



**Fiscal Year 2006 Annual Report
with Six Year Summary**

The Problem Gamblers Help Network
of West Virginia

1♥800♦GAMBLER

A First Choice Health Systems, Inc. Program
Funded by the West Virginia Lottery
Administered by WV-DHHR
Bureau for Behavioral Health and Health Facilities

The Problem Gamblers Help Network of West Virginia is providing outstanding service. Their innovative techniques have placed them in the forefront of the problem gambling field.

Keith Whyte, Executive Director
National Council on Problem Gambling
Washington, DC

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It is my perception that this service system has been developed on a foundation of sound theory, policy and appears to have been implemented well.

Tim Christensen, Treatment Administrator
Arizona Office of Problem Gambling
Phoenix, AZ

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Problem gambling is gambling behavior that causes disruptions in any major area of life: psychological, physical, social or vocational. The term "Problem Gambling" includes, but is not limited to, the condition known as "Pathological", or "Compulsive" Gambling, a progressive addiction characterized by increasing preoccupation with gambling, a need to bet more money more frequently, restlessness or irritability when attempting to stop, "chasing" losses, and loss of control manifested by continuation of the gambling behavior in spite of mounting, serious, negative consequences.

National Council on Problem Gambling, Washington, DC

Program History

Since 2000, First Choice Health Systems, Inc., has operated The Problem Gamblers Help Network of West Virginia through a contract with the West Virginia Department of Health and Human Resources, Bureau for Behavioral Health and Health Facilities. The West Virginia Lottery funds the program.

For over six years, the Problem Gamblers Help Network of West Virginia has successfully met or exceeded the needs of outreach, assessment and treatment for West Virginians affected by a gambling problem. Additional accomplishments of the program include collection and aggregation of demographic statistics as well as other clinical data relating to problem gambling. The program recruits and trains new treatment providers each year, as well as offers continuing education and ongoing clinical supervision. The program has also conducted six-month, one-year, and two-year follow-up interventions in order to track long-term outcomes and measure efficacy of the various help and treatment interventions offered.

In its first six years, the program has provided initial therapeutic intervention, screening, referral, and information services to 5308 callers concerned about a gambling problem. One thousand three hundred and sixteen (**1,316**) of those calls were completed in FY 06. This report includes clinical and demographic data on the FY 06 callers, as well as a six-year summary at the end.

For four years I went to the track every day and gambled an average of \$300. I would beg, borrow, con and steal to get money. Before this program, I called another line for help and none was there. I was suicidal and ended up in psychiatric hospital where no one knew how to treat my disorder except hide the playing cards from me. Thank goodness now, since 2000, there is real help, real treatment, for gamblers who want it.
**Kim Murphy, Director of Housing & Community Services,
Recovering Compulsive Gambler who lost \$500,000 in Video Lottery Machines
Nitro, WV**

Outreach and Public Awareness

Traveling the interstates each day of work, I am impressed by the high visibility that the Problem Gamblers Network has been able to get with its billboard ads. They are the best and I hear others commenting on them as well.

Gerald J. Schmidt, MA, LPC, MAC
Chief Operations Officer Valley HealthCare Systems
Morgantown, WV

The program conducted a multi-pronged approach to create public awareness about problem gambling and how those affected can access help. Callers were asked how they learned about the program. The FY 2006 data collected on those who provided it indicates that *paid advertising*, including billboards, television, radio, newspaper and Yellow Page ads, was cited as the source of the referral by almost half (**44%**) of those who called. Another significant source of referrals include the toll-free help-line number posted on some West Virginia Limited Video Lottery Terminals in bars and clubs, as well as Video Lottery Terminals at the four state racetracks.

How Callers Learned about the Help-Line and Treatment Program FY 2006

Billboard	362	Health care (doctor, clinic, etc.)	30
Had called previously	146	Brochure/poster at racetrack	20
Number on VLT's	137	Traditional lottery retailers	14
Media (TV, newspaper, radio)	120	Program brochure/poster	13
Family or friend	110	Gamblers Anonymous	10
Not provided	95	Legal System	10
In-Network provider	91	Employer/EAP	7
Yellow Pages	58	Workshop/conference exhibit	5
Other	50	WV Lottery	5
Follow-Up Calls made by Staff	42	Alcoholics Anonymous	3
Website	35	National Gamblers Hotline	3
Racetrack advertising	34	Directory Assistance	2

I have been most impressed by Ms. Moran-Cooper and her staff members who assist in educating our membership regarding The Problem Gamblers Help Network of West Virginia. Their brochures, posters, and other educational materials are clear, well-written, and well received by our professional membership. This program fills a much needed niche.

Jimelle Rumberg, MA, CAE
Executive Director
West Virginia Psychological Association

I appreciate your willingness to include gambling in the broad spectrum of addictions discussed during this week. Your presentation was well-received.

**Dr. Rolly Sullivan, MD, Professor
West Virginia University School of Medicine
Morgantown, WV**

In addition to paid advertising, no-cost and low-cost outreach included earned media as well as professional presentations and conference exhibits to target audiences who might be in a position to recognize a person with a gambling problem and make a referral. Professional workshop presentations and/or informational displays were offered to attendees at the following professional conferences and meetings:

**WVU Medical School Addictions Institute, Morgantown
Tri-State Race Track and Gaming Center, Cross Lanes
Governors Summit on Aging, Canaan Valley
WV Association of Drug and Alcohol Addiction Counselors, Canaan Valley
Mountain State Counseling Alliance, Flatwoods
WV National Association of Social Workers Conference, Charleston
WV Limited Video Lottery Operators Conference, Morgantown
Governors Summit on Worksite Wellness, Charleston
West Virginia Psychological Association, Charleston
Rural Health Conference, Morgantown
West Virginia Family Medicine Conference, Huntington
Parent Resource Center Conference, Charleston
School-Based Health Conference, Flatwoods
West Virginia Probation Officers Conference, Wheeling
West Virginia State University, Institute
South Charleston Rotary Club
Senior Institute, Morgantown
Teen Expo, Nitro
Court Appointed Special Advocates Conference, Charleston
Veterans Administration Center, Morgantown
Kiwanis Club, Parkersburg
Vandalia Rotary Club, Charleston
Guyan Valley Health Fair
Ripley High School Health Fair
Summersville Junior High School Health Fair
Albright Health Fair**

Your expertise, teaching style and program content were well-received by participants.

**Charlotte Whipkey, MPA/MSW, LGSW
West Virginia University Division of Social Work
Morgantown, WV**

You were great and the material came in a timely manner. I hope in the future we can have a return session. Again thanks for a job well done.

**John Rockhold, President
Kiwanis Club
Parkesburg, WV**

Help-line Intake/Therapeutic Intervention



They listened, and they let me cry, and they let me tell my story and they offered me help right away.

Pam W., Recovering Compulsive Gambler, former Credit Union Vice-President who was convicted of embezzling \$37,000 to keep playing Video Lottery Machines St. Albans, WV

The Problem Gamblers Help Network of West Virginia provides a 24 hour, seven days a week, toll free number (1-800-GAMBLER) staffed by trained, credentialed clinical professionals. When a caller accesses the Help-line, he or she is asked to complete a preliminary clinical assessment and offered initial therapeutic treatment intervention by telephone. The professional help-line clinicians also complete intakes from calls dialed from a (304) area code to the National Council on Problem Gambling whose help-line telephone number is 1-800-522-4700.

All help-line callers are asked if they have any thoughts of suicide. Those who say yes are further assessed for suicidal plan, intent and means. Those in imminent danger are encouraged to seek immediate help from the local hospital emergency room. For those who are found to be suicidal (or homicidal) and who refuse to commit to safety, the local emergency authorities are notified.

The Problem Gamblers Help Network is a tremendous program, helping our state know that those who are developing gambling problems can get access to all of the help they need quickly, privately, and professionally with one phone call.

**Rev. Dr. Sky Kershner, Executive Director
Kanawha Pastoral Counseling Center
Charleston, WV**

The gambler was suicidal and I am convinced she would have killed herself had it not been for the six-month follow-up call (by PGHNWV employee) Steve Burton. What a tremendous job this network does!

