

GAMBLING BEHAVIORS AND ATTITUDES AMONG ADULT KANSANS



A 2012 Statewide Survey

Funded by and prepared for:

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For further information about the Kansas Department for Aging and Disability Services, Problem Gambling Services, contact:

Angela Hagen, Director
Division of Behavioral Health Services
Kansas Department for Aging and Disability Services
503 S. Kansas Ave.
Topeka, KS 66603-3404
Angela.Hagen@kdads.ks.gov

For further information about the content of this report, contact the project coordinator:

Doug Ballou
Managing Partner
WhitworthBallou, LLC
7701 NW Prairie View Road #19
Kansas City, MO 64151
816-719-4315
doug@whitworthballou.com

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Gambling Behaviors and Attitudes Among Adult Kansans

A 2012 Statewide Survey

Study Brief

The present study, funded by the Kansas Department of Aging and Disability Services (KDADS), was the first statewide study of adult gambling behaviors and attitudes since the opening of three state-owned casinos. Utilizing telephone survey methods, researchers interviewed 1,600 anonymous adults in late 2012. Respondents were randomly selected from landline and cell phone numbers located across the state. The survey findings give important information and insights into gambling behaviors and attitudes among some Kansans.

This survey found that 75% of survey respondents gambled in the past year, including 35% who played casino machine games such as slot machines, suggesting the rate of casino visitation among survey respondents is at least 30% higher than the national average. Similar to most U.S. states, almost half of respondents (45%) played lottery games in the past year.

Nearly half (44%) of respondents gambled in the past 30 days, and among this group of recent gamblers, more than one in 18 said they bet more than they could afford to lose, and a greater number wanted to cut back on the amount of time or money spent betting (one in 14). When recent gamblers were asked if they thought they had a gambling problem, one percent said that “most of the time” they feel they “have a problem with gambling,” and six percent said “sometimes.”

The consequences of problem gambling can be emotional, physical, and financial. These consequences can extend to the friends, families, co-workers and even the employers of those affected. About 26% of survey respondents said they have been personally affected by the gambling of others.

Responses to survey questions evaluating public awareness suggest that many Kansans are likely unaware of problem gambling resources and treatment services. About 28% of survey respondents said they knew of the statewide problem gambling helpline, and 29% of respondents said they knew of some treatment options in their community.

While most people who gamble do so without experiencing or causing harm, it is clear that a sizeable portion of respondents have been negatively impacted by problem gambling, and respondents showed widespread support to address the problem. Most respondents said they believe it is either “very important” or “important” to use public funds to make problem gambling treatment available and affordable (98%) and to educate young people in school about the risks of gambling (81%).

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Gambling Behaviors and Attitudes Among Adult Kansans

A 2012 Statewide Survey

Executive Summary

This report presents the findings of a statewide survey of gambling participation, attitudes, and gambling-related problems in Kansas. The main purpose of this survey was to estimate the scope of at-risk gambling statewide and within defined gaming zones. The results of this study provide information about problem gambling awareness, attitudes toward gambling and problem gambling services, and information about how problem gambling is impacting Kansans. Survey findings will be useful to State agencies and other stakeholders in efforts to mitigate gambling-related harm in Kansas.

Methodology

The present study was coordinated by WhitworthBallou, LLC and funded by the Kansas Department of Aging and Disability Services. In October and November 2012, a statewide telephone survey of 1,600 adults was conducted with randomly selected landline and cell phone numbers stratified across the state. All telephone calls were made from a central location to insure quality of the data collection.

The survey began with three demographic questions – two of which were quota-based. Respondents were first asked for their age, and those who were under 18 were thanked, and the call was terminated. Second, each potential participant was asked for county of residence. The state is divided into four zones by county – northeast, south-central, southwest and the rest of the state – with 400 completed interviews specified for each region. County of residence information allowed the interviewers to pinpoint which zone the respondent would fit into, therefore determining when quotas had been met.

Respondents were asked to define their racial/ethnic group, using a list of definitions provided to them. The first two questions (age and location of residence) were quota items; the racial/ethnic question was information that was collected from participants, rather than a factor that was subject to quota. The exception was in the southwest zone, where a floor of 133 Hispanic/Latino respondents was specified, to ensure accurate representation from this group.

Certain limitations should be considered when examining survey data. The survey was restricted to adults living in households with telephones. Face-to-face interviews generally yield more candid responses than phone interviews, and this effect has been observed in other gambling surveys. The survey had an above-average response rate, but even so, generalization of the results may be limited, especially when drawing inferences based on subgroups consisting of fewer than 20 respondents. Another limitation is that participation in the survey by male respondents was lower than anticipated based on population data.

Gambling in Kansas

- Seventy-five percent (75.4%) of respondents endorsed at least one past-year gambling activity.
- According to the American Gaming Association, about one-quarter (27%) of the U.S. adult population visited a casino during 2011.² This survey found that 35% of respondents played casino machine games in the past year, suggesting the rate of casino visitation in Kansas might be higher than the national average.
- Past-year participation of state lottery play was reported by 45% of respondents, a rate that is on par with national past-year lottery play participation rates (54%).³
- Of the 44% of respondents that gambled in the past 30 days, the types of gambling that respondents identified as their favorite were:
 - Casino gaming, slot machines, video poker, video blackjack, etc. (48%)
 - State or multi-state lottery games, scratchers tickets or pull-tabs (19%)
 - Playing cards for money or possessions with family or friends (7%)
 - Casino table games, such as poker, roulette, craps or blackjack (10%)
 - Bingo for money or prizes (6%)
 - Betting on games of personal skill, such as pool, bowling, basketball, etc. (3%)
- Internet gambling and betting on horse racing were the least preferred forms of gambling of those sampled. No one sampled reported that they preferred to gamble on the internet.
- Of the surveyed Kansans that gambled, 67% have gambled at casinos located in Kansas. Of this group, 38% reported that they were members of the casinos' loyalty programs.
- About one in three Kansans surveyed (33%) reported having received promotional material from Kansas casinos.

Public Attitude Toward Gambling

- Of the respondents that gambled in the last 30 days, one in seven (14%) indicated an important reason they gamble is to win money to use for paying bills. Data from his study found that gamblers who view gambling as a potential source of money for life's essentials are far more likely to experience trouble with gambling.
- Just over half of those surveyed (53%) agreed with the statement that "Gambling is a harmful form of entertainment". Further, 65% agreed with the statement that "Gambling is dangerous for family life". This was contrasted with the 29% that agreed with the statement that "On balance, gambling is good for society" and 27% that agreed with the statement that "Gambling is an important part of cultural life."
- Of the respondents that "either seldom or never" gambled, 84% reported they simply "were not interested in gambling", 79% did not gamble due to the "possibility of losing money", and nearly half (47%) of this group expressed "moral or ethical concerns about gambling" as an important reason for seldom or never gambling.

Problem Gambling

- Forty-four percent of respondents gambled in the past 30 days. A series of nine problem gambling screening questions were asked of this group. Approximately 19% of this group responded "yes" to at least one of these nine questions. Positive endorsement of just one problem gambling screening question suggests the person is at heightened risk for developing a gambling problem.

Those problem gambling screening questions receiving the most endorsements were:

- Have you ever thought you might want to cut back on the amount of time or money you spend on betting or wagering? (7%)
 - Have you ever bet more than you could afford to lose? (6%)
 - Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling ventures or bets? (7%)
 - Have you ever lied to family members, friends or others about how much you gamble, or how much money you lost gambling? (6%)
- Although this study did not include a diagnostic instrument to assess problem gambling prevalence, the range of endorsements to problem gambling screening questions suggests that there may be a number of persons considered at-risk for problem gambling. When

respondents were asked directly if they thought they had a gambling problem, one percent said that “most of the time” they felt that they “have a problem with gambling,” and six percent said “sometimes,” suggesting some level of concern among thousands of Kansans if these results were extrapolated to the state population.

- Several links were found between casino patronage and problem gambling risk.
 - About one-fifth (21%) of respondents who endorsed casino machine games (slots, video poker, etc.) as their favorite form of gambling also replied “yes” to at least one problem gambling screening question.
 - About one-third (32%) of respondents that patronized a casino in the past 30 days endorsed one or more problem gambling screening questions, suggesting a large portion of casino gamblers are at heightened risk of having a gambling disorder or developing one.
 - There is a strong correlation between endorsing problem gambling screening questions and membership in casino groups. More than one third of all respondents who were casino club/program members may be considered at heightened risk for manifesting or developing a gambling problem.
- About 26% of respondents have been personally affected by the gambling of others. The consequences of problem gambling are emotional, physical, and financial. These consequences can extend to the friends, families, co-workers and even the employers of those affected. When asked to identify the relationship of the person whose gambling personally affected them, 13% said a family member, 14% said a friend, and 8% said anyone else they know, such as a co-worker.
- The African American community appears to be impacted more by problem gambling than other ethnic groups. One in five African American survey respondents reported being personally affected by the gambling behaviors of a family member, a rate 60% greater than among Caucasian survey respondents.

Gambling Treatment Awareness

- Responses to survey questions evaluating public awareness suggest that many Kansans are likely unaware of problem gambling resources and treatment services. About 28% of survey respondents said they knew of the statewide problem gambling helpline, and 29% of respondents said they knew of some treatment options in their community. Twenty-one percent of respondents said they believe gambling treatment does not work.

ⁱ Based on the 2012 U.S. Census Bureau estimate, there are 2,158,657 adults living in Kansas. The present study found that 44.43% of adults gambled in the past 30 days, and from this group, 6.31% stated “most of the time” or “sometimes” they felt they had a gambling problem. $2,158,657 \times .4443 \times .0631 = 60,519$

- More than two thirds of respondents (71%) felt they were extremely or moderately confident they could recognize the signs of problem gambling in a person close to them, and about the same proportion perceived problem gambling as a behavior disorder (67%).
- When dealing with a personal gambling problem, respondents indicated they first seek assistance from a “Spouse, family member, significant other” (31%); “Call the gambling helpline” (18%); “Minister/Clergy” (10%). When dealing with the gambling problem of someone they knew and asked where you would turn to for assistance, the response “Don’t know” (14%) was the third most frequently mentioned response. These data confirm that awareness of assistance options remains limited, regardless of whether one’s own self is the target of assistance, or someone else.
- Just over half of all respondents (56%) indicated they had seen or heard information regarding assistance for problem gamblers. The nature of the information they recalled varied considerably. Most recalled messaging from a variety of sources; these included billboards, flyers, television, radio, brochures, newspapers, 1-800 numbers, etc. Some mentioned posters on slot machines at the casinos.

Public Support for Problem Gambling Services

- Survey respondents were asked how important they thought it was to use gambling proceeds for services and programs to address problem gambling. This study found strong public support for using gaming revenues to make treatment and prevention available and affordable. Below are the percentages of respondents that felt using public funds to support the services were either “very important” or “important”:
 - For advertising that informs the public that gambling treatment is free and confidential (94%)
 - For advertising that promotes the problem gambling helpline (91%)
 - To make problem gambling treatment available and affordable (92%)
 - For advertising that educates the public on the signs and symptoms of problem gambling (83%)
 - To educate young people in school about the risks of gambling (81%)
 - Provide information to seniors about the problems that gambling can cause (78%)
 - To provide information to adults about how they can gamble responsibly (64%)

Summary & Conclusions

The 2012 statewide survey of gambling behaviors and attitudes among adult Kansans documented that while gambling participation among respondents was high, problem gambling awareness was low, and many adult Kansans have been negatively impacted by problem gambling. This survey found that 75% of survey respondents gambled in the past year, including 35% who played casino machine games such as slot machines, suggesting the rate of casino visitation among survey respondents is at least 30% higher than the national average. Similar to most U.S. states, almost half of respondents (45%) played lottery games in the past year.

Nearly half (44%) of respondents gambled in the past 30 days, and among this group of recent gamblers, more than one in 18 said they bet more than they could afford to lose, and a greater number wanted to cut back on the amount of time or money spent betting (one in 14). When recent gamblers were asked if they thought they had a gambling problem, one percent said that “most of the time” they feel they “have a problem with gambling,” and six percent said “sometimes.”

The consequences of problem gambling are emotional, physical, and financial. These consequences can extend to the friends, families, co-workers and even the employers of those affected. The survey found that about 26% of respondents have been personally affected by the gambling of others.

Responses to survey questions evaluating the public’s awareness of problem gambling services suggested that there is a need for further outreach and education to let people know about treatment services available at no out-of-pocket cost. In addition, some respondents indicated that they do not believe problem gambling treatment is effective. More outreach efforts may be needed to combat this perception.

While most people who gamble do so without experiencing or causing harm, it is clear that a sizeable portion of respondents have been negatively impacted by problem gambling, and respondents showed widespread support to address the problem. Most respondents said they believe it is either “very important” or “important” to use public funds to make problem gambling treatment available and affordable (98%) and to educate young people in school about the risks of gambling (81%). With information collected from this survey, KDADS and other stakeholders will be able to advance their efforts to prevent and treat problem gambling with evidence of need and public support.

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Gambling Behaviors and Attitudes Among Adult Kansans

A 2012 Statewide Survey

Detailed Report

This report begins with background information about gambling in Kansas, problem gambling services in Kansas, and the development of this study. Following a description of the survey methods and definitions in Sections 2 and 3, the report is organized according to the ordering of the actual survey questions that were presented to the survey respondents. Detailed survey data for each numbered question is provided along with “cross tabs” or response analysis according to variables of interest, such as geographic zone, ethnic background, and/or problem gambling risk group. The second to last section of the report consists of a discussion of the implications of the findings with special consideration for how the findings can be used to guide problem gambling prevention, awareness, and treatment efforts. The final sections provide a description of the strengths and limitations of this study followed by a summary and conclusions.

Section 1

Introduction

Legalized Gambling In Kansas

Kansas has experienced a renaissance in legalized gambling beginning in 1987 with the launch of the Kansas Lottery, the opening of four tribal casinos in the late 1990s, and the 2007 Kansas Expanded Lottery Act which authorized one casino in each of four designated gaming zones:

- Northeast Kansas Gaming Zone — Wyandotte County.
 - The Hollywood Casino at Kansas Speedway opened in 2012. It has 40 table games and 12 poker tables, as well as 2,000 electronic machines and four restaurants.
- South Central Kansas Gaming Zone —Sedgwick and Sumner counties.
 - The Kansas Star Casino opened in 2011. It has more than 1,300 slots and 32 table games.
- Southwest Kansas Gaming Zone — Ford County.
 - The Boot Hill Casino opened in 2009. It has 584 slot machines and 12 gaming tables, plus a snack bar, casual dining restaurant with service for 150, saloon and general store.

- Southeast Kansas Gaming Zone — Crawford and Cherokee counties.
 - No casino. Although managers showed interest, the casino was never built in the region.

Additionally, Kansas law permits non-profit, religious, educational, charitable, fraternal and veterans' organizations to conduct bingo games.

Problem Gambling Services

The Problem Gambling and Other Addictions Fund was established by Kansas Legislature to designate two percent of the revenue from state-owned casinos for the prevention and treatment of problem gambling and other addictions. The fund began to receive funds following the opening of the first state-owned casino, the Boot Hill Casino and Resort, in December of 2009. In 2010, KDADS developed a contract with Value Options of Kansas (VO) to manage a network of certified gambling counselors, developed the infrastructure for a problem gambling treatment system and began subsidizing gambling treatment for problem gamblers and their concerned others in February of 2011. During the first 14 months treatment services were offered, the problem gambling helpline received 304 calls for help, and 178 clients were treated. As of FY12, there were 27 problem gambling treatment agencies and private practitioners in the VO network.

In addition to direct gambling treatment services, KDADS served as the catalyst for the development of three Problem Gambling Community Task Forces and has hired three Problem Gambling Specialists to assist each of these Community Task Forces. These Task Forces primarily serve to raise community awareness of problem gambling, including educating their communities that gambling treatment is available. Television and radio problem gambling awareness ads have also been created and aired as public service announcements.

This survey was funded from the KDADS problem gambling services budget to help inform problem gambling prevention and treatment efforts by gathering information on gambling behaviors, knowledge, and attitudes among Kansas' adult population. This survey represents the most comprehensive Kansas state-wide gambling survey to date and is designed to better inform KDADS administrators and KDADS funded providers as they develop problem gambling treatment and problem gambling prevention services.

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Section 2

Survey Implementation

In the Fall of 2012, KDADS commissioned the Kansas City, Missouri company of WhitworthBallou, LLC to conduct a comprehensive statewide telephone survey to gain a better understanding of the general Kansas adult population's behaviors, attitudes and beliefs related to gambling. KDADS was particularly interested in detecting differences between geographical areas within Kansas. Data gathering was subcontracted to Patron Insight, a Stilwell, Kansas based research group, and survey instrument development was assisted by KDADS problem gambling services consultant, Problem Gambling Solutions, Inc. The survey was modeled after a similar effort in Iowa, conducted by the University of Northern Iowa's Center for Social and Behavioral Research.¹

In October and November 2012, a statewide telephone survey of 1,600 adults was conducted with randomly selected landline and cell phone numbers located across the state, divided into four zones – three of which, in general, constituted the northeast, south central, and southwest regions, while the fourth zone was the balance of the state. The specific counties in each zone are detailed in Table 1.

