

# Insights about Digital Screening for Gambling- related Problems

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# Acknowledgments

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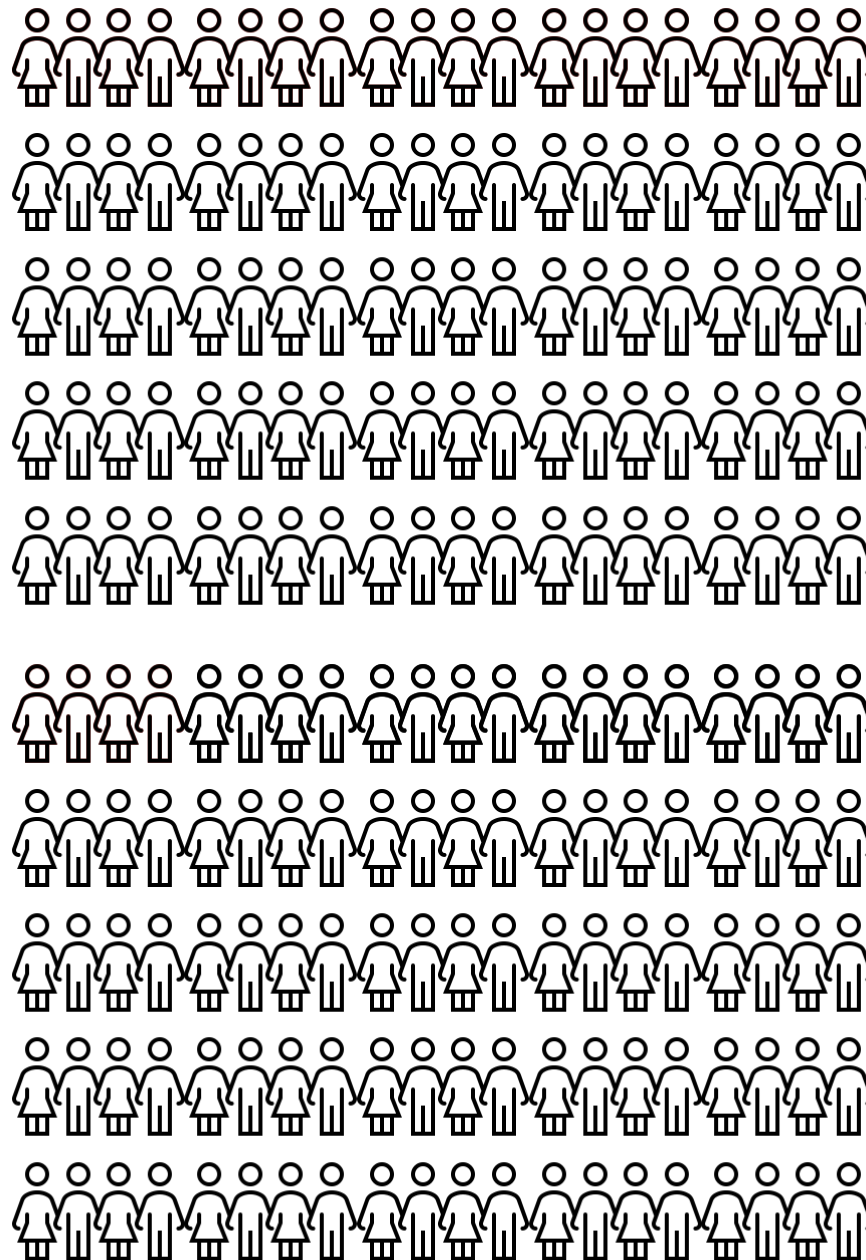
## Current Funding

- NIH: NIGMS, NIMH, NIDA (Grant No. 1S06GM146095)
- Massachusetts Department of Public Health via Health Resources in Action
- Massachusetts Gaming Commission via GREO
- International Center for Responsible Gaming
- Foundation for Advancing Alcohol Responsibility
- Cambridge Community Foundation
- National Council on Problem Gambling
- Greater Boston Council on Alcoholism
- DraftKings, Inc

*...let's see if we can't  
prevent being ill by  
trying to offer a love of  
prevention before illness.  
You see what I mean? So  
that we don't have to  
wait to get sick and then  
try to find a way to heal  
ourselves.*

-Maya Angelou, 2013





# Treatment Seeking & Gambling Disorder

	Gambling Impact & Behavior Study (N=2,417)	National Epidemiological Survey on Alcohol & Related Conditions (N=43,093)
<u>Lifetime (Unclustered) Pathological Gambling</u>	0.8% (N=21)	0.4% (N=185)
	<i>Weighted</i>	<i>Weighted</i>
Treatment Seeking or GA	7% (N=2)	10% (N=22)
Recovery (with or w/o treatment/GA)	39% (N=9)	36% (N=70)
Natural Recovery	36% (N=8)	33% (N=62)

# I want help, but not for gambling

**Emotional or substance  
use problems**

49%

**Gambling Problems**

0%

# Reasons for Limited Help Seeking

- Failure to recognize?
- Patient preferences?
- Stigma?
- Limited workforce?
- Barriers to expertise?
- Path to recovery?



# Screening for Behavioral Health

- Screening is a structured process to identify individuals with a given health condition
- Applied to gambling, screening identifies those whose gambling behaviors suggest risk for Gambling Disorder or gambling-related harms
- Screening is not diagnostic but helps to identify individuals who should seek further assessment
- Screening can be accomplished by anyone, including self-screening





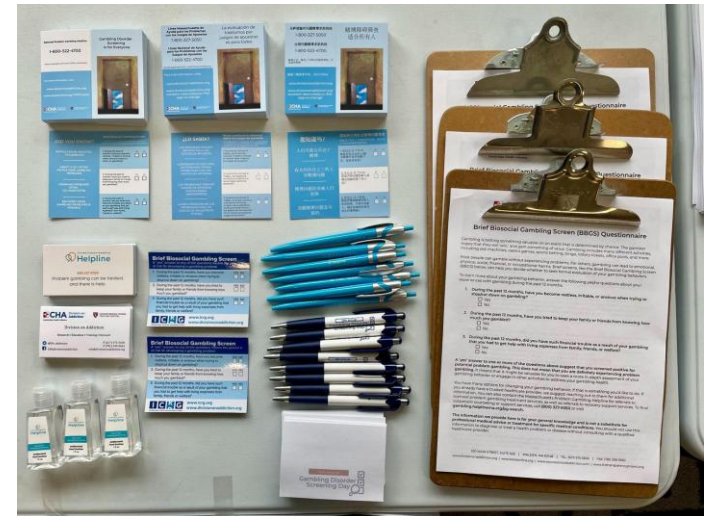


# GDSD

## Gambling Disorder Screening Day

Tuesday, March 14, 2023

[www.divisiononaddiction.org/outreach-resources/gdsd](http://www.divisiononaddiction.org/outreach-resources/gdsd)



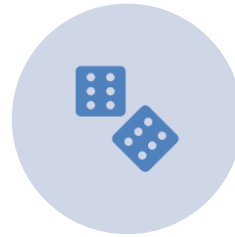
# Objectives of Screening Day



**INFORM** ABOUT THE IMPORTANCE OF SCREENING FOR THIS TREATABLE BUT OFTEN UNRECOGNIZED CONDITION.



**EDUCATE** ABOUT THE NATURE OF GAMBLING-RELATED PROBLEMS AND GAMBLING DISORDER AND EDUCATE ABOUT HOW TO SCREEN FOR IT.



**IDENTIFY** PEOPLE WHO MAY BE EXPERIENCING GAMBLING-RELATED HARMS THROUGH THE ACT OF SCREENING.



**CONNECT** PEOPLE WHO MAY BE EXPERIENCING GAMBLING-RELATED HARMS WITH ADDITIONAL RESOURCES (HELPLINES, SELF-HELP TOOLS, FELLOWSHIP, TREATMENT).

