



August 2009

**Global Discourse on Gambling: The Importance of a Public Health Perspective**

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Worldwide \$110 billion in revenue goes to governments  
from citizens through wagering loses (Adams, 2008)

**Introduction**

Over the last decade, the world has witnessed an unprecedented expansion of legalized gambling. The *Gambling and Public Health Alliance International*, founded in 2008, is dedicated to bringing together individuals and organizations around the world who are interested in reducing and eliminating gambling harm. A key organizing principle is its intention to frame its activities within public health. The purpose of this invited position paper is to outline a public health perspective embraced by the Alliance to shape its strategic initiatives as it grows and evolves.

**Definitions**

*Health* is the extent to which an individual or group is able, on the one hand, to realize aspirations & satisfy needs and on the other hand, to change and cope with their environment (WHO, 1984)

*Public health* is a publicly funded and organized community (programs and services) focused on preventing disease and disorders, protecting the public from health risks and hazards, and promoting healthy individuals, communities and public policy. Ideally, its activities are based on evidence and supported by a range of population-based research approaches and methodologies.

*Gambling* is risking money or something of value on the outcome of an event involving chance when the probability of winning or losing is less than certain.

*Public health & gambling* is the study of the distribution and determinants of gambling-related health problems in a defined population and the organized public measures to prevent, eliminate or control its occurrence, spread and impact.

*Healthy gambling* builds on the WHO definition of health and involves informed choice on the probability of winning, a pleasurable gambling experience in low risk situations, and wagering in sensible amounts of money for sensible amounts of time.

*Unhealthy gambling* refers to various levels and patterns of gambling problems experienced by some gamblers which may produce adverse consequences.

*Healthy public policy* refers to the admonition that policy initiatives in every sector promote health-sustaining conditions.

**Gambling discourses**

“The way you define a problem will determine what you do about it”

Dr. Jonathan Mann First Director, Global AIDS Program, WHO

There have been a wide range of discourses about gambling, including: moral; monetary/economic/business; medical/psychiatric pathologies; compulsions; criminal; mathematical/risk; public policy; and leisure/entertainment. Our intention is to examine several discourses that impact on public policy, personal choice, commerce and health. Understanding these various discourses has importance in that the framing of any issue or challenge, determines what you do about it. These discourses are: gambling addiction; pathological gambling; responsible gambling; a pathways model; problem gambling; and the public health perspective.

1. *Gambling addiction*: Concepts of addiction have been widely used in the media and amongst individuals struggling with

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issues of gambling, substance abuse and eating. Academic institutions, as well, have chosen the use of the word addictions to provide a framework for research and teaching as they probe how the brain seeks and rewards pleasure. Concerns are raised about gambling creating problems where individuals lose a sense of control and feel overwhelmed by the compulsion to gamble, despite the probability of adverse consequences to themselves, family and community (Jacobs, 1986). In this paradigm the focus is on the individual and the gaming technologies that reinforce conditioning to continue play.

