Nevada Leads

Improving Problem Gambling Community Awareness and Services

A PROJECT OF THE GOVERNOR'S ADVISORY COMMITTEE ON PROBLEM GAMBLING



Acknowledgements

Project Steering Committee and Contractors

The Nevada Department of Health and Human Services (DHHS) would like to extend its gratitude to all those involved in this project. Foremost recognition is provided to the Advisory Committee on Problem Gambling (ACPG) who led the effort to acquire project funding and whose members formed the backbone of the project steering committee. ACPG steering committee members were Alan Feldman (Committee Chair), Stephanie Goodman, Lesley Pittman, Denise Quirk, Shane Kraus, Ted Hartwell, and Constance Jones. The project's principal contractor was KPS3 who provided project coordination, logistical support, and marketing services with special recognition provided to KPS3 project leads Sarah Polito and Ashlan Sherron. Other project steering committee members contributing to the success of the project were Jeff Marotta, Jeanyne Ward, and Andrea Dassopoulos.

Seminar and Survey Participants

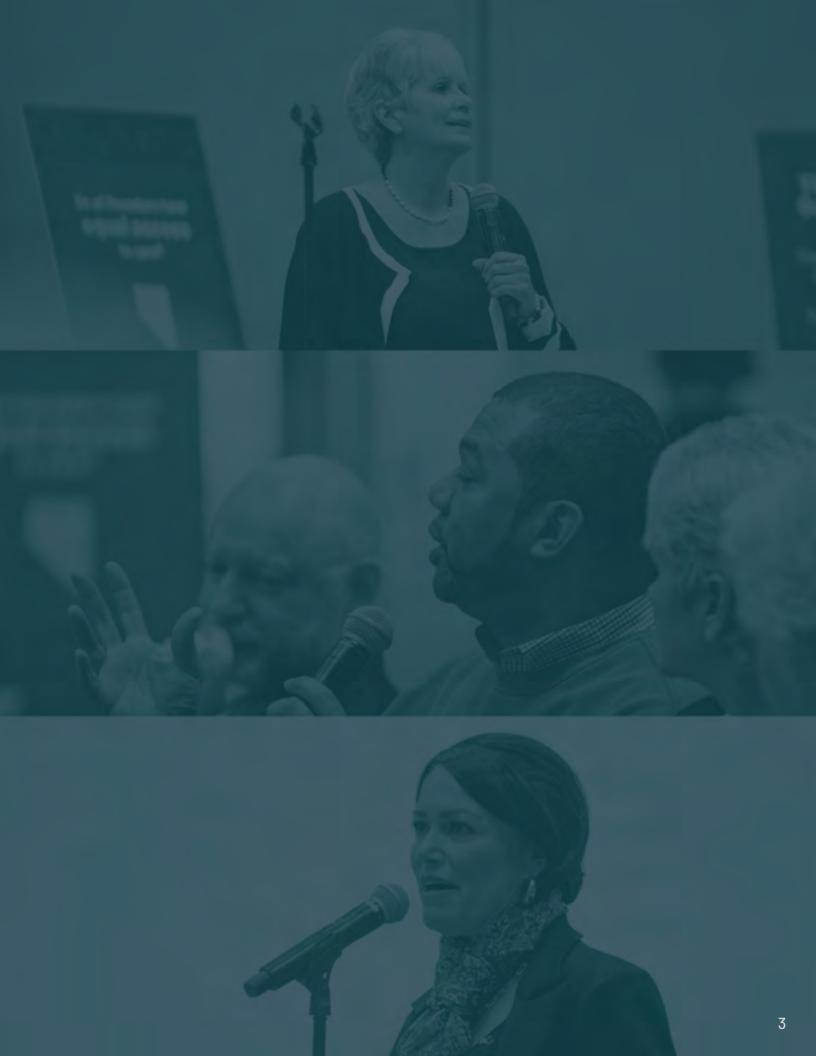
Critical to the success of the project were all those members of the public that participated in this project's seminars and surveys. The input provided by key stakeholders and Nevada's community at-large were instrumental in identifying needs and generating ideas on how to meet those needs.