The survey began with three demographic questions – two of which were quota-based. Respondents were first asked for their age, and those who were under 18 were thanked, and the call was terminated. Second, each potential participant was asked for county of residence. The state had been divided into four zones by county – (generally speaking) northeast, south central, southwest, and the rest of the state – with 400 completed interviews specified for each region. The county of residence information allowed the interviewers to pinpoint which zone the respondent would fit into and, therefore, to determine if the quota had been met.

Those who lived in a zone where there was still room under the quota when they were contacted were then asked to define their racial/ethnic group, using a list of definitions provided to them. While the first two questions (age and location of residence) were quota items, the racial/ethnic question was information that was merely collected from those who chose to participate, rather than a factor that was subject to quota. The lone exception was in Southwest, where a floor of 133 Hispanic/Latino respondents was specified, to ensure accurate representation from this group.

Results for the statewide data had a 3% margin of error at the 95% confidence level; this means that the true population estimate is within 3% of the reported findings, with 95% confidence.

In reviewing survey data, it is important to keep in mind that questions with percentages may total more or less than 100%, due to rounding. (Certain questions – where multiple answers were permitted – will total to more than 100 %.)

By way of analytical convention, and for the ease of the reader, the zone designations used throughout this report are presented in Table 1.

Table 1. Definition of Zones as Used in this Study

Zone	Region	Kansas Counties
1	Northeast	Brown, Doniphan, Atchison, Jackson, Leavenworth, Jefferson, Shawnee, Douglas, Wyandotte*, Johnson, Osage, Franklin, Miami
2	South Central	Barton, Rice, McPherson, Marion, Butler, Harvey, Reno, Stafford, Pratt, Kingman, Sedgwick, Harper, Sumner*, Cowley, Barber
3	Southwest	Lane, Ness, Rush, Pawnee, Hodgeman, Finney, Ford*, Gray, Haskell, Seward, Meade, Clark, Comanche, Kiowa
4	Balance of State	See pages 10 and 11 for list of counties in Balance of State

* Counties with state owned casino.

Statistical Methodology

This study took the utmost care to produce accurate and usable results. It is important for the reader to understand the statistical methodology, which was used for the computations in this report.

To better reflect the behaviors and attitudes of Kansans as a whole, the results for “Kansans Overall” were weighted by county population, such that an under or oversampling of persons from a particular county would not bias the results. No other weighting was used as it was deemed that the sample fell within acceptable deviations in respect to other demographic information.

When rounding was needed the IEC 60559 standard was used.

Pearson’s chi-squared test for count data was the statistical test performed for all tables in this report. All tests did not include the “Don’t Know”, “Not Sure”, or other such categories unless there was enough data to include them in the testing procedures. Results found to be significant were deemed to be so at the 0.05 significance level. Some results were significant but the Yates correction method was used to calculate these p-values. Yates correction was used when the responses in at least one factor level were too sparse to satisfy the assumptions of Pearson’s chi-squared test. The p-values calculated with this method have been adjusted for the smaller sample sizes. Results which were “Not testable” were cases where there was not enough data available to carry out the chi-squared test. Care should be taken when making comparisons in such cases.

All computation was carried out in the statistical software program R (v2.15.0). The code used to produce the results in this report is available upon request.

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Section 3

Defining & Measuring Problem Gambling Risk

Problem Gambling Terminology

An important aspect of this study was to provide estimates of the numbers of persons at various risk levels for problem gambling and seek relationships between problem gambling risk and a number of variables. One challenge when discussing “problem gambling” is the lack of standardization of terminology in the field. Various terms have been used to describe problem gambling, including ‘disordered gambling’, ‘compulsive gambling’, ‘addictive gambling’, and ‘pathological gambling’. The term ‘problem gambling’ is typically used in the most general sense. It is often used to include the idea of pathological gambling as well as less severe forms of disordered gambling. For use in this study, the term **‘problem gambling’** is defined as: *“Problem Gambling is characterized by difficulties in limiting money and/or time spent on gambling which leads to adverse consequences for the gambler, others, or for the community.”*⁵ Essentially, a problem gambler is someone with a pattern of excessive gambling, impaired control over his or her gambling behavior, significant negative consequences deriving from this impaired control, and persistence in excessive gambling despite these negative consequences. Problem gambling is assumed to have varying degrees of severity, ranging from mild, moderate to severe. During the period this study was conducted, severe problem gambling was formally recognized by the American Psychiatric Association (APA) as clinical **‘pathological gambling’** if the gambler met certain diagnostic criteria. Pathological gambling is a condition with sufferers exhibiting many similarities to those who have substance addictions.⁶ In May of 2013, the APA released a new edition of the Diagnostic and Statistical Manual (DSM) 5.0, where Pathological Gambling has been renamed Gambling Disorder and had been reclassified from an Impulse-Control Disorder to an Addictive Disorder.⁷

Problem Gambling Risk Indicator Categories

In certain analytical situations, survey findings are reported according to three problem gambling risk categories. The problem gambling risk categories were developed based on survey responses to specific behaviors, beliefs, and attitudes toward gambling. Because all gamblers are at some level of risk of developing a gambling problem, even those respondents who did not endorse any problem gambling screening question were classified within a risk category, specifically “low risk.” The other two risk categories, “moderate risk” and “high risk” were defined based upon participant responses on nine problem gambling screening questions (See Table 3).

Table 2. Problem Gambling Risk Categories

Risk Category	Number of “positive” responses to problem gambling screening questions
Low	No “positive” (Yes) response to any problem gambling screening question
Moderate / Mid	One to three “positive” responses per respondent
High	Four or more “positive” responses per respondent

Endorsement of any problem gambling screening question suggests a heightened risk for problem gambling development or manifestation. As the number of endorsements increase so does the risk for developing or manifesting a gambling disorder. The “low, moderate, and high” risk categories used in the present study were chosen to categorize groups rather than to describe actual risk. That is, if a person endorsed three problem gambling screening questions, although they are categorized in the “moderate” or “mid” risk group, their actual odds of manifesting a gambling disorder are considerable. This can be exemplified by research on the NODS CLiP.⁸ The NODS CLiP is derived of a subset of questions from the 17-item NORC Diagnostic Screen for Gambling Disorders (NODS), a validated DSM-IV-based instrument.⁹ Toce-Gerstein, Gerstein, and Volberg (2009) found that three NODS questions pertaining to loss of Control, Lying, and Preoccupation (the “CLiP”), identified virtually all pathological gamblers and most problem gamblers diagnosed by the complete NODS. In the present study, all three NODS CLiP questions were included, two verbatim and one paraphrased, in the set of nine problem gambling screening questions. The NODS CLiP questions are:

- *Have you ever tried to stop, cut down, or control your gambling?*
- *Have you ever lied to family members, friends or others about how much you gamble or how much money you lost on gambling?*
- *Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling ventures or bets?*

Research on the NODS CLiP found that if a person endorsed any of the three questions, there is an 88% probability that he or she has or had a gambling disorder.⁸

The problem gambling screening questions used in this survey were derived from two problem gambling screening instruments, the 17-item NORC Diagnostic Screen for Gambling Disorders (NODS)¹¹ and the 9-item Problem Gambling Severity Index (PGSI).¹⁰ Although examining for the prevalence of problem gambling was an important component of this survey, the greater purpose was to assess public behaviors and attitudes towards gambling from a much broader perspective. Therefore, the survey was designed to be exploratory rather than precise within any single area of inquiry. For this reason, the complete NODS and PGSI instruments were not utilized. If these instruments had been added to the survey, the overall survey length would have been substantially longer, leading to concerns over respondent fatigue.

Table 3. Problem Gambling Screening Questions

Problem Gambling Screening Question	Source
Have you ever bet more than you could afford to lose?	<i>Variation of question # 1 from PGSI</i>
Have people ever criticized your betting or told you that you have a gambling problem, regardless of whether or not you thought it was true?	<i>PGSI, question #6</i>
Has your gambling ever caused you any health problems, such as stress and anxiety?	<i>Variation of question #8 from PGSI</i>
Have you ever thought you might want to cut back on the amount of time or money you spend betting or wagering?	<i>Variation of question #1 from NODS CLiP</i>
Have you ever lied to family members, friends or others about how much you gamble or how much money you lost gambling?	<i>Question #2 from NODS CLiP</i>
Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling ventures or bets?	<i>Question #3 from NODS CLiP</i>
Has your gambling ever caused serious or repeated problems in your relationships with any of your family members or friends?	<i>Variation of question #12 from NODS</i>
Has your gambling ever interfered with your productivity, such as missing time from work or school, or having it interfere with your performance while at work or school?	<i>Variation of questions #13 & #14 from NODS</i>
How often have <u>you</u> felt you have a problem with gambling?	<i>Question #5 from PGSI</i>

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Section 4

Demographics

Question 1: First of all, because we want to make certain we have people of different ages participating in this study, can you tell me which of the following ranges includes your current age? Choices were read to respondents. Anyone who said he or she was under 18 was thanked, and the interview was terminated.

Table 4. Participant Ages by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Under 18	0%	0%	0%	0%	0%
18 to 24	8%	9%	10%	8%	7%
25 to 34	14%	16%	17%	18%	17%
35 to 44	17%	18%	18%	20%	20%
45 to 54	23%	20%	20%	19%	18%
55 to 64	16%	19%	18%	17%	20%
65 and older	22%	18%	16%	17%	17%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region (p-value=0.9892)

Table 5. Participant Ages by Risk Category

Response	Low Risk (n=1420)	Moderate Risk (n=164)	High Risk (n=16)
Under 18	0%	0%	0%
18 to 24	8%	12%	0%
25 to 34	16%	22%	19%
35 to 44	18%	27%	50%
45 to 54	20%	16%	19%
55 to 64	19%	17%	12%
65 and older	19%	6%	0%
Refused (not read)	0%	0%	0%

Results could not be tested for statistical significance due to low number in high risk category

Notable finding: Based upon these correlations, gamblers ages 35 to 44 represent the age group with the largest proportion of problem gambling indicators as determined by responses to the problem gambling screening questions.

Question 2: Could you also please tell me the name of the county in Kansas where you live?

Table 6: Participant Distribution by Zone and County of Residence

Zone 1 (Northeast)		Zone 2 (South Central)		Zone 3 (Southwest)	
County	Number of respondents	County	Number of respondents	County	Number of respondents
Atchison	23	Barber	9	Clark	11
Brown	15	Barton	23	Comanche	9
Doniphan	19	Butler	34	Finney	93
Douglas	31	Cowley	36	Ford	108
Franklin	24	Harper	24	Gray	14
Jackson	12	Harvey	50	Haskell	10
Jefferson	19	Kingman	22	Hodgeman	8
Johnson	73	Marion	10	Kiowa	19
Leavenworth	32	McPherson	41	Lane	11
Miami	21	Pratt	16	Meade	15
Osage	9	Reno	13	Ness	22
Shawnee	68	Rice	10	Pawnee	13
Wyandotte	54	Sedgwick	72	Rush	27
		Stafford	13	Seward	40
		Sumner	27		

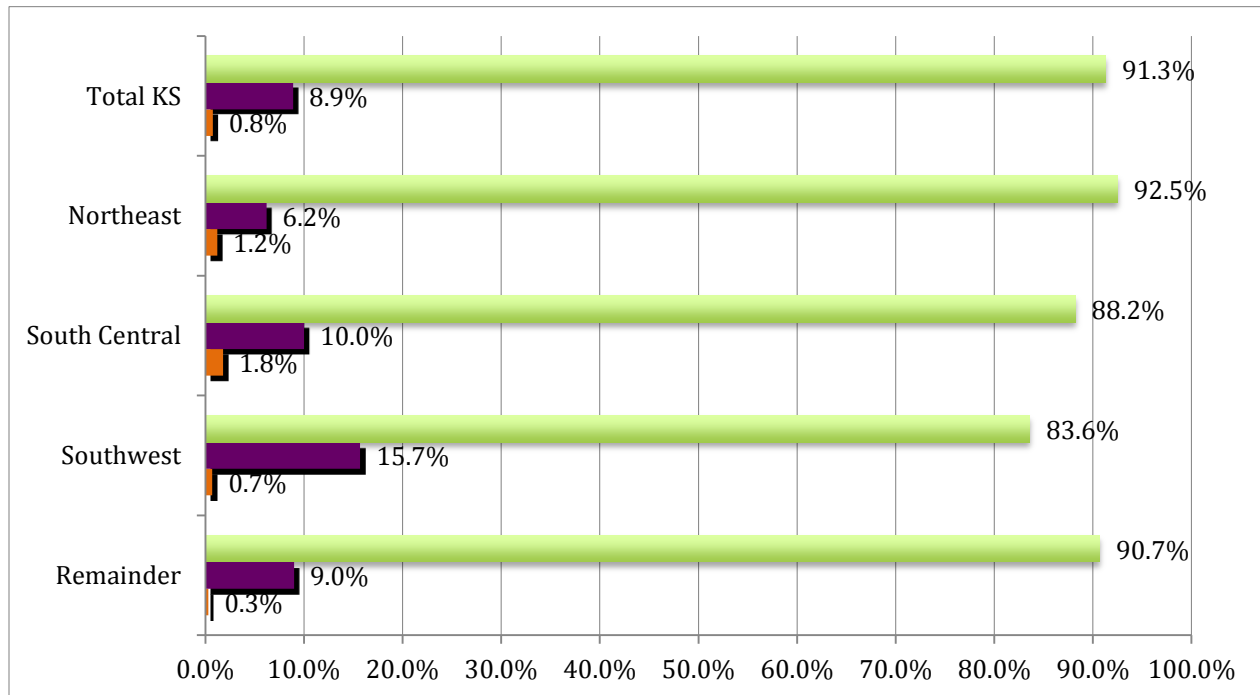
Zone 4 (Balance of the State)

County	Number of respondents	County	Number of respondents
Allen	6	Mitchell	4
Anderson	3	Montgomery	21
Bourbon	9	Morris	3
Chase	5	Morton	1
Chautauqua	4	Nemaha	6
Cherokee	8	Neosho	12
Cheyenne	2	Norton	3
Clay	1	Morris	3
Cloud	8	Osborne	4
Coffey	6	Ottawa	13
Crawford	17	Phillips	4

Decatur	4	Pottawatomie	2
Dickinson	11	Rawlins	1
Edwards	2	Republic	2
Elk	1	Riley	36
Ellis	20	Rooks	5
Ellsworth	5	Russell	11
Geary	23	Saline	30
Gove	2	Scott	1
Graham	3	Sheridan	3
Grant	4	Sherman	7
Greenwood	2	Smith	4
Hamilton	3	Stevens	1
Jewel	3	Thomas	9
Labette	12	Trego	5
Lincoln	3	Wabaunsee	2
Linn	9	Wallace	1
Logan	3	Washington	4
Lyon	16	Wilson	3
Marshall	5	Woodson	2

All counties, except the following, had at least one participant: Greeley, Kearny, Stanton, and Wichita

Figure 1. Problem Gambling Risk Categories by Zone (N=1,600)



Notable findings: The vast majority of respondents did not endorse a problem gambling screening question (green bar). Statewide, one in 11 respondents endorsed one to three problem

gambling screening questions (purple bar). Compared to other zones, South Central had the highest rate of persons endorsing 4+ problem gambling screening questions (orange bar), and Southwest represents the highest concentration of at-risk gamblers based upon responses to problem gambling screening questions.

Question 3: And, finally, again to make certain we talk to a variety of individuals, can you please tell me which of the following racial or ethnic groups best describes you? *Choices were read to respondents.*

Table 7. Participant Ethnicity by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Caucasian or white	79%	77%	79%	53%	81%
African-American or black	8%	10%	8%	6%	5%
African	<1%	0%	0%	0%	1%
Hispanic or Latino	8%	7%	9%	34%	11%
Asian	2%	3%	2%	3%	3%
Multi-racial	1%	<1%	1%	0%	<1%
Other	1%	1%	<1%	1%	1%
Refused	<1%	1%	<1%	2%	<1%

Results significantly different by region (p-value<0.0001)

Table 8. Participant Ethnicity by Problem Gambling Risk Group

Response	Low Risk (n=1420)	Moderate Risk (n=164)	High Risk (n=16)
Caucasian or white	74%	58%	75%
African-American or black	7%	11%	0%
African	<1%	0%	0%
Hispanic or Latino	15%	24%	6%
Asian	2%	4%	12%
Multi-racial	<1%	1%	6%
Refused	<1%	1%	0%
Other	1%	2%	0%

Results could not be tested for statistical significance due to low number in high risk category

Notable findings: Based upon these demographic data, it appears that at-risk populations in the state of Kansas tend to include all ethnic and racial groups. Although Table 8 suggests that

Asians may be slightly more at risk with their higher prevalence in the high risk segment relative to their population size, due to the small sample size of the “Asian” subset, this observation should be considered inconclusive.

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Section 5

Distorted Beliefs about Gambling

The survey's core content began with a series of belief statements about gambling and asking each participant to express his or her level of agreement with each – “strongly agree,” “agree,” “disagree,” and “strongly disagree.”

The first set of questions in this series focused on gambling related myths or cognitive distortions. There is evidence to suggest that the problem gambler continues to play because they possess distorted beliefs about gambling that cause them to over-estimate their chances of winning.¹¹ This framework can also explain the process by which gambling becomes pathological as problem gamblers are hypothesized to make more erroneous cognitions.