**David Frederick, Ph.D
Huntington, WV**

Persons Helped

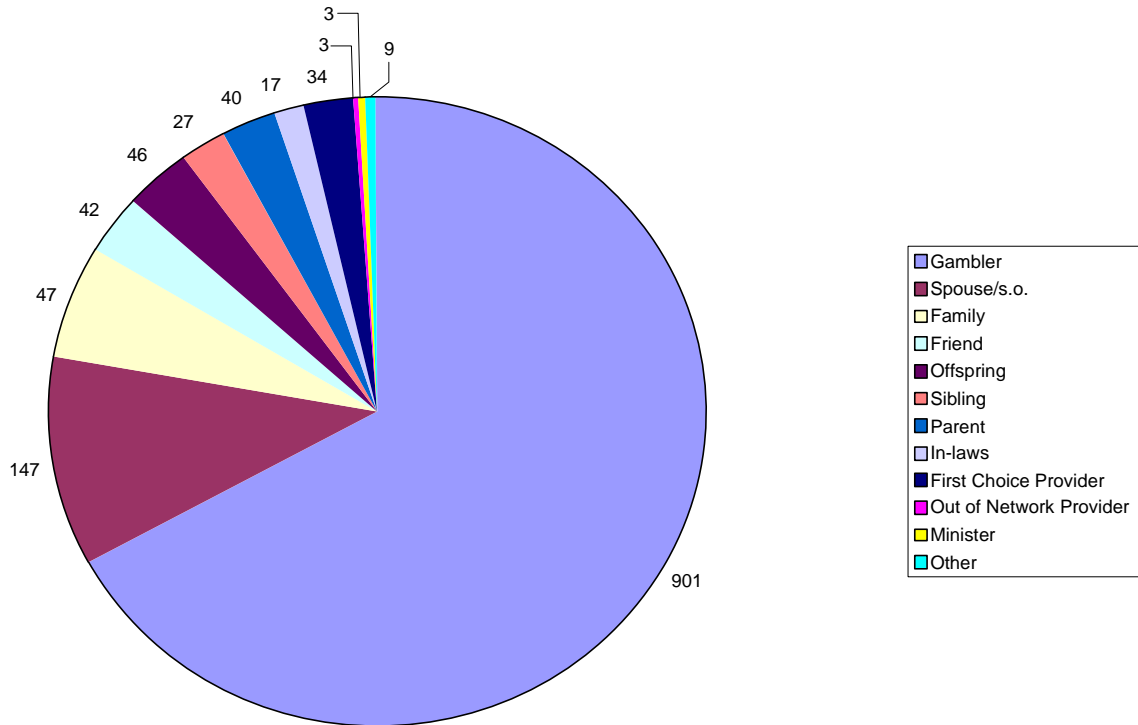


I think one of the best parts about this program is that it is data driven. Data is collected continually and reviewed regularly to help improve the program and monitor program efficiency.

Norman Kruedelbach, Ph. D.
Pine Island, Florida

From July 1, 2005 through June 30, 2006, **1316** people completed a telephone intake through the Problem Gamblers Help-Line toll-free number, seeking assistance for their own or someone else's gambling problem. The Help-Line clinical staff answered another additional 1294 calls during that period that are described as "non-intake" calls (hang-ups, wrong numbers, media and legislative inquiries, requests for information for research, etc).

Of the persons who self-identified to Help-line staff, 68% or 901 of them were the gambler. One hundred and forty-seven (147) callers were the spouses or significant others of a problem gambler. This graph shows how the callers to the help-line in FY 06 identified themselves.



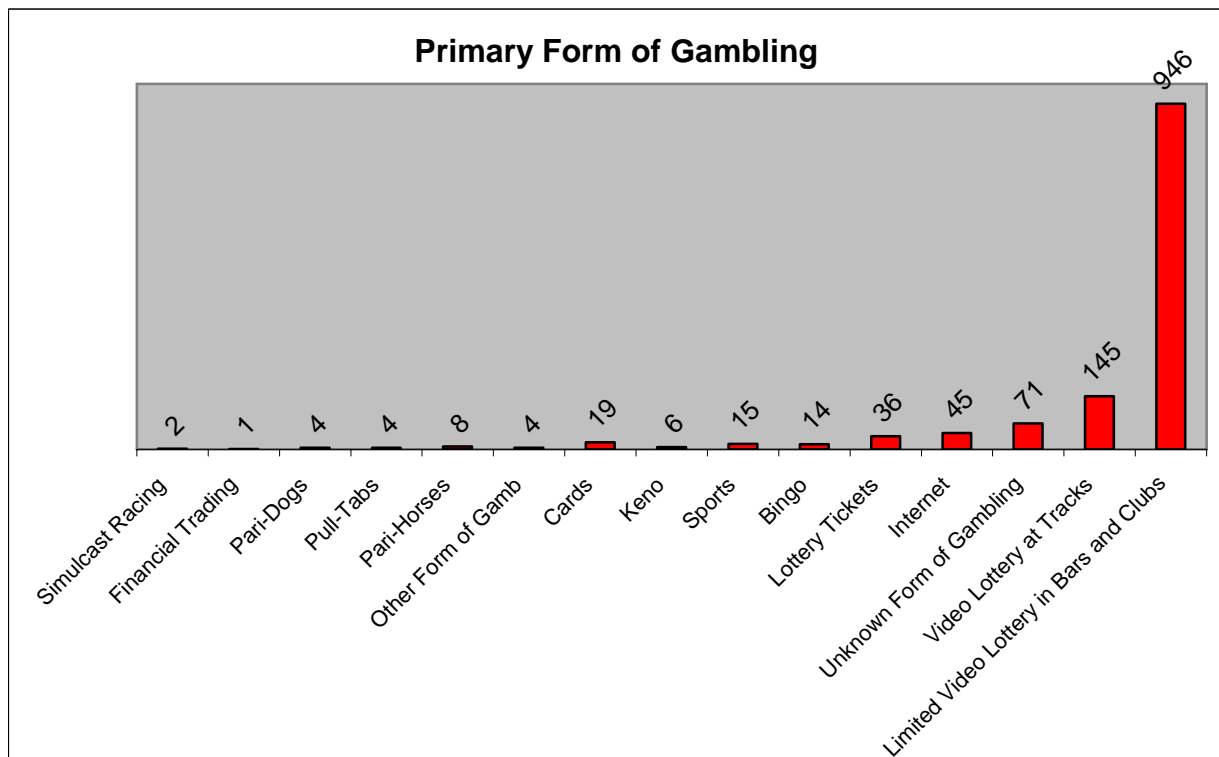
**County of Residence of the Callers Seeking Assistance
with a Gambling Problem for Themselves or a Loved One**

Calls came in from all West Virginia counties except Grant, Morgan and Webster. Kanawha County residents completed the most intake calls at 178, followed by Wood County with 92 calls and Cabell with 82 calls. Counties from which at least 10 residents called for help are as follows:

Berkeley	81	Jefferson	32	Preston	27
Boone	21	Kanawha	178	Putnam	34
Brooke	34	Marion	39	Raleigh	47
Cabell	82	Marshall	17	Randolph	12
Fayette	27	Mercer	33	Summers	10
Greenbrier	13	Monongalia	66	Wayne	12
Hancock	55	Ohio	30	Upshur	14
Harrison	60	Pleasants	10	Wood	92

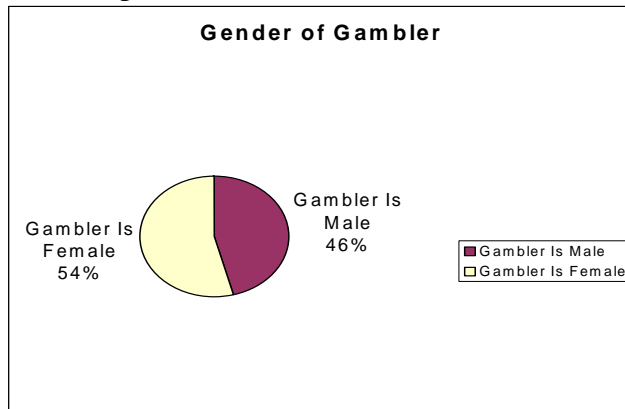
Primary Form of Gambling (Game of Most Losses)

Of data provided by callers, **88%** reported Limited Video Lottery as their primary form of gambling: Video Lottery machines at the racetracks were noted by **11%** and **76%** said they were playing Limited Video Lottery machines at bars, clubs and restaurants. In some cases, the problem gamblers engaged in more than one primary form of gambling. Although still small in number, calls regarding problem gambling on the internet increased by **78%** over FY 2005. This graph illustrates the primary form of gambling cited by callers to the help-line in FY 06. Callers were either self-reporting or were reporting on the type of gambling their loved one does.



