AGENDA COLORADO LIMITED GAMING CONTROL COMMISSION

Meeting of September 21, 2023 Beginning at 9:15 a.m. In-Person & Via Cisco Webex Division of Gaming 1707 Cole Blvd., Ste. 300 Lakewood, CO 80401

In addition to other matters that may properly be considered by the Colorado Limited Gaming Control Commission, the following items are scheduled for consideration and adoption on September 21, 2023. Times contained in the agenda are approximate.

PUBLIC SESSION

I. <u>Call to Order</u>

EXECUTIVE SESSION

Review of confidential background licensing reports scheduled for consideration during the public session.

PUBLIC SESSION (reconvened)

II. <u>Consideration of Licensing Actions</u>

Limited Gaming Licenses

Renewal and Change of Ownership of the of the Operator License: Gold Merger Sub, LLC

Sports Betting Licenses

First Internet Sports Betting Operator License for NOVIG LABORATORIES, LLC d/b/a NOVIG PointsBet Colorado LLC d/b/a PointsBet

First Sports Betting Operator License for PointsBet Colorado LLC d/b/a PointsBet

First Temporary Vendor Major License for POINTSBET USA HOLDING INC ODDIN.GG US LLC

Renewal of Vendor Minor License for Sift Science, Inc. d/b/a Sift Upper 9 Media LLC d/b/a Odds Assist International Betting Integrity Association Hedge, Inc. d/b/a Hedge ABG-SI LLC *First Vendor Minor License for* PMG Worldwide, LLC 8Count Media, Inc. Optival Ltd. Pikkit North America, LLC d/b/a Pikkit RAM Consultant, Inc.

- III. Opportunity for Public to Address the Commission
- IV. Consideration of Division Limited Gaming Financial Statements for July 2023
- V. Consideration of Division Sports Betting Financial Statements for July 2023
- VI. Consideration of FY23 Sports Betting Fund Distribution
- VII. <u>Consideration of the Stipulation & Agreement for Case No. DOG22002245 in the matter</u> of Ted Kilgore, Support License No. 50897
- VIII. <u>Review of Status Reports from FY23 Responsible Gaming Grant Recipients</u>
- IX. Consideration of Organizational Matters
- X. <u>Opportunity for Industry Members to Address the Commission on Current Issues and</u> <u>Events</u>
- XI. Adjournment

At the discretion of the Commission, any or all of the above matters may be continued for consideration or adoption at a different time, may be considered out of order, or may be considered at the next meeting of the Commission.

Public Session

Item IV Limited Gaming Financials July 2023



STATEMENT OF GAMING REVENUES, GAMING TAXES, AND EXPENDITURES (UNAUDITED) FOR THE FIRST (1) MONTH ENDED JULY 31, 2023



COLORADO Department of Revenue

Specialized Business Group-Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

September 21, 2023

State Treasurer and Members of the Colorado Limited Gaming Control Commission:

Pursuant to Section 44-30-203 (i), C.R.S., the Colorado Division of Gaming is required to furnish monthly a, "report which contains a full and complete statement of the division's revenues and expenses."

The attached combined financial statements for July 31, 2023 have not been audited. They contain the most current data available. This information has been collected and recorded in accordance with generally accepted accounting principles.

Respectfully submitted,

Vakie Thom

Vickie Floyd Division Controller

COLORADO DIVISION OF GAMING FINANCIAL STATEMENTS (UNAUDITED)

DISTRIBUTION

Honorable Jared Polis	Governor
Representative Julie McCluskie	Speaker of the House of Representatives
Senator Stephen Fenberg	President of the Senate
Senator Paul Lundeen	Senate Minority Leader
Representative Mike Lynch	House Minority Leader
Senator Rachel Zenzinger	Chair, Joint Budget Committee
Mr. Kevin Armstrong	Chair, Limited Gaming Control Commission
Ms. Patsy Landaveri	Vice Chair, Limited Gaming Control Commission
Mr. Shawn Coleman	Limited Gaming Control Commission
Mr. John Tipton	Limited Gaming Control Commission
Ms. Heidi Humphreys	Interim Executive Director, Department of Revenue
Mr. Michael Phibbs	Senior Director, Specialized Business Group, Department of Revenue
Mr. Christopher Schroder	Director, Division of Gaming
Mr. Scott Koehler	Accounting Director, Department of Revenue
Mr. Dustin Hoover	Deputy Budget Director, Department of Revenue
Mr. Bob Jaros	State Controller
Mr. Charles Scheibe	Chief Financial Officer, Department of the Treasury
Ms. Aly Jabrocki	State Archivist
Ms. Kerri Hunter	State Auditor
Ms. Amanda King	Joint Legislative Library
Ms. Megan Davisson	Deputy Director for Budget, Governor's Office
Colorado State Publications Depository and Distribution Center	State of Colorado Library

DIVISION OF GAMING STATEMENT OF REVENUES GAMING TAXES, AND EXPENDITURES (UNAUDITED)

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Comparative Tax Revenues	
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Comparative Statement of Revenues,	
Expenditures, and Changes in Fund Balance	

COLORADO DIVISION OF GAMING TAX REVENUES COMPARISON JULY 31, 2023 AND 2022

The Colorado Limited Gaming Control Commission assesses taxes based on adjusted gross proceeds (AGP).

The tax rates for period ending June 30, 2024 are:

3% on AGP from charitable gaming
.25% on amounts up to \$2 million
2% on amounts over \$2 million and up to \$5 million
9% on amounts over \$5 million and up to \$8 million
11% on amounts over \$8 million and up to \$10 million
16% on amounts over \$10 million and up to \$13 million
20% on amounts over \$13 million

The tax rates for year ending June 30, 2024 are the same as they were for year ending June 30, 2023.

For Periods Beginning July 1, 2022 and 2023 through July 31, 2022 and 2023

	AGP	Соі	mparison		
Range	Prior Year AGP		Current Year AGP	Difference	Percent Change
\$0 - \$2 Million	\$ 21,199,759	\$	22,187,996	\$ 988,237	4.66%
\$2 - \$5 Million	\$ 16,933,154	\$	15,889,671	\$ (1,043,483)	(6.16)%
\$5 - \$13+ Million	\$ 63,380,528	\$	60,068,175	\$ (3,312,353)	(5.23)%
Total	\$ 101,513,441	\$	98,145,842	\$ (3,367,599)	(3.32)%

	Tax (Con	nparison		
Range	Prior Year Tax		urrent Year Tax	Difference	Percent Change
\$0 - \$2 Million	\$ 102,999	\$	105,470	\$ 2,471	2.40%
\$2 - \$5 Million	\$ 338,663	\$	317,793	\$ (20,870)	(6.16)%
\$5 - \$13+ Million	\$ 6,297,066	\$	5,700,502	\$ (596,564)	(9.47)%
Total	\$ 6,738,728	\$	6,123,765	\$ (614,963)	(9.13)%

Open Casinos Comparison						
Range	Prior Year No. of Tax Returns Filed by Casinos	This Year No. of Tax Returns Filed by Casinos	Difference			
\$0 - \$2 Million	23	22	(1)			
\$2 - \$5 Million	6	6	0			
\$5 - \$13+ Million	4	4	0			
Total	33	32	(1)			

COLORADO DIVISION OF GAMING COMBINED STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE (UNAUDITED) FIRST MONTH ENDED JULY 31, 2023 AND 2022

		FY 202	24			FY 2023							
	EXTENDED GAMING FUND	RESPONSIBLE GAMING GRANT FUND	LIMITED GAMING FUND	TOTAL GAMING FUNDS	-	EXTENDED GAMING FUND	RESPONSIBLE GAMING GRANT FUND	LIMITED GAMING FUND	TOTAL GAMING FUNDS				
REVENUES:													
Gaming Taxes	\$0	\$ 0\$	6,130,146 \$	6,130,146	\$	0\$	0 \$	6,738,728 \$	6,738,728				
License and Application Fees	0	0	72,859	72,859		0	0	67,291	67,291				
Background Investigations	0	0	5,343	5,343		0	0	3,402	3,402				
Fines	0	0	420	420		0	0	1,260	1,260				
Interest Income	283	925	448,440	449,648		29	0	212,025	212,054				
Other Revenue	0	0	44	44		0	0	44	44				
TOTAL REVENUES	283	925	6,657,252	6,658,460	-	29	0	7,022,750	7,022,779				
EXPENDITURES:													
Salaries and Benefits	0	1,134	727,620	728,754		0	0	826,322	826,322				
Annual and Sick Leave Payouts	0	0	2,621	2,621		0	0	0	0				
Professional Services	0	0	15,339	15,339		0	0	12,825	12,825				
Travel	0	0	1,713	1,713		0	0	15,459	15,459				
Automobiles	0	0	13,949	13,949		0	0	18,013	18,013				
Printing	0	0	1,602	1,602		0	0	955	955				
Police Supplies	0	0	1,558	1,558		0	0	9,709	9,709				
Computer Services & Name Searches	0	0	8,595	8,595		0	0	7,300	7,300				
Materials, Supplies, and Services	0	0	25,332	25,332		0	0	24,202	24,202				
Postage	0	0	321	321		0	0	72	72				
Telephone	0	0	6,626	6,626		0	0	6,567	6,567				
Utilities	0	0	2,281	2,281		0	0	2,463	2,463				
Other Operating Expenditures	0	0	7,671	7,671		0	0	10,830	10,830				
Leased Space	0	0	12,330	12,330		0	0	11,975	11,975				
Capital Outlay	0	0	10,180	10,180		0	0	0	0				
EXPENDITURES - SUBTOTAL	0	1,134	837,738	838,872	-	0	0	946,692	946,692				
STATE AGENCY SERVICES													
Division of Fire Prevention and Control	0	0	21,040	21,040		0	0	18,100	18,100				
Colorado State Patrol	0	0	340,700	340,700		0	0	295,000	295,000				
State Auditors	0	0	7,125	7,125		0	0	0	0				
Indirect Costs - Department of Revenue	0	0	101,359	101,359		0	0	97,125	97,125				
Colorado Department of Law	0	0	20,694	20,694		0	0	19,299	19,299				
OIT Purchased Services	0	0	45,513	45,513		0	0	12,489	12,489				
TOTAL STATE AGENCY SERVICES	0	0	536,431	536,431	-	0	0	442,013	442,013				
Non Personal Services Background Exp.	0	0	314	314	-	0	0	128	128				
TOTAL EXPENDITURES	0	1,134	1,374,483	1,375,617	-	0	0	1,388,833	1,388,833				
Excess of Revenues Over Expenditures	283	(209)	5,282,769	5,282,843	-	29	0	5,633,917	5,633,946				
FUND BALANCE AT JULY 1, 2023 & 2022	44,135,150	2,550,658	2,520,682	49,206,490	-	46,823,932	2,500,000	2,445,701	51,769,633				
TOTAL FUND BAL. JULY 31, 2023 & 2022	\$ 44,135,433	\$\$\$\$	7,803,451 \$	54,489,333	\$	46,823,961 \$	2,500,000 \$	8,079,618 \$	57,403,579				



COLORADO Department of Revenue

Specialized Business Group–Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

Memo

To:	Colorado Limited Gaming Control Commission
From:	Vickie Floyd, Gaming Controller
Cc:	Chris Schroder
Date:	September 21, 2023
Re:	July 2023 Gaming Fund Financial Statement Presentation

Following are highlights from the Gaming Fund financial statements ending July 31, 2023.

Statement of Revenues, Expenditures, and Changes in Fund Balance

Gaming tax revenues have decreased by \$608,582 or 9% over last year. Total Revenues for the Limited Gaming Fund as of July 31 were \$6,657,252, a 5% decrease compared to July 2022.

Total expenditures for the period ending July 2023 were approximately \$1.4 million. This represents a 1% decrease over last year. The main reason for the decrease is in the Salaries and Benefits line, which decreased by \$98,702 or 12% over last year. The PERA Direct Distribution expenditure is \$81,724 less this fiscal year compared to last fiscal year.

The excess of total revenues over expenditures was \$5,282,769. This is a 6% decrease over last year and represents the amount we could distribute as of July 31.

Next, as you are aware from my cover letter, we are only required to prepare a Statement of Revenues and Expenditures. For those of you who were here last year, you may recall that since the inception of the statewide financial system known as CORE, the State now takes a long time to close the fiscal year. Beginning balances do not roll into the next fiscal year until the State closes the previous fiscal year. Therefore, we will not be able to prepare a balance sheet until the State closes. Regarding the budget, we should be able to prepare this statement with September's financial statements.

Please feel free to contact me if you have any questions on the Gaming Fund financial statements.

Item V Sports Betting Financials July 2023



STATEMENT OF SPORTS BETTING REVENUES, SPORTS BETTING TAXES, AND EXPENDITURES (UNAUDITED) FOR THE FIRST (1) MONTH ENDED JULY 31, 2023

DIVISION OF GAMING STATEMENT OF REVENUES SPORTS BETTING TAXES, AND EXPENDITURES (UNAUDITED)

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COLORADO DIVISION OF GAMING SPORTS BETTING COMBINED STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE FIRST MONTH ENDED JULY 31, 2023 AND 2022 (UNAUDITED)

			FY 2024				FY 2023	
	Н	OLD-HARMLESS	SPORTS	TOTAL SPORTS		HOLD-HARMLESS	SPORTS	TOTAL SPORTS
	_	FUND	BETTING FUND	BETTING FUNDS		FUND	BETTING FUND	BETTING FUNDS
REVENUES:	۴	0.0	4 774 074 0	4 774 074	¢	0.0	4 004 070 \$	4 004 070
Sports Betting Taxes	\$	0 \$ 0	1,774,371 \$		\$	0 \$ 0	1,091,676 \$	
License and Application Fees		0	38,066 1,755,000	38,066 1,755,000		0	26,001	26,001
Sports Betting Operations Fees Background Investigations		0	11,089	11.089		0	1,734,400 11,724	1,734,400 11,724
Interest Income		3,709	85,482	89,191		640	16,689	17,724
Other Revenue		3,709	85,482 938	938		640 0	41	41
•		3,709	3,664,946	3,668,655		640	2,880,531	2,881,171
TOTAL REVENUES	_	3,709	3,004,940	3,008,055		640	2,880,531	2,881,171
EXPENDITURES:								
Salaries and Benefits		0	226,115	226,115		0	207,741	207,741
Annual and Sick Leave Payouts		0	17,813	17,813		0	0	0
Professional Services		0	6,537	6,537		0	12,487	12,487
Travel		0	30	30		0	748	748
Automobiles		0	1,392	1,392		0	2,959	2,959
Printing		0	0	0		0	148	148
Police Supplies		0	312	312		0	71	71
Computer Services & Name Searches		0	1,577	1,577		0	2,632	2,632
Materials, Supplies, and Services		0	16,442	16,442		0	2,995	2,995
Postage		0	9	9		0	26	26
Telephone		0	1,091	1,091		0	1,222	1,222
Other Operating Expenditures		0	2,073	2,073		0	2,598	2,598
Leased Space		0	3,083	3,083		0	2,994	2,994
EXPENDITURES - SUBTOTAL		0	276,474	276,474		0	236,621	236,621
STATE AGENCY SERVICES								
State Auditors		0	7,125	7,125		0	0	0
Indirect Costs - Department of Revenue		0	13,005	13,005		0	10,445	10,445
Colorado Department of Law		0	10,518	10,518		0	6,810	6,810
OIT Purchased Services		0	6,176	6,176		0	3,665	3,665
TOTAL STATE AGENCY SERVICES	_	0	36,824	36,824		0	20,920	20,920
Non Personal Services Background Exp.		0	352	352		0	492	492
TOTAL EXPENDITURES	_	0	313,650	313,650		0	258,033	258,033
EXCESS OF REVENUES OVER EXPENDITURES	_	3,709	3,351,296	3,355,005		640	2,622,498	2,623,138
FUND BALANCE AT JULY 1, 2023 & 2022	_	1,271,076	25,454,129	26,725,205		493,165	12,253,994	12,747,159
TOTAL FUND BAL. JULY 31, 2023 & 2022	\$	1,274,785_\$	28,805,425 \$	30,080,210	\$	493,805 \$	14,876,492 \$	15,370,297



COLORADO Department of Revenue

Specialized Business Group–Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

Memo

To:	Colorado Limited Gaming Control Commission
From:	Ryan Golden, Reporting Accountant
Date:	September 21, 2023
Re:	July 2023 Sports Betting Fund Financial Statements

Following are highlights from the Sports Betting Fund financial statements ending July 31, 2023.

Statement of Revenues, Expenditures, and Changes in Fund Balance

Current fiscal year Sports Betting Tax revenue was \$1,774,371 which is an increase of \$682,695, or about 63%, over the prior fiscal year. The current fiscal year increase in Sports Betting Tax revenue is due in part to the year over year increase in Net Sports Betting Proceeds of 34%.

Current fiscal year Sports Betting Operations Fees revenue was \$1,755,000, which is an increase of \$20,600 over the prior fiscal year. Through July of the current fiscal year 31 total operations fees were collected, 21 for internet operations and 10 for on-site operations. Through July of the prior fiscal year 34 total operations fees were collected, 22 for internet operations and 12 for on-site operations. Internet operations fees and on-site operations fees increased in amount year over year.

Total Sports Betting Fund revenues through July 2023 increased by \$784,415 or 27% over July 2022.

Total Sports Betting Fund expenditures through July 2023 were \$313,650. This is an increase of about 22% over July 2022. The increase is due primarily to the increase in salaries and benefits.

Please feel free to contact me if you have any questions on the Sports Betting Fund financial statements.

Item VI Sports Betting Fund Distribution FY2023

Colorado Sports Betting Fund Distribution

Fiscal Year 2023



Sports Betting Fund Distribution as outlined in CRS 44-30-1509(2)

- First, transfer an amount to the general fund to repay the general fund.
 \$1,552,397 was transferred to the general fund in March of FY21
- Second, pay all ongoing expenses related to the administration of sports betting
- Third, transfer an amount equal to six percent of the full fiscal year sports betting tax revenues to the wagering revenue recipients hold-harmless fund, referred to as the "hold-harmless fund"
- Fourth, transfer one hundred thirty thousand dollars annually to the office of behavioral health
- Fifth, transfer all remaining unexpended and unencumbered money in the fund to the water plan implementation cash fund



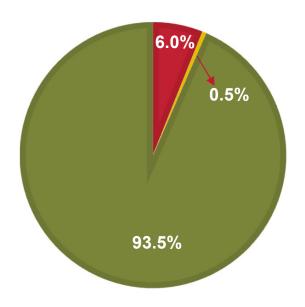
COLORADO DIVISION OF GAMING JUNE 30, 2023 SPORTS BETTING FUND DISTRIBUTION

6/30/2023

FY23 Total SBET Fund Revenues Minus FY23 Total SBET Fund Expenditures Plus FY22 Ending SBET Fund balance	\$	28,530,914.36 15,330,778.62 12,253,993.55	**Includes distribution of FY22 funds
Equals FY23 SBET Fund Balance		25,454,129.29	14 20 1500(2)/h)
Minus Reserve 44-30-1509(2)(b)		- 16,356.21	44-30-1509(2)(b)
Minus Prepaids (this is already spent) Total Amount Available for FY23		10,550.21	This is already spent
Sports Betting Fund Distribution	\$	25,437,773.08	
	-		
Full Fiscal Year Sports Betting Tax Revenue	\$	25,613,574.74	From CORE and GenTax data
6% Hold-Harmless Fund Distribution 44-30-1509(2)(c)	\$	1,536,814.48	44-30-1509(2)(c)
44-30-1309(2)(0)	φ	1,550,614.40	44-50-1509(2)(0)
6% Hold-Harmless Fund Distribution	\$	1,536,814.48	6% of full fiscal year sports betting tax revenues, 44-30-1509(2)(c)
Office of Behavioral Health		130,000.00	44-30-1509(2)(d)
Water Plan Implementation Cash Fund		23,770,958.60	44-30-1509(2)(e)
Total Amount Available for FY23 Sports Betting	\$	25,437,773.08	



SPORTS BETTING DISTRIBUTION OF FY 2023 FUNDS



- Hold-Harmless Fund \$1,536,814.48
- Office of Behavioral Health \$130,000
- Water Plan Implementation Cash Fund \$23,770,958.60



SPORTS BETTING DISTRIBUTION FISCAL YEAR 2023 VS 2022





Item VIII

Responsible Gaming Grant Recipients FY23 Status Reports



COLORADO Department of Revenue

Specialized Business Group—Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

Memo

To:	Colorado Limited Gaming Commissioners
From:	Paul Hogan, Chief Auditor
CC:	Christopher Schroder, Kenya Collins
Date:	September 13, 2023
Re:	Responsible Gaming Grant Reports

Included in your packets are the Responsible Gaming Grant reports from each grantee. These reports were due on September 1, 2023, and were required to provide for the following information:

- i. An indication of whether the grantee achieved or is making significant progress in achieving the objectives the grantee described in its application or grant;
- ii. Evaluation of the results of the grantee's grant-funded project;
- iii. A description of the impact of the grantees use of grant money on the community with regards to responsible gaming or problem gambling;
- iv. Total amount of the grant money received, and the total amount of grant money expended by the grantee; and
- v. Any additional reporting requirements required by the Commission when the grant was awarded.

I will do a brief presentation at the Commission Meeting and will be happy to answer questions then.



Awareness and Education Project Division of Gaming Grant Progress Report August, 2023

Executive Summary

The Problem Gambling Coalition of Colorado (PGCC) has partnered with The Idea Marketing to implement an education and outreach project to increase public awareness of problem gambling and available resources across Colorado. This is a four-phase project that will span a period of two years. Grant funding is currently supporting Phase I, the design, fielding and analysis of market research, as well as the implementation of a pilot campaign. Activities completed to date include extensive secondary research of usage and attitude surveys and data aggregation studies, meetings with twelve key stakeholder meetings to inform a survey instrument design that identifies three distinct audience groups (at-risk gamblers, friends and family, and the public at large), and development of a comprehensive research plan. The survey instrument is currently being administered and responses are being compiled that will provide marketing insights for various demographic and geographic categories of 1000 anticipated respondents.

1. Brief overview of the grant's purpose and objectives

The Problem Gambling Coalition of Colorado (PGCC) has partnered with The Idea Marketing to implement an education and outreach project to increase public awareness of problem gambling and available resources across Colorado. The Idea Marketing has determined four key phases for the successful implementation of this campaign, spread across two years. The first phase of this project encompasses marketing research and a pilot campaign. Phases two and three, to be implemented in 2024, include the development of multi-layered awareness campaigns for at-risk gamblers and the general public. Phase four revisits research with a post-campaign survey to measure changes in levels of awareness and knowledge of available resources.

