

# Assessing Empirical Evidence for KT Readiness: *End of Grant Readiness Tool*

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Travis Sztainert, PhD

Knowledge Broker, Content Specialist

September 29, 2016



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DRIVING KNOWLEDGE INTO ACTION

## Assessing Empirical Evidence for KTE Readiness: End of Grant Readiness Tool

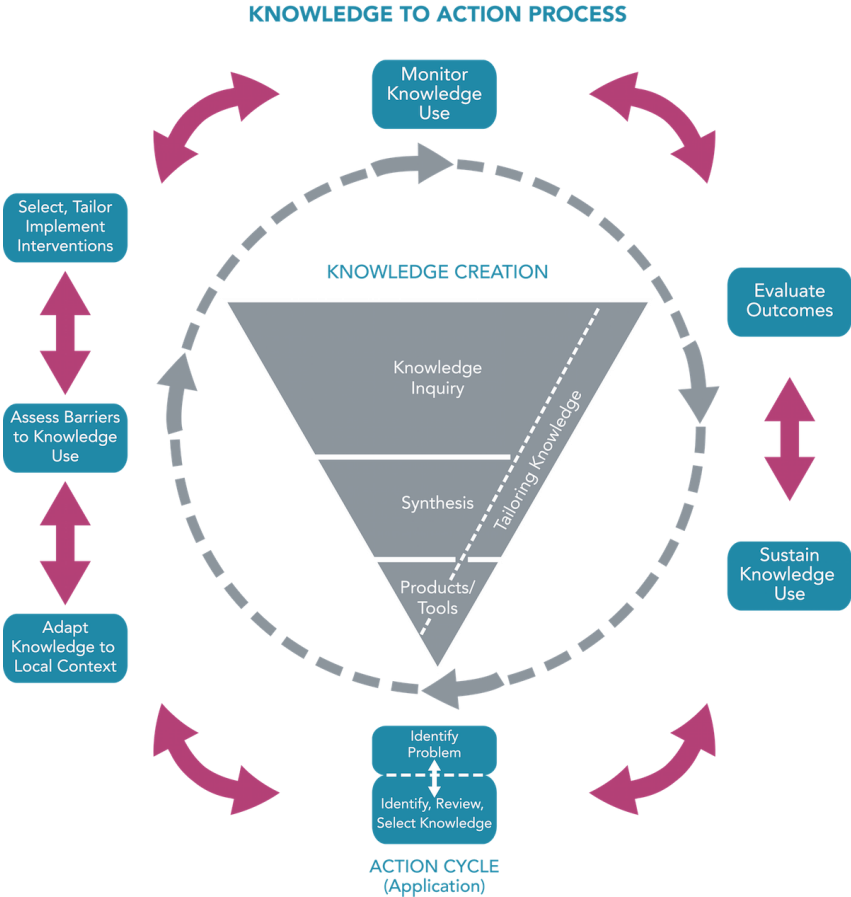
Travis Sztainert, PhD  
Knowledge Broker, Content Specialist  
September 27, 2016

# Background

# My Interest in KTE

- Carleton University
  - Post-doctoral Fellow
  - Gambling Researcher (11+ Years)
- Interested in KTE
  - Break silos, ivory tower, academic womb 0
  - What can/should I do with my research?
- Need for clarity!
  - But KTE is often muddy...
- SO...



# Searching for Clarity – K2A Cycle



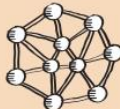




# Searching for Clarity – KT Planning Template

## Knowledge Translation Planning Template©

INSTRUCTIONS: This template was designed to assist with the development of Knowledge Translation (KT) plans for research but can be used to plan for non-research projects. The Knowledge Translation Planning Template is universally applicable to areas beyond health. Begin with box #1 and work through to box #13 to address the essential components of the KT planning process.