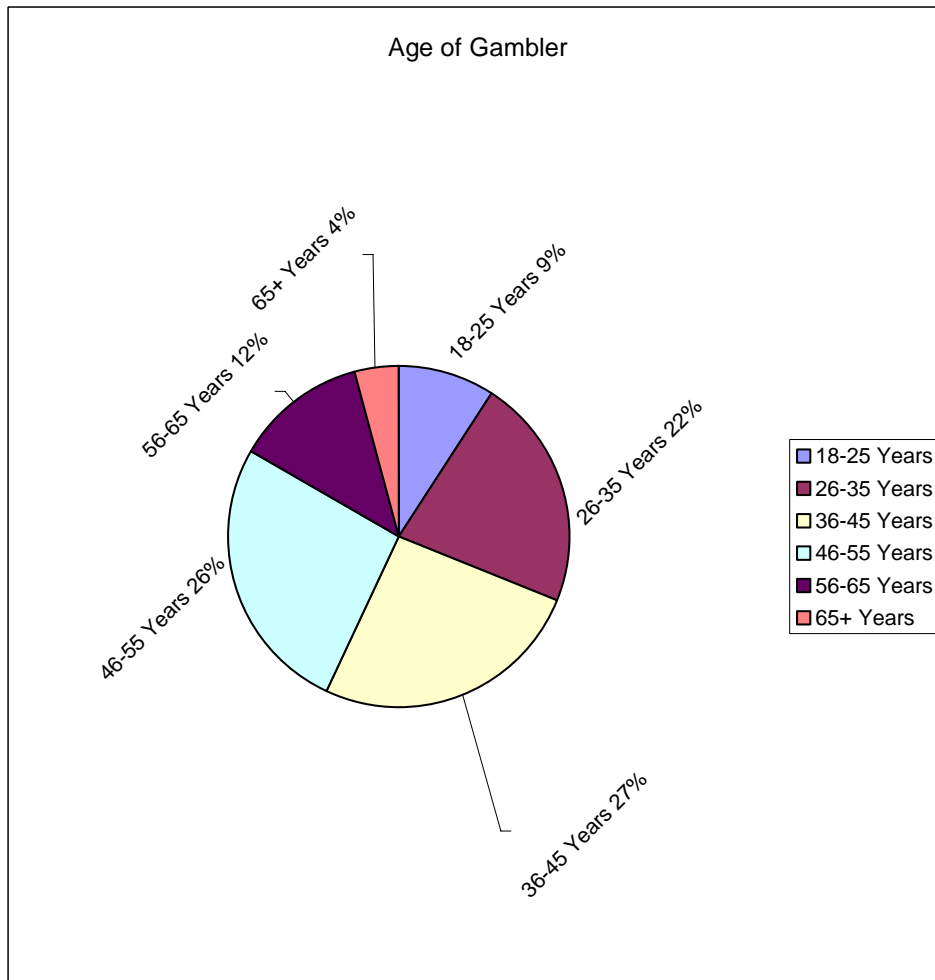
Gender of the Problem Gamblers

Continuing a trend first noted in 2004 and that was repeated again in 2005, fifty-four percent (**54%**) of the problem gamblers were female and forty-six percent (**46%**) were male in the 1316 intakes completed in FY06.



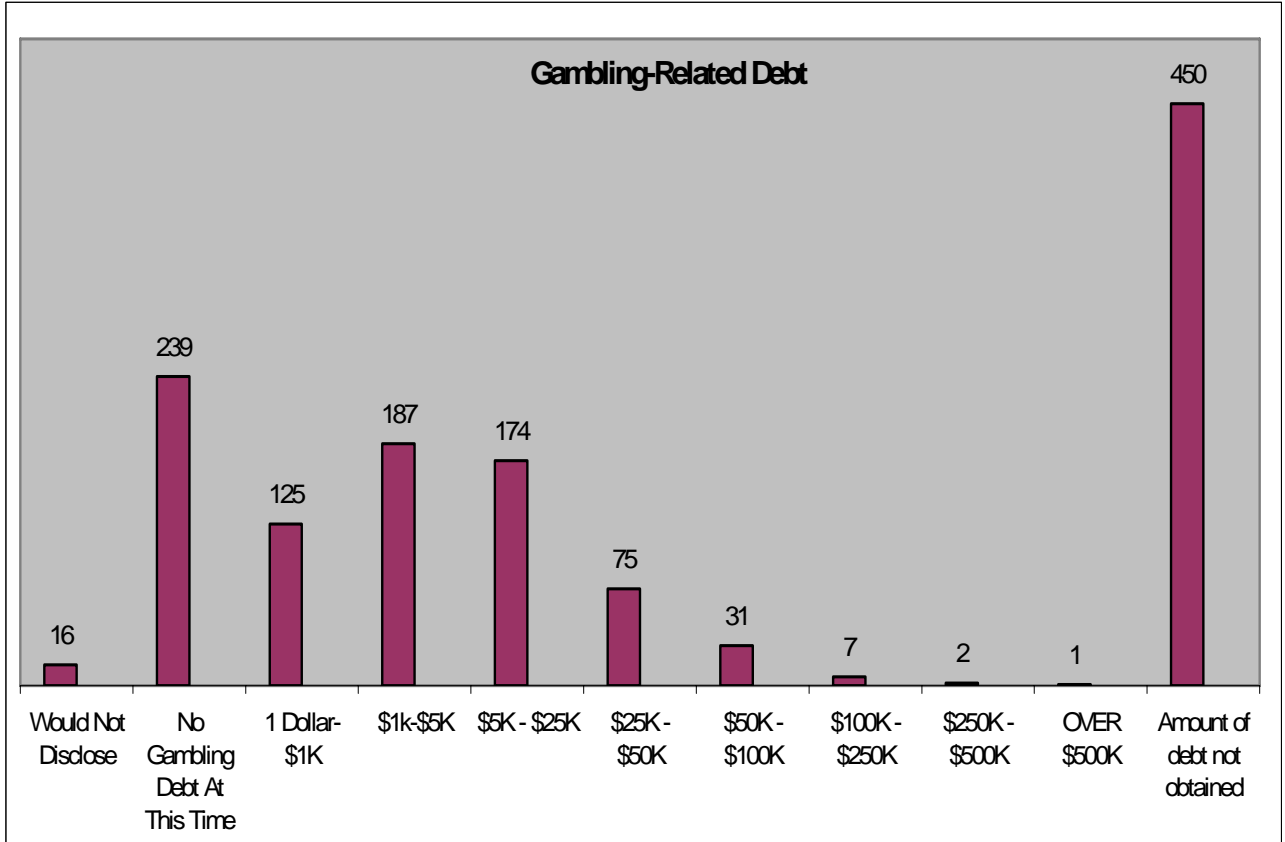
Age of Problem Gambler

The age ranges provided for the problem gamblers who called the help-line in FY 06.



Debt Due to Gambling

Callers were asked the amount of gambling-related debt, not including mortgages, for example, unless the problem gamblers had borrowed against their home to get money because of gambling. About half of the callers reported financial debt due to gambling. In the following chart, “amount of debt not obtained” refers to those callers who either did not know the gambling-related debt (usually those calling about a loved one) or those for whom this information was not obtained.



They provide a much needed service to the citizens and families of West Virginia. With an increase of people facing financial difficulties as a result of gambling, this service is necessary. Without this service many individuals and families would not have anywhere to turn for help.

Jeff Wise, President

Consumer Credit Counseling Service of Southern WV

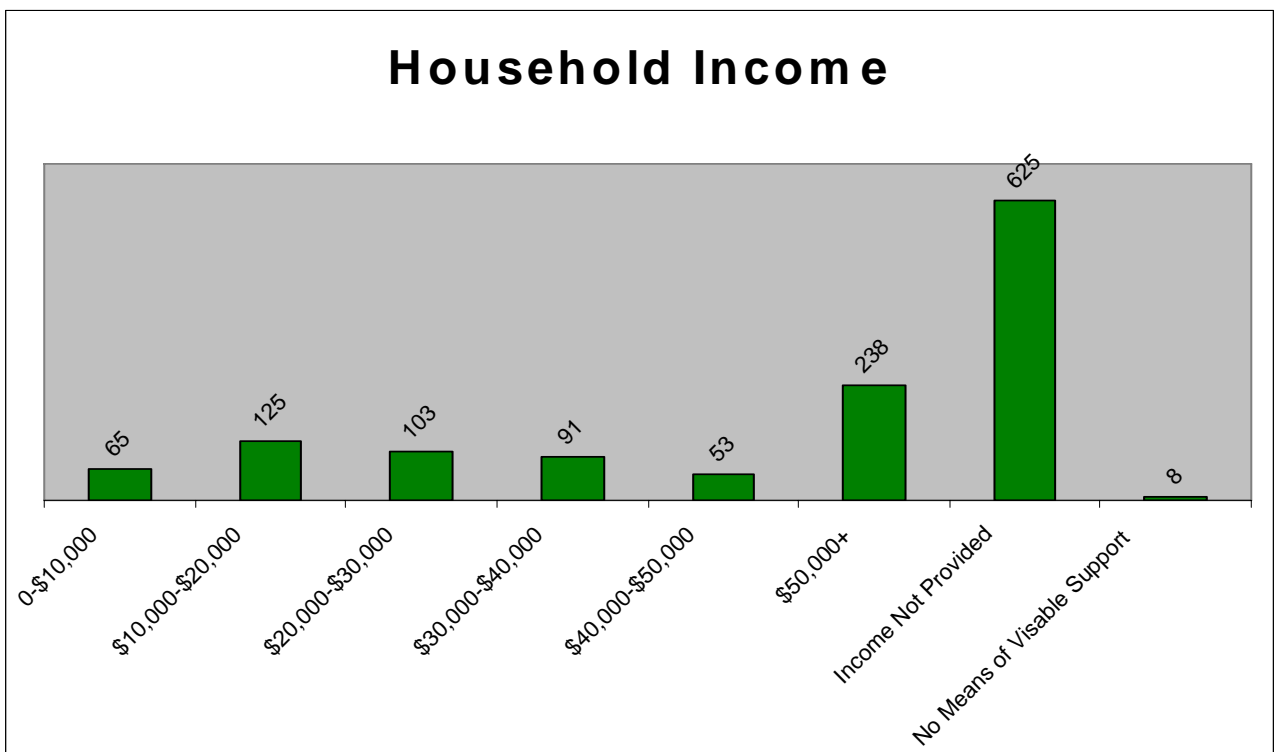
Financial problems related to gambling:

Callers were asked to self-report the type of financial problems caused by the gambling. Of those who provided information, almost two-thirds (65%) admitted to using all expendable income on gambling.

