Summary Analysis of the Plainridge Park Casino GameSense Program Activities & Visitor Survey: December 1, 2015 – May 31, 2016

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Introduction

- As part of its broader efforts to study the social and economic consequences of expanded gaming and to mitigate potential gambling-related harm, the Massachusetts Gaming Commission contracted with the Division on Addiction to provide an evaluation of the GameSense program at Plainridge Park Casino.
- This initial report summarizes six months of data collected during the first year of operation using a Checklist completed by GameSense staff and a survey completed by GameSense visitors. Our goals were to (1) Conduct an epidemiology of services GameSense staff reported that they provided and (2) Evaluate progress toward stated program goals.
- The findings of this report represent the initial phase of our evaluation of the GameSense program at Plainridge Park Casino. Subsequent to this report, we intend to conduct a secondary evaluation of the GameSense program that extends the scope of the Visitor Survey and the time period under consideration for the Checklist records (i.e., up to one year of records). We also will develop a comprehensive final report that summarizes (1) findings from the initial and secondary evaluations; (2) development of the methods used during the initial and secondary evaluations, including incidental qualitative observations; and (3) findings from anticipated additional data sources (i.e., Plainridge Park Casino employee surveys and patron intercept surveys).

Methods

Procedure

- We developed a taxonomy of GameSense Advisors' interactions with visitors.
- The four interaction categories varied in terms of the level of engagement between GameSense Advisors and visitors. In ascending order of engagement, the categories were Simple (i.e. short, one-way communication regarding non-substantive issue), Instructive (i.e. longer, one-way communication from GameSense Advisor to visitor regarding responsible gambling or problem gambling), Demonstration (i.e. longer, one-way communication centered around a demonstration of a responsible gambling concept), and Exchange (i.e. two-way interaction about responsible gambling or problem gambling).
- We instructed GameSense Advisors to use a computerized Checklist to describe every interaction in terms of its category and several other factors.
- We used Checklist data to assess GameSense activities covering the period from December 1, 2015 to May 31, 2016.
- For the Visitor Survey, GameSense Advisors attempted to survey all visitors with whom they had an Exchange interaction, with the exception of (1) visitors who had already completed a survey and (2) visitors who had enrolled in the voluntary self-exclusion program.
- Visitor Survey respondents completed the surveys primarily via paper-and-pencil and returned them to an onsite drop box. GameSense Advisors (GSAs) and related staff took the completed surveys to the Massachusetts Gaming Commission for data entry. GSAs provided respondents with a small gift in exchange for completing the survey.
- The Visitor Survey response rate was 85%.

Measures

- The Checklists began with a branching question to determine the type of interaction being recorded and followed with questions specific to type of interaction.
- Following Simple interactions, GSAs recorded only minimal information (i.e., date/time, GSA name, and how many visitors were involved).
- Following all other interactions, GSAs recorded these details as well as additional information, such as location, content of the conversation, and impressions of the visitor(s).
- To minimize burden for visitors, the Visitor Survey used in this initial evaluation phase included questions divided among six survey versions, each one page long.
- The Visitor Survey covered the following topics: (1) the respondent's demographics, (2) their impressions of what they learned during the interaction, (3) whether/how the interaction might influence their gambling behavior, (4) their impressions of the GameSense Advisor, (5) their impressions of, and responses to, GameSense services, (6) their gambling history, and (7) how they became aware of GameSense.
- The Visitor Survey offered visitors an opportunity to provide written comments as well.

Analytic Strategy

- We provide descriptive statistics for all Checklist variables to summarize trends in GSAs' activities.
- We present descriptive statistics for all Visitor Survey questions.
- Additionally, we examined whether visitors with different characteristics (e.g., men versus women, older visitors versus younger visitors) provided similar responses to key survey questions. These analyses explored differences in the visitors' responses to and satisfaction with GameSense services. Such findings could be useful for improving service delivery.

Results

Data Sources

- GSAs completed checklists for a total of 5,659 interactions during the evaluation period.
- Respondents completed a total of 982 Visitor Surveys.

Services Provided

- GSAs reported that the 5,659 interactions they reported involved at least 9,343 visitors. GSAs had about 31 interactions with visitors each day and interacted with about 52 visitors each day.
- Most reported interactions were of the Simple type (69.7%), followed, in descending order, by Exchange (16.0%), Instructive (13.0%), and Demonstration (1.2%).
- In most of the Simple interactions (52.1%), GSAs spoke with two visitors. On the other hand, most Instructive interactions (51.3%) were with one visitor. Demonstrations tended to include one visitor (35.7%) or two visitors (42.9%) fairly equally. Most Exchanges (63.1%) were with one visitor.
- About 75% of Instructive, Demonstration, and Exchange interactions began as Simple interactions.

GSA Workload

- GSAs did not divide the visitor interaction work equally; two GSAS were substantially over-represented in terms of interactions reported and Visitor Surveys.

Available Space

- Demonstration and Exchange interactions were most likely to occur in the GameSense Info Center, whereas Instructive interactions were more likely to occur on the casino floor.

Peak Times

- Checklists were most likely to be completed on Fridays and Saturdays and between 12pm-6pm.
- Respondents typically completed Visitor Surveys on Fridays and Saturdays and between 12-3pm.

Visitor Characteristics

- GSAs estimated that 54.5% of the visitors were men and 44.8% were women. They estimated that a plurality of visitors (44.3%) were between 51-70 years old and that most (93.8%) were casino patrons, rather than casino employees, "concerned others," or others. They perceived that most (77.0%) were experienced with gambling. GSAs perceived few (0.5%) to be under the influence of alcohol or other drugs, and they perceived 7.5% to be emotionally distressed in some way.
- GSAs tended to report that they had not previously interacted with a given visitor (58.6%). GSAs reported that the remaining 40.6% were "repeat customers."
- According to Visitor Surveys, the modal respondent was a 60-year old, White, non-Hispanic woman who had a high school diploma or equivalent.

Information and Resources Provided

- In most (93.9%) of the Instructive interactions, GSAs provided information about responsible gambling.
- GSAs reported that during most Exchange interactions, they provided information or advice verbally (92.1%). Another common behavior was providing written information (e.g., pamphlets), something they reported doing during 20.2% of Exchange interactions.
- Survey respondents often reported that they learned about strategies to keep gambling fun (76.7%). Respondents were much less likely to indicate that they had learned about a topic related to help or treatment for gambling problems (3.8-5.0%, depending on the topic).
- About half of respondents reported that, as a result of their conversation with a GSA, they would tell someone else about the GameSense Info Center (56.9%). Slightly fewer indicated that they would visit the GameSense website (52.1%). A minority of respondents indicated that they would think about their own gambling (32.6%). Few respondents indicated that they would take steps to reduce their gambling (6.3%) or seek professional help (2.1%) as a result of their conversation with a GSA.

Audience Appeal

- Most respondents (88.9%) reported that anyone who gambles could benefit from having a conversation with a GSA. A minority of respondents (25.2%) reported that people experiencing gambling-related problems would benefit from a conversation with a GSA. Similarly, a minority (30.4%) reported that people at-risk for experiencing gambling-related problems would benefit from a conversation with a GSA.
- GameSense rarely attracted casino patrons with serious concerns. Rather, respondents typically presented with minor concerns, such as being curious about GameSense, which was reported in 69.3% of Visitor Surveys.
- GameSense attracted casino patrons without extensive gambling histories. The modal respondent engaged in one type of gambling within the past year. The majority of re-

spondents (83.6%) reported experiencing no gambling-related problems during their lifetimes.

Working Alliance
- Most (94.5%) respondents indicated that they were very satisfied or extremely satisfied with their conversation with a GSA.
- Most respondents (77.8%) reported that their visit to the GameSense Info Center enhanced their visit to the casino and most (77.1%) reported that it did not detract from their visit to the casino. Most (82.0%) reported that they would visit the GameSense Info Center again.
- Respondents typically reported that the GameSense Info Center space was private (79.5%) and comfortable (80.1%).
- Respondents reported positive impressions of their GSAs. They often reported that their GSA was caring (87.4% strongly agreed), was helpful (86.8% strongly agreed), was knowledgeable (87.4% strongly agreed), and listened to them (88.1% strongly agreed).
- The majority of respondents (87.7%) felt that their concern(s) were completely resolved. Fewer respondents (5.0%) indicated that their concern(s) were not at all or somewhat resolved. This pattern varied somewhat among different GSAs.
- Respondents in different demographic groups (i.e., gender, race, ethnicity, age, education) provided similar responses to questions about their satisfaction with GameSense services, their impressions of GSAs, and the extent to which their concerns were resolved.
- Respondents wrote generally positive comments about their experiences with GameSense and specific GSAs.

Attracting Visitors
- Half of respondents (50.0%) had not heard about GameSense before their current visit to Plainridge Park Casino.
- Visitors typically learned about the GameSense Info Center on site: by walking past it (65.0%); seeing a kiosk (35.0%); or seeing an ad or sign (11.1%).
- Visitors initiated a little over half (53.5%) of Exchange interactions.

Range of Services Provided
- After reviewing all service data, we conclude that GSAs reported providing primary prevention services to the largest group of visitors, but only rarely provided secondary prevention services or a pathway to tertiary prevention. This general pattern is consistent with the relative population prevalence of Level 0, 1, 2, 3, and 4 gambling (i.e., (1) no gambling, (2) gambling without problems, (3) gambling with sub-clinical symptoms, (4) gambling patterns that can be diagnosed at the clinical level, and (4) gamblers who seek treatment) in the general population. This nomenclature has been used in the peer-reviewed literature since 1996 (Shaffer & Hall, 1996).

Discussion
- Within the Discussion, we review the rationale for this evaluation and the need for rigorous evaluation of all responsible gambling initiatives.
- We review the number of interactions GSAs reported and the number of visitors with whom they interacted, in total and per day. PPC visitor traffic during the study period

was not disclosed to us. Therefore, we were unable to estimate the approximate proportion of visitors with which GSAs reported they interacted.

- Our combined review of services provided suggests that GSAs provided services in a way that aligns with the likely range of need in the population.
- GSAs appear to be communicating effectively that their services are appropriate for all gamblers, but visitors were less likely to report that their services would be beneficial for those with, or at risk of developing, a gambling disorder. In addition, very rarely did visitors approach GSAs with serious concerns. These findings suggest that the GameSense program should improve the visibility of the full-range of services offered and consider expanding services, to improve the likelihood that visitors will see the program as useful to those who gamble beyond Levels 1 and 2.
- It appears the location of the GSIC has been successful in attracting new visitors.
- Visitors who completed surveys provided positive reviews of the GameSense services and interactions with the individual GSAs. We caution that these surveys are not representative of all casino patrons who have contact with GSAs, nor Plainridge Park Casino patrons more generally.
- The Visitor Survey data are limited in other important ways. The highly skewed distributions of visitor satisfaction questions might reflect a halo effect, which is common to such satisfaction surveys. Due to the evaluative nature of the questions in this phase of the Visitor Survey, we cannot conclude whether GameSense services positively impacted visitors' knowledge or use of responsible gambling strategies. A prospective study design is necessary to evaluate this issue.
- These findings summarize operations within the Plainridge Park Casino GameSense program, not to GameSense, generally, or other similar information centers. Other implementations of GameSense might yield different results.
- The discussion includes several recommendations. Anecdotal evidence indicates a need to explore the possibility that GSAs are distressed by some of the more emotionally demanding aspects of their duties and, if so, whether they can be better prepared for these kinds of experiences. We recommend supplementing this report's findings with an examination of Plainridge Park Casino employees' opinions and knowledge of the GameSense program, along with a cost/benefit analysis to inform future decisions about investing resources into GameSense programs and services. Along the same lines, policy makers should consider these findings in relation to the legislative mandate for operators to provide on-site space for an independent substance abuse, compulsive gambling, and mental health counseling service. With some caveats in mind, we note that there is no indication that GameSense Advisors currently are providing substance use/mental health counseling services, beyond referral to treatment/self-help for gambling problems.

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Introduction

1.1. Background

During November 2011, Massachusetts Governor Deval Patrick signed legislation allowing for gambling expansion across the Commonwealth, including up to three destination resort casinos and one slots facility. The Gaming Act created the Massachusetts Gaming Commission (MGC), an independent body tasked with overseeing the licensing and implementation of new gaming venues. The MGC was also tasked with establishing a research agenda to study the social and economic consequences of expanded gaming, among other responsibilities.

The 2011 legislation includes several mandates designed to mitigate potential social harm associated with new gambling opportunities. Among these mandates is the requirement for each newly licensed gaming operator to "provide complimentary on-site space for an independent substance abuse, compulsive gambling, and mental health counseling service" ("Bill H03697," 2011)[1] to be selected by the Commission.

During September 2014, the Commission adopted a Responsible Gaming Framework to inform all responsible gambling-related regulations. Strategy 2.3 of the Responsible Gaming Framework (Massachusetts Gaming Commission, 2014b) specifies that operators will meet the on-site space requirement by providing for the establishment of responsible gambling information centers (RGICs). The Framework further specified providing player education as the central goal of the RGICs.

During Fall 2014, the Commission adopted the GameSense brand, developed by the British Columbia Lottery Corporation (BCLC), to unify and market the operations of the RGICs. Commission Chairman Steve Crosby stated that the GameSense marketing and branding package is "intended to engage players and the public with responsible gaming and problem gambling information and tools while removing the stigma often associated with accessing these resources (Massachusetts Gaming Commission, 2014a)".

When Plainridge Park Casino opened its doors during June, 2015, the GameSense program operating inside it became the first RGIC operating in the United States. The MGC contracted with the Massachusetts Council on Compulsive Gambling (the MCCG) to staff the GameSense program. Staff members of the GameSense program are called GameSense Advisors (GSAs).

The MGC has contracted with the Division on Addiction at Cambridge Health Alliance to provide an evaluation of the GameSense program at Plainridge Park Casino. The Division has worked with the MGC and MCCG to develop this evaluation, and this evaluation's protocol reflects contributions from all organizations. This report summarizes data collected using two instruments designed jointly by the Division, the MGC, and the MCCG. This report summarizes data collected during the period December 1, 2015 through May 31, 2016.

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[1] https://malegislature.gov/Laws/SessionLaws/Acts/2011/Chapter194

1.2. Understanding Responsible Gambling

Responsible gambling (RG) is a term that incorporates a variety of concepts aimed at reducing the incidence and prevalence of gambling-related harms experienced at an individual and societal level. These concepts include consumer protection, community/consumer/staff awareness and education, and access to reliable help services and mental health treatment.

A group of international researchers developed the Reno Model (Blaszczynski, Ladouceur, & Shaffer, 2004), which was the seminal architecture for developing RG programs. The Reno model provides a structural framework that shapes the development, maintenance, evaluation and ethical application of RG concepts and activities. These activities can be integrated with existing public health policy, gambling industry corporate social responsibility programs, and other health care operations (Blaszczynski et al., 2011; Blaszczynski et al., 2004; Collins et al., 2015; Ladouceur, Blaszczynski, Shaffer, & Fong, in press; Shaffer, Ladouceur, Blaszczynski, & Whyte, 2016). The purpose of an RG initiative is to establish organized strategies that encourage patrons to gamble responsibly. These initiatives also rely on the gambling providers to ensure their patrons are aware of the potential risks associated with gambling (Blaszczynski et al., 2011). Once an RG initiative has been established, researchers can empirically test the effectiveness of the initiative on gamblers.

Four common elements found in RG initiatives are (1) pre-commitment, (2) self-exclusion, (3) treating comorbid conditions, and (4) evaluating treatment outcomes (Shaffer et al., 2016). Other RG initiatives are possible. Currently, there is little scientific evidence that suggests common RG initiatives are effective in preventing gambling-related harm (Shaffer et al., 2016). Research regarding pre-commitment (i.e. allowing patrons to set monetary and/or times limits on their gambling) is currently inconclusive (Ladouceur, Blaszczynski, & Lalande, 2012). Self-exclusion programs appear to have a positive short-term impact but, as time goes on, these programs have a declining impact (Ladouceur & Lachance, 2007). Because co-morbid conditions (e.g., depression, anxiety, substance use disorders) frequently appear in the population of individuals with gambling-related problems (Abbott, Williams, & Volberg, 2004; Kessler et al., 2008), allocating resources to identify and intervene with patrons who have, or are at risk for having, mental health/substance use disorders might advance the central goals of responsible gambling. With regard to the fourth common element of RG initiatives, the Reno model group recently argued that despite the costs of evaluating gambling treatment outcomes, "the onus remains on the clinician to guarantee that the intervention offered is in the best interest of the client (beneficence), does no harm (maleficence), and is not only based on empirical evidence but also administered in a competent and effective manner" (Shaffer et al., 2016, p. 306). Though Shaffer et al. (2016) focused on evaluating treatment outcomes in the context of therapy, the same ethical considerations apply to evaluating the outcomes of population-based responsible gambling programs. In particular, rigorous evaluation can help ensure that responsible gambling problems aimed at casino patrons and employees do no harm and are administered in a competent and effective manner. In the following section, we describe the rationale for, and process of, evaluating responsible gambling programs.

1.2. Rationale for Evaluating Responsible Gambling Programs

One potential social consequence of expanded gaming is the development of gambling problems among casino patrons and employees. Responsible gambling programs hold the potential to minimize gambling problems among these groups. However, the safety and efficacy of responsible gambling programs is uncertain in the absence of rigorous evaluation. Testing whether a program does no harm to its target audience is just as important as testing whether it reduces harm.

As Figure 1 illustrates, an effective evaluation begins at the earliest stages of the development of any responsible gambling program. Planners should develop, implement, and refine data monitoring systems in tandem with the responsible gambling program itself. The data monitoring system should allow program staff to gather all the data necessary for a thorough evaluation; ideally, it will not substantially burden program staff. To allow evaluators to draw conclusions about the effectiveness of the responsible gambling program, the monitoring system must monitor not just outcomes (i.e., knowledge, attitudes, and behavior change after contact with the responsible gambling program), but also program process and penetration (i.e., the extent to which the program is reaching its target audience). Evaluators can use inputs such as the number of patrons and employees exposed to the responsible gambling program, and the extent of patrons' and employees' involvement with the program, to assess program penetration. Evaluators often use patron and employee surveys to measure program outcomes such as responsible gambling behavior and awareness of resources, ideally using a longitudinal design. The evaluation team should meet on a regular basis with the program staff to check for issues with data monitoring. Additionally, the evaluation team should analyze data on a regular basis and report findings to key stakeholders, including program planners and staff, creating a data-driven feedback loop that further enhances the responsible gambling program. This knowledge increases the evidence base for the program, essentially "training" it to be more useful over time. This report represents the first cycle of this evaluation loop.
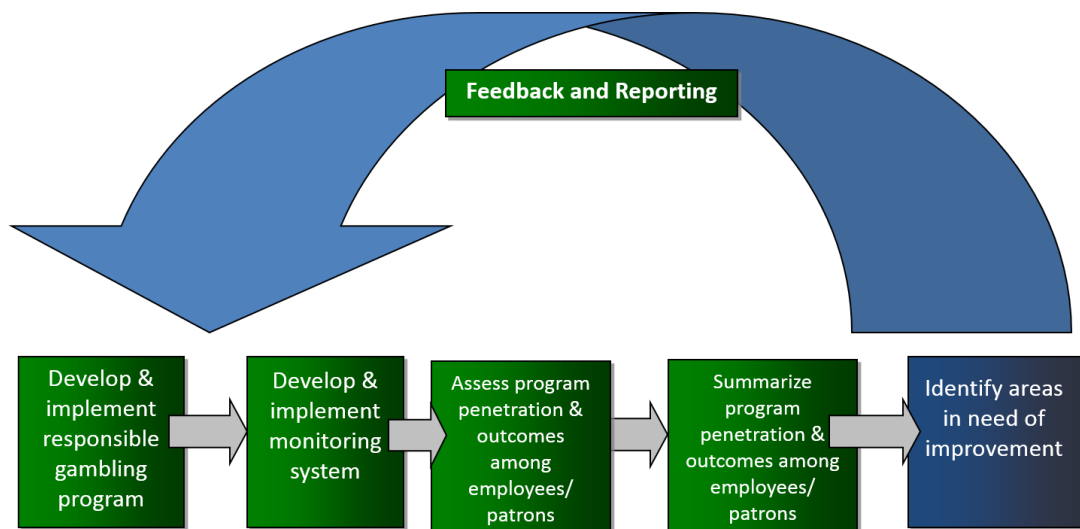
Figure 1: Feedback Evaluation Loop as Applied to Responsible Gambling Programs

1.3. Responsible Gambling Information Centers

RGICs are typically designed as part of a broader mission to mitigate potential harms associated with gaming expansion. One 2007 evaluation of two Ontario RGICs indicated that visitors were satisfied with the information they received and gave the staff high ratings in terms of their approach, knowledge, and helpfulness (The Osborne Group, 2007). Boutin, Tremblay, and Ladouceur (2009) went a step further in their evaluation of an onsite information center located in Montreal, Quebec. In addition to providing a profile of visitors (i.e. most were seniors, occasional slot machine players, who reported being "always in control" of their gambling), these researchers examined change over time in visitors' gambling beliefs and behavior. Compared to control group participants, participants who visited the onsite information center had more improvement in their knowledge about ran-

domness within slot machine play. However, neither group changed their gambling behavior after visiting the center. Boutin et al. (2009) called for further study of the responsible gambling impact of these centers. This report represents a step in this direction.

1.4. Evaluation Goal 1: Conduct an Epidemiology of Services

As mentioned earlier, the GameSense program at Plainridge Park Casino is the first of its kind in the United States. Few studies have evaluated RGICs in any jurisdiction. Therefore, our first goal was to provide a basic epidemiology of services. Our specific Research Questions were as follows:
  (1)   How many interactions of each type are GSAs having with visitors? How many visitors are involved in these interactions? How frequently do GSAs transition from one type of interaction to another?
  (2)   How are GSAs dividing up the workload?
  (3)   How are GSAs using the available space?
  (4)   What are peak times for visitor interactions?
  (5)   What are the characteristics of visitors to the GameSense program?

