



## **House of cards**

Problem gambling and low income earners  
in Tasmania

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Social Action and Research Centre  
Anglicare Tasmania

## **House of cards: Problem gambling and low income earners in Tasmania**

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The research findings, conclusions and recommendations of this report are those of Anglicare and should not be attributed to any members of the reference group. Any errors in the report are the responsibility of the author. The research for this project was conducted by Margie Law, Jo Flanagan, Prue Cameron and Kelly Madden.

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## EXECUTIVE SUMMARY

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The amount of money spent on gambling in Tasmania has risen astronomically in recent times as a result of increased opportunities to gamble. Since Australia's first casino opened in Hobart in the 1970s, more than 200 other venues have begun to offer a range of gambling products in Tasmania. Most of the growth in expenditure in this time has been a result of spending on poker machines in hotels and clubs.

Whilst most people who gamble are able to do so without experiencing difficulties, some people are unable to control their gambling, spend more than they planned and as a consequence find themselves and their families experiencing sometimes very severe financial and relationship difficulties. Between 18,000 and 33,000 people in Tasmania are estimated as being affected by gambling problems, either from their own gambling or from the gambling of a family member. This includes an estimated 2,000 children who live in a household affected by problem gambling.

This research sought to map the experiences of people who are living on low incomes in Tasmania and who have a gambling problem. Participants reported relationship stress and breakdown, food insecurity, ill-health caused by the stress of gambling, extreme levels of debt and, in a few instances, attempted suicide or thoughts of suicide or breaking the law due to their gambling. These impacts also had serious consequences for their families and especially their children. This research found that gambling expenditure need not be at a high level for negative impacts to be experienced by people on low incomes.

Most of the participants reported that they started gambling to escape loneliness, boredom or stress; that winning was what they most enjoyed about gambling; and that gambling represented to them an opportunity to socialise. However, after their first 'win', which they generally used to purchase special items for their household that they struggled to afford on their regular incomes, participants found that any money won gambling ended up being put back into gambling.

The majority of the participants experienced difficulties with gambling on poker machines. Participants who gambled on poker machines cited the music, colours and lights and free games of the machines were particularly influential in the development of their gambling problems. The other major form of gambling cited as causing problems was placing bets on horse or greyhound races.

This research found that people with gambling problems try extremely hard to control their gambling and are inventive and persistent in this. Participants set themselves gambling budgets, had their money managed by family members, sought counselling and had themselves banned from gambling venues. However, the failure of industry and government to ensure adequate levels of consumer protection was evident as participants felt "out of control" and abandoned by the government. Their

overwhelming request was for poker machines to be banned, or at least for there to be a major reduction in the number of machines outside casinos.

The main conclusion of this research is that gambling problems go far beyond the individual. The causes and consequences of gambling problems need to be addressed at a broad community level and from a public health perspective. This requires government funding and strategic planning across a range of community services. It also requires more stringent consumer protection measures to reduce the likelihood of more problems arising and to assist people who are trying to control their gambling. Any reduction in the level of gambling problems will result in reductions in revenue for both industry and government and this is why the regulatory environment must be independent and robust.

Anglicare has made a range of recommendations for policy changes at a State and Federal level. Each recommendation seeks to ensure that people who gamble, whether it be their first time or they gamble regularly, whether they currently have a problem with gambling or not, are adequately protected from exploitation.

**The key recommendations are:**

- the establishment of a gambling consumers' Advocate to enhance and encourage consumer protection;
- the introduction of social and economic impact assessments for all new or extended gambling opportunities, technology, designs and licences;
- an increased allocation of gambling-derived government revenue directly for the prevention of gambling problems and alleviation of the impacts of gambling problems; and
- improved consumer protection, including the banning of advertisements outside of gambling venues.

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## INTRODUCTION

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*I probably realized [I had a problem] when I would go in and I could say I can afford to lose \$20 that's fine but then I would stay and keep waiting to regain what I lost. Then leaving, feeling really bad. It's the light, the music, the jingles, the free drinks etc. It was one day when I put in \$100, \$120, and I thought 'oh no what am I doing?' Why didn't I stop myself? (Maureen, poker machines)<sup>1</sup>*

Gambling expenditure rates reveal that there has been an unprecedented escalation of expenditure on gambling in Tasmania in recent times, particularly since the introduction of poker machines into hotels and clubs in 1997 (Tasmanian Gaming Commission, 2004). With this has come a growing concern about the negative impacts of gambling on individuals, their families and the community. While the majority of people who gamble are able to do so within their financial means, some people are unable to control their gambling and find themselves on a downward spiral of financial and personal relationship troubles.

A recent survey indicates that more than 3,000 people in Tasmania are estimated to have a gambling problem.<sup>2</sup> The 1999 Productivity Commission inquiry into Australia's gambling industries found that between 5 to 10 other people can be directly affected by one person with a gambling problem. This means that a further 15,000 to 30,000 people in Tasmania may be experiencing hardships because of someone else's gambling problem. These people could be partners, children, friends, parents or business colleagues of people who gamble.

This report is based on research conducted by Anglicare, which investigated how gambling affects people who are living on low incomes and who have a gambling problem. The low level of income for participants meant that losses of relatively small amounts of money could affect them quite significantly. The project also looked at the financial, social and emotional effects that gambling has on family members and in particular explored the relationships between financial and social disadvantage and problem gambling. Participants were also invited to explore issues of consumer protection for people who gamble.

Acknowledging the complexity of the research topic, the project aimed to:

- Identify social and economic impacts of gambling problems on individuals and their families and its relationship with financial disadvantage;
- Increase understanding of the social consequences of gambling problems;
- Identify strategies to reduce these impacts; and
- Inform policy development at a local, state and federal level.

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1 The names of all participants have been changed in this report.

2 Based on figures from a survey conducted by Roy Morgan Research (2001) and census data from Australian Bureau of Statistics (2001).

Although participants reported that they spent money on a range of types of gambling, the most common form of gambling was electronic gaming machines, also known as poker machines or 'pokies'. This report will use the term poker machines since this reflects the terminology used by participants. Similarly, much of the discussion in this report focuses on poker machines since they were the most common focus of problem gambling for participants.

Section one of this report outlines the research process and demographic profile of the research participants. Section two provides a brief background to the history and extent of gambling in Australia, the national and Tasmanian policy context, and the definition and extent of gambling problems. The remainder of the report focuses on the experiences of the participants in this research, both people who gamble and people affected by a family member's gambling. Section three outlines the reasons why people gamble and sections four, five and six describe the impacts of their gambling. Section seven explores how people try to control their gambling while section eight discusses the role of government and industry in reducing harm. Section nine provides the conclusion and recommendations for the project.

The impetus for this research came from the dearth of in-depth research about gambling problems in Tasmania, which is necessary to develop appropriate service and regulatory responses. Despite the stigma of shame attached to gambling problems, Anglicare's Social Action and Research Centre has been regularly approached by people who gamble and their family members, service providers and ex-staff members of gambling venues, who have wanted to tell their stories and offer suggestions for regulatory change.

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## SECTION ONE: PROJECT METHODOLOGY

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This research used a number of focus group discussions and individual interviews with people who were experiencing problems with their own gambling or with a family member's gambling. Between August 2004 and March 2005, 7 focus groups with a total of 24 people and 11 individual interviews were conducted. Twenty nine people who gamble and 6 family members were interviewed in total. Interviews were held in Burnie, Launceston and Hobart.

Participants were:

- Over 18;
- Eligible for a Health Care Concession Card or Pension Concession Card; and
- Experiencing problems with gambling.

Family member participants had a partner or close relative who met the participants' eligibility criteria.

Focus groups were used in this research because the interactive narrative approach of facilitated focus group discussions ensures that a detailed and contextualized understanding of individual experiences is produced (de Laine, 1997; Rice & Ezzy, 1999). However, in addition to focus groups, individual one-to-one interview sessions were offered to reduce the impacts of the group process on the confidence of participants especially in terms of gender and cultural background (McMillan, pers. comm., 2004). One-to-one interviews also provided the opportunity for people to participate who were afraid their gambling problem would be 'found out' by other members of their community.

Recruitment of participants was through agencies that provide problem gambling, financial counselling and emergency relief services as well as through local community and health centres, neighbourhood houses, Centrelink, members of the Australian Hotels Association and newspaper advertisements in Tasmania's three regional newspapers. Some participants heard about the research through word of mouth. A flier along with detailed information about the project was provided to service providers approximately 4 weeks prior to the scheduled focus group discussions. Fliers were provided a month later in order to recruit people for one-to-one interviews. Basic information about the project and eligibility requirements was provided to Centrelink, the Australian Hotels Association and through the newspaper advertisements. Recruitment covered a 4 month period although people continued to inquire about the project up to a month after the last interview was held. The researcher spoke to each participant prior to the focus group or individual interview to ascertain their eligibility and to answer any questions they had about the research. All prospective participants fitted the criteria and were invited to participate, although not all people who registered ended up attending. Each person who did not attend was phoned to see if they would like to reschedule; this resulted in a small number of subsequent one-to-one interviews.

A semi-structured interview schedule was used in both focus group and individual interviews to guide, but not restrict, discussions of personal experiences of gambling and the consequences for the participants' health, fortnightly budget, work place, and relationships with family and friends. Focus groups for people who gamble were held separately to those for family members. Participants were provided with an information sheet and consent form as well as a \$30 supermarket voucher to reimburse them for costs encountered through participation. An Anglicare counsellor was available at each session. The discussions were audio-taped and transcribed and the transcripts subjected to thematic analysis to draw out key themes.

The names of all participants, along with any identifying information, have been changed in the report to assure anonymity.

Individual interviews were also conducted with service providers across a range of services, including problem gambling, financial counselling, emergency relief, housing and health.

### **Limitations of this research**

This research does not try to be representative of all people who experience problems with gambling. Instead, Anglicare deliberately sought the views of people on low incomes.

Ten people arranged with Anglicare to participate but did not in the end attend a focus group or individual interview. During the preliminary discussions on the telephone and in the focus group and one-to-one discussions, it became evident that a number of people found it difficult to talk about their gambling experiences either with an interviewer or because of concerns about who else was in the focus group. We were unable to recruit participants from the east and west coasts of the State.

Participants self-selected for the project. Although no formal screen of gambling problems was conducted, their self-selection along with the participant's accounts of the impacts of gambling was deemed sufficient evidence of a gambling problem. All participants offered stories of extreme hardships caused by either their own or a family member's gambling.

The majority of participants had at some stage attended counselling for their gambling problems. Previous research suggests that the majority of people who have gambling problems do not attend counselling (Productivity Commission, 1999). The over-representation in our study is due to the active recruitment via the Break Even Network, which consists of services that assist people with gambling problems; although at least one-third of participants were recruited from sources outside of the Break Even Network including newspaper advertisements, word-of-mouth and other community organisations.

This research project did not set out to identify problems and solutions specific to particular sections of the population who gamble. Therefore, Anglicare will not specify, for example, gender, cultural or age specific recommendations. However, we do not assume that all recommendations will be equally relevant or effective for all sections of

the population, nor will they solve the problems faced by all people who have difficulties controlling their gambling.

This research was conducted using qualitative methods. The number of participants has no relevance to the prevalence of gambling problems in Tasmania and no analysis of prevalence is drawn. Instead, the study gains a depth of meaning from the stories shared with the researchers. Previous research supports the use of qualitative research into gambling problems. The conclusions drawn in this study have been compared against other literature and the advice of the project's reference group has also been sought as to their relevance and appropriateness.

### **Demographic profile of research participants**

A total of 35 people participated in the interviews, comprising 29 people who have a gambling problem and 6 family members. Amongst the people who gamble, 14 were men and 15 women. Of the 4 male and 2 female family members, 4 people had a partner with a gambling problem, one a son and one a nephew. One family member's partner who gambles participated in a separate group. One family member said he also had problems with gambling although his interview focussed on the impacts of his family member's gambling.

Twenty seven participants lived in the south of the State with 6 in the north and 2 in the north-west. This does not reflect people's access to gambling but may be due to a number of factors including location of the focus groups discussions and participants' access to transportation and the stigma attached to problem gambling. Further, the researcher was unable to offer one-to-one interviews outside of Launceston and Hobart.

### **Age range of participants**

Participants, including family members, were aged between 26 and 72 years of age, with a peak in the 40 to 50 year old age bracket.

### **Income source**

Anglicare actively sought participants who were on a low income. Of the participants who gamble, the majority (15) received the Disability Support Pension (DSP).

**Table 1: Source of income for participants**

	People who gamble	Family members
Disability Support Pension	15	2
Parenting Payment	6	1
Newstart Allowance	4	1
Aged Pension	2	0
Work	2	1
No income	0	1
<b>Total</b>	<b>29</b>	<b>6</b>

### **Marital and household status**

Of the 35 participants, 9 were in relationships with 10 participants separated or divorced. There were 10 single parents in the study and a total of 14 participants had dependent children. The majority of participants lived alone (16) or with one other person (12).

### **Type of gambling**

Participants were asked what forms of gambling they participated in. As shown in Table 2, the majority of participants gambled on poker machines, with 20 people playing poker machines exclusively. Racing was the next most common form of gambling. The remainder of gambling forms were played in combination with other types of gambling. This analysis includes the relatives of family member participants.

A number of participants spoke of having changed their preferred form of gambling over time. For those who had changed their gambling type, their current form of gambling is listed. For the 5 people who were currently not gambling, the type of gambling before they stopped is listed. Family member participants stated the type of gambling for their family member.

The gambling activity of each participant is summarised in the report as either “poker machines” (electronic gaming machines in a hotel, club or casino), “races” (betting on horse or greyhound racing), or “mixed gambling” (any combination of gambling activity).

**Table 2: Type of gambling for participants\*<sup>3</sup>**

Poker machines	31
Races	9
Casino	3
Tatts/Lotto	3
Keno	2
Competitions	2 <sup>4</sup>
Beer tickets	1 <sup>5</sup>

*\* This adds up to more than 35 because some people participated in a number of types of gambling.*

### **Years spent gambling**

The majority of participants and the relatives of the family member participants had been gambling for more than 10 years with just 3 people gambling for less than two years.

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3 No participant mentioned sports or internet gambling.

4 Although magazine and newspaper competitions are not usually considered to be gambling, two participants, who were interviewed separately, identified competitions as being a gambling problem for them. Both participants also participated in other forms of gambling.

5 Beer tickets are issued by a machine in a hotel and provide the opportunity to win prizes of beer.

**Table 3: Number of years participants have been gambling**

Less than 2 years	3
2 – 5 years	9
6 – 9 years	1
More than 10 years	21
Not sure	1

**Frequency of gambling**

Participants gave details of how often they or their family member gambled. At the time of the interview, 5 people reported that they had stopped gambling. Some participants indicated the frequency of their gambling varied greatly from week to week.

**Table 4: Frequency of gambling per week**

Not at all	5
1 – 2 times	16
3 – 6 times	7
Daily	4
Whenever have money	2
Not sure	1

**Gambling expenditure**

Expenditure on gambling is not easily estimated because people rarely get receipts (the exception being tickets from activities like lottery or racing) and because expenditure often exceeds the person's plans. Some people include 'winnings' from gambling that they put back into gambling in their description of expenditure. For some people expenditure will vary greatly from week to week. Due to these difficulties, it is not possible to report accurately on the participants' gambling expenditure. However, it is worth noting that in the course of the interviews a number of participants spoke about spending less than \$30 per week and as little as \$15 per fortnight on gambling and still being unable to afford this expenditure. This was because of the low level of incomes of the participants and because participants said they found it hard to stop gambling once they started.

**Counselling**

Eighteen of the participants or their family members had at some time sought assistance for their gambling problems through counselling or group support sessions. The number of people who had sought help reflects the successful recruitment for participants by Break Even service providers.

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## SECTION TWO: BACKGROUND

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### **A brief history of gambling in Australia**

Gambling, which is “staking money on uncertain events driven by chance” (Productivity Commission, 1999: 6), has been part of human culture for thousands of years. It is not known if Indigenous Australians gambled prior to contact with outsiders, but it seems that the Macassan people (from today’s Indonesia) brought games of chance to the people of northern Australia from around 1700 (Brady, 2004). However, gambling activities and technology have changed markedly since the British arrived in Australia, from the raucous matey two-up coin games on Anzac Day commemorations to sitting in front of a loud, bright, computerised ‘complete entertainment package’ known colloquially as the ‘pokies’ or poker machine.

In Australia in the 1800s and 1900s most gambling was unregulated with ‘backroom casinos’ and illegal starting price (SP) bookmaking shops, which expanded with the increased use of radios and telephone connections. Governments attempted to compete with illegal gambling by legalising a number of gambling practices and cracking down on gambling-related crime. The first official horse race in Australia was held in Tasmania in 1814 and the first official lottery in Tasmania was established in 1897 when the State Government granted an exclusive licence to George Adams’ Tattersalls. In 1956, poker machines were legalised in New South Wales. Public debate about illegal gambling peaked in the 1970s, at a time when there was also much debate in Tasmania about the proposed new casino. In 1973, Australia’s first casino opened in Hobart and Tasmania’s second casino opened in 1982 in Launceston. Poker machines were introduced to Tasmania’s casinos in 1986, onto the Bass Strait ferry in 1993 and rolled out into hotels and clubs in 1997. The Tasmanian Government is currently considering a licence for Betfair, an internet-based betting exchange.

Today in Australia there is a vast array of gambling options. People can place bets (termed ‘wagering’) on horse races, dog races and other sporting events at a gambling venue on-course or off-course (at the site of the racing event or away from it), with a bookmaker, or by telephone or internet; buy tickets for lotteries, tattsлото, pools, instant ‘scratchies’, keno, bingo and raffles (all of which are termed ‘gaming’) from their local newsagency or other gaming venue; or play table games at the casinos or poker machines at clubs, hotels or casinos (also termed ‘gaming’).

Today in Tasmania, there are 105 hotels and clubs with gaming facilities; 122 TOTE facilities (31 retail and 91 in hotels) and 14 race tracks with totalisator and sports betting facilities; 16 licensed bookmakers; 2 casinos; and approximately 80 Tattersalls venues (mostly supermarkets and newsagencies) that offer a range of lottery-style games and sports betting that are regulated through their license in Victoria. The Federal Group owns the 2 casinos and all poker machines in Tasmania, which they lease to hotels and clubs through Network Gaming.

