

July PGTSAC Meeting

7/29/25

Members

Anne Rogers, Chairperson – PG Prevention Coordinator, Office of Behavioral Health Wellness	x	
Carolyn Hawley PhD, Vice-Chair – President of VCPG	x	
Prin Cowan attended for Khalid R. Jones – Executive Director, Va. Lottery	x	
Michael Menefee – Program Manager of Charitable and Regulatory Programs	x	
Waqas Ahmed – Executive Secretary, Va. Racing Commission	x	
Jim Bebeau – Executive Director of Danville Pittsylvania CSB	x	
Julie Rutter – Director of Security, Hard Rock Casino Bristol	x	
Rodney Miles– Director of Compliance, Colonial Downs	x	
Dean Hestermann – VP, Issues Management & Strategic Communications, Caesars Digital	x	
Charitable Gaming Representative - Vacant		

Others: Azeem Majeed, Ben Choate, Bianca Gonzalez-De La Rosa, Bradley Kutner, Carrie Woodlief, Colleen Carraccio, Elizabeth Childress, Emma Freeman, Wendy Hunt, James P Whelan, Jennifer Davis, Jill Vaughan, Jim Bebeau, Juliet Rutter, Keith Whyte, Kevin Hall, Lisa Cochran, Donald Mccourtney, Nash Wiley, Paul E. Krizek, Israel Saavedra, Sean Fournia, T Schweimler, and Willard L. Robertson.

Discussion topics

- I. Welcome
 - a. New member introductions
 - i. Dean Esterman- Ceasars entertainment. Has been in the industry for about 30 years.
 - ii. Juliette Rutter- Hardrock Bristol
- II. Minutes of Last Meeting for Approval
 - a. Minutes were approved without any discussion
- III. Casinos Secret Shopper Research Project-findings and recommendations
 - a. Presentation by James Whelan, PhD, Tennessee Institute for Gambling Education and Research
 - i. First paper was published online and the second paper is under review
 - b. Feedback from clients
 - i. Frustration with casinos with marketing materials, free play, self-exclusion myths, and lack of public information. There is a lack of trust of the industry
 - c. Research question
 - i. What is it like for a customer to request responsible gambling and self-exclusion information from a casino?
 - ii. It should be easy since it is a regulatory requirement
 - iii. Customers do not feel comfortable asking questions about self-exclusion and other responsible gambling resources and do not know what it is. They feel like the government may be involved with responsible gambling.

- d. Research methods and process
 - i. Audit methodology was used.
 - ii. Series of four studies
 - 1. Responsible gambling, self-exclusion, customer service phone number, in person casino information
 - 2. It was all random
 - iii. Completed by research assistants 22-34 years old
 - iv. Explore physical materials in materials and online information
 - v. Seven casinos were visited in the Memphis area
- e. Call details
 - i. Responsible gambling
 - 1. Each call was made twice by two different people
 - 2. Average call was 5 minutes and two minutes on hold.
 - a. Which is a very short amount of time, but for someone who is anxious, this can be a long time.
 - b. Responsible gambling missed opportunities - Mostly (12) were about responsible gambling information. They did not know what responsible gaming gambling was or could explain it in a way that research assistants could understand.
 - c. They were directed to location online and onsite
 - ii. Self-exclusion missed opportunities
 - 1. Half did not know what self-exclusion was and did not know if it was online or onsite
 - iii. Customer services centers were placing them on hold as they were unable to answer self-exclusion or responsible gambling questions and sometimes the call was dropped while they were on hold.
 - iv. No one said that they do not know the answer but will send over information. Even when they asked if information could be mailed, they were not able to send them.
- f. In-person visits
 - i. Target three employees
 - 1. Casino floor employee that was not occupied.
 - 2. Off the floor casino employee - Working at different desks, cleaning, etc.
 - 3. Security office
 - ii. One person was the “asker”, and others observed - Each was trained to ask these questions
 - iii. Responsible gambling had Inconsistent results
 - 1. The off-the-floor employees knew were able to walk patrons to information
 - 2. Most casino floor employees did not know where to find information
 - iv. Self-exclusion
 - 1. Information online and onsite varied
 - 2. Security would say things that they value them as a customer and question if they really want to do that.
 - 3. At all properties, they collected materials to see what the customer experience of the materials. Some had a lot of jargon
- g. Implications

- i. Casinos did not have a person that specialized in responsible gambling
 - ii. Need for third parties to educate and make people aware of responsible gambling and self-exclusion
 - iii. The average person does not know what these terms are
- h. Questions
 - i. Around sample size and replication
 - 1. The sample size was every casino operator in the mid-size area
 - 2. It is unsure how these results will be replicated in VA
 - 3. No current plans to replicate this study on other types of casinos, such as tribal.
 - a. It was a Cesars property and other companies
 - 4. The hope is that casinos can explore the results and get someone that is trained in these topics to provide these resources
 - ii. Where can papers be found?
 - 1. Both can eventually be found in Journal of Gambling Studies
 - 2. [Accessing Responsible Gambling Information from Casinos: Two Secret Shopper Studies - PubMed](#)

IV. Helpline, Evive Pilot, treatment/recovery networks updates

- a. Evive January-July 2025 data
 - i. User data – 63 signups. Motivation for signups; Main motivation was to quit gambling; Others wanted to better manage or decrease gambling. Most sign-ups in June and July. Most sign-ups are men. As age increase, more women are using services
 - ii. 86% completed onboarding. 33 users started lessons and 20 completed lessons (70%). Educational, practical, gambling literacy, avoiding triggers, resiliency, mindfulness, etc.
 - iii. User locations - Most users are in the highest populated areas
- b. Helpline Data – Intakes
 - i. Typically, summer months, calls decrease, but May-June saw increases
 - ii. May had the highest number of calls ever at 172 calls
 - iii. Even if reaching out after 24 hours, they are losing a lot of callers for referral to treatment.
 - iv. They would like the calls to be transferred directly to a treatment provider

V. Lottery VSE data

- a. VSE Data
 - i. 1,955 individuals enrolled in voluntary self-exclusion program since it was created.
 - 1. Average 60-65 signups a month
 - 2. More men sign up 76%
 - 3. 18-40 age category are more common
 - ii. There are 2, 5, or lifetime exclusion options
 - iii. You can apply online or in-person at a casino or the lottery office
 - 1. More people register online
 - 2. In-person, they go through security and a compliance individual walks them through the form.
 - 3. More people from northern Virginia sign up
 - iv. When you sign up you are excluded from online lottery and casinos, sports betting operators, Virginia horse racing commission, Rosies office of charitable gaming

- v. People are applying for extending their exclusion
 - vi. If they come off the list, they apply within a couple of months
 - b. Many people have had success and sign up again once their exclusion period is over.
- VI. DBHDS Update on the evaluation of PG services project
 - a. Expansion of legal gambling and prevention focus in VA
 - i. Purpose
 - 1. examine which services have been undertaken using the treatment and support funding
 - 2. how effective the committee been enabling coordination and coordination efforts, what recommendations would they consider
 - ii. VA's revenues from sports betting, in-game casinos, horse racing.
 - iii. Seeking support from problem gambling
 - 1. in state resources
 - 2. peer specialist
 - 3. hotline
 - 4. free treatment and recovery services
 - 5. self-exclusion program
 - iv. Disparities - Black individuals used problem gambling services at a higher rate than white and Asian individuals
 - v. The final evaluation results will be shared by 7/31/2025
 - b. The final report will need to go through the DBHDS office for approval.
- VII. DBHDS updates-Media Campaign, Curriculum, Dashboard
 - a. Beyond the Bet media campaign
 - i. Targets 18-25 year olds
 - ii. Materials available - Rack cards, brochure, wallet card, flyers, billboards, internal and external bus boards
 - iii. Allows for co-branding. It all has the DBHDS logo and the helpline number - Some materials have more information
 - b. Curriculum
 - i. Material is finalized, but e-learning it is being integrated in the LMS
 - ii. The longest session is 90 minutes
 - iii. DBHDS has already talked to schools to integrate in classrooms
 - c. Apps
 - i. Evive is working well, but has not been evaluated and we are still in a trial
 - 1. People that signed up will get one year of services
 - 2. Used for "between-therapy" sessions or peer groups
 - 3. To track urges and spending
 - ii. Will need to go through an RFP and procurement if DBHDS takes the lead to contract for a support app long term. An RFP would take at least 6 months
 - iii. Other apps may be able to come in to share
- VIII. Next meeting
 - a. 28 Oct 2025

Can I get some help, please?

Audits for Responsible Gambling Resources

(aka Secret Shopper Studies)

James P. Whelan, PhD

Tennessee Institute For Gambling Education & Research

Research project leaders: Brianna Morelli & Maggie Gunnigle



TN Institute for Gambling Education & Research

TGC

THE GAMBLING CLINIC

Our Mission

Provide a science-informed system
of care to reduce the harms
caused by gambling for all
Tennesseans

Key Strategy

The reciprocity between our
services and our science

We hear people frustrated with casinos

- ✓ Marketing materials
- ✓ Free play
- ✓ Myths about self-exclusion
- ✓ Lack of public information



Research Question

What is it like for a customer to request responsible gambling and self-exclusion information from a casino?

Should be easy?

- ✓ Regulator requirement
- ✓ Corporate social responsibility

“We communicate a responsible gaming message daily to our guests both verbally and in printed mediums throughout our facility .”

- ✓ Mitigating harm
- ✓ Employee training
- ✓ It a hospitality industry

Research suggest otherwise

- ✓ People not always comfortable
- ✓ Casino employees not always welcoming
- ✓ Consumers don't understand the jargon or the rules

Series of Secret Shopper Studies

- ✓ Also known as audit methodology
 - ✓ insight into the challenges of consumer access and experiences that may be difficult to measure through more standard investigative techniques
 - ✓ attain a realistic and unbiased perspective of the consumer experience



Series of Secret Shopper Studies

	Customer Service phone #	In-person Casino visits
Responsible Gambling	Study 1	Study 3
Self-Exclusion	Study 2	Study 4

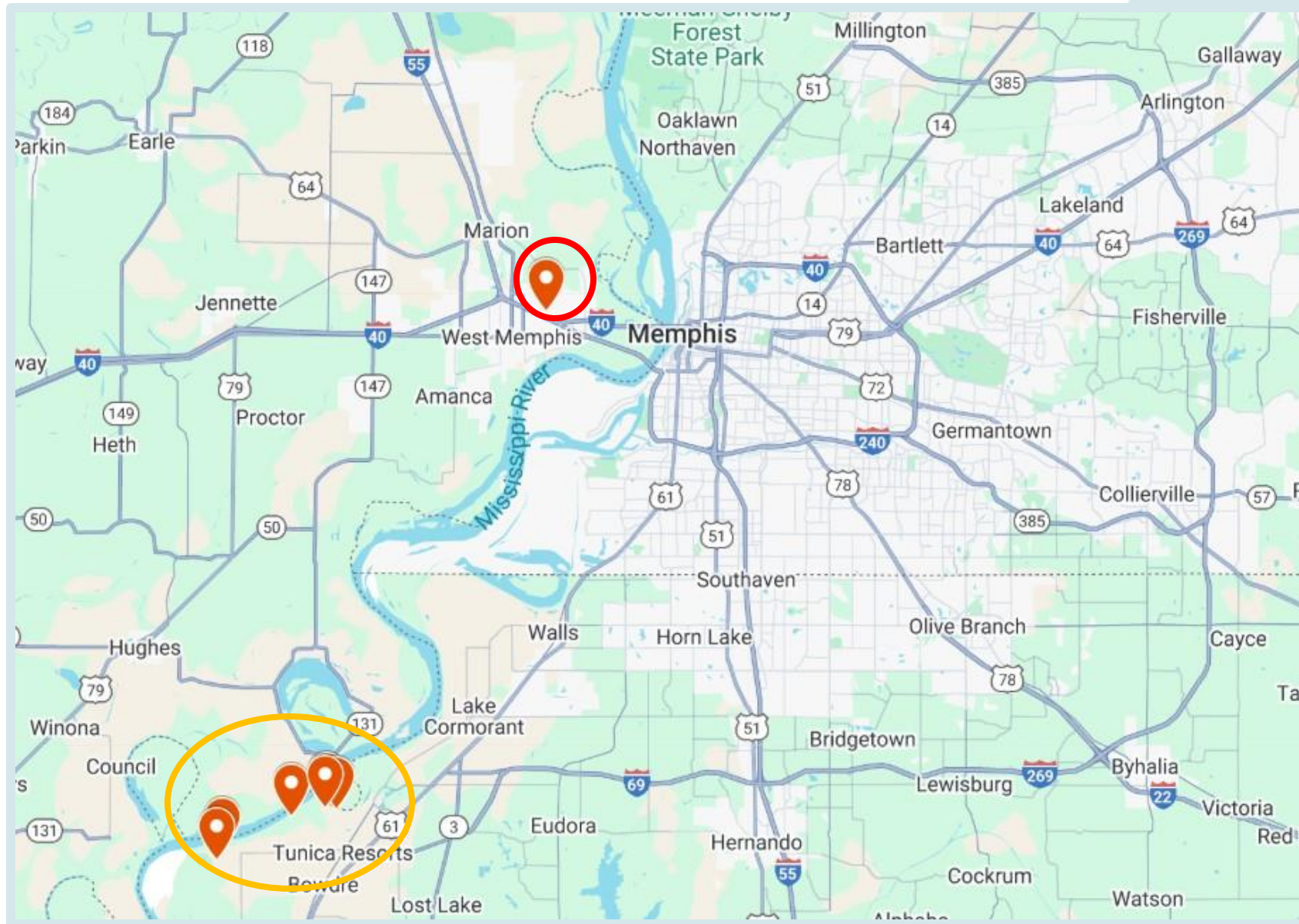
Requested Information:

What is RG/SE?

