The Problem Gambling Research
and Treatment Centre

Consumer perspectives on gambling harm minimisation measures in an Australian jurisdiction

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First Asia Pacific Conference on Gambling
& Commercial Gaming Research
Macao, 5th-8th November 2012

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To describe a mixed method study undertaken in 2010-2011 in Tasmania, Australia, to determine:

- awareness of harm minimisation measures;
- support or opposition to the measures; and
- assessments of the measures' effectiveness if already implemented, and the anticipated impact of measures which were still to be introduced in new legislation and a new Code of Practice

- To be able to answer the question:

  "Are these harm minimisation measures good policy"?

- **Demand reduction** — strategies which succeed by motivating gamblers to play less, or to play on fewer occasions, or by affecting large population groups (for example, by raising the price of gambling products, self-exclusion measures or advertising restrictions);

- **Supply reduction** — strategies that are intended to achieve social and health benefits by reducing the availability of gambling products (for example, by restricting venue opening hours and restricting the number of EGMs per venue or in a specified area); and

- **Harm reduction** — strategies that reduce the likelihood of harm without necessarily requiring abstinence (for example, through providing educational materials in venues, or pop-up messages on EGMs regarding time and spend, or restricting access to cash in venues).

- Evidence based;
- Sensitive to context;
- Part of a strategy which is comprehensive, diverse, flexible and innovative
- A result of consultation with those whose behaviour is being targeted;
- Inclusive of an emphasis on prevention and demand reduction;
- Achieving the minimisation of harm in a way that is just and equitable;
- Evaluated regularly;
- Implemented in a way that ensures that stakeholders understand that harm minimisation is a norm

- Computer assisted telephone interview of over 4,000 adult Tasmanians

- Thirteen in-depth group interviews with 126 participants aged 18 to 70 (69 men, 57 women) recruited from the CATI survey, from 4 low SES LGAs and 4 comparison LGAs.

- Are respondents **aware** of the measure?
- Do respondents feel that the measure has helped them to control the **frequency** of their gambling?
- Do respondents feel that the measure has helped them to control their **time** spent gambling?
- Do respondents feel that the measure has helped them to control the **amount** they spend on their gambling?

- Respondents were also asked to identify other measures that they use to minimise harm.

- They were also asked how they thought measures yet to be introduced would affect their gambling behaviour.

- Problem gambling measured by PGSI.

Harm minimisation measures

- Provision for exclusion / self exclusion from venues or gambling activities at venues
- Advertising restrictions
- Rate of loss: maximum $5 bet; reduction of lines from 50 to 30 per spin
- Caps on number of EGMs: 30 in hotels, 40 in clubs
- Limitations on 24 hour gaming
- Minors banned from gaming areas
- No ATMs in venues other than casinos
- Maximum EFTPOS withdrawal for gambling of $200
- Limits on cheque cashing
- Reduction of note acceptor limit from $9,899 to $500 (in casinos only – no note acceptors in other venues)

- Player information, including display of odds of winning, return to player, warnings on machines & problem gambling services
- Clocks to be displayed
- Proper lighting
- Restrictions on player loyalty systems
- **Ban on smoking in gaming areas**
- Restrictions on service of alcohol and food in gaming areas after 6pm
- Staff training in responsible gambling and on-site problem gambling assistance

- Just over two thirds of EGM gamblers reported in the CATI survey that they were aware of the Tasmanian Gambling Exclusion Scheme.
- Of concern is that compared to non-problem gamblers, fewer moderate risk gamblers and problem gamblers were aware of the Scheme.
- Concern over inadequacy of enforcement, and support for the opportunity to be excluded from gaming areas only, rather than the whole venue, thereby minimising impact on non-gambling leisure

- There was a high level of reach and recall of industry advertisements, with group interview participants able to describe in detail advertisements relating to a large range of products, but they were highly critical of sports betting advertising, particularly quoting of odds at games and during broadcasts

- Most consistent theme emerging from group discussions was that the messages are not relevant to social gamblers, who are not perceived to be a risk.

