Location	Year Study Conducted	Age	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Response Rate	Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
ARIZONA	2002-2003	18+	Volberg, R.A. (2003). Gambling and Problem Gambling in Arizona. Report to the Arizona Lottery. Northampton, MA: Gemini Research.	2750	Quotas for gender and region of the state; minimum of 6 contact attempts; random selection within household.	"survey for the State of Arizona about people's attitudes toward gambling"	telephone interview	50%	By age and ethnicity to account for under-representation of younger adults and Hispanics. Details in Table 3: Demographics of Sample (p. 9). Note: Unweighted data used for NODS analysis.	ever gambled in lifetime	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)	9,044 EGMs in 2002. Population in 2002 was 5,456,453. People per EGM = 603.	69.4% (Lifetime = 89%)	1.6% SOGS-PY: 1.6% (3-4); 0.7% (5+); 2.3% combined SOGS-L: 3.6% (3-4); 1.9% (5+); 5.5% combined DSM-IV-PY: 0.7% (3-4); 0.3% (5+); 1.0% combined DSM-IV-L: 1.8% (3-4); 0.8% (5+); 2.1% combined	SOGS-PY: 2.3 * .72 * 1.44 * 2.1% DSM-IV-PY: 1.0 * 1.19 * 1.44 * .76 = 1.3% Average: 1.6%	Hispanics; disabled; unemployed	EGMs; casinos; wagering privately	6% of the interviews (n=157) were conducted in Spanish; Lifetime problem gamblers significantly more likely to be male and have military experience.	http://hdl.handle.net/	
CALIFORNIA	1990	18+	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241	1250	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households.		telephone interview	Refusal rate = 27%	No	gambled in lifetime	SOGS-L	EGM availability unavailable	(Lifetime = 89%)	2.9% (3-4) 1.2% (5+); 4.1% combined	2.1% 4.1 * .72 * .60 * 1.59 * .74 = 2.1%	male; non-White; less education	larger number of games; cards; horse and dog races; games of skill; dice games; sports betting		http://www.outreed.	
CALIFORNIA	2005-2006	18+	Volberg, R.A., Nysse-Carris, K.L., & Gerstein, D.R. (2006). 2006 California Problem Gambling Prevalence Survey. Submitted to California Department of Alcohol and Drug Programs Office of Problem and Pathological Gambling.	7121	Random-digit-dialing; English or Spanish; interpreters used to interview eligible respondents who were unable to complete the interview in these two languages; strenuous efforts made to recruit a fully representative sample of California residents into the survey, including several mailings of advance and refusal conversion letters.	"Your household has been selected at random to be part of the California Gambling and Health Study" (verbal consent script). Complete script available in report Appendices (pp. 62-63)	telephone interview	47.2%	Yes - weighted to adjust for differences in household size and to reflect the known demographic characteristics of the population. Details in Table 2: Demographics of Achieved and Weighted Samples (p. 27).	ever gambled in lifetime	DSM-IV-PY & DSM-IV-L (NODS)	50,599 EGMs in 2004. Population in 2005 was 36,132,147. People per EGM = 714.	57.6%	1.7% DSM-IV-PY: 0.9% (3-4); 0.4% (5+); 1.3% combined DSM-IV-L: 2.2% (3-4); 1.5% (5+); 3.7% combined	1.3 * 1.19 * 1.44 * .76 = 1.7%	males; young adults; African Americans and individuals belonging to racial and ethnic groups classified as 'other'; disabled; unemployed	Internet gambling; card room gambling	Although participation by Asian and Hispanic respondents was low, the overall size of the study means that the survey includes the largest sample of Hispanics (N=1,569) and Asians (N=504) ever interviewed for a problem gambling prevalence survey in the United States.	http://hdl.handle.net/	
COLORADO	1997	18+	Volberg, R.A. (1997). Gambling and Problem Gambling in Colorado. Report to the Colorado Department of Revenue.	1810	Random selection of households and random selection of respondents within households; After completing approximately 900 interviews, began screening for male respondents in eligible households in order to obtain adequate representation of men in the sample. Once the required 900 men was reached, screening efforts were stopped; Colorado sample is representative of the population in terms of gender, age and residence."	"survey of people in your community for the State of Colorado concerning the gambling practices of Colorado Citizens"	telephone interview	44%	"No (After checking the impact of weighting the sample by ethnicity on key variables, including the prevalence of problem and pathological gambling, and given the relatively small difference of these percentage points between sample and census data, we elected not to apply weights to the Colorado sample.)"	had ever gambled	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR-PY)	16,266 EGMs in 1999. Unknown number in 1997.	81%	2.4% SOGS-PY: 1.8% (3-4); 0.7% (5+); 2.5% combined SOGS-L: 4.4% (3-4); 1.8% (5+); 6.2% combined DSM-IV-PY: 1.7% (3-4); 0.5% (5+); 2.2% combined	SOGS-PY: 2.5 * .72 * 1.44 * .76 = 2.0% DSM-IV-PY: 2.2 * 1.19 * 1.44 * .76 = 2.9% Average = 2.4%	Lifetime: male; under the age of 30; never married; Current: under the age of 30; less likely to have graduated from high school	Bingo; pulltabs; casinos; lottery games		http://hdl.handle.net/	
CONNECTICUT	1977	18+	Abrahamson, M. & Wright, J.N. (1977). Gambling in Connecticut. Storrs, CT: Connecticut State Commission on Special Revenue.	588	Multi-stage probability sample; 169 towns in Connecticut were stratified into two categories according to whether or not they were part of a standard metropolitan area (as defined by the Census Bureau); total of 15 towns randomly selected corresponding with their share of the State's population; sections of towns randomly selected using a topographical grid and enumeration map; within each town 50 homes (or dwelling units) were selected and numbered 1 to 50 in each town; interviewer sought to interview males in all even numbered houses and females in all odd numbered houses; The demographic characteristics of the sample and those of the entire State are, in general, highly congruent.	how people in Connecticut bet money.	residential face-to-face interview		no	No threshold	3-Questions Related to Gambling Debts & Excessive Gambling: (1) At times I have bet so much that I had to put off buying clothes; (2) I have never had to borrow money because of bets I have made; (3) People close to me sometimes criticize the amount of money that I bet. Agreement with statement (1) and (3), and disagreement with statement (2) can all be viewed as possibly indicative of excessive gambling.	No EGMs in 1977.	Figures only listed for 23 gambling formats. Most frequently engaged in was lottery — "About one in five of the State's adults may purchase a lottery ticket at least once a week, and nearly half participate monthly or more."		10 persons out of 545 answered all three questions in a problem-suggestive manner. This implies that about 1.8% of the State's adults may potentially be compulsive gamblers.	young; separated or divorced; unskilled occupations	jai-alai, off-track betting, dog racing			
CONNECTICUT	1986	18+	Laventhol & Horwath, David Cwi & Associates, & Survey Research Associates, Inc. (1986). The Effects of Legalized Gambling on the Citizens of the State of Connecticut. Newington: State of Connecticut Division of Special Revenue.	1224	Randomly selected listed telephone numbers		telephone interview		age, gender	any past-year gambling	DSM-III-L (DIS-III)	State lottery, jai alai, greyhound racing, off-track betting on horse races. No EGMs in 1986.	74%	0.34% (endorsed first and two of remaining 3 questions)	0.8% 0.34 * 2.6 * .60 * 1.44 * .76 = 0.5%	None reported (only 4 respondents classified as pathological gamblers)	pari-mutuel bettors (jai alai, greyhound, horses at track, off-track betting or teletrack)	Results very tentative because of the unknown weighting factor that should be applied to the DIS-III and the fact that DIS only has 4 questions, whereas the DSM-III has 8 criteria. This study is not included in the tables or the analysis.		
CONNECTICUT	1991	18+	Christiansen / Cummings Associates. (1992). Legal Gambling in Connecticut: Assessment of Current Status and Options for the Future. Report to the Connecticut Division of Special Revenue. Details available in Appendix C. and Section 2.6.3 of Problem Gambling in Connecticut is part of the main report.	1000	Random digit dialing proportionate to the number of residents in each of the eight counties in the State; random selection within household.	legalized gambling in the state	telephone interview		no	gambled in lifetime	SOGS-L	Foxwoods Casino opens 1992	86%	3.6% (3-4); 2.7% (5+); 6.3% combined	3.2% 6.3 * .72 * .60 * 1.59 * .74 = 3.2%	male; under age 35 years; unmarried; household income less than $25,000	Off-track betting; casinos; pulltabs; football pools; bet with a bookie on a sports event.		http://hdl.handle.net/	
CONNECTICUT	1996	18+	WEFA Group. (1997, June). A Study Concerning the Effects of Legalized Gambling on the Citizens of the State of Connecticut. Prepared for: State of Connecticut Department of Revenue Services, Division of Special Revenue.	993	Stratified, single-stage random digit dialing; random selection within household	regarding leisure activities and hobbies	telephone interview		gender, age, education, race	gambled at least once in life	SOGS-PY & SOGS-L	Foxwoods Casino opens 1992	88%	2.9% SOGS-PY: 2.2% (3-4); 0.5% (5+); 2.8% combined SOGS-L: 4.2% (3-4); 1.2% (5+); 5.4% combined	2.8 * .72 * 1.44 = Average 2.9%	Reported that data is not statistically significant. Demographic information available (Section 5-13)	Reported that data is not statistically significant. Gambling preferences information available (Section 5-14).	Prevalence study was one component of an overall study on socio-economic impacts of gambling.	http://www.ct.gov/dc	http://calib.cdmhost.c
CONNECTICUT	2008	18+	Spectrum Gaming Group. (2009). Gambling in Connecticut: Analyzing the Economic and Social Impacts. Linwood, NJ: Author.	3,099 (2,298 Telephone + 801 Online Panel)	Random digit dialing; random selection within household; an additional 801 people participated through a separate online-panel survey; English and Spanish versions available.	"survey for the State of Connecticut about people's attitudes toward gambling"	telephone interview; self-administered online (Online Panel)	Telephone = 35.6% (calculate d using data from report using response rates calculatio ns recommended by Williams & Volberg, 2011). Online Panel = 6%	Gender, education, age, ethnicity		SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)	13,697 x in 2008 clustered in two tribal casinos. Population in 2008 was 3,502,309. People per EGM = 256.	70% (Past year participation in illegal gambling = 33.2%)	1.1% Telephone SOGS-PY: 0.7% (3-4); 1.6% combined SOGS-L: 2.2% (3-4); 1.5% (5+); 3.7% combined DSM-IV-PY: 0.8% (3-4); 0.8% (5+); 1.6% combined DSM-IV-L: 2.1% (3-4); 1.2% (5+); 3.3% combined SOGS-PY: 3.5% (3-4); 3.8% (5+); 7.3% combined SOGS-L: 4.5% (3-4); 4.5% (5+); 9.0% combined DSM-IV-PY: 3.4% (3-4); 2.1% (5+); 5.5% combined DSM-IV-L: 5.0% (3-4); 2.9% (5+); 7.9% combined	Telephone SOGS-PY: 0.9% (3-4); 0.7% (5+); .53 * 0.5% Telephone DSM-IV-PY: 1.4 * 1.19 * 1.44 * .53 = 1.3% Average = 1.1%	males; 18-34 years old; some college education; urbanized counties of Hartford and New Haven		Study is a socioeconomic impact investigation that included a prevalence study of gambling and problem gambling.	http://www.ct.gov/dc	http://calib.cdmhost.c
DELAWARE	1998	18+	Mateja, W., Wilson, R., & Ableman, B. (1998). A Survey of Gambling in Delaware. Newark, DE: Health Services Policy Research Group, University of Delaware.	3395	Random		telephone interview	61%	age, race, gender	gambling at a frequency of once per month or more in the past 18 months	SOGS-Past 18 Months	2,498 EGMs in 1999. Population in 1998 was 744086. People per EGM = 298.	62% (past 18-months)	2.2% 2.85 * .72 * 1.44 * .76 = 2.2% SOGS-PY: 1.4% (3-4); 0.6% (5+); 0.68% (5+); 2.85% combined	2.2% 2.85 * .72 * 1.44 * .76 = 2.2%	African-American; male; divorced; single; employed less than full time; household with an income of under $40,000.			http://hdl.handle.net/	
DELAWARE	1999-2000	18+	Health Services Policy Research Group, School of Urban Affairs and Public Policy, University of Delaware (2002). The Costs and Consequences of Gambling in the State of Delaware. Prepared for the State of Delaware, Health and Social Services, Division of Substance Abuse and Mental Health.	2638			telephone interview?		age, gender		DSM-IV-L (NODS)	2,498 EGMs in 1999. Population in 1999 was 753,538. People per EGM = 302.	72.3%	0.6% 0.7 * 1.19 * .6 * 1.59 * .76 = 0.60%	0.6% 0.7 * 1.19 * .6 * 1.59 * .76 = 0.60%	males; ages 18 – 24; female between the ages of 45 and 54		Purpose of this report was to study the social costs of gambling. The prevalence of problem gambling in Delaware is estimated from two recent surveys, both conducted by the University of Delaware (High Risk Geographic Area Survey, University of Delaware, 1999; Young Adult Survey, University of Delaware, 2000). The combined surveys are referred to as the Delaware Gambling Survey. Note: The High Risk Area Study included respondents aged 18 years and over who resided in ZIP- Code areas that were at high risk for alcohol and drug problems.		
FLORIDA	2001	18+	Shapira, N. A., Ferguson, M. A., Frost-Pineda, K., & Gold, M. S. (2002). Gambling and Problem Gambling Prevalence Among Adults in Florida. A Report to the Florida Council on Compulsive Gambling, Inc.	1504	Random digit dialing; 6 contact attempts; random selection within household	gambling practices among Florida residents	telephone interview	32.5% (calculated from response rate criteria recommended by Williams & Volberg, 2011).	age, gender	Participated in at least one form of gambling in lifetime and spending more than $12 on gambling in some year.	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)	11,549 EGMs in 2002. Population was 16,396,515 in 2001. People per EGM = 1420.	71%	1.05% SOGS-PY: 1.4% (3-4); 0.6% (5+); 2.0% combined SOGS-L: 2.8% (3-4); 1.0% (5+); 3.8% combined DSM-IV-PY: 0.4% (3-4); 0.3% (5+); 0.7% combined DSM-IV-L: 1.5% (3-4); 1.0% (5+); 2.5% combined	SOGS-PY: 2.0 * .72 * 1.44 * .53 = DSM-IV-PY: 1.1 * 1.19 * 1.44 * .53 = 0.6% Average = 1.05%	males; ages 18-29 and ages 50-65; Hispanics; African-Americans; never married; high school degree or less; alcohol use and abuse; depression.	Policy/numbers/Bolita; cock or dog fighting; games of skill for money; EGMs			
FLORIDA	2011	18+	Spectrum Gaming Group. (2013). Gambling Impact Study. Prepared for the State of Florida Legislature October 28, 2013. Rotunda, R. J., & Schell, T. L. (2012). Gambling and problem gambling prevalence among adults in Florida: A 2011 replication. University of West Florida, January 2012.	2500	Random digit dialing; sampling of numbers was stratified in two subsamples of predetermined size: mobile phones and landline phone numbers; respondent quotas used based on gender and geographic region for the landline sample; households screened for eligible participants and language preference; calls made in English, but 2.5% of all interviews conducted in Spanish and 0.3% in Creole; most recent birthday method used if household contained more than one eligible individual; 501 in the mobile phone subsample and 1999 in the landline phone subsample; to improve quality of mobile phone sample, incentive payments ($10) to mobile phone respondents began half-way through the study; landline participants were never afforded incentives.	gambling practices of Florida residents	telephone interview	"The overall response rate among those household s estimated to contain an eligible individual was 7.4% (i.e., American Associatio n of Public Opinion Research, Response Rate 3)."	weighted to more accurately represent those that rely primarily on mobile phones; also applied prestratification weights for gender, age and race.	Participated in at least one form of gambling in lifetime and spending more than $25 on gambling in any year (SOGS); Participated in at least one form of gambling in lifetime (NODS).	SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)		54.4%	0.8% SOGS-L: 2.7% (3-4); 2.2% (5+); 4.9% combined DSM-IV-PY: 0.5% (3-4); 0.5% (5+); 1.2% combined DSM-IV-L: 1.4% (3-4); 0.8% (5+); 2.1% combined		males; younger age; rent their home; living in south Florida; depression; have sought mental health treatment; on the extremes of income distribution	poker; cards; slots; poker machines (not at a casino); use bookies.		http://www.leg.state.	
GEORGIA	1994	18+	Volberg, R.A. (1995). Gambling and Problem Gambling in Georgia. Report to the Georgia Department of Human Resources. With contribution by J. Boles. Volberg, R.A., Reitzes, D.C., & Boles, J. (1997). Exploring the links between gambling, problem gambling and self-esteem. Deviant Behavior, 18, 321-342.	1550	Stratified to proportionally represent county populations, based on the 1990 census. Random sampling of households and random selection of respondents within households; Up to 12 attempts were made to contact each number, and a minimum of eight callbacks were made to complete an interview with each respondent; When compared with information from the 1990 census, the sample was found to be representative of the adult population of Georgia in terms of gender, race, age, marital status, and income. However, individuals with less than a high school education were significantly underrepresented in the sample.	"gambling practices of the citizens of Georgia"	telephone interview	70%	No - analysis of prevalence rates after weighting the sample by education did not produce significant changes. The data presented was based on the unweighted sample.	Any gambling	SOGS-PY & SOGS-L	No EGMs in Georgia in 1999.	74%	1.9% SOGS-PY: 1.5% (3-4); 0.8% (5+); 2.3% combined SOGS-L: 2.5% (3-4); 1.5% (5+); 4.5% combined	2.3 * .72 * 1.59 * .74 = 1.9%	non-White; male; young; and single; no differences in education or income; lower self-esteem			http://hdl.handle.net/	
GEORGIA	2000	18+	Emshoff, J.G., Broomfield, K., & Arganza, G. (2000). The Prevalence and Nature of Gambling in Georgia: A Population Survey. Report to the Georgia Department of Human Resources. Atlanta, Georgia State University.		Perhaps the same as done in 2007 by the same group.		telephone interview	42%			SOGS-PY & SOGS-L	No EGMs in 1999. 130 EGMs in 2002.	69% lifetime	1.9% SOGS-PY: 2.4% (3+); SOGS-L: 5.0% (3+)	2.4 * .72 * 2.18 * .51 = 1.9%	male; under 35; nonwhite; income < $35K			http://hdl.handle.net/	
GEORGIA	2007	18+	Emshoff, J., Anthony, E., Lippy, C., Valentine, L. (2007). Gambling Survey for the Georgia Department of Human Resources. Atlanta, GA: Georgia State University. September 2007. Emshoff, J., Anthony, E., Lippy, C., Valentine, L. (2007). Gambling Survey for the Georgia Department of Human Resources. Atlanta, GA: Georgia State University. September 2007.	1602	random list of telephone numbers; stratified by gender, ethnicity, education, and income; random selection within household; up to five attempts were made to contact each number before the number was dropped from the list of available numbers; eligibility criteria included English-speaking, and a working household phone		telephone interview	22%	Not indicated; report indicates "if participants stated that they had ever wagered money or anything of value on these activities, they were asked the frequency with which they engaged in the activity."		DSM-IV-PY & DSM-IV-L (NODS)	130 EGMs in 2006. Population in 2007 was 9,544,750. People per EGM = 73,421.	85%	1.4% DSM-IV-PY: 1.1% (3-4); 0.4% (5+); 1.5% combined DSM-IV-L: 2.5% (3-4); 1.4% (5+); 4.0% combined	1.5 * 1.19 * 1.44 * .53 = 1.4%	male; non-white; under age 30; less than a high school education; earn less than $25,000 a year; multiple regression revealed that while the above characteristics were associated with rates of pathological gambling, their relationship with the single characteristic of education level appears to be driving the effects.			http://hdl.handle.net/	
INDIANA	1990	18+	Laventhol & Horwath, Guida, F.V., David Cwi & Associates, & Public Opinion Laboratory. (1990, November). A Study of Problem and Pathological Gambling among Citizens of Indiana associate d with Participation in the Indiana State Lottery. Indianapolis, IN: Laventhol & Horwath.	1015	Random digit dialing, with age and sex quotas by county	"We are conducting a research project for the State of Indiana to find out how people feel about the lottery."	telephone interview	44.4% (calculated from raw data contained in report)	No – "It was not necessary to weight the responses since the sampling method assures a representative sample of [residents] over 18."	Participation in Indian Lottery gambling in past 12 months (i.e., purchased at least one ticket for the Instant, Lotto Cash or Daily Pick Games).	DSM-IV-L	Indiana lottery introduced Oct 1989. No EGMs in 1990.	80.2% (participated in Indiana Lottery in past 12 months); 34% played lottery in another state in past 12 months	0.8% (2+)	see comments	males; age 18 to 34	N/A – Only lottery-related questions asked.	This study was described by Lesieur (p. 275, 1999) as being conducted "to find out how many adult Indiana residents were pathological lottery players." The survey did not count individuals who had gambling problems as a result of sports, casinos, horses, or other forms of gambling unless they also had an independent problem with lottery play." This study is not reported in the tables or included in the analyses.	http://hdl.handle.net/	

Location	Year Study Conducted	Age	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Response Rate	Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Gams Correlates of PG	Comments	Reference URL	Reference URL
INDIANA	1998		Westphal, J.R., Rush, J.A., & Stevens, L. (1998). Problem and Pathological Gambling Behaviors within Specific Populations in the State of Indiana. Shreveport, LA: Gambling Studies Unit, Department of Psychiatry, Louisiana State University Medical Center.	2,546 (Adult sample)							SOGS-PY	14,749 EGMs in 1999. Population in 1998 was 5,907,617. People per EGM = 401.		5.3% (1-4); 0.8% (5+); 6.1% combined	1.2%; 0.8 * 1.49 = 1.2%	N/A - rates of pathological gambling too low to determine rates among adult members of minority groups or among different types of gamblers	N/A - rates of pathological gambling too low to determine rates among adult members of minority groups or among different types of gamblers	There were separate but related reports for "60 Year Olds and Older" and "12-20 Year Olds".	http://hdl.handle.net/	
INDIANA	2005	21-59	Rodak, A. & Wolf, J. (2005). Gaming and Betting by Adults, Age 21-59, in Indiana – 2005. Indianapolis, IN: Indiana University - Purdue University Survey Research Center.	751	Random selection within household; 10 contact attempts; the respondents that resulted from this approach were found to be representative of the population of Indiana, age 21-59 years old, based on recent Census findings for Indiana.	"...to discuss some important issues regarding older adults in Indiana. State officials have asked us to help determine the attitudes and behavior of people regarding gaming and betting of all types."	telephone interview	33.1%		gambled in the past year	DSM-IV	17,772 EGMs in 2004. Population in 2005 was 6,271,973. People per EGM = 353.	65% (90% Lifetime)	N/A - So few respondents responded positively to any of the symptoms it the questions it asked to any of the symptoms it was determined that this approach was not an effective measure of problem gambling.	N/A					
IOWA	1989	18+	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.	750	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.	"a study of the gambling practices of the citizens of Iowa"	telephone interview	(Refusal rate = 24%)	No	any lifetime gambling	SOGS-L	Lottery introduced in 1985; riverboat gambling in 1989	(Lifetime = 84%)	0.9% 1.7 * .72 * .60 * combined	0.9%; 1.7 * .72 * .60 * 1.59 * .74 = 0.9%	male; lower education; unmarried	wagering on cards, horse and dog races, games of skill, dice games, and sports		http://www.pubmed.	
IOWA	1995	18+	Volberg, R.A. (1995). Gambling and Problem Gambling in Iowa: A Replication Survey. Des Moines, IA: Iowa Department of Human Services.	1500	Sample stratified to proportionally represent county populations, males and young adults in Iowa on the basis of 1990 census figures; random selection of households and random selection of respondents within households used for first two-thirds of interviews; after approximately 1,000 interviews, interviewers began screening potential respondents to identify males between the ages of 18 and 29; up to five attempts made to contact each number; respondents with lower levels of education and income are somewhat under-represented.	study of the gambling practices of the citizens of Iowa	telephone interview	57%	No - Note: To determine if education or income discrepancies contributed significantly to estimates of the prevalence of problem gambling in Iowa, prevalence rates were analyzed after weighting the sample by education and then by income. These analyses increased prevalence BUT were not used in order to maintain comparability with results from the 1989 survey.	any lifetime gambling	SOGS-PY & SOGS-L	Lottery introduced in 1985; riverboat gambling in 1989	72% (Lifetime = 88%)	SOGS-PY: 2.3% (3-4); 1.0% (5+); 3.3% combined SOGS-L: 3.5% (3-4); 1.5% (5+); 5.4% combined	2.8% 3.3 * .72 * 1.59 * .74 = 2.8%	male; under the age of 30; non-Caucasian; unmarried	continuous types of gambling	Replication of 1989 study.	http://hdl.handle.net/	
IOWA	2006-2008	18+	Black, D.W., McCormick, B., Losch, M.E., Shaw, M., Lutz, G., & Allen, J. (2012). Prevalence of problem gambling in Iowa: Revisiting Shaffer's adaptation hypothesis. Annals of Clinical Psychiatry, 24, 279-284.	356	Telephone-based screen was conducted of randomly selected Iowa households with at least 1 resident age 18 or older between July 2006 and January 2008. Computer Assisted Telephone Interviewing (CATI) system used to collect the data. To match the demographic characteristics of family study probands, participants were screened for persons who fell within specific demographic groupings by household location, age, sex, and education level. Exclusion criteria included ever having been diagnosed with psychosis or a neurologic disorder and/or having been adopted. Many potential subjects in the initial 2,627 calls were excluded for not meeting study targets or refused to participate, as is common in research recruitment.		telephone interview		No		SOGS-L	Lottery introduced in 1985; riverboat gambling in 1989		SOGS-L: 2.2% (3-4); 1.4% (5+); 3.6% combined		younger age; minority group status; lower income levels	strongest associations with disordered gambling included several other leisure/recreational activities, tobacco and alcohol use and dependence	Data were collected while recruiting controls for a family study of PG; study not designed as a survey to be generalized to the state population; survey not designed to recruit a representative sample of adult Iowans.	http://www.ncbi.nlm.	
IOWA	2011 (Feb-May)	18+	Gonnerman, M.E. & Lutz, G.M. (2011). Gambling Attitudes and Behaviors: A 2011 Survey of Adult Iowans. Cedar Falls, IA: Center for Social and Behavioral Research, University of Northern Iowa. September 2011.	1700	Invitation letters mailed out to 10,000 residential addresses. Adult with most recent birthday asked to complete the questionnaire online. Telephone follow-up calls made (when a telephone number was available) to household that did not respond.	"attitudes and experiences of Iowans regarding gambling"	470 online completions; 1,230 (72.4%) telephone completions	17%	Household size, age, gender	none	CPGI; DSM-IV-(NODS); self-report of problems	15,547 EGMs in 2010. Population in 2011 was 3,062,309. People per EGM = 197.	89%	CPGI: 2.6% (3-7); 0.6% (8+); 3.2% combined DSM-IV-PY: 0.2% (3-4); 0.3% (5+); 0.5% combined DSM-IV-L: 0.6% (3-4); 0.6% (5+); 1.2% combined Self-Report-PY: 0.5% Self-Report-L: 2%	0.94% CPGI: 3.2 * .58 * 1.44 * .53 = 1.42% DSM-IV-PY: 0.5 * 1.19 * 1.44 * .53 = 45% Average = 0.94%	Males; age 18-34; high interest is several other leisure/recreational activities, tobacco and alcohol use and dependence	EGMs; casino table games; keno; Internet gambling; horse racing; bingo; games of personal skill		http://hdl.handle.net/	
IOWA	2013	18+	Lutz, G. M. & Park, K. (2014). Gambling Attitudes and Behaviors: A 2013 Survey of Adult Iowans. Cedar Falls, IA: Center for Social and Behavioral Research, University of Northern Iowa.	1826	Dual-frame random digit dial (DFRDD) sampling methodology was used whereby both landline and cellular telephone numbers were included in the sample (564 landlines and 1,262 cellphones).	"...conducting a study about gambling in Iowa."	telephone interview	30% (Response Rate); 72% (Cooperation Rate)	age, gender, ethnicity, race, education, place of residence, telephone status.		CPGI; DSM-IV-PY & DSM-IV-L (NODS); self-report of problems		77.8%	CPGI: 3.8% (3-7); 0.6% (8+); 4.4% combined DSM-IV-PY: 0.6% (3-4); 0.4% (5+); 1.0% combined DSM-IV-L: 1.5% (3-4); 0.9% (5+); 2.4% combined; Self-Report-PY: 0.8% Self-Report-L: 2.6%		Younger age groups; lower income individuals (none statistically significant)			https://dott.iowa.gov	
KANSAS	2012	18+	Kansas Department for Aging and Disability Services. (2012, November 23). Kansas statewide problem gambling study: Topline report. Topeka, KS: Author.	1600	The study was conducted with randomly selected landline and cell phone numbers located across the state, divided into four zones – three of which, generally speaking, constituted the northeast, southcentral and southwest regions, while the fourth zone was the rest of the state (400 specified interviews for each region).		telephone interview			gambled in the past 30-days ("recent gamblers")									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 the SW, where a floor of 133 Hispanic/Latino respondents was specified, to ensure accurate representation from this group in this zone.	http://media.khi.org/	
KANSAS	2017	18+	Learning Tree Institute at Greenbush Research and Evaluation Department. (2017). 2017 Kansas gambling survey: Results and Analysis. Topeka, KS: Kansas Department for Aging and Disability Services.	1,755	Stratified random sample of households throughout the State of Kansas in September, 2017. This survey is a follow-up to a statewide survey conducted in 2012 to assess gambling prevalence, type, and frequency, myths, perception, and public opinion about gambling, and awareness of problem gambling treatment.														http://www.kansasgn	
KENTUCKY	2003	18+	Kentucky Legislative Research Commission. (2003). Compulsive Gambling in Kentucky. Frankfort, KY: Author.	1253	Random-digit dialing; random selection within household; to determine if the sample was representative of the general adult population in Kentucky, the demographics of the survey respondents were compared with data from the 2000 Census	purpose of this study is to help evaluate gambling behaviors	telephone interview	51.6%	gender, age	gambled in the past year	DSM-IV-PY	No EGMs in Kentucky in 2002.	55.1%	0.7% (3-4); 0.5% (5+); 1.2% combined	1.6% 1.2 * 1.19 * 1.44 *; .76 = 1.6%	(From the separate GA study included in the report) – Table 4.2 (p. 44) lists the types of gambling GA respondents deemed to cause them the most serious problems: Casino/EGMs and horse racing/off-track betting were listed as the types of gambling most respondents stated caused serious problems.	A survey of Gamblers Anonymous (GA) respondents was conducted as part of this	http://hdl.handle.net/	
KENTUCKY	2008	18+	Kentucky Council on Problem Gambling. (2009). Gambling in Kentucky: A Research Report on the Prevalence of Gambling among Kentucky Residents. Frankfort, KY: Author.	850 (Note: Also reported as 846 within report)	Random digit dialing; to assess the representativeness of the sample and population in Kentucky, the demographics of the survey respondents were compared with data from the 2000 Census		telephone interview	43.5%	gender, age, race		DSM-IV-L	No EGMs in Kentucky in 2008.	(Lifetime = 55.3%)	DSM-IV-L: 1.7% (3-4); 0.3% (5+); 2.0% combined	1.1% 2.0 * 1.19 * 0.60 *; 1.44 * .53 = 1.1%	males; 18-24 years of age; Blacks and other racial minorities; never married, divorced or separated; employed adults; individuals in residing in households with incomes of $25,000 or less			http://hdl.handle.net/	
LOUISIANA	1995	18+	Louisiana Compulsive Gambling Study Committee (1996). Report to the Legislature of the State of Louisiana. Baton Rouge, LA: Author. Westphal, J. R. & Rush, J. (1996). Pathological gambling in Louisiana: An epidemiological perspective. Journal of the Louisiana State Medical Society, 148, 353-358.	1818 random sample		"the wagering practices of the citizens here in Louisiana "	telephone interview	40%	No – in order to maintain comparability with surveys in other states where the data have not been weighted.	any lifetime gambling	SOGS-PY & SOGS-L	17,038 EGMs in 1999. Unknown number in 1995.	72.3%	SOGS-PY: 3.4% (3-4); 1.4% (5+); 4.8% combined SOGS-L: 4.5% (3-4); 2.5% (5+); 7.0% combined	3.8% 4.8 * .72 * 2.18 *; .51 = 3.8%	male; under the age of 30; non-Caucasian, unmarried; less likely to have graduated from high-school.	Some details (e.g., prevalence measures) of the 1995 study reported in 1998 replication study.	The Louisiana survey found two clusters of pathological gamblers: First, an older male population who primarily wagered on horse racing and a younger male population who primarily wagered on video poker.	http://hdl.handle.net/	
LOUISIANA	1998	18+	Volberg, R.A., & Moore, W. L. (1999). Gambling and Problem Gambling in Louisiana: A Replication Study, 1995 to 1998. Report to the College of Business Administration, University of New Orleans.	1800	Stratified to proportionally represent the eight parish-regions in the state as well as males and females on the basis of the most recent information from the U.S. Bureau of the Census; random selection of households; random selection of respondent within households, up to 5 callbacks.	gambling practices of Louisiana citizens	telephone interview	58.6% (CASRO approach)	No – but effects of weighting were examined and effects were small.	gambled in lifetime	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR-PY)	17,038 EGMs in 1999. Population in 1998 was 4,362,758. People per EGM = 256.	61.5%	SOGS-PY: 2.3% (3-4); 1.8% (5+); 3.9% combined SOGS-L: 3.3% (3-4); 2.5% (5+); 5.8% combined DSM-IV-PY: 1.3% (3-4); 0.9% (5+); 3.6%	3.6% SOGS-PY: 3.9 *; .72 * 1.59 * .74 = 3.3% DSM-IV-PY: 2.8 * 1.19 * 1.59 * .74 = college. Average = 3.6%	Age 18-24 and those aged 35-44; Black and Hispanics; never married, separated or divorced; not graduated from high school or from	horse bettors; EGMs		http://hdl.handle.net/	
LOUISIANA	2002	18+	Vogel, R.J., & Ardoin, P. (2002). Gambling in Louisiana: 2002 Louisiana Study of Problem Gambling. Baton Rouge, LA: Nelson Mandela School of Public Policy, Southern University	1353	Modified stratified sample was designed that ensured that at least 100 adults in each region would be randomly interviewed.	gambling practices of Louisiana citizens	telephone interview			gambled in lifetime	SOGS-L	27,584 EGMs in 2002. Population in 2002 was 4,482,646. People per EGM = 163.	Lifetime participation = 87.7%	SOGS-L: 1.8% (3-4); 1.6% (5+); 4.6% combined	2.7% 4.6 * .72 * .51 * combined	Density of gambling venues per capita.		http://hdl.handle.net/	
LOUISIANA	2008	18+	Esters, I., Biggar, R., Lacour, J., & Reyes, M. (2008). 2008 Louisiana Study on Problem Gambling. Prepared for the Louisiana Office for Addictive Disorders.	2400	240 participants from each of 10 geographical regions; participants contacted randomly via telephone from a list of telephone numbers purchased for the study	"a random study of practices of Louisiana residents with regard to gambling"	telephone interview			gambled in lifetime	SOGS-L	29,149 EGMs in 2008. Population in 2008 was 4,410,796. People per EGM = 151.	Table 7.13. Frequency of Participation in Various Types of Gambling – State (p. 42) provides general participation by gambling format details.	SOGS-L: 1.7% (3-4); 1.4% (5+); 3.1% combined	1.3% 3.1 * .72 * .51 *; 1.59 * .74 = 1.3%			Information garnered from calls to the Gambling Helpline (n = 59,250 calls) and the Louisiana Problem Gambler Helpline Fiscal Year Report (2007) was also used to supplement the report. Responses from the Louisiana Caring Communities Youth Survey, a survey of 106,356 Louisiana students in grades 6, 8, 10 and 12, were incorporated as data into the present study.	http://hdl.handle.net/	
LOUISIANA	2016	21+	Biggar, R., Jr., Esters, I., Dick, S. J., Chen, J., Burstein, K., Bergeron, M., Cooper, R., & Zeahah, P. (2017). The impact of gambling in Louisiana: 2016 study of problem gambling. Lafayette, LA: University of Louisiana at Lafayette. Retrieved from http://picardcenter.louisiana.edu/sites/picardcenter/files/The%20Impact%20of%20Gambling%20in%20Louisiana_FINAL.pdf	2,402	Contracted by the University of Louisiana at Lafayette, Reconnaissance Market Research (ReconMR) conducted telephone surveys with a stratified sample of Louisiana residents. The survey instrument included questions regarding respondent's gambling behaviors, attitudes towards gambling, and awareness of resources for problem gambling. Potential respondents were screened to include only adults 21 years of age or older, currently residing in Louisiana. Sample stratification ensured equal geographic sampling among four parish-defined geographical regions (n=240 per region). 65% of interviews were to be completed using wireless telephone sampling frame and 35% using landline frame.	"We're conducting a survey of people in your community for the Louisiana Office of Behavioral Health and the University of Louisiana at Lafayette concerning the gambling habits of Louisiana residents."	telephone interview			gambled in lifetime		Table 4.16. Frequency of Participation in Various Types of Gambling – State (p. 32) provides general participation by gambling format details.		SOGS-L: 5.4% (3-4); 2.9% (5+); 8.3% combined		males		This prevalence study is the third in a series that began in 2002. The 2008 study include adults 18 and older to calculate rates; while the current study used adults 21 and older.	http://picardcenter.la	
MARYLAND	1988	18+	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.	750	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.	"gambling practices of the citizens of Maryland"	telephone interview	Refusal rate = 34%	No	any lifetime gambling	SOGS-L	No EGMs in Maryland in 1999.	(Lifetime = 89%)	SOGS-L: 2.4% (3-4); 1.5% (5+); 3.9% combined	2.9% 3.9 * .72 * .60 *; 1.59 * .74 = 2.9%	male; non-White; lower education; unmarried	wagering on cards, horse and dog races, games of skill, dice games, and sports		http://www.pubmed.	
MARYLAND	2010	18+	Shinogle, J., Volberg, R.A., Park, D., Norris, D.F., Haynes, D., & Stokan, E. (2011). Gambling Prevalence in Maryland: A Baseline Analysis. Baltimore, MD: Maryland Institute for Policy Analysis & Research.	5975	Stratified to represent the population of the four regions of the state. Random-digit dialing and random selection of respondents within households were used.	"we are conducting a survey in the State of Maryland about people's views on gambling"	telephone interview	18.6% (CASRO)	gender, age, ethnicity	gambled 5 or more times in lifetime	DSM-IV-L (NODS)	1,500 EGMs in 2010. Population in 2010 was 5,773,552. People per EGM = 3849.	70.6%	1.9% (3-4); 1.5% (5+); 3.4% combined	1.9% 3.4 * 1.19 * .60 *; 1.44 * .53 = 1.9%	under 35 years of age; male; African Americans; lower income; lower education	EGMs; wagering on private cards and sports; Internet gambling		http://hdl.handle.net/	
MARYLAND	2017	18+	Tracy, J. K., Maranda, L., & Scheele, C. (2018). Statewide gambling prevalence in Maryland: 2017. Maryland Center of Excellence on Problem Gambling.	3,810			telephone interview														
MASSACHUSETTS	1989	18+	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.	750	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.	"gambling practices of the citizens of Massachusetts"	telephone interview	Refusal rate = 31%	No	any lifetime gambling	SOGS-L	No EGMs in Massachusetts in 1999.	(Lifetime = 90%)	2.1% (3-4); 2.3% (5+); 2.4% combined	2.2% 4.4 * .72 * .60 *; 1.59 * .74 = 2.2%	male; non-White; lower education; unmarried	wagering on cards, horse and dog races, games of skill, dice games, and sports		http://www.pubmed.	
MASSACHUSETTS	2012		Nelson, Sarah E., Kleschinsky, John H., LaPlante, Debi A., Gray, Heather M., & Shaffer, Howard J. (2013). A Benchmark Study for Monitoring Exposure to New Gambling Opportunities: Final Report. Boston, MA: Division on Addiction, Cambridge Health Alliance, a teaching affiliate of Harvard Medical School.	511	Survey released to the 725 members of the MA Knowledge Panel who had not been part of the pre-survey. Panelists received an email inviting them to participate and offering them an $8 cash-equivalent incentive to complete the survey. Those who did not respond initially received a reminder email encouraging them to participate. The survey closed on December 26th after being active for three weeks. More than 70% of the Knowledge Panel completed the survey (n=511). Panel generally reflects the demographics of Massachusetts with a few exceptions, the low initial recruitment rate, and consequent increased chance of selection bias, limits our confidence that the rates we observed in our sample are state-representative.		online panel	70.5%	Not indicated.	gambled in past year	DSM-IV (AUDADIS-IV Gambling Section)		53.6%	2.2% (3-4); 0.2% (5+); 2.4% combined		not indicated	not indicated	Sample limited by its size and representativeness.	http://hdl.handle.	
MASSACHUSETTS	2013-2014	18+	Volberg, R.A., Williams, R.J., Stanek, E. J., Houpt, K. A., Zorn, M., Rodriguez-Monguio, R. (2015). Gambling and Problem Gambling in Massachusetts: Results of a Baseline Population Survey. Amherst, MA: School of Public Health and Health Sciences, University of Massachusetts Amherst.	9578	Probability sample of all Massachusetts adults and allowed survey respondents to complete the survey online, on paper, or by telephone; most recent birthday method selected as survey respondent; over-sampling in Western MA.	survey of "health and recreation."	online panel; pen/paper; telephone interview	36.6%	gender, ethnicity	gambled in past year	CPGI; PPGM		72.2%	CPGI: 8.1% (CPGI+1-4); 1.7% (CPGI+5+); PPGM: 7.5% (At-Risk Gambler); 1.7% (Problem Gambler)		males; blacks; lower education	online gamblers; horse race bettors; daily lottery games.	Baseline Population Survey for the SEIGMA project.	http://www.umass.ed	
MICHIGAN	1997	18+	Gulickson, A. R., & Hartmann, D. (1997). Compulsive Gambling in Michigan: Final Report. Report to the Michigan Department of Community Health.	3942	Random-digit dialing; imposition of a screen to increase male respondents (corrected the gender representation due to within 1.9 percentage points); however, underrepresentation of African-American respondents, of the lowest educational category (less than high school education), lowest income category (household income below $25,000).	a state-funded study of the gambling practices of Michigan residents	telephone interview	43%	Both weighted (race; income; education – See Table 8. - p. 62) and unweighted estimates were produced.	gambled in lifetime	SOGS-PY & SOGS-L	9,187 EGMs in 1999. Unknown number of EGMs in 1997.	76.9%	SOGS-PY: 3.4% (3-4); 1.0% (5+); 3.4% combined SOGS-L: 3.2% (3-4); 2.0% (5+); 5.2% combined	1.9% 3.4 * .72 * 1.44 *; .53 = 1.9%	males; non-whites; younger respondents	horse or dog race players; betting on cards, dice, or video poker outside of legal casinos		http://hdl.handle.net/	
MICHIGAN	1999	18+	Gulickson, A. R., Hartmann, D., & Wiersma, W. (1999). A Survey of Gambling Behaviors in Michigan, 1999. Report to The Michigan Department of Community Health.	1717	Random-digit dialing; imposition of a screen to increase male respondents; underrepresentation of African-American respondents, of the lowest education category (those with less than a high school education), and of the lowest income category (those reporting household incomes below $25,000).	"The Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"	telephone interview	40%	No	gambled in lifetime	SOGS-PY & SOGS-L	9,187 EGMs in 1999. Population in 1999 was 9,897,704. People per EGM = 1080.	77.6%	SOGS-PY: 2.0% (3-4); 1.2% (5+); 3.2% combined SOGS-L: 3.1% (3-4); 1.8% (5+); 4.9% combined	2.7% 3.2 * .72 * 1.59 *; .74 = 2.7%	age (18-29) and race (Black)	horse or dog race players; people who bet on cards, dice, or video poker outside of legal casinos		http://hdl.handle.net/	
MICHIGAN	2001	18+	Gulickson, A. R. & Hartmann, D. (2001). A Survey of Gambling Behaviors in Michigan, 2001. Report to The Michigan Department of Community Health.	1211	Random-digit dialing; imposition of a screen to increase male respondents; imposing a screen to increase male respondents; African Americans are underrepresented	"The Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"	telephone interview	35% (The response rate for the special sample of persons with an interest in gambling was 42 percent.)	No – "As we reported in the 1997 study, weighting does effect estimates of gambling problems in Michigan, though the magnitudes tend to be of a half a percentage point or less."	gambled in lifetime	SOGS-PY & SOGS-L	23,123 EGMs in 2002. Population in 2002 was 10,086,266. People per EGM = 433.	71.9%	SOGS-PY: 1.8% (3-4); 1.5% (5+); 2.8% combined SOGS-L: 2.8% (3-4); 1.7% (5+); 4.5% combined	2.2% 2.8 * .72 * 2.18 *; .51 = 2.2%	age (18-29) and race (Black)	cards, dice, or video poker outside of legal casinos			

