



Building, Maintaining and Evaluating a Statewide Treatment Program for Problem Gambling

Timothy Fong MD

Terri Sue Canale

UCLA Gambling Studies Program

ICGRT 15th Annual Conference

Las Vegas, NV

May 28, 2013

Relevant Financial Relationships

Dr. Fong

Name	Commercial Interests	Relevant Financial Relationships: What Was Received	Relevant Financial Relationships: For What Role	No Relevant Financial Relationships with Any Commercial Interests
Reckitt Benckiser		Honorarium	Speaker's Bureau	
One80 Treatment Center		Honorarium	Speaker's Bureau	
Psyadon Pharmaceutical		Research Grant	Research	

Building

California Prevalence Study (2005)

n=7,121 respondents, 18 years and older

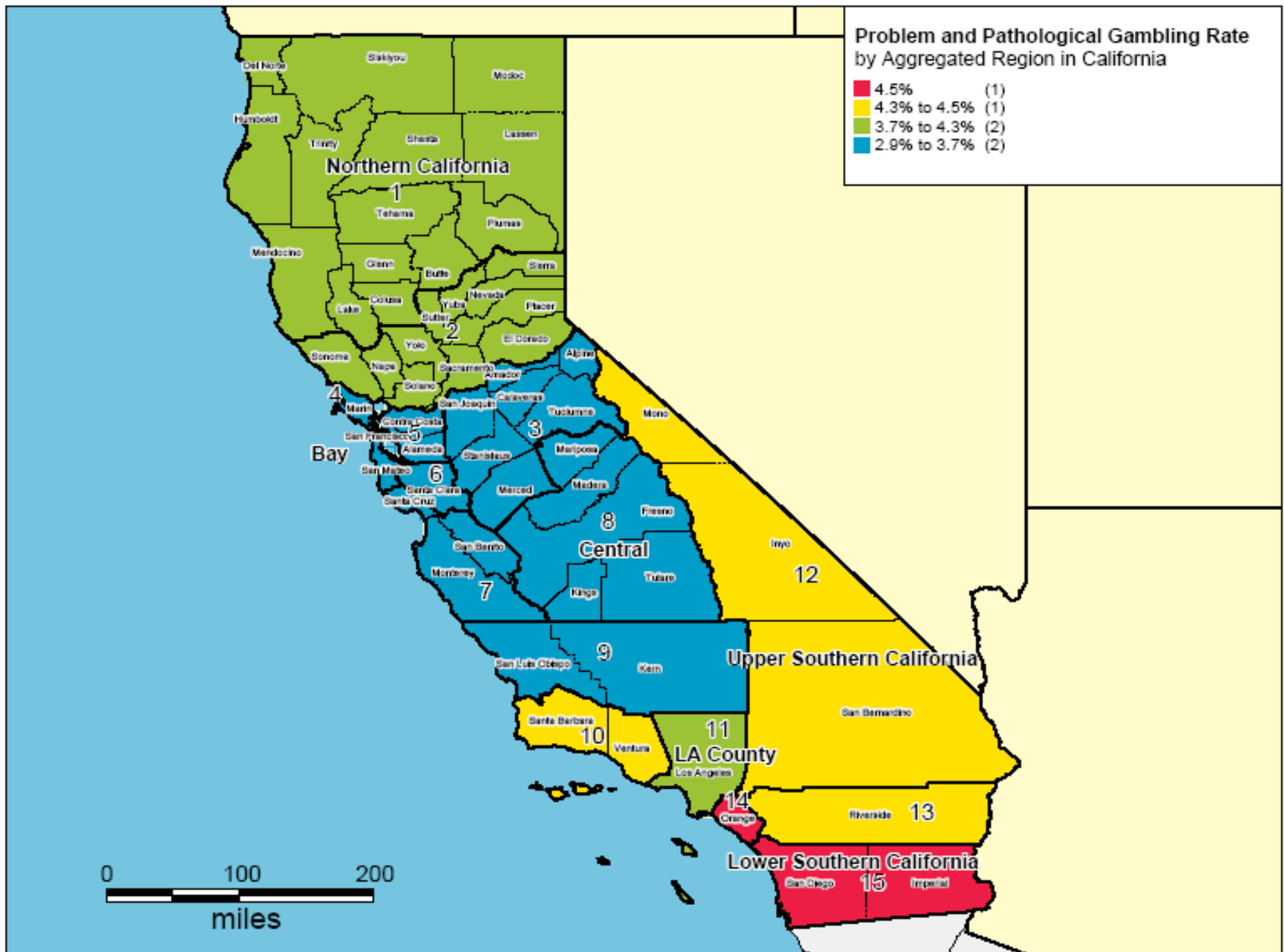
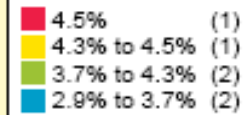
Problem gambling 2.2%