1.5. Evaluation Goal 2: Evaluate Progress toward Stated Goals

We sought to evaluate the GameSense program at PPC according to a clear set of program goals. We used public documents and program planners' public comments to summarize program goals. Various sources describe the goals of GameSense and GSAs in different ways, including whether the GSAs would have clinical training and would be asked to perform clinical duties, such as brief interventions (Massachusetts Council on Compulsive Gambling, 2016; MCG Open Meeting, 2014a). This evolving variety of purpose creates some challenges for describing the full set of program goals. However, according to the MGC, the *primary* goal of the RGICs within new gambling venues currently is to "communicate and promote responsible gaming information and resources and programs in Massachusetts (MCG Open Meeting, 2014b)" The MGC describes GameSense as "… an innovative and comprehensive Responsible Gaming strategy… to encourage responsible play and mitigate problem gambling" (Mass Gaming Commission, 2016). The Responsible Gaming Framework (Massachusetts Gaming Commission, 2014b) further specifies that RGIC staff should share with patrons responsible gambling tips, knowledge of how games work, and the inaccuracies and dangers of common gambling myths. This goal derives from the observation that people who hold irrational gambling-related beliefs (e.g., "It's my lucky day – I should buy a lottery ticket;" "I've lost four times in a row, so I must be due a win") are more likely than others to experience, and persist in experiencing, gambling problems (e.g., Ladouceur & Walker, 1998; Leonard & Williams, 2016; Toneatto, Blitz-Miller, Calderwood, Dragonetti, & Tsanos, 1997).[2] Moreover, MGC's Director of Research and Responsible Gaming, Mr. Mark Vander Linden, recommended that the Commission take a population-based approach to all its responsible gambling initiatives, including GameSense, applying its messaging "across prevention, across intervention, across treatment, and across recovery (MCG Open Meeting, 2014b)".

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[2] Therapies that encourage patients to recognize and correct their cognitive distortions (i.e. cognitive restructuring) often help patients reduce their gambling and feel more in control (Fortune & Goodie, 2012). On the other hand, there is little evidence that simple mathematical education, such as information about gambling probabilities, is useful for changing gambling behavior. In reviewing this evidence, Fortune and Goodie (2012) suggest that individuals fail to translate abstract facts about gambling to their own gambling. More broadly speaking, previous attempts to educate and inform the public as a strategy to prevent risk decision-making associated with psychoactive substance use, though well intentioned, have not met specified goals (Ennett, Tobler, Ringwait, & Flewelling, 1994; Tobler, 1986).

Therefore, this evaluation will consider the extent to which the GameSense program at Plainridge Park Casino is meeting **the goal of providing responsible gambling information and resources across the spectrum of needs**. Specific research questions are as follows:

    (6)   What actions are GSAs taking during these interactions?

    (7)   What do visitors say they are learning during these interactions?

    (8)   What do visitors say about how these interactions might affect their gambling behavior?

During a December 2014 MGC Open Meeting, representatives of the MGC, the MCCG, and Penn National (the operator of Plainridge Park Casino) identified three additional goals of the new RGICs. First, they specified that the RGICs should have universal appeal. Director Vander Linden identified limited appeal as a potential weakness of RGICs and recommended the GameSense brand partly on the basis of its presumed appeal to all players, not just those with problems. Ms. Marlene Warner, Executive Director of the MCCG, echoed this sentiment when she praised the GameSense brand for its presumed appeal to both recreational gamblers as well as those interested in self-exclusion; she suggested that the GameSense program "really needs to meet a continuum of the needs in terms of the folks interested in walking in" (MCG Open Meeting, 2014a). Therefore, we evaluated the extent to which the GameSense program at Plainridge Park Casino is meeting **the goal of appealing to a wide audience**. Specific research questions are as follows:

    (9)   According to visitors, who might benefit from GameSense services?

    (10)   What are the concerns, if any, of those who interact with GameSense Advisors?

    (11)   Do those who interact with GameSense Advisors report extensive gambling histories and gambling-related problems?

The British Columbia Lottery Corporation developed GameSense as part of its mission to move away from the image of the "gambling police" and toward that of a "friendly helper" or "supportive peer" (Smith, 2014, p. 8); their goal was to attract the widest possible audience by appearing "trustworthy, proactive, effective, and transparent" and "friendly, genuine and helpful." When it adopted the GameSense brand and programming during Fall 2014, the MGC signaled that it recognized the importance of RGIC staff building a working alliance with casino patrons. A working alliance[3] is a collaborative relationship between a therapist and client, marked by an affective bond and agreement between the therapist and client on treatment goals and tasks (Martin, Garske, & Davis, 2000). Strong working alliances predict diverse positive outcomes such as medication adherence, fewer symptoms of PTSD, and less frequent marijuana use (as reviewed by Martin et al., 2000). RGICs are not therapeutic environments but still have the potential to promote healthy behavior change, and the establishment of a strong working alliance between GameSense Advisors and casino patrons might mediate such change. Therefore, we generated several research questions to evaluate the extent to which the GameSense Advisors are meeting **the goal of establishing strong working alliances with patrons**:

    (12)   To what extent are visitors satisfied with GameSense services?

    (13)   What are visitors' impressions of GameSense Advisors?

    (14)   Do visitors report that their concerns, if any, have been resolved following discussions with GameSense Advisors? Do their reports vary according to GSA?

    (15)   Are members of different demographic groups (e.g., men versus women, older patrons versus younger patrons) equally responsive to GameSense services?

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[3] Researchers tend to use the terms "working alliance," "therapeutic alliance," "therapeutic bond," and "helping alliance" to refer to therapist-client alliances marked by collaboration, an affective bond, and shared treatment goals and tasks.

Finally, stakeholders emphasized the need for the GameSense program to be highly visible and centrally located within the casino in order to attract as many casino patrons as possible. At the same time, Director Vander Linden emphasized the need to spread the GameSense message beyond the casino, "within online media, within other types of branding opportunities in the community" (MCG Open Meeting, 2014b). As mentioned, the concept of a Responsible Gambling Information Center is entirely new to the United States. Some specific research questions followed from **the goal of attracting visitors from both inside and outside the casino:**

(16)   How did visitors first hear about GameSense? What proportion of visitors learned about GameSense onsite, versus outside the casino?

We addressed these 16 research questions using a combination of data sources. For some questions, we summarized the self-recorded activities of the GSAs who staff the GameSense program. For other questions, we summarized visitors' responses to brief surveys. We addressed some questions using both data sources. We note from the outset that the conclusions we draw based upon Visitor Survey data are limited because the MGC only allowed for surveying visitors who had the highest level of engagement with GSAs, as defined in the next section.

This report is one component of a larger Division on Addiction evaluation that will integrate several sources of information concerning the effectiveness of the GameSense program. In addition to the current report, we intend to assess the relationship between GameSense contact, diversely defined, and visitors' gambling knowledge and behavior, and the perceived value of the GameSense program among Plainridge Park Casino employees. Additionally, we intend to evaluate the other two responsible gambling initiatives deployed in the new Massachusetts gambling venues (i.e. Play My Way, the voluntary play management system and the voluntary self-exclusion program).

Methods

2.1. Procedures

2.1.1. Setting

Plainridge Park Casino (PPC) opened on June 24, 2015. It is a 106,000 square foot facility with 1,250 gaming units. During the window of observation, four full-time staff served as GameSense Advisors. In this report, for privacy purposes, we refer to them as GSAs #1-4. GSAs were on duty from 10am to 2am each day. The GameSense Info Center is located on the pathway from the parking garage elevators to the casino floor.

2.1.2. Checklist

2.1.2.1. Purpose and Development
The GameSense Checklist was intended to be a record of all interactions between GSAs and visitors. Throughout this report, we use the term "visitor" to refer to an individual who interacted with a GSA within the context of GameSense services, either within the GameSense Info Center or elsewhere in the casino. Visitors could be PPC patrons, PPC employees, or others.

During the development of the GameSense program, the Division on Addiction emphasized that Checklist data composed an enduring GameSense record keeping system for the Commonwealth of Massachusetts. The Division on Addiction, the MGC, and the MCCG developed the Checklist collabo-

ratively and made changes as necessary to maximize the amount of collected information and minimize administrative burden for the GSAs.

2.1.2.2. Interaction Categories

Before PPC opened, we developed a system for classifying GSAs' interactions with visitors. This system was necessary to facilitate accurate completion of the Checklist. We improved this system during the months after PPC opened based on GSA feedback. Figure 2 provides interaction definitions that the GSAs used to classify their visitor interactions beginning on December 1, 2015. GSAs used four mutually-exclusive categories: (1) Simple (i.e. short, one-way communication regarding non-substantive issue, such as providing directions or a simple greeting); (2) Instructive (i.e. longer, one-way communication from GSA to visitor regarding responsible gambling or problem gambling); (3) Demonstration (i.e. longer, one-way communication centered around a demonstration, such as the marble game or use of the GameSense kiosk); and (4) Exchange (i.e. two-way interaction about responsible gambling or problem gambling).

Figure 2: Interaction Definitions

Level of engagement

Exchange Interaction: Two-way interaction between GSA and visitor about responsible/problem gambling.

Demonstration Interaction: One-way communication from GSA to visitor. GSA performs a demonstration or shows the visitor how to use the GameSense kiosk.

Instructive Interaction: One-way communication from GSA to visitor. GSA provides information about responsible/problem gambling.

Simple Interaction: Short, one-way communication regarding non-substantive issue (e.g., directions inside the casino).

Interactions often shifted from one category to another. Therefore, we asked GSAs to classify the interaction according to the *highest level of engagement* present in the interaction. To measure how often interactions transitioned from one type to another, we asked GSAs to record whether the interaction began as a different type. For instance, if an interaction began as Simple but transitioned into Instructive, the GSA categorized it as Instructive but indicated that it began as Simple.

2.1.2.3. Data Collection

We instructed the GSAs to complete a Checklist following all of their visitor interactions. In order to maintain the accuracy of the information, we instructed the GSAs to record their interactions as soon as possible after they occurred. GSAs completed the Checklist on a tablet computer using online survey software (i.e., Survey Monkey). We collected no personally identifying information about visitors within the Checklist.

Though we report on the total number of visitors represented in the Checklists, we note that this number does not reflect *unique* visitors. Visitors could be counted more than once.

2.1.3. Visitor Survey

2.1.3.1. Eligibility and Procedures

The Division on Addiction, the MGC, and the MCCG developed the Visitor Survey collaboratively. We intended the survey to provide insight into visitors' responses to the GameSense activities. We instructed GSAs to ask all visitors with whom they had an Exchange interaction to complete a survey at the completion of the interaction, with two exceptions. Visitors who indicated that they had already completed a survey were not eligible for participation. Visitors who completed a voluntary self-exclusion were also ineligible. As with the Checklist, the Visitor Survey provided no identifying information about visitors. We restricted visitor surveys to Exchange interactions at the direction of the MGC. Therefore, this report cannot reveal visitors' impressions of Simple, Information, or Demonstration interactions.

Respondents typically completed the surveys via paper-and-pencil and returned them to an onsite drop box. Completed surveys were taken to the MGC for data entry into Survey Monkey. Respondents were provided a small gift in exchange for completing the survey. They used GameSense-branded merchandise in an attempt to spread awareness of the program. During internal discussions, some GSAs mentioned that they used the small gift to incentivize visitors not only to complete the survey, but also to have a back-and-forth conversation in the first place.

It is important to note that although this report treats all responses independently, as if they were all provided by unique visitors, it is possible that some respondents contributed more than one survey. Because we did not ask respondents to provide any identifying information, we have no way to ensure that surveys are truly independent from each other.

The Visitor Survey was one-page long. We maximized the breadth of questions while minimizing respondent burden by developing six versions of the Visitor Survey. As described in more detail below, most questions were included in only one version. Some questions were included in more than one version. The Appendix provides the full set of six Visitor Surveys.

We developed a Spanish-language copy of Version 1 for use with visitors who preferred to speak and write in Spanish. When we sought translation services during Fall 2015, Version 1 was the only survey version ready for translation.

2.1.3.2. Response Rate

We calculated an approximation of response rate for the Visitor Surveys using (1) the total number of eligible visitors involved in Exchange interactions (as revealed by Checklist data) during the window of observation (December 1, 2015-May 31, 2016) and (2) the total number of Visitors Surveys entered into Survey Monkey dated during the window of observation. As Figure 3 illustrates, GSAs

reported that they had Exchange interactions with 1,155 eligible visitors, and MGC staff entered 982 Visitor Surveys dated between December 1, 2015-May 31, 2016. Therefore, the estimated response rate is 85.0% (i.e. 982/1,155). This approximated response rate is acceptable for research of this kind and should yield a sample that is representative of visitors who participated in Exchange interactions with GSAs (Singleton & Straits, 2005).
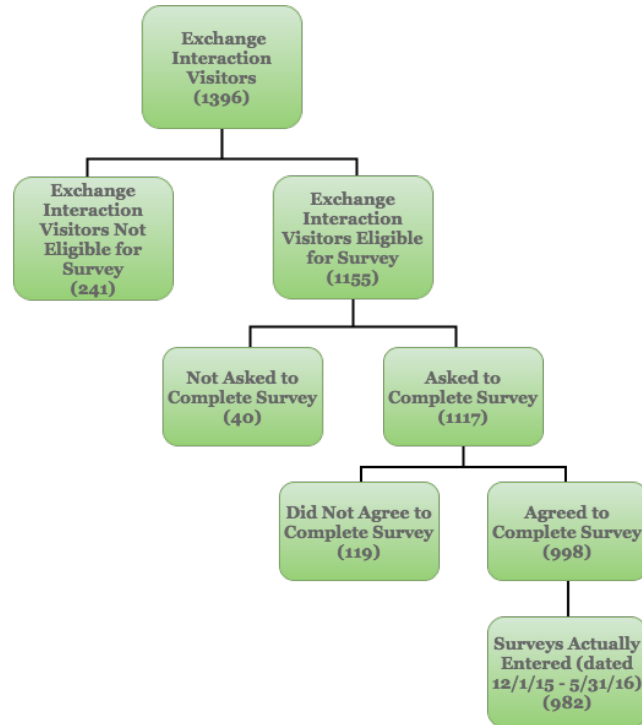
Figure 3: Response Rate Calculation Flowchart

The 982 completed surveys were fairly evenly divided among the six survey versions:
- 159 Version 1 surveys were completed (including 10 completed in Spanish).
- 162 Version 2 surveys were completed.
- 166 Version 3 surveys were completed.
- 171 Version 4 surveys were completed.
- 144 Version 5 surveys were completed.
- 180 Version 6 surveys were completed.

2.1.4. Human Subjects Protection

We documented with the Cambridge Health Alliance Institutional Review Board that our activities (i.e. secondary analysis of Checklist and Visitor Survey records) did not represent human subjects research under the federal guidelines.

2.2. Measures: Evaluation Goal 1: Conduct an Epidemiology of Services

In this section, we organize our description of the questions included in the Checklist and/or Visitor Survey according to the research questions outlined previously.

2.2.1. Services Provided

2.2.1.1. How many interactions of each type are GSAs having with visitors? How many visitors are involved in these interactions?

Checklist
The Checklist first asked GSAs to record which type of interaction they completed: Simple, Instructive, Demonstration, or Exchange. It also asked how many visitors were involved in the interaction. These questions allowed us to calculate the number of each type of interaction and the number of visitors per interaction type GSAs completed.

2.2.1.2. How frequently do GSAs transition from one type of interaction to another?

Checklist
For Instructive, Demonstration, and Exchange interactions, the Checklist asked the GSAs to report whether the interaction began as a different type and, if yes, what type. Because our categorization system asked GSAs to classify the interaction using the highest level of engagement, interactions could only transition from a lower level to a higher level. For instance, an Exchange interaction could have started as a Simple, Instructive, Demonstration, or Exchange interaction. However, an Instructive interaction could only have started as a Simple or Instructive interaction. A Simple interaction could not have started as anything else.

2.2.2. GSA Workload

2.2.2.1. How are GSAs dividing up the workload?

Checklist
The GSAs recorded their name each time they completed a Checklist. This allows us to calculate the proportion of all interactions accounted for by each GSA.

Visitor Survey
Respondents also provided the name of the GSA with whom they spoke. In some cases, the GSAs wrote their names information in directly. As with all Visitor Survey questions, their responses can only inform us about Exchange interactions.

2.2.3. Available Space

2.2.3.1 How are GSAs using the available space?

Checklist
For Instructive, Demonstration, and Exchange interactions, GSAs identified where the interaction took place (i.e., In the GameSense Info Center, On the casino floor, Pari-mutuel wagering, By website, Restaurant, or Back of house/employee area).

2.2.4. Peak Times

2.2.4.1. What are peak times for visitor interactions?

Checklist
For all interaction types, Survey Monkey recorded the date and time an individual Checklist was launched and submitted as the start date and end date, respectively. GSAs had the opportunity to enter a different start date and time to indicate that an interaction happened previously. They did so 3,646 times. In these cases, we used the GSA-entered start date and time instead of the information that Survey Monkey automatically recorded. We used start date and times to examine date/time trends in interactions. For Exchange interactions only, GSAs indicated the approximate duration of the interaction.

Visitor Survey
The Visitor Survey allowed us to examine peak times in survey completion. The first two questions asked for the date and time of the survey completion.

2.2.5. Visitor Characteristics

2.2.5.1. What are the characteristics of visitors to the GameSense Program?

Checklist
One section of the Checklist asked questions about GSAs' impressions of visitors involved in each interaction. The GSAs were asked to estimate the gender (man or woman) and age (between 18-30, 31-50, 51-70, or age 71 or older) of each visitor, for up to 2 visitors. Additionally, the GSAs described visitors in terms of type (i.e. casino patron, concerned other, casino employee, or other). The GSAs were asked if the visitor appeared (1) irritable, anxious or angry, (2) sad, (3) otherwise distressed, (4) to be under the influence of alcohol or other drugs, or (5) to be experienced with gambling. GSAs could select as many of these characteristics as applied to each visitor. We report responses to these questions within the context of Exchange interactions only.[4]

We were interested in whether visitors were having repeated interactions with GSAs. For the bulk of the study period, we asked the GSAs to report whether they had had a previous interaction with the visitor with whom they had a Simple, Instructive, Demonstration, or Exchange interaction. Although GSAs might have reported engaging with more than one visitor within a single interaction, they were asked this question only once per interaction. If GSAs responded yes," the Checklist prompted them record what type(s) of interaction(s) they previously had with the visitor (i.e., Simple, Instructive, Demonstration, or Exchange).[5]

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[4] Initially, we programmed the Checklist such that these questions would only appear when GSAs select Exchange interactions. Our goal was to minimize GSA burden. On May 6, 2016, in an effort to gather more complete data, we made changes to the Checklist so that these questions also were asked for Instructive and Demonstration interactions as well. Because the sample for Instructive and Demonstration interactions from 12/1/15 to 5/5/16 is so small, we limit the findings of this report to Exchange interactions that took place throughout the entire study period (12/1/15-5/31/16).

[5] On May 6, 2016, we improved the Checklist so that if GSAs reported engaging with 2 visitors, they were prompted to report on previous interactions separately for each visitor, for up to 2 visitors. At the same time, we removed this section from the Simple Interaction Checklist. In this report, we only include previous interactions data collected between December 1, 2015 to May 5, 2016, inclusive and for all four interaction types.

Visitor Survey

In the Visitor Survey, respondents identified themselves in terms of (1) gender, (2) race, (3) ethnicity, (4) age, and (5) highest level of school completed. All versions of the survey included all five of these questions.

2.3. Measures: Evaluation Goal 2: Evaluate Progress toward Stated Goals

2.3.1. Provide Information and Resources across the Spectrum of Needs

2.3.1.1. What actions are GSAs taking during these interactions?

Checklist

After Instructive and Exchange interactions, GSAs described what actions they took. GSAs could check as many actions as applied. Response options for Instructive interactions included (1) I provided information about responsible gambling, (2) I provided information about Play My Way, (3) I provided information about the Helpline, and others. Response options for Exchange interactions included (1) I provided written information, (2) I provided information or advice verbally, (3) I enrolled the patron in Play My Way), and others. After Demonstration interactions, GSAs indicated which of two possible actions they took: (1) performed a demonstration to illustrate a responsible gambling concept or (2) assisted the visitor with using the GameSense kiosk.

2.3.1.2. What do visitors say they are learning during these interactions?

Visitor Survey

We asked respondents to recall the kinds of information they learned during interactions with GSAs. Version 1 included the question, "*Did you learn about any of the following during your conversation with the GameSense Advisor?*" Version 2 asked this question in a slightly different way: "*Did the GameSense Advisor share information about any of the following with you?*" In both cases, response options ranged from less serious to more serious. They included (1) strategies to keep gambling fun, (2) the Play Management system: what it is, how it works, (3) how gambling works, (4) a referral for gambling treatment, (5) how to get other support for gambling-related problems, (6) how to get legal or financial help, (7) the voluntary self-exclusion program, and (8) none of these. For both of these questions, visitors could check multiple response options.

2.3.1.3. What do visitors say about how these interactions might affect their gambling behavior?

Visitor Survey

In Version 5, we asked, "*As a result of your conversation with the GameSense Advisor, will you...*" Response options included (1) visit the GameSense website, (2) tell someone about the GameSense Info Center, (3) call the problem gambling helpline, and others. Respondents could select multiple options.