- This is an important point in considering how to frame messages in the context of peoples' understanding of risk.

- For the most part, the discourse relating to problem gambling in the groups was one that emphasises a *dichotomous* understanding of problem gambling: one is either an addict or just a social gambler. This contrasts, with the accepted public health view in this area, of a risk *continuum*, coupled with knowledge of vulnerability, particularly co-morbidity.

- Other than the smoking ban, of which nearly 96 per cent of EGM gamblers were aware, generally fewer than one-third were aware of any specific measure, except for the restriction on numbers of EGMs per venue (37.8 per cent). The lowest level of awareness was recorded for reduction of lines (13.8 per cent).

Greatest change to enjoyment was experienced in relation to the smoking ban:

- 34.6 per cent of those surveyed reported that it had impacted on their enjoyment, with 27.6 per cent reporting **increased** enjoyment, and 7.0 per cent reporting decreased enjoyment.

The majority of respondents indicated that there was no change to their spend or enjoyment as a result of the:

- reduction in lines played (from 50 to 30),
- reduction in maximum bet per spin from $10 to $5 and
- amount that can be inserted into note acceptors in new EGMs in casinos, from $9,899 to $500.

- Moderate risk/problem gamblers believed their spend would be impacted by:

  – reducing the amount they could withdraw from an EFTPOS machine for gambling, or from an ATM at the casino;
  – restricting the payment of cash for poker machine payouts;
  – locating highly visible clocks on gaming room walls;
  – allowing only socially responsible advertising of gambling.

Although moderate risk/problem gamblers believed that all measures would impact on their enjoyment more than non-problem gamblers, three differences were statistically significant:

At risk and problem gamblers were about three times more likely than non-problem gamblers to believe that their enjoyment would be affected by proposals to:

• **Reduce the amount able to be withdrawn from EFTPOS and ATMs**

• **Restrict the payment of cash for poker machine payouts**

• **Place highly visible clocks in gaming areas**

- Are these measures good policy?
- Yes: universal measures that have a specific effect on high risk and problem gamblers spend (and enjoyment).
- Consistent with a public health prevention approach

BUT

- Pre-commitment universally criticised by EGM players of all levels of risk and degree of involvement, for not meeting this criterion of good policy

Conclusion

- What about other suggestions such as proposal for $1.00 bet limit per spin?

- Overall, most (81.3%) EGM gamblers played less than 50 cents per spin (66 per cent) or between 50 cents and $1 per spin (15.3 per cent).

- An increase in dollars per EGM spin usually played was significantly associated with an increased risk of higher gambling severities (*p<.001*).

- Therefore universal measure of $1.00 bet limit would impact more significantly on problematic gamblers

- Need to ensure that the policies are, or remain evidence - based

References

The Allen Consulting Group, Problem Gambling Research and Treatment Centre, and the Social Research Centre (2011). *Social and economic impact study of gambling in Tasmania, Volume 3: Assessment of harm minimisation measures.* Prepared for the Tasmanian Government Department of Treasury and Finance.

http://www.tenders.tas.gov.au/domino/dtf/dtf.nsf/LookupFiles/Volume3secondgamblingSEIS.PDF/$file/Volume3secondgamblingSEIS.PDF

Blaszczynski, A. 2001, *Harm minimisation strategies in gambling: An overview of international initiatives and interventions*, Australian Gaming Council, Canberra

Department of Families, Housing, Community Services and Indigenous Affairs FaHCSIA 2010, *A national snapshot of harm minimisation strategies*, Canberra.

Department of Treasury and Finance (DTF) 2010, *Responsible Conduct of Gambling*, <http://www.treasury.tas.gov.au/domino/dtf/dtf.nsf/LookupFiles/RCG_Workbook_February_2011.pdf/$file/RCG_Workbook_February_2011.pdf>.

Productivity Commission 2010, *Gambling*, Report no. 50, Canberra.

Victorian Parliamentary Drugs and Crime Prevention Committee (n.d.) *Harm minimisation: Principles and policy frameworks*, Government Printer, Melbourne