

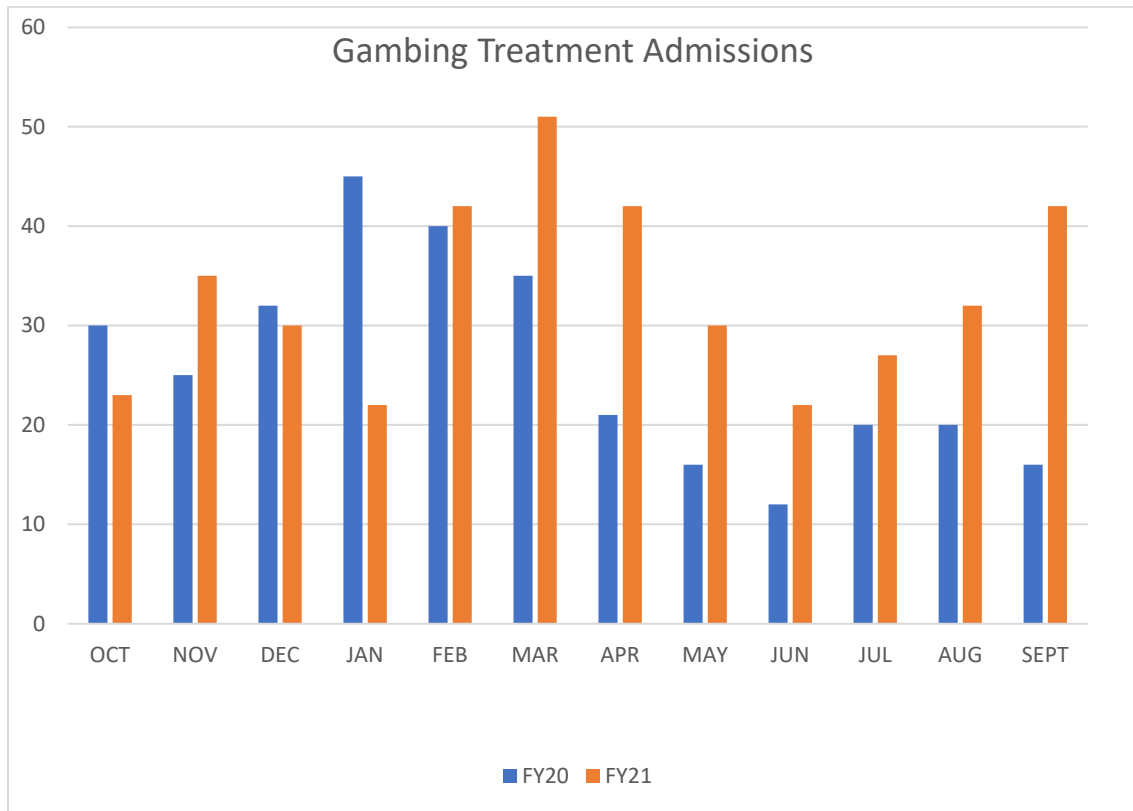


Additional access to online gambling and sports betting opportunities presents an increased risk for the development of gambling disorder.

Following is the FY21 Annual Gambling Disorder Report addressing :

Gambling Disorder Treatment Referral.....	1
Help-line Call Volume.....	2
Admissions.	3
Help-line Referral.....	3
Gambling Activity.....	4
Treatment Population Demographics.....	5
Prevention.....	6-7
Media Efforts.....	7