(1) Project Partners	(2) Degree of Partner Engagement	(3) Partner(s) Roles	(4) KT Expertise on Team
<div style="text-align: center; margin-bottom: 10px;">  </div> <ul style="list-style-type: none"> <li><input type="checkbox"/> researchers</li> <li><input type="checkbox"/> consumers - patients/families</li> <li><input type="checkbox"/> the public</li> <li><input type="checkbox"/> decision makers</li> <li><input type="checkbox"/> private sector/industry</li> <li><input type="checkbox"/> research funding body</li> <li><input type="checkbox"/> volunteer health sector/NGO</li> <li><input type="checkbox"/> practitioners</li> <li><input type="checkbox"/> other</li> </ul> <div style="margin-top: 10px;">  </div>	<div style="text-align: center; margin-bottom: 10px;">  </div> <ul style="list-style-type: none"> <li><input type="checkbox"/> from idea formulation straight through</li> <li><input type="checkbox"/> after idea formulation &amp; straight through</li> <li><input type="checkbox"/> at point of dissemination &amp; project end</li> <li><input type="checkbox"/> beyond the project</li> </ul> <p style="font-size: small;"><b>Consider:</b> Not all partners will be engaged at the same point in time. Some will be collaborators, end users or audiences, or people hired to do specific activities.</p>	<div style="text-align: center; margin-bottom: 10px;">  </div> <p style="font-size: small;"><i>(1) What do the partner(s) bring to the project?</i></p> <p style="font-size: small;"><i>(2) How will partner(s) assist with developing, implementing or evaluating the KT plan?</i></p> <p style="font-size: small;"><b>Action:</b> Capture their specific roles in letters of support to funders, if requested.</p> <div style="border: 1px solid gray; height: 20px; width: 100%; margin-top: 5px;"></div>	<div style="text-align: center; margin-bottom: 10px;">  </div> <ul style="list-style-type: none"> <li><input type="checkbox"/> scientist(s) with KT expertise</li> <li><input type="checkbox"/> consultant with KT expertise</li> <li><input type="checkbox"/> knowledge broker/specialist</li> <li><input type="checkbox"/> KT supports within the organization(s)</li> <li><input type="checkbox"/> KT supports within partner organization(s)</li> <li><input type="checkbox"/> KT supports hired for specific task(s)</li> </ul>

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# Searching For Clarity

- Plethora of Frameworks and Models
  - Some based on iKTE, some focus on End-of-Grant
- Summarized my findings for my field:
- Need a path through the swamp
- What I needed was a flowchart!
  - Something with a 'start' and 'finish'
  - Carleton University GREaT HUB
  - I did what any researcher would do....

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## **Knowledge translation and exchange in gambling research: A beginners guide**

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### **Abstract**

In recent years, Knowledge Translation (KT) – the process of taking knowledge and turning it into action – has planted itself squarely in the middle of the gambling field. Despite the recent interest, most knowledge creators (e.g., researchers) and end-users (e.g., service providers, government) have only a vague understanding of KT and the role it can play in advancing responsible gambling. The purpose of this paper is to provide readers with an introduction to KT and how to translate gambling knowledge into action (e.g., policy), where significant impact can be made. To this end, the present paper will (a) define KT, (b) examine why KT is important, and (c) provide guidelines and recommendations in implementing KT in the field of gambling studies. The goal in doing so is to facilitate the exchange of knowledge between knowledge creators and end-users to help advance responsible gambling through evidence-based initiatives.

