



NOTICE OF MEETING and AGENDA

May 29, 2018

Pursuant to the Massachusetts Open Meeting Law, G.L. c. 30A, §§ 18-25, notice is hereby given of a meeting of the Public Health Trust Fund Executive Committee. The meeting will take place:

**Tuesday, May 29, 2018
12:00 p.m.
Department of Public Health
250 Washington Street Floor 2
Public Health Council Room
Boston, MA 02110**

- 1) Call to Order
- 2) Approval of Minutes-VOTE
 - a. Dated April 4, 2018
 - b. Dated May 9, 2018
- 3) FY19 Budget-VOTE
- 4) Sports Betting
- 5) Other business – reserved for matters the Chair did not reasonably anticipate at the time of posting
- 6) Public Comment

I certify that on this date, this Notice was posted as "The Public Health Trust Fund Executive Committee Meeting" at www.massgaming.com and emailed to: rees@sec.state.ma.us, melissa.andrade@state.ma.us.

5/24/18
(date)

Enrique Zuniga, Co-Chair
Commissioner
Massachusetts Gaming Commission

5/24/18
(date)

Lindsey Tucker, Co-Chair
Associate Commissioner
Massachusetts Department of Public Health

Original Date Posted to Website:



Massachusetts Gaming Commission



Public Health Trust Fund Executive Committee (PHTFEC) Meeting Minutes

Date/Time: April 4, 2018 – 1:00 p.m.

Place: Mass Gaming Commission
101 Federal Street, Boston, MA 02110

Present: **Executive Committee**

Lindsey Tucker, Co-Chair, Associate Commissioner, Massachusetts
Department of Public Health

Stephen P. Crosby, Co-Chair, Chairman, Massachusetts Gaming Commission

Jennifer Queally, Undersecretary of Law Enforcement

Michael Sweeney, Executive Director, Massachusetts State Lottery
Commission

Attendees

Marlene Warner, Executive Director, Massachusetts Council on Compulsive
Gambling

Victor Ortiz, Director of the Office of Problem Gambling, Massachusetts
Department of Public Health

Teresa Fiore, Program Manager of Research and Responsible Gaming,
Massachusetts Gaming Commission

Mark Vander Linden, Director of Research and Responsible Gaming,
Massachusetts Gaming Commission

Enrique Zuniga, Commissioner, Massachusetts Gaming Commission

Edward Bedrosian, Executive Director, Massachusetts Gaming Commission

Brianne Tolson, Director of Policy and Communications

Catherine Rollins, Deputy Chief of Staff for the City of Everett

Matthew Hoffman, Executive Director Boston ASAP

Call to Order

1:06 p.m. Co-Chair Crosby called to order the Public Health Trust Fund Executive
Committee (PHTFEC) Meeting.

Approval of Minutes

Michael Sweeney moved for the approval of the PHTFEC minutes for March 7, 2018. Motion seconded by Co-Chair Crosby. Motion passed 4-0 as Rebekah Gewirtz was not present.

FY19 budget

1:08

Mark Vander Linden explained that the budget as proposed during last meeting was reformatted to combine both the proposed FY19 budgets for the Massachusetts Gaming Commission Research and Responsible Gaming and the Massachusetts Department of Public Health Office of Problem Gambling Services. \$541,000 was cut from the overall budgets, bringing the combined budget total to slightly above \$8 million.

Chairman Crosby stated that the purpose of today's review was not to vote on the budget, rather it was meant to provide additional opportunities to discuss the proposed budget.

Mark Vander Linden explained that the GameSense budget was reduced by \$173,000 without compromising any of the previously stated goals. A request of the PHTFEC during the previous meeting, special population research was increased from \$50,000 to \$80,000. Since the previous meeting, the MGC further negotiated with UMass Medical School on the contract for a research consultant. He further added that in response to a recent comment made by the Gaming Policy Advisory Committee, there would be a memo accompanying final research reports outlining the action steps as informed by the report's findings.