Location	Year Study Conducted	Age	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Response Rate	Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
MICHIGAN	2006	18+	Hartmann, D. J. (2007). A Survey of Gambling Behaviors in Michigan, 2006. Kalamazoo, MI: Kercher Center for Social Research at the Western Michigan University for the Michigan Department of Community Health.	957	Random-digit dialing; the statewide sample under-represents males, minorities, and the youngest, least educated, and poorest residents of the state.	"People spend or bet money on a variety of things including lottery, charitable games such as raffles or church sponsored bingo, horse races, casinos, sports, cards and dice. We will ask you about whether you have participated in these activities and whether you have participated in the past 12 months. We will ask about the extent of your participation and how gambling affects other aspects of your life."	telephone dialing	29% (Refusal rate = 71%).	No - A weighting procedure was used to produce a statewide sample of size 957 that is weighted to represent the adult population of Michigan at the county level; Weighted estimates are not reported because of their small effect and the lack of such practice in other studies.	gambled in lifetime	SOGS-PY & SOGS-L	23,039 EGMs in 2006. Population in 2006 was 10,095,643. People per EGM = 438.	70.9%	SOGS-PY: 1.1% (3-4); 0.9% (5+); 2.0% combined SOGS-L: 2.7% (3-4); 1.4% (5+); 4.1% combined	1.6% (5+) = 1.6%	2.0 * .72 * 2.38 * .51 = 1.6%	Age (18-29) and race (Black) appear to have some correlation to incidence of higher scores on the SOGS (Table 5. - Percent in SOGS Grouping by Demographic Categories - p. 17)	Table 6. Percent Distribution of Current SOGS Score by Gambling Type in the Past Year (p. 18) provides details. Note: "small numbers of respondents for particular gambling activities make several of the estimates unreliable."		http://hdl.handle.net/	
MINNESOTA	1990	18-74	Laundergan, J. C., Schaefer, J. M., Eckhoff, K. F., & Pirie, P. L. (1990). Adult Survey of Minnesota Gambling Behavior: A Benchmark, 1990. St. Paul: State of Minnesota Department of Human Services, Mental Health Division.	1251	Sample of 1,375 randomly selected households in the targeted areas was obtained from Survey Sampling, Inc.; Disproportionate random sample from the seven Twin Cities metro counties; Sample was intentionally weighted to include 45% households from St. Louis County, 10% Clay County, 45% Twin Cities Metropolitan Counties; nine counties total; one subject per household contacted; random selection within household.	"short research survey concerning betting or games of chance in Minnesota"	telephone interview	91%	Not indicated (other than to obtain stated percentages for geographic areas).	gambled in past year	SOGS-PY (using the SOGS-M, which is a past-year measure with some wording changes to specific items: guilty -> bad; betting slips -> I.O.Us; questions about borrowing altered to single question with open-end response)	No EGMs in Minnesota in 1990.	64%	1.6% (3-4); 0.9% (5+); 2.5% combined	2.6%	2.5 * .72 * 1.44 * 1.00 = 2.6%	males; non-whites; respondents under the age of 34	pull tabs; bought lottery tickets outside of Minnesota; bingo; bet on a sporting event, and left Minnesota for casino games	A separate adolescent prevalence survey took place at the same time.	http://archive.leg.sta	
MINNESOTA	1994	18-74	Emerson, M.O., Laundergan, J.C., & Schaefer, J.M. (1994). Adult Survey of Minnesota Problem Gambling Behavior: A Needs Assessment: Changes 1990 to 1994. St. Paul: State of Minnesota Department of Human Services, Mental Health Division. Emerson, M.O. & Laundergan, J.C. (1996). Gambling and problem gambling among adult Minnesotans: Changes 1990 to 1994. Journal of Gambling Studies, 12(3), 291-304. doi:http://dx.doi.org/10.1007/BF01530324	1028	Disproportionate random sample from the seven Twin Cities metro counties; ten counties total. Sample intentionally weighted to include 45% households from Twin Cities, 25% St. Louis County, 15% Clay County, 15% Olmsted County; Only one subject was interviewed per household contacted; random selection within household.	short survey concerning betting or games of chance in Minnesota	telephone interview	62%	Yes - to compensate for oversampling of nonmetro residents and females.	gambled in past year	SOGS-PY (SOGS-M)	Unknown number of EGMs in Minnesota in 1994.	65%	3.2% (3-4); 1.2% (5+); 4.4% combined	4.6%	4.4 * .72 * 1.44 * 1.00 = 4.6%	less well-educated; divorced; never married (partly due to younger age of respondent with high SOGS-M scores); male; Native Americans			http://archive.leg.sta http://dx.doi.org/10.1	
MISSISSIPPI	1996	18+	Volberg, R. A. (1997). Gambling and Problem Gambling in Mississippi: A Report to the Mississippi Council on Compulsive Gambling (Social Research Report Series 97-1). Mississippi State: Mississippi State University, Social Science Research Center.	1014	Random selection of households and random selection of respondents within households; actual sample substantially under-represented males and blacks in the population. The actual sample also slightly under- represented individuals under the age of 25 in the population.	"a study of the gambling practices of the Citizens of Mississippi"	telephone interview	70%	gender, ethnicity	gambled in lifetime	SOGS-PY & SOGS-L	37,717 EGMs in 1999. Unknown number in 1996.	49%	SOGS-PY: 2.6% (3-4); 2.1% (5+); 4.9% combined SOGS-L: 3.7% (3-4); 3.1% (5+); 6.8% combined	3.9%	4.9 * .72 * 1.44 * .76 = 3.9%	Lifetime: male; under the age 30; never married Past Year: under age 30; divorced or separated; employed; black	casino gambling, sports betting and wagering on card games Past Year: under age 30; bingo; illegal gambling (dice, EGMs)		http://hdl.handle.net/	
MISSOURI	1981	18-96	Cunningham-Williams, R.M., Cottler, L.B., & Compton, W. M. (1998). Taking Chances: Problem Gambling and Mental Health - Results from the St. Louis Epidemiologic Catchment Area (ECA) Study. American Journal of Public Health, 88(7),1093-1096.	2,954 (50 cases omitted because of missing gambling screen data)	Multistage sampling; Representative household sample of St. Louis adults.				Yes - to account for oversampling of African Americans, clustering and nonresponse.	DSM-III-L (DIS-III)	No EGMs in Missouri in 1981.	50.0% reported placing a bet or gambling at least twice in their lives.	5.45% (1+)			male; younger; separated or divorced; African American		Results were very tentative because of the unknown weighting factor that should be applied to the DIS-III and the fact that DIS only has 4 questions, whereas the DSM-III has 8 criteria. This study is not included in the tables or the analysis.	http://www.pubmed.	
MONTANA	1992	18+	Volberg, R.A. (1992). Gambling Involvement and Problem Gambling in Montana. Albany, NY: Gemini Research.	1020	Random selection of respondents within households; up to 5 attempts to contact each number; only difference between sample compared to the 1990 United States census is underrepresentation of Native Americans.	"gambling practices of Montana citizens"	telephone interview	63%	No	gambled in lifetime	SOGS-PY & SOGS-L	Unknown number of EGMs in 1992.	73% (noted as 74% in 1998 report)	SOGS-PY: 1.5% (3-4); 0.7% (5+); 2.2% combined SOGS-L: 2.3% (3-4); 1.3% (5+); 3.6% combined	1.9%	2.2 * .72 * 1.59 * .74 = 1.9%	under the age of 30; noted as being more likely to be female than in any other state	more likely to have played EGMs and less likely to have wagered on sports or card games than problem and pathological gamblers in other states		http://archive.org/de	
MONTANA	1998	18+	Bureau of Business and Economic Research, University of Montana- Missoula. (1998). The 1998 Montana Gambling Study. Missoula, MT: Author. (Note: Print version contains technical appendices.)	1227	Random-Digit Dialing; once household contacted selection procedure using a Kish grid used; Random cross-section of Montana adults; designed to ensure that the respondents represented a statistically accurate cross- section of Montana adults (17 hearing-impaired respondents received questionnaire in mail, 2 translators obtained for those who did not speak English).	"to gather information on gambling in Montana and its economic and social impacts"	telephone interview	83%	age, sex	ever spent or bet money on gambling activity in lifetime	SOGS-PY & SOGS-L; DSM-IV-PY	19,487 EGMs in 1999. Population in 1998 was 879,533. People per EGM = 45.	78%	SOGS-PY: 2.0% (3-4); 1.6% (5+); 3.6% combined SOGS-L: 2.9% (3-4); 2.8% (5+); 5.7% combined DSM-IV-PY: 1.5% (3-4); 1.0% (5+); 2.5% combined	3%	SOGS-PY: 3.6 *, 72 * 1.44 * .76 = 2.84% DSM-IV-PY: 2.5 * 1.19 * 1.44 * .76 = 3.26% Average = 3.0%	American Indians; divorced or separated; equally likely to be male or female; lower educational attainment	EGMs, lottery, scratch tickets	Prevalence study part of a statewide gambling study; an additional sample of 108 American Indians living on the Flathead Reservation also surveyed.	http://archive.org/de	
NEVADA	1975	18+	U.S. Commission on the Review of the National Policy Toward Gambling. (1976). Gambling in America: Final Report. Washington, DC: Author.	296 (Nevada residents)	"Before obtaining the interview in Nevada, the interviewer ascertained whether the respondent had lived in Nevada for less than 18 months or had moved to Nevada primarily because of the availability of legal gambling. If either of these conditions applied, the individual was not interviewed."	"One thing that facilitated the data collection was the organization of the interview itself. It began by questioning respondents about what they do for recreation, additionally eliciting how much they spent on recreation activities, thus ascertaining them to provide financial information on an innocuous topic. They were then led to discuss their exposure to other people's gambling behavior ... Next they were asked about gambling laws in their state and their desire for or opposition to legalization of different games of chance, and only then were they questioned about what games they bet on, how often they bet, and how much money they wagered" (p. ix)	face-to-face residential interviews	70%	gender, region		"Clinical analysis" based on a) the similarity of the respondent answered 18 questions relative to how 274 known compulsive gamblers answered the same questions; b) observations recorded by the interviewer at the end of each interview; c) betting patterns reported by the respondent.	Unknown number of EGMs in Nevada in 1975	78%	Nevada supplementary sample (n=296) = 2.6% "probable compulsive" (men=3.3%, women=1.7%) National sample (n = 726) = 0.8% "probable compulsive" (men=1.1%, women=0.5%).	Nevada 2.6% National 0.8%				This study is not included in the tables or analyses.	http://hdl.handle.net/	
NEVADA	2000-2001	18+	Volberg, R.A. (2002). Gambling and Problem Gambling in Nevada. Report to the Nevada Department of Human Resources. Carson City, NV: Department of Human Resources.	2217	"two-phase probability sample"; The first phase involved identifying approximately 2,200 residential households with telephones in Nevada and selecting one eligible adult in each household (Kish grid) to respond to a brief screening interview. The second phase involved selecting a stratified random group of 733 respondents from the first phase for a lengthier interview. The sample is representative of the adult population of Nevada; instrument also translated into Spanish; up to 15 callbacks; achieved sample as determined by Bureau of Census (2000).	"we are conducting a survey of people in your community for the State of Nevada about people's attitudes toward gambling"	telephone interview	24% (CASRO method)	Region, gender, age	gambled in lifetime	SOGS-PY, DSM-IV-PY & SOGS-L/DSM-IV-L (NODS)	198,232 EGMs in 1999. Population in 2000 was 1,998,257. People per EGM = 10.	67.9%	SOGS-PY: 2.9% (3-4); 3.5% (5+); 6.4% combined DSM-IV-PY: 1.8% (3-4); 0.3% (5+); 2.1% combined DSM-IV-L: 3.0% (3-4); 2.1% (5+); 5.1% combined	2.7%	SOGS-PY: 6.4 *, 72 * 1.44 * .53 = 3.5% DSM-IV-PY: 2.1 * 1.19 * 1.44 * .53 = 1.9% Average = 2.7%	males; adults 18 to 34; minorities; employed in gaming industry; high school education or less; annual household income under $35,000; never married	EGMs, bingo, horse/dog races, cardrooms		http://hdl.handle.net/	
NEW JERSEY	1988	18+	Volberg, R.A & Steadman, H.J. (1989). Prevalence estimates of pathological gambling in New Jersey and Maryland. American Journal of Psychiatry, 146(12), 1618-1619. Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.	1000	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within household.	"gambling practices of the citizens of New Jersey"	telephone interview	Refusal rate = 36%	no	any lifetime gambling	SOGS-L	Unknown number of EGMs in New Jersey in 1988.	(Lifetime = 92%)	2.8% (3-4); 1.4% (5+); 4.2% combined	2.1%	4.2 * .72 * .80 * 1.59 * .74 = 2.1%	male; non-White; lower education; unmarried	wagering on cards, horse and dog races, games of skill, dice games, and sports		http://ajp.psychiatry http://www.pubmed.	
NEW JERSEY	1990	15+	Reilly, P. & Guida, F. (1990). Pathological Gambling Prevalence in New Jersey: 1990 Final Report. Report to the New Jersey Dept of Higher Education. Piscataway, NJ: University of Medicine and Dentistry.	858	Randomly selected computer generated telephone numbers provided by Survey Sampling, Inc.; stratified by county and sex based on 1987 census.	study of recreational behavior among citizens of New Jersey	telephone interview	29.6%	No		DSM-IV-L (uses 9 of the 10 questions proposed for the forthcoming DSM-IV; 6 of the 9 questions use the term 'ever')	Unknown number of EGMs in New Jersey in 1990.		5.8% (1+); 3.0% (2+)	3.4%	5.8 * .45 * .60 * 2.18 = 3.4%	male; earned less than $15,000 per year; younger persons; older persons	lottery play; casino betting; slots; horse betting; playing cards.	Used a slightly younger age (15+) than many other prevalence surveys.	http://hdl.handle.net/	
NEW JERSEY	2015	18+	Nower, L., Volberg, R.A & Caler, K.R. (2017). The Prevalence of Online and Land- Based Gambling in New Jersey. Report to the New Jersey Division of Gaming Enforcement. New Brunswick, NJ: Authors.	3,634 (1,500 telephone + 2,134 online panel)	Random digit dialing; 16-minute survey; included cell phone numbers in the pool of eligible numbers; stratified sampling to ensure minimal age and gender quotas; random selection using most recent birthday method.		telephone interview & online panel	5.3%, based on CASRO and AAPOR procedures.	Yes - gender, age, ethnicity, region		Problem Gambling Severity Index (PGSI)		69.80%	6.3% gambling disorder; 14.9% problem gambling			higher frequency of play; more gambling activities, and gambling at both online and land-based venues	In the online panel, rates of problem and disordered gambling were extremely high; survey includes separate section on high risk stocks and daily fantasy sports; study also examined the relationship of gambling attitudes to substance use, behavioral addictions, and mental health problems	http://socialwork.rut	
NEW JERSEY + PENNSYLVANIA (2-State Study)	1984	17+	Sommers, I. (1988). Pathological gambling: Estimating prevalence and group characteristics. Substance Use & Misuse, 23(5), 477-490. doi:10.3109/10826088909039213	534 (1,000 households – refusals = 534)	Random digit dialing; random selection within household; age distribution of respondents was skewed toward younger persons.		telephone interview	53.4%	Gender	gambling in lifetime	Inventory of Gambling Behavior & other questions to get a "hard signs" of gambling pathology (CGSM)		30.0% ("31% represented the number of respondents who both perceived themselves as gamblers and were willing to disclose this in a telephone interview") [unclear as to time period for statement]	"potentially" pathological gamblers = 4.12%; "probable" pathological gamblers = 3.37%			17-34 age group; males; Catholics; single individuals; separated or divorced; annual household income less than $20,000		The IGB method probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio method, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. Survey included adults residing in a nine-county area of southeastern Pennsylvania and southern New Jersey. This study is not included in the tables or analyses.	http://dx.doi.org/10.3	
NEW MEXICO	1996-1998	18+	New Mexico Department of Health & University of New Mexico Center on Alcoholism Substance Abuse and Addictions. (1998). New Mexico Survey of Gambling Behavior. Santa Fe, NM: Author. Starling, R., Blankenship, J., May, P., & Woodall, G. (2009). Problem Gambling in New Mexico: 1996 and 1998. International Journal of Mental Health & Addiction, 7(1), 138-148. doi:10.1007/s11469-008-9163-3	2674 (1,279 in 1996 and 1,395 in 1998)	Stratified based on county population; random digit dialing. American Indians, possibly because of the low number of household phones, were under sampled by about 50%.		telephone interview		no	Respondents were surveyed regarding their gambling behavior in the 30 days preceding the gambling survey	Mix of DSM-IV questions (13) and SOGS questions (4)	6,300 EGMs in 1999. Population in 1998 was 1,733,535. People per EGM = 275.		Gamblers were categorized as experiencing "low/moderate problems" if they reported any of the following, but also reported no serious problems: (1) one or more low problems, (2) one moderate problem, or (3) two low problems with one moderate problem. Gamblers were categorized as experiencing "serious problems" if they reported any of the following: (1) one or more serious problems, (2) two or more moderate problems, or (3) three or more low problems in combination with one more moderate problem. 8.2% were identified as having low/moderate problems, while 3.9% were identified as having serious problem gambling.			younger, more college education, less likely to be married, disability/unemployment, Hispanic	playing cards for money, dice gambling, and paper games		http://dx.doi.org/10.1	
NEW MEXICO	2005-2006	18+	Volberg, R.A., & Bernhard, B. (2006). The 2006 Study of Gambling and Problem Gambling in New Mexico. Report to the Responsible Gaming Association of New Mexico. Northampton, MA: Gemini Research.	2850	Random-digit dialing; minimum of 8 attempts to establish contact; questionnaire translated into Spanish; oversample of 589 Native American New Mexico residents aged 18 and over.	"a survey in the State of New Mexico about people's attitudes toward gambling"	telephone interview	47% ("complete on rate"); 37% (more conservative approach)	age, ethnicity	DSM-IV-PY & DSM-IV-L (NODS); gambled more than 5 times in lifetime; CPGI: Past year gambler	DSM-IV-PY & DSM-IV-L (NODS); CPGI	14,881 EGMs in 2006. Population in 2006 was 1,954,599. People per EGM = 131.	68%	CPGI: 2.2% (3-7); 0.6% (8+); 2.8% combined DSM-PY: 0.7% (3-4); 0.6% (5+); 1.3% combined	1.2%	CPGI: 2.5 * .58 * 1.44 * .53 = 1.2% DSM-PY: 1.3 * 1.19 education; * 1.44 * .53 = 1.2% Average = 1.2%	never married; disabled; unemployed; male; Hispanic; lower Native Americans	Bingo; wager privately; sports bettors; casino gamblers	Interviewed a separate oversample of 589 Native American residents of New Mexico.	http://hdl.handle.net/	
NEW YORK	1986	18+	Volberg, R.A & Steadman, H.J. (1988). Refining prevalence estimates of pathological gambling. The American Journal of Psychiatry, 145(4), 502-505. Volberg, R.A. (1996). Gambling and Problem Gambling in New York: A 10- Year Replication Survey, 1986 to 1996. Report to the New York Council on Problem Gambling. Roaring Spring, PA: Gemini Research.	1000	Random digit dialing; sample stratified to proportionally represent the counties (of New York on the basis of 1980 census figures; instrument also translated into Spanish; lowest education levels somewhat underrepresented.	"a study of the gambling practices of the Citizens of New York"	telephone interview	65%	no	gambled in lifetime	SOGS-L	No EGMs in New York in 1999.	(Lifetime = 84%)	2.8% (3-4); 1.4% (5+); 4.2% combined	2.1%	4.2 * .72 * 1.59 * .74 = 2.1%	males; under age 30; Black; lower education (most did not graduate from high school)			http://ajp.psychiatry http://hdl.handle.net/	

Location	Year Study Conducted	Age	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Response Rate	Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
NEW YORK	1996	18+	Volberg, R.A. (1996). Gambling and Problem Gambling in New York: A 10-Year Replication Survey, 1986 to 1996. Report to the New York Council on Problem Gambling. Roaring Spring, PA: Gemini Research.	1829	Random selection of households and random selection of respondents within households; after completing 1,000 interviews, it was determined that the sample would not meet quotas for males or for population distribution in the state; began screening for male respondents; post-stratification of sample to correct for population distribution; individuals with lower education underrepresented.	study of the gambling practices of the Citizens of New York State	telephone interview	72% (response rate among eligible responde nts); 36% (response rate among eligible household s).	Yes - to ensure sample would be representative of the distribution of the population of the state; weighted by ethnicity, population distribution. Details available in Table 2 (p. 8).	gambled in lifetime	SOGS-PY 2.2%; SOGS-L, DSM-IV-PY (DSM-IV-MR)	No EGMs in New York in 1999. Unknown number in 1996.	80% (Lifetime = 90%)	0.5% (3-4); 0.4% (5+); 3.5% combined SOGS-L: 4.7% (3-4); 2.6% (5+); 7.3% combined DSM-IV-PY: 1.6% (3-4); 0.9% (5+); 2.5% combined	1.5% SOGS-PY: 3.8 *. 72 * 1.44 *. 53 = 1.98% DSM-IV-PY: 2.5 *. 58 * 1.44 *. 53 = 1.11% Average = 1.5%		males; under age 30; non-Caucasian; unmarried	continuous forms of gambling		http://hdl.handle.net/	
NEW YORK	2005-2006	18+	Rainone, G., Marel, R., Gallati, R. J., & Gargon, N. (2007). Gambling Behaviors and Problem Gambling among Adults in New York State: Initial Findings from the 2006 OASAS Household Survey. NYS Office of Alcoholism and Substance Abuse Services.	5100	Random digit dialing		telephone interview	Between 45% - 50%	gender, age, region, ethnicity, nativity and employment status		DSM-IV-PY (NODS)	16,555 EGMs in 2006. Population in 2006 was 19,306,183. People per EGM = 1166.	67%	0.5% (3-4); 0.4% (5+); combined	1.2%	0.9 * 1.9 * 1.44 *. 76 = 1.2%	males; younger adults; Blacks; Hispanics; never married; employed full or part time		The survey methodology is described in a separate report, "2006 OASAS Household Survey Technical Documentation." (This report not available online).	http://hdl.handle.net/	
NORTH CAROLINA	2005	18+	Division of Mental Health, Developmental Disabilities and Substance Abuse Services. (2007). Effects of the North Carolina State Lottery on the Incidence of Gambling Addiction.	1367	Gambling questions included in random statewide telephone survey (North Carolina Behavioral Risk Factor Surveillance System (BRFSS)) of adults that collects information on health, health behaviors, and utilization of health services in all months of the year.	"We are gathering information about the health of North Carolina residents."	telephone interview		Yes	none	N/A – The prevalence for problem gambling, or the percentage of the adult general population with a gambling problem, was based on a single question that asked respondents whether they were gambling more than they thought they should.	3,600 EGMs in 2004. Population in 2005 was 8,683,242. People per EGM = 2412.	Past 6-months = 28.6%	2.1% – Based on a single question that asked respondents whether they were gambling more than they thought they should.			age 18-24; non-whites; high-school education; $15,000-$24,999 household income		This report presents findings on gambling prevalence prior to the sale of the first lottery ticket on March 30, 2006.	http://digital.ncdcr.go	
NORTH DAKOTA	1992	18+	Volberg, R.A. & Silver, E. (1993). Gambling and Problem Gambling in North Dakota. Report to the North Dakota Department of Human Services, Division of Mental Health. Albany, NY: Gemini Research.	1517	Random sample of telephone numbers proportional to working blocks of telephone numbers in state; random selection of respondents within households; demographic data from random sample compared to data from 1990 U.S. census; no significant differences in terms of ethnicity; respondents in sample were less likely to be male and under the age of 25 than the general population.	study of the gambling practices of the Citizens of North Dakota	telephone interview	65%	No	gambled in lifetime	SOGS-PY 1.3%; SOGS-L	Unknown number of EGMs in North Dakota in 1992.	73%	SOGS-L: 1.3% (3-4); 0.7% (5+); 2.0% combined SOGS-L: 2.5% (3-4); 1.0% (5+); 3.5% combined	1.7% SOGS-PY: 2. *. 72 * 1.59 *. 74 = 1.7%		Lifetime: under 30 years of age; lower than average household income. Current: under 30 years of age; non-White; somewhat less likely to earn $25,000 or more annually.	pull-tabs; bingo	Survey prior to the establishment of casinos in the state.	http://hdl.handle.net/	
NORTH DAKOTA	2000	18+	Volberg, R.A. (2001). Gambling and Problem Gambling in North Dakota: A Replication Study, 1992 to 2000. Report to the North Dakota Office of the Governor. Bismarck, ND: Office of the Governor.	5002	Random selection of households and random selection of respondents within households; achieved sample was quite representative of the total adult population in North Dakota, as estimated by the Bureau of the Census.		telephone interview	71% (CASRO method)	Yes - the data were weighted to ensure that the results of the survey could be generalized to the adult population of North Dakota. The first set of weights (WT_SHORT) made the selection process for Phase One as an equal-probability selection of eligible adults in North Dakota, except that male and female adults of different ages in each of the four regions of the state had different probabilities of completing the screener. The second set of weights (WT_LONG) adjusted for both the differential probabilities of selection for the full interview and the differential non-response by region, age, and gender at Phases One and Two, and for differential non-response by region, age, and gender at Phase Two.	gambled in lifetime	SOGS-PY & SOGS-L, DSM-IV-PY & DSM-IV-L (NODS)	2,500 EGMs in 1999. Population in 2000 was 642,200. People per EGM = 257.	69.8%	SOGS-PY: 0.7% (3-4); 1.4% (5+); 2.1% combined SOGS-L: 2.2% (3-4); 1.8% (5+); 3.8% combined DSM-IV-PY: 0.4% (3-4); 0.3% (5+); 0.7% combined DSM-IV-L: 0.5% (3-4); 0.4% (5+); 0.9% combined	1.2% SOGS-PY: 2.1 *. 72 * 1.44 *. 74 = 1.61% DSM-IV-PY: 0.7 *. 72 * 1.44 *. 74 = 88% Average = 1.2%		horse race betting; casino table games; pulltabs; EGMs		http://hdl.handle.net/	
OHIO	1985		Culleton, R.P. (1989). The prevalence rates of pathological gambling: A look at methods. Journal of Gambling Behavior, 5, 22-41. doi:10.1007/BF01022135 Volberg, R.A. & Banks, S.M. (1990). A review of two measures of pathological gambling in the United States. Journal of Gambling Studies, 6(2), 153-163. doi:10.1007/BF01013495	801			telephone interview				Inventory of Gambling Behavior / Cumulative Clinical Signs Method (CCSM)	No EGMs in Ohio in 1999.		In Ohio, 2.5% of all adults were described as "probable" and another 3.4% as "potential" pathological gamblers.					The IGB/CCSM probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio method, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. CCSM instrument also used in the following regional prevalence study: Culleton, R. P. & Lang, M.H. (1985). The prevalence rate of pathological gambling in the Delaware Valley in 1984. Report prepared for People Acting To Help, Philadelphia, PA. This study is not included in the tables or analyses.	http://dx.doi.org/10.	http://dx.doi.org/10.
OHIO	2012	18+	Massatti, R., Starr, S., Frohnapfel-Hasson, S. & Martt, N. (2015, February). 2012 Survey of At-Risk and Problem Gambling Prevalence Among Ohioans. Columbus, OH: Ohio Department of Mental Health and Addiction Services. http://mha.ohio.gov/Portals/0/assets/Research/Reports/2012-Survey-of-At-Risk-and-Problem-Gambling-Prevalence-among-Ohioans.pdf ; Massatti, R. R., Starr, S., Frohnapfel-Hasson, S., & Martt, N. (2016). A baseline study of past-year problem gambling prevalence among Ohioans. Journal of Gambling Issues, 34, 32-54. doi:10.4309/jgi.2016.34.3	3600	Multistage random area probability sample for the state of Ohio; oversampling of 600 in each area where a casino will operate (Cuyahoga, Lucas, Franklin, and Hamilton Counties) and 1,200 surveys statewide. Sample was constructed by identifying zip codes and then by random selection of individuals within zip code.	"a study on people's thoughts and feelings on gambling"	telephone interview	"available upon request"	race, age, and gender	gambling in past 12 months	CPGI	No EGMs in Ohio in 1999.	56.7%	0.3% (3+); 0.3% (3+); 0.6% combined			Of the at-risk group, a majority are male and between the ages of 18-24 years old. In some areas of the state a slightly larger percentage of at-risk gamblers were African-American.	casino gambling	Two items that measure community attitudes and perceptions of gambling problems were added to the survey instrument.	http://mha.ohio.gov/	dx.doi.org/10.4309/je
OKLAHOMA	2015-2016	18+	Pauton, R. & Chandler, M. (2016). Oklahoma gambling prevalence study. Prepared for Oklahoma Association for Problem and Compulsive Gaming and the Oklahoma Department of Mental Health and Substance Abuse Services. http://www.odmhsas.org/eda/OAPCG_SummaryReport_042016.pdf	2636	Options for respondents to complete an online survey, a paper survey mailed with prepaid return envelope, or a telephone survey.		online panel; paper survey; telephone survey			gambling in past 12 months	PPGM; DSM-IV-DSM-V		56.4%	PPGM: 3.5% (Problem / Pathological); DSM-IV: 1.0% (Severe); DSM-V: 0.9% (Severe).					http://www.odmhsas.org	
OREGON	1997	18+	Volberg, R.A. (1997). Gambling and Problem Gambling in Oregon. Northampton, MA: Gemini Research Inc.	1502	random selection of households and random selection of respondents within households; stratified sampling frame after completing approximately two-thirds of the interviews in order to obtain data from a representative sample of men and young adults.	"a survey of people in your community for the State of Oregon concerning the gambling practices of Oregon citizens"	telephone interview	51% (CASRO method)	age	gambling in lifetime	SOGS-PY & SOGS-L, DSM-IV-PY (DSM-IV-MR)	8,848 EGMs in 1999. Unknown number of EGMs in 1997.	51.6%	SOGS-PY: 1.9% (3-4); 1.4% (5+); 3.3% combined SOGS-L: 3.1% (3-4); 1.9% (5+); 5.1% combined DSM-IV-PY: 2.0% (3-4); 1.3% (5+); 3.3% combined	3.4% SOGS-PY: 3.3 *. 72 * 1.44 *. 76 = 2.60% DSM-IV-PY: 3.3 * 1.19 * 1.44 *. 76 = 4.30% Average = 3.4%		male; under the age of 30; never married	illegal types of gambling; particularly sports, dice and games of skill; EGMs; card games; bingo		http://hdl.handle.net/	
OREGON	2000	18+	Volberg, R.A. (2001). Changes in Gambling and Problem Gambling in Oregon: Results from a Replication Study, 1997 to 2000. Northampton, MA: Gemini Research Inc. Moore, T.L. (2001). The Prevalence of Disordered Gambling among Adults in Oregon: A Secondary Analysis of Data. Salem, OR: Oregon Gambling Addiction Treatment Foundation.	1500	randomized telephone survey; stratified sampling; screening procedure was used to preferentially complete interviews with male respondents and with respondents under the age of 35; achieved sample was quite representative of the population in terms of gender, age and ethnicity	"survey of people in your community for the State of Oregon concerning the gambling practices of Oregon citizens"	telephone interview	48% (CASRO method)	No	gambling in lifetime	SOGS-PY & SOGS-L, DSM-IV-PY & DSM-IV-L (NODS)	8,848 EGMs in 1999. Population in 2000 was 3,431,085. People per EGM = 388.	47.1%	SOGS-PY: 1.4% (3-4); 0.9% (5+); 2.3% combined SOGS-L: 2.7% (3-4); 1.9% (5+); 4.6% combined DSM-IV-PY: 0.4% (3-4); 0.1% (5+); 0.5% combined DSM-IV-L: 0.9% (3-4); 0.6% (5+); 1.5% combined	1.2% SOGS-PY: 2.3 *. 72 * 1.44 *. 76 = 1.81% DSM-IV-PY: 0.5 * 1.19 * 1.44 *. 76 = 0.65 Average = 1.2%		minority populations (small sample); never married			http://hdl.handle.net/	http://hdl.handle.net/
OREGON	2005	18+	Moore, T. (2006). The Prevalence of Disordered Gambling among Adults in Oregon: A Replication Study. Portland, OR: Oregon Gambling Addiction Treatment Foundation.	1554	The design and methodology for the replication study was consistent with the initial baseline study conducted in 1997 and the replication study conducted in 2001; minorities and ages 18 – 44 were under- represented in sample.		telephone interview		Age	gambling in lifetime?	SOGS-PY & SOGS-L, DSM-IV-L (NODS)	14,218 EGMs in 2004. Population in 2005 was 3,626,936. People per EGM = 255.	64.5% (weighted)	SOGS-PY: 1.7% (3-4); 0.4% (5+); 2.1% combined SOGS-L: 2.4% (3-4); 1.9% (5+); 4.3% combined DSM: not reported	2.1% SOGS-PY: 2.7 *. 72 * 1.44 *. 76 = 2.1%		under the age of 45; non-Whites; divorced or separated; employed		Replication study; NODS prevalence rates not reported.	http://hdl.handle.net/	
OREGON	2015	18+	Moore, T. L., Volberg, R. A. (2016). Oregon adult gambling behavior 2016: preliminary report. Wilsonville, OR: Oregon Council on Problem Gambling.	1,512	Replication study; a purchased sample of 19,904 phone numbers (31.5% land line, 64.4% cell) randomly distributed across the state.		telephone interview	12.90%	some weighting was necessary to achieve proportional sample sizes in three of the age/gender groups due to the over sampling of males in the 35 year and older group.		PGSI; DSM-IV (NODS)		56.60%							https://www.oregon	
PENNSYLVANI A + NEW JERSEY (2-State Study)	1984	17+	Sommers, I. (1988). Pathological gambling: Estimating prevalence and group characteristics. Substance Use & Misuse, 23(5), 477-490. doi:10.3109/10826088809039213	534 (1,000 households – refusals = 534)	Random digit dialing; random selection within household; age distribution of respondents was skewed toward younger persons.		telephone interview	53.4%	Gender	gambling in lifetime	Inventory of Gambling Behavior & other questions to get a "hard signs" of pathological gambling (CCSM)		30.0% ("31% represented the number of respondents who both perceived themselves as gamblers and were willing to disclose this in a telephone interview") [unclear as to time period for statement]	"potentially" pathological gamblers = 4.12%; "probable" pathological gamblers = 3.37%			17-34 age group; Catholics; single individuals; separated or divorced; annual household income less than $20,000		The IGB method probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio method, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. Survey included adults residing in a nine-county area of southeastern Pennsylvania and southern New Jersey. This study is not included in the tables or analyses.	http://dx.doi.org/10.3	
PUERTO RICO [U.S. Territory]	1997	18+	Volberg, R.A. & Vales, P.A. (1998). Gambling and Problem Gambling in Puerto Rico [Juegos de azar y el problema de juego en Puerto Rico]. Report to the Puerto Rico Treasury Department. Volberg, R., Vales, P.A. (2002). Prevalence estimates of pathological gambling in Puerto Rico [Estimados de prevalencia estos el juego patológico en Puerto Rico]. Revista Puertorriqueña de Psicología 13, 71-98.	1506	Stratified household sampling; 3 metropolitan municipalities, 3 large towns and 8 small towns were randomly selected from the 78 municipalities in Puerto Rico; different socio-economic areas selected within the urban and rural locations of each municipality; survey conducted in Spanish; random selection within household. Obtained sample was nonsignificantly different from the Puerto Rico population in terms of gender, age and urban/rural distribution.	"gambling practices among residents of Puerto Rico"	Residential face-to-face interview	97%	"Since the sample was so similar to the Puerto Rico population in terms of size of municipality, urban-rural distribution, gender and age, it was not necessary to use post-stratification weights" (p. 9).	gambling in lifetime	SOGS-PY & SOGS-L	4,440 EGMs in 1999. Unknown number in 1997.	88%	SOGS-PY: 4.4% (3-4); 6.8% (5+); 11.2% combined SOGS-L: 6.4% (3-4); 7.4% (5+); 13.8% combined	8.1%	11.2 *. 72 * 1.00 = 8.1%	male; between the age of 21 and 54; divorced or separated; employed; annual household incomes over $50,000	"continuous" types of gambling, characterized by rapid cycles of play. These include wagering on horse races and cockfights, "bolita," illegal EGMs, at casinos, on sports, on card games not at a casino and on games of skill.	The strong cultural disapproval of gambling in Puerto Rico could account for high rates of continuous gambling, including illegal activities. There appears to be greater compatibility with questions about permutual wagering in other jurisdictions. In retrospect, and given the large role that these types of gambling appear to play in the prevalence of problem and pathological gambling in Puerto Rico, it would have been preferable to separate these two activities.	http://hdl.handle.net/	http://hdl.handle.net/
SOUTH DAKOTA	1991	18+	Volberg, R.A., Stuefen, R.M., & Madden, M.K. (1991). Gaming in South Dakota: A Study of Gambling Participation and Problem Gambling and a Statistical Description and Analysis of its Socioeconomic Impacts. Vermillion: University of South Dakota, Business Research Bureau.	1560	Sample stratified to proportionally represent county populations on the basis of 1990 census figures. Random sampling of households with listed telephone numbers and random selection of respondents within households. Up to 7 attempts were made to contact each number and up to 5 callbacks were made to complete an interview with each respondent.	"a study of the gambling practices of the Citizens of South Dakota"		76%	No	gambling in lifetime	SOGS-PY (6-months) & SOGS-L	Unknown number of EGMs in 1991.	(Lifetime = 86%)	SOGS-PY: 0.8% (3-4); 0.6% (5+); 1.4% combined SOGS-L: 2.3% (3-4); 1.0% (5+); 2.8% combined	1.5%	1.4 *. 72 * 1.44 *. 1.00 = 1.5%	unmarried; household income less than $25,000; non-White, under age of 30	Bingo; sports betting. Problem gamblers in South Dakota are just as likely as those in other states to have wagered on gambling machines, horse and dog races, card games and dice games.		http://hdl.handle.net/	
SOUTH DAKOTA	1993	18+	Volberg, R.A & Stuefen, R.M. (1994). Gaming in South Dakota: A Follow-up Survey. Vermillion: University of South Dakota, Business Research Bureau.	1767	Sample stratified to proportionally represent county populations on the basis of 1990 census figures. Random sampling of households with listed telephone numbers and random selection within households; up to 7 attempts to contact each number; up to 5 callbacks to complete interview. Males, Native Americans, individuals under the age of 30 and those with less than a high school education underrepresented in sample.	"a study of the gambling practices of the Citizens of South Dakota"		80%	No	gambling in lifetime	SOGS-PY (6-months) & SOGS-L	Casino first opened 1989. Unknown number of EGMs in 1993.	65% (Past 6-months)	SOGS-PY: 0.7% (3-4); 0.5% (5+); 1.2% combined SOGS-L: 1.4% (3-4); 0.9% (5+); 2.3% combined	1.2%	1.2 *. 72 * 1.44 *. 1.00 = 1.2%	male; over the age of 30; married			http://hdl.handle.net/	
TEXAS	1992	18+	Wallisch, L.S. (1993). Gambling in Texas: 1992 Texas Survey of Adult Gambling Behavior. Austin: Texas Commission on Alcohol and Drug Abuse.	6308	Random digit dialing; Certain geographical were oversampled to provide minimum sample of 650 respondents in each of 8 regions of the state. Spanish-language version of the survey instrument was produced. Approximately 6 percent of the adults asked to be interviewed in Spanish.		telephone interview	67%	age, race/ethnicity, region	gambling in lifetime	SOGS-PY & SOGS-L	No EGMs in 1992.	49%	SOGS-PY: 1.7% (3-4); 0.8% (5+); 2.5% combined SOGS-L: 3.5% (3-4); 1.3% (5+); 4.8% combined	2.5%	2.5 *. 72 * 1.44 *. 76 = 2.0%	males; non-whites; young adults (18–24), divorced or never married; lower educational levels, blue-collar workers; Catholics and people who are not Protestant or Jewish	betting on cards or dice in casinos or at card parlors and games of skill and sports at a sports book or with a bookie	The information given by all respondents generally reflects gambling that occurred before the Texas Lottery, except where indicated. Study also included a separate sample of 924 adolescents aged 14 through 17.	http://hdl.handle.net/	
TEXAS	1995	18+	Wallisch, L.S. (1996). Gambling in Texas: 1995 Surveys of Adult and Adolescent Gambling Behavior. Austin: Texas Commission on Alcohol and Drug Abuse.	7015	Minimum of 400 adults from each of the 11 Texas Department of Health and Human Services planning regions; certain age groups and racial/ethnic groups were oversampled; obtained sample representative in terms of gender, age, racial/ethnic and regional distribution as the Texas population.		telephone interview	70% ("noted as "cooperation rate")	gender, race/ethnicity, age, region	gambling in lifetime	SOGS-PY & SOGS-L	No EGMs in 1995.	68%	SOGS-PY: 2.1% (3-4); 0.9% (5+); 3.0% combined SOGS-L: 3.5% (3-4); 1.3% (5+); 4.8% combined	2.4%	3.0 *. 72 * 1.44 *. 76 = 2.4%	male; African American or Hispanic; never married; high school dropouts; less likely to be in the labor force because they were instead in school or disabled; lowest household incomes	illegal activities, followed by bingo, games of skill, and casino	Follow-up / replication study. Study also included a separate sample of 3,079 adolescents aged 14 through 17.	http://hdl.handle.net/	
WASHINGTON	1992	18+	Volberg, R.A. (1993). Gambling and Problem Gambling in Washington State: A Report to the Washington State Lottery.	1502	Random selection of respondents within households; sample slightly underrepresents Asians; young adults and the elderly, individuals who have married, low income household.	study of the gambling practices of the citizens of Washington State	telephone interview	80% (Upper Bound method)	no	gambling in lifetime	SOGS-PY & SOGS-L	No EGMs in 1992.	80.1%	SOGS-PY: 1.6% (3-4); 0.9% (5+); 2.8% combined SOGS-L: 3.5% (3-4); 1.5% (5+); 5.1% combined	2.4%	2.8 *. 72 * 1.59 *. 74 = 2.4%	male; under the age of 30; non-White; unmarried	wagering on sports events with friends or co-workers; lottery's Daily Game		http://hdl.handle.net/	
WASHINGTON	1998	18+	Volberg, R.A & W.L. Moore. (1999). Gambling and Problem Gambling in Washington State: A Six-Year Replication Study, 1992 to 1998. Olympia, WA: Washington State Lottery.	1501	Random selection of households and random selection of respondents within households in order to obtain adequate representation of young men. Soft screening entails first asking for the man in the household under age 35, then any male, and then the adult with the next birthday. As a result of this screening procedure, the sample is fully representative of the population aged 18 and over in Washington State in terms of gender (male/female) and age (18-34 and 35+).	"survey of people in your community for the State of Washington concerning the gambling practices of Washington citizens"	telephone interview	50% (CASRO method)	no	gambling in lifetime	SOGS-PY & SOGS-L, DSM-IV-PY (DSM-IV-MR)	No EGMs in 1998.	74.4%	SOGS-PY: 1.8% (3-4); 0.9% (5+); 2.6% combined SOGS-L: 3.7% (3-4); 1.8% (5+); 5.5% combined DSM-IV-PY: 1.0% (3-4); 0.5% (5+); 1.5% combined	1.9% SOGS-PY: 2.3% *. (3-4); 0.9% (5+); DSM-IV-PY: 1.5% *. 74 = 1.9% Average = 1.9%		male; under the age of 25; non-White or Hispanic; never married	bingo, the instant and daily lottery games, EGMs, horse or dog races		http://hdl.handle.net/	http://hdl.handle.net/

