Loci	tion Y	fear Study Age Conducted	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	e Rate	Weighting	Threshold for PG Questions	Assessment	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
ARD	ONA 2	2002-2003 18+	Volterg (F.A. 2003) Genetaling and Pooleen Gambling in Arizona. Report to the Arizona Lottery. Northampton, MA: Geneni Research.	2	120 Quotas for gender and region of the state, minimum of 6 contact attempts, random well-dow within household.	"survey for the State of Adzona about people's attractes toward gambling"	belephone interview	¥ 50	6 grupp and athrobit to account for under-representation of produce adults and eliminate. The Net The Company Company of Sample (p. 9), Note: Unweighted data used for NODS analysis.	ever gantzled in lifetme	SOGS-PY & SOGS-L; DSM- IV-PY & DSM- IV-L (NODS)	9,044 ECMs in 2002. Population in 2002 was 5,456,453. People per ECM = 603.	62.4% (Lifetime = 82%)	SDGS-PY: 1.8% (3-4): 0.7% (5+): 2.3% combined SDGS-L: 3.8% (3- 4): 1.9% (5+): 5.5% combined DSM-IV- PY: 0.7% (3-4): 0.3% (5+): 1.0% combined DSM-IV-	Prevalence 1.67	SOGS-PY: 2.3 *. 72 * 1.44 * .75 = 1.8% DSM-W-PY: 1.0 * 1.19 * 1.44 * .75 = 1.3% Average: 1.6%	Hapanica; disabled; unemployed	EGMs: casinos; wagering privately	6% of the interviews (n=157) were conducted in Sparialy. Lifetime problem gambies significantly more likely to be make and have military experience.	http://htt/handle.net/	
CAL	FORNIA 1	1990 18+	Volberg, R.A. (1994). The prevalence and demographics of pathological	12	250 Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digt dialing and random		belephone interview	w Refizial	No	gambled in lifetime	SOGS-L	EGM availability unavailable	(Lifetime = 89%)	(5+); 2.1% combined 2.9% (3-4); 1.2% (5+); 4.1%	2.19	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		http://www.pubmedc	
CAL	FORNIA 2	2005-2006 18+	genblers: Implications for public health. Arrenciaen Journal of Public Health, 84, 237-241 Volberg, R.A., Nysse-Carris, K.L., & Genslein, D.R. (2006) 2006 California Indulem Caroling Privalence Survey. Submitted to California Department of Alcohel and Drug Programs Office of Problem and Pathological Gambling.		selection of respondents within households. 21 Random-digit-dangi caligation of Spanishi, Interpreters used to informive eligibile respondents show were unable to complete the informive in these two languages; Alterusuus efforts made to excut a fully respective sample of california maddenta bits the survey, including serveral mailings of advances and refusal convension latters.	"Your household has been selected at random to be part of the California Cambling and Health Study" (verbail consert script). Complete script available in report Appendices (pp. 62-63)	telephone interview	27% # 47.2	⁶ Yes - weighted to adjust for differences in household size and to reflect the known demographic characteristics of the oppolation. 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	combined 5 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	1.79	1.3 ° 1.19 ° 1.44 ° . 76 = 1.7%	males; young adults; African Americana and individuals belicroging to racial and ethnic groups classified as 'other'; disabled; unemployed	skil; dice games; sporta betting 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 samples of Hispanics (N=1,509) and Asians (N=504) ever therefereved for a problem gambling prevalence survey in the United Nation.	blip (hdi handie nat) t	
COL	T OCLAR	1997 18+	Volkerg, R.A. (1997). Gambling and Poblem Gambling in Colorado. Report to the Colorado Department of Revenue.	-	10 "Nandon salection of households and random salection of negocidant's within households, Nande comparing against and interviews, began screening for male respondents in eligible households in order to obtain adequate segmentation of man in the sample. Once the negocidar governments are sub- ellations and screening of the second screening and productions and second screening in programaticative of the population in terms of gender, age and residence."	"survey of people in your correnuity for the State of Colored contening the gambling practices of Colored Citizens"	belephone interview	u 44	6: Nor (Marc charcing the inspact of resigning the sample by ethnicity on hey vanishes, including the prevalence of problem and pathological gending, and given the relatively small difference of these percentage portions between sample and census date, 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 1993. Usknown number in 1997.	81	% 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+);	2.45	SOGS-PY: 2.5 *. 72 * 1.44 * .75 = 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 achool	Bingo; pultabs; casinos; lottery games	Jan.	<u>blip (hdi handle nati</u>	
cos	NECTICUT 1	1577 15×	Alzeitensen, J.A. (1997), L.A. (1997), Genetiken in Generativa Ranz, C.C. Connection Bate Communitier Generat Treasure		30 Bulk appendixtu server, 10 here a Connector was a related and the second server has a second server and the second second second second second second second second backs, bulk of 1 here is noticely advected to respectively and second	New pargine in Connecticul July money	residential face-to- face interview		~	No troubed	3-Questions Related to be an experiment of a construction Garothing (1) / at here is have be as o much that 1 had to put of the borg of dotters; had to put of the borg of dotters; had to put of had to borne make; (3) People close to that have more branches amount of money that 1 bet; Agreement with statement with with statement with s	Ne 853A in 1977	Figures and y leads for 23 synthing formats. Most formats. Most formats. Most formation of the synthesis formation of the "Adduct once in the adduct purchase a bittery social weak, and many horizont por more."	2.2% combined 10 paracines cui de ditese questions in a problem- suggestive manares Thai engles that Bable adults man Bable adults ma potertally a potertally a			pourg legended or dissocial unakliked occupations	pinak of gan being, dag			
COM	NECTICUT 1	1985 18+	Lavenfhol & Horwath, David Cwi & Associates, & Survey Research Associates, Inc. (1985). The Effects of Legalized Gambling on the Ditzens of Inte State of Connecticut Newington: State of Connecticut Division of Special Revenue.		224 Randomly selected lated 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 honse races. No ECMs in 1995.	74	5 0.34% (endorsed first and two of remaining 3 questions)	0.65	(0.34 ° 2.6 ° 60 ° 1.44 ° .76 = 0.6%)	None reported (only 4 respondents classified as pathological gamblers)	peri-mutuel bettors (jai alai, greyhound, honses at track, off- track betting or teletrack)	Results very tentative because of the unknown weighting tector that should be applied to the US-1II and the fact that DIS only has 4 questions, whereas the DSM-III has 8 criteria. This abuty is not included in the tables or the analysis.		
0.05	NECTICOT	1091 10*	Crimearsen / Currenge Associates. (1922). Legal Gambing 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 Gambing in Connecticut	x	All prendom digit daming proportionate to the number of Headerts in each of the eight counties in the State; random selection within household.	regarced gamping in the scale	salephone inserves		10		5005-0	Poxwoods Calano opens 1942	801	(5+); 6.3% combined	127	*.74 = 3.2%	unmanied; household income less than \$25,000.	pultabs; football pools; bet with a bookie on a sports event.		Ing root nance net	
COM	NECTICUT 1	1995 18+	which a part of the main report. WEPA Coco, (1927) June A Study Concerning the Effects of Legaland Gambling on the Citizens of the State of Connecticut. Propared for: State of Connecticut Department of Revenue Services, Division of Special Revenue.		22 Shatfied, 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	Forwoods Casino opens 1992	83	SOGS-PY: 2.2% (3-4): 0.6% (5+); 2.8% combined SOGS-L: 4.2% (3- 4): 1.2% (5+): 5.4% combined	2.95	28°.72°1.44 = 29%	Reported that data is not statistically significant. Demographic information available (Section 5-13).	Reported that data is not statistically significant. Cambing preferences information available (Section 5-14).	Prevalence study was one component of an overall study on socio-economic impacts of gambling.	http://www.ct.govida	otp Valib oknivat
0	NECTICUT 2	203 18+	Stantand Camp Gray, 2005 Ganity in Convestion Autors in Economic and Solid Inputs Camp CU	t: 3,089 (2,286 Telisphore 801 Cetine Panel)	Alexien dig dang union wakter with waards in the second second second second second second second second wave, Euglid ad Special variant second second	"scrop for the time of Convention about parallel antides to use of parallel	belephone interview, self- administered onlin (Colline Panel)	Teleptor e: 25 0% (calculation) d using data from report using reapone calculations na calculations na calculations na calculations na voltarg, 2011). Cedne Pasal = 6%	Contex, education, egy, ethnolog		SOGS-PY & SOGS-L DSM IV-PY & DSM- IV-L (NODS)	13,007 in 2000 davled in the field cales.	70% (Phatyser participation in Bioget gambing = 33.2%)	Telephone SOG8-97: 0.2% (3-4), 0.7% (5-1), 1.5%, combined SOG8-97: 0.2% (5-1), 2.5% (5-1), 2.5% (5-1), 2.5% (5-1), 2.5% (5-1), 2.5% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.4% (5-1), 2.5% (5-1),	19	Teleptone SOCE- 97:18-72-1.44 - 53-0.95 Teleptone DOM 1944-53-1.35 Average = 1.15	male, 13-34 years die zene oblege Nachtlich and Neue Houses		Study is a solutionomic impact invatigation of the solution of the solution of the solution of the solution and problem generating.	<u>tile iheens si oosiile</u>	http://weitk.com/wood
DEL	WARE 1	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.	z	125 Random		telephone interview	w 61'	6 age, nace, 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 744066 People per EGM = 258.	. 62% (past 18- months)	2.17% (3-4); 0.68% (5+); 2.85% combined	2.29	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.			htp:/hdi.handie.net/	
DEL	oware t	1999-2000 18+	Health Sarvices Prilory Research Group, School of Urban Allens and Public Policy, University of Delawares (2020) Delawares Programs (School (1998)) Delawares Programs for the State of Delawares, Health and Social Services, Division of Substance Abuse and Mentel Health.	21	33		telephone interview?		aga, gender		IDSM-IV-L (NODS)	2,486 (CAbi in 1969, Population in 1969 was 753,338, Pisopie per EGM = 300.	72.3	% 0.4% (3-4); 0.3% (5*); 0.7% combined	0.87	0.7'1.19'.8' 1.59'.76 - 0.60%	males, ages 13 – 24; female between the ages of 45 and 64		Purpose of the recent was to skarly the social costs of garching. The prevalence of problem social of garching. The prevalence of problem secret aurways, both conducted by the University of Dataware 19th Res Coopgaptic Area Sorray, University of Dataware, 1952, 2000, The control of Sorray. Note: The right Res Area Starby Incident environment and the prevalence over who sanded in 27h. Code areas problems.	bliputhd handle nafi	
FLO	UDA 2	2001 18+	Shaping N. A., Ferguans, M. A., Frash-Pranta K., & Gold, M. S. (2002). Gambing and Photeima Raming Phonetene- Arrorg Adults in Florida. A Report to the Florida Council or Computative Gambing. Inc.	. 1	DH Rendom digit dialing 8 contact attempts; nandom selection within hosainhold	gentiling practices enrong Florida residents	telephone interview	 32.5% (calculate d from response rate criteria recommended by Williams & Volber 2011). 	aga, gender	Participated in at least one form of gambing in liatime and specific group than \$12 on gambing in some year.	SOGS-PY & SOGS-L; DSM IV-PY & DSM- IV-L (NODS)	11,349 ECXMs in 2002, Population was 16,396,515 in 2001, People per ECXM = 1420.	71	% SOCS-JY: 1.4% (3-4): 0.5% (5+); 2.0% combined SOCS-L: 2.6% (3- 4); 1.0% (5+); 3.6% combined DSM-V- PY: 0.4% (3-4); 0.7% (5+); 1.1% combined DSM-V- L: 0.6% (3-4); 1.0% (5+); 1.0% combined	1.089	SOCS-PY: 2.0 * 72 * 1.44 * .53 = 1.15 DSM-W-PY: 1.1 * 1.07 * Average = 1.05%	rrales, uges 15-29 and ages 50-63. Hispanica, Xrician-Americana, neve marindo, high achool degree or less; females ages 20-54; tebaco use; alcohol use and abuse; depression.	Policyinumberalliotta; cook or dog fighting; gamma of akill for money; EGMs		http://bdl.handle.net/	
