

MINNESOTA COUNCIL OF CHURCHES
MINNESOTA CATHOLIC CONFERENCE
JEWISH COMMUNITY RELATIONS COUNCIL
ISLAMIC CENTER OF MINNESOTA

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VIA ELECTRONIC MAIL

Dear Governor Walz and members of the Minnesota Senate and House of Representatives:

We, faith leaders from across Minnesota, write to express our deep concern around the possible expansion of gambling in Minnesota. We oppose proposals that would legalize remote betting, bringing gambling into every home, school, and workplace in our state. We should not be creating new avenues of entertainment for the privileged few without regard to the harm gambling expansion will have on young people, those with addiction, and their families. These social costs will translate into real dollars borne by our whole state.

Our faith traditions – Catholic, Protestant, Jewish, Islamic and others – have varying beliefs about gambling. Some believe that all gambling is morally evil and should be banned. Others believe that some forms of gambling in moderation may be legitimate forms of entertainment (bingo) or used for charitable purposes (raffles, pull tabs). But all of us see the current dangers of sports betting, especially online, and urge you not to expand gaming further.

Our opposition is based on both the current research and our pastoral experience. The research on gambling is troubling. Our experience in our congregations and communities is consistent with the findings of a 2020 study by Wilder Research: 22 percent of Minnesotans have been negatively impacted by the problem gambling of a family member, friend, or co-worker. We believe the state has a moral obligation to protect its citizens and call on you to minimize the harm from gambling.

We know that gambling disproportionately harms the poor

Low-income Minnesotans are at highest risk of becoming problem gamblers. The 2020 Wilder study found that half of one percent of Minnesotans with a graduate or professional degree were problem gamblers, compared to three point four percent for those with only a high school diploma, GED, or lesser amount of education. Rates of problem gambling drop significantly for those with a household income of \$70,000 or more. Black Minnesotans were more than twice as likely as White Minnesotans to be problem gamblers.² Numerous studies show that the

¹ Wilder Foundation Research, "Gambling in Minnesota: A Study of Participation, Attitudes, and the Prevalence of Problem Gambling" (February 2020).

² Ibid.

poorer the neighborhood, the higher the risk of problem gambling; this addiction is twice as likely in neighborhoods with concentrated poverty than in those with the lowest concentrations of poverty.³

In a February 2017 report, the Minnesota Department of Human Services captured both the financial and personal impacts of problem gambling:

The financial difficulties created by pathological gambling can be devastating to the individual and their family members. . . It contributes to chaos and dysfunction within the family, can contribute to separation and divorce, and is associated with child and spousal abuse. Family members may have depressive or anxiety disorders and/or abuse substances.⁴

We know that gambling is addictive.

The American Psychiatric Association recognizes gambling addiction as "similar to substance-related disorders in clinical expression, brain origin, comorbidity, physiology and treatment." ⁵

Research shows that gambling is especially addictive for young gamblers who are attracted to the instant gratification and allure of easy money. The New York Times reports that "[t]he risk of addiction is higher for young adults - specifically sports bettors - than for those of any other age," citing studies from the National Council on Problem Gambling.⁶ Recent studies show that that 6% of college students have a serious gambling problem. ⁷

Allowing sports betting or betting on daily fantasy sports—especially when this can be done on any computer or smart phone—will certainly result in increased advertising and risk to this demographic, as well as all other Minnesotans.

We know problem gambling causes serious social harm

³ Grace M. Barnes, et al., "Effects of Neighborhood Disadvantage on Problem Gambling and Alcohol Abuse" (2013). *Journal of Behavioral Addictions* (2013); *see also*, Ethics and Liberty Commission, "How sports betting has increased predatory gambling across the U.S." (February 11, 2022).

⁴ Minnesota Department of Human Services, "Problem Gambling: A Report on the State's Progress in Addressing the Problem of Compulsive Gambling and on the Percentage of Gambling Revenues that Come from Problem Gamblers" (February 2017).

⁵ American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders* (5th ed., 2013).

