



FACT SHEET

TREATMENT SERVICES FY 2013-14

The data in this fact sheet is based on information provided by the [FY 2013-14 California Gambling Education and Treatment Services \(CalGETS\) Treatment Report](#), the 2013 Provider Survey Report, and the [Mindfulness and Hispanic/Latino clinical innovations](#) reports. Data for the reports was collected by UCLA Gambling Studies Program. The reports provide a summary of treatment services, demographics and outcomes for clients enrolled in the CalGETS, CalGETS provider information and clinical innovations studies.

TREATMENT COMPONENTS

Component 1: Training of Licensed Providers

The CalGETS did not conduct a Phase I Training event during fiscal year 2013-14.

Four Phase II Training events were conducted with 75 treatment providers during FY 2013-14 in four regions: Oakland, Los Angeles, Sacramento and San Diego.

Component 2: Provider Network

Problem Gambling Telephone Intervention (PGTI) (English/Spanish)

PGTI provides telephone counseling and includes eight one-hour treatment sessions with a licensed therapist. Treatment is conducted through the 1-800-GAMBLER helpline, administered by BDA Morneau Shepell (BDA).

154 clients who identified as a gambler received treatment services. Clients reported that the intensity and frequency of urges to gamble was reduced by 40% by the end of treatment.

In FY 2013-14 PGTI services were expanded to include affected individuals (AI). Nineteen AI's received treatment services.

Problem Gambling Telephone Intervention (PGTI) (Asian Languages)

The Asian language PGTI is conducted through the 1-888-968-7888 helpline, administered by NICOS Chinese Health Coalition.

36 clients received treatment services, 25 gamblers and 11 AI's. 64% of clients reported increases in life satisfaction from the first to the last treatment session.

Outpatient Providers

230+ CalGETS Providers, specially trained in the treatment of gambling disorder, conduct eight one-hour treatment sessions for problem gamblers and affected individuals in a confidential office setting.

1,419 clients enrolled in outpatient services, 70% were gamblers and 30% were affected individuals. At the end of treatment 30% of clients reported ongoing gambling, in comparison to 81% at the beginning treatment.

Intensive Outpatient Program (IOP)

IOP treatment includes three hour sessions, three days per week of integrated treatment for problem gamblers. IOP is conducted in a licensed substance use disorder treatment program.

IOP treatment services were provided at Biet T'Shuvah in Los Angeles. Eight clients enrolled into IOP.

Residential Treatment Program (RTP)

The RTP provides 24-hour care, recovery activities and support to problem gamblers. Treatment is conducted in a licensed substance use disorder treatment program.

42 clients were enrolled in RTP. 83% of clients report they had minimized issues related to gambling within 30 days of the end-of-treatment session.

Component 3: Clinical Innovations

Clinical Innovations is a series of clinical research trials designed to create and test new products and treatment methods in order to establish evidence-based best practices and is administered by UCLA Gambling Studies Program.

Manualized Treatment of Affected Individuals (AI)

The study was conducted to examine the feasibility and benefits of implementing a manualized treatment protocol for partners in a relationship with a problem gambler.

92% of study participants found sessions to be helpful and showed significant reduction in stress, depression and anxiety.

Mindfulness Interventions for Gambling Problems

Mindfulness is defined as the process of bringing awareness and non-judgmental acceptance to one's present moment experience of thoughts, emotions, and bodily sensations (Bishop et al., 2004; Kabat-Zinn, 1990). 14 clients completed the Mindfulness Course at UCLA, which consisted of 11 men and three women.

The study provides a favorable response by participants; mindfulness should be considered a viable treatment option for gamblers. In addition, no negative or adverse events were reported during the study.

Hispanic/Latino Gambling Study

The purpose of the study was to elicit community based information on gambling behavior,

attitudes towards gambling and attitudes towards professional treatment for gambling problems in the Hispanic Community. 13 treatment providers and 41 patients attending a rural underserved community clinic participated.

Over 70% of providers said they would seek help for a gambling problem from a mental health professional or family physician. 58% of patients reported they would also seek help from a mental health professional or family physician. About 35% of those interviewed said they would seek help from a trusted relative or family member first. Despite the preference for family help, about 78% of participants said that professional treatment for gambling problems is important.

CalGETS Provider Survey

UCLA Gambling Studies Program administered a survey to 208 CalGETS providers. 203 responses were collected.

- Providers were licensed for an average of 12 years and were treating problem gamblers for an average of 3.6 years

Type of License

- 70% MFT, 15% LCSW, 8% PhD, 5% Psy.D, 2% MSW

Language services

- 10% of providers offer services in Spanish, 9% offer services in Asian Languages

Treatment

- 89% of providers find Cognitive Behavioral Therapy to be beneficial in treatment
- 80% refer clients to Gambler Anonymous or Gam-Anon in conjunction with CalGETS
- 61% of CalGETS providers receive referrals from the 1-800-GAMBLER Helpline

Feedback

- 98% of providers plan to continue as providers in CalGETS in FY 2014-15