2. *Pathological gambling (Medical Model)*: This terminology is used in the diagnostic statistical manual of the American Psychiatric Association to describe the mental health disorder associated with gambling. This mental disorder was first described in the 3<sup>rd</sup> Edition in 1980 by Dr. Robert Custer (American Psychiatric Association, 1980). Originally referred to as "Compulsive" gambling, and later changed to "Pathological" gambling in subsequent editions. This designation reflects a disease model as described for other mental disorders such as substance dependence, schizophrenia, and bi-polar disorder. Here the notion of prevention usually is focused on case findings and early identification, often termed secondary or clinical prevention. This model has been widely embraced by mental health professions such as psychiatrists, addiction counsellors, and clinical psychologists. It is utilized to address both pharmacological and behavioural dimensions, as well as clinical prognosis (Blume, 1987). In this description the medical diagnosis is binary: either you have it or you don't. It does not reflect the subtleties of progressively problematic behaviour. Government and industry often find this an attractive model because it "medicalizes" and seeks to individualize a person's gambling struggles — placing the focus on individual behaviour, genetics and psychology.
3. *Responsible gambling (The Reno Model)*: "Refers to policies and practices designed to prevent and reduce potential harms associated with gambling; these policies and practices often incorporate a diverse range of interventions designed to promote consumer protection, community/consumer awareness and education, and access to efficacious treatment" (Blaszczynski, Ladouceur & Shaffer, 2004, p.308). The model is predominately used by the gambling/gaming industry. Historically it has been widely used by the tobacco and alcohol industries to place risk and responsibility on the individual user of the product, and secondarily to mitigate the risk of litigation. In this light, gaming corporations and associated governmental bodies generate educational material to foster individual informed choice regarding risks and benefits of gambling. This competes with high intensity advertising and marketing encouraging people to gamble for enjoyment and entertainment. There is little reference to shared responsibility amongst all stakeholder groups. Efforts to reflect corporate responsibility are commonly framed within corporate codes of conduct reflecting broad general principles.
4. *Pathways model*: As a response to the lack of a single conceptual theoretical model of problem gambling, a pathways model of problem and pathological gambling was put forward to integrate the complex array of multiple biological, psychological and ecological variables contributing to the development of gambling problems (Blaszczynski & Nower, 2002). Predicated on the notion that many subtypes of gamblers exist, the pathways model focuses on several pathways associated with specific vulnerability factors, demographic features and aetiological processes: 1) behaviourally conditioned problem gamblers; 2) emotionally vulnerable problem gamblers; and 3) antisocial impulsive problem gamblers (Blaszczynski & Nower, 2002).
5. *Problem gambling*: The term problem gambling is widely used to describe a continuum of gambling problems from mild, moderate, to severe. It differentiates itself from a medical model and invites community-based organizations and researchers to address both the risks and appropriate harm reduction interventions. While no formal problem gambling model or framework itself yet exists, a number of organizations embrace this terminology in their organizational name. Most of these organizations are community based and publicly funded. An attractive feature of this approach is that it de-medicalizes gambling-related behaviours and invites a variety of interventions both individual, group and community based.
6. *Public health perspective*: This approach more broadly addresses healthy public policy, comprehensive notions of prevention (primary, secondary and tertiary), and broad community engagement. Its strength is that it utilizes a range of scientific modalities and a diverse range of perspectives, including: epidemiology, social marketing, economics, and community development. In addition to behavioural factors, it acknowledges the importance of social determinates such as education, family functioning, socio-economic status and ethno-cultural diversities, as it relates to health, preferences, risk and expectations. Healthy public policy is guided by **preventing** or reducing harm, **promoting** balanced and informed healthy choices, and **protecting** vulnerable and at-risk populations such as seniors on fixed incomes, youth and lower socio-economic individuals. Public health ethics fosters an accountability that ensures a healthy balance between costs and benefits acceptable not only to the individual but also the range of stakeholders within the broader community (Korn & Shaffer, 1999).

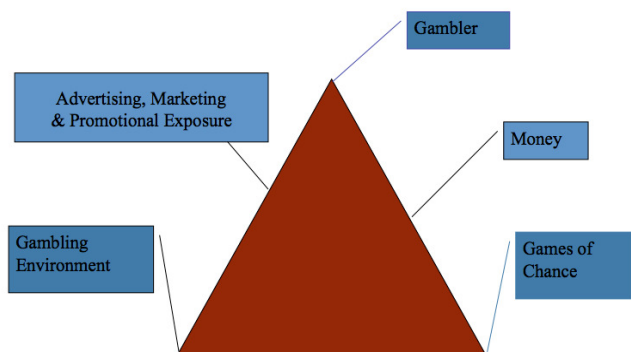
### Value of a public health approach

"The enduring value of a public health perspective is that it applies different 'lenses' for understanding gambling behaviour, analysing its benefits and costs, as well as identifying strategies for action" (Skinner, 1999, p.286).

There is considerable value in adopting a public health perspective on gambling (Korn & Shaffer, 1999; Skinner, 1999). This perspective focuses on communities and high-risk (vulnerable) populations rather than solely on individuals and their clinical needs. The approaches are characteristically inter-disciplinary, inclusive and foster community-based transparent strategies and solutions. A public health approach is dynamic and embraces the value of research and health public policy, while also

incorporating harm-reduction approaches. A public health lens recognizes that there are both costs and benefits associated with gambling. By taking into consideration the health, social and economic dimensions of gambling, public health professionals can develop strategies that minimize gambling's potential negative impacts while recognizing its potential benefits (Korn & Shaffer, 1999).