Are there physical materials in the casino?

Can you give me directions?

Is there online information?



Calls



Call Details

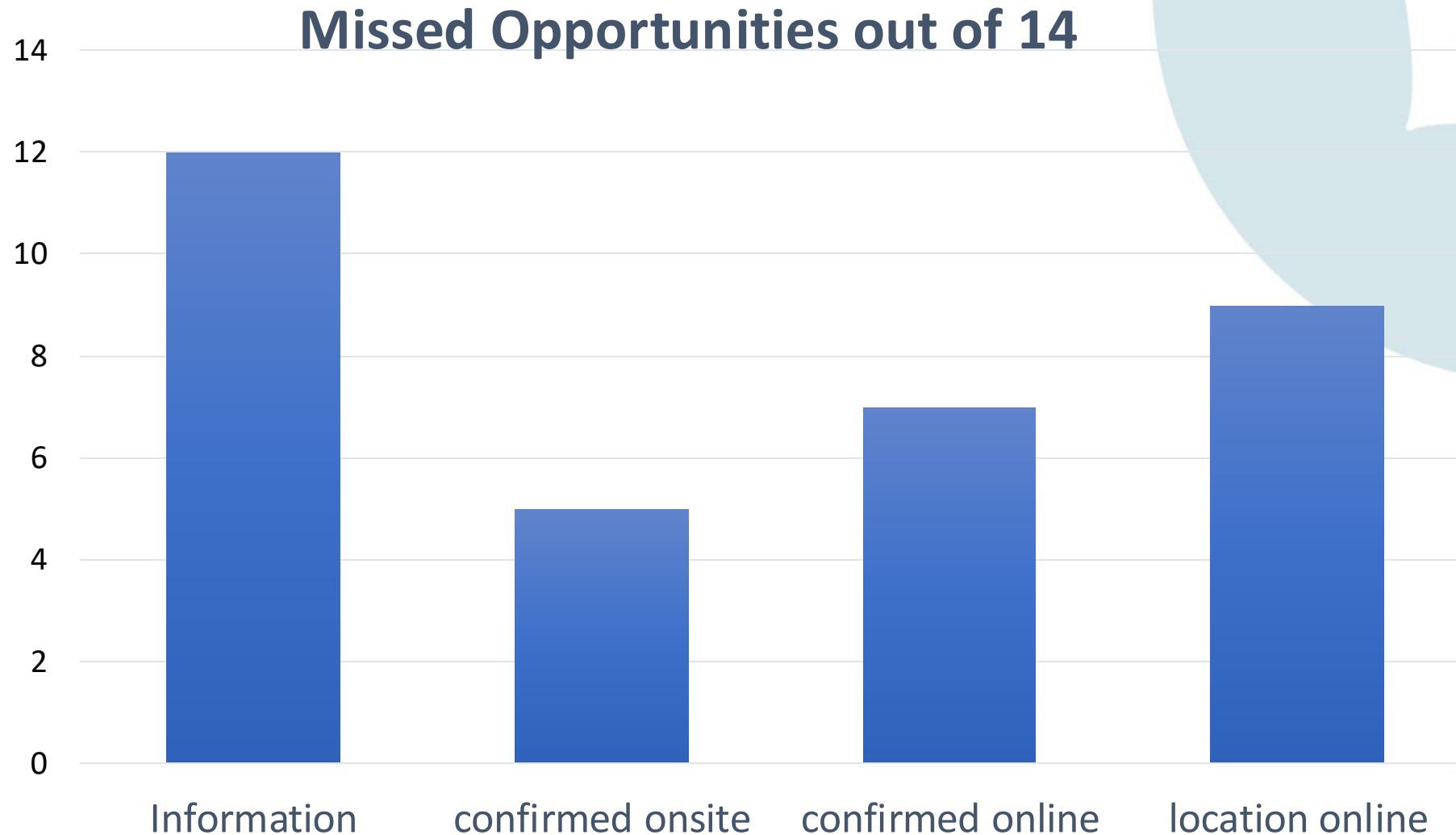
Responsible Gambling

	Length of Call (min)	Time spent on hold (min)	# of employees involved
Average	5 min.	2 min	2
Range	1.6 to 10 min	.12 to 6 min	1 to 4

Self Exclusion

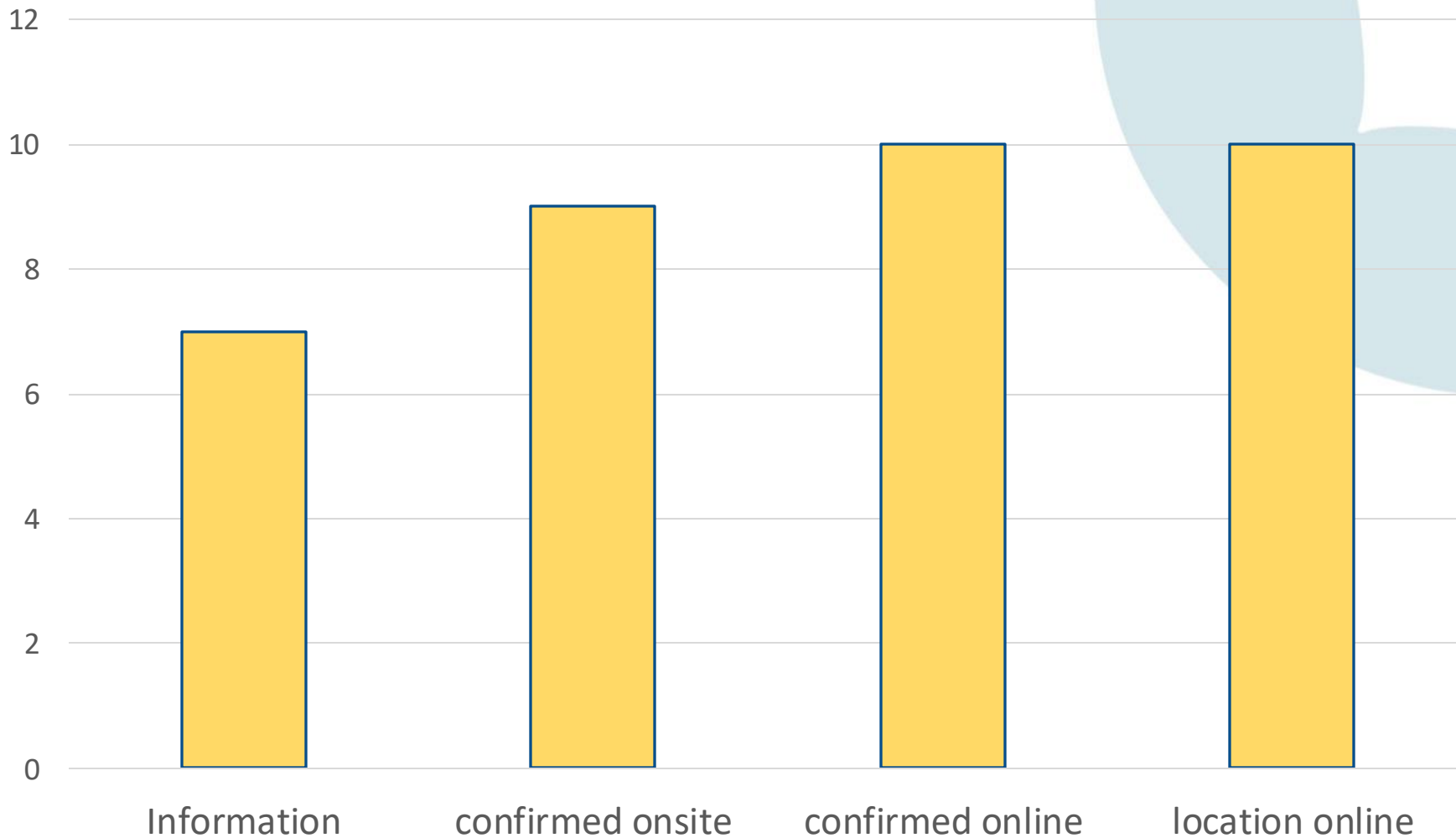
	Length of Call (min)	Time spent on hold (min)	# of employees involved
Average	7 min.	3 min	2
Range	1 to 15 min	0 to 14 min	1 to 4

