# **NC PROBLEM GAMBLING PROGRAM** 1-877-718-5543 https://morethanagame.nc.gov

– If gambling is more than a game, free help is available.

## Health Class Curriculum Grant A Youth Problem Gambling Prevention Program

## **The NC Problem Gambling Program**

The North Carolina Problem Gambling Program (NCPGP) was established to provide and support effective problem gambling prevention, education, support and treatment programs throughout the state.

#### What to Know

- Problems related to substance misuse, gambling, gaming and digital media overuse can impact both physical and mental health, relationships, school, work and overall well-being.
- Social media can impact sleep cycles and mental health and expose youth to cyberbullying, sexual exploitation, sexual content, alcohol and gambling.
- Excessive technology use can impair executive functioning in the brain in the areas of attention and memory.
- Youth with gambling problems are more likely to engage in tobacco, alcohol and drug use.
- Persuasive design concepts are use to increase the time and money people spend online.
- Gambling marketing and advertising is reaching youth and impacting their behaviors and attitudes.
- Adolescents who experience problems with gambling may also experience emotional dysregulation and experience cognitive distortions about gambling.
- According to a the ABCD study that provided population level evidence that lack of sleep, due to screen use during adolescents and young adulthood, has made an impact on neurodevelopment on youth.

## **Youth Gambling**

While gambling is not a good way for an individual to make money, it has become extremely profitable for the gambling industry. The American Gaming Association reported over \$15 billion dollars in revenue in 2022. With the increased expansion of online gambling, young people have also increased their gambling activities. Despite adolescent gambling being illegal, youth engage in gambling with a prevalence rate higher than adults. Global findings indicate that 8-15 percent of youth are at-risk for problem gambling and 3-8 percent are living with problem gambling. Young people experience problems related to gambling at a higher rate than adults because their brains are still developing. This brain development, coupled with external pressure from family, peers, social media and industry marketing influences their decision making and behaviors.

## **Advances in Technology and Gambling**

Advances in technology have given companies platforms to market and advertise products and services. Gambling marketing and advertising are targeting children and adolescents utilizing social media, in-game advertising, online ads and promotions, gambling websites and apps, billboards and public advertising, promotional products, sports-betting sponsorships and celebrity endorsements. Increased participation in gambling activities can be credited to an increase in access to gambling products and persuasive design concepts. These concepts utilize psychological and social theories to entice people and keep them engaged and spending money on gambling products and services.

## **Prevention Education in Schools**

Schools can be instrumental in the public health approach needed to address healthy and unhealthy behaviors. Programs that target at-risk behaviors through education are crucial in preventing the development of harmful behaviors into adulthood. According to Sloboda and Ringwalt (2019), schools are a socialization institution and provide a protective environment for students. The school can act as a socialization agent by educating, fostering prosocial attitudes and behaviors, and equipping students with the knowledge and skills they need to be responsible citizens. Most schools work tirelessly to provide a setting where students feel safe, supported, and that they belong. This is accomplished through having activities in schools that link parents, families, and school staff together to provide a quality educational experience for all students. This includes helping students understand all aspects of their health so they can make informed decisions. In addition, programs implemented in childhood and adolescence with protective effects lasting into young adulthood typically have employed behavior modification and behavior management, classroom management, and social and emotional skills education (US Department of Health and Human Services, 2021).

## **Social Emotional Learning Skills in Schools**

Building social and emotional skills helps children learn to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions, and can also help youth develop social competencies with communication, self-efficacy, assertiveness, and proper refusal skills. The academic success of students is strongly linked to their health. Health/contributes to the ability to learn and focus, and health skills empower students to achieve health and wellness throughout their lives. The NC Healthy Living Essential Standards assure core competencies for overall health including physical, mental, emotional, and social health. For ease of understanding, these essential standards have been organized around the following three essential strands.

#### NC Health Living Essential Standards of Learning for Health Education Emphasis for Student Learning

#### Essential Health Concepts

Demonstrate the knowledge and skills to make healthy decisions that reduce health risks and enhance the health of oneself and others. The intent of this goal is for students to become health-literate, self-directed learners who recognize the relationship between personal behavior and personal health and can skillfully apply health-promotion and disease-prevention strategies as a foundation for leading healthy and productive lives. This includes the development of the capacity to acquire, interpret, and understand health concepts and the development and application of a range of health skills. Instruction will focus on the topics of hygiene, communicable and noncommunicable disease prevention, dental health, nutrition, sleep, mental wellness and social and emotional skills, drug use, physical activity, body systems, safety, intentional and unintentional injury and violence prevention, Internet safety, gangs, bullying, and preventive health care. As a result, students will have a comprehensive understanding of essential health concepts related to health promotion and risk/disease prevention, self-awareness and social awareness, and an enhanced ability to engage in lifelong health behaviors.