Co-Chair Tucker noted that while the budget increase for the Special Populations studies was a direct reflection of comments made during the previous meeting, it still did not feel large enough. Mark Vander Linden responded that two of the three special population's projects are considered seed projects, so dollars for a complete study may not be necessary. For further consideration, the funding structure could remain the same and would address special populations which were identified but not awarded grant for study. Ideally a pool of ongoing funding would be ideal for special populations. She further added that special population versus statewide research feels lopsided, and that in absence of an itemized budget from UMass Amherst, it is difficult to envision the entire research budget as a whole. Mark Vander Linden responded that he had received an itemized budget from UMass; however it was not received in time to share during today's meeting.

Michael Sweeney stated that the allotted budget for special population's research falls below what he would like to see, and that he is still struggling with the meaningful impact of the proposed budget. Mark Vander Linden responded that \$100,000 for special population research would be ideal and would allow for an

additional project or an extension of an existing project. Co-Chair Crosby stated that large-scale, in depth, population study is extremely expensive. He suggested that the current special population research groups be asked what an ideal amount of funding is and what needs to be done.

Co-Chair Tucker agreed that putting out an RFI in the future or holding a session in the future with the current researchers would be beneficial. Co-Chair Crosby added that heavying up on certain populations within the sample of BGPS could be a solution for 2020.

1:31

Victor Ortiz introduced the DPH budget and expressed his gratitude for the feedback in guiding the budget. Infrastructure and capacity building component is gearing up for the implementation for the work within vulnerable communities. He stated that the communications campaign budget decreased \$500,000 which would allow for continued implementation of the campaign around men of color with a history of substance abuse as well as planning for two additional campaigns: targeting youth and parents as well as an additional at-risk population such as seniors or Asian Americans.

Co-Chair Tucker added that if there were additional money in the budget in FY19, those other campaigns could be implemented.

Co-Chair Tucker provided background on the Community Level Health project, stating that it will provide money to the local level to augment community initiatives already in place such as a community health needs assessment or health improvement plan so that local level needs are supported. \$100,000 would be available to each of the communities hosting a Level 1 Casino. Further, the Community Health Workers (CHW) project to integrate gambling education, screening, and referrals into community health centers and/or community mental health centers would build on the CHW assessments. By the end of the fiscal year, the needs assessment and trainings will be complete for two out of the three regions. As the CHWs will provide services to the community, they can also conduct VSEs. In response to a question about who CHWs serve, Victor Ortiz responded that CHWs primarily work with marginalized populations. Mark Vander Linden agreed that there is a role in a clinical space as part of the treatment process.

Co-Chair Crosby noted the synergy of these activities as well as outreach activities and suggested that GameSense Advisors would be ideal training for designated agents. Victor Ortiz responded that he has been working with Mark Vander Linden on identifying opportunities.

Marlene Warner asked how reimbursement could work and whether it was helpful to build capacity with people out in the community or to focus on treatment facilities.

Co-Chair Tucker added that a \$50,000 placeholder for the strategic plan was removed from the budget as a 5-year updated may be more appropriate than the anticipated 2 year update. The Committee agreed.

Michael Sweeney supported the idea of putting out an RFR to see how people shape the potential special populations budget and suggested that scalable tiers be incorporated into the RFR. Along the lines of special populations work, Michael Sweeney referred to a letter written by Giles Li of the Boston Chinatown Neighborhood Center which will appear as an attachment in the next meeting's materials.

Enrique Zuniga explained that the proposed FY19 budget allocated dollars for launching GameSense at Wynn, but that a portion of it may not need to be funded at the beginning of the year.

As the group was still seeking to reduce budget items to meet the \$8M target, Co-Chair Tucker added that the allotted \$50,000 could be used towards both tobacco and alcohol or could be moved to a future year. Michael Sweeney added that the recent activity in Massachusetts surrounding marijuana may be worth incorporating into marketing campaigns. Tucker indicated this initiative could address vaping and Juuling as well as marijuana.

Having no further questions, Co-Chair Tucker stated that the next PHTF meeting would be to vote on the budget.