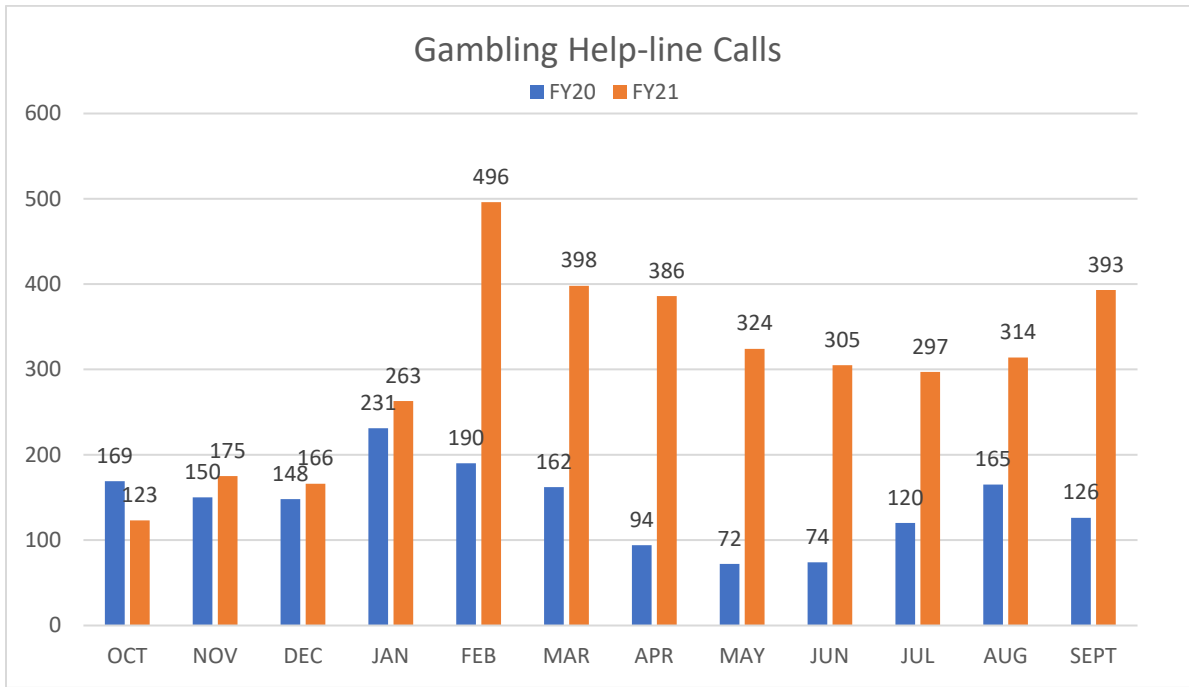
In the first year beyond the legalization of sports betting and online gambling, gambling treatment grew significantly.



The chart above demonstrates a 35% increase in treatment referral from FY20 – FY21.

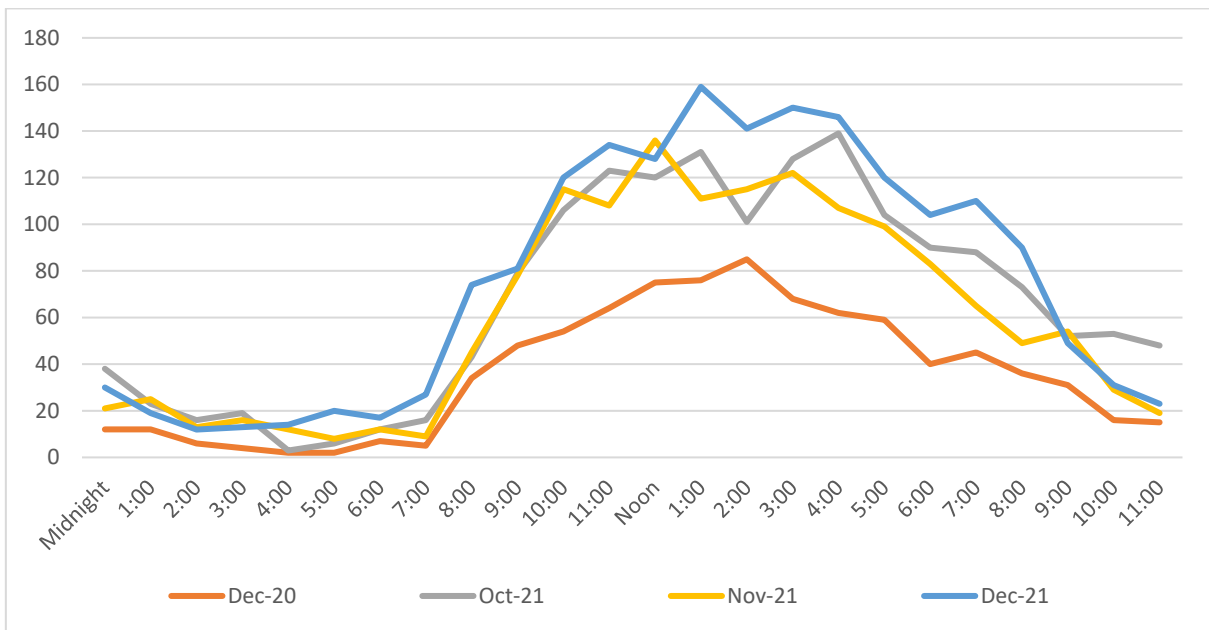
A statewide network of 37 licensed clinicians, with both clinical training and experience in treating individuals and families affected by gambling disorder, provided counseling services to 398 individuals, 40 Gambling Diversion program clients and 31 veterans were admitted to treatment during the fiscal year. Over the 77 individual who completed treatment in FY21, 95% have either substantially decreased their gambling or have remained abstinent.