Survey findings suggest a relatively large number of the public hold at least one erroneous belief about gambling. Combining the “strongly agree/agree” percentages, the following statements had notable levels of endorsements:

- The more a person gambles, the better his or her odds of coming out ahead (7%)
- Playing more than one slot machine improves a person's odds of winning (21%)
- When a person almost wins, it's a good sign that they are due to win soon (4%)
- Using a personal “lucky” technique can help people win (10%)
- Watching the pattern of wins and losses will help a person win (19%)

Following are the distorted beliefs questions and responses by Zone. The number to the left of the question corresponds to the number of the survey item.

Tables 9a-9f. Distorted Beliefs by Zone

4. The more a person gambles, the better his or her odds of coming out ahead. (Table 9a)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	1%	<1%	1%	3%	2%
Agree	6%	4%	10%	10%	6%
Disagree	66%	64%	66%	61%	71%
Strongly disagree	23%	29%	16%	19%	18%
Don't know (not read)	4%	2%	7%	6%	3%

Results significantly different by region (p-value<0.0001)

5. Playing more than one slot machine improves a person's odds of winning. (*Table 9b*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	2%	2%	1%	3%	1%
Agree	19%	18%	22%	24%	20%
Disagree	52%	53%	51%	48%	46%
Strongly disagree	16%	18%	12%	7%	19%
Don't know (not read)	12%	9%	14%	18%	14%

Results significantly different by region (p -value<0.0001)

6. When a person almost wins, it's a good sign that they are due to win soon. (*Table 9c*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	<1%	<1%	0%	1%	0%
Agree	3%	3%	5%	8%	2%
Disagree	70%	66%	71%	72%	74%
Strongly disagree	21%	27%	18%	10%	19%
Don't know (not read)	5%	4%	6%	9%	6%

Results significantly different by region (p -value<0.0001)

7. If a person keeps gambling, their luck will change and they'll win back the money they've lost. (*Table 9d*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	0%	0%	0%	0%	0%
Agree	2%	1%	3%	2%	1%
Disagree	64%	58%	68%	71%	65%
Strongly disagree	33%	40%	26%	22%	31%
Don't know (not read)	2%	1%	4%	5%	2%

Results significantly different by region (p -value<0.0001)

8. Watching the pattern of wins and losses will help a person win. (Table 9e)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	1%	0%	3%	5%	2%
Agree	18%	18%	17%	22%	14%
Disagree	57%	56%	53%	48%	62%
Strongly disagree	12%	14%	10%	6%	13%
Don't know (not read)	12%	11%	17%	20%	9%

Results significantly different by region (p -value<0.0001)

9. Using personal “lucky” techniques can help people win. (Table 9f)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	<1%	0%	2%	1%	0%
Agree	10%	9%	18%	12%	4%
Disagree	64%	58%	61%	63%	73%
Strongly disagree	19%	26%	10%	15%	18%
Don't know (not read)	7%	7%	9%	9%	6%

Results significantly different by region (p -value<0.0001)

**Table 10. Cross-tabulation:
Combined “Strongly agree/Agree” Percentage on Gambling Belief Statements by Zone**

Statement	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)	Significance Level between Statement and Zone
Playing more than one slot machine improves a person's odds of winning.	21%	20%	23%	27%	21%	$p<.05$
Watching the pattern of wins and losses will help a person win	19%	18%	20%	26%	16%	$p<.01$

Using personal “lucky” techniques can help people win	10%	9%	20%	13%	4%	p<.001
The more a person gambles, the better his or her odds of coming out ahead	7%	4%	10%	13%	8%	p<.001
When a person almost wins, it’s a good sign that they are due to win soon	4%	3%	5%	8%	2%	p<.001
If a person keeps gambling, their luck will change and they’ll win back the money they’ve lost	2%	1%	3%	2%	1%	Non-significant

Table 11. Cross-tabulation: Combined “Strongly agree/Agree” Percentage on Gambling Belief Statements by Risk Category

Statement	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance level between Statement and Risk Level
Playing more than one slot machine improves a person’s odds of winning	22%	26%	25%	Non-significant
Watching the pattern of wins and losses will help a person win	19%	28%	12%	p<.05*
Using personal “lucky” techniques can help people win	11%	16%	6%	Non-significant
The more a person gambles, the better his or her odds of coming out ahead	8%	13%	6%	Non-significant

When a person almost wins, it's a good sign that they are due to win soon	5%	6%	0%	Non-significant
If a person keeps gambling, their luck will change and they'll win back the money they've lost	1%	2%	0%	Non-significant

* Significance found using Yates Correction

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Section 6

Beliefs about Gambling & Public Health

The next series of questions related to the public's perception of gambling. These questions were raised against the backdrop of Kansas recently becoming the first state to offer state-owned casinos. After much controversy during the 2007 session, Kansas legislators approved a bill that created four Kansas gaming zones. Known as the Kansas Expanded Lottery Act (KELA), the bill passed by six votes in the House (64-58) and two in the Senate (21- 19).¹² The lottery act authorized one casino in each of four designated gaming zones.

Responses on the present survey suggest the public remains divided on how casinos and gambling are viewed. However, the majority of responses suggest the public has concerns about the impact of gambling on family, public health, and society as a whole.

Combining the “strongly agree/agree” percentages, the following statements had notable levels of endorsements:

- Casinos are a good place to socialize (46%)
- Gambling is a harmful form of entertainment (53%)
- Gambling is dangerous for family life (65%)
- On balance, gambling is good for society (29%)
- Gambling is an important part of cultural life (27%)

Tables 12a-12e. Beliefs about Gambling & Public Health by Zone

10. Casinos are a good place to socialize. (*Table 12a*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	4%	5%	4%	8%	3%
Agree	42%	42%	48%	45%	38%
Disagree	36%	32%	28%	34%	42%
Strongly disagree	9%	8%	9%	5%	11%
Don't know (not read)	10%	13%	11%	8%	7%

Results significantly different by region (p-value<0.0001)

11. Gambling is a harmful form of entertainment. (*Table 12b*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	12%	14%	9%	7%	15%
Agree	41%	44%	32%	38%	41%
Disagree	35%	34%	42%	39%	35%
Strongly disagree	7%	6%	7%	10%	5%
Don't know (not read)	5%	2%	10%	5%	4%

Results significantly different by region ($p\text{-value}<0.0001$)

12. Gambling is dangerous for family life. (*Table 12c*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance (n=398)
Strongly agree	13%	12%	11%	6%	17%
Agree	52%	48%	50%	47%	52%
Disagree	26%	28%	24%	31%	23%
Strongly disagree	3%	4%	5%	3%	2%
Don't know (not read)	7%	7%	10%	12%	5%

Results significantly different by region ($p\text{-value}<0.0001$)

13. On balance, gambling is good for society. (*Table 12d*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance (n=398)
Strongly agree	3%	3%	4%	2%	6%
Agree	26%	28%	32%	24%	23%
Disagree	46%	44%	40%	35%	49%
Strongly disagree	12%	10%	12%	14%	15%
Don't know (not read)	14%	16%	13%	24%	8%

Results significantly different by region ($p\text{-value}<0.0001$)

14. Gambling is an important part of cultural life. (*Table 12e*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance (n=398)
Strongly agree	4%	6%	9%	3%	4%
Agree	23%	31%	28%	20%	17%
Disagree	51%	42%	36%	42%	63%
Strongly disagree	11%	8%	10%	6%	14%
Don't know (not read)	11%	12%	18%	29%	3%

Results significantly different by region (p-value<0.0001)

**Table 13. Cross-tabulation:
Combined “Strongly agree/Agree” Percentage on Gambling Belief Statements by Zone**

Statement	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=400)	Balance of State (n=400)	Significance Level between Statement and Zone
Gambling is dangerous for family life	65%	61%	61%	54%	69%	p<.001
Gambling is a harmful form of entertainment	53%	57%	41%	46%	57%	p<.001
Casinos are a good place to socialize	46%	47%	52%	53%	41%	p<.01
On balance, gambling is good for society	29%	31%	36%	26%	28%	p<.05
Gambling is an important part of cultural life	27%	38%	36%	23%	21%	p<.01

Table 14. Cross-Tabulation: Combined “Strongly agree/Agree” Percentage on Gambling Belief Statements by Risk Category

Statement	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Statement and Risk Level
Gambling is dangerous for family life	61%	60%	75%	Non-significant
Gambling is a harmful form of entertainment	50%	47%	88%	p<.01
Casinos are a good place to socialize	47%	60%	25%	p<.01
On balance, gambling is good for society	29%	40%	31%	p<.05*
Gambling is an important part of cultural life	28%	38%	44%	p<.05*

* Significance found using Yates Correction

Notable findings: The Problem Gambling Screening Questions Risk data indicate that even among gamblers, most respondents who indicated at least one problem gambling symptom agree that gambling is dangerous for family life. “Mid” tier risk segment gamblers are more likely to believe that gambling has redeeming cultural and societal value.

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Section 7

Personal Gambling Activity

After establishing the respondent's general views about gambling, the survey then turned to inquiring about participation with various gambling activities. For each one, respondents were asked if they have participated in the specific activity in the last year and, if so, if it was within the last 30 days.

In reviewing the data below for each type of gambling activity, it is important to note that the percentages on the follow-up question ("Was that in the last 30 days, or has it been more than a month?") are percentages of those who said "yes" to the question about whether they had engaged in the activity in the last year.

To assist in understanding the prevalence of recent (within the last 30 days) activity, a cross-tabulation analysis closes this section, showing the percent of total respondents – by zone and for the entire state – who had engaged in the activity during this time period. This cross-tabulation provides a picture of the activities of choice among recent gamblers and shows the following to be the most dominant:

- State lottery, multi-state lottery, scratchers tickets or pull-tabs – engaged in by 25% of survey participants across the state during the last 30 days
- Slot machines, video poker, video keno or video blackjack at a casino – engaged in by 13% of survey participants across the state during the last 30 days

Tables 15a-15t. Types of Gambling Activity by Zone

15. Played the slot machines, video poker, video keno, or video blackjack at a casino.

(Table 15a)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	35%	36%	38%	43%	27%
No	65%	64%	62%	57%	73%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value} < 0.0001$)

16. Was that in the last 30 days, or has it been more than a month? (*Table 15b*)

Response	Kansans Overall (n=574)	Northeast (n=142)	South Central (n=151)	Southwest (n=173)	Balance of State (n=108)
Yes	39%	38%	44%	34%	28%
No	61%	62%	56%	66%	72%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}=0.0432$)

17. Played table games at a casino, such as poker, roulette, craps or blackjack. (*Table 15c*)

Response	Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	12%	15%	11%	5%	8%
No	88%	85%	89%	95%	92%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}<0.0001$)

18. Was that in the last 30 days? (*Table 15d*)

Response	Kansans Overall (n=155)	Northeast (n=61)	South Central (n=43)	Southwest (n=20)	Balance of State (n=31)
Yes	31%	28%	40%	60%	16%
No	69%	72%	60%	40%	84%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}=0.0069$)

19. Played a state lottery game or a multi-state lottery, bought scratchers tickets, or played pull-tabs. (*Table 15e*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	45%	49%	43%	55%	40%
No	55%	51%	57%	45%	60%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p-value=0.0002)

20. Was that in the last 30 days? (*Table 15f*)

Response	Kansans Overall (n=749)	Northeast (n=196)	South Central (n=172)	Southwest (n=220)	Balance of State (n=161)
Yes	55%	60%	54%	48%	52%
No	45%	39%	46%	52%	48%
Don't know (not read)	<1%	1%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region (p-value=0.0780)

21. Bet on team sports with friends or through an office pool. (*Table 15g*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	13%	16%	12%	9%	10%
No	87%	84%	88%	91%	90%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p-value=0.0236)

22. Was that in the last 30 days? (*Table 15h*)

Response	Kansans Overall (n=190)	Northeast (n=63)	South Central (n=49)	Southwest (n=37)	Balance of State (n=41)
Yes	58%	63%	61%	43%	46%
No	42%	37%	39%	54%	54%
Don't know (not read)	<1%	0%	0%	3%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region ($p\text{-value}=0.1414$)

23. Bet money on horse races. (*Table 15i*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	4%	4%	4%	7%	3%
No	96%	96%	96%	93%	97%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}=0.0241$)

24. Was that in the last 30 days? (*Table 15j*)

Response	Kansans Overall (n=69)	Northeast (n=14)	South Central (n=18)	Southwest (n=27)	Balance of State (n=10)
Yes	9%	0%	17%	19%	0%
No	91%	100%	83%	81%	100%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region ($p\text{-value}=0.1822$)

25. Played bingo for money or prizes. (*Table 15k*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	15%	17%	14%	19%	11%
No	85%	83%	86%	81%	89%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}=0.0028$)

26. Was that in the last 30 days? (*Table 15l*)

Response	Kansans Overall (n=244)	Northeast (n=69)	South Central (n=55)	Southwest (n=78)	Balance of State (n=42)
Yes	30%	33%	35%	12%	26%
No	70%	68%	65%	88%	74%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}=0.0074$)

27. Gambled on the internet. (*Table 15m*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	<1%	<1%	0%	0%	1%
No	100%	100%	100%	100%	99%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region ($p\text{-value}=0.1415$)

28. Was that in the last 30 days, or has it been more than a month? (*Table 15n*)

Response	Kansans Overall (n=5)	Northeast (n=2)	South Central (n=0)	Southwest (n=0)	Balance of State (n=3)
Yes	0%	0%	0%	0%	0%
No	100%	100%	0%	0%	100%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not testable by region

29. Bet on games of personal skill, such as pool, bowling, video games, basketball, or golf, with friends or family. (*Table 15o*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	21%	31%	16%	11%	23%
No	79%	69%	84%	89%	77%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}<0.0001$)

30. Was that in the last 30 days? (*Table 15p*)

Response	Kansans Overall (n=324)	Northeast (n=125)	South Central (n=64)	Southwest (n=44)	Balance of State (n=91)
Yes	36%	38%	23%	50%	42%
No	64%	62%	77%	50%	58%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p -value=0.0290)

31. Played cards for money or possessions with friends or family, outside of a casino.

(*Table 15q*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	13%	14%	12%	9%	18%
No	87%	86%	88%	91%	82%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p -value=0.0017)

32. Was that in the last 30 days, or has it been more than a month? (*Table 15r*)

Response	Kansans Overall (n=210)	Northeast (n=58)	South Central (n=47)	Southwest (n=35)	Balance of State (n=70)
Yes	47%	57%	34%	54%	40%
No	53%	43%	66%	46%	60%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not significantly different by region (p -value=0.0586)

33. Participated in fantasy sports leagues that involve money. (*Table 15s*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	6%	7%	10%	3%	8%
No	94%	93%	90%	97%	92%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p -value=0.0057)

34. Was that in the last 30 days, or has it been more than a month? (*Table 15t*)

Response	Kansans Overall (n=112)	Northeast (n=27)	South Central (n=38)	Southwest (n=14)	Balance of State (n=33)
Yes	95%	100%	100%	79%	85%
No	5%	0%	0%	21%	15%
Don't know (not read)	0%	0%	0%	0%	0%
Refused (not read)	0%	0%	0%	0%	0%

Results not testable by region

Table 16. Cross-tabulation: Percentage of Total Respondents (per zone) who have Engaged in Specific Gambling Activities within the Last 30 Days

Activity	Overall	Northeast	South Central	Southwest	Balance of State	Significance Level between Activity and Zone
Played a state lottery game or multi-state lottery, bought scratchers tickets, or played pull-tabs	25%	30%	23%	26%	21%	p<.05
Played the slot machines, video poker, video keno or video blackjack at a casino	13%	14%	17%	15%	8%	p<.001
Bet on games of personal skill, such as pool, bowling, video games, basketball, or golf with friends or family	8%	12%	4%	5%	10%	p<.001
Participated in fantasy sports leagues that involve money	6%	7%	10%	3%	7%	p<.01
Bet on team sports with friends or through an office pool	8%	10%	8%	4%	5%	p<.01

Played cards for money or possessions with friends or family, outside of a casino	6%	8%	4%	5%	7%	p<.05
Played table games at a casino, such as poker, roulette, craps or blackjack	4%	4%	4%	3%	1%	Non-significant
Played bingo for money or prizes	4%	6%	5%	2%	3%	p<.05
Bet money on horse races	<1%	0%	1%	1%	0%	Not testable
Gambled on the Internet	0%	0%	0%	0%	0%	Not testable

Notable findings: These data on games played suggest that there are differences in games preference (played in past 30 days) based upon where the respondent lives. Overall, lottery and casino games define “gambling” for most respondents.

Table 17. Cross-tabulation: Percentage of Total Respondents (per Risk Segment) who have Engaged in Specific Gambling Activities within the Last 30 Days

Activity	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Activity and Risk Level
Played a state lottery game or multi-state lottery, bought scratchers tickets, or played pull-tabs	23%	44%	50%	p<.001
Played the slot machines, video poker, video keno or video blackjack at a casino	9%	46%	69%	p<.001
Bet on games of personal skill, such as pool, bowling, video games, basketball, or golf with friends or family	7%	13%	0%	Non-significant
Participated in fantasy sports leagues that involve money	6%	12%	0%	p<.01*
Bet on team sports with friends or through an office pool	6%	14%	12%	p<.001*
Played cards for money or possessions with friends or family, outside of a casino	5%	12%	6%	p<.01*
Played table games at a casino, such as poker, roulette, craps or blackjack	2%	10%	50%	p<.001
Played bingo for money or prizes	4%	5%	6%	Non-significant
Bet money on horse races	<1%	1%	0%	Not testable
Gambled on the Internet	0%	0%	0%	Not testable

* Significance found using Yates Correction

Notable findings: There exists strong evidence to suggest that there are two gambling activities that are most closely associated with problem gambling symptoms. These forms of gambling are: 1) casino table games, and 2) casino machine games. More than any other activity, these two forms of gambling are more likely to be used by gamblers with problem gambling symptoms.

