

The Massachusetts Gambling Impact Cohort (MAGIC) Study:

A Cornerstone of the Massachusetts Gaming
Commission's Research Agenda

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Comparing SEIGMA to MAGIC

DEFINING KEY TERMS

Type of Study

SEIGMA:

REPEAT CROSS-SECTIONAL STUDY

- Collecting data “*snapshots*” at designated points in time over a period of time
- **Not** the same group of individuals over time

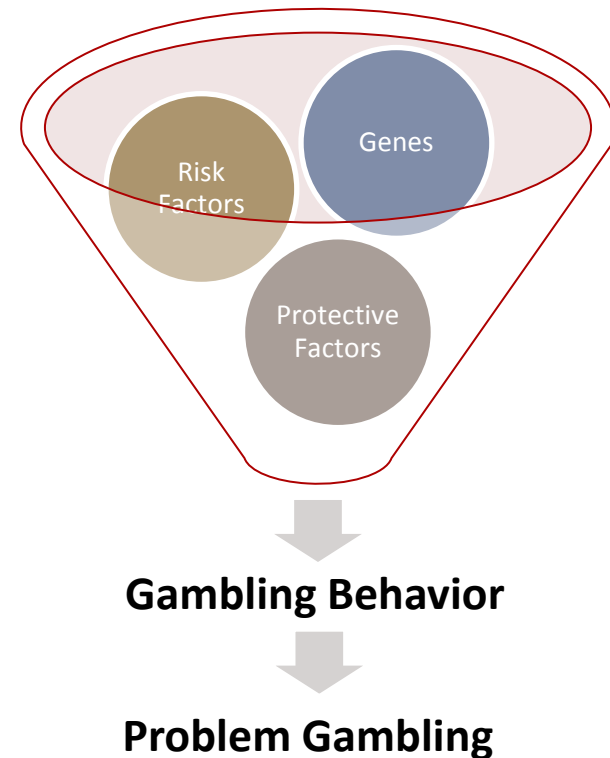
MAGIC:

LONGITUDINAL COHORT STUDY

- Collecting a kind of “*moving picture*” by collecting data from a group of people at designated time points
- Following ***the same group*** of people over a period of time

Etiology

- The study of causation, or what causes a particular condition
- The study of how a condition, in this case problem gambling, develops over time



Incidence vs. Prevalence

SEIGMA gives you PREVALENCE

- # of **existing** cases in the population
- Includes both new cases and existing cases
- = the raw # of existing problem gamblers in MA

MAGIC gives you INCIDENCE

- # of **new** cases in the population
- People who go from not having a condition to having a condition
- = the raw # of new problem gamblers in MA

Incidence & Prevalence



What will we learn?

RESEARCH QUESTIONS & ANTICIPATED FINDINGS

Research Goals

1. Determine the incidence of problem gambling in Massachusetts
2. Develop an etiological model of problem gambling

Research Questions: Incidence

- What is the incidence of problem gambling in MA prior to the introduction of the 4 new gambling venues?
- What is the incidence of problem gambling in MA immediately after the introduction of the 4 new gambling venues?
- Does the incidence of problem gambling decrease after several years of these venues being open?
- What is the raw number of new problem gamblers each year?
- What are the normal patterns of continuity and discontinuity in gambling and problem gambling behavior over time?

Research Questions: Etiology

- What individual, social, and environmental variables are most predictive of, and mediate the development of future gambling and problem gambling?
- What variables are most predictive of recovery from problem gambling?
- What is the best way of using findings from the previous questions to optimize prevention and treatment services in MA?
- Are there 'safe levels' of gambling involvement that do not lead to problem gambling?
- What characteristics differentiate problem gamblers who seek treatment from those who do not?

How can we apply what we learn?

