

Problem Gambling Prevention

Quarterly Reporting Dictionary

This document provides guidance and definitions for completing the Problem Gambling Prevention Quarterly Report Form. All A&D 80 Services provided by the Program must be reported and submitted electronically to OHA PGS on a quarterly basis, no later than 45 calendar days following the end of each quarter: May, August, November, and February, for services provided during the reporting period. Reports may be submitted to PGS.Support@oha.oregon.gov, please cc the OHA PGS Prevention Specialist.

Reporting Requirements

The objectives, outputs, and outcomes described in the program's approved Problem Gambling Prevention Implementation Plan should be used to complete the data fields and reflect progress toward the objective(s) listed in the Plan. If any objectives or outputs need to be updated, please submit a revised Implementation Plan to the PGS Prevention Specialist for approval,

Question and Responses

Provider Name:

- Drop Down Menu and select Provider Name

Reporting Period

- Drop Down Menu and select appropriate reporting period

The following questions will repeat for each objective listed in the approved Problem Gambling Prevention Implementation Plan.

Please ensure your report includes responses for every objective included in the approved Implementation Plan. If no progress was made on an objective, provide a brief explanation.

Please list the Objective from your Problem Gambling Prevention Implementation Plan.

- Utilizing the approved Problem Gambling Prevention Implementation Plan enter the corresponding objective to the question from the plan verbatim (copy and paste from the plan works well).

Please provide a brief narrative summarizing your progress this reporting period. Include key highlights, challenges or barriers, quantity of services (such as number of presentations or events) and any technical assistance needs (narrative box provided). You are encouraged to attach supporting documents or examples of your work when submitting the report.

For the 4th quarter reporting period (June – March) include progress toward both short-term and long-term outcomes as appropriate.

Please indicate the focus population by age served for the Objective # this reporting period. You may select more than one.

- 0-11
- 12-17
- 18-24
- 25-44
- 45-64
- 65- and over

Which CSAP Strategies did you utilize for objective this reporting period. You may select more than one. Please see page 5 of this document for definitions.

- Information Dissemination
- Prevention Education
- Alternative Activities
- Community-Based Process
- Environmental
- Problem Identification and Referral
- Not Applicable

Which levels of the Social Ecology were impacted by Objective # this reporting period. You may select more than one. Please see page 6 of this document for definitions.

- Individual Level
- Relationship/Interpersonal Level
- Community Level
- Societal Level

Please use the check boxes to select the activity categories that were implemented this reporting period under objective #. You may select more than one.

Category and Definition

- **Problem Gambling Awareness/Education Presentation Stand-Alone:** Presentation to raise awareness/education regarding the problem gambling.
- **Problem Gambling Awareness/Education Presentation: Integrated:** Presentation to raise awareness/education regarding
- **Alternative Activities (ATOD &G free activities):** Alcohol, tobacco and other drugs as well as gambling free activities designed to support healthy lifestyles
- **Content Development:** Development of resources to be utilized in programming (handouts, toolkits, social media tools, newsletter articles etc.). Planning time should be captured in narrative for objective when necessary.
- **Material Dissemination:** Dissemination of materials in the community (calendar, posters, brochures, toolkits, websites, social media etc.).
- **Community Partnership/Capacity Building:** Development of community partnerships and efforts to build resources and readiness to address problem gambling prevention needs.
- **Gambling in the Workplace Policy Work:** Policy development and activities designed to support gambling in workplace policies.
- **Skill Building:** Supports that build resilience, refusal skills, decision making.
- **Professional Development Training (self or program staff):** Workforce development efforts to increase the providers' skills and knowledge.
- **Other:** Activities program engaged in that do not fall into the categories above.

If you implemented a media campaign under Objective # during this reporting period, please indicate the types of media utilized. You may select more than one.

- Did not implement media campaign this quarter
- Television PSA/Ad (PSA: Public Service Announce)
- Social media (Facebook, Twitter, Instagram etc.)
- Radio PSA/Ad
- Billboard
- Movie Theatre Ad
- Print Article/Newsletter/Ad
- Other (please specify) – comment box provided

Please select from the drop-down menu your estimated percentage of activities this reporting period under Objective # that problem gambling is integrated into the activity, and percentage of activities that problem gambling is a stand-alone activity.

- % Integrated Activities – enter estimate utilizing numbers
- % Stand-Alone Activities – enter estimate utilizing numbers

Please identify the partnerships involved in or developed for implementing Objective # during this reporting period. You may select more than one.

- Substance Use Disorder Treatment
- Substance Use Prevention
- Education System K-12
- Higher Education - Community College, University etc.
- Criminal Justice System (Juvenile/Adult)
- Suicide Prevention
- Physical Health (Nutrition/Activity)
- Physical Health (Reproductive/Healthy Relationships)
- Mental Health
- Older Adult
- Problem Gambling Treatment
- Mental Health Prevention and Promotion
- Other (please specify) – comment box provided

The completed Problem Gambling Prevention Quarterly Report — reflecting progress toward the objectives outlined in your program’s approved Implementation Plan – should be submitted electronically to pgs.support@oha.oregon.gov. Please cc the OHA Problem Gambling Prevention Specialist at roxann.r.jones@oha.oregon.gov.

Reports must be submitted no later than the due date indicated in SE AD 80 reporting requirements.

When saving your file, please use the following format:

[insert county] PGS Prevention Quarterly Report [insert reporting period]. Example Baker PGS Prevention Quarterly Report Jan – March 2026.

Definitions

CSAP Strategies

- **Information Dissemination** – One-way communication from the source to the audience (*e.g., brochures, media*).
- **Education** - Two-way communication with interaction between the educator/facilitator and participants (*e.g., workshops, trainings*).
- **Alternatives** - Constructive and healthy activities that exclude alcohol, tobacco, other drugs and gambling (*e.g., healthy, constructive activities that exclude gambling*).
- **Environmental** - Establish or changes to written and unwritten community standards, codes, policies, and attitudes (*e.g., partnership to enforce age restrictions, policy advocacy*).
- **Community-based process** - Strategies aimed to enhance the ability of the community to more effectively provide prevention and treatment services (*coalition building, planning, fostering interagency collaboration, and expanding community networks*).
- **Problem identification and referral** - Identification of those who have engaged in risky behaviors to assess if behavior can be reversed through education (*e.g., screening tools to be utilized and referral pathways*).

Social Ecology

- **Individual Level:** Includes strategies that focus on the individual. Focuses on personal factors that influence behavior, such as: knowledge, attitudes, beliefs, and skills (*e.g., increasing awareness about the risks of problem gambling through educational workshops*).
- **Relationship (Interpersonal) Level:** Includes strategies that involve the individuals social circle, such as family and peers. Examine close relationship that may influence behavior, including: family, friends, peers and social networks (*e.g., engaging parents or peer mentors to support youth in making healthy choices*).
- **Community Level:** Includes strategies that focus on the settings where social relationships occur such as schools, workplaces, local organizations and neighborhoods (*e.g., partnering with schools to implement prevention programs or policies*).
- **Societal Level:** Includes strategies that focus on broader societal influences, such as cultural norms, economic policies, laws and regulations and media messages (*e.g., advocating for state-level policies that restrict gambling advertising to youth*).

You can get this document in other languages, larger print, braille or a format you prefer free of charge. Contact Problem Gambling Services at PGS.Support@oha.oregon.gov.

Problem Gambling Services (PGS)

Pgs.support@oha.oregon.gov

PGS Prevention Specialist: roxann.r.jones@oha.oregon.gov

<https://www.oregon.gov/oha/hsd/problem-gambling/pages/index.aspx>