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. Once the grant disbursement process was completed, the initial project implementation schedule was updated. A GANTT document was finalized by The Idea Marketing and approved by PGCC and is the guiding document for project implementation. This document details key tasks accompanied by a timeline as to when each will be completed.

2. Progress on the timeline proposed in the grant application

The first two months of the grant period were dedicated to researching and designing a market study across the state. As there have been no prior research studies that delved into attitudes and perceptions of problem gambling, this phase was critical to ensure the future marketing campaign is correctly informed by recent, state-centric data. This first-of-its-kind study will provide valuable information for future communications, outreach and marketing efforts.

3. Status of the grant's impact, major milestones achieved, exhibits, etc.

During late spring and the summer of 2023, the team has been focused on completing the necessary steps to launch the market study. Each of the following activities is a line item on the GANNT chart accompanied by a short description of how each activity was completed.

Secondary Research: May 8-May 21

Extensive secondary research delved into available data. Preference was given to recent studies that better reflected the current gambling landscape. This was done in the hopes of tackling the changing gambling options once sports betting was approved in a number of states.

Usage & Attitudes surveys and data aggregation studies made up the bulk of the research. Once a thorough picture was obtained, it provided the backbone of the research plan.

Stakeholder Meetings: May 22 - June 5

During the first month of the grant, the team completed discovery meetings with 12 key stakeholders. Selection of stakeholders included a mix of PGCC board members and staff, people with lived experiences, those with a close family member suffering with problem gambling.

A conversation guide was drafted to ensure the team obtained a variety of opinions on similar subjects. From these sessions various topics became salient that were then further researched and incorporated into the survey. Of note, three sessions were dedicated to meeting with researchers. Their input greatly impacted survey instrument design as

well as the research methodology. These stakeholders shared their lessons-learned from their own research studies, and provided best practices, giving the study further chance for success. For example, the preference of utilizing the Brief-biosocial Gamblers Screen (BBGS).

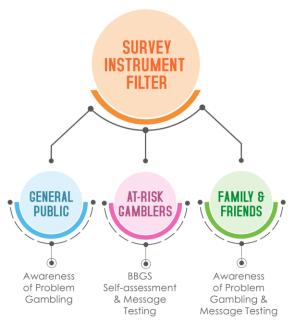
Research Plan: June 5 - June 19

A comprehensive research plan was developed during the first weeks of June 2023 (as set forth in the timeline). Development of this document happened concurrently to the stakeholder meetings. This roadmap for research development and implementation detailed the path forward. This document highlights findings from the secondary research and stakeholder meetings.

A survey instrument was also included within the research plan. Carefully crafted to identify the three groups mentioned above, the survey filters out respondents to their appropriate questioning. Both teams met to go over the proposed instrument.

Of note, this plan established three distinct research groups: at-risk gamblers, friends and family and public at large. This slight deviation from the grant application was deemed necessary given each of these groups have distinct communication needs. Research will uncover general awareness levels about problem gambling. This will help establish a baseline that can be referred to at a later date.

On the other hand, the research into atrisk gamblers and friends and family is critical to identify attitudes, while testing the efficacy of potential messaging angles.



Programming and Testing: June 26 - July 10

Once the survey instrument was approved by PGCC, it was transcreated into Spanish. This process took the English prompts and recreated them in a manner that is culturally appropriate for the Spanish-speaking communities in Colorado. While this process took place, the English version was programmed into the survey platform. After rigorously

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testing the functionality of the English survey, edits were incorporated into the programming. This process will optimize user experience, helping prevent respondents dropping off and expediting data gathering. After the English survey went through testing, the Spanish version was moved through the pipeline.

Ages	Quota Amounts
18-24	130
25-34	200
35-44	190
45-54	170
55 - 64	170
64 +	140
TOTAL	1000

Fielding the Surveys: July 10 - August 21

The survey is fielded by The Idea Marketing's research partner, RAM Research. The latter is utilizing their panels and networks, and will achieve a sample size that mirrors Colorado's demographics.

A total sample of 1,000 answers will be collected. These will be equally split

Hispanic/Spanish- Speakers	Quota Amounts
EN Hispanic	100
SP Hispanic	120
Hispanics (Total)	220

among male and female-identifying respondents. The distribution among age groups will include 130 respondents between ages 18 to 24. This demographic will provide key insights into the college-aged subgroup. With 310 respondents older than 55, the team will be able to ascertain any age-related difference among these groups.

Likewise, any rural versus urban differences might be picked up, as around 15% of responses will come from rural counties. Of note, Hispanic respondents will be split into Spanish-dominant and those that prefer to communicate in English. This split will reflect varying levels of acculturation, and help the team discern any differences inherent in this cohort.

4. Budget & Expenditures

As of the writing of this report, The Idea Marketing has utilized approximately one third of the budget allocated to research planning and development. Grant funding has supported this work which will result in research vital to the understanding of problem gambling as it pertains to communications efforts. As PGCC expands its services and gears up to implement a novel statewide campaign, the gathering of accurate data will help create actionable strategies to allay the deleterious effects of problem gambling in Colorado.

Problem Gambling Coalition of Colorado Division of Gaming Grant Expenditure

April - July, 2023

	DivGaming - IDEA
Revenue	
4420 Contract	570,820.00
Total Revenue	\$ 570,820.00
Expenditures	
6000 Salary & Wages	
6010 Payroll Taxes	
6100 Contract Labor	7,512.50
6101 Consultant	
7310 Phone & Internet	
7330 Dues, Subscriptions, Memberships	
7350 Office Supplies	
7500 Program Materials	
7620 Advertising and Promotions	32,500.00
7630 Training / Prof Development	
7780 Meeting Expense	
Total Expenditures	\$ 40,012.50
Net Income / (Loss)	\$ 530,807.50

5. Remaining deliverables and anticipated dates of completion

During the fall of 2023 the data analysis and market research report will be completed. With data gathering done, the team will proceed to analyze and prepare findings for presentation. The final report will include a full explanation of research findings, along with cross-tabulations. It will identify any trends and provide a framework for messaging development. A presentation of research findings will also be provided, allowing for questions from the PGCC team.

Communications and Media Plan: October 1- October 30

Starting in October, the team will begin all activities related to developing and launching a pilot campaign. A communications and media plan will be provided to PGCC for approval. All communication strategies laid out in the plan will respond to the research findings. Likewise, the media plan will reflect the audiences preferred outlets, while suggesting a media mix that maximizes the budget.

Page 6 of 7

Creative Development: October 16 - October 30

Creative concept development will take place the last two weeks of October. PGCC will receive two creative concepts from which to select their preferred option. These will take the form of proof of concepts and may include animated storyboards presented to the client.

Campaign Assets: November 6 - November 26

After approval of a creative concept, the team will proceed to develop all campaign assets. This includes the production and postproduction of any audiovisual elements. Here is where creative layouts are sized to media specifications.

Pilot Campaign Launch and Implementation: November 27

The launch of the public campaign comes after the team negotiates any relevant media contracts and provides necessary artwork. All paid social media placements are done in-house. Once all media is live a proof of placements will be provided to PGCC.

While the campaign is live, it will be closely monitored. When necessary adjustments will be made to optimize delivery. PGCC will be kept up to date on campaign performance through Media Performance Dashboards, that showcase the performance of digital placements including impressions and engagements.

Campaign Report - February 28 2024

Finally, the campaign performance will be analyzed and a final report drafted. The report will describe all tasks performed during the development and implementation of the campaign. Considerations for creative or media for a variety of audiences will also be included in the report. The Idea Marketing will hold a wrap up meeting to discuss lessons learned and recommendations moving forward.

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PGCC = Problem Gambling Coalition of Colorado																				
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Secondary Research	Review of past research into problem gambling		 																	
Stakeholder Meetings	Eight (8) sessions																			
Primary Research Design (Plan, Quotas and Instruments)	Development of final research quotas and deployment plan. Development of U&A survey																			
Client Approval - Primary Research Design (Plan, Quotas and Instruments)	Client review of research plan and instruments. Final edits to research plan.						 									•••••				
Programming & Testing	Programming of surveys and testing																			
Fielding	Survey data collection																			
Data Analysis	Analysis of data																			
Final Report + Presentation	Delivery of final report and presentation to PGCC/Gaming Division																			
Pilot Campaign																				
Communications and Media Plan	Development of communications approach, strategy, tactics and determination of media placements																			
Client Approval of Comms and Media Plan	Client review and approval of communications and media plans																			
Creative Concept Development& Presentation	Development of creative concepts, including creative proofs																			
Client Approval - Creative Concept	Client approval of creative concepts for pilot campaign																			
Creative Assets Production	Application of creative concept to media ready layouts																			
Campaign Live	On-air																			
Campaign Monitoring and Optimization	Includes monthly Media Performance Dashboards																			
Pilot Campaign Analysis	Analysis of findings to determine final creative/media outlet performance		 										 							
Pilot Campaign Report	Pilot Campaign report and presentation																			

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Collegiate Gambling Education and Prevention Program Division of Gaming Grant Progress Report

August, 2023

Executive Summary

The Problem Gambling Coalition of Colorado (PGCC) was awarded a grant by the Division of Gaming with the agreed purpose to offer programs that promote and increase awareness of responsible gaming, and/or address problem gaming within the state of Colorado. PGCC is the primary state leader in delivering training, awareness, education, advocacy, and policy on issues central to gambling-related harm. PGCC made the strategic decision to target college age students for the purpose of this grant. Recent research, including a report released by the NCAA in May of 2023, indicates that college age students are particularly vulnerable to problem gambling and that gambling behaviors among college students are on the rise. From April through August, 2023 this program has been delivered at 6 institutions of higher education, reaching audiences of between 15 and 410 students, coaches and counseling staff (total reach 875). Additionally, 2 public service announcements (PSA's) have been delivered on the campus radio station of the Fort Lewis campus, reaching an estimated audience of 3000 students.

1. Overview of the Grant's Purpose and Objectives

It is the goal of PGCC to provide education and awareness sessions to college age students and emerging adults around gambling related harms and responsible gambling. The program is designed to help students make better informed choices, become aware of the impact on

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mental health, protect them from harm and increase their confidence levels on seeking help if facing problems with their gambling behavior or encouraging fellow students to seek help. The program will consist of the presentation of statistics, the risks to college age students, the growth of sports betting and integrity issues, and personal stories of former athletes who struggled with gambling and the negative impact it had on their respective careers. With sports wagering legalized within the state, and with the considerable associated risks that this brings to colleges and emerging adults, this is clearly a pivotal time to educate and raise awareness to all stakeholders. Educating college students as well as the wider college community about problem gambling warning signs and encouraging responsible gambling is essential for the long-term sustainability of legalized wagering in the state of Colorado. Additional ways of delivering prevention messaging and programming include but is not limited to Radio Public Service Announcements, Social Media Posts, Digital delivery of lived experience short stories, infographics, and booth / tables at Back to School, student move-in, and Health and Wellness Fairs.

PGCC is also contracting with a mental health and addictions specialist to deliver training and education to clinical staff in college counseling departments. This training is designed for mental health and addiction professionals working with college students to enhance their skills in identifying and addressing problem gambling. The presentation provides an overview of local and national gambling trends and equips participants with the necessary tools to identify problem gambling in college students. Additionally, evidence-based interventions and available resources are discussed to support professionals in effectively intervening with college students who may have issues related to problem gambling. Key Topics include:

- Local and national gambling trends and their impact on individuals, families, and communities.
- Tools and techniques for identifying problem gambling, including screening tools.
- Evidence-based interventions to address problem gambling, such as cognitivebehavioral therapy, motivational interviewing, and harm reduction strategies.
- Accessible resources and referral pathways to connect college students with appropriate support services.

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Measurable Results and Methodology:

A pre-session survey delivered via QR Code asking about general demographic information (Age, Race, Gender, Role, and if they have gambled past 12 months). QR Codes provide a simple way to capture feedback or insight quickly and securely. Our experience shows that we typically receive a 40%-60% response rate from our QR code scanning.

In addition to the pre-session survey, there is a post-session survey asking additional questions around confidence in seeking support for self or others, recognizing potential harms of gambling ad warning signs pre / post, and local resources. In both cases, these are completely confidential, and we do NOT ask personally identifiable information. The goal is to understand more around the basic landscape of gambling in Colorado, participation rates, and measuring qualitative feedback. This allows the PGCC the ability to further analyze attitudes and behaviors around gambling while exploring common themes such as learning and personal growth, engagement, and session quality.

Anticipated Program Milestones to be Achieved as stated in the grant application were:

- Delivery to up to 29 institutions in the state of Colorado
- Number of sessions to be delivered up to 60, average of up to 2 sessions per institution
- Reporting for each institution where sessions are delivered to measure satisfaction, comprehension, and knowledge of resources for problem gambling as well as guidelines for responsible gambling.
- Institution based and individualized policy recommendations and suggestions toward support services

Population

- Goal of reaching a MINIMUM of 3,000 college students and 200 administrators in person for a total MINIMUM in person reach of 3,200 participants.
- College students will be comprised from various socio-economic backgrounds based on location around the state as well as gender, ethnicity, and age in an attempt to achieve a diverse population sample.
- Administrators for each institution may include but is not limited to athletics, compliance, student services, mental health and counselling department, and financial aid departments.

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Anticipated Target Dates	Milestone
March 2023	Grant Funding Awarded
March 2023	Creation and distribution of content
March 2023	Outreach to institutions during Problem
	Gambling Awareness Month and event scheduling
April 2023 - June 2023	Delivery of up to twenty (20 sessions to up to ten (10) institutions
July, 2023 - August 2023	Review and analyze data and feedback and prepare reporting and insights
September 2023	EPIC will submit a report to the Commission (per instruction page) on status and accomplishments to date.
August 2023 - December 2023	Scheduling and Delivery to up to thirty (30) sessions to up to (15) institutions
January 2024 – March 2024	Scheduling and Delivery of remaining sessions to remaining institutions

2. Progress on the Timeline Proposed in the Grant Application

The Problem Gambling Coalition of Colorado has collaborated in the development of the following to further support the goals and objectives of the grant:

- 3 brief surveys to be delivered via unique QR Codes to gather data and analyze results ¹
- 1 (:24) Twenty-Four second radio script for use as a PSA on collegiate radio stations
- 1 (:54) Fifty-Four second radio script for use as a PSA on collegiate radio stations
- 3 one pager infographics to disseminate information. One of the 3 includes QR code for data gathering when maintaining a table or booth at a health and wellness fair or other event
- 1 Script for email outreach introducing the purpose of the program in the state of Colorado
- 1 Prevention focused presentation via PowerPoint for 50-60 minute sessions college students / emerging adults
- 1 Clinical focused presentation via PowerPoint for 50-60 minute sessions with staff / administrators.
- Tracking mechanism via Monday.com to ensure proper maintenance, provide ease of update and communication, and accurate reporting

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- In Progress Four (4) items for social media posts centered on awareness around key sports wagering and gambling related events that tend to draw increased wagers including but not limited to:
 - Start of the NFL and College Football Season (August / September)
 - Before the Super Bowl (January)
 - Problem Gambling Awareness Month (March)
 - March Madness (March)

Itemized Accomplishments: (Note the grant funding was made available April instead of March so timeline proposed was impacted and new timeline was developed to account for one less month of college students in school and loss of March 2023 Problem Gambling Awareness Month awareness)

Accomplished Dates	Grant Activity
April 2023	Grant funding awarded
April 2023 - Current	Creation workflow process, content, and
	presentation to be used for outreach and
	delivery.
April 2023 – August 2023	Outreach emails to NCAA and Community
	colleges resulting in the following completed
	activities by the time the report is due August
	31:
	 July, 2023 – Delivered 4
	Sessions to Colorado State –
	Fort Collins Students and Staff
	reaching 410 total in
	attendance.
	\circ July, 2023 – Delivered 1
	Session to Colorado State –
	Fort Collins Clinical and
	Admin reaching 25 in total
	attendance.
	• July, 2023 – Maintained a
	table at AIMS Community
	College in Greely during
	Veterans resource fair for
	college students. Reached 15
	students.
	• August, 2023 – Maintained a
	table at Northeastern
	Community College in
	Sterling during student move-

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in day. Reached 400 students
(est.)
○ August, 2023 – Delivered 1
Session to Denver University
Clinical and Admin reaching
25 in total attendance (est.)
 August, 2023 – Started radio
PSA on Fort Lewis campus
Durango in advance of
football season on college
radio using 24 and 54 second
scripts. Estimated reach 3,000
students / staff weekly.

3. Status of the Grant's Impact, Major Milestones Achieved, Exhibits, etc.

Initial presentations have yielded positive formal and informal feedback. Pre and post session surveys are completed by participants to track relevant demographic information along with an evaluation of the presentations and the material. Specifically, participants are asked if they know where to seek help if they are worried about problem gambling for themselves or students who they support along with their confidence to seek out that support. Below is a summary of the findings:

Evaluation survey results – Students, Student athletes and staff members

The first part of the report includes results from the evaluation survey completed by student athletes and staff members from Colorado State after attending the gambling education and awareness seminar. The survey investigated their levels of confidence on knowing where to seek support for gambling problems/concerns/worries and on seeking support or encouraging a student athlete to seek support for gambling problems/concerns/worries. The effectiveness of the program was determined by measuring the level of awareness before and after the session on the potential harms of gambling, how to recognize the signs of harmful gambling behavior, student athletes' vulnerability to harmful gambling and gambling and integrity of student athletes. Lastly, their satisfaction levels were measured, giving them the chance to provide feedback and

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give ideas on how to improve the program in the future. Over 425 students, student athletes and staff members attended the session from which 226 responded, making it a healthy response rate of 53.2%; a healthy response rate ranges between 20% and 25%. Out of those who completed the survey 45% (n=102) were students or student athletes and 55% (n=124) were Colorado State staff members. It should be noted that in the session with men's football, a majority of members did NOT bring their phones into the session per traditional protocol for team meetings.

Confidence levels

The first section of the survey investigated the levels of confidence after attending the Collegiate seminar and the responses are presented in the tables below. **94%** of students and more than **96%** of staff members are now confident that they know where to seek support for gambling and that they will seek support or encourage students/fellow colleagues to seek support. Only a small proportion of respondents reported that they are not confident to do so (6% or less).

Student athletes					
(71	Levels of agreement	%			
Confident that they will know where to seek support if they are worried	Strongly Agree	60%			
about their gambling behavior	Agree	34%			
	Neither agree nor disagree	1%			
	Disagree	0% 5%			
	Strongly disagree				

Confident they will seek support or encourage a fellow student to seek	Strongly Agree	65%
support if they are worried about their gambling behavior	Agree	29%
	Neither agree nor disagree	1% 1%
	Disagree	
	Strongly disagree	4%

Staff members					
(71	Levels of agreement	%			
I am confident that I know where to seek support if either I, or a	Strongly Agree	47%			
student have worries about gambling behaviors	Agree	49%			
	Neither agree nor disagree	1%			
	Disagree	0%			
	Strongly disagree	3%			
I am confident that I will seek support or encourage a student to seek	Strongly Agree	70%			
support if there are worries about gambling behaviors	Agree	27%			
	Neither agree nor disagree	0%			
	Disagree	1%			
	Strongly disagree	2%			

Awareness levels

The second section of the survey measured the levels of awareness before and after attending the Collegiate seminars. As shown in the tables below, there have been significant increases in the

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proportions of student athletes (**30%**+) and staff members (**20%**+) who now have good or excellent levels of awareness on the potential harms of gambling, how to recognize the signs of harmful behavior, participant vulnerability to harmful gambling and gambling and integrity of student athletes. Less than 5% of participants reported low or no awareness at all after attending the Collegiate session.

Stud	lent / Student Atl	nletes	
	Level of awareness	Before the session	After the session
Potential harms of gambling	Excellent or good	46%	97%
	awareness		
	Low awareness or no	54%	3%
	awareness at all		
How to recognize the signs of	Excellent or good	67%	97%
harmful behavior	awareness		
	Low awareness or no	33%	3%
	awareness at all		
Participant vulnerability to	Excellent or good	59%	97%
harmful gambling	awareness		
	Low awareness or no	41%	3%
	awareness at all		
Gambling and integrity of student	Excellent or good	64%	99%
athletes	awareness		
	Low awareness or no	36%	1%
	awareness at all		

Staff members				
	Level of awareness of staff members	Before the session	After the session	
Potential harms of gambling	Excellent or good awareness	70%	99%	
	Low awareness or no	30%	1%	
	awareness at all			
How to recognize the signs of	Excellent or good awareness	60%	96%	
harmful behavior	Low awareness or no	30%	4%	
	awareness at all			
Participant vulnerability to	Excellent or good awareness	72%	97 %	
harmful gambling	Low awareness or no	28%	3%	
	awareness at all			
Gambling and integrity of	Excellent or good awareness	79%	99%	
student athletes	Low awareness or no	21%	1%	
	awareness at all			

Satisfaction rates and feedback from survey respondents

The third part of the survey investigated the satisfaction rates and feedback was provided using a 10-point satisfaction Likert scale (scoring: 9-10 completely satisfied, 7-8 satisfied, 5-6 neutral, 3-4 dissatisfied, 1-2 not at all satisfied). 86% were completely satisfied, rating the session 9 or 10 out of 10. Additionally, 14% were satisfied, rating the session 7 or 8 out of 10. Those who scored 8 or below were asked to provide feedback as to how to improve the program and only respondent asked for an anonymous way to ask questions in the session. A number of athletes and staff members also provided qualitative feedback on the quality of the sessions and facilitators. The feedback was grouped into themes.

The main theme emerging was **'personal story'**, referring to the story shared by each facilitator. Respondents were thankful for the opportunity to listen to a lived experience, an authentic story. As seen in the following comments:

'I really appreciate the story that Dan told, him being vulnerable really helps us connect to him and his experience to learn from what he went through. I never realized that elevated risk that student athletes have with gambling, and I enjoyed learning about the signs and how to recognize addiction in my teammates.'

'I appreciated hearing about his personal experiences. It was more engaging'

'Lived experiences are the best teaching tool. Thank you for making it very digestible and providing good understanding of what student athletes and staff can face.'

'Thank you for using real-life experiences, not JUST statistics and research theories'

'This was amazing, and I think it is super important and sharing your story was unreal and can be good for so many people.'