FLO	804 2	2011 18*	Spectrum Generg Once, (2113), Genergling Haves Bland, 2013. Respects, A.L., & Scher, T.L., (2013), Genergling and Delines geneting procession arrows and an Product 2017 replacedare University of Reset Proces. Journal y 2017.		30 Backed galaxing unrenge of unclears are stabilized in the property of the stability of the stability of the stability of the property of the stability of the stability of the stability of the property of the stability of the stability of the stability of the property of the stability of the stability of the stability of the stability of the stability of the stability of the stability of the stability of t	genting prodices of Plunda weekens	bilephone interview	"The response rate rate among those househol s estimate to contact an eligibli individua was 7.45 (i.e., American Associati n of Publ Opinion Research Response	weighest to non-according wearver it has the rely presently particle, age and non-	Participater in at latations from dynamity in generative state of the second state of the second state at latations from of garobing in Materia (NODO).	1 SOGS-L DSM IN-PY & DSM- IN-L (NODS)		54.4	5 9008-12.7% (J-4.9% (2.2.6%)4.9% contined DBM-V- PY: 0.7% (J-4) 0.5% (J-4); 0.5% contained DBM-V- L: 1.4% (J-4); 0.0% (J-3); 2.6% contained DBM-V-			malate, younger age, rent her home, long in available Ploatie, home, how and the ploating of the health health readment on the external of income distribution	polari, cardici, sidei; polari michima (noti al a caano); use boolues.		<u>tila Jeren ka tekk</u>	
GEC	RGIA 1	1994 18+	Volberg, R.A. (1926). Gambing and Postein Cambing in Georgia. Report to the Georgia Department of Numan Resources. With contribution by J. Bolins. Volberg, R.A., Raitzes, D.C., & Bolies, J. (1997). Exploring the links bulven gambing, proteine gambing and self- exteem. Deviart Bahavior, 18, 321-342.	1	30 Shafiked to proportionally represent courty populations, based on the 1000 census. Readma sampling of households and readma selection of respondents within households, Up to 12 alterprise media to contact and matter, and a minimum of applic calibidus compresent with information tools the 1000 census, has amplie was board to be representative of the adult population of Georgia in terms of gender, nose, aque, mestal atlana, and income. However, includuals with the first able of adultual doublections the segreture individual with the set in a high, choose doublection the segreture individuals with the first able of adultual doublection the segreture individuals with the first able of adultual doublection was segreturely the observed of the segreture of the segreture and the segreture of the segreture individuals with the first adultual doublection was segreturely the segreture of the segreture of the segreture of the segreture of the segreture individuals with the first adultual doublection was segreturely the segreture of the segreture of t	"gambling practices of the cilizens of Georgia"	belephone interview	¥ 73	6 No - analysis of the prevalence ratios after weighting the sample by education of the produce asynchronic changes. The data presented are based on the unweighted sample.	Any gambling	SOGS-PY & SOGS-L	No EGMa in Georgia in 1992.	74	% SOGS-IY: 1.5% (3-4): 0.8% (5+): 2.3% combined SOGS-1: 2.8% (5+): 80 GS-1: 2.8% (5+): 4): 1.5% (5+): 4.4% combined	1.97	2.3 ° .72 ° 1.59 ° . 74 = 1.9%	no-White, male, young, and single; no differences in education or income; lower self-esteem			http://hdl.handle.net/	
GEC	RQIA 2	2000 18-	Ernshoff, J.C., Broomfeld, K., & Arganza, G. (2000). The Providence and Nature of Gambiling in Georgia: A Population Sarvay. Report to the Georgia Department of Human Resources. Adarta, Georgia State University. Ernshoff, J., Anthony, E., Lippy, C., Valentine, L. (2007). Gambiling Survey		Perhaps the same as done in 2007 by the same group.		telephone interview	w 42	6		SOGS-PY & SOGS-L	No EGMs in 1992. 130 EGMs in 2002.	62% lifetime	SDGS-PY: 2.4% (3+) SDGS-L: 5.0% (3+)	1.99	2.4 ° .72 ° 2.18 ° . 51 = 1.9%	Male; under 35; norwhite; income < \$35K			blo ihdi handa nati	
GEC	RGA 2	2007 18+	ror me Georgia Department of Human Resources. Adants, GA: Georgia Bolivningh, September 2007. Ernahott, J., Anthony, E., Leppy, C., Valentine, L. (2007). Gambing Survey, Santon J. Human, Pescuccas, Adants, GA: Georgia State University. September 2007.	11	XX sendom Nat of Issisphore numbers: alreading by gender, ethnicity, education, and income; renders selection within household; an in- fine alteringte available to income taken the labor from alteringte available to income taken the labor content included English-speaking, and a working household phone offers.		telephone interview	. 22	6	Not indicated, report indicates "If participants abated that they had ever wagened money or were asked the hepanory with which they engaged in the activity."	DSM-IV-PY & DSM-IV-L (NODS)	130 EGMa in 2006. Population in 2007 was 1544 730. People per EGM = 73.421.	80	5 DSM-W-PY: 1.1% (3-4); 0.4% (5+); 1.5% combined DSM-W-L: 2.8% (5+); 4); 1.4% (5+); 4.0% combined	1.49	15°1.19°1.44°. 53=1.4%	makes, non-white, under age 30; less than a high school education; earn teas than \$25,000 a year. multiple regression revealed that while the above characteristics were significarity associated with resolution pathological gambiling, their nelationship with the airgite characteristic of education level appears to be effects.			http://hdi.handia.net/	
INDI	UNA T	1990 18+	Leventhol & Howards, Guida, F.V., David Cred & Associates, & Malds Capiton Laborathy, (1920; November), Public States, States, States, States, States, States, Public States, States, States, States, States, et with Participation in the Indease State Lother, Indianapolia, IN: Leventhol & Horwath.	u, 11	15 Random digit dialing, with age and see quotes by county	"We are conducting a research project for the State of Indiana to find out how people feel about the lottery."	belephone interview	w 44.4% (calculate d from date container in report)	No — Te was not necessary to weight the responses since the sampling method assumes a representative sample of peedforts) over 15.	Participation in Indian Lottery gambing in gas 12 months (i.e., punchased at lease one Scient for the Instant, Lotte Cash or Daily Pick Games).	I DSM-IV-L (using 9 of the oritesta from the forthcoming DSM-IV). However, all of the questions were specific to follory gambling (not gambling memorial).	Indiana Jotkey introduced Oct 1989. No EGMs in 1990. 9	60.2% (participate in Inclassa Lottery I past 12 months); 34% played kottery in another state in past 12 months.	d 0.8% (2+) n		see comments	males; age 18 to 34	N/A Only lottery-existed questions asked.	This study was described by Lasieur (p. 27), 1029 ja being conducted 'b find on thom many adult Indiana maiderfa were pathological bittery adult indiana maiderfa were pathological bittery hypers, 'The survey did not count inhibiduals who has gambling poblems as a result of sport, cararon, process, or other forms of gunching unleas they also had an independent problem with bittery play.'This adulty is not reported in the tables or individed in the analyses.	http://htthandle.net/	

Location	Year Study Conducted	Age 1	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Respons e Rate	Weighting	Threshold for PG Questions	Assessment	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling	Standardization Calculations	Demographic Correlates of PG	Game 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	2,545 (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%	Prevalence 1.2%	0.8 * 1.49 = 1.2%	N/A - rates of pathological gambling too low to determine rates among	N/A - rates of pathological gambing too low to determine			
			Populations in the State of Indiana. Shreveport, LA: Gambling Studies Unit, Department of Psychiatry, Louisiana State University Medical Center.											combined			adult members of minority groups or among different types of gamblers	rates among adult members of minority groups or among different types of gamblers			
INDIANA	2005	21-59	Rodak, A. & Wolf, J. (2005). Garning and Betting by Adults, Age 21-59, in Indiana – 2005. Indianapolis, IN: Indiana University - Purdue University Survey Research Center.	. 7	51 Random selection within household; 10 contact attempts; the nespondents that resulted from this approach were found to be representative of the population of indiana, age 21-39 years old;	* to discuss some important issues regarding older adults in Indiana. State officials have asked us to help determine the attitudes and behavior of people	telephone interview	33.19	×.	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% Lifetin	respondents respondents			NIA	NA	There were separate but related reports for "60 Year Olds and Older" and "12-20 Year Olds".	bitp://di.handie.net	•
					based on recent Census findings for Indiana."	regarding gaming and betting of all types."								the symptoms it was determined							
														that this approach was not an effective measure							
IOWA	1989	18+	Volberg, R.A. (1994). The prevalence and demographics of	7	50 Stratified to proportionally represent county populations on the	a study of the gambling practices of the citizens of	telephone interview	(Refusal	No	any lifetime gambling	SOGS-L	Lottery introduced in 1985; riverboat gambling in 1985	(Lifetime = 84%)	of problem gambling. 1.6% (3-4); 0.1%	0.9%	1.7 * .72 * .60 *	male; lower education; unmarried	wagering on cards, honse and		http://www.pubmedd	-
IOWA	1995	18+	American Journal of Public Health, 84, 237-241. Volberg, R.A. (1995). Gambling and Problem Gambling in	15	selection of respondents within households were used. 500 Sample stratified to proportionally represent county populations,	study of the gambling practices of the citizens of lows	telephone interview	24%)	No - Note: To determine if education or income discrepancies		SOGS-PY &	Lottery introduced in 1985; riverboat gambling in 1985	72% (Lifetime =	combined SOGS-PY: 2.3%	2.8%	3.3 * .72 * 1.59 * .	male; under the age of 30; non-	games, and sports continuous types of gambling	Replication of 1989 study.	htp://hdl.handle.net	<u>.</u>
			Idea: A replication Survey, Les Montes, LK: Idea Department of Human Services.		figures; random selection of households and random selection of respondents within households used for first two-thirds of indexistences after sensitivities of 200 interest where the sensitivities and the sensitivities and the sensitivities and the sensitivities after sensitivities and the sensitivities and the sensitivities and the sensitivities and the sensitivities after sensitivities and the sensitivities and	_			controction agring anty to estimates or the prevalence or problem gambling in lowa, prevalence rates were analyzed after weighting the sample by education and then by income. These endowed estimates and the BLT come and and in order to and an and a set of the set and the set and in order to a set and the set and the set and the set and the set of the set o		5005-L		00%)	(3-4) 1.0% (5*); 3.3% combined SOGS-L: 3.5% (3-		14=2.0%	Cascasan; unmarried				
					screening potential respondents to identify makes between the age of 18 and 29; up to five attempts made to contact each number; respondents with lower levels of education and income are	3			maintain comparability with results from the 1989 survey.					combined							
IOWA	2005-2008	18+	Black, D. W., McCormick, B., Losch, M. E., Shaw, M., Lutz, G., & Allen, J. (2012). Prevalence of problem gambling in	3	acrewhat under-represented. 55 Telephone-based screen was conducted of randomly selected low households with at least 1 resident age 15 or older between July		telephone interview		No		90G5-L	Lottery introduced in 1985; riverboat gambling in 1985		SOGS-L: 2.2% (3- 4); 1.4% (5+); 3.6%			younger age; minority group status; lower income levels	strongest associations with disordered gambling included	Data were collected while recruiting controls fo an unrelated family study of PG; study not	r <u>bilp-Jaww.ncbi.nkn</u>	
			Iowa: Revisiting Shaffer's adaptation hypothesis. Annals of Clinical Psychiatry, 24, 279-284.		2005 and January 2008. Computer Assisted Telephone Interviewing (CATI) system used to collect the data. To match the demographic characteristics of family study probands, participants									combined				card games, bingo, outcomes of sports events with acquaintances, and pull-tabs.	designed as a survey to be generalized to the state population; survey not desgined to recruit a representative sample of adult lowars.		