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Section 8

Reasons for Seldom or Never Gambling

Those with no gambling activity within the last 30 days were presented with a series of potential reasons for their lack of participation and asked to state the level of importance, to a series of statements, as to why they seldom or never gamble.

Combining the “very important” and “somewhat important” percentages among reasons that infrequent or non-gamblers made this choice, the ones with the highest support were:

- I’m just not that interested in gambling (84%)
- I’m concerned about the possibility of losing money (79%)
- I have moral or ethical concerns about gambling (47%)
- I don’t have any money to gamble with (50%)

Tables 18a-18f. Reasons for Seldom or Never Gambling by Zone

35. I’m too busy, or I don’t have enough time. (Table 18a)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	7%	11%	5%	2%	8%
Important	16%	16%	19%	26%	21%
Not very important	35%	32%	30%	33%	38%
Not at all important	39%	41%	44%	37%	31%
Not sure (not read)	2%	0%	2%	1%	3%

Results significantly different by region (p-value=0.0047)

36. I live too far away from places where I could gamble. (*Table 18b*)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	5%	2%	4%	1%	11%
Important	13%	8%	12%	15%	26%
Not very important	38%	35%	35%	31%	41%
Not at all important	42%	52%	46%	53%	19%
Not sure (not read)	2%	2%	3%	0%	4%

Results significantly different by region ($p\text{-value}<0.0001$)

37. I have moral or ethical concerns about gambling. (*Table 18c*)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	20%	21%	23%	28%	16%
Important	27%	29%	27%	41%	19%
Not very important	34%	34%	31%	22%	44%
Not at all important	19%	16%	18%	9%	21%
Not sure (not read)	<1%	<1%	1%	1%	0%

Results significantly different by region ($p\text{-value}<0.0001$)

38. I'm concerned about the possibility of losing money. (*Table 18d*)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	39%	46%	30%	24%	41%
Important	40%	31%	45%	57%	43%
Not very important	14%	13%	18%	10%	13%
Not at all important	7%	10%	6%	8%	4%
Not sure (not read)	0%	0%	0%	0%	0%

Results significantly different by region ($p\text{-value}<0.0001$)

39. I don't have any money to gamble with. (*Table 18e*)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	20%	15%	19%	12%	21%
Important	30%	32%	28%	43%	30%
Not very important	32%	36%	38%	35%	27%
Not at all important	17%	14%	14%	8%	21%
Not sure (not read)	1%	2%	2%	2%	1%

Results significantly different by region ($p\text{-value}=0.0003$)

40. I'm just not that interested in gambling. (*Table 18f*)

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)
Very important	50%	53%	48%	44%	52%
Important	35%	36%	31%	32%	34%
Not very important	8%	6%	11%	16%	6%
Not at all important	7%	3%	9%	8%	7%
Not sure (not read)	<1%	<1%	0%	0%	1%

Results significantly different by region ($p\text{-value}=0.0101$)

Table 19. Cross-tabulation: Combined "Very important/Somewhat important" Percentages on the Reasons that Infrequent Gamblers Choose not to Gamble or not to Gamble Often by Zone

Response	Kansans Overall (n=801)	Northeast (n=203)	South Central (n=184)	Southwest (n=167)	Balance of State (n=247)	Significance Level between Reason and Zone
I'm just not that interested in gambling	84%	90%	79%	76%	86%	$p<.01$
I'm concerned about the possibility of losing money	79%	77%	76%	81%	83%	Non-significant
I have moral or ethical concerns about gambling	47%	50%	50%	68%	35%	$p<.001$

I don't have any money to gamble with	50%	47%	47%	54%	51%	Non-significant
I'm too busy, or I don't have enough time	24%	27%	24%	28%	29%	Non-significant
I live too far away from places where I could gamble	18%	11%	16%	16%	36%	p<.001

Notable findings: Although the reasons for not gambling are fairly consistent across all geographies, it is interesting to note that ambivalence toward gambling is the number one reason for not gambling for Kansans overall, compared to some practical or moral reason.

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Section 9

Favorite Activity, Gambling Frequency, & Reasons For Gambling Among Recent Gamblers

Using the same list of gambling activities as presented earlier, recent (within the last 30 days) gamblers were asked to select their favorite form of gambling. The same two types of gambling topped the list – various types of electronic gambling at casinos and various sanctioned lottery ticket-type games – but the order was reversed from the measurement of most frequent activity. Specifically:

- Slot machines, video poker, video keno, or video blackjack at a casino (the favorite of 48% of recent gamblers who participated in the survey)
- State lottery game or multi-state lottery, scratchers tickets, or pull-tabs (21%)

Table 20. Cross-tabulation: Combined Percentage for Favorite Gambling Activity among Recent Gamblers by Zone

41. Which of the following activities that we've talked about would you say was your favorite? *Choices were read to respondent. Only one answer was permitted.*

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance (n=151)	Significance Level between Activity and Zone
Slot machines, video poker, video keno, or video blackjack at a casino	48%	41%	53%	46%	55%	p<.05
State lottery game or a multi-state lottery, scratchers tickets, or pull-tabs	19%	21%	18%	26%	15%	Non-significant

Playing cards for money or possessions with family or friends, outside of a casino	7%	12%	9%	13%	3%	p<.05
Table games at a casino, such as poker, roulette, craps, or blackjack	10%	10%	10%	3%	7%	p<.05
Bingo for money or prizes	6%	5%	4%	7%	9%	Non-significant
Betting on games of personal skill, such as pool, bowling, video games, basketball or golf with family or friends	3%	7%	3%	2%	2%	p<.05
Participating in fantasy sports leagues that involve money	2%	1%	1%	1%	7%	p<.001*
Betting on team sports with friends or through an office pool	4%	3%	2%	1%	1%	Non-significant
Betting on horse races	<1%	0%	0%	1%	0%	Not testable
Gambling on the Internet	0%	0%	0%	0%	0%	Not testable

* Significance found using Yates Correction

Notable findings: Casino machine gambling was considered the “favorite” form of gambling by a near majority (48%) of respondents who reported gambling in the past 30 days. Regional differences were found for some forms of favored gambling. For example, games of skill were endorsed as the favorite form of gambling more than twice as often in the Northeast than any other region.

Table 21. Cross-Tabulation: Combined Percentage for Favorite Gambling Activity by Risk Category

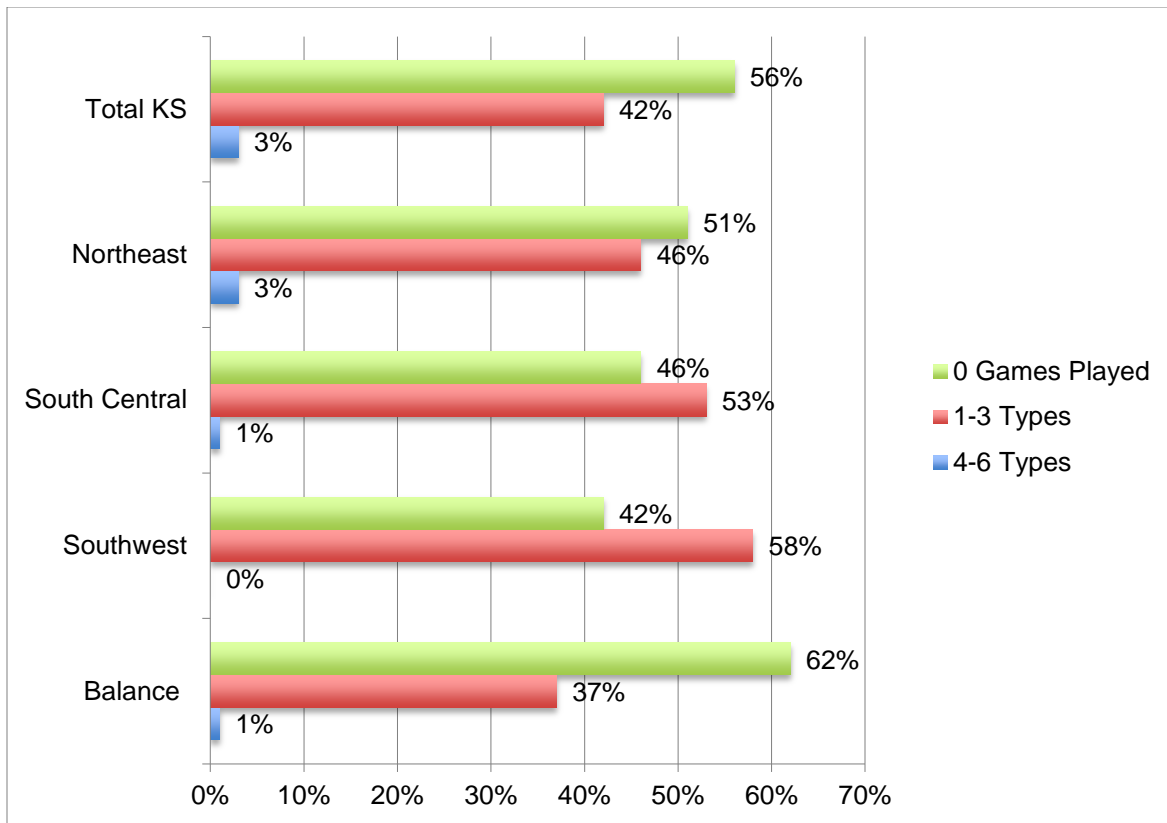
Response	Low Risk (n=619)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Activity and Risk Category
Slot machines, video poker, video keno, or video blackjack at a casino (electronic gambling machines)	46%	60%	25%	p<.01
State lottery game or a multi-state lottery, scratchers tickets, or pull-tabs	22%	14%	12%	p<.05*
Playing cards for money or possessions with family or friends, outside of a casino	11%	7%	6%	Non-significant
Table games at a casino, such as poker, roulette, craps, or blackjack	6%	9%	56%	p<.001
Bingo for money or prizes	7%	5%	0%	Non-significant
Betting on games of personal skill, such as pool, bowling, video games, basketball or golf with family or friends	4%	2%	0%	Non-significant
Participating in fantasy sports leagues that involve money	3%	2%	0%	Non-significant
Betting on team sports with friends or through an office pool	2%	2%	0%	Non-significant
Betting on horse races	<1%	0%	0%	Not testable
Gambling on the Internet	0%	0%	0%	Not testable

* Significance found using Yates Correction

Notable findings: Respondents who endorsed a problem gambling screening question tend to prefer any type of casino game more than gamblers without problem gambling related symptoms. It is interesting to note that 40% of respondents who endorsed table games at a casino as their favorite game and 26.4% of respondents who endorsed casino machine games as their favorite form of gambling also replied “yes” to at least one problem gambling screening question.

Gambling Frequency

Figure 2. Games Played in Past Month (N=1,600)



Notable findings: Less than one half of respondents gambled within the past 30-days. Those residing in Southwest Kansas had the highest rate of gambling involvement, while residents of Balance of State had the lowest frequency of past-30 day gambling involvement. It is interesting to note that Balance of State is the only zone without a recently opened casino. The prevalence of past 30-day gambling in Kansas varies significantly by region, with South Central and Southwest representing the gamblers which play the most types of games.

42. When you think about the activities you have participated in that involve betting or wagering money or possessions, would you say that you, yourself, bet or gamble...*Choices were read to respondents.*

Table 22. Gambling Frequency among Recent Gamblers by Zone

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very often	4%	5%	4%	1%	3%
Often	17%	12%	21%	22%	8%
Occasionally	48%	55%	43%	51%	56%
Seldom	31%	29%	32%	24%	32%
Not sure (not read)	0%	0%	0%	0%	0%
Refused (not read)	<1%	0%	<1%	2%	1%

Results possibly significantly different by region (p-value=0.0007)

Table 23.
“Very often/Often” Self-reported Gambling Behavior by Zone

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Combined “Very often/Often”	20%	16%	25%	23%	11%

Results significantly different by region (p-value=0.0016)

Notable finding: Gamblers who self-identify as frequent gamblers are most common in South Central and Southwest Kansas.

Table 24.
“Very often/Often” Self-reported Gambling Behavior by Risk

Response	Low Risk (n=619)	Mid Risk (n=164)	High Risk (n=16)
Combined “Very often/Often”	15%	33%	81%

Results significantly different by region (p-value<0.0001)

Notable finding: Problem gambling risk is associated with gambling frequency. The majority of high risk gamblers (81%) endorsed gambling “very often” or “often”, while only 15% of low risk gamblers reported frequent gambling.

Reasons for Gambling

Survey respondents were presented a list of eight potential reasons for gambling, and recent gamblers were asked whether each one was a “very important,” “important,” “not very important” or “not at all important” reason for their gambling.

When the “very important” and “important” responses were combined, the results showed the following primary motivations for gambling among recent gamblers:

- For entertainment or fun (97%)
- For the excitement or as a challenge (51%)
- Just to win money (47%)
- To support worthy causes (36%)
- Out of curiosity (30%)
- As a distraction from everyday problems (15%)
- To win money to use for paying bills (14%)
- As a hobby (18%)

While it is not surprising that most gamblers report gambling for entertainment or fun (97%), it is interesting to note that approximately one in seven gamblers are gambling to “win money to use for paying bills”. Gambling for investment is a very poor financial strategy, suggesting the gaming public would benefit from additional information about the odds of winning and the hazards of using gambling as a means to meet financial responsibilities. The other “reasons for gambling” item that creates concern is the relatively high proportion of players that are gambling “as a distraction from everyday problems” (15%). Gambling as a way of escaping from problems or of relieving uncomfortable feelings is one of the ten characteristics of pathological gambling.⁶ When a person’s gambling is functionally driven by using gambling as a means to escape problems, they are at a heightened risk for developing a gambling disorder.^{13,14}

It is also interesting to note that one of the less frequent reasons to gamble (“As a hobby” – mentioned by 18%) is still either a “very important” or “important” reason for one in six recent gamblers across the state, suggesting that those who fit the “recent gambler” description report a variety of reasons for gambling.

Tables 25a – 25h:
Self-reported Reasons for Gambling by Zone

43. For the excitement or as a challenge. (*Table 25a*)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	10%	9%	13%	6%	8%
Important	41%	34%	39%	43%	44%
Not very important	32%	35%	31%	37%	40%

Not at all important	17%	23%	17%	15%	7%
Don't know (not read)	0%	0%	0%	0%	0%

Results significantly different by region (p -value=0.0026)

44. As a hobby. (*Table 25b*)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	3%	3%	2%	0%	6%
Important	15%	16%	15%	12%	10%
Not very important	39%	38%	37%	49%	36%
Not at all important	41%	40%	44%	36%	47%
Don't know (not read)	23%	3%	2%	3%	1%

Results possibly significantly different by region (p -value=0.0014)

45. To win money to use for paying bills. (*Table 25c*)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	5%	6%	8%	9%	1%
Important	9%	7%	11%	17%	6%
Not very important	26%	25%	16%	51%	40%
Not at all important	60%	62%	65%	19%	53%
Don't know (not read)	<1%	0%	0%	4%	0%

Results significantly different by region (p -value<0.0001)

46. To support worthy causes. (*Table 25d*)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	5%	3%	10%	2%	7%
Important	31%	31%	26%	28%	32%
Not very important	31%	38%	22%	47%	38%
Not at all important	32%	28%	41%	16%	21%
Don't know (not read)	1%	0%	0%	7%	2%

Results significantly different by region (p -value<0.0001)

47. Out of curiosity. (Table 25e)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	3%	2%	4%	7%	5%
Important	27%	24%	31%	27%	31%
Not very important	35%	43%	27%	52%	34%
Not at all important	34%	30%	39%	12%	28%
Don't know (not read)	1%	1%	0%	3%	1%

Results significantly different by region (p -value<0.0001)

48. For entertainment or fun. (Table 25f)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	46%	41%	52%	30%	38%
Important	52%	58%	44%	53%	60%
Not very important	3%	1%	3%	16%	2%
Not at all important	<1%	0%	<1%	1%	0%
Don't know (not read)	0%	0%	0%	0%	0%

Results possibly significantly different by region (p -value<0.0001)

49. As a distraction from everyday problems. (Table 25g)

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	6%	5%	8%	12%	2%
Important	9%	4%	13%	16%	9%
Not very important	38%	46%	24%	43%	39%
Not at all important	46%	45%	52%	21%	50%
Don't know (not read)	1%	0%	3%	8%	1%

Results significantly different by region (p -value<0.0001)

50. Just to win money. (Table 25h)

Response	Kansas Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Very important	13%	14%	13%	16%	8%
Important	34%	37%	25%	36%	38%
Not very important	34%	30%	29%	31%	44%
Not at all important	19%	20%	33%	18%	9%
Don't know (not read)	<1%	0%	0%	0%	1%

Results significantly different by region (p -value<0.0001)

Table 26. Cross-tabulation: Combined “Very important/Important” Percentage on Reasons for Gambling among Those who have Gambled in Some Form within the Last 30 Days by Zone

Reason	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)	Significance Level between Reason and Zone
For entertainment or fun	97%	99%	96%	83%	98%	p<.001
For the excitement or as a challenge	51%	42%	52%	49%	52%	Non-significant
Just to win money	47%	50%	38%	51%	46%	p<.05
To support worthy causes	36%	34%	37%	30%	40%	Non-significant
Out of curiosity	30%	25%	34%	34%	36%	Non-significant
As a distraction from everyday problems	15%	9%	21%	28%	11%	p<.001
To win money to use for paying bills	14%	13%	19%	26%	7%	p<.001
As a hobby	18%	19%	17%	12%	16%	Non-significant

Notable findings: Most respondents gambled for fun or the excitement that is inherent in the activity. The two gambling motivations considered problematic, gambling as a distraction and gambling to pay bills, were endorsed most frequently in Southwest, suggesting that this zone may be at higher risk for problem gambling than other areas of the state.