### Determinants of Gambling Harms



Adopted from: Korn, D. & Shaffer, H. (1999). *Gambling and the Health of the Public: Adopting a Public Health Perspective*. *Journal of Gambling Studies*, 15(4), 289-365.

This model is derived from the classic public health approach to dealing with public health interventions, initially related to communicable diseases, but now more broadly applied to other areas such as: obesity, addictions, and physical activity. The model incorporates three primary determinants of diseases and disorders generally described as the host, agent, and environment. With regard to gambling, this classical model has been applied to reflect the gambling environment (policy, cultural context, community values, gambling venue), the games of chance, and the characteristics of the individual (genetics, behaviour, psychology, and social factors). Two gambling-related vectors are illustrated to represent the power of advertising/promotion and money. Public health approaches elaborate strategies and interventions to mitigate these pathways into and out of gambling-related health problems.

### **Public health issues & challenges**

*Population Gambling Loses* — There is research that points to a disproportionately large financial contribution by problem gamblers to gambling industry profits. Economic studies linked to past year prevalence have demonstrated that the small group of moderate/severe problem gamblers generate a disproportionately large amount of revenue (Williams & Woods, 2004). This phenomenon requires more detailed examination including the tracking of expenditure data delineated over time in longitudinal population-based epidemiological studies.

*Advertising & Promotions* — Commercial gambling advertising is ubiquitous. It incorporates messages that normalizes and promotes gambling as an almost risk-free form of leisure entertainment. The amount of money spent by the gambling industry to shape and cultivate adult participation in a range of

gambling activities is significant. For example in Ontario \$6 billion/year is spent on advertising and promoting gambling venues and games (Korn, 2005; 2008).

*Gambling & Public Policy* — There is an interconnectedness between governments and the gambling industry. The interconnections between governments and industry range from government gambling monopolies to private corporations regulated and taxed by government. Because governments are seeking to maximize their revenues, particularly in this economic climate, and at the same time reluctant to raise general income taxes, gambling has become an attractive, though sometimes controversial vehicle for public revenue generation.

*Evolving Gambling Technologies* — New technology design in gambling machines and the rise of Internet gambling are changing the face of gambling. Today's gambling machines (VLT's) have become very sophisticated, incorporating mathematical algorithms and interactive technology that promote small wins and dissociative states (Schorrow, 2009). Internet gambling (both regulated and unregulated) has penetrated the lives of individuals through the use of computers and other electronic devices. Because this is such an isolating and accessible experience the risk for problem behaviour, without significant counter-force protections, invites excess involvement in a socially isolating context (Wood & Williams, 2008).

*Youth* — Youth participation in gambling activities desires priority focus. A range of epidemiological studies highlight high participation and problem prevalence rates of young people. As a society we are embarking upon a major social experiment where this technologically savvy cohort will have access to a wide range of gambling activities.

*Vulnerable Populations* — There are other populations at risk of gambling related problems. Lower socio-economic groups disproportionately contribute revenue through their gambling activities (Statistics Canada). Seniors, also a target market for the gambling industry, often live on small or fixed incomes and may also display diminished cognitive functioning. Studies of Aboriginal and other ethno-cultural populations suggest disproportionately high rates of gambling problems (Tepperman & Korn, 2000)

### **Strengthening Public Health Capacity to address health-related gambling issues**

The following initiatives are proposed to build momentum for the public health perspective and acknowledge gambling's significance as a public health matter:

1. Advocate and insure where possible that all gambling owners and operators prominently and clearly display the odds of winning and losing for each gambling activity as well as communicate accurately gambling risks and the potential for harms associated with gambling.
2. Establish guiding principles and placement standards for all commercial gambling advertising and promotions. In an attempt to shield children and adolescents from commercial gambling advertising and promotions, the creation of transparent guiding principles and clear and concise

placement standards need development.

