

AN INITIAL
UNDERSTANDING OF
THE USE OF THE EVIVE
DIGITAL THERAPEUTIC
TOOL WITHIN GAMBLING
TREATMENT PROGRAMS

SUMMARY OF USER DATA AND PROVIDER FEEDBACK

Produced for the
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EVIVE AS A SUPPLEMENT TO GAMBLING TREATMENT

ABSTRACT

The application of digital technologies to reduce gambling-related harm is a promising and vibrant new area of exploration. A newcomer to the field of science-based therapeutic tools is the Evive app, designed to assist individuals form healthier relationships with gambling by matching individual goals with digital therapeutic interventions. An early adopter of the Evive app was the Oregon Health Authorities' Problem Gambling Services (PGS). PGS piloted the use of the app as a tool for use within their network of gambling treatment programs to modernize services and improve client outcomes.

This manuscript provides an early evaluation of the Evive app as a gambling treatment supplement. The evaluation was conducted within the first six months of implementation with the PGS gambling treatment system as a learning and process improvement exercise to gain an initial understanding of Evive's utility and inform further development with the PGS treatment system. Specific evaluation questions addressed app engagement and usage, user experience, gambling treatment provider experience, and insights into introducing a new digital health technology into standard clinical practice. This exploratory research suggests that the Evive app is a promising digital intervention to help support a range of goals related to problem gambling such as assisting individuals to moderate, quit, or maintain abstinence from gambling. Adoption of utilizing the app among both gambling treatment providers and their clients was challenged by clinician lack of app feature

This manuscript concludes by outlining future opportunities to leverage the potential of the app through several recommendations to enhance the app user experience and the adoption of the app into clinical practice. With further gambling treatment system integration of the Evive app accompanied by a maturation of app features, such as growing the Evive user support community, utilization of this new digital health technology has the potential to modernize treatment as usual and improve client outcomes. Future research is needed to evaluate the long term impact of digital health therapeutics within professional gambling treatment services.

knowledge and how to best incorporate the app into their treatment practices.



BACKGROUND

Research has consistently shown that only a small percentage of individuals struggling with gambling problems seek treatment, with estimates ranging from 7% to 16% (Ledgerwood & Eamp; Milosevic, 2015; Slutske, 2006). This results in a significant number of people failing to receive necessary support, leading to severe psychological, financial, social, mental health, vocational, and legal repercussions associated with gambling disorders. Given the increasing accessibility of gambling, particularly through online and sports betting (Mestre-Bach et al., 2022; Valenciano-Mendoza et al., 2023), there is a pressing need for interventions that can effectively reach and assist a broader audience.



Digital health interventions offer a promising avenue for enhancing treatment accessibility for those affected by gambling disorders. A recent review identified 14 apps specifically targeting problem gambling available on major platforms such as Google and Apple (McCurdy et al., 2023). This review highlighted that apps incorporating cognitive behavioral therapy (CBT) content and featuring in-app community support received higher ratings for both aesthetic and informational quality, with the latter also deemed more engaging by users. Unfortunately, rigorous controlled trials assessing the efficacy of digital health apps for gambling remain scarce.

The Evive app is a digital intervention that was specifically developed to address recommended attributes and shortcomings identified in the reviews of apps targeting gambling behaviors identified by McCurdy (2023) and Brownlow (2021). Evive aims to provide support to individuals looking for a healthier relationship with gambling, whether that be stopping gambling altogether, reducing gambling, or feeling more in control of gambling behaviors. The app connects users with a supportive community of others looking to reduce the negative effects of gambling, provides resources based on behavioral and addiction sciences, and allows use of tracking features to support behavior change.

Oregon Health Authority (OHA) and the Oregon Lottery have both embraced Evive, recognizing its potential to serve diverse populations. OHA piloted the app in selected problem gambling treatment agencies as a gambling treatment adjunct, as they recognize the need for data on the acceptance and effectiveness of the tool among persons enrolled in state sponsored gambling treatment. These agencies were granted a unique code to use the app for free in conjunction with treatment services. To gain an initial understanding of Evive's utility in Oregon, this report aims to answer the following research questions: 1) Who is using Evive and how are they engaging with the app? 2) How are users rating their experience with the app so far? Are they experiencing positive outcomes? 3) How do providers perceive the utility of Evive so far? 4) What are the barriers of using Evive from both client and provider perspectives?

METHODOLOGY

Researchers from Problem Gambling Solutions, Inc. (PGS) utilized several methods to collect quantitative and qualitative data and provide insight into the aforementioned research questions. To address research questions I and 2, a team from Evive conducted a national data pull on users between April and October of 2024 and provided the researchers with relevant variables. These variables included demographics, reported goals of users (i.e., stop, reduce, or control gambling behaviors), onboarding completion rates, rates of engagement (i.e., number of lessons completed, rates of daily check-in, number using the community support function), and responses to an in-app survey that addresses outcomes and satisfaction. A researcher from PGS reviewed and analyzed the data to be included in this report.

To address research questions 3 & 4, two researchers from PGS recruited providers from OHA-affiliated treatment agencies to complete interviews. N = 7 total providers from 6 different agencies agreed to participate. The researchers followed a semi-structured interview format that included both quantitative and qualitative responses. Interviews were conducted via telephone or online video platforms and typically lasted between 10 and 20 minutes. Questions asked during the interview can be found in the appendix.

RESULTS

Who is using Evive and how are they engaging with the app?

Between April and October 2024, 675 users have joined the Evive app. The state comprising the most users was Oregon (N = 66, ~10% of users). The majority of users identified as male (60.3%) and the average age was 41 years old (range = 19-95). About 74% of users reported full-time employment, with much smaller percentages for part-time employment, unemployed, retired, student, and disability. Demographics followed similar patterns in Oregon, though fewer users reported a full-time employment status (61%).

Evive allows users to select different goals related to gambling behaviors. Most participants had the goal of quitting gambling altogether (69.8%), whereas 16.6% wanted to reduce gambling behaviors and 13.7% wanted to learn safer gambling practices. Oregon had slightly more variability, with larger proportions of users who wanted to reduce (23.3%) and learn safer (15%) gambling behaviors. Furthermore, nearly all users in Oregon completed onboarding (90.1%), whereas only 67.1% finished onboarding nationally. For those that did complete onboarding, about half (50.6%) stopped using the app in 8 days or less, and about 35% remained using the app after a month and beyond.

Evive offers a variety of features, including psychoeducational lessons, daily check-ins, and community support forums. For a better understanding of app engagement, the researchers examined the number of lessons completed, rates of daily check-ins, and utilization of the community support feature. N = 1,187 total lessons were completed, the most common two being "You're Not Alone" (N = 240) and "Motivation and Willpower" (N= 95). Among the top 15 most active users, a range of 13-56 lessons were completed. Use of the daily check-in feature is defined as "3+ daily check-ins for two weeks or longer." 43.8% of users met this criteria. Only 2 individuals used the community support feature.

How are users rating their experience with the app and how has it impacted outcomes?

N = 28 users completed an optional survey about their experience with the app. To examine perceived outcomes, respondents are asked to rate level of agreement from 0 (strongly disagree) to 4 (strongly agree) based on the following statements "I have reduced my problems related to gambling," "I have an improved outlook on my future," and "I am meeting my goal to stop or control my gambling." Average responses leaned toward agreement on all three statements (M = 2.71, M = 2.89, and M = 2.89, respectively). Respondents also rated a high level of likeliness to recommend the app to friends and relatives who may use it, with an average rating of 8.05 on a scale of 0 (not likely at all) to 10 (very likely). N = 10 users provided rationale for their likeliness ratings. Positive reasons included that it helped to learn relevant material, increase commitment, and stop gambling behaviors. Negative reasons referenced the repetitive nature of the app, a bland interface, and a low community census.



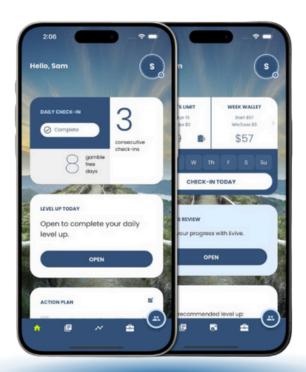
How do providers perceive the utility of Evive?

Summary of open-ended responses

Providers interviewed represented 6 different agencies in Oregon: Emergence, Lewis and Clark, Linn-Benton Gambling Treatment, Lifeworks NW, Solutions Group NW, Volunteers of America, and Voices of Problem Gambling Recovery. N = 7 providers were interviewed, so limited conclusions can be drawn. All providers were familiar with Evive and heard of it through Sam DeMello (founder of Evive) and/or correspondence from Greta Coe and OHA. Many had seen Evive presentations or tables at conferences over the last year or read about free access in the OHA newsletter.

The general understanding was that Evive was an app that clients could use alone or in conjunction with other services they receive, such as counseling or peer support, to receive additional support in their recovery from a gambling disorder. It was noted to have tracking tools, community support, and resources for managing urges and keeping motivation strong. There did not seem to be a strong awareness of client use of Evive or not- if it was discussed with them as an option, there wasn't follow up. In part, clinicians and peers did not want to "push it," but rather offer it as a resource. Limited contact with clients about Evive use produced small sample sizes for questions about clinical utility and ease of use.

The providers generally believed they received clear communication about using Evive and how it could be helpful. Providers often noted that Evive may be particularly helpful for individuals new in recovery because it provides helpful information and resources, can increase motivation, and allow for behavioral tracking. However, a better understanding of how app functions could complement current clinical work could be improved.



"My clients love Evive. Evive has been a huge adjunct to the counseling that we've done... this is the game changer."

-Chris Olwine, LCSW Gambling Treatment Specialist

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For those who were less familiar with Evive, they found it helpful when the interviewer visually showed some of the app features and functionality through the Evive website;. This also generated interest in potential trainings and/or information sessions at clinics to increase familiarity and promote comfort in use. Few clinicians had explored the app themselves or seen how it works. It may be helpful to have an app version that allows clinicians to explore app functions without having to "subscribe" as a user. This would assist in generating more specific questions or concerns from clinicians that could be addressed as needed.

Overall, providers expressed openness and interest in how Evive could be an additional source of support for their clients and enhance their clinical experiences. The logistical implementation of Evive into clinical processes has been slow, and clinicians had limited insight into how clients were using the app.

Summary of Quantitative Findings

Providers were asked questions with a Likert-type scale based on whether or not they had used Evive with their clients. Providers who had were first asked how their experience with Evive has been on a scale of 0 (very negative) to 5 (very positive). All of these providers responded with a 4/5. When asked how clinically helpful Evive is on a scale of 0 (not helpful at all) to 5 (very helpful), the average response was again a 4. Finally, when asked how easy Evive is to use, the average response was a 4. Though only a few providers have been using Evive with their clients, the overall experience so far seems to be positive. Providers who had not used Evive with their clients were asked how likely they were to use it with their clients on a scale of 0 (not likely at all) to 5 (very likely). The average response was 4.5, suggesting that providers are interested and willing to use the app if clients are as well. All providers were asked about their interest in an app function that would allow their clients' data to be shared with them weekly. The average response was a 4.6, suggesting that this is a feature of interest for clinicians that may be utilized.

What factors cause hesitation among providers and clients for use of Evive?

Feedback regarding hesitation to use Evive mentioned concerns for less technologically-inclined individuals such as older adults. Such individuals may have trouble navigating the different features of the app. Additionally, concerns about privacy were mentioned, specifically regarding the community forum. With a small user pool, it may be easy to trace comments back to a specific person. Financial concerns about the end of the free promotion and what costs would look like for clients were also mentioned. Subscription fatigue may be of influence, and users may be much more inclined to use the app if it comes at little to no cost to them. Finally, there were questions of Evive's utility among those who are much further along in their recovery process. This may tie back to comments about the repetitiveness of some of the introductory content.

SUMMARY

Evive is a promising digital intervention with a multitude of features to help support a range of goals related to problem gambling. Without any paid media or advertising, it has attracted 675 users nationally between April and October 2024, with the largest proportion from Oregon. There appears to be an array of users, but the majority are male, middle-aged, employed full-time, and seeking to quit gambling altogether. An examination of engagement metrics showed over 1,000 psychoeducational lessons completed, with popular ones being "You're Not Alone" and "Motivation and Willpower." Almost half of users completed consistent daily check-ins, though only two individuals used the community support feature which may be attributed to the early evolution of the Evive community as reflected in user comments regarding few active members and posts. Despite high onboarding rates in Oregon, engagement declines rapidly after onboarding, with half of users stopping within eight days, though one-third continued beyond a month.

Though only a small number of people completed the experience survey, user feedback on their experience with Evive and outcomes indicated agreement that the app helped reduce gambling problems and improve outlooks, with a high average rating on likeliness to recommend. Positive feedback emphasized the helpfulness of the app's educational materials and daily check ins, leading to increased commitment and reduced gambling behaviors, while negative feedback focused on repetitive content, a bland interface, and low community activity. More longitudinal data is needed to determine long-term outcomes.

Provider feedback highlights a general openness to Evive's potential, especially for those new in recovery, though current integration with clinical work remains minimal. Providers rated their experience with Evive positively but expressed a need for better understanding of the app's clinical utility, suggesting that features like data-sharing or app demos could enhance clinician engagement. Concerns were also raised about privacy, technological accessibility, and potential subscription costs once the free promotion ends. In summary, though Evive shows potential as a supplementary recovery tool, improvements in engagement and retainment strategies, app content, and clinician integration may enhance its overall utility and effectiveness in supporting individuals recovering from problem gambling.

RECOMMENDATIONS

Based on feedback collected from Evive users and providers of clinical services, we recommend the following:

- 1. Improve user interface and address repetitiveness to create a more customizable and enjoyable experience.
- 2. Identify potential retainment strategies to encourage consistent use of Evive and alleviate stress associated with subscriptions.
- 3. Elaborate more on features and functions of the app. Having a version that clinicians can explore on their own may increase comfortability in using app with clients.
- 4. Continue to emphasize that Evive can be helpful for anyone looking to make a change, not just those in active recovery or meeting criteria for gambling disorder.
- 5. Highlight the dynamic nature of the app and ways Evive can be helpful for individuals who are further into their recovery and have evolving supportive needs.
- 6. Consider clinician context when introducing a new process. Other new tools are also being offered to agencies, which may be overwhelming.

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APPENDIX

Provider Interview Template

Question / Follow-up	Response Options
Have you heard of Evive, an app that supports reducing gambling harms? IF YES:	Yes / No
Where have you heard of it? What do you know about it? IF NO: Provide a brief overview and inform the provider of OHA's access to the app	Open-ended Open-ended
All gambling providers from state-funded treatment agencies in Oregon have access to Evive to use with their clients in conjunction with their regular treatment. Are you currently using Evive with any of your clients? IF YES: I would like to learn more about how that initial process went for you. Of the following, please let me know which apply to your experience by responding with "true" or "false". a. There was clear communication from OHA PGS or my agency leaders about implementing Evive. b. I received enough information about how Evive could be a helpful tool for my clients. c. I received enough information about how to implement the app with my clients. d. I am generally open to trying new tools and tactics to help my clients.	True / False
e. My agency is requiring me to use or offer to use Evive with my clients. IF NO: There are different reasons some agencies and providers have not started to use Evive with clients. Of the following, please let me know which apply to your experience by responding with "true" or "false". a. I didn't know about Evive until now. b. I did not receive enough information about the usefulness of the app. c. I did not receive enough information about how to implement the app with my clients, or the information I received was confusing. d. I don't think that adding Evive to my client care will improve their outcomes. e. I don't want to add another task or process to my plate right now. Are there any other reasons that have prevented you from using Evive with	True / False
clients? FOR THOSE USING EVIVE	•
 What are your impressions about using the app, so far? What benefits do you notice from using the app? What challenges have you found to be associated with using the app? Using a scale of 0 to 5 where 0 means not at all positive and 5 means very positive, overall: How has your experience with Evive been? How clinically helpful is Evive? How easy is it to use Evive? 	Open-ended Likert
FOR THOSE NOT USING EVIVE 1. Is there anything that you feel an app could offer that would be helpful to utilize with clients? 2. Using a scale of 0 to 5 where 0 means not at all likely and 5 means very likely, how likely are you to use Evive with clients?	Open-ended
Using a scale of 0 to 5 where 0 means not at all likely and 5 means very likely, how likely would you be to utilize an app function that allows clients to share app data with you every week, including daily logs of gambling urges, moods, and gambling behavior?	Likert
Do you have any other general feedback about your experience with Evive or other health and wellness apps that you would like to share?	Open-ended