Location	Year Study Conducted	Age	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Response Rate	Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
WASHINGTON	2003-2004	18+	Mancuso, D., Gilson, M., & Felver, B. (2005). The 2003 Washington State Needs Assessment Household Survey. Department of Social and Health Services (DSHS), Division of Alcohol and Substance Abuse (DASA).	6713	Random digit dialing + phone numbers from Food Stamps client lists, school lists, birth certificate records, and ethnic surname sampling of listed telephone numbers. The interview offered in 6 languages: English, Spanish, Russian, Chinese, Korean, and Vietnamese. Stratified sampling; over sampling young adults, poorer persons and members of ethnic and racial minority groups; An advance letter with a brief description of the survey and a one dollar bill was sent to sampled households with available address information; minimum number of 20 callbacks.	Part of an omnibus survey on several topics	telephone interview	50% (69% "cooperation rate")	Yes - to U.S. Census population counts.	Not indicated. Seemingly Gambling in past year.	DSM-IV-PY (NODS)	16,923 EGMs in 2004. Population in 2004 was 6,203,788. People per EGM = 367.	54%	0.7% (3-4); 0.4% (5+); 1.2% combined	2.1%	1.2 * 1.19 * 1.44 = 2.1%	aged 25 to 44 years; 45 to 64 years; rural counties; American Indian or Alaska Native adults; adults who endorsed more than one race; Blacks.			http://hdl.handle.net/	
WISCONSIN	1995	18+	Thompson, W.N., Gazel, R., & Rickman, D. (1996). The Social Costs of Gambling in Wisconsin. Wisconsin Policy Research Institute Report, 9(6),1-44.	1000	Random digit dialing; 3 call back attempts; the 1,000 respondents were a close match of the general Wisconsin adult population		telephone interview		No	None	DSM-IV(slight modification)	Unknown number of EGMs in 1995.	65.1%	0.9% (3+)	1.3%	0.9 * 1.19 * 1.59 *; 74 = 1.3%		casino gambling		http://hdl.handle.net/	

Location	ARIZONA
Year Study Conducted	2002-2003
Age	18+
Sources	Volberg, R.A. (2003). Gambling and Problem Gambling in Arizona. Report to the Arizona Lottery. Northampton, MA: Gemini Research.
Sample Size	2750
Sampling Strategy	Quotas for gender and region of the state; minimum of 6 contact attempts; random selection within household.
Survey Description	"survey for the State of Arizona about people's attitudes toward gambling"
Administration Method	telephone interview
Response Rate	56%
Weighting	By age and ethnicity to account for under-representation of younger adults and Hispanics. Details in Table 3: Demographics of Sample (p. 9). Note: Unweighted data used for NODS analysis.
Threshold for PG Questions	ever gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	9,044 EGMs in 2002. Population in 2002 was 5,456,453. People per EGM = 603.
Past-Year Gambling Prevalence	69.4% (Lifetime = 89%)
Problem Gambling Prevalence	SOGS-PY: 1.6% (3-4); 0.7% (5+); 2.3% combined SOGS-L: 3.6% (3-4); 1.9% (5+); 5.5% combined DSM-IV-PY: 0.7% (3-4); 0.3% (5+); 1.0% combined DSM-IV-L: 1.6% (3-4); 0.5% (5+); 2.1% combined
Standardized Problem Gambling Prevalence	1.6%
Standardization Calculations	SOGS-PY: 2.3 * .72 * 1.44 * .76 = 1.8% DSM-IV-PY: 1.0 * 1.19 * 1.44 * .76 = 1.3% Average: 1.6%
Demographic Correlates of PG	Hispanics; disabled; unemployed
Game Correlates of PG	EGMs; casinos; wagering privately
Comments	6% of the interviews (n=157) were conducted in Spanish; Lifetime problem gamblers significantly more likely to be male and have military experience.
Reference URL	http://hdl.handle.net/1880/48467

Location	CALIFORNIA
Year Study Conducted	1990
Age	18+
Sources	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241
Sample Size	1250
Sampling Strategy	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households.
Survey Description	
Administration Method	telephone interview
Response Rate	Refusal rate = 27%
Weighting	No
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-L
Gambling Availability	EGM availability unavailable
Past-Year Gambling Prevalence	(Lifetime = 89%)
Problem Gambling Prevalence	2.9% (3-4); 1.2% (5+); 4.1% combined
Standardized Problem Gambling Prevalence	2.1%
Standardization Calculations	4.1 * .72 * .60 * 1.59 * .74 = 2.1%
Demographic Correlates of PG	male; non-White; less education
Game Correlates of PG	larger number of games; cards; horse and dog races; games of skill; dice games; sports betting
Comments	
Reference URL	http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1615000

Location	CALIFORNIA
Year Study Conducted	2005-2006
Age	18+
Sources	Volberg, R.A., Nysse-Carris, K.L., & Gerstein, D.R. (2006). 2006 California Problem Gambling Prevalence Survey. Submitted to California Department of Alcohol and Drug Programs Office of Problem and Pathological Gambling.
Sample Size	7121
Sampling Strategy	Random-digit-dialing; English or Spanish; interpreters used to interview eligible respondents who were unable to complete the interview in these two languages; strenuous efforts made to recruit a fully representative sample of California residents into the survey, including several mailings of advance and refusal conversion letters.
Survey Description	"Your household has been selected at random to be part of the California Gambling and Health Study" (verbal consent script). Complete script available in report Appendices (pp. 62-63)
Administration Method	telephone interview
Response Rate	47.2%
Weighting	Yes - weighted to adjust for differences in household size and to reflect the known demographic characteristics of the population. Details in Table 2: Demographics of Achieved and Weighted Samples (p. 27).
Threshold for PG Questions	ever gambled in lifetime
Assessment Instrument	DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	50,599 EGMs in 2004. Population in 2005 was 36,132,147. People per EGM = 714.
Past-Year Gambling Prevalence	57.6%
Problem Gambling Prevalence	DSM-IV-PY: 0.9% (3-4); 0.4% (5+); 1.3% combined DSM-IV-L: 2.2% (3-4); 1.5% (5+); 3.7% combined
Standardized Problem Gambling Prevalence	1.7%
Standardization Calculations	1.3 * 1.19 * 1.44 * .76 = 1.7%
Demographic Correlates of PG	males; young adults; African Americans and individuals belonging to racial and ethnic groups classified as 'other'; disabled; unemployed
Game Correlates of PG	Internet gambling; card room gambling
Comments	Although participation by Asian and Hispanic respondents was low, the overall size of the study means that the survey includes the largest samples of Hispanics (N=1,569) and Asians (N=504) ever interviewed for a problem gambling prevalence survey in the United States.

| Reference URL | http://hdl.handle.net/1880/49227 |

Location	COLORADO
Year Study Conducted	1997
Age	18+
Sources	Volberg, R.A. (1997). Gambling and Problem Gambling in Colorado. Report to the Colorado Department of Revenue.
Sample Size	1810
Sampling Strategy	"Random selection of households and random selection of respondents within households; After completing approximately 900 interviews, began screening for male respondents in eligible households in order to obtain adequate representation of men in the sample. Once the required 900 men was reached, screening efforts were stopped; Colorado sample is representative of the population in terms of gender, age and residence."
Survey Description	"survey of people in your community for the State of Colorado concerning the gambling practices of Colorado Citizens"
Administration Method	telephone interview
Response Rate	44%
Weighting	"No ('After checking the impact of weighting the sample by ethnicity on key variables, including the prevalence of problem and pathological gambling, and given the relatively small difference of three percentage points between sample and census data, we elected not to apply weights to the Colorado sample.')"
Threshold for PG Questions	had ever gambled
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR-PY)
Gambling Availability	16,266 EGMs in 1999. Unknown number in 1997.
Past-Year Gambling Prevalence	81%
Problem Gambling Prevalence	SOGS-PY: 1.8% (3-4); 0.7% (5+); 2.5% combined SOGS-L: 4.4% (3-4); 1.8% (5+); 6.2% combined DSM-IV-PY: 1.7% (3-4); 0.5% (5+); 2.2% combined
Standardized Problem Gambling Prevalence	2.4%
Standardization Calculations	SOGS-PY: 2.5 * .72 * 1.44 * .76 = 2.0% DSM-IV-PY: 2.2 * 1.19 * 1.44 * .76 = 2.9% Average = 2.4%
Demographic Correlates of PG	Lifetime: male, under the age of 30; never married. Current: under the age of 30; less likely to have graduated from high school
Game Correlates of PG	Bingo; pulltabs; casinos; lottery games
Comments	
Reference URL	http://hdl.handle.net/10176/co:5022

Location	CONNECTICUT
Year Study Conducted	1977
Age	18+
Sources	Abrahamson, M. & Wright, J.N. (1977). Gambling in Connecticut. Storrs, CT: Connecticut State Commission on Special Revenue.
Sample Size	568
Sampling Strategy	Multi-stage probability sample; 169 towns in Connecticut were stratified into two categories according to whether or not they were part of a standard metropolitan area (as defined by the Census Bureau); total of 15 towns randomly selected corresponding with their share of the State's population; sections of towns randomly selected using a topographical grid and enumeration map; within each town 50 homes (or dwelling units) were selected and numbered 1 to 50 in each town; interviewer sought to interview males in all even numbered houses and females in all odd numbered houses; The demographic characteristics of the sample and those of the entire State are, in general, highly congruent.
Survey Description	how people in Connecticut bet money.
Administration Method	residential face-to-face interview
Response Rate	
Weighting	no
Threshold for PG Questions	No threshold
Assessment Instrument	3-Questions Related to Gambling Debts & Excessive Gambling: (1) At times I have bet so much that I had to put off buying clothes; (2) I have never had to borrow money because of bets I have made; (3) People close to me sometimes criticize the amount of money that I bet. Agreement with statement (1) and (3), and disagreement with statement (2) can all be viewed as possibly indicative of excessive gambling.
Gambling Availability	No EGMs in 1977.
Past-Year Gambling Prevalence	Figures only listed for 23 gambling formats. Most frequently engaged in was lottery -- "About one in five adults purchase a lottery ticket at least once a week, and nearly half participate monthly or more."
Problem Gambling Prevalence	10 persons out of 545 answered all three questions in a problem-suggestive manner. This implies that about 1.8% of the State's adults may potentially be compulsive gamblers.
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	young; separated or divorced; unskilled occupations

Game Correlates of PG	jai-alai, off-track betting, dog racing
Comments	

Location	CONNECTICUT
Year Study Conducted	1986
Age	18+
Sources	Laventhol & Horwath, David Cwi & Associates, & Survey Research Associates, Inc. (1986). The Effects of Legalized Gambling on the Citizens of the State of Connecticut. Newington: State of Connecticut Division of Special Revenue.
Sample Size	1224
Sampling Strategy	Randomly selected listed telephone numbers
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	age, gender
Threshold for PG Questions	any past-year gambling
Assessment Instrument	DSM-III-L (DIS-III)
Gambling Availability	State lottery, jai alai, greyhound racing, off-track betting on horse races. No EGMs in 1986.
Past-Year Gambling Prevalence	74%
Problem Gambling Prevalence	0.34% (endorsed first and two of remaining 3 questions)
Standardized Problem Gambling Prevalence	0.6%
Standardization Calculations	(0.34 * 2.6 * .60 * 1.44 * .76 = 0.6%)
Demographic Correlates of PG	None reported (only 4 respondents classified as pathological gamblers)
Game Correlates of PG	pari-mutuel bettors (jai alai, greyhound, horses at track, off-track betting or teletrack)
Comments	Results very tentative because of the unknown weighting factor that should be applied to the DIS-III and the fact that DIS only has 4 questions, whereas the DSM-III has 8 criteria. This study is not included in the tables or the analysis.

Location	CONNECTICUT
Year Study Conducted	1991
Age	18+
Sources	Christiansen / Cummings Associates. (1992). Legal Gambling in Connecticut: Assessment of Current Status and Options for the Future. Report to the Connecticut Division of Special Revenue. Details available in Appendix C. and Section 2.6.3 of Problem Gambling in Connecticut which is part of the main report.
Sample Size	1000
Sampling Strategy	Random digit dialing proportionate to the number of residents in each of the eight counties in the State; random selection within household.
Survey Description	legalized gambling in the state
Administration Method	telephone interview
Response Rate	
Weighting	no
Threshold for PG Questions	
Assessment Instrument	SOGS-L
Gambling Availability	Foxwoods Casino opens 1992
Past-Year Gambling Prevalence	86%
Problem Gambling Prevalence	3.6% (3-4); 2.7% (5+); 6.3% combined
Standardized Problem Gambling Prevalence	3.2%
Standardization Calculations	6.3 * .72 *.60 * 1.59 * .74 = 3.2%
Demographic Correlates of PG	male; under age 35 years; unmarried; household income less than $25,000.
Game Correlates of PG	Off-track betting; casinos; pulltabs; football pools; bet with a bookie on a sports event.
Comments	
Reference URL	http://hdl.handle.net/1880/48479

Location	CONNECTICUT
Year Study Conducted	1996
Age	18+
Sources	WEFA Group. (1997, June). A Study Concerning the Effects of Legalized Gambling on the Citizens of the State of Connecticut. Prepared for: State of Connecticut Department of Revenue Services, Division of Special Revenue.
Sample Size	993
Sampling Strategy	Stratified, single-stage random digit dialing; random selection within household
Survey Description	regarding leisure activities and hobbies
Administration Method	telephone interview
Response Rate	
Weighting	gender, age, education, race
Threshold for PG Questions	gambled at least once in life
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	Foxwoods Casino opens 1992
Past-Year Gambling Prevalence	88%
Problem Gambling Prevalence	SOGS-PY: 2.2% (3-4); 0.6% (5+); 2.8% combined SOGS-L: 4.2% (3-4); 1.2% (5+); 5.4% combined
Standardized Problem Gambling Prevalence	2.9%
Standardization Calculations	2.8 * .72 * 1.44 = 2.9%
Demographic Correlates of PG	Reported that data is not statistically significant. Demographic information available (Section 5-13).
Game Correlates of PG	Reported that data is not statistically significant. Gambling preferences information available (Section 5-14).
Comments	Prevalence study was one component of an overall study on socio-economic impacts of gambling.
Reference URL	http://www.ct.gov/dosr/lib/dosr/gamblingstudy_1997.pdf
Reference URL	http://cslib.cdmhost.com/cdm/ref/collection/p128501coll2/id/70955

Location	CONNECTICUT
Year Study Conducted	2008
Age	18+
Sources	Spectrum Gaming Group. (2009). Gambling in Connecticut: Analyzing the Economic and Social Impacts. Linwood, NJ: Author.
Sample Size	3,099 (2,298 Telephone + 801 Online Panel)
Sampling Strategy	Random digit dialing; random selection within household; an additional 801 people participated through a separate online-panel survey; English and Spanish versions available.
Survey Description	"survey for the State of Connecticut about people's attitudes toward gambling"
Administration Method	telephone interview; self-administered online (Online Panel)
Response Rate	Telephone: 35.6% (calculated using data from report using response rates calculations recommended by Williams & Volberg, 2011). Online Panel = 6%
Weighting	Gender, education, age, ethnicity
Threshold for PG Questions	
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	13,697 s in 2008 clustered in two tribal casinos. Population in 2008 was 3,502,309. People per EGM = 256.
Past-Year Gambling Prevalence	70% (Past year participation in illegal gambling = 33.2%)
Problem Gambling Prevalence	Telephone SOGS-PY: 0.9% (3-4); 0.7% (5+); 1.6% combined SOGS-L: 2.2% (3-4); 1.5% (5+); 3.7% combined DSM-IV-PY: 0.8% (3-4); 0.6% (5+); 1.4% combined DSM-IV-L: 2.1% (3-4); 1.2% (5+); 3.3% combined Online Panel SOGS-PY: 3.5% (3-4); 3.8% (5+); 7.3% combined SOGS-L: 4.5% (3-4); 4.5% (5+); 9.0% combined DSM-IV-PY: 3.4% (3-4); 2.1% (5+); 5.5% combined DSM-IV-L: 5.0% (3-4); 2.9% (5+); 7.9% combined
Standardized Problem Gambling Prevalence	1.1%
Standardization Calculations	Telephone SOGS-PY: 1.6 * .72 * 1.44 * .53 = 0.9% Telephone DSM-IV-PY: 1.4 * 1.19 * 1.44 * .53 = 1.3% Average = 1.1%
Demographic Correlates of PG	male; 18-34 years old; some college education; urbanized counties of Hartford and New Haven
Game Correlates of PG	
Comments	Study is a socioeconomic impact investigation that included a prevalence study of gambling and problem gambling.