'This was very helpful to learn about. I learned a lot of how gambling is more likely to effect student athletes (4 times) I also liked the first hand story of how our presenter got into gambling - it allowed us to see how common and detrimental gambling can be'

'Enjoyed hearing a real life experience and think that helps get the information across and keep students engaged, and also like the emphasis on mental health as it has been engraved as athletes to just ignore it but trauma is very real'

'This was a great session it was cool to hear a story from someone who struggled with this first hand'

The second theme was **'satisfaction'** as respondents have shown their overall satisfaction through several comments. Students and staff members spoke about how they learned a lot from the presentation and how the way the session was delivered was unique and informative:

'Very insightful information, all my years of college sports I have never had a presentation like this and even though it was a lot, I really appreciate it'

Engaging presentation that was informative and also preventative.'

'Love the presentation, would like more education, more frequently.'

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Well done. I typically don't enjoy these presentations though I know their importance. This is one of the exceptions.'

'This was a wonderful presentation. Very informative and engaging'

'Impactful and positive program'

'I didn't realize that people sniff out information from athletes about the team in order to place bets. I didn't think about that and how that could be involving an athlete in gambling even when we may not think we are.'

Third theme emerging was **'quality of facilitators'** with athletes and staff members giving feedback about the quality of facilitators and their presentations:

'Dan sharing his lived experience really is the difference maker for this talk vs other trainings that I've had to attend. He did an outstanding job.'

'Really good job at keeping everyone entertained as well as informing of the risks involved'

'I love how you said that trauma lives in the body and needs a healthy way to be expressed'

'You guys were great'

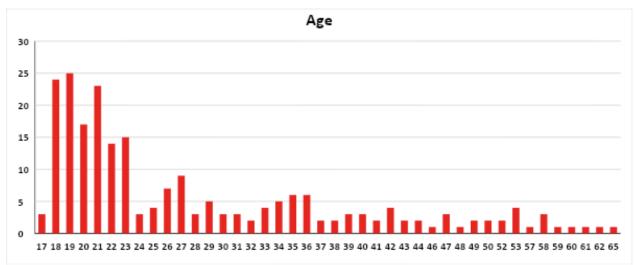
'Thank you for being vulnerable and showing it is good to show emotions and process your feelings'

Conclusion

The Collegiate sessions have demonstrated a significant increase in knowledge from both staff and students in both their level awareness of sport integrity and the potential dangers of gambling harm, and their confidence in knowing how to approach someone whom they think might have an issue. In addition, it is often cited that for every problem gambler, there are up to ten affected others and whilst the athlete themselves may not be suffering directly from gambling harm, it has raised their awareness and confidence around how to approach a loved one. Having sessions delivered by facilitators will lived experiences of the dangers of gambling harm and a top level of sporting background has provided authenticity and relatability to the audience, ensuring high levels of engagement. This level of engagement is maximized even more based on the group size, and the smaller the group the better.

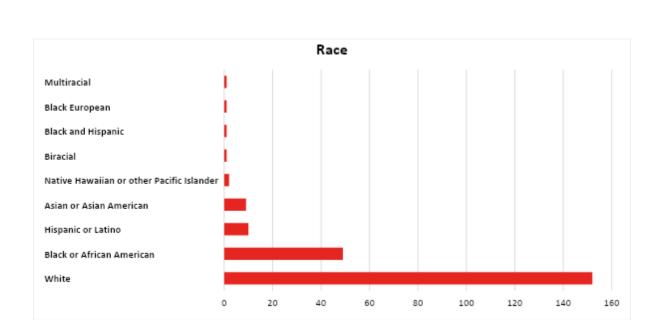
Research survey results – Students, student athletes and staff members

The second part of the report includes the results from the research survey completed by students, student athletes and staff members from Colorado State after attending the Collegiate gambling education and awareness seminar. The survey covered demographic questions and the gambling participation in the past 12 months. A total of 226 people completed the survey, of which **4%** were students, **47%** were student athletes and **49%** were staff members. When it comes to gender, more than half of respondents, **56%** identify as males, **43%** identify as females, **0.5%** identify as transmasculine/transgender man (he/him/his) and **0.5%** prefer not to say.



The graph below shows the different ages of participants:

In terms of race, as shown in the chart below, more than half of participants identify as White and **21%** as Black/African American.



When looking at betting or money spent on any gambling activities in the past 12 months:

- 82% have not engaged in any gambling activities.
- **18%** have engaged in gambling activities.
 - 14% did it less than once a month
 - 2% did it once per month/less than once per week
 - 1% did it once per week
 - 1% did it 2+ days per week
- Out of those who engaged in gambling activities in the past 12 months:
 - 51% were staff members, 46% were student athletes and 3% were students.
 - **76%** identified as males, **22%** identified as females and **2%** identified as transmasculine/ transgender man (he/him/his).
 - 49% were between 18 and 24 years old, 24% were between 25 and 34 years old, 20% were between 35 and 44 years old and 7% were between 45 and 57 years old.
 - **37%** were 18, 19 or 20 years old, reflecting under-age gambling.
 - 63% identified as White, 22% as Black or African American, 7% as Hispanic or Latino, 5% as Asian or Asian American and 3% as Black European.

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Conclusion

Based on our sample of participants, it can be concluded that gambling is more common amongst younger males between the ages of 18 and 34. Although it was shown that those who identify as White gamble more, the sample was not balanced in terms of race.

4. Budget & Expenditures

Problem Gambling Coalition of Colorado Division of Gaming Grant Expenditure

April - July, 2023

	DivGaming
	- Collegiate
Revenue	
4420 Contract	250,000.00
Total Revenue	\$250,000.00
Expenditures	
6000 Salary & Wages	
6010 Payroll Taxes	
6100 Contract Labor	10,341.00
6101 Consultant	62,500.00
7310 Phone & Internet	
7330 Dues, Subscriptions, Memberships	
7350 Office Supplies	
7500 Program Materials	
7620 Advertising and Promotions	
7630 Training / Prof Development	
7780 Meeting Expense	337.34
Total Expenditures	\$ 73,178.34
Net Income / (Loss)	\$176,821.66

Upcoming Dates	Grant Activity
September 2023 – March 2024	• September 13, 2023 –
	Colorado Boulder Health and
	Wellness Fair table.
	Estimated reach of 1,000
	students and faculty
	• September 14, 2023 –
	Colorado Boulder Workshop
	during Health and Wellness
	Fair. Estimated reach 100
	faculty and administrators
	• September 20, 2023 – Auraria
	Campus and Community -
	Metropolitan State University
	in Denver Health and
	Wellness Fair table.
	Estimated reach of 750
	students and faculty (first of
	three colleges participating)
	• September 20, 2023 – Auraria
	Campus and Community –
	Community College of Denver
	Health and Wellness Fair
	table. Estimated reach of 500
	students and faculty (second of
	three colleges participating)
	• September 20, 2023 – Auraria
	Campus and Community –
	Colorado Denver Health and
	Wellness Fair table.
	Estimated reach of 250
	students and faculty (third of
	three colleges participating)
	• September 27, 2023 – Regis
	University, Denver –
	Presentation scheduled for
	Clinical and College
	administrators expecting up to
	10.

5. Remaining Deliverables and Anticipated Dates of Completion

Page 16 of 17

	o October 17 2022 Fort Lawis
	• October 17, 2023 – Fort Lewis
	College Table and Exhibit for
	Fresh Check Day in Durango.
	Expected to reach 250 students
	and 50 clinical and staff.
	• November 8, 2023 – Arapahoe
	Community College – Fresh
	Check Day Table / Booth.
	Expected to reach 250 students
	and 50 clinical and staff.
	• November, 2023 (Anticipated)
	Colorado State in Pueblo –
	Education sessions to college
	students and staff. Expecting
	4 sessions and reach to 200
	students and 50 staff and
	admin.
	• January, 2024 (Anticipated) –
	Colorado School of Mines –
	Table at Fresh Check Day and
	Social Media and Radio PSA
	around Super Bowl and March
	Madness Planned. Expected
	reach of 1,000 students and
	100 staff and administrators.
	• March 14, 2024 – Adams
	State – Fresh Check Day
	Table and Booth. Expected to
	reach 250 students and 50
	clinical / staff
September 2023	Submission of report to the Commission on
	status and accomplishments to date.
August 2023 - December 2023	Scheduling and Delivery to up to thirty (30)
	sessions to up to (15) institutions
January 2024 – March 2024	Continued Delivery of remaining sessions,
	information and education wellness fairs,
	events, and booths to remaining institutions



The Problem Gambling Center Division of Gaming Grant Progress Report August, 2023

Executive Summary

The Responsible Gaming Grant has allowed the implementation and opening of the Problem Gambing Center (PGC) in Lakewood, CO. PGC serves as a hub for individuals struggling with problem gambling, their families, and communities in Colorado. The Center hosts several groups including self-help and informational groups, both in person and in hybrid form. Groups are available in English and Spanish languages to serve the community. The Center offers training for counselors/therapists and treatment centers who want to incorporate best practice skills in screening and treatment of problem gambling. Educating high school and college campuses are part of the outreach services provided. PGC is aware of its impact on the Denver Metro area and aims to target Colorado's Western Slope and increase and strengthen the services offered to Colorado. To date the Center has contacted 59 community outreach entities and met and collaborated with 20 community organizations. Additionally, Center staff have fielded 108 phone inquiries and hosted 106 in-person visitors.

1. Overview of Grants and Objectives as Proposed in the Grant Application

Grant funding will be used to expand the current office of the Problem Gambling Coalition of Colorado in Lakewood, CO into a Problem Gambling Center that will provide a safe, non-stigmatizing, and welcoming environment for problem gamblers and their families to gather and seek support.

- A. July 2023 Problem Gambling Center Lease Executed. Center Staff Recruitment.
- B. August 2023 Center Staffing Onboarding and Training. Furnishings Purchased.
 September 2023 Continued Staff Training, Furnishings and Equipment Moved/installed, Office Relocation
- C. October 1, 2023 Center open for operations. Promotion of Center through NCPG and PGCC website and state and national problem gambling helplines.
- D. October 2023 December 2023 Ongoing Program Development. The Center regularly hosts 4 Informational Groups, 4 Recovery Support Groups, and 1 Quarterly Workforce Training Event. Secure data collection system development.

2. Progress on Timeline Proposed/Accomplished Milestones

- A. The Problem Gambling Center opened on June 2, 2023.
- B. The Center Administrator was recruited and began training on April 21,2023. The Center Director was recruited and began training on May 10, 2023. Center furnishing and equipment and installation was completed by August 3, 2023.
- C. The Problem Gambling Center started offering Informational and Gamblers Anonymous (GA) groups to the community in March 2023. Promotion of Center through PGCC website, PGCC State Conference, and state and national problem gambling helplines was executed in April, 2023.

- D. Problem Gambling Center Open House was hosted on June 2, 2023.
- E. The Center regularly hosts 3 several types of Informational groups (English/Spanish) to include First Step Informational groups,
 Problem Gambler groups, and groups for Family and Friends of the problem gambler. These groups are available 13 separate times and
 days each week. The Center offers 4 Recovery Support groups to include 2 GA meetings (English), 1 GA meeting (Spanish) and 1
 Guided Meditation group.
 - i. One Quarterly Workforce Training Event in the shape of a Spring Conference occurred on April 21, 2023.
 - ii. Hosted Collegiate Grant Workshop on July 12th, 2023.
 - Emailed 75 invitations to Colorado High School Athletic Directors regarding the October 5, 2023, Fall Symposium focused on Youth Problem Gambling and Online Sports Betting.
 - Received 20 calls directed from the Problem Gambling Coalition of Colorado (PGCC) Website from gamblers and family members between May 2023 and August 2023.
 - v. Secured a data collection system development through Monday.com.

3. Status of Grant Impact

- A. The PGCC Problem Gambling Center serves as a hub for certified treatment and recovery services for problem gambling behaviors for the problem gambler and the family and friends of problem gamblers.
- B. The Center Director and the Center Administrator completed 30 hours of International Certified Gambling Counselor (ICGC) certification through the International Gambling Counselor Certification Board (IGCCB). Currently the Center Director is certified as an International Certified Gambling Counselor-I (ICGC-I). The Center Administrator completed Smart Recovery Meeting Host Training. The Center Director started Smart Recovery Facilitator Certification. With the grant, the center was able to purchase furnishings needed to start services in the center. The purchase of equipment and software allowed the center to offer hybrid

informational groups, treatment groups, and recovery support groups. This enabled the center to host virtual community outreach meetings and training, staff, board, and committee meetings.

- C. The Center's Open House, NCPG and PGCC websites, and state and national Problem Gambling Helplines assisted with providing information to the community regarding services offered for those impacted by problem gambling.
- D. The Center Director has contacted 59 community outreach entities and met and collaborated with 20 community organizations to include:
 - i. Red Rock Community College Gateway Program interview and social media blog with the Center Director.
 - ii. Arranged tabling events with Colorado Community College System for 8 Colorado Community Colleges across the state.
 - iii. Community Programs/Recovery Treatment Center presentations totaling 10 locations.
 - iv. Secured partnership with Denver Justice High School in possible 6 weeks course on youth problem gambling, and 4
 Community Night tabling commitment throughout the school year geared towards students, parents, and the community.
- E. Informational Groups started in March 2023 to include Informational First Step, Problem Gambler, and Family and Friends of the Problem Gambler. Recovery support groups to include GA and Guided Meditation groups: In total, 29 groups were held at the Center attended by 56 guests. All Groups are offered in hybrid format.

Stats/Key Performance Indicators

- 4 Demographics Categories: Gender, Age, Race, County
- Guests served
 - Phone Calls: 108
 - Center Guests: 106 (GA, Information, Meditation)
- 8 Types of Groups provided to include self-help, hybrid, and bilingual (Spanish)
 - 2-Self Help Recovery- GA- 2 times a week and GA (Spanish)- once per month
 - o 4- Information including Walk-Ins, First Step, Problem Gambler, Family & Friends
 - \circ 1-Guided Meditation 1x/week
 - o 1- Community Outreach
- 2 Community Events
 - Open House (June 2, 2023)
 - o Grant Collegiate Grant Sports Betting Workshop and Lunch (July 12, 2023)

Page **4** of **10**

PGC Center Community Outreach (Programs/Connections/Networks)

- 1. 1st Priority Institute Better Living
- 2. Advocates for Recovery
- 3. All Seasons Counseling LLC
- 4. Aspen Ridge Recovery- Lakewood
- 5. Aurora Mental Health and Recovery
- 6. Center for Change LLC
- 7. Centennial Peaks Hospital
- 8. Colorado Addiction Recovery Services (CARS)
- 9. Colorado Dept. of Corrections (RESTORE)
- 10. Colorado Parole
- 11. Colorado State Probation
- 12. Arapahoe Community College
- 13. Community College of Aurora
- 14. Community College of Denver- Auraria
- 15. Denver Justice High School
- 16. IDEA Forum Inc.
- 17. Jefferson Center for Mental Health
- 18. LinkedIn
- 19. REMERG
- 20. Red Rocks Community College
- 21. Red Rocks Community College Gateway Program
- 22. Red Rocks Voice Communications
- 23. Red Rock Recovery Center
- 24. SMART Recovery
- 25. Set Apart Treatment Inc.
- 26. Spanish Clinic
- 27. Front Range Community College- Westminster
- 28. Front Range Community College- Longmont
- 29. Front Range Community College- Ft. Collins
- 30. Pueblo Community College- Pueblo
- 31. Creative Treatment Options Substance Abuse Treatment Services1
- 32. Choices in Living Counseling Center

33. Colorado Health Network Inc DBA Colorado AIDS Project

34. Colorado Judicial Branch

35. Community Alcohol/Drug Rehab and Education Center (CADREC)

36. Comprehensive Behavioral Health Center

37. Cura West

38. Denver Cares

39. Denver Dream Center

40. Denver Health

41. Denver Recovery Group-Colfax

42. Denver Recovery

43. Denver Women's Recovery

44. Empowerment Program

45. Genesis Counseling

46. Independence House North Side

47. Life Recovery Centers

48. Maria Droste Counseling Center

49. Mile High Behavioral Health

50. National Institute for Change PC

51. Park Hill Counseling

52. Porter Adventist Hospital

53. Realness Project

54. Servicos de La Raza

55. Sobriety House Inc. Phoenix Concept

56. Sobriety House

57. Pueblo Community College- Mancos

58. Western Colorado Community College

59. Counseling Center of Rockies North

GA LUNCHBOX	LUNCHBOX March		April Ma		May	Лау			July		August	
Gender	M=2	F=0	M= 6	F= 0	M= 8	F= 0	M= 7	F= 2	M= 17	F= 8	M= 4	F= 9
Age	30-39: 1		18-29: 1	•	18-29: 0		18-29: 0		18-29:0		18-29: 0 30-39: 0 40-49: 2	
	70-79: 1		30-39: 2		30-39: 4		30-39: 6		30-39: 5			
			40-49: 1		40-49: 0		40-49: 1		40-49: 3			
			50-59: 0		50-59: 0		50-59: 1		50-59: 10		50-59: 4	
			60-69: 0		60-69: 0	60-69: 0		60-69: 2		60-69: 3		
			70-79: 2		70-79: 3		70-79: 1		70-79: 2		70-79: 4	
					Declined:	1						
Race	Caucasia	า: 2	Caucasia	an: 6 Caucasian		n: 7	Caucasian		Caucasian: 1	.7	Caucasiar	n: 6
					Latino: 1		Biracial/Mixed: 1		Black: 5		Black: 4	
							Black: 1		Biracial/Mixed: 3		Biracial/Mixed: 2	
							Declined:	2			Latino: 1	
County	Jeffco: 2		Arapaho		Denver: 1		Adams: 1		Adams: 7		Adams: 6	
			Jeffco: 4		-	Douglas: 1 Douglas: 1 Denver: 3			Arapahoe: 2			
			Gilpin: 1	-	Gilpin: 1		Jeffco: 6		Douglas: 6		Jeffco: 4 Park: 1	
					Jeffco: 4		Declined:	1	Jeffco: 7			
					Declined:	1			Gilpin: 2			
Total Meeting	1		3		4		4		6		4	
Total Guest	2		6		8		9		25		13	
INFO GROUPS	March			April		May		June			July	
Gender	M=14	F=5		M=0	F=3	M= 2	F= 1	M= 4	F= 1		M= 10 F	= 1
•	10.00.1-			40.00.0		10.00.1	<u> </u>	10 20.0	50-59: 0	50.50.0		50-59: 3
ΔσΔ	18-29-15	50	J-59·1	18-29.0	50-59.0	1 18-79-1	50-59.7	18-79.0		18-29: 2 30-39: 1		
Age	18-29: 15 30-39: 0		-59: 1 -69: 1		50-59: 0 60-69: 0		50-59: 2 60-69: 0					
Age	18-29: 15 30-39: 0 40-49: 1	60	-59: 1 -69: 1 -79: 1	30-39: 0	50-59: 0 60-69: 0 70-79: 3	30-39: 0	60-69: 0 70-79: 0	30-39: 2	60-69: 0 70-79: 2		30-39: 1	60-69: 2 70-79: 3
Age	30-39: 0 40-49: 1	60 70	-69: 1	30-39: 0 40-49: 0	60-69: 0 70-79: 3	30-39: 0 40-49: 0	60-69: 0 70-79: 0	30-39: 2 40-49: 1	60-69: 0 70-79: 2		30-39: 1 40-49: 0	60-69: 2 70-79: 3
	30-39: 0 40-49: 1 Caucasia Latino:6	60 70 n: 13;	-69: 1 -79: 1	30-39: 0 40-49: 0 Caucasia	60-69: 0 70-79: 3	30-39: 0 40-49: 0 Caucasi	60-69: 0 70-79: 0 an: 3	30-39: 2 40-49: 1 Caucasi	60-69: 0 70-79: 2 an:4; Asian:1		30-39: 1 40-49: 0 Caucasian:	60-69: 2 70-79: 3 11
	30-39: 0 40-49: 1 Caucasia	60 70 n: 13;	-69: 1 -79: 1	30-39: 0 40-49: 0	60-69: 0 70-79: 3	30-39: 0 40-49: 0	60-69: 0 70-79: 0 an: 3	30-39: 2 40-49: 1	60-69: 0 70-79: 2 an:4; Asian:1		30-39: 1 40-49: 0	60-69: 2 70-79: 3 11

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Total Meeting	5	3	1	3	8
Total Guest	19	3	3	5	11

PGC Phone	March 2023-Augu	March 2023-August 2023					
Calls							
Gender	M= 67; F= 27; De	M= 67; F= 27; Declined= 14					
Age	20-29: 11 60-69: 18						
	30-39: 15 70-7	79: 2					
	40-49: 12 80-8	39: 2					
	50-59: 12 Dec	lined: 36					
Race	1) Asian: 16	5) Latino: 4					
	2) Black: 1	6) Biracial/Mixed: 3					
	3) Caucasian: 39	7) Declined: 44					
	4) Native Am.: 1						
County	1) Adams: 9	8) Garfield: 3					
	2) Arapahoe: 9	9) Gilpin: 3					
	3) Boulder: 6	10) Jefferson: 18					
	4) Clear Creek: 5	11) Larimer: 2					
	5) Denver: 8	12) Summit: 1					
	6) Douglas: 4	13) Weld: 3					
	7) El Paso: 5	14) Declined: 32					
Total Phone	108						
Calls							

Guided Meditation	August 8, 2023	
	(1 st Meeting)	
Gender	M=0	F=9
Age	18-29: 1	
	30-39: 0	
	40-49: 2	
	50-59: 1	
	60-69: 1	
	70-79: 4	
Race	Caucasian: 8	
	Black: 1	
County	Adams: 1	
	Arapahoe: 2	
	Denver: 3	
	Jeffco: 2	
	Out of State: 1	
Total Meeting	1	
Total Guest	9	