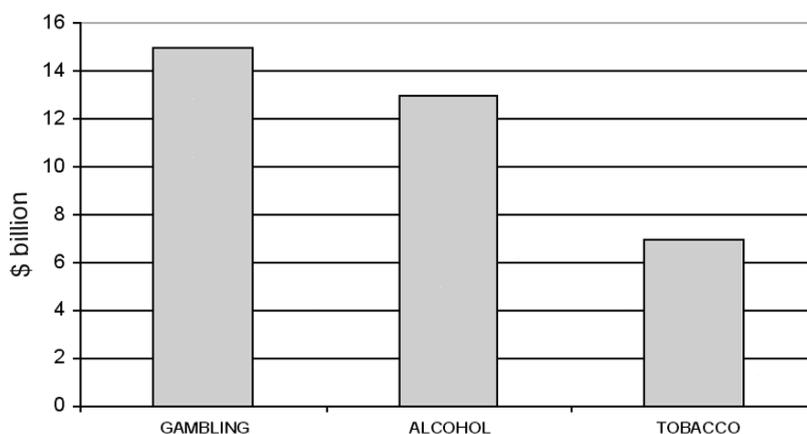
Technological developments have increased accessibility of gambling and the pace of gambling, with little, if any, break between events. Australians have contributed significantly to gambling technology and design, with an Australian having invented the 'totalisator' used in racing around the world today and Australia now considered within the industry to be a 'world leader' in poker machine technology in terms of sophistication (Productivity Commission, 1999).

### **National and Tasmanian gambling expenditure**

Gambling in Australia is a growing industry. From 1982 to 1998, national expenditure (the amount of money that is lost by consumers on gambling) trebled. Growth in expenditure and in access to gambling is largely due to the spread of poker machines and casinos and the desire by state and territory governments to provide licenses in order to establish probity and collect gambling-related taxation and licence revenue (Productivity Commission, 1999).

Australians spend at least twice as much as North Americans and Europeans per capita on gambling (Productivity Commission, 1999). In 2002-03, \$15.4 billion was spent on gambling in Australia; just over half of this (\$9 billion) was lost playing poker machines in hotels and clubs (Tasmanian Gaming Commission, 2004). As shown in Figure 1, this puts national gambling expenditure ahead of both alcohol and tobacco expenditure. In the same year, Australian state governments collected \$4 billion in taxation and license fees (Tasmanian Gaming Commission, 2004).

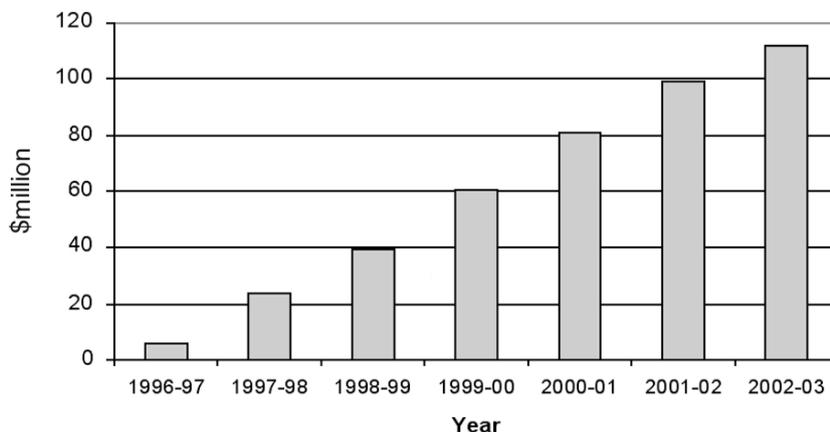
**Figure 1: Total expenditure in Australia in 2002 on gambling, alcohol and tobacco**



*Source: Australian Institute of Health and Welfare (2002) and Tasmanian Gaming Commission (2004)*

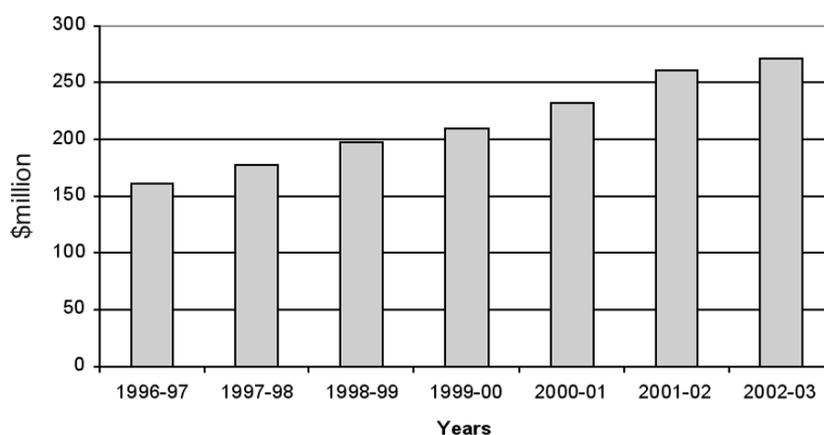
In the last ten years, gambling expenditure in Tasmania has more than doubled, largely because of the rapid increase in expenditure on poker machines, which now represents almost half the total state gambling expenditure (see Figures 2 and 3).

**Figure 2: Total expenditure on poker machines in hotels and clubs in Tasmania**



Source: *Tasmanian Gaming Commission, 2004: 54*

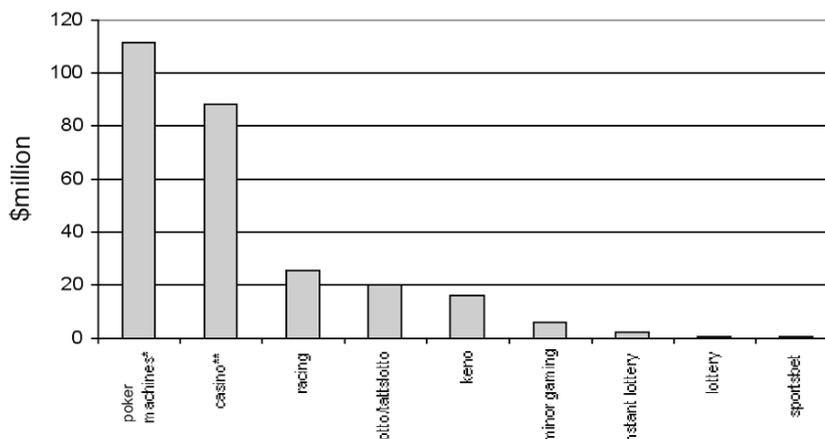
**Figure 3: Total gambling expenditure in Tasmania**



Source: *Tasmanian Gaming Commission, 2004: 56*

In 2002-03, Tasmanians spent \$271 million on gambling, of which \$112 million was lost to poker machines in hotels and clubs; \$88 million in the casinos; and \$25 million in racing (Tasmanian Gaming Commission, 2004). As shown in Figure 4, the volume of money spent on poker machines far outweighs that of other gambling forms, which reflects the policy debate and community concern about this form of gambling.

**Figure 4: Expenditure on all forms of gambling in Tasmania in 2002-03**



Source: Tasmanian Gaming Commission, 2004:D

\* in hotels and clubs

\*\* includes expenditure on poker machines in the two casinos

The Tasmanian Government receives substantial revenue from gambling activities. In 2003-04, \$79 million was collected in taxation and fees from the gaming industry, an increase of \$23 million since 2000-01. The TOTE, which is the company holding the license for totalisator betting in Tasmania, ceased paying taxation on totalisator turnover from August 2000 when it was corporatised. Instead, TOTE makes annual payments to the Government as its only shareholder: in 2003-04, TOTE paid \$5.2 million (TOTE Tasmania, 2004).

Approximately \$5 million each year of government revenue from gaming is collected via a 4% levy on the profits from poker machines in hotels and clubs, which is paid into the Community Support Levy (CSL). Money in the Levy is distributed for the benefit of sports and recreation clubs (25%); charitable organisations via a grants scheme (25%); and 50% for the provision of research into gambling, services for the prevention and treatment of problem gambling, community education on gambling, and other health services. The remaining gambling taxes and license fees are paid into consolidated revenue.

### **Regulation of gambling and the national policy context**

A review of international harm minimisation measures stated that “governments that promote gambling have a moral and social obligation to accept responsibility for minimising any resultant harm that is caused to the community” (Blaszczynski, 2001: 3).

State governments set the legislative framework for the regulation of gambling including probity issues and they also collect substantial revenue as taxation and licence fees from gambling industries. However, gambling as a source of taxation revenue for government is regressive (Winter, 2002; Productivity Commission, 1999); that is, it takes a larger percentage of income from people whose income is low.

In 1998, rising public concern about the impacts of gambling led the Federal Government to request that the Productivity Commission investigate the economic and social impacts of the gambling industries across Australia. This inquiry was the most detailed of its kind and established a number of benchmarks for future state and federal policies.

The Commission's major findings include:

- Gambling provides enjoyment to most Australians;
- About 2.1% of Australia's adult population have gambling problems which warrant policy concern;
- About one-third of total gambling expenditure comes from 'problem gamblers';
- Accessibility of gambling, and in particular poker machines, is a key factor in the prevalence of gambling problems;
- There are serious adverse effects for individuals with a gambling problem;
- On average, between 5 and 10 other people may be affected by one person with a gambling problem;
- The current regulatory environment is deficient;
- Regulation of gambling industries should promote consumer protection; minimise criminal and unethical activity; and reduce the risks and costs of problem gambling; and
- Information about gambling products for consumers is inadequate.

The Productivity Commission (1999) found that the deficiencies in state regulations included the lack of independence of some regulators, insufficient mechanisms to seek community consultation, and inadequate information for decision-making. The Commission noted that gambling policy needs to be especially rigorous because of the conflicting pressures and incentives for government in attempting to reduce harm caused by gambling while exploiting gambling as a source of revenue. Effective harm minimisation measures are likely to reduce gaming turnover, reduce profits to gambling industries and therefore any revenue for governments that is based on a percentage of industries' profits.

*“Good policy making and regulatory processes require that decision-makers have the appropriate degree of independence and control; that their objectives are clear and their decisions well-informed, and that the basis for their decisions is transparent and publicly accessible” (Productivity Commission, 1999: 58).*

After the release of the Productivity Commission report, the Federal Government launched a national approach to problem gambling involving federal, state and territory ministers, to focus “on stopping the further expansion of gambling in Australia, on the impacts of problem gambling on families and communities, on internet gambling and on consumer protection” (Howard, 1999). The Federal Government also initiated inquiries into internet-based gambling and the probity of monopoly contracts for gambling activities.

### **The Tasmanian policy context**

Regulation of gambling in Tasmania comes under four acts: the *Gaming Control Act 1993*, which provides the framework for the licensing and regulation of gaming in the two casinos, the operation of poker machines and keno in hotels and clubs, interactive gaming and minor gaming; the *TT-Line Gaming Act 1993*, which controls gaming on ships operated by the state's shipping company; the *Racing Regulation Act 2004*, which regulates gambling on horse races, dog races and other sporting events, including telephone betting; and the *TOTE Tasmania (Racing Regulation) Act 2004*, which regulates the operation of totalisator betting in Tasmania. The *Liquor and Accommodation Act 2004* sets out the hours of business for all gaming and racing activities that take place within a venue which has a liquor license. The Minister for Finance is currently the Minister responsible for racing and gaming in Tasmania.

The 1993 *Gaming Control Act* was developed because the then-Liberal State Government wished to strike a commercial contract (deed) with the company Federal Hotels to give Federal exclusive rights to operate poker machines and keno in hotels, clubs and the two casinos. At the time, there were 1,079 poker machines located in the casinos in Hobart and Launceston. After extensive debate in both houses of Parliament, the deal was agreed to, but with a number of initiatives to ensure regulation was independent of government and that some of the income raised would assist people who develop gambling problems.

At this time, the State Government established the:

- Community Support Levy for “research into gambling; and services for the prevention of compulsive gambling; and treatment or rehabilitation of compulsive gamblers; and community education concerning gambling; and other health services” (*Gaming Control Act 1993*: 151);
- Tasmanian Gaming Commission to regulate and control gaming, make recommendations to the Minister regarding gaming policy and administer the levy (*Gaming Control Act 1993*); and
- Gambling Support Bureau to work within a public health model of problem gambling.

The Secretary of the Department of Treasury and Finance held the position of Chair of the Tasmanian Gaming Commission for its first ten years. As the current Premier stated whilst in opposition, “In effect that means the position of Gaming Commissioner in this state is no longer independent from Government, because the Secretary of the Treasury is answerable to the Treasurer, who in turn is a member of Cabinet” (Lennon, 1993).

In 2003, the then-Labor Treasurer and his Secretary of Treasury, who was also still the Chair of the Gaming Commission, negotiated a new deed with Federal Hotels for a further 15 years monopoly on poker machines. There was considerable community concern on the role of the Chair/Secretary in these negotiations. Six months after signing the new deed, the State Government announced that an officer of the Crown would no longer be permitted to chair the Gaming Commission and that the Minister's directives to the Commission and the actions taken by the Commission would be published in the *Tasmanian Government Gazette*.

There was no public consultation about the new deed or the state-wide cap which the deed placed on the number of poker machines permitted in Tasmania. The cap negotiated in 2003 set a limit of 2,500 machines in hotels and clubs, an increase of about 300 machines (or 10%) at the time. This was in spite of the findings of the Productivity Commission's national survey: 70% of people surveyed, including a majority of regular gamblers, considered that gambling does more harm than good; and less than 2% of people thought that there should be an increase in the number of machines (Productivity Commission, 1999). Tasmanian-based research in 2000 found that 79% of people surveyed thought the Tasmanian community had not benefited from having poker machines in clubs and hotels (Roy Morgan Research, 2001).

Despite the changes made by the Labor Government in 2003 following the negotiation of the new deed, the Gaming Commission has no staff, offices or management of its own and relies on Treasury staff for advice. Its phone listing, email address and web site come under the Department of Treasury and Finance.

The Director of Racing and the regulatory body Racing Services Tasmania also rely on a government department for their staffing, office and management: their phone listing, email address and web site come under the Department of Infrastructure, Energy and Resources. The roles of the Director and Racing Services Tasmania are primarily concerned with the probity of racing; although racing activities are reported annually by the Department, there is very little reference to other consumer protection issues.

Three recent state parliamentary committees have investigated issues relating to gaming in Tasmania. In 2002, the Legislative Council Select Committee held an inquiry into the impacts of poker machines. The Committee recommendations included the need for biennial research into the social and economic impacts of poker machines; provision of funding for emergency relief agencies where they assist people with gambling problems; establishment of a Community Board to oversee distribution of the Community Support Levy; and improvements to the self-exclusion program (Smith et al, 2002). In 2003 and 2005 the Joint Standing Committee of Public Accounts investigated the negotiation of the 2003 deed and the distribution of the Community Support Levy respectively.

In 1999, an amendment to the *Gaming Control Act 1993* permitted the issue of Tasmanian gaming licenses for internet gaming and wagering from premises in Tasmania. Two licenses have been granted but neither has commenced operations. In 2001, the Federal Government passed the *Interactive Gambling Act*, which prohibited the introduction of new online gaming operators although no restrictions were placed on on-line wagering. The Gaming Commission issues permits that last up to 12 months for minor gaming such as bingo, raffles and lucky envelopes conducted by not-for-profit organisations.

There have been three prevalence studies of gaming and racing since 1994; however the studies fail to provide in-depth analysis of the demographics of people with problems and of the impacts of their gambling. In the eight years since the extension of poker machines into clubs and hotels, a total of \$118,435 has been spent on research, with a further \$189,000 promised over three years to 2005/06 (Tasmanian

Gaming Commission, 1996-97 to 2003-04). Although the Director of Racing is required to make policy recommendations to the minister, there is no requirement for this to be based on research and the Department's annual reports make no mention of expenditure on research into the impact of racing.

### **Consumer protection**

In 1995, the Tasmanian Government introduced a framework for an integrated gambling policy for Tasmania, which sought a coordinated and cooperative approach between government, racing and gaming industries and the community towards minimising the social consequences of gambling (Tasmanian Gaming Commission, 1998).

In Tasmania, many of the consumer protection practices and regulation, known in the gambling industry by the term 'patron care', are the responsibility of the Tasmanian gambling industry. The industry's Gambling Industry Group (GIG), which was set up under the 1995 framework, has developed two voluntary codes relating to industry practices and advertising, which the industry administers and monitors. These codes provide general guidelines that include signage, the hours of operation, payment of large prizes, self-exclusion, service of alcohol, access to cash, procedure for complaints and advertising of gambling as well as guidelines to provide customer comfort and services. The GIG codes apply to all gaming and racing companies and venues in Tasmania. All staff conducting gaming and racing activities must be licensed. Gaming staff must also attend the Responsible Service of Gaming course run by the Australian Hotels Association or TAFE Tasmania within 3 months of being licensed.

The Productivity Commission stated that industry compliance to voluntary codes is inadequate because the industry's incentive to comply is "compromised by the substantial proportion of takings derived from problem gamblers" (Productivity Commission, 1999: 46). Instead, it argued for mandatory regulations to cover all aspects of industry practice including advertising.

In addition to the industry codes, the Tasmanian Gaming Commission issues a set of rules for the conduct of gaming in licensed premises. These rules cover some of the items in the GIG codes but are relevant to gaming-only venues. There are also national standards that have been adopted in Tasmania for poker machines, keno, bingo, casino table games and instant 'scratchies' that set out some of the technical requirements for their operation. For example, these standards set a betting limit for poker machines in hotels and clubs in Tasmania at \$10. The compliance of machines is monitored by the Gaming Commission; however a number of parameters are not specified for Tasmania.

Government inspectors oversee gaming in the two casinos and undertake inspections of all gaming venues in the state and on-board the Bass Strait ferries for compliance to the Gaming Commission rules. In 2003-04, the Gaming Commission took disciplinary action, including fines, censures, suspension or cancellation of licenses, against 4 licensed venues, 17 special employees and 1 technician (Tasmanian Gaming Commission, 2003-04).

In Tasmania, the Director of Racing establishes rules to govern the probity of racing and Tabcorp, the Victorian-based company that provides a wagering pooling agreement in which Tasmanians can participate, provides rules about advertising (Seymour, pers. comm., 2005). There is no betting limit for racing.

The State Government has provided some initiatives relating to consumer protection. The *Gaming Control Act 1993* established strict betting limits, which were over-ridden by the higher betting limits established in the national standards in 1999. The Gaming Act also established limits on the number of poker machines permitted in each hotel and club venue and the deed negotiated in 2003 placed a cap on the total number of machines permitted across the State. The Government banned smoking in all gaming areas from 1 January 2005.

