



CALIFORNIA GAMBLING EDUCATION AND TREATMENT SERVICES

Fiscal Year 2023-24 Treatment Report Fact Sheet

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OVERVIEW

California Gambling Education and Treatment Services (CalGETS) is a highly successful statewide program providing treatment for adults with gambling disorder (also known as gambling addiction) and for affected individuals (family members and friends affected by someone with problem gambling). Treatment services are available to any California resident over age 18, regardless of immigration status, at no cost to the client. Oversight of CalGETS is conducted by the California Office of Problem Gambling (OPG) and UCLA Gambling Studies Program (UGSP). Since 2009, over **20,500** individuals have received treatment through the program to address the harmful impacts of problem gambling.

Provider Treatment Services Network. Licensed providers and agencies offer treatment services in various formats to address and serve the diverse needs of problem gamblers and affected individuals, including:

- **Problem Gambling Telephone Interventions** are provided in English, Spanish, and in other Asian threshold languages in California.
- **Outpatient** treatment is offered by a network of OPG-authorized, licensed providers. Gamblers and affected individuals participate in individual and group treatment grounded in the provider's treatment approach and philosophy. Treatment is available in-person and via telehealth and incorporates CalGETS training and clinical guidance, which gives providers access to leading-edge knowledge and developments in the field of gambling treatment.
- **Intensive Outpatient** treatment is available in-person and via telehealth and allows clients to participate in three hours of gambling-specific treatment per day, three times per week and receive individual, group, and family treatment.
- **Residential Treatment** is available for clients needing a 24-hour residential treatment setting.

Cultural and Linguistic Clinical Integrations. UGSP oversees clinical integration projects that create and test new resources and clinical tools to identify best practices for the treatment of gambling disorders. During FY 2023-24, UGSP and OPG worked with two community agencies, *Visión y Compromiso* and Riverside San Bernardino Indian Health Centers to address disparities among those reached for CalGETS education and treatment.

UGSP partnered with *Visión y Compromiso* (VyC) to provide an extensive gambling-specific training to *promotoras* (lay health workers) to increase CalGETS utilization among Hispanic communities in Los Angeles, San Diego, Kern, and Tulare counties. Additionally, UGSP provided project development, training, project monitoring, and evaluation services.

UGSP partnered with the Riverside San Bernardino Indian Health Centers (RSBIHC) to conduct a pilot project to provide education, screening, and treatment referrals for those with gambling problems in the tribal community. This project is being implemented by RSBIHC with support from UGSP and OPG. UGSP provided

UCLA
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training sessions to RSBIHC peer specialists, physicians and therapists on techniques to implement screening for problem gambling and on CalGETS intake.

CalGETS PROVIDERS: A DIVERSE AND SKILLED WORKFORCE

- CalGETS trains, authorizes, and provides clinical guidance to **141 licensed mental health providers** and six treatment programs.
- Treatment services are available in English, Spanish, Mandarin, Cantonese, Vietnamese and 25 other languages/dialects.
- In addition to their professional training, treatment providers employ CalGETS workbooks and materials during treatment sessions.

CalGETS TREATMENT OUTCOMES (2023-24)

Gamblers:

- **A total of 878 gamblers** received treatment across the CalGETS treatment network. Nearly two-thirds (66%) received outpatient services, 23% were served by telephone interventions, 8% were served in intensive outpatient treatment, and 3% were served in residential treatment. Of gamblers enrolled in outpatient services, 3% were served in group treatment.
- Gambling urges decreased from Intake to Last Treatment Contact.
- The degree to which clients perceived that gambling interfered with normal activities decreased between Intake and Last Treatment Contact. (Except in Residential where gamblers perceived an increase.)
- Life satisfaction increased by the end of treatment.
- Clients' depression measured by the Patient Health Questionnaire (PHQ-9) improved by the end of CalGETS treatment to mild or subclinical levels (depending on type of treatment).
- Anxiety also improved to subclinical levels by the end of treatment.

Affected Individuals:

- **A total of 211 affected individuals** received CalGETS outpatient or telephone treatment.
- Affected individuals are spouses/significant others (43%), parents (15%), children (27%), siblings (7%), or other relation (8%) of gamblers; 72% of affected individuals are female.
- By the end of treatment, affected individuals reported improvements in life satisfaction, decreased depression, decreased negative impact of someone else's gambling, decreased sense of responsibility for the gambler's recovery, and decreased time spent on the consequences of problem gambling.

SIGNIFICANT PROGRAM ACCOMPLISHMENTS

- **Client Follow-up Contact Calls** – Treatment follow-up interviews take place at 30 days, 90 days, and one year after treatment entry and are designed for program evaluation and to assess the impact of treatment. Beginning in July 2023, UGSP introduced email surveys and transitioned the follow-up process from the DMS to the Qualtrics on-line survey platform. As a result, UGSP completed **240** treatment follow-up surveys, over 100 more than in FY 2022-23.



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CalGETS CLIENT CHARACTERISTICS AT INTAKE: FOCUS ON HEALTH AND WELLNESS

- At intake, clients come to treatment with a variety of co-occurring health conditions that are addressed by CalGETS treatment professionals during the treatment process or through referrals.

Wellness Components	Gamblers: Characteristics at CalGETS Intake
Medical Problems	The most common co-occurring health conditions of CalGETS clients are hypertension, obesity, and diabetes.
Smoking	Among CalGETS outpatient clients, 18% currently smoke. This percentage is more than three times the state average of 5.1% (California Health Interview Survey).
Alcohol Use	Binge drinking in the past month was reported by 23% of CalGETS outpatient clients. (Binge drinking is defined as greater than five drinks in a single occasion for men, and for women, greater than four drinks.) In comparison, 23% of adult Californians reported binge drinking in the past month (National Survey on Drug Use and Health, NSDUH).
Cannabis	According to the National Survey on Drug Use and Health (NSDUH), 17% of the adult population of California reported using cannabis within the past month. Among CalGETS outpatient clients, 17% used cannabis.
Obesity	31% of CalGETS outpatient clients meet Body Mass Index obesity criteria.
State of Health	According to the Centers for Disease Control (CDC), 16% of adults in California reported their health as “fair or poor” in 2021. In comparison, about 40% of gamblers across the treatment network reported their health as “fair or poor.”
Health Insurance	About 89% of all CalGETS clients reported having health insurance. CalGETS provides no-cost gambling treatment, but does not provide insurance assistance.
Access to Healthcare	Approximately 79% of CalGETS clients reported they currently have a physician they can access for primary care needs.
Depression	Of CalGETS outpatient clients, 41% scored in the moderate to severe depression range measured by the PHQ-9 compared to 7% of adult Californians reporting (NSDUH) a past year major depressive episode.
Anxiety	Based on their scores on the GAD-2 anxiety screening instrument, 42% of outpatient clients appear to have Generalized Anxiety Disorder.
ADHD	Based on the ASRS screening instrument for attention-deficit hyperactivity disorders (ADHD), it appears that 13% of outpatient clients may have ADHD.

Wellness Items	Affected Individuals: Characteristics at CalGETS Intake
Health	18% of Outpatient affected individuals reported that their health was fair or poor, and 26% had a body mass index indicating obesity. The percentage of Outpatient affected individuals reporting smoking was 6% in FY 2023-24. Also, 70% reported that they had health insurance.

- The full CalGETS Annual Treatment Services Report (2023-24) can be accessed at: [Treatment Services Report FY 23-24](#)
- Additional research and treatment reports are available at: <https://www.uclagamblingprogram.org/>