2.3.2. Appeal to a Wide Audience

2.3.2.1. According to visitors, who might benefit from GameSense services?

Visitor Survey
In Version 4 we asked, "*Which groups of people might benefit from having a conversation with a GameSense Advisor?*" Respondents could select as many answer choices as they wished; options were (1) anyone who gambles, (2) people at risk for developing a gambling problem, (3) people who have a gambling problem, and (4) other.

2.3.2.2. What are the concerns, if any, of those who interact with GameSense Advisors?

Checklist
After Exchange interactions, GSAs summarized visitors' initial concerns (e.g., the visitor wanted help or information about responsible gambling, the visitor needed information about the Helpline, the visitor wanted a referral for treatment for problem gambling). We defined responsible gambling in-formation in this context as "how to play the games, odds of winning/losing, gambling myths, house advantage, randomness, how to keep gambling fun."

Visitor Survey
Included in all versions of the survey was the question, "*Did you have any of the following concerns when you began your conversation with the GameSense Advisor?*" Response options included (1) being curious about GameSense, (2) wanting to learn more about how gambling works, (3) wanting to learn more about or enroll in voluntary self-exclusion, and others.

2.3.2.3. Do those who interact with GameSense Advisors report extensive gambling histories and gambling-related problems?

Visitor Survey
We asked visitors two questions about their gambling history. In Version 3, we asked, "*Which of the following have you done in the last year?*" We listed 9 types of gambling activities and instructed respondents to endorse as many as applied to them. We used respondents' answers to describe their gambling histories; "extensive gambling history" is not a formal term but is instead our way of describing respondents who report engaging in more rather than fewer forms of gambling during the past year. To identify the extent of visitors' gambling-related problems, we asked in survey Version 4, "*Have you ever had any of these problems with your gambling?*" Response options were (1) I had money problems because of my gambling, (2) I had problems with friends or family members because of my, (3) I had problems at work because of my gambling, (4) I had legal problems because of my gambling, (5) I had problems with my physical health because of my gambling, (6) I had prob-lems with my mental health because of my gambling, (7) I was cheated while gambling, and (8) I had some other kind of problem because of my gambling. Respondents could select as many answers as applied to them.

2.3.3. Establish a Strong Working Alliance with Visitors

2.3.3.1. To what extent are visitors satisfied with GameSense services?

Visitor Survey

Survey 6 included the question, "*How satisfied are you with your interaction with the GameSense Advisor*?" Response options were (1) not at all satisfied, (2) slightly satisfied, (3) moderately satisfied, (4) very satisfied, and (5) extremely satisfied.

We used several other questions to study visitors' responses to GameSense services. Some of these questions concerned the GameSense Info Center itself: we asked those who visited the GameSense Info Center (1) whether their visit enhanced their visit to PPC, (2) whether it detracted from their visit to PPC, and (3) whether they would visit the GameSense Info Center again. These questions were included in Versions 2 and 5. Version 3 asked whether visitors they felt the GameSense Info Center space was private and whether it was comfortable.

2.3.3.2. What are visitors' impressions of GameSense Advisors?

Visitor Survey
One multi-part question included in Version 1 tapped visitors' impressions of the GameSense Advisors with whom they interacted. This question was worded, "*My GameSense Advisor… was caring, was helpful, was knowledgeable, and listened to me.*" Visitors were asked to select one response per question stem, and response options were (1) strongly disagree, (2) disagree, (3) uncertain, (4) agree, and (5) strongly agree.

2.3.3.3. Do visitors report that their concerns, if any, have been resolved following discussions with GameSense Advisors? Do their reports vary according to GSA?

Visitor Survey
To assess visitors' impressions of how well GSA answered their questions or resolved their concerns we asked, "*To what extent was your primary question answered or your primary concern resolved?*" Response options were (1) not at all, (2) somewhat, and (3) completely. For this question, which was included in all versions of the survey, visitors could only provide one response. After describing trends across all Visitor Surveys, we examined trends separately according to the particular GSA(s) with whom the respondent met.

2.3.3.4. Are members of different demographic groups (e.g., men versus women, older patrons versus younger patrons) equally responsive to GameSense services?

Visitor Survey
We conducted interaction analyses to test the null hypothesis that visitors with different characteristics (e.g., gender, age, highest level of education) provided similar responses to survey questions. For these tests, we focused on three key outcomes: (1) whether the visitor reported that his/her concern was completely resolved; (2) the visitor's reported satisfaction with the services provided; and (3) the visitor's impressions of the GSA with whom he/she spoke. We conducted these tests to learn more about the potential need to target GameSense services to particular groups of visitors. As a hypothetical example, if women visitors report less satisfaction with GameSense services than men, this finding would suggest that GSAs need to improve their interactions with women.

2.3.5. Attract Visitors from both Inside and Outside the Casino

2.3.5.1. How did visitors first hear about GameSense? What proportion of visitors learned about GameSense onsite, versus outside the casino?

Visitor Survey
We used two questions to learn about visitors' awareness of the GameSense Info Center before they arrived at the casino. The first question, included in Versions 2 and 5, was "*Did you know about the GameSense Info Center before today's visit?*" Another question, included in Version 6, was "*Have you heard about the GameSense Info Center from any of these sources?*" Response options included (1) walking by it, (2) seeing an ad, (3) reading about it in the newspaper, and others. Respondents could select multiple options.

2.3.5.2 Who initiated interactions between GSAs and visitors?

Checklist
To understand how GSA-visitor interactions emerged, we asked GSAs "*How did the interaction begin?*" We asked this question only in the context of Exchange interactions. Answer choices were (1) I approached the visitor(s), (2) the visitor(s) approached me, (3) security introduced the visitor(s) to me, (4) another casino employee introduced the visitor(s) to me, (5) state police introduced the visitor(s) to me, (6) a gaming agent introduced the visitor(s) to me, and (7) a concerned other introduced the visitor(s) to me). GSAs could select only one answer.

2.4. General Comments

At the end of all versions of the survey, visitors were asked to provide comments on their experiences.

2.5. Analytic Plan

2.5.1. Checklist

We generated descriptive statistics for all Checklist variables. More specifically, we present frequency distributions to summarize GSAs' responses to each Checklist question. Where appropriate, we present additional descriptive statistics, such as mean, standard deviation, and range.

2.5.2. Visitor Survey

As with the Checklist findings, we present descriptive statistics (e.g., frequencies, means, standard deviations) for all Visitor Survey questions. We used appropriate statistical tests to test the null hypothesis that visitors with different characteristics were equally responsive to GameSense services.

2.5.3. A Note on Percentages and Missing Values

For many of the questions in the Checklist and Visitor Survey, determining the number of expected responses was fairly straightforward. Whenever we asked GSAs or visitors to provide one and only one response, the expected number of responses was simply the number of times the question was asked. In these cases, we determined the number of missing observations as simply the number of times a GSA or visitor did not answer question. We described the relative frequency (i.e., percentages) of each response by dividing the observed frequency of each response by the total number of expected responses. Other questions in the Checklist or Visitor Survey did not require any response

at all and/or allowed for multiple responses. For example, GSAs could report that they discussed several different topics within a single Exchange interaction. Visitors could report that they had experienced multiple gambling-related problems, or no problems at all. For these questions, we do not report on missing observations. We calculated percentages using the number of times the question was asked as the denominator. However, those percentages do not necessarily sum to 100%. Throughout the Results section, we provide notes to assist the reader in interpreting each type of question.

Results

3.1. Evaluation Goal 1: Conduct an Epidemiology of Services

3.1.1. Services Provided

3.1.1.1. How many interactions of each type are GSAs having with visitors? How many visitors are involved in these interactions?

In total, GSAs completed 5,659 Checklists during the window of observation. This number translates into about 31.4 interactions per day. The GSAs reported interacting with a total of 9,342 visitors, or about 51.9 per day. However, within 68 Checklists, GSAs did not indicate the number of visitors with whom they interacted. Our estimate of 9,342 visitors is therefore an underestimate of the total visitors who engaged with GSAs during the window of observation.

Table 1 shows the total number and frequency of each type of interaction. GSAs reported that most of their interactions were of the Simple type (69.7%), followed by Exchange (16.0%), Instructive (13.0%), and Demonstration (1.2%). Of the 9,343 total visitors represented in the Checklists, most (71.3%) had Simple interactions with GSAs.

Table 1: Total Interactions, Total Visitors, and Visitors per Interaction, Overall and By Interaction Type

	Total Interactions		Total Visitors	
Interaction Type	N	%	N	%
Simple	3,946	69.7	6,664	71.3
Instructive	735	13.0	1,128	12.1
Demonstration	70	1.2	154	1.6
Exchange	908	16.0	1396	14.9
Total	5,659	100.0	9,342	100.0

Table 2 shows trends in the number of visitors per interaction, separately for each interaction type. The majority of Simple interactions (52.1%) included two visitors, though interactions with only one visitor were common as well (39.8%). This pattern was reversed for Instructive interactions, when GSAs most commonly spoke with one visitor (51.3%) and discussions with two visitors were less frequent (35.9%). Similarly, GSAs tended to have Exchange interactions with just one visitor (63.1%). They had Exchange interactions with two visitors 23.5% of the time. Numbers were split for Demonstrations: interactions with one visitor (35.7%) and with two visitors (42.9%) were about equally frequent. Interactions with more than two visitors were rare, across all interaction types.

Table 2: Number of Recorded Visitors per Interaction

Interaction Type	# Visitors Recorded	n	%
Simple (n = 3946)	1	1571	39.8
	2	2057	52.1
	3	231	5.9
	4	69	1.7
	5	2	0.1
	Missing	16	0.4
Instructive (n = 735)	1	377	51.3
	2	264	35.9
	3	49	6.7
	4	9	1.2
	5	1	0.1
	6	1	0.1
	7	1	0.1
	22	1	0.1
	Missing	32	4.4
Demonstration (n = 70)	1	25	35.7
	2	30	42.9
	3	3	4.3
	4	2	2.9
	6	1	1.4
	11	1	1.4
	13	1	1.4
	22	1	1.4
	Missing	6	8.6
Exchange (n = 908)	1	573	63.1
	2	213	23.5
	3	51	5.6
	4	36	4.0
	5	20	2.2
	Missing	14	1.5

Note: When GSAs did not indicate the number of visitors, we did not count any visitors toward the total counts.

The length of Exchange interactions varied but tended to last 6-10 minutes (n = 300; 33.0%) or 11-20 minutes (n = 207; 22.8%).

3.1.1.2. How frequently do GSAs transition from one type of interaction to another?
GSAs completed a total of 1,713 Instructive, Demonstration, and Exchange interactions. Table 3 summarizes how each of these interactions began. Note that approximately three-quarters of In-structive, Demonstration, and Exchange interactions began as Simple interactions.

Table 3: Interaction Transitions

Did this Interaction begin as a different kind of interaction? (n = 1,713)	n	%
Instructive Interactions (n = 735)		
Yes, it started as a Simple Interaction	522	71.0
No	82	11.2
Other	3	0.4
Missing	128	17.4
Demonstration Interactions (n = 70)		
Yes, it started as a Simple Interaction	53	75.7
Yes, it started as an Instructive Interaction	4	5.7
No	5	7.1
Other (please specify)	1	1.4
Missing	7	10.0
Exchange Interactions (n = 908)		
Yes, it started as a Simple Interaction	713	78.5
Yes, it started as an Instructive Interaction	18	2.0
Yes, it started as a Demonstration Interaction	10	1.1
No	98	10.8
Other (please specify)	8	0.9
Missing	61	6.7

3.1.2. GSA Workload

3.1.2.1. How are GSAs dividing up the workload?

We first answered this question using Checklist data. Figure 4 illustrates the distribution of interactions by GSA. The "other" category refers to a combination of GSAs or a staff member other than those we have labeled GSA #1-4.
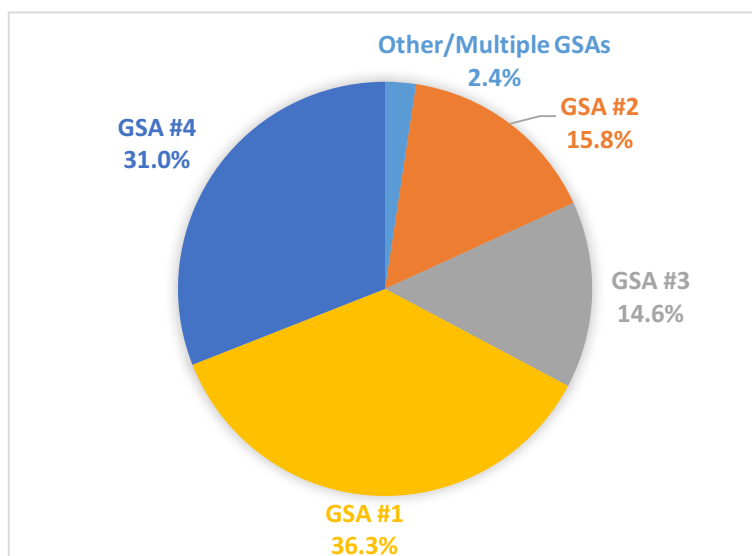
Figure 4: Distribution of Interactions by GSA

Figure 5 is more specific in that it shows data only from Exchange interactions. This Figure illustrates the proportion of Exchange interactions per GSA.
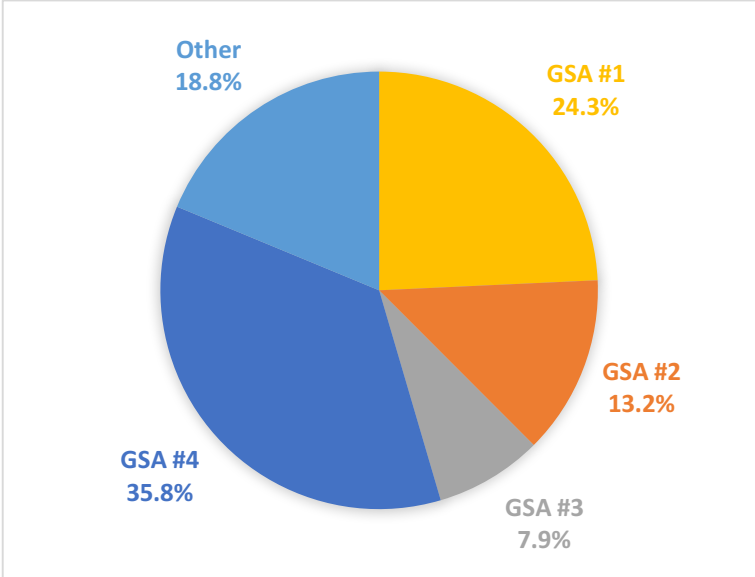
Figure 5: Distribution of Interactions by GSA, Exchange Interactions Only

As mentioned, in the Visitor Surveys, respondents indicated the GSA(s) with whom they interacted. Figure 6 shows visitors' responses. GSAs #1 and #4 account for 30.1% and 31.2% of the surveys, respectively. GSAs #2 and #4 account for only 6.2% and 4.9% of Visitor Surveys, respectively. Moreover, respondents listed "more than one" GSA within 225 (23%) of Visitor Surveys, and GSAs #1 and #4 working together accounted for nearly all (91%) of this category. Taken together, these trends indicate that GSAs #1 and #4 are substantially over-represented, and GSAs #2 and #3, are substantially under-represented, in the Visitor Surveys.
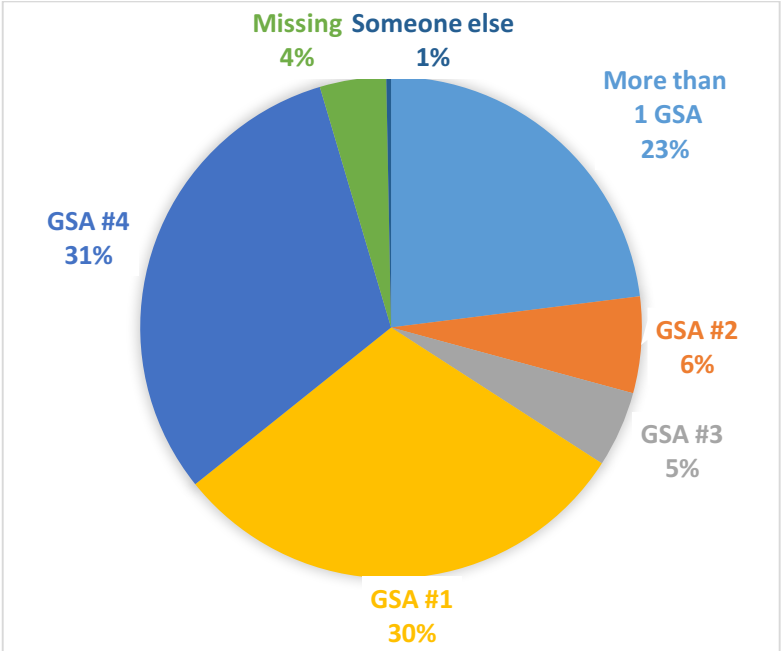
Figure 6: Visitor Reports of the GSA(s) with Whom They Interacted

3.1.3. Available Space

3.1.3.1. How are GSAs using the available space?

Table 4 provides the locations of Instructive, Demonstration, and Exchange interactions. Most (78.6%) of the Demonstration interactions took place within the GameSense Info Center. This is not surprising given that showing visitors how to use the kiosk is classified as a Demonstration. Most Exchange interactions (61.5%) also took place within the GameSense Info Center. Instructive interactions, on the other hand, tended to take place on the casino floor.

Table 4: Location of Instructive, Demonstration, and Exchange Interactions

Location	Instructive (n = 735)		Demonstration (n = 70)		Exchange (n = 908)	
	n	%	n	%	n	%
GameSense Info Center	196	26.7	55	78.6	558	61.5
On the casino floor	482	65.6	9	12.9	285	31.4
In the pari-mutuel wagering area	5	0.7	1	1.4	26	2.9
Other (i.e. by website, in restaurant, back of house/employee area)	21	2.9	1	1.4	20	2.2
Missing	31	4.2	4	5.7	19	2.1

3.1.4. Peak Times

3.1.4.1. What are peak times for visitor interactions?

We observed that the busiest days for visitor interactions were Saturdays (19%), Fridays (16%) and Thursdays (16%). The busiest times were between 12pm-3pm (26%), between 3pm-6pm (21%), and between 9am-12pm (19%). Figure 7 shows the total number of interactions by both weekday and time of day.

Figure 7: Number of Interactions by Weekday/Time
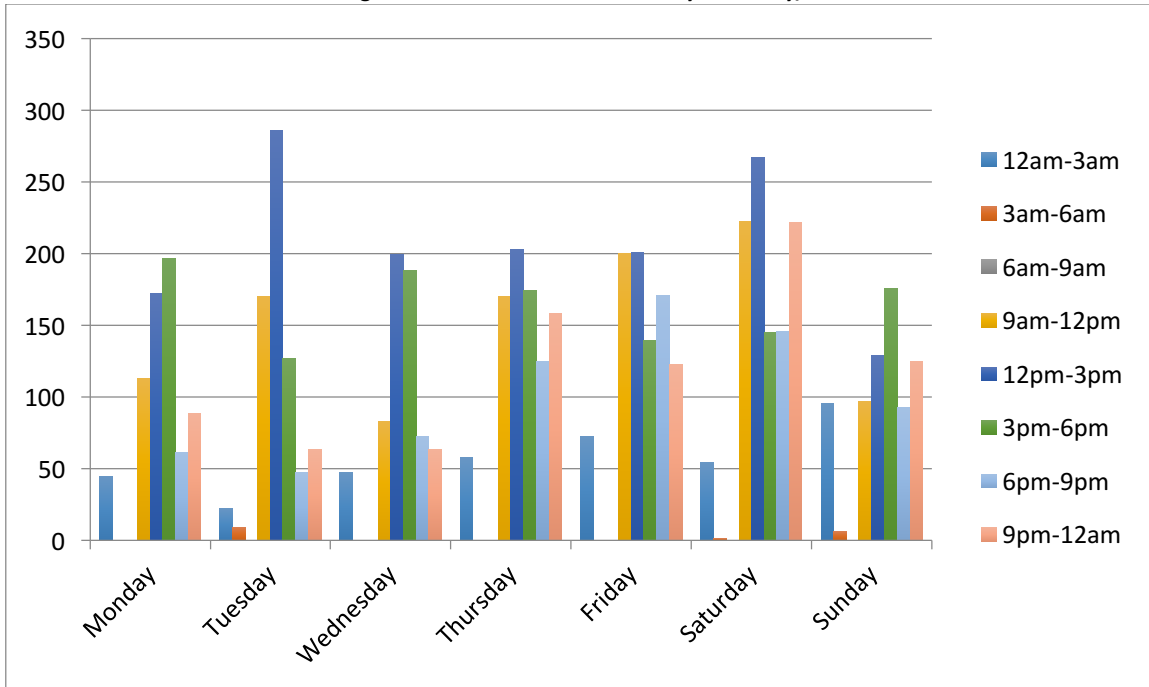
As Figure 8 illustrates, we observed that Visitor Surveys were most likely to be completed on Saturdays, Fridays, or Thursdays. Few of the surveys were completed on Sundays or Mondays.
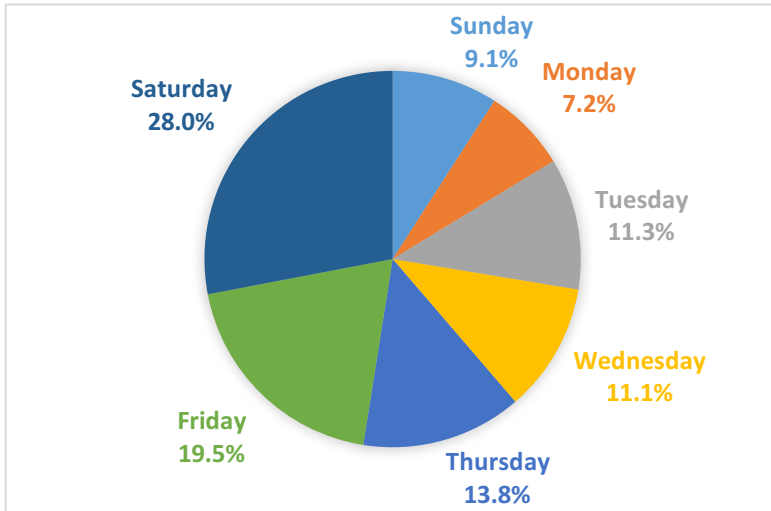
Figure 8: Weekday Trends in Visitor Survey Completion

Visitor Surveys were most likely to be completed between the hours of 12pm and 3pm. We note, however, that 560 of 982 respondents did not provide the time of survey completion, or did not provide enough detail for us to identify the time of survey completion. Often, respondents provided the time period without indicating AM or PM. Figure 9 shows time trends as a proportion of all available data.
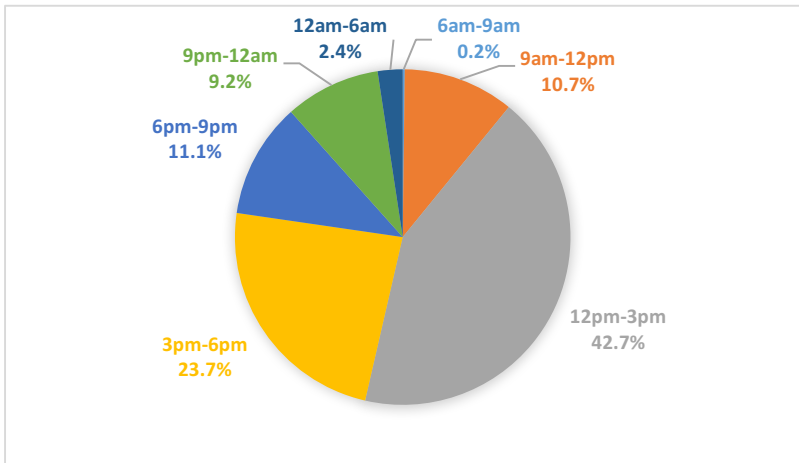
Figure 9: Time Trends in Visitor Survey Completion

3.1.5. Visitor Characteristics

3.1.5.1. What are the characteristics of visitors to the GameSense Program?

Recall that following Exchange interactions with 1 or 2 visitors, GSAs were asked to provide their impressions of the individual visitors. This results in a total of 999 individual visitor impressions (i.e. 573 interactions with 1 visitor and 213 interactions with 2 visitors each). The GSAs estimated the gender of 992 visitors. They identified 544 (54.5%) as male and 448 (44.8%) as female. The estimated gender was missing for 7 (0.7%) visitors. They estimated the age of 993 visitors. The GSAs estimated that 102 (10.2%) were between 18-30, 363 (36.3%) were between 31-50, 443 (44.3%) were between 51-70, and 85 (8.5%) were over 70. The estimated age was missing for 6 (0.6%) visitors. The majority (n = 937; 93.8%) of visitors were identified as casino patrons. The GSAs also recorded interactions with 42 (4.2%) casino employees, 5 (0.5%) "concerned others," and 8 (0.8%) "others" (see Table 5).