Research Roles and Responsibilities

2:10

Mark Vander Linden stated that this item was meant to address previous concerns expressed by the PHTFEC. In response, he updated the Research roles and Responsibilities Memo to more accurately reflect the involvement of the PHTFEC in the gaming research agenda. Various stakeholders should be assured that there are many different groups who are dedicated to the planning and review of the research.

Co-Chair Crosby and Michael Sweeney agreed that the updated document correctly reflects the role of the PHTFEC; however it should be viewed more as an advisory memo as opposed to strict bylaws.

Co-Chair Tucker added that a translational role should be carved out to ensure that research findings are put into public and press friendly language. Mark Vander Linden responded that he could add a bullet point to the memo to discuss the roles of GRAC and its ties with other groups.

Definitions of Gambling Disorder

2:22

Mark Vander Linden explained that this item appears in the memo to address the previously expressed concern that that SEIGMA study does not capture problem gamblers as defined in the DSM-V. The concern was that the term "problem gamblers" was being used too broadly. In working with Rachel Volberg and other members of the SEIGMA team, it was determined that the SEIGMA definition of

problem gambling does capture individuals as defined in the DSM-V. Problem gambling is used as an umbrella term which includes the most severe forms of problem gambling g.

Jennifer Queally asked about the difference between DSM and PPGM. Looking at it from a criminal justice perspective, when people are defining recidivism rates so differently, it really means nothing if it can't be compared. Mark Vander Linden responded by explaining the history of the various terms. The PPGM is a newer screening instrument although it is gaining popularity. The PPGM compared with other screening instruments is advantageous for multiple reasons.

Marlene Warner added that the press care about the number, not the exact definition. Jennifer Queally responded that that the number is going to be based on how it's defined, and that it should be treated like other addictions. Mark Vander Linden responded that the 2% of problem gamblers have both significant negative consequences and impaired control, which is obviously different from having negative consequences but no signs of impaired control.

Matthew Hoffman added that from the perspective of a treatment provider, there are two question screeners which are extremely accurate in diagnosing someone with a gambling problem.

Jennifer Queally would like to ensure that when citing 2%, that the measure being used to come up with that answer is the same measure that is being used in other states. Marlene Warner responded that this is an issue afflicting the entire field and that there is not consistency anywhere. Mark Vander Linden said that he would share a report which goes into greater detail of looking at prevalence rates across jurisdictions based on different screeners.

Co-Chair Tucker stressed the importance of alignment regarding the presentation of the problem gambling statistic and ensuring the PHTFEC be aware of what the message is and comfortable with how it is presented.

Michael Sweeney shared the concern for both the public and PHTF in how decisions are made, and stated that the goal should be to provide access and help for healing in individuals. He added that he is skeptical that if there is a swing which doesn't fit the narrative, numbers are interpreted differently.

Strategic Planning Research Update

2:53 A strategic planning session will take place at UMass Amherst on May 22nd. Members of the PHTFEC are invited to join the session to help direct the research agenda.

Responsible Gaming Framework Version 2

2:58

Mark Vander Linden stated that the Responsible Gaming Framework (RGF) is meant to create an orientation to responsible gaming in Massachusetts. The first version was useful early on for the applicants of casino licenses and subsequently for the licensees once they were chosen. The updated RGF is meant to serve the same purpose as we move towards the opening of MGM and Wynn, and incorporates many changes as a result of learnings from the past few years of operating PPC.

The memo provides an overview of the changes made in the updated framework. Definition of responsible and problem gambling aligns with what is outlined in the SEIGMA study, and outlines a stepped-care approach which recognizes that not all players are alike. Notably, the updated RGF clearly endorses a precautionary approach which states that we do not wait for the evidence of effectiveness to catch up. GameSense and PlayMyWay are examples of programs which were launched using a precautionary approach. Invested more in the evaluation of these programs than in the actual programs themselves.