Under the Gaming Act, an individual may request to be prevented from entering a gambling venue or participating in certain gambling activities. Called self-exclusion, people can nominate to be excluded from an individual venue or activity or from all venues in the state. Although people can nominate to be self-excluded from a TOTE Tasmania outlet this is not covered by legislation and people are unable to exclude themselves from a race course.

At the end of February 2005, 314 people were self-excluded under the Act (Fenton, pers. comm., 2005a). Women account for around 60% of those self-excluded (Tasmanian Gaming Commission, 2003-04). There are also Venue Operator, Third Party and Police exclusions, which are imposed by a third party onto a person because of the effects of their gambling-related behaviour on the venue or their family or because of legal matters and together exclude a further 148 people (Tasmanian Gaming Commission, 2003-04).

There is no set time period for a self-exclusion. The standard exclusion agreement is for 3 years although a person can nominate for any time period and can choose to revoke the exclusion at any time by providing written notification to each of the specified venues. A common practice is for the revocation notice to be signed at the same time as taking out self-exclusion with the revocation coming into effect three years later.

Gaming venue operators are legally obligated to ensure a self-excluded person does not gain entry to a venue, with provision for a fine of up to \$10,000 for the operator, \$2,000 for venue employee, and \$2,000 for the self-excluded person if the exclusion order is breached. To date, there have been no prosecutions made for breaching a self-exclusion (Fenton, pers. comm., 2005b). Exclusions are administered by the Liquor and Gaming Branch of Treasury, who are responsible for oversight and enforcement and administer all third party exclusions, in conjunction with the Australian Hotels Association, who distribute exclusion notices.

### **Problem gambling**

About 80% of adult Australians participate in some form of gambling activity and 40% of adults gamble at least once a week (Productivity Commission, 1999). However, the Productivity Commission (1999) estimated that around 2% of the Australian adult

population has difficulties in controlling their gambling and that about 26% are under 25 years of age. For some people, this means their entire pay check being spent in a night of 'entertainment' and the next 13 days focused on trying to 'win' back the money lost.

Definitions on what constitutes problem gambling vary, with some definitions emphasising psychological features such as addictive behaviour that requires medical treatment while others focus on the negative impacts experienced by the person gambling. The Productivity Commission's (1999) view is that problem gambling is gambling that causes harm to an individual, their family and community.

Recent Australian research has found that study participants "defined problem gambling by the fact that they spent excessive amounts of time gambling to the neglect of social relationships and other activities; others defined problem gambling by the fact that they were not being honest with loved ones" (McMillen et al, 2004: 149).

There are many factors that can contribute to someone developing a gambling problem, including boredom, social isolation and depression. Gambling problems can arise directly from the nature of the rewards offered by gambling and misperceptions about the chances of winning. Australian studies show that problem gambling today is recognised as something that can develop over time regardless of the mental health of the person and that gender, ethnicity, education and income are not factors that affect the likelihood of someone developing a gambling problem (Productivity Commission, 1999). Rather, "regular play on a continuous form of gambling, such as gaming machines, is a very significant risk factor" (Productivity Commission, 1999: 6.55).

There are a number of behavioural or psychological tests, or 'screening tools', that attempt to measure whether a person has a gambling problem. These tests are also used by governments to measure the prevalence of problem gambling in the population. The most common test used in Australia is the South Oaks Gambling Screen (SOGS), which asks questions primarily about financial aspects of the person's lifetime gambling behaviour. To register as a 'problem gambler', a participant must answer yes to at least five questions. Technically, someone who 'chases losses', usually or always gambles more than intended and admits to having trouble controlling their gambling would not register as a 'problem gambler' even though they and their family may consider them to have a serious problem. The Productivity Commission (1999: 6.43) warns that if SOGS is used it needs to be "interpreted carefully and augmented by other information on the harmful impacts of gambling". Another common test is the DSM-IV, which places greater emphasis on psychological aspects of problems and which also requires 5 positive answers to register "persistent and maladaptive gambling behaviour" (Productivity Commission, 1999: 6.19). A number of alternatives to SOGS and DSM-IV are being trialled in Australia.

The Tasmanian Government relies on irregular state-wide telephone polls of approximately 1000 adults (held in 1994 and 1996 before the extension of poker machines into hotels and clubs and in 2000 after the extension) based on SOGS to provide it with a measurement of prevalence of gambling problems. The most recent phone poll, held in 2000, suggests that 1% of the adult population has gambling

problems (Roy Morgan Research, 2001), which the Government considers to be “relatively low” (Crean, 2003).

On the basis of the 2000 phone poll, approximately 3,000 adult Tasmanians have a gambling problem. However, for each person with a gambling problem, there are likely to be a further 5 to 10 people affected (Productivity Commission, 1999). This means that between 15,000 and 30,000 people may be experiencing difficulties due to another person’s gambling in Tasmania and thus, between 18,000 and 33,000 people may be affected by their own or a family member’s gambling.

Tasmanian research confirms that the impact of gambling problems extends to family and friends. The 2000 Tasmanian phone poll revealed that 5.6% of people surveyed considered that there were gambling difficulties in their family during the preceding 12 months (Roy Morgan Research, 2001). A 1998 postal survey of 15,112 people found that 10.5% of respondents thought that a family member or friend’s gambling had affected them and 4.9% thought their own gambling had been a problem (Health & Wellbeing Outcomes Unit, 1999).

However, prevalence studies conducted by telephone and based on SOGS underestimate the extent of the problem. In a national survey of clients of problem gambling counselling agencies 24% of people said that prior to having attended counselling they would refuse to answer a survey about gambling and only 29% of those who would have answered a survey said that they would answer honestly (Productivity Commission, 1999). Surveys conducted by telephone will potentially exclude some disadvantaged or marginalised groups. A recent survey of emergency relief clients in Tasmania found 45% of respondents had no home phone (Madden, 2004). Anglicare’s research has also indicated a high level of transience in the housing of people in financial crisis and on low incomes (Madden, 2004; Cameron, 2002).

While measures of the prevalence of gambling problems suggest low incidence, the cost of gambling problems to individuals, families and communities is high. A participant in a study of clients of problem gambling services in Victoria stressed the need to value the personal experience over statistical measurements when considering the problem:

*“Don’t attack the problem from the point of view of statistics. Saying two per cent of the population are problem gamblers only trivialises the problem. The fact that I’ve done time, I’ve lost relationships, and I’m in counselling - that’s what they should be talking about; about how it f\*\*\*s up people’s lives” (New Focus Research, 2003: 54).*

The share of expenditure accounted for by people with gambling problems is estimated at 33% for wagering, 19% for instant ‘scratchies’, 11% for casino table games, 6% for lotteries and 42% for those regularly using poker machines, with an average share of expenditure across the gambling forms estimated to be 33% (Productivity Commission, 1999). While these figures are estimations, this means that a small number of people are experiencing large financial losses (see Box 1).

### **Box 1: Money lost to gambling in Tasmania by people with a gambling problem**

Total expenditure on all forms of gambling in Tasmania in 2002-03 was \$271 million (Tasmanian Gaming Commission, 2004). The Productivity Commission (1999) estimates that people with a gambling problem account for approximately 33% of total expenditure. According to Tasmanian Government estimates, about 3,000 Tasmanians have a gambling problem (Kons, 2003; Australian Bureau of Statistics, 2001). This means that 3,000 Tasmanians are estimated to collectively lose \$89 million dollars (33% of total expenditure) each year. This is an average of \$30,000 for each 'problem gambler', approximately double the median annual income in Tasmania (Australian Bureau of Statistics, 2001).

### **Problem gambling and poker machines**

Poker machines are more likely to lead to gambling problems than any other form of gambling (Productivity Commission, 1999). This is in part due to the increased accessibility of the machines: availability in local venues and their long opening hours, appealing and easy to use machines and the small initial outlay required to gamble.

Over the past eight years, 2,292 poker machines have been rolled out into hotels and clubs in Tasmania (Fenton, pers. comm., 2005a) and the number of poker machines in the two casinos now stands at 1,279. Thus there is a state-wide average of one poker machine for every 87 Tasmanians of gambling age (Australian Bureau of Statistics, 2001).<sup>6</sup> Total expenditure on poker machines in hotels and clubs in Tasmania is approximately \$112 million (Tasmanian Gaming Commission, 2004).

While Tasmanian legislation ensures that poker machines return an average of at least 85% of turnover to players as winnings, over a course of a day of use a machine could return a vastly higher or lower percentage. Actual player wins and losses and the time it takes to lose a set amount of money vary greatly between sessions and machines.

Research indicates that people with gambling problems hold unrealistic and at times ritualistic or superstitious beliefs about poker machine gambling. A survey in Victoria of 1017 young people found that 10% believed that you could "win at the pokies if you adopt the right system" (Moore and Ohtsuka, 1998 reported in Productivity Commission, 1999: 42). A 'system' may involve playing the same machine all day, pressing the buttons in a certain way, playing a certain number of lines, stroking the machine, or placing a 'lucky charm' on the machine (Productivity Commission, 1999; Surgey, 2000; Guilliat, 2005). However, "each game played on a machine is independent of results from past games – machines which have not paid out for some time have no higher chance of paying out now or in the near future (and vice versa)" (Productivity Commission, 1999: 42).

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<sup>6</sup> Note, the 2001 census lists 311,098 Australian citizens aged 18 years and over in Tasmania. Thus, people who are not Australian citizens have been omitted from this calculation.

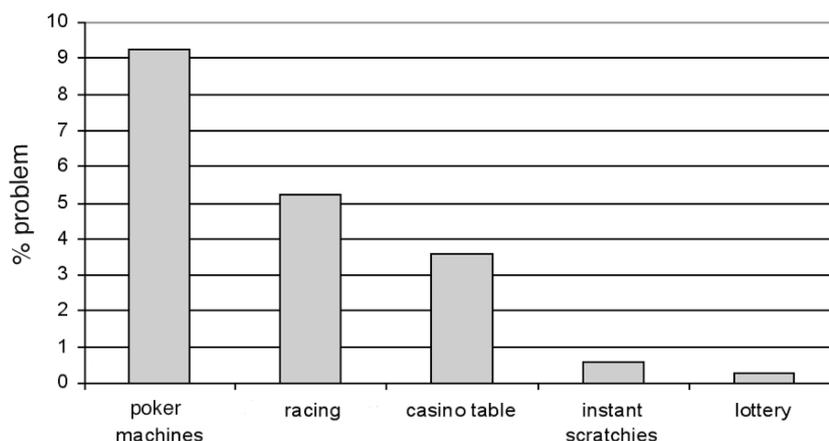
For some people, playing the poker machines can be a “mesmerising, seductive experience”; the machines may even be thought of “as a lover, a best friend, a soul mate and a confidante” (New Focus Research, 2003: 9).

According to the Australasian Gaming Machine Manufacturers Association Australian-style poker machines are “the most exciting and popular ‘state-of-the-art’ gaming machines in the world” (Productivity Commission, 1999: 11). Australian poker machines “generally allow much more intensive play, posing potentially higher risks for problem gambling” (Productivity Commission, 1999: 11).

There are a number of technical features of poker machines that enhance the likelihood of problems arising. Intermittent ‘winnings’ in machine credits or cash that are returned to the player, small ‘wins’, ‘near wins’ or ‘near misses’, the ‘free spin’ or ‘free play’ features of some poker machines and the speed and sound of machines are thought to influence gambling behaviour because they “reinforce the thinking that a win is ‘just around the corner’” (Australian Institute for Primary Care, 2004: 76).

As shown in Figure 5, the Productivity Commission (1999) estimated that approximately one in ten regular poker machine players experience problems with gambling, which is roughly double the rate for people who regularly bet on races and nearly three times the rate for regular casino table game players.

**Figure 5: Percentage of regular players experiencing a problem with their main form of gambling**



Source: Productivity Commission, 1999: 6.54

### **Low income earners and the impacts of problem gambling**

Many Tasmanians have low levels of income and struggle to pay their bills. Almost 40% of Tasmanians rely on Commonwealth Government pensions and benefits as their main source of income (Australian Bureau of Statistics, 2003). In a Tasmanian study nearly a third of respondents experienced difficulty meeting their financial needs particularly in the payment of utility bills and 40% indicated that they would not be able to raise \$2,000 in a week for an emergency, which is a strong indication of the level of their poverty (Health & Wellbeing Outcomes Unit, 1999).

The Productivity Commission (1999) found that 70% of people they surveyed who had a gambling problem spent more than they could afford and 40% of people attending problem gambling counselling spent more than 50% of their household income on gambling, which often resulted in borrowing money or selling property. While the Productivity Commission did not find correlation between level of income and the likelihood of problem gambling, people on a low income who have a gambling problem or someone in their household with a gambling problem are likely to experience particularly severe financial impacts because they have few resources to buffer them against financial losses.

### **Services in Tasmania for people with gambling problems**

Government-funded service responses to people with gambling problems focus on a telephone helpline, counselling services, group support and community education and health promotion.

Help for gambling problems is provided by the state-wide Break Even Network, administered through the State Government's Gambling Support Bureau in the Department of Health and Human Services and funded from the Community Support Levy at a cost of approximately \$800,000 per year. The Break Even Network commenced operations in October 1996 and consists of a 24-hour telephone crisis counselling and referral service, group support sessions and counselling services. No fee is charged to clients for these services. Break Even services are provided under a three-year contract and are currently undergoing evaluation.

In the past 4 years, up to 80 people a month have been first time callers to the Break Even telephone crisis service provided by Gambling Helpline Tasmania (Gambling Support Bureau, 2003). The Helpline provides direct counselling, referrals to Break Even services and gambling related information by mail. In 2002-03 the most common form of gambling for people calling the Helpline was poker machines (Gambling Support Bureau, 2003).

Gambling and Betting Addiction Inc. (GABA), which is a community-based non-profit organisation, was established in 1990. It has received funding from the CSL since 1997 and runs weekly group support sessions in Glenorchy, Hobart, Launceston and Devonport. GABA has recently started a group session for people with gambling problems who have been released from prison. Approximately 20 to 50 people, including people who gamble and people affected by another person's gambling, attend GABA sessions each month (Gambling Support Bureau, 2003). GABA provides information, support and guidance within both an addiction and public health framework.

Since 1997, Anglicare and Relationships Australia have provided professional personal and family counselling services in Hobart, Launceston, Burnie and Devonport, with outreach to other areas as required. Anglicare also provides financial counselling state-wide under Break Even. Generally, new clients will be seen within 2 days of initial contact and are able to make appointments for up to 10 counselling sessions although it is possible to negotiate to extend the services. Between 80 and 150 people, including people who gamble and people affected by another person's gambling, attend counselling sessions each month (Gambling Support Bureau, 2003).

Counselling treatment may involve a range of techniques including self-help (for example, making agreements to limit gambling activity) or cognitive therapy (designed to correct misconceptions). Many people with gambling problems experience other significant problems which need to be taken into account in counselling. Service providers have reported that “clients come to them when all else has failed; when they realise that they cannot keep chasing to pay the bills, when they are served with a notice to vacate, or as one service provider said: ‘when the shit hits the fan’” (New Focus Research, 2003: 55). A key outcome of Break Even counselling may be in helping the client through their immediate financial crisis.

*“Access to discretionary funding is a crucial resource in problem gambling services as a means of reducing clients’ immediate distress, and ‘buying’ time for clients to more calmly evaluate their situation” (New Focus Research, 2003: 11).*

However, it is clear that a range of service responses is required (Productivity Commission, 1999). Recent research in other states found that many people with gambling problems did not attend counselling sessions or, for those who did attend, only a small percentage had a positive response (McMillen et al, 2004).

McMillen et al (2004: 162) suggest that while counselling remains an important option for some people, there is a need for a more holistic approach to “strengthen community resilience to gambling related problems”. This approach could include a range of support options reflecting client diversity. In particular, “greater attention needs to be given to the limitations of the exclusive, routine application of Anglo-centric counselling techniques and to the communities’ preference to develop their own solutions around family and social networks” (McMillen et al, 2004: 165). By broadening the strategies, people who would not choose counselling may also find assistance.

Outside of the Break Even Network there are Gamblers Anonymous (GA) meetings, which offer weekly self-funded group support in Hobart and Launceston on the 12-step abstinence model also used for alcohol addiction, and Holyoake, which offers support programs for family and friends of people with gambling problems.

People may also seek help for their gambling problems from generic community services such as their local general practitioner, psychiatrist, social worker, or employment or community service agencies. In particular, because of the level of trust that can develop, a person’s general practitioner “can play a constructive role in providing appropriate support and referral to other relevant groups in the broader scheme” (McMillen et al, 2004: 163).

General community organisations may become aware of gambling problems because in the process of providing assistance for financial or personal problems they become aware of unexplained gaps in a person’s budget or the presence of a high-interest debt. Workers report that their clients rarely identify gambling as a problem up-front because of the social stigma associated with it. Services provided outside of the Break Even Network are not included in government statistics of the costs and impacts of gambling and there is little concrete information about the impact of gambling on people who

attend these services or the impacts on these services from providing assistance. However, the Burnie crisis accommodation facility Oakley House estimates that a third of its clients have gambling problems and that these clients are often particularly difficult to place because of accumulated debts including rent arrears (Sager, pers. comm., 2004) and the Hobart Benevolent Society estimates that they provide 18% of their emergency relief services to people affected by gambling problems (Knox, 2001).

While most community services are aware of Break Even services, some services do not have relevant information about Break Even or self-exclusions and are unaware that these services are provided free of charge.

The Gambling Support Bureau provides community education initiatives through distributing information to general practitioners and health and community organisations about responsible gambling and services that assist people with gambling problems as well as promoting these issues through various directories, on shopping docketts and occasionally in print media. Gambling information provided by the Bureau is based on a public health model. The Bureau's website includes self-help material and links to relevant research and reports.

In 2003, the Gambling Support Bureau ran an extensive media campaign including television, radio, newspaper and cinema advertisements and bus and taxi posters, which increased awareness of support services for gambling problems and increased the use of the Break Even Network services (Gambling Support Bureau, 2003). The number of first-time callers to the Helpline increased by 50% during the period that television advertisements were run.

The Bureau also has responsibility for managing research into the social impacts of gambling to inform government policy, the industry and community, and to manage research into best practice service delivery. The Research Reference Group, which is supposed to advise the Bureau on research directions and priorities, has been inactive for a number of years.

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## SECTION THREE: WHY GAMBLE?

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While each person interviewed for this project had a story of gambling that reflected their own personal circumstances, a number of themes emerged that indicated some uniformity of experiences of gambling and of the problems that arise from it.

Participants in this research identified various aspects of gambling that attracted them, including escaping boredom or loneliness and starting off gambling with friends or family as a social outing or as children with their parents. An important factor for participants was their need to disassociate from daily stress. The majority of participants explained that after their first 'win' their experience of gambling was different.