Table 5: Visitor Demographics as Estimated by GSAs

This visitor appears to be… (n = 999)		
	n	**%**
Estimated Gender		
Man	544	54.5
Woman	448	44.8
Missing	7	0.7
Age		
Between 18-30	102	10.2
Between 31-50	363	36.3
Between 51-70	443	44.3
Age 71 or older	85	8.5
Missing	6	0.6

Visitor Type		
Casino patron	937	93.8
Concerned Other	5	0.5
Casino employee	42	4.2
Other	8	0.8
Missing	7	0.7

As Table 6 summarizes, the GSAs reported that they believed most (n = 769; 77.0%) visitors appeared to be experienced with gambling. They reported that 25 (2.5%) visitors appeared to be irritable, anxious, or angry, 35 (3.5%) appeared to be sad, and 37 (3.7%) appeared to be otherwise distressed. GSAs only identified 5 (0.5%) visitors as under the influence of alcohol or other drugs. Further inspection revealed that GSAs described 75 visitors (7.5%) to be irritable/anxious/angry, sad, *or* otherwise distressed.

Table 6: GSA Impressions of Visitors' Behavior and Experience with Gambling

This visitor appears to… (n = 999)		
	n	**%**
Be irritable, anxious, or angry	25	2.5
Be sad	35	3.5
Be otherwise distressed	37	3.7
Any of these three	*75*	*7.5*
Be experienced with gambling	769	77.0
Be under the influence of alcohol or other drugs	5	0.5

GSAs could select more than one response or no response.

GSAs reported on whether they had previously interacted with the visitors involved in 5,080 of their interactions. GSAs tended to report that they had not previously interacted with the visitor (n = 2,978; 58.6%), though a substantial minority of visitors (n = 2,066; 40.6%) represented "repeat customers." Responses are missing from 36 (0.7%) of these interactions. Of the 2,066 visitors who represented repeat customers, 1,198 (58.0%) had previously had an Exchange interaction.

As Table 7 summarizes, we examined the responses for this question for each interaction type. The GSAs reported previously interacting with the visitor(s) in 1,724 (48.9%) Simple interactions, 109 (16.0%) Instructive interactions, 14 (20.9%) Demonstration interactions, and 217 (26.9%) Exchange interactions. In Simple, Instructive, and Exchange interactions with "repeat customers," the GSAs were most likely to report having had a previous Exchange interaction followed by a Simple interaction. In Demonstration interactions, GSAs were most likely to report having had a previous Simple interaction.

Table 7: Responses to *"Have you interacted with this patron or employee before?"*

Have you interacted with this patron or employee before? (n = 5,080)		
	N	%
Simple (n = 3,524)		
Yes: previous interaction type:	1,724	48.9
Simple	*900*	*52.2*
Instructive	*323*	*18.7*
Demonstration	*155*	*9.0*
Exchange	*1,009*	*58.5*
No	1,789	50.8
I don't know	2	0.1
Missing	9	0.3
Instructive (n = 681)		
Yes: previous interaction type:	109	16.0
Simple	*48*	*44.0*
Instructive	*3*	*2.8*
Demonstration	*1*	*0.9*
Exchange	*63*	*57.8*
No	563	82.7
I don't know	0	0.0
Missing	9	1.3
Demonstration (n = 67)		
Yes: previous interaction type:	14	20.9
Simple	*7*	*50.0*
Instructive	*3*	*21.4*
Demonstration	*0*	*0.0*
Exchange	*5*	*35.7*
No	49	73.1
I don't know	0	0.0
Missing	4	6.0
Exchange (n = 808)		
Yes: previous interaction type:	217	26.9
Simple	*103*	*47.5*
Instructive	*73*	*33.6*
Demonstration	*24*	*11.1*
Exchange	*121*	*55.8*
No	577	71.4
I don't know	0	0.0
Missing	14	1.7

GSAs could select more than one type of previous interaction type.

Respondents who completed Exchange interactions and Visitor Surveys provided their own demographic information, as well. Table 8 summarizes their responses. Of the 982 visitors who completed surveys, 447 (45.5%) identified as men and 524 (53.4%) identified as women. Two identified as another gender category and 9 did not respond to this question. The majority (n = 778, 79.2%) identified as White. The second most frequent race category was Asian (n = 81; 8.2%), followed by Black/African American (n = 55; 5.6%). The remaining 68 participants (6.9%) identified as American Indian/Alaska Native, Native Hawaiian/other Pacific Islander, or two or more races, or did not in-

clude their racial identity. Though 21.5% of respondents (n = 211) did not provide their ethnicity, we can report that 74.5% (n = 732) of participants identified as not Hispanic/Latino and the remaining 4.0% (n = 39) identified as Hispanic/Latino. Nine hundred and fifteen participants provided their age. The average participant was 53.2 years old (SD = 15.3; range = 21-90; mode = 60). Finally, participants were diverse in terms of education. Few (n = 57; 5.8%) reported having less than a high school diploma or equivalent; a plurality (n = 287; 29.2%) had a high school diploma or equivalent, 24.5% (n = 241) had some college, 11.6% (n = 114) had an associate's degree, and 25.6% (n = 251) had at least a bachelor's degree. The remaining 3.3% of participants (n = 32) did not report highest level of school they have completed.

Table 8: Demographic Profile of Visitors who Completed Visitor Surveys

	n	%	mean (SD)
Gender			
Male	447	45.5	
Female	524	53.4	
Another category/missing	11	1.1	
Race			
White	778	79.2	
Black/African American	55	5.6	
Asian	81	8.2	
Another category/missing	68	6.9	
Ethnicity			
Hispanic/Latino	39	4.0	
Not Hispanic/Latino	732	74.5	
Missing	211	21.5	
Age (years)			53.2 (SD = 15.3)
Highest level of school completed			
Less than high school diploma/equivalent	57	5.8	
High school diploma/equivalent	287	29.2	
Some college	241	24.5	
Associate's degree	114	11.6	
Bachelor's degree or higher	251	25.6	
Missing	32	3.3	

3.2. Evaluation Goal 2: Evaluate Progress Toward Stated Goals

3.2.1. Provide Information and Resources across the Spectrum of Needs

3.2.1.1. What actions are GSAs taking during these interactions?

As Table 9 shows, within Instructive interactions, GSAs most likely provided information about responsible gambling (e.g., how to play the games, odds of winning/losing, gambling myths, house advantage, randomness, how to keep gambling fun). They provided information about Play My Way during about 16% of Instructive interactions (n = 119). They discussed gambling consequences and voluntary self-exclusion in about 10% of Instructive interactions each. Other actions were rare. Fur-

ther inspection revealed that they provided a referral to the gambling helpline, professional treatment, *or* self-help within 14 (1.9%) of Instructive interactions.

Table 9: GSA Actions during Instructive Interactions

What did you do? (n = 735)		
	n	**%**
I provided information about responsible gambling	690	93.9
I provided information about Play My Way	119	16.2
I provided information about the Helpline	11	1.5
I provided a referral for treatment for problem gambling	2	0.3
I provided self-help resources	1	0.1
I provided information about gambling consequences	75	10.2
I provided information about voluntary self-exclusion	75	10.2
I provided information about help for someone else	4	0.5
I provided information about credit suspension	1	0.1
Other	102	13.9

Total percentage exceeds 100% because GSAs could select more than one response.

GSAs described their actions within Exchange interactions as well, though response options were different. As Table 10 shows, within 92.1% of Exchange interactions, they provided information or advice verbally. They provided written information (e.g., a brochure, a business card) in about 20% of Exchange interactions. They reported enrolling visitors in voluntary self-exclusion in 44 interactions (4.8%). Other actions were rare. In Table 14, we describe how GSAs modified their actions according to visitors' concerns.

Table 10: GSA Actions in Exchange Interactions

What did you do? (n = 908)		
	n	**%**
I provided written information	183	20.2
I provided information or advice verbally	836	92.1
I handed the patron(s) off to someone else who could help with gambling-related problems	3	0.3
I handed the patron(s) off to someone in Customer Service	2	0.2
I enrolled the patron(s) in voluntary self-exclusion	44	4.8
I dis-enrolled the patron(s) from voluntary self-exclusion	1	0.1
Other	16	1.8

Total percentage exceeds 100% because GSAs could select more than one response.

Recall that in a Demonstration interaction, GSAs could either (1) show the visitor how to use the GameSense kiosk or (2) perform a demonstration to illustrate a responsible gambling concept. The GSAs indicated that during 44 (62.9%) of the Demonstration interactions, they showed the visitor(s) how the use the GameSense kiosk. During 21 (30.0%) of the interactions, they performed a demonstration. They did not indicate the central activity of the remaining Demonstration interactions.

3.2.1.2. What do visitors say they are learning during these interactions?

Visitors who completed Exchange interactions provided their own perceptions of what they learned from GSAs. Table 11 summarizes responses to the questions, "*Did you learn about any of the following during your conversation with the GameSense Advisor?*" and "*Did the GameSense Advisor share information about any of the following with you?*" As this table summarizes, most respondents reported learning about or receiving information about strategies to keep gambling fun or how gambling works. More than nine of ten respondents (91.4%) reported learning about strategies to keep gambling fun *or* how gambling works. About 25% of respondents reported learning about Play My Way, the voluntary play management system. Respondents were much less likely to report learning about or receiving information about referrals for gambling treatment, how to get help for gambling-related problems, how to get legal or financial help, or the voluntary self-exclusion program.

Table 11: Responses to Questions about Topics Learned and Information Shared

	Did you learn about any of the following during your conversation with the GameSense Advisor? (Version 1) (n = 159)		*Did the GameSense Advisor share information about any of the following with you?* (Version 2) (n = 162)	
	n	%	n	%
Strategies to keep gambling fun	122	76.7	122	75.3
How gambling works	77	48.4	78	48.1
The Play Management system: what it is, how it works	42	26.4	40	24.7
A referral for gambling treatment	7	4.4	5	3.1
How to get other support for gambling-related problems, such as self-help resources, screening for gambling problems	8	5.0	8	4.9
How to get legal or financial help	7	4.4	4	2.5
The voluntary self-exclusion program	6	3.8	7	4.3
No, I did not learn about any of these topics	3	1.9	2	1.2
Other	3	1.9	10	6.2

Total percentage exceeds 100% because respondents could select more than one response.

3.2.1.3. What do visitors say about how these interactions might affect their gambling behavior?

Recall that we asked visitors what they might do as a result of their conversation with a GSA. As Table 12 shows, most respondents reported that they would tell someone else about the GameSense Info Center (56.9%), visit the GameSense website (52.1%), and/or think about their own gambling (32.6%). Respondents also indicated that they would think about someone else's gambling (9.0%) and/or talk to someone they know who may have a gambling problem (7.6%). Other responses, such as changing gambling behavior, calling a helpline, or speaking with a counselor were less common.

Table 12: Respondents' Self-Reported Planned Actions as a Result of Their Conversations with GameSense Advisors

As a result of your conversation with the GameSense Advisor, will you... (n = 144)	n	%
Visit the GameSense website	75	52.1
Tell someone about the GameSense Info Center	82	56.9
Think about my own gambling	47	32.6
Think about someone else's gambling	13	9.0
Call the problem gambling helpline	1	0.7
Speak with a counselor or other professional about gambling	3	2.1
Talk to someone I know who may have a gambling problem	11	7.6
Reduce my gambling behaviors (e.g., spend less, take more breaks)	9	6.3
Increase my gambling behaviors (e.g., spend more, take fewer breaks)	5	3.5
Other	2	1.4

Total percentage exceeds 100% because respondents could select more than one response.

3.2.2. Appeal to a Wide Audience

3.2.2.1. According to visitors, who might benefit from GameSense services?

As Figure 10 shows, most respondents (88.9%) indicated that anyone who gambles could benefit from having a conversation with a GameSense Advisor. Smaller proportions reported that people at risk for developing a gambling problem (30.4%) or people who already have a gambling problem (25.2%) would benefit from speaking with a GSA.

Figure 10: Responses to the Question, *"Which Groups of People Might Benefit from Having a Conversation with a GameSense Advisor?"*
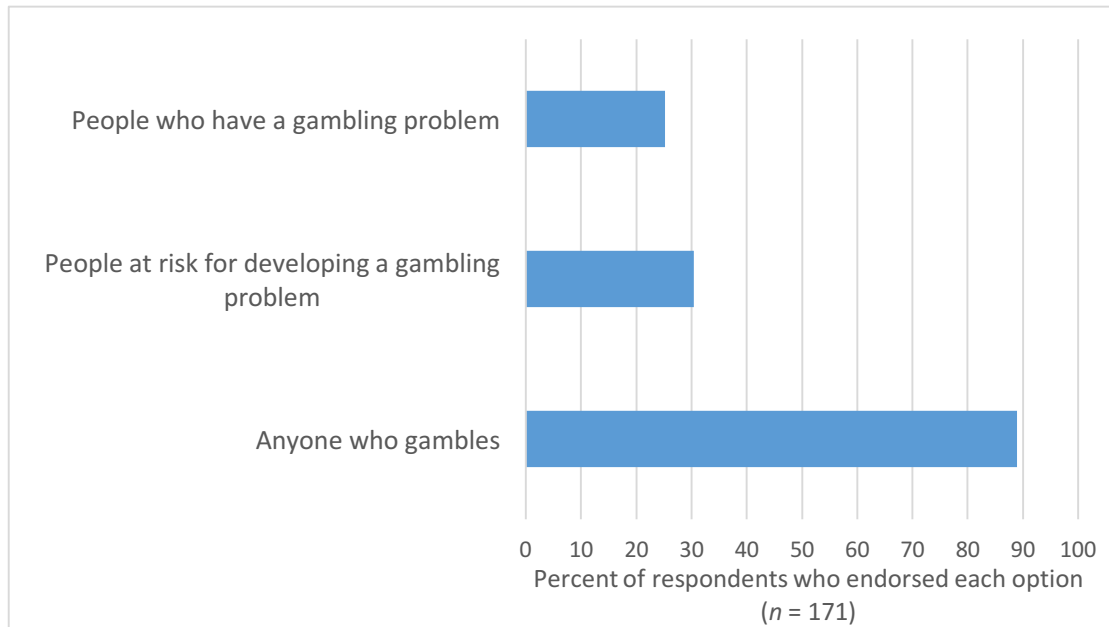
Total percentage exceeds 100% because respondents could select more than one response.

3.2.2.2. What are the concerns, if any, of those who interact with GameSense Advisors?

As Table 13 shows, for Exchange interactions in particular, GSAs reported that in most Exchange interactions (n = 726; 80.0%), visitors wanted help or information about responsible gambling. The second most frequent topic was help or information about voluntary self-exclusion (n = 116; 12.8%),

followed by help or information about Play My Way (n = 101; 11.1%) and help or information about gambling consequences (n = 79; 8.7%). The remaining topics were rarely reported, represented in 7.9% of the 908 total Exchange interactions.

Table 13: GSA Perceptions of Visitors' Concerns

The visitor(s)... (n = 908)		
	n	%
wanted help or information about responsible gambling	726	80.0
needed help or information about Play My Way	101	11.1
needed information about the Helpline	11	1.2
wanted a referral for treatment for problem gambling	3	0.3
wanted self-help resources	2	0.2
needed help or information about gambling consequences	79	8.7
needed help or information about voluntary self exclusion	116	12.8
wanted help for someone else	8	0.9
wanted a marketing restriction	1	0.1
Other	47	5.2

Total percentage exceeds 100% because GSAs could select more than one response.

We examined GSAs' actions in response to specific topics mentioned within Exchange interactions. We limited this analysis to the three most common GSA actions: providing written information, providing information or advice verbally, and enrolling the patron(s) in voluntary self-exclusion. As Table 14 shows, GSAs were most likely to provide information or advice verbally regardless of the topic of conversation. For example, GSAs reported that visitors wanted help or information about responsible gambling during 726 interactions. During 706 of these (97.2%), GSAs provided information or advice verbally. However, GSAs also adapted to the topic. For example, when visitors wanted information about the gambling hotline, GSAs provided written information 54.5% of the time. On the other hand, when visitors wanted to help or information about responsible gambling, GSAs provided written information only 16% of the time. When the conversation concerned the voluntary self-exclusion program, GSAs enrolled visitors about 37% of the time.

Table 14: GSA Action as a Function of Visitor's Concern

The visitor…	GSA Action					
	I provided written information		I provided information or advice verbally		I enrolled the patron(s) in voluntary self-exclusion	
	n	%	n	%	n	%
wanted help or information about responsible gambling (n = 726)	116	16.0	706	97.2	1	0.1
needed help or information about Play My Way (n = 101)	46	45.5	100	99.0	0	0.0
needed information about the Helpline (n = 11)	6	54.5	10	90.9	0	0.0
wanted a referral for treatment for problem gambling (n = 3)	2	66.7	3	100.0	0	0.0
wanted self-help resources (n = 2)	1	50.0	2	100.0	0	0.0
needed help or information about gambling consequences (n = 79)	46	58.2	79	100.0	2	2.5
needed help or information about voluntary self exclusion (n = 116)	55	47.4	87	75.0	43	37.1
wanted help for someone else (n = 8)	5	62.5	8	100.0	0	0.0

Total percentage of GSA actions for a given visitor concern exceeds 100% because GSAs could perform more than one action. For example, if the visitor wanted self-help resources, the GSA could provide written information and provided information verbally. Within each GSA Action the total number of cases will exceed that reported in Table 10 because a visitor could have had more than one concern. For example, during one VSE enrollment, a visitor could both have (1) needed help or information about VSE and (2) wanted help or information about responsible gambling.

We used Visitor Survey data to explore visitors' concerns, as well. As Table 15 shows, respondents often reported having general questions about gambling and GameSense when they began their conversations with GSAs. The most common questions or concerns visitors reported were being curious about GameSense (endorsed in 69.3% of surveys), wanting to learn more about how gambling works (39.0%), and wanting to learn strategies to keep gambling fun (31.1%). More serious concerns, such as wanting legal or financial help or getting casino credit suspended, were much less common.

Table 15: Visitors' Concerns at the Start of Conversations with GSAs

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? (n = 982)	n	%
I was curious about GameSense.	681	69.3
I wanted to learn more about how gambling works.	383	39.0
I wanted to learn more about strategies to keep gambling fun.	305	31.1
I wanted to learn more about or enroll in the Play Management system.	40	4.1
I wanted information about getting legal or financial help.	17	1.7
I wanted to learn more about or enroll in the voluntary self exclusion.	21	2.1
I wanted help for someone else.	18	1.8
I wanted to get my credit suspended.	7	0.7
I wanted the casino to suspend/reduce its marketing to me.	7	0.7
I wanted help or information about problem gambling.	25	2.5
I didn't have any of these concerns at the start of the conversation.	92	9.4

Total percentage exceeds 100% because respondents could select more than one response.