⁶ Fazio, "It's Easy (and Legal) to Bet on Sports. Do Young Adults Know the Risk?" New York Times (April 1, 2021)

⁷ Fact Sheet: Gambling Disorders, CollegeGambling.org

We see directly, and research shows, the very real social cost of gambling. Those gambling and their families deal with increased depression, anxiety, and family breakdown. Problem gamblers have the highest rate of suicide of any addiction.⁸ Problem gamblers also commit two-to-three times the crime of non-problem gamblers.⁹

Many of these social costs have direct financial implications. These include lost work time and job loss, adding to the need for unemployment compensation, medical assistance, SNAP, and other safety net programs. Baylor Professor Earl Grinols (a former senior economic advisor to President Reagan) determined that each dollar in social benefit from legalized gambling created three dollars in increased social costs. Stolen or embezzled funds impact victims (often other family members or employers) and, in cases where victims chose to prosecute, add to the burdens on our criminal justice system for investigation and prosecution.

The loss of trust and increased anxiety, depression, and domestic violence impact far too many families. A University of Nebraska Medical School study found that gambling addicts are ten-and-a-half times as likely to commit intimate partner violence as non-addicts.¹²

Before our state even considers any changes to our current gaming laws, we must address these key issues:

- Raise the age at which some forms of gambling are legal. Unlike most states (including Iowa, North Dakota and Wisconsin), Minnesota has a single legal age of 18 for gambling, while many young adults are still in high school. Gambling expansion in any of the areas being considered should have an age limit of 21.
- Educate Minnesotans especially younger Minnesotans about the reality of gambling and recognition of problem gambling behaviors. According to the Wilder study, only 25 percent of Minnesotans have seen or heard a media campaign about preventing or increasing awareness of problem gambling.
- Examine our system for addressing problem gambling. We need a comprehensive review of our state's programs and impact. We believe it is irresponsible to consider any expansion of gambling without a full understanding of our current programs and challenges. The Wilder study referenced above is the first study of gambling prevalence in Minnesota completed in 15 years. Further, problem gambling is a public health issue. Responsibility for gambling prevention, education, and treatment should be moved from the Department of Human Services to the Department of Health.
- Significantly expand support for those impacted by problem gambling. Minnesota has a system of support for gambling addicts willing to seek treatment, but those impacted receive little support. Current law provides up to twelve hours of family counseling with an approved provider. For families coping

⁸ Massachusetts Council on Gaming and Health, "Gambling Disorder and Suicide" (June 20, 2014).

⁹ Earl Grinols, et al., "Does Problem Gambling Increase Crime?" *Illinois Law Review* (October 2021).

¹⁰ Earl Grinols, Gambling in America: Costs and Benefits (Cambridge University Press, 2002)

¹¹ Earl Grinols, et al., "Casinos, Crime, and Community Costs," *Review of Economics and Statistics* (February 2006) (noting that counties that allowed casinos had crime rates eight percentage points higher than counties that did not).

¹² R.L. Muelleman, et al., "Problem gambling in the partner of the emergency department patient as a risk factor for intimate partner violence," *Journal of Emergency Medicine* (October 2002).

with the devastating news of lost savings, possible foreclosure, the primary breadwinner losing a job (and insurance benefits) and/or possible criminal action, this is not nearly enough.

 Dedicate one and a half percent of current gambling revenues to fund education, prevention, and treatment.

We strongly oppose any consideration of gambling expansion and call upon you to refrain from any discussion of additional gambling until our state addresses the needs under our current laws. Any discussion of possible expansion should be limited to in person betting – requiring individuals to physically travel to place bets, thus providing time and a change in physical space for the gambler to assess whether a wager is appropriate and how much to put on the line.

Thank you for your consideration.
Respectfully yours,
Milki Ahmed, Chairman of the Board of Directors Bilal Oromo Dawa Center
Bishop David Bard
Minnesota Conference of the United Methodist Church
Most Rev. Andrew H. Cozzens Catholic Bishop, Diocese of Crookston
Rev. Curtiss DeYoung, CEO
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