Pathological gambling 1.5%

~1,000,000 problem/pathological cases

Highest Risk: African-Americans,
Disabled,
Unemployed

Problem and Pathological Gambling Rate by Aggregated Region in California



California Problem Gambling Treatment Services Program

www.problemgambling.ca.gov
(2009 – Present)



OFFICE OF PROBLEM GAMBLING

California Department of Alcohol & Drug Programs

1700 K Street Sacramento, California 95814-4037

1-800-GAMBLER

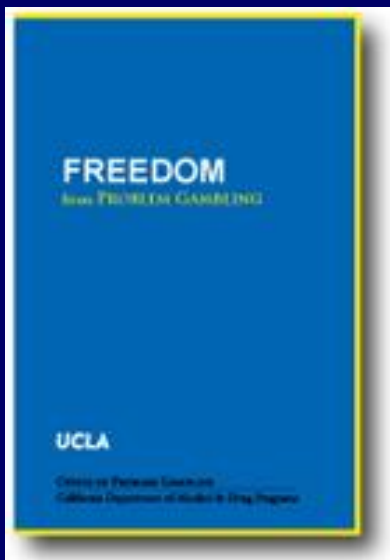
1-800-486-8591




**GAMBLING
MAKES ME
FEEL LIKE MY
WHOLE LIFE
IS IN THE
SHADOWS**

**FOR FREE 24/7
HELP**

**CALL:
1-800-GAMBLER**



Problem Gambling Telephone Interventions (PGTI)

- 1-800-GAMBLER (Spanish)
- 1-888-968-7888 (Chinese Languages)
- Weekly sessions over the phone
 - Intake, 6 sessions, end of session
- Staffed by trained therapists
- Problem Gamblers and Affected Individuals
- Goal is to engage and transition to live treatment

CPGTSP

Outpatient Provider Network

- ~~>250 authorized providers~~
 - (30 hrs of training, 10 hrs supervision)
 - MFT, LCSW, PhD
- Ongoing monitoring/support
- Therapeutic freedom
- Treatment blocks
- Access by: 1-800-GAMBLER or online directory / therapist locator

CPGTSP

Intensive Outpatient Program

- 3 days / week for 4 weeks (12 days)
- Comprehensive, integrated treatment
- Separate gambling-specific treatment
- Utilizes evidenced-based care
- Referrals from OP and RTC
- Operates in Los Angeles
 - Beit T'Shuvah Right Action Program

CPGTSP

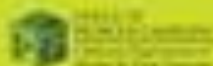
Residential Treatment

- Provide highest level of care for most severely ill
- 30 days of treatment, >15 hrs / week
- Integrated treatment with SUD
- Located in Los Angeles and SF
 - Beit T'Shuvah: 310-204-5200
 - Health Right 360: 415-762-3705

CPGTSP: Clinical Innovations at UCLA

- Efficacy of manualized treatment and determine best practices
- Enhancing effectiveness of counselors in providing treatment
- Mindfulness for problem gambling
- Manualized therapy for romantic partners of PG

if poker becomes
a problem ...