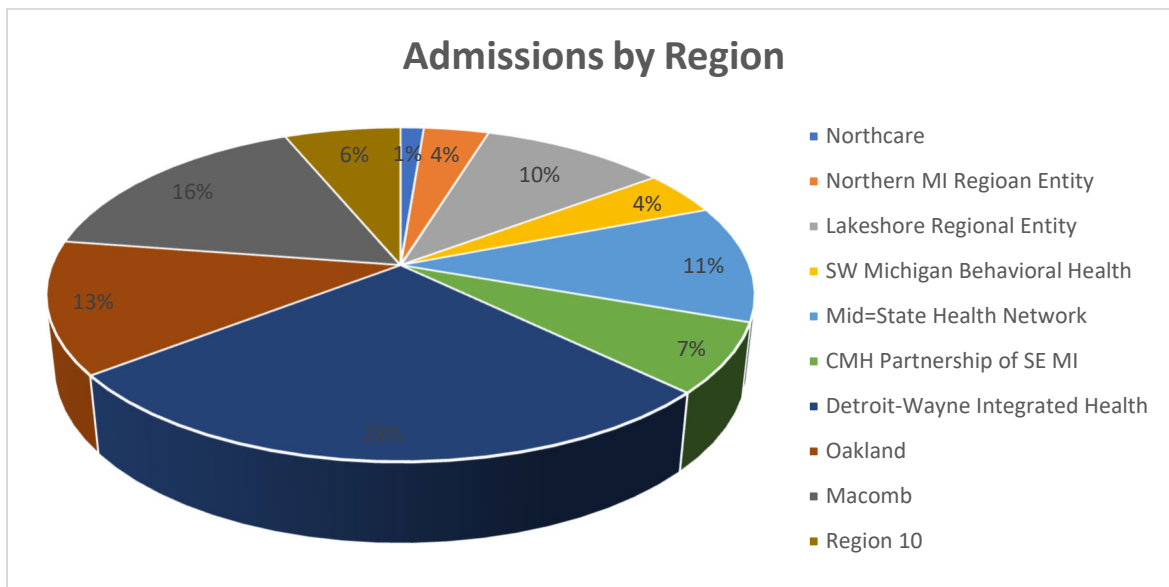
Efforts continue to provide residential gambling treatment services via the Gambling Disorder Residential Treatment Pilot. Through contract agreement, the Office of Recovery Oriented Systems of Care will support up to 30-days of residential treatment services per qualifying individual. The program is intended to address clients who require 24-hour, structured treatment, and recovery activities.



The toll-free Gambling Disorder Help-line continued to provide 24/7 accessibility to crisis intervention, assessment, and treatment referral. The chart above demonstrates help-line call volumes for FY21 that more than double those of FY20. 3,640 gambling related helpline calls were received during the fiscal year; including 347 referrals to Gamblers' Anonymous and/or Gam Anon, 189 on behalf of a family member and 197 who received real time crisis intervention. Remaining calls consisted of health insurance referrals, Lottery, casino, sports betting and online gambling inquiries, requests for other types of assistance and wrong numbers.