Reference URL	http://www.ct.gov/dosr/lib/dosr/june_24_2009_spectrum_final_final_repo
Reference URL	http://cslib.cdmhost.com/cdm/ref/collection/p128501coll2/id/132536

Location	DELAWARE
Year Study Conducted	1998
Age	18+
Sources	Mateja, W., Wilson, R., & Ableman, B. (1998). A Survey of Gambling in Delaware. Newark, DE: Health Services Policy Research Group, University of Delaware.
Sample Size	3395
Sampling Strategy	Random
Survey Description	
Administration Method	telephone interview
Response Rate	61%
Weighting	age, race, gender
Threshold for PG Questions	gambling at a frequency of once per month or more in the past 18 months
Assessment Instrument	SOGS-Past 18 Months
Gambling Availability	2,498 EGMs in 1999. Population in 1998 was 744066. People per EGM = 298.
Past-Year Gambling Prevalence	62% (past 18-months)
Problem Gambling Prevalence	2.17% (3-4); 0.68% (5+); 2.85% combined
Standardized Problem Gambling Prevalence	2.2%
Standardization Calculations	2.85 * .72 * 1.44 *.76 = 2.2%
Demographic Correlates of PG	African-American; male; divorced; single; employed less than full time; household with an income of under $40,000.
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/49235

Location	DELAWARE
Year Study Conducted	1999-2000
Age	18+
Sources	Health Services Policy Research Group, School of Urban Affairs and Public Policy, University of Delaware (2002). The Costs and Consequences of Gambling in the State of Delaware. Prepared for the State of Delaware, Health and Social Services, Division of Substance Abuse and Mental Health.
Sample Size	2638
Sampling Strategy	
Survey Description	
Administration Method	telephone interview?
Response Rate	
Weighting	age, gender
Threshold for PG Questions	
Assessment Instrument	DSM-IV -L (NODS)
Gambling Availability	2,498 EGMs in 1999. Population in 1999 was 753,538. People per EGM = 302.
Past-Year Gambling Prevalence	72.3%
Problem Gambling Prevalence	0.4% (3-4); 0.3% (5+); 0.7% combined
Standardized Problem Gambling Prevalence	0.6%
Standardization Calculations	0.7 * 1.19 * .6 * 1.59 * .76 = 0.60%
Demographic Correlates of PG	males; ages 18 – 24; female between the ages of 45 and 64
Game Correlates of PG	
Comments	Purpose of this report was to study the social costs of gambling; The prevalence of problem gambling in Delaware is estimated from two recent surveys, both conducted by the University of Delaware (High Risk Geographic Area Survey, University of Delaware, 1999; Young Adult Survey, University of Delaware, 2000). The combined surveys are referred to as the Delaware Gambling Survey. Note: The High Risk Area Study included individuals aged 18 years and over who resided in ZIP- Code areas that were at high risk for alcohol and drug problems.
Reference URL	http://hdl.handle.net/1880/49234

Location	FLORIDA
Year Study Conducted	2001
Age	18+
Sources	Shapira, N. A., Ferguson, M. A., Frost-Pineda, K., & Gold, M. S. (2002). Gambling and Problem Gambling Prevalence Among Adults in Florida . A Report to the Florida Council on Compulsive Gambling, Inc.
Sample Size	1504
Sampling Strategy	Random digit dialing; 6 contact attempts; random selection within household
Survey Description	gambling practices among Florida residents
Administration Method	telephone interview
Response Rate	32.5% (calculated from response rate criteria recommended by Williams & Volberg, 2011).
Weighting	age, gender
Threshold for PG Questions	Participated in at least one form of gambling in lifetime and spending more than $12 on gambling in some year.
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	11,549 EGMs in 2002. Population was 16,396,515 in 2001. People per EGM = 1420.
Past-Year Gambling Prevalence	71%
Problem Gambling Prevalence	SOGS-PY: 1.4% (3-4); 0.6% (5+); 2.0% combined SOGS-L: 2.6% (3-4); 1.0% (5+); 3.6% combined DSM-IV-PY: 0.4% (3-4); 0.7% (5+); 1.1% combined DSM-IV-L: 0.6% (3-4); 1.0% (5+); 1.6% combined
Standardized Problem Gambling Prevalence	1.05%
Standardization Calculations	SOGS-PY: 2.0 * .72 * 1.44 * .53 = 1.1% DSM-IV-PY: 1.1 * 1.19 * 1.44 * .53 =1.0% Average = 1.05%
Demographic Correlates of PG	males; ages 18-29 and ages 50-65; Hispanics; African-Americans; never married; high school degree or less; females ages 50-54; tobacco use; alcohol use and abuse; depression.
Game Correlates of PG	Policy/numbers/Bolita; cock or dog fighting; games of skill for money; EGMs
Comments	
Reference URL	http://hdl.handle.net/1880/49230

Location	FLORIDA
Year Study Conducted	2011
Age	18+
Sources	Spectrum Gaming Group. (2013). Gambling Impact Study. Prepared for the State of Florida Legislature October 28, 2013. Rotunda, R. J., & Schell, T. L. (2012). Gambling and problem gambling prevalence among adults in Florida: A 2011 replication. University of West Florida, January 2012.
Sample Size	2500
Sampling Strategy	Random digit dialing; sampling of numbers was statified in two subsamples of predetermined size: mobile phones and landline phone numbers; respondent quotas used based on gender and geographic region for the landline sample; households screened for eligible participants and language preference; calls made in English, but 2.5% of all interviews conducted in Spanish and 0.3% in Creole; most recent birthday method used if multiple individuals in household were available; procedure used to recruit 2500 individuals, 501 in the mobile phone subsample and 1999 in the landline phone subsample; to improve quality of mobile phone sample, incentive payments ($10) to mobile phone respondents began half-way through the study; landline participants were never afforded incentives.
Survey Description	gambling practices of Florida residents
Administration Method	telephone interview
Response Rate	"The overall response rate among those households estimated to contain an eligible individual was 7.4% (i.e., American Association of Public Opinion Research, Response Rate 3)."
Weighting	weighted to more accurately represent those that rely primarily on mobile phones; also applied prestratification weights for gender, age and race.
Threshold for PG Questions	Participated in at least one form of gambling in lifetime and spending more than $25 on gambling in any year (SOGS); Participated in at least one form of gambling in lifetime (NODS).
Assessment Instrument	SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	
Past-Year Gambling Prevalence	54.4%
Problem Gambling Prevalence	SOGS-L: 2.7% (3-4); 2.2 (5+); 4.9% combined DSM-IV-PY: 0.7% (3-4); 0.5% (5+); 1.2% combined DSM-IV-L: 1.4% (3-4); 0.6% (5+); 2.1% combined
Standardized Problem Gambling Prevalence	

Standardization Calculations	
Demographic Correlates of PG	males; younger age; rent their home; living in south Flordia; depression; have sought mental health treatment; on the extremes of income distribution
Game Correlates of PG	poker; cards; slots; poker machines (not at a casino); use bookies.
Comments	
Reference URL	http://www.leg.state.fl.us/GamingStudy/
Reference URL	

Location	GEORGIA
Year Study Conducted	1994
Age	18+
Sources	Volberg, R.A. (1995). Gambling and Problem Gambling in Georgia. Report to the Georgia Department of Human Resources. With contribution by J. Boles. Volberg, R.A., Reitzes, D.C., & Boles, J. (1997). Exploring the links between gambling, problem gambling and self-esteem. Deviant Behavior, 18, 321-342.
Sample Size	1550
Sampling Strategy	Stratified to proportionally represent county populations, based on the 1990 census. Random sampling of households and random selection of respondents within households; Up to 12 attempts were made to contact each number, and a minimum of eight callbacks were made to complete an interview with each respondent; When compared with information from the 1990 census, the sample was found to be representative of the adult population of Georgia in terms of gender, race, age, marital status, and income. However, individuals with less than a high school education were significantly underrepresented in the sample.
Survey Description	"gambling practices of the citizens of Georgia"
Administration Method	telephone interview
Response Rate	73%
Weighting	No - analysis of the prevalence rates after weighting the sample by education did not produce significant changes. The data presented are based on the unweighted sample.
Threshold for PG Questions	Any gambling
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	No EGMs in Georgia in 1999.
Past-Year Gambling Prevalence	74%
Problem Gambling Prevalence	SOGS-PY: 1.5% (3-4); 0.8% (5+); 2.3% combined SOGS-L: 2.8%; (3-4); 1.6% (5+); 4.4% combined
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	2.3 * .72 * 1.59 * .74 = 1.9%
Demographic Correlates of PG	non-White, male, young, and single; no differences in education or income; lower self-esteem
Game Correlates of PG	

Comments	
Reference URL	http://hdl.handle.net/1880/48482

Location	GEORGIA
Year Study Conducted	2000
Age	18+
Sources	Emshoff, J.G., Broomfield, K., & Arganza, G. (2000). The Prevalence and Nature of Gambling in Georgia: A Population Survey. Report to the Georgia Department of Human Resources. Atlanta, Georgia State University.
	Emshoff, J., Anthony, E., Lippy, C., Valentine, L. (2007). Gambling Survey for the Georgia Department of Human Resources. Atlanta, GA: Georgia State University. September 2007.
Sample Size	
Sampling Strategy	Perhaps the same as done in 2007 by the same group.
Survey Description	
Administration Method	telephone interview
Response Rate	42%
Weighting	
Threshold for PG Questions	
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	No EGMs in 1999. 130 EGMs in 2002.
Past-Year Gambling Prevalence	69% lifetime
Problem Gambling Prevalence	SOGS-PY: 2.4% (3+) SOGS-L: 5.0% (3+)
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	2.4 * .72 * 2.18 * .51 = 1.9%
Demographic Correlates of PG	Male; under 35; nonwhite; income < $35K
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/48484

Location	GEORGIA
Year Study Conducted	2007
Age	18+
Sources	Emshoff, J., Anthony, E., Lippy, C., Valentine, L. (2007). Gambling Survey for the Georgia Department of Human Resources. Atlanta, GA: Georgia State University. September 2007.
Sample Size	1602
Sampling Strategy	random list of telephone numbers; stratified by gender, ethnicity, education, and income; random selection within household; up to five attempts were made to contact each number before the number was dropped from the list of available numbers; eligibility criteria included English-speaking, and a working household phone
Survey Description	
Administration Method	telephone interview
Response Rate	22%
Weighting	
Threshold for PG Questions	Not indicated; report indicates "If participants stated that they had ever wagered money or anything of value on these activities, they were asked the frequency with which they engaged in the activity."
Assessment Instrument	DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	130 EGMs in 2006. Population in 2007 was 9,544,750. People per EGM = 73,421.
Past-Year Gambling Prevalence	85%
Problem Gambling Prevalence	DSM-IV-PY: 1.1% (3-4); 0.4% (5+); 1.5% combined DSM-IV-L: 2.6% (3-4); 1.4% (5+); 4.0% combined
Standardized Problem Gambling Prevalence	1.4%
Standardization Calculations	1.5 * 1.19 * 1.44 * .53 = 1.4%
Demographic Correlates of PG	males, non-white, under age 30; less than a high school education; earn less than $25,000 a year; multiple regression revealed that while the above characteristics were significantly associated with rates of pathological gambling, their relationship with the single characteristic of education level appears to be driving the effects.
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/48484

Location	INDIANA
Year Study Conducted	1990
Age	18+
Sources	Laventhol & Horwath, Guida, F.V., David Cwi & Associates, & Public Opinion Laboratory. (1990, November). A Study of Problem and Pathological Gambling among Citizens of Indiana associated with Participation in the Indiana State Lottery. Indianapolis, IN: Laventhol & Horwath.
Sample Size	1015
Sampling Strategy	Random digit dialing, with age and sex quotas by county
Survey Description	"We are conducting a research project for the State of Indiana to find out how people feel about the lottery."
Administration Method	telephone interview
Response Rate	44.4% (calculated from data contained in report)
Weighting	No -- "It was not necessary to weight the responses since the sampling method assures a representative sample of [residents] over 18."
Threshold for PG Questions	Participation in Indian Lottery gambling in past 12 months (i.e., purchased at least one ticket for the Instant, Lotto Cash or Daily Pick Games).
Assessment Instrument	DSM-IV-L (using 9 of the criteria from the forthcoming DSM-IV). However, all of the questions were specific to lottery gambling (not gambling generally).
Gambling Availability	Indiana lottery introduced Oct 1989. No EGMs in 1990.
Past-Year Gambling Prevalence	60.2% (participated in Indiana Lottery in past 12 months); 34% played lottery in another state in past 12 months.
Problem Gambling Prevalence	0.8% (2+)
Standardized Problem Gambling Prevalence	
Standardization Calculations	see comments
Demographic Correlates of PG	males; age 18 to 34
Game Correlates of PG	N/A -- Only lottery-related questions asked.
Comments	This study was described by Lesieur (p. 275; 1999) as being conducted "to find out how many adult Indiana residents were pathological lottery players."; "The survey did not count individuals who had gambling problems as a result of sports, casinos, horses, or other forms of gambling unless they also had an independent problem with lottery play." This study is not reported in the tables or included in the analyses.
Reference URL	http://hdl.handle.net/1880/48499

Location	INDIANA
Year Study Conducted	1998
Age	
Sources	Westphal, J.R., Rush, J.A., & Stevens, L. (1998). Problem and Pathological Gambling Behaviors within Specific Populations in the State of Indiana. Shreveport, LA: Gambling Studies Unit, Department of Psychiatry, Louisiana State University Medical Center.
Sample Size	2,546 (Adult sample)
Sampling Strategy	
Survey Description	
Administration Method	
Response Rate	
Weighting	
Threshold for PG Questions	
Assessment Instrument	SOGS-PY
Gambling Availability	14,749 EGMs in 1999. Population in 1998 was 5,907,617. People per EGM = 401.
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	5.3% (1-4); 0.8% (5+); 6.1% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	0.8 * 1.49 = 1.2%
Demographic Correlates of PG	N/A - rates of pathological gambling too low to determine rates among adult members of minority groups or among different types of gamblers
Game Correlates of PG	N/A - rates of pathological gambling too low to determine rates among adult members of minority groups or among different types of gamblers
Comments	

Location	INDIANA
Year Study Conducted	2005
Age	21-59
Sources	Rodak, A. & Wolf, J. (2005). Gaming and Betting by Adults, Age 21-59, in Indiana – 2005. Indianapolis, IN: Indiana University - Purdue University Survey Research Center.
Sample Size	751
Sampling Strategy	Random selection within household; 10 contact attempts; the respondents that resulted from this approach were found to be representative of the population of Indiana, age 21-59 years old, based on recent Census findings for Indiana.
Survey Description	"...to discuss some important issues regarding older adults in Indiana. State officials have asked us to help determine the attitudes and behavior of people regarding gaming and betting of all types."
Administration Method	telephone interview
Response Rate	33.1%
Weighting	
Threshold for PG Questions	gambled in the past year
Assessment Instrument	DSM-IV
Gambling Availability	17,772 EGMs in 2004. Population in 2005 was 6,271,973. People per EGM = 353.
Past-Year Gambling Prevalence	65% (90% Lifetime)
Problem Gambling Prevalence	N/A - So few respondents responded positively to any of the symptoms it was determined that this approach was not an effective measure of problem gambling.
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	N/A
Game Correlates of PG	N/A
Comments	There were separate but related reports for "60 Year Olds and Older" and "12-20 Year Olds".
Reference URL	http://hdl.handle.net/1880/49236

Location	IOWA
Year Study Conducted	1989
Age	18+
Sources	Volberg, R A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.
Sample Size	750
Sampling Strategy	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.
Survey Description	"a study of the gambling practices of the citizens of Iowa"
Administration Method	telephone interview
Response Rate	(Refusal rate = 24%)
Weighting	No
Threshold for PG Questions	any lifetime gambling
Assessment Instrument	SOGS-L
Gambling Availability	Lottery introduced in 1985; riverboat gambling in 1989
Past-Year Gambling Prevalence	(Lifetime = 84%)
Problem Gambling Prevalence	1.6% (3-4); 0.1% (5+); 1.7% combined
Standardized Problem Gambling Prevalence	0.9%
Standardization Calculations	1.7 * .72 * .60 * 1.59 * .74 = 0.9%
Demographic Correlates of PG	male; lower education; unmarried
Game Correlates of PG	wagering on cards, horse and dog races, games of skill, dice games, and sports
Comments	
Reference URL	http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1615000

Location	IOWA
Year Study Conducted	1995
Age	18+
Sources	Volberg, R.A. (1995). Gambling and Problem Gambling in Iowa: A Replication Survey. Des Moines, IA: Iowa Department of Human Services.
Sample Size	1500
Sampling Strategy	Sample stratified to proportionally represent county populations, males and young adults in Iowa on the basis of 1990 census figures; random selection of households and random selection of respondents within households used for first two-thirds of interviews; after approximately 1,000 interviews, interviewers began screening potential respondents to identify males between the ages of 18 and 29; up to five attempts made to contact each number; respondents with lower levels of education and income are somewhat under-represented.
Survey Description	study of the gambling practices of the citizens of Iowa
Administration Method	telephone interview
Response Rate	57%
Weighting	No - Note: To determine if education or income discrepancies contributed significantly to estimates of the prevalence of problem gambling in Iowa, prevalence rates were analyzed after weighting the sample by education and then by income. These analyses increased prevalence BUT were not used in order to maintain comparability with results from the 1989 survey.
Threshold for PG Questions	
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	Lottery introduced in 1985; riverboat gambling in 1989
Past-Year Gambling Prevalence	72% (Lifetime = 88%)
Problem Gambling Prevalence	SOGS-PY: 2.3% (3-4); 1.0% (5+); 3.3% combined SOGS-L: 3.5% (3-4); 1.9% (5+); 5.4% combined
Standardized Problem Gambling Prevalence	2.8%
Standardization Calculations	3.3 * .72 * 1.59 * .74 = 2.8%
Demographic Correlates of PG	male; under the age of 30; non-Caucasian; unmarried
Game Correlates of PG	continuous types of gambling
Comments	Replication of 1989 study.
Reference URL	http://hdl.handle.net/1880/49226

Location	IOWA
Year Study Conducted	2006-2008
Age	18+
Sources	Black, D. W., McCormick, B., Losch, M. E., Shaw, M., Lutz, G., & Allen, J. (2012). Prevalence of problem gambling in Iowa: Revisiting Shaffer's adaptation hypothesis. Annals of Clinical Psychiatry, 24, 279-284.
Sample Size	356
Sampling Strategy	Telephone-based screen was conducted of randomly selected Iowa households with at least 1 resident age 18 or older between July 2006 and January 2008. Computer Assisted Telephone Interviewing (CATI) system used to collect the data. To match the demographic characteristics of family study probands, participants were screened for persons who fell within specific demographic groupings by household location, age, sex, and education level. Exclusion criteria included ever having been diagnosed with psychosis or a neurologic disorder and/or having been adopted. Many potential subjects in the initial 2,827 calls were excluded for not meeting study targets or refused to participate, as is common in research recruitment.
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	No
Threshold for PG Questions	
Assessment Instrument	SOGS-L
Gambling Availability	Lottery introduced in 1985; riverboat gambling in 1989
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	SOGS-L: 2.2% (3-4); 1.4% (5+); 3.6% combined
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	younger age; minority group status; lower income levels
Game Correlates of PG	strongest associations with disordered gambling included card games, bingo, outcomes of sports events with acquaintances, and pull-tabs.

Comments	Data were collected while recruiting controls for an unrelated family study of PG; study not designed as a survey to be generalized to the state population; survey not desgined to recruit a representative sample of adult Iowans.
Reference URL	http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3509738/

Location	IOWA
Year Study Conducted	2011 (Feb-May)
Age	18+
Sources	Gonnerman, M.E. & Lutz, G.M. (2011). Gambling Attitudes and Behaviors: A 2011 Survey of Adult Iowans. Cedar Falls, IA: Center for Social and Behavioral Research, University of Northern Iowa. September 2011.
Sample Size	1700
Sampling Strategy	Invitation letters mailed out to 10,000 residential addresses. Adult with most recent birthday asked to complete the questionnaire online. Telephone follow-up calls made (when a telephone number was available) to household that did not respond.
Survey Description	"attitudes and experiences of Iowans regarding gambling"
Administration Method	470 online completions; 1,230 (72.4%) telephone completions
Response Rate	17%
Weighting	Household size, age, gender
Threshold for PG Questions	none
Assessment Instrument	CPGI; DSM-IV-PY & DSM-IV-L (NODS); self-report of problems
Gambling Availability	15,547 EGMs in 2010. Population in 2011 was 3,062,309. People per EGM = 197.
Past-Year Gambling Prevalence	69%
Problem Gambling Prevalence	CPGI: 2.6% (3-7); 0.6% (8+); 3.2% combined DSM-IV-PY: 0.2% (3-4); 0.3% (5+); 0.5% combined DSM-IV-L: 0.6% (3-4); 0.6% (5+); 1.2% combined Self-Report-PY: 0.5% Self-Report-L: 2%
Standardized Problem Gambling Prevalence	0.94%
Standardization Calculations	CPGI: 3.2 * .58 * 1.44 * .53 = 1.42% DSM-IV-PY: 0.5 * 1.19 * 1.44 *.53 = .45% Average = 0.94%
Demographic Correlates of PG	Males; age 18-34; high interest is several other leisure/recreational activities; tobacco and alcohol use and dependence
Game Correlates of PG	EGMs; casino table games; keno; Internet gambling; horse racing; bingo; games of personal skill
Comments	
Reference URL	http://hdl.handle.net/1880/49231

Location	IOWA
Year Study Conducted	2013
Age	18+
Sources	Lutz. G. M. & Park, K. (2014). Gambling Attitudes and Behaviors: A 2013 Survey of Adult Iowans. Cedar Falls, IA: Center for Social and Behavioral Research, University of Northern Iowa.
Sample Size	1826
Sampling Strategy	Dual-frame random digit dial (DFRDD) sampling methodology was used whereby both landline and cellular telephone numbers were included in the sample (564 landlines and 1,262 cellphones).
Survey Description	"...conducting a study about gambling in Iowa."
Administration Method	telephone interview
Response Rate	30% (Response Rate); 72% (Cooperation Rate)
Weighting	age, gender, ethnicity, race, education, place of residence, telephone status.
Threshold for PG Questions	
Assessment Instrument	CPGI; DSM-IV-PY & DSM-IV-L (NODS); self-report of problems
Gambling Availability	
Past-Year Gambling Prevalence	77.8%
Problem Gambling Prevalence	CPGI: 3.8% (3-7); 0.6% (8+); 4.4% combined DSM-IV-PY: 0.6% (3-4); 0.4% (5+); 1.0% combined DSM-IV-L: 1.5% (3-4); 0.9% (5+); 2.4% combined; Self-Report-PY: 0.8% Self-Report-L: 2.6%
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	Younger age groups; lower income individuals (none statistically significant)
Game Correlates of PG	
Comments	
Reference URL	https://idph.iowa.gov/Portals/1/Files/IGTP/2013_adult_iowans_survey.pd

Location	KANSAS
Year Study Conducted	2012
Age	18+
Sources	Kansas Department for Aging and Disability Services. (2012, November 23). Kansas statewide problem gambling study: Topline report. Topeka, KS: Author.
Sample Size	1600
Sampling Strategy	The study was conducted wtih randomly selected landline and cell phone numbers located across the state, divided into four zones -- three of which, generally speaking, constituted the northeast, southcentral and southwest regions, while the fourth zone was the rest of the state (400 specified interviews for each region).
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	gambled in the past 30-days ("recent gamblers")
Assessment Instrument	
Gambling Availability	
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	
Comments	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 the SW, where a floor of 133 Hispanic/Latino respondents was specified, to ensure accurate representation from this group in this zone.
Reference URL	http://media.khi.org/news/documents/2013/01/09/Gambling_Survey.pdf

Location	KANSAS
Year Study Conducted	2017
Age	18+
Sources	Learning Tree Institute at Greenbush Research and Evaluation Department. (2017). 2017 Kansas gambling survey: Results and Analysis. Topeka: KS: Kansas Department for Aging and Disability Services.
Sample Size	1,755
Sampling Strategy	Stratified random sample of households throughout the State of Kansas in September, 2017. This survey is a follow-up to a statewide survey conducted in 2012 to assess gambling prevalence, type, and frequency, myths, perception, and public opinion about gambling, and awareness of problem gambling treatment.
Survey Description	
Administration Method	
Response Rate	
Weighting	
Threshold for PG Questions	
Assessment Instrument	
Gambling Availability	
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	
Comments	
Reference URL	http://www.kansaspreventioncollaborative.org/Document/Assets/2017Ka