3.2.2.3. Do those who interact with GameSense Advisors report extensive gambling histories and gambling-related problems?

Next, we turn to visitors' gambling histories. When asked about their gambling participation in the past year, about three-quarters of respondents (72.3%) indicated that they had played slot machines or video keno at a casino or slots parlor, and slightly fewer (68.7%) reported playing the lottery, keno, instant Lotto games, or instant scratch-off tickets outside a casino or slots parlor. Other common responses were betting on sports—not online (21.1%) and playing games other than poker at a casino (21.1%). (See Table 16.)

Table 16: Respondents' Past-Year Gambling Activities

Which of the following have you done in the last year? (n = 166)	n	%
Play the lottery, keno, instant Lotto games, or instant scratch-off tickets (not at a casino or slots parlor)	114	68.7
Playing slot machines or video keno at a casino or slots parlor	120	72.3
Betting on sports with friends or in an office pool—not online	35	21.1
Betting on sports with friends or in an office pool—online (including fantasy sports)	23	13.9
Gambling at a non-profit gathering/event (e.g., church bingo game, fundraiser, raffle)	26	15.7
Playing roulette, dice, keno, or table games (other than poker) at a casino	35	21.1
Playing video poker machines or other gambling machines (other than slots and keno) at a casino or slots parlor	23	13.9
Playing poker, chess, or other game of mental skill for money (not at a casino)	12	7.2
Betting on horse or dog races	19	11.4
Another activity	1	0.6

Total percentage exceeds 100% because respondents could select more than one response.

We summed the number of past-year gambling activities each respondent reported. A plurality (33.1%) reported engaging in only one activity, and 29.5% reported engaged in two activities. On average, respondents reported engaging in 2.5 different kinds of gambling activities within the past year (SD = 1.7, range = 0-9). Table 17 summarizes these trends.

Table 17: Respondents' Sum of Past-Year Gambling Activities

Respondents' sum of gambling activities endorsed (n = 166)		
	n	%
0 activities	3	1.8
1 activity	55	33.1
2 activities	49	29.5
3 activities	26	15.7
4 activities	12	7.2
5 activities	10	6.0
6 activities	4	2.4
7 activities	3	1.8
8 activities	2	1.2
9 activities	2	1.2

As Table 18 shows, most participants reported that they had never experienced specific gambling-related problems. Seven percent of respondents (n = 12) reported that they had experienced money problems because of their gambling; this was the most frequently reported problem.

Table 18: Reported Gambling-Related Problems

Have you ever had any of these problems with your gambling? (n = 171)		
	n	%
I had money problems because of my gambling.	12	7.0
I had problems with friends or family members because of my gambling.	11	6.4
I had problems at work because of my gambling.	3	1.8
I had legal problems because of my gambling.	4	2.3
I had problems with my physical health because of my gambling.	3	1.8
I had problems with my mental health because of my gambling.	1	0.6
I was cheated while gambling.	3	1.8
I had some other kind of problem because of my gambling.	4	2.3

Respondents could select no response or more than one response.

We summed the number of gambling-related problems each respondent reported. We did not include respondents' answers to "I was cheated while gambling" in this calculation, because it is dissimilar from the remaining response options. Therefore, respondents' sum of gambling-related problems could have ranged from 0 (endorsed none of the response options) to 7 (endorsed all 7 response options). As Table 19 shows, we found that 143 (83.6%) reported having had no problems, 19 (11.1%) reported having had one problem, 8 (4.7%) reported having two problems, and 1 (0.6%) reported having had three problems. No respondents reported having experienced more than three gambling-related problems in their lifetime.

Table 19: Respondents' Pattern of Endorsing Gambling-Related Problems

Sum of gambling-related problems (n = 171)		
	n	%
Endorsed 0 gambling-related problems	143	83.6
Endorsed 1 gambling-related problem	19	11.1
Endorsed 2 gambling-related problems	8	4.7
Endorsed 3 gambling-related problems	1	0.6

3.2.3. Establish a Strong Working Alliance with Visitors

3.2.3.1. To what extent are visitors satisfied with GameSense services?

As Table 20 shows, respondents reported being very satisfied with GameSense services. When asked, *"How satisfied are you with your interaction with the GameSense Advisor?"* 140 respondents (77.8%) responded "Extremely Satisfied." An additional 30 (17.0%) responded "Very Satisfied."

Table 20: Respondents' Satisfaction with GameSense Adviser Interaction

How satisfied are you with your interaction with the GameSense Advisor (n = 180)		
	n	%
Not at all Satisfied	1	0.6
Slightly Satisfied	0	0.0
Moderately Satisfied	3	1.7
Very Satisfied	30	16.7
Extremely Satisfied	140	77.8
Missing	6	3.3

As Table 21 indicates, respondents generally had positive impressions of the GameSense services. Most (77.8%) reported that their visit to the GameSense Info Center enhanced their visit to the casino. Most respondents (77.1%) indicated that their visit to the GameSense Info Center did not detract from their casino visit, though a sizable minority (13.1%) reported that it did detract. About eight of every ten visitors (82.0%) reported that they would visit the GameSense Info Center again.

Table 21: Respondents' Impressions of the GameSense Info Center

	Did your visit to the GameSense Info Center enhance your visit to the Plainridge Park Casino? (n = 306)		Did your visit to the GameSense Info Center detract from your visit to the Plainridge Park Casino? (n = 306)		Would you come to the GameSense Info Center again? (n = 306)	
	n	%	n	%	n	%
Yes	238	77.8	40	13.1	251	82.0
No	33	10.8	236	77.1	11	3.6
N/A: I did not visit the Info Center	22	7.2	20	6.5	14	4.6
Missing	13	4.2	10	3.3	30	9.8

Respondents also reported that the GameSense Info Center space was private (79.5%) and comfortable (80.1%), as shown in Table 22.

Table 22: Respondents' Impressions of the Privacy and Comfort of the GameSense Info Center

	Did you feel that the space was private? (n = 166)		Did you feel that the space was comfortable? (n = 166)	
	n	%	n	%
Yes	132	79.5	133	80.1
No	5	3.0	2	1.2
N/A: I did not visit the GameSense Info Center	19	11.4	19	11.4
Missing	10	6.0	12	7.2

3.2.3.2. What are visitors' impressions of GameSense Advisors?

As Table 23 summarizes, respondents had positive impressions of their GameSense Advisors. The vast majority selected "strongly agree" in response to questions about whether their GameSense Advisor was caring, was helpful, was knowledgeable, and listened to them. Visitors rarely endorsed any of the other response options.

Table 23: Respondents' Impressions of GameSense Advisors

My GameSense Advisor… (n = 159)								
	was caring		was helpful		was knowledge-able		listened to me	
	n	%	n	%	n	%	n	%
Strongly disagree	8	5.0	7	4.4	4	2.5	7	4.4
Disagree	0	0.0	0	0.0	3	1.9	0	0.0
Uncertain	0	0.0	0	0.0	0	0.0	1	0.6
Agree	10	6.3	10	6.3	9	5.7	8	5.0
Strongly agree	139	87.4	138	86.8	139	87.4	140	88.1
Missing	2	1.3	4	2.5	4	2.5	3	1.9

We examined correlations among the four variables (i.e. *My GameSense Advisor was caring*; *My GameSense Advisor was helpful*; *My GameSense Advisor was knowledgeable*; *My GameSense Advisor listened to me*). We found that responses to these questions were highly inter-correlated: correlations ranged from 0.978 to 0.987 and were all statistically significant at $p < 0.001$. (A correlation of 1.0 indicates perfect agreement.) We averaged responses to the four variables. The vast majority of respondents (87.3%) had an average score of 5, which means that they responded, "Strongly agree" to all four questions. We used these average scores in the interaction analyses reported in Section 3.2.3.4.

3.2.3.3. Do visitors report that their concerns, if any, have been resolved following discussions with GameSense Advisors? Do their reports vary according to GSA?

We asked Exchange interaction visitors, "*To what extent was your primary question answered or your primary concern resolved?*" As Table 24 shows, the vast majority of respondents (87.7%) selected the option, "Completely." Only 4.3% answered "Somewhat," and less than one percent (0.7%) answered "Not at all." The remaining 7.3% of respondents did not answer this question.

Table 24: Responses to the Question, To What Extent was your Primary Question Answered or your Primary Concern Resolved?

To what extent was your primary question answered or your primary concern resolved? (n = 982)		
	n	%
Not at all	7	0.7
Somewhat	42	4.3
Completely	861	87.7
Missing	72	7.3

Next we explored these patterns separately for each GSA. Recall that GSAs #2 and #3 are under-represented in Visitor Survey data, in that they account for less than 25% of Visitor Surveys each. In

fact, respondents named each of these GSAs on fewer than 60 surveys. As a result of these small sample sizes, the trends we observed might be unstable.

As Figure 11 shows, across all GSAs, the majority of respondents indicated that their concern(s) were completely resolved. The rate of selecting "completely resolved" was highest for GSA #1 (97.4%), followed by more than 1 GSA (typically GSAs #1 and #4) (96.7%), GSA #2 (96.4%), GSA #4 (90.7%), and GSA #3 (86.4%).

Figure 11: Responses to the Question, To What Extent was your Primary Question Answered or your Primary Concern Resolved? Separately for Each GSA
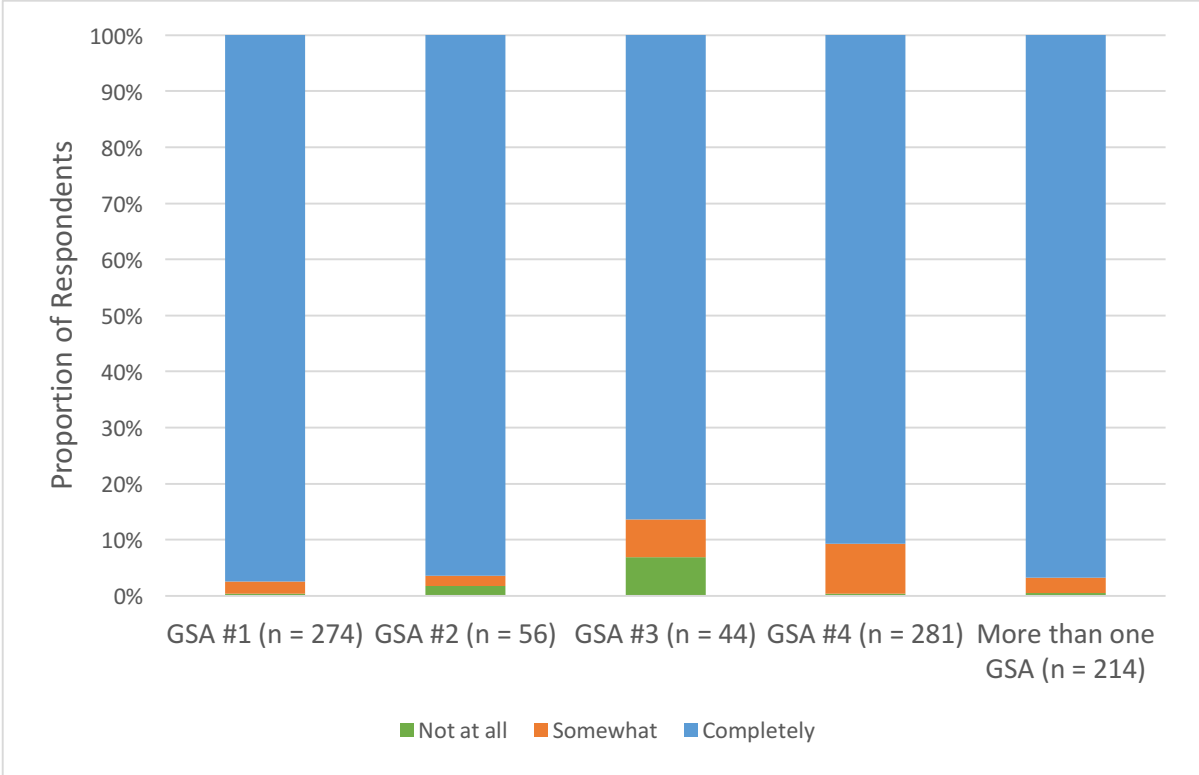
Working again with all Visitor Survey data, we dichotomized responses to this question so that all respondents who answered "Completely" were coded as *concern completely resolved* and all respondents who answered "Not at all" or "Somewhat" were coded as *concern not completely resolved*. Respondents who did not answer this question were not included in either group. Therefore, 861 respondents (94.6% of those with any response) were in the *concern completely resolved* group and 49 respondents (5.4%) were in the *concern not completely resolved* group. We used these groups in the interaction analyses reported next.

3.2.3.4. Are members of different demographic groups (e.g., men versus women, older patrons versus younger patrons) equally responsive to GameSense services?

Next we completed analyses to explore whether respondents with different characteristics (e.g., men versus women, older people versus younger people) responded similarly to key survey questions. Recall that we identified three survey questions as important outcomes: (1) whether visitors reported that their concern was completely resolved; (2) respondents' reported satisfaction with the

services provided; and (3) respondents' impressions of their GSA. For respondents' impressions of their GSA, we used the average response across the four questions (i.e. *My GameSense Advisor was caring*; *My GameSense Advisor was helpful*; *My GameSense Advisor was knowledgeable*; *My GameSense Advisor listened to me*). We examined how five visitor characteristics predicted these three outcomes: (1) gender, (2) race, (3) ethnicity, (4) age, and (5) highest level of education. Additionally, we examined the extent to which respondents' breadth of their past-year gambling activity and history of gambling-related problems predicted reports that concerns were completely resolved.[6]

We conducted the appropriate inferential tests for different combinations of variables. The outcome *concern completely resolved* versus *concern not completely resolved* is categorical. We used chi square tests to understand whether it was related to categorical predictor variables (i.e. gender, race, ethnicity, and highest level of education). We used point biserial correlation to understand its relationships with continuous predictor variables (i.e. age, sum of past-year gambling activities, sum of lifetime gambling-related problems). For the remaining two outcomes—respondent satisfaction with GameSense services and impressions of their GSA—we used *t*-tests or ANOVAs to explore relationships with categorical predictor variables (i.e. gender, race, ethnicity, and highest level of education). We used Pearson correlations to understand their relationships with respondent age.

We observed that gender,[7] race, ethnicity, age, and highest education level[8] were all unrelated to whether respondents reported that their concern(s) were completely resolved.[9] Likewise, respondents' age, sum of past year gambling activities, and sum of lifetime gambling-related problems were all unrelated to reports that their concerns were completely resolved. To summarize, GameSense visitors who indicated that their concerns were completely resolved were similar to those who reported that their concerns were less than completely resolved on all characteristics we examined.

Next we examined whether respondents' satisfaction with GameSense services was related to the five respondent characteristics. We observed no effects that reached statistical significance. In other words, respondents with different characteristics were equally likely to report being satisfied with GameSense services.

Finally, we observed that respondents' gender, ethnicity, race, age, and education level were unrelated to reported impressions of the GSAs.

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[6] We could not examine relationships between respondents' gambling activity or gambling-related problems and satisfaction with services or GSA impressions because these questions were not asked in the same survey versions.

[7] Only two respondents identified as something other than a man or a woman. To avoid extremely unbalanced cell sizes, we did not include these two respondents in this analysis.

[8] For these analyses, we created two mutually exclusive groups of respondents: those who reported earning a high school diploma/equivalent or less education, and those who reported at least some post-high school education.

[9] If more than 20% of the cells had an expected count of less than 5, we used Fisher's Exact Test. Otherwise, we used Pearson Chi Square.

3.2.4. Attract Visitors from both Inside and Outside the Casino

3.2.4.1. How did visitors first hear about GameSense?

Three hundred and six visitors were asked whether they knew about the GameSense Info Center before that day's visit. Responses were split fairly evenly: 135 visitors (44.1%) had heard of it, and 153 (50.0%) had not heard of it. The remaining 18 visitors (5.9%) selected "not applicable" or did not answer this question.

3.2.4.2. What proportion of visitors learned about GameSense onsite, versus outside the casino?

One hundred and eighty respondents indicated whether they had heard about the GameSense Info Center from a given set of sources. As Table 25 summarizes, visitors typically learned about the GameSense Info Center on site, either when they walked by it (n = 117, 65%), from an onsite kiosk (n = 66, 35%), by an ad or sign at the casino (n = 20, 11.1%) or from a PPC employee (n = 21, 11.7%). Fourteen respondents saw a television ad for the GameSense Info Center (7.8%). Respondents were unlikely to report that they heard about the Info Center in other ways.

Table 25: Respondents' Sources of Exposure to the GameSense Info Center

Have you heard about the GameSense Info Center from any of these sources? (n = 180)		
	n	%
I walked by it	117	65.0
I saw a GameSense kiosk in the Plainridge Park Casino	63	35.0
I saw some other advertisement/sign in the Plainridge Park Casino	20	11.1
A Plainridge Park Casino employee told me about it	21	11.7
A friend/family member told me about it	14	7.8
I read about it in the newspaper	2	1.1
I saw an ad on TV	14	7.8
I saw an ad online	3	1.7
I heard an ad on the ratio	7	3.9
I saw a billboard	3	1.7
Another professional offered me this resource	7	3.9
I don't know/don't remember	4	2.2
Other	4	2.2

Total percentage exceeds 100% because respondents could select more than one response.

3.2.4.3. Who initiated interactions between GSAs and visitors?

As Table 26 shows, the GSAs reported that visitors initiated a slight majority of Exchange interactions (n = 486; 53.5%). GSAs initiated 342 interactions (37.7%) and security at PPC initiated 30 interactions (3.3%). Other situations were rare.

Table 26: Patterns in the Initiation of Exchange Interactions

| *How did the interaction [Exchange] begin?* (n = 908)		
	n	%
I approached the patron(s).	342	37.7%
The patron(s) approached me.	486	53.5%
Security introduced the patron(s) to me.	30	3.3%
Another casino employee introduced the patron(s) to me.	9	1.0%
State police introduced the patron(s) to me.	3	0.3%
A gaming agent introduced the patron(s) to me.	3	0.3%
A concerned other introduced the patron(s) to me.	1	0.1%
Other (please specify)	15	1.7%
Missing	19	2.1%

3.3. Range of Services Provided

In a supplemental analysis, we combined data across sources—the Checklist and the Visitor Survey—to study the range of services GSAs provided. We calculated the number of times GSAs engaged in five major categories of activities during the window of observation: (1) Providing information about responsible gambling, (2) Providing information about Play My Way, (3) Providing information about voluntary self-exclusion, (4) Enrolling visitors in voluntary self-exclusion, and (5) Referring visitors to professional treatment or self-help. We estimated the proportion of times they provided these 5 services as a function of (a) all the interactions they had (N = 5,659) and (b) all the non-Simple interactions they had (n = 1,719). As Figure 13 shows, GSAs provided information and tools about responsible gambling during 92.8% of non-Simple interactions and 28.1% of all interactions. They provided harm reduction tools less often: they mentioned the play management tool in 20.2% of all non-Simple interactions and 6.1% of all interactions.[10] GSAs discussed voluntary self-exclusion within 9.6% of all non-Simple interactions and 2.9% of all interactions, and enrolled visitors in voluntary self-exclusion during 3.2% of all non-Simple interactions and 1.0% of all interactions. Finally, they provided referrals to professional treatment/the gambling helpline/self-help within 7.3% of non-Simple interactions and 2.2% of all interactions.[11]

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[10] This is likely an underestimate of their current activity. Play My Way did not go live at Plainridge Park Casino until after the window of observation. The next phase of this evaluation will include data collected while this program was active.

[11] These estimates are based on a total of 5,659 total interactions. By definition, GSAs performed none of these activities during the 3,946 Simple interactions. Their reports indicate that within the 735 Instructive interactions, they provided responsible gambling information 690 times, provided information about Play My Way 119 times, discussed voluntary self-exclusion 75 times, and provided referrals to self-help/the gambling hotline/professional treatment 14 times. By definition, they provided responsible gambling information during all 70 Demonstration interactions and performed no other activities during these interactions. Finally, we relied on visitors' reports to estimate GSAs' activities within the 908 Exchange interactions. We extrapolated from data presented in Table 11 to estimate that GSAs provided responsible gambling information 830 times, provided information about Play My Way 227 times, discussed voluntary self-exclusion 36 times, and provided referrals 57 times. Internal records reveal that GSAs enrolled visitors in voluntary self-exclusion 54 times, and they were instructed to discuss the program and provide a packet of referrals each time. Additional details about these estimates are available from the authors.