Table 27.
Cross-tabulation: Combined “Very important/Important” Percentage on Self-reported Reasons for Gambling by Risk Category

Reason	Low Risk (n=619)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Reason and Risk Level
For entertainment or fun	93%	96%	94%	Non-significant
For the excitement or as a challenge	47%	54%	50%	Non-significant
Just to win money	45%	51%	56%	Non-significant
To support worthy causes	34%	37%	38%	Non-significant
Out of curiosity	32%	35%	25%	Non-significant
As a distraction from everyday problems	18%	19%	12%	Non-significant
To win money to use for paying bills	18%	14%	31%	Non-significant
As a hobby	14%	21%	38%	p<.01*

* Significance found using Yates Correction

Notable findings: Players who tend toward problematic gambling behaviors seem somewhat more interested in gambling as a “monetary goal” vs. gambling as “entertainment”. However, gambling “as a distraction from everyday problems” was not endorsed by more people in the higher problem gambling risk categories.

Frequency of Gambling at Kansas Casinos

The next three questions asked recent gamblers to state their pattern of utilization and engagement with Kansas casinos.

A total of 67% of recent gamblers said they had, in fact, gambled at one of the eight casinos in Kansas, with 32% of those with Kansas casino experience having gambled at more than one. The majority of casino visitors most often patronized the casino in closest proximity to their place of residence. Of recent gamblers with experience at a casino in Kansas, 38% said they belonged to a “club, program, or special group” at a Kansas casino.

51. Have you ever gambled at any of the following casinos located in Kansas? *List was read to respondents who had gambled within the last 30 days, and they were free to select all that applied.*

Table 28. Cross-tabulation: Combined Percentage on “Yes” Responses for Casino Gambling Frequency by Zone

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)	Significance Level between Casino Frequency and Zone
None (not read)	33%	37%	31%	22%	28%	p<.01
Kansas Star Casino in Mulvane	23%	1%	57%	20%	25%	p<.001
Prairie Band Casino in Mayetta	25%	34%	15%	17%	30%	p<.001
Boot Hill Casino in Dodge City	12%	2%	18%	59%	14%	p<.001
Hollywood Casino at the Kansas Speedway, in Kansas City	29%	42%	12%	10%	19%	p<.001
Golden Eagle Casino in Horton	14%	22%	4%	5%	24%	p<.001*
Sac and Fox Casino in Powhattan	14%	16%	5%	5%	26%	p<.001
White Cloud Casino in White Cloud	4%	5%	0%	0%	18%	p<.001*
7th Street Casino in Kansas City	5%	7%	2%	1%	3%	p<.01

* Significance found using Yates Correction

Notable findings: As expected, recent gamblers reported gambling at the casino located within the region they lived in much more than gambling at a casino outside of their region. However, about a third (32%) of respondents gambled at multiple Kansas casinos with little variation between geographic zones.

52. Which of the casinos located in Kansas that you have visited would you say is your preferred casino? *Asked only of the respondents who indicated they had gambled at more than one casino in Kansas on question 51. “N” equals the number that qualified, due to identifying more than one casino in Kansas in question 51. Those with only one Kansas casino skipped to question 53. Those with no Kansas casino experience skipped to question 54.*

Table 29. Cross-tabulation: Combined Percentage on “Yes” Responses for Preferred Casino by Zone

Response	Kansans Overall (n=261)	Northeast (n=68)	South Central (n=64)	Southwest (n=77)	Balance of State (n=52)	Significance Level between Preferred Casino and Zone
Boot Hill Casino in Dodge City	7%	0%	12%	77%	8%	p<.001
Prairie Band Casino in Mayetta	19%	26%	16%	14%	33%	p<.05
Kansas Star Casino in Mulvane	22%	0%	53%	8%	4%	p<.001
Hollywood Casino at the Kansas Speedway, in Kansas City	27%	38%	8%	1%	10%	p<.05
Golden Eagle Casino in Horton	11%	16%	0%	0%	27%	p<.001*
Sac and Fox Casino in Powhattan	5%	9%	6%	0%	6%	Non-significant
White Cloud Casino in White Cloud	4%	7%	0%	0%	13%	p<.001*
7th Street Casino in Kansas City	5%	3%	5%	0%	0%	Non-significant

* Significance found using Yates Correction

Notable finding: Data suggests that casino patrons tend to visit the casino that is in closest proximity to them.

53. Do you belong to any of the clubs, programs, or special groups at any of the casinos we just listed? *Asked only of those respondents who have gambled at a Kansas casino.*

Table 30. Casino Club Membership by Zone

Response	Kansans Overall (n=565)	Northeast (n=125)	South Central (n=148)	Southwest (n=183)	Balance of State (n=109)
Yes	38%	33%	33%	42%	48%
No	60%	67%	64%	58%	52%
Not sure (not read)	2%	0%	3%	0%	0%

Results not significantly different by region (p-value=0.0561)

Notable finding: Membership in gaming clubs or programs appears most popular with the residents of Balance of State, however this difference is not statistically significant.

Table 31. Casino Club Membership by Risk Category

Response	Low Risk (n=409)	Mid Risk (n=140)	High Risk (n=16)
Yes	34%	48%	75%
No	65%	51%	25%
Not sure (not read)	1%	1%	0%

Results significantly different by risk (p-value=0.0002)

Notable findings: There is a strong correlation between endorsing problem gambling screening questions and membership in casino groups. One third of all respondents who were casino club/program members may be considered at a heightened risk for manifesting or developing a gambling problem.

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Section 10

Problem Gambling Questions

All recent gamblers (whether or not they had experience in a Kansas casino) were presented with a series of eight problem gambling screening questions and asked to respond “yes/no” regarding whether they had ever experienced each one. Problem gambling was also assessed by asking respondents, “How often have you felt you have a problem with gambling?” This approach is based on the respondents’ subjective appraisal of their gambling behaviors and of the consequences they attribute to their gambling (i.e., not based on the objective set of behavioral criteria derived from DSM-IV characteristics of Pathological Gambling).

The problem gambling screening questions used in this survey were derived from two problem gambling screening instruments, the 17-item NORC Diagnostic Screen for Gambling Disorders (NODS)² and the 9-item Problem Gambling Severity Index (PGSI).¹⁰ Although examining for the prevalence of problem gambling was an important component of this survey, the greater purpose was to assess public behaviors and attitudes towards gambling from a much broader perspective. Therefore, the survey was designed to be exploratory rather than precise within any single area of inquiry. For this reason, the complete NODS and PGSI instruments were not utilized. If these instruments had been added to the survey, the overall survey length would have been substantially longer, leading to concerns over respondent fatigue.

Because a standardized and validated problem gambling assessment instrument was not used in its entirety, findings from this survey are unable to determine problem gambling prevalence rates in Kansas within a known degree of certainty. However, data from the nine problem gambling screening questions can be used to inform the public and policymaker about the rates and types of problem gambling concerns found among adult Kansans.

In addition to reporting on each problem gambling screening question, the responses to the problem gambling screening questions were used to develop three problem gambling risk groups. These three groups were defined based upon their individual indications on the problem gambling screening questions (Q54 to Q62). The problem gambling risk categories are defined as follows:

Risk Category	Number of “positive” responses to problem gambling screening questions
Low	No “positive” (Yes) response to any problem gambling screening question
Moderate/Mid	One to three “positive” responses per respondent
High	Four or more “positive” responses per respondent

Endorsement of any problem gambling screening question suggests a heightened risk for problem gambling development or manifestation. As the number of endorsements increase so does the risk

for developing or manifesting a gambling disorder. The “low, moderate, and high” risk categories used in the present study were chosen to categorize groups rather than to describe actual risk. That is, if a person endorsed three problem gambling screening questions, although they are categorized in the “moderate” or “mid” risk group, their actual odds of manifesting a gambling disorder are considerable. This can be exemplified by research on the NODS CLiP.⁸ The NODS CLiP is derived of a subset of questions from the 17-item NORC Diagnostic Screen for Gambling Disorders (NODS); a validated DSM-IV-based instrument.⁹ Toce-Gerstein, Gerstein, and Volberg (2009) found that three NODS questions pertaining to loss of Control, Lying, and Preoccupation (the “CLiP”) identified virtually all pathological gamblers and most problem gamblers diagnosed by the complete NODS. In the present study, all three NODS CLiP questions were included, two verbatim and one paraphrased, in the set of nine problem gambling screening questions. The NODS CLiP questions are:

- *Have you ever tried to stop, cut down, or control your gambling?*
- *Have you ever lied to family members, friends or others about how much you gamble or how much money you lost on gambling?*
- *Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling ventures or bets?*

Research on the NODS CLiP found that if a person endorsed any of the three questions, there is an 88% probability that he or she has or had a gambling disorder.¹⁴ The other six problem gambling screening questions used within this survey were other items from the NODS and items from the Problem Gambling Severity Index (PGSI), which is a subset of items from the Canadian Problem Gambling Severity Index (CPGI). Those items selected from the NODS and PGSI were chosen to capture a broad range of possible negative consequences related to one’s gambling behaviors in order to “tell a story” about the extent and types of gambling problems encountered.

Problem Gambling Screening Findings

Forty-four percent (44%) of respondents gambled in the past 30 days, and from this group of recent gamblers, a series of nine problem gambling screening questions were asked. Approximately 19% of this group responded “yes” to at least one of these nine questions. Positive endorsement of just one problem gambling screening question suggests the person is at a heightened risk for developing a gambling problem. Those problem gambling screening questions receiving the most endorsements were:

- Have you ever thought you might want to cut back on the amount of time or money you spend on betting or wagering? (7%)
- Have you ever bet more than you could afford to lose? (6%)
- Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling ventures or bets? (7%)
- Have you ever lied to family members, friends or others about how much you gamble or how much money you lost gambling? (4%)

When respondents were asked directly if they thought they had a gambling problem, one percent said that “most of the time” they felt that they “have a problem with gambling,” and six percent said “sometimes.” If these patterns held true for the state population as a whole, there may be some level of concern among thousands of Kansans that they may have a gambling problem (estimated at 60,519 adults concerned about their gambling).ⁱⁱ

Questions 54 through 62 were asked of all those who had gambled within the last 30 days, whether or not that gambling took place in a Kansas casino.

Tables 32a – 32i. Problem Gambling Screening Question Frequency by Zone

54. Have you ever bet more than you could afford to lose? (Table 32a)

Source: Variation of question # 1 of PGSI

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	6%	4%	7%	10%	13%
No	94%	96%	93%	90%	87%
Not sure (not read)	0%	0%	0%	0%	0%

Results significantly different by zone (p-value=0.0071)

55. Have people ever criticized your betting or told you that you have a gambling problem, regardless of whether or not you thought it was true? (Table 32b)

Source: PGSI, question #6

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	1%	1%	1%	0%	0%
No	99%	99%	99%	100%	100%
Not sure (not read)	0%	0%	0%	0%	0%

Results not significantly different by zone (p-value=0.1767)

ⁱⁱ Based on 2012 U.S. Census Bureau estimate, there are 2,158,657 adults living in Kansas. The present study found 44.43% of adults gambled in past 30 days and from this group 6.31% stated “most of the time” or “sometimes” they felt they had a gambling problem. $2,158,657 \times .4443 \times .0631 = 60,519$

56. Has your gambling ever caused you any health problems, such as stress and anxiety?
(Table 32c)

Source: Variation of question #8 from PGSI

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	1%	3%	1%	1%	1%
No	99%	97%	99%	99%	99%
Not sure (not read)	<1%	1%	0%	0%	0%

Results not significantly different by zone (p-value=0.5301)

57. Have you ever thought you might want to cut back on the amount of time or money you spend betting or wagering? *(Table 32d)*

Source: Variation of question #1 from NODS CLiP

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	7%	6%	8%	14%	5%
No	93%	94%	92%	84%	95%
Not sure (not read)	<1%	0%	0%	2%	0%

Results significantly different by zone (p-value=0.0030)

58. Have you ever lied to family members, friends or others about how much you gamble or how much money you lost gambling? *(Table 32e)*

Source: Question #2 from NODS CLiP

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	4%	5%	6%	1%	1%
No	96%	95%	94%	98%	99%
Not sure (not read)	<1%	0%	0%	<1%	0%

Results significantly different by zone (p-value=0.0028)

59. Have there been periods lasting 2 weeks or longer when you spent a lot of time thinking about your gambling experiences, or planning out future gambling venture or bets? *(Table 32f)*

Source: Question #3 from NODS CLiP

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	7%	4%	10%	2%	6%
No	93%	96%	90%	96%	94%
Not sure (not read)	<1%	0%	0%	2%	0%

Results significantly different by zone (p -value=0.0025)

60. Has your gambling ever caused serious or repeated problems in your relationships with any of your family members or friends? *(Table 32g)*

Source: Variation of question #12 from NODS

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	2%	2%	2%	3%	3%
No	98%	98%	98%	97%	97%
Not sure (not read)	0%	0%	0%	0%	0%

Results not significantly different by zone (p -value=0.6825)

61. Has your gambling ever interfered with your productivity, such as missing time from work or school, or having it interfere with your performance while at work or school? *(Table 32h)*

Source: Variation of questions #13 & #14 from NODS

Response	Kansans Overall (n=799)	Northeast (n=197)	South Central (n=216)	Southwest (n=235)	Balance of State (n=151)
Yes	<1%	<1%	1%	<1%	0%
No	>99%	99%	99%	>99%	100%
Not sure (not read)	0%	0%	0%	0%	0%

Results not significantly different by zone (p -value=0.6660)

62. How often have you felt you have a problem with gambling? (Table 32i)*Source: Question #5 from PGSI*

Response	Overall (n=799)	Northeast (n=197)	SC (n=216)	Southwest (n=234)	Balance (n=152)
Almost always	0%	0%	0%	0%	0%
Most of the time	1%	1%	1%	<1%	0%
Sometimes	6%	2%	6%	11%	4%
Never	93%	97%	90%	86%	95%
Not sure (not read)	1%	0%	2%	2%	1%

*Results possibly significantly different by zone (p-value=0.0025)***Table 33. Self-identifying as a Problem Gambler by Risk Category**

Response	Low Risk (n=619)	Mid Risk (n=1264)	High Risk (n=16)
Almost always	0%	0%	0%
Most of the time	0%	1%	25%
Sometimes	0%	26%	44%
Never	99%	71%	31%
Not sure (not read)	1%	2%	0%

Results possibly significantly different by risk (p-value<0.0001)

Notable findings and interpretations: Comparing responses to the very direct question, “how often have you felt you have a problem with gambling” to responses on the less direct problem gambling screening questions reveal that about a fifth (21%) of the respondents who endorsed one of the first eight problem gambling screening questions directly admit to some level of concern about their gambling. This discrepancy can be explained, in part, by the time frame inferred in these questions. That is, the eight “yes/no” problem gambling screening questions used a lifetime time frame as exemplified by the opening words of the questions, “have you ever . . . has your gambling ever . . . have people ever...” Whereas the wording used in survey question #62 could be interpreted as referring to the more recent past, “how often have you...” Another possible explanation for the discrepancy is that some people may not label a problem gambling sign or symptom as a “problem”. For example, a person could have endorsed the statement that they lied to family members or others about how much they lost gambling but view this behavior as a harmless white lie.

Another way to look at the relationship between endorsements of the “yes/no” problem gambling screening items to responses to question #62 is that those who endorse at least one problem gambling screening item are 5.8 times more likely to be concerned with their potential gambling problem than those who report no symptoms (4% compared to 21%).

While only 1% of the recent gamblers said that “most of the time” they felt that they might “have a problem with gambling,” a full 6% said “sometimes,” suggesting that there is some level of concern. If this pattern held true for the statewide population, these data suggest that one in every 36 Kansan adults are aware they may have a gambling problem.ⁱⁱⁱ

Table 34. Cross-tabulation: Percentage of “yes” Responses to the Problem Gambling Screening Questions by Zone

Statement	Kansas Overall (n=799)	Northeast (n=197)	South Central (n=216)	South-west (n=235)	Balance of State (n=15)	Significance Level between “yes” Responses and Zone
Ever thought you might want to cut back on time or money spent on betting or wagering	7%	6%	8%	14%	5%	p<.01
Bet more than you could afford to lose	6%	4%	7%	10%	13%	p<.01
Spent time in the last 2 weeks thinking about gambling/planning gambling ventures	7%	4%	10%	2%	6%	p<.01
Lied to family/friends/others about gambling or losses	4%	5%	6%	1%	1%	p<.01
Your gambling has caused serious/repeated problems in relationships	2%	2%	2%	3%	3%	Non-significant
Others have criticized you/told you that you had a gambling problem	1%	1%	1%	0%	0%	Non-significant
Gambling has caused you health problems	1%	3%	1%	1%	1%	Non-significant

ⁱⁱⁱ Based on 2012 U.S. Census Bureau estimate, there are 2,158,657 adults living in Kansas. The present study found 44.43% of adults gambled in past 30 days and from this group 6.31% stated “most of the time” or “sometimes” they felt they had a gambling problem. $2,158,657 \times .4443 \times .0631 = 60,519$. $2,158,657$ divided by $60,519 = 35.67$ or approx. 1:36.