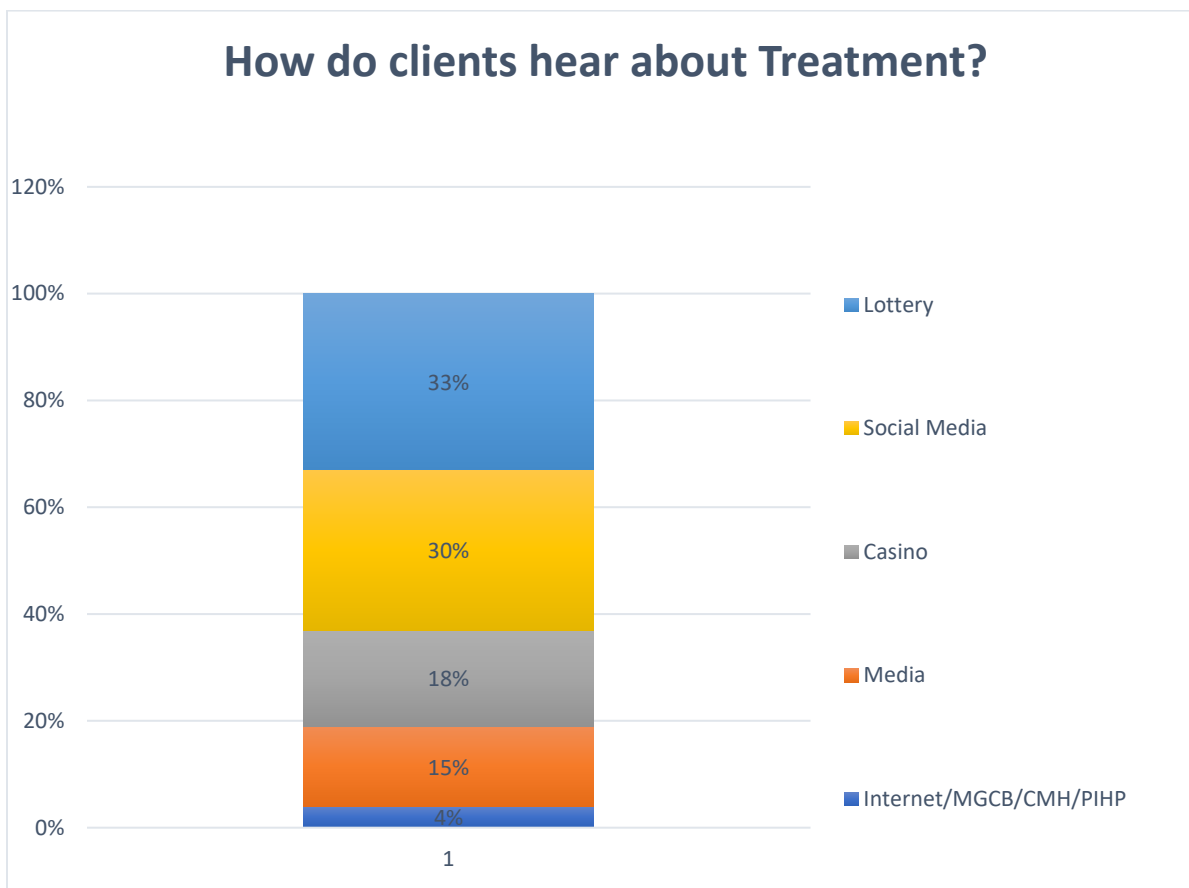
The chart below demonstrates an ongoing increase in help-line call volumes, resulting from the impact of both COVID-19 and the legalization of sports betting and online gambling from March of FY20 through December of FY22.



