

Researchers release new findings in groundbreaking gambling study

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The UMass Amherst epidemiologist is lead investigator of the MAGIC study.
Credit: UMass Amherst

New findings released Sept. 12 from a groundbreaking gambling study by a University of Massachusetts Amherst research team show that out-of-state casino gambling among Massachusetts residents decreased significantly after the Commonwealth's first slot parlor, Plainridge Park Casino, opened in Plainville in the summer of 2015.

"That suggests that the slot parlor was successful at recapturing people who had been [gambling](#) in casinos out of state," says UMass Amherst epidemiologist Rachel Volberg, lead investigator of the Massachusetts

Gambling Impact Cohort (MAGIC) study.

Conducted by the Social and Economic Impacts of Gambling in Massachusetts (SEIGMA) research team at UMass Amherst's School of Public Health and Health Sciences, MAGIC is the first major adult cohort study of gambling in the U.S., which examines gambling behaviors by surveying the same individuals over time. The study aims to uncover and understand populations at higher risk of experiencing [problem gambling](#) and gambling harm, and to support the development of effective and efficient treatment and [prevention programs](#) in Massachusetts.

[The new report](#), prepared by lead author Alissa Mazar and presented to the Massachusetts Gaming Commission at its meeting in Boston, covers "Wave 3," a period from 2015 to 2016, before the state's two large resort-casinos opened in August 2018 and June 2019.

"Although this report focuses on results from before the opening of MGM Springfield and Encore Boston Harbor, we have already learned a great deal about how gambling problems among Massachusetts adults develop, progress and remit—information that will assist the Gaming Commission and the Department of Public Health in crafting the right mix of prevention, intervention, treatment and recovery services to effectively minimize and mitigate gambling harm in the Commonwealth," Volberg says.

In another "very interesting finding," Volberg notes that people who gambled were unlikely to stop gambling over the three years surveyed so far. "That has implications for both prevention and treatment," she says. "On the prevention side, it suggests that it's important to provide people with tools to manage their gambling so it doesn't become problematic."

Other findings:

- From 2015 to 2016, the incidence rate of problem gambling, which refers to the proportion of people who newly experience problem gambling over a 12-month period, was 1.2 percent, which is similar to other jurisdictions.
- From Wave 2 to Wave 3, the remission rate, which refers to the proportion of people no longer experiencing problem gambling who were experiencing this disorder 12 months prior, was 44 percent. Slightly more individuals remitted compared with the number identified as new problem gamblers.

"When you have people both developing a problem and remitting within a given period, that suggests problem gambling can be reduced by using some resources for treatment and some for preventing people from progressing to a more serious situation in the first place," Volberg says.

Conventional substance abuse and gambling treatment programs, which typically require people to abstain from their problem behavior, may not be the most effective treatment model, the study's data suggest. "Only 3 to 10 percent of problem gamblers ever seek professional treatment," Volberg says. "If you put up that abstinence barrier, it makes it very unattractive for someone who could benefit from the help."

The next MAGIC report, to be released in 2020, will examine the predictors of problem gambling over years and whether racial/ethnic, income, gender and/or regional differences exist in these predictors.

Provided by University of Massachusetts Amherst

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