Project Funding

Project funding was made possible by the 2023 Legislature with the passing of SB341, that appropriates funds to the Governor's Advisory Committee on Problem Gambling (ACPG) through the ACPG host agency, the DHHS Bureau of Behavioral Health Wellness and Prevention.

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Project Overview

Nevada Leads: Improving Problem Gambling Services and Raising Community Awareness

A Project of the Advisory Committee on Problem Gambling

Created under NRS 458A, the Advisory Committee on Problem Gambling (ACPG) provides advice and information to the Governor, the Legislature, the Department of Health and Human Services (DHHS), and other state agencies on issues and trends related to problem gambling. The committee is supported and hosted by DHHS, Bureau of Behavioral Health Wellness and Prevention (BHWP), and Problem Gambling Services, with ACPG members appointed by the Governor. Individuals composing the ACPG represent a broad group of stakeholders including members from the gambling industry, academia, problem gambling service providers, and persons with lived experience in recovering from a gambling disorder. Nevada's ACPG is a national model for bringing diverse stakeholders to the table to advise state governmental entities on issues related to reducing gambling related harm.

During the 2023 legislative session, members of the ACPG worked with legislators to develop a bill designed to empower the ACPG with resources to further inform problem gambling service development and raise community awareness of issues related to problem gambling. The result of those efforts was the passage of SB341, a bill that provided funding support to the ACPG to "conduct statewide seminars on problem gambling awareness." The ACPG used this opportunity to host seminars in Elko, Reno, and Las Vegas that were designed primarily as listening sessions where community members were invited to participate in discussions on issues related to problem gambling within their community. The purpose of designing the seminars as listening sessions was to gain a better understanding of how problem gambling impacted communities within Nevada, better understand gaps in services, and obtain ideas on how together we can better reduce gambling related harms. Funds from SB341 were also used to (a) conduct a statewide poll with gambling related questions, (b) develop and deploy a marketing campaign to raise problem gambling awareness, and (c) report on project discoveries.

The present report is broken into three primary sections.

- 1. The first section provides important background on the size and scope of gambling and problem gambling in Nevada along with Nevada's problem gambling services.
- **2.** The next section details discoveries made during the community listening sessions in Elko, Reno, and Las Vegas followed by information learned through community polls and surveys.
- **3.** The final section summarizes project findings reviewing Nevada's successes and challenges in reducing gambling related harms and offers recommendations for continued system improvements.

Background

Nevada's Gambling Landscape

Gambling was first legalized in Nevada in 1931 and has grown and evolved to become a significant part of the state's landscape. Nevada's casino revenues are the highest in the country; sales reached \$15.5 billion in FY2023, compared to the national state average of \$1.9 billion.¹ Its \$15.5 billion in revenues is 164% higher than the next highest state, Pennsylvania, and 738% higher than the national average.¹ Types of legal gambling formats in Nevada include parimutuel wagering, tribal casinos, stand-alone bingo parlors, daily fantasy sports, commercial casinos, mobile gambling, taverns, convenience gambling, and slot parlors, among others.²

The Nevada Gaming Control Board collected \$1.175 billion in gambling taxes and license fees in FY2023.³ These revenues were primarily deposited into Nevada's General Fund. When factoring in other gambling related revenues associated with gaming resorts, about \$2.1 billion in gaming and resort taxes and fees were collected by the State of Nevada.⁴ When considering the entire size of Nevada's General Fund Revenues, Nevada's resort and gaming industry supports about 40% of the state's General Fund. ⁴

Nevada residents have unparalleled access to legalized gambling.

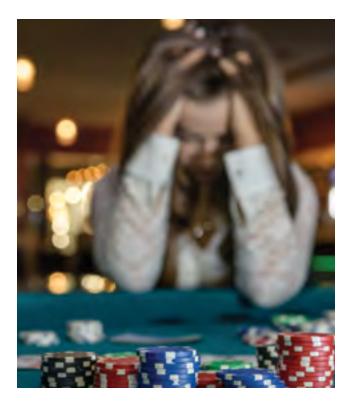
Nevada ranks first when it comes to both casinos per capita and gaming machines per capita, it is one of the only states that allows for retail and convenience stores to have electronic gambling machines and more recently Nevada authorized mobile sports betting.²



Problem Gambling and Nevada

Problem gambling includes all gambling behavior patterns that compromise, disrupt, or damage personal, family, or vocational pursuits. In 2023, the UNLV International Gaming Institute completed a probability-based panel survey of Nevada residents where 13% of respondents scored within a problem gambling high risk range suggesting thousands of Nevadans may be at some risk of gambling related harm.⁵ Problem gambling-related harms are broad, including risks to housing and homelessness, domestic violence, divorce, debt, crime, and negative impacts on emotional and physical health.⁶

It is estimated that one person with a gambling problem affects at least six other people spouses, children, extended family members, friends, and the broader community.⁸ Certain groups are more vulnerable to harmful gambling – including young people, certain ethnic minority groups, military personnel and veterans, houseless people, and people with mental health and substance misuse issues. For all these reasons, problem gambling is increasingly being described as an important public health issue that extends beyond the individual to include interpersonal, community, and societal levels of impact.⁶



People with gambling disorder have a higher risk of suicide

Suicidal ideation (31.6%) and suicide attempts (13.2%) are commonly reported among individuals with gambling problems.⁷ The density of casinos and other gambling venues is positively associated with suicide mortality in the United States.⁹ Within Nevada, the rate of gambling related deaths by suicide is nine times greater than the national average.¹⁰ Problematic gambling is a known risk factor for suicidality¹¹ and self-harm behaviors,¹² which is particularly important context given Nevada's high rates of gambling disorder. Two common characteristics of gambling disorder, shame and debt, are thought to connect problem gambling to suicidality.¹³

Nevada's Publicly Funded Problem Gambling Services

As awareness of problem gambling as a public health issue began to emerge in the early 2000s, Nevada joined several other U.S. states in funding problem gambling services. In 2005, Nevada introduced legislation to expand its approach to legalized gambling by investing in the development of problem gambling treatment and prevention systems. The legislation resulted in the creation of a Revolving Account for the Prevention and Treatment of Problem Gambling and an Advisory Committee on Problem Gambling (ACPG) to advise the Department of Health and Human Services (DHHS) in its administration of this account (see NRS Chapter 458A). Program funding was originally linked to the number of slot machines operating in the state, \$2 per slot machine per guarter, then during the 2019 legislative session the account's funding shifted from a gaming fee to being funded entirely by General Funds. While the problem gambling service system (PGS) has developed over the years, funding for that system has not been stable. The annual program budget began at \$1,700,000 in 2008, hitting a low of \$720,637 in 2012. The budget currently sits at approximately \$2,200,000.

Today's DHHS Problem Gambling Services has evolved into a comprehensive system designed to support effective problem gambling prevention, treatment, and recovery support services. The comprehensive infrastructure and system's development has been guided by a series of strategic plans.¹⁴

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DHHS Problem Gambling Services

FY2024 - FY2027 Strategic Plan

Department of Health and Harran A Helping people 20 adva we are and adapt

What We Learned

"Every person I meet knows someone who's had a problem with gambling. Although we may not be talking about it, it is a serious issue."

Stephanie Goodman, Regent, Nevada System of Higher Education

"It's a hidden problem and the harm may be hidden, too."

Alan Feldman, Chair ACPG

"We teach people how to drive and give them practical and useful information about safety. We can do a better job promoting safer gambling."

Attendee, Las Vegas Roundtable

"Many individuals with gambling problems hold well paying jobs, own a home, and drive nice cars. They can appear to have their lives together but behind the scenes their life could be falling apart due to their gambling."

Attendee, Elko Roundtable

"I didn't realize gambling would become a problem until it did."

Sandra Callaghan, GA Public Relations Chairman

"Feels like the problem gambling field is decades behind the substance abuse field."

Attendee, Elko Roundtable

Community Listening Seminar Methods

Methods & Synopis of Discussion: Community Readiness, Challenges, Resource Needs

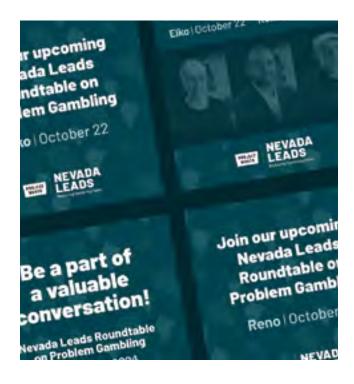
Overview

The passage of SB341, of the 2023 Legislative Session, provided funding support to the ACPG to "conduct statewide seminars on problem gambling awareness." The ACPG formed a SB341 Project Steering Committee. In conjunction with the Steering Committee's request, DHHS contracted with KPS3, a marketing and advertising company based in Reno, to assist the Steering Committee in developing and implementing the seminars and accompanying project marketing.

The Steering Committee utilized this opportunity to meet two main objectives:

- 1. To raise community awareness of problem gambling.
- **2.** To engage with community stakeholders to hear from them the impacts of problem gambling on their community and better understand successes and obstacles they are facing when putting forth efforts to address problem gambling.

To meet these objectives, the Steering Committee decided to hold community listening seminars in three locations representing three different geographic areas of Nevada; rural Nevada, southern Nevada, and northern Nevada. Further input from the community took place through a community public opinion survey and a marketing campaign took place to raise problem gambling awareness.



Community Listening Session Promotion

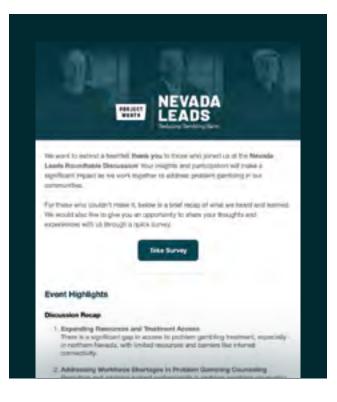
Personalized emails, letters, and mailers were sent to a curated list of invitees. These materials included essential event details, ensuring recipients had all the information they needed to RSVP and attend. A total of 1,876 direct mailers and 12 emails were sent to 3,589 contacts to promote the three events. Leading up to the events, KPS3 created and shared a series of eye-catching social media posts and event social ads across Facebook, X, and Instagram. These posts and ads highlighted event details, such as dates and locations, while also encouraging registration and participation.

Event Design & Participation

Three community events were held: Elko, October 22, 2024; Reno, October 23, 2024, and Las Vegas, December 3, 2024. The events were designed as primarily community listening sessions with each lasting two hours. To facilitate active sharing from community members, seating was arranged in a large horseshoe configuration where a facilitator asked the group questions and moved discussions forward. Across the three events, there were 68 participants representing various stakeholder groups including: behavioral health, physical healthcare, education, law enforcement, criminal justice, governmental agencies, legislators, media, and persons with lived experience. KPS3 designed and displayed visually engaging signage at each event including directional signs and informational posters, all of which were strategically placed to ensure attendees could easily navigate the venue and access key information.







Post-Event Survey

After each event, a comprehensive recap email was sent to attendees and invitees who were unable to attend. The email provided a link to an accompanying survey to gather input on the roundtable discussion questions, allowing respondents to contribute valuable insights and perspectives for those who were not present or those in attendance with further points to share.

Discussions Prompt #1: Community Readiness

Prompt: Community readiness is the degree to which a community is ready to act on an issue. Does your community view problem gambling as a serious issue? What actions are needed to increase your community's readiness to address problem gambling?

1. Communities struggle with recognizing problem gambling as a serious issue

Gambling is normalized within our culture which contributes to masking the problem. This is complicated by a lack of data about the social and economic impacts of problem gambling on communities.

2. There is little funding for state-wide problem gambling awareness or prevention campaigns

Without a well funded and organized public health messaging campaign about the risks, signs, and resources related to problem gambling our communities will continue to be under-informed about the public health threat problem gambling posses to Nevadans.

3. There is a need to raise awareness of help resources

Many people are unaware of problem gambling, let alone the effective treatment options available. This contributes to the hidden nature of the disorder and delays individuals from seeking help until crises emerge.

4. There is a need for more data

The lack of recent prevalence data on problem gambling creates obstacles in moving the needle, underscoring the urgency for updated research to better assess the issue and allocate resources effectively. Better data is needed on the impacts of problem gambling on our economy, social structures, and public health.

5. There is a need to expand conversations and early interventions to foster community readiness for change

Stakeholders can find ways to increase conversation about problem gambling. There is a need to be talking about the risks of gambling and costs of problem gambling in our school and education systems. In the criminal justice system consideration needs to be given to expand therapeutic justice for crimes driven by a gambling disorder. Key referral networks (healthcare services, first responders, legal and financial professionals, etc.) should be equipped to screen and provide resources for gambling issues.

"We don't have an assessment of how much we are spending on problem gambling. For example, in the criminal justice system, there is the gross under identification of gambling disorders that is a problem. Gambling comes up in every court, including bankruptcy court, family court, civil court, and more. We just do not track it and without data we can't make the case that problem gambling is a critical issue for society to address."

Attorney participant, Las Vegas Roundtable

Discussions Prompt #2: Challenges Faced by Your Community

Prompt: What are some of the challenges faced by your community that impact problem gambling prevalence, problem gambling awareness, and help for problem gambling?

1. Lack of resources and treatment access

There is a significant gap in access to problem gambling treatment, especially in rural areas, with limited resources and barriers like internet connectivity. This is further complicated by a lack of Gamblers Anonymous meetings in many of Nevada's rural communities. Expanded access is needed to ensure everyone in need of help with a gambling problem can get it, no matter where they live in Nevada.

2. Addressing workforce shortages in problem gambling counseling

Recruiting and retaining trained professionals in problem gambling counseling is hindered by a complex and cumbersome certification process with a limited reimbursement structure, leading to a critical workforce deficit.

3. Raising awareness of effective treatment options

Many people are unaware of problem gambling, let alone the effective treatment options available. This contributes to the hidden nature of the disorder and delays individuals from seeking help until crises emerge.

4. Closing the funding gap

Inadequate state funding limits the scope and effectiveness of treatment programs and public awareness campaigns, hampering progress in addressing harm reduction.

5. The need for current data

The lack of recent prevalence data on problem gambling creates obstacles in moving the needle, underscoring the urgency for updated research to better assess the issue and allocate resources effectively.

"We need research to elaborate on gambling harms so we can provide greater access to those in need and reduce harm to the state."

Participant, Elko Roundtable

Discussions Prompt #3: Resource Gaps

Prompt: Does your community have the resources it needs to address problem gambling? If not, what are the gaps within your community that need to be filled?

1. Lack of sufficient funding

Funding for problem gambling programs is disproportionately low compared to the need, creating barriers to effective prevention, treatment, and research.

2. Insufficient workforce

Workforce shortages complicate efforts to provide access to care, underscoring the need for scholarships, training, and incentives to develop qualified providers. Sustainable investment is vital to ensure workforce development programs can meet the growing demand for our communities to sufficiently address problem gambling.

3. Role of the gambling industry and publicprivate partnerships

The gambling industry is a valuable partner in promoting responsible gambling through funding and awareness campaigns. Shifting the narrative to highlight the business benefits of addressing problem gambling may increase industry engagement. Public-private partnerships, including high-profile media campaigns, can effectively spread messages about responsible gambling and prevention.

4. Integration of problem gambling into health and legal systems

Problem gambling screening is all but absent in the health care and criminal justice systems, despite the prevalence of gambling harm within healthcare settings and court cases. Initiatives like Nevada's diversion court emphasize treatment over punishment, aiming to address the root cause rather than the criminal outcomes. Integrating gambling disorder screenings into standard health and legal protocols is a critical next step.

5. Every community faces significant gaps in services to reduce gambling harm

Gaps in services include few Spanish language services; very limited prevention services; most counties are without problem gambling treatment centers, and; our responsible gambling regulations lack consumer protections commonly found in other jurisdictions such as statewide voluntary selfexclusion programs.

"We have incredible nonmonetary resources that require monetary resources. We do so much with so little, but we need more support. Funding is lacking for these resources that can make a huge difference. We need funding that is proportional to the need. "

Brett Abarbanel, Executive Director of nternational Gaming Institute at UNLV

Gambling Behavior and Attitude Survey and Poll

Within the past three years, two gambling behavior and attitude surveys were conducted with adult Nevadans. In 2022, researchers from the University of Nevada, Las Vegas completed a probability-based panel study with over 1,000 English speaking participants.⁵ A second survey took place in October 2024 as a component of the Nevada Leads initiative to serve as an adjunct to the community listening seminar events.¹⁵ This more recent effort was completed by a market research company that fielded a brief poll distributed in English and Spanish languages to Nevadans via text messages, the poll was completed by 356 participants.

2022 Probability Based Panel Survey⁵

85%

Of Nevadans have gambled in the past thirty days

61%

Agree with the statement; "Since Nevada has the largest gaming industry of any state, it is important for the state to be a leader in efforts to reduce harms caused by gambling."

30%

Have been directly impacted by the gambling behaviors of someone else

44%

Of Nevadans who gambled in the past year are at risk for experiencing moderate to serious gambling related harms

2024 Public Attitude Poll¹⁵

87%

Think gambling problems and gambling addiction are issues for Nevada

57%

Agree with the statement; "The State of Nevada should dedicate a percentage of gambling tax revenues to fund programs that prevent and treat problem gambling."

44%

Are unaware that Nevada offers free treatment for individuals with gambling problems

33%

Of Nevadans know someone who they believe have or had a gambling problem

Summary

Successes

Gambling treatment is effective¹⁶

As part of a treatment follow-up project, 339 post-treatment interviews were conducted with people who obtained DHHS supported problem gambling treatment.¹⁶ Clients were overwhelmingly happy with the accessibility and quality of the treatment provided, typically beginning services within two days of contacting a provider. This responsiveness is reflected in the 97% of clients who reported they would recommend their provider to a friend or family member. Clients consistently reported reductions in gambling behaviors, with approximately 61% abstaining from gambling at 30 days post-enrollment and 41% maintaining abstinence at 12 months. Additionally, clients noted improvements in daily functioning and overall wellbeing, alongside their satisfaction with treatment services.

More individuals are receiving help for gambling problems¹⁶

In FY2024, we saw a dramatic 19% increase in outpatient gambling treatment enrollments including a 29% increase in enrollments of concerned others. Furthermore, through a recent initiative to integrate screening, assessment, and interventions into substance use treatment programs. In FY2024, a total of 809 clients entering treatment for a substance use disorder were screened for gambling-related issues, 223 individuals were identified to have gambling problems and received targeted gambling support as part of their overall treatment plans. In total, in FY2024, 650 individuals received DHHS funded support for gambling related issues.

Nevada has a strong problem gambling services foundation

For the past 20 years, DHHS and the Governor's appointed Advisory Committee on Problem Gambling (see NRS Chapter 458A) has been developing problem gambling services and in the process, we now have some of the strongest gambling treatment programs in the country and are led by a DHHS Problem Gambling Services Strategic Plan. The Nevada Leads initiative, described in this report, is an example of how DHHS Problem Gambling Services and the ACPG engages with the community to assess needs and inform further program development.