All Expendable Income Spent on Gambling	856
Bills Payable	672
Borrowed Money from Relatives	456
Credit Card Charges	398
Borrowed Money from Friends	368
Wrote Bad Checks	308
Spent All Savings	135
Sold Property to Gamble	134
Obtained Bank Loans	109
Stole Money to Gamble	103
Filed Bankruptcy Because of Gambling	88
Borrowed Money from Retirement	40
Second Mortgage Due to Gambling	34
Contemplating Bankruptcy	27
Business Debts Payable	26
Car Repossessed	20
No Financial Issues Identified	35

Household Income

Callers were asked to give the estimated annual household income of the problem gambler. The following graph represents household income for callers in FY 06



Source of Income/Occupation

The source of income/occupation data was asked during each help-line intake and was provided on 1070 problem gamblers. Of those, **12%** noted “**disability**” and **10%** noted “**unemployment**” as the primary source of income. This was followed by work in or with the gaming industry at seven percent (**7%**). Callers are categorized into one of forty-six different employment/occupational categories, and those categories that totaled **3%** or more of the problem gamblers are as follows:

Unemployment	12%
Disability	10%
Gaming Industry	7%
Retired	6%
Health Care/Social Services	6%
Restaurant	6%
Homemaker	5%
Labor/manufacturing	4%
Self-employed	4%
Sales	4%

Precipitating Problems or “Why They Called:”

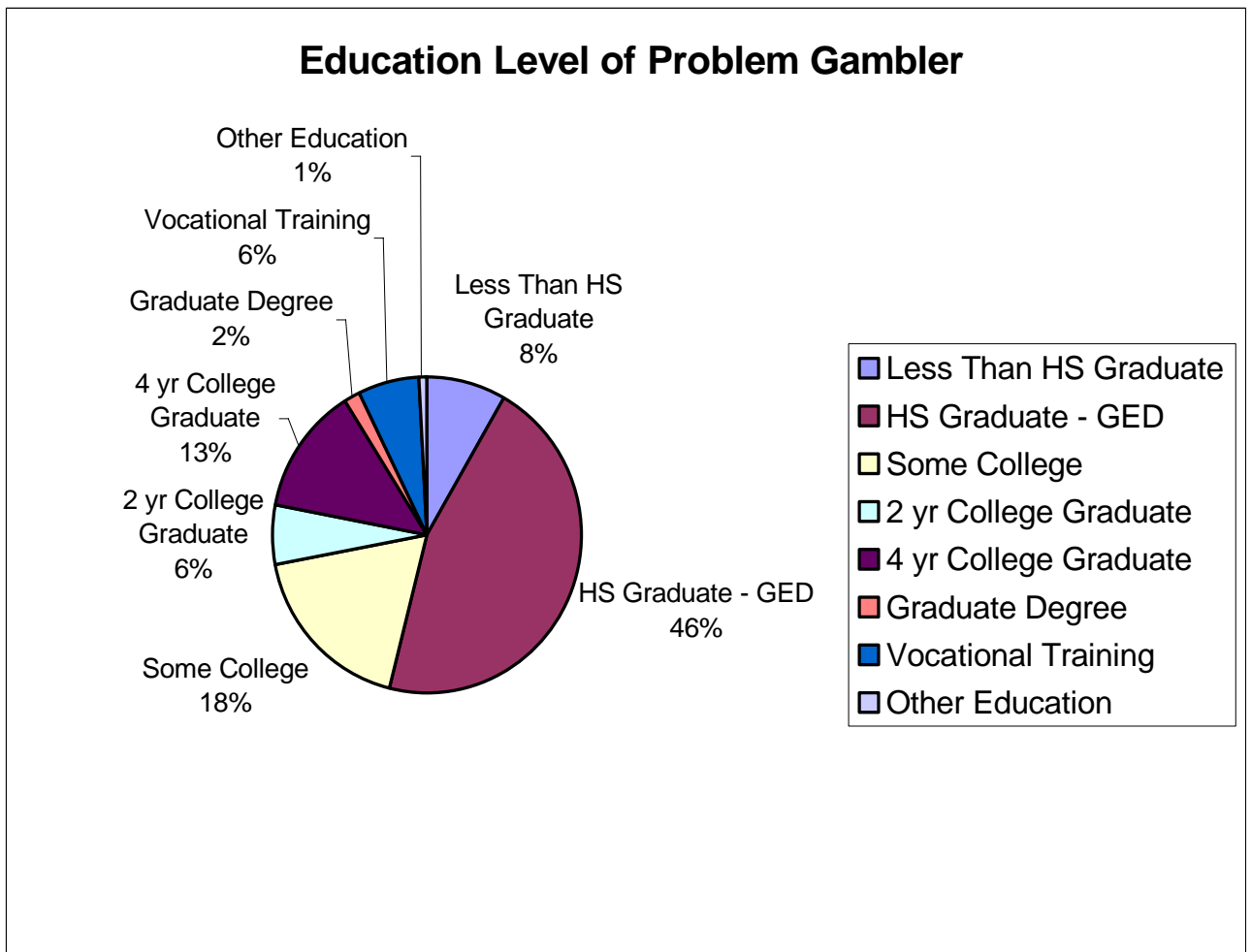
Help-line callers are asked what prompted their call and most report several reasons. Thirty-two percent (**32%**) call to get help for a loved one. Thirty-seven percent (**37%**) report deciding to call on their own to stop gambling, while forty-four percent (**44%**) say a family member asked them to get help. Other reasons cited include legal problems (some are court ordered to treatment), employment problems, and health problems. Please note that some callers reported more than one reason for calling.

With so many problem gamblers in denial, it is great that the Problem Gamblers Help Network offers free help to loved ones when the gambler won't admit a problem. It is refreshing to see the kind of passion for their work demonstrated by the staff of the Problem Gamblers Help Network of West Virginia. Their clients, and the citizens of West Virginia, are getting incredible service from the model program.

Samuel A. Hickman, ACSW, LCSW
Executive Director
National Association of Social Workers
West Virginia Chapter

Level of Education

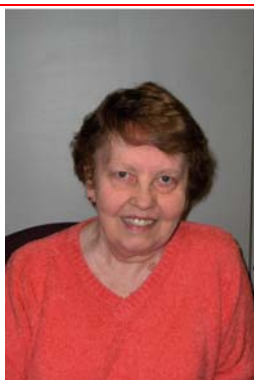
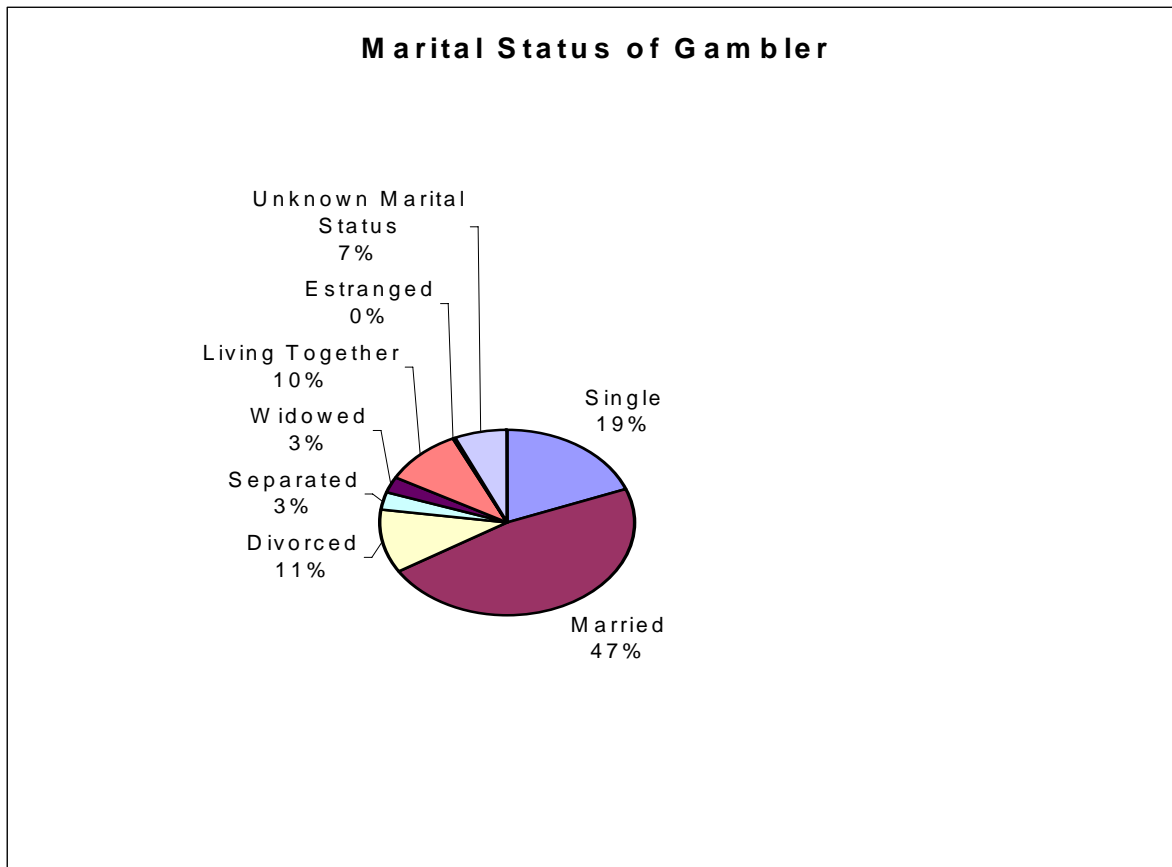
Callers to the help-line are asked about the highest level of education the gambler has attained. This graph illustrates that data for callers in FY 06.