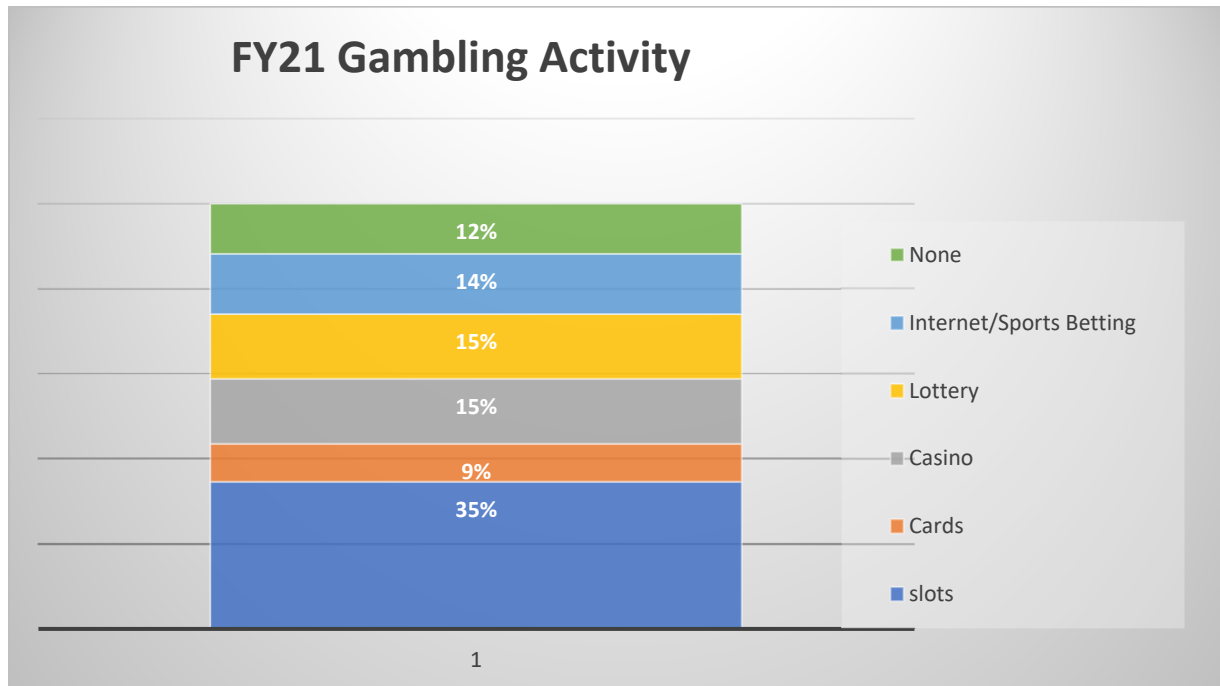


The chart above illustrates 398 treatment referrals for FY21. An increase of 28% from FY20. Regions including Detroit, Macomb, and Oakland counties, have the highest percentage of treatment referrals.

The chart below indicates Michigan residents most often learn of Gambling Disorder treatment services through information provided on the back of lottery ticket and social media campaigns.



Reporting requirements have been modified to capture online gambling, sports betting, and fantasy sports activity. The following chart indicates 14% of individuals referred to treatment as of January of FY21 identified one of the three as their gambling activity of choice. The primary gambling activity of choice by those referred to treatment continues to be slot machines and lottery.



Per the NCPG, Sports Betting and Online Gambling: A Potentially Volatile Mix The rate of gambling problems among sports bettors is at least twice as high as among gamblers in general. When sports gambling is conducted online, the rate of problems is even higher, with one study of online sports gamblers indicating that 16% met clinical criteria for gambling disorder and another 13% showed some signs of gambling problems. Concerns About Modern Sports Gambling Nearly half of American adults have bet on a sporting event. More and more are betting online, with 45% of sports wagering now taking place through the internet. Today's online sports betting is particularly concerning for several reasons:

- Access: internet gambling is available virtually all the time. o It's more convenient and provides more privacy
- o Early research shows that those who bet using mobile devices have higher rates of problem gambling.
- Live "In-Play" Betting: today's sports gamblers can bet on much more than just the winner of a game. o Sports gamblers can bet — during the game — on hundreds and potentially thousands of discrete events. Any aspect of a team or player's performance or activity that can be measured is now a potential wager. o This shortens the lag between bet and reward, increasing the speed and frequency of gambling, which increases the risk of problematic behavior

Demographics of Treatment Population: Race/Ethnicity and Age

Race	% Of Tx Population
African-American/Black	21%
Arabic/Arab-American	6%
Asian	3%
Caucasian/White	52%
Hispanic/Latin-American	1%
Multiracial	1%
Other	2%
Unknown/Declined	15%

Age	% Of Tx Population
12 -17	21%
18-29	6%
30-39	3%
40-49	52%
50 - 59	1%
60 - 69	1%
70 - 79	2%

\$3,544,911 was allocated in support of Gambling Disorder prevention and treatment. Utilization is as follow.

Gambling Disorder Fund Utilization		
a. Helpline/Treatment Services	26%	\$924,852
b. Training/Workforce Development	1%	\$30,855
c. Prevention	31%	\$1,126,404
d. Media Campaign	41%	\$1,462,800

Prevention – Gambling Disorder Prevention Coordinators continued to increase Gambling Disorder awareness, reduce youth and young adult engagement and increase GD helpline utilization. Social media campaigns were aligned with the 2021 Gambling Disorder Symposium theme, “Gambling Brought to Light”. Objectives included the impact of COVID-19, discussing the relationship between athletes and gambling, identifying gambling disorder among the military and veteran populations and the link between gaming and gambling.

Northcare serves Michigan's Upper Peninsula. Northcare continued to implement the Strategic Prevention Framework and partnered with Upper Peninsula Coalition to educate parents on the associated risks of online gambling.

Northern Michigan Regional Entity (NMRE) serves the twenty-one (21) counties in Northern Lower Michigan. NMRE implemented a media campaign to increase awareness and promote the Gambling Disorder helpline and treatment services. Ran by GO Media the campaign reached 21 counties with 539,273 impressions region wide and 605 'clicks'.