### **That first win: from social to problem gambling**

Most participants said that gambling was at first 'only social' but that their first 'win' changed their experience of gambling, which they now recognise as being a problem. The definition of a win was not explored with participants and may not have taken into account the cost of achieving that win.

*I used to go and play poker machines with girlfriends and we had fun; we won, it was great, it was never addictive, it was great ... Then we put \$10 in the machine and it was our last \$10 and we won \$1,500. That was quite a few years ago, you can imagine the excitement! I got my kids new bedroom suites. That was great. (Fiona, mixed gambling)*

*I started going with friends to the casino. I started winning then I won \$5,000 to \$6,000 ... I bought brand new things for my flat and the kids. That's how the gambling first attracted me when I won large amounts of money in a space of 6 months or so ... Then I sold everything I had bought new to continue gambling and pay bills, but mainly to gamble. (Anna, mixed gambling)*

*It was amazing, it all started after a big win of \$1,200 on the pokies. I think it is like offering a lollipop to a baby. It is presented in an irresistible package. The temptation is there and it is hard to resist ... It was like [my wife] was hypnotized with the machines. (Jeffrey, ex-partner, poker machines)*

### **"My parents gamble"**

A number of participants were exposed to gambling when they were under 18 years of age, when they either gambled at home with parents or accompanied parents to gambling venues. Although gambling by minors is prohibited by state laws, a study in South Australia has shown that many people who have developed a gambling problem in their twenties started to gamble when they were underage (Relationships Australia South Australia, 2004) and a study of juveniles incarcerated in New South Wales for burglary found that 12.5% of non-heroin users spent some or all of their burglary money on gambling (Small, 1999).

*I started going to the casino when I was 14 or 15 with my parents every Friday. I started by filling out a keno ticket and my parents would put it on for me and I would win about \$42 which was a lot of money to me ... Then I used to bet a lot on blackjack which I was pretty good at ... I could tell mum what to do so I would actually be gambling but she would be touching the machines ... But then they barred me from playing blackjack ... When I was 16 I then progressed to where my parents had a phone account on the horses, where I was able to ring up and place bets on the phone account myself. Then I came into a lot of money and dabbled into drugs as well ... Then the machines became a problem where I couldn't even pass them to get to the blackjack tables. (Jason, mixed gambling)*

*We started doing 20 cent bets at my nan's and quite often I'd win. My dad had a really bad gambling problem and used to bash my mum up. I started going to the casino with him when I was 12 and I still go, not often. (Kate, poker machines)*

### **Boredom and loneliness: two drivers to gamble**

Research has shown that boredom and loneliness are significant reasons why people gamble (McMillan et al 2004; Brown & Coventry, 1997). Boredom, loneliness, stress and anxiety were the primary motivations to gamble for women who called the Victorian problem gambling telephone counselling service (G-Line, 1996, in Brown & Coventry, 1997). Boredom and loneliness may be because a person feels frustrated with their ability to undertake social or work-related activities or because of there being few social opportunities available in which case “gambling provides an opportunity to enter briefly an alternative ‘play-world’” (Brown & Coventry, 1997: 15).

Some people hope that gambling will lift them out of boredom and loneliness and provide them with opportunities to socialise. However, while ‘regulars’ generally ‘know’ one another, gambling venues are “communities without interaction, the jangle of an EGM [electronic gaming machine] paying out the only way to awaken people ‘mesmerised by the machine’” (New Focus Research, 2003: 39).

The Tasmanian gambling industry markets itself as entertainment “for your enjoyment”, “enjoy the excitement”, “more new games ... you can play with a friend”.<sup>7</sup> Greg Farrell, Managing Director of Federal Hotels, the company which owns all poker machines operating in Tasmania, told Tasmania’s Parliamentary Standing Committee of Public Accounts that “the advertising for Oasis [venues outside of the casinos which have poker machines or keno] is about quality fun entertainment venues” (Farrell, 2003).

Participants in this research also spoke of using gambling as a way to overcome boredom and loneliness.

*It was the novelty. It was on our back doorstep. [I was] bored. Friends asked us to join them. (Patricia, poker machines)*

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<sup>7</sup> For example The Midcity Hotel Hobart, <http://www.ozhotels.com.au/hobart.php>; Argosy Motor Inn, <http://www.wotif.com/Argosy-Motor-Inn.html>; Wrest Point Casino, <http://www.wrestpoint.com.au/page.php3?sigID=55&seclD=1>. Accessed 5.4.05.

*I was playing the pokies for I don't know how long. I would go there out of boredom. I would have a row with my boyfriend and I would put the money in the slot and feel better. Then I would lose it. I would lie to get money and I don't feel good about that. (Belinda, poker machines)*

Participants in this research described getting into gambling because they had moved to a new town and had lost their social or family networks. Research has found that people with a gambling problem have identified that times of significant change, social isolation, dislocation from family networks, or stress has played a critical role in the development of their gambling problems (McMillen et al, 2004).

*Then my partner and I ended up splitting up and I moved back down here because my parents live up the north of the state and I got work down here. Because I didn't know a lot of people here I ended up going to the machines because that's what I knew from Sydney. I was doing it not really trying to win money, a lot of the time it was just something to do like a hobby which sounds terrible because it can never be a hobby or an interest. (Douglas, poker machines)*

*I came into this strange town [Hobart] and I'm 10 minutes from the casino ... People are different [in Hobart] and I was getting rejected with jobs and I just felt really strange and the only time I felt comfortable was at the poker machines. I could block it all out. I didn't have to face it. (Fiona, mixed gambling)*

The problems of loneliness and social isolation are exacerbated if a person has a disability which makes social interactions challenging for them. Although Carole's son receives support from the Tasmanian Acquired Brain Injury Service (TABIS) and participates in a number of community activities, his acquired brain injury makes social situations difficult for him. Conversely, it makes poker machine venues attractive to him.

*As soon as [my son] turned 18, the first thing he wanted to do, was go to the casino and play the pokies ... I think out of boredom and the excitement he gets out of winning. You don't need to interact with others which he feels is good because he has difficulty in interacting ... I don't know many people that engage in conversation sitting on the machines. I wouldn't call it entertainment, I would call it filling in time for my son and if he loses all his money he just feels lousy. (Carole, mother, poker machines)*

### **Into a dream world: an escape from stress**

There was a strong sense amongst most participants that they were in a "dream world" or "world of my own" when they gambled, that gambling provided them with an "escape" or "time to myself", of "losing track of time" and of feeling "peaceful" and "relaxed". These findings are consistent with other studies (McMillen et al, 2004; New Focus Research, 2003; Surgey, 2000).

*You live in a dream world. You win or lose, it doesn't really matter. Then I said I will shake myself out of it but you keep going. (Murray, races)*

*I felt that when I was behind the machines I had no personal problems. I would forget about any worries I had until I walked out the door and lost all the money I had and realised I had to pay the Hydro. I didn't have any money to pay any accounts. This went on for months ... When you are playing on the machines, nothing else matters ... It is like you are in a world of your own. You don't have to think or feel. It is the only way I can express it. (Patricia, poker machines)*

*I keep going to the pokies because for me, I have escaped. I have escaped from the children, the worry of the bills etc ... It gives you a sort of hypnotic sense too where you get in front of that machine and you can't walk away. (Josephine, poker machines)*

### **The attraction of poker machines**

*I don't know why I gamble, I can't win. There's something that draws me to the machines. There's always that chance you can get that big jackpot ... I know I can't beat the machines but something keeps drawing me back, I don't know what it is. The jackpot has to come my way sometime ... I can't stop. I know I am doing the wrong thing every time I go in to the machines. Maybe it is the noise or the hope I will get the big jackpot. (Mark, poker machines)*

A number of participants spoke of their life totally changing once they started playing poker machines regularly. This was a feature of previous research also (New Focus Research, 2003; Brown & Coventry, 1997; McMillen et al, 2004; Productivity Commission, 1999). Poker machines have “dramatically changed the landscape of gambling in Australia, through their sheer immediacy of play, and their ubiquity in pubs and clubs around Australia” (New Focus Research, 2003: 33).

Participants described the consequences of their shift from other forms of gambling to gambling on poker machines.

*[After 15 years gambling] I got onto poker machines about 5 years ago and there is no other word for them than one arm bandits. (Jamie, poker machines)*

*Then the pokies came along and that became a real trap for me ... It was the belief that you could win. (Ben, mixed gambling)*

*I started off at the casino about 15 years ago. I'd have \$8 worth of keno for the day and I would go home happy and then one day I thought 'that sounds easy to win money on the machines'. Tunes were playing and money was dropping and I put in \$3 and I went home with \$7 ... I went down the next day with \$20 and lost that and I didn't even get a win. I thought the next day I will go down with another \$20 and get that back and then I started playing \$40, then it went up to hundreds and then I kept chasing and chasing it until I got totally addicted. (Geraldine, mixed gambling)*

The attraction of poker machines for people is not surprising. Poker machine music is designed to condition players' responses. Composers design “winning sounds”, “losing sounds”, “waiting to put more money in sounds”: a syntax of sounds that

condition people to play the machines (ABC Television, 2004). Participants reported the powerful effects of this auditory and sensory conditioning.

*I think it is the music in there and the lavender oils; they make you feel really relaxed and calm. (Anthony, poker machines)*

*I have a favourite machine but it doesn't matter. They can make beautiful sounds. I would even make up a story about the machines ... Some of them almost talk to you. The sound is very appealing and the colours of the machines. Also winning the jackpot is good. (Anna, mixed gambling)*

*I can still hear the machines ringing in my ears when I have long walked away from them. (Lizzie, poker machines)*

*I hear those tunes in my head every night when I go to bed and it is a real problem for me. (Josephine, poker machines)*

*I like the little sounds of the machines, I like visual things. I feel that they are friendly. The free games are a genius to keeping you there playing because it is like Christmas, opening a package wondering what you are going to get. (Kathy, poker machines)*

The experience of participants who gamble on poker machines that poker machines are particularly pervasive and influential in the development of their gambling problems is supported by statistics collected by problem gambling services. The majority of people seeking counselling help for gambling problems gamble on poker machines and spend more time and money on poker machines than other forms of gambling (Department of Human Services, 2003; Department of Human Services, 1999). In 1998, after only one year of poker machines operating in hotels and clubs in Tasmania, 72% of clients of Break Even services were users of poker machines (Tasmanian Gaming Commission, 1998).

### **Identification of the problem**

The relative nature of the definition of problem gambling poses difficulties for those for whom gambling has a grip on their lives and for their families and friends.

As Ben explained,

*You can see who is a desperate gambler but of course you don't know how deep in trouble they are. You can't determine who is suffering and who isn't. (Ben, mixed gambling)*

In this study, participants were asked to explain how they identified that they had a problem with their gambling. It seems that financial crises such as being unable to afford food or pay bills were key triggers for many participants to realise that they had a problem with gambling.

*What changed me this time around was going into St Vincent's to ask for bread and milk. It was then I thought 'enough is enough'. (Patricia, poker machines)*

*I think that is when you know you have a problem, when you start selling stuff, not buying food and not paying the rent and things like that. I know I have a problem where I do the wrong thing like that every now and then. (Kate, poker machines)*

*When we were threatened with eviction, [my ex-wife] admitted she had been gambling instead of paying the rent. When there was no food in the house and she admitted she had been gambling and not buying groceries; that is when I realized there were major problems. Her reaction was to be very upset and tearful and guilty for what she had done. However, when she did have money she couldn't stop herself from just that chance of having a big win. (Jeffrey, ex-partner, poker machines)*

Losing relationships and a feeling of “loss of control” over their lives were also identified as critical signals for participants to recognise that they had a gambling problem.

*I probably realized when I would go in and I could say I can afford to lose \$20 that's fine but then I would stay and keep waiting to regain what I lost. Then leaving, feeling really bad. It's the light, the music, the jingles, the free drinks etc. It was one day when I put in \$100, \$120, and I thought 'oh no what am I doing? Why didn't I stop myself?' (Maureen, poker machines)*

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## SECTION FOUR: IMPACTS OF GAMBLING PROBLEMS ON FAMILY

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*It is almost like there are 2 worlds – normal people and people with various addictions. I class myself as a normal person but my family look upon me as just Ben the gambler. I feel the spotlight is just on that part of me. (Ben, mixed gambling)*

The effects of gambling problems on families are broad ranging and complex but overwhelmingly destructive. A common theme identified by people who gamble and family members of people who gamble was increased stress leading to the breakdown of relationships between partners, parents, children and siblings. In some cases, people who gamble feel that they are no longer seen as a brother or sister or parent or child because their identity and relationship has been consumed by the gambling.

The themes found in this study confirm previous studies; many people with gambling problems are “unable to look after the interests of their families sufficiently” (Productivity Commission, 1999: 7.26).

### **Relationship stress and breakdown**

A national survey on gambling found that nearly 20% of people with gambling problems felt they did not spend enough time with their family and 42% of people with a gambling problem had argued with family over money in the last year (Productivity Commission, 1999). The figures for regular gamblers who did not have a gambling problem were 1% and 4% respectively. The survey also found that people with a gambling problem experienced higher rates of relationship break-ups than people who do not have problems gambling (Productivity Commission, 1999).

Participants in this study cited arguments, dishonesty about their gambling activities and the constant lack of money resulting from gambling as placing great stress on families and relationships. Family members were also faced with dealing with their loved ones’ attempts at suicide.

*Sometimes we have arguments about it because I am trying to convince [my partner] not to do it, not to go there. Sometimes she insists on going or begs me to go. (Nick, partner, mixed gambling)*

*Well, I won't talk to [my partner]. I will say that I am not keeping him for the fortnight and remind him he won't get paid for another fortnight. I will get the kids things and I will go without myself so the kids have things. We just won't talk and we will have a bad relationship. (Jackie, partner, poker machines)*

*One night I had gone through about \$4,000. I had a packet of Valium and a packet of Seropax. I couldn't tell [my husband] how much I had lost, so I took the whole lot of the tablets. He took me to hospital and at that stage he didn't know why I had taken the tablets. (Patricia, poker machines)*

Participants spoke of a direct link between gambling, the stress on family and partners and the breakdown of that relationship.

*Oh, [gambling] has wrecked everything. My marriage has gone and I have been divorced since the end of 1999. We had properties together but they have gone and been sold off. I am currently bankrupt and have been for 3 years. It is pretty awful ... [My wife] had an inkling but it all came out in the divorce proceedings. We get along fine but the reality is the whole world I had is now gone. (Ben, mixed gambling)*

*I can't hold down a relationship because of gambling. I will say I am just going down the road to get some bread or milk and I will find myself in an Oasis venue and lose all track of time ... I broke up with the mother of my children because of my gambling. (Jason, mixed gambling)*

*We have separated now and have been for 12 months and [my ex-wife] still gambles. It was very destructive. I don't like the disruption it makes to families and I don't like the way it turns people into liars. It brings so much stress and anxiety to family life and everyone suffers. (Jeffrey, ex-partner, poker machines)*

### **The impacts of gambling problems on children**

Research suggests that for every person with a significant gambling problem there is on average 0.6 children living in the same household (Productivity Commission, 1999). Thus, Australia-wide there are an estimated 174,000 children living in households where someone has a problem with gambling. In Tasmania, an estimated 2,000 children live in a household affected by problem gambling.<sup>8</sup> A significant number of participants in this study spoke about the impacts of their parents' gambling on them as children when they experienced a sense of neglect as a consequence of insufficient food or because of family instability due to gambling.

*"The most immediate concern for children's welfare in problem gambling households is poverty. Problem gambling eats up resources that otherwise would be spent on all household members – from family entertainment, a serviceable car, a pleasant home, holidays, even food" (Productivity Commission, 1999: 7.31).*

Recent research has found that women with a gambling problem "tend to compromise their commitment to themselves and their families, preferring to skip small luxuries than not gamble, or, in some cases, resort to illegal activities to fund their gambling" (Brown & Coventry, 1997: 2) and that their children are likely to experience poor nutrition (New Focus Research, 2004).

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<sup>8</sup> This is based on the Roy Morgan Research (2001) figure of 1% of the adult population in Tasmania experiencing gambling problems.

Studies have found that children of people who gamble may feel abandoned, angry, depressed and suicidal as a result of the impacts on the family of a parent's gambling. The relationship between the child and the parent who gambles may change with the child experiencing a loss of the parent both physically and emotionally. Children may experience a 'pervasive loss' as the family loses financial security and family harmony and experiences increased isolation from extended family (Carrig et al, undated).

The Productivity Commission reported intergenerational consequences, with children who have a parent that gambles being more familiar with the culture of gambling, and being more likely to develop a problem themselves. "This means that the potential cost of a new 'case' of problem gambling is greater than might be expected - because it increases the likelihood of future cases" (Productivity Commission, 1999: 7.37). However, McMillan et al (2004) caution that a family history of gambling does not necessarily lead to problem gambling.

While assessing causality is complex, some participants in this research identified patterns of neglect in their childhood and at times clearly linked this to their parents gambling problems. Research indicates that such experiences have long-term and negative consequences for children, such as low academic achievement, low economic wellbeing, homelessness, mental and physical health problems, problems forming social relationships, poor emotional regulation and poor control (Williams, 2002). Children who have been neglected are "more likely to be self-absorbed, withdrawn, passive and depressed" (Williams, 2002: 7).

Deborah is 38 years old and has been gambling for 26 years, since her father used to place bets for her as a child. She has 3 grown children.

*My father used to have a gambling problem. How it affects me is obviously the influence from my father over the years but the effect was a lack of money and a lack of certain needs such as clothes, toys and food. Also two others in my family gamble. (Deborah, poker machines)*

While Tracey started gambling as an adult, she feels her parents' gambling affected her. She has now been gambling for 11 years and been seeing a counsellor for her gambling for 10 years.

*It is very hard and people just don't understand. Both my parents are competition addicts and so it is very hard. (Tracey, mixed gambling)*

When asked about the impact of his gambling on his family, Anthony spoke of his 9-year old son imitating his own gambling behaviour.

*It is the kids. [My eldest son] is going to school having bets on various things. (Anthony, poker machines)*

Participants in this study who had dependent children were often devastated by the effects of their gambling on their children and spoke of their children going without food or adequate care because of the gambling.