Nevada is host to several thought leaders in the gambling research space

Nevada is home to the largest gambling research institute in the country, the International Gaming Institute at the University of Nevada, Las Vegas (UNLV). UNLV and the University of Nevada Reno (UNR) host innovative education, training, and research programs addressing problem gambling. Several prominent scholars in the gambling and problem gambling field live and work in Nevada. Nevada is home to a research mini-grant program designed to increase the amount of gambling research taking place in Nevada and encourage young scholars to enter the gambling research field.

Challenges

Community readiness to address problem gambling is low

Community readiness to address problem gambling is very low resulting in (a) low rates of individuals seeking problem gambling treatment services, (b) reluctancy to address problem gambling among potential collaborators, and (c) lack of federal funding combined with lower than ACPG recommended state funding.

Funding does not match need

Although Nevada's gaming industry is among the largest in the country and a major contributor to the state's economic health, investment in problem gambling services falls well behind several other states. According to a national survey conducted in 2021, Nevada ranked 18th out of the 50 U.S. states in terms of public funds invested in problem gambling services.¹⁷ Based on a 2018 need assessment, funding for problem gambling services was insufficient to meet Nevada's needs and since that time the number of those affected by problem gambling has increased while funding levels have remained relatively flat.¹⁴

The problem gambling workforce needs to expand

There are few Certified Problem Gambling Counselors (CPGC) and Certified Peer Recovery Support Specialist with a Gambling endorsement (PRSS-G). The shortage of CPGCs and PRSSs has created significant challenges in expanding access to problem gambling treatment services. When a CPGC leaves a DHHS funded gambling treatment agency, it is extremely difficult for that agency to find a replacement. This is especially true in rural areas of the state. The shortage of CPGCs has led to recent closure or temporary suspension of services in two DHHS funded gambling treatment specialty clinics. This issue is compounded by the burdensome requirements for gambling counselor certification, including those who are already recognized mental health professionals. The combination of burdensome certification requirements and relatively low gambling treatment reimbursement levels results in few individuals expressing motivation to become a CPGC or PRSS-G.



Recommendations

Increase funding for problem gambling services

Findings from the Nevada Leads project, including participants from seminar listening sessions held in Elko, Reno, and Las Vegas, strongly support the need for increasing Nevada's efforts to reduce gambling related harms. Without significantly increasing Nevada's investment in DHHS administered problem gambling services, Nevada's economic and public health is in jeopardy. Nevada is fortunate to have the infrastructure and human capital to address this critical issue, the missing ingredient for success is sufficient funding.

NRS 458A.070 specifies that the Advisory Committee on Problem Gambling (ACPG) shall provide advice and information to the Governor, the Legislature, the Department and other state agencies on problem gambling issues and trends for the purposes of recommending legislation, regulations or the adoption of public policy concerning problem gambling. This charge has led the ACPG to seek legislative support during the 2025 legislative session to change the DHHS problem gambling services budget from a General Fund allocation to a formula logically connecting gaming revenues to problem gambling service investments. The ACPG recommends earmarking one-half of one percent (0.005) of gaming taxes and fees collected by the Gaming Control Board to the Revolving Account for the Prevention and Treatment of Problem Gambling as codified in NRS 458A.



With increased funds, we can improve the public health of Nevadans

The Problem Gambling Services Strategic Plan was developed as a roadmap for DHHS and the ACPG to develop a work plan and action steps to be taken to achieve the goals and guide initiative development from one point to another. Through a sustainable and comprehensive system of programs and services, the impact of problem gambling can be reduced. With the ACPG recommended level of annual funding, the DHHS Problem Gambling Services Strategic Plan can be implemented to support effective problem gambling prevention, treatment, and recovery.

It's one of the most insidious addictions there is. People know it's harming them, but they think that "what's killing me is the only thing that can save me".

Dr. Kobie West

ASSISTANT CLINICAL DIRECTOR, PROBLEM GAMBLING CENTER

When I would go gamble, it was a sense of sitting down and escaping the things that I couldn't or the things that were so overwhelming. It progressed.

Nann Meador

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