Location	KENTUCKY
Year Study Conducted	2003
Age	18+
Sources	Kentucky Legislative Research Commission. (2003). Compulsive Gambling in Kentucky. Frankfort, KY: Author.
Sample Size	1253
Sampling Strategy	Random digit dialing; random selection within household; to determine if the sample was representative of the general adult population in Kentucky, the demographics of the survey respondents were compared with data from the 2000 Census
Survey Description	purpose of this study is to help evaluate gambling behaviors
Administration Method	telephone interview
Response Rate	51.6%
Weighting	gender, age
Threshold for PG Questions	gambled in the past year
Assessment Instrument	DSM-IV-PY
Gambling Availability	No EGMs in Kentucky in 2002.
Past-Year Gambling Prevalence	55.1%
Problem Gambling Prevalence	0.7% (3-4); 0.5% (5+); 1.2% combined
Standardized Problem Gambling Prevalence	1.6%
Standardization Calculations	1.2 * 1.19 * 1.44 * .76 = 1.6%
Demographic Correlates of PG	
Game Correlates of PG	(From the separate GA study included in the report) -- Table 4.2 (p. 44) lists the types of gambling GA respondents deemed to cause them the most serious problems. Casino/EGMs and horse racing/off-track betting were listed as the types of gambling most respondents stated caused serious problems.
Comments	A survey of Gamblers Anonymous (GA) respondents was conducted as part of this study.
Reference URL	http://hdl.handle.net/1880/49263

Location	KENTUCKY
Year Study Conducted	2008
Age	18+
Sources	Kentucky Council on Problem Gambling. (2009). Gambling in Kentucky: A Research Report on the Prevalence of Gambling among Kentucky Residents. Frankford, KY: Author.
Sample Size	850 (Note: Also reported as 846 within report)
Sampling Strategy	Random digit dialing; to assess the representativeness of the general adult population in Kentucky, the demographics of the survey respondents were compared with data from the 2000 Census
Survey Description	
Administration Method	telephone interview
Response Rate	43.5%
Weighting	gender, age, race
Threshold for PG Questions	
Assessment Instrument	DSM-IV-L
Gambling Availability	No EGMs in Kentucky in 2008.
Past-Year Gambling Prevalence	(Lifetime = 55.3%)
Problem Gambling Prevalence	DSM-IV-L: 1.7% (3-4); 0.3% (5+); 2.0% combined
Standardized Problem Gambling Prevalence	1.1%
Standardization Calculations	2.0 * 1.19 * 0.60 * 1.44 * .53 = 1.1%
Demographic Correlates of PG	males; 18-24 years of age; Blacks and other racial minorities; never married, divorced or separated; employed adults; individuals in residing in households with incomes of $25,000 or less
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/49228

Location	LOUISIANA
Year Study Conducted	1995
Age	18+
Sources	Louisiana Compulsive Gambling Study Committee (1996). Report to the Legislature of the State of Louisiana. Baton Rouge, LA: Author. Westphal, J. R. & Rush, J. (1996). Pathological gambling in Louisiana: An epidemiological perspective. Journal of the Louisiana State Medical Society, 148, 353-358.
Sample Size	1818
Sampling Strategy	random sample
Survey Description	"the wagering practices of the citizens here in Louisiana "
Administration Method	telephone interview
Response Rate	40%
Weighting	No – in order to maintain comparability with surveys in other states where the data have not been weighted.
Threshold for PG Questions	any lifetime gambling
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	17,038 EGMs in 1999. Unknown number in 1995.
Past-Year Gambling Prevalence	72.3%
Problem Gambling Prevalence	SOGS-PY: 3.4% (3-4); 1.4% (5+); 4.8% combined SOGS-L: 4.5% (3-4); 2.5% (5+); 7.0% combined
Standardized Problem Gambling Prevalence	3.8%
Standardization Calculations	4.8 * .72 * 2.18 * .51 = 3.8%
Demographic Correlates of PG	male, under the age of 30, non-Caucasian, unmarried, less likely to have graduated from high-school.
Game Correlates of PG	The Louisiana survey found two clusters of pathological gamblers: First, an older male population who primarily wagered on horse racing and a younger male population who primarily wagered on video poker.
Comments	Some details (e.g., prevalence measures) of the 1995 study reported in 1998 replication study.
Reference URL	http://hdl.handle.net/1880/49265

Location	LOUISIANA
Year Study Conducted	1998
Age	18+
Sources	Volberg, R. A., & Moore, W. L. (1999). Gambling and Problem Gambling in Louisiana: A Replication Study, 1995 to 1998. Report to the College of Business Administration, University of New Orleans.
Sample Size	1800
Sampling Strategy	Stratified to proportionally represent the eight parish-regions in the state as well as males and females on the basis of the most recent information from the U.S. Bureau of the Census; random selection of households; random selection of respondent within households; up to 5 callbacks.
Survey Description	gambling practices of Louisiana citizens
Administration Method	telephone interview
Response Rate	58.6% (CASRO approach)
Weighting	No -- but effects of weighting were examined and effects were small.
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR-PY)
Gambling Availability	17,038 EGMs in 1999. Population in 1998 was 4,362,758. People per EGM = 256.
Past-Year Gambling Prevalence	61.5%
Problem Gambling Prevalence	SOGS-PY: 2.3% (3-4); 1.6% (5+); 3.9% combined SOGS-L: 3.3% (3-4); 2.5% (5+); 5.8% combined DSM-IV-PY: 1.9% (3-4); 0.9% (5+); 2.8% combined
Standardized Problem Gambling Prevalence	3.6%
Standardization Calculations	SOGS-PY: 3.9 * .72 * 1.59 * .74 = 3.3% DSM-IV-PY: 2.8 * 1.19 * 1.59 * .74 = 3.9% Average = 3.6%
Demographic Correlates of PG	Age 18-24 and those aged 35-44; Black and Hispanics; never married; separated or divorced; not graduated from high school or from college.
Game Correlates of PG	horse bettors; EGMs
Comments	
Reference URL	http://hdl.handle.net/1880/49266

Location	LOUISIANA
Year Study Conducted	2002
Age	18+
Sources	Vogel, R.J., & Ardoin, P. (2002). Gambling in Louisiana: 2002 Louisiana Study of Problem Gambling. Baton Rouge, LA: Nelson Mandela School of Public Policy, Southern University.
Sample Size	1353
Sampling Strategy	Modified stratified sample was designed that ensured that at least 100 adults in each region would be randomly interviewed.
Survey Description	gambling practices of Louisiana citizens
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-L
Gambling Availability	27,584 EGMs in 2002. Population in 2002 was 4,482,646. People per EGM = 163.
Past-Year Gambling Prevalence	Lifetime participation = 67.7%
Problem Gambling Prevalence	3.0% (3-4); 1.6% (5+); 4.6% combined
Standardized Problem Gambling Prevalence	2.7%
Standardization Calculations	4.6 * .72 * .51 * 1.59 * .74 = 2.7%
Demographic Correlates of PG	
Game Correlates of PG	Density of gambling venues per capita.
Comments	
Reference URL	http://hdl.handle.net/1880/49267

Location	LOUISIANA
Year Study Conducted	2008
Age	18+
Sources	Esters, I., Biggar, R., Lacour, J., & Reyes, M. (2008). 2008 Louisiana Study on Problem Gambling. Prepared for the Louisiana Office for Addictive Disorders.
Sample Size	2400
Sampling Strategy	240 participants from each of 10 geographical regions; participants contacted randomly via telephone from a list of telephone numbers purchased for the study
Survey Description	"a random study of practices of Louisiana residents with regard to gambling"
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-L
Gambling Availability	29,149 EGMs in 2008. Population in 2008 was 4,410,796. People per EGM = 151.
Past-Year Gambling Prevalence	Table 7.13. Frequency of Participation in Various Types of Gambling – State (p. 42) provides general participation by gambling format details.
Problem Gambling Prevalence	SOGS-L: 1.7% (3-4); 1.4% (5+); 3.1% combined
Standardized Problem Gambling Prevalence	1.3%
Standardization Calculations	3.1 * .72 * .51 * 1.59 * .74 = 1.3%
Demographic Correlates of PG	
Game Correlates of PG	
Comments	Information garnered from calls to the Gambling Helpline (n = 59,250 calls) and the Louisiana Problem Gambler Helpline Fiscal Year Report (2007) was also used to supplement the report; Responses from the Louisiana Caring Communities Youth Survey, a survey of 106,356 Louisiana students in grades 6, 8, 10 and 12, were incorporated as data into the present study.
Reference URL	http://hdl.handle.net/1880/49268

Location	LOUISIANA
Year Study Conducted	2016
Age	21+
Sources	Biggar, R., Jr., Esters, I., Dick, S. J., Chen, J., Burstein, K, Bergeron, M., Cooper, R., & Zeahah, P. (2017). The impact of gambling in Louisiana: 2016 study of problem gambling. Lafayette, LA: University of Louisiana at Lafayette. Retrieved from http://picardcenter.louisiana.edu/sites/picardcenter/files/The%20Impact%20of%20Gambling%20in%20Louisiana_FINAL.pdf
Sample Size	2,402
Sampling Strategy	Contracted by the University of Louisiana at Lafayette, Reconnaissance Market Research (ReconMR) conducted telephone surveys with a stratified sample of Louisiana residents. The survey instrument included questions regarding respondent's gambling behaviors, attitudes towards gambling, and awareness of resources for problem gambling. Potential respondents were screened to include only adults, 21 years of age or older, currently residing in Louisiana. Sample stratification ensured equal geographic sampling among ten parish-defined geographical regions (n=240 per region). 65% of interviews were to be completed using wireless telephone sampling frame and 35% using landline frame.
Survey Description	"We're conducting a survey of people in your community for the Louisiana Office of Behavioral Health and the University of Louisiana at Lafayette concerning the gambling habits of Louisiana residents."
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-L
Gambling Availability	
Past-Year Gambling Prevalence	Table 4.16. Frequency of Participation in Various Types of Gambling – State (p. 52) provides general participation by gambling format details.
Problem Gambling Prevalence	SOGS-L: 5.4% (3-4); 2.9% (5+); 8.3% combined
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	males
Game Correlates of PG	

Comments	This prevalence study is the third in a series that began in 2002; The 2008 study include adults 18 and older to calculate rates, while the current study used adults 21 and older.
Reference URL	http://picardcenter.louisiana.edu/sites/picardcenter/files/The%20Impact%

Location	MARYLAND
Year Study Conducted	1988
Age	18+
Sources	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.
Sample Size	750
Sampling Strategy	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.
Survey Description	"gambling practices of the citizens of Maryland"
Administration Method	telephone interview
Response Rate	Refusal rate = 34%
Weighting	No
Threshold for PG Questions	any lifetime gambling
Assessment Instrument	SOGS-L
Gambling Availability	No EGMs in Maryland in 1999.
Past-Year Gambling Prevalence	(Lifetime = 89%)
Problem Gambling Prevalence	SOGS-L: 2.4% (3-4); 1.5% (5+); 3.9% combined
Standardized Problem Gambling Prevalence	2%
Standardization Calculations	3.9 * .72 * .60 * 1.59 * .74 = 2.0%
Demographic Correlates of PG	male; non-White; lower education; unmarried
Game Correlates of PG	wagering on cards, horse and dog races, games of skill, dice games, and sports
Comments	
Reference URL	http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1615000

Location	MARYLAND
Year Study Conducted	2010
Age	18+
Sources	Shinogle, J., Volberg, R.A., Park, D., Norris, D.F., Haynes, D., & Stokan, E. (2011). Gambling Prevalence in Maryland: A Baseline Analysis. Baltimore, MD: Maryland Institute for Policy Analysis & Research.
Sample Size	5975
Sampling Strategy	Stratified to represent the population of the four regions of the state. Random-digit dialing and random selection of respondents within households were used.
Survey Description	"we are conducting a survey in the State of Maryland about people's views on gambling"
Administration Method	telephone interview
Response Rate	18.6% (CASRO)
Weighting	gender, age, ethnicity
Threshold for PG Questions	gambled 5 or more times in lifetime
Assessment Instrument	DSM-IV-L (NODS)
Gambling Availability	1,500 EGMs in 2010. Population in 2010 was 5,773,552. People per EGM = 3849.
Past-Year Gambling Prevalence	70.6%
Problem Gambling Prevalence	1.9% (3-4); 1.5% (5+); 3.4% combined
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	3.4 * 1.19 * .60 * 1.44 * .53 = 1.9%
Demographic Correlates of PG	under 30 years of age; male; African Americans; lower income; lower education
Game Correlates of PG	EGMs, wagering on private games and sports, Internet gambling
Comments	
Reference URL	http://hdl.handle.net/1880/49269

Location	MARYLAND
Year Study Conducted	2017
Age	
Sources	Tracy, J. K., Maranda, L., & Scheele, C. (2018). Statewide gambling prevalence in Maryland: 2017. Maryland Center of Excellence on Problem Gambling.
Sample Size	3,810
Sampling Strategy	
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	
Assessment Instrument	
Gambling Availability	
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/109870

Location	MASSACHUSETTS
Year Study Conducted	1989
Age	18+
Sources	Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.
Sample Size	750
Sampling Strategy	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.
Survey Description	"gambling practices of the citizens of Massachusetts"
Administration Method	telephone interview
Response Rate	Refusal rate = 31%
Weighting	No
Threshold for PG Questions	any lifetime gambling
Assessment Instrument	SOGS-L
Gambling Availability	No EGMs in Massachusetts in 1999.
Past-Year Gambling Prevalence	(Lifetime = 90%)
Problem Gambling Prevalence	2.1% (3-4); 2.3% (5+); 4.4% combined
Standardized Problem Gambling Prevalence	2.2%
Standardization Calculations	4.4 * .72 * .60 * 1.59 * .74 = 2.2%
Demographic Correlates of PG	male; non-White; lower education; unmarried
Game Correlates of PG	wagering on cards, horse and dog races, games of skill, dice games, and sports
Comments	
Reference URL	http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1615000

Location	MASSACHUSETTS
Year Study Conducted	2012
Age	18+
Sources	Nelson, Sarah E., Kleschinsky, John H., LaPlante, Debi A., Gray, Heather M., & Shaffer, Howard J. (2013). A Benchmark Study For Monitoring Exposure to New Gambling Opportunities: Final Report. Boston, MA: Division on Addiction, Cambridge Health Alliance, a teaching affiliate of Harvard Medical School.
Sample Size	511
Sampling Strategy	Survey released to the 725 members of the MA Knowledge Panel who had not been part of the pre-test. Panelists received an email inviting them to participate and offering them an $8 cash-equivalent incentive to complete the survey. Those who did not respond initially received a reminder email encouraging them to participate. The survey closed on December 26th after being active for three weeks. More than 70% of the Knowledge Panel completed the survey (n=511); Panel generally reflects the demographics of Massachusetts with a few exceptions, the low initial recruitment rate, and consequent increased chance of selection bias, limits our confidence that the rates we observed in our sample are state-representative.
Survey Description	
Administration Method	online panel
Response Rate	70.5%
Weighting	Not indicated.
Threshold for PG Questions	gambled in past year
Assessment Instrument	DSM-IV (AUDADIS-IV Gambling Section)
Gambling Availability	
Past-Year Gambling Prevalence	53.6%
Problem Gambling Prevalence	2.2% (3-4); 0.2% (5+); 2.4% combined
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	not indicated
Game Correlates of PG	not indicated
Comments	Sample limited by its size and representativeness.
Reference URL	http://hdl.handle.net/1880/49608

Location	MASSACHUSETTS
Year Study Conducted	2013-2014
Age	18+
Sources	Volberg, R. A., Williams, R. J., Stanek, E. J., Houpt, K. A., Zorn, M., Rodriguez-Monguio, R. (2015). Gambling and Problem Gambling in Massachusetts: Results of a Baseline Population Survey. Amherst, MA: School of Public Health and Health Sciences, University of Massachusetts Amherst.
Sample Size	9578
Sampling Strategy	Probability sample of all Massachusetts adults and allowed survey respondents to complete the survey online, on paper, or by telephone; most recent birthday method selected as survey respondent; over-sampling in Western MA.
Survey Description	survey of "health and recreation."
Administration Method	online panel; pen/paper; telephone interview
Response Rate	36.6%
Weighting	gender, ethnicity
Threshold for PG Questions	gambled in past year
Assessment Instrument	CPGI; PPGM
Gambling Availability	
Past-Year Gambling Prevalence	72.2%
Problem Gambling Prevalence	CPGI: 8.1% (CPGI=1-4); 1.7% (CPGI=5+); PPGM: 7.5% (At-Risk Gambler); 1.7% (Problem Gambler)
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	males; blacks; lower education
Game Correlates of PG	online gamblers; horse race bettors; daily lottery games.
Comments	Baseline Population Survey for the SEIGMA project.
Reference URL	http://www.umass.edu/seigma/sites/default/files/SEIGMA%20Baseline%2...

Location	MICHIGAN
Year Study Conducted	1997
Age	18+
Sources	Gullickson, A. R., & Hartmann, D. (1997). Compulsive Gambling in Michigan: Final Report. Report to The Michigan Department of Community Health.
Sample Size	3942
Sampling Strategy	Random-digit dialing; imposition of a screen to increase male respondents (corrected the gender representation issue to within 1.9 percentage points); however, underrepresentation of African-American respondents, of the lowest educational category (less than high school education), lowest income category (household income below $25,000)
Survey Description	a state-funded study of the gambling practices of Michigan residents
Administration Method	telephone interview
Response Rate	43%
Weighting	Both weighted (race; income; education -- See Table 8. - p. 62) and unweighted estimates were produced.
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	9,167 EGMs in 1999. Unknown number of EGMs in 1997.
Past-Year Gambling Prevalence	76.9%
Problem Gambling Prevalence	SOGS-PY: 2.1% (3-4); 1.3% (5+); 3.4% combined SOGS-L: 3.2% (3-4); 2.0% (5+); 5.2% combined
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	3.4 * .72 * 1.44 * .53 = 1.9%
Demographic Correlates of PG	males; non-whites; younger respondents
Game Correlates of PG	horse or dog race players; betting on cards, dice, or video poker outside of legal casinos
Comments	
Reference URL	http://hdl.handle.net/1880/48523

Location	MICHIGAN
Year Study Conducted	1999
Age	18+
Sources	Gullickson, A. R., Hartmann, D., & Wiersma, W. (1999). A Survey of Gambling Behaviors in Michigan, 1999. Report to The Michigan Department of Community Health.
Sample Size	1717
Sampling Strategy	Random-digit dialing; imposition of a screen to increase male respondents; underrepresentation of African-American respondents, of the lowest education category (those with less than a high school education), and of the lowest income category (those reporting household incomes below $25,000).
Survey Description	"The Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"
Administration Method	telephone interview
Response Rate	45%
Weighting	No
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	9,167 EGMs in 1999. Population in 1999 was 9,897,116. People per EGM = 1080.
Past-Year Gambling Prevalence	77.6%
Problem Gambling Prevalence	SOGS-PY: 2.0% (3-4); 1.2% (5+); 3.2% combined SOGS-L: 3.1% (3-4); 1.8% (5+); 4.9% combined
Standardized Problem Gambling Prevalence	2.7%
Standardization Calculations	3.2 * .72 * 1.59 * .74 = 2.7%
Demographic Correlates of PG	age (18-29) and race (Black)
Game Correlates of PG	horse or dog race players; people who bet on cards, dice, or video poker outside of legal casinos
Comments	
Reference URL	http://hdl.handle.net/1880/48520

Location	MICHIGAN
Year Study Conducted	2001
Age	18+
Sources	Gullickson, A. R., & Hartmann, D. (2001). A Survey of Gambling Behaviors in Michigan, 2001. Report to The Michigan Department of Community Health.
Sample Size	1211
Sampling Strategy	Random-digit dialing; random selection within household; imposing a screen to increase male respondents; African Americans are underrepresented.
Survey Description	"the Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"
Administration Method	telephone interview
Response Rate	35% (The response rate for the special sample of persons with an interest in gambling was 42 percent.)
Weighting	No - "As we reported in the 1997 study, weighting does effect estimates of gambling problems in Michigan, though the magnitudes tend to be of a half a percentage point or less."
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	23,123 EGMs in 2002. Population in 2001 was 10,006,266. People per EGM = 433.
Past-Year Gambling Prevalence	71.9%
Problem Gambling Prevalence	SOGS-PY: 1.8% (3-4); 1.0% (5+); 2.8% combined SOGS-L: 2.8% (3-4); 1.7% (5+); 4.5% combined
Standardized Problem Gambling Prevalence	2.2%
Standardization Calculations	2.8 * .72 * 2.18 * .51 = 2.2%
Demographic Correlates of PG	age (18-29) and race (Black)
Game Correlates of PG	cards, dice, or video poker outside of legal casinos
Comments	
Reference URL	http://hdl.handle.net/1880/48519

Location	MICHIGAN
Year Study Conducted	2006
Age	18+
Sources	Hartmann, D. J. (2007). A Survey of Gambling Behaviors in Michigan, 2006. Kalamazoo, MI: Kercher Center for Social Research at the Western Michigan University for the Michigan Department of Community Health.
Sample Size	957
Sampling Strategy	Random-digit dialing; the statewide sample under-represents males, minorities, and the youngest, least educated, and poorest residents of the state.
Survey Description	"People spend or bet money on a variety of things including lottery, charitable games such as raffles or church sponsored bingo, horse races, casinos, sports, cards and dice. We will ask you about whether you have ever participated in these activities and whether you have participated in the past 12 months. We will ask about the extent of your participation and how gambling affects other aspects of your life."
Administration Method	telephone interview
Response Rate	29% (Refusal rate = 71%).
Weighting	No - A weighting procedure was used to produce a statewide sample of size 957 that is weighted to represent the adult population of Michigan at the county level; Weighted estimates are not reported because of their small effect and the lack of such practice in other studies.
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	23,039 EGMs in 2006. Population in 2006 was 10,095,643. People per EGM = 438.
Past-Year Gambling Prevalence	70.9%
Problem Gambling Prevalence	SOGS-PY: 1.1% (3-4); 0.9% (5+); 2.0% combined SOGS-L: 2.7% (3-4); 1.4% (5+); 4.1% combined
Standardized Problem Gambling Prevalence	1.6%
Standardization Calculations	2.0 * .72 * 2.18 * .51 = 1.6%
Demographic Correlates of PG	Age (18-29) and race (Black) appear to have some correlation to incidence of higher scores on the SOGS (Table 5. - Percent in SOGS Grouping by Demographic Categories - p. 17).

Game Correlates of PG	Table 6. Percent Distribution of Current SOGS Score by Gambling Type in the Past Year (p. 18) provides details. Note: "small numbers of respondents for particular gambling activities make several of the estimates unreliable."
Comments	
Reference URL	http://hdl.handle.net/1880/48518

Location	MINNESOTA
Year Study Conducted	1994
Age	18-74
Sources	Emerson, M.O., Laundergan, J.C., & Schaefer, J.M. (1994). Adult Survey of Minnesota Problem Gambling Behavior; A Needs Assessment: Changes 1990 to 1994. St. Paul: State of Minnesota Department of Human Services, Mental Health Division. Emerson, M.O. & Laundergan, J.C. (1996). Gambling and problem gambling among adult Minnesotans: Changes 1990 to 1994. Journal of Gambling Studies, 12(3), 291-304. doi:http://dx.doi.org/10.1007/BF01539324
Sample Size	1028
Sampling Strategy	Disproportionate random sample from the seven Twin Cities metro counties; ten counties total; Sample intentionally weighted to include 45% households from Twin Cities, 25% St. Louis County, 15% Clay County, 15% Olmsted County; Only one subject was interviewed per household contacted; random selection within household.
Survey Description	short survey concerning betting or games of chance in Minnesota
Administration Method	telephone interview
Response Rate	82%
Weighting	Yes - to compensate for oversampling of nonmetro residents and females.
Threshold for PG Questions	gambled in past year
Assessment Instrument	SOGS-PY (SOGS-M)
Gambling Availability	Unknown number of EGMs in Minnesota in 1994.
Past-Year Gambling Prevalence	65%
Problem Gambling Prevalence	3.2% (3-4); 1.2% (5+); 4.4% combined
Standardized Problem Gambling Prevalence	4.6%
Standardization Calculations	4.4 * .72 * 1.44 * 1.00 = 4.6%
Demographic Correlates of PG	less well-educated; divorced; never married (partly due to younger age of respondent with high SOGS-M scores); male; Native Americans
Game Correlates of PG	
Comments	
Reference URL	http://archive.leg.state.mn.us/docs/2010/mandated/101576.pdf

Location	MINNESOTA
Year Study Conducted	1990
Age	18-74
Sources	Laundergan, J. C., Schaefer, J. M., Eckhoff, K. F., & Pirie, P. L. (1990). Adult Survey of Minnesota Gambling Behavior: A Benchmark, 1990. St. Paul: State of Minnesota Department of Human Services, Mental Health Division.
Sample Size	1251
Sampling Strategy	Sample of 1,375 randomly selected households in the targeted areas was obtained from Survey Sampling, Inc.; Disproportionate random sample from the seven Twin Cities metro counties; Sample was intentionally weighted to include 45% households from St. Louis County, 10% Clay County, 45% Twin Cities Metropolitan Counties; nine counties total; one subject per household contacted; random selection within household.
Survey Description	"short research survey concerning betting or games of chance in Minnesota"
Administration Method	telephone interview
Response Rate	91%
Weighting	Not indicated (other than to obtain stated percentages for geographic areas).
Threshold for PG Questions	gambled in past year
Assessment Instrument	SOGS-PY (using the SOGS-M, which is a past-year measure with some wording changes to specific items: guilty -> bad; betting slips -> I.O.Us; questions about borrowing altered to single question with open-end response)
Gambling Availability	No EGMs in Minnesota in 1990.
Past-Year Gambling Prevalence	64%
Problem Gambling Prevalence	1.6% (3-4); 0.9% (5+); 2.5% combined
Standardized Problem Gambling Prevalence	2.6%
Standardization Calculations	2.5 * .72 * 1.44 * 1.00 = 2.6%
Demographic Correlates of PG	males; non-whites; respondents under the age of 34
Game Correlates of PG	pull tabs; bought lottery tickets outside of Minnesota; bingo, bet on a sporting event, and left Minnesota for casino games
Comments	A separate adolescent prevalence survey took place at the same time.
Reference URL	http://archive.leg.state.mn.us/docs/2010/mandated/101577.pdf

