A Gambling Researcher, a Former Gambler, and a Current Gambler Reflect on Gambling Disorder Screening Day

March 10, 2025

Editor's note: *Please enjoy the following op-ed, which was prepared by Dr. Debi LaPlante, Director of the Division on Addiction, along with Jamie Salsburg and Mark Checkwicz, host and regulator contributor to the After Gambling podcast.*



What makes an intervention a good intervention? For the most part, interventions are made with good intentions. That's true of Gambling Disorder Screening Day (GDSD). Since its founding in 2014, GDSD has reached people across the nation and around the world. Thousands have been screened in person and online for gambling disorder, many for the first time. Public health organizations, the gambling industry, advocacy groups, academics, and government bodies have participated through social media, hosting screening events, writing thought pieces, and media engagement. We've called for increased involvement in screening and GDSD around the world. Is this a good intervention? We think so. We also think it can be better. To grapple with this question, and find our blind spots, we reached out to our friends and colleagues,[1] Jamie Salsburg and Mark Checkwicz, to tell us their thoughts about GDSD. Jamie is the host of The After Gambling Podcast. The After Gambling podcast has more than 100 episodes and features many special guests, including Mark, who is a regular contributor. Mark is an active gambler, senior World Series of Poker winner, and self-described as "gambling on the fringes of harm" for years. Read on to learn more about their thoughts and ours about GDSD, the good, the bad,

and the promise.

From your perspective, what are the strengths of GDSD?

Jamie *– I recall taking a survey years ago that included a question about how my work schedule might be affecting my life. At the time, I hadn't given it much thought, but that single question sparked a deeper reflection on the pros and cons of my work arrangements long after the survey ended. This is where I see GDSD providing immense value—by opening the door to discussions or future self-reflection on gambling behaviors.*

Mark *– The core strength of GDSD is the implicit acknowledgement that gambling disorders need to be identified, not only to professionals, but to oneself. I have long been a proponent of self-awareness re: "why am I gambling?" GDSD opens the door to creating a habit of asking oneself that question. Also, though I've long asked my Primary Care Physician to ask her group to consider screening for gambling issues, they've yet to make that happen. This speaks volumes as to how deep the lack of awareness is about gambling problems and their effects on health. GDSD has the potential to move the needle in the healthcare arena.*

Debi *– We do a lot of outreach – grassroots style – every year to encourage participation in GDSD. This takes a lot of time, but it's one of the most rewarding parts of it all and one of the strengths of GDSD. It helps us renew our connections with old and new partners and spreads from there. The work of one-on-one outreach keeps people invested and has helped with the longevity of this event. I think it also has helped GDSD grow. As our partner list grows, more partners become interested. In Massachusetts, we're now working with the Department of Public Health Office of Problem Gambling Services and reaching more than 50 organizations that will host screening events and receive technical assistance. So, GDSD has really accomplished a lot in terms of creating awareness and outreach. The more events that happen, the more people get screened. Many clinical sites tell us that after participating in screening day they've added gambling screening to their routine screening requirements. That's a win for us.*

From your perspective, what about GDSD needs improvement?

Jamie *– Getting people to open up about their gambling is always a challenge. I often wonder if we unintentionally push them away by framing most messaging and screening around the negatives. I suspect more people would engage if the*

focus shifted to the benefits of screening—providing participants with insights not only into potential risks but also highlighting what they're doing well. Right now, it feels like a pass/fail test. This creates several issues. First off, I'm unlikely alone as someone who will avoid taking tests when I suspect I might fail them. Second, gambling behavior is so nuanced, that it's unlikely that a simple pass/fail would provide much insight aside from the clear cases of gambling disorder. For most, nuanced feedback would be more valuable. Overall, a better approach might be presenting a balanced scorecard, showcasing areas of strength alongside areas that could be improved for those who choose to continue gambling.