4. Budget and Expenditures

Problem Gambling Coalition of Colorado Division of Gaming Grant Expenditure

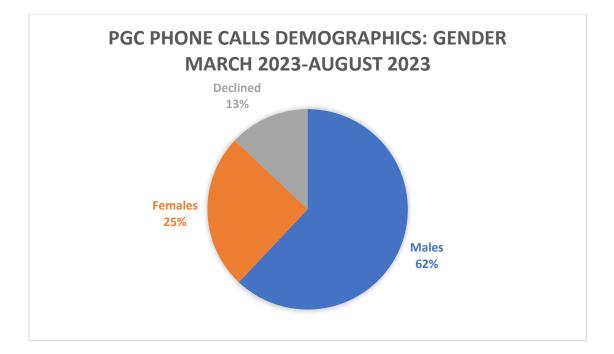
April - July, 2023

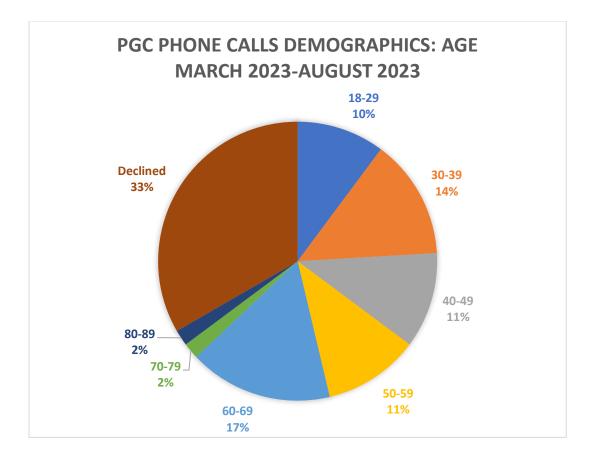
	DivGaming - Center
Revenue	
4420 Contract	286,880.00
Total Revenue	\$286,880.00
Expenditures	
6000 Salary & Wages	27,402.99
6010 Payroll Taxes	2,096.32
6100 Contract Labor	1,606.25
6101 Consultant	
7310 Phone & Internet	438.75
7330 Dues, Subscriptions, Memberships	3,820.00
7350 Office Supplies	1,158.58
7500 Program Materials	168.00
7620 Advertising and Promotions	45.55
7630 Training / Prof Development	25.00
7780 Meeting Expense	
Total Expenditures	\$ 36,761.44
Net Income / (Loss)	\$250,118.56

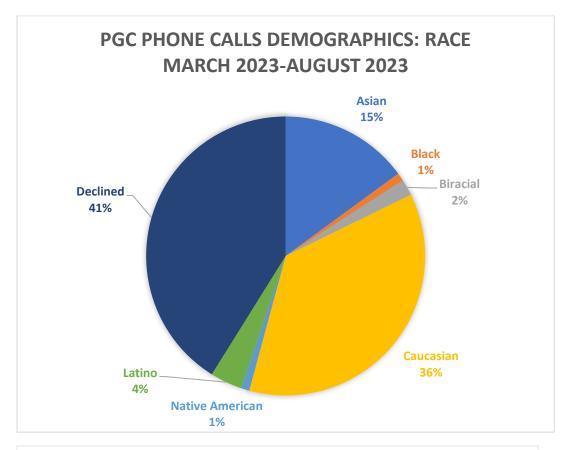
5. Deliverables and Anticipated Dates of completion - March 31, 2024

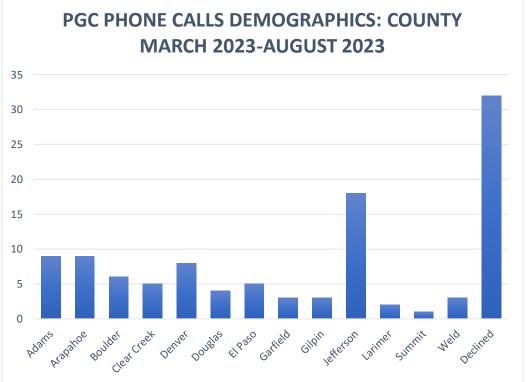
Anticipated Deliverables

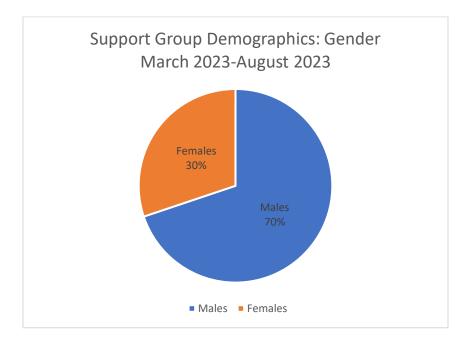
- A. Possibly hiring other staff member to meet the needs of the Center as traffic increases.
- B. The Center Administrator will complete the International Gaming Disorder Certificate (IGDC). The Center Director will complete International Certified Gambling Counselor-II (ICGC-II -II). The Center Director will complete Smart Recovery Facilitator Certification.
- C. Strengthening the relationship between community programs to include presentations, clinical training, certifications, and webinars to clinical staff throughout Colorado. Targeting Colorado's Western Slope outside of the Dever Metro area.
- D. The Center will develop an interactive Problem Gambling Center Website highlighting services.
 - i. Increase the number of support groups by at least 2 to include Gam-Anon Criminal Justice, Seniors, Veterans, and Women.
 - ii. Implement training specifically tailored to the needs of community clinical programs.
 - iii. Four Quarterly Workforce Training Events to include webinars and treatment presentations to treatment providers.
 - iv. All staff and subcontractors will be trained to operate Monday.com efficiently.
- E. Center will start Smart Recovery Groups in September 2023.
 - i. The Gateway Program Open House presentation-August 16, 2023
 - ii. Aurora Mental Health & Recovery Presentation- (Aug 28,2023)
 - iii. 8 Community College table events- August 29, 2023- September 20, 2023
 - iv. 4 Denver Justice High School Community Nights- August 30, 2023-January 17, 2024
 - v. Jefferson Center for Mental Health Presentation- September 25, 2023
 - vi. 14th Judicial District Probation Resource Fair- September 26, 2023
 - vii. Center will host a Fall Symposium on October 5&6, 2023

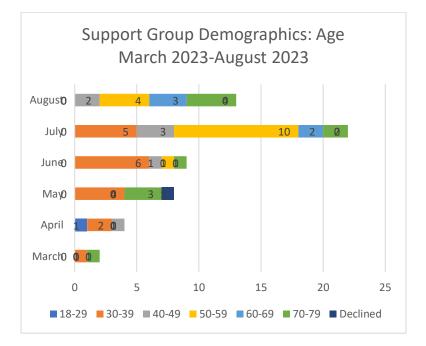


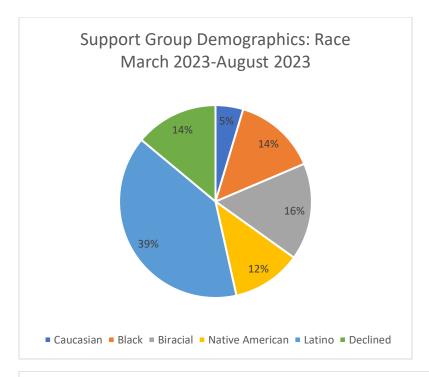


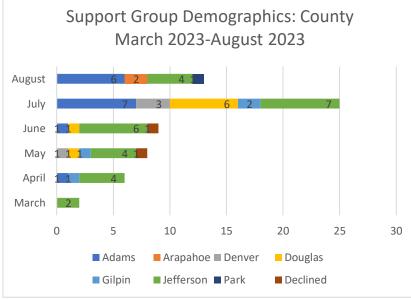


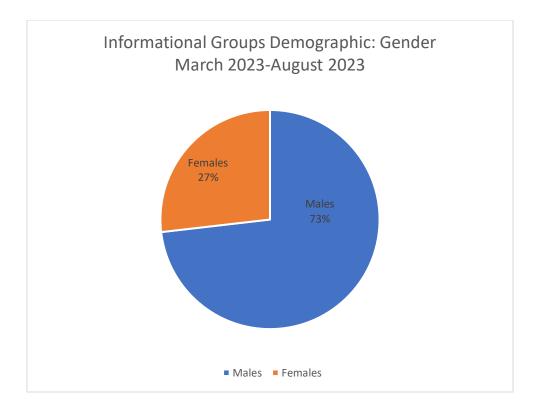


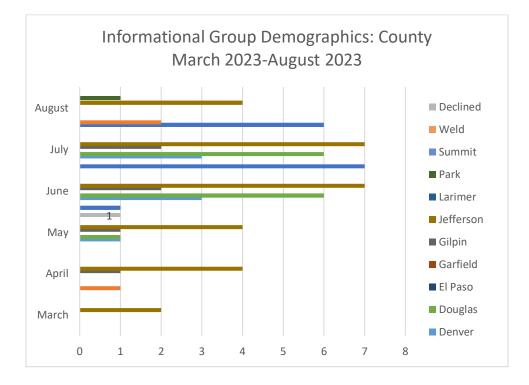


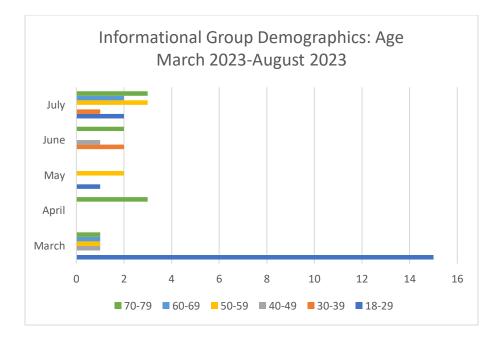


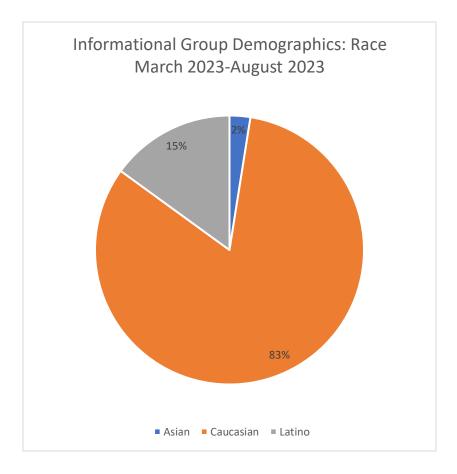














Report for the Responsible Gaming Grant Program of the Gaming Control Commission

Reporting Period:

April 14, 2023-August 15th, 2023

Report prepared by:

Odessa Dwarika, M.A., CTRP Chief Program Officer Mass Council on Gaming and Health (617) 426-4554 x702 odessa@macgh.org

Project Description and Timeline (taken from SOW):

1. Project Name

Building Capacity in Colorado for a System of Responsible and Problem Gambling-Informed Stakeholders (the "Project").

2. Project Description

Grantee will develop and implement a Colorado Problem Gambling Specialist (C-PGS) Program and capacity initiatives. Grantee will provide 5 part time staff members dedicated to this engagement. Grantee will also provide in person onsite casino audits to 4 casinos to assess safer gambling and problem gambling resources. Grantee will then provide 4 training programs, Gambling Awareness 101, Safer Play 101, Intensive Problem Gambling Specialist Training, and the Colorado Problem Gambling Specialist Certificate Program. The program also will provide a multifaceted digital marketing campaign reaching Colorado residents engaged in gambling and their friends and family and will reimburse community health and clinical trainers.

3. Anticipated Project Timeline

Grantee anticipates completing the Project one calendar year from the date funds are awarded.

i. An indication of whether the grantee achieved the objectives and/or milestones that the grantee described in its application;

Milestones Achieved for the Gaming Control Commission

Please see progress on objectives as laid out in the report on Milestones 1-11 on the following pages.

- ii. An evaluation of the results of the grantee's grant-funded project;
 An evaluation of programmatic success will be conducted in the final two quarters of the grant period and a final evaluation report will be submitted along with recommendations for further work.
- iii. A description of the impact of the grantee's use of grant money on the community as it pertains to responsible or problem gaming;

Please see progress on objectives as laid out in the report on Milestones 1-11 on the following pages. The impact will best be measured in the final two quarters of the grant period.

iv. The total amount of grant money received, and the total amount of money expended by the grantee, including a final expenditure table and line-item accounting of the grant money;

Revenue Received			200000
Expenses through 8/15/2023:			
Staff Time			
Odessa Dwarika	7730		
Phil Kopel	2788		
Jodie Nealley	3814		
Phil Sherwood	4663		
Marlene Warner	3488		
Celeste Aguzino	2200		
Staff Time		24683	
Travel Expenses-Odessa Dwarika & Jodie Nealley	4069		
Travel Expenses- Marlene Warner	1475		
Travel Expenses		2505	
Total Expenses thru 8-15-2023			27188

Colorado Gaming Commission Budget Update

v. Any additional reporting requirements as directed by the State or the Commission.

No additional requirements noted as of yet. Please see supporting documents attached

Comments

We kicked off the grant with 2 MACGH staff attending the Problem Gambling Coalition of Colorado daylong conference on April 21,2023 to learn more about the problem gambling work being done across the state and meet key stakeholders. This helped us tweak our deliverables so that they integrate with the other work being done across the state. In addition, a staff member did unaccompanied walk throughs of 5 casinos to begin to get a sense of messaging placement at different sites.

Milestone 1: Create the Colorado Problem Gambling Specialist Certificate (C-PGS) Program.

Held meetings with the Associate Director of Workforce Development-Training & Education Manager, CAC Clinical Training Program and Problem Gambling Program Administrator for the Colorado Behavioral Health Administration to identify the best way to integrate Gambling Counselor training with the current program being offered by the state to incentivize certification International Gambling Counselor Certification Board certification. The decision was made to offer to live, virtual trainings in the Fall and Winter in with both a day an evening option to reach the most clinicians possible and to wave all training costs for Colorado clinicians and providers. The site is live! You can view it here: <u>https://freecoloradotraining.org</u>

<u>Milestone 2</u>: Visit 4 casinos to assess safer gambling and problem gambling resources within multiple brick and mortar casinos. (Meetings conducted in person or virtually).

Emails and phone calls have been made to three commercial casino providers and one zoom meeting was held. There have been challenges with the casinos not understanding our role and we requested a letter from the Colorado Gaming Control Commission in order to facilitate our outreach to casinos. A formal introduction from the Division on Gaming to the limited gambling establishments and their RG requirements would be most helpful.

<u>Milestone 3</u>: Compile a report with best practice recommendations to help inform education and communication efforts, provide the latest research in the field, and marketing content and placement.

We are in the planning stages of compiling a report of Best Practice recommendations to the Gaming Control Commission. To the extent possible, the report will include:

- Recommendations for a streamlined Voluntary Self Exclusion Program
- An overview of the organizational structure (where PG and RG are housed) and a top down commitment to PG and RG
- Advertising guidelines and a commitment to promoting helpline services as well as healthy play
- Initial and continued training for casino employees on PG and RG
- Marketing guidelines and marketing efforts towards PG and RG
- Recommendations on other Problem Gambling and Responsible Gambling efforts in the state

<u>Milestone 4</u>: Provide a 1-2 hour gambling awareness training for social service providers (to include providers that work for public housing, homeless, corrections, veterans, child and elder protection, domestic violence, immigrant support, behavioral health, and other social service providers that interface with the gambling public).

90 minute training curriculum created for social service providers. Evaluation created as well. Next steps are to begin to schedule trainings.

<u>Milestone 5</u>: Provide a 1-2 hour safer play 101 training for key stakeholders (to include responsible and problem gaming advocates, regulators, casino and/or lottery staff, legislators on key committees).

In process of developing a Colorado-specific one hour training with RG curriculum and identify participating organizations.

<u>Milestone 6</u>: Provide an intensive problem gambling specialist training that consists of 9 courses and will be designed to help behavioral health clinicians and other social service providers effectively screen for, assess, and treat gambling disorders within their current clinical populations.

A 30-hour clinical curriculum in problem gambling assessment, treatment and recovery was created certification guidelines. The training is accredited by the International Gambling Counselor Certification Board and will prepare clinicians to engage with the CAC Clinical Training Program and Problem Gambling Program. The course content will be delivered live by 4 master's level and 4 Doctoral level experts in the field of problem gambling, including IGCCB Board Members. (See syllabus with trainer bios)

<u>Milestone 7</u>: Provide a certificate program that is designed to incentivize gambling integration into the wider behavioral health system and respond to the need to build infrastructure around problem gambling within the state.

Since there is already a Colorado funded program designed to support clinicians in applying for IGCCB certification, we decided it made most sense to offer the required educational curricula to Colorado clinicians at no cost: Licensed Addiction Counselor (ACD) Certified Addiction Specialist (ACC) Licensed Social Worker (LSW) Addiction Counselor Candidate (ADDC) Marriage and Family Therapist (MFT) Licensed Clinical Social Worker (LCSW) Certified Addiction Technician (ACA) Licensed Professional Counselor (LPC) We include in the training how the attendees can interface with the Colorado Office of Behavioral Health to have the cost of clinical supervision and certification fees waived once their 30-hour educational requirement is complete. We are coordinating with the Associate Director of Workforce Development-Training & Education Manager, CAC Clinical Training Program and Problem Gambling Program Administrator at the Colorado Behavioral Health Administration to ensure that we reach the most clinicians possible with this offering. We have built in the incentive of a \$150 Amazon gift cards for each qualifying clinicians who complete the 30-hour program for up to 100 clinicians. For many providers who have a full caseload, they must take additional coursework in their personal time and the gift card incentive is to reduce barriers to accessing this training.

Milestone 8: Conduct a marketing and communications campaign to elevate awareness of the C-PGS Program among priority providers and the public. Provide ongoing staffing and management of the C-PGS Certificate Program.

Landing Page Development

Our communications team has developed and drafted sharp, compelling copy for a landing page, which will serve as an online hub for providers to understand the urgent need for addressing gambling problems in Colorado and register for an upcoming training. Multiple buttons on the landing page link to the online registration form. The online registration form, which has daytime and evening options, is set up and ready for registrants. TKTK This landing page is currently in development and is slated to launch by the end of the month. In the coming weeks, the landing page will serve as the primary hyperlink for all advertising and marketing efforts. All ads will feature the URL freecoloradotraining.com.

Project Branding

After extensive workshopping and research, our team has landed on packaging and promoting the C-PGS Program as The Colorado Provider Free Training Program. The term provider encompasses all key target audiences of addiction treatment professionals, clinicians, social service workers, and mental health practitioners. The engaging phrasing aligns with top-performing targeted searches in the Colorado market.

The landing page's look and feel — and future marketing materials — will draw from the color scheme of Colorado's flag, using bold gradients of blue, yellow, green, and red. The colors are warm yet authoritative, underscoring the project is a state-directed project. Subtle yet modern elements of mountain imagery are woven throughout as a nod to the Colorado landscape.

Targeted Outreach and Incentives

A marketing campaign was created to reach Colorado-based licensed providers including the following licensed counselor types: LPC, LCSW, LSW, MFT, ACD and ACC, Counselor and Counselor - Mental Health. Lists of those professions will be used to create and target audiences on Google Ads, LinkedIn, and other advertising platforms. To incentivize registration, a \$150 Amazon gift card will be given to providers who complete the 30-hour training. This language will be folded into marketing and promotional materials. The lists of provider types also helped our team quickly identify the names, addresses, and emails of the state's largest treatment facilities and healthcare systems. This data will also be used to optimize geofencing and develop targeted emails to administrators at these facilities.

The site is live! You can view it here: <u>https://freecoloradotraining.org</u>

Milestone 9: Provide at a minimum two live virtual 30-hour training institutes annually.

(See attached Syllabus for the two live virtual trainings with dates and times of classes.)

<u>Milestone 10</u>: Provide a minimum of 20, two-hour problem gambling awareness trainings for priority providers.

(See Milestone 4 and 5). Trainings to be scheduled for Fall and Winter based on needs of each organization.

<u>Milestone 11</u>: Create a customized digital media campaign, driving Colorado residents to existing services, recovery supports, and best practices messaging to encourage safer gambling practitioners.

Digital Advertising Strategy

After consideration, our team has opted to develop and launch a strategic campaign to reach at-risk and problem gamblers, along with concerned others, to the state's helpline 1-800-GAMBLER. We have decided to target Colorado casino patrons with digital advertising using best-in-class geofencing technology. We seek to target approximately three to eight top-priority casinos in the state, including the two tribal casinos. This approach will ensure both casino players as well as gambling industry employers — who are at an elevated risk of disordered gambling behavior — will see waves of advertising.

Geofenced ads will run on a series of digital advertising platforms, including web-based placement ads and social media. Ads may also be aired on radio and popular apps like iHeart and Spotify.

Messaging and Campaign Assets

Our team has drafted four :15 and four :30 public service announcement scripts for marketing purposes. Each script is designed to resonate with, reassure, and guide Coloradoans in need while aligning with 1-800-GAMBLER's communication approach of kindness, courage, and care. Upon recording and production, these scripts will be the basis for video ads, radio hits, and other digital advertising collateral.

(See attached scripts for placement)

Draft Colorado Helpline Public Service Announcement Scripts

Introduction on Script Alignment with the 1-800-GAMBLER Brand:

The provided PSA scripts for 1-800-GAMBLER have been crafted to align with the brand's unique identity and ethos. At the core of this helpline's communication approach is a trifecta of kindness, courage, and care, and each script is a testament to these values.

- 1. **Empathy Over Assertion**: Consistent with the brand's philosophy, the scripts invite listeners into a nonjudgmental conversation about gambling. Instead of confronting or using an "in-your-face" style, they extend a warm, inviting hand, echoing the sentiment that 1-800-GAMBLER is a guide rather than a savior.
- 2. **A Balancing Act**: Each script strikes a harmony between expertise and encouragement. By offering resources, guidance, and a listening ear, they manifest 1-800-GAMBLER's commitment to informed kindness, ensuring listeners that they're not only speaking to someone who understands but someone who can provide practical help.
- 3. **Clear and Concise Messaging**: Adhering to the brand's emphasis on brevity and clarity, the scripts are concise, with short sentences designed for ease of understanding. This aligns with the brand's objective to make contacting 1-800-GAMBLER a simple and stress-free experience.
- 4. **Human Touch**: The use of contractions in the scripts adds a touch of informality, ensuring the communication feels like a conversation with a real, compassionate human being. It subtly underscores the brand's commitment to banish feelings of isolation and cultivate connection.
- 5. **Inclusivity and Respect**: In keeping with the brand's directives, the scripts avoid terms that might stigmatize or isolate. Instead, they use inclusive language that focuses on people with problems related to gambling, encouraging a sense of hope and belonging.
- 6. **State-Centric Appeal**: By mentioning Colorado, the scripts resonate with a local audience, emphasizing the brand's presence and dedication to serving the specific needs of Coloradans.

In essence, these scripts are not just messages; they're an embodiment of 1-800-GAMBLER's mission and values, designed to resonate with, reassure, and guide those in need in the state of Colorado.