For help call: **1-800-GAMBLER**
www.problemgambling.ca.gov

Maintaining

CPGTSP Maintenance

- Supervision
- Compliance Monitoring Report
- Yearly Summit
- CEU requirement
- Phase I and II trainings
- Stakeholders Meeting

Evaluation

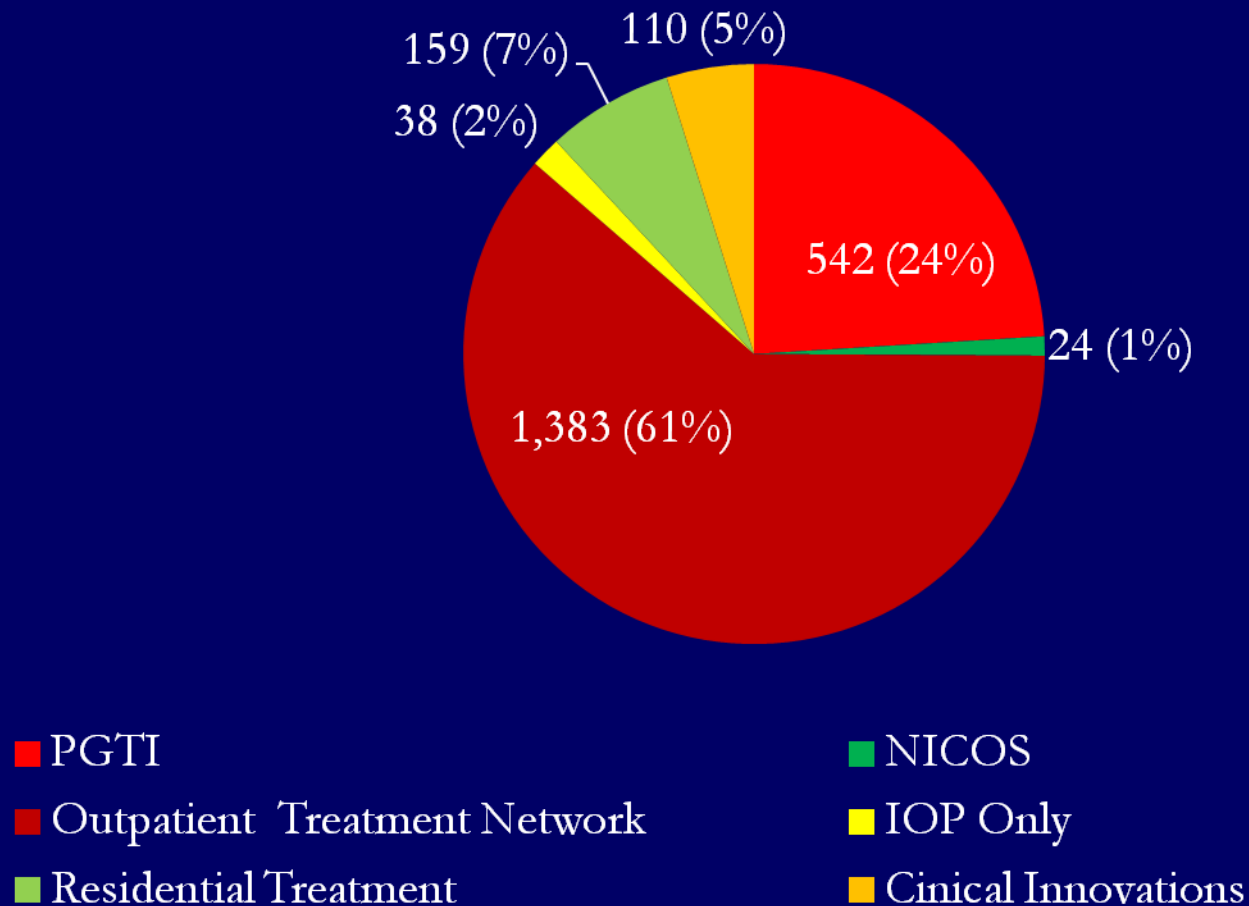
Early Treatment Indicators Report (2009-6/12)