Figure 12: Proportion of Interactions in which GSAs Engaged in 5 Major Activities
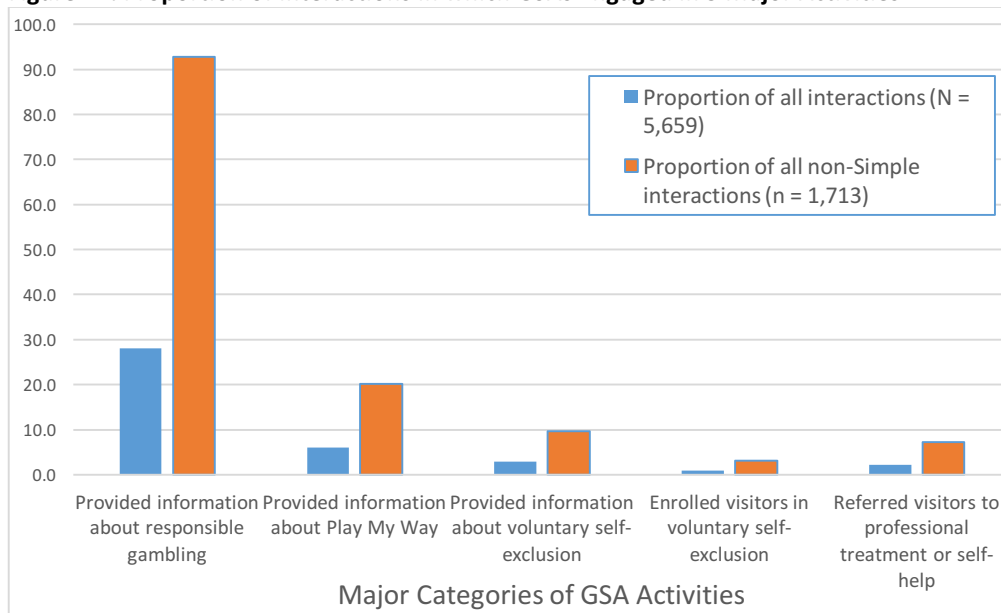
3.4. General Comments

One hundred and thirty-five respondents commented on their GameSense experience. The vast majority of these comments were positive in nature. Example comments were as follows:

- *Fantastic! I will share info with friends.*
- *They need to provide more of this information at GA meetings.*
- *Very helpful experience. Going to set up time to bring my senior friends so they understand strategies to play longer with their very modest budget.*

Respondents often called out GameSense Advisors by name, as in these examples:

- *[GSA 1] really informed me on the true way slot machines operate. I was unaware of "near misses." I thought a winner was coming soon when a near miss hit. [GSA 1] was very informative!*
- *[GSA 2] sincerely wants to help people! I was impressed. If you want to self-exclude at other casinos, you will be dealing with a retired cop (and they have the wrong attitude or approach). [GSA 2] clearly wants to become as proficient as he can, and I would say [GSA 2] has high potential.*
- *I find the staff at GameSense to be professional and full of knowledge. I feel comfortable talking to [GSA 3] in the future. As well as the other staff.*
- *I really appreciate the wonderful assistance I receive from [GSA 4]. [GSA 4] is always available when I advise. [GSA 4] is a pleasure and a wonderful gentleman. God bless him.*
- *[GSA 5] was very knowledgeable about gambling and gave me tips on how to be intelligent when at a casino.*

Discussion

4.1. Purpose of this Evaluation

Policy makers often turn to responsible gambling programs in an effort to mitigate societal harm that might result from expanded gambling opportunities. Though responsible gambling programs vary considerably from jurisdiction to jurisdiction, and from operator to operator, those programs

that are targeted to players often share common goals: (1) educating players about the nature and inherent risks of gambling, (2) encouraging players to wager within affordable limits, and (3) providing sufficient information about a game to allow players to make informed choices about their play (Blaszczynski et al., 2011). In Massachusetts, the GameSense program, currently operating within the Plainridge Park Casino and tentatively planned for future casinos, is one of several state-sponsored player-facing responsible gambling initiatives and is the first of its kind in the United States. This evaluation set out to provide an epidemiology of services provided in the existing Massachusetts GameSense program and to document the extent to which it is meeting publicly stated goals. Consistent with the Commission's precautionary approach to responsible gambling measures (Massachusetts Gaming Commission, 2014b), we began our evaluation by assessing not only whether the existing GameSense program is helping players, but also whether it is avoiding harming players. In the following two sections, we review our goals and findings for the first component of this evaluation.

4.2. Evaluation Goal 1: Conduct an Epidemiology of Services

4.2.1. Services Provided

Our first evaluation goal was to conduct an epidemiology of GameSense program services. We observed that GSAs had about 31 interactions with visitors each day. Some interactions occurred with multiple visitors; in total, they interacted with about 52 visitors each day. Because neither PPC nor the MGC provided us with daily attendance patterns at PPC, we cannot place these rates in the context of the number of patrons who had the opportunity to interact with GSAs.

The GSAs primarily had superficial interactions with visitors (e.g., when a casino patron needed directions within the casino). However, they had a total of 1,713 more substantive conversations with casino patrons or employees during the window of observation, or about 9.5 per day. GSAs tended to have 1-on-1, or 1-on-2, conversations with casino patrons or employees, rather than group discussions.

About 75% of conversations about responsible gambling or problem gambling began as more superficial interactions. For example, a visitor might have approached a GSA to ask for directions to the ATM, and somehow the GSA and visitor transitioned to discussing responsible or problem gambling. We do not have conclusive evidence about who steered the conversation in a more substantive direction, but our Visitor Survey data suggest that visitors typically did not begin conversations with serious concerns in mind. For example, nearly 10% of visitors reported that they did not have any concerns about gambling at the start of their Exchange interactions. And yet, about three quarters of the time, they reported learning strategies to keep gambling fun. Therefore, we tentatively conclude the GSAs often used superficial contacts as an opportunity to engage visitors in more substantive conversations.

4.2.2. GSA Workload
The GSAs did not divide up this part of their work equally. Because there are four GSAs on staff, we would expect to observe each GSA completing about 25% of the interactions. However, two GSAs—GSA #1 and GSA #4—each conducted more than 30% of all interactions, and GSAs #2 and GSAs #3 accounted for fewer interactions. We found the same pattern when we examined Visitor Surveys. Understanding the causes of these patterns is beyond the scope of this evaluation. It could be that certain GSAs simply worked busier shifts than others, and that such discrepancies in visitor interac-

tion counts are inevitable. Another potential explanation is that some GSAs attracted more visitors than others due to their personalities and behaviors. In this case, GameSense managers might wish to standardize GSAs' behaviors, and therefore GameSense services, to a greater extent. We observed some variation across GSAs in visitors' tendency to report that their concern(s) were completely resolved, though a substantial majority of visitors indicated that their concerns(s) were completely resolved regardless of the particular GSA with whom they spoke.

4.2.3. Available Space

The GSAs appeared to use the available space according to their needs; when they needed to show a visitor the kiosk or have a more private conversation, they used the GameSense Info Center space. When they were providing instruction about games and responsible gambling, they met visitors where they were—on the casino floor. In addition, visitors reported that the Info Center space was private and comfortable. The evidence suggests that the available space meets GSAs' and visitors' needs.

4.2.4. Peak Times

Some days of the week were certainly busier than others. Most interactions of all types happened on Saturdays, Fridays, and Thursdays. Most Visitors Surveys were completed on these days, as well. The afternoons were especially busy times for interactions of all types as well as Visitor Surveys. This information might be helpful in planning staffing.

4.2.5. Visitor Characteristics

We found that both men and women are having substantive conversations with GSAs, though men are slightly over represented (54.5% compared to 44.8%). When we examined Visitor Surveys, on the other hand, we found that women were overrepresented (53.4% compared to 45.5%). This is consistent with a long line of research documenting women's increased likelihood of completing surveys (as reviewed by Slauson-Blevins & Johnson, 2016). To ensure that Visitor Surveys accurately represent both men and women, GSAs might wish to make extra efforts to recruit men. GSAs estimated that nearly half (44.3%) of their visitors in Exchange interactions were between the ages of 51 and 70, 79.2% were White, and 74.5% were non Hispanic/Latino. In the absence of demographic data on all PPC patrons—not just those who interact with GSAs at the highest level of engagement—it is difficult to determine if GSAs are appealing equally to all groups of PPC patrons. The SEIGMA patron intercept surveys, which attempt to assemble a representative sample of PPC patrons, might fill this knowledge gap.

GSAs reported that at least some casino employees engaged in conversations about responsible gambling or problem gambling; they estimated that 4.2% of Exchange visitors were casino employees. This is important because casino employees are a population segment especially at risk for gambling-related problems (Shaffer & Hall, 2002; Shaffer, Hall, & Vander Bilt, 1999). It is possible that GameSense Advisors are a sufficient resource for Plainridge Park employees experiencing gambling-related problems. However, in the absence of information about casino employees' needs, it is difficult to draw such a conclusion. A survey of casino employees that asks about gambling-related problems and perceptions of the GameSense Advisors is necessary for understanding whether existing resources meet existing needs.

Visitor impression data from the Checklists further indicate that in GSAs' views most visitors were not emotionally distressed or under the influence of alcohol or other drugs. In that sense at least,

visitors might have been positioned to engage in a productive conversation about responsible or problem gambling. However, the 7.5% of visitors who were emotionally distressed might require additional mental health support, and GSAs might or might not be prepared to provide it. We have no way of knowing whether GSAs were accurate in their impressions of visitors; however, a review of the research in social psychology (Gray, 2008) tells us that, generally speaking, adults are quite accurate in discerning others' emotional states.

Visitors appeared comfortable engaging in repeated conversations with a GSA; a substantial minority of interactions (40.6%) occurred with "repeat customers." In most cases, those who returned to GSAs for repeated interactions had previously had Exchange interactions, the most intense type of interaction. This finding suggests that GSAs are succeeding in building rapport with their visitors, consistent with one of the program's stated goals.

### 4.3. Evaluation Goal 2: Evaluate Progress Toward Stated Goals

Our second goal was to evaluate the extent to which the GameSense program at Plainridge Park Casino is making progress toward stated goals. As mentioned, various public comments and documents describe the program and its mission in different ways. This circumstance created important challenges for delineating a clear set of program objectives. Nevertheless, to summarize briefly, program planners envisioned that the GSAs primarily would provide responsible gambling information and resources. They wanted the program to serve a wide range of needs, from recreational gamblers to those in need of more extensive information and resources. They endorsed the GameSense brand because of its presumed image as a "friendly helper" or "supportive peer" rather than "the gambling police." Implicit in this selection was the assumption that communicating that they are friendly, helpful, and knowledgeable might be key to GSAs' effectiveness. Program planners emphasized the importance of attracting visitors to GameSense from both inside and outside the casino. Finally, it is worth noting again that the Massachusetts Gaming Commission currently describes GameSense objectives as follows: "GameSense is an innovative and comprehensive Responsible Gaming strategy adopted by the Massachusetts Gaming Commission as part of its mission to encourage responsible play and mitigate problem gambling" (Mass Gaming Commission, 2016).

4.3.1. Provide Information and Resources across the Spectrum of Needs

GameSense Advisors reported that within more than 90% of their Instructive interactions, they provided information about responsible gambling (e.g., how to play the games, odds of winning/losing, gambling myths). Similarly, more than 90% of visitors reported that within Exchange interactions, they learned about strategies to keep gambling fun and/or how gambling works. We conclude that when GSAs had the opportunity to speak with casino patrons—beyond greeting them or providing directions—they typically provided responsible gambling information, rather than providing other kinds of services (e.g., providing referrals to gambling disorder treatment, helping patrons get their credit suspended).

Did GSAs provide resources across the full spectrum of need? Answering this question is more complicated and requires some understanding of the public health perspective as applied to gambling and gambling-related problems. Shaffer and Korn first applied a public health model to gambling (Korn & Shaffer, 1999; Shaffer & Korn, 2002). This perspective describes opportunities for prevention and treatment interventions targeted to different segments of the population (see Figure 12).

Figure 13: Public Health Perspective on Gambling and Gambling-Related Problems (adapted from Shaffer & Korn, 2002)
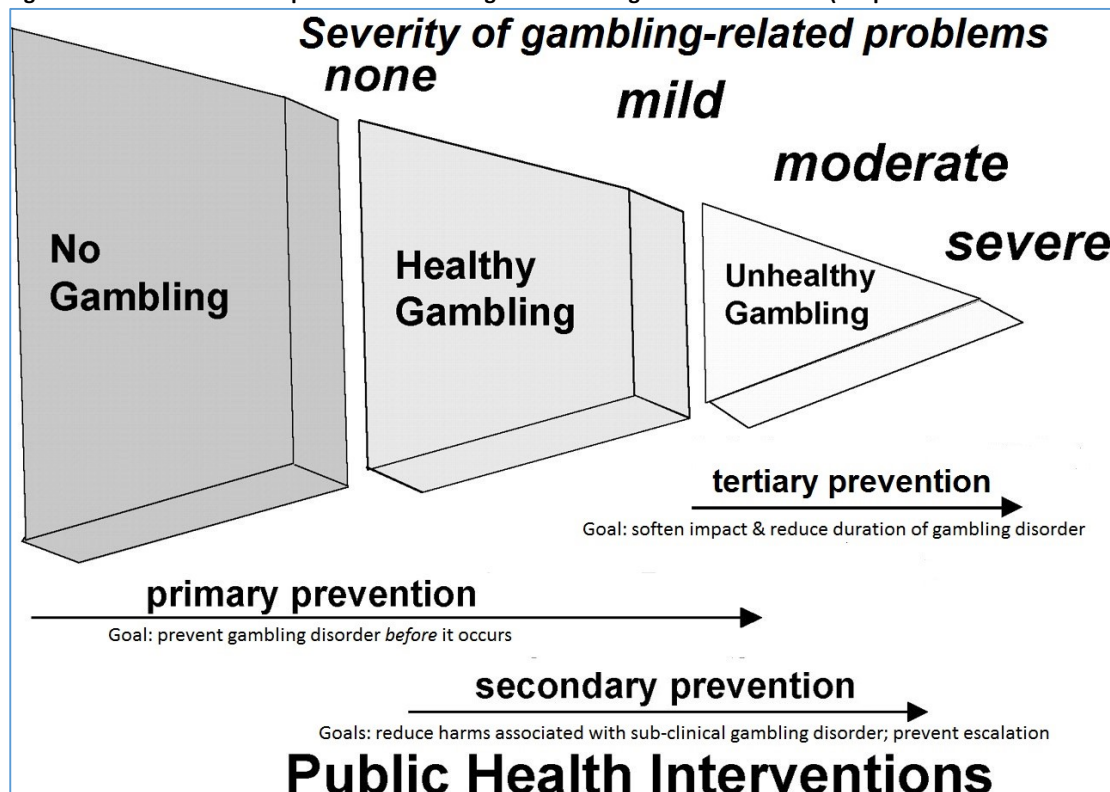
According to this perspective, those who do not gamble, or gamble but do not experience any gambling-related problems (i.e., Level 0 and Level 1 gamblers, respectively; Shaffer & Hall, 1996). might benefit from primary prevention strategies—strategies designed to prevent an adverse health condition *before* it occurs. Applied to gambling, primary prevention provides the community with adequate information and or services to make educated decisions about healthy gambling behaviors (Dickson, Derevensky, & Gupta, 2002). This includes information about how gambling products work, the probability of winning, and the signs and symptoms association with problem gambling. Considering the effects of information based programs for preventing risky behaviors more generally, programs that are comprehensive, interactive, and teach new skills typically produce better results than programs that provide education alone (e.g., Ennett et al., 1994; Fortune & Goodie, 2012; Johnson, Carey, Marsh, Levin, & Scott-Sheldon, 2003). Those who gamble and experience gambling-related problems, but do not meet formal diagnostic criteria for gambling disorder (i.e., Level 2 gamblers; Shaffer & Hall, 1996) require secondary prevention strategies. Such strategies hold the potential to reduce harms associated with adverse health conditions that already have developed. Secondary prevention strategies for gambling disorder might involve modifying gambling products or the gambling environment to reduce harm (e.g., introducing self-exclusion programs, introducing products designed to minimize excessive play, removing ATMs) without restricting access to gambling products among Level 0 or 1 gamblers. Finally, those who meet diagnostic criteria for gambling disorder (i.e., Level 3 gamblers; Shaffer & Hall, 1996) typically require tertiary prevention strategies—strategies to soften the impact and/or reduce the duration of an existing health condition. An effective public health initiative will (1) provide primary prevention resources (e.g., information about how gambling works and the probabilities of winning) to Level 0 and Level 1 gamblers, (2) provide secondary prevention tools (e.g., play management, voluntary self-exclusion) to Level 2 gamblers, (3) provide Level 3 gamblers with a pathway to treatment, and (4) determine the extent

and type of services necessary for treatment seeking-gamblers (i.e., Level 4 gamblers; Shaffer, Hall, & Vander Bilt, 1997).

Public health data reveal that the largest segment of the population is in need of primary prevention services only; 97.1% of U.S. adults are either Level 0 or Level 1 gamblers. The lifetime rate of Level 2 gambling is 2.3%, and about 0.6% of American adults report lifetime Level 3 gambling (Kessler et al., 2008). Although we might expect somewhat higher rates of Level 1, 2, and 3 gambling among Plainridge Park Casino patrons, we would expect the same general pattern to be evident.[12] Therefore, GSAs should be providing basic responsible gambling information and tools to the majority of patrons. They should be connecting comparatively fewer patrons to harm reduction tools (e.g., play management, voluntary self-exclusion). Finally, we would expect them to provide referrals to treatment or self-help in only rare cases.

Recall that our supplemental analyses (Section 3.3.) revealed that GSAs most frequently provided information and tools about responsible gambling. They provided harm reduction tools less often and were especially unlikely to provide referrals to professional treatment or self-help. In other words, GSAs provided primary prevention resources to the largest group of casino patrons and provided secondary prevention, and linkages to tertiary prevention, to smaller groups of patrons. This pattern suggests that GSAs provided services in a way that aligns with the likely range of needs.

4.3.2. Appeal to a Wide Audience

Responses to the question, "*Which groups of people might benefit from having a conversation with a GameSense Advisor?*" indicate that the GameSense Advisors communicated to individuals in Exchange interactions that their services were appropriate for anyone who gambles. It is unclear from this study whether the majority of visitors, those who participated in other types of interactions (i.e., Simple, Instruction, or Demonstration), held the same beliefs. However, this message is important because stigma associated with gambling disorder often prevents people from accessing treatment resources (Gainsbury, Hing, & Suhonen, 2014). In a previous evaluation of two Ontario RGICs, general casino patrons' most common reason for not visiting the centers was not feeling that they could use it (The Osborne Group, 2007). However, although this question allowed for multiple responses, only a minority of visitors indicated that GSAs would be helpful for those who have, or are at risk for developing, a gambling problem. Ideally, casino patrons would view the GSAs as a helpful resource for people in all three groups. Therefore, the GameSense program should consider either altering its marketing or its services. Related to this point, visitors very rarely approached GameSense Advisors with concerns that could be considered serious. It is true that a minority of visitors reported experiencing any gambling-related problems during their lifetimes; however, visitors did not seem aware of the full range of services GSAs can offer, at least at the outset of their conversations. These findings combined suggest that GSAs might need to work harder to make all visitors aware that they have resources for everyone across the spectrum of need.

4.3.3. Establish Strong Working Alliances with Visitors

Visitors who engaged with GSAs at the highest level (i.e., in Exchange interactions) overwhelmingly reported being satisfied with GameSense services, and the majority reported that their visit to the

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[12] In the absence of a survey of a random sample of PPC patrons, we have no way to determine if these general population rates of Level 0-3 gambling generalize to PPC patrons. However, our Visitor Survey data are consistent with the assumption that few PPC patrons report a history of gambling-related problems; recall that 83.6% of respondents reported no lifetime gambling-related problems.

GameSense Info Center enhanced their visit to PPC and that they would return to the Info Center. Nearly nine in ten visitors reported that the GSA with whom they spoke listened to them and was caring, helpful, and knowledgeable. These findings suggest that the GameSense service at PPC is not doing harm to most visitors during Exchange interactions, although we note that a minority (13.1%) of visitors reported that visiting the GameSense Info Center detracted from their visit to PPC. As far as we can tell, different groups of visitors—e.g., men versus women, Hispanics vs. non-Hispanics—respond similarly to GameSense services. Other visitor characteristics, beyond those measured in this study, might be associated with response to GameSense services. In summary, according to visitors' reports after Exchange interactions, GSAs are communicating that they are helpful and friendly, in line with program goals.

4.3.4. Attract Visitors from Inside and Outside the Casino

The fourth program goal we evaluated involved the program's visibility inside and outside the casino. The majority of visitors who responded to our survey reported that they learned about the GameSense Info Center simply by walking past it, seeing a kiosk, seeing an ad on-site, or being referred from a PPC employee. Half of visitors had not heard about the Info Center before their visit. Visitors initiated a majority of Exchange interactions. These findings suggest that visitors felt comfortable initiating interactions with the GSAs and the Info Center is visible to patrons from within the casino, which is important because a limitation of other RGICs is that they are not centrally located or sufficiently visible (The Osborne Group, 2007). Among other sources, visitors were most likely to report hearing about the Info Center through television ads or from friends/family members. Program planners might wish to increase their visibility in other media (e.g., online, print, and radio ads) and through additional outreach activities within the community. Again, our conclusions are limited because GSAs only surveyed visitors who had Exchange interactions. General casino patrons might have different levels of awareness about GameSense.

4.4. Limitations

This study is not without limitations, some of which we have mentioned in earlier sections. We use this section to note four additional limitations.

The first of these concerns the questions we used to assess visitors' responsiveness to GameSense services. Responses to these questions were extremely skewed rather than normally distributed; the vast majority of respondents used the most positive end of the scales, and very few used more negative response options. Moreover, respondents' ratings were in almost perfect agreement across the different GSA impression questions; if a respondent strongly agreed that a GSA was caring, she nearly always strongly agreed that the GSA was helpful, was knowledgeable, and listened to her. These trends are concerning because they might represent a halo effect. A halo effect is a positive cognitive bias that often appears when people are asked to evaluate other people. Researchers first identified this phenomenon while studying how military superiors rated officers under their command (Thorndike, 1920). In this study, though the rating plan explicitly asked superiors to provide *independent* evaluations of their subordinates' Physical Qualities, Intelligence, Leadership, and Personal Qualities, the ratings they provided were highly inter-correlated. For example, if a flight commander felt that a particular aviation cadet had an impressive physique, he also felt the cadet could make sound decisions during crisis, could inspire other men, and was free from "conceit and selfishness." Since 1920, many other studies have documented halo effects in ratings of domains as varied as teaching, cars, and nutrition labels and are especially pernicious in customer satisfaction surveys (Wirtz, 2003). The halo effect suggests that human have "a marked tendency to think of [a] person in general as rather good or rather inferior and to color the judgments of the qualities by this gen-

eral feeling" (Thorndike, 1920, p. 25). In the context of this evaluation, we speculate that at least some visitors felt generally positively toward their GSAs, and this impression spilled over into positive ratings the services GSAs provided, impressions of GSAs' empathy and knowledge, and even the Info Center itself. Moreover, their positive feeling might have derived in part from the fact that GSAs provided visitors a gift in exchange for completing the survey and, in some cases, for having a conversation with them in the first place. It is impossible to quantify how much this bias influenced visitors' responses.