Responsible Gambling Calls

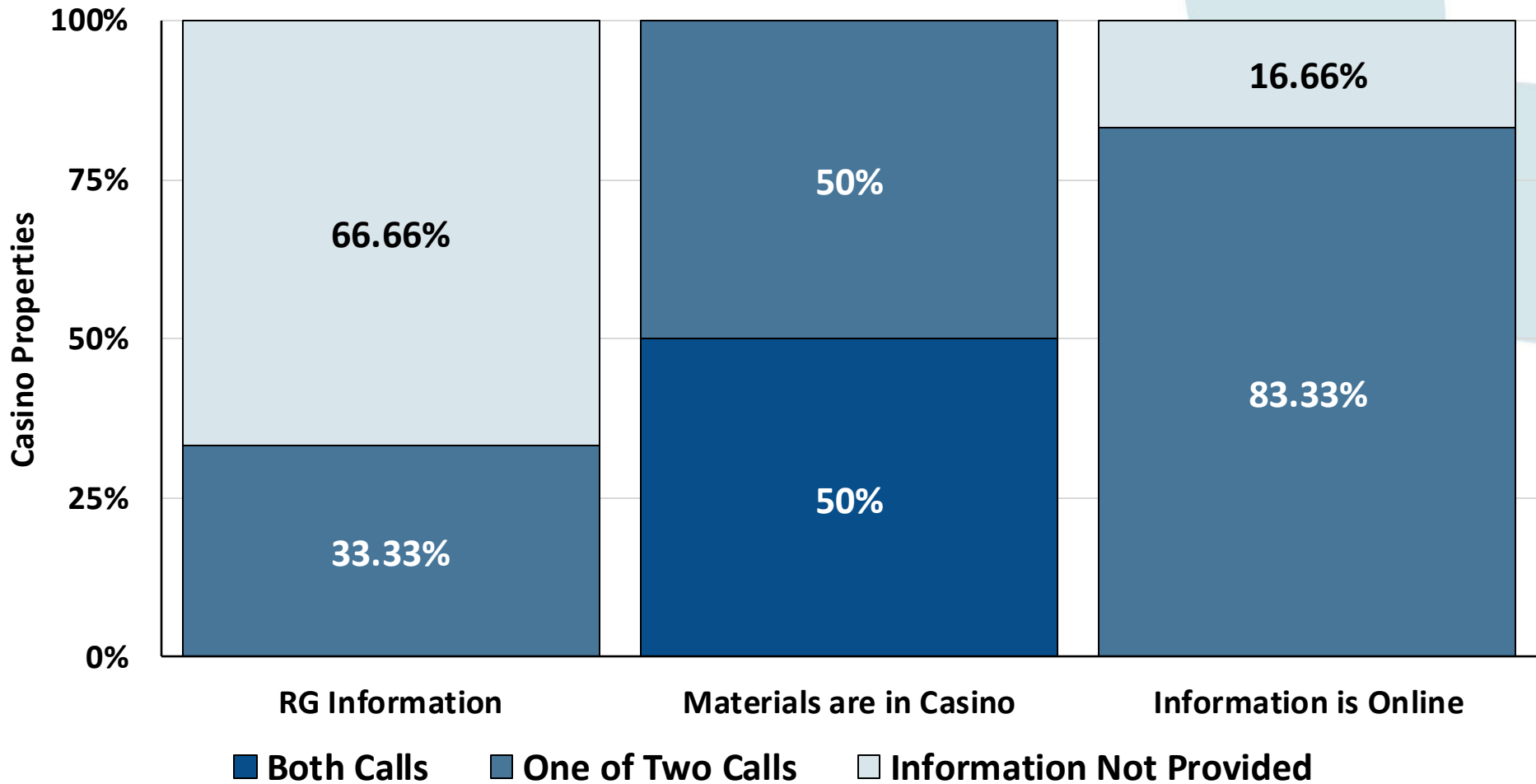


Self-Exclusion Calls

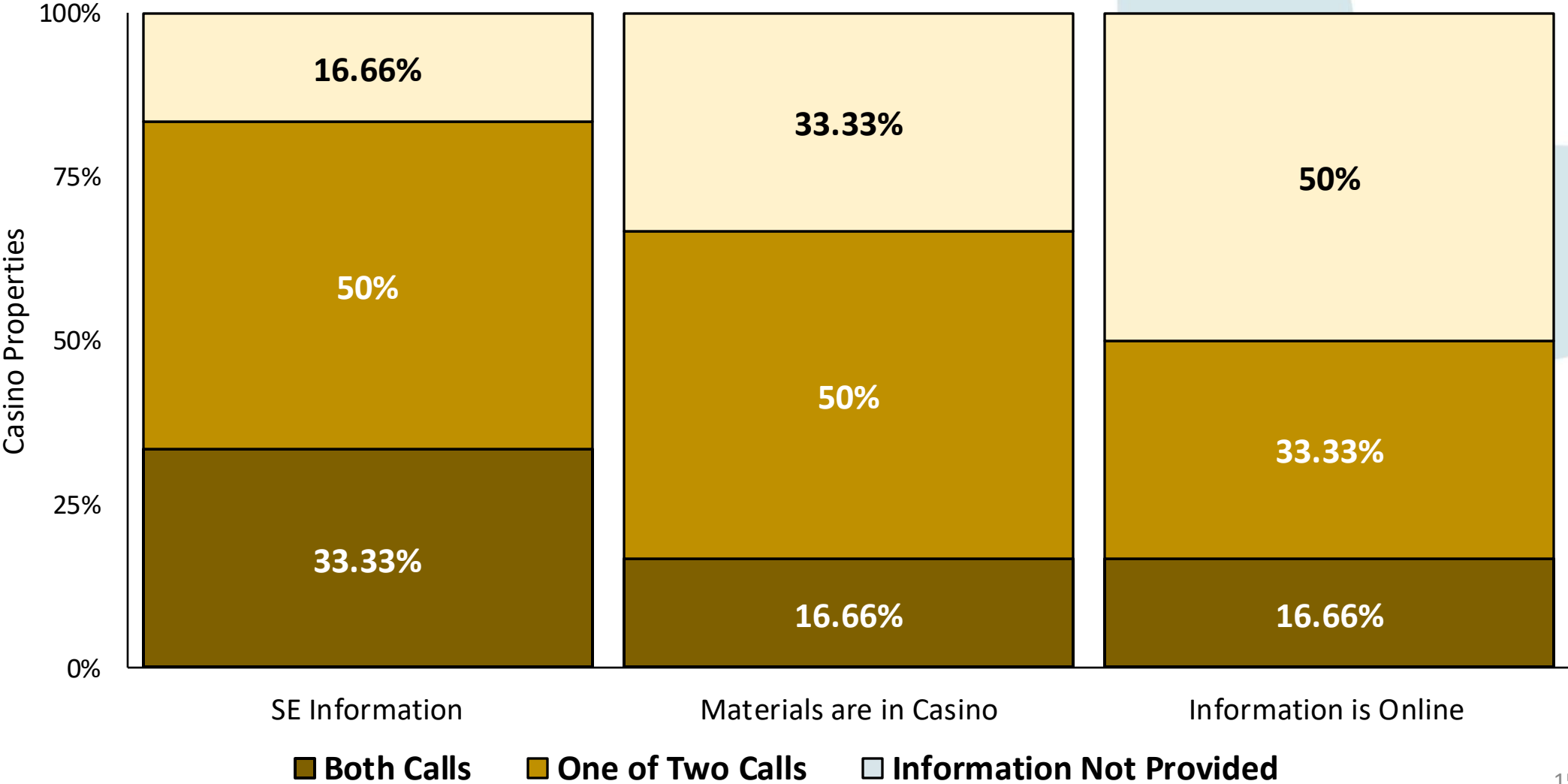
Missed Opportunities out of 14



Casino Consistency across Calls - RG



Casino Consistency across Calls - RG



Call Experiences

- “Overall, just felt like they didn’t want to talk to me”
- “I didn’t feel like the employee really knew what to say about most things”
- “The last woman I spoke to said she was transferring me to the casino chief manager, but after a minute on hold I was hung up on”
- “I also tried asking about materials in the casino, she was apologetic like she wanted to help but it seemed like she wanted to end the call because she didn’t have information”
- “She could have provided me more information, yes, but she was so nice and never got upset with me when I asked more questions.” “Overall, she was very nice, but did not know anything about self exclusion, and I was never successfully transferred to anyone else.”
- “I was on hold for 4 seconds before my call ended.”
- “After asking about self-exclusion, the employee repeated the words back to me, and then said she was going to ‘check for information’ and ‘be right back’. I was placed on hold again. When she came back, she apologized for keeping me on hold and said, ‘What is self exclusion?’”
- “Overall, the conversation was short, most of it I was on hold.”

Call Takeaways

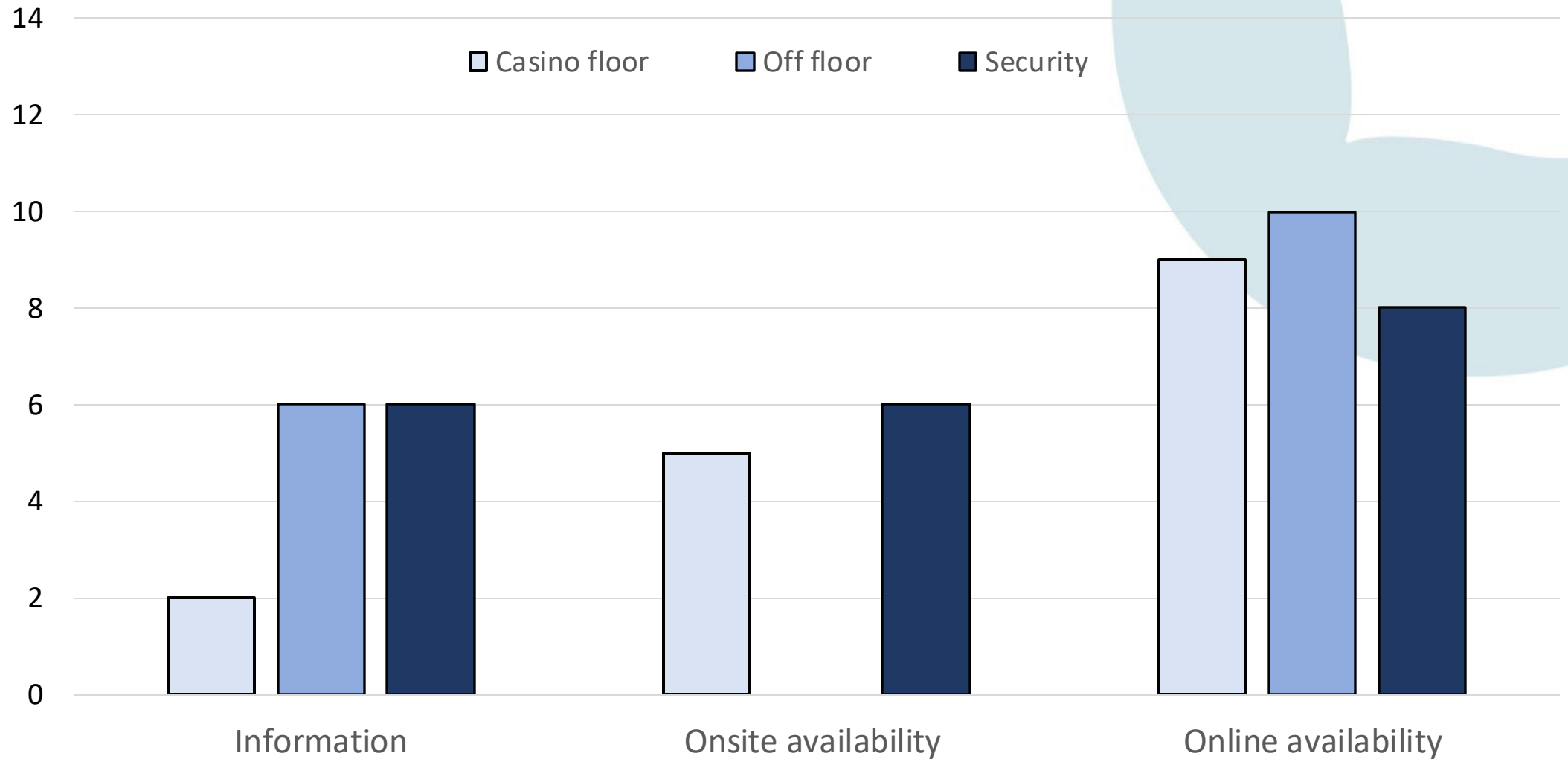
- Lack of information and support
- Inconsistent information
- Varying experiences



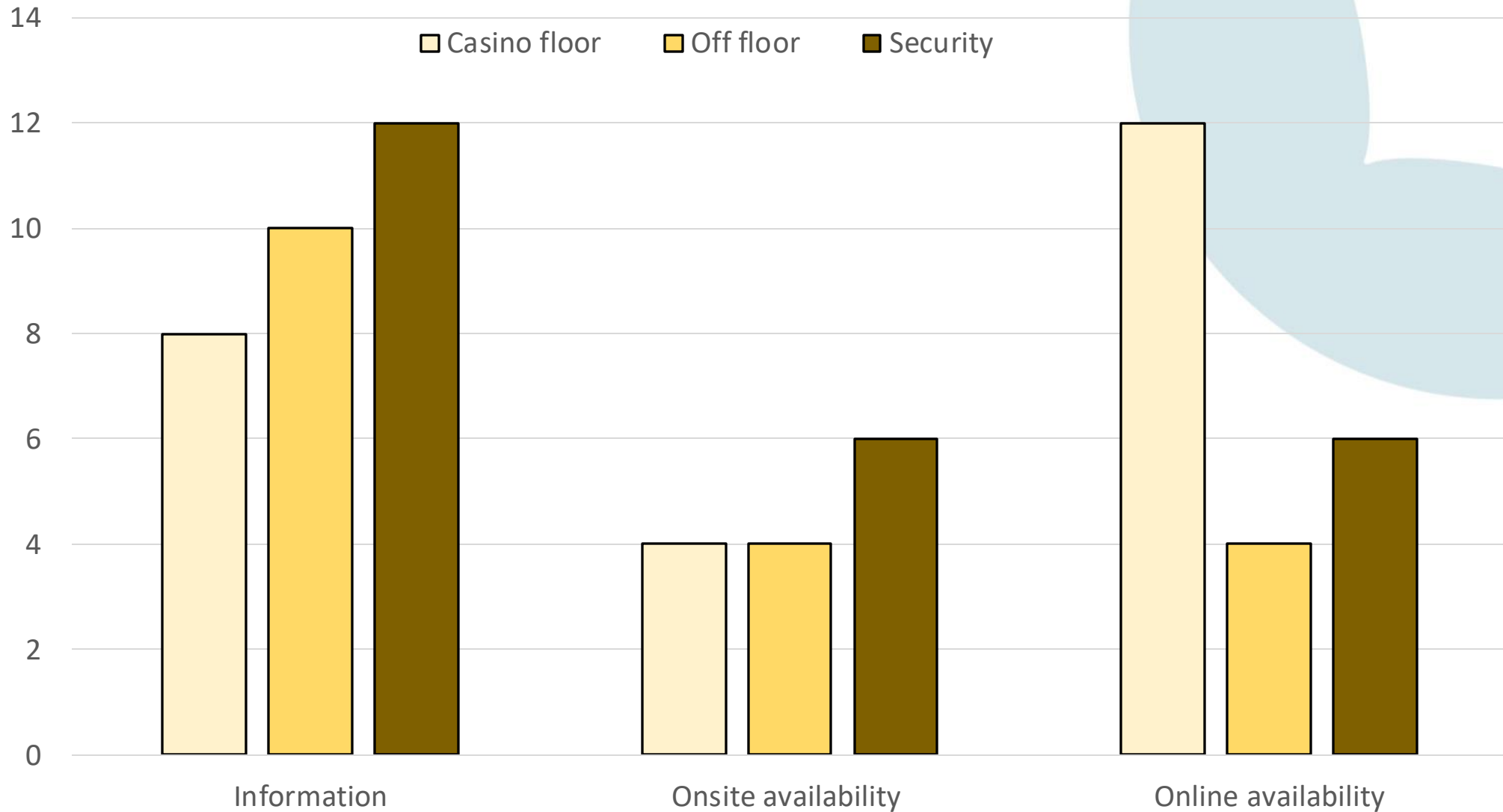
In Person Visits

(3 employees)

Responsible Gambling Misses



Self-Exclusion Misses



Visit Experiences

- Some employees were “very nice” and “cared about their wellbeing”
- In one instance, an employee said that customer would be “put on a list” if they “gambled too much”
- Security employee was trying to talk them out of self-excluding.
- There were some employees that were very nice and provided thorough explanations of the process.
- In another instance, on and off-floor employees told research assistants to talk to the security employee. Then, the security employee directed them to the off-floor employee.