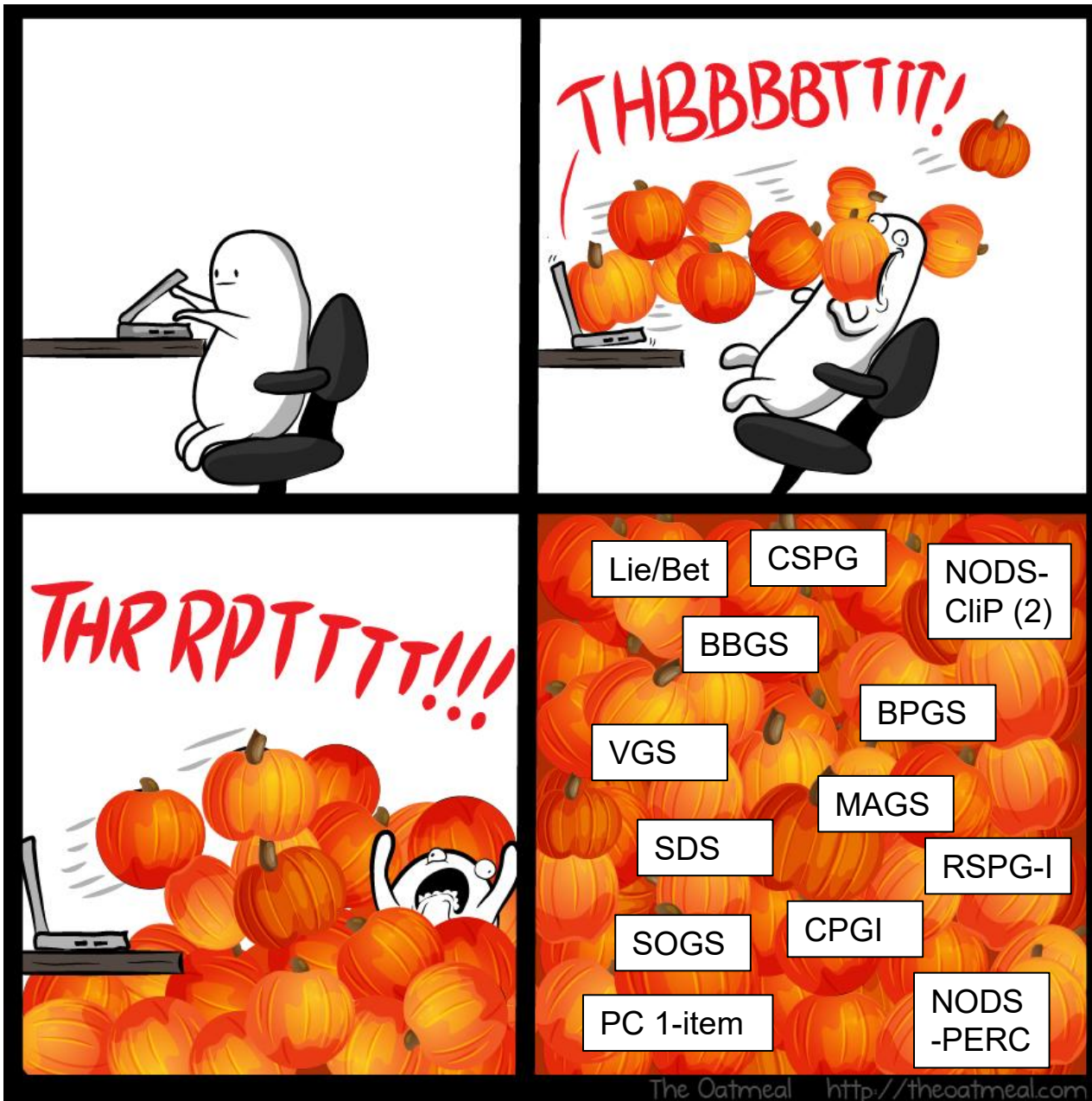
# How to Participate in Screening Day

## Hosts

- Screen people for Gambling Disorder
- Clients during appointments
- Drop-in sessions
- Community spaces

## Supporters

- Share information
- Spread awareness
- Encourage organizations to participate in Screening Day



# How can you pick the best screen for you?

- Consider your needs
  - Amount of time available
    - # items
    - Complexity of scoring
  - Big net or specialized trap
  - Preferred time frame (lifetime versus current)
  - Screening population (clinical, general, criminal, athletes, etc.)
  - What do you want to know?
- Consider psychometric quality

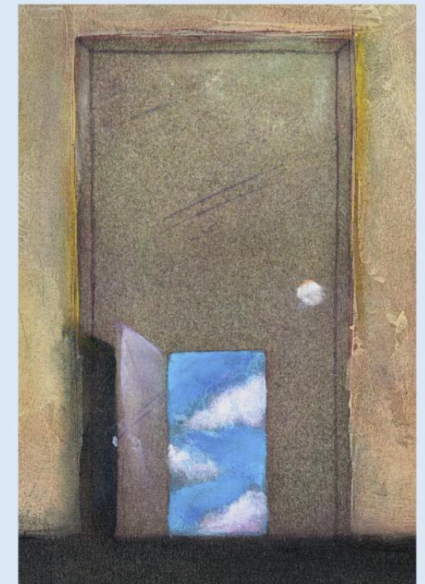




# Brief Biosocial Gambling Screen (I)

- Brief screener with 3 yes/no questions
- Scoring: “Yes” to any question is considered a positive screen; indicates potential gambling-related problems and the need for additional evaluation
- Used successfully with veterans, college students, among those in treatment for a substance use or mental health problem, in consumer credit counseling settings

Gambling Disorder  
Screening  
Is for Everyone



# Brief Biosocial Gambling Screen (II)

1. During the past 12 months , have you become restless, irritable, or anxious when trying to stop/cut down on gambling?
2. During the past 12 months, have you tried to keep your family or friends from knowing how much you gambled
3. During the past 12 months, did you have such financial trouble as a result of your gambling that you had to get help with living expenses from family, friends or welfare?

# Post-screening Process

- For positive screens:
  - Explain that a positive screen is **not** a diagnosis for Gambling Disorder, but it does indicate gambling might be impacting their life
  - Offer to refer them to someone who can conduct a full assessment and help them explore their relationship with gambling
  - Provide additional resources
- For negative screens:
  - Explain that they screened negative, but if they are worried about their gambling or want to make a change they might benefit from additional resources
  - Offer additional resources



# Referrals & Resources

Have a list of resources identified ahead of time:

- Gambling Helpline/Chatline
- Mutual-support groups (Gamblers Anonymous, Bettors Anonymous, SMART Recovery, GamTalk, etc.)
- Your First Step to Change (available in English, Spanish, Simplified Chinese, Traditional Chinese, Vietnamese)
- Voluntary Self-Exclusion
- Responsible Gambling tools
- Other hotlines & helplines (Substance Use, 988 Suicide & Crisis Lifeline, etc.)
- Informational sources (podcasts, books, websites, etc.)



**Michael Sciandra, MA, CPSS, IGRS, BARA** ✓ • 1st

Executive Director, Addiction Recovery Advocate, Public Speaker, ...

25m • 🌐



Sometimes, a problem gambling screening event is more than a reason to inform and potentially reduce gambling-related harm.

Yesterday, it was a reason to:

- Talk to a gentleman I used to play poker with.
- Help a gentleman pack his backpack. (he saw me unpack my table supplies and wondered how I got it all into two bags)
- Follow up with an individual who previously heard one of my talks in an impatient treatment facility.
- Discuss suicide ideation and the reality for an individual struggling with addiction.
- Give a weather forecast to people spending the night in tents.
- Let a gentleman call his pharmacy from my cell phone.
- Receive a heartfelt thank you from someone who appreciated me holding space at a location many others do not visit.

No matter your mission or passion, being available, willing to talk, and meeting people where they are at in their life journey can be as important as the original reason for your visit.

Yesterday was a poignant reminder.

# SCREENING DAY 2025

# Host and Supporter Activities in 2025

- At least 317 individuals and organizations—representing 39 U.S. states, 1 U.S. territory, and 7 other countries
- Participants included: lotteries and gambling operators, healthcare professionals, community organizations, colleges and vocational schools, etc.
- Events held at: behavioral health and healthcare centers, addiction treatment and recovery centers, casinos, GameSense centers, community centers, libraries, college campuses, faith-based institutions, Tribal community centers, bus/train stations, fairs and festivals
- 12 sites reported outcomes to us for 837 individuals identifying 16.2% positive screens

## 2025 Gambling Disorder Screening Day (GDSD) Participation

At least 317 unique individuals and organizations participated worldwide.

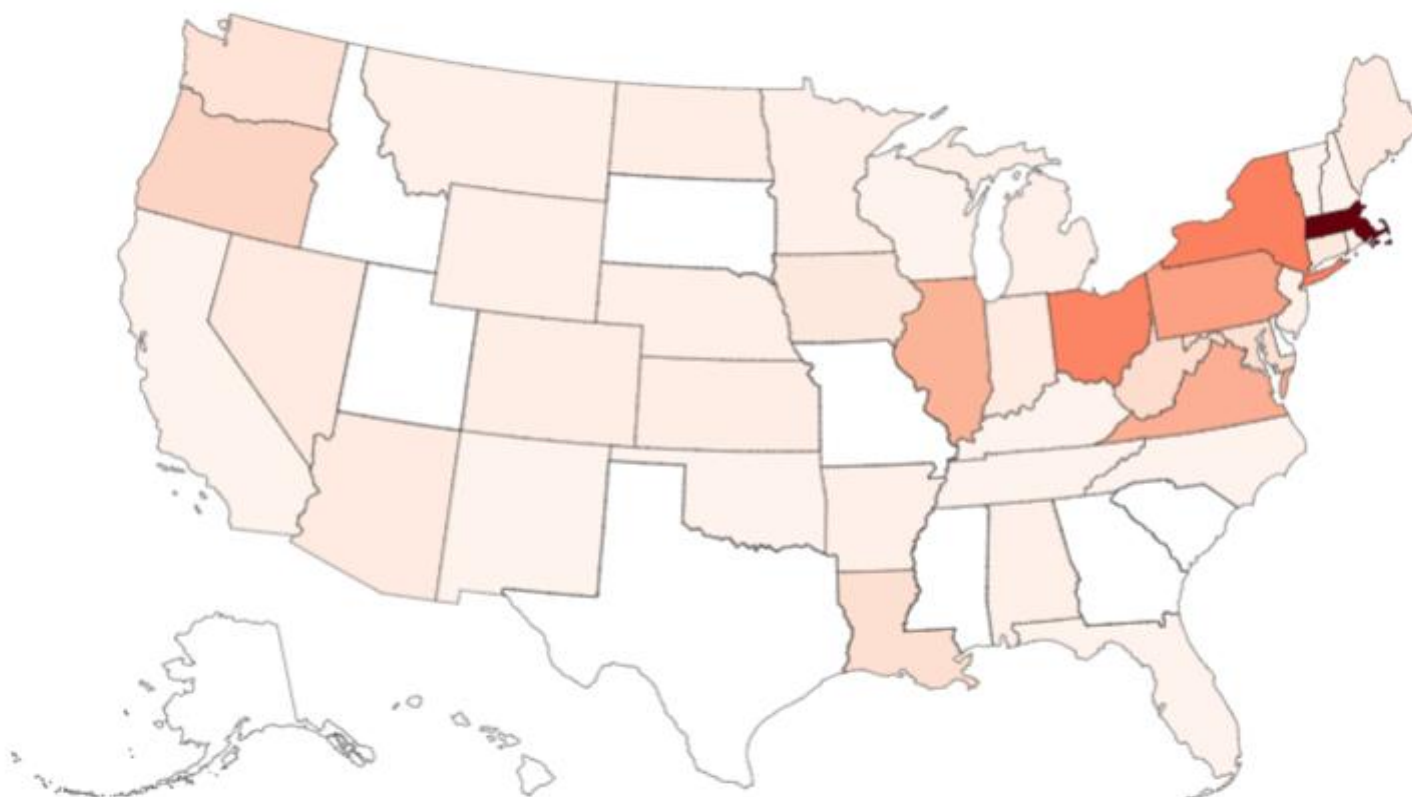
Participation was considered as one or more of the following: posting about

GDSD online (e.g., social media, website), requesting BBGS pocket screeners, 0

explicitly expressing support or participation, and/or receiving a stipend to

host a GDSD event (Massachusetts).