Six months ago I was on the verge of suicide and didn't think things could be any worse. I can't believe how much better things are now and it's amazing. I owe a great deal to the counselor provided to me by the Problem Gamblers Help Network.
**Greg Long, Unemployed, Former Bar Owner Who Played Limited Video Lottery
Martinsburg, WV**

Marital Status of Gamblers

Of callers providing marital status of the gambler, less than half of the problem gamblers were married. The following graph represents marital status of callers in FY 06.



In three years I managed to lie, steal, lose my husband of 45 years, and go through \$300,000 on gambling. Limited Video Lottery machines became the most important thing in my life. Problem Gamblers Help-line probably has no idea how important they are to me. Through them, I've begun to understand that I am not now, nor will I ever again, be alone in my battle."

**Ann Klinestiver, Doctor's Wife, Retired Teacher, Recovering Compulsive Gambler
Milton, WV**

Symptoms of Problem Gambling

Our professional help-line clinicians use 10 symptoms outlined in the DSM-IV (American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders Fourth Edition) to do an initial diagnostic screen. The symptoms reported below are repeated (in volume) as "pathological" gamblers will have five (5) or more symptoms each and "problem gamblers" each may have up to four (4). The most common symptom noted was "loss of control" which is defined by the DSM-IV as *"has repeated unsuccessful efforts to control, cut back, or stop gambling."* This is followed by "chasing losses" which the DSM-IV notes as *"after losing money gambling, often returns another day to get even."* Lying, defined as *"lies to family members, therapist, or others to conceal the extent of the involvement in gambling"* was the third noted in terms of frequency among those seeking help.

Loss of control	1066	Financial bailouts	628
Chasing Losses	1008	Loss of job/relationship	555
Lying	1001	Illegal activities	432
Tolerance	921	Withdrawal	298
Escape	881	Diagnosis unknown	118
Preoccupation	699	No symptoms identified	7

Risk Factors

National research indicates there are several "factors" that alone, or in combination with others, may make someone more at risk for developing a serious gambling problem. Of all the risk factor information provided, an "early big win" was the most common occurrence, cited by 70% of the gamblers who later developed a problem. The most common risk factors, as identified by 10% or more of the callers were:

Early Big Win	70%
Personal history of mental health issues (depression, anxiety, etc)	42%
Family history of alcoholism	26%
Family history of gambling	18%
Personal history of alcohol abuse/dependence	14%
Empty nest/lonely/bored	11%

Referral Status

Of the total calls received, **821** people accepted and were scheduled for a face-to-face clinical assessment and consultation with one of West Virginia's specially trained outpatient treatment providers.

Of those referred, **602 (73%)** completed the initial diagnostic assessment and consultation. This "show-up" data is significantly higher than the national average "show up" estimates of **5% to 10%**, and is indicative of the proactive efforts and high skill level of the help-line clinical professionals.

Additional services offered were referrals to self-help support and recovery groups, Consumer Credit Counseling offices, and packets of educational materials, resources and information to be sent by US mail.

West Virginia Lottery Funded Outpatient Treatment



The Problem Gamblers Help Network of West Virginia is invaluable. They provide a shoulder to cry on but more importantly advice on help. If you let them, they will set up a counselor for one-on-one therapy, send a packet of information and advise you on the location of group support meetings.

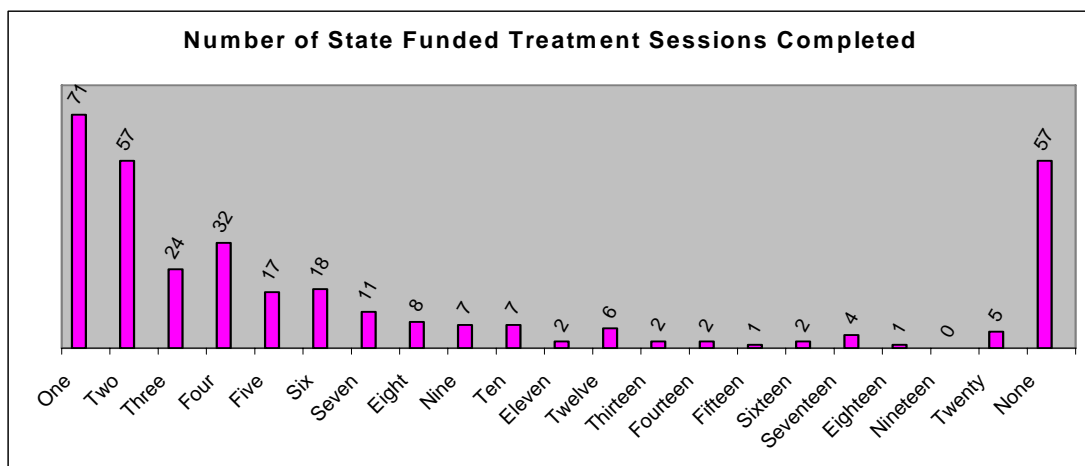
**Sandy Yakim, Elementary School Teacher, Compulsive Gambler
Recovering from Limited Video Lottery Addiction
Morgantown, WV**

For clients who wished to continue with outpatient treatment/psychotherapy and who have no alternate payer, such as health insurance, network clinicians may provide a written treatment plan and request pre-certification to continue to provide additional individual sessions. Counselors are given approval for further lottery-funded treatment in three or six session increments.

The primary reason why West Virginia Lottery treatment funds were requested:

Client had no health insurance	195
Treatment provider not in client's insurance network	91
Client's health insurance deductible exceed treatment costs	42
Pathological Gambling not covered by client's health insurance	13
Other	8

As a payer of last resort, when the client meets the clinical criteria, our program funds pay for up to 20 outpatient treatment sessions for problem gamblers and up to 10 outpatient sessions for the family members. More than half of the clients completed up to six sessions. The following graph shows the number of sessions completed per client. This graph does not show sessions completed for callers with private insurance.



Outcomes: Six-month and One Year Follow-Up

I was dedicated to making sure that my children and I got the emotional help we needed.

**Amy G., Nurse, Mother of Two
Victim of Gambling-Related Identity-Theft
Widow of compulsive gambler who committed suicide
Morgantown, WV**

After voluntary entry into the Problem Gamblers Help-line and Treatment Program, Help-line clinical professional staff contacts clients at intervals of six months and one year to determine program efficacy and measurable outcomes. Toward the end of FY 06 two-year follow-up calls were also initiated and data is currently being compiled on these calls. The information is self-reported by the gambler, or in some cases reported about the gambler by the loved one who called on their behalf. Recidivism, abstinence and gambling-related debt are some of the factors measured and reported as follows:

Six-month follow-up outcomes

Of the 528 callers providing information, **264** or **50%** of the callers said that the gambler was no longer gambling. An additional **124** or **24%** of callers reached said that he/she or the gambler had significantly decreased gambling activity. Combined, of the **528 callers, 388** or **74%** said the gambler had either stopped or had significantly reduced gambling activity. Two hundred and twenty-three (**223**), of the callers reached, or **48%** who previously reported a gambling debt, reported a decrease in gambling debt.

One-year follow-up outcomes

Of the 261 callers reached, **142** or **55%** said the gambler was no longer gambling. An additional **55** or **21%** of callers said that the gambler had significantly decreased gambling activity. Combined, of the **261 callers, 197** or **76%** callers said that he/she or the gambler either stopped or significantly reduced gambling activity. Eighty-nine (89) of the callers reached, or 41% of those who previously reported a gambling debt, reported a decrease in gambling debt.

This is a tough addiction to beat but the Problem Gamblers Help Network has supported me through several relapses and at last, I am gambling-free for over a year now.

**David Turner, Entrepreneur, Father of Three and Compulsive Gambler in Recovery
Dellslow, WV**

Clinician Training and Education

The program recruits, screens, trains and contracts with individual behavioral health professionals (counselors, social workers, psychologists) statewide to assure that all West Virginia residents have ready access to needed face-to-face services within a 30-mile drive of their place of residence. In order to maintain an adequate level of trained professionals to serve the West Virginians in need, the program offers these initial 35-hour trainings once or twice annually. The training includes four and one half (4 1/2) days of classroom training in the diagnosis and treatment of problem gamblers and their loved ones, detailed review of area resources for problem gamblers and their loved ones, as well as hands-on gambling experience.