Co-Chair Crosby explained that the gaming industry typically believes that peer reviewed research on programs must exist as a way to limit strategies which deal with problem gambling. He believes that a precautionary approach is important and has received a lot of pushback especially from the AGA.

Enrique Zuniga added that Howard Shaffer added early on that a framework was an important way to guide research and responsible gaming. It is meant to inform rather than prescribe. Mark Vander Linden added that many casinos follow the AGA code of conduct; however, it includes minimal guidelines. This is the document which should inform the RG plan of MGM which should be prepared a month or two before they become operational.

3:17

Co-Chair Tucker asked if there was a CLAS framework to ensure that information is provided in a culturally and linguistically competent way for those who do not speak English as a first language or may have a disability. As we think about health and safety within the physical environment, would like to ensure that there is lighting and security cameras and small stairwells where people might get assaulted. This may have been a part of their licensing process.

Jennifer Queally asked about youth areas within the casino. Enrique Zuniga responded that there is not going to be youth areas but that there will be areas to sit which does not have to be done in conjunction with any other activity. Marlene Warner added that many gamblers who regularly visit Foxwoods and Mohegan arrive at Plainridge Park Casino thinking that there is a daycare.

Co-chair Tucker stated that if the host town has not passed regulation on it, she would like to incorporate vaping, juuling and e-cigarettes into the RGF so that they begin with the same set of standards. Co-chair Crosby stated that he would like to address juuling and marijuana derivative to an upcoming MGC agenda.

Michael Sweeney stated that while responsible marketing and advertising guidelines exist, they should also address digital platforms.

Co-Chair Tucker questioned whether it was appropriate to include the provision that house credit would not be offered to anyone on public assistance. Mark Vander Linden responded that he would look into exactly how house credit worked.

Co-chair Tucker inquired whether there was a way to bring engagement of the host community into the RGF more explicitly. In reading it, she felt that there was something missing between people within the casino and the broader local community. Michael Sweeney added that it may be worth coming up with a list of vulnerable populations within a certain proximity to the casino.

Public Comment

Catherine Rollins expressed her thanks for the work being done by the PHTFEC, and stated that she would like to get a stronger sense of what the process is.

Matthew Hoffman stated that he has received great feedback from clients who have interacted with the GameSense program as well as the Massachusetts Voluntary Self Exclusion program as well. He further added that in his experience, advertising is successful when pitched towards family and loved ones as it is less likely to appear to the problem gambler themselves. Finally, Matthew suggested that a residential treatment bed in Massachusetts would be helpful for problem gamblers. He stated that he comes across somebody monthly who would be in need for a residential program. Right now they are only in Minnesota and Virginia.

Brianne Tolson asked what is being done within the committee to communicate the work being done. Co-Chair Crosby responded that he was unsure if a mailing list for PHTF existed. Co-Chair Crosby responded that she would assume that if was interested then they would be present at the meeting but would consider ways to improve communication.

Other Business

4:00 *Having no further business, Jennifer Queally made a motion to adjourn. Steve seconded the motion.*

List of Documents and Other Items Used

1. Public Health Trust Fund Executive Committee, Notice of Meeting and Agenda dated April 4, 2018
2. Public Health Trust Fund Executive Committee, Meeting Minutes dated March 7, 2018
3. Proposed FY2019 Budget Memo dated April 4, 2018

4. Gaming Research Agenda Roles and Responsibilities April 4, 2018
5. Defining and measure problem gambling in Massachusetts Memo dated April 4, 2018
6. Draft Massachusetts Responsible Gaming Framework, Version 2 dated April 4, 2018



April 4, 2018

To all members of the Public Health Trust Fund Executive Committee:

I serve as the Executive Director of the Boston Chinatown Neighborhood Center, Inc (BCNC), a family-centered multi-service organization founded in 1969, with four locations in Boston and Quincy. I have served on committees and advisory boards for Attorney General Maura Healey, State Treasurer Deb Goldberg, and Mayor Marty Walsh of Boston, and was awarded the Massachusetts Nonprofit Network's "Excellence in Leadership" award in 2017. I am also a recipient of the prestigious 2017 Barr Foundation Fellowship for exemplary nonprofit leaders in Greater Boston. I hope my thoughts below will be of use to you.

