

Chapter 7: Summary: Informing the National Research Priorities

7.1 Overview

The purpose of this final chapter is to consolidate the material reviewed in previous chapters and to examine its implications for each of the national research priorities (NRPs) identified by Gambling Research Australia. As pointed in Chapter 1, some of the material set out in the Australasian Gambling Review and used in this report is not grouped into the same categories as the NRPs. Some NRPs are very broad and encompass different areas, populations and issues, so that there is a need to draw together diverse material in a way that corresponds with the grouping of ideas within each priority area. Although this has, to some degree, already been achieved in the report (e.g. in Chapter 2 on the definitions of problem gambling, Chapter 4 on EGMs and Chapter 5 on services and interventions), some of the broader priorities (such as 3 and 5) are informed by material drawn from multiple chapters and require some additional elaboration and discussion.

Priority 1: A national approach to definitions of problem gambling and consistent data collection

This Priority issue is discussed in some depth in Chapter 2. Gambling Research Australia has already commissioned research to establish a national definition of problem gambling (see Neal et al., 2005). However, as noted in Chapter 2 and also in Chapter 5 in relation to the operation of treatment services, there are still some variations in: (a) the specific measures used to diagnose or measure problem gambling, and (b) the sampling strategies used to establish the prevalence of problem gambling at a community level. It was concluded in Chapter 2 that inter-jurisdictional research could be enhanced through:

- the uniform adoption of the CPGI as the measure of choice for prevalence surveys (this has now happened);
- the use of the CPGI as the standard screening tool for treatment services so as to allow comparisons with prevalence data, but also to allow the comparison of treatment service data across jurisdictions;
- consistency in the sub-sampling of regular gamblers within prevalence surveys (i.e. weekly or fortnightly +, exclusion of lottery/bingo gamblers) so that the

CPGI is being administered to a consistent population group across the country.

Priority 2: Feasibility and consequences of changes to gaming machine operation such as pre-commitment of loss limits, phasing out note-acceptors, imposition of mandatory breaks in play and the impact of linked jackpots

All of this material is summarised in Chapter 4, which shows that there is a reasonable body of evidence to support the view that EGMs are the major cause of problem gambling in Australia, and almost the exclusive cause of gambling problems for women. However, it is also emphasised that more consistent attempts could be made in data collection strategies (e.g. prevalence surveys and intake data collection at agencies) to include questions that make it easier to identify the type of gambling that caused the person to experience problems. At the present time, instead of asking people what type of gambling was the principal source of their difficulties, most previous studies have had to infer this information from participation statistics or questions relating to preferred or 'favourite' activities.

This chapter also provides a review of the effects of varying specific gaming machine features on player behaviour. Although much of this research was considered useful, several important limitations were identified. The first limitation related to sampling. It was pointed out that, for these studies to be valid, it is important for studies to include a sample of both problem and non-problem gamblers so that one can identify the responses that are unique to problem gamblers, and not just gamblers in general. A second issue was that many studies are overly reliant on self-report data. Self-report methods provide a useful way to highlight features that might be important to players, but it is not always clear whether what people say is borne out in their behaviour. Self-report studies need, therefore, to be combined with observational studies of the nature that have been undertaken for some years in Sydney (e.g. Walker, 2003 or through controlled field studies involving the modification of existing EGMs located within the same venue (Blaszczynski et al., 2001, Section 4.3). A further strategy might involve analyses of existing objective EGM revenue data to determine how this relates to variations in EGM features. Chapter 4 contains a number of recommendations as to how these studies might be further enhanced; namely, through

the selection of very popular EGMs, controlled access to only experimental machines, and careful game-by-game observation of players while they are gambling within venues (Section 4.4).

The existing body of research reviewed in Chapter 4 showed that the features of gaming machines that appear most influential, particularly in terms of their effects on player satisfaction, playing time, and expenditure, are those which influence the rate at which people can insert money into machines. In particular, modifications to the availability of note acceptors and restrictions on the maximum bet appear more influential than modest changes to play speed. Other factors such as variations in the number of pay lines available, or the availability of bonus features, were also considered worthy of future investigation as based on a number of preliminary studies.

***Priority 3:** Best approaches to early intervention and prevention to avoid problem gambling; **Priority 4:** Major study of problem gamblers, including their profile, attitudes, gambling behaviour, and the impact of proposed policy measures on them*

In Chapter 5, the review discusses the principal primary intervention strategies that have been developed to prevent problem gambling. As documented below under Priority 5, many of these interventions have involved the provision of information in schools, venues, and in the community. The second approach has been to examine the potential effectiveness of self-help strategies. These strategies have included the methods that people use to pre-commit themselves to certain manageable levels of expenditure (McDonnell-Phillips, 2005), but also specific behavioural strategies, often involving the support of friends and families, modifying daily schedules, or seeking alternative strategies for managing finances. Many of these strategies have been documented in a limited number of small-scale studies or in dedicated self-help manuals, but the long-term effectiveness of these methods, their effects on behaviour, or utility for people who have not previously tried these methods, have not been investigated nationally or on a large scale. To address this issue, Gambling Research Australia is seeking to fund research that will examine the factors that influence gamblers' pre-commitment decisions.

Issues relevant to the second part of this research priority are described in Chapters 2 and 4. Chapter 2 provides a summary of the significant impacts that are commonly observed in problem gambling, ranging from personal effects such as anxiety, depression and suicide, to family dysfunction and relationship breakdowns, financial problems, legal problems, difficulties with employment, and co-morbidity (e.g. substance abuse). Several important conceptual issues as well as research limitations were highlighted in this research, all of which might provide some guidance for future research involving the assessment of the impacts on gamblers (i.e. their profile of needs). These are listed below.

- In studies of the links between gambling and poor psychological functioning, there is a need to obtain greater information concerning the direction of causality. To what extent does poor psychological functioning predispose people to gambling problems, and how does gambling influence, or intensify, psychological dysfunction?
- There are significant discrepancies between the intensity of harm observed in treatment samples and that found in prevalence surveys. Since not all problem gamblers respond to telephone surveys, there is a need to determine to what extent prevalence surveys underestimate the true level of harm. At the same time, since problem gamblers often only seek help when they have reached 'rock bottom', there is a danger that a reliance on treatment samples may lead to an over-estimation of the typical level of harm. Further research is needed to consolidate the prevalence and profile of harm typically obtained by these two different methods. For example, what level of harm is experienced by problem gamblers in the community who have not sought help and who do not respond to telephone surveys?
- There is good evidence to suggest that problem gambling is linked to a higher incidence of smoking, as well as alcohol and drug use. The review suggests, however, that there is a greater need for the adoption of consistent validated measures across different surveys so that this relationship can be consistently examined.

- Assessments of social impacts, legal and vocational impacts could be enhanced by the development of a more graded series of questions that captures the varying degrees of severity that might apply (e.g. loss of work productivity, change of job, loss of job). Measures of work stress, satisfaction and productivity could also be included in some studies to obtain more validated assessments of the impacts of gambling on work functioning.
- Considerable concerns were raised about the use of questions relating to financial impacts. Information on gambling expenditure collected by the ABS or through household expenditure surveys is grossly unreliable and probably should not be used in research projects. Estimates from prevalence surveys are also unreliable, although accuracy can be enhanced using the methods employed by the Productivity Commission in its 1999 national survey; namely, the use of questions that request information on expenditure outlays as well as the amount of money remaining afterwards so as to allow the calculation of estimated net expenditure.

Further insights into the psychological profile of problem gamblers were provided in Chapter 4, which included summaries of the principal psychological approaches to the study of problem gambling. It is now generally accepted, based on the work of Blaszczynski and Nower (2002) and many years of international research, that problem gambling is a multi-faceted phenomenon, and that there may be multiple pathways into problem gambling. It is clear that gamblers can become conditioned to gambling-related stimuli, can become psychologically dependent on gambling (females > males), and that cognitive distortions or irrational beliefs are more prevalent in problem gamblers. All of these areas can have implications for treatment and also public policy and regulation (e.g. the effects of gambling-related stimuli, advertising, and information on people's urge to gamble).

At the same time, it is apparent that there is a subset of problem gamblers (males > females) who experience significant psychological and psychiatric symptomology in conjunction with their gambling. This group may not be so easily amenable to clinical

treatments or other forms of intervention and may require additional support, in the form of greater co-ordination of specialist psychological, medical, and rehabilitation services not currently provided by many counselling agencies. Understanding how service models might be developed so as to broaden the range of professional expertise available to gamblers (e.g. by forging stronger links between GPs, psychiatrists, and psychologists) would appear to be another important issue that will need to be addressed to meet the needs of the different profiles of gambler identified as requiring treatment or assistance.

Priority 5: Benchmarks and on-going monitoring studies to measure the impact and effectiveness of strategies introduced to reduce the extent and impact of problem gambling, including studies of services that assist problem gamblers and how effective these services are

Chapter 5 provides a summary of the range of intervention and prevention strategies that have been used or considered within Australia, with a distinction drawn between primary, secondary and tertiary interventions. The review showed that primary interventions have taken a variety of forms. These have included: school or community education initiatives, the provision of information within venues, or policies to limit the nature and range of venue advertising and promotional strategies (Section 5.2.2). Although many of these initiatives were considered well-intentioned, it was argued that further research needs to be undertaken to evaluate their effectiveness in bringing about actual changes in behaviour. Instead, at the present time, most of the research relating to these initiatives appears to rely very heavily on self-report data collected from members of the public, or from gamblers.

Much of the discussion relating to secondary interventions concerned the existing body of knowledge relating to modifications to venue environments or machine features to limit the potential harms associated with excessive gambling. Once again, it was pointed out that the majority of studies concerning these topics have relied on self-report studies and that there have been very few systematic trials that have attempted to modify specific aspects of the gaming environment and then examined how this influenced player behaviour, expenditure, or various indices of problem gambling. Interventions or initiatives that appear promising and which are worthy of

future investigation include the removal of ATMs from gaming venues, the use of smart-card technology to limit gamblers' expenditure, smoking bans, and self-exclusion strategies. Modifications to lighting, the addition of clocks, machine shutdowns, and other similar initiatives are currently less well supported by the current research literature and appear less promising as harm minimisation strategies.

The discussion of tertiary intervention strategies commenced with an analysis of research relating to help-seeking in problem gamblers. It was pointed out that only a relatively small proportion of people with gambling problems ever seek help, and that there is a need to conduct more detailed research to determine how many gamblers in the community experience natural recovery or use self-help methods (as a recent research study by McDonnell-Phillips, 2005 on pre-commitment strategies has suggested). Another important issue addressed in this section was the need for a consolidation of national help-seeking statistics to obtain more accurate estimates of the number of problem gamblers in Australia who obtain formal assistance. Not all official statistics necessarily include all formal sources of help for gambling-problems, so that one will often obtain higher estimates of help-seeking from prevalence surveys than from data collected from funded agencies. Some attempt to reconcile these estimates by greater collaboration with a variety of help services (e.g. psychologists, GPs via the Australian Medical Association) may be useful to obtain more reliable and valid estimates.

The principal conclusion to be drawn from the analysis of treatment services is that the current research base is not, in any sense, sufficient to inform public policy and funding agencies. Although some well-designed trials have been undertaken to analyse some small-scale intervention models, there have been almost no evaluations that would meet current international standards for formal clinical interventions because of the significant costs associated with conducting large controlled trials. Using recent reviews published by Walker (2005) and Blaszczynski (2005), the review sets out the key principles governing formal evaluations of treatment services and how these might be undertaken. The review suggests the need for the development of national guidelines and standards regarding the consistent implementation and evaluation of treatment services, the need for common outcome

measures, follow up periods, consistent classification of drop-outs from treatment, as well as multi-centre trials that can pool the findings from several smaller studies.

