Using Community-Based Participatory Methods to Address Problem Gambling with Asian Pacific Islanders

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Historical Perspective

- **2004**
  - Charitable Cardrooms Contribution
  - City of San Jose

- **Stakeholder process**
  - to develop RFP 2010-13 for Problem Gambling Services to be led by NPO
  - Total = $3M/3yrs

- **Problem Gambling Alliance**
  - CARE
  - GIFT
  - Breathe California
  - UCLA Gambling Studies Program
Hierarchical Development

- Research
- Dissemination
- Education
- Outreach
- Treatment
- Coalition building
- Community Needs Assessment

July 2, 2013
Coalition building & Community Needs Assessment

Problem Gambling Alliance

CA Office of Problem Gambling

Technical Assistance Partners (local & statewide)

Friday Night Live

July 2, 2013
Education, Outreach & Treatment

**Education**
- Community
- Ethnic
- Professional
- Clinical

**Outreach**
- Community
- Professional
- Ethnic communities
- In-person
- In-language
- Multimedia
- Multilanguage
- Multicultural

**Treatment**
- Licensed staff
- Licensed eligible
- Language and Culturally Proficient
- Individual provider(s)
- Provider network
Research & Dissemination

Disseminate findings via final report to: Cardrooms, San Jose City government, community service organizations, professional and academic forums.

Partner with UPGS design focus groups/community surveys & include valid & reliable culturally appropriate measures.

Year 1: Focus groups & youth surveys
Year 2: Community wide surveys
Year 3: Final project data analyses & report

July 2, 2013
Goal: Increase PG awareness and treatment of problem gamblers in San Jose with an emphasis on Asian American communities.

Capacity Building: To create an alliance of community providers for problem gambling and to increase the number of licensed gambling treatment professionals.

Awareness: To increase knowledge and awareness of Problem Gambling with Asian American community in San Jose and to increase number of referrals made to treatment and resources.

Treatment: To reach and treat problem gamblers and concerned significant others.
Problem Gambling Alliance

Logic Model

PG Alliance
- Formative Research
- Focus groups
- Community survey
- Training for providers & members

Outreach
- Increase in knowledge about services and resources
- Brochures and education materials
- Events, media spots

Increase Community PG Awareness

Reduce PG-Related Harms

PG TX
- Treatment for problem gamblers
- Treatment for pathological gamblers
- Resources for significant others

Referrals
- Increase in self identified referrals
- Increase in treatment referrals
Community Outreach & Education

Outreached at over 200 community events to approx. 36,000 community members

• Events ranged from health fairs to national conferences
  • At health fairs and community events, staff and volunteers provided PG-related info and resources in multiple languages
• National Problem Gambling Awareness Week (SBFT event 2011, education to over 21 local adult services provider agencies in 2012)
• Involvement in local, state, and federal level meeting
  • City council meetings
  • Public hearings
  • Office of Problem Gambling (OPG) Advisory Committee
Community Outreach & Education Cont.

Shared preliminary program findings at national and international audiences
- US Health and Human Services (Substance Abuse MSA)
- NCPG Conferences (2010-2012)
- 3rd Annual Asian Pacific Problem Gambling Addiction Conference (Hong Kong, 2011)

Media supports
- Press releases, live interviews and PSAs for local newspapers, radio and television shows

Education Sessions
- High school students
- Community members
- Health providers

PG Alliance information was available on several hotlines
- NICOS (San Francisco)
- OPG (Statewide)
- Santa Clara County Psychological Association listserv
PGA Brochure in Multiple Languages
In 2010: Community Awareness of PG & Resources

11 Focus groups in multiple languages (N=100)
2-Cantonese, 2-English, 2-Spanish, 2-Tagalog, & 3 Vietnamese

- 1 out of 100 participants reported aware of PG resources
- Many felt PG existed but were not sure of the extent of the problem
PGA San Jose Problem Gambling Survey 2011

- **Purpose**
  1) Problem Gambling Prevalence & Community at Risks
  2) Help Seeking Behaviors & Barriers

- **Survey Methods**
  1) Specific Time Periods (10/1-11/19/2011) – 7 weeks
  2) Targeted Populations (Vietnamese, Filipino, Chinese, & Hispanics/Latinos)
  3) Convenient Sample Methods (Venue & Event-based recruitment)

- **Results**: 1453 participants
  - Gender: Male-574 (40%), Female-828 (57%), N/A 61 (3%)
  - Race: Vietnamese-374 (27%), Filipino-201 (14%), Chinese-145 (10%), Mexican-278 (19%)
Community at Risk

Male
0.3 times

Substance Use
Smoking, Alcohol
Illegal Drugs
3 times

Gambling Often
Scratchers: 4 times
Cards: 5 times
Slot Machines: 7 times
PGA San Jose Survey 2011

Problem Gambling Prevalence

At-risk | Problem | Pathological
-----|---------|---------
Asians | 6.5     | 0.7     | 3.4
Hispanic/Latino | 5.4 | 4.2 | 1.7
White | 7.4     | 1.1     | 1.1
San Jose 2012 | 6.2     | 2.4     | 1.4
Help Seeking Behaviors & Barriers (PGA San Jose Survey 2011)

“I would not discuss my problems”
- Vietnamese: 26%
- Filipino: 37%
- Chinese: 18%
- Mexican: 10%
- White: 9%

“Very difficult” to talk
- Vietnamese: 27%
- Filipino: 18%
- Chinese: 19%
- Spanish: 15%
- White: 21%

“What are the main reasons that you would not ask for help from doctors or professionals?”
- I do not have money to pay for help: 324
- I do not have transportation to get help: 82
- I do not know where I can go to get help for my problems: 257
- I am ashamed to discuss my problems with strangers: 260
- Doctors and health professionals do not speak my language: 176
In 2011: Community Awareness of PG & Resources

Gambling can become an addiction?

- Yes: 84%
- No: 5%
- I do not know: 6%
- N/A: 5%

I have not heard of any resources

- No: 62%
- Yes: 38%

Resources mentioned:
- Office of Problem Gambling Website
- Casino Signs and advertisement
- Media (TV, Radio, Newspaper, Billboard)
- Helpline (1-800-Gambler)
- Gam-Anon/GA
- Family/Friend
- Community Presentation
- Healthcare Professional
1. Maintain and Expand relationships with OPG and CA Council on Problem Gambling in order to be able to gain access to new information about PG treatment and funding opportunities while consolidating resources and outreach efforts

2. Continue to build collaboration and add additional stakeholders especially those who have a vested interest in decreasing gambling problems (e.g., police, city council members, other health providers, cardroom representatives, doctors, GAs, representatives from financial counseling industry)

3. Seek a steady and diverse set of funding to maintain program security

4. Conduct 2\textsuperscript{nd} community survey using same instrument to compare changes over time. Survey to be conducted at or near cardrooms in addition to “hot spots” which are zip codes with high PG identified in community survey

5. Concerned Significant Others treatment focusing on building group interventions in addition to individual interventions

6. Consider implementing treatment programs in San Jose specific settings (i.e., cardrooms, areas whether gamblers and affected significant others likely to gather)
QA