Second, during this phase of the evaluation, we did not measure visitors' responsible gambling knowledge or behavior. As a result, we cannot discern whether GameSense services had a positive influence on visitors' knowledge or behavior. A randomized, controlled, prospective study would be necessary for testing this prediction. We plan to take a step in this direction in the next phase of this evaluation, by asking visitors about responsible gambling concepts (e.g., *"True or false: A slot machine that hasn't paid out in a long time is due to pay out."*) and asking "repeat customers" whether they changed their gambling behavior after speaking with a GSA. We intend to study the relationship between (1) the extent of visitors' GameSense contacts and (2) their responsible gambling knowledge and behavior. This cross-sectional design will move closer toward studying the effects of GameSense on knowledge and behavior.

Third, our epidemiology of GameSense services is only as accurate as the information GSAs provided about their services. Because of a lack of time, poor understanding of the protocol, insufficient training or supervision, or some other reason, GSAs failed to report fully on the services they provided. For example, as described in Section 3.1., the total count of visitors is an under-estimate. In addition, they reported that they completed at most 45 voluntary self-exclusions,[13] but records from another component of our evaluation indicate that they performed 54 voluntary self-exclusions at the casino during the window of observation.

Fourth, and finally, the current findings only generalize to the Plainridge Park Casino GameSense program. Because the Massachusetts Council on Compulsive Gambling developed, implemented and maintains the Plainridge Park Casino GameSense service, these findings do not generalize to GameSense or other similar information centers.

4.5. Recommendations

Throughout this report, we have suggested additional lines of research that we feel are necessary for evaluating the GameSense program. We make several additional recommendations here.

First, the GSAs report that they are providing information verbally in the majority of their interactions with visitors. This suggests a need to ensure that GSAs are being trained appropriately and have suitable education about key responsible gambling concepts – potentially including knowledge verification (e.g., annual assessments). If GSAs provide inaccurate information, visitors could experience harm. In addition, a precautionary approach would safeguard that, like visitors, GSAs do not experience harm. This evaluation was not designed formally to collect information about GSAs' background, training, or on-the-job experiences; however, during one planning meeting, the GSAs described feeling emotionally distressed by some of their experiences and interactions with visitors; they reported hearing difficult stories of financial and familial loss associated with gambling. This

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[13] Recall that GSAs reported 44 interactions that included enrollment in voluntary self-exclusion (VSE). One of these interactions included two patrons. Therefore, according to the Checklist, they enrolled at most 45 patrons in VSE.

anecdotal information raises important questions about whether the GSAs are sufficiently prepared and supervised for all aspects of their responsibilities. In addition, this informal information suggests that it might be helpful to review formally the adequacy of GSA training and supervision focusing on vicarious trauma, countertransference, first response for mental health issues, and other common clinical issues.

About 8% of those who responded to the Visitor Survey identified as Asian. The GSAs inform us that visitors who speak languages other than English are often fluent enough in English to have conversations with them about gambling; however, they are not comfortable completing English-language surveys. We suggest that future phases of this evaluation include Visitor Surveys translated into the appropriate language(s).

Keeping in mind the limitations described above, this report includes some findings that might be helpful in planning services at the Massachusetts casinos expected to open in the next few years. In addition to providing information about the busiest days and times for visitor interactions, this report suggests that the location and signage at Plainridge Park Casino are appropriate for attracting visitors. These results, like all others presented in this report, would need to be tested at new properties.

In an earlier section, we noted that we cannot determine the extent to which the GameSense Services at PPC are meeting the needs of casino employees, a group historically at higher risk for gambling-related problems than community members. We plan to conduct a survey of PPC employees to learn more about their needs. In addition, this survey will generate information about PPC employees' views of the GameSense program (e.g., knowledge of its location, hours of operation, purpose, and services provided; perceived usefulness).

A cost/benefit analysis could inform future decisions about investing resources into GameSense programs and services. This epidemiology of services provides some information about benefits, if we define benefits as the number of PPC patrons who receive GameSense services each day/week/month. We have not weighed these benefits against program financial and other costs (e.g., staffing, management and supervision, branding, outreach). We recommend that program planners conduct such a cost/benefit analysis to inform future decisions, potentially for GameSense as well as alternative programs.

We also recommend that policy makers consider these findings in relation to the legislative mandate for expanded gambling requiring gambling operators to "…provide complimentary on-site space for an independent substance abuse, compulsive gambling, and mental health counseling service" ("Bill H03697," 2011).[14] We designed our evaluation to describe the GameSense program as it is currently configured and staffed; our research questions were derived from program goals that did not include the provision of substance use and mental health counseling services. With these caveats in mind, we note that there is no indication in the data we *did* collect that GameSense Advisors are providing substance use/mental health counseling services (beyond referral to treatment/self-help for gambling problems). To ensure that the on-site programming is consistent with the legislative mandate, policy makers might wish to pursue changes to the legislation, changes to the on-site programming, or both.

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[14] https://malegislature.gov/Laws/SessionLaws/Acts/2011/Chapter194

4.6. Concluding Thoughts

This report reflects an evaluation of the first Responsible Gaming Information Center located within the United States. Consequently, this study adds to the small but growing evidence base about responsible gambling activities. Though more research is necessary to evaluate fully the GameSense program and the services it offers, our findings indicate that the program is meeting a circumscribed set of program goals and, generally, is not causing harm to visitors.

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Date: _____
Time: _____
I am a
- o   Man
- o   Woman
- o   Other (please specify)
     _____

In terms of race, I identify as (pick one)
- o   White
- o   Black or African American
- o   American Indian/Alaska Native
- o   Asian
- o   Native Hawaiian/other Pacific Islander
- o   Two or more races

In terms of ethnicity, I identify as (pick one)
- o   Hispanic/Latino
- o   Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o   Some high school or lower
- o   High school graduate or equivalent
- o   Some college
- o   Associate's degree
- o   Bachelor's degree or higher

Which GameSense Advisor did you talk to?
_____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o   I was curious about GameSense.
- o   I wanted to learn more about how gambling works.
- o   I wanted to learn more about strategies to keep gambling fun.
- o   I wanted to learn more about or enroll in Play Management.
- o   I wanted information about getting legal or financial help.
- o   I wanted to learn more about or enroll in voluntary self-exclusion.
- o   I wanted help for someone else.
- o   I wanted to get my credit suspended.
- o   I wanted the casino to suspend/reduce its marketing to me.
- o   I wanted help or information about problem gambling.
- o   I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #1

Did you learn any of the following during your conversation with the GameSense Advisor? [Check all that apply.]
- o   Strategies to keep gambling fun
- o   The Play Management system: what it is, how it works
- o   How gambling works
- o   A referral for gambling treatment
- o   How to get other support for gambling-problems, such as self-help resources, screening for gambling problems
- o   How to get legal or financial help
- o   The voluntary self-exclusion program
- o   No, I did not learn about any of these topics.
- o   Other: _____
     _____

To what extent do you agree or disagree with each of these statements? [Check one per row.]
My GameSense Advisor (was…)

	Strongly Disagree	Disagree	Uncer-	Agree	Strongly Agree
Caring					
Helpful					
Knowledgeable					
Listened to me					

Date: _____

Time: _____

I am a
- o   Man
- o   Woman
- o   Other (please specify)
       _____

In terms of race, I identify as (pick one)
- o   White
- o   Black or African American
- o   American Indian/Alaska Native
- o   Asian
- o   Native Hawaiian/other Pacific Islander
- o   Two or more races

In terms of ethnicity, I identify as (pick one)
- o   Hispanic/Latino
- o   Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o   Some high school or lower
- o   High school graduate or equivalent
- o   Some college
- o   Associate's degree
- o   Bachelor's degree or higher

Which GameSense Advisor did you talk to?
_____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o   I was curious about GameSense.
- o   I wanted to learn more about how gambling works.
- o   I wanted to learn more about strategies to keep gambling fun.
- o   I wanted to learn more about or enroll in the Play Management system.
- o   I wanted information about getting legal or financial help.
- o   I wanted to learn more about or enroll in the voluntary self-exclusion program.
- o   I wanted help for someone else.
- o   I wanted to get my credit suspended.
- o   I wanted the casino to suspend/reduce its marketing to me.
- o   I wanted help or information about problem gambling.
- o   I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #2

Did the GameSense Advisor share information about any of the following with you? [Check all that apply.]
- o   Strategies to keep gambling fun
- o   The Play Management system: what it is, how it works
- o   How gambling works
- o   A referral for gambling treatment
- o   How to get other support for gambling-problems, such as self-help resources, screening for gambling problems
- o   How to get legal or financial help
- o   The voluntary self-exclusion program
- o   No, I did not learn about any of these topics.
- o   Other: _____

If you visited the GameSense Information Center (GSIC)...

Did you know about the Information Center before today's visit?

Yes	No	N/A: I did not visit the GSIC

Did your visit to the Information Center enhance your visit to the Plainridge Park Casino?

Yes	No	N/A: I did not visit the GSIC

Did your visit to the Information Center detract from your visit to the Plainridge Park Casino?

Yes	No	N/A: I did not visit the GSIC

Would you come to the Information Center again?

Yes	No	N/A: I did not visit the GSIC

Date: _____
Time: _____

I am a
- o Man
- o Woman
- o Other (please specify)
  _____

In terms of race, I identify as (pick one)
- o White
- o Black or African American
- o American Indian/Alaska Native
- o Asian
- o Native Hawaiian/other Pacific Islander
- o Two or more races

In terms of ethnicity, I identify as (pick one)
- o Hispanic/Latino
- o Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o Some high school or lower
- o High school graduate or equivalent
- o Some college
- o Associate's degree
- o Bachelor's degree or higher

Which GameSense Advisor did you talk to?
_____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o I was curious about GameSense.
- o I wanted to learn more about how gambling works.
- o I wanted to learn more about strategies to keep gambling fun.
- o I wanted to learn more about or enroll in the Play Management system.
- o I wanted information about getting legal or financial help.
- o I wanted to learn more about or enroll in the voluntary self-exclusion program.
- o I wanted help for someone else.
- o I wanted to get my credit suspended.
- o I wanted the casino to suspend/reduce its marketing to me.
- o I wanted help or information about problem gambling.
- o I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #3

Which of the following have you done in the last year? Please note that your answers are anonymous. We will use them only to improve the services we provide. [Check all that apply]
- o Play the lottery, keno, instant Lotto games, or instant scratch-off tickets (not at a casino or slots parlor)
- o Playing slot machines or video keno at a casino or slots parlor
- o Betting on sports with friends or in an office pool—not online
- o Betting on sports with friends or in an office pool—online (including fantasy sports)
- o Gambling at a non-profit gathering/event (e.g., church bingo game, fundraiser, raffle)
- o Playing roulette, dice, keno, or table games (other than poker) at a casino
- o Playing video poker machines or other gambling machines (other than slots and keno) at a casino or slots parlor
- o Playing poker, chess, or other game of mental skill for money (not at a casino)
- o Betting on horse or dog races
- o Other: _____

If you visited the GameSense Information Center (GSIC)...
Did you feel that the space was private?

Yes	No	N/A: I did not visit the GSIC

Did you feel that the space was comfortable?

Yes	No	N/A: I did not visit the GSIC

Date: _____
Time: _____

I am a
- o Man
- o Woman
- o Other (please specify)
  _____

In terms of race, I identify as (pick one)
- o White
- o Black or African American
- o American Indian/Alaska Native
- o Asian
- o Native Hawaiian/other Pacific Islander
- o Two or more races

In terms of ethnicity, I identify as (pick one)
- o Hispanic/Latino
- o Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o Some high school or lower
- o High school graduate or equivalent
- o Some college
- o Associate's degree
- o Bachelor's degree or higher

Which GameSense Advisor did you talk to? _____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o I was curious about GameSense.
- o I wanted to learn more about how gambling works.
- o I wanted to learn more about strategies to keep gambling fun.
- o I wanted to learn more about or enroll in the Play Management system.
- o I wanted information about getting legal or financial help.
- o I wanted to learn more about or enroll in the voluntary self-exclusion program.
- o I wanted help for someone else.
- o I wanted to get my credit suspended.
- o I wanted the casino to suspend/reduce its marketing to me.
- o I wanted help or information about problem gambling.
- o I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #4

Which groups of people might benefit from having a conversation with a GameSense Advisor? [Check all that apply]
- o Anyone who gambles
- o People at risk for developing a gambling problem
- o People who have a gambling problem

Have you ever had any of these problems with your gambling? [Check all that apply]
- o I had money problems because of my gambling.
- o I had problems with friends or family members because of my gambling.
- o I had problems at work because of my gambling.
- o I had legal problems because of my gambling.
- o I had problems with my physical health because of my gambling.
- o I had problems with my mental health because of my gambling.
- o I was cheated while gambling.
- o I had some other kind of problem because of my gambling.
- o Other (please specify) _____

Date: _____

Time: _____

I am a
- o Man
- o Woman
- o Other (please specify)
  _____

In terms of race, I identify as (pick one)
- o White
- o Black or African American
- o American Indian/Alaska Native
- o Asian
- o Native Hawaiian/other Pacific Islander
- o Two or more races

In terms of ethnicity, I identify as (pick one)
- o Hispanic/Latino
- o Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o Some high school or lower
- o High school graduate or equivalent
- o Some college
- o Associate's degree
- o Bachelor's degree or higher

Which GameSense Advisor did you talk to?

_____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o I was curious about GameSense.
- o I wanted to learn more about how gambling works.
- o I wanted to learn more about strategies to keep gambling fun.
- o I wanted to learn more about or enroll in the Play Management system.
- o I wanted information about getting legal or financial help.
- o I wanted to learn more about or enroll in the voluntary self-exclusion program.
- o I wanted help for someone else.
- o I wanted to get my credit suspended.
- o I wanted the casino to suspend/reduce its marketing to me.
- o I wanted help or information about problem gambling.
- o I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #5

As a result of your conversation with the GameSense Advisor, will you... [Check all that apply]
- o Visit the GameSense website
- o Tell someone about the GameSense Information Center
- o Think about my own gambling
- o Think about someone else's gambling
- o Call the problem gambling helpline
- o Speak with a counselor or other professional about gambling
- o Talk to someone I know who may have a gambling problem
- o Reduce my gambling behaviors (e.g., spend less, take more breaks, play less often)
- o Increase my gambling behaviors (e.g., spend more, take fewer breaks, play more often)
- o Other (please specify) _____

_____

If you visited the GameSense Information Center (GSIC)...

Did you know about the Information Center before today's visit?

Yes	No	N/A: I did not visit the GSIC

Did your visit to the Information Center enhance your visit to the Plainridge Park Casino?

Yes	No	N/A: I did not visit the GSIC

Did your visit to the Information Center detract from your visit to the Plainridge Park Casino?

Yes	No	N/A: I did not visit the GSIC

Would you come to the Information Center again?

Yes	No	N/A: I did not visit the GSIC

Date: _____

Time: _____

I am a
- o Man
- o Woman
- o Other (please specify)
  _____

In terms of race, I identify as (pick one)
- o White
- o Black or African American
- o American Indian/Alaska Native
- o Asian
- o Native Hawaiian/other Pacific Islander
- o Two or more races

In terms of ethnicity, I identify as (pick one)
- o Hispanic/Latino
- o Not Hispanic/Latino

My age is _____.

The highest level of school I have completed is (pick one)
- o Some high school or lower
- o High school graduate or equivalent
- o Some college
- o Associate's degree
- o Bachelor's degree or higher

Which GameSense Advisor did you talk to? _____

Did you have any of the following concerns when you began your conversation with the GameSense Advisor? [Check all that apply.]
- o I was curious about GameSense.
- o I wanted to learn more about how gambling works.
- o I wanted to learn more about strategies to keep gambling fun.
- o I wanted to learn more about or enroll in the Play Management system.
- o I wanted information about getting legal or financial help.
- o I wanted to learn more about or enroll in the voluntary self-exclusion program.
- o I wanted help for someone else.
- o I wanted to get my credit suspended.
- o I wanted the casino to suspend/reduce its marketing to me.
- o I wanted help or information about problem gambling.
- o I didn't have any of these concerns at the start of the conversation.

To what extent was your primary question answered or your primary concern resolved? [Circle one.]

Not at all	Somewhat	Completely

Version #6

Have you heard about the GameSense Information Center from any of these sources? (click all that apply)
- o I walked by it
- o I saw a GameSense kiosk in the Plainridge Park Casino
- o I saw some other advertisement/sign in the Plainridge Park Casino
- o A Plainridge Park Casino employee told me about it
- o A friend/family member told me about it
- o I read about it in the newspaper
- o I saw an ad on TV
- o I saw an ad online
- o I heard an ad on the ratio
- o I saw a billboard
- o Another professional offered me this resource
- o I don't know/don't remember
- o Other (please specify)

How satisfied are you with your interaction with the GameSense Advisor?
- o Not at all satisfied
- o Slightly satisfied
- o Moderately satisfied
- o Very satisfied
- o Extremely satisfied

Addendum

The Massachusetts Gaming Commission (MGC) and the Research Design and Analysis Sub-Committee (RDASC) raised questions about this report, *Summary Analysis of the Plainridge Park Casino GameSense Program Activities & Visitor Survey: December 1, 2015 – May 31, 2016*. We appreciate their thoughtful comments. To assure the transparency of changes to the evaluation report, we have provided this addendum to the report with their comments and our detailed responses to each comment.

As we describe in our summary of comments and responses, we have adjusted the report to (1) correct for typos, (2) add references to the published literature where necessary, and in one case, (3) clarify our intended meaning. We are including the MGC's and the RDASC's questions and concerns exactly as they were communicated to us, along with our responses to these questions and concerns. This strategy best maintains transparency in this process. Like the MGC, we believe that transparency is in the best interest of our work together in the service of the Commonwealth of Massachusetts.

RDASC Comments	Division Response
Include more background about the context of your overall sense of evaluation for MGC interventions and how this specific evaluation fits into this model.	We should treat MGC interventions as we would psychosocial interventions. That is, we must establish safety, efficacy, impact, and ultimately cost effectiveness. Public health interventions cannot be assumed safe despite the best of intentions. Consequently, evaluation efforts must monitor the safety of both the visitor and GameSense Advisors. This report represents the first step of a more comprehensive evaluation. Currently, other aspects of the evaluation include assessing a broader range of potential GameSense visitors, assessing gaming employee impacts, and assessing responsible gambling effects more directly. We describe the broader context of our evaluation at the conclusion of section 1.5 ("This report is one component of a larger Division on Addiction evaluation….") Future work should examine other aspects of GameSense, including legislative fit, cost effectiveness, and operations/management effectiveness.
GSAs reported data on all interactions with patrons. However, patrons only reported data on Exchange interactions with GSAs. For this reason, we do not have data for the visitor's perspective on 83% of interactions with GSAs.	During June, 2015, just prior to the PPC opening, the MGC and MCCG requested a revision to our proposed methodology that limited survey data to the highest level of interactions (later named Exchange interactions). Unfortunately, this restricted survey information to less than 20% of all GameSense interactions and eliminated a comparison group for Exchange interactions. If the MGC granted permission to expand survey data collection for the Instructive and Demonstration interactions, based upon the first six months of surveys data, we anticipate that this change will allow us to comment upon 28.6% of GameSense interactions. As we originally proposed, we still believe that we should expand the scope of the study to be consistent with our original proposal, including all possible GameSense interactions.

RDASC Comments	Division Response
	Several documents informed the development of the Visitor Survey questions, including (1) the 2014/15 Responsible Gaming Resource Centre (RGRC) Evaluation Data Collection Questionnaires (submitted to the Ontario Lottery & Gaming Corporation by the Responsible Gambling Council, December 2014), (2) the 2014/15 RGRC Proposed Evaluation Methodology (submitted to the Ontario Lottery & Gaming Corporation, October 2014), (3) the "Evaluation Services Procurement" memo from Director Vander Linden to MGC Commissioners during Spring 2015, and (4) an early version of a GameSense brochure provided by Director Vander Linden during Spring 2015. Some questions were drawn directly from, or slightly modified from, RGRC questions already used in the field. Others were grounded in concepts described in the MGC memo, the GameSense brochure, and in other responsible gambling research efforts. We developed the Checklist questions based on a review of the "GSA Interaction Data Overview" document provided by Candice May of the BCLC. In both cases (i.e., the Visitor Survey and the Checklist), the Division prepared an initial set of items and provided Director Vander Linden and Marlene Warner (Executive Director of the MCCG) an opportunity to suggest revisions and identify items they believed would be misunderstood easily by readers. Though we did not engage in patron cognitive testing of the survey questions, all three groups worked iteratively until all parties were satisfied with the wording and format of all items, with a focus on patron understanding of the items. This work could be considered a weak form of cognitive testing.
Was cognitive testing done on the survey either in the field or in focus groups?	
Consider cognitive testing of future survey instruments.	We agree and will consider formal cognitive testing of any future survey instruments.