- Characteristics of CPGTSP Clients
- Treatment Utilization
- Treatment Impact
- Client Feedback about the CPGTSP
- Characteristics of CPGTSP Providers

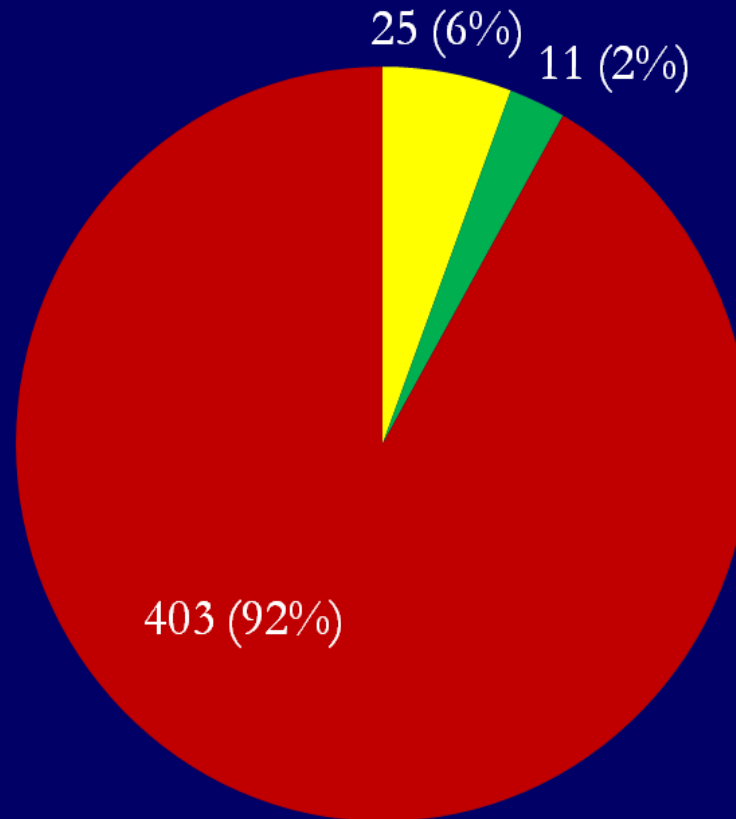
CPGTSP Data

- Large database on gamblers and affected individuals
 - Some time required for the database to mature
 - Capabilities of the data management system are still being explored

Gamblers Served by Modality



Affected Individuals Served by Modality



■ PGTI ■ NICOS ■ Outpatient Treatment Network

Highlights from the Early Treatment Indicators Report

- Across all treatment components:
 - Reduction in PG symptoms, gambling behavior, and the harm caused by gambling
 - CPGTSP clients met 8 out of 10 DSM-IV criteria for pathological gambling
 - Preferred form of gambling across all clients was slot machines, followed by casino table games

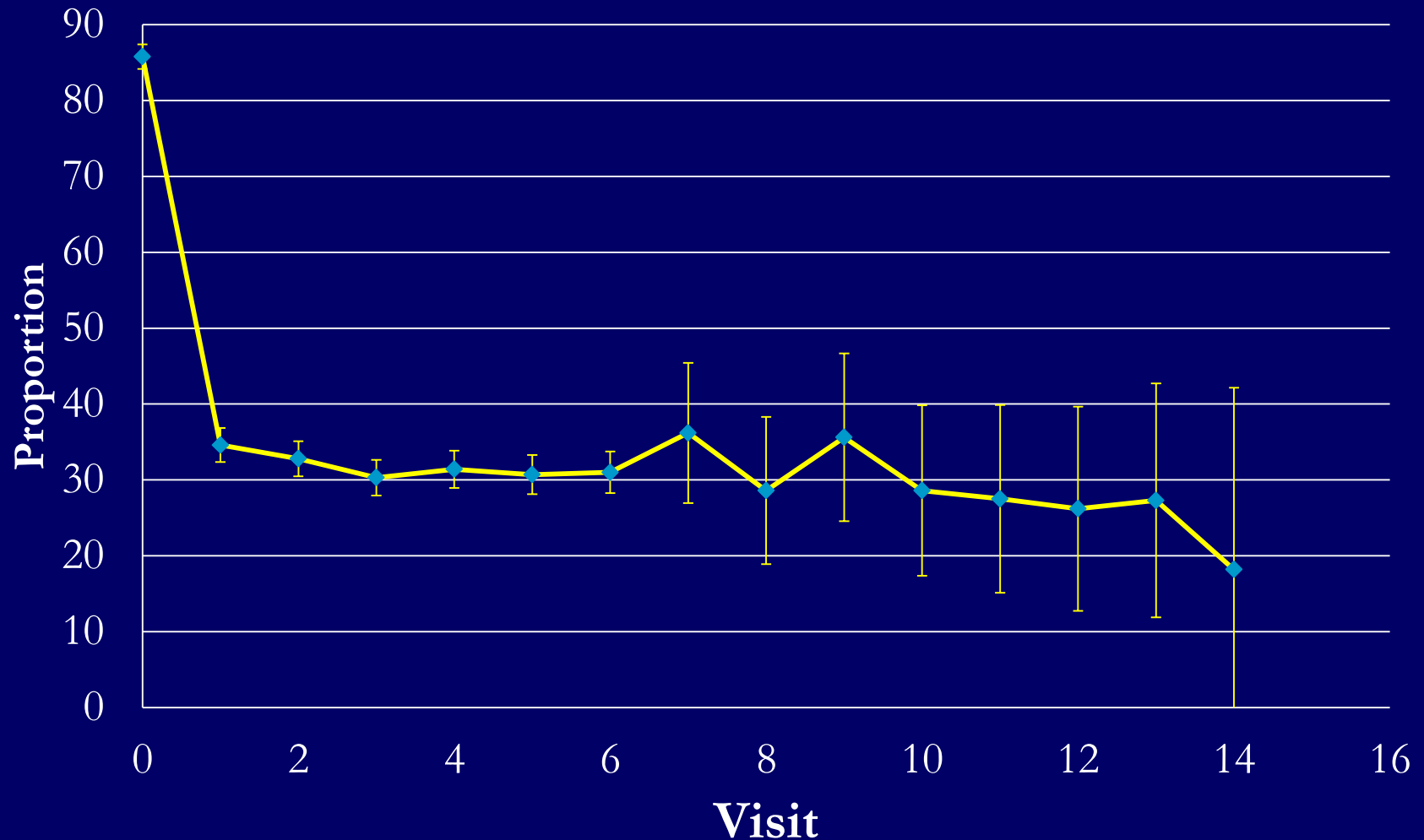
Highlights from the Early Treatment Indicators Report

- Als were mainly spouses or partners of gamblers
- Als spent less time in treatment than gamblers
- More sessions received, better the outcomes
- Client feedback regarding their experience in the CPGTSP was highly positive

Change in NODS Scores for Outpatients

Variable	N	Mean	SD	Paired t Test Value	Pr > t
At Intake	1293	8.16	1.85		
At End of Treatment	1293	6.66	3.1		
Difference	1293	1.5	3	18.02	<.00 01

Proportion of Outpatient Clients Who Gambled by Treatment Visit



Data Strengths

- Very large sample
- Capturing information at point of entry
- Tracking in-treatment information
- Overlapping data points across forms
- Universal forms allow some comparisons across treatment modality
- Broadness of data collection can generate questions for in-depth study

Now what?

- Research partners needed!
- Ongoing quality assurance
- Increase visibility of CPGTSP
- Seek permanent funding
- Balance supply and demand
- Forge more collaborations



Contact Information

Timothy Fong MD

Richard Rosenthal MD

310-825-1479 (office)

tfong@mednet.ucla.edu

uclagamblingprogram.org