The Scripts:

The actual time it takes to read a script aloud depends on the pacing of the speaker, inflection, pauses, and emphasis. Generally, a natural speaking rate for radio is about 150 words per minute (2.5 words per second). However, for PSAs and other ads, pacing may be slightly slower due to the importance of clarity and emphasis.

Given that guideline:

- A 30-second script would typically be about 75 words.
- A 15-second script would typically be around 37-38 words.

For the **30-second PSAs word count**:

- 1. 40 words
- 2. 40 words
- 3. 40 words
- 4. 39 words

5. 36 words

These are slightly shorter than the typical length for 30 seconds, but they allow for some pacing, emphasis, and any musical or sound elements that might be included.

For the **15-second PSAs**:

- 1. 21 words
- 2. 18 words
- 3. 19 words
- 4. 17 words
- 5. 19 words

Again, they're slightly shorter, but they allow for clear pronunciation, emphasis, and possibly a brief sound cue.

These scripts, if read with the proper pacing, should be close to their intended durations. However, to ensure perfect timing, they should be tested with actual voice talent and adjusted if necessary.

Below are FIVE 15-second PSA scripts and FIVE 30-second scripts:

30-second PSAs -

- 1. "In Colorado, we understand the ups and downs of life. If you or a loved one finds it challenging to set limits around gambling, there's a friendly voice waiting to help. Call 1-800-GAMBLER for free, confidential support. We're here to guide you on your journey."
- 2. "Gambling can be fun, but for some in our Colorado community, it can become overwhelming. 1-800-GAMBLER offers a compassionate ear and resources. You're not alone. Connect with us today."
- 3. "Watching someone you care about face struggles with gambling in Colorado? At 1-800-GAMBLER, we provide resources and guidance for both of you. Reach out; it's safe, anonymous, and caring."
- 4. "Every Coloradan deserves support and understanding. If gambling's weighing on your mind or affecting someone you love, 1-800-GAMBLER offers the tools and resources you need. Let's talk."
- 5. "From the Rocky Mountains to the eastern plains, Colorado stands united. If gambling's causing concern for you or a loved one, reach out to 1-800-GAMBLER. Free, secure, and always here for you."

15-second PSAs -

- 1. "Colorado, if gambling feels overwhelming, 1-800-GAMBLER offers a kind ear and resources. We're here for you."
- 2. "Need someone to talk to about gambling in Colorado? 1-800-GAMBLER is free, confidential, and caring."
- 3. "Concerned about a loved one's gambling? In Colorado, 1-800-GAMBLER is ready to help with resources and support."
- 4. "1-800-GAMBLER: Colorado's go-to for free, compassionate guidance on gambling-related issues."
- 5. "From Colorado with love: If gambling's causing concern, 1-800-GAMBLER is here to help. Reach out today."



Colorado Gambling Counselor Fall 2023 Training Institute

Dates:Tuesdays and Thursdays : November 7,9, 14, 16, 28, 30; December 5, 7, 12, 14, 2023Time:11:00 am-2:00 pm EST
Where noted length time per class can vary from 2- 4 hoursPresenters:Eunice Aviles, Odessa Dwarika, Fred Fetta, Deborah Haskins, Haner Hernandez, Lori Rugle, Katie Kirch,
Jodie Nealley, Jeremy WamplerCE Hours:30.0

Description: Hidden problems with gambling often derail recovery from mental health and substance use disorders as signs and symptoms are often missed. This 10-session course, led by national experts, will build skills in gambling disorder assessment, treatment, and recovery support. By the end of the course, attendees will be confident in their ability to identify and respond appropriately to gambling disorder within their client populations. Attendees will learn about the International Gambling Counselor Certification Board (IGCCB) and how to pursue international certification. Continuing Education Units for this course can be applied towards the IGCCB IGCG-1 certification. Classes will meet twice a week over 5 weeks.

Credit: CEU's will be granted at the rate of 2.0 to 4.0 CEU's per attendance at each live class for a total of 30 CE hours. If a course is missed, attendees will be able to watch the video of the missed course but not be able to receive CEU credit for any class not attended live.

Course 1 of 10:

Course 1:	Introduction to Problem Gambling (3 hours)
Trainer:	Odessa Dwarika and Jodie Nealley
Time:	11:00 am-2:00 pm EST
Date:	Tuesday, November 7, 2023

Description: In the era of expanding gambling, providers are encouraged to increase their base of knowledge to provide service and support to service recipients. This introductory training is aimed to increase current social service providers' knowledge in identifying problem gambling behavior within clinical and social service practice. Social service providers will learn how to incorporate problem gambling information and treatment skills into their area of practice. They will hear the presenter describe her own journey into gambling addiction and her personal path to recovery.

Learning Objectives:

- Discuss history and development of the problem gambling field.
- Review stages, signs, symptoms, and progression of problem gambling.
- Review and discuss research reports of prevalence rates with respect to problem gambling.
- Explain risk factors associated with different types of gambling.
- Gambling as a societal stressor.

120 Washington St., Suite 202, Salem, Massachusetts 01970 Phone: 617-426-4554 Website: <u>www.maccg.org</u> An affiliate of the National Council on Problem Gambling, Inc.

If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact: Chief of Programs, Odessa Dwarika at 617.426.4554, TTY: 617.426.1855 or <u>odessa@maccg.org</u>

Citations:

LaPlante, D. A., Nelson, S. E., LaBrie, R. A. & Shaffer, H. J. Disordered gambling, type of gambling and gambling involvement in the British Gambling Prevalence Survey 2007. Eur J Public Health 21, 532–537 (2011).

Shaffer HJ, Martin R. Disordered gambling: etiology, trajectory, and clinical considerations. Annul Rev Clin Psychol. 2011; 7: 483-510.

DSM-V: The Diagnostic and Statistical Manual of Mental Disorders 585–586 (American Psychiatric Publishing, 2013).

Course 2 of 10:

Course 2: Assessment and Diagnosis

Trainer:Fred Fetta & Jeremy WamplerTime:11:00 am-2:00 pm ESTDate:Thursday, November 9, 2023

Description: This training will focus on the assessment and diagnosis of gambling disorder as a behavioral addiction. The process of the therapeutic alliance and other engagement practices will be considered as important components of the assessment process. The evaluation of major depressive disorder and the risk for suicidality will be highlighted as important aspects of the assessment process with a problem gambler. The development of a safety plan will be discussed as a consideration for the protection of the problem gambler.

Learning Objectives:

- Describe DSM-5 diagnostic criteria for Gambling Disorder.
- Explain what the various screening tools are and their strengths and weaknesses.
- Describe and preform a safety plan and risk assessments.
- Discuss requirements and benefits of IGCCB certification for clinicians.

Citations:

Bojana, K. & Lidgerwood, D. M. (2012). Gambling severity, impulsivity, and psychopathology: Comparison of treatment and community recruited pathological gamblers, The American journal on addictions, 21, 508515. Dowling, N. A. & Cosic, S. (2011). Client engagement characteristics. International journal of mental health addiction, 9, 656671

Petry, N. (2005). Pathological gambling: Etiology, comorbidity, and treatment. Washington DC: American Psychological Association.

Course 3 of 10:

Course 3: Gambling as a Co-Occurring Disorder

- Trainer: Fred Fetta & Jeremy Wampler
- Time:11:00 am-2:00 pm ESTDate:Tuesday, November 14, 2023

Description: This training will explore the similarities and differences of gambling disorder with substance abuse and mental health disorders. This training will discuss and explore the various challenges in identifying disorder gambling within client care. Also, this training will introduce the addiction syndrome model, as well as strategies in identifying and screening of gambling disorders.

Learning Objectives:

- Describe similarities and differences with substance abuse and mental health disorders .
- Describe the various challenges in identifying disorder gambling and how it relates to the addiction syndrome model.

120 Washington St., Suite 202, Salem, Massachusetts 01970 Phone: 617-426-4554 Website: <u>www.maccg.org</u> An affiliate of the National Council on Problem Gambling, Inc. If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact:

If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact: Chief of Programs, Odessa Dwarika at 617.426.4554, TTY: 617.426.1855 or <u>odessa@maccg.org</u> • Recognize strategies in identifying and screening of gambling disorders.

Citations:

Najavits, L.M. 2002. Seeking Safety; A Treatment Manual for PTSD and Substance Abuse. New York: Guilford Press. Problem Gambling and Intimate Partner Violence: A Systematic Review and Meta-Analysis. Nicki Dowling, Aino Suomi, Alun Jackson, Tiffany Lavis, Janet Patford, Suzanne Cockman, Shane Thomas, Maria Bellringer, Jane Koziol-Mclain, Malcolm Battersby, Peter Harvey, and Max Abbott. Trauma, Violence, and Abuse 2016, Vol 17(1) 43-61 Pathological Gambling: Etiology, Comorbidity and Treatment 1st Edition by Nancy M. Petry

Course 4 of 10:

Course 4: <u>Neurobiology of Gambling Disorder and Harm Reduction (Two parts)</u>

Trainer:	Dr. Lori Rugle
Time:	11:00 am-2:00 pm EST
Date:	November 16, 2023

Part 1: Neurobiology and Pharmacology

Description: Much has been learned in the last 40 years regarding the neurobiology of gambling and gambling disorder through neuropsychological assessment, neuroimaging studies and genetic studies. This workshop will review the research and discuss clinical implications. Sections of a client psychoeducational manual on gambling and the brain will be presented. Additionally pharmacological interventions for gambling disorder will be reviewed.

Learning Objectives:

- Participants will be able to identify brain regions involved in the development of a gambling disorder.
- Participants will be able to identify primary neurotransmitters involved in gambling behaviors
- Participants will be able to describe the impact of gambling on the brain in terms clients can understand.
- Participants will be able to identify medications that have been found to be most effective in the treatment of gambling disorder

Citations:

Balodis, I. M., Kober, H., Worhunsky, P. D., Stevens, M. C., Pearlson, G. D., Carroll, K. M., & Potenza, M. N. (2016). Neurofunctional reward processing changes in cocaine dependence during recovery. *Neuropsychopharmacology*, *41*(8), 2112–2121.

Barton, K. R., Yazdani, Y., Ayer, N., Kalvapalle, S., Brown, S., Stapleton, J., Brown, D. G., & Harrigan, K. A. (2017). The effect of losses disguised as wins and near misses in electronic gaming machines: A systematic review. *Journal of Gambling Studies*, *33*, 1241–1260.

Goslar, M., Leibetseder, M., Muench, H. M., Hofmann, S. G., & Laireiter, A.-R. (2019). Pharmacological treatments for disordered gambling: A meta-analysis. *Journal of Gambling Studies*, *35*(2), 415–445.

Zois, E., Kiefer, K., Lemenager, T., Vollstädt-Klein, S., Mann, K., & Fauth-Bühler, M. (2017). Frontal cortex gray matter volume alterations in pathological gambling occur independently from substance use disorder. *Addiction Biology*, *22*(3), 864–872.

Part 2: Harm Reduction

Description: Harm reduction is often a misunderstood concept in the treatment of addictive disordesrs generally and gambling disorder specifically. This workshop will explore a wide range strategies to reduce the harm of gambling and problematic gambling from a prevention perspective to a clinical/intervention perspective in the context of

controlled/limited gambling and abstinence based goals. Harm reduction through alternative pathways from traditional treatment such as natural recovery will also be discussed.

Learning Objectives:

- Participants will be able to define the scope of harm reduction in the prevention and treatment of problem gambling.
- Participants will explore their personal attitude and reaction to harm reduction interventions in the treatment of gambling disorder.
- Participants will be able to utilize harm reduction strategies with individuals who have limited gambling or abstinence treatment goals.
- Participants will be able to identify alternatives to treatment interventions such as natural recovery as harm reduction strategies.

Citations:

Browne, M., & Rockloff, M. (2017). Prevalence of gambling -related harm provides evidence for the prevention paradox. *J Behav Addict*, 7(2), 410-422.

Langham, E., Thorne, H., Browne, M., Donaldson, P., & Rockloff, M. (2015). Understanding gambling related harm: A proposed definition, conceptual framework, and taxonomy of harms. *BMC Public Health*, *16*(80).

Stea, J., Hodgins, DC., Fung, T. (2015). Abstinence versus moderation goals in brief motivational treatment for pathological gambling. *J Gambl Stud*, 31, 1029-1045.

Course 5 of 10:

Course 5:Not All Bets Are the Same: A Targeted Intervention Guide for Specific Types of BettorsTrainer:Katie KirchTime:11:00 am-2:00 pm ESTDate:Tuesday, November 28, 2023

Description: This training is designed to help clinical direct care staff to learn specific, effective, interventions for different types of bettors to help reduce or eliminate gambling episodes throughout their treatment. Participants will learn how to help clients create crucial barriers to gambling early on in treatment based on the client's game of choice, as well as frequently used interventions including Motivational Interviewing and establishing SMART treatment goals.

Learning Objectives

- Identify 2 interventions to use with people experiencing harm from different types of betting: casino, off track, sports wagering and lottery.
- Learn at least 4 different treatment plan goals to set for clients with a Gambling Disorder.
- Identify 3 types of boundaries to implement with family members
- Explore how Motivational Interviewing can be helpful when working with those who prefer harm reduction over abstinence. Give an example of Motivational Interviewing within the context of problem gambling.

Citations:

https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf Reid R., Fong, T. (2013). Helping Partners in a relationship with a Problem Gambler. UCLA Gambling Studies Program Betchtold, J., Wilson A. (2021). The Gambling Disorder Treatment Handbook. A Guide for Mental Health Professionals

Course 6 of 10:

Course 6: <u>Finances and Families</u> (Two parts:

Trainer:Dr. Lori RugleTime:11:00 am-2:00 pm ESTDate:Thursday, November 30, 2023

Part 1: Addressing Finances in the Treatment of Gambling Disorder

Description: Financial problems are often the key motivator for individuals to seek treatment for a gambling disorder and certainly one of the primary concerns of those who are in treatment for a gambling disorder. There is little empirical research however on the impact of addressing financial problems as a key part of the treatment of this disorder. This training will present the best clinical and recovery oriented practices for working with clients experiencing gambling problems to address the stress of financial problems and to develop their financial recovery.

Learning Objectives:

- Participants will be able to define the role of addressing finances in the treatment of gambling disorder.
- Participant will be able to identify key steps in structuring addressing financial issues in the treatment of gambling disorder.
- Participants will be able to identify key financial issues to address in family counseling around problem gambling.
- Participants will learn strategies for financial asset protection planning with families addressing problem gambling.

Citations:

Grant, JE., Schreiber, L., Odlaug, BL., Kim, SW. (2010). Pathological gambling and bankruptcy, *Compr Psychiatry*, 51(2), 115-120.

Koomson, I., Hucrchill, SA., Munyani, ME. (2022). Gambling and financial stress, *Social Indicators Research*, https//doi.org/10.1007/s11do5-022-02898-6

Sacco, P., Frey, JJ., Callahan, C., Hochheimer, M., Imboden, R., Hyde, D. (2019). Feasibility of brief screening for at-risk gambling in consumer credit counseling. *J of Gambl Stud*, <u>https://doi.org/10.1007/s10899-019-09836-1</u>.

Part 2: New Strategies in Helping Families and Loved Ones Addressing Problem Gambling

Description: Families and loved ones living with the issue of problem gambling experience a broad range painful harms including financial, emotional, social and spiritual and are often left feeling shame and isolation. They often do not know where to turn for help, support and understanding. This webinar will focus on how the evidence-based treatments such as Community Reinforcement and Family Treatment and other behavioral family counseling strategies combine compassion-based, motivational and behavioral perspectives can be applied to those living with gambling disorder.

Learning Objectives:

- Participants will be able to utilize strategies to help family members reinforce recovery-oriented behaviors in loved ones struggling with gambling disorder.
- Participants will be able to identify how traditional language of co-dependency may contribute to stigma of families and couples living with addictive disorders.
- Participants will learn strategies to assist family members in developing self-compassion and self-care.
- Participants will learn strategies to help family members in developing coping skills to address difficult feelings, honesty and trust issues, and compassionate communication.

Citations:

Meyers, R., Miller, W. R., Hill, D. E., & Tonigan, J. S. (1998). Community reinforcement and family training (CRAFT): Engaging unmotivated drug users in treatment. *Journal of Substance Abuse*, *10*(3), 291–308.

Nilsson, A., Magnusson, K., Carlbring, P., Andersson, G., & Hellner Gumpert, C. (2018). The development of an internetbased treatment for problem gamblers and concerned significant others: A pilot randomized controlled trial. *Journal of Gambling Studies, 34*, 539–559.

Svensson, J., Romild, U., & Shepherdson, E. (2013). The concerned significant others of people with gambling problems in a national representative sample in Sweden: A 1 year follow-up study. *BMC Public Health*, *13*, 1087.

Course 7 of 10:

Course 7: <u>The Big Picture: Understanding Disparities and Building Equity</u>

Trainer:	Dr. Haner Hernández
Time:	11:00 am-2:00 pm EST
Date:	Tuesday, December 5, 2023

Description: This training will describe how disparities are developed and maintained and their relationship to problem gambling. Participants will learn how racism and other forms of discrimination contribute to poor health outcomes within marginalized communities. Individualized techniques and strategies to engage and retain people from marginalized communities will be explored. Participants will learn about their role in developing policies within their organizations and programs that are designed to create and maintain health equity.

Learning Objectives:

- Define disparities and their impacts on marginalized communities.
- Understand the importance of Cultural Humility and Cultural Intelligence in the development and implementation of culturally informed services.
- Describe the clinician's role in the development and implementation of policies to create and sustain health equity, particularly within the treatment system.

Citations:

SAMHSA (2018). *Behavioral health equity*. Retrieved from: <u>https://www.samhsa.gov/behavioral-health-equity</u> Turbaron, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, *9*(2), 117-125. doi: 10.1353/hpu.2010.0233

U.S. Department of Health and Human Services, Office of Minority Health. (2013). National standards for culturally and linguistically appropriate services (CLAS) in health and health care. Retrieved from <u>https://www.thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf</u>

<u>Course 8 of 10:</u>

Course 8: Social Injustice, Trauma and Problem Gambling

- Trainer: Dr. Deborah Haskins
- Time: 11:00 am-2:00 pm EST
- Date: Thursday, December 7, 2023

Description: Seventy percent of adults in the U.S. have experienced a traumatic event at least once in their lives and people with disordered gambling are among these numbers. BIPOC and other marginalized communities often experience ongoing trauma and oppression. Survivors often self-medicate to deal with traumatic events, including collective trauma and generational trauma. Enhance the use of evidence-based trauma recovery strategies and learn to authentically supporting gamblers in their "missed traumas".

Learning Objectives:

- Understand the sequelae of trauma and how to use a trauma-informed recovery approach in disordered gambling treatment.
- Understand the definition and impact of cultural and "missed" social justice traumatic events in disordered gambling treatment and recovery.
- Identify 3 resources for future work for trauma-informed and responsive care, including cultural and social justice traumatic events.

Citations:

Briere, J. & Scott, C. (2015). Principles of trauma therapy: A guide to symptoms, evaluation, and treatment. CA: SAGE Publications, Inc.

Rowe, S. W. (2020). Healing racial trauma: The road to resilience. Downey Grove, IL:IVP.

Wiechelt, S. A.. & Straussner, S. L. A. (2015). Introduction to the Special Issue: Examining the relationship between trauma and addiction. Journal of Social Work Practice in the Addictions, 15, 1-15.

Course 9 of 10:

Course 9: Cognitive Behavioral Therapy and LGBTQ Cultural Competence (Note: This is a 4-hour class)

Trainer:Dr. Eunice AvilesTime:11:00 am-3:00 pm EST

Date: Tuesday, December 12, 2023

Description: Several interventions have been utilized for the treatment of problem gambling. This training will list some of these evidence-based interventions with a focus on Cognitive Behavioral Therapy (CBT). A review and discussion of CBT will provide practical information that will allow clinical insight into treating the problem gambler. This will include a special session on creating safe therapeutic spaces for LGBTQ clients.

Learning Objectives:

- Participants will explain Cognitive Behavioral Therapy as a leading evidence-based modality in the treatment of gambling disorder.
- Participants will identify various clinical challenges of working with people with a gambling disorder.
- Participants will identify three considerations for increasing cultural safety for clients identifying as LQBTQ.

Citations:

Ojuda, M., Balán, I., Petry, N.M., Oquendo, M. & Blanco, C. (2009). Cognitive-behavioral therapy for pathological gambling: Cultural considerations. *The American Journal of Psychiatry, 166* (12), 1325-1330. DOI: <u>10.1176/appi.ajp.2009.08081235</u> Prochaska, J.O. & DiClemente, C.C. (1982). Transtheoretical therapy: Toward a more integrative model of change. *Psychotherapy: Theory, Research & Practice, 19* (3), 276–288. DOI: <u>10.1037/h0088437</u>

Gooding, P. & Tarrier, N. (2009). A systematic review and meta-analysis of cognitive-behavioural interventions to reduce problem gambling: Hedging our bets? *Behaviour Research and Therapy, 47* (7), 592-607. DOI: <u>10.1016/j.brat.2009.04.002</u>

Course 10 of 10:

Course 10: Integrating Recovery Supports into Clinical Practice (Note: This is a 2-hour class)

Trainer:Jodie NealleyTime:11:00 am-1:00 pm EST

Date: Thursday, December 14, 2023

Description: Recovery support services are an integral part of a recovery-oriented system of care. The question then becomes, which supports to use and how to integrate them into a treatment process. This session will discuss several recovery support services, offer suggestions as to who should be offering them, and discuss how services can be integrated into the treatment of clients with gambling disorders. We will also explore harm reduction within the recovery continuum

and how to support clients on their preferred path to well-being. We will discuss the role of Voluntary Self Exclusion in the context of both harm reduction and recovery.

Learning Objectives:

- Participants will understand definitions of recovery and describe recovery-oriented systems of care.
- Participants will identify dozens of recovery support services to share with clients.
- Participants will be able to describe the different needs of clients desiring to engage in harm reduction from the needs of clients desiring to be abstinent from gambling and how to support multiple pathways to recovery and client safety.
- Participants will learn how to conduct a Voluntary Self Exclusion and apply to become a designated agent for Colorado.

Citations:

Ferentzy, P., Skinner, W. & Antze, P. Gamblers Anonymous and the 12 Steps: How an informal society has altered a recovery process in accordance with the special needs of problem gamblers. *Journal of Gambling Issues* **23**, 42–65 (2009). Kourgiantakis, T., Saint-Jacques, M.-C. & Tremblay, J. Problem Gambling and Families: A Systematic Review. *Journal of Social Work Practice in the Addictions* **13**, 353–372 (2013).