Priority 6: To research the patterns of gambling, the impacts of gambling and consider strategies for harm reduction among populations such as Indigenous, rural, remote or culturally and linguistically diverse communities, young people or older people

As pointed out in Chapter 2 of this review, current knowledge concerning the nature of gambling in Indigenous and culturally and linguistically diverse communities remains very sparse. Little national prevalence data is available due to difficulties of recruiting these populations in prevalence surveys, and most studies that have engaged these populations (particularly Indigenous populations) have involved focus groups, key informant interviews, or more ethnographic research. It is known that both populations are adversely affected by problem gambling, with some evidence that Indigenous communities may be particularly adversely affected. It is also known that both populations are reluctant to seek help (or do not seek help) for their problems because of uncertainty concerning the availability of appropriate services and feelings of shame or stigma within their own community. The current literature, therefore, suggests that there is a need for further research that attempts to gauge the prevalence of gambling, problem gambling, and gambling-related harm at a national level, e.g. by applying a similar methodology within several areas, towns, or other geographical areas that are known (from ABS Census data) to have a very high proportion of people from Indigenous or CALD communities.

Some important steps towards addressing this paucity of knowledge are being undertaken by Gambling Research Australia through newly commissioned research projects. The aim of this work is to obtain a greater understanding of the prevalence of gambling in Indigenous communities, the types of gambling preferred, the factors that place Indigenous people at risk of gambling-related problems, and the nature of the consequences. One new project involves an in-depth analysis of gambling within Indigenous communities in NSW and QLD to develop a conceptual understanding of how Indigenous people view, participate in, and understand gambling in their communities. Another project will examine differences in the distribution of gambling

within the Indigenous community in terms of participation rates, types of gambling activity preferred, and socio-demographic correlates.

Considerably more is known about the nature of gambling in older and young people. Several surveys of adolescent gambling have now been undertaken in several Australian jurisdictions, although not all have reached the same conclusions about the nature and prevalence of gambling in this age range. Schools surveys appear to yield very much higher estimates of problem gambling and related harms than those conducted using telephone methodologies. Despite this, there is sufficient evidence to draw a number of conclusions from the research:

- Adolescent gamblers are just as much at risk of developing gambling problems as people in the adult population. Most school studies suggest that the ratio of adolescent to adult problem gamblers is at least 2 to 1.
- Adolescents who start gambling earlier, or who experience early wins, are more likely to have gambling problems as adults.
- Adolescent problem gambling often coincides with significantly poorer psychological adjustment, other high-risk behaviours, and poorer health.

A limitation of this research is that it has not been extended to all jurisdictions within Australia. The results of these studies are also contentious in that it is not entirely clear how one should interpret adolescent problem gambling measures. Although there is little question that problem gambling can commence in adolescence (and particularly so in the case of male gamblers) and can have significant negative consequences for young people, some doubts have been raised internationally about whether young people experience the same degree of financial, legal, and vocational harm as adults. Accordingly, there is a need for further clinical validation of adolescent gambling measures to ascertain how many young people identified as problem gamblers are indeed suffering from a genuine pathology. Steps towards addressing these issues have been made by Gambling Research Australia in the form of a newly commissioned national research project that will examine the nature of

youth gambling in Australia with a particular focus on the extent of gambling involvement, potential risk factors for problem gambling, and social and demographic differences.

As shown in this review, there is also some useful information available in Australia concerning the nature of older people and gambling. Most prevalence studies clearly show that older people are less likely to gamble, spend less on gambling, experience a lower prevalence of problem gambling, and tend to gamble on a narrow range of activities (e.g. playing casino games, sports betting and racing is less common than in younger samples). Although some attempts have been made to identify specific motivational factors or problems that appear common in older gamblers, the absence of any comparison samples of younger gamblers in these samples makes it difficult to draw definitive conclusions. Further investigations into older gambling are therefore recommended, but with a stronger focus on comparative analyses to highlight the distinctive features of older gamblers that set them apart from other gamblers in the community.

Finally, in terms of the impacts of gambling (most notably EGMs) on rural and remote communities, the review contained in Chapter 6 clearly shows that there is scope for further investigations. The best quality research in this area has shown that EGMs do not necessarily contribute to economic growth in rural communities because they give rise to few multiplier effects, few backward or forward linkages, and a leakage of income in the form of taxation revenue that is not necessarily reinvested in the community in equal measure. As indicated in Chapter 6, such research could be enhanced by extending the analyses to different jurisdictions, towns and cities of variable size, and with a greater focus on primary data collection so as to enhance the accuracy of the estimated parameters used in economic models.