Your gambling has interfered with productivity/led to missed time or performance issues at work/school	<1%	<1%	1%	<1%	0%	Non-significant
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* Significance found using Yates Correction

Notable findings: No region of the state is free from gamblers exhibiting problem gambling signs and symptoms. The Northeast region had the fewest respondents endorsing at least one problem gambling screening question (15%) compared to the other regions (Southwest, 28%; South Central, 22%, Rest, 25%).

Table 35. Cross-tabulation: Percentage of “yes” Responses to the Problem Gambling Screening Questions by Risk Category

Statement	Low Risk [†] (n=619)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between “yes” responses and Risk Category
Ever thought you might want to cut back on time or money spent on betting or wagering	--	34%	81%	p<.001
Bet more than you could afford to lose	--	35%	50%	Non-significant
Spent time in the last 2 weeks thinking about gambling/planning gambling ventures	--	19%	69%	p<.001
Lied to family/friends/others about gambling or losses	--	11%	62%	p<.001
Your gambling has caused serious/repeated problems in relationships	--	5%	62%	p<.001
Others have criticized you/told you that you had a gambling problem	--	1%	25%	p<.001*
Gambling has caused you health problems	--	4%	38%	p<.001
Your gambling has interfered with productivity/led to missed time or performance issues at work/school	--	0%	25%	p<.001*

[†] Low Risk is not possible in this chart since a positive response automatically removes the respondent from the Low Risk category.

* Significance found using Yates Correction

Notable findings: The data in this survey corresponds to the findings by Toce-Gerstein, Gerstein, and Volberg (2009), where those questions pertaining to loss of control, lying, and preoccupation highly correlate with those individuals falling into the most at-risk groups.⁸ In the case of the NODS CliP research, endorsing any of the three problem gambling symptoms (loss of control, lying, and preoccupation) identified virtually all pathological gamblers and most problem gamblers diagnosed by the complete NODS.

Problems Caused by Gambling Behavior of a Friend or Relative

All respondents were asked whether the gambling behavior of a friend, a family member, or someone else – such as a co-worker – had personally affected the survey participant.

A sizeable percentage said they had been affected by the gambling behavior of another individual; 14% by a friend, 13% by a family member, and 8% by someone else. More than two-thirds (71%) of respondents said they felt “extremely confident” or “moderately confident” they would be able to recognize a gambling problem in a friend, a family member or an acquaintance.

The following questions, except where noted, were asked of all survey participants, regardless of gambling behavior.

Tables 36a – 36d. Problems Caused by Gambling Behavior of a Friend or Relative

63. Thinking now about others, instead of yourself, have you personally been affected by the gambling behaviors of a friend? Yes or no? (*Table 36a*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	14%	14%	17%	9%	12%
No	85%	86%	83%	91%	87%
Not sure (not read)	1%	0%	<1%	0%	1%

Results significantly different by zone (p-value=0.0099)

64. How about a family member? (*Table 36b*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	13%	16%	14%	11%	9%
No	87%	84%	86%	88%	91%
Not sure (not read)	<1%	<1%	<1%	1%	0%

Results significantly different by zone ($p\text{-value}=0.0303$)

65. How about someone else you know, such as a co-worker? (*Table 36c*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	8%	10%	7%	5%	12%
No	88%	88%	90%	89%	85%
Not sure (not read)	2%	2%	3%	5%	4%

Results significantly different by zone ($p\text{-value}=0.0021$)

66. How confident are you that you would be able to recognize the signs that you, a friend, a family member or an acquaintance has a gambling problem? Would you say you would be... Choices were read to respondents. (*Table 36d*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Extremely confident	32%	32%	40%	23%	26%
Moderately confident	39%	38%	35%	32%	40%
Slightly confident	16%	15%	12%	18%	15%
Not at all confident	7%	10%	4%	10%	7%
I'm not sure	6%	5%	8%	17%	11%

Results significantly different by zone ($p\text{-value}<0.0001$)

Table 37. Cross-tabulation: Percentage of “yes” Responses to the Affected by Others Gambling Questions by Risk Category

Statement	Kansans Overall (n=1600)	Low Risk (n=619)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between “yes” Responses and Risk Category
I have been personally affected by the gambling behaviors of a friend	14%	13%	15%	6%	p<.01
I have been personally affected by the gambling behaviors of a family member	13%	12%	13%	12%%	Non-significant
I have been personally affected by the gambling behaviors of a co-worker	8%	8%	9%	0%	Non-significant
Extremely or Moderately confident I’d be able to recognize the signs of a gambling problem	71%	67%	68%	75%	Non-significant

Table 37b. Cross-tabulation: Percentage of “yes” Responses to the Affected by Others Gambling Questions by Ethnicity

Statement	Kansans Overall (n=1600)	White (n=1160)	Hispanic (n=246)	African American (n=113)	Asian (n=43)	Significance Level between “yes” Responses and Ethnicity
I have been personally affected by the gambling behaviors of a friend	14%	13%	11%	18%	12%	Non-significant
I have been personally affected by the gambling behaviors of a family member	13%	12%	12%	19%	14%	Non-significant
I have been personally affected by the gambling behaviors of a co-worker	8%	8%	7%	12%	12%	Non-significant
Extremely or Moderately confident I’d be able to recognize the signs of a gambling problem	71%	70%	58%	63%	60%	p<.01

Notable findings: Demographic comparisons suggest that problem gambling might impact comparatively more people in the African American community than within other ethnic groups; one in five African American survey respondents reported being personally affected by the gambling behaviors of a family member, a rate 60% greater than among Caucasian survey respondents.

Other differences found when comparing data from ethnic groups was that within the Hispanic, African American, and Asian populations, fewer respondents reported feeling confident they could recognize the signs of a gambling problem. This finding suggests that Hispanic and Asian populations may benefit from targeted educational efforts to raise awareness about signs and symptoms of problem gambling.

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Section 11

Attitudes about Treatment Services

Half (50%) of respondents said they thought that treatment for problem gambling “works.” Twenty-one percent said their opinion was that gambling treatment does not work. The remaining 29% were neutral or undecided regarding whether or not treatment works. The two demographic groups that felt most negatively about the utility of treatment were those endorsing four of more problem gambling screening questions (high risk group) and survey respondents that identified their ethnicity as Hispanic or Asian. Thirty-one percent of respondents categorized in the problem gambling high risk group endorsed the statement, “Treatment for a gambling problem probably doesn’t work” as did 28% of Asians, compared to 21% of the full sample (all ethnic groups combined). Asians, as well as Hispanics, were more likely than other groups to feel that gambling treatment is only for the seriously affected.

Although almost half of respondents believe that treatment for problem gambling works, only about one in three (29%) said they know of some treatment options in their community. Opinions about the affordability of gambling treatment services varied: 29% thought it would be affordable for the average person, but 42% thought it would not be affordable for the average person. Slightly less than one-third said they were unsure about the affordability of treatment.

The vast majority of respondents (99%) say they admire the courage of people who seek help for a gambling problem and would never discourage someone from seeking treatment (97%).

There were significant differences between Zones regarding opinions of and perceived access to treatment for problem gamblers. Balance of State residents are far less aware of treatment options than their peers throughout the state (16% compared to 29% statewide). Southwest respondents are significantly more likely to feel that gambling treatment is prohibitively expensive (60% compared to 42% statewide).

In general, findings suggest that there is room for improvement in terms of awareness of the details regarding gambling treatment programs, their value, and their effectiveness. Special attention may be needed to shift attitudes in Asian and Hispanic communities about the utility and effectiveness of gambling treatment programs.

Tables 38a – 381. Attitudes about Treatment Services by Zone

67. There is no convenient place to get treatment for problem gambling in my community.
(Table 38a)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	5%	4%	6%	5%	13%
Agree	16%	9%	16%	19%	31%
Disagree	29%	36%	31%	27%	10%
Strongly disagree	5%	7%	5%	1%	1%
Not sure (not read)	45%	45%	41%	48%	45%

Results significantly different by zone ($p\text{-value} < 0.0001$)

68. The average person can't afford treatment for a gambling problem. (Table 38b)

Response	Kansans Overall (n=400)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	6%	5%	11%	14%	6%
Agree	37%	32%	40%	46%	37%
Disagree	25%	30%	24%	2%	18%
Strongly disagree	4%	3%	1%	2%	5%
Not sure (not read)	30%	30%	25%	37%	35%

Results significantly different by zone ($p\text{-value} < 0.0001$)

69. Treatment for a gambling problem probably doesn't work. (*Table 38c*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	2%	1%	4%	2%	5%
Agree	19%	16%	19%	24%	23%
Disagree	41%	46%	40%	35%	32%
Strongly disagree	9%	11%	6%	1%	8%
Not sure (not read)	29%	26%	30%	38%	33%

Results significantly different by zone ($p\text{-value}<0.0001$)

70. I would be embarrassed if a family member needed treatment for a gambling problem. (*Table 38d*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	2%	2%	2%	3%	2%
Agree	22%	23%	20%	16%	22%
Disagree	57%	56%	57%	71%	60%
Strongly disagree	18%	18%	18%	3%	15%
Not sure (not read)	1%	1%	3%	7%	1%

Results significantly different by zone ($p\text{-value}<0.0001$)

71. Gambling treatment is only for people with serious difficulties. (*Table 38e*)

Response	Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	2%	<1%	2%	6%	4%
Agree	21%	16%	27%	24%	19%
Disagree	62%	67%	53%	55%	66%
Strongly disagree	10%	11%	9%	3%	7%
Not sure (not read)	5%	6%	9%	12%	5%

Results significantly different by zone ($p\text{-value}<0.0001$)

72. I know about gambling treatment options in my community. (*Table 38f*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	5%	8%	2%	1%	5%
Agree	24%	31%	25%	22%	11%
Disagree	45%	42%	44%	41%	52%
Strongly disagree	9%	2%	12%	9%	14%
Not sure (not read)	17%	16%	17%	27%	18%

Results significantly different by zone ($p\text{-value}<0.0001$)

73. I would never discourage someone from seeking treatment. (*Table 38g*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	36%	40%	31%	19%	36%
Agree	62%	60%	63%	74%	59%
Disagree	2%	<1%	3%	3%	4%
Strongly disagree	<1%	0%	2%	<1%	1%
Not sure (not read)	<1%	<1%	1%	4%	0%

Results possibly significantly different by zone ($p\text{-value}<0.0001$)

74. I admire the courage of people who seek treatment for a gambling problem. (*Table 38h*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	37%	44%	33%	22%	31%
Agree	62%	56%	65%	67%	68%
Disagree	<1%	0%	1%	1%	1%
Strongly disagree	<1%	0%	0%	0%	1%
Not sure (not read)	1%	0%	2%	10%	<1%

Results possibly significantly different by zone ($p\text{-value}<0.0001$)

75. Gambling is a behavioral disorder. (*Table 38i*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Strongly agree	10%	11%	9%	2%	6%
Agree	57%	62%	47%	55%	58%
Disagree	15%	14%	18%	11%	16%
Strongly disagree	4%	6%	4%	2%	5%
Not sure (not read)	15%	8%	21%	30%	15%

Results significantly different by zone ($p\text{-value}<0.0001$)

Table 39. Cross-tabulation: Combined “Strongly agree/Agree” Percentage on Statements about Gambling Treatment by Zone

Statement	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)	Significance Level between Statement and Zone
I admire the courage of those who seek treatment	99%	100%	98%	89%	98%	$p<.001$
I would never discourage someone from seeking treatment	97%	99%	94%	93%	95%	$p<.001$
Gambling is a behavior disorder	67%	73%	56%	57%	64%	$p<.001$
The average person can't afford treatment	42%	38%	50%	59%	42%	$p<.001$

No convenient place for treatment in my community	21%	12%	22%	25%	44%	p<.001
I know about treatment options in my community	29%	39%	27%	23%	16%	p<.001
Treatment is only for people with serious difficulties	22%	17%	29%	30%	23%	p<.001
Treatment probably doesn't work	21%	16%	23%	25%	28%	p<.01
I would be embarrassed if a family member needed treatment	24%	25%	22%	20%	24%	Non-significant

Notable findings: Southwest appears to be the geographical area that is most skeptical about problem gambling treatment. Significantly more Southwest respondents believed that “the average person can’t afford treatment” (59%), “treatment is only for people with serious difficulties” (30%), and 11% do not “admire the courage of those who seek treatment”, compared with one percent of respondents overall. Balance of State respondents were the least likely in the state to not be aware of treatment resources in their community. Forty-four percent (44%) stated there is “no convenient place for treatment in my community”, and 16% knew about treatment options in their community.

Table 40a. Cross-tabulation: Combined “Strongly agree/Agree” Percentage on Statements about Gambling Treatment by Risk Category

Statement	Kansans Overall (n=1600)	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Statement and Risk Category
I admire the courage of those who seek treatment	99%	97%	93%	88%	p<.01*
I would never discourage someone from seeking treatment	97%	96%	95%	81%	P<.05*
Gambling is a behavior disorder	67%	63%	65%	38%	Non-significant
The average person can't afford treatment	42%	47%	51%	43%	Non-significant
No convenient place for treatment in my community	21%	26%	26%	25%	Non-significant
I know about treatment options in my community	29%	26%	31%	25%	Non-significant
Treatment is only for people with serious difficulties	22%	25%	24%	19%	Non-significant
Treatment probably doesn't work	21%	23%	23%	31%	Non-significant
I would be embarrassed if a family member needed treatment	24%	22%	24%	38%	Non-significant

* Significance found using Yates Correction

Notable findings: It is interesting to note that the lowest endorsements for admiring the courage of those who seek treatment and never discouraging someone from seeking treatment come from those survey respondents with the greatest number of problem gambling symptom endorsements. This finding suggests that a social norms campaign that educates the public that treatment seeking is admired by the average person may be useful in countering misperceptions by some problem gamblers.

Table 40b. Cross-tabulation: Combined “Strongly agree/Agree” Percentage on Statements about Gambling Treatment by Ethnicity

Statement	Kansans Overall (n=1600)	White (n=1160)	Hispanic (n=246)	African American (n=113)	Asian (n=43)	Significance Level between Statements and Ethnicity
I admire the courage of those who seek treatment	99%	98%	91%	96%	91%	p<.001
I would never discourage someone from seeking treatment	97%	96%	95%	95%	84%	p<.01
Gambling is a behavior disorder	67%	64%	57%	61%	60%	Non-significant
The average person can't afford treatment	42%	46%	55%	39%	53%	p<.05
No convenient place for treatment in my community	21%	26%	25%	23%	35%	Non-significant
I know about treatment options in my community	29%	26%	25%	27%	23%	Non-significant
Treatment is only for people with serious difficulties	22%	23%	30%	26%	30%	Non-significant
Treatment probably doesn't work	21%	24%	21%	19%	28%	Non-significant
I would be embarrassed if a family member needed treatment	24%	22%	22%	27%	16%	Non-significant

Notable findings: Asian respondents were more likely to discourage someone from seeking treatment than Caucasians, Hispanics, and African Americans. This finding suggests further exploration is needed to better understand the challenges and needs of the Asian community.

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Section 12

Help Seeking & Problem Gambling Service Awareness

Where to Turn if Faced with a Gambling Problem

Staying on the topic of steps that would occur in the face of a gambling problem being recognized, respondents said that if they saw a problem in themselves, they would go first to their spouse (16%), the gambling helpline (18%) or “other family member” (14%). A full 13%, meaning one out of eight respondents, said “don’t know.”

The gambling helpline (17%) was the first choice if the respondent recognized a problem in someone else, while 14% said “don’t know”, and another 15% said they would turn to a friend.

These data, and more specifically the wide distribution of responses (including open-ended) across people and institutions, suggest that there is not a single place, action or resource for struggling Kansas gamblers. Efforts need to be advanced to focus the message on where to turn – who, how and when.

Perhaps the ideal messaging strategy should be focused on friends of gamblers rather than solely on the gambler.

Much like the geography-specific data above, respondents are unsure where to turn when in need.

The open-ended responses, which represented only a tiny fraction of total responses, largely included local health care facilities and religious references and represent the diversity of the list presented above.

When thinking of others, “Don’t Know” is the third most frequently mentioned response for where to turn for assistance.

These data confirm that awareness of assistance options remains limited – regardless of whether one’s own self is the target of assistance, or someone else. The spread of these data are meaningful – no one source stands out as the “evoked choice” if pressed. This is meaningful information for ongoing communication efforts.