In-person takeaways



- Likely to get explanations of RG, less likely to get explanations of self-exclusion
- High awareness of written materials

Implications?



VIRGINIA LOTTERY

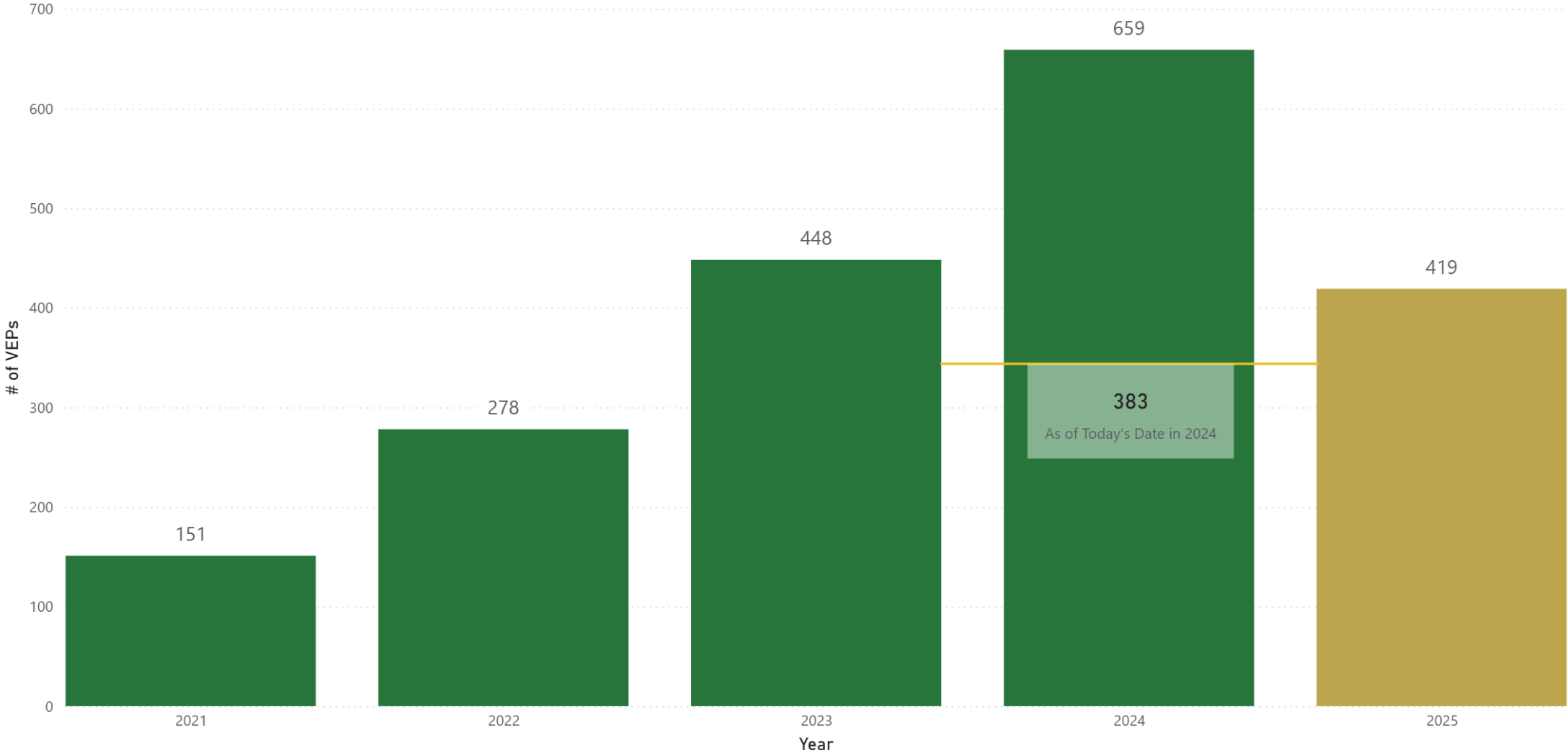
Voluntary Exclusion Program Update

PGTSAC Meeting

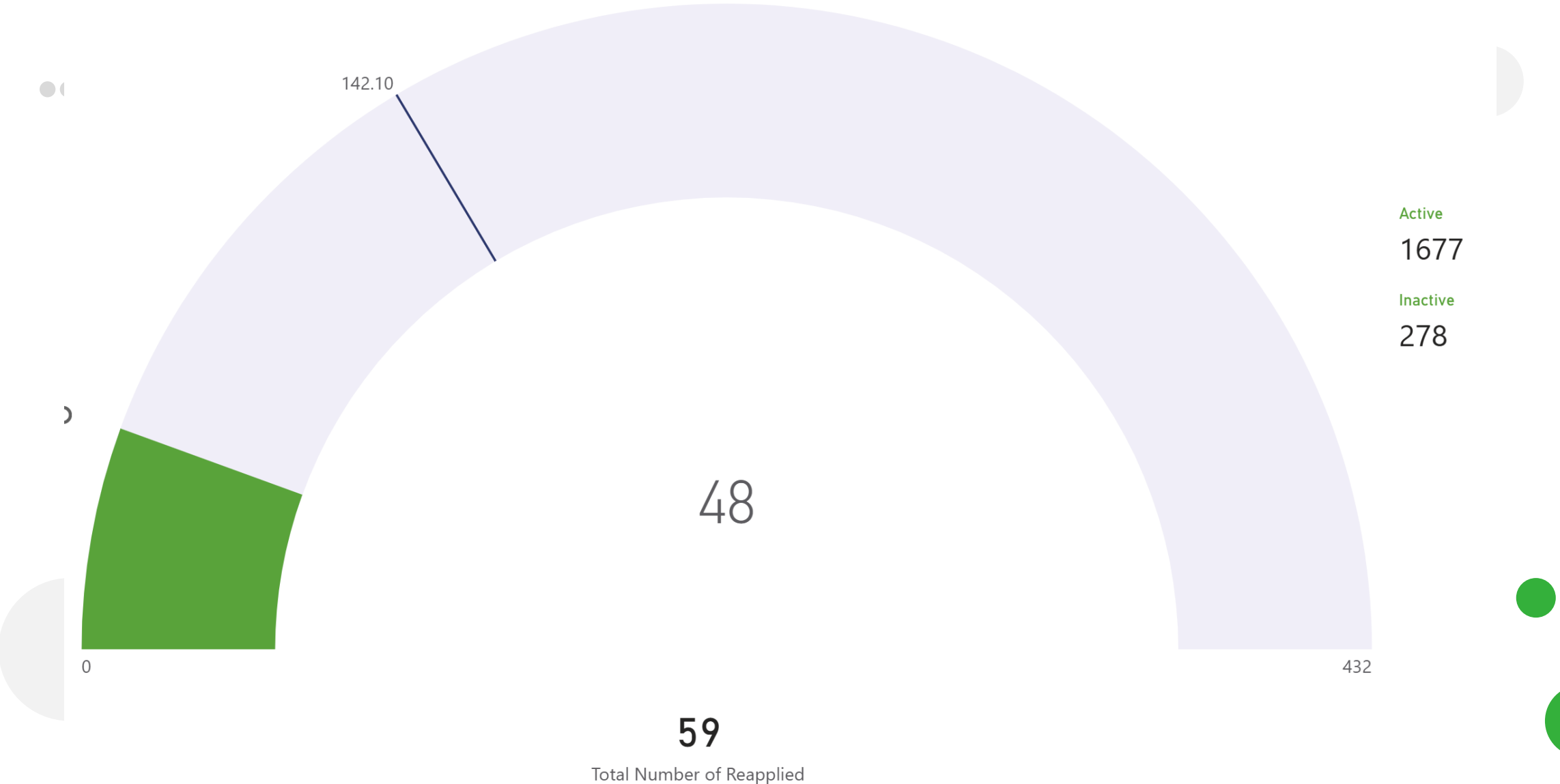
July 29, 2025

VEP Program Timeline

of VEPs by Year



Median number of days for patrons to reapply



Ways to Sign up for the VEP

- Apply or Reapply Online for 2 or 5 years- [Voluntary Exclusion Program | Virginia Lottery](#)
- Sign up at a Casino Facility for 2, 5, or Lifetime exclusions
- Lottery's Onsite Compliance Office or Call the VEP hotline (804)692-7185 to make an appointment to sign up for Lifetime exclusion
- Apply through your Sports Betting App
 - Operators with Self-Excluded Options
 - Bally's
 - Bet365
 - BetMGM
 - Caesars
 - Fan Duel
 - Hard Rock Digital
 - ESPN (Penn Sports)
 - RSI
 - Sporttrade



The screenshot displays the 'Responsible Gambling' section of the Virginia Lottery website. It features a blue header with the title 'Responsible Gambling' in white. Below the header, there are two main sections: 'Voluntary Exclusion Program' and 'Sports Bettors' Bill of Rights'. The 'Voluntary Exclusion Program' section includes a paragraph explaining the program and a link to 'Voluntary Exclusion Program Forms'. The 'Sports Bettors' Bill of Rights' section is currently empty.

Responsible Gambling

Voluntary Exclusion Program

The Virginia Lottery has instituted a self-help program for individuals that wish to voluntarily exclude themselves from Virginia casino gaming establishments, sports betting, account-based lottery as well as gaming activities administered by the Office of Charitable and Regulatory Programs and the Virginia Racing Commission. Individuals may self-exclude for a period of two-years, five-years, or a lifetime.