RDASC Comments	Division Response
	We agree that this is possible. The report notes that visitors' positive views might relate to a general halo effect (section 4.4, however, it also is possible that the restricted range of potential survey respondents influenced the positive views. We hope to have more clarity about this issue once we complete our evaluation of the GameSense program at PPC. As noted in the report (section 4.2.5.), other components of the evaluation, including analyses of the SEIGMA patron intercept data and the employee surveys should shed some light on this issue. Further, collecting survey data about the full range of GameSense interactions (i.e., including Simple), would help increase confidence in the reported results. As we intended, this preliminary report provides only a partial picture of the GameSense program at PPC (p. ii).
Given that almost 80% of longer interactions started as simple interactions, it is possible that the data is being skewed towards visitors with positive views of the GSAs, as individuals who were not enjoying/benefiting from their simple interaction are potentially less likely to lengthen it into an Exchange interaction, and thus less likely to fill out an evaluation.	
The six versions of the questionnaire allowed the researchers to collect information for about 120 individuals on a wide variety of topics. However, there is less data on each of these questions than if the questionnaire had gone out to the whole group. This limits the ability to do meaningful statistical analysis.	The bulk of this report is a presentation of descriptive statistics, consistent with our goal of describing the operation of the country's first responsible gambling information center. We present inferential statistics only in one section, where we consider demographic characteristics as potential moderators of visitors' responses to GameSense (section 3.2.3.4). Currently, we have sufficient power to identify large effects and small effects are not important in this context. We want to avoid finding statistically significant, but socially meaningless results.
Most information is obtained or is related to 2 of the 4 GSAs. Does this bias these results? What is known about the 2 who are providing info as compared to the 2 who aren't? I am concerned that some self-selection is going on here. For example, what if the 2 who are providing less data are also those with higher proportions of negative interactions? Can this taint these results? Is it possible to gather any information about the GSAs to see if anything can be learned analytically about this?	Although the data come primarily from interactions conducted with two of the four GSAs, the Visitor Survey data represents the majority of Exchange interaction visitors. Including information that balances contributions from GSAs would overweight the two GSAs with respect to total Exchange interactions. Post data sampling weighting is problematic because it magnifies characteristics of outliers. Ultimately and practically, supervision of GSAs can manage this issue. Supervisors should be aware of which GSAs are providing data, intervening with

RDASC Comments	Division Response
	visitors, etc. and manage the GSA staff accordingly. We do note that we examined trends in visitors' sense that their concerns had been resolved according to GSA and found a similar trend across each GSA (Figure 11).
Visitor's responses show evidence of a possible "halo effect", that is, all aspects of an interaction with a GSA are given the same positive score. This is a common problem in getting accurate data regarding interactions in a retail setting.	We agree and note this possibility In the Limitations section (section 4.4).
There is a trade-off between the length of the survey and response. At some point, a test where a subset of people are given a longer survey that contains more in-depth information might be interesting. Then it would be possible to track response rates for the long version vs. the shorter versions.	We agree; however, this methodological research is outside the scope of this study.
Consider measuring changes in behaviors over time. It might be interesting to track repeat visitors to Gamesense and see if they are ones reporting more gambling activity and more gambling issues. In other words, are people with potential problems more likely to be repeat visitors?	We agree that prospective longitudinal research provides critical insight into behavior change. Beginning August 8, 2016, we commenced with the next part of our evaluation. This component includes assessments of responsible gambling knowledge and behavior, and more relevantly, accounts for whether visitors have had prior interaction with GameSense. We will use a cross-sectional design to explore the association between GameSense exposure and self-reported responsible gambling knowledge and behavior. We look forward to these results. In our original proposal to the MGC, we proposed conducting a longitudinal study of GameSense visitors, which would correct for some of the limitations of a cross-sectional design. This aspect of the evaluation has not yet been funded.

RDASC Comments	Division Response
The results seem to indicate that most visitors have engaged in few gambling activities in the past and have few gambling issues. Will this remain the same after more casinos with more diverse gaming opportunities are open in Massachusetts? Or, will future customers resemble the same patterns that we see at PPC?	These are interesting questions and hypotheses. The current data cannot answer these questions, but it is reasonable to expect a maturing of Massachusetts's gamblers. However, these gamblers already have been exposed to gambling and they already might be adapting to their gambling experiences.
Consider clinical supervision and expanded training and support to deal with stress on GSAs and on patrons. Some GSA's reported experiencing discomfort with some of the strong negative emotions that they were exposed to when discussing responsible gaming and gambling problems with visitors. GSAs need to be properly trained and be capable of handling the kind discomfort that comes with discussing serious issues of mental illness. This also raises questions about the stress on GSAs if they are being adversely affected by the strenuous and sensitive nature of their interactions.	We agree that this is a serious issue. Our discussion with GSAs, described on page 59 of the report, occurred on May 10th, 2016. Given the urgency and importance of this matter, we contacted the MGC and MCCG the following day. We recommended the MGC/MCCG provide additional training, support, and supervision—or even consider temporarily suspending the program until safety could be assured. We continued to call for these activities during a phone call on May 13th, 2016. As of September 7, 2016, clinical supervision has not yet begun. In addition, at this point, we have not been apprised of any additional training. As before, we urgently recommend that these vital activities become integral aspects of the program and be evaluated and reviewed semi-annually by a fully independent body.
This document provides a foundation from which a proper cost-benefit analysis should be performed. The data provided on the interactions of the GSAs is a good starting point for this study, however the costs of the program should also be considered.	We agree that a cost-benefit analysis of GameSense is essential to a full evaluation of the program; however, it is beyond the scope of the current study. In section 4.5 ("Recommendations"), we recommend to MGC that they consider such a study.

MGC Comments	
The executive summary needs to be able to stand alone.	We agree. We believe that the Executive Summary could stand alone in its current version.
Titling the report a "summary" makes it appear there is a full report coming.	We agree. The choice of the word "summary" accounts for the fact that this report is just one component of the larger evaluation project. Once the other aspects of the evaluation are complete, we will integrate all of the components together into a single report. We prepared this preliminary report, although not identified as a contractually obligated deliverable, at the request of the MGC and MCCG due to concerns about GSA morale and fatigue in completing their work and study responsibilities.
Terms which may be useful to have defined include: "Extensive Gambling History", Gambling "levels", "Initiate" interaction, Problem vs. at risk gambling	On page v, we defined Levels 0-4 gamblers as follows: "(i.e., (1) no gambling, (2) gambling without problems, (3) gambling with sub-clinical symptoms, (4) gambling patterns that can be diagnosed at the clinical level, and (4) gamblers who seek treatment) in the general population." In section 4.3.1., we again define gambling levels: "Those who gamble and experience gambling-related problems, but do not meet formal diagnostic criteria for gambling disorder (i.e., Level 2 gamblers) require secondary prevention strategies. Such strategies hold the potential to reduce harms associated with adverse health conditions that already have developed. Secondary prevention strategies for gambling disorder might involve modifying gambling products or the gambling environment to reduce harm (e.g., introducing self-exclusion programs, introducing products designed to minimize excessive play, removing ATMs) without restricting access to gambling products among Level 0 or 1 gamblers. Finally, those who meet diagnostic criteria for gam-

MGC Comments	
	bling disorder (i.e., Level 3 gamblers) typically require tertiary prevention strategies—strategies to soften the impact and/or reduce the duration of an existing health condition. An effective public health initiative will (1) provide primary prevention resources (e.g., information about how gambling works and the probabilities of winning) to Level 0 and Level 1 gamblers, (2) provide secondary prevention tools (e.g., play management, voluntary self-exclusion) to Level 2 gamblers, (3) provide Level 3 gamblers with a pathway to treatment, and (4) determine the extent and type of services necessary for treatment seeking gamblers (i.e., Level 4).” As we mention below, we have added citations to these sections. We have added this sentence to the report when we first describe this nomenclature (p. v): “This nomenclature has been used in the peer-reviewed literature since 1996 (Shaffer & Hall, 1996).” When describing conditions associated with gambling problems, we use the Level 0-4 nomenclature rather than “problem gambling” or “pathological gambling,” which are pejorative terms. The report introduced Interaction initiations within section 2.3.5.2. and provided the following description: “To understand how GSA-visitor interactions emerged, we asked GSAs “How did the interaction begin?” We asked this question only in the context of Exchange interactions. Answer choices were (1) I approached the visitor(s), (2) the visitor(s) approached me, (3) security introduced the visitor(s) to me, (4) another casino employee introduced the visitor(s) to me, (5) state police introduced the visitor(s) to me, (6) a gaming agent introduced the visitor(s) to me, and (7) a concerned other introduced the visitor(s) to me). GSAs could select only one answer.”

MGC Comments	
	"Extensive gambling history" is not a formal term, but is instead our way of describing patrons who report engaging in more rather than fewer forms of gambling during the past year. We have clarified this meaning in section 2.3.2.3.
Page ii: Was the small gift consistently provided? Was it part of the protocol? I don't believe so.	This procedure was agreed upon with the MGC and MCCG, and we reinforced it within our written protocol provided to the GSAs during November 2015. If there were deviations with the consistency of distribution, we were not made aware.
Clarification page iii, bullet 3- "following all other interactions" Define "other interactions".	The previous bullet point references Simple interactions. Therefore, "all other interactions" refers to non-Simple interactions, or Instructive, Demonstration, and Exchange interactions.
Page iii: "GSA had about 31 interactions with visitors each day and interacted with about 52 visitors each day". Clarify that GSA's sometimes interacted with more than one visitor at a time.	Currently, section 2.2.1.1. of the report notes, "The Checklist first asked GSAs to record which type of interaction they completed: Simple, Instructive, Demonstration, or Exchange. It also asked how many visitors were involved in the interaction. These questions allowed us to calculate the number of each type of interaction and the number of visitors per interaction type GSAs completed." Table 2 shows trends in the number of visitors per interaction, separately for each interaction type, and reveals that the number of visitors per interaction ranged from 1-22. It seems clear that the number of visitors per interaction could be greater than one.

MGC Comments	
	Having a gambling-related problem does not convey authority for evaluating the effectiveness of responsible gambling programs. Neither is having a gambling-related problem necessary for being aware of resources available for those who *do* have gambling-related problems. Ideally, visitors would be aware of the full range of services available, regardless of current need. Consider an example from the healthcare field. A healthy patient might be aware that her primary care physician is capable of providing emphatic, evidence-based brief intervention for substance use disorders. She might develop this awareness through direct conversation with her physician or by seeing materials posted within the exam room. In this case, the patient might be more willing to disclose such a condition to her physician if she ever develops one. This data merely represents visitors' impressions, as expressed.
Page iv: "A minority of respondents (25.2%) reported that people experiencing gambling-related problems would benefit from a conversation with a GSA. Similarly, a minority (30.4%) reported that people at risk for experiencing gambling-related problems would benefit from a conversation with a GSA." How could somebody who does not have a problem determine whether or not a GSA would be helpful to somebody with a more serious problem? These persons were not likely receiving a service that would demonstrate the GSAs ability to manage a gambling problem.	Nevertheless, we created a new variable that represents responses to the question, *"Which groups of people might benefit from a conversation with a GameSense Advisor?"* Visitors who selected the option "people who have a gambling problem" *or* the option "people at risk for developing a gambling problem," were grouped into a single category, regardless of whether they endorsed the option, "Anyone who gambles." Those who did not report that people at risk for, or experiencing, gambling-related problems could benefit from GameSense services were grouped into a different category. There were 62 respondents in the former category (36.3% of the total) and 109 respondents in the latter category (63.7% of the total).

We compared the link between this new dichotomous variable and a dichotomous variable representing whether respondents reported having experienced any gambling-related problems. |

MGC Comments	
	We did so using a 2 x 2 chi square test. (This was possible because both questions were included in Version 4.) Notably, we did not observe a significant effect; those who reported having a gambling-related problem were no more or less likely to report that GameSense could benefit those experiencing, or at risk for experiencing, gambling-related problems. More specifically, only 35.7% of those who reported never experiencing gambling-related problems were aware of the full range of services, and only 39.3% of those reporting at least 1 gambling-related problem were aware of the full range of services (chi square (1) = 0.13, not significant).
Page iv: How is "extensive gambling histories" defined? How is this determined by the GSA?	We did not ask GSAs to determine whether visitors had extensive gambling histories. This topic is relevant to the Visitor Surveys, not the Checklist. In Version 3 of the Visitor Survey, we asked visitors directly to describe their past-year gambling history. Specifically, we asked '*Which of the following have you done in the last year?*' We listed 9 types of gambling activities and instructed respondents to endorse as many as applied to them" (see section 2.3.2.3.) As we mention earlier in this document, we now clarify to state that when interpreting these findings, we consider that those who report engaging in many kinds of gambling activities to have extensive gambling histories. This term is used only in the interpretation of findings.
Page iv: A GSA may report that they have not "previously interacted with a given visitor" but it seems unlikely they'd know if the visitor had interacted with a different GSA.	We agree.
Edit page v: Move 5th bullet under working alliance "The majority of respondents" immediately after the first bullet to improve flow.	The current order of these results corresponds with the order in which they are presented throughout the report (i.e., Methods, Results, Discussion).
Typo page 11, bottom line – should be through May 31, 2016	We have fixed this.

MGC Comments	
1.2 Understanding responsible gambling - Doesn't reference the MGC RGF including MGC definition of responsible gaming which has been a foundational document for RG strategies in MA.	The report employs the standard citation strategy for scholarly writing. That is, we use published peer reviewed work from scholarly journals whenever possible to establish conceptual frameworks. The RENO model and the subsequent publications from the International Working Group on Responsible Gambling represents the seminal work defining Responsible Gambling. We do introduce the MGC RGF on page 11 and reference it again on page 14.
4.5: It is beyond the scope of the study to determine if the MGC is interpreting the statue accurately. This is the authority of the MGC to determine and therefore should be removed.	The report does not determine if MGC correctly interprets the statute. The report simply recommends "… that policy makers consider these findings in relation to the legislative mandate for expanded gambling requiring gambling operators to "…provide complimentary on-site space for an independent substance abuse, compulsive gambling, and mental health counseling service"" ("Bill H03697," 2011). This is important given that we could not find evidence of substance abuse or mental health counseling services. Consequently, we disagree with this suggestion. However, in response to our observations, the MGC is in the position to affirm its original decision that GameSense meets the obligation of the expanded gaming legislation, or revise GameSense, if they believe it is necessary. Similarly, MGC is in a position to request that the legislation be revised so that it is consistent with the goals of GameSense.
4.6: What it the meaning of stating the program is meeting a "circumscribed" set of program goals?	GameSense appears to be meeting a limited set of program goals. We first describe our understanding of the program goals in section 1.5 (providing responsible gambling information and resources across the spectrum of needs, appealing to a wide audience, establishing strong working alliances with patrons, attracting visitors from both inside and outside the casino).

MGC Comments	
The amount of data collected is robust but there does not appear to be many findings or conclusions drawn	This preliminary report includes just a circumscribed portion of the full evaluation.
Should "Appeal to Wide Audience" be changed to "Program appeal/perceptions?" Does it make sense to use the term wide audience when only surveying visitors with more in-depth interactions?	We describe the motivation behind this wording choice in section 1.5.
Table 6: Why is "behavior" and "experience with gambling" being combined? Additionally, this appears to be a very narrow range of behaviors. What does "experienced with gambling" mean? Does this mean frequency? If so, then it aligns with the IDM framework and consider referencing.	We combined these concepts because visitor impression responses were integrated within a single question on the GSA Checklist (section 2.2.5.1.). We did not provide GSAs a definition of "experienced with gambling." During the initial planning period, we included items about the visitor's perceived knowledge of responsible gambling concepts and interest in learning about GameSense offerings. Mindful of the need to minimize GSA burden, and guided by the GSAs' frequency of endorsing these response options, we deleted these response options prior to the window of observation.
Table 8: Why is age not reported beyond mean? It seems important to have a better understanding of full report on this.	The standard deviation, range, and mode of age was reported in the text prior to Table 8 (section 3.1.5.1.): "The average participant was 53.2 years old (SD = 15.3; range = 21-90; mode = 60)."
Table 11: A significant # and % sought information about problem gambling and how to get help but not captured because the different responses accounted for a small % - consider collapsing to better represent this area.	Other than statistical significance, the use of "significant" to describe results is unclear and introduces a subjective element to description. We prefer to collapse across groups infrequently because doing so disguises strata and hides important information.
Table 12: A significant % (60%) plan to take action (thinking or otherwise) as a result of conversation with a GSA. Fits with MI/Stages of change – contemplation to action.	Use of the word "significant" is unclear in this context. We agree that a meaningful portion plan to take some kind of action after their conversation with a GSA. In the second wave of visitor surveys that began on August 8, 2016, we ask "repeat customers" whether they engaged in any of these activities fol-

MGC Comments	
	lowing their initial conversation. Visitors' responses will be summarized in a future report.
Table 13: As described, a majority % wanted information about RG but still a significant % wanted info about problem gambling (24%). This isn't adequately reflected in the narrative and mis-leading in the introduction.	What is meant by "significant"? See above. To illustrate, 24% is a minority.
Table 18: While most did not endorse a gambling related prob-lem (as would be expected) a significant # did – what % of casi-no patrons experience gambling related harm and what % en-dorsed at least 1 when visiting a GSA?	Use of the word "significant" is unclear in this context. We in-terpret this comment as a call for more information about the broader population of PPC patrons, beyond those who com-pleted Exchange interactions and Visitor Surveys. The epidemi-ology of casino patrons and their gambling-related harms is be-yond the scope of this report and this project. We do, however, have additional information about the relative size of the popu-lation of GameSense patrons in comparisons to the population of PPC patrons. Specifically, on July 29, 2016, Penn provided information regarding PPC daily traffic. They reported that roughly 7,706 visitors go to PPC each day. Given that GSAs re-ported interactions with about 52 visitors each day, this means that GameSense directly connects with about 0.67% of daily PPC visitors. (For both PPC traffic and GameSense visitors, the caveat that certain visitors might be counted more than once applies.) GameSense might indirectly connect with more visi-tors and potential visitors via signage, media spots, outreach outside the casino, and the like. This kind of engagement in-formation might be useful in a future cost-benefit analysis.
The findings only capture the initial exchange interaction and don't capture the interactions following that may include much different topics.	We understand this comment to mean that the findings do not represent subsequent conversations between a given visitor and a given GSA. In actuality, a substantial minority (over 40%) of visitors were "repeat customers."

MGC Comments	
4.2.2: It's erroneous to think the workload would be divided equally between the GSAs. Based on natural flows of traffic during different times of the day, GSAs that work mornings or late evenings will have less patron interactions.	We agree that certain GSAs might have fewer patron interactions due to different shifts; in section 4.2.2., we note, "Understanding the causes of these patterns [of patron interactions] is beyond the scope of this evaluation. It could be that certain GSAs simply worked busier shifts than others, and that such discrepancies in visitor interaction counts are inevitable." We raised the possibility that the workload might differ, and that the GameSense should attempt to understand if and how staff shifts might have affected results, or whether some other factor accounts for differences.
4.2.5: Are men more represented? Compared to what? What % of visitors to PPC are men?	This project and report does not include an epidemiology of visitors to PPC and their demographic characteristics.
4.3.2: "visitors rarely approached GSAs with concerns that could be considered serious" Since the study only captures the initial exchange interaction this makes sense. As stated, most exchange, instructive and demonstration start off as simple (75%). If this is the case, it would be expected that the first exchange may be "testing the waters" for a further discussion about PG in future interactions that aren't captured.	In section 4.2.5., we mention the finding that a substantial minority of interactions (40.6%) occurred with "repeat customers." We further state that "In most cases, those who returned to GSAs for repeated interactions had previously had Exchange interactions, the most intense type of interaction." During the window of observation, we did not ask GSAs to survey visitors who had already completed a Visitor Survey. However, during the second wave of data collection that began on August 8, 2016, we have added a survey tailored for those who have already completed an initial Visitor Survey.
In table 13 and 15 24% and 10% respectively of conversations are of serious nature/ related to a gambling problem. Not a rare occurrence. Additionally, since the study only captures the initial exchange interaction this makes sense. As stated, most exchange, instructive and demonstration start off as simple (75%). If this is the case, it would be expected that the first exchange may be "testing the waters" for a further discussion about PG in future interactions that aren't captured.	We are unclear about the meaning of "only captures the initial exchange." GSAs reported that they had previously interacted with over 40% of visitors.
4.3.3: Any additional information about what about GS distract-	None available, but we can integrate this into future research.

MGC Comments	
ed them?	
This is a new program. How does that affect the patron response and specifically the issues they bring to GSAs?	This evaluation focuses on the version of GS, at this particular time. Future evaluations will be able to compare GS during different development periods. This baseline data cannot answer this question.
There is a point to be made about the importance of GSA/visitor relationships that is difficult to capture in this type of evaluation. This should be acknowledged as a limitation.	As in every study, we did not include the full range of questions that could be used to assess a given concept. We used the questions that we selected in consultation with the MGC and MCCG.
May want to clarify objectives from "How are GSA's using available space" to "Are GSA's using available space?"	We appreciate this suggestion but are comfortable with our initial wording.
2.1.3.1 This may not be accurate. The GSA wouldn't offer a patron survey to persons enrolling in the VSE but they may have completed a survey at an earlier time.	On page 18, the report specifies that, "Visitors who completed a voluntary self-exclusion were also ineligible [for a survey]." While that same visitor might have had an interaction with a GSA prior to enrolling in voluntary self-exclusion, once they had completed VSE, they would not be eligible for a survey according to the protocol instructing GSAs not to administer surveys to them and their subsequent ban from the casino.
Consider other languages and survey font size.	

Additional Division on Addiction Revisions
Revision 1: On page iv, under Visitor Characteristics, we edited a typo which indicated that the "modal [Visitor Survey] respondent was a 60-year old, White, non-Hispanic man who had a high school diploma or equivalent." This now correctly reads "non-Hispanic woman."
Revision 2: We have added citations to relevant papers describing the public health level system for gambling in the Executive Summary (p. v) and in section 4.3.1. The relevant citations are Shaffer and Hall (1996) and Shaffer, Hall, and Vander Bilt (1997).