First, I must express my sincere appreciation for the work of this committee. As you know, the impact of casino gambling on communities is significant. The planned casinos will create good jobs that value the linguistic abilities of immigrants, which offers a new resource to the low-income Asian immigrant population we serve. On the other hand, research indicates that the presence of a casino increases the incidence of gambling addiction across all populations, and even suicidality.

I have appreciated the MGC's commitment to support *special populations* through research, which include Asians, Hispanics, Black and African Americans, veterans, and immigrants; there is woefully little data about these communities' relationship to gambling, and the MGC nobly seeks to help bridge that gap. I recommend this committee ensure these populations are among the top priorities for further study, as well as prevention and treatment, by building relationships with community-based organizations that serve those populations.

Organizations like BCNC have deep-seated knowledge about their communities that most institutions do not have. Members of our community have a very different motivation from the mainstream population for even stepping foot in a casino. In addition, the cultural factors that may increase the likelihood of addiction, and its dire consequences, are already core to our work as a service organization.

I recognize the important work that has been done locally to promote good mental health and addiction prevention, including some Chinese-language materials. At the same time, I must insist that in-language printed materials are just a start, and a new strategy will need to be implemented with the development of in-state casinos. Prevention in all at-risk communities requires ongoing investment. As long as there is going to be a casino in our backyard, our community will be on the frontlines to fight the exploitation of our most vulnerable community members.



**Boston Chinatown
Neighborhood Center**
波士頓華埠社區中心

I recognize the social benefit of programs like “Play My Way” and “Game Sense,” but also must note that these interventions are designed by and for mainstream communities. Speaking from our experience in supporting family functioning, smoking cessation, and working with separated families, interventions in the low-income Chinese community are different, and require holistic family-approaches, culturally competent and linguistically-appropriate staff, and most importantly, trust between clients and providers.

MGM Springfield opens in less than a year, and Wynn Boston Harbor follows very soon after. They already have their outreach and marketing plans to Asian communities written and ready to launch. Meanwhile, we as community-based organizations know the exceptional resources that will be spent drawing our communities into the casinos, but do not yet have any sense of the commitment we will have to counter it.

I urge you to engage service organizations that are located in Asian and other at-risk communities, and have leadership and staff that reflect the population they serve. In addition, I urge you to consider those communities and organizations as recipients of targeted prevention funds in the near future.

I appreciate your attention, and look forward to continuing this important conversation.

Sincerely,

Giles Li



Public Health Trust Fund Executive Committee (PHTFEC) Meeting Minutes

Date/Time: May 9, 2018 – 1:00 p.m.

Place: Mass Gaming Commission
101 Federal Street, Boston, MA 02110

Present: **Executive Committee**

Lindsey Tucker, Co-Chair, Associate Commissioner, Massachusetts
Department of Public Health

Enrique Zuniga, Co-Chair, Commissioner, Massachusetts Gaming Commission

Jennifer Queally, Undersecretary of Law Enforcement

Michael Sweeney, Executive Director, Massachusetts State Lottery
Commission

Rebekah Gewirtz, Executive Director of the National Association of Social
Workers, MA Chapter and Representative of the Massachusetts Public Health
Association

Attendees

Marlene Warner, Executive Director, Massachusetts Council on Compulsive
Gambling

Victor Ortiz, Director of Problem Gambling Services, Massachusetts
Department of Public Health

Teresa Fiore, Program Manager of Research and Responsible Gaming,
Massachusetts Gaming Commission

Mark Vander Linden, Director of Research and Responsible Gaming,
Massachusetts Gaming Commission

Giles Li, Executive Director, Boston Chinatown Neighborhood Center

Susanne Bernadelli, Assistant Director of Programs and Services,
Massachusetts Council on Compulsive Gambling

Sarita Hudson, Director of Programs and Development, Public Health Institute
of Western Massachusetts

Anna Yu, VP of Client Services, KHJ Brand Activation

Tod Brubaker, VP/Creative Director, KHJ Brand Activation

Caitlin Dodge, Chief Operating Officer, ThinkArgus

Call to Order

1:11 p.m. Co-Chair Tucker called to order the Public Health Trust Fund Executive
Committee (PHTFEC) Meeting and welcomed Enrique Zuniga to his first
meeting in which he will serve as Co-Chair of the PHTFEC.