#### Healthy Decisions

Demonstrate the ability to access, evaluate, and use health information, products, and services that influence health and wellness in a positive manner. The intent of this goal is for students to demonstrate the ability to identify valid and accurate health information, products, and services. This ability is critical for the prevention, early detection, and treatment of most health problems. Valid health information raises awareness of the long-term consequences of unhealthy decisions and enables students to make decisions that support lifelong health. Students will experience many opportunities across their school years to use information-analysis and responsible decision-making skills as they compare, contrast, analyze, synthesize, and evaluate materials, products, and services related to a variety of health

issues. As they become informed consumers, students will become aware of and able to analyze the influence of culture, media, technology, and other factors on health. Upon the completion of the health education program, students will be able to make constructive choices about personal behavior and social interactions based on ethical standards, safety concerns, and social norms, and accept responsibility for personal health practices and engage in healthy decision making.

#### Advocacy and Health Promotion

Demonstrate the use of appropriate health practices and behaviors to promote a safe and healthy community when alone, with family, at school, and in other group settings. The intent of this goal is for students to become responsible, health-literate citizens who demonstrate an understanding of how to create and maintain an environment that serves to protect and promote the health and wellness of individuals, families, and communities. Students will develop awareness of social and media influences that affect their decision making and develop skills to effectively navigate and resist negative influences while building positive, healthy rewarding relationships with diverse individuals and groups.

#### **NCPGP Grant Information**

Grants from \$5,000 - \$20,000 are available for NC school districts to apply for PE and Health teachers from middle schools and high schools who work with 6<sup>th</sup> – 9<sup>th</sup> grades to be trained to implement:

#### Option A

A health curriculum selected by the school district that includes health information on the prevention of youth problematic behaviors in gambling, gaming and digital media use.

#### Option B

Choice Led Health is a skills-based health curriculum providing student learning experiences to deepen their knowledge and attitudes using a variety of participatory methods. A choice led health teacher personalizes instruction for all learners by providing a variety of "student choice and voice" assignments aligned with national and state health education standards. A choice led health classroom provides numerous solutions to increase student attention, recall information and practice health related skills for a lifetime. Please note the 7<sup>th</sup> grade curriculum is strongly encouraged due to heavy content in ATOD, gaming, gambling, and digital media use.

#### **Choice Led Health by Grade Level**

#### Grade 6

The curriculum introduces an understanding of adolescent health issues, emphasizing the connection between choices and consequences, and guides students in becoming positive role models with insights into positive and negative peer pressure. The course also instills injury-prevention behaviors, promoting self-management both at school and in various contexts.

#### Grade 7

This course explores the consequences of impulsive behavior, the cycle and health risks of substance misuse, characteristics of gaming disorder, maintaining a balanced media diet through the 4 Cs, understanding the impact of youth substance and digital media misuse, exploring various types of gambling, recognizing the built-in advantages of games, addressing problematic gaming and gambling, dispelling gaming myths, understanding the vulnerability of teens.

#### Grade 8

This curriculum provides students with comprehensive knowledge about disease origins, the interplay between family history and health risks, short- and long-term consequences of health choices, and the application of health skills to personal, family, and community concerns, while also teaching them how to build healthy relationships and apply this knowledge to their online behaviors, including safe strategies digital

media consumption, online interactions, gambling, and gaming activities.

#### Grade 9

Ninth-grade students seamlessly incorporate diverse health concepts, skills, and behaviors to strategize for personal lifelong health goals, encompassing risk awareness, disease prevention, overall wellness, safe use of prescription medication to include opioid use and misuse, as well as the resources available in the community to tap into if needed. Students will demonstrate competence and recognize their active role in fostering a healthy lifestyle for themselves, their families, and the community, including how to be cyber-savvy and respectful online with a focus on social media misuse and impacts. The students will also engage in understanding the marketing impact of sports betting advertisement.

#### **Workshop and Module Requirements**

#### Option A

The school district will outline a plan for the training and delivery of curriculum. In addition, all Health and PE teachers will be required to complete eight asynchronous modules on the prevention and treatment of adolescent gambling, gaming and digital media overuse with UNC Behavioral Health Springboard. CE's are available for various licenses.

#### Option B

PE and Health teachers will be trained on the Choice Led Health curriculum in a one-day training in August. In addition, all Health and PE teachers will be required to complete eight asynchronous modules on the prevention and treatment of adolescent gambling, gaming and digital media overuse with UNC Behavioral Health Springboard. CE's are available for various licenses.