Problem Gambling Toolkit/SAMSHA (2007) at http://store.samhsa.gov/product/Problem-Gambling-Toolkit/PGKIT-07

Fall 2023 Training Institute Trainers :

Dr. Eunice Avilés has a doctorate in Clinical Psychology, is a Licensed Mental Health Counselor, a Licensed Professional Counselor, a Gender Specialist, a certified Sex Educator, and an AASECT Certified Sex Therapist. Dr. Avilés' general practice focuses on the treatment of depression, anxiety, trauma, problem gambling, and the emotional consequences of discrimination and bullying (for youths and adults). Her private practice with the transgender and gender non-binary community includes the evaluation and treatment of children, youth and adults presenting with gender dysphoria. She specializes in the diagnosis and treatment of sexual dysfunction as well as sexual orientation issues. She is innovative and her focus is on ensuring that clinical services, as well as professional training for her areas of expertise, are provided in-person and online.

Odessa Dwarika is a veteran public health practitioner, addressing a wide range of intersectional community concerns over nearly three decades. As Chief Programs Officer of the MACGH, she leads trauma-informed prevention and intervention strategies to inform and equip individuals in healthcare, gaming, and policy, along with members of the public. These efforts strengthen existing safety nets while ensuring professionals have the research and resources to best care for individuals struggling and their loved ones. Fluent in Spanish, Odessa holds a B.A. from Brandeis University a M.A. in intercultural relations from Lesley University and is a Certified Trauma and Resilience Practitioner.

Fiorigio (Fred) Fetta is the Clinical Director of Problem Gambling Services with the Department of Mental Health & Addiction Services (DMHAS) in Connecticut. Prior to his work with DMHAS, he provided treatment at United Community & Family Services for gamblers and persons affected by gambling in Eastern Connecticut for seven years. Fred was also a substance abuse clinician in a Methadone Maintenance Treatment Program for nearly two years at Community Substance Abuse Centers in Hartford. He obtained his undergraduate degree at Eastern Connecticut State University and his Master's degree in Community Counseling at Fairfield University.

Dr. Deborah G. Haskins is President of the Maryland Council on Problem Gambling, retired tenured counselor educator/program director at Trinity Washington University and Founder and Chief Clinical Consultant. She has a PhD in Pastoral Counseling from Loyola University and is a Licensed Clinical Professional Counselor, Master Addictions Counselor, Internationally Certified Gambling Counselor, and Board-Approved Clinical Supervisor.

Dr. Haner Hernández, Ph.D. CADCII, LADCI originally from Puerto Rico and has worked for 30 years in the health and human service field. He is responsible for developing, implementing, and evaluating culturally and linguistically competent youth and adult health prevention, intervention, treatment, and recovery support programs. Dr. Hernández has many years of experience in delivering addiction counseling and clinical supervision to professionals in the field. Furthermore, he is a professional trainer and facilitator who provides individualized technical assistance and support. Dr. Hernández is also a person in long-term recovery from addiction and is committed to eliminating health disparities by working at the national, state, and local levels. He is currently a Senior Consultant to DPH's Bureau of Substance Addiction Services.

Katie Kirch, LCSW, ICGC-II, BACC is a 2011 Graduate of the UCONN School of Social Work and received her LCSW in 2013 where she worked as a therapist for the Bettor Choice gambling treatment program at The Connection Inc., in Middletown, CT. From there, she has gone on to become the Program Manager for The Bettor Choice Program at Wheeler Clinic in Hartford, CT. As an Internationally Certified Gambling Counselor, she has dedicated her career to helping those affected by Gambling Disorders in the state of CT. Katie has continued to develop her professional skills by becoming an EMDR therapist and an Acupuncture Detox Specialist and has taught Social Work courses as an Adjunct Professor at the UCONN School of Social Work in Hartford, CT.

Jodie Nealley, M.S. Jodie has a Bachelor of Arts from St. Lawrence University, a Master of Science in Education from Indiana University and is a graduate of the UMass/Boston Addiction Counselor Education Program. Jodie joined the MA Council on Gaming & Health in the Fall of 2012 where she works as the Director of Recovery Services. She speaks on recovery-oriented panels, been a keynote speaker and published articles for the <u>About College</u> publication and <u>The</u> <u>Wager</u>. She also co-authored chapter in: *Responsible Gambling: Primary Stakeholder Perspectives* (eds. Shaffer, H., Blaszczynski, A., Ladouceur, R., Fong, D., & Collins, P.). Jodie uses her life experience as a recovering alcoholic and problem gambler to raise awareness and compassion wherever possible. In 2019 she received the National Council on Problem Gambling *Jeff Beck Recovery Ambassador* award.

Dr. Lori Rugle PhD, ICGC-II/BACC, brings 35 + years of experience to her work field of problem and responsible gambling including treatment, prevention, research and responsible gambling. She is certified in Meditation and Psychotherapy and has had a personal practice for the past 25 years. She co-founded 12 Step Buddhist Recovery groups in both Connecticut and Ohio. She has provided training internationally on the use of mindfulness and self-compassion based interventions in the treatment of gambling disorder.

Jeremy Wampler is the Clinical Manager for the State of Connecticut, Department of Mental Health and Addiction Services, Problem Gambling Services. In this capacity he oversees problem gambling services for the state which include treatment, integration, prevention, and recovery. Jeremy is also a trainer, facilitating trainings for key stakeholders throughout the state, in order to build capacity and raise awareness. He currently serves as President of the International Gambling Counselor Certification Board, and as Vice President on the Association of Problem Gambling Services Administrators board. Jeremy earned his MSW from Southern Connecticut State University, and he has been practicing in the field of problem gambling for over a decade.

For more information including if you are deaf or hard of hearing, or are a person with a disability and require an accommodation, please contact Odessa Dwarika, *Chief Program Officer* at 617-426-4554, TTY: 617-426-1855 or <u>odessa@maccg.org</u>

The Massachusetts Council on Gaming and Health has been approved by NBCC as an Approved Continuing Education Provider, ACEP No.6331. Programs that do not qualify for NBCC credit are clearly identified. The Massachusetts Council on Gaming and Health is solely responsible for all aspects of the programs.







Colorado Gambling Counselor 2024 Winter Training Institute

Dates:Tuesdays and Thursdays : February 6,8,13,15,20,22,27,29 and March 5, 7,2024Time:Average : 11:00 am-2:00 pm EST
Where noted length time per class can vary from 2- 4 hoursPresenters:Eunice Aviles, Odessa Dwarika, Fred Fetta, Deborah Haskins, Haner Hernandez, Lori Rugle, Katie Kirch,
Jodie Nealley, Jeremy WamplerCE Hours:30.0

Description: Hidden problems with gambling often derail recovery from mental health and substance use disorders as signs and symptoms are often missed. This 10-session course, led by national experts, will build skills in gambling disorder assessment, treatment, and recovery support. By the end of the course, attendees will be confident in their ability to identify and respond appropriately to gambling disorder within their client populations. Attendees will learn about the International Gambling Counselor Certification Board (IGCCB) and how to pursue international certification. Continuing Education Units for this course can be applied towards the IGCCB IGCG-1 certification. Classes will meet twice a week over 5 weeks.

Credit: CEU's will be granted at the rate of 2.0 to 4.0 CEU's per attendance at each live class for a total of 30 CE hours. If a course is missed, attendees will be able to watch the video of the missed course but not be able to receive CEU credit for any class not attended live.

Course 1 of 10:

Course 1:	Introduction to Problem Gambling
Trainer:	Odessa Dwarika and Jodie Nealley
Time:	11:00 am-2:00 pm EST
Date:	Tuesday, February 6, 2024

Description: In the era of expanding gambling, providers are encouraged to increase their base of knowledge to provide service and support to service recipients. This introductory training is aimed to increase current social service providers' knowledge in identifying problem gambling behavior within clinical and social service practice. Social service providers will learn how to incorporate problem gambling information and treatment skills into their area of practice. They will hear the presenter describe her own journey into gambling addiction and her personal path to recovery.

Learning Objectives:

- Discuss history and development of the problem gambling field.
- Review stages, signs, symptoms, and progression of problem gambling.
- Review and discuss research reports of prevalence rates with respect to problem gambling.
- Explain risk factors associated with different types of gambling.
- Gambling as a societal stressor.

120 Washington St., Suite 202, Salem, Massachusetts 01970 Phone: 617-426-4554 Website: <u>www.maccg.org</u> An affiliate of the National Council on Problem Gambling, Inc.

If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact: Chief of Programs, Odessa Dwarika at 617.426.4554, TTY: 617.426.1855 or <u>odessa@maccg.org</u>

Citations:

LaPlante, D. A., Nelson, S. E., LaBrie, R. A. & Shaffer, H. J. Disordered gambling, type of gambling and gambling involvement in the British Gambling Prevalence Survey 2007. Eur J Public Health 21, 532–537 (2011).

Shaffer HJ, Martin R. Disordered gambling: etiology, trajectory, and clinical considerations. Annul Rev Clin Psychol. 2011; 7: 483-510.

DSM-V: The Diagnostic and Statistical Manual of Mental Disorders 585–586 (American Psychiatric Publishing, 2013).

Course 2 of 10:

Course 2: Assessment and Diagnosis

Trainer:Fred Fetta & Jeremy WamplerTime:11:00 am-2:00 pm ESTDate:Thursday, February 8, 2024

Description: This training will focus on the assessment and diagnosis of gambling disorder as a behavioral addiction. The process of the therapeutic alliance and other engagement practices will be considered as important components of the assessment process. The evaluation of major depressive disorder and the risk for suicidality will be highlighted as important aspects of the assessment process with a problem gambler. The development of a safety plan will be discussed as a consideration for the protection of the problem gambler.

Learning Objectives:

- Describe DSM-5 diagnostic criteria for Gambling Disorder.
- Explain what the various screening tools are and their strengths and weaknesses.
- Describe and preform a safety plan and risk assessments.
- Discuss requirements and benefits of IGCCB certification for clinicians.

Citations:

Bojana, K. & Lidgerwood, D. M. (2012). Gambling severity, impulsivity, and psychopathology: Comparison of treatment and community recruited pathological gamblers, The American journal on addictions, 21, 508515. Dowling, N. A. & Cosic, S. (2011). Client engagement characteristics. International journal of mental health addiction, 9, 656671.

Petry, N. (2005). Pathological gambling: Etiology, comorbidity, and treatment. Washington DC: American Psychological Association.

Course 3 of 10:

Course 3:Gambling as a Co-Occurring DisorderTrainer:Fred Fetta & Jeremy WamplerTime:11:00 am-2:00 pm ESTDate:Tuesday, February 13, 2024

Description: This training will explore the similarities and differences of gambling disorder with substance abuse and mental health disorders. This training will discuss and explore the various challenges in identifying disorder gambling within client care. Also, this training will introduce the addiction syndrome model, as well as strategies in identifying and screening of gambling disorders.

Learning Objectives:

- Describe similarities and differences with substance abuse and mental health disorders.
- Describe the various challenges in identifying disorder gambling and how it relates to the addiction syndrome model.

120 Washington St., Suite 202, Salem, Massachusetts 01970 Phone: 617-426-4554 Website: <u>www.maccg.org</u> An affiliate of the National Council on Problem Gambling, Inc. If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact:

If you are deaf or hard of hearing, or are a person with a disability who requires an accommodation, please contact: Chief of Programs, Odessa Dwarika at 617.426.4554, TTY: 617.426.1855 or <u>odessa@maccg.org</u> • Recognize strategies in identifying and screening of gambling disorders.

Citations:

Najavits, L.M. 2002. Seeking Safety; A Treatment Manual for PTSD and Substance Abuse. New York: Guilford Press. Problem Gambling and Intimate Partner Violence: A Systematic Review and Meta-Analysis. Nicki Dowling, Aino Suomi, Alun Jackson, Tiffany Lavis, Janet Patford, Suzanne Cockman, Shane Thomas, Maria Bellringer, Jane Koziol-Mclain, Malcolm Battersby, Peter Harvey, and Max Abbott. Trauma, Violence, and Abuse 2016, Vol 17(1) 43-61. Pathological Gambling: Etiology, Comorbidity and Treatment 1st Edition by Nancy M. Petry.

Course 4 of 10:

Course 4:Not All Bets Are the Same: A Targeted Intervention Guide for Specific Types of BettorsTrainer:Katie KirchTime:11:00 am-2:00 pm ESTDate:Thursday, February 15, 2024

This training is designed to help clinical direct care staff to learn specific, effective, interventions for different types of bettors to help reduce or eliminate gambling episodes throughout their treatment. Participants will learn how to help clients create crucial barriers to gambling early on in treatment based on the client's game of choice, as well as frequently used interventions including Motivational Interviewing and establishing SMART treatment goals.

Learning Objectives

- Identify 2 interventions to use with people experiencing harm from different types of betting: casino, off track, sports wagering and lottery.
- Learn at least 4 different treatment plan goals to set for clients with a Gambling Disorder.
- Identify 3 types of boundaries to implement with family members.
- Explore how Motivational Interviewing can be helpful when working with those who prefer harm reduction over abstinence. Give an example of Motivational Interviewing within the context of problem gambling.

Citations:

https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf Reid R., Fong, T. (2013). Helping Partners in a relationship with a Problem Gambler. UCLA Gambling Studies Program. Betchtold, J., Wilson A. (2021). The Gambling Disorder Treatment Handbook. A Guide for Mental Health Professionals.

Course 5 of 10:

Course 5:	Neurobiology of Gambling Disorder and Harm Reduction (Two parts)
Trainer:	Dr. Lori Rugle
Time:	11:00 am-2:00 pm EST
Date:	Tuesday, February 20, 2024

Part 1: Neurobiology and Pharmacology

Description: Much has been learned in the last 40 years regarding the neurobiology of gambling and gambling disorder through neuropsychological assessment, neuroimaging studies and genetic studies. This workshop will review the research and discuss clinical implications. Sections of a client psychoeducational manual on gambling and the brain will be presented. Additionally pharmacological interventions for gambling disorder will be reviewed.

Learning Objectives:

- Participants will be able to identify brain regions involved in the development of a gambling disorder.
- Participants will be able to identify primary neurotransmitters involved in gambling behaviors.

- Participants will be able to describe the impact of gambling on the brain in terms clients can understand.
- Participants will be able to identify medications that have been found to be most effective in the treatment of gambling disorder

Citations:

Balodis, I. M., Kober, H., Worhunsky, P. D., Stevens, M. C., Pearlson, G. D., Carroll, K. M., & Potenza, M. N. (2016). Neurofunctional reward processing changes in cocaine dependence during recovery. *Neuropsychopharmacology*, *41*(8), 2112–2121.

Barton, K. R., Yazdani, Y., Ayer, N., Kalvapalle, S., Brown, S., Stapleton, J., Brown, D. G., & Harrigan, K. A. (2017). The effect of losses disguised as wins and near misses in electronic gaming machines: A systematic review. *Journal of Gambling Studies, 33*, 1241–1260.

Goslar, M., Leibetseder, M., Muench, H. M., Hofmann, S. G., & Laireiter, A.-R. (2019). Pharmacological treatments for disordered gambling: A meta-analysis. *Journal of Gambling Studies*, *35*(2), 415–445.

Zois, E., Kiefer, K., Lemenager, T., Vollstädt-Klein, S., Mann, K., & Fauth-Bühler, M. (2017). Frontal cortex gray matter volume alterations in pathological gambling occur independently from substance use disorder. *Addiction Biology, 22*(3), 864–872.

Part 2: Harm Reduction

Description: Harm reduction is often a misunderstood concept in the treatment of addictive disordesrs generally and gambling disorder specifically. This workshop will explore a wide range strategies to reduce the harm of gambling and problematic gambling from a prevention perspective to a clinical/intervention perspective in the context of controlled/limited gambling and abstinence based goals. Harm reduction through alternative pathways from traditional treatment such as natural recovery will also be discussed.

Learning Objectives:

- Participants will be able to define the scope of harm reduction in the prevention and treatment of problem gambling.
- Participants will explore their personal attitude and reaction to harm reduction interventions in the treatment of gambling disorder.
- Participants will be able to utilize harm reduction strategies with individuals who have limited gambling or abstinence treatment goals.
- Participants will be able to identify alternatives to treatment interventions such as natural recovery as harm reduction strategies.

Citations:

Browne, M., & Rockloff, M. (2017). Prevalence of gambling -related harm provides evidence for the prevention paradox. *J Behav Addict*, 7(2), 410-422.

Langham, E., Thorne, H., Browne, M., Donaldson, P., & Rockloff, M. (2015). Understanding gambling related harm: A proposed definition, conceptual framework, and taxonomy of harms. *BMC Public Health*, *16*(80).

Stea, J., Hodgins, DC., Fung, T. (2015). Abstinence versus moderation goals in brief motivational treatment for pathological gambling. *J Gambl Stud*, 31, 1029-1045.

Course 6 of 10:

Course 6: Cognitive Behavioral Therapy and LGBTQ Cultural Competence (Note: This is a 4-hour class)

Trainer: Dr. Eunice Aviles

Time: **11:00 am-3:00 pm EST**

Date: Thursday, February 22, 2024

Description: Several interventions have been utilized for the treatment of problem gambling. This training will list some of these evidence-based interventions with a focus on Cognitive Behavioral Therapy (CBT). A review and discussion of CBT will provide practical information that will allow clinical insight into treating the problem gambler. This will include a special session on creating safe therapeutic spaces for LGBTQ clients.

Learning Objectives:

- Participants will explain Cognitive Behavioral Therapy as a leading evidence-based modality in the treatment of gambling disorder.
- Participants will identify various clinical challenges of working with people with a gambling disorder.
- Participants will identify three considerations for increasing cultural safety for clients identifying as LQBTQ.

Citations:

Ojuda, M., Balán, I., Petry, N.M., Oquendo, M. & Blanco, C. (2009). Cognitive-behavioral therapy for pathological gambling: Cultural considerations. *The American Journal of Psychiatry, 166* (12), 1325-1330. DOI: <u>10.1176/appi.ajp.2009.08081235</u>. Prochaska, J.O. & DiClemente, C.C. (1982). Transtheoretical therapy: Toward a more integrative model of change. *Psychotherapy: Theory, Research & Practice, 19* (3), 276–288. DOI: <u>10.1037/h0088437</u>.

Gooding, P. & Tarrier, N. (2009). A systematic review and meta-analysis of cognitive-behavioural interventions to reduce problem gambling: Hedging our bets? *Behaviour Research and Therapy*, 47 (7), 592-607. DOI: <u>10.1016/j.brat.2009.04.002</u>.

Course 7 of 10:

Course 7:	The Big Picture: Understanding Disparities and Building Equity
Trainer:	Dr. Haner Hernández
Time:	11:00 am-2:00 pm EST
Date:	Tuesday, February 27, 2024

Description: This training will describe how disparities are developed and maintained and their relationship to problem gambling. Participants will learn how racism and other forms of discrimination contribute to poor health outcomes within marginalized communities. Individualized techniques and strategies to engage and retain people from marginalized communities will be explored. Participants will learn about their role in developing policies within their organizations and programs that are designed to create and maintain health equity.

Learning Objectives:

- Define disparities and their impacts on marginalized communities.
- Understand the importance of Cultural Humility and Cultural Intelligence in the development and implementation of culturally informed services.
- Describe the clinician's role in the development and implementation of policies to create and sustain health equity, particularly within the treatment system.

Citations:

- SAMHSA (2018). *Behavioral health equity*. Retrieved from: <u>https://www.samhsa.gov/behavioral-health-equity</u>.
- Turbaron, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9(2), 117-125. doi: 10.1353/hpu.2010.0233.

 U.S. Department of Health and Human Services, Office of Minority Health. (2013). National standards for culturally and linguistically appropriate services (CLAS) in health and health care. Retrieved from <u>https://www.thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf.</u>

Course 8 of 10:

Course 8:	Social Injustice, Trauma and Problem Gambling
Trainer:	Dr. Deborah Haskins
Time:	11:00 am-2:00 pm EST
Date:	Thursday, February 29, 2024

Description: Seventy percent of adults in the U.S. have experienced a traumatic event at least once in their lives and people with disordered gambling are among these numbers. BIPOC and other marginalized communities often experience ongoing trauma and oppression. Survivors often self-medicate to deal with traumatic events, including collective trauma and generational trauma. Enhance the use of evidence-based trauma recovery strategies and learn to authentically supporting gamblers in their "missed traumas".

Learning Objectives:

- Understand the sequelae of trauma and how to use a trauma-informed recovery approach in disordered gambling treatment.
- Understand the definition and impact of cultural and "missed" social justice traumatic events in disordered gambling treatment and recovery.
- Identify 3 resources for future work for trauma-informed and responsive care, including cultural and social justice traumatic events.

Citations:

Briere, J. & Scott, C. (2015). Principles of trauma therapy: A guide to symptoms, evaluation, and treatment. CA: SAGE Publications, Inc.

Rowe, S. W. (2020). Healing racial trauma: The road to resilience. Downey Grove, IL:IVP. Wiechelt, S. A., & Straussner, S. L. A. (2015). Introduction to the Special Issue: Examining the relationship between

trauma and addiction. Journal of Social Work Practice in the Addictions, 15, 1-15.

Course 9 of 10:

Course 9: <u>Finances and Families</u> (Two parts)

Trainer:Dr. Lori RugleTime:11:00 am-2:00 pm ESTDate:Tuesday, March 5, 2024

Part 1: Addressing Finances in the Treatment of Gambling Disorder

Description: Financial problems are often the key motivator for individuals to seek treatment for a gambling disorder and certainly one of the primary concerns of those who are in treatment for a gambling disorder. There is little empirical research however on the impact of addressing financial problems as a key part of the treatment of this disorder. This training will present the best clinical and recovery-oriented practices for working with clients experiencing gambling problems to address the stress of financial problems and to develop their financial recovery.

Learning Objectives:

- Participants will be able to define the role of addressing finances in the treatment of gambling disorder.
- Participant will be able to identify key steps in structuring addressing financial issues in the treatment of gambling disorder.
- Participants will be able to identify key financial issues to address in family counseling around problem gambling.

• Participants will learn strategies for financial asset protection planning with families addressing problem gambling.