***Mark** – I think the GDSD energy needs to be focused on reaching primary care offices and college campuses. It can also be introduced in high schools as a tool for counselors. I believe that GDSD can be used to promote anytime-usage of the screening tools. I would like to see a different word used other than "disorder," simply to promote greater onboarding of those willing to take the screening at events. A GDSD can easily be integrated into parent-attended weekends on said campuses. I did a presentation at a parent/student Bingo night and it was well-received. There is a growing awareness among parents that their children are stumbling over gambling issues. Present a screening when there will definitely be conversations in the aftermath. Additionally, I would like to see a Gambling Impact Screening aimed at affected others to help them identify the signs of problem gambling in those close to them. Through the years, my wife was somewhat wary of my gambling but still retained far too much belief that she was mostly sheltered from damage. When I say that "I have gambled on the fringes of harm for years," I am also saying that my family was on the fringes of harm for years. That's simply not acceptable and a screening aimed at my wife could have helped her to realize that impending harm was closer to her than she knew.*

***Debi** – Reflecting on what needs improvement is always hard. But, it's important and we know that we can make GDSD better. Last year, we wrote about some future goals for GDSD. I'd add to this list the importance of doing more to reach people where they are at. Maybe that means changing up how we talk about GDSD or what we think about for goals or extending outreach beyond screening at typical sites, like schools or treatment centers. We're fortunate to be able to reach a large number of sports fans this year by hosting a screening event at*



Boston's TD Garden during the Boston Bruins game on March 11th. Thinking outside the box about events and spaces that tap new audiences will take GDSD in new directions with broader reach. That's needed. We also need to do more to ensure that screening is the beginning and not the end. It's hard to know whether screening converts to treatment or other steps toward more controllable gambling. We have some early data we're trying to publish that suggests that people who are at-risk for gambling-related problems are more likely than others to access resources after screening. How often this happens is unclear, though. More work needs to be done to figure out how to do this better and consistently.

From your perspective, what is the potential for GDSD?

Jamie *– I see GDSD as a powerful starting point for expanding the conversation around the pros and cons of gambling beyond its current scope. The more we openly discuss and analyze gambling behaviors, the better equipped we are to make informed decisions moving forward. Beyond screenings focused solely on gamblers, efforts could also extend to those around them—parents, spouses, and others who may be impacted. Overall, the concept of GDSD is solid; the key is to continuously refine, improve, and expand these discussions until they become an integral part of our collective understanding.*

Mark *– I believe that GDSD will eventually be used across many platforms. I say that because many people simply can't identify the various types of gambling nor understand what are good gambles vs bad. I sit here writing this response with my phone open to the "Stocks" app and watching the prices of my holdings. I've also bought and sold crypto-currencies at a frantic pace in reaction to similar but more dramatic price swings. Neither of those platforms come with a 1-800 hotline message. Education is the ultimate goal, and once it is acquired, it can be digested and passed along. I'd like to encourage you to have active-gambler ambassadors be a part of the screening days to facilitate more and deeper engagement. A network of providers and facilitators will produce more conversations. At the minimum, it would create more self-reflection.*

Debi *– My hope has been and continues to be that GDSD will hit on at least four goals: (1) inform people about the importance of screening for gambling-related problems; (2) educate about gambling-related problems and how to screen; (3) help people identify gambling-related problems; and (4) connect people to resources when needed. We're doing these things. I think GDSD also has the potential to change the way that people think about gambling and people who have gambling-related problems. Stigma is still an issue that keeps people from talking about these issues. Screening events are a chance to talk about this in a relatable way – a way that lets people keep their dignity and self-respect. I think we can make some real changes if we do that. Gambling-related problems aren't a joke and neither are people who have those problems. I think GDSD can find a way to communicate that resonates and doesn't humiliate.*

Screening day enjoys a lot of attention each year, but it is important to make sure that we're reaching for the right goals and to avoid getting complacent. New strategies, like understanding both individuals' gambling and health strengths and needs through screening, giving more consideration to affected others, and meeting people where they're at, rather than where we can be will be important to how GDSD evolves over time. We're grateful to our many partners and especially to Jamie and Mark for sharing their thoughts about this event. If you have your own thoughts, please share them with us! We want GDSD to be useful and impactful, and hearing from diverse voices about what works and what doesn't is an important part of that process.

— Debi LaPlante, PhD

Want CE credit for reading BASIS articles? Click here to visit our Courses Website and access our free online courses.

---

1. Be sure to check out our new co-developed continuing education course, the Gambling & Recovery Podcast Science Accelerator Course!