70



Source: U.S. Census Bureau 2021 boundaries • Created with flourish.studio

Additional participation not shown: National organizations (7), individuals/organizations in U.S. territories (U.S. Virgin Islands (1)), and individuals/organizations in other countries (Australia (1), Canada (3), Czech Republic (2), Italy (1), Nigeria (2), Paraguay (1), and UK (2)).

# Division Activities

- Direct outreach to 227 individuals and organizations
- New materials: Best Practices guide, facts sheet, posters, screening pads
- Mailing resource toolkits to participating councils on gambling
- Technical assistance to participating groups & instructional webinars, including over 50 MA organizations via MTAC
- Hosting three in-person screening events



# Resource Toolkits



# Brief Biosocial Gambling Screen (BBGS) pocket screener distribution

*Gambling Disorder Screening Day 2025*

**9,478** pocket screeners distributed

English  
**4,742**

Spanish  
**1,789**

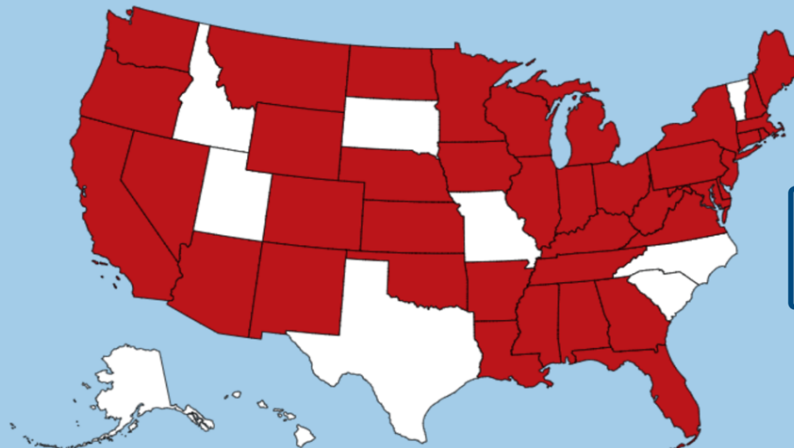
Simplified Chinese  
**982**

Brazilian Portuguese  
**680**

Vietnamese  
**655**

Haitian Creole  
**630**

**77**  
individuals &  
organizations



**40**  
U.S. states

Source: U.S. Census Bureau 2021 boundaries • Created with flourish.studio



## A Gambling Researcher, a Former Gambler, and a Current Gambler Reflect on Gambling Disorder Screening Day

Posted on March 10, 2025



**Editor's note:** Please enjoy the following op-ed, which was prepared by Dr. Debi LaPlante, Director of the Division on Addiction, along with Jamie Salsburg and Mark Checkwicz, host and regulator contributor to the [After Gambling](#) podcast.



What makes an intervention a good intervention? For the most part, interventions are made with good intentions. That's true of Gambling Disorder Screening Day (GDSD). Since its [founding in 2014](#), GDSD has reached people across the nation and around the world. Thousands have been screened in

person and online for gambling disorder, many for the first time. Public health organizations, the gambling industry, advocacy groups, academics, and government bodies have participated through social media, hosting screening events, writing

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- [STASH: Science Threads on Addiction, Substance Use, and Health](#) (234)

# Lived Experience Suggestions

- Message framing: consider the benefits of screening and de-emphasize the negatives
- Innovate screening to encompass a balanced scorecard: what are areas of strength, what are areas of weakness
- Organizational context: consider non-medical sites, like campuses
- Screening for affected others: help people understand what signs suggest their lives are being harmed

# Everett Hospital





# Everett Haitian Community Center

## Sa Kominotè Nou An Bezwen Konnen Sou Jwèt Aza epi Pwoblèm Depandans ak Jwèt Aza: Yon Resous Pou Kominote Ayisyen An Nan Everett

### Ki sa jwèt aza ye?

Jwèt aza se parye yon bagay de valè sou yon evènman ki detèmine pa chans. Jwè a espere li pral genyen yon bagay de valè. Apre li mete fè yon payaj, li pa ka reprann.

### Egzanp jwèt aza enkli:

- Bòlèt
- Jwèt kazino
- Ti krates
- Laroulet
- Jwèt zo
- Pokè
- Domino



### Rankontre Ti Joel

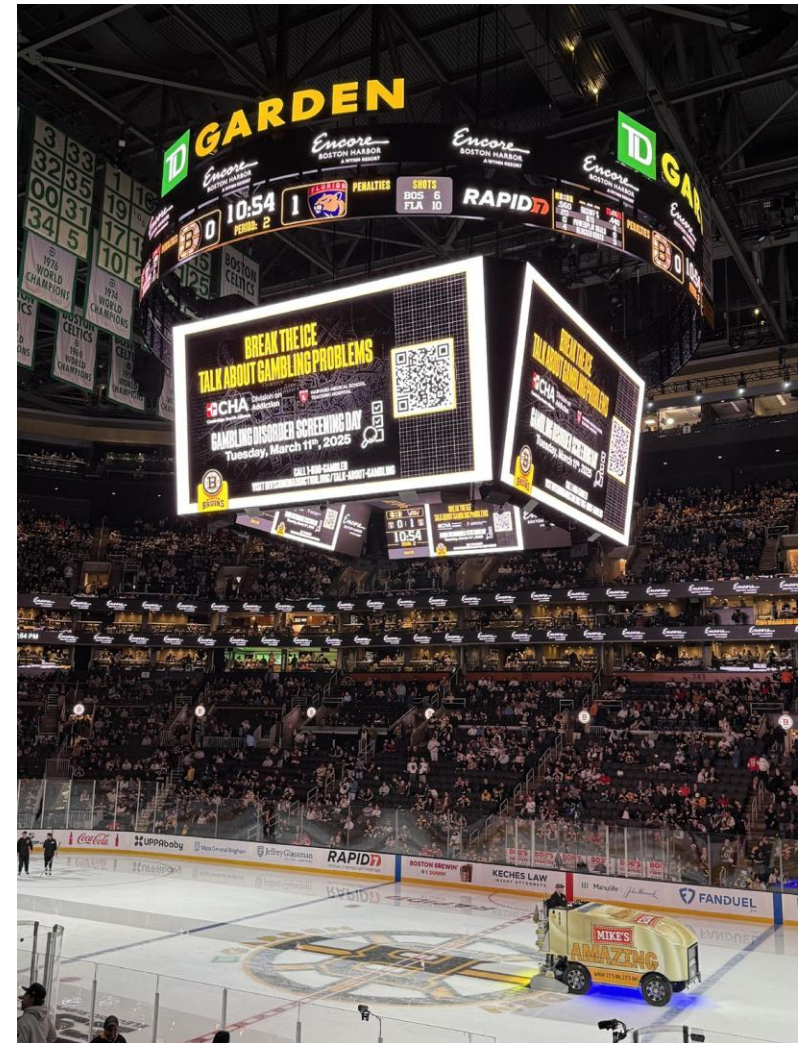
Ti Joel se yon gason ayisyen ki gen 38 an ki fèk soti Ayiti al Everett ak madanm li ak de pitit gason. Paske li pa pale Angle, li difisil pou li jwenn yon djòb. Li pase tout jounen li nan Encore kazino ak nwit li jwe aza sou telefòn li, kwè li ka fè plis lajan nan jwèt aza. Menmsi li te pèdi plis lajan li te genyen, Ti Joel toujou kwè li pral gen chans yon jou epi li vin rich nan jwèt aza.

Madanm Ti Joel remake obsesyon li gen ak jwèt aza. Nenpòt kilè li mande Ti Joel kite kazino a pou vin nan jwèt foutbòl pitit gason li yo, Ti Joel vin trè chimerik e li gen yon move atitid tout jounen an. Konsa li eseye pale ak Ti Joel sou jwèt aza li. Okòmansman, Ti Joel pa vle fè konvèsasyon sa a. Li renmen jwe aza epi li pa vle pèsonn entèvni oswa fè l santi l mal. Men, apre madanm li kontinye poze l kesyon sou konpòtman li nan jwèt aza, li reyalize jwèt aza l ap afekte lavi l ak fanmi l. Pa egzanp, li apèn vè pitit gason l yo paske li pase tout tan li nan kazino a epi jwe aza sou telefòn li. Li di madanm li li pa vle jwèt aza pran fòs sou lavi li ankò. Madanm li sijere li kòmanse chèche yon djòb ankò epi jwenn lòt aktivite pou okipe tan li. Li fè Ti Joel sonje li te konn renmen li liv ak jwe foutbòl ak pitit gason yo.