Citations:

Grant, JE., Schreiber, L., Odlaug, BL., Kim, SW. (2010). Pathological gambling and bankruptcy, *Compr Psychiatry*, 51(2), 115-120.

Koomson, I., Hucrchill, SA., Munyani, ME. (2022). Gambling and financial stress, *Social Indicators Research*, https//doi.org/10.1007/s11do5-022-02898-6.

Sacco, P., Frey, JJ., Callahan, C., Hochheimer, M., Imboden, R., Hyde, D. (2019). Feasibility of brief screening for at-risk gambling in consumer credit counseling. *J of Gambl Stud*, <u>https://doi.org/10.1007/s10899-019-09836-1</u>.

Course 10 of 10:

Course 10:Integrating Recovery Supports into Clinical Practice(Note: This is a 2-hour class)Trainer:Jodie NealleyTime:11:00 am-1:00 pm ESTDate:Thursday, December 14, 2023

Description: Recovery support services are an integral part of a recovery-oriented system of care. The question then becomes, which supports to use and how to integrate them into a treatment process. This session will discuss several recovery support services, offer suggestions as to who should be offering them, and discuss how services can be integrated into the treatment of clients with gambling disorders. We will also explore harm reduction within the recovery continuum and how to support clients on their preferred path to well-being. We will discuss the role of Voluntary Self Exclusion in the context of both harm reduction and recovery.

Learning Objectives:

- Participants will understand definitions of recovery and describe recovery-oriented systems of care.
- Participants will identify dozens of recovery support services to share with clients.
- Participants will be able to describe the different needs of clients desiring to engage in harm reduction from the needs of clients desiring to be abstinent from gambling and how to support multiple pathways to recovery and client safety.
- Participants will learn how to conduct a Voluntary Self Exclusion and apply to become a designated agent fro Colorado.

Citations:

Ferentzy, P., Skinner, W. & Antze, P. Gamblers Anonymous and the 12 Steps: How an informal society has altered a recovery process in accordance with the special needs of problem gamblers. *Journal of Gambling Issues* **23**, 42–65 (2009). Kourgiantakis, T., Saint-Jacques, M.-C. & Tremblay, J. Problem Gambling and Families: A Systematic Review. *Journal of Social Work Practice in the Addictions* **13**, 353–372 (2013).

Problem Gambling Toolkit/SAMSHA (2007) at http://store.samhsa.gov/product/Problem-Gambling-Toolkit/PGKIT-07

Winter 2024 Training Institute Trainers :

Dr. Eunice Avilés has a doctorate in Clinical Psychology, is a Licensed Mental Health Counselor, a Licensed Professional Counselor, a Gender Specialist, a certified Sex Educator, and an AASECT Certified Sex Therapist. Dr. Avilés' general practice focuses on the treatment of depression, anxiety, trauma, problem gambling, and the emotional consequences of discrimination and bullying (for youths and adults). Her private practice with the transgender and gender non-binary community includes the evaluation and treatment of children, youth and adults presenting with gender dysphoria. She specializes in the diagnosis and treatment of sexual

dysfunction as well as sexual orientation issues. She is innovative and her focus is on ensuring that clinical services, as well as professional training for her areas of expertise, are provided in-person and online.

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Fiorigio (Fred) Fetta is the Clinical Director of Problem Gambling Services with the Department of Mental Health & Addiction Services (DMHAS) in Connecticut. Prior to his work with DMHAS, he provided treatment at United Community & Family Services for gamblers and persons affected by gambling in Eastern Connecticut for seven years. Fred was also a substance abuse clinician in a Methadone Maintenance Treatment Program for nearly two years at Community Substance Abuse Centers in Hartford. He obtained his undergraduate degree at Eastern Connecticut State University and his Master's degree in Community Counseling at Fairfield University.

Dr. Deborah G. Haskins is President of the Maryland Council on Problem Gambling, retired tenured counselor educator/program director at Trinity Washington University and Founder and Chief Clinical Consultant. She has a PhD in Pastoral Counseling from Loyola University and is a Licensed Clinical Professional Counselor, Master Addictions Counselor, Internationally Certified Gambling Counselor, and Board-Approved Clinical Supervisor.

Dr. Haner Hernández, Ph.D. CADCII, LADCI originally from Puerto Rico and has worked for 30 years in the health and human service field. He is responsible for developing, implementing, and evaluating culturally and linguistically competent youth and adult health prevention, intervention, treatment, and recovery support programs. Dr. Hernández has many years of experience in delivering addiction counseling and clinical supervision to professionals in the field. Furthermore, he is a professional trainer and facilitator who provides individualized technical assistance and support. Dr. Hernández is also a person in long-term recovery from addiction and is committed to eliminating health disparities by working at the national, state, and local levels. He is currently a Senior Consultant to DPH's Bureau of Substance Addiction Services.

Katie Kirch, LCSW, ICGC-II, BACC_is a 2011 Graduate of the UCONN School of Social Work and received her LCSW in 2013 where she worked as a therapist for the Bettor Choice gambling treatment program at The Connection Inc., in Middletown, CT. From there, she has gone on to become the Program Manager for The Bettor Choice Program at Wheeler Clinic in Hartford, CT. As an Internationally Certified Gambling Counselor, she has dedicated her career to helping those affected by Gambling Disorders in the state of CT. Katie has continued to develop her professional skills by becoming an EMDR therapist and an Acupuncture Detox Specialist and has taught Social Work courses as an Adjunct Professor at the UCONN School of Social Work in Hartford, CT.

Jodie Nealley, M.S. Jodie has a Bachelor of Arts from St. Lawrence University, a Master of Science in Education from Indiana University and is a graduate of the UMass/Boston Addiction Counselor Education Program. Jodie joined the MA Council on Gaming & Health in the Fall of 2012 where she works as the Director of Recovery Services. She speaks on recovery-oriented panels, been a keynote speaker and published articles for the About College publication and The Wager. She also co-authored chapter in: *Responsible Gambling: Primary Stakeholder Perspectives* (eds. Shaffer, H., Blaszczynski, A., Ladouceur, R., Fong, D., & Collins, P.). Jodie uses her life experience as a recovering alcoholic and problem gambler to raise awareness and compassion wherever possible. In 2019 she received the National Council on Problem Gambling *Jeff Beck Recovery Ambassador* award.

Dr. Lori Rugle PhD, ICGC-II/BACC, brings 35 + years of experience to her work field of problem and responsible gambling including treatment, prevention, research and responsible gambling. She is certified in Meditation and Psychotherapy and has had a personal practice for the past 25 years. She co-founded 12 Step Buddhist Recovery groups in both Connecticut and Ohio. She has provided training internationally on the use of mindfulness and self-compassion based interventions in the treatment of gambling disorder.

Jeremy Wampler is the Clinical Manager for the State of Connecticut, Department of Mental Health and Addiction Services, Problem Gambling Services. In this capacity he oversees problem gambling services for the state which include treatment, integration, prevention, and recovery. Jeremy is also a trainer, facilitating trainings for key stakeholders throughout the state, in order to build capacity and raise awareness. He currently serves as President of the International Gambling Counselor Certification Board, and as Vice President on the Association of Problem Gambling Services Administrators board. Jeremy earned his MSW from Southern Connecticut State University, and he has been practicing in the field of problem gambling for over a decade.

For more information including if you are deaf or hard of hearing, or are a person with a disability and require an accommodation, please contact Odessa Dwarika, *Chief of Programs and Services* at 617-426-4554, TTY: 617-426-1855 or <u>odessa@maccg.org</u>

The Massachusetts Council on Gaming and Health has been approved by NBCC as an Approved Continuing Education Provider, ACEP No.6331. Programs that do not qualify for NBCC credit are clearly identified. The Massachusetts Council on Gaming and Health is solely responsible for all aspects of the programs.





TAKE ON THE ODDS

Over **100,000** Colorado residents struggle with a gambling problem. Yet there are few certified statewide providers.

- Grow your skills in identifying, screening, and treating gambling addiction.
- Sign up for a FREE Colorado Provider Network training and earn up to 30 Continuing Education Units.
- ⊘ When you complete your training, receive a \$150 Amazon gift card!





Supporting Struggling Gamblers





Whether you're early in your career or a veteran treatment professional, you likely had clients experiencing gambling problems.

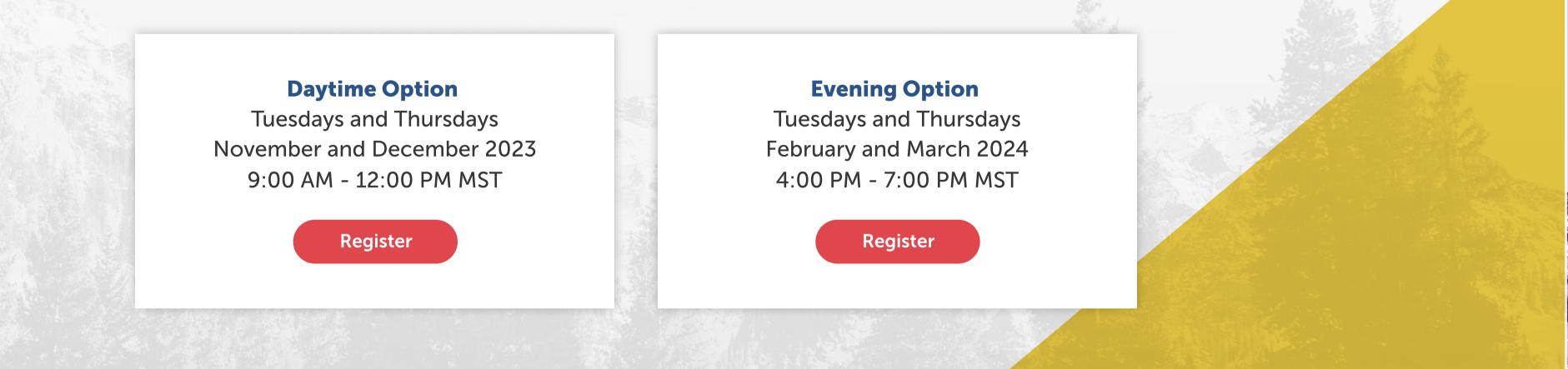
U.S. adults have a gambling addiction

U.S. adults are at risk

Get Training Info

Like any addiction, gambling disorder causes disruptions to a person's well-being, job, and relationships. It can mean gambling on blackjack or basketball, slots or scratch-offs. Or something else. Signs of a gambling addiction are often hidden, and can derail recovery from mental health and substance use disorders.

Take on these odds. **The Colorado Provider Free Training Program** is offering a **FREE**, **10-session**, **30-hour course** to grow your skills in gambling disorder assessment, treatment, and recovery support. Earn up to 30 Continuing Education Units (CEUs) — 3 CEUs per attendance of each live class — while learning applicable skills from award-winning experts.



Our Partnerships

Thanks to generous funding from the Colorado Gaming Commission, Colorado Provider Free Training Program trainings are free to professionals with the following Colorado credentials:

Licensed Addiction Counselor (ACD)
 Addiction Counselor Candidate (ADDC)
 Certified Addiction Technician (ACA)
 Certified Addiction Specialist (ACC)
 Marriage and Family Therapist (MFT)
 Licensed Professional Counselor (LPC)
 Licensed Social Worker (LSW)
 Licensed Clinical Social Worker (LCSW)
 Case Managers and other Treatment Providers



The Colorado Provider Free Training Program is a project accredited by the <u>International Gambling</u> <u>Counselor Certification Board (IGCCB)</u> and facilitated by the Institute for Consumer Health.

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Executive Summary

Internal Grant Code:	KRI_CO1	
Project Name:	Strategic Approaches to Gambling Expansion: A and Availability in Colorado	Review of Gambling Treatment Quality
Project Lead:	Daniel Umfleet	
Funding Opportunity Name	Colorado Division of Gaming Responsible Gaming	Grants
Funding Period	March 2023 – February 2024	
Report Submission Date:	September 1, 2023	
Grant Awarded:	\$260,000	
Budget Spend to Date:	\$141,896.44 KRI Colorado1: A Review of Gambling Treatment Quality and Availability in CO Labor Data & Consulting Travel Project is over budget due to labor costs that were pulled forward to expedite the initial GIS data uple eliminated from the last quarter of the payment s initial budget projection will be far off from final s +3% due to the increase of travel costs compared	oad. That cost is now consumed and chedule so there is no concern that our spend. We anticipate a small overspend of

Section One: Summary

- 1. The purpose of this grant was to conduct a comprehensive analysis of Colorado's mental health treatment disparities in relation to Gambling Disorder (GD) and create an implementation strategy for Gambling Disorder treatment across the state.
- 2. There will be several milestones achieved over the life cycle of this engagement:

Milestone 1 - Complete

Develop a granular understanding of the current Gambling Treatment landscape across the state. An in-depth analysis will be completed including locations of GD, Substance Use Disorder, and Mental Health treatment facilities across the state and cross-referenced against rural area codes.

Milestone 2 – Complete

Conduct and in-depth analysis across Colorado's major ACO, MCO, Community based rural hospitals, Universities and Colleges, VA facilities, and Native American treatment facilities to gather intelligence on each facility's understanding of GD among their respective populations and understand each facilities level of preparedness for treatment of GD.

Milestone 3 - Complete

Conduct an in-depth analysis with the inclusion of variables such as county demographics, household income, level and income-level differences, health insurance coverage (or lack thereof), employment rates, and access to high-speed internet and broadband service, where possible.

Milestone 4 – In progress

Create a visual representation of the data set that allows Colorado's leadership to gain valuable insights into inequities across the state and help inform how, when and where to deploy public health strategies and resources to provide the highest quality prevention strategies possible.

Milestone 5 – On track for timely delivery

Create a strategic road map that articulates a 5 year implement plan incorporating public policy and public health initiatives with key stakeholders in key communities across the state.



Section 2: Activities & Progress

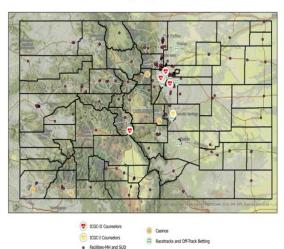
Data collection has been successfully completed as we now possess a comprehensive grasp of the current landscape of Gambling Treatment throughout the state.

Our analysis now encompasses a diverse range of variables that play pivotal roles in shaping access to and demand for treatment. By integrating factors such as county demographics, household income disparities, levels of income, variations in health insurance coverage, employment rates, and even the availability of high-speed internet and broadband services where feasible, we have achieved a comprehensive understanding of the contextual dynamics that impact GD treatment accessibility and efficacy.

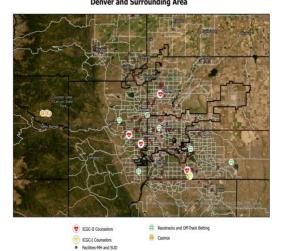
Visual representation of the data set has now begun (GIS) which will allow for Colorado leadership to gain valuable insights into disparities across the state. This milestone stands as a pivotal step toward achieving the overarching goal of providing top-tier prevention strategies that address the unique needs of each community across the state.

KRI and Rutgers research teams met July 25th and started reviewing preliminary findings and mapping out a framework for the 5-year strategic roadmap. Final GIS upload with complete data set expected mid-December. Strawman framework for 5-year strategic plan expected mid-December. All progress is on track for timely delivery of product and strategy.

Preliminary GIS graph examples:



Colorado: Gambling Supply and Counselors



Data	dictionary for GIS:	

Variable	Definition
	County FIPS code, first two digits are
FIPS	state, final three digits are the county
StateFIPS	State FIPS
State	State in text (e.g., New Jersey)
County	County in text (e.g., Middlesex County)
Metrostatus	Metro Status from USDA

Economictype	County Economic Dependence Indicator (USDA)
Forming	Counties where farming accounted for
Farming	25%+ of the county's earnings or 16%+ employment
Mining	Counties where mining accounted for
ivining	13%+ of earnings or 8%+ of employment
Manufacturing	Counties where manufacturing accounted for 23%+ of earnings or 16%+ of
	employment
Government	Counties where government accounted
	for 14%+ of earnings or 9%+ of employment
Recreation	Recreation county indicator
Nonspecialized	The county was not a farming, mining,
Nonspecialized	manufacturing, government-dependent, or recreation county.
	At least 20% or more of the residents age
Loweducation	25 to 64 did not have a high school diploma or equivalent between 2008-12.
Lowemployment	Less than 65% of residents age 25-64 were
Lowemployment	employed in 2008-12
	Number of resident declined between the
Populationloss	1990 and 2000 censuses and also between the 2000 and 2010 censuses.
Retirementdest	Number of resident 60 and older grew by 15 percent or more between 2000 and
	2010
Persistentpoverty	a county was classified as persistent poverty if 20 percent or more of its residents were poor as measured by the 1980, 1990, and 2000 decennial censuses and the American Community Survey 5-
	year estimates for 2007-11.
Persistentchildpov	a county was classified as persistent related child poverty if 20 percent or more of related children under 18 years old were poor as measured by the 1980, 1990,
	and 2000 decennial censuses and the
	American Community Survey 5-year
	estimates for 2007-11.
UIC	Urban Influence Codes
RUCC	Rural Urban Continuum Codes
sqmile	State area in square miles
SUD	Number of SUD facilities



MH	Number of MH facilities	
GA_open	Number of GA facilities that are open	
GA_all	Number of all GA meetings	
Counselors	Number of gambling counselors	
Gamblingfac	Number of gambling facilities	
Population Population in 2020		
SUD100	SUD facilities per 100,000 residents	
MH100	MH facilities per 100,000 residents	
GA_open100	GA meetings that are open per 100,000 residents	
GA_all100	All GA meetings per 100,000 residents	
_	Gambling counselors per 100,000	
Counselors100	residents	
Gamblingfac100	Gambling facilities per 100,000 residents	
GA_all_sqmi	Number of GA rooms per square mile	
	Number of IGCCB listed counselors per	
Counseolrs_sqmi	square mile	
	Number of SAMHSA facilities that treat	
Gmablingfac_sqmi	Gambling Disorder per square mile	
N	Number of residents with less than high	
Nohs	school	
Competillare	Number of residents with some college	
Somecollege	completed	
Associates	Number of residents who have completed	
Associates	an associates degree	
Bachelors	Number of residents who have completed	
Bachelors	a bachelors degree	
Graduate	Number of residents who have completed	
Graduate	a graduate degree	
Populationinpoverty	Number of residents living in poverty	
Populationondisability	Number of residents on disability	
Medianincome	Median income in the county	
Meanincome	Mean income in the county	
Percentpoverty50	Number of residents living at or below	
	50% of the poverty level	
Percentpoverty150	Number of residents living at or below	
	150% of the poverty level	
Percentpoverty500	Number of residents living at or below	
	500% of the poverty level	
Householdonfoodstamp	Number of households on foodstamps	
Populationuninsured	Number of residents without insurance	

Populationpublicins	Number of residents on public insurance				
Populationwithinternet	Number of residents without internet				
Males	Number of male residents				
Females	Number of female residents Number of white residents				
White					
Blackaa	Number of Black/African American				
	residents				
Americanindianalaskan	Number of American Indian/Alaskan				
	native residents				
Asian	Number of Asian residents				
Nativahawaijanaa	Number of native hawaiin/pacific				
Nativehawaiinpac	islander residents				
Hispanic	Number of Hispanic residents Number of residents over 18 years old				
Populationover18					
Division	Census Division				
Region	Census Region				
Stateaffiliation	NCPG state affiliation status				
Personspersud	Persons per SUD facility				
personspermh	Persons per MH facility				
Personspergaopen	Persons per GA meeting that is open				
personsperga	Persons per GA meeting				
Personspercounselors	Persons per gambling counselor				
personspergambfac	Persons per gambling facility				



Section Three: Evaluation and Impact

KRI's evaluation process utilizes two outcomes: process goals and product goals. Process goals are all the individual steps toward the creation of the final products. Product goals are the larger way-point goals that define the project.

Process goals for this grant include completed phone calls and meetings with representatives from pertinent organizations (government, tribal, health, and academic), data gathered in the creation of the database, and meetings with representatives from professional, minor, and collegiate sports teams in the state.

Product goals completed to this point include Milestones 1, 2, & 3 and the creation of the Colorado county-level treatment data set. The remaining Product goals include Milestones 4 & 5 and the creation and presentation of the comprehensive final report.

A list of completed process goals, product goals, and the project Gantt Chart are available in the slides being presented on September 21, 2023.

By design, the primary impact of this grant will come from the decisions made after the delivery of the final product and will be spread across the state for years to come. That said, secondary impacts include the building of relationships with stakeholders, awareness raised, conversations begun, and information disseminated in the gathering of data and creation of the Colorado database. These secondary impacts are created by the dozens of meetings held with government, tribal, health, sports, and academic organizations in the furtherance of the grant Milestones. We expect the secondary impacts of the grant to grow exponentially in the second half of the grant as the foundational investment in the work done to this point continues to pay dividends.

High level project chart

CO1 Milestones

Item		Due Date	Status	Notes
Analysis of colleges, ACO, MCO, VA, NA, rural hosp,	Ð	May 15	Complete	Very little knowledge across the state
Analysis of variables and demographics	Ð	Jul 25	Complete	Large pockets of no coverage and high risk factors
Visual representation map	Ð	Dec 15		Initial maps showing large opportunity for education in the community health space
5 year strategic roadmap	Ð	Jan 15, 2024		Framework underway; Research lab 1st suggestion
Overall analysis	Ð	Feb 1, 2024	Not Started	Meeting to review first draft early January

Section Four: Next Steps

Our focus remains on crafting a visual representation of the dataset, a tool with immense potential to offer Colorado's leadership valuable insights into prevailing inequities throughout the state. This visual aid will be instrumental in guiding strategic decisions, ensuring informed choices regarding the allocation of public health strategies and resources. The overarching aim is to enhance the quality and effectiveness of prevention strategies, ultimately contributing to a healthier and more equitable Colorado.

We are well on track to deliver a strategic roadmap that outlines a comprehensive 5-year implementation plan. This roadmap integrates public policy and public health initiatives, forming a cohesive strategy. Key stakeholders in pivotal communities across the state are actively involved in this collaborative effort. By merging the expertise and perspectives of these stakeholders, we are poised to develop a robust plan that aligns with community needs and maximizes the impact of our initiatives over the next five years.

As more data gets uploaded into the GIS and the strawman framework for the 5-year strategy takes shape, we will deploy a comms plan to engage all stakeholders interested before final product presentation in Feb.