In FY06, one 35-hour basic training was provided to 14 new clinicians working in underserved areas.



Compulsive gambler and elementary school teacher Sandy Yakim shares her recovery story with new trainees

In addition to basic training, the Problem Gamblers Help Network of West Virginia program conducts regular ongoing clinical supervision sessions around the state so that clinicians providing assessment and treatment have professional oversight of their work.

Over 60 clinicians attended at least one of seven (7) Clinical Supervision sessions conducted at various locations statewide by Norman Kruedelbach, Ph.D., our program's clinical supervisor/consultant.

The field of problem gambling is fast growing with new research findings added regularly. Therefore, the Problem Gamblers Help Network of West Virginia also provides a statewide continuing education conference for advanced training. National experts come to West Virginia to share new information that will better prepare the help-line and treatment professionals to serve their clients.

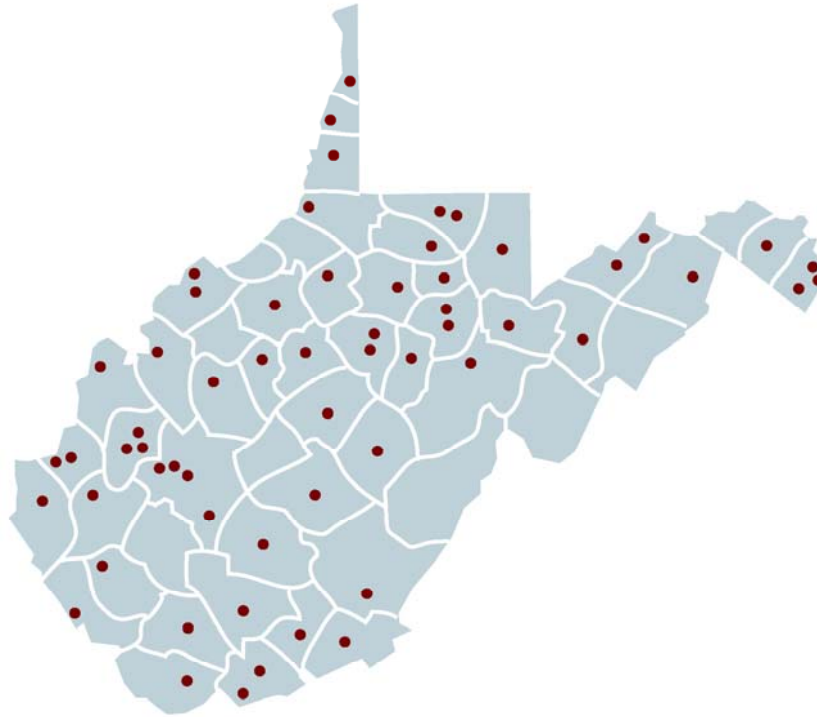
An advanced continuing education training for 50 clinicians and program staff was held in Charleston in December 2005.

Ongoing Initiatives and Program Highlights

Recruitment and Retention

The Problem Gamblers Help Network of West Virginia goal is to offer all callers an appointment with a trained professional within 72 hours of their calls and within 30 miles of their homes. West Virginia's rural geography and lack of credentialed problem gambling professionals in some remote areas make ongoing recruitment and training imperative. In order to reduce attrition, additional efforts and incentives are offered for provider retention. The Problem Gamblers Help Network of West Virginia has trained at least one professionally licensed provider in many West Virginia cities, as shown by the following map. Some cities have multiple providers to meet the needs of help-line callers.

Communities in which Problem Gamblers Help Network of West Virginia has at least one treatment provider as of September 8, 2006



Barboursville
Beckley
Belington
Bluefield
Buckhannon
Cabin Creek
Charles Town
Charleston
Clarksburg
Elkins
Fairmont
Fayetteville

Ft. Ashby
Glensville
Grantsville
Hamlin
Harrisville
Hinton
Huntington
Hurricane
Jane Lew
Keyser
Kingwood
Lewisburg

Logan
Martinsburg
Morgantown
Moundsville
Mullens
New Martinsville
Parkersburg
Petersburg
Phillipi
Point Pleasant
Princeton
Ravenswood

Romney
Shepherdstown
South Charleston
Spencer
St. Albans
St. George
Summersville
Sutton
Teays Valley
Union
Vienna
Wayne

Webster Springs
Weirton
Welch
Wellsburg
West Union
Weston
Westover
Wheeling
Williamson
Winfield

Ongoing Initiatives and Program Highlights (Continued)

Racetrack Employee Education

A staff member provides education about problem gambling to new employee orientation each week at Tri-State Racetrack and Gaming Center, Cross Lanes, WV. Each year, during National Problem Gambling Awareness Week, we set up a table-top display with educational materials for players, as well as offer ongoing employee education sessions.

I thought the employee training was informative and insightful.

**Brian Hamra, Group Sales
Tri-State Racetrack and Gaming Center.**

Publication of Newsletter

In July of 2005, the Problem Gamblers Help Network of West Virginia started publishing a newsletter to create awareness about problem gambling and highlight program initiatives. In FY 2006 the Network published and distributed three editions of the newsletter. In addition to mailing a copy to each help-line caller and all state gambling addiction treatment providers, copies of the newsletter are mailed to targeted referral sources. They include but are not limited to:

Members of National Association of Social Workers, West Virginia Chapter
Members of the West Virginia Association of Drug and Alcohol Counselors
Management Employees of the State's Four Racetrack and Gaming Centers
Members of the West Virginia Legislature
Members of the WV Psychological Association
Members of Charleston City Council
Members of West Virginia Rural Health Agencies
West Virginia Committee on Aging
County Senior Centers
Kanawha County Magistrates & Commissioners
Limited Video Lottery Operators
West Virginia Probation Officers
Clergy members of the WV Council of Churches
West Virginia Judges
WV DHHR County Offices
Family Resource Network Offices

Professional Recognition and Accomplishments

National Problem Gambling Awareness Week

This is tremendous! I just wanted to be sure to let you know how much all your efforts and time are appreciated by NCPG. Thanks again!

Dennis P. McNeilly, Psy. D. Associate Professor of Psychiatry, Associate Director of Medical Student Psychiatry Education, University of Nebraska Medical Center Omaha, Nebraska

In 2004, 2005 and 2006, because of the demonstrated experience and success within our own state, the Problem Gamblers Help Network's Executive Director was asked to serve as Chairperson of the National Problem Gambling Awareness Week campaign. For more information, go to www.npgaw.org.

We have passed the halfway mark of our NPGAW campaign and I must say this is the best year ever! Kudos to Mia for her leadership, enthusiasm, creativity and resourcefulness in pulling off this special project.

**Dr. Rena Nora, MD, Expert in Diagnosis and Treatment of Problem Gambling
Las Vegas, Nevada**

National Conference on Problem Gambling

As early as June 2002, in Dallas and subsequently in 2003 in Louisville, 2004 in Phoenix and New Orleans in 2005, the Problem Gamblers Help Network of West Virginia was asked to present various workshops regarding its program at the National Conference on Problem Gambling.

National Council on Problem Gambling

In June 2006, the program's executive director was elected to a three-year term on the Board of Directors for the National Council on Problem Gambling, Washington, DC.

The West Virginia program has garnered national recognition because of its success in transitioning callers with gambling problems into treatment with trained counselors.

**Rachel A. Volberg, Ph. D.,
Former President of the National Council on Problem Gambling
Northampton, MA**

West Virginia Council on Problem Gambling

Two Problem Gamblers Help Network professionals hold positions on the 12-member Board of Directors of the West Virginia Council on Problem Gambling.

Inter-State Collaboration

By coordinating with the Kentucky Council on Problem Gambling and the Pennsylvania Council on Gambling Problems, both whom share the same toll-free help-line number as West Virginia, the program is able to save money on shared outreach billboards at several border areas.

Sharing the ultimate goal to help problem gamblers, the Problem Gamblers Help Network of West Virginia and the Kentucky Council on Problem Gambling have collaborated on projects. Such collaborative efforts between states is rare among the emerging programs to assist problem

**Mike Stone, Executive Director
Kentucky Council on Problem Gambling
Frankfort, KY**

International Think Tank on Problem Gambling

In 2006, the executive director of The Problem Gamblers Help Network of West Virginia was asked to serve as a delegate to the 50-member International Think Tank on Problem Gambling. She was one of three Americans.

I am working in the Ministry of Community Development, Youth and Sports in Singapore. International researcher Dr. Volberg had suggested that I approach you on efforts in West Virginia to evaluate the effectiveness of problem gambling treatment services.

Su Chern Ong, Singapore

Alberta Gaming Research Institute Annual Conference

The executive director of the Problem Gamblers Help Network of West Virginia has been asked to present its program design and outcomes in a session titled “Innovations in Help-line Services and Their Evaluation.” All expenses for this presentation provided by the Alberta Gaming Research Institute, Canada.

Please know your dedicated work with the members of the WVA & LVLOA is very much appreciated.