Raw # of New Problem Gamblers

- Target how resources for prevention, intervention, treatment, and recovery support are allocated

Risk Factors

- Target prevention campaigns
- Target intervention, treatment, & recovery support

Protective Factors

- Target intervention, treatment, & recovery support

Safe Levels of Gambling

- Develop guidelines for awareness & prevention
- Make safe levels the default

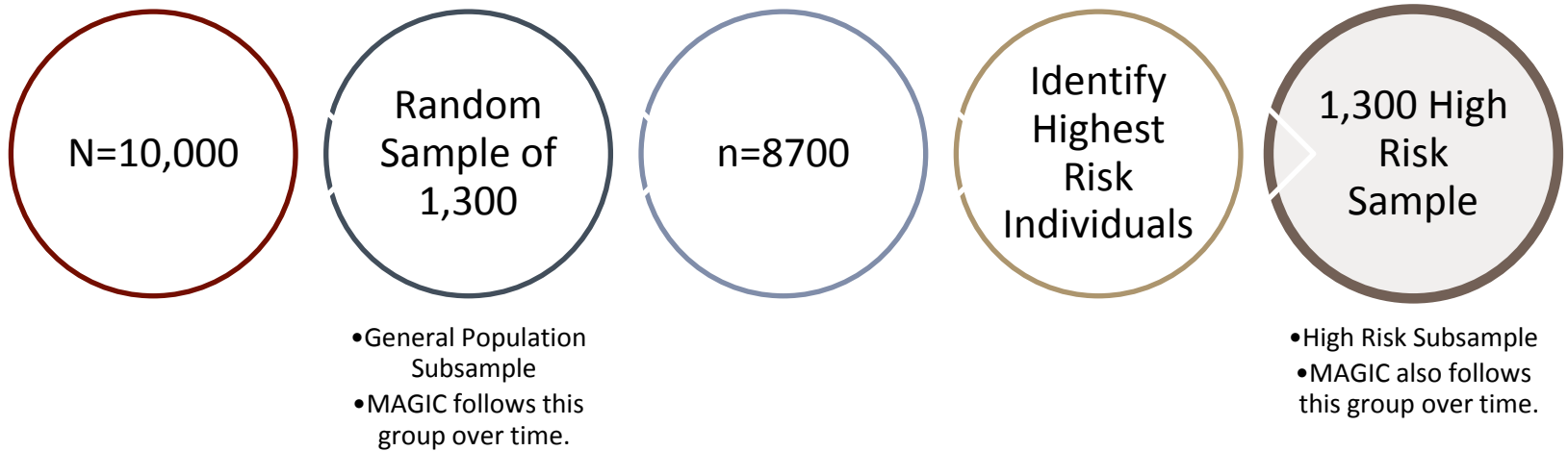
Treatment-Seeking Characteristics

- Target interventions
- Ensure availability of services & recovery supports

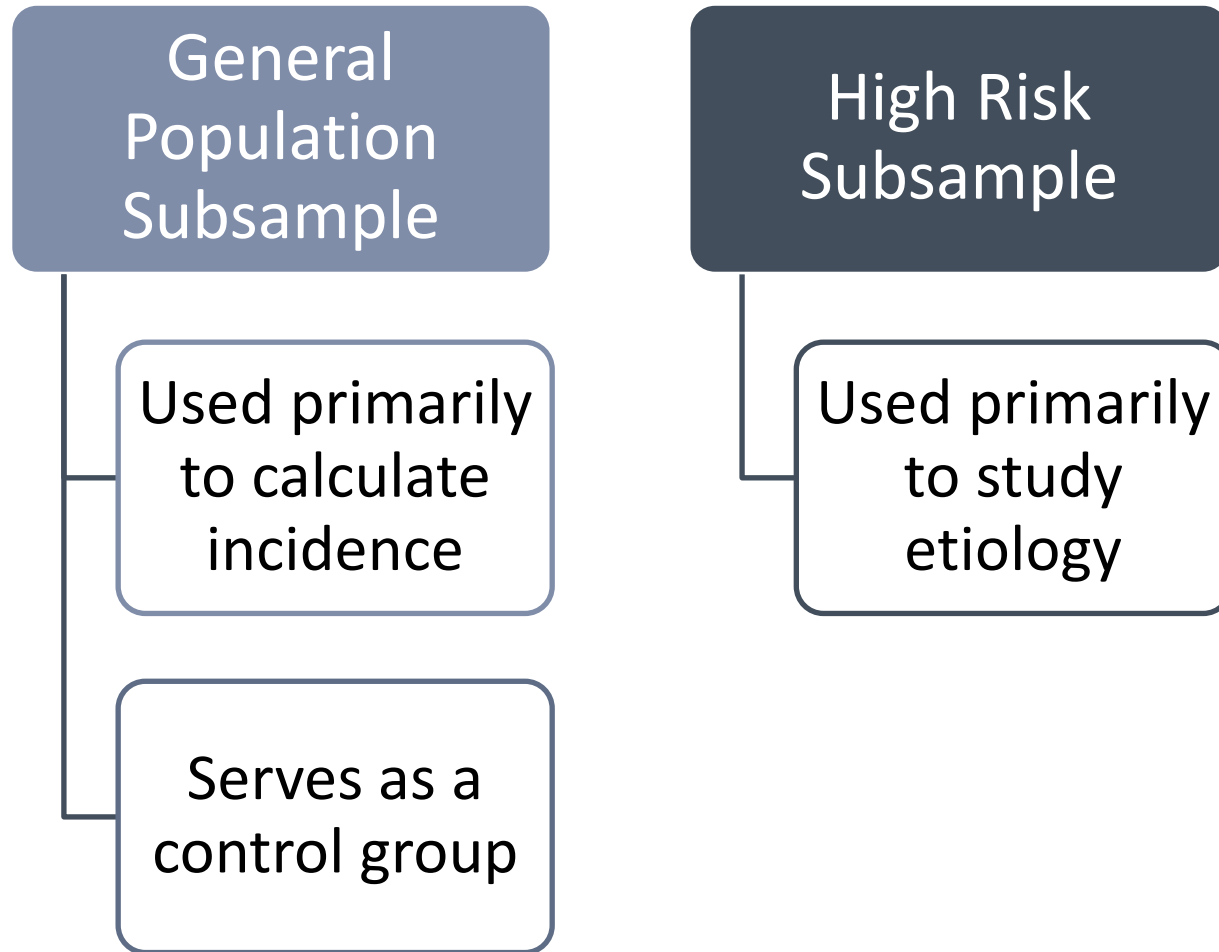
Overview

MAGIC'S METHODOLOGICAL APPROACH

Sampling Strategy



Utility of Each Subsample



Timing of Assessments

Wave 1 Launched
September
2013

Wave 2 Launch in
January
2015

Wave 3 Launch in
September
2015

Wave 4:: Launch
annually in
September

Retention Strategies

- Conducting assessments at the same time every year
- Being attentive to participant needs
- Providing incentives for participants
- Maintaining contact between assessments
- Having multiple means of contact
- Having an easily remembered project “brand”
- Maintaining a website
- Having permanent offices in the region
- Having a small, stable, and cohesive research team
- Hiring the right people to recruit and maintain the cohort
- Using staff time efficiently

SIGNIFICANCE OF THE MAGIC STUDY

Limitations of Existing Small-Scale Cohort Studies:

- Focused on a very narrow demographic
- Small sample sizes
- Small # of people who developed problems
- Short timespan
- Small # of assessment periods
- Focus on gambling *or* problem gambling, but not both
- Short questionnaire
- Poor retention rates

Limitations of Existing Large-Scale Cohort Studies:

- Relatively low incidence of problem gambling
 - Due to insufficient oversampling of people at risk
- Long time interval between assessments
 - i.e., 1-2 years
 - Most PG assessments based on past year
- Short duration
 - i.e., 4-6 years

The Value of MAGIC

- There have been no major cohort studies of gambling in the United States
 - None conducted in Massachusetts
- Change in gambling availability in MA will be more dramatic than in other jurisdictions studied
- Findings will be synergistic with the SEIGMA study

THANK YOU!