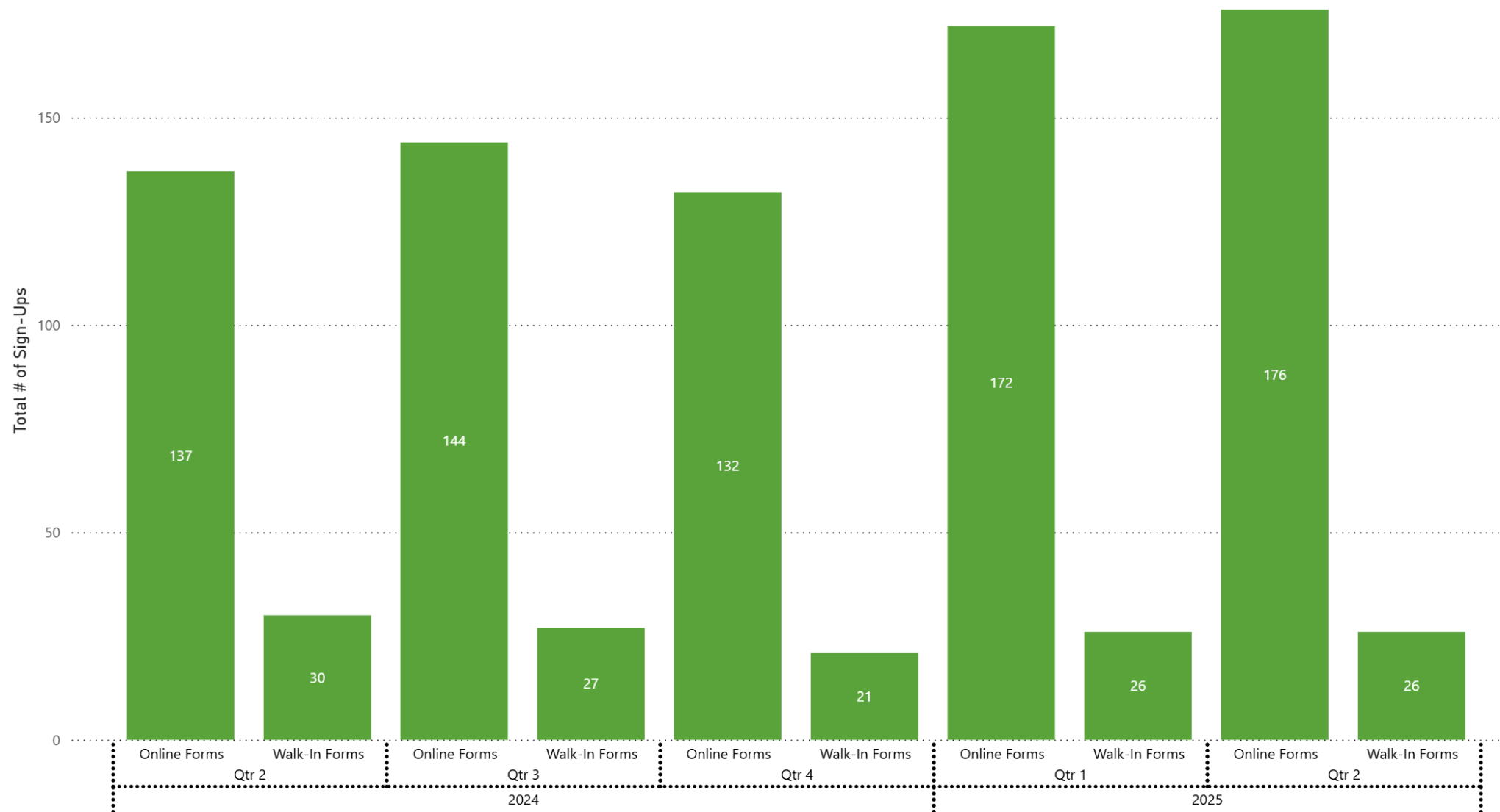
Voluntary Exclusion Program Forms

The below link should be used to complete the voluntary exclusion form for those individuals wanting to exclude themselves for a period of two or five years. Please do not click on the link if you do not intend to complete the process. Individuals wanting to exclude for a lifetime must do so in person either at Lottery headquarters or at one of our opened casino locations by calling the VEP office at 804-692-7185 to set up an appointment.

[Apply online via Docusign](#)

Sports Bettors' Bill of Rights

VEP Form Registration – Online vs. Walk-In







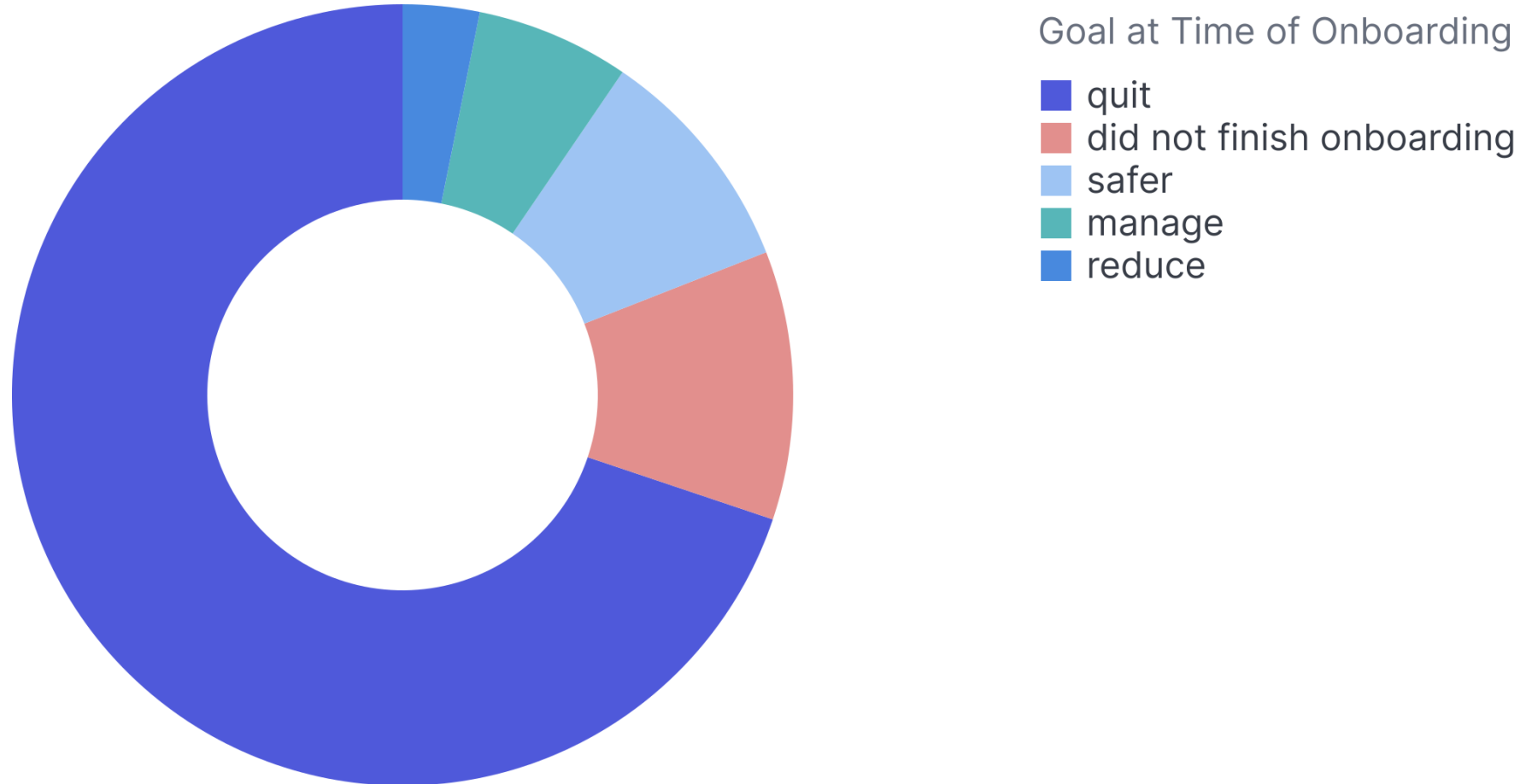
VIRGINIA LOTTERY

Voluntary Exclusion Program - Questions

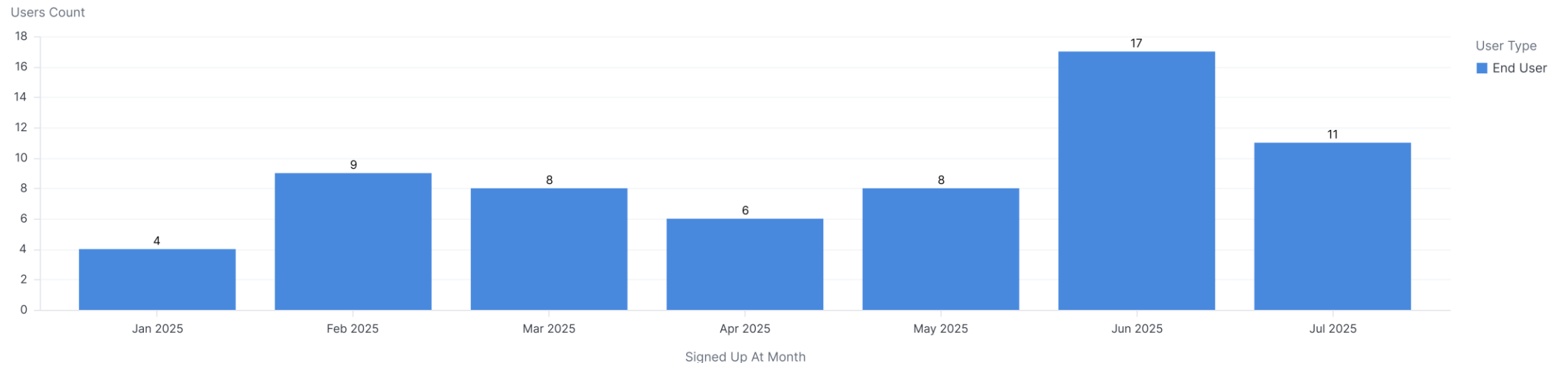
Evive User Data January – July 2025

- 63 signups
- 86% completed onboarding (54)
- 33 users started lessons
- 20 completed lessons (70%)

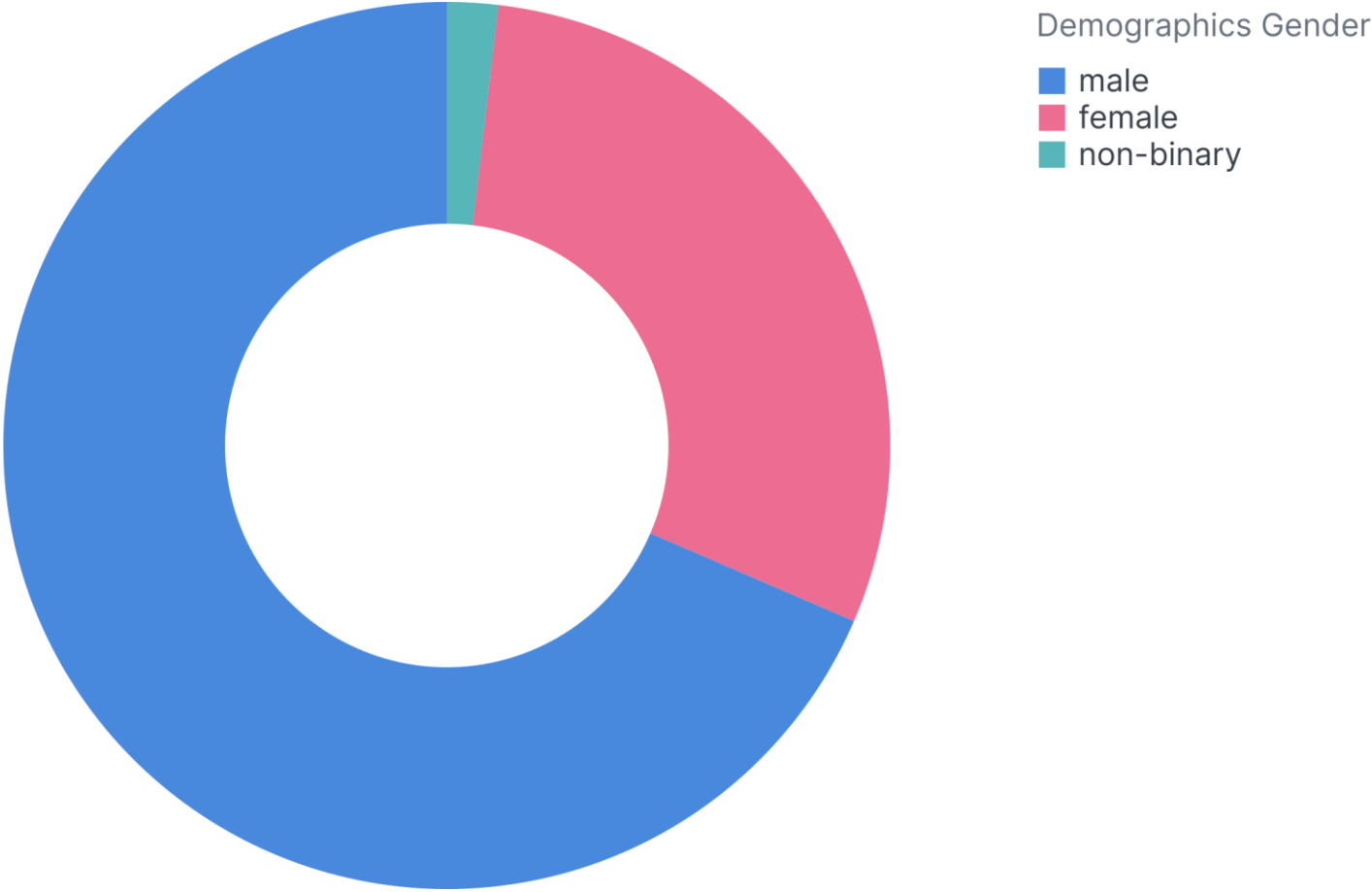
Signups by Goal at Onboarding



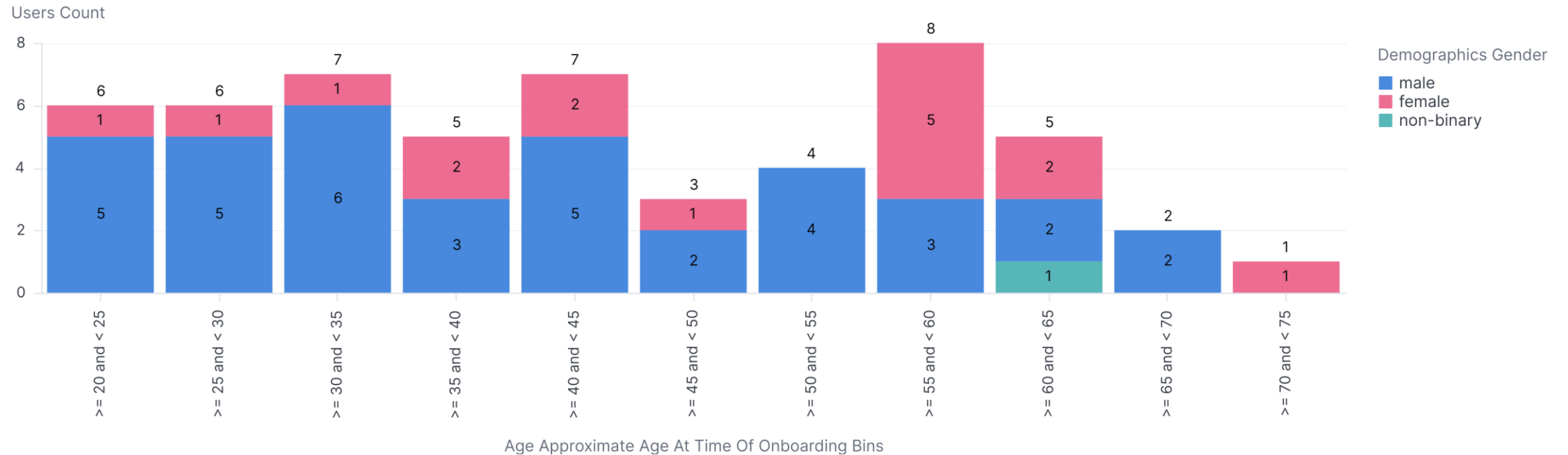
Monthly Signups



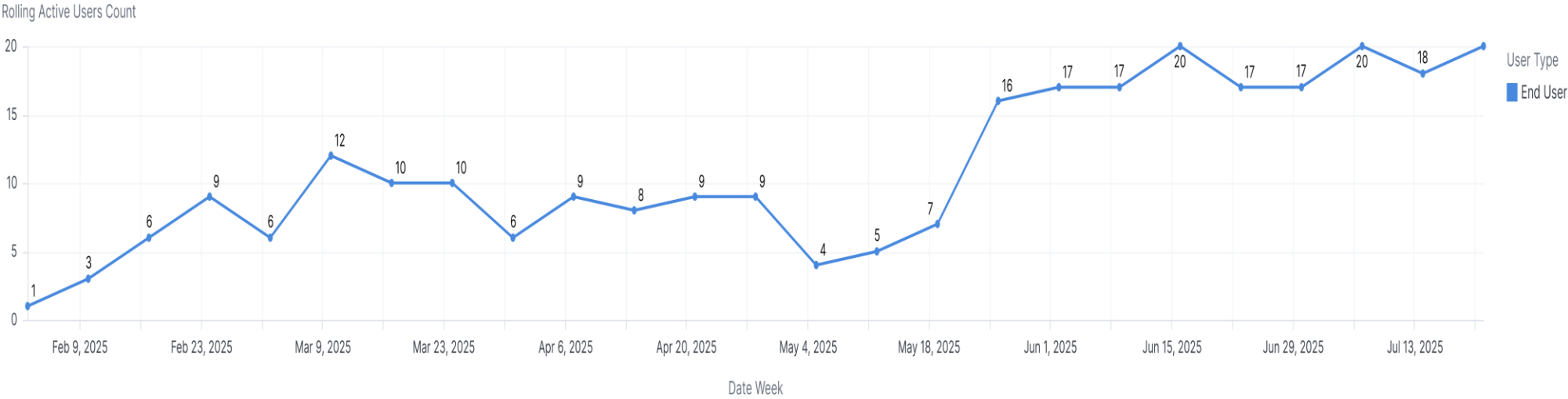
Signups by Gender



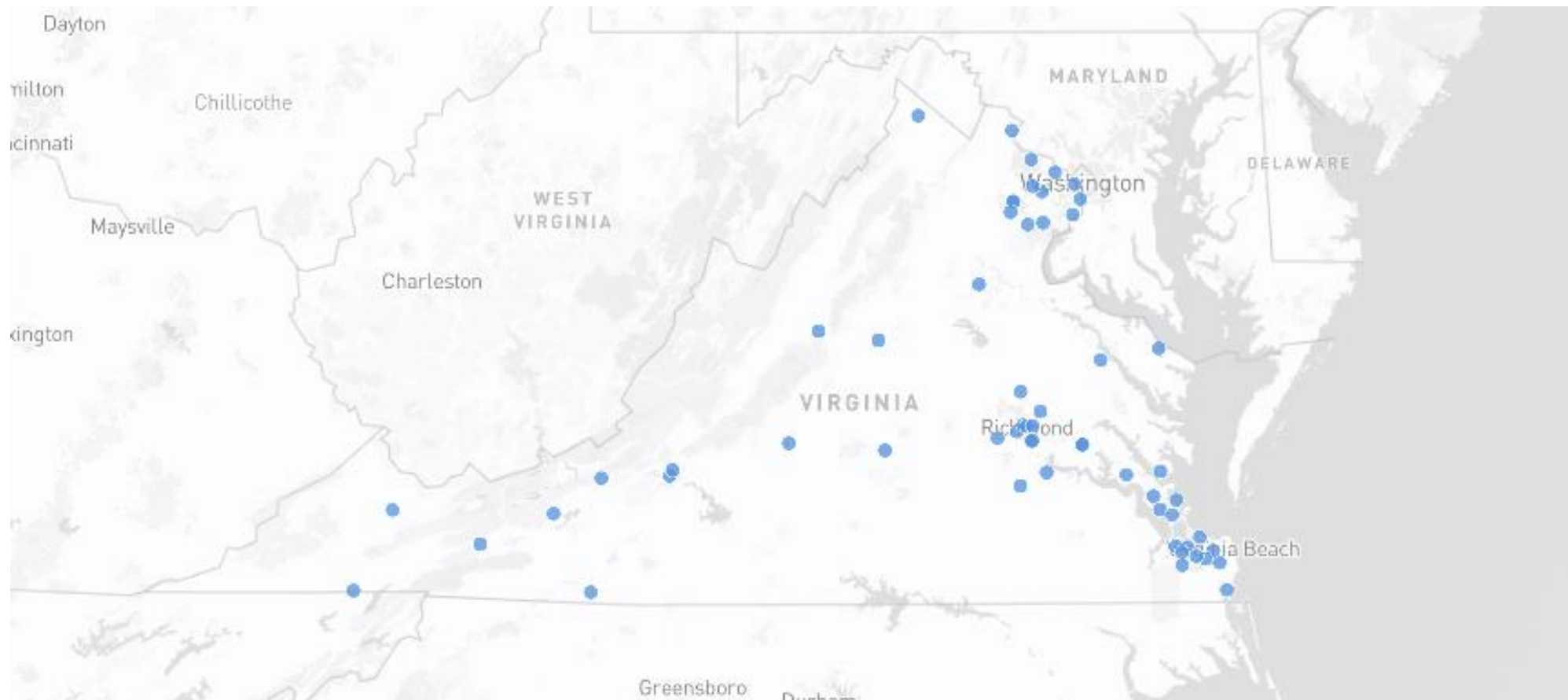
Signups by Age/Gender



Active Users Weekly



User Location

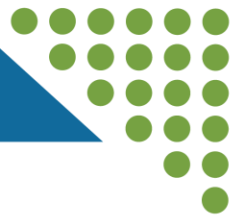


VA PG Helpline Intakes 2024 - 2025

Month	2024	2025	% Increase
April	97	99	2%
May	92	172	87%
June	61	139	128%

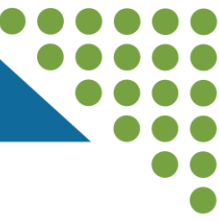


VIRGINIA COUNCIL on PROBLEM GAMBLING
knowledge | strength | support



The Evaluation of the Virginia Problem Gambling Program





Executive Summary



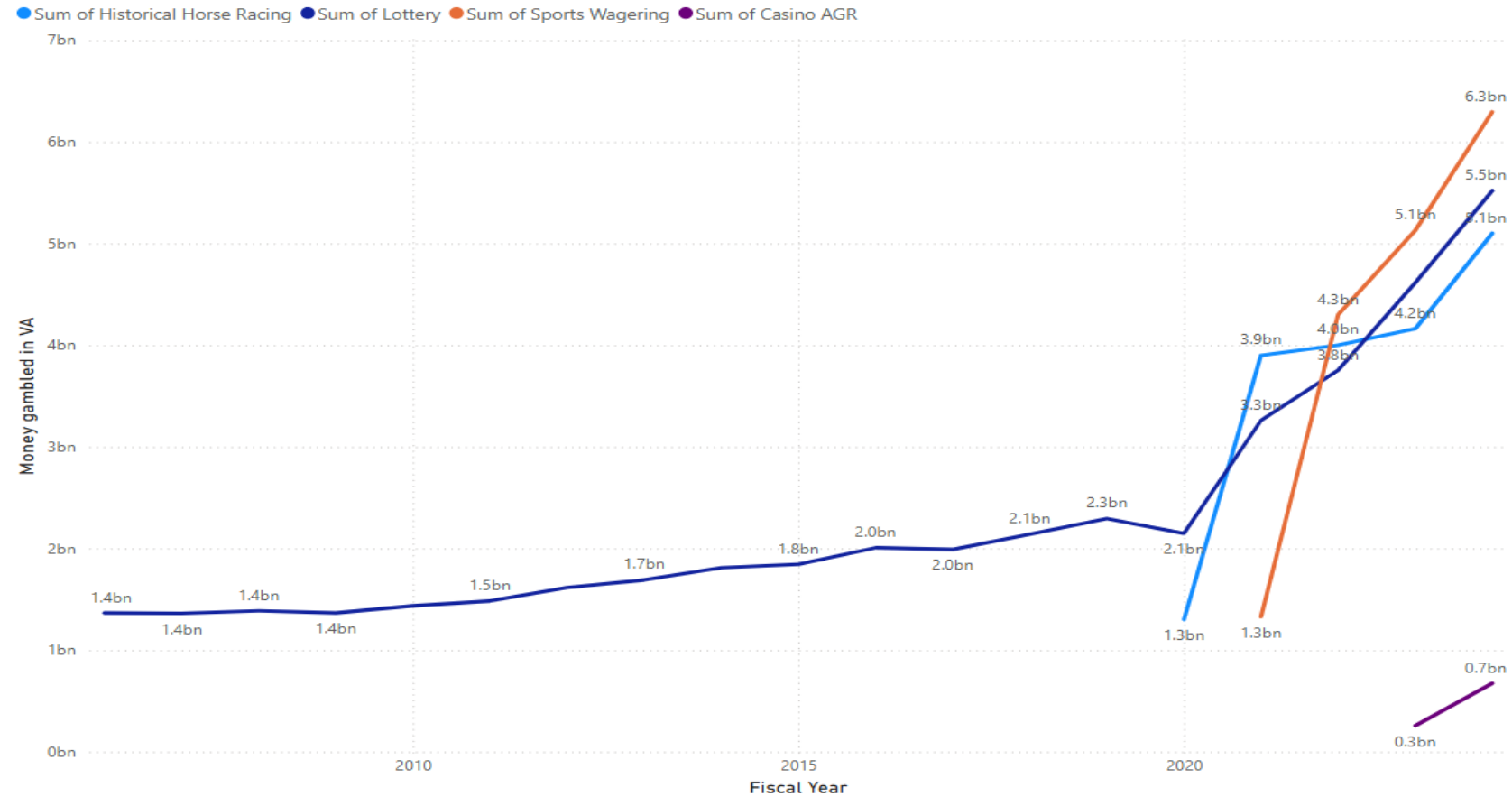
Efforts to combat problem gambling began in 2020 with the creation of the Problem Gambling Treatment and Support Fund (PGTSF) with the goal of implementing an array of activities including to design and carry out problem gambling prevention, treatment and recovery programs, and offer counseling and other support services for compulsive and problem gamblers.