Lakeshore Regional Entity (LRE) serves the seven-county region of Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa counties. LRE partnered with Shelby State Bank and Health department 10 to distribute gambling print material at all 10 branches; including locations in Lake, Mason, and Oceana Counties. Completed two gambling prevention education videos with parental focus. Promoted gambling prevention for the Oceana Council on Aging.

Southwest Michigan Behavioral Health (SWMBH) serves the eight-county region of Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren. SWMBH increased gambling disorder screening at key treatment access points and implemented an evidence-based Disorder and sports betting awareness media campaign reaching 68,247; individuals with a total 869,150 digital impressions and 13,527,864 static impressions.

Mid-State Health Network serves 21 rural and urban counties in Michigan's lower peninsula. Mid-State worked with McDonald Broadcasting to create a media campaign reaching the entire 21-county region. Mid-State continues to focus on youth directed Gambling Disorder awareness.

CMH Partnership of Southeast Michigan (CMHPSM) serves the four-county region of Lenawee, Livingston, Monroe, and Washtenaw. CMHPSM continues to successfully utilize Gambling Disorder assessment tools during client assessment and intake with an overall compliance rate of 98%. CMHPSM worked with our ACCESS providers to provide information on the Gambling Disorder hotline in order to increase referrals to the Gambling Disorder hotline. They have created mini-Grant opportunities for youth focused gambling disorder prevention curriculum regionally and a regional media campaign focusing on youth and parents to increase awareness regarding youth gambling and loot boxes. The link will redirect to the CMHPSM's media campaign.

Detroit-Wayne Integrated Health Network (DWIHN) serves all of Wayne County. Detroit-Wayne and continues to partner with the Center for Youth and Families (CCMO), Empowerment Zone Coalition (EZC) and Leaders Advancing and Helping Communities (LAHC) to implement prevention programming that increases Gambling Disorder awareness.

Inter-Tribal Council of Michigan (ITC) – The ITC continues in their efforts to provide evidence based and culturally responsive gambling disorder services to American Indian/Alaskan Natives (AI/AN) ages 12 and older who are enrolled members of the twelve federally recognized tribes in Michigan, members of other federally recognized tribes, and non-Native family members and descendants living within the collective 51 county service area of the participating tribes. Gambling disorder assessment tools has been integrated into the behavioral health system.

Gambling Disorder Training –Health Management Systems of America provided trainings addressing gambling disorder, NODS assessment and treatment, youth gambling awareness, women and gambling disorder, gambling comorbidity, the financial impact of gambling, suicide intervention, and strengths-based approach to treating problem gambling. The Fundamentals of Basic Gambling Disorder Treatment training was rendered to total of 21 individuals. Training efforts were implemented addressing youth / young adult gambling and gaming

Gambling Disorder Symposium –

Gambling Disorder Resources – Materials are distributed by the Department of Health and Human Services Promotion Clearinghouse. Topics include: If You or Someone You Know has a Gambling Problem, Senior Gambling, Sports Gambling, and Youth Gambling. They are available in Spanish and Arabic.



Materials are available free of charge and are intended for Michigan residents, order at www.healthymichigan.com or call 1-800-353-8227. Some materials can also be downloaded at www.michigan.gov/bhrecovery, click on the link Resource Materials about Substance Use and Problem Gambling.

Advertising – Primary objective, urge people with a potential gambling disorder, and their families, of to call the Helpline or visit the website for more information. Secondary objectives encourage healthcare workers who work with people who suffer from gambling and/or other use disorders, to attend the Gambling Disorder symposium.

Primary target, Michigan residents aged 21-64 with or related to someone with Gambling Disorder. Secondary target, Michigan youth aged 13-21 who play or have access to online games.

52 weeks of radio spots and television spots through Michigan Cable Telecommunications Association (MCTA) and Michigan Association of Broadcasters (MAB). 12 weeks of sports programming. 24 weeks of Connected TV (Smart TV, Roku, Sling, Amazon, Xfinity, etc.). 12 weeks of outdoor displays (high-impact visuals near Michigan casinos). YouTube and Google Ads. 15 weeks of Gas Station TV in 801 total gas stations on 9,226 screens. 36 weeks of social media.

New advertisement creatives we developed in order to expand our target population and combat the online gambling and sports betting advertisements.