					were acreered for persons who fell within specific demographic groupings by household location, age, sex, and education level. Exclusion oriteria included ever having been diagnosed with																
					paychesis or a neurologic electroir ans/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 i research executions.	n															
IOWA	2011 (Feb- May)	18+	Gornerman, M.E. & Lutz, G.M. (2011). Gambling Attitudes and Bahaviors: A 2011 Survey of Adult Iowans. Cedar Falts. IA: Center for Social and Behavioral Research.	17	100 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	"attitudes and experiences of lowars regarding gambling"	470 online completions; 1,230 (72,4%) telephone	175	% Household size, age, gender	Date	CPGI; DSM-IV- PY & DSM-IV-L (NODS); self-	15,547 EGMs in 2010. Population in 2011 was 3,062,309. People per EGM = 197.	a	2% CPGI: 2.6% (3-7): 0.6% (8+); 3.2% combined	0.94%	OPGI 3.2 * 58 * 1.44 * 53 = 1.42% DSM-IV-PY: 0.5 *	Males; age 18-34; high interest is several other leisure/recreational activities: tobacco and alcohol use	EGMs; casino table games; keno; internet gambling; horse racing; bings; games of personal		blip ihd handle net	4
			University of Northern Iowa. September 2011.		was available) to household that did not respond.		completions'				problems			DSM-IV-PY: 0.2% (3-4); 0.3% (5+); 0.5% combined		1.19 * 1.44 *.53 = 45% Average = 0.94%	and dependence	skil			
														DSM-IV-L: 0.6% (3 4); 0.6% (5+); 1.25 combined Self-							
IOWA	2013	18+	Lutz, G. M. & Park, K. (2014). Gambling Attitudes and Reduction: A 2013 Summer of Add Income. Code Edit. 10.	18	125 Dual-frame random digit dial (DFRDD) sampling methodology was	conducting a study about gambling in lows."	telephone interview	30%	age, gender, ethnicity, race, education, place of residence,		CPGI; DSM-IV-		771	Self-Report L: 2% 5% CPGI: 3.8% (3-7); 0.000 (3-5) (3-7);			Younger age groups; lower income			https://doh.iowa.go	*
			Center for Social and Behavioral Research, University of Northern Iowa.		included in the sample (564 landines and 1,262 celphones).			e Rate); 72% (Coppera	0		(NODS); self- report of problems			combined DSM-IV-PY: 0.6% (3-4): 0.4% (5+):			significant)				
								on Rate)						1.0% combined DSM-IV-L: 1.5% (2 4); 0.9% (5+); 2.41							
														combined; Self- Report-PY: 0.8% Self-Report-L:							
KANSAS	2012	18+	Kansas Department for Aging and Disability Services. (2012, November 23). Kansas statewide problem gambling study. Tradina servet. Torakia. ISS: Action:	16	500 The study was conducted with randomly selected landime and cell phone numbers located across the state, divided into four zones - three of which operativ sensition constituted the notheast		telephone interview			gambled in the past 30-days ("recent gamblers")				2.0%					The first two questions (age and location of residence) were quota items, the racial/ethnic manifers was information that was manufactured.	htp://media.khi.org/	
			andy, reprint report, repaint, etc. Autom.		southcentral and southwest regions, while the fourth zone was the rest of the state (400 specified interviews for each region).														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 flo	or	
																			of 133 Hispanic/Latino respondents was specified, to ensure accurate representation from this group in this zone.		
KANSAS	2017	18+	Learning Tree Institute at Greenbush Research and Evaluation Department. (2017). 2017 Kansas gambling survey: Results and Analysis. Topeka: KS: Kansas Devalues the Anion and Disnitific Research	1.5	55 Stratified random sample of households throughout the State of Kamass in September, 2017. This survey is a follow-up to a statewide survey conducted in 2012 to assess gambling mode and statewide survey conducted in 2012 to assess gambling															htp://www.kanaaspr	1
KENTLICKY	2003	18+	Kenharko Lantalahan Basaarch Commission (2003)	12	opinion about gambling, and awareness of problem gambling treatment.	rumose of this shafe is to help evaluate memblion	Nearhone interview	51.67	K, nender ene	nambled in the rest war	DSMUV.PY	No. ECMs in Kanturisy in 2002		15.075 (34):055	165	121101144		(From the sumarale GA study	A survey of Cambles Anonymeus (CA)	hits that handle not	
haniooki	2003	10*	Compulsive Gambling in Kentucky. Frankfort, KY: Author.	12	determine if the sample was representative of the general adult population in Kertucky, the demographics of the survey respondents were compared with data from the 2000 Census	behaviors		51.0.	a yenne, ege	gannand in the pass year	Dairity I	no conta in remacky in conta.		(5+); 1.2% combined	1.0 %	76 - 1.6%		included in the report) - Table 4.2 (p. 44) lists the types of cambino GA respondents	respondents was conducted as part of this study.		
																		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.			
haniooki	2000	10*	in Kentucky coal of Problem Gambing, (2009), Gambing in Kentucky: A Research Report on the Prevalence of Gambing among Kentucky Residents. Frankford, KY: Arthor	reported as 846 within report)	in general adult population in Kentucky, the demographics of the survey respondents were compared with data from the 2000 Common				a Server, efet tere		Darre	no conta in relinacy in 2000.	(2160116 - 20.37	4); 0.3% (5+); 2.05 combined		1.44 * .53 = 1.1%	and other racial minorities; never married, divorced or separated; employed an de individuals in			Chip Constant Section	
LOUISIANA	1995	18+	Louisiana Compulaive Gambling Study Committee (1996).	18	518 random samole	The wagering practices of the citizens here in	telephone interview	40	5 No - in order to maintain comparability with surveys in other	any lifetime gambing	SOGS-PY &	17.038 EGMs in 1999. Unknown number in 1995.	72	15 SOGS-PY: 3.4%	3.8%	4.8 . 72 . 2.18 .	residing in households with incomes of \$25,000 or less male, under the age of 30, non-	The Louisiana survey found two	Some details (e.g., prevalence measures) of th	te http://td.handie.net	
			Report to the Legislature of the State of Louisiana. Baton Rouge, LA: Author.			Louisiana *			states where the data have not been weighted.		SOGS-L			(3-4); 1.4% (5+); 4.8% combined SOGS-L: 4.5% (3		51 = 3.8%	Caucasian, unmarried, less likely to have graduated from high-school.	clusters of pathological gamblers: First, an older male population who primarily	1995 study reported in 1998 replication study.		
			Westphal, J. R. & Rush, J. (1996). Pathological gambling in Louisiana: An epidemiological perspective. Journal of the Louisiana State Medical Society, 148, 353-358.											4); 2.5% (5+); 7.05 combined				wagered on horse nacing and a younger male population who primarily wagered on video			
LOUISIANA	1998	18+	Volberg, R. A., & Moore, W. L. (1999). Gambing and Problem Gambing in Louisians: A Replication Study, 1995 to 1997. Benefit in Rev Colours of Reviewer Administration	18	500 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. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the U.S. Burner of the Course strategies and information from the Course strategies and the Course strategies and information from the U.S. Burner of the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information from the Course strategies and the Course strategies and information strategies and information strategies and the Course strategies and information strategies and information strategi	gambling practices of Louisiana citizena	telephone interview	58.6% (CASRO	No but effects of weighting were examined and effects were small.	gambled in lifetime	SOGS-PY & SOGS-L; DSM-	17,038 EGMs in 1992. Population in 1998 was 4,352,758. People per EGM = 255.	61.	5% SOGS-PY: 2.3% (3-4): 1.6% (5+):	3.6%	SOGS-PY: 3.9 *. 72 * 1.59 * .74 =	Age 18-24 and those aged 35-44; Black and Hispanics; never manied; consisted or diversely and	horse bettors; EGMs		htp:/hdi.handie.net	4
			University of New Orleans.		of households; random selection of respondent within households; up to 5 cellbacks.			approach			MR-PY)			SOGS-L: 3.3% (3- 4); 2.5% (5+); 5.85 combined		DSM-IV-PY: 2.8* 1.19* 1.59* .74 = 3.9% Average #	graduated from high school or from college.				
														DSM-IV-PY: 1.9% (3-4); 0.9% (5+); 2.8% combined		3.6%					
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	13	553 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 = 67.7%	3.0% (3-4); 1.6% (5+); 4.6% combined	2.7%	4.6 ° .72 ° .51 ° 1.59 ° .74 = 2.7%		Density of gambling venues per capita.		htp:/hdi.handie.net	
LOUISIANA	2008	18+	University. Esters, I., Bigger, R., Lacour, J., & Reyes, M. (2008). 2008 Louisiana Study on Problem Cambing. Prepared for	24	400 240 participants from each of 10 geographical regions; participants contacted randomly via telephone from a list of telephone numbers	a "a random study of practices of Louisiana residents s with regard to gambling"	telephone interview			gambled in lifetime	SOGS-L	29,149 EGMs in 2008. Population in 2008 was 4,410,798. People per EGM = 151.	Table 7.13. Frequency of	SOGS-L: 1.7% (3- 4); 1.4% (5+); 3.19	1.3%	3.1 ° .72 ° .51 ° 1.59 ° .74 = 1.3%			Information gamered from calls to the Gamblin Helpline (n = 50,250 calls) and the Louisians	• <u>http://hdi.handie.net</u>	1
			the Louisians Office for Addictive Disorders.		purchases for the study								Various Types of Gambling – State (p. 42)	combined					(2007) was also used to supplement the report Responses from the Louisiana Caring Communities Youth Survey, a survey of 106.35	s.	
													provides general participation by gambling format						Louisiana students in grades 6, 8, 10 and 12, were incorporated as data into the present study.		
LOUISIANA	2016	21+	Biggar, R., Jr., Esters, I., Dick, S. J., Chen, J., Burstein, K., Bergeron, M., Cooper, R., & Zeahah, P. (2017). The impact	2,4	02 Contracted by the University of Louisians at Lafeyette, Reconnaissance Market Research (ReconMR) conducted	We're conducting a survey of people in your community for the Louisiana Office of Behavioral	telephone interview			gambled in lifetime	SOGS-L		details. Table 4.16. Frequency of	SOGS-L: 5.4% (3- 4); 2.9% (5+); 8.3%			males		This prevalence study is the third in a series the began in 2002; The 2006 study include adults	M <u>htp:/picerdcenter.ic</u>	
			of gambing in Louaiana: 2016 study of problem gambing. Lafayette, LA: University of Louaiana at Lafayette. Retrieved from http://picardcenter.louaiana.		telephone surveys with a stratified sample of Louisiana residents. The survey instrument included questions regarding respondent's gambling behaviors, attitudes towards gambling, and	Health and the University of Louisiana at Lateyette concerning the gambling habits of Louisiana residents. ⁴							Participation in Various Types of Gambling – State	combined					15 and older to calculate rates, while the curren study used adults 21 and older.	rt	
			eduranseptoercontenties/ new20mpacrx20ms 20Gembing%20m%20Louisians_FINAL.pdf		awareness or resources for problem gambing. Potental respondents were screened to include only adults, 21 years of age or older, currently residing in Louisiana. Sample stratification around anual anual screenship services ten particuludificant	•							(p. 52) provides general participation by camblion format								
					geographical regions (n=240 per region). 65% of interviews were t be completed using wireless telephone sampling frame and 35% using landline frame.	b							details.								