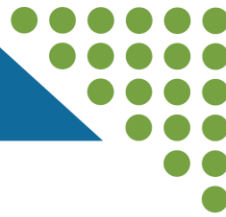
The PGTSF receives approximately \$4.8 million in revenue every year and has been appropriated \$2.6 million in FY 2025 to spend.



Money gambled in Virginia has expanded to over \$12.5 billion each year.

Money Gambled in Virginia





Introduction



Expansion of Legal Gambling

- Since 2019, over 30 states offer legal gambling, gaming, or sports betting.
- Alongside this expansion is a rise in problem gambling behaviors and a call for increased focus on gambling and gaming within the prevention community.

Prevention Focus in Virginia

- Funds are allocated to support prevention efforts targeting problem gambling and gaming.
- In 2021, the Virginia Department of Behavioral Health and Developmental Services (DBHDS) received funding from fees and taxes collected from gambling operators to support prevention efforts targeted at problem gambling and gaming. In partnership with the OMNI Institute, DBHDS leveraged these funds to support Community Service Boards (CSBs) across the Commonwealth in conducting needs assessment efforts that would allow for a greater understanding of community behaviors, knowledge, attitudes, and environments related to gaming and gambling using two primary methods – a qualitative assessment of community readiness and an environmental scan.

Assessment and Research Methods

- DBHDS partnered with the OMNI Institute to help Community Service Boards (CSBs) conduct statewide needs assessments.
 - Two primary methods used:
 - Qualitative assessment of community readiness.
 - Environmental scans to explore local contexts of gambling/gaming behaviors.

OMNI Institute's Role

- A non-profit social science consultancy.
- Provides research, evaluation, and capacity-building to drive more equitable societal change.

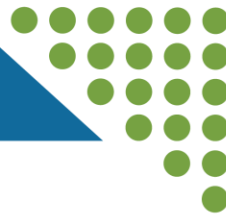
Program Evaluation Objectives

- Main Goals
 - Develop a comprehensive evaluation plan.
 - Assess reach and impact of current efforts across Virginia.
 - Identify gaps, needs, and areas for improvement in future services.
- 

- **The purpose of this evaluation is to examine the following research questions:**
 - 1. What activities and services have been undertaken using the Virginia Problem Gambling Treatment and Support Funding in its mission to address and reduce the negative effects of problem gambling?
 - 2. How effective has the Problem Gambling Treatment and Support Advisory Committee been in enabling coordination and collaboration of efforts to reduce negative effects of problem gambling?
 - 3. What recommendations might the Committee consider to continue or improve upon its current efforts?
 - 4. Do current activities and services provided by PGF-funded entities, have the capacity to accommodate more Virginians seeking help?

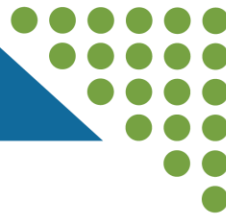
Virginia Funds Problem Gambling Services through the Problem Gambling Treatment and Support Fund (PGTSF) :

- In 2020, the Virginia Legislature and Governor passed a law allowing the legalization of Casinos and Sports Betting in the Commonwealth. With the passage of this law, they also created the Problem Gambling Treatment and Support Fund (PGTSF) managed by DBHDS. A portion of tax revenues would be deposited into the PGTSF to mitigate problem gambling due to this expansion of legalized gambling.
- Sports Betting Taxes: Starting January 2021, the fund receives 2.5% of taxes paid by sports betting operators. In FY25 (July 2024–June 2025), the fund collected \$2,330,886.
- Casino Taxes: Revenue from casinos began in FY23 with the first casino opening in July 2022 (Bristol), the second in January 2023 (Portsmouth), and the third in May 2023 (Danville). The fund receives \$1,133,411 in FY25.
- Horse Racing Licensee Retainment: Starting August 2023, the fund receives 001% of horse racing licensee retainment under § 59.1-392. Historical Horse Racing Electronic Games contributed \$477,829 in FY25.
- Casino Fines and Unclaimed Prizes contributed to \$827,520 into the fund in FY25.



Chapter 2: How is Virginia Addressing Problem Gambling?

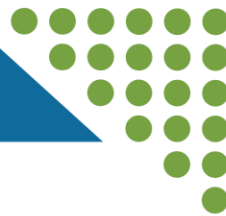




Problem Gambling Fund: Revenues (1 of 2)

- The Virginia Legislature created the special, nonlapsing PGTS Fund through legislation implemented in DY 2021. The Department of Behavioral Health and Developmental Services collects revenues for the PGTS Fund from the following 9 sources:
- Unclaimed Winnings from Casinos: A winning jackpot that is unclaimed by the winner within 180 days becomes State property and is distributed to the PGTS.
- Sports betting: The PGTS fund receives 2.5% of Sports Betting taxes paid to the State.
- Casinos: The PGTS fund receives 0.8% of Casino taxes paid to the state. This includes slot machines, table games, and all gaming machines within the casinos.





Problem Gambling Fund: Revenues (Cont.)

- Casino Fines: A revenue source to the fund comes from Casino Fines and unclaimed prizes, under code 11VAC5-90-20. Violations of the VEP: When gamblers enroll themselves in Virginia's VSE, they agree on their application that if they violate the self-exclusion and gamble while on the voluntary exclusion list, any winnings will be withheld. Such winnings are deposited to the PGTSF.
- Historical horse racing: Under code § 59.1-392, the State receives 0.01% of historical horse racing taxes.
- Casino Unclaimed Prizes: A revenue source to the fund comes from Casino unclaimed prizes, under code 11VAC5-90-20.
- Skill Games: Temporarily in FY 2021, 2% of the revenue from gambling machines goes to the PGTSF.
- Interest: The final revenue source is from interest accruing on the PGTSF account.



Activities undertaken using PGTSF to address and reduce the negative effects of problem gambling:

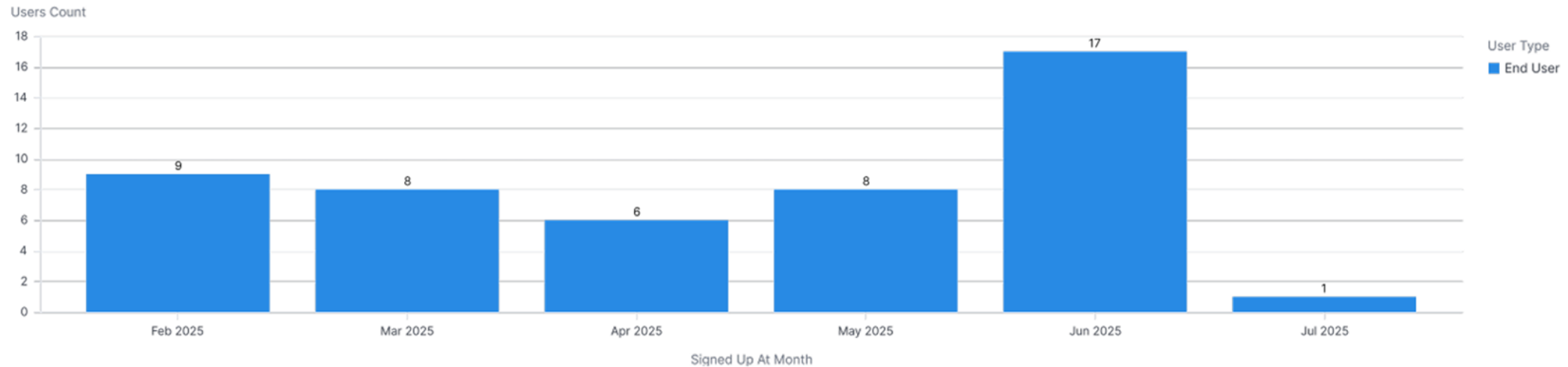
- Website at VPGH.vcu.edu/
 - Social media outreach
 - Public events
 - Numerous conferences
 - Billboards along interstate 81
 - Trained peer workforce
 - Worked with CSBs
 - Partnerships with universities
 - Internships with students
 - Collaborated with Appalachian Substance Abuse Coalition
 - Examined comorbidity with Substance Use Disorder (SUD)
- 

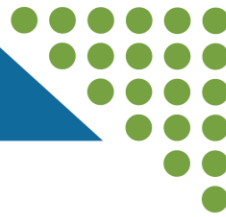
- **Organizations that help alleviate the risks of problem gambling**
 - Problem Gambling Treatment and Support Advisory Committee
 - VCPG
 - DBHDS
 - VA Partnership for Gaming and Health
- **PGTSF receives funds from the following sources:**
 - Unclaimed winnings from casinos
 - Violations of the VEP (Voluntary Exclusion Program)
 - Sports Betting
 - Casinos
 - Casino Fines
 - Historical Horse Racing
 - Gaming
 - Skill Games
 - Interest

Evive: the leading digital health platform for gambling behavior change

- Evive partners with state and federal agencies to support individuals with problem gambling disorder
- Reaches the 99.5% of individuals who cannot access state-funded services
- Started pilot testing in VA in February 2025

Monthly Signups





Chapter 3: How Many Virginians Seek Help for Problem Gambling?

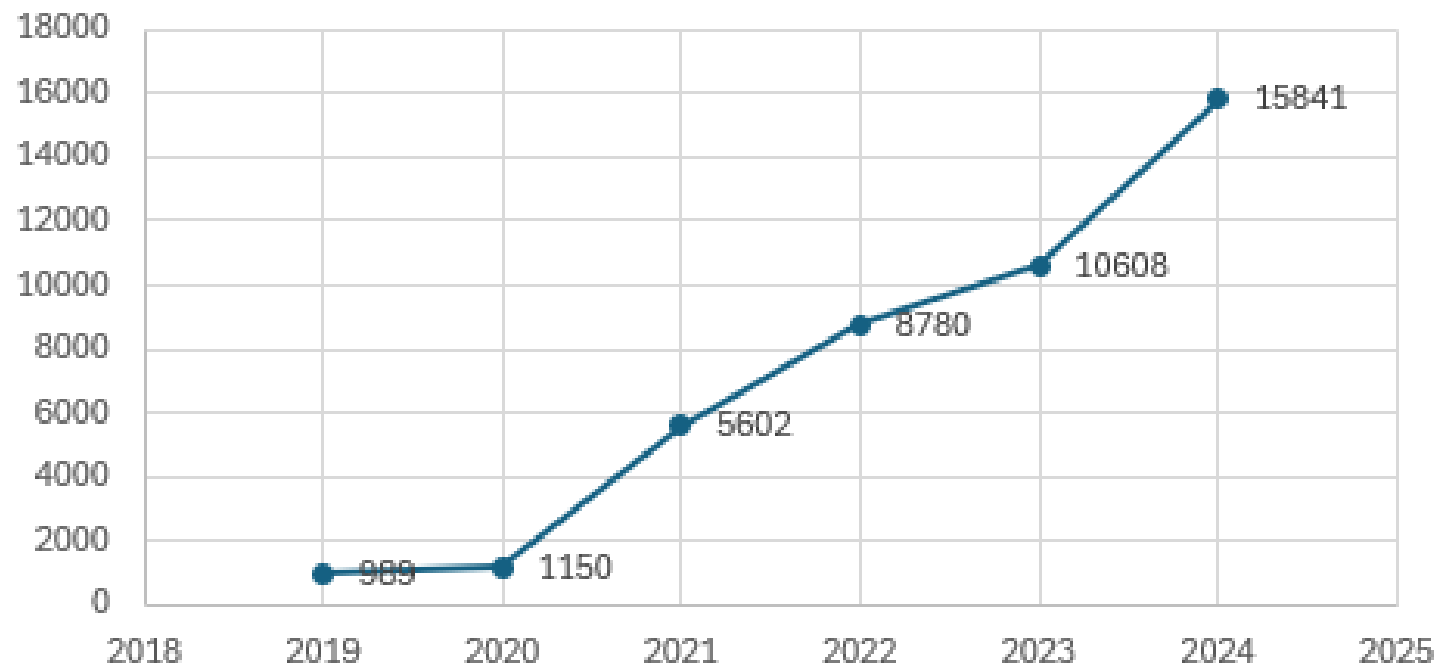


Virginians seek help for problem gambling in a variety of ways, including one or more of the following:

- In-State Resources:
- Connect with a Peer Support Specialist on the Virginia Problem Gambling Helpline (888 532-3500) or by Call, text, or chat 1-800-GAMBLER, a free, national Helpline
- Get free treatment and recovery services, which can be paid for via the Virginia Partnership for Gaming and Health (VPGH) or Medicaid; and/or
- Enroll in Virginia's Voluntary Exclusion Program (VEP), administered by Virginia State Lottery.

