

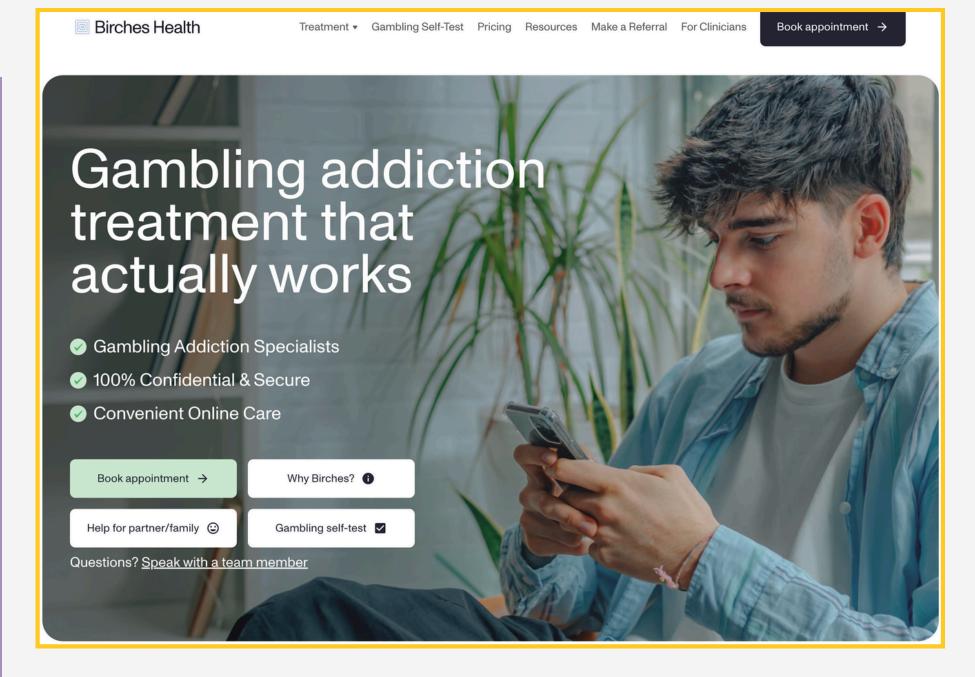
Evaluating Telehealth Gambling Treatment in North Carolina

Best practices for gambling treatment are still unknown. This is especially true in the emerging telehealth treatment community. By partnering with the NC Problem Gambling Program, Telus Health, & Birches Health, the GRPI is conducting an evaluation of telehealth gambling treatment for all NC based clients.

In addition, the GRPI is assessing the cost (with insurance billed first) for 100 clients with up to 12 telehealth counseling sessions to best measure annual cost for treatment by the state (DHHS) as the payor of last resort while ensuring all NC clients receive treatment with no out-of-pocket cost.

The GRPI is measuring:

- # of new NC based clients
- # of referrals by the NC gambling hotline & other avenues
- # of individuals who complete required intake forms,
- assessments, & complete the initial intake with a counselor (based on referral type)
- Overall intake conditions for all clients including **depression**, **anxiety**, **PTSD**, **bipolar**, **alcohol use**, **drug use**, **suicidal**



ideation, & gambling specific measures

 # of sessions completed by clients & # of clients who complete treatment

Improvement through treatment (as measured by repeated assessments)

Overall Improvement in gambling & comorbidities during & after treatment completion

Treatment Matters - Gambling Disorder has the highest suicide rate of all addictions.

While historically less than 10% of those suffering from gambling-related harms seek help, GRPI researchers found that for those that seek help & stop gambling for 1+ years, suicidal ideation decreases from ~20% to 2.7%.

(Malkin, M.L., Stacey, M. & Paul, M, 2024 - manuscript in progress)



Senior Research Team:

- Dr. Michelle L. Malkin (PI) GRPI Director
- Dr. Jie Yang
 Asst. Prof. ECU School of
 Social Work & GRPI
 Affiliated Faculty

Research Project Funded By:

