

State of Vermont

Department of Mental Health 280 State Drive, NOB 2 North Waterbury, VT 05671-2010 http://mentalhealth.vermont.gov/ Agency of Human Services

[phone] 802-241-0090 [fax] 802-241-0100 [tty] 800-253-0191

Dear Chairperson McCarthy and members of the committee,

My name is Kelley Klein and I am the medical director for the Vermont Department of Mental Health. I want to thank you for the opportunity to speak to the legalization of online sports betting from a mental health lens. The department of mental health is grateful to be a part of initial conversations, and we are dedicated to creating an infrastructure to support Vermonters who experience problem gambling.

As you all know we do not have any brick-and-mortar casinos in Vermont, the only current access to gambling is through the Vermont Lottery, accessing legal online betting through neighboring states, or in some cases accessing online sports betting through illegal means. The legalization of online sports betting will bring gambling mainstream within Vermont, and many more individuals will participate. For example, in New York State, where this was legalized last year, there were 3.8 million new sign ups- meaning, all individuals who were not accessing online sports betting in neighboring states or through illegal means. To put this in context, with Vermont having a smaller population the equivalent would be expecting 140,000 new sign ups. In order to provide appropriate services, it is necessary to understand the potential impacts and data associated with online sports betting.

From the mental health and clinical lens online sports betting has a high addiction potential. A survey in Ohio found that when exposed to traditional gambling (casinos, retail sports betting) 1 in 10 individuals will develop problem gambling. Exposed to online sports betting, 1 in 4 will develop problem gambling. Both forms of gambling have intermittent reward, which is both addictive and difficult to extinguish when a behavior is established. Online sports betting differs in that there are minimal barriers to access. This is accessible from a smart phone 24/7. There are less cultural barriers as online sports betting has taken the nation by storm and become a very social aspect to sports. You would be hard pressed to listen to a sports caster and not hear them mention an online sports betting platform. Most striking though is the number of times one can bet and therefore experience reward throughout a single game. This is not traditional betting where you pick a square for the final score, one can bet on hundreds of specific moves and scores made throughout a game, triggering the reward pathway potentially hundreds of times. It is worth noting that those in the college population are at very high risk for problem gambling, with 62% of those that engage in online sports betting regularly meeting criteria for problem gambling.

Problem gambling is defined as persistent or recurrent problematic gambling behavior leading to clinically significant impairment or distress. This can include a need to gamble with increasing amounts of money in order to achieve the desired excitement, being restless or irritable when trying to cut down on gambling, making repeated unsuccessful attempts at trying to cut down on, control, or stopping gambling, being preoccupied with gambling, gambling when feeling distressed, "chasing" losses, lying to conceal the extent of involvement with gambling, jeopardizing or losing a significant relationship, job, or educational/career opportunity because of gambling, and relying on others to provide money to relieve desperate financial situations caused by gambling. The health implications associated with this can include increased rates of substance use, depression, anxiety, increased utilization of healthcare services, and of most concern a fifteen times increased risk of suicide mortality as compared to the general population.

We must go into this with our eyes open and the knowledge that although this will be fun recreation for the majority of individuals, there will be Vermonters who will have problem gambling and we must be prepared to support them. With the knowledge of potential addiction, we have a unique opportunity in Vermont to create a robust, accessible, and shame-reducing infrastructure for supporting those with problem gambling. To appropriately serve this population Vermont will need public health awareness and promotion, a helpline, the training of therapists throughout the state, and funding for therapists' time to continue to provide cost free treatment. The department of liquor and lottery currently has a grant that is awarded to the Howard Center, which provides for part of one clinician who provides cost free treatment and limited public messaging. These funds and resources were developed for the Vermont Lottery. Although we do not know the specific costs yet for a sports betting problem gambling program, we do know that we will need to develop a more robust

infrastructure. The minimum funds allocated for this should reflect the increased engagement that will be required to support the increased need. Additionally, developing and implementing infrastructure will take time.

In addition to infrastructure for support we need to ensure there are responsible gaming measures put in place to mitigate problem gambling risk. Responsible gaming measures are not fool proof mental health protections; however, they can establish guardrails that assist the state in limiting problem gambling practices. DMH will work with other partners to develop a set of recommendations aimed to address issues such as underage betting, identify theft, and problem gambling practices.

