



Reno  
Problem  
Gambling  
Center

February 8, 2019

Good morning ladies and gentlemen, my name is Denise Quirk and I have the privilege to serve as the Chairman of the Governor's Advisory Committee on Problem Gambling or "ACPG." I am also the Clinical Director of the Reno Problem Gambling Center, one of the largest treatment providers in the state.

As part of its strategic planning process, the ACPG has noted in past years several deficits in the state's approach to providing services for the prevention, treatment, workforce development, awareness and research of problem gambling. One is an outdated funding formula for the Revolving Account for the Prevention and Treatment of Problem Gambling, \$2 per slot machine per quarter. Back in 2005 when this fund was created, no one foresaw a steady decline in slot machines, as illustrated in Figure 1 on page 3 of the Strategic Plan.

The current program funding is woefully inadequate. By way of a simple example, we have no funds available for research so that we might understand how many Nevadans are affected by problem gambling and whether or not there are any social or demographic differences among our diverse population that warrants targeted interventions. We do know the demand for treatment services has increased at the same time funding for problem gambling services has decreased. The decreased funding is a result of an antiquated funding formula that the Governor's budget seeks to replace.

There is very little funding available for workforce development leaving the state in a weakened position unable to attract or train new counselors in the field. There is a very small amount dedicated to prevention, but \$200,000 doesn't go far in a state as large and diverse as Nevada.

I'd like to turn your attention to Figure 6 on page 11, which shows the weaknesses and gaps we have long been hoping to shore up in properly funding prevention, treatment, workforce development and research. With this model, we are going to bring our state into the new millennium using insights gained while studying our populations' prevalence as well as current and emerging trends. This will give us the ability to plan for future needs and spend and track our funds with more precision towards goals of healing and reducing the negative economic and social impact of problem gambling.



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Figure 4, on page 7, is a clear indicator that treatment works. It shows that 85% of persons entering gambling treatment in Nevada report a reduction in symptoms and improved quality of life at 12-month post-enrollment follow-up interviews. We have been able to compile important data from those Nevadans who have benefited from the use of the grants these last ten years. Because of this, we know that Nevadans who obtain DHHS funded gambling treatment are surviving, even thriving, and are extremely grateful for the help they received, often crediting it for quite literally saving their lives.

The ACPG continues to be a voice of prevention, research, treatment and education about the gambling problems our citizens face and how best to address them. This new funding formula will more accurately reflect the current needs of our state and allow us to reach out and serve more people for a longer time, as we anticipate new trends and issues to be addressed by the professionals who are experts in problem gambling issues.

As it has in every other aspect of gaming, Nevada should be leading the way on matters related to problem gambling. On behalf of the ACPG, we hope you will support the Governor's leadership by supporting this change in formula that will properly fund problem gambling services in the state of Nevada.

Sincerely yours,

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