**Keywords** knowledge translation and exchange, dissemination, implementation, stakeholders, responsible gambling

# Knowledge Translation and Exchange in Gambling: A Researchers Guide Conceptual Flowchart

Travis Szteinert  
Carleton University

Hyoun (Andrew) Kim  
University of Calgary

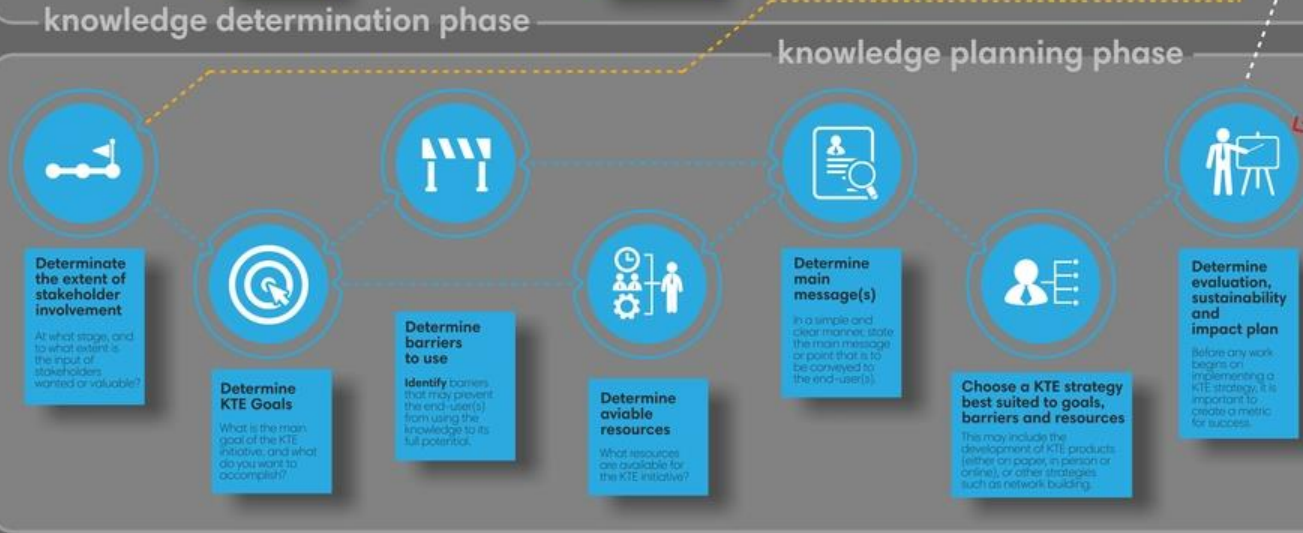
Michael Wohl  
Carleton University

Melissa Salmon  
Carleton University

The primary purpose of KTE is to close the gap between the knowledge creators and end-users such that the knowledge accrued by the creators finds its way into the hands of those who may find the knowledge useful.



**Conduct research**  
More research is needed. KTE process should not begin.



This research is supported by:  
 Gambling Research Exchange and Training Hub (GREt Hub)  
 Carleton University Gambling Laboratory  
 Carleton University

# A Researchers Guide Conceptual Flowchart

- Available at <http://drszt.ca/knowledge-translation.html>
- Additional [companion handout](#)
  - Time to start filling it out!



### Conduct research

More research is needed. KTE process should not begin.

## Knowledge Translation and Exchange in Gambling: A Researchers

Travis Sztainert  
Carleton University

Hyoun (Andrew) Kim  
University of Calgary

Michael Wohl  
Carleton University



### Have you identified a potential problem or issue?

Identify a potential problem or issue that needs addressing and KTE can help to answer.



### Do you possess knowledge you want translated?

Determine what knowledge currently exists to address the issue.



### Is the knowledge ready to be used?

Knowledge should be couched within existing literature, be locally relevant, and have a potentially large effect.



### Identify potential stakeholders

Determine who may be interested in either (a) the issue, and/or (b) the knowledge you identified.



### Identify your audience/end-user(s)

Determine who will actually use the knowledge that is being translated.



### Assess needs of end-user(s)

KTE is focused on addressing needs of end-user(s).

knowledge determination phase

knowledge planning phase

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A green circular icon containing three white gears, representing a problem or issue.

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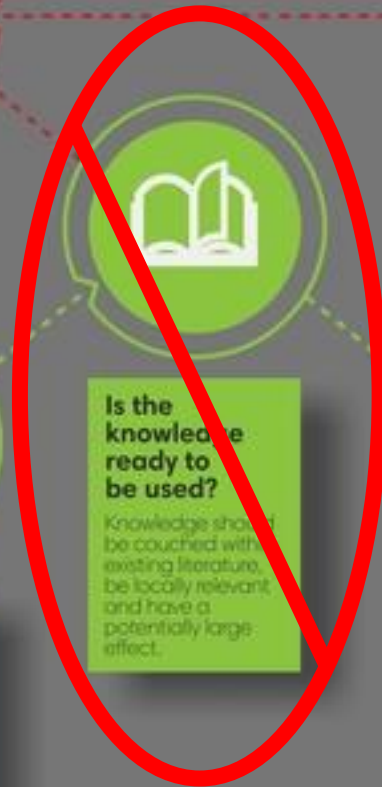
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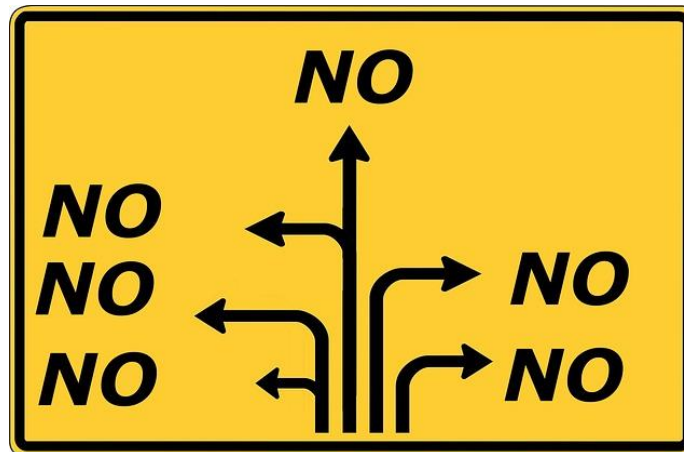
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# Searching for Clarity (part 2)

- Not all knowledge is born equal - it exists on a continuum of readiness for use.
  - Thus, even though knowledge may exist to address an identified problem, it may not be ready for use.
- Contact different KTE organizations, see if they have any systematic way of determining if research is ready to use....

## Searching for Clarity (part 2)

- Not all knowledge is born equal - it exists on a continuum of readiness for use.
  - Thus, even though knowledge may exist to address an identified problem, it may not be ready for use.
- Contact different KTE organizations, see if they have any systematic way of determining if research is ready to use....



# Identified Need

- There is (as far as I'm aware), no systematic way for individuals or organizations to assess "KTE Readiness"
- Some sort of checklist or tool is needed



# KTE Readiness Tool – Initial Draft

# Literature?

- *Knowledge translation in health care: Moving from evidence to practice* (Straus, Tetroe & Graham, 2013)
  - “When considering end of grant KT activities, it is critical to consider the strength of the evidence and its significance and tailor our strategies as appropriate.”
  - “The strength and significance of the research findings should determine the magnitude and extent of the knowledge translation (KT)”
  - “Decisions about the extent and ambitiousness of KT plans should be guided by the reliability, validity, strength, and significance of research findings.”

# Overarching Criteria

- 1. The evidence in-hand is couched within a larger body of work, and exists within a solid foundation of valid, high-quality theory and research.**
  - Do not place excessive emphasis on the results of single small studies, studies of poor methodological quality, or ones where the strength of the evidence is low
    - Helps to address cherry-picking and media-bias
  - Important that the knowledge (be it from a primary study or systematic review) be of high quality
    - What is knowledge?
      - Rigor vs. Relevance
      - Research vs. Practice Based Evidence → What happens if the disagree
  - Some authors argue that knowledge synthesis (systematic reviews) should be considered the base unit of knowledge translation

# Overarching Criteria

## **2. The evidence is relevant/appropriate for the targeted domain of use.**

- Evidence should be considered of major significance to knowledge users
- Evidence should be locally relevant and adaptable to its targeted domain of use

## **3. The evidence will have a significant impact on the knowledge-users or system.**

- If evidence has the opportunity to greatly impact the health or well-being of the knowledge users, it is worth furthering KT efforts
  - Especially true if the knowledge has potential impact to save lives or reduce mortality rates (either directly, or via changes to systems)

# Tool Layout

- Two distinct factors
  - (1) the strength/quality of the evidence
  - (2) the significance of the evidence
- Therefore, tool is divided into two sections:
  - QUALITY AND STRENGTH OF EVIDENCE
  - SIGNIFICANCE OF EVIDENCE
- Each section contains scoring criteria, which is then summed and results in one of three readiness outcomes

# Caveats

- Tool is designed to be used by:
  - Researchers who want to assess the KT readiness of their own research, or others research
  - Research funders who want to assess in what capacity KT can be applied to completed research
  - KT organizations who wish to assess completed research to determine in what capacity they can move forward with it
- Current checklist deals with “empirical evidence” (health and social science perspective).
  - Initial considerations of the basis of empirical evidence are based of the evidence-pyramid.
  - This section can/should be adapted to meet the needs of your organization
- It is ugly! This is just a ‘blueprint’

**END-OF-GRANT READINESS TOOL**

INITIAL CONSIDERATION		POINTS
What is the empirical basis of (i.e. evidence for) the knowledge?	<b>Knowledge Synthesis</b>	
	Meta-analysis	10
	Systematic Review	8
	Critically Appraised Synthesis	6
	<b>Primary Research</b>	
	Randomized Controlled Trial	4
	Cohort, case-controlled or epidemiological	2
Observational	1	
<b>QUALITY AND STRENGTH OF EVIDENCE</b>		
Is the empirical evidence high quality (methodologically or otherwise)?	YES	Up to +10
	NO	Up to -10
Is the evidence in line with an existing body of knowledge, or couched within an existing literature?	YES	+5
	LIMITED	0
	NO	-5
What is the estimated effect size of the outcome? <a href="#">Thresholds</a> <a href="#">Compute</a>	LARGE	+7
	MEDIUM	+4
	SMALL	0
	UNKNOWN	-2
Was the sample size adequate to detect the discovered effect size? <a href="#">Power analysis</a>	MORE	+5
	ADAQUATE	+1
	UNKNOWN/LESS	-5
Is the evidence ecologically valid?	YES	+3
	NO	0
	UNKNOWN	-1
<b>SIGNIFICANCE OF EVIDENCE</b>		
<b>Note: You may need to consult stakeholders or knowledge-users to help you answer some of these questions.</b>		
Does the evidence fill a KU knowledge 'gap' or 'need'?	YES, determined via a specific request	+15
	YES, determined via needs assessment or formal consultation	+8
	YES, determined via local opinion	+6
	NO	-15
Can the evidence be applied to the target population?	YES	+5
	MAYBE - Can be adapted	+4
	NO	-2
Does the evidence directly address the desired change (in beliefs, attitudes, behaviour etc.)?	YES	+5
	TANGENTALLY	0
	NO	-5
Does the evidence provide a new, novel or innovative way to address a desired change?	YES	+5
	NO	0

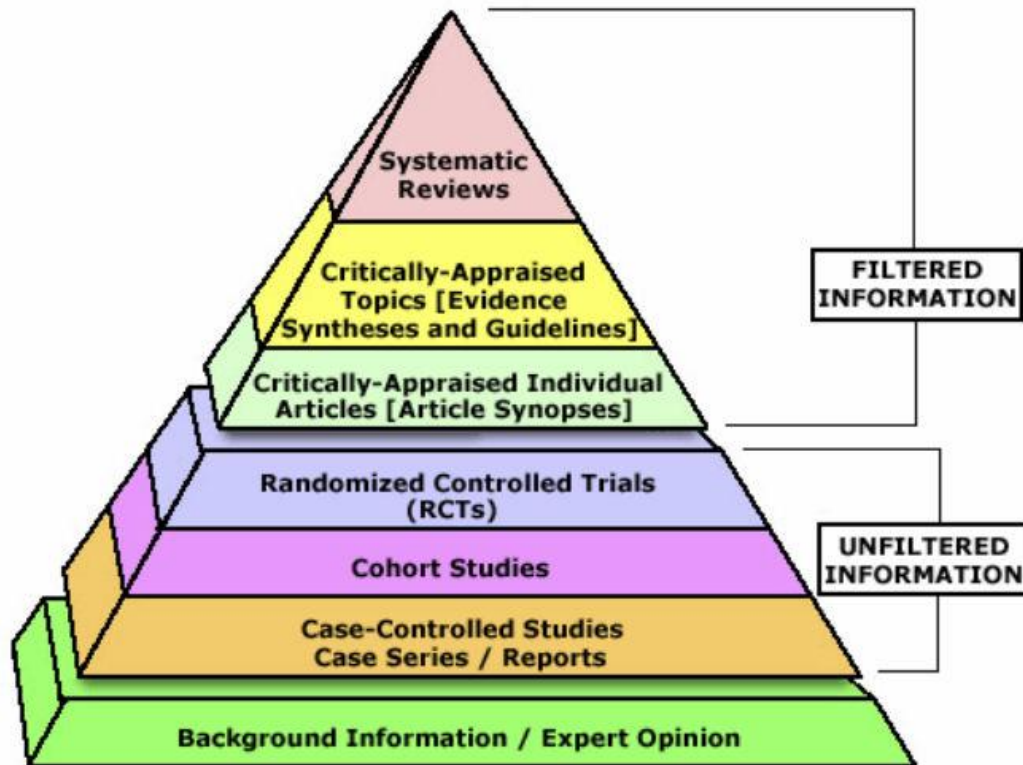
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# Empirical Basis of Knowledge

	POINTS
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# Evidence Pyramid



END-OF-GRANT READINESS TOOL

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	NO	0

# GREO Quantitative Evidence Evaluation Tool (QuanEET)

## A. Study Design (Q1)

- Q2. Were selected participants likely to be representative?
- Q3. What % of selected individuals agreed to participate?

## B. Selection Bias (Q2-Q3)

- Q4. Were groups similar at baseline?
- Q5. What % of relevant confounders were controlled?

## C. Confounders (Q4-Q5)

- Q6. Were participants blinded to question or assignments?
- Q7. Were data collectors blinded to assignments?
- Q8. Were providers/personnel blinded to assignments?

## D. Blinding (Q6-Q8)

- Q9. Were data collection instruments and sources valid?
- Q10. Were data collection instruments and sources reliable?

## E. Data Collection (Q9-Q10)

- Q11. What % of participants completed the study?
- Q12. Were withdrawals/drop-outs reported and explained?

## F. Attrition (Q11-Q12)

- Q13. What % of participants had complete intervention/exposure?
- Q14. Was the intervention delivered as intended and consistently?
- Q15. Was the study free of contamination and co-interventions?

## G. Intervention Integrity (Q13-Q15)

- Q16. Were the statistical tests appropriate?
- Q17. Were analyses performed by allocation status?

## H. Analyses (Q16-Q17)

- Q18. Any other important biases or problems?

## I. Other Biases/Problems (Q18)

## GLOBAL RATING

END-OF-GRANT READINESS TOOL

INITIAL CONSIDERATION	POINTS	
What is the empirical basis of (i.e. evidence for) the knowledge?	<b>Knowledge Synthesis</b>	
	Meta-analysis	10
	Systematic Review	8
	Critically Appraised Synthesis	6
	<b>Primary Research</b>	
	Randomized Controlled Trial	4
	Cohort, case-controlled or epidemiological	2
Observational	1	

QUALITY AND STRENGTH OF EVIDENCE		
Is the empirical evidence high quality (methodologically or otherwise)?	<b>YES</b>	<b>Up to +10</b>
	<b>NO</b>	<b>Up to -10</b>
Is the evidence in line with an existing body of knowledge, or couched within an existing literature?	<b>YES</b>	<b>+5</b>
	<b>LIMITED</b>	<b>0</b>
	<b>NO</b>	<b>-5</b>
What is the estimated effect size of the outcome? <a href="#">Thresholds</a> <a href="#">Compute</a>	<b>LARGE</b>	<b>+7</b>
	<b>MEDIUM</b>	<b>+4</b>
	<b>SMALL</b>	<b>0</b>
	<b>UNKNOWN</b>	<b>-2</b>
Was the sample size adequate to detect the discovered effect size? <a href="#">Power analysis</a>	<b>MORE</b>	<b>+5</b>
	<b>ADAQUATE</b>	<b>+1</b>
	<b>UNKNOWN/LESS</b>	<b>-5</b>
Is the evidence ecologically valid?	<b>YES</b>	<b>+3</b>
	<b>NO</b>	<b>0</b>
	<b>UNKNOWN</b>	<b>-1</b>

SIGNIFICANCE OF EVIDENCE		
<b>Note: You may need to consult stakeholders or knowledge-users to help you answer some of these questions.</b>		
Does the evidence fill a KU knowledge 'gap' or 'need'?	YES, determined via a specific request	+15
	YES, determined via needs assessment or formal consultation	+8
	YES, determined via local opinion	+6
	NO	-15
Can the evidence be applied to the target population?	YES	+5
	MAYBE - Can be adapted	+4
	NO	-2
Does the evidence directly address the desired change (in beliefs, attitudes, behaviour etc.)?	YES	+5
	TANGENTALLY	0
	NO	-5
Does the evidence provide a new, novel or innovative way to address a desired change?	YES	+5
	NO	0

END-OF-GRANT READINESS TOOL		
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	LIMITED	0
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What is the estimated effect size of the outcome? <a href="#">Thresholds</a> <a href="#">Compute</a>	LARGE	+7
	MEDIUM	+4
	SMALL	0
	UNKNOWN	-2
Was the sample size adequate to detect the discovered effect size? <a href="#">Power analysis</a>	MORE	+5
	ADAQUATE	+1
	UNKNOWN/LESS	-5
Is the evidence ecologically valid?	YES	+3
	NO	0
	UNKNOWN	-1

#### SIGNIFICANCE OF EVIDENCE

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Does the evidence fill a KU knowledge 'gap' or 'need'?	YES, determined via a specific request	+15
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	NO	0

# Readiness Outcomes

- Sum the score, and compare to the outcomes table:
- Low readiness = More research + Passive dissemination
- Moderate readiness = Active dissemination
- Higher readiness = Implementation

# Readiness Outcomes

- Low readiness to translate
  - The evidence is not yet ready to be translated.
  - More, high quality, highly significant research needs to be conducted.
  - Passive dissemination (also called diffusion) strategies are appropriate.
  - In addition, stakeholders should be consulted to make sure results of future research will be of value.
- Examples:
  - Presentations at academic conferences, or sharing the knowledge on research-centered media
  - Hold a focus group to with knowledge-users and stakeholders to try and determine what their most pressing, upcoming issues are

# Readiness Outcomes

- Moderate readiness to translate
  - Ready for more active approaches to dissemination.
  - Targeting audiences other than researcher may be useful. Examples include clinicians, funders, members of the public or policy makers.
- Active dissemination approaches may include:
  - “tailoring the message and medium to the specific audience; linking researchers and knowledge users through linkage and exchange mechanisms, such as small workshops focused on the dissemination of a synthesized body of knowledge or those focused on developing a user-driven dissemination strategy; engaging media; using knowledge brokers; or creating networks or communities of practice involving both researchers and knowledge users.”

# Readiness Outcomes

- High readiness to translate
  - The evidence may be highly useful, and therefore should go beyond the regular means of dissemination.
    - Consider implementation of evidence into practice.
  - For implementation, you need to decide if you want to use the knowledge to promote change in attitudes, behavior or influence decision making.
- Examples:
  - You may want to start with a small scale pilot project, targeting a population in a local setting. Make sure to get early involvement of knowledge-users and stakeholders.

# Future Directions

- Still need to:
  - Pilot-test, and peer-review scoring and criteria
  - Complete glossary/user guide
  - Beautify and UX
- Feedback wanted/needed
  - What am I missing?
  - Collaboration?
- A 'not ready to translate' category?

# Thank you!

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# Wrapping Up

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We invite you to:

- Provide your input on today's webcast
- Share your thoughts on future webcasts topics
- Contact Us at [kter@air.org](mailto:kter@air.org)

*Please fill out the brief evaluation form:*

<http://www.surveygizmo.com/s3/3066295/Evaluation-KTE>

# Disclaimer

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The contents of this presentation were developed under grant number 90DP0077 from the National Institute on Disability, Independent Living, and Rehabilitation Research ([NIDILRR](#)). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this website do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.

# KTE Readiness Tool – Example

# PhD & Post-doctoral Research

- Series of 3 studies examining the role of craving & hunger on gambling behaviour

## Study 1

1. Hungry gamblers played longer in the face of loss
2. Gamblers who craved played longer in the face of loss
3. Craving did not exacerbate the effect of hunger

## Study 2

1. Hungry gamblers played longer in the face of loss
2. Gamblers who craved played longer in the face of loss
3. If hungry AND craving, they played especially long in the face of loss

## Study 3

1. Among participants exposed to gambling cues, those in the hunger condition had significantly higher Ghrelin levels compared to those in the not-hungry condition
2. Ghrelin levels prior to engaging in play predict persistence in the face of continued loss

# So...what can/should I do?

- There's some evidence that hunger may cause problem gambling behaviour
  - Results are relatively preliminary...
  - But the research has easy to implement, low-cost implications that could help improve the welling being of gamblers
    - 'Feed yourself before the machine'
    - Eating breaks
    - Cheap/free healthy foods at casinos?
- Let's go through the checklist, and see what my research would score.

**END-OF-GRANT READINESS TOOL**

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	<b>Primary Research</b>	
	Randomized Controlled Trial	4
	Cohort, case-controlled or epidemiological	2
Observational	1	
<b>QUALITY AND STRENGTH OF EVIDENCE</b>		
Is the empirical evidence high quality (methodologically or otherwise)?	YES	Up to +10
	NO	Up to -10
Is the evidence in line with an existing body of knowledge, or couched within an existing literature?	YES	+5
	LIMITED	0
	NO	-5
What is the estimated effect size of the outcome? <a href="#">Thresholds</a> <a href="#">Compute</a>	LARGE	+7
	MEDIUM	+4
	SMALL	0
	UNKNOWN	-2
Was the sample size adequate to detect the discovered effect size? <a href="#">Power analysis</a>	MORE	+5
	ADAQUATE	+1
	UNKNOWN/LESS	-5
Is the evidence ecologically valid?	YES	+3
	NO	0
	UNKNOWN	-1
<b>SIGNIFICANE OF EVIDENCE</b>		
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	NO	-15
Can the evidence be applied to the target population?	YES	+5
	MAYBE - Can be adapted	+4
	NO	-2
Does the evidence directly address the desired change (in beliefs, attitudes, behaviour etc.)?	YES	+5
	TANGENTALLY	0
	NO	-5
Does the evidence provide a new, novel or innovative way to address a desired change?	YES	+5
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**END-OF-GRANT READINESS TOOL**

INITIAL CONSIDERATION		POINTS
What is the empirical basis of (i.e. evidence for) the knowledge?	<b>Knowledge Synthesis</b>	
	Meta-analysis	10
	Systematic Review	8
	Critically Appraised Synthesis	6
	<b>Primary Research</b>	
	Randomized Controlled Trial	4
	Cohort, case-controlled or epidemiological	2
Observational	1	
<b>QUALITY AND STRENGTH OF EVIDENCE</b>		
Is the empirical evidence high quality (methodologically or otherwise)?	YES	Up to +10
	NO	Up to 10
Is the evidence in line with an existing body of knowledge, or couched within an existing literature?	YES	+5
	LIMITED	0
	NO	-5
What is the estimated effect size of the outcome? <a href="#">Thresholds</a> <a href="#">Compute</a>	LARGE	+7
	MEDIUM	+4
	SMALL	0
	UNKNOWN	-2
Was the sample size adequate to detect the discovered effect size? <a href="#">Power analysis</a>	MORE	+5
	ADAQUATE	+1
	UNKNOWN/LESS	-5
Is the evidence ecologically valid?	YES	+3
	NO	0
	UNKNOWN	-1
<b>SIGNIFICANCE OF EVIDENCE</b>		
<b>Note: You may need to consult stakeholders or knowledge-users to help you answer some of these questions.</b>		
Does the evidence fill a KU knowledge 'gap' or 'need'?	YES, determined via a specific request	+15
	YES, determined via needs assessment or formal consultation	+8
	YES, determined via local opinion	+6
	NO	-15
Can the evidence be applied to the target population?	YES	+5
	MAYBE - Can be adapted	+4
	NO	-2
Does the evidence directly address the desired change (in beliefs, attitudes, behaviour etc.)?	YES	+5
	TANGENTALLY	0
	NO	-5
Does the evidence provide a new, novel or innovative way to address a desired change?	YES	+5
	NO	0

# Results

- $4+5+0+0+1+3+6+5+5+5 = 34!$
- Moderate readiness to translate
- With this in mind...
  - Have presented at academic conferences
  - Will be publishing a journal article
  - Produced a plain language pamphlet

# Pamphlet

Although a harmless form of entertainment for most, gambling can become a serious problem for a small but significant minority.

Research suggest there are a number of things you can do to help you gamble responsibly:

1. Set a limit & play within it.
2. Take frequent breaks.
3. Only take the cash you're willing to lose.
4. Don't chase losses.

Recently, another easy responsible gambling strategy has been suggested:

5. **Eat before play.**

## Carleton University Gambling Lab (CUGL)

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## Hungry to Gamble?

How filling your stomach before gambling can help you fill your pockets.



# Pamphlet



"Feed your stomach,  
before you feed the  
game."

## What Hunger Does

When hungry, high levels of a hormone called ghrelin enhance feelings of reward, which may lead to poor impulse control.

In relation to gambling, this means that hunger may increase impulsive spending. In other words, if you are craving to gamble, it's best if you're not hungry.

### Research on Hunger and Gambling

Research suggests that hungry gamblers believe they can control the outcomes of the gambling games, and also expect to win more money through gambling. These beliefs may cause the gambler to spend more money than they can afford to lose.

Indeed, in a recent study, gamblers who were both craving to gamble and hungry demonstrated poor self-control by playing for longer even in the face of loss on a slot machine.

## What you can do

- In light of this research, it is recommended that you eat before entering a casino. The less hungry you are, the better.
- If you get hungry while gambling, stop to take a food break. This will allow you to 'cool down' from the gambling experience, as well as allowed you to satisfy your hunger.
- If you head to the casino for the buffet, make sure to eat before gambling.

### High Caloric Healthy Foods

Not all food is created equal. Below are some foods we suggest to keep you full:

- Nuts
- Eggs
- Cheese and crackers
- Full-fat yogurt

The best snack foods are high in fat and protein, curbing hunger for longer and providing excellent nutrition.

### Gambling Problems

Lastly, gambling may become harmful to ones relationships and well being, both emotionally and financially. If you think you may have gambling problems, it is suggested that you contact one of the organizations listed below. It is not a good idea to allow problems to fester, as ruminating over these problems will typically not make them go away. In addition, your family physician or counselor will may also be able to help you or to refer you to someone who can help.

- Ontario Problem Gambling helpline 1-888-230-3505 <http://www.opgh.on.ca/>
- Addictions and Problem Gambling Services of Ottawa (613) 789-8941 [http://www.apgso-stjpo.ca/find\\_eng.html](http://www.apgso-stjpo.ca/find_eng.html)
- Distress Centre: Ottawa And Region (613) 238-1089 <http://www.dcottawa.on.ca>

## Contact Us

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