76. If you felt you had a gambling problem, who would you turn to first, or where would you go? *List was not read to respondents.*

Table 41. Cross-tabulation: Percentage of Respondents Endorsing Where They Would Turn if Faced with a Gambling Problem by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)	Significance Level between “where to turn” and Zone
Spouse	16%	17%	21%	23%	15%	p<.05
Call the gambling helpline (or “phone number” or “hotline”)	18%	21%	16%	10%	16%	p<.001
Don’t know	13%	9%	13%	23%	19%	p<.001
Other family member	14%	13%	15%	12%	10%	Non-significant
Minister/ Clergy	10%	8%	12%	10%	9%	Non-significant
Friend	7%	12%	7%	12%	4%	p<.001
No one	6%	8%	5%	4%	11%	p<.001
Other	7%	4%	3%	2%	4%	Non-significant
Primary Care Physician	3%	4%	2%	3%	2%	Non-significant
Psychologist/ Psychiatrist	4%	3%	4%	<1%	5%	p<.01
Girlfriend/ Boyfriend	1%	2%	<1%	0%	2%	p<.01*

Employer	1%	<1%	1%	0%	1%	Not testable
Employer's Employee Assistance Program (or "E.A.P.")	1%	1%	<1%	0%	2%	Not testable

* Significance found using Yates Correction

Notable finding: Only one in 10 Southwest respondents indicated that they would call the gambling helpline first if they were confronted by a gambling problem, compared to one in six in the rest of the state. Southwest also had the largest proportion of respondents who said they "don't know" where they would turn if confronted by a gambling problem (23% compared to 13% statewide).

Table 42a. Cross-tabulation: Percentage of Respondents Endorsing Where They Would Turn if Faced with a Gambling Problem by Risk Category

Response	Kansans Overall (n=1600)	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between "where to turn" and Risk Level
Spouse	19%	19%	21%	31%	Non-significant
Call the gambling helpline (or "phone number" or "hotline")	18%	15%	19%	31%	Non-significant
Don't know	13%	16%	13%	0%	Non-significant
Other family member	14%	12%	16%	19%	Non-significant
Minister/Clergy	10%	10%	5%	6%	Non-significant
Friend	7%	9%	4%	6%	p<.05*
No one	6%	7%	11%	0%	Non-significant
Other	7%	3%	4%	0%	Non-significant

Primary Care Physician	3%	3%	2%	0%	Non-significant
Psychologist/Psychiatrist	4%	3%	3%	6%	Non-significant
Girlfriend/Boyfriend	1%	1%	0%	0%	Non-significant
Employer	1%	1%	1%	0%	Not testable
Employer's Employee Assistance Program (or "E.A.P.")	1%	1%	1%	0%	Not testable

* Significant found using Yates Correction

Table 42b. Cross-tabulation: Percentage of Respondents Endorsing Where They Would Turn if Faced with a Gambling Problem by Ethnicity

Response	Overall (n=1600)	White (n=1160)	Hispanic (n=246)	African Amer. (n=113)	Asian (n=43)	Significance Level between "where to turn" and Ethnicity
Spouse	19%	19%	19%	19%	19%	Non-significant
Call the gambling helpline (or "phone number" or "hotline")	18%	15%	17%	20%	23%	Non-significant
Don't know	13%	16%	19%	12%	9%	Non-significant
Other family member	14%	13%	11%	13%	12%	Non-significant
Minister/Clergy	10%	11%	7%	5%	7%	Non-significant
Friend	7%	7%	14%	11%	14%	Non-significant

No one	6%	7%	7%	9%	5%	Non-significant
Other	7%	4%	1%	2%	0%	p<.05*
Primary Care Physician	3%	2%	3%	5%	7%	Non-significant
Psychologist/ Psychiatrist	4%	4%	0%	2%	0%	p<.05*
Girlfriend/Boyfriend	1%	1%	0%	0%	2%	Non-significant
Employer	1%	0%	2%	1%	0%	Not testable
Employer's Employee Assistance Program (or "E.A.P.")	1%	1%	0%	1%	2%	Not testable

* Significance found using Yates Correction

Notable findings: These data suggest that when people are confronted with a gambling problem, they tend to utilize a range of resources. The largest single place people would turn to if confronted with a gambling problem is their "spouse" (19%). Interestingly, more respondents endorsed turning to their priest or minister for help with a gambling problem than seeking help from their doctor, psychologist or employee assistance program.

77. If you thought someone you knew had a gambling problem, who would you turn to first, or where would you go? *List was not read to respondents.*

Table 43. Cross-tabulation: Percentage of Respondents Endorsing Where They Would Turn if Someone They Knew Had a Gambling Problem by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)	Significance Level between "where to turn" and Zone
Call the gambling helpline (or "phone number" or "hotline")	17%	19%	17%	12%	15%	p<.05
Don't know	14%	12%	18%	6%	23%	p<.001
Friend	15%	23%	14%	14%	10%	p<.001

Directly to them	8%	3%	4%	9%	13%	p<.001
Other	6%	4%	4%	1%	4%	Non-significant
No one	7%	10%	9%	15%	7%	p<.01
Other family member	8%	4%	12%	13%	11%	p<.001
Spouse	7%	8%	10%	16%	4%	p<.001
Minister/Clergy	10%	11%	6%	10%	8%	p<.05
Primary Care Physician	3%	2%	4%	2%	2%	Non-significant
Psychologist/Psychiatrist	2%	2%	2%	1%	3%	Non-significant
Girlfriend/Boyfriend	1%	1%	<1%	0%	1%	Not testable
Employer	<1%	0%	<1%	<1%	1%	Not testable
Employer's Employee Assistance Program (or "E.A.P.")	1%	<1%	0%	0%	0%	Not testable

Notable findings: When thinking of others, “don’t know” is the third most frequently mentioned response for where to turn for assistance. These data confirm that awareness of assistance options remain limited – regardless of whether one’s own self is the target of assistance, or someone else. The spread of these data are meaningful – no one source stands out as the “evoked choice” if pressed. The open-ended responses, which represented only a small fraction of total responses, largely included local health care facilities and religious references and represent the diversity of the list presented above.

Awareness of Problem Gambling Services

Slightly more than half (56%) of the survey respondents indicated that they had “seen or heard information regarding assistance for problem gamblers or their families.” A follow-up question asked respondents if they were familiar with the gambling helpline and presented the helpline’s phone number as a reference point. About half said they were, while 32% said “no”, and 19% said “not sure.” If they felt they had a problem – or that someone they knew did – 83% said they would be “very likely” or “somewhat likely” to contact the helpline for assistance.

78. Have you ever seen or heard information regarding assistance for problem gamblers or their families? Yes or no?

Table 44. Awareness of Problem Gambling Services by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	56%	63%	54%	40%	53%
No	40%	31%	41%	57%	45%
Not sure (not read)	4%	6%	4%	3%	2%

Results possibly significantly different by zone (p-value<0.0001)

79. What specifically have you seen or heard? *Asked only of the respondents who indicated they had seen or heard information regarding assistance for problem gambling. All others skipped to question 81.*

Responses to this question included a large portion of reports regarding billboards and other media. Many responses indicated that “assistance is available in Kansas”, suggesting that the “assistance message” was conveyed and remembered although the specific language may have been forgotten.

80. Have you ever seen or heard of the gambling helpline, 1-800-522-4700? *Asked only of the respondents who indicated they had seen or heard information regarding assistance for problem gambling.*

Table 45. Awareness of Problem Gambling Helpline by Zone

Response	Kansans Overall (n=836)	Northeast (n=251)	South Central (n=217)	Southwest (n=159)	Balance of State (n=209)
Yes	49%	46%	51%	62%	45%
No	32%	40%	33%	27%	24%
Not sure (not read)	19%	14%	16%	11%	31%

Results possibly significantly different by zone (p-value<0.0001)

81. If you felt you had a gambling problem, or knew someone who did, how likely would you be to contact the gambling helpline? Would you say you would be...*Choices were read to respondents.*

Table 46. Likelihood of Contacting the Gambling Helpline by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very likely	42%	41%	39%	30%	36%
Somewhat likely	41%	48%	41%	49%	37%
Not very likely	6%	4%	6%	4%	11%
Not at all likely	3%	1%	4%	2%	7%
Not sure (not read)	8%	7%	11%	15%	9%

Results significantly different by zone (p-value<0.0001)

Table 47a. Cross-tabulation: Percentage of Respondents Aware of Problem Gambling Services by Risk Category

Response	Kansans Overall (n=1600)	Low Risk (n=1420)	Mid Risk (n=164)	High Risk (n=16)	Significance Level between Respondents Aware and Risk Category
Seen or heard of information for problem gamblers	56%	52%	52%	62%	Non-significant
Heard of gambling helpline – 1-800-522-4700	49%	50%	49%	80%	Non-significant
How likely would you be to contact the gambling helpline?	83%	80%	78%	75%	Non-significant

Table 47b. Cross-tabulation: Percentage of Respondents Aware of Problem Gambling Services by Ethnicity

Response	Kansans Overall (n=1600)	White (n=1160)	Hispanic (n=246)	African American (n=113)	Asian (n=43)	Significance Level between Respondents Aware and Ethnicity
Seen or heard of information for problem gamblers	56%	52%	50%	64%	47%	P<.05*
Heard of gambling helpline – 1-800-522-4700	49%	51%	52%	42%	55%	Non-significant
How likely would you be to contact the gambling helpline?	83%	80%	80%	78%	77%	Non-significant

* Significance found using Yates Correction

Notable findings: African American respondents seem to be significantly more aware of information for problem gamblers and their families than any other group within the state. However, they are less aware of the problem gambling helpline than other groups. Southwest seems to be the least aware of all Kansas regions regarding assistance for gamblers or their families. Overall, approximately one-quarter of all respondents were aware of the gambling helpline.

82. Why do you think you would be (Not very/Not at all likely) to contact the gambling helpline? Where would you turn instead for help?

The vast majority of responses to this question included comments that suggested an immediate solution: an intervention or rapid trip to a community healthcare center or local physician. Most comments were very much in favor of assistance for gambling not, however, via a helpline. A solid minority of comments suggested a perception that the person who needs help needs to accept treatment or assistance before any organized assistance can be helpful at all. This is a reason why they wouldn't call – not that they doubt the efficacy of the Kansas helpline – it just needs to be suggested AFTER the person with trouble accepts assistance.

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Section 13

Support for Publicly Funded Problem Gambling Services

The final, substantive, section of the survey closed by explaining how the revenue from Kansas casinos and the Kansas Lottery supports problem gambling services, and then presenting seven potential uses or advertising messages that could be supported by these funds. After each was read, respondents were asked to provide their views on the level of importance – “very important,” “important,” “not very important” or “not at all important.”

The combined “very important” and “somewhat important” scores were well over 50% for all the statements. The ones with the greatest support were:

- For advertising that informs the public that gambling treatment is free and confidential (94%)
- To make problem gambling treatment available and affordable (92%)
- For advertising to promote the gambling helpline (91%)
- For advertising that educates the public on the signs and symptoms of problem gambling (83%)

The following statement was read prior to asking questions 83 – 89:

“Revenues from Kansas casinos and the Kansas Lottery support problem gambling services administered by the Kansas Department for Aging and Disability Services. How important do you think it is to use gambling proceeds for each of the following services? Would you say it was very important, important, not very important or not at all important?”

Tables 48a – 48g. Awareness of Problem Gambling Services by Zone

83. How important do you think it is to make problem gambling treatment available and affordable? (Table 48a)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	60%	64%	58%	41%	52%
Important	32%	29%	34%	40%	37%
Not very important	4%	5%	3%	7%	4%
Not at all important	1%	0%	1%	3%	2%

Not sure (not read)	4%	3%	5%	9%	5%
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Results significantly different by zone (p -value<0.0001)

84. How important do you think it is to educate young people in school about the risks of gambling? (Table 48b)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	45%	40%	46%	31%	43%
Important	36%	36%	32%	34%	46%
Not very important	8%	10%	7%	11%	4%
Not at all important	4%	7%	4%	9%	1%
Not sure (not read)	7%	7%	12%	14%	7%

Results significantly different by zone (p -value<0.0001)

85. How important do you think it is to provide information to seniors about the problems that gambling can cause? (Table 48c)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	36%	29%	42%	22%	34%
Important	42%	42%	37%	43%	47%
Not very important	12%	15%	10%	14%	13%
Not at all important	4%	5%	4%	8%	5%
Not sure (not read)	5%	8%	8%	11%	2%

Results significantly different by zone (p -value<0.0001)

86. How important do you think it is to provide information to adults about how they can gamble responsibly? (*Table 48d*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	26%	15%	24%	18%	26%
Important	38%	37%	40%	42%	41%
Not very important	21%	30%	16%	13%	19%
Not at all important	8%	11%	7%	10%	9%
Not sure (not read)	8%	6%	13%	17%	5%

Results significantly different by zone ($p\text{-value}<0.0001$)

87. How important do you think it is for advertising that educates the public on the signs and symptoms of problem gambling? (*Table 48e*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	35%	33%	36%	21%	29%
Important	49%	46%	48%	54%	54%
Not very important	10%	12%	9%	9%	11%
Not at all important	1%	1%	<1%	2%	3%
Not sure (not read)	6%	8%	6%	13%	4%

Results significantly different by zone ($p\text{-value}<0.0001$)

88. For advertising that promotes the problem gambling helpline? (*Table 48f*)

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Very important	44%	51%	43%	25%	35%
Important	47%	42%	46%	56%	52%
Not very important	5%	4%	5%	11%	8%

Not at all important	1%	<1%	1%	1%	1%
Not sure (not read)	3%	2%	5%	7%	3%

Results possibly significantly different by zone (p -value<0.0001)

89. How important do you think it is for advertising that informs the public that gambling treatment is free and confidential? (Table 48g)

Response	Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=400)	Balance of State (n=400)
Very important	54%	62%	55%	34%	39%
Important	40%	34%	38%	54%	55%
Not very important	3%	2%	3%	6%	2%
Not at all important	<1%	<1%	<1%	2%	0%
Not sure (not read)	3%	2%	3%	4%	3%

Results possibly significantly different by zone (p -value<0.0001)

Table 49. Cross-tabulation: Combined “Very important/Important” Percentage on the Statements about How Problem Gambling Funds are Used by Region

Statement	Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)	Significance Level between Statements and Region
Advertising that informs the public that gambling treatment is free/ confidential	94%	96%	94%	88%	95%	$p<.001$
Make problem gambling treatment available and affordable	92%	92%	92%	81%	89%	$p<.001$

Advertising to promote the gambling helpline	91%	93%	89%	80%	87%	p<.001
Advertising to educate the public on the signs/symptoms of problem gambling	83%	79%	84%	76%	83%	p<.05
Educate young people in school about the risks of gambling	81%	76%	78%	65%	88%	p<.001
Provide information to seniors about the problems gambling can cause	78%	72%	78%	66%	81%	p<.001
Provide information to adults about how they can gamble responsibly	64%	52%	64%	60%	67%	p<.001

Notable findings: These findings show that respondents largely support the idea that some revenues from gambling in the state should be used to offset potential harm from gambling activities. Widespread support exists across all topic areas covered by the mandate and funding.

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Section 14

Casino Promotional Materials, Mood State, Demographics

The final questions presented a series of demographic questions, some with gambling implications, and others with basic demographic data, such as marital and employment status. As was the case with the racial/ethnic question that was asked at the beginning of the survey, this data was collected from the individuals who were willing to participate, rather than subject to quota (except, in terms of Hispanic/Latino respondents from Southwest, where a floor was established to ensure adequate participation).

Casino Promotional Materials

90. Have you ever received promotional material in the mail from a casino located in Kansas?

Table 50. Casino Promotional Materials Received by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	33%	28%	43%	30%	26%
No	59%	60%	49%	51%	73%
Not sure (not read)	8%	12%	8%	18%	1%

Results significantly different by zone (p-value<0.0001)

Notable findings: Overall, approximately one in three respondents report having received advertising in the mail from a Kansas Casino. Awareness of such communication is highest in South Central.

91. Do you recall seeing advertising for any Kansas-based casino in the last 12 months – either on television, on billboards on the highway, in the newspaper, on the radio, or on an ad you might have seen on a website for another product, or service or company?

Tables 51. Casino Advertising Awareness by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Yes	78%	74%	84%	89%	68%
No	18%	22%	10%	7%	29%
Not sure (not read)	4%	4%	6%	3%	3%

Results significantly different by zone (p -value<0.0001)

Notable finding: Awareness of Kansas casino advertising is high; nearly 80% statewide with greatest penetration reported from respondents in Southwest (89%) and the lowest in Balance of State (68%).

Number of “Not Good” Days in Past Month

92. During the past 30 days, how many days would you say were not good for you, because of stress, depression or problems with emotions?

Table 52. Number of “Not Good” days in Past Month by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
None/Zero	57%	62%	57%	68%	60%
1	10%	9%	6%	11%	10%
2-3	9%	5%	11%	6%	13%
4-5	4%	2%	6%	1%	2%
6-15	3%	1%	4%	2%	6%
16-30	4%	2%	3%	1%	5%
Not sure	7%	8%	9%	8%	3%
Refused	5%	12%	4%	1%	1%

Results significantly different by zone (p -value<0.0001)

Notable finding: The majority of state residents (57%) reported a stress and depression-free prior month. Only 7% reported that for 6 days or more over the last 30, they felt stressed, depressed, or experienced other problems with emotions. The Center for Disease Control and Prevention estimates that between 8.4% and 9.1% of adult Kansans experience depression currently.¹⁵ These data suggests that this survey's sample may over-represent adults in good mental health.

Difficulty Talking about Gambling

93. How easy or difficult would it be for you to talk to a family member or friend about your gambling, including any guilt or shame you may feel about your gambling? Would you say it would be...*Choices were read to respondents*

Table 53. Difficulty Talking about Gambling by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of Kansas (n=398)
Very easy	25%	18%	24%	20%	32%
Easy	37%	35%	38%	42%	35%
Difficult	21%	22%	23%	18%	21%
Very difficult	8%	14%	6%	4%	4%
Don't know (not read)	10%	10%	8%	15%	9%

Results significantly different by zone (p-value<0.0001)

Notable findings: Nearly two-thirds (62%) of respondents reported that they would find it “Very Easy” or “Easy” to talk to others about their personal gambling. Approximately one in three respondents said this would be a “Difficult” or “Very Difficult” problem to discuss with others.