MARYLAND	1988	18+	Volberg, R.A. (1934). The prevalence and demographics of pathological gamblers: Implications for public health. American Journal	7	50 Stratified to proportionally represent county populations on the basis of 1980 census figures. Random-digit claiing 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%	3.9 ° .72 ° .60 ° 1.59 ° .74 = 2.0%	male; non-White; lower education; unmarried	wagering on cards, horse and dog races, games of skil, dice games, and sports		htp://www.pubmedc	1
MARYLAND	2010	18+	or r seve filletti, 64, 237-241. Shinogle, J., Volberg, R.A., Park, D., Norris, D.F., Haynes, D., & Stoken, F. (2011). Gambing Prevalence in Maryland: A Baseline Analysis. Ballmoore MIY: Maryland Institute for A Ba	50	375 Stratified to represent the population of the four regions of the stat Random-digit dialing and random selection of respondents within households were used.	a. "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.	703	2% 1.9% (3-4); 1.5% (5+); 3.4% combined	1.9%	3.4 ° 1.19 ° .60 ° 1.44 ° .53 = 1.9%	under 30 years of age; male; African Americans; lower income; lower education	EGMs, wegering on private games and sports, Internet gambing		htp:/hdi.handie.net	
MARYI AND	2017		Policy Analysis & Research. Tracy, J.K. Maranta I., & Scheele, C. (2018). Reference.	14	10		Nearhone interview							Contorned			No.	ganzang.		hits that handle not	
MASSACHUSE	1 1989	18+	gambling prevalence in Maryland. 2017. Maryland Center of Excellence on Problem Gambling. Volberg, R.A. (1924).	d	750 Stratified to proportionally represent county populations on the	"gembling practices of the citizens of Massachusetta"	telephone interview	Refusal	No	any lifetime gambling	SOG5-L	No EGMs in Massachusetts in 1999.	(Lifetime = 50%)	2.1% (3-4); 2.3%	2.2%	4.4 * .72 * .60 *	male; non-White; lower education;	wagering on cards, honse and		http://www.pubmedc	
			The prevalence and demographics of pathological gamblers: Implications for public health. American Journal of Public Health, 84, 237-241.		basis of 1980 census figures. Random-digit dialing and random selection of respondents within households were used.			rate = 31%						(5+); 4.4% combined		1.59 * .74 = 2.2%	unmarried	dog races, games of skil, dice games, and sports			
MASSACHUSE	12012	18+	Nelson, Sarah E., Kleschinsky, John H., LaPlante, Debi A., Gray, Heather M., & Shaffer, Howard J. (2013). A Benchmark Study For Monitoring Exposure to New	5	511 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 \$3 cash-equivalent	nt.	online panel	70.55	% Not indicated.	gambled in past year	DSM-IV (AUDADIS-IV Gambling		53.1	5% 2.2% (3-4); 0.2% (5+); 2.4% combined			not indicated	not indicated	Sample limited by its size and representativeness.	http://hdi.handle.net	1
			Gambing upportunities: Final report, boson, MAC Livision on Addiction, Cambridge Health Alliance, a teaching affiliate of Harvard Medical School.		Incentive to compete the survey. I make who did not respond initially received a reminder email encouraging them to participate. The survey closed on December 25th after being active for three weeks. More them 27th of the Knowledne Dinal completed the						Section)										
					survey (n=511). Panel generally reflects the demographics of Massachusets with a few exceptions, the low initial recruitment rate, and consequent increased chance of selection bias, limits ou	r															
MASSACHUSE	12013-2014	18+	Volberg, R. A., Williams, R. J., Stanek, E. J., Houpt, K. A.,	95	confidence that the rates we observed in our sample are state- representative. 378 Probability sample of all Massachusetts adults and allowed survey	survey of "health and recreation."	online panel;	36.67	% gender, ethnicity	gambled in past year	CPGI; PPGM		72.	2% CPG: 8.1%			males; blacks; lower education	online gamblers; horse race	Baseline Population Survey for the SEIGMA	http://www.umasa.er	
			Zorn, M., Rodriguez-Monguio, R. (2015). Gambling and Problem Gambling in Massachusetts: Results of a Baseline Population Survey. Amhent, MA: School of Public Health and Month Pomerer. University of Manazati		respondents to complete the survey online, on paper, or by telephone; most recent birthday method selected as survey respondent; over-sampling in Western MA.		pen/paper; telephone interview							(CPGI=1-4); 1.7% (CPGI=5+); PPGM 7.5% (At-Rak				bettors; daily lottery games.	project.		
MICHIGAN	1997	18+	and Health Sciences, University of Massachusetts Amnerat. Gulickson, A. R., & Hartmann, D. (1997). Commission Gambling in Michigan: Final Benost Banett In	39	A2 Random-digit dialing: imposition of a screen to increase male	a state-funded study of the gambling practices of Michinen residents	telephone interview	43	5 Both weighted (race; income; education - See Table 8 p. 62) and unweighted estimates were modured.	gambled in lifetime	SOGS-PY &	9,157 EGMs in 1999. Unknown number of EGMs in 1997	76.	(Problem Gambler) 2% SOGS-PY: 2.1% (%4): 1.3% (%s)	1.9%	34'.72'1.44'.	males; non-whites; younger	horse or dog race players; hetling og cards ding, or viden		htp:/hdi.handie.net	e
			The Michigan Department of Community Health.		1.9 percentage points); however, underrepresentation of African- American respondents, of the lowest educational category (less than high school education), lowest income category (household				-greater produce.					3.4% combined SOGS-L: 3.2% (3- 4); 2.0% (5+); 5.2%				poker outside of legal casinos			
MICHIGAN	1999	18+	Gulickson, A. R., Hartmann, D., & Wiersma, W. (1999). A Survey of Gambling Behaviors in Michigan, 1999. Report	17	income below \$25,000) 117 Random-digit dialing; imposition of a screen to increase male respondents; underrepresentation of African-American	"The Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"	telephone interview	45	% No	gambled in lifetime	SOGS-PY & SOGS-L	9,167 EGMs in 1999. Population in 1999 was 9,897,116. People per EGM = 1080.	77)	combined 5% SOGS-PY: 2.0% (3-4); 1.2% (5+);	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,		http://hdl.handle.net	4
			to The Michigan Department of Community Health.		respondents, of the lowest education category (those with less that a high school education), and of the lowest income category (those reporting household incomes below \$25,000).	e .								3.2% combined SOGS-L: 3.1% (3- 4); 1.8% (5+); 4.9%				or video poker outside of legal casinos			
MICHIGAN	2001	18+	Gulickson, A. R., & Hartmann, D. (2001). A Survey of Gambling Behaviors in Michigan, 2001. Report In The Michigan Denastiment of Community Houses.	12	211 Random-digit dialing: random selection within household; imposing a screen to increase make respondents; African Americans are undergenerated.	g "the Michigan Legislature has asked us to survey Michigan citizens on gambling in the state"	telephone interview	35% (The response rate for	No - "As we reported in the 1997 study, weighting does effect estimates of gambing problems in Michigan, though the manifulas land is had a half a percentage optimized for the "	gambled in lifetime	SOGS-PY & SOGS-L	23,123 EGMs in 2002. Population in 2001 was 10,005,255. People per EGM = 433.	71.	(3-4): 1.0% (5+); 2.8% 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		htp:/hdi.handie.net	i.
			angen angen an de Constanty restel.					the special sample o	f					SOGS-L: 2.8% (3- 4); 1.7% (5+); 4.5% combined							
								persons with an interest													
								in gambling was 42 narrent 1													

Location	Year Study Age Conducted	Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	Respons e Rate	Weighting	Threshold for PG Questions	Assessment	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
MICHIGAN	2005 184	Hadmann D. J. (2007)	99	7 Bandom doit dialow the statewide seconds under recoverants	"People shard or hel money on a variable of things	Nervone interview	20%	No & weighting percentum was used to provide a statewide	cambled in Ifelime	SOCS-PY &	23.039 EGMs in 2005. Previation in 2005 was	70.9%	8005JPC 1 15	Prevalence	5 201 2212 181	Are (18,29) and race (Black)	Table 5. Demant Distribution of		Min (hd) handle nat	
		A Survey of Gambling Behaviors in Michigan, 2008.		males, minorities, and the youngest, least educated, and poorest	including lottery, charitable games such as raffies or		(Refusal	sample of size 957 that is weighted to represent the adult		SOGS-L	10,095,643. People per EGM = 438.		(3-4); 0.9% (5+);		51 = 1.6%	appear to have some correlation to	Current SOGS Score by			
		Western Michigan University for the Michigan Department		NEEDERDS OF THE EGGS.	casinos, sports, cards and dice. We will ask you about		71%).	are not reported because of their small effect and the lack of					SOGS-L: 2.7% (3-			SOGS (Table 5 Percent in SOGS	(p. 18) provides details. Note:			
		of Community Health.			whether you have ever participated in these activities and whether you have participated in the past 12			such practice in other studies.					4); 1.4% (5+); 4.1% combined			Grouping by Demographic Categories - p. 17).	"small numbers of respondents for particular gambling activities			
					months. We will ask about the extent of your participation and how gambing affects other aspects of												make several of the estimates urreliable."			
					your life."					00.00										
1000000	10 1000 10-1	P. L. (1990). Adult Survey of Minnesota Gambling Behavior	r	areas was obtained from Survey Sampling, Inc.; Disproportionale	chance in Minnesota"	seepitone marries		geographic areas).	Genome at here here	(using the			(5+); 2.5%	2.0	1.00 = 2.6%	under the age of 34	outside of Minnesota; bingo, bet	place at the same time.		1
		Department of Human Services, Mental Health Division.		vas intentionally weighted to include 45% households from St.						is a past-year			compined				Minnesota for casino games			
				Louis County, 10% Clay County, 45% Twin Cities Metropolitan Counties: nine counties total: one subject per household contacted:						measure with some wording										
				random selection within household.						charges to										
										guilty -> bad;										
										LO.Us;										
										questions about horrowing	1									
										altered to single	1									
										open-end										
MINNESOT	TA 1994 18-3	4 Emerson, M.O., Laundergan, J.C., & Schaefer, J.M. (1994).	102	5 Disproportionate random sample from the seven Twin Cities metro	short survey concerning betting or genes of chance in	telephone interview	82	Ves - to compensate for oversampling of nonmetro residents and	gambled in past year	SOGS-PY	Unknown number of EGMs in Minnesota in 1994.	65%	3.2% (3-4); 1.2%	4.6	5 4.4 * .72 * 1.44 *	less well-educated; divorced; never			htp://archive.leg.sta	http://dx.doi.org/10
		Adult Survey of Minnesota Problem Gambling Behavior; A Naarta Assessment: Charnes 1993 to 1994. St. Paul: State		counties; ten counties total; Sample intentionally weighted to include 45%; braseholds from Twin Otias; 25% St Louis Cramby	Minnesota			fertales.		(SOGS-M)			(5+): 4.4%		1.00 = 4.6%	married (partly due to younger age of reasonatent with birth SOCS-M				
		of Minnesota Department of Human Services, Mental		15% Clay County, 15% Olmated County; Only one subject was												scores); male; Native Americans				
				household.																