Reference URL	

Location	MISSISSIPPI
Year Study Conducted	1996
Age	18+
Sources	Volberg, R. A. (1997). Gambling and Problem Gambling in Mississippi: A Report to the Mississippi Council on Compulsive Gambling (Social Research Report Series 97-1). Mississippi State: Mississippi State University, Social Science Research Center.
Sample Size	1014
Sampling Strategy	Random selection of households and random selection of respondents within households; actual sample substantially under-represented males and blacks in the population. The actual sample also slightly under- represented individuals under the age of 25 in the population.
Survey Description	"a study of the gambling practices of the Citizens of Mississippi"
Administration Method	telephone interview
Response Rate	70%
Weighting	gender, ethnicity
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	37,717 EGMs in 1999. Unknown number in 1996.
Past-Year Gambling Prevalence	49%
Problem Gambling Prevalence	SOGS-PY: 2.8% (3-4); 2.1% (5+); 4.9% combined SOGS-L: 3.7% (3-4); 3.1% (5+); 6.8% combined
Standardized Problem Gambling Prevalence	3.9%
Standardization Calculations	4.9 * .72 * 1.44 * .76 = 3.9%
Demographic Correlates of PG	Lifetime: male, under the age 30, never married Past Year: under age 30, divorced or separated, employed; black
Game Correlates of PG	casino gambling, sports betting and wagering on card games not at a casino; pari-mutuel; bingo; illegal gambling (dice, EGMs)
Comments	
Reference URL	http://hdl.handle.net/1880/49229

Location	MISSOURI
Year Study Conducted	1981
Age	18-96
Sources	Cunningham-Williams, R.M., Cottler, L.B., & Compton, W.M. (1998). Taking Chances: Problem Gambling and Mental Health - Results from the St. Louis Epidemiologic Catchment Area (ECA) Study. American Journal of Public Health. 88(7),1093-1096.
Sample Size	2,954 (50 cases omitted because of missing gambling screen data)
Sampling Strategy	Multistage sampling; Representative household sample of St. Louis adults.
Survey Description	
Administration Method	
Response Rate	
Weighting	Yes - to account for oversampling of African Americans, clustering and nonresponse.
Threshold for PG Questions	
Assessment Instrument	DSM-III-L (DIS-III)
Gambling Availability	No EGMs in Missouri in 1981.
Past-Year Gambling Prevalence	50.7% reported placing a bet or gambling at least twice in their lives.
Problem Gambling Prevalence	5.45% (1+)
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	male; younger; separated or divorced; African American
Game Correlates of PG	
Comments	Results very tentative because of the unknown weighting factor that should be applied to the DIS-III and the fact that DIS only has 4 questions, whereas the DSM-III has 8 criteria. This study is not included in the tables or the analysis.
Reference URL	http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1508270

Location	MONTANA
Year Study Conducted	1992
Age	18+
Sources	Volberg, R.A. (1992). Gambling Involvement and Problem Gambling in Montana. Albany, NY: Gemini Research.
Sample Size	1020
Sampling Strategy	Random selection of respondents within households; up to 5 attempts to contact each number; only difference between sample compared to the 1990 United States census is underrepresentation of Native Americans.
Survey Description	" gambling practices of Montana citizens"
Administration Method	telephone interview
Response Rate	63%
Weighting	No
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	Unknown number of EGMs in 1992.
Past-Year Gambling Prevalence	73% (noted as 74% in 1998 report)
Problem Gambling Prevalence	SOGS-PY: 1.5% (3-4); 0.7% (5+); 2.2% combined SOGS-L: 2.3% (3-4); 1.3% (5+); 3.6% combined
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	2.2 * .72 * 1.59 * .74 = 1.9%
Demographic Correlates of PG	under the age of 30; noted as being more likely to be female than in any other state
Game Correlates of PG	more likely to have played EGMs and less likely to have wagered on sports or card games than problem and pathological gamblers in other states
Comments	
Reference URL	http://archive.org/details/gambling1992involvem00volbrich

Location	MONTANA
Year Study Conducted	1998
Age	18+
Sources	Bureau of Business and Economic Research, University of Montana-Missoula. (1998). The 1998 Montana Gambling Study. Missoula, MT: Author. (Note: Print version contains technical appendices).
Sample Size	1227
Sampling Strategy	Random-Digit Dialing; once household contacted selection procedure using a Kish grid used; Random cross-section of Montana adults; designed to ensure that the respondents represented a statistically accurate cross- section of Montana adults (17 hearing-impaired respondents received questionnaire in mail, 2 translators obtained for those who did not speak English).
Survey Description	"to gather information on gambling in Montana and its economic and social impacts"
Administration Method	telephone interview
Response Rate	83%
Weighting	age, sex
Threshold for PG Questions	ever spent or bet money on gambling activity in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY
Gambling Availability	19,487 EGMs in 1999. Population in 1998 was 879,533. People per EGM = 45.
Past-Year Gambling Prevalence	78%
Problem Gambling Prevalence	SOGS-PY: 2.0% (3-4); 1.6% (5+); 3.6% combined SOGS-L: 2.9% (3-4); 2.8% (5+); 5.7% combined DSM-IV-PY: 1.5% (3-4); 1.0% (5+); 2.5% combined
Standardized Problem Gambling Prevalence	3%
Standardization Calculations	SOGS-PY: 3.6 * .72 * 1.44 * .76 = 2.84% DSM-IV-PY: 2.5 * 1.19 * 1.44 * .76 = 3.26% Average = 3.0%
Demographic Correlates of PG	American Indians; divorced or separated; equally likely to be male or female; lower educational attainment
Game Correlates of PG	EGMs, lottery, scratch tickets
Comments	Prevalence study part of a statewide gambling study; an additional sample of 108 American Indians living on the Flathead Reservation also surveyed.
Reference URL	http://archive.org/details/1998montanagambl1998mont

Location	NEVADA
Year Study Conducted	1975
Age	18+
Sources	U.S. Commission on the Review of the National Policy Toward Gambling. (1976). Gambling in America: Final Report. Washington, DC: Author.
Sample Size	296 (Nevada residents)
Sampling Strategy	"Before obtaining the interview in Nevada, the interviewer ascertained whether the respondent had lived in Nevada for less than 18 months or had moved to Nevada primarily because of the availability of legal gambling. If either of these conditions applied, the individual was not interviewed."
Survey Description	"One thing that facilitated the data collection was the organization of the interview itself. It began by questioning respondents about what they do for recreation, additionally eliciting how much they spent on recreation and vacations, thus acclimating them to provide financial information on an innocuous topic. They were then led to discuss their exposure to other people's gambling behavior … Next they were asked about gambling laws in their state and their desire for or opposition to legalization of different games of chance, and only then were they questioned about what games they bet on, how often they bet, and how much money they wagered" (p. ix)
Administration Method	face-to-face residential interviews
Response Rate	70%
Weighting	gender, region
Threshold for PG Questions	
Assessment Instrument	"Clinical analysis" based on a) the similarity of the respondent answered 18 questions relative to how 274 known compulsive gamblers answered the same questions; b) observations recorded by the interviewer at the end of each interview; c) betting patterns reported by the respondent.
Gambling Availability	Unknown number of EGMs in Nevada in 1975
Past-Year Gambling Prevalence	78%
Problem Gambling Prevalence	Nevada supplementary sample (n=296) = 2.6% "probable compulsive" (men=3.3%; women=2.0%); National sample (n=1,736) = 0.8% "probable compulsive" (men=1.1%; women=0.5%).
Standardized Problem Gambling Prevalence	
Standardization Calculations	Nevada: 2.6% National: 0.8%

Demographic Correlates of PG	
Game Correlates of PG	
Comments	This study is not included in the tables or analyses.
Reference URL	http://hdl.handle.net/1880/41368

Location	NEVADA
Year Study Conducted	2000-2001
Age	18+
Sources	Volberg, R.A. (2002). Gambling and Problem Gambling in Nevada. Report to the Nevada Department of Human Resources. Carson City, NV: Department of Human Resources.
Sample Size	2217
Sampling Strategy	"two-phase probability sample"; The first phase involved identifying approximately 2,200 residential households with telephones in Nevada and selecting one eligible adult in each household (Kish grid) to respond to a brief screening interview. The second phase involved selecting a stratified random group of 733 respondents from the first phase for a lengthier interview. The sample is representative of the adult population of Nevada; instrument also translated into Spanish; up to 15 callbacks; achieved sample was representative of adult population of Nevada, as determined by Bureau of Census (2000).
Survey Description	"we are conducting a survey of people in your community for the State of Nevada about people's attitudes toward gambling"
Administration Method	telephone interview
Response Rate	24% (CASRO method)
Weighting	Region, gender, age
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	198,232 EGMs in 1999. Population in 2000 was 1,998,257. People per EGM = 10.
Past-Year Gambling Prevalence	67.9%
Problem Gambling Prevalence	SOGS-PY: 2.9% (3-4); 3.5% (5+); 6.4% combined DSM-IV-PY: 1.8% (3-4); 0.3% (5+); 2.1% combined DSM-IV-L: 3.0% (3-4); 2.1% (5+); 5.1% combined
Standardized Problem Gambling Prevalence	2.7%
Standardization Calculations	SOGS-PY: 6.4 * .72 * 1.44 * .53 = 3.5% DSM-IV-PY: 2.1 * 1.19 * 1.44 * .53 = 1.9% Average = 2.7%
Demographic Correlates of PG	males; adults 18 to 34; minorities; employed in gaming industry; high school education or less; annual household incomes under $35,000; never married
Game Correlates of PG	EGMs, bingo, horse/dog races, cardrooms
Comments	
Reference URL	http://hdl.handle.net/1880/49238

Location	NEW JERSEY
Year Study Conducted	1988
Age	18+
Sources	Volberg, R.A. & Steadman, H.J. (1989). Prevalence estimates of pathological gambling in New Jersey and Maryland. American Journal of Psychology, 146(12), 1618-1619. Volberg, R.A. (1994). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.
Sample Size	1000
Sampling Strategy	Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit dialing and random selection of respondents within household.
Survey Description	"gambling practices of the citizens of New Jersey"
Administration Method	telephone interview
Response Rate	Refusal rate = 36%
Weighting	no
Threshold for PG Questions	any lifetime gambling
Assessment Instrument	SOGS-L
Gambling Availability	Unknown number of EGMs in New Jersey in 1988.
Past-Year Gambling Prevalence	(Lifetime = 92%)
Problem Gambling Prevalence	2.8% (3-4); 1.4% (5+); 4.2% combined
Standardized Problem Gambling Prevalence	2.1%
Standardization Calculations	4.2 * .72 * .60 * 1.59 * .74 = 2.1%
Demographic Correlates of PG	male; non-White; lower education; unmarried
Game Correlates of PG	wagering on cards, horse and dog races, games of skill, dice games, and sports
Comments	
Reference URL	http://ajp.psychiatryonline.org/cgi/content/abstract/146/12/1618

Location	NEW JERSEY
Year Study Conducted	1990
Age	15+
Sources	Reilly, P. & Guida, F. (1990). Pathological Gambling Prevalence in New Jersey 1990 Final Report. Report to the New Jersey Dept of Higher Education. Piscataway, NJ: University of Medicine and Dentistry.
Sample Size	858
Sampling Strategy	Randomly selected computer generated telephone numbers provided by Survey Sampling, Inc.; stratified by county and sex based on 1987 census.
Survey Description	study of recreational behavior among citizens of New Jersey
Administration Method	telephone interview
Response Rate	29.6%
Weighting	No
Threshold for PG Questions	
Assessment Instrument	DSM-IV-L (uses 9 of the 10 questions proposed for the forthcoming DSM-IV; 6 of the 9 questions use the term 'ever')
Gambling Availability	Unknown number of EGMs in New Jersey in 1990.
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	5.8% (1+); 3.0% (2+)
Standardized Problem Gambling Prevalence	3.4%
Standardization Calculations	5.8 * .45 * .60 * 2.18 = 3.4%
Demographic Correlates of PG	male; earned less than $15,000 per year; younger persons; older persons
Game Correlates of PG	lottery play; casino betting; slots; horse betting; playing cards.
Comments	Used a slightly younger age (15+) than many other prevalence surveys.
Reference URL	http://hdl.handle.net/1880/48480
Reference URL	

Location	NEW JERSEY + PENNSYLVANIA (2-State Study)
Year Study Conducted	1984
Age	17+
Sources	Sommers, I. (1988). Pathological gambling: Estimating prevalence and group characteristics. Substance Use & Misuse, 23(5), 477-490. doi: 10.3109/10826088809039213
Sample Size	534 (1,000 households – refusals = 534)
Sampling Strategy	Random digit dialing; random selection within household; age distribution of respondents was skewed toward younger persons.
Survey Description	
Administration Method	telephone interview
Response Rate	53.4%
Weighting	Gender
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	Inventory of Gambling Behavior & other questions to get a "hard signs" of gambling pathology (CCSM)
Gambling Availability	
Past-Year Gambling Prevalence	30.6% ("31% represented the number of respondents who both perceived themselves as gamblers and were willing to disclose this in a telephone interview") [unclear as to time period for statement]
Problem Gambling Prevalence	"potentially" pathological gamblers = 4.12%; "probable" pathological gamblers = 3.37%
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	17-34 age group; males; Catholics; single individuals; separated or divorced; annual household income less than $20,000
Game Correlates of PG	
Comments	The IGB method probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio method, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. Survey included adults residing in a nine-county area of southeastern Pennsylvania and southern New Jersey. This study is not included in the tables or analyses.
Reference URL	http://dx.doi.org/10.3109/10826088809039213

Location	NEW MEXICO
Year Study Conducted	1996-1998
Age	18+
Sources	New Mexico Department of Health & University of New Mexico Center on Alcoholism Substance Abuse and Addictions. (1996). New Mexico Survey of Gambling Behavior. Santa Fe, NM: Author. Starling, R., Blankenship, J., May, P., & Woodall, G. (2009). Problem Gambling in New Mexico: 1996 and 1998. International Journal of Mental Health & Addiction, 7(1), 138-148. doi:10.1007/s11469-008-9163-3
Sample Size	2674 (1,279 in 1996 and 1,395 in 1998)
Sampling Strategy	Stratified based on county population; random digit dialing; American Indians, possibly because of the low number of household phones, were under sampled by about 50%.
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	no
Threshold for PG Questions	Respondents were surveyed regarding their gambling behavior in the 30 days preceding the gambling survey
Assessment Instrument	Mix of DSM-IV questions (13) and SOGS questions (4)
Gambling Availability	6,300 EGMs in 1999. Population in 1998 was 1,733,535. People per EGM = 275.
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	Gamblers were categorized as experiencing "low/moderate problems" if they reported any of the following, but also reported no serious problems: (1) one or more low problems, (2) one moderate problem, or (3) two low problems with one moderate problem. Gamblers were categorized as experiencing "serious problems" if they reported any of the following: (1) one or more serious problems, (2) two or more moderate problems, or (3) three or more low problems in combination with one more moderate problems. 8.2% were identified as having low/moderate problems, while 3.9% were identified as having serious problem gambling.
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	younger, more college education, less likely to be married, disability/unemployment, Hispanic

Game Correlates of PG	playing cards for money, dice gambling, and paper games
Comments	
Reference URL	http://dx.doi.org/10.1007/s11469-008-9163-3

Location	NEW MEXICO
Year Study Conducted	2005-2006
Age	18+
Sources	Volberg, R.A., & Bernhard, B. (2006). The 2006 Study of Gambling and Problem Gambling in New Mexico. Report to the Responsible Gaming Association of New Mexico. Northampton, MA: Gemini Research.
Sample Size	2850
Sampling Strategy	Random-digit dialing; minimum of 8 attempts to establish contact; questionnaire translated into Spanish; oversample of 589 Native American New Mexico residents aged 18 and over.
Survey Description	"a survey in the State of New Mexico about people's attitudes toward gambling"
Administration Method	telephone interview
Response Rate	47% ("completion rate"); 37% (more conservative approach)
Weighting	age, ethnicity
Threshold for PG Questions	DSM-IV-PY & DSM-IV-L (NODS): gambled more than 5 times in lifetime; CPGI: Past year gambler
Assessment Instrument	DSM-IV-PY & DSM-IV-L (NODS); CPGI
Gambling Availability	14,881 EGMs in 2006. Population in 2006 was 1,954,599. People per EGM = 131.
Past-Year Gambling Prevalence	68%
Problem Gambling Prevalence	CPGI: 2.2% (3-7); 0.6% (8+); 2.8% combined DSM-PY: 0.7% (3-4); 0.6% (5+); 1.3% combined DSM-L: 1.1% (3-4); 1.1% (5+); 2.2% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	CPGI: 2.8 * .58 * 1.44 * .53 = 1.2% DSM-PY: 1.3 * 1.19 * 1.44 * .53 = 1.2% Average = 1.2%
Demographic Correlates of PG	never married; disabled; unemployed; male, Hispanic; lower education; Native Americans
Game Correlates of PG	Bingo; wager privately; sports bettors; casino gamblers
Comments	Interviewed a separate oversample of 589 Native American residents of New Mexico.
Reference URL	http://hdl.handle.net/1880/44211

Location	NEW YORK
Year Study Conducted	1996
Age	18+
Sources	Volberg, R.A. (1996). Gambling and Problem Gambling in New York: A 10-Year Replication Survey, 1986 to 1996. Report to the New York Council on Problem Gambling. Roaring Spring, PA: Gemini Research.
Sample Size	1829
Sampling Strategy	Random selection of households and random selection of respondents within households; after completing 1,000 interviews, it was determined that the sample would not meet quotas for males or for population distribution in the state; began screening for male respondents in eligible households; post-stratification of sample to correct for population distribution; individuals with lower education underrepresented.
Survey Description	study of the gambling practices of the Citizens of New York State
Administration Method	telephone interview
Response Rate	72% (response rate among eligible respondents); 36% (response rate among eligible households).
Weighting	Yes - to ensure sample would be representative of the distribution of the population of the state; weighted by ethnicity, population distribution. Details available in Table 2 (p. 8).
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR)
Gambling Availability	No EGMs in New York in 1999. Unknown number in 1996.
Past-Year Gambling Prevalence	80%; (Lifetime = 90%)
Problem Gambling Prevalence	SOGS-PY: 2.2% (3-4); 1.4% (5+); 3.6% combined SOGS-L: 4.7% (3-4); 2.6% (5+); 7.3% combined DSM-IV-PY: 1.6% (3-4); 0.9% (5+); 2.5% combined
Standardized Problem Gambling Prevalence	1.5%
Standardization Calculations	SOGS-PY: 3.6 * .72 * 1.44 * .53 = 1.98% DSM-IV-PY: 2.5 * .58 * 1.44 * .53 = 1.11% Average = 1.5%
Demographic Correlates of PG	males; under age 30; non-Caucasian; unmarried
Game Correlates of PG	continuous forms of gambling
Comments	
Reference URL	http://hdl.handle.net/1880/49244
Reference URL	

Location	NEW YORK
Year Study Conducted	1986
Age	18+
Sources	Volberg, R.A, & Steadman, H.J. (1988). Refining prevalence estimates of pathological gambling. The American Journal of Psychiatry, 145(4), 502-505. Volberg, R.A. (1996). Gambling and Problem Gambling in New York: A 10- Year Replication Survey, 1986 to 1996. Report to the New York Council on Problem Gambling. Roaring Spring, PA: Gemini Research.
Sample Size	1000
Sampling Strategy	Random digit dialing; sample stratified to proportionally represent the counties of New York on the basis of 1980 census figures; instrument also translated into Spanish; lowest education levels somewhat underrepresented.
Survey Description	"a study of the gambling practices of the Citizens of New York State"
Administration Method	telephone interview
Response Rate	65%
Weighting	no
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-L
Gambling Availability	No EGMs in New York in 1999.
Past-Year Gambling Prevalence	(Lifetime = 84%)
Problem Gambling Prevalence	2.8% (3-4); 1.4% (5+); 4.2% combined
Standardized Problem Gambling Prevalence	2.1%
Standardization Calculations	4.2 * .72 * .60 * 1.59 * .74 = 2.1%
Demographic Correlates of PG	males; under age 30; Black; Hispanic; lower incomes (less than $25,000); less education (not graduated from high school)
Game Correlates of PG	
Comments	
Reference URL	http://ajp.psychiatryonline.org/article.aspx?articleid=164990

Location	NEW YORK
Year Study Conducted	2005-2006
Age	18+
Sources	Rainone, G., Marel, R., Gallati, R. J., & Gargon, N. (2007). Gambling Behaviors and Problem Gambling among Adults in New York State: Initial Findings from the 2006 OASAS Household Survey. NYS Office of Alcoholism and Substance Abuse Services.
Sample Size	5100
Sampling Strategy	Random digit dialing
Survey Description	
Administration Method	telephone interview
Response Rate	Between 45% - 50%
Weighting	gender, age, region, ethnicity, nativity and employment status
Threshold for PG Questions	
Assessment Instrument	DSM-IV-PY (NODS)
Gambling Availability	16,555 EGMs in 2006. Population in 2006 was 19,306,183. People per EGM = 1166.
Past-Year Gambling Prevalence	67%
Problem Gambling Prevalence	0.5% (3-4); 0.4% (5+); 0.9% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	0.9 * 1.19 * 1.44 * .76 = 1.2%
Demographic Correlates of PG	males; younger adults; Blacks; Hispanics; never married; employed full or part time
Game Correlates of PG	
Comments	The survey methodology is described in a separate report, "2006 OASAS Household Survey Technical Documentation." (This report not available online).
Reference URL	http://hdl.handle.net/1880/49270

Location	NORTH CAROLINA
Year Study Conducted	2005
Age	18+
Sources	Division of Mental Health, Developmental Disabilities and Substance Abuse Services. (2007). Effects of the North Carolina State Lottery on the Incidence of Gambling Addiction.
Sample Size	1367
Sampling Strategy	Gambling questions included in random statewide telephone survey (North Carolina Behavioral Risk Factor Surveillance System (BRFSS)) of adults that collects information on health, health behaviors, and utilization of health services in all months of the year.
Survey Description	"We are gathering information about the health of North Carolina residents."
Administration Method	telephone interview
Response Rate	
Weighting	Yes
Threshold for PG Questions	none
Assessment Instrument	N/A -- The prevalence for problem gambling, or the percentage of the adult general population with a gambling problem, was based on a single question that asked respondents whether they were gambling more than they thought they should.
Gambling Availability	3,600 EGMs in 2004. Population in 2005 was 8,683,242. People per EGM = 2412.
Past-Year Gambling Prevalence	Past 6-months = 28.6%; Lifetime = 50.3%
Problem Gambling Prevalence	2.1% -- Based on a single question that asked respondents whether they were gambling more than they thought they should.
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	age 18-24; non-whites; high-school education; $15,000-$24,999 household income
Game Correlates of PG	
Comments	This report presents findings on gambling behaviors among adult North Carolinians prior to the sale of the first lottery ticket on March 30, 2006
Reference URL	http://digital.ncdcr.gov/u?/p249901coll22,71000

Location	NORTH DAKOTA
Year Study Conducted	1992
Age	18+
Sources	Volberg, R.A. & Silver, E. (1993). Gambling and Problem Gambling in North Dakota. Report to the North Dakota Department of Human Services, Division of Mental Health. Albany, NY: Gemini Research.
Sample Size	1517
Sampling Strategy	Random sample of telephone numbers proportional to working blocks of telephone numbers in state; random selection of respondents within households; demographic data from random sample compared to data from 1990 U..S. census; no significant differences in terms of ethnicity; respondents in sample were less likely to be male and under the age of 25 than the general population.
Survey Description	study of the gambling practices of the Citizens of North Dakota
Administration Method	telephone interview
Response Rate	65%
Weighting	No
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	Unknown number of EGMs in North Dakota in 1992.
Past-Year Gambling Prevalence	73%
Problem Gambling Prevalence	SOGS-PY: 1.3% (3-4); 0.7% (5+); 2.0% combined SOGS-L: 2.5% (3-4); 1.0% (5+); 3.5% combined
Standardized Problem Gambling Prevalence	1.7%
Standardization Calculations	2.0 * .72 * 1.59 * .74 = 1.7%
Demographic Correlates of PG	Lifetime: under 30 years of age; lower than average household income. Current: under 30 years of age; non-White; somewhat less likely to earn $25,000 or more annually.
Game Correlates of PG	pull-tabs; bingo
Comments	Survey prior to the establishment of casinos in the state.
Reference URL	http://hdl.handle.net/1880/49254

Location	NORTH DAKOTA
Year Study Conducted	2000
Age	18+
Sources	Volberg, R.A. (2001). Gambling and Problem Gambling in North Dakota: A Replication Study, 1992 to 2000. Report to the North Dakota Office of the Governor. Bismarck, ND: Office of the Governor.
Sample Size	5002
Sampling Strategy	Random selection of households and random selection of respondents within households; achieved sample was quite representative of the total adult population in North Dakota, as estimated by the Bureau of the Census.
Survey Description	
Administration Method	telephone interview
Response Rate	71% (CASRO method)
Weighting	Yes - the data were weighted to ensure that the results of the survey could be generalized to the adult population of North Dakota; The first set of weights (WT_SHORT) treated the selection process for Phase One as an equal-probability selection of eligible adults in North Dakota, except that male and female adults of different ages in each of the four regions of North Dakota had different probabilities of completing the screener. The second set of weights (WT_LONG) adjusted for both the differential probabilities of selection for the full interview based on gambling frequency, for differential non-response by region, age, and gender at Phases One and Two, and for differential non-response by gambling frequency at Phase Two.
Threshold for PG Questions	gambled in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	2,500 EGMs in 1999. Population in 2000 was 642,200. People per EGM = 257.
Past-Year Gambling Prevalence	69.8%
Problem Gambling Prevalence	SOGS-PY: 0.7% (3-4); 1.4% (5+); 2.1% combined SOGS-L: 2.0% (3-4); 1.8% (5+); 3.8% combined DSM-IV-PY: 0.4% (3-4); 0.3% (5+); 0.7% combined DSM-IV-L: 0.5% (3-4); 0.4% (5+); 0.9% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	SOGS-PY: 2.1 * .72 * 1.44 * .74 = 1.61% DSM-IV-PY: 0.7 * 1.19 * 1.44 * .74 = .88% Average = 1.2%

Demographic Correlates of PG	age 18 to 24; male; Native Americans; widowed, divorced or separated; less than a high school education; disabled or unemployed; annual household incomes between $20,000 and $25,000.
Game Correlates of PG	horse race betting; casino table games; pulltabs, EGMs
Comments	
Reference URL	http://hdl.handle.net/1880/49264

Location	OHIO
Year Study Conducted	1985
Age	
Sources	Culleton, R.P. (1989). The prevalence rates of pathological gambling: A look at methods. Journal of Gambling Behavior, 5, 22-41. doi:10.1007 /BF01022135 Volberg, R.A. & Banks, S.M. (1990). A review of two measures of pathological gambling in the United States. Journal of Gambling Studies, 6(2), 153-163. doi:10.1007/BF01013495
Sample Size	801
Sampling Strategy	
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	
Threshold for PG Questions	
Assessment Instrument	Inventory of Gambling Behavior / Cumulative Clinical Signs Method (CCSM)
Gambling Availability	No EGMs in Ohio in 1999.
Past-Year Gambling Prevalence	
Problem Gambling Prevalence	In Ohio, 2.5 % of all adults were described as "probable" and another 3.4% as "potential" pathological gamblers.
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	

Comments	The IGB/CCSM probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio method, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. CCSM instrument also used in the following regional prevalence study: Culleton, R.P. & Lang, M.H. (1985). The prevalence rate of pathological gambling in the Delaware Valley in 1984. Report prepared for People Acting To Help, Philadelphia, PA. This study is not included in the tables or analyses.
Reference URL	http://dx.doi.org/10.1007/BF01022135

Location	OHIO
Year Study Conducted	2012
Age	18+
Sources	Massatti, R., Starr, S., Frohnapfel-Hasson, S. & Martt, N. (2015, February). 2012 Survey of At-Risk and Problem Gambling Prevalence Among Ohioans. Columbus, OH: Ohio Department of Mental Health and Addiction Services. http://mha.ohio. gov/Portals/0/assets/Research/Reports/2012-Survey-of-At-Risk-and-Problem-Gambling-Prevalence-among-Ohioans.pdf ; Massatti, R. R., Starr, S., Frohnapfel-Hasson, S., & Martt, N. (2016). A baseline study of past-year problem gambling prevalence among Ohioans. Journal of Gambling Issues, 34, 32-54. doi: 10.4309/jgi.2016.34.3
Sample Size	3600
Sampling Strategy	Multistage random area probability sample for the state of Ohio; oversampling of 600 in each area where a casino will operate (Cuyahoga, Lucas, Franklin, and Hamilton Counties) and 1,200 surveys statewide. Sample was constructed by identifying zip codes and then by random selection of individuals within zip code.
Survey Description	"a study on people's thoughts and feelings on gambling"
Administration Method	telephone interview
Response Rate	"available upon request"
Weighting	age, race, and gender
Threshold for PG Questions	gambling in past 12 months
Assessment Instrument	CPGI
Gambling Availability	
Past-Year Gambling Prevalence	56.7%
Problem Gambling Prevalence	0.3% (3-7); 0.3% (8+); 0.6% combined
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	Of the at-risk group, a majority are male and between the ages of 18-24 years old. In some areas of the state a slightly larger percentage of at-risk gamblers were African-American.
Game Correlates of PG	casino gambling
Comments	Two items that measure community attitudes and perceptions of gambling problems were added to the survey instrument.