Yon ane apre, Ti Joel vin plis kontan ak gen plis sante. Li gen yon djòb, li pase plis tan ak fanmi l, epi li ap aprann kontwòl jwèt aza l. Kounye a, li sèlman ale nan kazino a yon fwa pa semèn epi li limite konben lajan li jwe nan aza chak fwa, epi li pa jwe aza sou telefòn li ankò. Ti Joel toujou ap lite ak jwèt aza li pafwa, men li kontan ak pwogrè li fè.



# TD Garden – Boston Bruins



# NEW PATHWAYS: Digital Screening

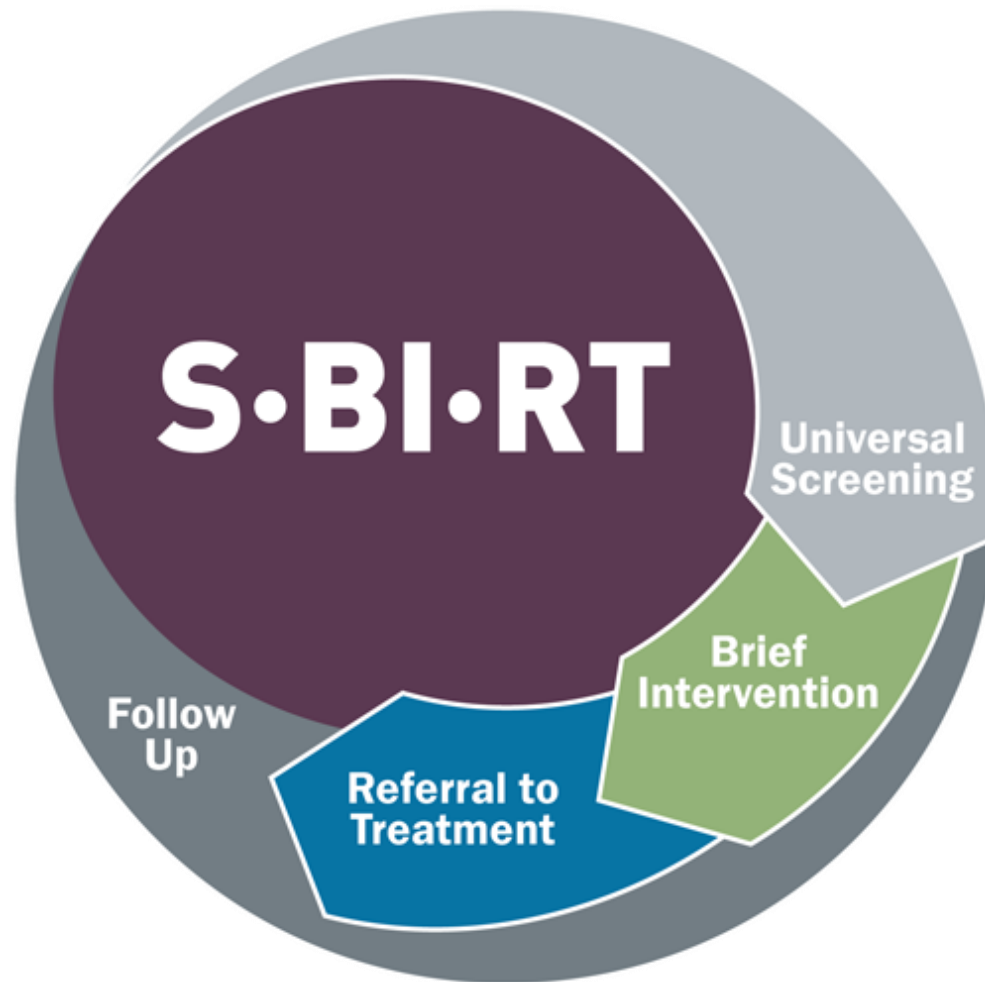


# Remote Screening

- Gambling Disorder Screening Day events have traditionally occurred in person
  - *Advantage*: human connection, local resources
  - *Disadvantage*: Naturally limited by the availability of healthcare delivery resources; more burden on people being screened
- Increasingly, people turn to the internet for parts of their healthcare

*“Digital interventions designed to be deployed through the internet have significant promise to reach diverse populations who may not have access to, or are not yet engaged in, treatment and deliver evidence-based resources to address symptoms” (Kruzan et al., 2022).*

# e-SBIRT Might be Helpful for Gambling



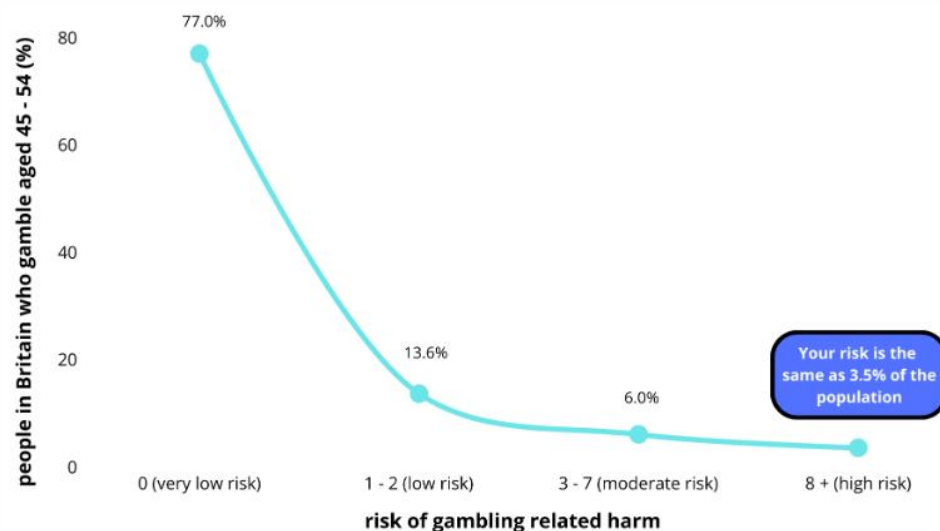


# Gamblers Appear to Find e-SBIRT Helpful

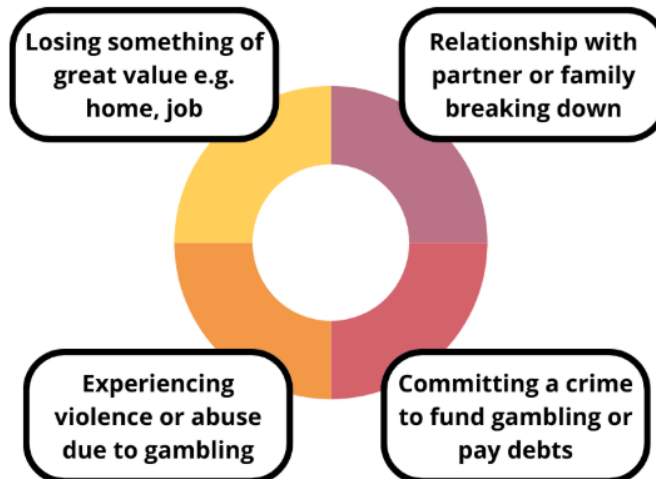
Your score is **13**.

This suggests that you are at **high risk** of harm from gambling.

We compared this with other people who gamble in your age group (45-54), and found that you scored higher than **96.5%** of people (Source: Gambling Survey for Great Britain, 2024).



## Severe consequences of gambling



e-SBIRT

# Gamblers Appear to Find e-SBIRT Helpful

Congratulations on completing the safer gambling tool.

We hope that you are able to put the plan you made today into practice, and stay free from gambling related harm.

However, if you need support, we have listed the details of some agencies below, we encourage you to use these.

Good luck!

## **Need help immediately?**

Explore the gambling blocking and self-exclusion services:

<https://www.gambleaware.org/tools-and-support/gambling-blocking-and-self-exclusion/>

## **Support agencies:**

### **National Gambling Support Network**

[www.begambleaware.org/ngsn](http://www.begambleaware.org/ngsn)

Live chat 0808 8020 133

### **AnonymMind**

[www.anonymind.com](http://www.anonymind.com)

hello@anonymind.com

0333 939 832

e-SBIRT

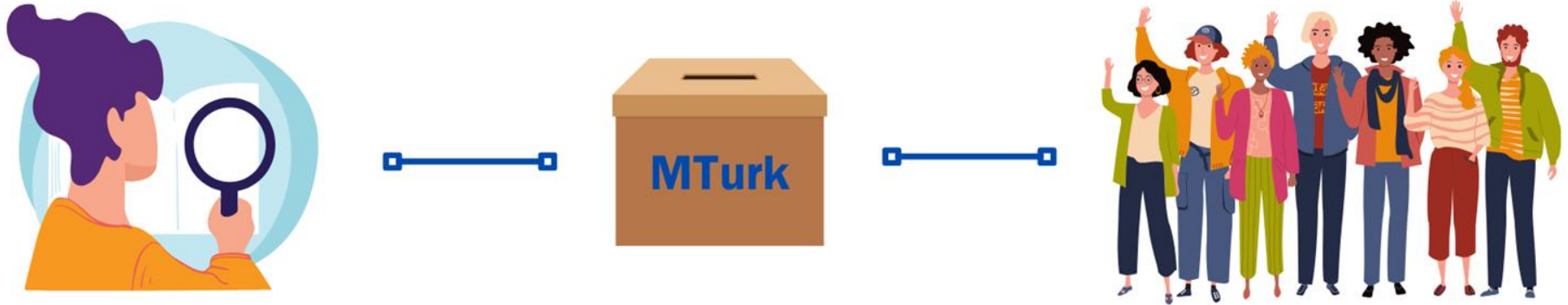
- Satisfied
- Helpful & had impact
- About half indicated they might seek treatment following the e-SBIRT

*“I never really saw it as a problem. I thought I was quite casual, but answering a survey highlighted that, oh, okay, maybe I did have a problem.” [P4, female]*



# NEW PATHWAYS: Digital Screening Pilot Study

# Digital Crowdsourcing Platforms



- 1. What are the characteristics of people we will reach in this way?*
- 2. Is it feasible to use this platform to conduct large-scale screening for gambling-related problems and provide appropriate resources and referrals?*

# Methods

- 1,003 U.S.-based MTurk workers
- Led to a Qualtrics survey
- Administered BBGS
  - Positive screen
  - Negative screen

**Your answers to the previous questions suggest that you screened positive for potential problem gambling. This does not mean that you are definitely experiencing problem gambling.** It means that it might be valuable for you to seek a more in-depth assessment of your gambling behavior or engage in other actions to address your gambling health.