		problem gambling among adult Minnesotans: Changes																		
		1990 to 1994. Journal of Gambling Studies, 12(3), 291-304. doi:http://dx.doi.org/10.1007/bif/01539324																		
MISSISSIPI	PI 1995 18+	Volberg, R. A. (1927). Gamblinn and Pohlam Gamblinn in Mississinni: A	101	4 Random selection of households and random selection of responsibility actual sample within bruncholds.	"a study of the gambling practices of the Citizens of Massasinn"	telephone interview	70	% gender, ethnicity	gambled in lifetime	SOGS-PY & SOGS-I	37,717 EGMs in 1999. Unknown number in 1996.	495	SOGS-PY: 2.8% (%4): 2.1% (%4):	3.9	% 4.9 * .72 * 1.44 * . 75 = 3.9%	Lifetime: male, under the age 30, never married	casino gambling, sports betting and wagering on card games		htp:/hdl.handle.net	4
		Report to the Mississippi Council on Computative Gambling		represented males and blacks in the population. The actual sample									4.9% combined			Past Year: under age 30, divorced	not at a casino; pari-mutuel;			
		Research Report Series 97-1). Mississippi State:		the population.									4); 3.1% (5+); 6.8%			or separately, employed, back	EGMs)			
		Center.											compined							
MISSOURI	1981 18-0	8 Cunningham-Williama, R.M., Cottler, L.B., & Compton, W. M. (1998).	2,954 (50 cases omitted because of	Multistage sampling; Representative household sample of St. Louis adults.				Yes - to account for oversampling of African Americana, clustering and nonresponse.		DSM-III-L (DIS- III)	No EGMs in Missouri in 1981.	50.7% reported placing a bet or	5.45% (1+)			male; younger; separated or dvorced; African American		Results very tentative because of the unknown weighting factor that should be applied to the	htp://www.pubmedc	1
		Taking Chances: Problem Gambling and Mental Health - R earths from the	missing pambling access data)									gambling at least twice in their loss						DIS-III and the fact that DIS only has 4 mentions, whereas the DSM-III has 5 criteria		
		St. Louis Epidemiologic Catchment Area (ECA) Study.	,															This study is not included in the tables or the		
MONTANA	1992 18+	Volberg, R.A. (1992). Gambling Involvement and Problem	102	0 Random selection of respondents within households; up to 5	' gambling practices of Montana citizens'	telephone interview	63	% No	gambled in lifetime	SOGS-PY &	Unknown number of EGMs in 1992.	73% (noted as 74%	SOGS-PY: 1.5%	1.9	% 2.2 * .72 * 1.59 * .	under the age of 30; noted as being	more likely to have played	a a jaa	htp://archive.orpide	4
		Gambling in Montana. Albany, NY: Gemini Research.		attempts to contact each number; only difference between sample compared to the 1990 United States census is underrepresentation						SOGS-L		in 1996 report)	(3-4); 0.7% (5+); 2.2% combined		74 = 1.9%	more likely to be female than in any other state	EGMs and less likely to have wagened on sports or card			
				of Native Americana.									SOGS-L: 2.3% (3- 4): 1.3% (5+): 3.6%				games than problem and nathropoical gamblers in other			
													combined				states			
MUNIANA	12045 10*	Montana- Masoula. (1998).	122	procedure using a Kish grid used; Random cross-section of	to gather information on gamping in Montana and its economic and social impacts"	seephone inservew	6.3	s age, sex	in lifetime	SOGS-L; DSM-	879,533. People per EGM = 45.	/05	(3-4); 1.6% (5+);	3	72 * 1.44 * .76 =	separated; equally likely to be male	EGMS, IOSHY, SCRICH TOKETS	study; an additional sample of 108 American	http://archive.org/ge	1
		The 1995 Montana Gambling Study. Missoula, MT: Author. (Note: Print version contains technical appendices).		Montana adults; designed to ensure that the respondents represented a statistically accurate cross- section of Montana						W-PY			3.6% combined SOGS-L: 2.9% (3-		2.84% DSM-IV-PY: 2.5 *	or female; lower educational attainment		Indiana living on the Plathead Reservation also surveyed.		
				adults (17 hearing-impaired respondents received questionnaire in mail. 2 translators obtained for those who did not speak English).									4); 2.8% (5+); 5.7% combined		1.19 * 1.44 * .76 = 3.25% Average =					
													DSM-IV-PY: 1.5%		3.0%					
													2.5% combined							
NEVADA	1975 18+	U.S. Commission on the Review of the National Policy Toward Gambling. (1976). Gambling in America: Final	296 (Nevada residenta	accertained whether the respondent had lived in Nevada for less	"One thing that facilitated the data collection was the organization of the interview itself. It began by	face-to-face residential	70	% gender, region		"Cirical analysis" based	Unknown number of EGMs in Nevada in 1975	785	supplementary		Nevada: 2.6% National: 0.8%			This study is not included in the tables or analyses.	htp:/hdl.handie.net	1
		Report. Washington, DC: Author.		than 18 months or had moved to Nevada primarily because of the availability of legal gambling. If either of these conditions applied.	questioning respondents about what they do for recreation, additionally eliciting how much they spent.	interviews				on a) the amilarity of the			sample (n=296) = 2.6% "probable							
				the individual was not interviewed."	on recreation and vacations, thus acclimating them to					respondent			compulsive*							
					They were then led to discuss their exposure to other					15 questions			women=2.0%);							
					about gambing laws in their state and their desire for					274 known			(n=1,735) = 0.8%							
					or opposition to legalization of different games of chance, and only then were they questioned about					compulsive gamblers			"probable compulaive"							
					what games they bet on, how often they bet, and how much money they wapened" (p. ix)					answered the same questions:	5		(men=1.1%; women=0.5%).							
										b) observations recorded by the										
										interviewer at										
										interview; c)										
										reported by the										
NEVADA	2000-2001 18+	Volsero, R.A. (2002).	221	7 "beo-ohase probability sample". The first phase involved identifying	"we are conducting a survey of people in your	telephone interview	24%	Region, gender, age	gambled in lifetime	respondent. SOGS-PY:	198,232 EGMs in 1999. Population in 2000 was	67.95	SOGS-PY: 2.9%	2.7	SOGS-PY: 6.4 *.	males: adults 18 to 34: minorities:	EGMs, bingo, horse/dog races,		http://hdl.handle.net	
		Gambling and Problem Gambling in Nevada. Report to the		approximately 2,200 residential households with telephones in	community for the State of Nevada about people's		(CASRO			DSM-IV-PY &	1,998,257. People per EGM = 10.		(3-4); 3.5% (5+);		72 * 1.44 * .53 =	employed in gaming industry; high	cardrooms			
		NV: Department of Human Resources. Carson City, NV: Department of Human Resources.		grid) to respond to a brief screening interview. The second phase	attudes toward gambing		menos)			(NODS)			DSM-IV-PY: 1.8%		DSM-IV-PY: 2.1 *	household incomes under \$35,000;				
				involved selecting a stratified random group of 733 respondents from the first phase for a lengthier interview. The sample is									(3-4); 0.3% (5+); 2.1% combined		1.19" 1.44 * 53 = 1.9% Average =	never married				
				representative of the adult population of Nevada; instrument also translated into Spanish: up to 15 calibacka; achieved sample was									DSM-IV-L: 3.0% (3-4): 2.1% (5+):		2.7%					
				representative of adult population of Nevada, as determined by									5.1% combined							
NEW JERS	EY 1985 18+	Volberg, R.A. & Steadman, H.J. (1989). Prevalence	100	D Stratified to proportionally represent county populations on the	"gambling practices of the citizens of New Jersey"	telephone interview	Refusal	no	any lifetime gambling	SOGS-L	Unknown number of EGMs in New Jersey in 1988.	(Lifetime = 92%)	2.8% (3-4); 1.4%	2.1	% 4.2 * .72 * .60 *	male; non-White; lower education;	wagering on cards, horse and		Mp /ap psychiatry	a http://www.pubmed
		estimates of pathological gambling in New Jersey and Maryland. American Journal of Psychology, 146(12), 1618-		basis of 1980 census figures. Random-digit dialing and random selection of respondents within household.			rate = 35%						(5+): 4.2% combined		1.59 * .74 = 2.1%	unmarried	dog races, games of skill, dice games, and sports			
		1619.																		
		Volberg, R.A. (1994). The prevalence and demographics of nativizorical namblars: implications for ratific health.																		
		American Journal of Public Health, 84, 237-241.					-													
NEW JERS	EY 1990 15+	Reily, P. & Guida, F. (1990). Pathological Gambling Prevalence in New	85	8 Randomly selected computer generated telephone numbers provided by Survey Sampling, Inc.; stratified by county and sex	study of recreational behavior among otizens of New Jensey	belephone interview	29.0	N No		9 of the 10	Unknown number of EGMs in New Jersey in 1990.		5.8% (1+); 3.0% (2+)	3.4	% 5.8° 45° 80° 2.18 = 3.4%	male; earned less than \$15,000 per year; younger persons; older	 lottery play; casino betting; slots; horse betting; playing cards. 	Used a slightly younger age (15+) than many other prevalence surveys.	htp:/hdi.handie.net	1
		Jersey 1990 Final Report. Report to the New Jersey Dept of Higher Education. Piscataway, NJ: University of Medicine		based on 1987 census.						questions proposed for the						persona				
		and Dentistry.								forthcoming DSM-										
										IV; 6 of the 9										
								Mar and the second second second		the term 'ever')										
NEW JERS	ET 2015 10*	Prevalence of Online and Land-Based Gambling in	+ 2,134 online panel)	numbers in the pool of eligible numbers, stratified sampling to		& online panel	based or	tes - gender, age, ethnicity, region		Gambling		69.80%	disorder; 14.9%				gambing activities, and	disordered gambling were extremely high;		1
		New Jersey. Report to the New Jersey Division of Gaming Enforcement. New Brunswick, NJ: Authors.		ensure minimal age and gender quotas; random selection using most recent birthday method.			CASRO and			Severity Index (PGSI)			problem gambling				gambling at both online and land-based (mixed) venues	survey includes separate section on high risk stocks and daily fantasy sports; study also		
							AAPOR											examined the relationship of gambling status to		
							8.											mental health problems		
+		prevalence and group characteristics. Substance Use &	- refusals = 534)	distribution of respondents was skewed toward younger persons.		seepitone marries			ganzarg in manna	Gambling		represented the	pathological			single individuals; separated or		corrections for the sampling strategy (selected	inprotocologica.	1
A (2-State	/ANI	Misuse, 25(5), 477-490. doi:10.3109/10828088909039213								other questions		rumber of respondents who	gamblers = 4.12%; "probable"			dvorced; annual household income less than \$20,000		for self-defined "gamblers") and for the PG measure which is based on 28 items clustered		
Shudy)										to get a "hard signs" of		both perceived	pathological camblers = 3.37%					into 5 "tests" with a positive score on any item in a "test" leading to a positive score on that test		
										gambling		thermselves as camplers and ware						and the sum of the test scores yielding a searcodent's intel acces. An orbit ratio method		
										(CCSM)		willing to disclose						which expresses the odds in favor of being a PG		
												interview") [unclear						prevalence. Survey included adults residing in a		
												as to time period for statement]						nne-county area of southeastern Pennsylvania and southern New Jersey. This study is not		
NEW MEXIC	CO 1995-1998 18+	New Mexico Department of Health & University of New	2674 (1,279 in 1996	Stratified based on county population; random digit dialino;		telephone interview		10	Respondents were surveyed regarding their	Mix of DSM-IV	6,300 EGMs in 1999. Population in 1998 was		Gamblers were			younger, more college education.	playing cards for money, dice	included in the tables or analyses.	http://dx.doi.org/10.1	
		Mexico Center on Alcoholism Substance Abuse and Addictions. (1995). New Mexico Survey of Cambles	and 1,395 in 1998)	American Indiana, possibly because of the low number of household phones, were under sampled by about 50%					gambing behavior in the 30 days preceding the cambling survey	questions (13) and SOGS	1,733,535. People per EGM = 275.		categorized as experiencing			less likely to be married, disability/unemployment, Hisnaric	gambling, and paper games			
		Behavior. Santa Fe, NM: Author.								questions (4)			"low/moderate			,				
		Starling, R., Blankenship, J., May, P., & Woodall, G. (2009).											they reported any							
		International Journal of Mental Health & Addiction, 7(1),											also reported no							
		138-148. doi:10.1007/a11469-008-9163-3											serious problems: (1) one or more low							
													problema, (2) one moderate problem.							
													or (3) two low							
													moderate problem.							
													categorized as							
													"serious problems"							
													of the following: (1)							
													one or more serious problems.							