Reference URL	http://mha.ohio.gov/Portals/0/assets/Research/Reports/2012-Survey-of-A

Location	OKLAHOMA
Year Study Conducted	2015-2016
Age	18+
Sources	Paulson, R., & Chandler, M. (2016). Oklahoma gambling prevalence study. Prepared for Oklahoma Association for Problem and Compulsive Gaming and the Oklahoma Department of Mental Health and Substance Abuse Services. http://www.odmhsas. org/eda/OAPCG_SummaryReport_042016.pdf
Sample Size	2636
Sampling Strategy	Options for respondents to complete an online survey, a paper survey mailed with prepaid return envelope, or a telephone survey.
Survey Description	"...you will be asked questions about personal recreation, social gaming, gambling experiences you have had (including online), and awareness of gambling treatment in Oklahoma."
Administration Method	online panel; paper survey; telephone survey
Response Rate	
Weighting	
Threshold for PG Questions	gambling in past 12 months
Assessment Instrument	PPGM; DSM-IV; DSM-V
Gambling Availability	
Past-Year Gambling Prevalence	56.4%
Problem Gambling Prevalence	PPGM: 3.5% (Problem / Pathological); DSM-IV: 1.0% (Severe); DSM-V: 0.9% (Severe).
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	
Comments	
Reference URL	http://www.odmhsas.org/eda/OAPCG_SummaryReport_042016.pdf
Reference URL	http://public.tableau.com/profile/mark.a.reynolds#!/vizhome/OklahomaGa

Location	OREGON
Year Study Conducted	1997
Age	18+
Sources	Volberg, R.A. (1997). Gambling and Problem Gambling in Oregon. Northampton, MA: Gemini Research Inc.
Sample Size	1502
Sampling Strategy	random selection of households and random selection of respondents within households; stratified sampling frame after completing approximately two-thirds of the interviews in order to obtain data from a representative sample of men and young adults.
Survey Description	"a survey of people in your community for the State of Oregon concerning the gambling practices of Oregon citizens"
Administration Method	telephone interview
Response Rate	51% (CASRO method)
Weighting	age
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR)
Gambling Availability	8,848 EGMs in 1999. Unknown number of EGMs in 1997.
Past-Year Gambling Prevalence	51.6%
Problem Gambling Prevalence	SOGS-PY: 1.9% (3-4); 1.4% (5+); 3.3% combined SOGS-L: 3.1% (3-4); 1.8% (5+); 5.1% combined DSM-IV-PY: 2.0% (3-4); 1.3% (5+); 3.3% combined
Standardized Problem Gambling Prevalence	3.4%
Standardization Calculations	SOGS-PY: 3.3 * .72 * 1.44 * .76 = 2.60% DSM-IV-PY: 3.3 * 1.19 * 1.44 * .76 = 4.30% Average = 3.4%
Demographic Correlates of PG	male; under the age of 30; non-White; divorced, separated or never married
Game Correlates of PG	illegal types of gambling, particularly sports, dice and games of skill; EGMs; card games; bingo
Comments	
Reference URL	http://hdl.handle.net/1880/49243

Location	OREGON
Year Study Conducted	2000
Age	18+
Sources	Volberg, R.A. (2001). Changes in Gambling and Problem Gambling in Oregon: Results from a Replication Study, 1997 to 2000. Northampton, MA: Gemini Research Inc. Moore, T.L. (2001). The Prevalence of Disordered Gambling among Adults in Oregon: A Secondary Analysis of Data. Salem, OR: Oregon Gambling Addiction Treatment Foundation.
Sample Size	1500
Sampling Strategy	randomized telephone survey; stratified sampling; screening procedure was used to preferentially complete interviews with male respondents and with respondents under the age of 35; achieved sample was quite representative of the population in terms of gender, age and ethnicity
Survey Description	"survey of people in your community for the State of Oregon concerning the gambling practices of Oregon citizens"
Administration Method	telephone interview
Response Rate	48% (CASRO method)
Weighting	No
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY & DSM-IV-L (NODS)
Gambling Availability	8,848 EGMs in 1999. Population in 2000 was 3,431,085. People per EGM = 388.
Past-Year Gambling Prevalence	47.1%
Problem Gambling Prevalence	SOGS-PY: 1.4% (3-4); 0.9% (5+); 2.3% combined SOGS-L: 2.7% (3-4); 1.9% (5+); 4.6% combined DSM-IV-PY: 0.4% (3-4); 0.1% (5+); 0.5% combined DSM-IV-L: 0.9% (3-4); 0.6% (5+); 1.5% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	SOGS-PY: 2.3 * .72 * 1.44 * .76 = 1.81% DSM-IV-PY: 0.5 * 1.19 * 1.44 * .76 = 0.65 Average = 1.2%
Demographic Correlates of PG	minority populations (small sample); never married
Game Correlates of PG	
Comments	

Reference URL	http://hdl.handle.net/1880/49241
Reference URL	http://hdl.handle.net/1880/49242

Location	OREGON
Year Study Conducted	2005
Age	18+
Sources	Moore, T. (2006). The Prevalence of Disordered Gambling among Adults in Oregon: A Replication Study. Portland, OR: Oregon Gambling Addiction Treatment Foundation.
Sample Size	1554
Sampling Strategy	The design and methodology for the replication study was consistent with the initial baseline study conducted in 1997 and the replication study conducted in 2001; minorities and ages 18 – 44 were under- represented in the sample.
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	Age
Threshold for PG Questions	gambling in lifetime?
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-L (NODS)
Gambling Availability	14,218 EGMs in 2004. Population in 2005 was 3,626,938. People per EGM = 255.
Past-Year Gambling Prevalence	64.5% (weighted)
Problem Gambling Prevalence	SOGS-PY: 1.7% (3-4); 1.0% (5+); 2.7% combined SOGS-L: 2.4% (3-4); 1.9% (5+); 4.3% combined DSM: not reported
Standardized Problem Gambling Prevalence	2.1%
Standardization Calculations	SOGS-PY: 2.7 * .72 * 1.44 * .76 = 2.1%
Demographic Correlates of PG	under the age of 45; non-Whites; divorced or separated; employed
Game Correlates of PG	
Comments	Replication study; NODS prevalence rates not reported.
Reference URL	http://hdl.handle.net/1880/49240

Location	OREGON
Year Study Conducted	2015
Age	18+
Sources	Moore, T. L., Volberg, R. A. (2016). Oregon adult gambling behavior 2016: preliminary report. Wilsonville, OR: Oregon Council on Problem Gambling.
Sample Size	1,512
Sampling Strategy	Replication study; a purchased sample of 19,904 phone numbers (31.5% land lines; 64.4% cell) randomly distributed across the state.
Survey Description	
Administration Method	telephone interview
Response Rate	12.90%
Weighting	some weighting was necessary to achieve proportional sample sizes in three of the age/gender groups due to the over sampling of males in the 35 year and older group.
Threshold for PG Questions	
Assessment Instrument	PGSI; DSM-IV (NODS)
Gambling Availability	
Past-Year Gambling Prevalence	56.60%
Problem Gambling Prevalence	
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	
Game Correlates of PG	
Comments	
Reference URL	https://www.oregonpgs.org/wp-content/uploads/2012/08/OREGON-ADUl

Location	PENNSYLVANIA + NEW JERSEY (2-State Study)
Year Study Conducted	1984
Age	17+
Sources	Sommers, I. (1988). Pathological gambling: Estimating prevalence and group characteristics. Substance Use & Misuse, 23(5), 477-490. doi: 10.3109/10826088809039213
Sample Size	534 (1,000 households – refusals = 534)
Sampling Strategy	Random digit dialing; random selection within household; age distribution of respondents was skewed toward younger persons.
Survey Description	
Administration Method	telephone interview
Response Rate	53.4%
Weighting	Gender
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	Inventory of Gambling Behavior & other questions to get a "hard signs" of gambling pathology (CCSM)
Gambling Availability	
Past-Year Gambling Prevalence	30.6% ("31% represented the number of respondents who both perceived themselves as gamblers and were willing to disclose this in a telephone interview") [unclear as to time period for statement]
Problem Gambling Prevalence	"potentially" pathological gamblers = 4.12%; "probable" pathological gamblers = 3.37%
Standardized Problem Gambling Prevalence	
Standardization Calculations	
Demographic Correlates of PG	17-34 age group; males; Catholics; single individuals; separated or divorced; annual household income less than $20,000
Game Correlates of PG	
Comments	The IGB method probably requires additional corrections for the sampling strategy (selected for self-defined "gamblers") and for the PG measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test and the sum of the test scores yielding a respondent's total score. An odds ratio methods, which expresses the odds in favor of being a PG for each total score, is used to estimate prevalence. Survey included adults residing in a nine-county area of southeastern Pennsylvania and southern New Jersey. This study is not included in the tables or analyses.
Reference URL	http://dx.doi.org/10.3109/10826088809039213

Location	PUERTO RICO [U.S. Territory]
Year Study Conducted	1997
Age	18+
Sources	Volberg, R.A., & Vales, P.A. (1998). Gambling and Problem Gambling in Puerto Rico [Juegos de azar y el problema de juego en Puerto Rico]. Report to the Puerto Rico Treasury Department. Volberg, R.A., Vales, P.A. (2002). Prevalence estimates of pathological gambling in Puerto Rico [Estimados de prevalencia sobre el juego patológico en Puerto Rico]. Revista Puertorriqueña de Psicología 13, 71-98.
Sample Size	1506
Sampling Strategy	Stratified household sampling; 3 metropolitan municipalities, 3 large towns and 8 small towns were randomly selected from the 78 municipalities in Puerto Rico; different socio-economic areas selected within the urban and rural locations of each municipality; survey conducted in Spanish; random selection within household. Obtained sample was nonsignificantly different from the Puerto Rico population in terms of gender, age and urban/rural distribution.
Survey Description	"gambling practices among residents of Puerto Rico"
Administration Method	Residential face-to-face interview
Response Rate	97%
Weighting	"Since the sample was so similar to the Puerto Rico population in terms of size of municipality, urban-rural distribution, gender and age, it was not necessary to use post-stratification weights" (p. 9).
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	4,440 EGMs in 1999. Unknown number in 1997.
Past-Year Gambling Prevalence	88%
Problem Gambling Prevalence	SOGS-PY: 4.4% (3-4); 6.8% (5+); 11.2% combined SOGS-L: 6.4% (3-4); 7.4% (5+); 13.8% combined
Standardized Problem Gambling Prevalence	8.1%
Standardization Calculations	11.2 * .72 * 1.00 = 8.1%
Demographic Correlates of PG	male; between the ages of 21 and 54; divorced or separated; employed; annual household incomes over $50,000

Game Correlates of PG	"continuous" types of gambling, characterized by rapid cycles of play. These include wagering on horse races and cockfights, "bolita," illegal EGMs, at casinos, on sports, on card games not at a casino and on games of skill.
Comments	"There was no effort made in the survey to separate questions about wagering on horse races and cockfights. This was done in order to maintain comparability with questions about parimutuel wagering in other jurisdictions. In retrospect, and given the large role that these types of gambling appear to play in the prevalence of problem and pathological gambling in Puerto Rico, it would have been preferable to separate these two activities."
Reference URL	http://hdl.handle.net/1880/45031
Reference URL	http://hdl.handle.net/1880/45032

Location	SOUTH DAKOTA
Year Study Conducted	1991
Age	18+
Sources	Volberg, R.A., Stuefen, R.M., & Madden, M.K. (1991). Gaming in South Dakota: A Study of Gambling Participation and Problem Gambling and a Statistical Description and Analysis of its Socioeconomic Impacts. Vermillion: University of South Dakota, Business Research Bureau.
Sample Size	1560
Sampling Strategy	Sample stratified to proportionally represent county populations on the basis of 1990 census figures. Random sampling of households with listed telephone numbers and random selection of respondents within households. Up to 7 attempts were made to contact each number and up to 5 callbacks were made to complete an interview with each selected respondent.
Survey Description	"a study of the gambling practices of the Citizens of South Dakota"
Administration Method	telephone interview
Response Rate	78%
Weighting	No
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY (6-months) & SOGS-L
Gambling Availability	Unknown number of EGMs in 1991.
Past-Year Gambling Prevalence	(Lifetime = 86%)
Problem Gambling Prevalence	SOGS-PY: 0.8% (3-4); 0.6% (5+); 1.4% combined SOGS-L: 1.8% (3-4); 1.0% (5+); 2.8% combined
Standardized Problem Gambling Prevalence	1.5%
Standardization Calculations	1.4 * .72 * 1.44 * 1.00 = 1.5%
Demographic Correlates of PG	unmarried; household income less than $25,000; non-White, under age of 30
Game Correlates of PG	Bingo; sports betting. Problem and pathological gamblers in South Dakota are just as likely as those in other states to have wagered on gambling machines, horse and dog races, card games and dice games.
Comments	
Reference URL	http://hdl.handle.net/1880/47803

Location	SOUTH DAKOTA
Year Study Conducted	1993
Age	18+
Sources	Volberg, R.A. & Stuefen, R.M. (1994). Gambling and Problem Gambling in South Dakota: A Follow-up Survey. Vermillion: University of South Dakota, Business Research Bureau.
Sample Size	1767
Sampling Strategy	Sample stratified to proportionally represent county populations on the basis of 1990 census figures; Random sampling of households with listed telephone numbers and random selection within households; up to 7 attempts to contact each number; up to 5 callbacks to complete interview. Males, Native Americans, individuals under the age of 30 and those with less than a high school education underrepresented in sample.
Survey Description	"a study of the gambling practices of the Citizens of South Dakota"
Administration Method	telephone interview
Response Rate	80%
Weighting	No
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY (6-months) & SOGS-L
Gambling Availability	Casino first opened 1989. Unknown number of EGMs in 1993.
Past-Year Gambling Prevalence	65% (Past 6-months)
Problem Gambling Prevalence	SOGS-PY: 0.7% (3-4); 0.5% (5+); 1.2% combined SOGS-L: 1.4% (3-4); 0.9% (5+); 2.3% combined
Standardized Problem Gambling Prevalence	1.2%
Standardization Calculations	1.2 *.72 * 1.44 * 1.00 = 1.2%
Demographic Correlates of PG	male; over the age of 30; married
Game Correlates of PG	pull-tabs; video lottery games; socially with friends; card or dice games.
Comments	
Reference URL	http://hdl.handle.net/1880/451

Location	TEXAS
Year Study Conducted	1992
Age	18+
Sources	Wallisch, L.S. (1993). Gambling in Texas: 1992 Texas Survey of Adult Gambling Behavior. Austin: Texas Commission on Alcohol and Drug Abuse.
Sample Size	6308
Sampling Strategy	Random digit dialing; Certain geographical areas oversampled to provide minimum sample of 650 respondents in each of 8 regions of the state; Spanish-language version of the survey instrument was produced. Approximately 6 percent of the adults asked to be interviewed in Spanish.
Survey Description	
Administration Method	telephone interview
Response Rate	67%
Weighting	age, race/ethnicity, region
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	No EGMs in 1992.
Past-Year Gambling Prevalence	49%
Problem Gambling Prevalence	SOGS-PY: 1.7% (3-4); 0.8% (5+); 2.5% combined SOGS-L: 3.5% (3-4); 1.3% (5+); 4.8% combined
Standardized Problem Gambling Prevalence	2%
Standardization Calculations	2.5 * .72 * 1.44 * .76 = 2.0%
Demographic Correlates of PG	males, non-whites, young adults (18–24), divorced or never married, lower educational levels, blue-collar workers, Catholics and people who are not Protestant or Jewish
Game Correlates of PG	betting on cards or dice in casinos or at card parlors and other betting establishments, bingo, games of skill, and sports at a sports book or with a bookie
Comments	The information given by all respondents generally reflects gambling that occurred before the Texas Lottery, except where indicated; Study also included a separate sample of 924 adolescents aged 14 through 17.
Reference URL	http://hdl.handle.net/1880/49251

Location	TEXAS
Year Study Conducted	1995
Age	18+
Sources	Wallisch, L.S. (1996). Gambling in Texas: 1995 Surveys of Adult and Adolescent Gambling Behavior. Austin: Texas Commission on Alcohol and Drug Abuse.
Sample Size	7015
Sampling Strategy	Minimum of 400 adults from each of the 11 Texas Department of Health and Human Services planning regions; certain age groups and racial/ethnic groups were oversampled; obtained sample representative in terms of gender, age, racial/ethnic and regional distribution as the Texas population.
Survey Description	
Administration Method	telephone interview
Response Rate	70% (noted as "cooperation rate")
Weighting	gender, race/ethnicity, age, region
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	No EGMs in 1995.
Past-Year Gambling Prevalence	68%
Problem Gambling Prevalence	SOGS-PY: 2.2% (3-4); 0.8% (5+); 3.0% combined SOGS-L: 3.6% (3-4); 1.8% (5+); 5.4% combined
Standardized Problem Gambling Prevalence	2.4%
Standardization Calculations	3.0 * .72 * 1.44 * .76 = 2.4%
Demographic Correlates of PG	younger age; African American or Hispanic; never married; high school dropouts; less likely to be in the labor force because they were instead in school or disabled; lowest household incomes
Game Correlates of PG	illegal activities, followed by bingo, games of skill, and casino games
Comments	Follow-up / replication study; Study also included a separate sample of 3,079 adolescents aged 14 through 17.
Reference URL	http://hdl.handle.net/1880/49250

Location	WASHINGTON
Year Study Conducted	1992
Age	18+
Sources	Volberg, R.A. (1993). Gambling and Problem Gambling in Washington State. Report to the Washington State Lottery.
Sample Size	1502
Sampling Strategy	Random digit dialing; random selection of respondents within households; sample slightly underrepresents Asians, young adults and the elderly, individuals who have never married, low income households
Survey Description	study of the gambling practices of the citizens of Washington State
Administration Method	telephone interview
Response Rate	60% (Upper Bound method)
Weighting	no
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L
Gambling Availability	No EGMs in 1992.
Past-Year Gambling Prevalence	80.1%
Problem Gambling Prevalence	SOGS-PY: 1.9% (3-4); 0.9% (5+); 2.8% combined SOGS-L: 3.5% (3-4); 1.5% (5+); 5.1% combined
Standardized Problem Gambling Prevalence	2.4%
Standardization Calculations	2.8 * .72 * 1.59 * .74 = 2.4%
Demographic Correlates of PG	male; under the age of 30, non-White; unmarried
Game Correlates of PG	wagering on sports events with friends or co-workers; lottery's Daily Game
Comments	
Reference URL	http://hdl.handle.net/1880/514

Location	WASHINGTON
Year Study Conducted	1998
Age	18+
Sources	Volberg, R.A. & W.L. Moore. (1999). Gambling and Problem Gambling in Washington State: A Six-Year Replication Study, 1992 to 1998. Olympia, WA: Washington State Lottery.
Sample Size	1501
Sampling Strategy	Random selection of households and random selection of respondents within households; "soft screening" respondents in eligible households in order to obtain adequate representation of young men. Soft screening entails first asking for the man in the household under age 35, then any male, and then the adult with the next birthday. As a result of this screening procedure, the sample is fully representative of the population aged 18 and over in Washington State in terms of gender (male/female) and age (18-34 and 35+).
Survey Description	"survey of people in your community for the State of Washington concerning the gambling practices of Washington citizens"
Administration Method	telephone interview
Response Rate	50% (CASRO method)
Weighting	no
Threshold for PG Questions	gambling in lifetime
Assessment Instrument	SOGS-PY & SOGS-L; DSM-IV-PY (DSM-IV-MR)
Gambling Availability	No EGMs in 1998.
Past-Year Gambling Prevalence	74.4%
Problem Gambling Prevalence	SOGS-PY: 1.8% (3-4); 0.5% (5+); 2.3% combined SOGS-L: 3.7% (3-4); 1.3% (5+); 5.0% combined DSM-IV-PY: 0.9% (3-4); 0.6% (5+); 1.5% combined
Standardized Problem Gambling Prevalence	1.9%
Standardization Calculations	SOGS-PY: 2.3% * .72 * 1.44 * .76 = 1.81% DSM-IV-PY: 1.5% * 1.19 * 1.44 * .76 = 1.95% Average = 1.9%
Demographic Correlates of PG	male, under the age of 25, non-White or Hispanic; never married
Game Correlates of PG	bingo, the instant and daily lottery games, EGMs, horse or dog races
Comments	
Reference URL	http://hdl.handle.net/1880/49271

Location	WASHINGTON
Year Study Conducted	2003-2004
Age	18+
Sources	Mancuso, D., Gilson, M., & Felver, B. (2005). The 2003 Washington State Needs Assessment Household Survey. Department of Social and Health Services (DSHS), Division of Alcohol and Substance Abuse (DASA).
Sample Size	6713
Sampling Strategy	Random digit dialing + phone numbers from Food Stamps client lists, school lists, birth certificate records, and ethnic surname sampling of listed telephone numbers. The interview offered in 6 languages: English, Spanish, Russian, Chinese, Korean, and Vietnamese. Stratified sampling; over sampling young adults, poorer persons and members of ethnic and racial minority groups; An advance letter with a brief description of the survey and a one dollar bill was sent to sampled households with available address information; minimum number of 20 callbacks.
Survey Description	Part of an omnibus survey on several topics
Administration Method	telephone interview
Response Rate	50% (69% "cooperation rate")
Weighting	Yes - to U.S. Census population counts.
Threshold for PG Questions	Not indicated. Seemingly Gambling in past year.
Assessment Instrument	DSM-IV-PY (NODS)
Gambling Availability	16,923 EGMs in 2004. Population in 2004 was 6,203,788. People per EGM = 367.
Past-Year Gambling Prevalence	54%
Problem Gambling Prevalence	0.7% (3-4); 0.4% (5+); 1.2% combined
Standardized Problem Gambling Prevalence	2.1%
Standardization Calculations	1.2 * 1.19 * 1.44 = 2.1%
Demographic Correlates of PG	aged 25 to 44 years; 45 to 64 years; rural counties; American Indian or Alaska Native adults; adults who endorsed more than one race; Blacks.
Game Correlates of PG	
Comments	
Reference URL	http://hdl.handle.net/1880/49260

Location	WISCONSIN
Year Study Conducted	1995
Age	18+
Sources	Thompson, W.N., Gazel, R., & Rickman, D. (1996). The Social Costs of Gambling in Wisconsin. Wisconsin Policy Research Institute Report, 9(6),1-44.
Sample Size	1000
Sampling Strategy	Random digit dialing; 3 call back attempts; the 1,000 respondents were a close match of the general Wisconsin adult population
Survey Description	
Administration Method	telephone interview
Response Rate	
Weighting	No
Threshold for PG Questions	None
Assessment Instrument	DSM-IV(slight modification)
Gambling Availability	Unknown number of EGMs in 1995.
Past-Year Gambling Prevalence	65.1%
Problem Gambling Prevalence	0.9% (3+)
Standardized Problem Gambling Prevalence	1.3%
Standardization Calculations	0.9 * 1.19 * 1.59 * .74 = 1.3%
Demographic Correlates of PG	
Game Correlates of PG	casino gambling
Comments	
Reference URL	http://hdl.handle.net/1880/49232