The VA Problem Gambling Helpline received 15,841 call in 2024

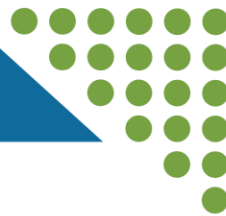
Call Data Virginia Council on Problem Gambling
(YOY)



Program Overview

The Virginia Partnership for Gaming and Health (VPGH) at Virginia Commonwealth University, is a comprehensive solution for all Virginians who need support for problem gambling. Its mission is to inspire hope, build support, and foster solutions to empower every Virginian seeking to transform their lives from problem gambling. They are dedicated to promoting wellness and cultivating strong communities where individuals can thrive. Connecting with the VPGH means connecting you with a plethora of resources, including, but not limited to:

- 1 Access to treatment and recovery funds/resources available through the VPGH network
- 2 Direct referral and coordination of an initial assessment with network clinicians
- 3 Provide and/or directly refer to specially trained staff and/or network CPRS or PRS interns
- 4 Referrals to Gamblers Anonymous, VPGH CPRS-led peer support groups and other mutual aid groups
- 5 Connection to a one year GamBan subscription, self-exclusion forms, recovery apps, and financial counseling through GamFin
- 6 Provide information/connection to other services/resources that fit support seeker needs
- 7 On-going follow-up for up to one year, or longer if needed
- 8 Presentations, training and outreach related to problem gambling, treatment and recovery



Voluntary Exclusion Program (VEP)

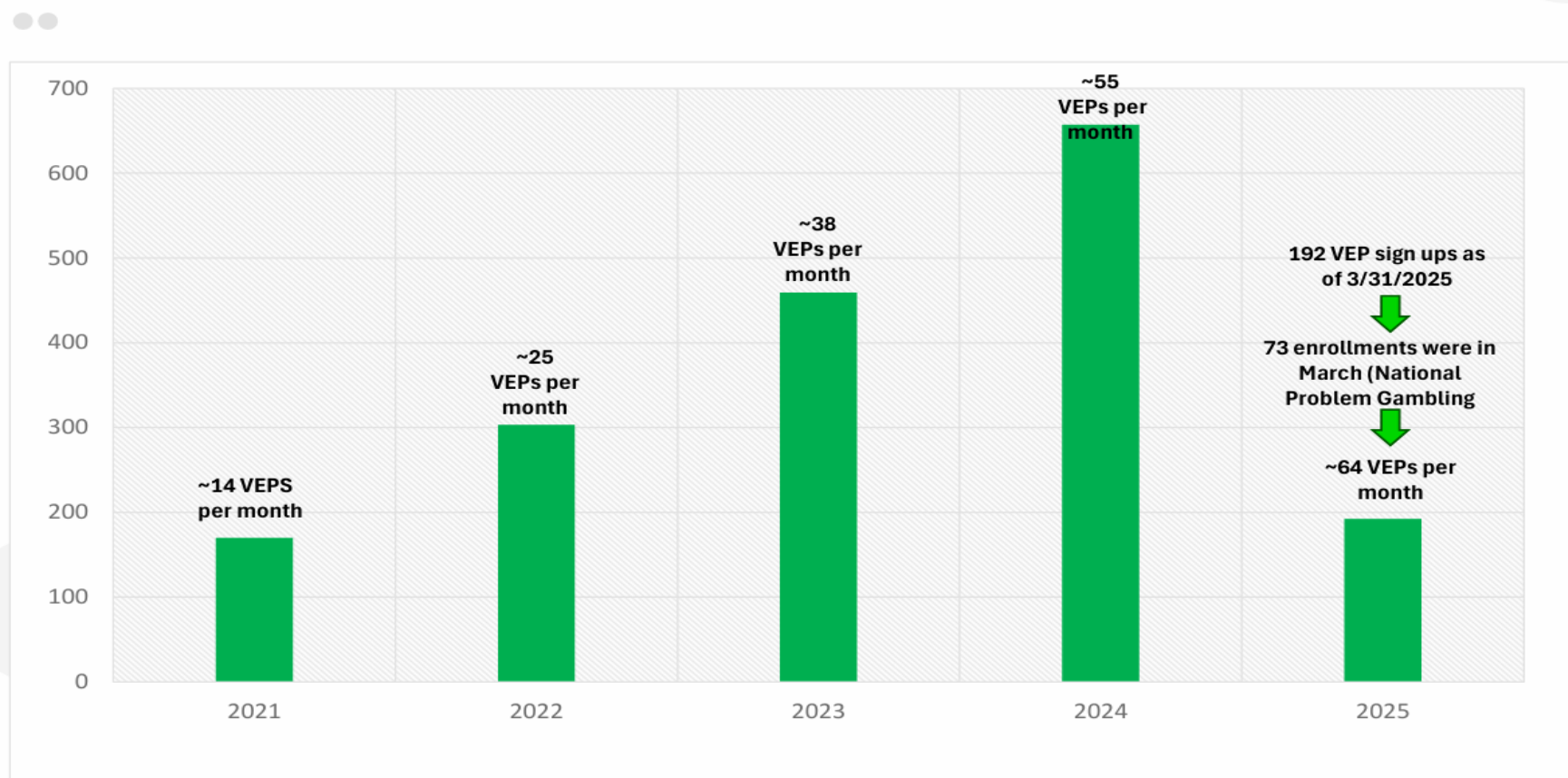
- The self-exclusion program allows people with a gambling problem to voluntarily exclude themselves from participating in certain legalized gambling in Virginia, whether regulated by the Virginia Lottery, the Virginia Office of Charitable and Regulatory Programs, or the Virginia Racing Commission. This includes casino gaming, account-based Virginia Lottery games; online sports betting, charitable gaming (raffle, bingo, network bingo and instant bingo); and betting on horse racing (live racing, off-track betting, historical horse racing, and advance deposit account wagering)

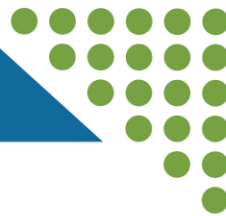


Voluntary Exclusion Program (VEP)

The Virginia Lottery analyzes Voluntary Self-Exclusion (VSE) data to find insights and trends in the impact gambling expansion is having on the State. There were ~14 new sign-ups to the VSE program per month in 2021, ~25 new per month in 2022, ~38 new per month in 2023, ~55 new per month in 2024, and ~64 new per month in 2025.

VEP File as of March 31, 2025 – 1753 (Active & Inactive)





Addressing Demographic Disparities in Gambling Service Utilization: Service Usage (1 of 2):

- Findings demonstrate that structural determinants (i.e., casino location) may drive observed disparities in problem gambling risk and outcomes for racially minoritized communities. After examining demographic trends in service usage by CSB, DBHDS observed the following statistically significant differences:
- Compared to white and Asian individuals, Black individuals used problem gambling services at a higher rate than white and Asian individuals - but only in CSBs where a casino was present. This suggests that increased service use among Black individuals may be driven by greater exposure to nearby gambling opportunities, rather than higher overall rates of service use across contexts.



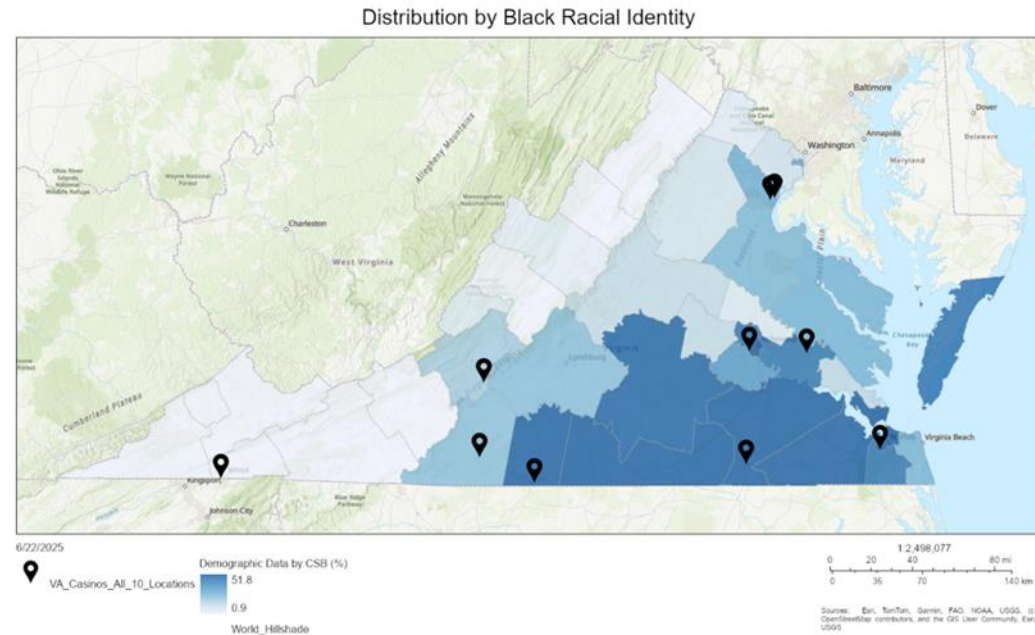
Addressing Demographic Disparities in Gambling Service Utilization: Service Usage (continued):

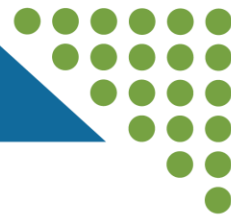
- Across all CSBs, white individuals accounted for the highest rates of problem gambling service usage (34%), followed by Black individuals (14%), Asian individuals (4%), and American Indian and Alaska Native individuals (<1%). However, this pattern stands in contrast to extensive evidence indicating that racial and ethnic minoritized communities experience higher rates of problem gambling. This discrepancy suggests that these communities may face barriers to accessing services, leading to underrepresentation in treatment despite higher levels of need.

Addressing Demographic Disparities in Gambling Service Utilization: Service Usage (continued):

Casinos tend to be located in areas with a higher proportion of black residents

Recommendation: Incorporate a Health Equity Impact Assessment into all new casino siting and licensing processes





Chapter 4: What is Virginia's Capacity to Handle Growth in Problem Gambling?



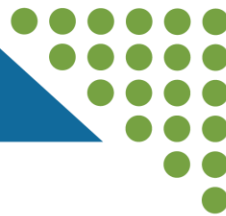
Treatment Services Capacity (1 of 2)

Program strengths; Current Capabilities

- All help-seekers served within 24 hours
- Zero staff turnover: a sign of stability
- Unanimous praise from focus groups, “Knocking It Out of the Park”

Areas for Improvement

- Awareness Building: Need for more “boots on the ground” outreach to raise public awareness.
 - Capacity: Program must be equipped to serve a growing number of Virginians seeking help.
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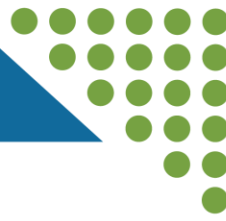


Treatment Services Capacity (continued)

Recommendations

- Flexible Funding: Create adaptable fund allocation and a reserve system to expand capacity.
- Mandatory Screening: DBHDS should require screening for problem gambling across relevant services, a preventative step toward broader coverage and earlier support.
- Peer Support Expansion:
 - Currently only one peer recovery specialist per health region.
 - Existing peers work 65–70 hours weekly, risking burnout.
 - Peers show excellent outcomes and a high connection rate (93% linked within one week).
 - Hiring more peers is essential for sustainability and success.





The Problem Gambling Treatment Services Network (No Cost)

- Many organizations are involved in implementing the Problem Gambling Treatment Services Network, created in 2024. Treatment providers require specific training on problem gambling to participate in the network. Virginia Commonwealth University (VCU), through the Virginia Partnership for gambling and health, recruits providers to participate in the Network and processes the reimbursement claims from providers.
- Treatment providers participating in Virginia's Treatment Network must agree to:
 - Accept the State's reimbursement rate for treatment services, set slightly higher than the Medicaid reimbursement rates; and
 - Use VCU to process treatment reimbursement claims.
- One hundred and seven licensed treatment providers were enrolled in the No Cost Network as of June 2024