Approval of Minutes

1:12 p.m. *Michael Sweeney noted that PHTFEC minutes for April 4, 2018 were not distributed in advance. Vote will be delayed until the next meeting.*

FY19 budget

1:13pm Lindsey Tucker introduced the FY2019 budget and stated that the goal of the meeting was to vote on the budget.

Rebekah Gewirtz asked whether the GameSense budget reflected dollars for Wynn and what the money would be used for. Mark Vander Linden responded that a part of the figure will go towards building the actual GameSense Info Center; however, most of the dollars will be for training and onboarding new staff. Rebekah Gewirtz asked if there would be any overlap within the communications campaigns and strategies sponsored by the DPH and MGC. Co-Chair Zuniga responded that the audiences of the two campaigns are extremely different so there is not a lot of room for overlap. Victor Ortiz explained that within the context of prevention, having multiple communication strategies are necessary to address early intervention all the way to messaging within casinos. Rebekah Gewirtz added that the PHTF should support programs which target policy and environment.

Michael Sweeney stated that he continues to struggle to digest the [large] funds allotted for the GameSense program within the overall budget, and hopes that we are able to migrate funding to other programs that benefit the broader community. In particular, he added that there should be more dollars put towards “special population research”. Jennifer Queally added that while special populations have been identified, she is not seeing action and assumes that the intent of the communications campaigns will address these different audiences as opposed to GameSense which she believes is more of an intervention program. Michael Sweeney stated that there is a balance within the agenda and is not comfortable that for all of the population, the best place for prevention and intervention is within the casino setting. He added that he is interested in using PHTF resources for community initiatives and in addition to does not want to see GameSense turn into ‘barbershop’ prevention programs once used by public health departments.

Co-Chair Zuniga responded that in the past, rigid messaging targeting gamblers had an opposite effect, and that GameSense represents a real evidence-backed shift in thinking. Co-Chair Tucker agreed that there is value in GameSense, although members could benefit from more detail and a presentation of the full evaluation should take place during the next PHTFEC meeting in July. In particular, she would be interested to know whether GameSense works equally for different populations.

Co-Chair Zuniga stated that indirect costs and staff time are not in the proposed budget, and that original intent was to not have high overhead in the formative years of the PHTFEC. Co-Chair Tucker explained that DPH personnel costs were not fully captured in the current budget and that additional information and an additional request to the group for consideration will be brought to the July meeting.

Public Comment

Marlene Warner of the Massachusetts Council on Compulsive Gambling read Chapter 23K Section 58 which establishes the basis for the PHTFEC. She stated that dollars within the budget are coming from gamblers and are meant to address problems both inside and outside of the casino. The intent is to allocate resources where people are affected by problems and believes that there is a spectrum of programs to be put out.

Giles Li of the Boston Chinatown Neighborhood Center stated that Massachusetts is better situated than other parts of the country to have this conversation. He questioned how effective GameSense is for special populations as well as how impactful the research will be for special populations as level funding will only allow illustrative as opposed to an instructive output.

Sarita Hudson reminded the group that her organization, the Public Health Institute of Western MA, conducted a Health Impact Assessment before the opening of any casinos in Massachusetts. She questioned how the PHTFEC and GameSense would engage local partners and stakeholders who are key in informing cultural thinking and competency.

Michael Sweeney shared his disappointed that there seems to be a competition forming, and that no comment can be made about GameSense without eliciting strong visceral reaction. He clarified that he does not have a problem with the program; rather he does not believe that the only point of

impact should be within the casino particularly when there is opportunity at other community settings. He further added that a lot of work was put into a budget which in its current form, only presents level funding for the special populations research work, and for that reason would prefer a delay in budget vote. Rebekah Gewirtz stated that she had to leave and supports a delayed vote.