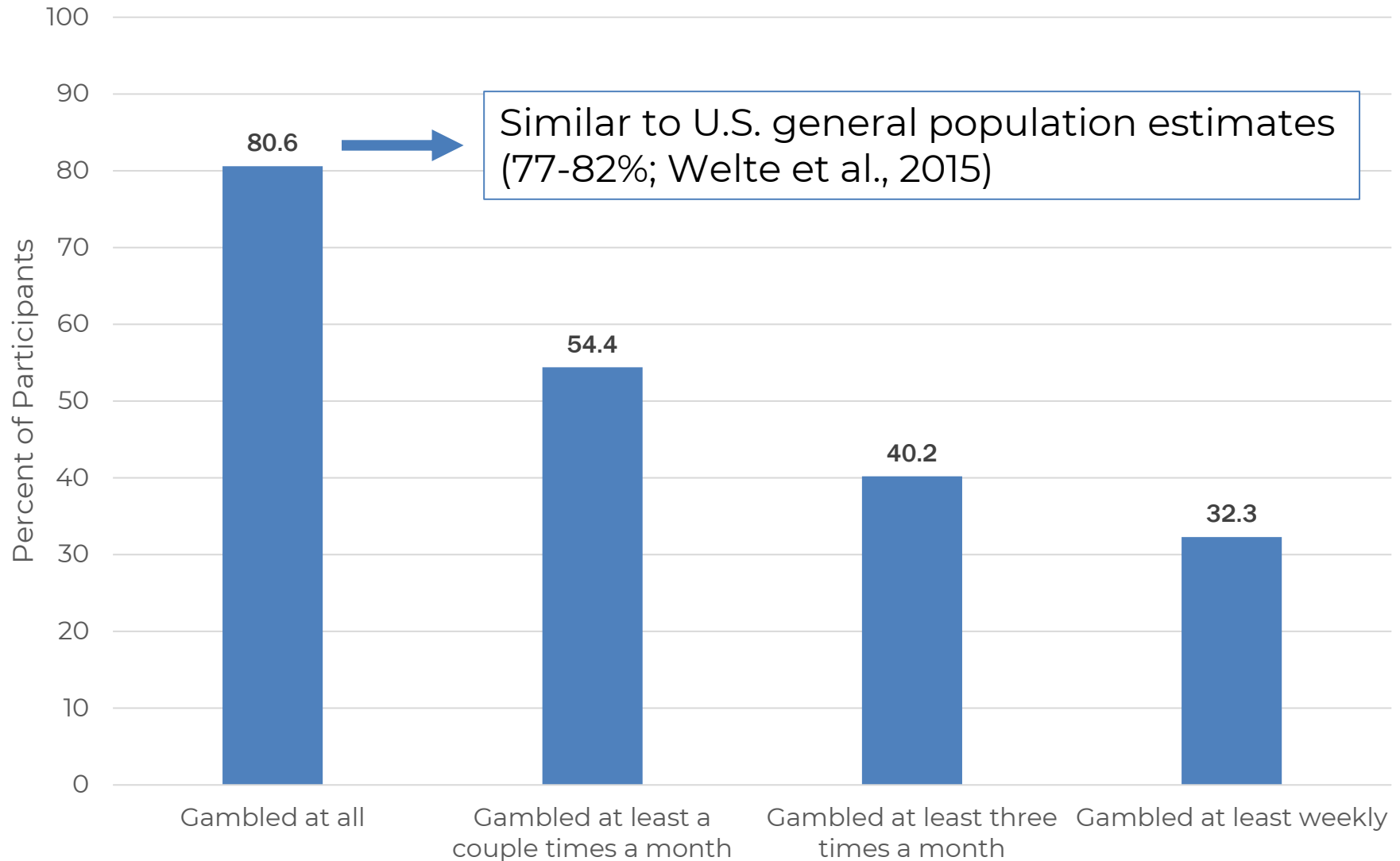
You have many options for changing your gambling behavior, if that is something you'd like to do. Below are some resources that you might find helpful. The information we provide here is for your general knowledge and is not a substitute for professional medical advice or treatment for specific medical conditions. You should not use this information to diagnose or treat a health problem or disease without consulting with a qualified healthcare provider.

**Click on any links that interest you, and they will open in a new window. When you have finished reviewing this list of resources, click Click for Code to learn your Completion Code.**

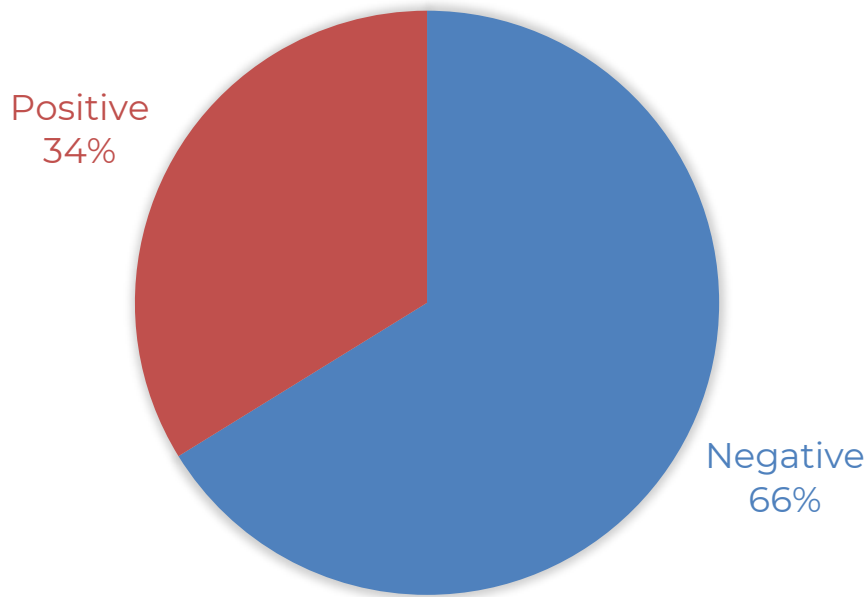
## **Mutual Support/Self-help Groups:**

- [SMART Recovery](#)
- [Bettors Anonymous](#)
- [Gam Anon](#)
- [Gamblers Anonymous](#)

# Past-year gambling involvement mirrored the general population...



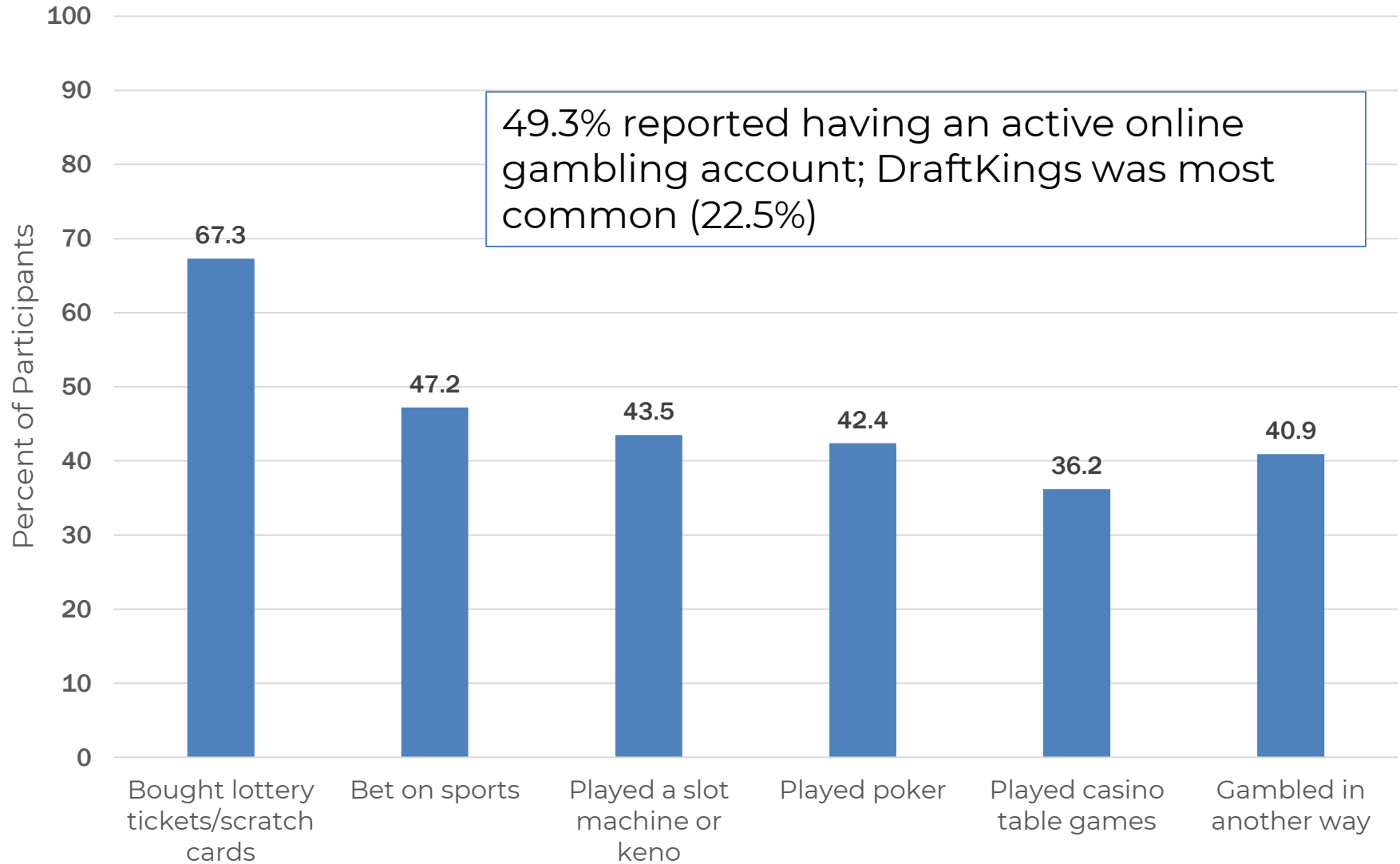
# but we found a high rate of screening positive



- 1.9% among U.S. general population
- 5.9% among veterans accessing primary care
- 15.2% among casino loyalty program subscribers



# Past-year Gambling Games



# Screening History

48.3%

I've been screened for a mental health problem, like depression or anxiety

20.0%

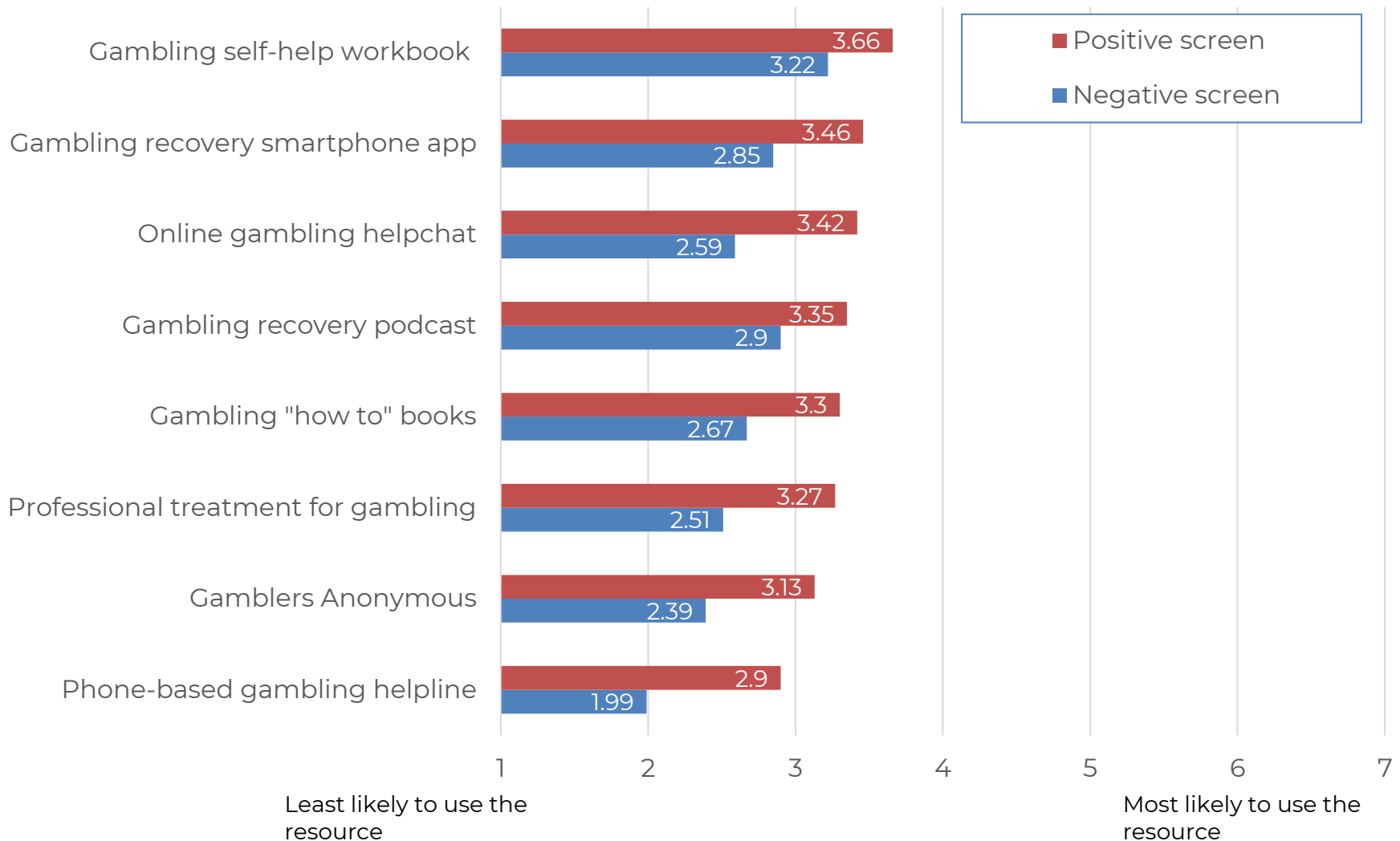
I've been screened for an alcohol or drug problem

8.4%

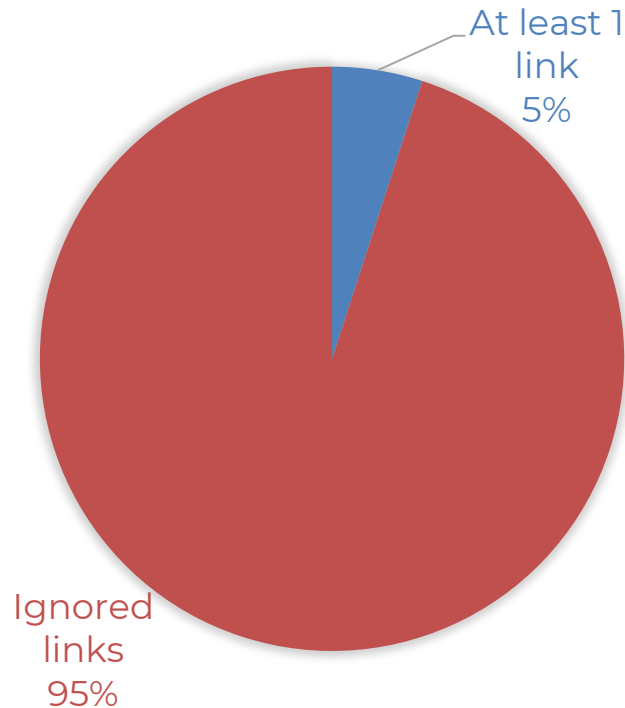
I've been screened for a gambling problem

*We provided the 1st gambling screening experience for 75% of participants with positive screens.*

# Those with a positive screen had stronger intentions to use resources



# Clicking on links was rare but more common among participants with a positive screen




- Lower-risk Gambling Guidelines
- Division on Addiction
- Smart Recovery

*Participants with positive screens were more likely to click on external links than participants with negative screens (7.7% versus 4.0%).*

# NEW PATHWAYS: Randomized Trial

# Sample Characteristics



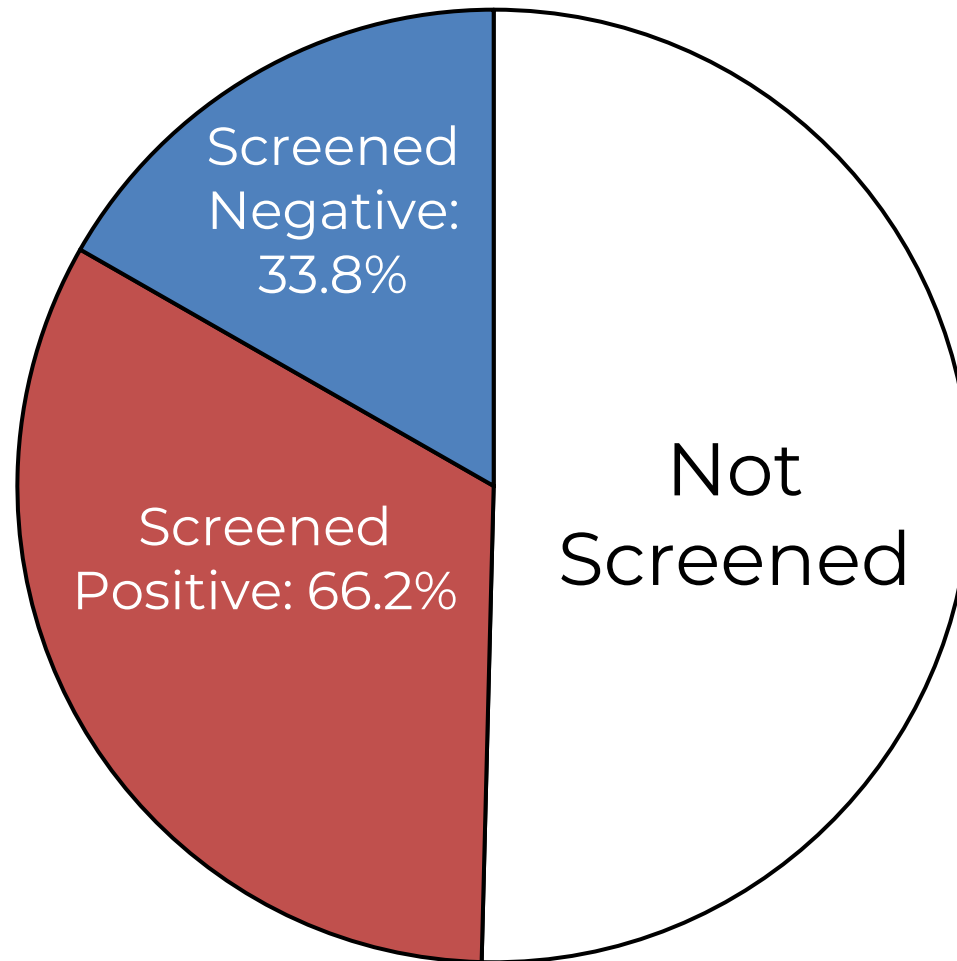
559 MTurk workers  
who had gambled at  
least once a month  
in the past year  
(Non-Hispanic white:  
71.2%; Men: 51.9%)