*The kids have gone hungry and gone without and that's where I have realised, that it's not right and I've left them at home in my house, on their own, doors unlocked, so that I can get in quietly when I get home at 2 am or 3 am in the morning without waking the neighbourhood. I've actually left those children at home where anything could happen to them to go off and gamble. I am ashamed of that, I am disgusted with myself that I have done that, but the compulsive need has been there to go out and try and get a little bit extra, even though I know I'm not going to get that extra money, I am going to blow it every time. (Josephine, poker machines)*

*The cupboards always seem to be empty and the kids see that. I promise the kids that I won't go near the pubs but then I go and have a drink and then I [gamble]. (Carla, poker machines)*

*The main point is that the bills are not getting paid. Then you try and rob Peter to pay Paul which just gets you further and further behind. [The children] probably miss out on things they should get. I do lie when they ask me how much money I spent or lost. (Kate, poker machines)*

*[Gambling] increases the stress in the family because there is not enough money to pay the bills ... The kids were exposed to a lot of anger and violence and arguments so I think that was worse than not having enough food. (Jeffrey, ex-partner, poker machines)*

Participants spoke of losing the trust of their children, a theme also identified by McMillen et al (2004). This was a source of great shame and distress for them.

*Sometimes I go into my daughter's room to get money but she sleeps with her wallet under her pillow so I can't get it. (Anna, mixed gambling)*

*As a result of all of this, I've lost 2 things that are very dear to me. [The first is] my 14 year old's trust in me because I have gone through her bank account and cleaned it out. She earns her own money and I will go into her room when she goes to school and grab every cent I can and I am off down to those pokies again. She is frightened now and when she gets her money she goes out and spends it on whatever junk she can find because she knows mum will get it if she doesn't. She can't hide it, she can't take it to school, she's not allowed. And I have lost my own self respect. I want those things back and I am finding it very hard to earn those things back and I am trying my hardest. (Josephine, poker machines)*

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## SECTION FIVE: IMPACTS OF GAMBLING PROBLEMS ON HEALTH

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Problem gambling is associated with poor health outcomes (Productivity Commission, 1999; Australian Medical Association, 1999; Public Health Association of Australia, 1997). Various studies have found ill-health such as insomnia, headaches, stomach aches, heart pounding, 'butterflies' in the stomach, sweaty hands, shaking and nausea associated with gambling problems (Productivity Commission, 1999). As well, food insecurity may result from a person spending money on gambling rather than on groceries, and this can lead to poor nutrition and associated poor health; and the stress of losing large amounts of money and experiencing conflict with family members can lead to problems with anxiety and depression. People with severe gambling problems have been found to have an incidence of poor health twice that of people experiencing low level gambling problems (Gerstein et al, 1999, in Productivity Commission, 1999).

Gambling problems may precede depression or anxiety or be a result of it. The Productivity Commission (1999) found that about 50% of people with gambling problems had experienced depression in the previous year, with 22% of people reporting 'often or always' feeling depressed because of gambling. The Commission (1999) also found that almost all people seeking counselling help for their gambling suffered depression. These figures compare to 5% of Australian adults reporting depression that lasted 2 weeks or more (Australian Bureau of Statistics, 1998, in Productivity Commission, 1999).

### **Gambling problems and ill-health**

Participants reported that the loss of money through gambling caused them stress and often meant that they went without food or had difficulties paying bills, which caused them further stress.

*I am forever stressing, getting really worried, asking where is this or that coming from to pay the bills. (Deborah, poker machines)*

*I worry all the time and you are not eating properly, you don't sleep properly. (Sally, poker machines)*

For some participants, stress induced by gambling led to ill-health.

*I would feel washed out. My blood pressure would go up; my sugar would go up higher. I couldn't sleep, couldn't eat. I would have starved if [my sister] didn't help me out. (Belinda, poker machines)*

*I went into hospital with internal bleeding from an ulcer due to the stress of it. Also when I was working (I was a carpet layer) my mind wasn't fully on the job and so I injured myself and spent a week in hospital as a result of that. (Max, poker machines)*

*I have had a [gambling] problem for about 11 years and probably about 12 months into the gambling I had a stroke. I think that was gambling related because I had a horrible feeling the night before the stroke. I was looking at how much I had gone through and this horrible surge went through me ... [Because of gambling] my nerves are shot and I am on anti-depressants. I am on medication to prevent another stroke. (Lizzie, poker machines)*

The stress of gambling-related debt often had overwhelming effects on the wellbeing of family members.

*When we got a bill, [my ex-wife] would ring whoever and tell them she had difficult circumstances and could she pay it off in instalments each fortnight and they would agree to that. So that I didn't worry I would drink and that would lead to problems like anger and then domestic violence. I went to AA [Alcoholics Anonymous] and she went to GA [Gamblers Anonymous] and we got counselling but in the end it was too hard and we separated. (Jeffrey, ex-partner, poker machines)*

*Well when life is going well my [methadone] dose is stable but when I have trouble and problems it goes up. (Jackie, partner, poker machines)*

### **Gambling problems and mental illness**

Problem gambling is not considered to be a mental illness (Productivity Commission, 1999) but the impacts on health may be compounded for people with a mental illness, causing prolonged episodes of acute illness and a greater reliance on medication.

Some participants in this research had a medically diagnosed mental illness, ranging from psychotic disorders such as schizophrenia and bipolar disorder to depression and severe and disabling anxiety disorders. This group of illnesses is characterised by fundamental distortions of thinking, perception and emotional response, hallucinations and disorganised communication as well as mood swings and lack of motivation and planning ability (Jablensky et al, 1999). There is extensive literature showing that people with mental illness are particularly vulnerable to being trapped in a cycle of social disadvantage (cited in Cameron & Flanagan, 2004). Anglicare's recent research into the issues of poverty and mental illness found that often people with a serious mental illness experience a high level of social isolation and find it extremely difficult to participate in the community (Cameron & Flanagan, 2004). The research also found that many participants with a serious mental illness valued gambling as "a social activity, an escape from loneliness and often their only chance for social interaction" (Cameron & Flanagan, 2004: 56).

The participants in this current study experiencing mental illness reported that they faced particular difficulties in controlling their gambling. The results of excessive

gambling were particularly catastrophic for them. Participants with medically diagnosed mental illness reported that the stress of coping with gambling problems exacerbated their experiences of anxiety and depression, increasing their need for medication and support from mental health services.

*I have been very, very lucky that I haven't hit rock bottom only because I have suffered more anxiety rather than depression. But I have had the continual stress of anxiety with adrenalin pumping and the heart rate is up and I think it contributes to bad health and high blood pressure. The shaking is bad and I don't even smoke. My memory is affected. I am on various medications to keep my anxiety under control. (Tracey, mixed gambling)*

*I have had a mini break down recently. I am on anti-depressants just to keep myself on a level playing field. When I am on that level playing field I know the machines are evil. I want to keep away from them but the minute I run out of my medication I am back down there because I am hearing those tunes and they are calling me and I can't seem to help it. (Josephine, poker machines)*

*I think [gambling] is causing frustration and when it was bad I did get sick a couple of times when I had no money. It affected my mental health. When I lose I resolve not to complain or carry on, I am a bit stoic about it but it is false. I really feel like crying instead. Then I fantasize and think I am going to win. (Kathy, poker machines)*

Rex lives alone and spends the majority of his Disability Support Pension (DSP) gambling on races and poker machines.

*I have been treated for depression for over 20 years and because I live by myself and I have no social life, I can feel very down, despite the medication. So to put a bit of spark into my life I will go out and gamble with the thought of if I win, I will feel good and it does. (Rex, mixed gambling)*

However, Rex's gambling has detrimental consequences for his mental illness. This leads to visits to his general practitioner, who does not know about his gambling, or his psychiatrist, who does know.

*My anxiety increases dramatically which means I will get to the stage where I need more visits to my GP [general practitioner] or [mental health] specialist. It depends on how the day is. If something adverse happens, it is like hitting a brick wall. (Rex, mixed gambling)*

Participants with serious mental illness reported chronic food shortages as a consequence of their gambling problems.

*Now that I am only on a Disability Support Pension if I bet before I do my shopping and pay my bills, I will have a miserable fortnight. It also affects my illnesses, it exacerbates them. That's how silly a person is. You know how badly it will affect you, yet you still go and do it ... I am not talking about huge amounts. I mean I*

*have never done all my pension since I have been on DSP. I have been down so low that I haven't been able to meet my commitments and cut my allowance for food in half and virtually lived on nothing which has only made me worse.... I just have a very miserable fortnight ... I have lost a lot of weight as a result of not eating the proper food, not eating enough. (Rex, mixed gambling)*

### **“What am I going to do?” Gambling problems and suicide**

The National Strategy for Suicide Prevention, which has been adopted by the Tasmanian Government, recognises that a history of mental illness, in particular depression, is a key factor associated with the risk of suicide for an individual. Other factors include a previous suicide attempt; legal problems; loss of relationships, health, work or death of significant person; and child abuse. The risk of suicide increases if contributing factors are compounded. The Strategy emphasises the need for “understanding the relationship between current stress and the underlying vulnerabilities and resourcefulness that a person brings to a crisis” (Department of Health and Aged Care, 2000: 29).

In its national survey of gambling, the Productivity Commission (1999) found that 9% of people with significant gambling problems and 60% of those in counselling had contemplated suicide because of their gambling. The Commission estimates that the risk of attempting suicide increases the more a person is affected by adverse impacts of gambling. Ten per cent of people in gambling counselling reported to the national survey that they had attempted suicide (Productivity Commission, 1999).

Some participants in this research reported having experienced suicidal thoughts as a way of getting relief from feelings of anxiety, guilt and worthlessness.

*Well for me, I have been down to my last dollar and I don't care where I am. I have walked home from the casino at 4am in the morning. That is totally insane. I get suicidal. Sometimes I think I would do it just to feel better. (Lizzie, poker machines)*

*The worst thing is lying about where your money went, or why you can't pay your rent and lying to borrow money to make ends meet it. I am just so sick of it. Sometimes I just want to kill myself but I have promised my mum I wouldn't do it but I don't want to take the easy way out anyway. (William, races)*

*There was eight times I have counted that I could have committed suicide but that was mostly because of the relationship breakdown, which stemmed from the gambling. (Max, poker machines)*

Patricia, who reported having made one attempt at suicide which resulted in hospitalisation, identified frequent experiences of struggling with suicidal thoughts.

*[My sister and I] would talk on the way there about playing on the machines and on the way home we would talk suicide. What are we going to do? (Patricia, poker machines)*

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## SECTION SIX: FINANCIAL IMPACTS OF GAMBLING PROBLEMS

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The financial impacts of gambling problems ripple out to affect the person who gambles, their family, friends and local retailers as more and more of the person's finances go towards gambling rather than on other expenditure (Productivity Commission, 1999). The Productivity Commission (1999) estimates that, on average, people with a gambling problem spend 22% of their household income on gambling while people who gamble but who do not have a problem spend less than 2% of their household income on gambling.

Financial losses to gambling do not need to be large for the impact to be significant. In Anglicare's study, for example, reports of financial loss as low as \$15 per fortnight caused problems for participants because of their low level of incomes and lack of financial resources.

### **The concept of winning**

In a survey of gambling in Victoria, approximately 60% of people who gambled did so because of the "dream of winning" (Productivity Commission, 1999: 15). According to the Productivity Commission (1999), people who gamble have either poor awareness or biased recollections of their losses relative to their wins and tend to emphasise winning money over losing money.

Participants in Anglicare's research were asked about their biggest wins and losses whilst gambling. Participants reported that their largest winnings ranged from \$500 up to \$5,000 although they had not calculated how much money they had spent to reach the 'win' and some participants identified periods of regular gambling of up to 6 months to achieve a 'large win'. Although most participants in this study said that winning was the main thing they enjoyed about gambling, most participants were unable to hold on to any money they won.<sup>9</sup> They either gambled it straight away or found that any special purchases they had been able to make would soon be sold off to continue gambling.

*[My biggest win was] about \$500 or \$600 I think ... [I didn't spend it that night] but the next morning I was back at the pub ... There is no point to a big win because I just put it all back in. (Mark, poker machines)*

*When I was 21, I had nine cars, one boat and I owned everything. Now I have nothing, absolutely nothing. You do win, you can win, but in the long run you don't win. It's just a big, big loss. (Jason, mixed gambling)*

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<sup>9</sup> Payment of money won through gambling at a gaming venue or through TOTE is governed by the Gambling Industry Group's Code of Practice. Prizes of \$2,000 or less are paid in cash and a cheque is issued for prizes over \$2,000 but "with at least \$500 in cash" (Gambling Industry Group, 2004).

Although all participants were on low incomes at the time of this research, some had been on much higher incomes at other times in their lives. Participants reported losses of up to \$20,000 at a time or \$80,000 over a period of months, with accumulated losses totalling hundreds of thousands of dollars. For people with a problem with gambling, expensive gambling binges may result from lump sum payouts from redundancies, superannuation, marriage settlements, compensation payments or the sale of a house.

*I took a redundancy from a job that I had been in for 12 years and I virtually blew all of that. The only thing I bought for myself was a coat, out of 30-odd thousand dollars. I just went and spent it all on the pokies. (Lizzie, poker machines)*

*About 5 years ago I did \$80 000 in 2 1/2 months ... I had just finished work and got a payout ... I was taking out \$2,000 a day at one stage and couldn't wait to get near a poker machine. (Rex, mixed gambling)*

*My mum sold our house and dad got Alzheimer's and he went into a home. My mum moved in with my other sister. When the house was sold, mum got \$48,000 that was left over. My mum, my sister and I ended up gambling all of that. (Carla, poker machines)*

One participant gambled the Family Tax Benefit lump sum payment she received for her children.

*I spent both lots of the \$600 grants we got for our children, just blew it all on the pokies. (Carla, poker machines)*

### **Spending time gambling**

Research has shown that many people with a gambling problem gamble for 2 to 12 hours at a time "until the money runs out" (New Focus Research, 2003: 33). Some participants in Anglicare's study spent entire days gambling without leaving to eat or go to the toilet, sometimes avoiding drinking to minimise toilet breaks. This was especially common for people gambling on poker machines.

Patricia and Belinda are sisters and often go to the gambling venue together.

*[We would arrive] at 10 o'clock and go home about 4 or 5 pm. Sometimes [we would play pokies for] 5 or 7 hours. Depends on how much money we had. We didn't even eat or drink tea, coffee or alcohol. I don't drink. The majority of them sit there for hours. (Patricia, poker machines)*

*No, we wouldn't even go to the toilet. We would have kept playing the pokies if we had sold things in our houses to get more money. (Belinda, poker machines)*

Mark also spends many hours at the venue.

*I have been there when it opens at 9 am and there until it closes at night. I just keep on going back. (Mark, poker machines)*

When Ben was 'chasing' his losses he would go to gaming venues as often as he could, sometimes three times a day. He would drink the occasional glass of water but never eat and he would try to last up to four hours without going to the toilet. When he was skipping work, Ben would try to stay at the venue for only a short time; however, he was often surprised how long he was at the venue for.

*[I would play the pokies] until my fingers got sore. You think you have worked out the system because you are watching them for so long. But that is absolute rubbish. I could do up to \$400 in one session but then I would stop because I would be physically exhausted ... You think you have been there for 30 minutes but you will have been there for about 3 or 4 hours. It is really strange. (Ben, mixed gambling)*

### **Gambling and work**

Work performance may suffer through absenteeism due to gambling problems. The Productivity Commission (1999) found that 20% of people with a gambling problem had lost time from work or study in the previous year because of gambling while 50% of those in counselling reported lost time. People with gambling problems were also more likely to change or lose jobs than people without a gambling problem and again these figures are higher for people attending counselling. A loss of confidence or trust at work and lowered concentration and quality of work were the main impacts for people with gambling problems (Productivity Commission, 1999).

Four participants in this study had some form of paid employment at the time of the interviews. For two of these people their work supplemented their Disability Support Pension (DSP). Participants with work, or who used to work, spoke of how their gambling impacted on their employment.

*When I was a foreman in Adelaide, I used to keep the office door closed and listen to the races and of course got distracted from my work. I put bets on at work. (Murray, races)*

*I would go and sit there all day sometimes. I was losing sleep, it was affecting different jobs. I would often have to leave jobs because I was skipping work time to go and gamble. I would be doing training courses to improve my skills but I would never finish them because I would go gambling. (Graeme, races)*

*I lost [my \$900 a fortnight job] because of the gambling. I had no money to buy fuel to get to work and none to pay rent. (William, races)*

Douglas has been gambling for ten years. He started gambling socially, going to a club in New South Wales with his work mates. After a few early wins his gambling increased and he stopped doing other activities. His marriage ended and he moved back to Tasmania and is now on Newstart Allowance. Here he describes how it was for him when he was working.

*The thing is you would have 2 personalities. Like at work, I'd be happy in everything. I was in customer service and you wouldn't tell anyone at work you would hide it all. You wouldn't say anything you would keep it to yourself. (Douglas, poker machines)*

### **Prioritisation of expenditure**

People with gambling problems commonly give up personal items such as clothing, food items, and other entertainment and recreation, forgo savings and delay paying off credit cards or bills (Productivity Commission, 1999). Thus, gambling problems have the capacity to cause intense disruption to people's financial security, resulting in experiences of food and housing insecurity. Research in Hobart found 11% of clients of an emergency relief agency either had gambling problems themselves or were adversely impacted by gambling problems of a family member; emergency relief assistance provided to this group totalled 18% of the total services provided by the agency (Knox, 2001).

Many participants in this research did not always have enough money to buy food. Participants reported that they went without food or applied for emergency relief assistance. This was the experience of both participants with and without dependent children.

*I have had to rely on the Salvation Army and if it wasn't for them I wouldn't have had any food. They have helped me so much. (Lizzie, poker machines)*

*It is always a struggle with food ... Well there would be some agencies sometimes, like the Salvation Army. (Anna, mixed gambling)*

*We went to the Salvation Army and told them we needed help and explained our story. We were given \$35 to last a fortnight and told we can only go there every 2 or 3 months. (Jeffrey, ex-partner, poker machines)*

Participants attempted to prioritise grocery shopping over gambling expenditure. Sally and Kate are single parents with one and four dependent children respectively.

*I used to work out that I had groceries first and then spent what I had left. At other times I would think I'll buy the groceries after I go gambling ... My intention would be about \$20 - \$25. I would lose that and so I would take another little bit ... I have never spent the lot but a fair bit to the point where bills haven't been paid. (Sally, poker machines)*

*I sometimes go and do the wrong thing. I take bill money, normally I make sure I pay the rent and have got food in the cupboard for kids, make sure I have power and sometimes I don't care about the other bills and sometimes I just spend it at least once a month. At times yes but at other times I can be really good and can go and set myself a limit and I will just spend that. (Kate, poker machines)*

Other participants reported enormous difficulties in keeping to budgets.