Section Five: Risk, Issues and Challenges

Initial access and communication challenges with community stakeholders have been resolved. The Summer holiday was making it difficult to get meetings with people, however, that's no longer an issue.

Risks and issues for this project are minimal. The state will be presented with a suggested road map alongside a tool that helps visualize what the problem gambling treatment coverage situation looks like across the community. There will be several suggested projects that the state undertakes at the end of this grant period and ultimately it will be up to them what they choose to proceed with and how those projects are administered and managed.

We don't anticipate any major issues with delivery of this project at this point unless unforeseen circumstances present in the last half of the project.



Section Six: Collaboration

Air Force Academy – this group is helping us with introductions in the community and knowledge they have on the Veteran population in the area.

Metropolitan State University – this group has helped with CMRF recruitment and supplied us with demographic data.

UC Health – this group will be consulted for strategy planning as their health network has deep reach across the state.

Intermountain Health – this group is being consulted and considered for referral capacity planning in the 5- year strategic plan.

Southern Ute Tribe – we have started talks with representatives of the Southern Ute Tribe to discuss what their communities may need and how what we are building can be of use to them as well.

Colorado Lottery – we have started talks with the CO Lottery mainly walking them through what the desired outcome of each grant is and exploring opportunities for them to get involved in promotion of services as well as how the information that will be provided through the GIS could also be of use to them.

Colorado Department of Behavioral Health Administration – They're being consulted and informed of the work we are doing across the community with these grants and will be consulted in the development of the 5-year strategy document.

Rocky Mountain Sports Betting Group – This group has been helpful with exposure of the grant programs and introductions to community leaders.

Rutgers University – Dr.'s Nower, Lister, and Van Der Mass have been critical in helping collect and validate data assumptions. Their team of researchers have been involved in the structuring of data to upload into the GIS and are assisting with the strawman 5-year strategic road map framework for final presentation.

Name:Signature and date:Dr. Nathan Smith, Executive DirectorDr. Nathan Smith09/01/2023



Executive Summary

Internal Grant Code:	KRI_CO2						
Project Name:	Colorado Military Problem Gambling Research, Education and Recovery Program						
Project Lead:	Dr. Nathan Smith						
Funding Opportunity Name	Colorado Division of Gaming Responsible Gaming Grants						
Funding Period	Apr 2023 – March 2024						
Report Submission Date:	September 1, 2023						
Grant Awarded:	\$362,700.00						
Budget Spend to Date:	\$114,655.46 KRI Colorado 2: Veterans Recovery \$ 310,000.00 \$ 130,435.00 \$ 114,655.46 \$ (15,779.54) Telehealth Care Program \$ 196,600.00 \$ 67,375.00 \$ 65,533.32 \$ (1,841.68) Tech \$ 38,400.00 \$ 27,060.00 \$ 24,772.14 \$ (2,287.86) CO MRF \$ 25,000.00 \$ 15,000.00 \$ 7,350.00 \$ (7,650.00) ROTC \$ 50,000.00 \$ 21,000.00 \$ 17,000.00 \$ (4,000.00) This programs budget is currently \$15,779.54 under budget, however, that is due to catch up here in the next quarter. The delay in spend is due to Summer season disrupting our original recruiting timeline for Militar Research Fellows as well as the delivery of the ROTC program across th Universities. With school administrators re-engaging comms mid-August, we're able to confirm that program adoption is on point and installation will be deployed over the remainder of the grant period.						

Section One: Summary

- 1. The purpose of this grant was to establish the following responsible and disordered gambling programs in the State of Colorado and to assist active Military:
 - a) Veterans Recovery Program (consisting of treatment, peer-support groups)
 - b) CO Military Research Fellowship
 - c) ROTC Education and Awareness Program
- 2. There will be several milestones achieved over the life cycle of this engagement:

Milestone 1 – COMPLETE (ON-GOING)

Set up and build web presence and social profiles for each of the CO programs proposed by May 15. Launch website and social media campaigns by June 1, 2023

Milestone 2 - COMPLETE

Establish a Colorado specific series of Veterans Peer Support Groups (3) that will run at different times throughout the week for 48 weeks per year and launch inaugural groups by June 1

Milestone 3 - COMPLETE

Establish a Colorado specific of Veterans Recovery Program through Kindbridge Behavioural Health which can service up to 100 Veterans and/or their families over the remaining 9 months of the '23 fiscal year.

Milestone 4 – COMPLETE (ON-BOARDING IN PROCESS)

Establish CO MRF curriculum and recruit and on board 2 to 4 Military Research Fellows

Milestone 5 – IN PROGRESS, DELAYED DUE TO SUMMER BREAK

Finish virtual training module and in-person ROTC training program. Have first 5 schools scheduled for first session by August 1, 2023

Milestone 6 - COMPLETE

Establish data collection methods and build instruments for each individual program by July 1, 2023

Milestone 7

Treat 50th Veteran by November 2023

Milestone 8

Train 5 ROTC programs by Dec 1, 2023

Milestone 9

Treat 100th Veteran by 15 February, 2024

Milestone 10

Military Research Fellows to collect and collate all data for final presentation across all programs with assistance from Dr. Smith by February 15, 2024



Section 2: Activities & Progress

Veteran Recovery Program

Veteran Peer Support Groups have been established and are now prepared to welcome participants. Additionally, complimentary individual therapy sessions are being offered, and the initial feedback from those who have undergone individual therapy has been promising.

Starting from September 1, a sequence of Google Ads is slated for launch to promote both the peer support groups and individual therapy options. A strategic combination of social media updates and upcoming blog posts have already been shared, with more content scheduled for release in the coming weeks.

We have had a Veteran related patient come into therapy in June 2023 and overall, we have seen improvements in their presenting problem, which was gambling. The patient also improved with symptoms of anxiety during this timeframe.

Visit: https://kindbridgeinstitute.org/veterans-recovery-program/ to see the full display of Veterans programs for Colorado Veterans.

Screenshots from website build out for CO Veterans Programs:



Anonymized outcomes tracking report for one of the Veteran program participants showing improved scores for Gambling Disorder and General Anxiety Disorder after 8 weeks of treatment:



CO MRF

Our engagement with local universities and veteran groups yielded favorable results, leading to the receipt of numerous expressions of interest online. The pool of applicants has been successfully narrowed down to four individuals under the supervision of Dr. Nathan Smith. Concluding interviews are scheduled for Monday, August 28, and a final decision is anticipated to be reached the subsequent day. Following this, the onboarding process will commence, and detailed biographies of the selected individuals will be provided.

Accepted Candidates:

Trenton Osinski is a retired Special Forces Engineering Sergeant who is currently working as a Peer Mentor Specialist at Colorado Motion, providing adolescents with essential life skills and therapeutic support, while pursuing a Master of Arts degree in Clinical Mental Health Counseling from the University of Colorado, Colorado Springs. His military journey began as a Combat Engineer in the United States Army, where he mastered construction, explosives handling, and minefield clearance. He later transitioned to the role of a Special Forces Engineering Sergeant where he provided invaluable expertise in areas such as Unconventional Warfare, Foreign Internal Defense, and Security Force Assistance. Trenton holds a Bachelor of Arts degree in Human Services from The University of Colorado, Colorado Springs.

Kunta Emory retired from the U.S. Navy after a career in Naval intelligence. He was deployed in support of Operation Iraqi Freedom, Operation Enduring Freedom, and Operation Northern Watch. While deployed, Kunta worked in the Educational Services Office onboard the Nimitz and took undergraduate coursework center in Psychology. As a civilian, he matriculated at Metropolitan State University of Denver with a self-designed major in International Relations and codified minor in Public Administration. He has a passion for serving the veteran community and enjoys travel. To further his interest in politics and law, Kunta works as an Election Judge and plans to attend graduate school in International Affairs and to study International Law.

ROTC Training and Education

The training content has been successfully finalized and integrated into our learning management system. Furthermore, we have completed the development of supplementary materials aimed at enriching the training experience.

Regarding the response timeline from schools, there was a delay due to the summer training break. This was an oversight during the initial scheduling process. However, we have now re-established communication and are actively engaged in the process of confirming training dates. Despite this temporary setback, we maintain our confidence in meeting the predefined milestones and delivering the training as originally planned.

Slides from ROTC training deck:





Section Three: Evaluation and Impact

KRI's evaluation process utilizes two outcomes: process goals and product goals. Process goals are all of the individual steps toward the creation of the final products. Product goals are the larger way-point goals that define the project.

Process goals for this grant include creation of web pages and social media posts; recruitment, training, and scheduling of clinical staff for the Veterans Peer Support Groups and Veterans Recover Program; updates made to the Military Research Associate Program curriculum for the Colorado Military Research Fellowship (CMRF); phone calls and meetings with university staff and veterans centers to recruit for the CMRF; development of materials for the ROTC training program; and phone calls and meetings to schedule university ROTCs for the ROTC training program.

Product goals completed to this point include Milestones 1, 2, 3, 4, & 6. Though we have but significant effort into our Process goals for Milestone 5, the Product goal has not been completed due to summer holidays preventing the scheduling of in-person trainings. The remaining Product goals include Milestones 5, 7, 8, 9, & 10.

The primary impact of the grant to this point is in the mental health treatment provided to Veterans in Colorado and the selection of veterans into the Colorado Military Research Fellowship. At the time of this report, 2 veterans are currently in care, 3 peer support groups are running, and 3 veterans have been selected as participants in KRI's military training programs (2 into the CMRF and 1 into the Military Research Associate Program). Secondary impacts include the awareness raised, conversations begun, information disseminated, and support built for the reduction of gambling harm to veterans in the state. These secondary impacts emanate from the advertising promoting the programs throughout the state and the dozens of meetings held with veterans and veteran serving organizations to discuss the strengths and needs of the community and the resources and opportunities available through the grant. We expect both primary and secondary impacts of the grant to grow exponentially in the second half of the grant as the foundational investment in the work done to this point continues to pay dividends.

Section Four: Next Steps

We will persistently promote the Veterans' recovery programs, alongside introducing Google Ads and Social Media campaigns starting in September. We will also be hosting virtual and in-person information sessions for VA's across the state to raise awareness on the programs starting in October as we head into the time of year where those needing care seek it most.

The COMRF participants have been selected and their onboarding process is starting now.

Voice over for the ROTC learning module is being completed now and University in-person training dates are being scheduled now that school is back in session.

Section Five: Risk, Issues and Challenges

The challenge to date has mainly been communication with the school ROTC leadership and pinning down dates that we can go deliver the in-person training. Now that school has commenced this is less of a problem. We've had to make some physical trips to the Universities to get comms flowing since emails and calls in some Uni's have been ignored, but now that we've shown face, it's looking like we will get this program into more ROTC programs than initially expected.

We initially had challenges recruiting the COMRF candidates, however, Metropolitan State University and Denver University both jumped on the opportunity to team up on the program and we have received more applications than we have spots for and have now selected two extremely promising candidates.

Promotion of the Vets treatment programs continue to be an issue. Administrative process and bureaucracy have stifled our efforts to reach the Veteran community through channels that we anticipated would already have a healthy pipeline of Veterans reaching out for mental health services that would be easy to screen for gambling disorder. That said, we made a pivot and started reaching out to collaborate with Retired SF groups across the state as well as the CO Lottery to help promote the programs and we've started seeing better success with placement of the program links on websites, print material distribution, etc. We are also re-routing spend on our Google Ads Grant account for 501c3's to promote the programs starting here in September and have brought on a social media group to build and execute campaigns that will run for the next 6 months to promote the service.

The biggest risk on this program is its lack of visibility out in the community. As we are experiencing, the more channels that are promoting the service, the more participants we can attract.

Section Six: Collaboration

Problem Gambling Coalition of Colorado – PGCC is hosting a webinar to help promote the Veterans services across the state in late October.

Colorado Department of Revenue – the Comms team here has helped with direct access to known Veterans groups across the state.

Colorado Lottery – they've listed the Veterans programs on their help page and have helped facilitate comms with major outlets across the state to promote the services.

Air Force Academy – *Vets services are being promoted and COMRF recruitment efforts are happening with AFA.*

Metropolitan State University – Vets services are being promoted and COMRF recruitment efforts are happening with MSU.

Denver University – Vets services are being promoted and COMRF recruitment efforts are happening with DU.

Name:	Signature and date:					
Daniel Umfleet, Vice-Chair & Secretary	09/01/2023 Daniel Umfleet					



Executive Summary

Internal Grant Code:	KRI_CO3								
Project Name:	Colorado Athlete Wellbeing Program								
Project Lead:	Trent Lambert								
Funding Opportunity Name	Colorado Division of Gaming Responsible Gaming Grants								
Funding Period	April 2023 – February 2024								
Report Submission Date:	September 1, 2023								
Grant Awarded:	\$215,389.00								
Budget Spend to Date:	\$87,240.83								
	KRI Colorado 3: Athlete Wellbeing	\$	197,170.00	Ś	104,027.12	Ś	87.240.83	Ś	(16,786.29)
	Training Sessions		60,960.00		17,417.12		-	\$	(17,417.12)
	eLearning Platform	\$	16,970.00	\$	16,970.00	\$	16,970.00	\$	-
	Colorado AWB App	\$	19,700.00	\$	19,700.00	\$	19,700.00	\$	-
	I&I Resources	\$	26,100.00	\$	26,100.00	\$	26,100.00	\$	-
	Care Path Plugin	\$	60,000.00	\$	20,000.00		20,000.00	\$	-
	Travel	\$	13,440.00	\$	3,840.00	\$	4,470.83	\$	630.83
	The CO AWB project is curren however, this is simply due to place yet. Scheduling these se holidays. Now that school is b scheduling so this spend will t	tly \$17,417. the in-pers essions was back in sessi	12 unde on traini delayed on these	er it. ing due ha	s projecte sessions i e to the so ive been e	ed i not cho eas	budget s t having ool Sumr sier to sta	pe ta ne	nd, ken r

Section 1: Summary

- 1. The purpose of this grant was to establish the Colorado Athlete Wellbeing program to protect athlete wellbeing. By providing them with educational-based resources, a Colorado Athlete Wellbeing app combined with a mental health assessment as part of the 'pathway to treatment', and specialized intelligence and investigative support to combat online sports wagering harassment.
- 2. Anticipated program milestones to be achieved during the grant period:

Milestone 1 - COMPLETE

Establish POC's at the 22 Colorado higher education institutes by May 15, 2023.

Milestone 2 - COMPLETE

Establish Colorado Athlete Wellbeing app business requirements by May 30, 2023.

Milestone 3 - COMPLETE

Prepare educational platform to provide Introductory Athlete Wellbeing video to Colorado higher education institutes by May 30, 2023.

Milestone 4 - COMPLETE

Deliver introductory Athlete Wellbeing video to Colorado higher educational institutes by June 30, 2023.

Milestone 5 – ON GOING

Schedule in-person workshops with Colorado higher educational institutes by July 15, 2023.

Milestone 6 - COMPLETE

Prepare in-person workshop materials by August 5, 2023.

Milestone 7 - COMPLETE

Deliver Colorado Athlete Wellbeing app by August 21, 2023.

Milestone 8 - PLATFORM COMPLETE, TO BE MADE AVAILABLE

Provide eLearning platform modules to Colorado higher educational institutes by August 21, 2023.

Milestone 9 - APP IS LIVE

Go-live with Colorado Athlete Wellbeing app on September 1, 2023.

Milestone 10 – DELAYED – SHEDULING ISSUES WITH UNI'S DUE TO SUMMER HOLIDAY

Complete first 5 in-person Athlete Wellbeing workshops by August 31, 2023.

Milestone 11 – WILL BE DELAYED AND ALL SUBSEQUENT TIMELINES READJUSTED

Complete first 10 in-person Athlete Wellbeing workshops by September 30, 2023.

Milestone 12

Complete first 15 in-person Athlete Wellbeing workshops by October 31, 2023.

Milestone 13

Complete first 20 in-person Athlete Wellbeing workshops by November 30, 2023.

Milestone 14

Complete all in-person Athlete Wellbeing workshops by December 31, 2023.



Section Two: Activities and Progress

App design work has been done, content has been loaded, and the app is ready for distribution.

The LMS is finished and ready to deploy.

Mental Health plug-in has been installed in the CO AWB App.

There have been several communications with most target schools. A dozen schools have indicated that they are interested in using the program. 5 schools have given a confirmed 'yes' that they want to install the program. The participating schools to date are as follows:

Colorado State University Metropolitan State University of Denver U.S. Air Force Academy University of Denver University of Northern Colorado

The only schools that have 'opted out' are University of Colorado and Regis. Colorado selected to continue running a similar program that they installed last year and didn't want to confuse the student body with new technology after they spent time, effort, and money to get their program in place. Regis opted out for religious reasons.

Presented at Rock Mountain Sportsbetting Club and fielded questions from potential participants.

Air Force Academy agreed to be the first school to utilize the program.

Local Denver FBI Unit agreed to receive data from app and investigate if a threat is deemed legitimate.

Screenshots from the CO AWB app:



Screenshots from the LMS:



Links to both platforms can be provided on request.

Section Three: Next Steps

Schedule school meetings.

Agree data sharing with CO fusion lab.

Deliver in-person educational component of program.

Start building reports based on usage and uptake.

Section Four: Evaluation & Impact

KRI's evaluation process utilizes two outcomes: process goals and product goals. Process goals are all of the individual steps toward the creation of the final products. Product goals are the larger way-point goals that define the project. Process goals for this grant include emails and phone calls to establish communications with points of contact at each eligible university, design and creation of the educational materials needed for the app, design and building of the app, creation of the in-person training materials, and emails and phone calls to schedule universities for the in-person training.

Product goals completed to this point include Milestones 1, 2, 3, 4, 5, 6, 7, & 9. For Milestone 8, we have completed the elearning platform, but are still in process of delivering the platform to university partners. For Milestone 10, the Product goal has not been completed due to summer holidays preventing the scheduling of in-person trainings. The remaining Product goals include Milestones 8, 10, 11, 12, 13 & 14.

The primary impact of the grant is in the education, mental health treatment, and harassment support and reporting tools provided to college athletes. Currently, we have created and are in the process of delivering the app and educational materials but have not presented in-person workshops to student athletes. We expect these workshops to be a driver of downloading and using the app. The Secondary impacts of this grant come from the contacts made with university personnel. These impacts include raising awareness, providing informal education, starting conversations, and building support around athlete mental wellbeing related to gambling harm. We expect both primary and secondary impacts of the grant to grow exponentially in the second half of the grant as the foundational investment in the work done to this point continues to pay dividends.



Section Five: Risk, Issues and Challenges

At this point the biggest risk is the schools not using the program and we collect little data due to this potential scenario. Every school will have access to the program along with instructions on how to deploy it. We are actively pinning down dates for in-person tutorials and trainings for the 5 schools that have said they will be using the program. We intend on doing press around the first batch of schools coming on board and we suspect that will cause some later adopters to schedule their in-person sessions.

The biggest challenge faced so far is getting the schools informed enough on the program to make the decision to engage. Summer holidays have slowed down comms heavily but now that school is back in session, we are seeing an increase in comms.

Section Six: Collaboration

The 5 schools that have opted in have all helped make the product better:

Colorado State University Metropolitan State University of Denver U.S. Air Force Academy University of Denver University of Northern Colorado

Sportradar – they've provided the tech that underpins the program and the LMS that houses the educational components as well as led much of the effort in liaising with the schools.

Kindbridge Behavioral Health – they've provided their mental health resources and care platform to help support the athletes that use the mental health component of the app.

Rocky Mountain Sportsbetting Club – they've helped promote the program with the Universities and Conferences.

Name: Signature and date:				
Daniel Umfleet, Vice-Chair	Daniel Umfleet			
	09/01/2023			



COLORADO Department of Revenue

Specialized Business Group—Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

Memo

To:	Colorado Limited Gaming Commissioners
From:	Kenya Collins, Director of Administration
CC:	Christopher Schroder
Date:	September 1, 2023
Re:	First Quarterly Grant Report

In accordance with applicable rules and regulations and as required by the grant agreement, the Division submits its first quarterly report for the responsible gaming grant awarded by the Colorado Limited Gaming Control Commission in furtherance of its illegal gaming awareness marketing campaign.

On April 27, 2023, the Colorado Limited Gaming Control Commission awarded the Division of Gaming a grant in the amount of \$330,000 for its illegal gaming awareness marketing campaign. On or about July 18, 2023, State administrative processes were completed, and the Division's contracted marketing agency (Forte Advertising) was given permission to begin work on the campaign.

On August 28, 2023, the Division met with Forte Advertising representatives to discuss an initial strategy for the marketing campaign. The following milestones have been amended to reflect Forte Advertising's actual start date on the campaign:

July / Aug 2023	Sept / Oct 2023	Oct / Nov 2023	Nov / Dec 2023	Dec 2023 – June 2024
♦ PO Provided	 Strategy Plan Development 	 Final Strategic Plan Presentation & Tactical Build-Out 	 Production Development & Trafficking 	 Campaign launch, execution and management
 Start Up Meetings Extraction, Discovery, Insights Development 	 Final Budget Allocations Based on Strategic Plan 	 Creative Development & Design, Final Presentation 	 ♦ Media Placement / Reporting Set Up 	 Tracking, Analysis, Optimizing & Reporting



COLORADO Department of Revenue

Specialized Business Group—Gaming 1707 Cole Blvd., Suite 300 Lakewood, CO 80401

As of August 2023, Forte Advertising has expended \$6875 of the awarded grant funds. (*See attached itemized spreadsheet*). Launch of the Division's marketing campaign is now planned for December 2023.

2023-2024 CO Illegal Gaming Awareness Campaign Budget Overview-Tracking As of Date: 8/31/2023 TOTAL BUDGET: \$330,000

	Acct. Mgmt	Disc/Insight	Strategy Devel.	Creative/Copy	Media Plan	Social Media/PR	Research/Report	Administrative	Hard Costs	Media Placement	TOTAL
Orig. Allocation	\$20,000.00	\$2,000.00				\$10,000.00	\$4,500.00	\$2,500.00	\$90,000.00	\$152,500.00	\$330,000.00
August	\$500.00	\$1,500.00	\$1,575.00	\$2,500.00	\$0.00	\$750.00	\$0.00	\$50.00	\$0.00	\$0.00	\$6,875.00
Balance	\$19,500.00	\$500.00	\$5,425.00	\$32,500.00	\$6,500.00	\$9,250.00	\$4,500.00	\$2,450.00	\$90,000.00	\$152,500.00	\$323,125.00