													(2) two or more moderate							
													problems, or (3)							
													problems in							
													combination with one more moderate							
													problema. 8.2% were							
													identified as having low/moderate							
													problems, while							
													identified as having							
													serious problem gambling.							
NEW MEXI	CO 2005-2006 18+	Volberg, R.A., & Bernhard, B. (2006). The 2005 Study of Gambing and	285	D Random-digit dialing, minimum of 8 attempts to establish contact; questionnaire translated into Spanish: oversample of 559 Nativa	"a survey in the State of New Mexico about people's attitudes toward	belephone interview	47% ("comple	age, ethnicity	DSM-IV-PY & DSM-IV-L (NODS): gambled more than 5 times in lifetime: CPGI: Post verse	DSM-IV-PY & DSM-IV-L	14,881 EGMs in 2005. Population in 2005 was 1,954,599. People per EGM	68%	CPGI: 2.2% (3-7); 0.6% (8+); 2.8%	1.2	% CPGI: 2.8 * .58 * 1.44 * .53 = 1.2%	never married; disabled; unemployed; male. Hispanic; Inver	Bingo; wager privately; aporta befora; casino camblera	Interviewed a separate oversample of 589 Native American residents of	htp:/hdi.handie.net	4
		Problem Gambling in New Mexico. Report to the Responsible Gaming Association of New Mexico. Notfreevention MA	•	American New Mexico residents aged 18 and over.	gambling"		on rate") 37%		gambler	(NODS); CPGI	- 131.		combined DSM-PY: 0.7%-/%-		DSM-PY: 1.3 * 1.15 * 1.44 * .53 = 1.25	education; Native Americana		New Mexico.		
		Gemini Research.					(more						4); 0.6% (5+); 1.3%		Average = 1.2%					
							ve						DSM-L: 1.1% (3-4);							
							approach	0					1.1% (5+); 2.2% combined							
NEW YORK	< 1985 18+	Volberg, R.A. & Steadman, H.J. (1985). Refining prevalence estimates of pathological gambling. The	100	D Random digit dialing: sample stratified to proportionally represent the counties of New York on the basis of 1950 census ficures:	"a study of the gambling practices of the Citizens of New York State"	telephone interview	65	N no	gambled in lifetime	SOGS-L	No EGMs in New York in 1999.	(Lifetime = 84%)	2.8% (3-4); 1.4% (5+); 4.2%	2.1	% 4.2 ° .72 ° .60 ° 1.59 ° .74 = 2.1%	males; under age 30; Black; Hispanic; lower incomes (less than			htp://ajp.psychiatryc	abity (hd) handle ne
		American Journal of Psychiatry, 145(4), 502-505.		instrument also translated into Spanish; lowest education levels somewhat underecessented.									combined			\$25,000); less education (not graduated from high school)				
		Volberg, R.A. (1996). Gambling and Problem Gambling in New York: A 10, Yaar Bankrating Survey. 1998 to 1998																		
		Report to the New York Council on Problem Gambling.																		

Location	Year Study Ag Conducted	e Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	e Rate	a Weighting	Threshold for PG Questions	Assessment Instrument	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Comments	Reference URL	Reference URL
NEW YORK	1995 18	 Volberg, R.A. (1996). Gambling and Problem Gambling in More Volt. A 10 Your Backeting Science. 1986 to 1996. 		1829 Random selection of households and random selection of	study of the gambling practices of the Otizens of New	r belephone intervie	w 72%	Yes - to ensure sample would be representative of the distribution of the ensurement of the data without the effective	gambled in lifetime	SOGS-PY &	No EGMs in New York in 1999. Unknown number in	80%; (Lifetime =	SOGS-PY: 2.2%	Prevalence	6 SOGS-PY: 3.5 *.	males; under age 30; non-	continuous forms of gambling		htp:/hdl.handle.n	-
		Report to the New York Council on Problem Gambling. Roaring Spring, PA: Gemini Research.		was determined that the sample would not meet quotes for males or for population distribution in the state: began scheening for males	n Tota Jawa		rate	population distribution. Details available in Table 2 (p. 8).		IV-PY (DSM-IV- MR)		au n)	3.6% combined SOGS-L: 4.7% (3-		1.98% DSM-IV-PY: 2.5 *	Calculater, crimeries				
				respondents in eligible households; post-stratification of sample to correct for population distribution; individuals with lower education			eligible responde						4); 2.6% (5+); 7.3% combined		58 * 1.44 * .53 = 1.11% Average =					
				undemepresented.			nts); 365 (respons	5. 18					DSM-IV-PY: 1.6% (3-4); 0.9% (5+);		1.5%					
							among						2.5% combined							
							househo	ed .												
NEW YORK	2005-2006 18	 Rainone, G., Marel, R., Gallati, R. J., & Gargon, N. (2007). Gamblino 		5100 Random digit dialing		telephone intervie	w Between 45% -	gender, age, region, ethnicity, nativity and employment status		DSM-IV-PY (NODS)	16,555 EGMs in 2005. Population in 2005 was 19,305,183. People per EGM = 1165.	67	% 0.5% (3-4); 0.4% (5+): 0.9%	1.25	6 0.9 * 1.19 * 1.44 * 76 = 1.2%	males; younger adults; Blacks; Hispanics: never manied: employed		The survey methodology is described in a separate report. '2005 CASAS Household	htp:/hdl.handle.n	<u>at</u>
		Behaviors and Problem Gambling among Adults in New Yo k State: Initial	21				50%						combined			full or part time		Survey Technical Documentation." (This report not available online).		
		Findings from the 2006 OASAS Household Survey. NYS Office of Alcoholism and Substance Abuse Services.																		
CAROLINA	2005 10	 Division or Mental Instant, Developmental Disabilities and Substance Abuse Services. (2007). Effects of the North Carolina State Lottery on the 		(Settlering questions included in tandom assessed seephone surve (North Carolina Behavioral Risk Factor Surveillance System (BDFSS)) of adults that collects information on health.	North Carolina residents."	seephone inserve		Tes	none	prevalence for nonhiem	8,663,242. People per EGM = 2412.	28.6%; Lifetime =	2.1% based on a single question that eskert reprovidents			education; \$15,000-\$24,999 bousehold increme		behaviors among adult North Carolinians prior to the sale of the first lottery ticket on March 30	http://doingline.http://	1
		Incidence of Gambling Addiction.		behaviors, and utilization of health services in all months of the vear.						gambling, or the percentage of		30.37	whether they were cambling					2005		
										the adult general			more than they thought they							
										population with a gambling			should.							
										problem, was based on a										
										that asked										
										whether they were gambling										
										more than they thought they										
NORTH	1992 18	 Volberg, R.A. & Silver, E. (1993). Gambling and Problem Combine in North Database. Based in the North Database 	1	1517 Random sample of telephone numbers proportional to working	study of the gambling practices of the Citizens of Nort	th telephone intervie	w 65	No	gambled in lifetime	SOGS-PY &	Unknown number of EGMs in North Dakota in 1992	. 73	% SOGS-PY: 1.3%	1.75	2.0 ° .72 ° 1.59 ° .	Lifetime: under 30 years of age;	pull-tabs; bingo	Survey prior to the establishment of casinos in	htp:/hdihandle.n	ati
URADIA		Department of Human Services, Division of Mental Health. Abary, NY: Gemini Research.		respondents within households; demographic data from random sample compared to data from 1950 U.S. census; no significant						300370			2.0% combined SOGS-L: 2.5% (3-		14-114	income. Current: under 30 years of age:				
				differences in terms of ethnicity; respondents in sample were less likely to be male and under the age of 25 than the general									4); 1.0% (5+); 3.5% combined			non-White; somewhat less likely to earn				
NORTH	2000 18	Volberg, R.A. (2001). Gambling and Problem Gambling in		population. 5002 Random selection of households and random selection of		telephone intervie	w 71%	Yes - the data were weighted to ensure that the results of the	gambled in lifetime	SOGS-PY &	2,500 EGMs in 1999. Population in 2000 was	69.8	% SOGS-PY: 0.7%	1.25	50GS-PY: 2.1 *.	\$25,000 or more annually. age 18 to 24; male; Native	horse race betting; casino table		htp:/hdi.handle.n	
DAKOTA		North Dakota: A Replication Study, 1992 to 2000. Report to the North Dakota Office of the Governor. Biamands, ND: Office of the Covernor.	5	respondents within households; achieved sample was quite representative of the total adult population in North Dakota, as redirected the florence of the Context			(CASRO method)	 survey could be generalized to the adult population of North Dakots; The first set of weights (WT_SHORT) treated the oriented present for Rhomo One are accessed in an adult in 		N-PY & DSM-	642,200. People per EGM = 257.		(3-4); 1.4% (5+); 2.1% combined		72 * 1.44 * .74 = 1.61%	Americans; widowed, divorced or separated; less than a high school	games; pultabs, EGMs			
		Citie of the opposite.		earrands by the bareau of the Centeral.				selector of eligible adults in North Dakota, except that male and female adults of ciliarent area in each of the four regimes of		re-c (recura)			4); 1.8% (5+); 3.8%		1.19 * 1.44 * .74 =	annual household incomes between \$20,000 and \$25,000				
								North Dakota had different probabilities of completing the screener. The second set of weights (WT_LONG) adjusted for					PY: 0.4% (3-4); 0.3% (5+); 0.7%		1.2%					
								both the differential probabilities of selection for the full interview based on gambling frequency, for differential non-response by					combined DSM-IV- L: 0.5% (3-4); 0.4%							
OHD	1085	Colletion B P (1985) The rescalence rates of nation/optical		801		Manhone intervie		differential non-response by gambing frequency at Phase Two.		investory of	No ECMs in Ohio in 1959		combined In Ohio 2.5% of all					The IGB/CCSM renteably remaines additional	http://dx.doi.org/10	0.1 bits lide doi con/10
Grad	1903	gambling: A look at methods. Journal of Gambling Behavior. 5, 22,41, doi:10.1002/8/001022135				seeptone marrie				Gambling Behavior /			adults were described as					corrections for the sampling strategy (selected for self-defined "nembles") and for the PG	1001010000	
		Voberg, R.A. & Banks, S.M. (1990). A review of two								Cumulative Clinical Signs			"probable" and another					measure which is based on 28 items clustered into 5 "tests" with a positive score on any item in	in .	