*An addicted gambler doesn't budget. You are sitting there in a world of your own, on another planet. You would walk out with nothing. (Patricia, poker machines)*

Josephine, a single mother with two dependent children, usually gambles once a fortnight, on the day she receives her pension.

*I have spent my rent money, my electricity money, my transport fees and money. I have budgeted all these things out but I've gone and done \$5 on bread and milk and as far as I'm concerned that's doing groceries. So, I've gone off and I've gambled everything else. (Josephine, poker machines)*

Both Rex and Kathy live alone.

*I fluctuate a bit. If on pension day I get up in the morning and go and do my shopping and pay my commitments and then I spend the rest it doesn't matter, I don't care because I have paid for whatever I need for the fortnight. But if I start thinking early on pension day that I would like an extra \$100 or so, then as soon as I get my pension I will go and gamble instead of going to do my shopping. (Rex, mixed gambling)*

*I just buy everything I need and leave the rest up to fate. Sometimes I have spent all my money [on poker machines] and had none left at all. (Kathy, poker machines)*

Jackie's partner often spent the family's grocery money on gambling.

*I will send [my partner] to the supermarket which is 2 minutes away to get a couple of things and he will come back 45 minutes later and say there was a big queue but I will know where he has been ... When the money has been wasted, then [our children] have to miss out on things, even food. We have had to get food vouchers at times. (Jackie, partner, poker machines)*

### **Loss of money and the rising level of debt**

As mentioned earlier, people with a gambling problem are likely to spend a greater proportion of their household income on gambling than people who gamble but do not have a gambling problem. The increased proportion spent on gambling may lead to the person borrowing money, going into debt and running down their assets to pay the loans back.

*As well as the depression, because you have got no money to stay there and play, you have got no money to feed the children. You have got no money to buy the medication they need for their asthma or whatever and you've got no money to pay your rent or electricity bill or telephone or your car registration or whatever and, it is like, 'What do I do now? How am I going to cover this?' Well maybe if I scrounge a few dollars from your kids' bank account you can at least buy some bread and milk and they can have toast or whatever. Or maybe you have built up a reasonable sort*

*of credit rating, so you can go and borrow a couple of hundred dollars to buy your groceries or pay your bill or whatever. But then you are still way behind the eight ball because it still takes you so many months to pay the money back that you have borrowed and you never catch up in your own self respect, your own mind and your financial situation. You never get that back. (Josephine, poker machines)*

In the Productivity Commission's national survey, 50% of people who have a problem with their gambling went into debt to finance their gambling (Productivity Commission, 1999). Losing money, and especially money they could not afford to lose, was a common experience for participants.

*I hate the fact that my daughter might want a pair of shoes and I can't buy them for her. I am going from week to week. I am catching up on rent that I still owe. (Ben, mixed gambling)*

*I would just go [to a venue] and spend everything and have nothing left. Then I would get behind on my rent and then be living on the street. I have lost houses. It has been very hard at times. I have thought about stealing so I can get ahead. It is just a circle I keep going around in. (William, races)*

Some participants in this study had in the past owned or were purchasing a home, owned substantial possessions such as cars and had full-time employment. As a result of their gambling, these participants spoke of "losing the lot". The level of debt discussed was as small as \$100 or less, to tide the person over for food or payment of a bill, to around \$80,000 and some participants had gone bankrupt as a result of their gambling. While the Productivity Commission (1999) estimates that gambling-related bankruptcy is rare, it is a criminal offence to go bankrupt as a result of gambling and so the link between gambling and bankruptcy is likely to be under-reported. As McMillan et al (2004: 149) explain, the concept and degree of gambling-related financial problems "appears to be highly relative to each person's circumstances, norms and values, and priorities".

When Anna, a 47 year old mother of four on the Disability Support Pension, has gone into debt she has arranged to pay her debt in small increments out of her pension. She currently has a \$500 Centrelink advance payment and 6 months to pay it off. She has had experience of not having enough spare money in her pension to repay a debt.

*I would sell bits and pieces, or my washing machine to make up for it. (Anna, mixed gambling)*

Geraldine calculates that in the 20 years she has gambled on the poker machines, races and keno, she has "gone through over half a million". She is currently employed and gambles on horse races daily. She thinks she currently spends about \$100 per week on gambling.

*I have lost so much. I am in \$80,000 worth of debt and I am nearly retiring age. I just kept going down. (Geraldine, mixed gambling)*

Other participants spoke of ongoing patterns of credit card debts and large personal loans, with one participant cutting up her credit card in frustration.

*I owe \$1,000 on my MasterCard and have done for years. I just pay the minimum per month. (William, races)*

*I had my bankcard to the max. I would put \$50 in and then I would go and draw it out the next day. (Patricia, poker machines)*

Ben frequently accessed personal loans and credit card cash advances to pay for his gambling. When he was married and in full-time employment, Ben estimates that he spent 20% of his income on gambling. Since his divorce and experiencing a period of unemployment and now casual work, Ben's expenditure on gambling accounts for about 40% of his income. At times he has had difficulty paying rent.

*I probably had about 9 personal loans at one time and about 10 credit cards ... At a peak time personal loans were probably about \$80,000, credit cards probably about \$30,000 - \$35,000 ... Because the creditors were after dollars, my car has been repossessed and my credit cards. (Ben, mixed gambling)*

Research at a Melbourne problem gambling service found that 31% of clients reported a housing crisis as a result of their gambling with 12% having lost their housing, and it was estimated that at least 10% of the demand at services for homelessness is caused by gambling problems (Antonetti & Horn, 2001).

*[My ex-wife's gambling] led to non-payment of rent, the threat of eviction, phone bills not paid, power bills not paid and phone disconnected. I couldn't do anything to stop it because I had alcohol issues and when I was drinking I would let [my ex-wife] gamble. (Jeffrey, ex-partner, poker machines)*

Jackie constantly needs to creatively manage her finances to ensure she can afford to buy essential items for their four children because of her partner's unbudgeted expenditure on gambling.

*We have been behind in the rent when we lived in [regional town] ... I arranged with the Housing Department to have direct debit taken out of my Centrelink to pay my rent and extra taken out to pay my debt ... I had to end up borrowing money from my aunty to buy a pram. (Jackie, partner, poker machines)*

People who are on low incomes and who borrow money do not have many spare resources to buffer them against interest rates or a deadline for payment. Participants spoke of gambling to repay debts and that this usually left them worse off.

*Well, I think basically the real problem for me was spending more than I could afford and then going to borrow money and getting further and further into debt. Also getting behind in payments ... But when you are on a low income and you lose it, you go back [gambling] because you need to win it back. (Maureen, poker machines)*

### **Borrowing money**

Consistently short of money and unable to pay bills, participants in this study borrowed money from their mother, brother, sister, shopkeeper, best mates, partner, friend's husband, boss, credit societies, cash advances from their credit cards, or Centrelink. A national survey of gambling found that one in five people with a gambling problem borrowed money without paying it back (Productivity Commission, 1999). While participants in Anglicare's study who gamble reported nearly always repaying their loans, family members said that repayment of gambling-related loans was poor. All participants felt that borrowing money from friends and family caused strains in their relationships.

*[My family] always got it back but they got sick of it and me lying to them. (William, races)*

*[My partner] always borrows money from his mother. He is really bad at paying people back ... I have [kept a record of money I've given him] in the past but I have given up now ... I buy all his cigarettes. We used to pool all our money together but now I am basically doing the lot ... [It became a problem] when he started using my money because I am a bit soft and will give in. (Jackie, partner, poker machines)*

*Because of [my partner's] gambling she has a lot of accumulated bills, unpaid bills and she has borrowed money from other people and myself, so she owes a lot of money to people. (Nick, partner, mixed gambling)*

*I pay [my friend's husband] back so much a fortnight but he is fine with that ... I would have to cut back on something while I paid it back. (Sally, poker machines)*

*It's been a bit hard lately, because I've been stressing out thinking how can you afford this or that on such a low income and as a result of gambling in the past, it just worries you how you can pay them. I am trying to seek some advice on the best way to pay them. (Douglas, poker machines)*

Rex, who would borrow money from "anyone I could", approached credit societies, friends and work mates for loans.

*When I was working, I would borrow money from various credit societies, but I was on a roundabout going from banks to credit societies. (Rex, mixed gambling)*

### **Desperate measures as debt escalates**

As a person who has a gambling problem loses control of their lives, the escalating debt, hunger and financial and social insecurity may result in a feeling of desperation. The pressures from lending institutions and family and friends may lead some people with gambling problems towards committing a crime to obtain money to repay the debt directly or to continue gambling. These pressures are increased if the person has borrowed money from a lender who charges high interest rates and harasses borrowers for payment. "Faced with mounting financial difficulties and gambling-related debts, when all these legal sources of gambling funds are exhausted, problem gamblers may then resort to illegal activities to obtain money" (Productivity Commission, 1999: 7.59)

It is difficult to estimate the number of people with a gambling problem committing crimes related to their gambling, as many people do not admit their gambling problem in court. Australian research has found that there is no legal benefit for a person charged with an offence to admit to a gambling problem because the legal system does not perceive this to be relevant (Crofts, 2002). No formal statistics are kept relating gambling to crime and because of this data on gambling-related crime is limited.

The Productivity Commission's national survey on gambling found approximately 10% of people with gambling problems had committed a crime because of their gambling and about 60% of those in counselling had undertaken illegal activities to finance their gambling (Productivity Commission, 1999). Crimes listed by the Productivity Commission (1999) related to gambling are mainly non-violent property crimes including stealing from family and work mates, fraud, shoplifting, larceny and embezzlement, with about 40% of offenders having been convicted for the crime. Research in New South Wales found that 4% of local and district court cases where the defendant was found guilty were explicitly linked to gambling (Crofts, 2002). A study of 183 convicted serious fraud offenders in Australia found that gambling was the second most common motivation for committing fraud (Sakurai & Smith, 2003).

Anglicare's focus group and individual discussions with people who gamble and family members did not directly ask about criminal behaviour. During the course of the interviews, participants volunteered information about illegal activities resulting from their or their partner's gambling.

*I did silly things like knocking off a shop and stealing money. (Anthony, poker machines)*

*Then I changed jobs but that ended nastily because I fiddled the books. I was going through my divorce at the time and it was very difficult ... I lost the job, I lost face. My 2 older working brothers bailed me out; they came up with \$10,000 and paid off [my former employer], so there were no proceedings. My whole self-esteem just went down, it was awful and I am still getting over it. I haven't seen my siblings over the last 3 Christmases. (Ben, mixed gambling)*

*Then I was stealing to pay for things ... I have been lucky. It was nothing major, only small time really. (William, races)*

*We have to go without things, especially going for food vouchers at City Mission. I have even stolen things like nappies or formula but I have been caught by the police and I have been to jail and now I am on a suspended sentence if I get caught again. (Jackie, partner, poker machines)*

One participant described shoplifting by eating food directly from the shelves in supermarkets because she did not have the money to purchase the food.

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## SECTION SEVEN: CONTROL OF GAMBLING

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Participants acknowledged the negative consequences of their gambling and had often and in many different ways tried to control their gambling. However, the feeling of being “out of control” often overwhelmed them.

### “Out of control”

Participants described that it was hard for them to control their gambling because their gambling was based on “rituals”, “temptations” or “urges” that they did not understand or because of their desperation to get money. This supports previous research where participants “indicated that in their ‘lucid moments’ they recognised they had a problem and had endeavoured to control the extent of their gambling” (McMillen et al, 2004: 149). The Productivity Commission (1999: 7.15) found 70% of people in a national survey who had gambling problems would, in the previous year, “like to stop but can’t”, which contrasted with only 7% of people who gamble regularly but without experiencing problems wanting to stop gambling.

*I couldn't control the urge to go, the temptation. As soon as I had money in my hand I went off. (Patricia, poker machines)*

*I would just spend \$20 and when I lost that I would say no more. But I didn't, I just kept going and I would lose everything. (Belinda, poker machines)*

*I just try not to go there. With me it is hard because I think it will make me feel better just to go and press those buttons ... I just can't seem to fight it. It is harder to fight than alcohol ... It is like a ritual. I don't really know why I want to go. (Anna, mixed gambling)*

*I get urges where I am going to win, there is no thinking you are going to lose and I overdo it. When I am in a real binge I just keep going and blow all of my pension ... My gambling has been out of control, with lots of binges. I want to seek help to control it. I have periods where I can control my finances but there are stages where I get out of control, mainly with the machines. (Kevin, mixed gambling)*

There are strong links between gambling and alcohol consumption with many gambling venues intrinsically linked to the venue’s liquor licence, making it difficult, for example, to have alcohol-free gambling venues. Participants who consumed alcohol while gambling found exercising control was particularly difficult. This was especially so for Rex.

*Drinking and gambling ruined both my marriages; there is no doubt about that. When I have a few beers, the first thing that comes into my mind is I want to have a bet, rather than going to visit someone or go to the movies or whatever. (Rex, mixed gambling)*

## **Taking control**

Australian studies list a range of strategies for people trying to control their gambling. Personal approaches include limiting alcohol consumption while gambling, finding recreational activities to replace gambling, limiting the amount of money taken to the gambling venue and destroying credit cards (McMillen, 2004). Often people turn to family and friends for assistance both in dealing with problems that arise from gambling and in trying to implement personal control measures (McMillen & Bellew, 2001). Some people choose to attend counselling or group support sessions that they hope will strengthen their resilience against the urge to gamble while others ban themselves from gambling venues and activities.

## **Personal approaches**

Gambling has become an integral part of the lives of the participants in this research. Over the years of struggling with their gambling, participants tried a variety of personal approaches to control their gambling. Some participants continued to gamble but tried to limit or reduce the amount of money or time they spent on gambling.

*[I set a \$20 limit] but I always end up spending more. I seldom make any money after spending \$20 ... When I am more centred I spend less. I do have a mood when I am very sensible and other moods when I am not sensible. I don't know what else there is to try. (Kathy, poker machines)*

*My psychologist tells me to leave my card at home now... because it is so convenient when I run out of money but if I don't have my card I can't use it. (Anna, mixed gambling)*

*I have cut down on the amount of money I bet, like I can put \$1 each way on a horse now. (Rex, mixed gambling)*

*I am gambling in a much smaller sense and a much spread out sense. I might go every 6 weeks now and the feeling builds up in the weeks in between. (Ben, mixed gambling)*

Becoming involved in hobbies and other activities was seen to be important.

*[Gambling] became an interest or hobby and the other things you had as interests and hobbies had dropped off. To break the cycle you have to get back to the hobbies and interests you had in the past. (Douglas, poker machines)*

*Find positives to do instead of negatives. But what if you haven't got any positives? I have always been an introvert, a loner, no interests in sports. I would dearly love the government to ban pokies from all clubs and pubs immediately but that would leave the biggest hole in my life because that's my social contact. (Josephine, poker machines)*

For some participants it was only the lack of money that instilled control.

*[I have controlled my gambling] within myself when I know I can't afford to ... Well if you haven't got any money you have to control it. (Sally, poker machines)*

*The strategies of trying to stop haven't worked. I haven't really been able to stop. The only time I have stopped is when I didn't have any money. So I would have to say no, I have not had success in trying to stop gambling. The longest period of time I have stopped gambling is for 6 weeks. The bigger picture has slowed down but that is because of lifestyle rather than any other way. I don't know. It annoys me that I can't shake it. I always thought I could stop. (Ben, mixed gambling)*

### **Help from family and friends**

Many participants identified family, partners and friends as being important to help them take back control of their life, which was also a response identified in previous research (McMillen et al, 2004; McMillen & Bellew, 2001; Productivity Commission, 1999). Family and friends are often the 'first port of call' when a gambling crisis hits (McMillen & Bellew, 2001).

*What I had done was a problem. We had a family meeting and I promised I would never do it again. I have not kept to this 100 per cent but it hasn't been like it was. My wife said if I ever did anything like that again, that would be it. Since then, I have been going to Gamblers Anonymous meetings here. (Murray, races)*

Murray's family knew that he had been gambling for the past 50 years; however they had no idea as to the extent of his gambling and how much money he had lost. Murray explained, "They thought I was just using my spending money but I was doing a lot more than that." It wasn't until after he retired from work and his wife saw his bank statements showing that his superannuation payout had been spent and asked what had happened to the money that Murray admitted his gambling problem and tried to control his gambling.

Some participants spoke of the support provided by family in terms of budgeting or moral support while for others it was the sense of responsibility to family that helped them exercise control.

*I have had people helping me. My friends have helped me and they have told me when I haven't been looking after myself and told me to stop wasting all my money ... I have different stages where I can control it well but other times it gets out of control ... Because it is like my binges with alcohol, I just break out and start doing it for no reason. Then I wake up and realize what I am doing and get my act together. (Kevin, mixed gambling)*

*I am determined not to go anywhere near [gambling venue] between now and Christmas and if I do I will slap myself in the face ... Oh I am just so determined not to. I am thinking of my kids. Especially my eldest kid, he is really helping me. (Carla, poker machines)*

*[I'd leave] if I had to be home when the children got home from school or when they had to go to bed. (Graeme, races)*

*If I have less money, I know I have to leave. The only other reason I would probably leave is if one of my kids rang and needed me, or the school phoned for the same reason. (Kate, poker machines)*

External financial management by a family member through setting limits before entering a gambling venue or by controlling their access to money had mixed results.

*Sometimes we will set a limit if we are out together having a drink. [My partner] usually spends that and asks me for more and I give it to him ... When we weren't together he used to bet all of his pension. If I am around he will bet less but if I am not around he will bet more. (Jackie, partner, poker machines)*

*I am lucky that I have a good partner and she manages the bills, even though I have still taken the money. If it wasn't for her I don't know where I would be. (Mark, poker machines)*

*I allow [my son] to go once a week but usually I am with him and I set him a limit on how much he can spend ... I have said to him there is a limit of \$20 and that's it ... He constantly asks to go and is always asking for more money. (Carole, mother, poker machines)*

*I have 2 children I care for by myself, so I have taken the step of putting all my Social Security benefits all through my parents' account because I know I can't handle it. They pay all my bills for me and do all my shopping for me. Whatever is left over is for the children. I have realised I can't handle money. Money is just like water, it goes straight through my hands. (Jason, mixed gambling)*

Two female participants spoke of their children managing the finances.