**Patricia R. Pope
Executive Director West Virginia Amusement and Video Lottery Operators Association**

Program Funding and Expenditures

The state's gaming industry considers West Virginia's problem gamblers help network program to be one of the best in the nation.

John C. Musgrave, West Virginia Lottery Director

The West Virginia Lottery Commission is the sole funding source for the Problem Gamblers Help Network of West Virginia, a program established in the calendar year 2000 to assist problem gamblers and/or those who care about them. The program is available to all residents of West Virginia regardless of age, gender, or the type of gambling in which they, or a loved one, engage.

By statute, the West Virginia Lottery may provide a maximum of \$1.5 million from available administrative expense from Racetrack Video Lottery and Limited Video Lottery, to the Compulsive Gambling Treatment Fund.

In FY06 the West Virginia Lottery Commission approved the maximum funding for the Compulsive Gambling Treatment Fund.

Governing laws related to West Virginia Lottery Commission funding of this program may be found in the Racetrack Video Lottery Act, 29-22A-19 and the Limited Video Lottery Act, 29-22-1408.

In FY 06, the Problem Gamblers Help of West Virginia spent*:

◇ Outreach, Advertising, Public Awareness	\$440,274.00
◇ Diagnostic Assessment and Outpatient Treatment	\$267,613.00
◇ Administration (rent, utilities, supplies, etc)	\$252,434.00
◇ Training (new clinician; continuing education; clinical supervision)	\$80,183.00
◇ Help-line Personnel (salaries, benefits, payroll taxes, travel)	\$309,339.00

*This does not include administration fee taken by the Department of Health and Human Services.

The Problem Gamblers Help Network of West Virginia receives substantial funding from the West Virginia Lottery and is therefore able to provide a high level of service to problem gamblers in the state.

Keith Whyte
Executive Director
National Council on Problem Gambling
Washington, D.C

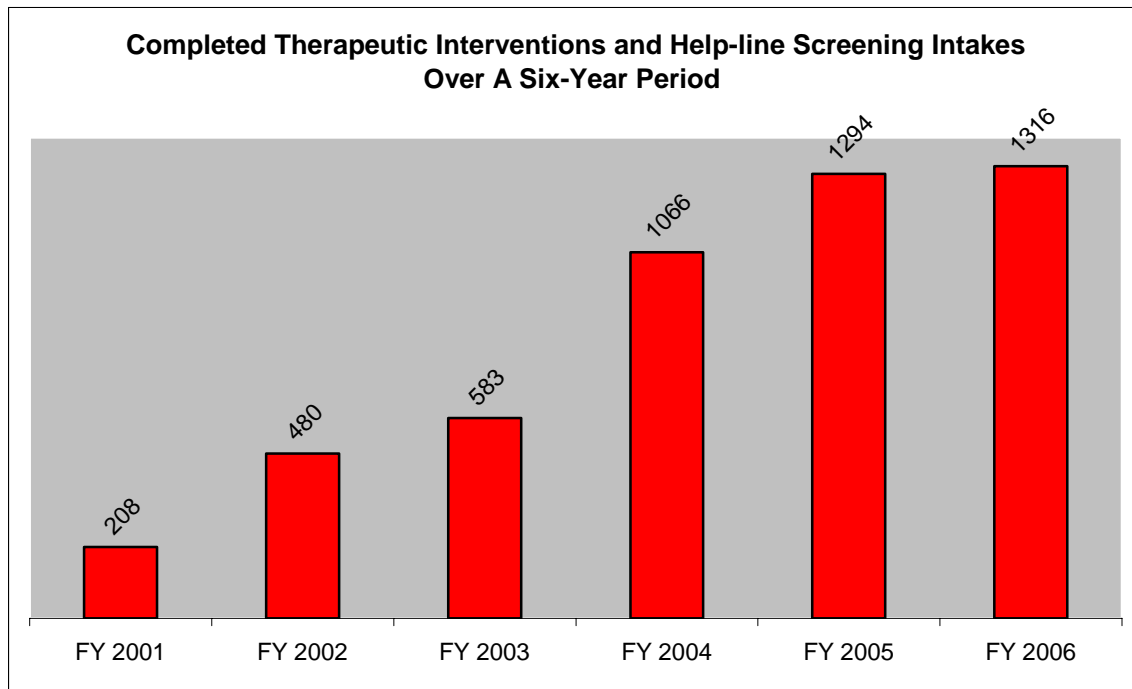
Six Year Summary and Observations



Professional counseling for problem gambling is still in its infancy. West Virginia is one of the few places in the world that have recorded outcome data over a six-year period.

Warren Biller, Recovering Compulsive Gambler, Founder, Michigan Council on Problem Gambling, Detroit, Michigan

Help-line calls have increased yearly since the program began. This graph shows the number of help-line intakes completed for each fiscal year since the program was started in August 2000.



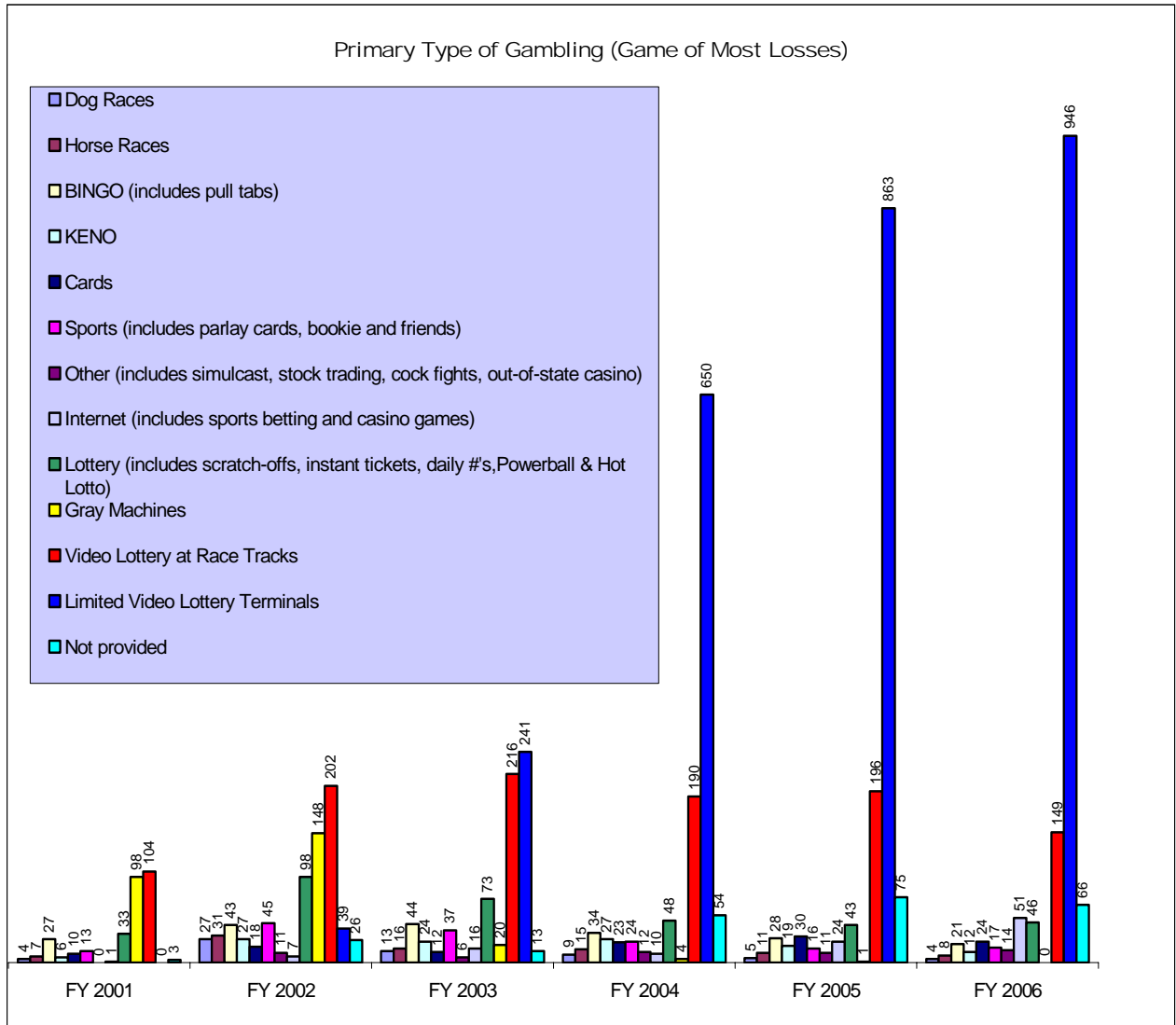
Six-Year Trends Regarding the Gender of the Gambler with a Problem

For the first four years of program operations, reported male problem gamblers outnumbered reported female problem gamblers. For the past three years, problem gamblers who are women make up over half of the client intakes:

Fiscal Year 2000	Male 36	Female 23	Unknown/Unclear 0
Fiscal Year 2001	Male 198	Female 148	Unknown/Unclear 8
Fiscal Year 2002	Male 292	Female 223	Unknown/Unclear 9
Fiscal Year 2003	Male 411	Female 377	Unknown/Unclear 9
Fiscal Year 2004	Male 521	Female 632	Unknown/Unclear 15
Fiscal Year 2005	Male 639	Female 689	Unknown/Unclear 12
Fiscal Year 2006	Male 598	Female 705	Unknown/Unclear 12

Six Year Trends Regarding Type of Gambling

While the growth rate in calls from all other forms of gambling have remained constant or dipped, the help-line calls related to gamblers having a problem with VLT machines have continued to increase each year. This graph shows the type of primary form of gambling reported by help-line callers for each fiscal year the program has been in operation



I don't know that the help-line staff understands how important they are. They are our lifeline.