Jennifer Queally suggested a cost benefit analysis be conducted to determine per person cost to measure effectiveness of the GameSense program. Co-Chair Zuniga proposed adding dollars to the special population table to move forward with the vote. The majority of the executive committee decided to postpone the vote.

Communications Campaigns

Caitlin Dodge of ThinkArgus introduced the communication campaign targeting Men of Color with a History of Substance Misuse for which her agency was contracted to develop for the Department of Public Health. She stated that research was conducted in order to inform the campaign and noted that many participants connected to “I” statements, which informed the development of their creative strategy.

Jennifer Queally questioned whether Gamblers Anonymous (GA) would be promoted within the campaign. Caitlin Dodge explained that the helpline is more heavily promoted within the campaign at the recommendation of the focus groups; however, organizations such as GA would be mentioned elsewhere within the campaign through other mediums.

Co-Chair Tucker added that at the heart of the campaign are individuals with a history of substance misuse, with men of many races hopefully responding to the messaging.

Marlene Warner asked whether there would be an attempt to talk to individuals outside of the chosen recovery centers as the members of this particular center may not be representative of the larger recovery population. She added that in her experience, individuals who make up these types of groups often use the term gambling to mean ‘scratch tickets’ and not casinos themselves. Caitlin Dodge responded that her team had met with one additional group not from a strict recovery center.

Anna Yu introduced the GameSense communications campaign for which her company, KHJ, has been contracted by the Massachusetts Gaming Commission to develop. She stated that the campaign includes a relaunch of GameSense at Plainridge Park Casino in accordance with the new GameSense brand standards, the launch of GameSense at MGM Springfield and an introduction of GameSense to the Western Massachusetts market.

Tod Brubaker, KHJ, provided examples of proposed creative and stated that the intent of the campaign is to improving messaging to drive audience to GameSense Advisors. Jennifer Queally stated that she did not like the example of the elevator decal which from her perspective looks like it is promoting alcohol abuse.

Co-Chair Tucker asked how the proposed concepts were being tested and requested review by people of multiple backgrounds. Anna Yu responded that the proposed concepts are part of a heavily weighted digital plan, which will provide the ability to track and optimize the campaign including for individuals with a diverse background.

Michael Sweeney asked about the ways in which language diversity will be incorporated into the program, and added that he encourages the proposed creative as it pushes beyond a stereotypical government campaign which are often designed on the 'safe' side.

DPH Program Update: Program Gambling & Suicide Prevention

Having taken up more time on the FY2019 budget than anticipated, Co-Chair Tucker moved directly to public comment.

Other Business

(See above comment)

Public Comment

3:54 Sarita Hudson, Public Health Institute of Western Massachusetts thanked the PHTFEC members for the ability to provide public comment on behalf of the Western Massachusetts community and wants to ensure that their voices are heard. She represents the Public Health Institute of Western Massachusetts which has been holding meetings to build on the Western Massachusetts Casino Health Impact Assessment originally authored by her organization. The sentiment heard at these meetings has been that the health related initiatives to-date focus on individuals and their families but not necessarily on the broader community. She circulated a letter which can be found at the end of these minutes.

Giles Li, Boston Chinatown Neighborhood Association reiterated his concern that while GameSense is the most evidence based intervention available to date, it is unclear whether it is impactful with special populations. He further expressed concern that level funds for year two funding of special population research may only result in illustrative and not instructive study.