*I find it hard, my daughter handles all my money and she gives me money but as soon as I have a big amount I go through it again. I just went through \$2,000 this month. (Geraldine, mixed gambling)*

*[My eldest child] is 17 years old and he pays me board. He doesn't give it to me until the end of the day and he comes shopping with me to make sure I don't go to the pokies and spend it. I haven't been for the last 2 weeks and I don't think I will today. (Carla, poker machines)*

Membership to a player loyalty program may increase the difficulty for a person to control their gambling as the programs offer prizes according to the person's accumulated expenditure. Data collected via loyalty schemes provide the operator with information about gambling consumption and is crucial in their "ongoing targeting of promotions and other inducements to gamble" (Australian Institute for Primary Care, 2004: 19). A substantial number of the participants in this research were members of a loyalty scheme.

*I was trying to get a gold card at the casino but you have to lose too much to get one of them. I thought to get a gold card would be great but it was costing me too*

*much. I was going every fortnight to get the card, but the rewards weren't worth it to lose all that money. (Kevin, mixed gambling)*

### **“Breaking even”: the role of counselling for gambling problems**

Only a small proportion of people with gambling problems seek help from problem gambling services. In the Productivity Commission's national survey less than half of those people who said they wanted help had actually sought help; only 1 in 5 people with severe gambling problems had sought help; and the majority of people receiving assistance had problems relating to poker machines (Productivity Commission, 1999).

Most participants in Anglicare's study acknowledged that the difficulty of discussing gambling problems was a barrier to them approaching counselling; however a majority had at some stage sought help for their gambling problems, which included personal counselling or support group sessions.

*A lot of people won't talk about their problems because they think they are being judged for it. (Sally, poker machines)*

*I've tried to get [my partner] to go [to a counsellor] and he says he will but he doesn't. (Jackie, partner, poker machines)*

Unlike other Australian studies (for example, McMillen et al, 2004), participants in Anglicare's research generally had positive experiences of counselling.

*It woke me up to myself. I went home and did some thinking. I changed my lifestyle. I go walking, I do gardening and I go into town on the bus. (Belinda, poker machines)*

*Well, I have stopped [gambling]. Also the support from other people [has helped]. (Graeme, races)*

*[Since counselling] I think [my partner] is less addictive. I think she understood before and was going anyway but now probably the counsellor has explained things to her and she has realised some things, so it is not like before, she still goes but now it is not all the time. Sometimes I am able to talk her out of it and sometimes she really can keep the limit. Like if she said I will spend only \$20 she spends only \$20. Before it wasn't like that, she says I will only spend \$20 but she would spend \$100. (Nick, partner, mixed gambling)*

However, for some participants counselling did not help them.

*Well, counselling for me was disappointing. It was always very basic and low key. (Ben, mixed gambling)*

*I have had 10 years of extensive gambling counselling and I am still a problem gambler on the poker machines. (Tracey, mixed gambling)*

Some participants had attended group support sessions through Gambling and

Betting Addictions (GABA) and Gamblers Anonymous (GA) and found the support helpful at least in the short term. Some other participants felt that the possibility of attending intensive rehabilitation was an option to help them. These services are partly based on an addiction model, in which the problem is one of 'emotional disorder'. While this is not the current thinking of the majority of gambling researchers in Australia, Anglicare Tasmania recognises that there is still a role for addiction-based therapies to assist people with gambling problems.

However, apart from GABA, which is part of the Break Even Network, these services are not as well advertised, do not always include the opportunity for people with gambling problems to attend and the cost of attending a program is prohibitive for some people. For example, the Salvation Army's Bridge Program costs participants \$280 for a 2 week live-in course plus \$60 for a key deposit. Although payments can be made through Centrelink's Centrepay, the program costs more than half of the fortnightly Disability Support Pension. Further, it is funded to assist only people with alcohol and drug addictions, although people with gambling problems have attended.

*The [GABA] meetings were good; we knew where everyone was coming from. (Patricia, poker machines)*

*[My ex-wife] has been to GA [Gamblers Anonymous] ... We went on 2 or 3 occasions and it seemed to help in the short term but not the long term. And she has rung up Anglicare for help. She also has rung up Lifeline a couple of times. She has admitted she has a problem. (Jeffrey, ex-partner, poker machines)*

*Then I heard about this hospital that was doing some therapy for gamblers but everywhere that I tried to get in, was drug and alcohol. There was nothing available for gamblers. (Lizzie, poker machines)*

*I actually managed to get booked into a rehab [program] but I couldn't do it without the cash. I couldn't pay to be there for an addiction and pay rent as well. My mother is dependant on me as I am her only living relative in Australia. So all of these factors are preventing me from going into the [rehab program] and they require me to be there for 13 weeks or whatever. So I wasn't left with too many options. (Tracey, mixed gambling)*

### **Self-exclusion**

Participants in this research had mixed experiences of the effectiveness of the self-exclusion program. This supports research in other states; for example the self-exclusion program in Victoria was regarded as "a 'saviour' or a 'toothless tiger', with the lack of industry enforcement regarded as a considerable barrier to its effectiveness" (New Focus Research, 2003: 10).

*Self-exclusion is good. I did it in Sydney and it works very well. (Lizzie, poker machines)*

*I have barred myself from Wrest Point for the rest of my life ... I can't even go to the car park ... I have gone to extreme lengths. (Tracey, mixed gambling)*

Ben took out a self-exclusion from the Casino in 2000. Although he continues to gamble on poker machines and keno at other venues, he goes less often.

*I barred myself from the casino in 2000. This was after the \$10,000 'problem'. You are only barred for 12 months when you self-exclude yourself.<sup>10</sup> So after 14 months had passed I had that cleared and was back [gambling] again for another 2 years. I have barred myself again ... It slows you down. I don't go to the casino now even to watch a show or something like that. (Ben, mixed gambling)*

Some participants found the process of being self-excluded was easy while others struggled to navigate the required procedures.

*One night I lost a lot of money and I picked up one of these cards and I said to the staff at the venue, I would like to be banned from here. They told me I had to go home and ring the phone number shown on the card, 'we can't do that'. I went home and told my husband I had a problem. He said he knew and he rang the number, it was in Melbourne.<sup>11</sup> Then they gave me a phone number in Launceston and they sent me some self-exclusion forms ... When I rang Launceston, they were very helpful and they told me about the GABA meetings held in [regional town]. Then I had myself self-excluded. (Patricia, poker machines)*

*Then I arranged to exclude myself but even that was difficult. I expected to be able to exclude myself straight away, but this procedure took a week or 10 days. I believe someone should be able to do this immediately. I wanted it to be a blanket exclusion. (Max, poker machines)*

Graeme has had problems with his gambling on the races. He took out self-exclusion from venues with TOTE facilities but would like to be prevented from entering a race track also. However, TOTE is a voluntary participant in the self-exclusion program, their self-exclusions are not regulated under legislation and self-exclusions from race tracks are not available. Graeme feels his self-exclusion has worked for him as he has only placed bets twice in the last two years. However, he has found it difficult to stop himself from visiting the race track.

Some people felt that self-exclusion was a sign of "weakness" and they felt uncomfortable about being controlled. This supports findings of research conducted last year in the Australian Capital Territory (McMillen et al, 2004). About one and a half years after Patricia started playing poker machines, she realized she had a problem and decided to ban herself. Instead of organising it with a counsellor in her own town, she went to the next town. Instantly, Patricia struggled with the self-exclusion.

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10 There is no time limit automatically imposed on self-exclusions and they remain in place until the person signs a revocation of self-exclusion notice. However, many people sign this notice at the time of self-exclusion for the revocation to come into place in 3 years. If Ben's self-exclusion expired after 12 months, he must have signed a revocation for this time period.

11 McKesson Asia-Pacific Pty Ltd is contracted by the State Government's Gambling Support Bureau to provide the 24-hour crisis counselling and referral service Gambling Helpline Tasmania. They are based in Sydney. Callers are referred to Break Even services and other relevant community services in their local area.

*After that, I thought there goes my choice ... The first few weeks after I had myself excluded, I was tempted to revoke them. This was because I felt my freedom was taken away from me ... I went to GABA for 12 months but in spite of this I revoked the self-exclusion and went back to gambling ... I thought I could be a social gambler if I revoked the self-exclusions. The first couple of times I was able to, but after that I fell back into the same pattern.*

Patricia decided to self-exclude herself again. At the time of this interview she had been excluded for approximately two months.

*I feel better health-wise, I am sleeping better. I am a better person for it because I am not lying any more. I am certainly a lot better today. It is a choice you make but to me it is also an addiction. If I had personal problems, I felt the machines were my friends until I hit the daylight.  
(Patricia, poker machines)*

Some participants were fearful of the potential fine for breaching the self-exclusion whilst others intentionally entered a venue from which they were banned.

*I have walked into the Oasis not knowing it was an Oasis pub to get a cup of coffee when I went to an auction one morning and I saw the poker machines and I froze. I just froze and ran out of there. So, the fear of having to pay \$2,000 if charged was enough for me. (Fiona, mixed gambling)*

*I have even self-excluded myself from the pubs, had my photos taken and they still let me in. The casino has actually written me a letter saying that 'we are not taking any responsibility for any money lost because of the exclusion'. I know the croupiers at the casino very well and they still let me in but they have covered themselves by writing a letter saying they are not taking any responsibility for any money loss, so that's where they are covering themselves so they can't be fined \$10,000. (Jason, mixed gambling)*

Self-exclusions only work if the person wants to use it to help control their gambling and if venues are vigilant.

*People banning themselves is a good idea but the person has to want to help themselves. (Jackie, partner, poker machines)*

Some participants suggested ways to improve the self-exclusion scheme.

*I think they should have much bigger signs in place for the people who are self-excluded. I know people who are self-excluded and they are still let into these places just because they want their money. (Tracey, mixed gambling)*

*The only thing I can suggest is stricter guidelines on self-exclusion. There should be no way you can go and revoke. (Patricia, poker machines)*

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## SECTION EIGHT: CONSUMER PROTECTION

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The expansion of opportunities to gamble has led to increased rates of gambling (New Focus Research, 2003). Increased participation in gambling leads to increased experiences of problems (Productivity Commission, 1999). To reduce the impacts of the problems caused by gambling, however, requires an understanding of the extent of the problems. McMillen et al (2004) recommend that gambling policies should acknowledge the complexities involved and the reach of impacts to families and communities and avoid simplification of the problem.

Responsibility for reducing gambling problems lies with the State Government, who are responsible for policy, regulation and research, including establishing requirements for 'harm minimisation'; the gambling industry, who self-regulate a number of 'harm minimisation' measures; and the individual who gambles. In the previous section, people who gamble and family members spoke of how they try to exercise responsibility over gambling. This section looks into the roles and responsibilities of government and industry, many of which are interlinked and have consequences for the relevant regulatory body.

### **The responsibilities of government**

Participants were aware that their expenditure on gambling was making money for the State Government and gambling industry and their comments revealed a perception that protection of them as customers of the gambling industry was less important than the generation of profits. This was also a theme in previous studies with consumers expressing "feelings of frustration and despair at what was perceived as an 'alliance' between the industry and government to generate gambling revenue" (McMillen et al, 2004: 158). Participants in McMillen's study did not believe that the government would take action to ensure that industry minimised the harm caused by gambling.

*The system is encouraging us to keep going with our addictions because they want our money. They don't want us to put our money into our children's health, education, bus fares, groceries, electricity bills, and rents because the pubs and the clubs, they want our dollars. They don't care whose lives they ruin and whose kids' lives they ruin, they just want our money. (Josephine, poker machines)*

*I think the government is just out to make money from the [poker] machines, it is terrible. They should be banned ... I just think the government's greedy for revenue, I just think it's easy money for the government and the hotels because there's so many hotels and they're so close together. (Jeffrey, ex-partner, poker machines)*

Participants in this study were asked whether there was anything that the government could do to help prevent or reduce the likelihood of gambling problems developing. The most common suggestion for preventing problems was to remove poker machines from hotels and clubs.

*Get rid of the machines. Leave them at the casino but take them out of the pubs and clubs. (Carole, mother, poker machines)*

*Put a bomb in the poker machines. (Anthony, poker machines)*

*The cutting back or removal of pokies. It is just becoming obscene. I don't know how they can be controlled. I would have thought two casinos would have been enough but now they are in so many hotels. I am sure there must be an increase in gambling because of the access in the hotels. (Ben, mixed gambling)*

*If they don't take them all away, they should reduce the number of machines that are there. (Kevin, mixed gambling)*

One participant suggested gambling education should target the need for personal control.

*I don't know because [pokies] are such a money making thing for the government. I think a \$20 [limit] education policy would be a good thing. (Kathy, poker machines)*

Advertising of gambling was seen to encourage gambling and participants wanted limitations imposed on advertising of gambling venues.

*They should cut out the poker machines because they are everywhere. The advertising is also everywhere. You can't even go out for a meal without being near the machines. (Jackie, partner, poker machines)*

Participants also suggested that media reporting of gambling with images and sound tracks of poker machines may also provide a 'trigger' for people with a gambling problem to want to gamble.

Participants made suggestions of how changes in the gambling technology and venue environment may assist them to control their gambling. These included lowering the betting limit for poker machines; recording turnover in a poker machine in dollars not credits; removal of chairs from in front of poker machines;<sup>12</sup> requiring venues to be brightly lit; and ensuring that gambling activities are located totally separately to alcohol, dining and children's areas. However, any new initiatives require assessment for its effectiveness in reducing harm.

The Productivity Commission (1999) found that people with gambling problems were more likely than people without gambling problems to withdraw money from an

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<sup>12</sup> Australia is one of the few jurisdictions that permit a chair to be installed for each poker machine.

automatic teller machine (ATM) at a venue whilst playing poker machines and that ATM location was considered by 'problem gamblers' to be one of the most important issues for effective harm minimisation. In Tasmania, legislation permits hotels and clubs to have EFTPOS cash withdrawal facilities but not ATMs; ATMs are permitted in the two casinos. The Gaming Commission's rules leave the gambling operator responsible for monitoring the use of cash withdrawn from EFTPOS in hotels and clubs. Some participants in this research made recommendations specific to ATMs, namely that ATMs not be placed in close proximity to gambling venues and that limits be placed on how much cash can be withdrawn from an ATM at the casinos.

Participants noticed that the information about seeking help for gambling problems was not always well displayed or had sometimes been vandalised and not repaired.

*Sometimes people take the advertisement for help down, or deface it or write all over it. It should be in more places. (Craig, races)*

The Tasmanian Government banned smoking in gaming venues from January 1<sup>st</sup> 2005. This followed a similar ban in Victoria where they found that gambling expenditure dropped dramatically immediately after the ban, although expenditure appears to have returned to pre-smoking ban levels (Dowling, 2005). However, some participants in Anglicare's study felt that the smoking ban has helped them to reduce their gambling this year.

*One good thing that has come out of it this year is the law that has come in where you can't smoke in the Oasis lounges at the pubs. Recently I only ended up staying a short time because I like to smoke and drink while I am gambling. So I think that has helped me a bit ... I haven't thought about going in to the poker machines this year. (Rex, mixed gambling)*

*I don't like going much now because I like smoking when I am playing. (Kate, poker machines)*

Participants thought that venues operated for too many hours each day, either because of the hours granted to the premises for their liquor license or because the venue was in breach of legislation by choosing to permit gaming after they had ceased to serve liquor.<sup>13</sup>

*The hours that the venues are open are far too long. They open far too early, sometimes as early as 6 am. There is too much access, it makes it too easy. (Josephine, poker machines)*

*I know people who are at [name of gambling venue] at 7 am with their pay. (Tracey, mixed gambling)*

*Certain places stop serving alcohol at 11 or 12 at night but keep the machines open for playing on. (Douglas, poker machines)*

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<sup>13</sup> The *Liquor and Accommodation Act 1990* sets the hours of operation of the premises and consequently the hours of operation permitted for poker machines. If a venue ceases service of liquor their gaming facilities should also cease.

*I was at the [name of gambling venue] recently, and the owner said they need a quota of people playing on the machines to stay open and serve alcohol, that's disgusting. (Michael, partner, poker machines)*

### **The responsibilities of the gambling industry**

Participants wondered whether the staff at gambling venues could do more to help, though there was acknowledgement that it would be difficult for them to become involved. This was also a theme in the Gambling Research Panel's study: "The help-seeking strategy sought by most of the problem gamblers and families interviewed was for someone at the gambling venue to recognise problem gambling and to take action" (New Focus Research, 2003: 10).

In Tasmania, *the Gaming Control Act 1993* requires all staff working in a gaming area to attend a Responsible Service of Gaming training course within 3 months of being licensed. The training package is funded by the Community Support Levy and delivered by the Australian Hotels Association and provides some background on when gambling may become a problem; common signs of problem gambling behaviour; and strategies for providing support to someone who acknowledges a gambling problem. Staff are advised not to offer help directly nor to counsel a patron, although a supervisor may decide to approach a patron.

Although the Gambling Industry Group (2004) does not condone patrons playing while intoxicated and its code of practice requires the removal of people who are gambling whilst intoxicated, the legal requirement for this comes under the legislated Responsible Service of Alcohol. In contrast, the Responsible Service of Gambling is not legislated and many staff have reported difficulties in implementing responsible service (O'Byrne, pers. comm., 2005). The Australian Hotels Association acknowledges that legislation covering excessive liquor consumption is stronger than that covering gambling consumption but explains that problem gambling is hard to identify and needs to be managed sensitively (Hanna, pers. comm., 2005).

*Well I usually drink when I am playing the machines and then I can sometimes lose track of how much I am spending and the staff keep serving drinks. However if someone is at the bar and they are drunk then they will be asked to leave, it's different ... The employees that work at the places, they can see how much money people spend but they are not allowed to go up and say to someone "Do you think you have spent too much money?" (Douglas, poker machines)*

*[Venue staff] will chat to you either at the machine or at the bar... They know that you are overdoing it. (Kevin, mixed gambling)*

*There needs to be more awareness. They need to have people in the hotel tapping people on the shoulder and checking on them. They need to have people to go and sit in these venues for several hours and watch what people are doing and how many times they are using the ATM's or going to their purse. (Ben, mixed gambling)*

Some participants noted that venue staff sometimes enticed people to gamble.

*I've walked into a poker machine room with [my ex-wife] and the guy behind the bar's said, 'Oh, we've had 3 big wins today, 3 people here won over \$2,000, so it's payout day you'll probably get lucky' and so she's gone in thinking ... But the whole thing is a con, a sham. (Jeffrey, ex-partner, poker machines)*

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## **SECTION NINE: CONCLUSION AND RECOMMENDATIONS**

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Gambling and especially problem gambling is having “an adverse impact on the lives of many Australians and is impacting on the incidence of poverty and hardship in the community” (Community Affairs Reference Committee, 2004).