# Sample Characteristics



# Sample Characteristics



# How Did the Conditions Compare?

	Screening Condition	Control Condition
Information about gambling disorder	✓	✓
Resources for help	✓	✓
Opportunity to opt-out of screening	✓	
Screening & feedback	✓	
Time 1 survey	✓	✓
Time 2 survey (3 months later)	✓	✓

# Gamblers Made Positive Changes from Time 1 to Time 2

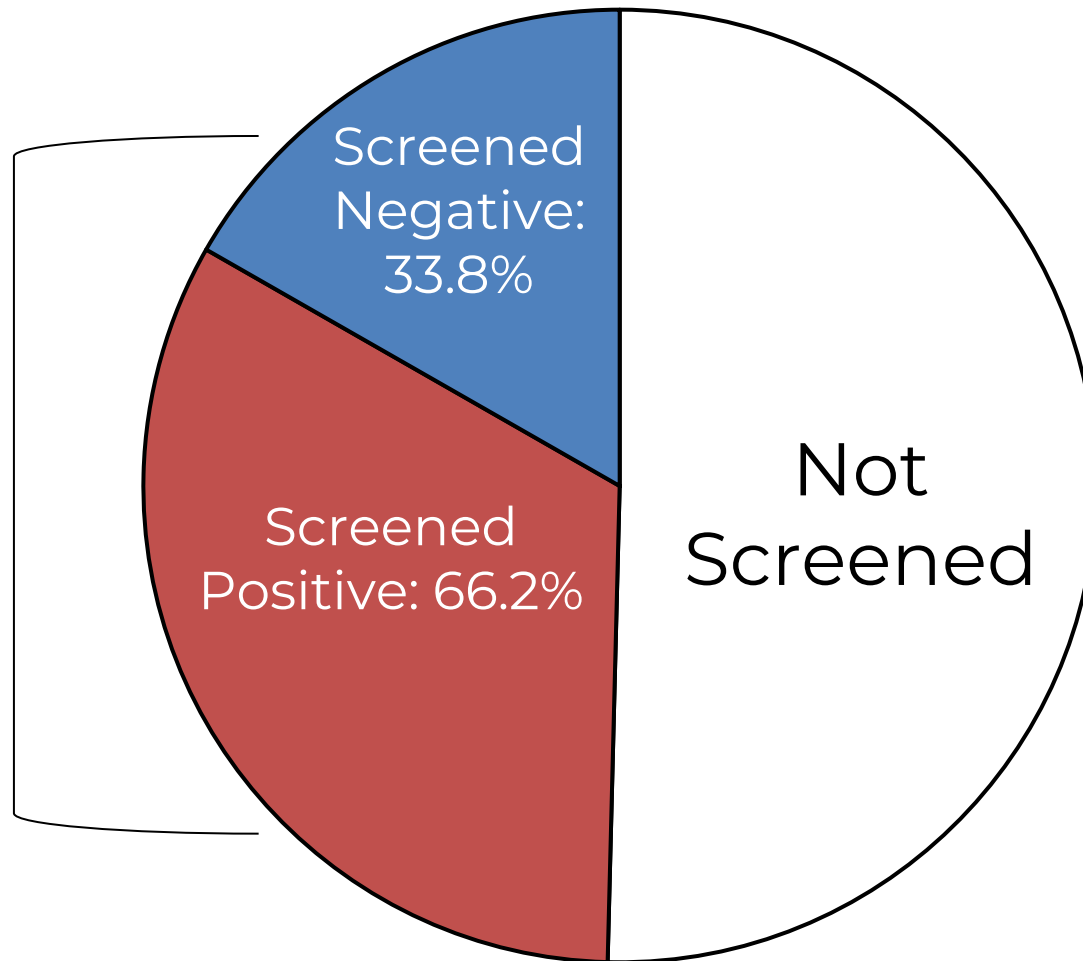
Outcome	Time 1 Survey	Time 2 Survey
Number of gambling activities	3.26 (1.89)	2.76 (1.84)
Maximum gambling frequency	5.33 (1.78)	4.55 (1.93)
Count of Low-risk Gambling Guidelines	1.32 (1.02)	1.49 (1.12)
Count of safer gambling practices	2.85 (1.65)	3.07 (1.85)
Count of help-seeking behaviors	0.75 (1.77)	0.66 (1.49)
Positive Play Scale: Personal responsibility	4.50 (0.66)	4.64 (0.61)
Positive Play Scale: Gambling literacy	3.17 (0.96)	3.32 (1.00)
Positive Play Scale: Honesty and control	3.35 (1.34)	3.87 (1.17)
Positive Play Scale: Pre-commitment	3.57 (1.21)	3.97 (1.04)

Both conditions showed similar improvements over time

# Study Conditions Too Similar?



# Sample Characteristics

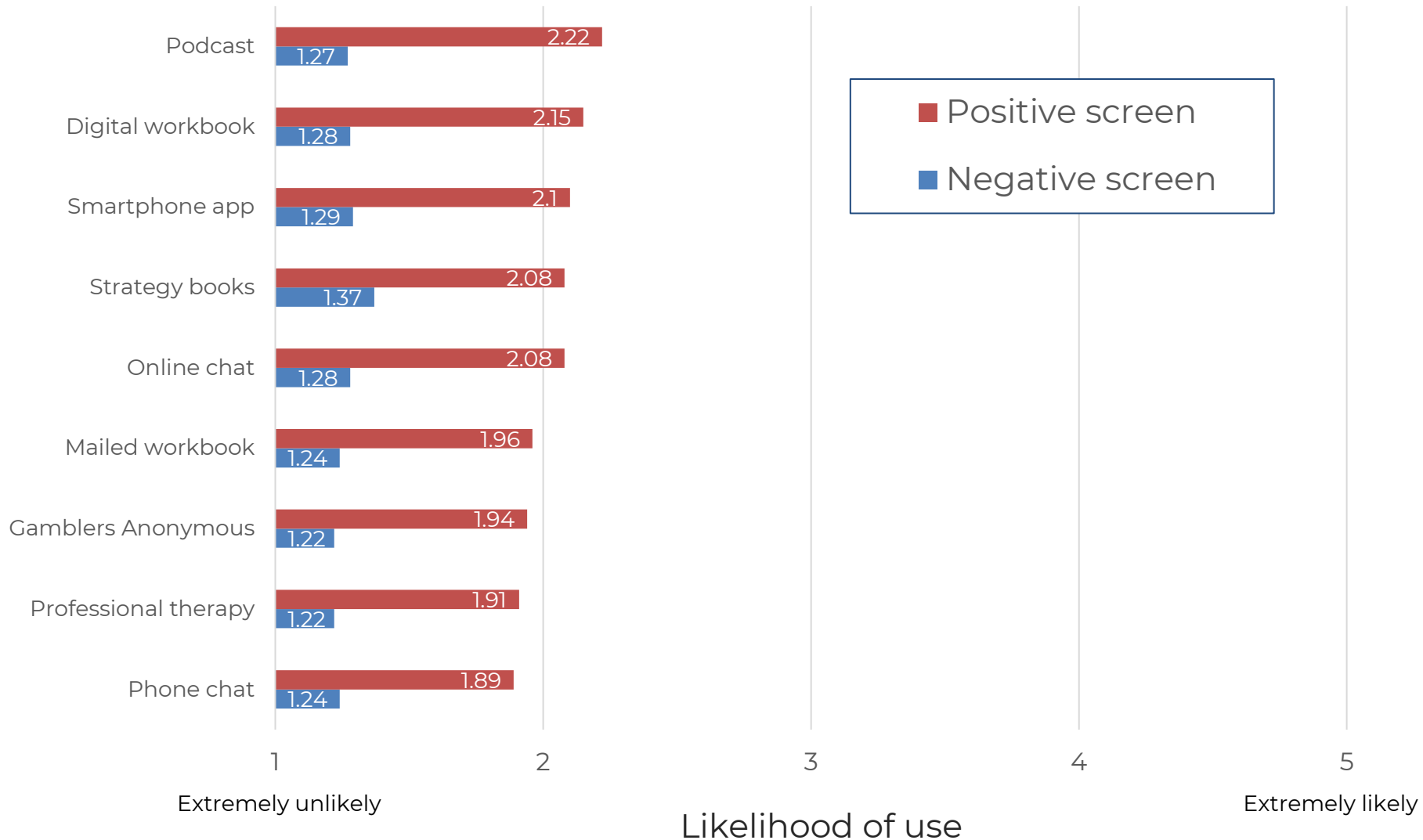




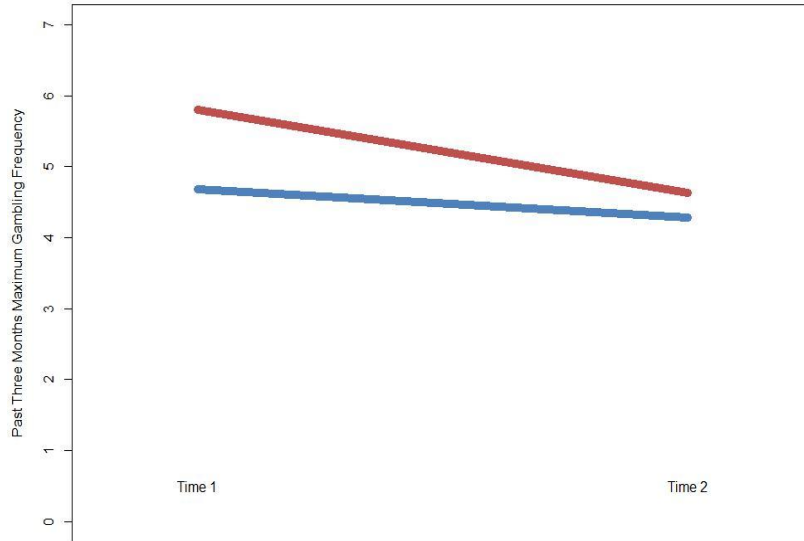
# Participants with positive screens had riskier patterns at baseline

Past 3 Months...	Positive screen	Negative screen
Number of gambling activities	3.59 (1.92)	2.11 (1.27)
Maximum gambling frequency	5.74 (1.57)	4.65 (1.78)
Count of Low-risk Gambling Guidelines	1.21 (0.93)	1.48 (1.13)
Count of safer gambling practices	2.85 (1.58)	2.62 (1.85)
Count of help-seeking behaviors	1.00 (2.07)	0.12 (0.66)
Positive Play Scale: Personal responsibility	4.36 (0.63)	4.84 (0.39)
Positive Play Scale: Gambling literacy	2.92 (0.95)	3.59 (0.79)
Positive Play Scale: Honesty and control	2.59 (1.06)	4.76 (0.45)
Positive Play Scale: Pre-commitment	3.06 (1.10)	4.66 (0.51)

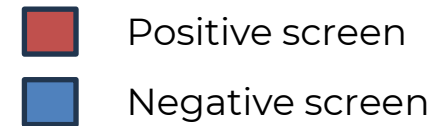
# But, they intended to use more resources for help...



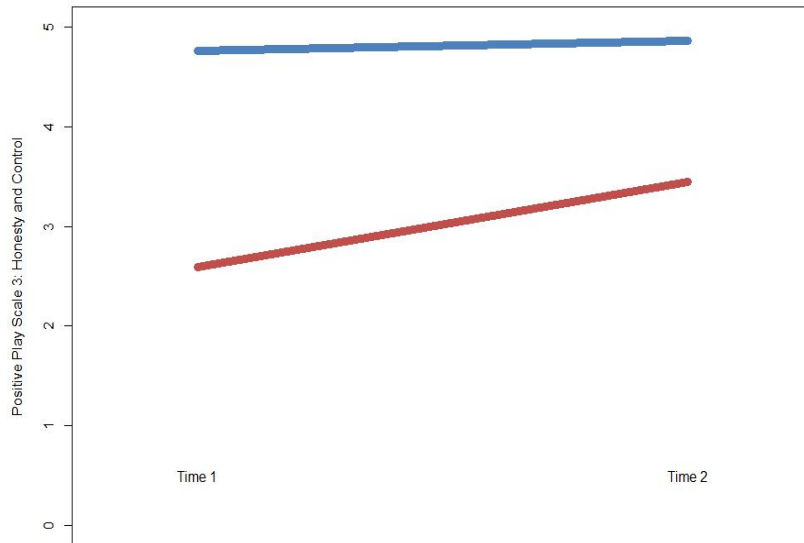
Past Three Months Maximum Gambling Frequency



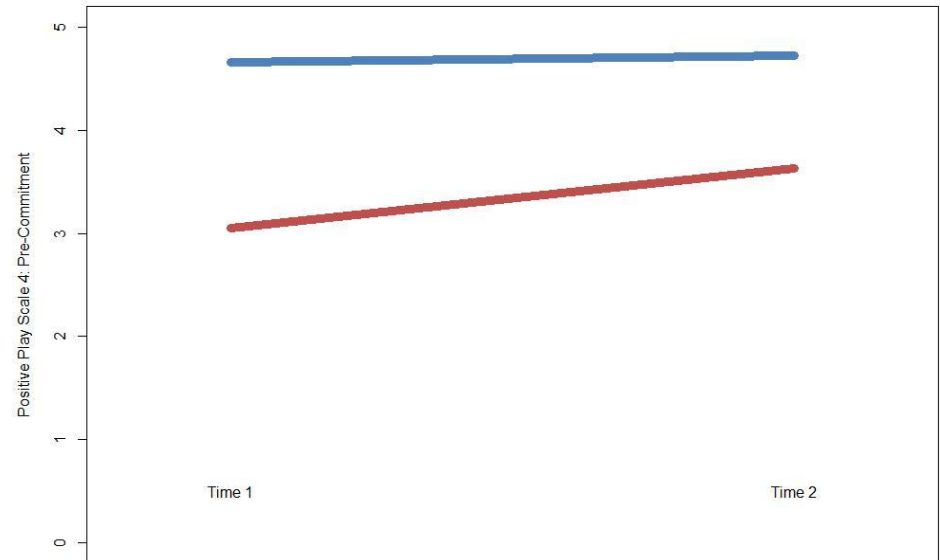
and they showed more improvement over time on 3 measures.



Positive Play Scale 3: Honesty and Control



Positive Play Scale 4: Pre-Commitment

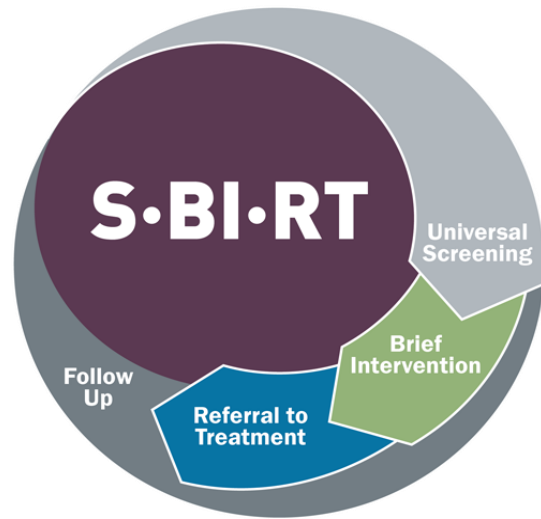


# Active Information Seeking

- Most participants did not click any links to external websites for more information (90%)
- Rare for anyone to click more than 1 link to an external website (26%)
- 88% of link clicks were by participants who screened positive



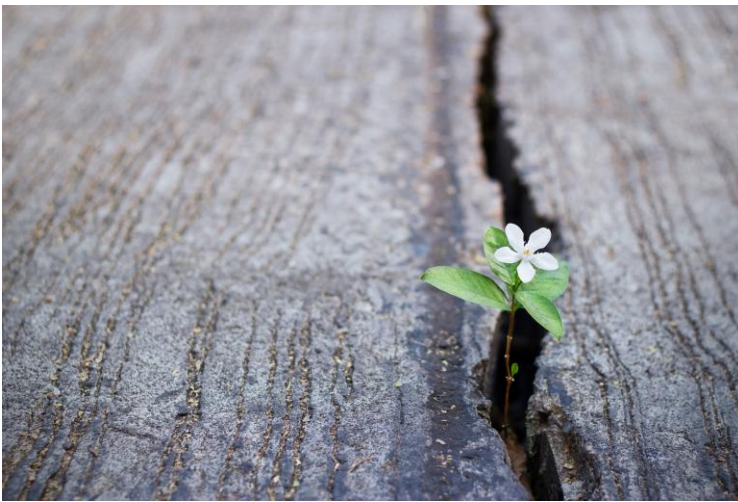
# IMPLICATIONS & CLOSING



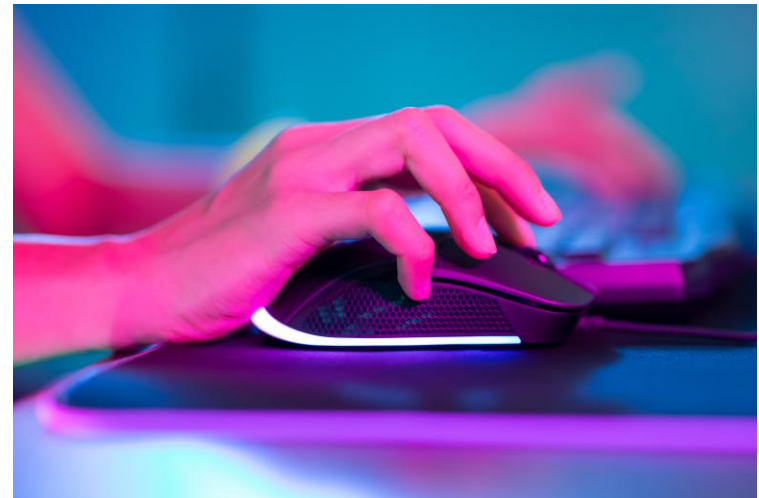
Digital SBIRT is feasible & acceptable



Minimal digital interventions appear to spur behavior change



Higher-risk gamblers are more amenable to help-seeking



Especially when given low-contact self-help resources



# Thank You

[www.divisiononaddiction.org](http://www.divisiononaddiction.org)

Questions?