteen percent reported losing a job as a result of gambling, 40% committed illegal acts related to their gambling, and about 10% considered and had plans to commit suicide within the six months previous to enrolling into a treatment program.

## **TREATMENT EFFICIENCY AND EFFICACY**

On average, problem gambling treatment consisted of 13 individual and/or group counseling sessions that took place over a four month period. The average cost

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<sup>3</sup> The figures presented in this section have been rounded to the nearest integer.

for treating an individual with a gambling problem was \$715. For clients classified as “successful completions,” on average, treatment consisted of 25 sessions occurring over an eight and a half month period and cost \$1439.

It is estimated that problem gambling treatment in Oregon has an approximate efficacy rate of 75%. At the time of discharge for those clients who successfully completed treatment, 98.1% reported either abstinence (71%) or reduced (27.1%) gambling. At six-months post-discharge, 89.9% reported either abstinence (46.2%) or reduced gambling (43.7%) when compared to before treatment. A similar rate of abstinence and reduced gambling was reported at 12 months post-discharge.

Nearly 95.5% of the clients were willing to recommend the programs to others. The most helpful elements of the treatment were gaining a better understanding of themselves and their relation to gambling; learning alternative ways to solve problems; and being able to share the experience with peers under the direction of skilled counselors.

Approximately 70% of those problem gamblers who enroll do not complete their full course of prescribed treatment. Nonetheless, follow-up data indicated that 37% of these clients reported no gambling at 90 days and an additional 29% reported gambling much less than before treatment. Interestingly, those who left treatment before completing the entire program were significantly more likely to report more severe symptomology than those who remained in treatment longer.

## **SUMMARY**

Even with phenomenal growth in enrollments of more than 43% over the previous year, the statewide gambling treatment system continued to provide effective care. This growth appears to be the result of a combination of factors including the initiation of formal prevention and outreach efforts, updated Lottery sponsored media campaign, increased attention to business under the direction of a highly visible problem gambling services manager, and expanded word of mouth referrals.