Jane Skavinsky, Paralegal, Recovering Compulsive Gambler, Embezzled \$250,000 to keep playing BINGO Morgantown, WV

1-800-GAMBLER HELP-LINE DATA***August 1, 2000 through July 31, 2006****5038 clients****The Problem Gamblers Help Network of West Virginia**

P. O. Box 3324, Charleston, WV 25333 304-344-2163

** All data is self-reported by the callers. Missing data is due to direct omission by the caller or incomplete telephone call.*

Caller/Client is:	Number of Dependents	Amount of Gambling Debt
Gambler 3398	0 1971	\$0 761
Spouse/Sig. Other 603	1 740	\$1.00 -\$1000 426
Offspring 195	2 650	\$1000-\$5000 706
Friend 202	3 258	\$5000-\$25,000 828
Parent 138	4+ 108	\$25,000-\$50,000 287
Sibling 92	Unknown 1311	\$50,000-\$100,000 149
Other Family 215		Over \$100,000 + 49
First Choice Provider 129		Unknown 1832
Other 66		
Gender of Gambler	Highest Education Attained	Type of Gambling*
Male 2437	Less than HS grad 383	Slots Machines 1148
Female 2519	HS Grad/GED 1488	Video Poker/VLT 3016
Unknown 82	Some college 593	Lottery/Powerball/KENO 670
	Vocational training 229	Bingo 259
	2 year college grad 222	Pull tabs/tip boards 137
	4 year college grad 410	Parlay cards 16
	Advanced degree 87	Sports with bookie 126
	Unknown 1626	Sports with friends 83
		Cards (poker, blackjack) 111
		Horse Racing 121
		Dog racing 90
		Internet gambling 144
		Craps 10
		Stocks 07
		Other 62
		Unknown 971
		*some gamblers engage in multiple types
Current Age	Employment status	Place Gambled*
0-17 07	Full time 2587	Racetracks 1265
18-25 333	Disabled 527	Clubs, bars, restaurants 3021
26-35 931	Unemployed 465	Store / market 378
36-45 1127	Part time/Seasonal 382	Lottery retailer 288
46-55 1200	Retired 293	Bookie 74
56-64 518	Homemaker 185	Private Home 160
65+ 172	Self-employed 111	Church 22
Unknown 750	Military 15	Internet 109
	Unknown 473	Fire Hall 30
		Other 171
		Unknown 356
		Casino 69
		* some gamblers play at several venues
Age When Started	Household Income	
0-11 137	0 - \$10,000 320	
12-17 378	\$10,000 – 20,000 549	
18-25 894	\$20,000 – 30,000 508	
26-35 788	\$30,000 – 40,000 341	
36-45 767	\$40,000 – 50,000 256	
46-55 537	\$50,000 + 862	
56-64 140	Unknown 2202	
65+ 48		
Unknown 1349		
Marital Status	Gambling Frequency	
Married 2344	Daily 3041	
Single 934	Weekly 957	
Divorced 647	Monthly 101	
Living Together 431	Unknown 939	
Widowed 168		
Separated 166		
Unknown 348		

Demographic and Clinical Data

5038 clients

Financial Problems

Bills payable	2795
Borrowed money from others	3049
Credit card charges	1597
Bank loans/finance co.	675
Bad checks	1290
Cashed in stocks, savings, insurance, retirement	919
Sold property to gamble	622
Bankruptcy	545
Second mortgage	188
Taxes payable	129
Owes bookie or loan shark	80
Owes casino/racetrack	23
Stole money to gamble	358
Spending all income	2640

DSM-IV Symptoms

Loss of control	3869
Chasing losses	3791
Lying to others	3765
Preoccupation	2472
Escape	3078
Loss of job/relationship	2268
Bailouts	2422
Tolerance	3152
Withdrawal	1036
Illegal Activities	1495

Reason for Disability

MS	18
CP	03
Cardiovascular	66
Back injury	108
Spinal cord injury	05
Diabetes	34
Other internal/physical	143
Vision impairment	06
Bipolar	71
Major depressive	75
Schizophrenia	21
Obsessive Compulsive	08
Other	196

CO-MORBIDTY

Pre-existing mood disorder	1455
Pre-existing anxiety disorder	370
Pre-existing other	155
Pre-existing alcohol abuse	838
Pre-existing drug abuse	355

Family History

Family hx. of alcoholism	1255
Family hx. of gambling	1130
Family hx. of other addictions	255
Family hx. of mental illness	446

Early Big Win 2133

Stressful Life Event/Trigger

Death of a loved one	451
Divorce/Break-up	445
Illness, injury, disability	429
Unhappy relationship	420
Job loss/demotion	274
Work stress/New job	257
Marriage/Birth	241
Began care taking relative	133
Empty nest/lonely/bored	402
Financial problems	251
Loved one has illness, injury, or disability	233
Relocation	188
Retirement	122
Victim of violent crime	11
Jail detention/release	14
Other SLE's	354
Unknown	420

REFERRAL SOURCES

6 month Follow-up	80
Billboards	1298
Website	107
Radio	85
Newspaper article	127
TV commercial	193
TV news	92
Newspaper ad	72
Yellow Page ad	367
411	20
Racetrack rack card	131
Sticker on machine	477
Lottery retailer	44
WV Lottery	33
GA	49
Church bulletin	04
Racetrack poster	22
Family/friend	397
1 st Choice Provider	286
Health Care other	93
AA	14
Lottery website	29
National help-line	18
Racetrack ads	14
School	09
Civic organization	09
Brochure	39
Walk-in	03
Other	194
Unknown	361
Former Caller	329
Miscellaneous	140
Legal System	20

**1-800-GAMBLER Help-line Calls by County
5038 Clients (August 1, 2000 through July 31, 2006)**

Barbour	28	Mineral	34
Berkeley	235	Mingo	20
Boone	60	Monongalia	197
Braxton	23	Monroe	14
Brooke	105	Morgan	04
Cabell	287	Nicholas	29
Calhoun	02	Ohio	270
Clay	09	Pendleton	04
Doddridge	07	Pleasants	20
Fayette	92	Pocahontas	09
Gilmer	06	Preston	68
Grant	03	Putnam	164
Greenbrier	44	Raleigh	143
Hampshire	18	Randolph	48
Hancock	172	Ritchie	08
Hardy	10	Roane	06
Harrison	243	Summers	29
Jackson	54	Taylor	32
Jefferson	156	Tucker	03
Kanawha	885	Tyler	12
Lewis	29	Upshur	41
Lincoln	41	Wayne	49
Logan	55	Webster	01
Marion	141	Wetzel	29
Marshall	78	Wirt	11
Mason	24	Wood	374
McDowell	15	Wyoming	19
Mercer	149	*Out-of-State	155
		Unknown	274

*Out of state callers do not receive treatment paid for by the WV Lottery

Program Professional Staff

I used to run the Council on Compulsive Gambling of New Jersey and I thought no one could do a better job. But you guys have the best; Mia and her staff in West Virginia. Wow! What a great job they are doing.

Arnie Wexler, NCGC, Recovering Compulsive Gambler, New Jersey

After six years in operation, the Problem Gamblers Help Network has recruited, trained and retained an experienced staff of clinical professionals. The following is a list of professional, clinical staff, with the number of help-line clinical screenings and therapeutic intakes completed as of December 31, 2006, as well as the total number of gambling specific training/education completed:



Sheila Moran, MSW, LSW
Masters of Social Work
Licensed Social Worker
1321 intakes
162 Hours Specialized Education/Training



Cindy Black, MSW, LSW
Masters of Social Work
Licensed Social Worker
797 intakes
212 Hours Specialized Education/Training



Steve Burton, MSW, LSW
Masters of Social Work
Licensed Social Worker
881 intakes
124 Hours Specialized Education/Training



Mia Moran-Cooper, BSW, LSW
Bachelors of Social Work
Licensed Social Worker
370 intakes
212 Hours Specialized Education/Training

**Problem Gamblers Help Network of West Virginia Professional Staff
(Continued)**



Kathleen O'Neil, MA
Masters of Arts in Counseling
461 intakes
72 Hours Specialized Education/Training



Chris Hughes, MPA, MSW
Masters in Public Administration
Masters of Social Work
29 intakes
47 Hours Specialized Education/Training



Danielle Green, BA
Bachelors of Arts in Psychology
205 intakes
57 Hours Specialized Education/Training



Gloria Kirk
Administrative Assistant
3 ½ years experience entering clinical data from
client assessments, DHHR grant billing,
bookkeeping and other clerical responsibilities