## **Grant Guidelines**

## **Approach to Application**

- Grants from \$5,000 to \$20,000 are available for middle schools and high schools in North Carolina to implement the Health Class Curriculum Grant. The grant allotment is based on the size of the school district and number of teachers engaging in the training and curriculum. (Please see scoring system).
- 2) There is a scoring system for the funding; however, the budget grid must be detailed with a justification for the funding amount requested.
- 3) Utilize the training materials and engage at least one grade level per school within the school district.
- 4) The 7<sup>th</sup> grade curriculum is strongly encouraged due to heavy content in ATOD, gaming, gambling, and digital media use. This will be considered when reviewing grant applications.
- 5) All PE and Health teachers must attend the training for the curriculum and complete the asynchronous modules.
- 6) The school district or community organization must provide the venue for the training and any refreshments or meals for those attending.
- 7) The funding should be use to pay teachers to attend the training and any of their travel expenses.
- 8) The funding should be use to provide the needed equipment, supplies, and classroom space to execute the program.
- 9) Each school participating may also receive a portion of funding for overhead to offset personnel costs.
- 10) If the school district is only training one grade level, please consider 7<sup>th</sup> grade as a first choice due to the content focus areas of ATOD, gambling, gaming, and digital media use.
- 11) Community organizations applying for the grant must be 501c3 designated organizations, with a board of directors, and be in good standing in the community.

## **Program Requirements**

1) All students must complete the pre and post surveys to evaluate the effectiveness of the program.

- 2) The school system must provide supporting letters from each school in the school district that will be participating with the grant application.
- 3) At least one grade level in the entire school district must engage in curriculum delivery.
- 4) All of those teaching the curriculum must be trained and engage in the eight asynchronous learning modules and provide participation certificates to the North Carolina Problem Gambling Program.
- 5) Anything printed should include the North Carolina Problem Gambling Program (NCPGP) logo and any poster contests or public service announcements should include the NCPGP Helpline. This can be emailed upon request.
- 6) The soft deadline for the grant application is May 30 and the final deadline is July 30.
- 7) All changes or disruptions to the program should be reported to the North Carolina Problem Gambling Program.
- 8) All outcomes are due by June 1 for all grants. This includes the number of students who were taught the curriculum, pre and post survey data, and teacher feedback form.
- 9) The grant award is official once the award letter and approved plan is returned to the North Carolina Problem Gambling Program with the administrator's signature.

#### **Program Recommendations**

- 1) Attend the North Carolina Problem Gambling Program webinars to learn about advancements in prevention of problem gambling, gaming, and digital media overuse.
- 2) Grantees should consider the option to participate in Problem Gambling Awareness Month (March).

#### **Acceptable Uses for Funding**

- Planning and program development time for employees to offset personnel costs.
- Program supplies and equipment, such as video equipment or projectors.
- PE and Health instructor's supplies and classroom equipment.
- Travel and teacher time spent engaging in training.
- Training facility costs.
- Contractors with an expertise in the program.

#### **Unacceptable Uses of Funding**

- Cash or gift cards to students.
- Field trips to gambling establishments or guest speakers on responsible gambling.

## **Grant Scoring System**

The North Carolina Problem Gambling Program (NCPGP) grant application uses a scoring system for the grant review process. Applicants must at least receive a score of four to be considered for funding. Applicants with higher scores will receive more funds to provide support to more teachers and students. Past grant performance will also be taken into consideration by reviewing outcome reports.

#### **Impact Activity Score Description**

- The number of grades participating in the grant program.
- The number of teachers being trained in engaging in the curriculum.
- The number of students engaging in curriculum and pre and post surveys.

#### **Individual Criteria Score Description**

- A Title 1 school designation or the number of children on free or reduced lunch.
- A school or organization in a county with a military installation.

## Funding Opportunity and Score Potential

Funding Opportunity	Score
Up to \$5,000	5
Up to \$8,000	6
Up to \$10,000	7-8
Up to \$12,000	9-10
Up to \$15,000	11-13
Up to \$20,000	14-15

## **Impact Activity Score**

Impact Activity	Score
Teach an entire grade level in the school district the curriculum.	1 point
Teach more than one grade level in the entire school district the curriculum.	2 points
Up to four PE and Health teachers engaging in the training and curriculum.	1 point
Up to 10 PE and Health teachers engaging in the training and curriculum.	2 points
Up to 20 PE and Health teachers engaging in the training and curriculum	3 points
Up 30 PE and Health teachers engaging in the training and curriculum	4 points
Up to 40 PE and Health teachers engaging in the training and curriculum	5 points
Up to 200 students engaging in curriculum and pre and post survey collection.	1 point
Up to 500 students engaging in the curriculum and pre and post survey collection.	2 points
Up to 1000 students engaging in the curriculum and pre and post survey collection	3 points
Up to 5000 students engaging in the curriculum and pre and post survey collection	4 points
Up to 10,000 students engaging in the curriculum and pre and post survey collection	5 points
Up to 20,000 students engaging in the curriculum and pre and post survey collection	6 points

## Individual Criteria Score

Criteria	Score
A Title 1 school district that serves more than 50 percent of free or reduced lunch.	1 point
A school or organization in a county with a military installation.	1 point



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