Problem gambling is a relative concept. There is no clear threshold of money lost, time spent, or quantities of arguments with family members to mark the difference between social and problem gambling. Participants in this research were on low incomes and often did not spend large amounts of money on gambling. Some participants spent as little as \$30 per week; however all of the participants were living on pensions or benefits and these small sums represented a substantial proportion of their very small, fixed incomes.

Participants reported serious consequences of their gambling such as not having enough food because of their gambling expenditure; attempting suicide because of their gambling problems; suffering from ill-health; and the destruction of important family and social relationships. A further consequence for participants was a need to resort to the support of crisis services in the community such as the Emergency Relief Program.

Participants clearly identified that gambling was used as an escape from personal and financial stress, isolation and loneliness. However, while participants had turned to gambling to relieve stress, they were perplexed to find that gambling led to other problems or that their existing problems were exacerbated, trapping them in a cycle of financial problems and social isolation. Participants also found that although they acknowledged that gambling was a problem for them, it was difficult for them to control it.

While all forms of gambling provide some risk for the development of gambling problems, the extension of poker (electronic gaming) machines into hotels and clubs has had a huge impact on Tasmanians. The majority of people in this research had problems with poker machines and even where they used other forms of gambling poker machines were the main focus of their gambling problems. Some participants only developed problems with their gambling once they changed to gambling on poker machines. The issues the participants identified with poker machines were the ubiquitousness of their presence in the community, the seductiveness of the technology, the environment of gaming rooms and the speed with which losses could mount.

An overwhelming finding of this research is that the problems with gambling experienced by individuals have widespread and costly social consequences.

Participants identified that their gambling problems were having an impact on their family, friends, employers and others, and that this led them to have increased need for community and public services. Whether or not the prevalence of problem gambling in Tasmania is approximately 1% of the adult population, or more, or less, there are many thousands of Tasmanians affected by gambling problems.

Problem gambling is a public health issue that is therefore of concern not just to individuals but to the broader community and like community problems with alcohol and tobacco will respond to changes in the social and political environment in which people live. Participants in this research identified some gaps in service delivery such as the need for rehabilitation services and services for partners and children of people with gambling problems. They also identified what they perceived to be a laissez faire approach to regulation in the gambling industry and the scarcity of gambling-free venues in which people could gather for social and leisure activities, particularly in rural and regional areas.

The gambling industry and State Government have responsibility for ensuring a safe environment for gambling, with adequate consumer information and consumer protection. This research found that the level of duty of care currently being provided by the Tasmanian Government is deficient, underlining the comments of the Productivity Commission when reporting on the national picture in 1999. Participants in Anglicare's research reported numerous breaches of both the legislated rules and industry codes for gambling.

Participants felt abandoned by the State Government as the protector of consumer interests. There was a strong perception that the government was dependent on gambling revenue and that this created a conflict of interest which restrained it from taking steps that might reduce its revenue.

### **Gambling-derived government revenue**

The Productivity Commission (1999) found that the hypothecation of government revenue from gambling for gambling related services, research and community awareness and education is appropriate. In Tasmania in 2003-04, less than 3% of total gambling-related government revenue was allocated in some way to reducing the harms caused by gambling: \$1.1 million was spent on community education and Break Even service delivery while a further \$1 million was allocated to neighbourhood houses for community-based programs related to gambling and administration costs for the Gambling Support Bureau.

With problem gambling causing such distress and hardships in the community, more money needs to be put into addressing these issues. To ensure the development of proper consultation mechanisms for the distribution of these funds a board needs to be established.

### **Recommendation 1**

**That state legislation require that racing and casino gaming provide 4% of their gross profits to the Community Support Levy.<sup>14</sup>**

### **Recommendation 2**

**That the State Government establishes a board of management for the Community Support Levy, which would consist of sub-committees for the distribution of charitable and sporting grants as well as a research reference group to recommend a research strategy and budget and to vet applications for funding for gambling-related research. Appointments to the board and its sub-committees should be for a three year term and follow a public nomination process to the Minister for Health and Human Services. The Board should report annually to the Tasmanian Parliament.**

**That the Community Support Levy be used to fund this initiative.**

### **Recommendation 3**

**That in 2005-06, the State Government allocates a minimum of 5% of gambling-derived government revenue for expenditure directly related to reducing the negative impacts of gambling, as proposed in recommendations 4, 5, 6, 16 and 19. That expenditure on these initiatives is in addition to programs currently being funded through the Community Support Levy. That this proportion be increased annually to a maximum 33% of gambling-derived government revenue.<sup>15</sup>**

### **Reducing the social costs of gambling**

Participants in this research reported dire financial impacts as a result of their gambling problems. The cost of gambling was recurrent financial crises which affected relationships, health, employment and housing. Many participants had accumulated large levels of debt as a result of their gambling which in some cases led to a housing crisis, persistent food shortages, the neglect of health and the development of health problems as they prioritised expenditure from an increasingly small base.

The spread of poker machines, in addition to the presence of horse racing and keno, into hotels and clubs across Tasmania has limited the number of gambling-free venues for local communities, particularly in rural and regional areas. In some parts of Tasmania it is not possible to meet someone for a cheap meal or have a drink without the constant presence of gambling. Gambling outings are seen as a valid form of social participation and venue operators not only promote but actively underwrite the cost of group outings to their venues. This causes particular problems for people with a gambling problem. Many participants struggled to find social activities in their local area that did not involve gambling. Some participants reported that their work places offered group outings to gamble as a common social activity.

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<sup>14</sup> This is the current requirement for the profits from poker machines in hotels and clubs.

<sup>15</sup> This is the proportion of expenditure estimated by the Productivity Commission (1999) that comes from people with gambling problems.

#### **Recommendation 4**

**That the State Government establishes a program to fund non-gambling forms of social and community activities that expand on, and/or provide alternatives to current sport and recreation activities in Tasmanian communities, particularly in rural and remote areas.**

**That this program be funded from gambling-derived government revenue.**

#### **Recommendation 5**

**That the Gambling Support Bureau contracts Break Even services to provide information and training to all major workplaces and trade unions regarding the impacts of problem gambling in the workplace for individuals and their families. This information should include the signs of problem gambling and an encouragement for work social clubs to provide non-gambling social activities.**

**That this training be funded from gambling-derived government revenue.**

#### **Improving the services for people with gambling problems**

The majority of participants used problem gambling counselling to assist with their gambling problems or accessed a variety of professional health workers. There was evidence of other pressing health, financial and social problems that arose from gambling but were not being addressed.

Staff of community services are often at the end of the line of problems caused by gambling as people seek assistance to get through the fortnight. Participants indicated that high levels of shame impacted on their ability to seek help from professionals for their gambling problems. They were very selective about who they talked to about these issues and even where they had long-standing relationships with a health or community sector professional they may never have discussed their gambling problem. They also indicated that workers' knowledge and expertise on gambling varies greatly.

Although members of the Break Even Network are already working with GPs in Tasmania to facilitate understanding of gambling problems and its impacts on health, there needs to be greater integration of assistance for gambling problems.

#### **Recommendation 6**

**That the State Government implements an integrated service delivery model through the case management by Break Even services of people with gambling problems and their family members across personal, relationship, financial and alcohol and drug abuse counselling, emergency relief, Supported Accommodation Assistance Program Services, GPs, mental health services, prison support services and legal services. This model should include the provision of professional development, provided by Break Even services, for health practitioners, family support services, neighbourhood houses and drug and alcohol services regarding problem gambling assessment, referral options, self-exclusion procedures, as well as background information about the risks of gambling, possible signs of gambling problems and self-help strategies.**

**That this model be funded from gambling-derived government revenue.**

Participants reported patterns of using counselling and group support services intermixed with returning to gambling. From the narratives it appeared that many participants were better able to manage their gambling problems in the periods in which they maintained a level of contact with Break Even services.

#### **Recommendation 7**

**That contracts for Break Even services require counsellors to invite each client to a follow-up telephone or face-to-face session between 6 months and 12 months after the cessation of treatment, whether the treatment was considered to have had a successful outcome or not, in order to evaluate the effectiveness of treatment and to offer further assistance if required.**

#### **Recommendation 8**

**That the Gambling Support Bureau coordinates an annual problem gambling awareness week and annual television, radio, newspaper, cinema, shop-a-docket, taxi- and bus-back advertisements about problem gambling and Break Even services, including the impacts of problem gambling on family members and the services available for them, and that these advertisements be planned and coordinated with the Break Even Network.**

**That these initiatives be funded from the Community Support Levy.**

Currently there are delays in delivering Break Even services to some remote areas. A person living on the west coast identifying a gambling problem would either need to wait until the Break Even service is scheduled to visit the west coast or travel to Burnie to see a counsellor. Privacy issues in rural and remote areas make the delivery of specialist services sensitive, and a range of strategies are needed to address clients' varying needs for confidentiality and accessibility. With their work on community initiatives related to gambling and their networks with local communities, neighbourhood houses are well placed to support partnerships with the Break Even Network.

#### **Recommendation 9**

**That the Break Even Network is funded to further develop partnerships with neighbourhood houses and health services to further extend Break Even services into rural and remote areas.**

**That the extension is funded from the Community Support Levy.**

Some participants identified a need to receive intensive rehabilitation for their gambling problems but were unable to access these services either because of financial difficulties or because the service was not available for people with gambling problems.

#### **Recommendation 10**

**That the Gambling Support Bureau provides support to organisations that provide rehabilitation for alcohol and drug abuse for them to extend into supporting people whose primary presenting problem is gambling. That health care card holders attending rehabilitation for gambling problems have the fees for treatment covered by funds from the Community Support Levy.**

A number of participants had nominated to use the strategy of self-exclusion from venues to assist them with their gambling problems. Self-exclusion is a difficult policy to implement because it is difficult for venues to monitor all patrons and there is little incentive for a venue to comply. TOTE Tasmania is a voluntary participant in the program and no cover extends to race tracks and bookmakers. However, while only a minority of people with gambling problems use this strategy at any given time, this research found that it was an important self-management strategy for them. Regrettably, a number of participants had experienced difficulties in establishing the self-exclusion and in maintaining it both because of the extent of grip that gambling had on their lives or because they found the exclusion to be largely un-enforced by venues.

#### **Recommendation 11**

**That state legislation be amended to require all gambling operators including racing, internet and telephone-based gambling operators to actively promote self-exclusion and to provide information about self-exclusion at all gambling venues and web sites.**

#### **Recommendation 12**

**That the Gambling Support Bureau investigate ways to make the self-exclusion process easier for people to participate in. This should include providing the opportunity to self-exclude from gambling venues and activities state-wide without being required to attend counselling and improving the monitoring requirements of venues for self-exclusions of their customers.**

#### **Recommendation 13**

**That state legislation be amended to make self-exclusions of customers legally enforceable from all TOTE activities and venues, race tracks and bookmakers.**

Data collected about clients of the Break Even Network is critical to inform policy development and service delivery. However, there are gaps in information collected and the data has not been publicly released since 1998. Currently service providers are unable to use the data base to inform planning and service delivery and the government cannot use this information to inform policy development.

#### **Recommendation 14**

**That the Gambling Support Bureau reviews the data collected by Break Even services to ensure information is collected that is relevant to improving policy outcomes and service delivery and that all relevant data is included for each client. That the Gambling Support Bureau provides a public report of the analyses of this data each year.**

#### **Improving consumer protection**

The Tasmanian Government and gambling industries have a duty of care, especially regarding the provision of information and protection of gambling customers. However, current consumer protection measures in Tasmania are inadequate and inconsistent across the different forms of gambling. The principle of consumer protection for patrons of gambling venues has never established in Tasmania. Rather, the government and industry have promoted the concept of 'patron care' and 'responsible gambling' which both promotes an aura of industry self-regulatory goodwill and at the same time places responsibility for the problems of gambling on individual consumers.

This would be unacceptable in any other area of public health. A striking parallel that we will not see would be self-regulation by tobacco companies accompanied by calls for 'responsible smoking'. In spite of the Productivity Commission finding that the gaming industry should not self-regulate and serious public concerns about the regulatory environment in Tasmania and repeated calls from the community for independent evaluation of industry's 'patron care' in Tasmania, none has been conducted.

Participants in this research found that 'patron care' offered to consumers varied depending on the gambling form. Rather than protection from harm, however, many participants identified that the 'patron care' that they experienced was more focussed on keeping them in the venues. They suggested a range of strategies which they thought would help limit cycles of problem gambling; many of these have not been tried or tested in Tasmania.

#### **Recommendation 15**

**That the current regulatory bodies for gaming and racing be amalgamated into one body which should be made fully independent from government. This recommendation requires the provision of administrative resources and staff independent of government departments and annual public reporting of activity. The regulatory body should have a key role in providing information and policy advice as well as the probity of gambling and ensuring that consumer protection measures are implemented across all forms of gambling.**

#### **Recommendation 16**

**That the State Government establish a gambling consumers' Advocate to work with government, industry and community members to enhance and encourage consumer protection for all forms of gambling in Tasmania. That the Advocate be a statutory appointment, have administrative resources and staff independent of government departments and be required to provide annual reports to Parliament. That this position be publicly advertised and appointment made by a panel consisting of government, health service and community representatives.**

**That this initiative be funded from gambling-derived government revenue.**

#### **Recommendation 17**

**That the State Government amend legislation for all forms of gambling in Tasmania to replace voluntary 'patron care' with consumer protection of users of all forms of gambling within a public health framework. That this initiative introduces co-regulation of all consumer protection measures with implementation by industry and monitoring, enforcement and evaluation provided by the regulatory body. That legislated rules for racing and gaming be publicly displayed in all gambling venues and internet sites and made available for people betting by telephone.**

Participants suggested a range of consumer protection measures of quite specific nature. Other states have experimented with changes to poker machine technology and gambling environments in efforts to address gambling problems. The range of initiatives suggested by participants and supported by research include:

- all forms of gambling to show actual amounts of money spent in dollars and cents not in credits;

- all forms of gambling to provide information about the odds of winning and of losing;
- all forms of gambling, where technically possible, to provide information about money and time spent in any one session;
- the time to be clearly and permanently displayed on all forms of electronic gambling and in all gambling venues;
- all gambling areas to be entirely separate from restaurants and bars, not be visible from children's play areas or a venue's smoking area and be required to provide full lighting;
- gambling venues not permitted to have alcohol 'happy hours' or to serve alcoholic drinks within gambling areas and gambling operators to be required to prevent patrons gambling whilst they are intoxicated;
- chairs to be removed from gambling areas;
- all gambling venues outside the casinos to have a shutdown of 8 continuous hours each day;
- all forms of continuous gambling, including poker machines, to be required to shut down at frequent and regular intervals as a 'break in play' with the length of this interval to be determined through independent research;
- all gambling prizes of \$500 or more to be paid entirely by cheque;
- gambling operators to be prevented from cashing cheques, including those issued as winnings;
- EFTPOS cash withdrawal facilities to be banned from all gambling venues, where a gambling venue is shared with other functions the gambling function overrides;
- that the maximum multiple bet on a poker machine in hotels, clubs and casinos be \$1 per button push; and
- that 'smart cards' are introduced for all poker machines in Tasmania pending the outcome of independent analysis of research currently being undertaken into this technology in other jurisdictions.

### **Recommendation 18**

**That as part of the national research agenda the Federal Government funds a nationwide independent evaluation of consumer protection strategies in order to assess and recommend good practices and that this be used to inform the development of comprehensive consumer protection in Tasmania.**

The development of appropriate policy responses to the expansion of gambling in Tasmania requires proper consultation and reliable and independent research. However, the major source of information about the impacts of gambling in Tasmania is an irregular telephone survey of 1000 Tasmanians, which is limited in scope. Major policy decisions such as the extension of gambling licences have been made without any community consultation. For example, in the last three years the Gaming Commission has not once called for submissions from the community to inform their work in spite of considerable community concern about a range of gambling issues. There is a need for appropriate research founded on the concerns and experiences of the community.

#### **Recommendation 19**

**That state legislation require that all new or extended opportunities, technology, designs and licences in Tasmania for any form of gambling be subject to a social and economic impact assessment (SEIA) which would be assessed by the Advocate against a publicly available set of criteria with recommendations for decision by the relevant regulatory body. Under the SEIA, the item under investigation must demonstrate that it will not increase potential for harm. The SEIA must be advertised for public comment with adequate time allowed for public response. That the costs of SEIA be met by gambling-derived government revenue.**

#### **Recommendation 20**

**That the State Government develop appropriate policy responses to gambling in Tasmania through consultation and research. Specifically that they conduct regular prevalence studies with appropriate methodology supplemented by qualitative research and that this research be extended to assess the social and economic impacts of gambling on individuals and communities in Tasmania. That the Community Support Levy be used to fund this research.**

This research has supported national findings that poker machines have dramatically escalated the dimensions of problem gambling in Australia. The interests of industry and the reliability of gambling taxes as government revenue do not outweigh the responsibility for government to act for the public interest.

#### **Recommendation 21**

**That the State Government reduces the number of poker machines in hotels and clubs across Tasmania at the time the next contract is negotiated. The reduction should be based on the findings of the latest state-wide prevalence and social and economic impact study and include discussions with local communities to ascertain the maximum number of poker machines for each local government area.**

Player loyalty schemes reward a person's expenditure with a particular company or product. People accumulate points which enable them to win certain 'rewards', receive 'gaming vouchers' that are redeemable only for spending on gambling, or to enter member-only competitions. Participants reported that loyalty schemes enticed them to increase their gambling.

#### **Recommendation 22**

**That for each form of gambling the regulator defines minimum standards for customer loyalty schemes to ensure that they are offered under fair terms and without any inducement for members to gamble and requires all gambling operators to provide a statement of activity to members.**

#### **Reducing the promotion of gambling**

Gambling advertisements are exciting and attractive portraits of fun sociable lifestyles; they do not show people losing. Their messages reinforce the distorted perceptions of people who have problems with their gambling. This research found that participants had difficulty in managing their gambling problems in an environment in which they were surrounded by enticements to gamble. The Productivity Commission (1999)

recommended legislation-based codes specific to gambling advertising and for all gambling advertising to carry a risk warning about the product.

**Recommendation 23**

**That the State Government ban advertising outside of gambling venues for all forms of gambling and that advertising inside a venue, directly to patrons or on web sites carry warnings about problem gambling. That all gambling-related printed and electronic participation materials including betting forms and form guides be required to carry warnings.**

**Recommendation 24**

**That all media stories on TV, radio or newspaper about problem gambling run with no gambling-related sounds or visuals and that all news items be followed with the phone number for Gambling Helpline Tasmania.**

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