4:00 *Co-Chair made a motion to adjourn. Michael Sweeney seconded the motion. Motion passed 4-0 as Rebekah Gewirtz had to leave before the end of the meeting.*

List of Documents and Other Items Used

1. Public Health Trust Fund Executive Committee, Notice of Meeting and Agenda dated May 9, 2018
2. Public Health Trust Fund Executive Committee, Meeting Minutes dated April 4, 2018
3. FY2019 Budget
4. GameSense Public Health Committee Meeting dated May 9, 2018
5. DPH_Problem Gambling Initiatives dated May 9, 2018
6. Letter to the PHTFEC from Public Health Institute of Western Massachusetts dated May 9, 2018 (attached)



**Public Health Trust Fund
Executive Committee members
May 8, 2018**

Dear Executive Committee Members:

Thank you for your important oversight of the Public Health Trust Fund and for creating this public comment opportunity.

The Public Health Institute of Western MA (formerly Partners for a Healthier Community, Inc.) led the Health Impact Assessment of the Western MA Casino published and presented to the MA Gaming Commission in 2013. We were honored to be able to inform some of the policy discussions taking place at that time both locally and on a statewide level.

The four issues that we focused on in that HIA were *jobs and employment, access to local casino gambling, traffic, and crime/public safety*. We found a likely mix of positive and negative impacts on health determinants and health outcomes and noted that the extent to which the effects manifested were dependent on the type of local and regional multi-sector based strategies put in place to promote positive impacts. We also noted that strategies should be both evidenced based, informed by local residents, and culturally responsive to local and regional context.

Over the past many months, we have begun convening a multi-sector group of stakeholders to understand, now five years later (2018) what new issues and concerns might be coming to the surface that we should address as the casino opening is close approaching. Issues that have been highlighted include:

- *Crime/Violence*, specifically domestic violence and human trafficking;
- *Policing practices*, we anticipate that new practices in proximity to the casino location will have negative impacts on communities of color;
- *Barriers to Employment*, specifically for residents that have a criminal record and those residents that would benefit from skill building systems as well as addressing other barriers to employment including explaining the preferred vendor status and options for covering upfront cost of gaming license such as payroll deduction after hiring;
- *Transportation* particularly in light of the current situation of regional transit authorities being cut;
- *Problem gambling* and ensuring that self-exclusion procedures for problem gamblers at a regional level are evidenced base and informed by community input and responsive to community needs;

- *Traffic /Airquality* – Springfield was just named the “asthma capital of the nation”- any new traffic will exacerbate the high rates of asthma (double the state); and lastly,
- *Housing displacement* from gentrification, not just in the South End where MGM is located, but across the City there is already increased rental costs and evidence of displacement and lack of services.

The Public Health Institute of Western MA is a “backbone” organization that has over two decades of experience in leading public health coalitions and systems and environmental changes. **We recommend that any funding strategy put in place by the Public Health Trust Fund support what we know to be three critical elements for the success of any multi-sector convening to address broad based population health issues such as problem gambling and the public health issues that are both causal and correlated with problem gambling:**

- 1) Efforts must be based in appropriate local community based organizations that have history of impactful work and expertise;
- 2) Any prioritized strategies and research being implemented locally need to be informed and monitored by resident leaders who organically will bring a lens of cultural responsiveness and understanding of local capacity, assets and needs;
- 3) Funded efforts should be aligned with current and existing efforts of both public health plans and easily identified metrics and trackable health indicators.

The second important issue we bring to your attention is a that we insist that there be some **formal mechanism in place to ensure that there are equitable distribution of funds to Hampden County**, consistently reported the least healthy county of the Commonwealth of Massachusetts based on both quality and length of life indicators. We want to be assured that the funding in the Public Health Trust Fund will return in amounts that are appropriate to address problem gambling and the already alarming health outcomes, particularly experienced by residents of color in Springfield and Holyoke, which we anticipate will be exacerbated by the casino. There is a history of resources being more heavily distributed in Eastern Massachusetts and we feel it is very important that the Public Health Trust Fund honor that Hampden County, in particular Springfield, will be greatly impacted and deserving of significant funding to mitigate negative impacts.

I respectfully submit these comments and look forward to joining you at future meetings as together we lift up the positive impacts and mitigate negative outcomes from this new venture that the Commonwealth has taken on.

Sincerely,



Jessica Collins
Executive Director