Demographics

94. Are you...*Choices were read to respondents.*

Table 54. Marital Status by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Married	66%	69%	63%	64%	66%
Divorced	11%	12%	10%	7%	9%
Separated	1%	<1%	1%	1%	1%
Widowed	9%	6%	9%	7%	11%
Never been married	12%	12%	14%	15%	10%
Refused (not read)	2%	1%	4%	5%	4%

Results possibly significantly different by zone (p-value<0.0001)

Notable finding: When comparing marital status from this survey's sample to U.S. census data, married respondents appear over-represented. That is, the U.S. census reports that 54% of adult Kansans are married, 11% divorced, and 27% have never been married.¹⁶ However, the U.S. census marital status data is based on persons ages 15 and older, while this survey consisted of persons ages 18 and older.

95. Are you...*Choices were read to respondents.*

Table 55. Employment Status by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Employed full-time	43%	51%	49%	53%	42%
Employed part-time	14%	12%	9%	17%	19%
Not currently employed, but seeking employment	8%	8%	6%	5%	6%
Not currently employed, but not seeking employment at the present time	14%	13%	16%	12%	20%

Retired	21%	16%	20%	13%	12%
Other	1%	<1%	<1%	1%	1%

Results possibly significantly different by zone (p-value<0.0001)

Notable finding: When comparing employment status from this survey's sample to U.S. census data, employment status is somewhat comparable. That is, the U.S. census reports that 69% of adult Kansans are employed (compared to 57% in survey sample), and 31% are not in the labor force (compared to 35% in this survey sample).¹⁶

96. Gender

Table 56. Sample Gender by Zone

Response	Kansans Overall (n=1600)	Northeast (n=400)	South Central (n=400)	Southwest (n=402)	Balance of State (n=398)
Female	57%	53%	56%	54%	56%
Male	43%	47%	44%	46%	44%

Results not significantly different by zone (p-value=0.7070)

Notable finding: When comparing gender from this survey's sample to U.S. census data, female respondents appear over-represented. That is, the U.S. census reports 50.4% of adult Kansans are females.¹⁷

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Section 15

Implications for Problem Gambling Awareness and Prevention Efforts

The majority of respondents gambled. Seventy-five percent (75.4%) of respondents endorsed at least one past-year gambling activity. When messaging about problem gambling, there is a need to be cautious not to alienate those who gamble without problems. Most people draw from their own experience when forming attitudes. As most people gamble and have never developed a gambling problem, it may be difficult for the average person to understand how someone can develop a gambling problem. KDADS may need to challenge commonly held beliefs that problem gambling is a moral weakness and instead message that problem gambling is real and a recognized psychiatric disorder.

Middle aged persons gamble more often than other age groups. Past year gambling was most commonly reported by persons ages 35 to 54. Correspondingly, gamblers ages 35 to 44 represent the age group with the largest proportion of probable problem gamblers (based on endorsing at least one problem gambling screening question). This suggests that treatment outreach strategies may be most effective at targeting frequent gamblers. Reaching frequent gamblers may most efficiently be accomplished through programs within gambling venues or targeted efforts utilizing casino club membership lists.

Most gamblers (79%) report that they “seldom” or “occasionally” gamble, and only four percent self-perceive their gambling as “very often”. This information has important implications for using social norms education for the prevention of problem gambling. Although many persons think of themselves as individuals, the strong tendency of people to conform to group patterns and expectations is consistently documented in scientific literature. Social psychologists have long argued that people tend to adopt group attitudes and act in accordance with group expectations and behaviors based on affiliation needs and social comparison processes. Most at-risk gamblers do not view their gambling as extreme or unusual, as they observe their friends and others in their gambling venue as also gambling frequently. By educating at-risk gamblers that gambling frequency within their community isn’t what they perceive it to be, they may re-evaluate and change their behavior. Perhaps social norms education will be most impactful as a prevention strategy for those at the beginning stages of exploring gambling as a meaningful activity, such as middle school youth.

Thirty-five percent of respondents engaged in slot machine play, video poker, video keno, or video blackjack at a casino in the past 12 months. The majority of problem gamblers in treatment report a preference for electronic gaming devices, such as slot machines. Most of these individuals also buy raffle tickets or play the lottery, but the forms of gambling that appears to produce the most problems for them are slot machines or electronic gaming devices. While people

can develop problems to any form of gambling, it may be important to avoid references to gambling as a blanket term and spend more time describing specific forms of gambling.

Currently gambling on the internet is rare. Gambling on the internet is a less common gambling activity than most other forms of gambling, yet, it is a form of gambling that receives much attention. Although gambling on the internet is a low frequency activity, it is an activity that is worthy of problem gambling prevention attention not because of current use but because of current trends. This may be one area where the field of problem gambling prevention can either stay ahead of the curve or keep up with it. Internet literacy has become an important component of youth education. This conversation needs to include gambling on the internet and the inherent risks. This data can also be useful when addressing social norms, e.g., “your peers are not gambling on the internet, why is that?”

The most common form of regular gambling is playing the lottery (45% of all adults played the lottery in past year). It is interesting to note that so many gamblers are playing the lottery. This suggests that many problem gamblers, although not necessarily hooked on lottery products, may be playing lottery games. Reaching out to lottery players as a target group for responsible gambling promotion and problem gambling awareness is a practice supported by this data. People remember better with repeated messages and messages that have been freshly received. If a large proportion of high risk gamblers are playing the lottery on a daily or weekly basis, they can be messaged to regularly (via signage, website, print messaging on tickets, etc.).

Slot machine and other forms of electronic machine gambling were more commonly cited as a favorite activity (48%) than other forms of gambling among past 30-day gamblers. However, purchasing lottery tickets is the most common gambling activity of frequent gamblers. If we want to reach frequent gamblers, who represent a group at higher risk for having a gambling problem, efforts that target lottery players may be fruitful.

One in seven gamblers report an important reason they gamble is to win money to pay bills or use gambling as a distraction from everyday problems. This finding is concerning as these reasons are not supportive of healthy gambling. Perhaps more could be done to educate the public about the risks of using gambling as a distraction from problems and relying on it to pay bills.

Among those who never or seldom gamble, about half cited moral and ethical concerns as an important reason for that decision. Members of community coalitions that address problem gambling are often energized by their moral or ethical beliefs about gambling. There may be many people in communities who are willing and motivated to get involved in problem gambling prevention efforts.

Among those who never or seldom gamble, 18% reported not gambling more due to distance from betting opportunities. This supports the belief that increased access to gambling will increase participation. Increased participation in frequent gambling has been linked to increased numbers of problem gamblers.

The majority of respondents believe gambling is dangerous for family life. This is useful information for prevention efforts following an environmental change strategy.

Almost three percent (2.8%) of respondents expressed some level of concern about their gambling. When the past-30-day gamblers were asked directly if they thought they had a gambling problem, one percent said that “most of the time” they felt that they “have a problem with gambling,” and six percent said “sometimes.” If extrapolated to the statewide population, these figures suggest that there may be some level of concern among thousands of Kansans that they have a gambling problem. It should be noted that this survey included persons living in Kansas from the general population. That means persons who are incarcerated, or living in a residential treatment facility, or on a military base are not represented in this sample. This is important because other studies have found these groups to have problem gambling prevalence rates up to 30X higher than the general population. Likewise, there are other demographic groups that have higher than average prevalence rates for problem gambling. If 2.8% of respondents who reported some level of concern about their gambling actually manifested a gambling disorder (this rate corresponds with the past-year combined problem and pathological gambling rate found within a meta-analysis of problem gambling prevalence studies within the U.S. and Canada¹⁹), this would suggest that within the general population, there is a relatively low problem gambling prevalence, and therefore problem gambling awareness efforts would best be targeted at higher risk populations.

About nine percent of respondents reported a past or current symptom of problem gambling. Lifetime prevalence rates are interesting in that they can be used as a general risk indicator. One of the best predictors of a future problem is having a past problem.

More than one in five respondents that gambled in the past 30 days experienced at least one problem gambling symptom. This suggests that it is relatively common to have a negative experience related to gambling, especially wanting to cut back on the amount of time or money spent on betting or wagering (7%) and betting more than can be afforded to lose (6%). However, there are negative experiences related to gambling that are very rare, such as (a) experiencing health problems as a result of your gambling (1%) or (b) people telling you that you are betting too much or have a gambling problem (1%). When educating the public about social norms, it may be important to distinguish the more and less common problem gambling symptoms. Most people don’t experience health problems related to their gambling, aren’t ever told they have a gambling problem, don’t have serious and repeated relationship problems related to their gambling, or don’t experience work or school performance issues due to gambling interfering with their productivity (2% or less).

Gambling myths are common. A problem gambling prevention strategy that has received increased levels of support is based on consumer education. In theory, if consumers are well informed and understand the way gambling devices work, they can and will make better choices. One activity directed by this strategy is dispelling myths. This list represents common gambling related myths. The following data show myths prevalent among respondents:

- The more a person gambles, the better his or her odds of coming out ahead (7%)
- Playing more than one slot machine improves a person’s odds of winning (21%)
- When a person almost wins, it’s a good sign that they are due to win soon (4%)
- Using a personal “lucky” technique can help people win (10%)
- Watching the pattern of wins and losses will help a person win (19%)

Believing that “watching the pattern of wins and losses will help a person win” and believing “the more a person gambles, the better his or her odds of coming out ahead” are associated with having problem gambling symptoms. This data is consistent with other reports in the literature that if a person has faulty beliefs about gambling principles, he or she is more likely to be a problem gambler. From a prevention standpoint, this observation suggests that the state can help protect youth from developing gambling problems by better educating them so they can accurately distinguish gambling related facts from fiction.

About one in four respondents had been negatively affected by a problem gambler. This data helps demonstrate that problem gambling affects individuals, families, and communities. Instead of focusing on the small number of pathological gamblers in the at-large population, what may be more impactful is speaking about the one in four who have been negatively affected by a problem gambler. This data suggests that for each problem gambler, an average of 10 other adults are negatively affected along with an undetermined number of children.^{iv}

Persons who experience problem gambling related symptoms are more likely to have been impacted by someone else's gambling. This is not surprising as other studies have found that having a problem gambler in the family increases the odds of problem gambling, as does associating with others who gamble frequently.

Problem gambling impacts comparatively more people in the African American community than within other ethnic groups. One in five African American survey respondents reported being personally affected by the gambling behaviors of a family member, a rate 60% greater than among Caucasian survey respondents.

Among Hispanic, African American, and Asian populations, fewer respondents reported feeling confident they could recognize the signs of a gambling problem. This finding suggests that these ethnic populations may benefit from targeted educational efforts to raise awareness about signs and symptoms of problem gambling.

More than one-third of the respondents who experienced a problem gambling related symptom in the past thought they might want to cut back on time or money spent on betting or wagering (36%). This suggests that there is an audience or market for responsible gambling resources and problem gambling help resources. It may be useful to develop programs to target those who want help managing their gambling as opposed to quitting all their gambling.

Seventy-one percent of respondents believe they know what problem gambling looks like. However, how many people are willing or knowledgeable about how to speak with a friend or family member about concerns they have? Perhaps more efforts could be directed at encouraging parents and others to talk with persons for whom they have gambling related concerns.

^{iv} Based on the 2012 U.S. Census Bureau estimate, there are 2,158,657 adults living in Kansas. The estimated problem gambling prevalence rate in the United States is estimated between 2.1% and 3.2% (Williams, Volberg, & Stevens, 2012). Using the midpoint of this range (2.65%), we can estimate that there are 57,204 current adult problem gamblers in Kansas. Data from this survey found that 26% of respondents have been personally affected by the gambling of others which extrapolates to 561,251 adult Kansans. $561,251 \div 57,204 = 9.8$ or approximately one in 10.

Twenty-eight percent of respondents report knowing about the problem gambling helpline. Perhaps further awareness and outreach efforts are needed to inform more of the population about the helpline.

The second largest single place people would turn to if confronted with a gambling problem is their “spouse”. This finding suggests that spouses of problem gamblers may be a target group worth pursuing when developing problem gambling awareness materials and programs.

The vast majority of Kansans (99%) say they admire the courage of people who seek help for a gambling problem and would never discourage someone from seeking treatment (97%). These findings may be useful when challenging social norms. Prevention efforts should educate the public that nearly all Kansas adults admire the courage of people who seek help for a gambling problem. This may be important to those reluctant to seek help for their gambling problem, as many reported “felt ashamed for self or family” as a significant barrier to entering treatment.²⁰

Twenty-one percent of respondents believe treatment does not work. In certain populations, such as with the Asian respondents, this figure is even higher. If a large portion of the public does not believe gambling treatment works, referrals for gambling treatment will remain low. Further work is needed in order to document treatment effectiveness and educate the public that treatment works.

Southwest Kansas appears to be the geographical area in Kansas most at risk for problem gambling development. (a) The two gambling motivations considered problematic, gambling as a distraction and gambling to pay bills, were endorsed most frequently in Southwest. (b) Southwest appears to be the geographical area that is most skeptical about problem gambling treatment. Significantly more Southwest respondents believed that “the average person can’t afford treatment” (59%), “treatment is only for people with serious difficulties” (30%), and one in 10 do not “admire the courage of those who seek treatment”, compared with more than one in 200 in the rest of the state. (c) Only one in 10 Southwest respondents indicated that they would call the gambling helpline first if they thought they had a gambling problem, compared to one in six in the rest of the state. Southwest also had the largest proportion of respondents who endorsed they “don’t know” where they would turn first if they thought they had a gambling problem (23% compared to 13% statewide). (d) Southwest was elevated in the number of positive endorsements to some of the problem gambling screening questions compared to other areas of the state. Additional support or resources may be warranted in the Southwest region of the state.

The public supports problem gambling treatment and prevention efforts. Ninety-two percent of respondents felt that it was either important or very important to use public funds to make problem gambling treatment available and affordable.

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Section 16

Strengths and Limitations of the Study

This 2012 study is the most comprehensive gambling behaviors and attitude survey ever conducted in Kansas. The study enlisted 1,600 individuals from across Kansas to provide responses to a 96-item standardized survey. The use of standardized methods of data collection, including the use of highly trained interviewers and a highly-structured instrument, likely reduced potential bias and enhanced the validity of the results. The survey instrument was based on one developed by the University of Northern Iowa's Center for Social and Behavioral Research for use in a 2011 survey of adult Iowans. The survey instrument will likely be used in other states in the future, furthering the ability to compare findings between states.

There are some limitations to the 2012 Kansas gambling behaviors and attitudes survey. Perhaps most significantly, the survey is restricted to adults living in households with telephones—the sample does not include adolescents, adults living in group quarters, homeless persons or individuals without landline phone or cell-phone service. Another limitation is the potential for sampling bias. Survey research has generally found that a face-to-face interview at a person's residence tends to elicit more candid/honest responding relative to a telephone interview because it fosters better rapport, and this effect has been found in gambling surveys. For example, a gambling survey was administered to a random sample of 3,028 adults from Ontario, with half the sample receiving a face-to-face residential interview and the other half being interviewed by telephone. The obtained rates of problem gambling were found to be 2.18 times higher in the face-to-face survey compared to the telephone survey.^{21,22} A third limitation relates to response rates for telephone surveys in general. The response rate for this study was 56%, a rate higher than the average 52.5% for problem gambling population prevalence surveys that rely on telephone interviews.²³ Even with an acceptable response rate, generalization of the results may be limited, especially when drawing inferences based on subgroups consisting of fewer than 20 respondents. A fourth limitation is that participation in the survey by male respondents was lower than anticipated (45%), based on population data (50%). Finally, it is important to emphasize that this survey is a cross-sectional 'snapshot' of gambling behaviors and attitudes at a single point in time. This allows us to make point in time associations between variables reported in the study but limits our ability to draw conclusions as to what caused the observed findings.

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Section 17

Summary & Conclusions

The 2012 statewide survey of gambling behaviors and attitudes among adult Kansans documented that while gambling participation among respondents was high, problem gambling awareness was low, and many respondents have been negatively impacted by problem gambling. The rate of casino visitation among respondents is at least 30% higher than the national average, and 44% of the respondents reported to have gambled in the past 30 days. From this group of recent gamblers, one in 18 reported to have bet more than they could afford to lose. When recent gamblers were asked directly if they thought they had a gambling problem, one percent said that “most of the time” they felt that they “have a problem with gambling,” and six percent said “sometimes.” If these patterns held true for the statewide population, that would mean approximately 60,000 Kansas adults are concerned about their gambling.

The consequences of problem gambling are emotional, physical, and financial. These consequences can extend to the friends, families, co-workers and even the employers of those affected. The survey found that about 26% of respondents have been personally affected by the gambling of others.

Responses to survey questions evaluating public awareness suggest that many Kansans are likely unaware of problem gambling resources and treatment services. About 28% of survey respondents said they knew of the statewide problem gambling helpline, and 29% of respondents said they knew of some treatment options in their community.

While most people who gamble do so without experiencing or causing harm, it is clear that a sizeable portion of respondents have been negatively impacted by problem gambling, and respondents showed widespread support to address the problem. Most respondents said they believe it is either “very important” or “important” to use public funds to make problem gambling treatment available and affordable (98%) and to educate young people in school about the risks of gambling (81%).

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