		measures of pathological gambling in the United States. Journal of Gambling Studies, 6(2), 153-163. doi:10.1007								Method (CCSM)			3.4% as "potential" pathological					a "test" leading to a positive score on that test and the sum of the test scores yielding a		
		/BF01013495											gamblers.					respondent's total score. An odds ratio method, which expresses the odds in favor of being a PC	L G	
																		for each total score, is used to estimate prevalence. CCSM instrument also used in the following contents of providence of the		
																		P. & Lang, M.H. (1985). The prevalence rate of pathological gambling in the Delaware Valley in	f n	
																		1984. Report prepared for People Acting To Help, Philadelphia, PA. This study is not		
OHID	2012 18	 Massatti, R., Starr, S., Frohnapfel-Hasson, S. & Martt, N. (2015: Extension). 2012 Survey of Al-Disk and Publism 	2	3500 Multistage random area probability sample for the state of Chio; oversemption of R00 in each area where a casino will menda	"a study on people's thoughts and feelings on remblics"	telephone intervie	w 'availabi	le age, nace, and gender	gambling in past 12 months	CPGI		56.7	% 0.3% (3-7); 0.3%			Of the al-risk group, a majority are male and batesen the area of 15.	casino gambling	Included in the tables or analyses. Two items that measure community attitudes and nementions of nembino renhiems were	htp://mha.chip.go	nd dx.doi.org/10.4309/
		Gambling Prevalence Among Ohioana. Columbus, OH: Ohio Department of Mental Health and Addiction Services.		(Cuyshops, Lucas, Franklin, and Hamilton Counties) and 1,200 surveys statewide. Sample was constructed by identifying zip			request*						combined			24 years old. In some areas of the state a slightly larger percentage of		added to the survey instrument.		
		http://mha.ohio. gov/Portals/Diassets/Research/Reports/2012-Survey-of-Al-		codes and then by random selection of individuals within zip code.												al-risk gamblers were African- American.				
		Rak-and-Problem-Gambing-Prevalence-arrorg-Ohioans. pd : Massatti, R. R., Starr, S., Frohnapfel-Hasson, S., &																		
		gambling prevalence among Chicara. Journal of Gambling Insurance 34, 32-34, doi: 10.4370/bit 2016.34.3	,																	
OKLAHOMA	2015-2016 18	 Paulson, R., & Chandler, M. (2016). Oklahoma gambling prevalence study. Prepared for Oklahoma Association for 	3	2535 Options for respondents to complete an online survey, a paper survey mailed with prepaid return envelope, or a telephone survey.	*you will be asked questions about personal recreation, social gaming, gambling experiences you	online panel; pape survey; telephone	er -		gambling in past 12 months	PPGM; DSM-IV DSM-V	6	55.4	% PPGM: 3.5% (Problem /						htp://www.odmha	an http://public.tableau
		Problem and Computative Garning and the Oklahoma Department of Mental Health and Substance Abuse			have had (including online), and awareness of gambling treatment in Oklahoma."	survey							Pathological); DSM-IV: 1.0%							
		org/eda/CAPCG_SummaryReport_042015.pdf											(Severe); USM-V: 0.9% (Severe).							
OREGON	1997 18	 Volberg, R.A. (1997). Gambling and Problem Gambling in Oregon. Northampton. 	1	1502 random selection of households and random selection of respondents within households; stratified sampling frame after	"a survey of people in your community for the State of Oregon concerning the gambling practices of Oregon	f belephone intervie	w 51% (CASRO	age	gambling in lifetime	SOGS-PY & SOGS-L; DSM-	8,848 EGMs in 1999. Unknown number of EGMs in 1997.	51.6	% SOGS-PY: 1.9% (3-4); 1.4% (5+);	3.45	6 SOGS-PY: 3.3 *. 72 * 1.44 * .76 =	male; under the age of 30; non- White; divorced, separated or never	illegal types of gambling. particularly sports, dice and		htp:/hdl.handle.n	<u>10</u>
		MA: Gemini Research Inc.		completing approximately two-thirds of the interviews in order to obtain data from a representative sample of men and young adults	ctizens*		(boffern			IV-PY (DSM-IV- MR)			3.3% combined SOGS-L: 3.1% (3-		2.60% DSM-IV-PY 3.3 * 1.19 * 1.44 *	married	games of skill; EGMs; card games; bingo			
													4); 1.8% (5+); 5.1% combined		76 = 4.30% Average = 3.4%					
													(3-4); 1.3% (5+); 3.3% combined							
OREGON	2000 18	 Volberg, R.A. (2001). Charges in Gambling and Problem Gambling in 	1	1500 randomized telephone survey; stratified sampling; screening procedure was used to preferentially complete interviews with mails	"survey of people in your community for the State of Oregon concerning the gambling practices of Oregon	telephone intervie	W 45% (CASRO	No	gambling in lifetime	SOGS-PY & SOGS-L; DSM-	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+);	1.25	6 SOGS-PY: 2.3 *. 72 * 1.44 * .76 =	minority populations (small sample) never married			htp:/hdl.handle.n	et/ http://hdi.handle.ne
		Oregon: Results from a Replication Study, 1997 to 2000. Northampton, MA: Gemini Research Inc.		respondents and with respondents under the age of 35; achieved sample was quite representative of the population in terms of mentals and otherwise.	ofizina"		(bodiem			IV-PY&DSM- IV-L (NODS)			2.3% combined SOGS-L: 2.7% (3-		1.81% DSM-IV-PY: 0.5 *					
		Moore, T.L. (2001). The Prevalence of Disordered Gambling among Adults		Server, age and estimate									combined DSM-IV- PY: 0.4% (3-4):		0.65 Average = 1.2%					
		in Oregon: A Secondary Analysis of Dafa. Salem, OR: Oregon Gambling Addiction Treatment Foundation.											0.1% (5+); 0.5% combined DSM-IV-							
													L: 0.9% (3-4); 0.6% (5+); 1.5%							
OREGON	2005 18	 Moore, T. (2006). The Prevalence of Disordered Gambling among Adults 	1	1554 The design and methodology for the replication study was consistent with the initial baseline study conducted in 1997 and the		telephone intervie	w	Age	gambling in lifetime?	SOGS-PY & SOGS-L: DSM-	14,218 EGMs in 2004. Population in 2005 was 3,626 938. People per EGM = 255.	64.5% (weighted)	SOGS-PY: 1.7% (3-4): 1.0% (5+):	2.11	6 SOGS-PY: 2.7 *. 72 * 1.44 * .76 =	under the age of 45; non-Whites; divorced or separated; employed		Replication study; NODS prevalence rates not reported.	htp:/hdl.handle.n	4
		in Oregon: A Replication Study. Portland, OR: Oregon Gambling Addiction Treatment Foundation.		replication study conducted in 2001; minorities and ages 18 – 44 were under- represented in the sample.						IV-L (NODS)			2.7% combined SOGS-L: 2.4% (3-		2.1%					
													4); 1.9% (5+); 4.3% combined							
OREGON	2015 18	Moore, T. L., Volberg, R. A. (2015). Oregon adult gambling behavior 2015: preliminary recort. Wilsonville. OP: Overvoor.	1	512 Replication study; a purchased sample of 19,904 phone numbers (31.5% land lines; 64.4% cell) randomly distributed acress the		telephone intervie	w 12.90	% some weighting was necessary to achieve proportional sample sizes in three of the agaigender groups due to the over sampling		PGSI; DSM-IV (NODS)		56.60	%						https://www.onego	
PENNSYLVA	NI 1984 17	Council on Problem Gambling. * Sommers, I. (1985). Pathological gambling: Estimating	534 (1,000 househo	state. olds Random digit dialing; random selection within household; age		telephone intervie	w 53.4	of males in the 35 year and older group. % Gender	gambing in lifetime	Inventory of		30.6% ("31%	"potentially"			17-34 age group; males; Catholics;		The IGB method probably requires additional	http://dx.doi.org/10	25
A + NEW JERSEY (2-		prevalence and group characteristics. Substance Use & Misuse, 23(5), 477-490. doi:10.3109/10820088809039213	- refusals = 534)	distribution of respondents was skewed toward younger persons.						Gambling Behavior &		represented the number of	pathological gamblers = 4.12%;			single individuals; separated or divorced; annual household income		corrections for the sampling strategy (selected for self-defined "gambles") and for the PG		
State Study)										other questions to get a "hard		respondents who both	"probable" pathological			less than \$20,000		measure which is based on 28 items clustered into 5 "leats" with a positive score on any item in """	in	
										gambling		themselves as	ganden = 3.3/%					a stat reacing to a positive score on that test and the sum of the test scores yielding a		
										(CCSM)		willing to disclose this in a telephone						which expresses the odds in favor of being a PC for each total score, is used to estimate	õ	
												interview") (under as to time period	*					prevalence. Survey included adults residing in a nine-county area of southeastern Pennsylvania	1	
fer 17												for statement)						and southern New Jersey. This study is not included in the tables or analyses.		
U.S. Territor	n 1897 18	 vowerg, R.A., & vales, P.A. (1998). Gambling and Problem Gambling in Puerto Rico (Juegos d azar vel problems de juego en Divisio Birol Demontes Indiana). 		Low serves no houseness samping: 3 metropolitan municipalities, 3 larg towns and 8 small towns were randomly selected from the 78 municipalities in Paerlo Rico, Alfavera service-roometic-momente- municipalities in Paerlo Rico, Alfavera Service, and an and a service of the	 yerroring practices among residents of Poerto Rico' 	reaccential tace-to face interview	- 97	 umum vite sample was so similar to the Phanto Rico population in terms of size of municipality, urban-ural distribution, gender and age. If was not necessary to use novi-shall/indive warban¹/r¹ 	Annoug is notice	SOGS-L	-, cuive in 1997. Unknown number in 1997.	88	 30/05-9Y: 4.4% (3-4); 6.8% (5+); 11.2% combined 	8.11	8.1%	54; divorced or separated; employed; annual household	characterized by rapid cycles of play. These include warvarter	separate questions about wagering on horse races and cockfights. This was done in motion to	orpundi handle n	ne utpunoi handle ne
		Puerlo Rico Treasury Department.		selected within the urban and rural locations of each municipality; survey conducted in Spanish; random selection within hwwalhold				sp					SOGS-L: 6.4% (3- 4); 7.4% (5+);			incomes over \$50,000	horse races and cockfights, "bolits," illegal EGMs. at	maintain comparability with questions about parimutual wagering in other jurisdiction* In		
		Volberg, R.A., Vales, P.A. (2002). Prevalence estimates of pathological		Obtained sample was nonsignificantly different from the Puerto Rico population in terms of gender, age and urbanitural distribution									13.8% combined				casinos, on sports, on card games not at a casino and on	retrospect, and given the large role that these types of gambling appear to play in the		
		gamoling in Puerto Rico (Estimados de prevalencia sobre e juego paticiógico en Puerto Rico), Revista Puertorriquetta de Exterioria 13, 75-85															garres of skill.	prevence of problem and pathological gambling in Puerto Rico, it would have been rederable to serverate		
SOUTH	1991 18	 Volberg, R.A., Stuefen, R.M., & Madden, M.K. (1991). Gamino in South Dakets: A Study of Cambling Participation 	1	1500 Sample shatfied to proportionally represent county populations on the basis of 1920 names figures. Reprint semation of boundariable	"a study of the gambling practices of the Citizens of Swith Dekrets"	telephone intervie	w 78	1% No	gambling in lifetime	SOGS-PY (6- months) &	Unknown number of EGMs in 1991.	(Lifetime = 85%)	SOGS-PY: 0.8%	1.51	6 1.4 ° .72 ° 1.44 ° 1.00 = 1.5%	unmanied; household income less than \$25,000 roon/White under and	Bingo; sports betting. Problem	presentative to apparate these two accorden.	htp:/hdl.handie.n	4
		and Problem Gambling and a Statistical Description and Analysis of its Socioeconomic Impacts. Vermillion:		with listed telephone numbers and random selection of respondent within households. Up to 7 attempts were made to contact each						SOGS-L			1.4% combined SOGS-L: 1.8% (3-			of 30	South Dakota are just as likely as those in other states to have			
		University of South Dakota, Business Research Buneau.		number and up to 5 calibacks were made to complete an interview with each selected respondent.									4); 1.0% (5+); 2.8% combined				wagered on gambling machines horse and dog races, card			
SOUTH	1993 18	 Volberg, R.A. & Staefen, R.M. (1994). Combine and Bablem Combine in 	1	1767 Sample stratified to proportionally represent county populations on	"a study of the gambling practices of the Citizens of Provide Debute"	telephone intervie	rw 80	th No	gambling in lifetime	SOGS-PY (6-	Casino frat opened 1989. Unknown number of EGN	a 65% (Past 6-	SOGS-PY: 0.7%	1.25	6 1.2 °.72 ° 1.44 °	male; over the age of 30; married	games and dice games. pull-tabs; video lottery games;		htp:/hdl.handie.n	#1
DANDIA		South Dakota: A Follow-up Survey. Vernillion: University o South Dakota: A Follow-up Survey. Vernillion: University o	4	we wave us 1660 provide righters random selection within with lated telephone numbers and random selection within households: up of atternots to contact each number us to 5.	unan unali					SOGS-L	ar 1984.	···DEEDa)	12% combined SOGS-L: 1.4% /%-				games.			
				calibacks to complete interview. Males, Native Americans, individuals under the age of 30 and those with less than a high									4); 0.9% (5+); 2.3% combined							
TEXAS	1992 18	 Wallach, L.S. (1993). 		school education underepresented in sample. 5308 Random digit dialing: Certain geographical areas oversampled to		telephone intervie	w 67	% age, race/ethnicity, region	gambling in lifetime	SOGS-PY &	No EGMs in 1992.	40	% SOGS-PY: 1.7%	21	6 2.5 1.72 1.44 1.	males, non-whites, young adults	betting on cards or dice in	The information given by all respondents	http://bdl.handie.m	
		Gambling in Texas: 1992 Texas Survey of Adult Gambling Behavior. Austin: Texas Commission on Alcoho and Deve Mean	4	provide minimum sample of 650 respondents in each of 8 regions of the state; Spanish-language version of the survey instrument						50GS-L			(3-4); 0.8% (5+); 2.5% combined		76 = 2.0%	(15-24), divorced or never married, lower educational levels, blue-collar	casinos or at card parlors and other betting establishments,	generally reflects gambling that occurred before the Texas Lotlery, except where indicated;	•	
		and unity ribble.		was provided. Approximately to percent or the adults asked to be interviewed in Spanish.									4); 1.3% (5+); 4.8% combine4			are not Protestant or Jewish	at a sports book or with a bookie	adolescents aged 14 through 17.		
TEXAS	1995 18	 Wallach, L.S. (1998). Gambing in Texas: 1995 Surveys of Adult and 	,	7015 Minimum of 400 adults from each of the 11 Texas Department of Health and Human Services planning regions: certain and regions		telephone intervie	ner 70% (noted =	gender, race/ethnicity, age, region	gambing in lifetime	SOGS-PY & SOGS-L	No EGMa in 1995.	68	% SOGS-PY: 2.2% (3-4): 0.8% (5+)	2.41	6 3.0 ° .72 ° 1.44 ° . 76 = 2.4%	younger age; African American or Hispanic; never married: high	illegal activities, followed by bingo, games of skill, and reside	Follow-up / replication study, Study also included a separate sample of 3.079	htp:/hdi.handle.n	*
		Adolescent Gembing Behavior. Austin: Texas Commission on Alcohol and Drug Abuse.	1	and racial/ethnic groups were oversampled; obtained sample representative in terms of gender, age, racial/ethnic and regional			"coopera on rate")						3.0% combined SOGS-L: 3.6% (3-			school dropouts; less likely to be in the labor force because they were	games	adolescents aged 14 through 17.		
		Malazza B.A. (1993). Combine and Bashi Contract		compution as the Texas population.	shah of the combine contrast of the statement	holosofic and a second		-	operations in Matiens	POCE IN C	No ECHo in 1997		 x 1.8% (5+); 5.4% combined proce two 1.0% 			inasses in school or disabled; lowes household incomes			March 1 and 1	
wasninGTO	an 1442 18	 vouvey, rs.A. (1993). Learning and Problem Gambling in Washington State. Report to the Washington State Lottery. 	- I I	International country international and a second respondents within households; sample slightly underepresents Asians, young adults and the abletic inductions who have near means the second from the second sec	Washington State	wepnone intervie	(Upper Bound		Amorana sy menune	SOGS-L	mu summe di 1962.	80.1	(3-4); 0.9% (5+); 2.8% combined	2.41	74 = 2.4%	White; unmarried	wege-ing on sports events with friends or co-workers; lottery's Dely Game		(spanoteandle.o	
				households			(boffern						SOGS-L: 3.5% (3- 4); 1.5% (5+); 5.1%							
WASHINGTO	N 1998 18	 Volberg, R.A. & W.L. Moore. (1999). Gambling and Database Conductors in Works (1999). 	1	1501 Random selection of households and random selection of	"survey of people in your community for the State of	telephone intervie	w 50%	no	gambling in lifetime	SOGS-PY &	No EGMs in 1998.	74.4	SOGS-PY: 1.8%	1.91	50GS-PY: 2.3%	male, under the age of 25, non-	bingo, the instant and daily		htp:/hdl.handle.n	-
		Replication Study, 1992 to 1998. Olympia, WA: Washingto State Lottery.	•	eligible households in order to obtain adequate representation of young men. Soft acreening entails for asking for the second to the	Washington citizens"		(bottem			IV-PY (DSM-IV- MR)			2.3% combined SOGS-1 - 3.7% - 7		1.81% DSM-IV-PY- 1 ***	· · · · · · · · · · · · · · · · · · ·	dog races			
				household under age 35, then any male, and then the adult with th next birthday. As a result of this screening procedure, the sample i						.,			4); 1.3% (5+); 5.0% combined		1.19 * 1.44 * .76 = 1.95% Average =					
				fully representative of the population aged 18 and over in Washington State in terms of gender (male/female) and age (18-3-									DSM-IV-PY: 0.9% (3-4); 0.6% (5+);		1.9%					

1	Location	fear Study Conducted	Age Sources	Sample Size	Sampling Strategy	Survey Description	Administration Method	e Rate	Weighting	Threahold for PG Questions	Assessment	Gambling Availability	Past-Year Gambling Prevalence	Problem Gambling Prevalence	Standardized Problem Gambling Prevalence	Standardization Calculations	Demographic Correlates of PG	Game Correlates of PG	Commenta	Reference URL	Reference URL
	WASHINGTON	2003-2004	 Mancuso, D., Cillison, M., & Felver, B. (2003). The 2003 Washingto: State Needs Assessment Household Survey. Department of Social and Health Services (DSHS), Division of Alcohol and Substance Asuse (DASA). 		273 Rendom digit dialing + phone numbers from Food Stamps disert lata, acticol taki, bith northicas exords, and shrinc smranen samping of lated skiphone numbers. The interview offered in 6 Impagingers: English, Sparinish, Ramissin, Chimeas, Kohanas, And Veteramean. Straßflod amerplang, ower sampling young adults, and advance have until a bith disection of the source young adults. An education takiter until a bith disection of the source you and one dollar tail was sent to sampled households with available address information, minimum number of 20 calibacida.	Part of an omnibus survey on several topics	telephone interview	50% (69% "cooperati on rate")	Yes - Io U.S. Census population counts.	Not indicated. Seemingly Gambling in past year.	DSM-IV-PY (NODS)	16.023 EEM& in 2004. Population in 2004 was 6.203,783. People per EGM = 367.	5	6% 0.7% (3-4); 0.4% (5*); 1.2% combined		21% 12*1.19*1.44 - 2.1%	aged 25 to 44 years; 45 to 64 years; rural counteirs; Americain Indian or Alasika Native adults; adults who endorsed more than one race; Blacks.			http://bdl.handie.oaf	
1	MISCONSIN	1995	18+ Thompson, W.N., Gazel, R., & Rickman, D. (1996). The Social Costs of Gambling in Waconsin. Waconsin Policy Research Institute Revolt 50(5):144		1000 Random digit dialing; 3 call back attempts; the 1,000 respondents were a close match of the general Waconain adult population		telephone interview		No	None	DSM-IV(slight modification)	t Unknown number of EGMs in 1995.	65.	1% 0.9% (3+)		.3% 0.9 * 1.19 * 1.59 * 74 = 1.3%		casino gambling		htp:/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.

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/co	llect	ion/p1	28501coll2	2/id/13	32536	

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 lowa"	
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 Iower 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.

Data were collected study of PG; study n state population; sur sample of adult lowar	while recruiting controls for an unrelated fa ot designed as a survey to be generalized to vey not desgined to recruit a representative ans.	amily to the ⁄e
Reference URL <u>http://www.ncbi.nlm.</u>	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 lowans 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+	
SourcesLutz. 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, telephonestatus.	е
Threshold for PG Questions	
Assessment CPGI; DSM-IV-PY & DSM-IV-L (NODS); self-report of problems Instrument	
Gambling Availability	
Past-Year Gambling 77.8% Prevalence 77.8%	
Problem Gambling CPGI: 3.8% (3-7); 0.6% (8+); 4.4% combined Prevalence DSM-IV-PY: 0.6% (3-4); 0.4% (5+); 1.0% combined DSM-IV-L: 1.5% 4); 0.9% (5+); 2.4% combined; Self-Report-PY: 0.8% Self-Report-L: 2.6%	5 (3-
Standardized Problem Gambling Prevalence	
Standardization Calculations	
DemographicYounger age groups; lower incomeCorrelates of PGindividuals (none statistically significant)	
Game Correlates of PG	
Comments	
Reference URL https://idph.iowa.gov/Portals/1/Files/IGTP/2013_adult_iowans_surve	ey.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
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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 LIRI	http://picardcenter.louisiana.edu/sites/picardcenter/files/The%20Impact%
IVELELELICE OUVE	http://picardcenter.iouisiana.edu/sites/picardcenter/mes/rne/020mpact/

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
	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
Sampling Strategy	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%

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	

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).

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 <u>http://hdl.handle.net/1880/48518</u>

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

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 t he 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
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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: Initi al 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 US. 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-o	of-A
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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-ADU

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	nttp://ax.aoi.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