3. Develop economic modeling to better address the differential costs and benefits and contribution of social determinants so that they adequately examine the impact on vulnerable populations, families and local communities.
4. Engage mainstream public health practitioners, agencies and academics in all jurisdictions in order for them to better understanding and embrace gambling as a public health issue. Gambling research, community initiatives and gambling policy could be strengthened by their involvement, influence and expertise. To cultivate linkages with the public health community, gambling experts and agencies could offer presentations at public health conferences, and distribute relevant gambling materials. Initiating this dialogue with public health associations and leaders within each country could strengthen alliances on gambling as a public health matter as well as add credibility to strategies intended to protect the public and promote healthy gambling policies and practices.
5. Apply new public health innovations such as systems thinking to the gambling field. This methodology has been utilized in fields such as tobacco, healthcare systems, physical activity, and therapeutics. The value of this lens is its ability to examine interrelationships between parts and their relationship to a functioning whole, often understood within the context of an even greater whole (Trochim et al, 2006). Today's public health practice is a complex, dynamic system and by incorporating innovative systems approaches, a more connected understanding of public health action and critical challenges can be understood.
6. Create a global charter on gambling that could be developed at an international summit on gambling (as put forward in Raeburn, 2004). This initiative could be modeled on the approach embodied in the Framework Convention on Tobacco Control (WHO, 2003). To draw attention to the importance of implementing measures to protect present and future generations of individuals from gambling related harm, a theory-based framework convention would help influence behaviour change at the individual, organizational, community, national and international systems level.
7. Promote full disclosure regarding remuneration sources as well as transparency regarding linkages to the gaming industry in all dimensions of gambling activity involving researchers, academia, and practitioners.

## Conclusion

This position paper is intended to be a contribution to the important field of gambling in society using contemporary public health concepts and strategies adapted to this emerging field. We hope that a public health discourse will lead to improved understanding of the risks and benefits of gambling for individuals, families and communities, and that it will foster innovative approaches to understanding and

preventing gambling associated harms. We believe a public health perspective can contribute to the creation and application of healthy public policy locally, nationally and internationally. We hope this position paper provides a fresh perspective on earlier work in this area.

## Disclaimer

David Korn has received honorarium for invited presentations on gambling as well as fees for consultations and projects with governments on gambling and NGOs within the gambling field. He is the recipient of research grants from the Ontario Problem Gambling Research Centre and gambling program funding from the Ontario Ministry of Health Promotion.

Jennifer Reynolds has received honorariums for presentations within the gambling field and is currently the recipient of the Ontario Problem Gambling Research Centre (OPGRC) Doctoral Fellowship.

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## Code of conduct regarding on-line gambling adopted by the European Parliament

Jessika Svensson Swedish National Institute of Public Health

In the European Union, gambling activities have traditionally been regulated in various ways according to the national levels of protecting consumers from addiction, fraud, money-laundering and fixed games. After gambling activities were excluded from the EU's Services Directive, there have been a growing number of complaints from sports betting service providers regarding access to national markets. On the 10 of March, the Members of the European Parliament (MEPs) rejected the idea of creating an EU single market for online gambling, backing member states' right to decide on market liberalisation and regulation.

### Online gambling in EU

Online gambling in Europe has existed since 1996, where the first game was made available in Finland. Since then the market for online gambling has grown considerably. In 2004, it was estimated that the commercial online gambling market accounted for roughly 5 percent of the total gambling market in the EU, worth € 2 to 3 billion in annual Gross Gaming Revenues (operator winnings less payments of prizes). Figures provided in PricewaterhouseCoopers' *Global Entertainment and Media Outlook: 2008-2012* expect the European online gambling market to grow at a minimum rate of 8.4 per cent per annum (in Austria and Hungary) to a maximum of 17.6 per cent (in Italy).

Similarly, an EGBA study indicates that the European online gambling market is expected to double between 2007 and 2012. Member States are therefore forced to adapt and develop regulation in order to keep pace with consumer preferences and suppliers' services. At the moment several states are in a process of legislative changes of the gambling market.

The specific nature of online gambling causes certain difficulties for policy-makers in the Member States: Firstly, online gambling entails a cross-border element, which makes it possible for online gambling operators to provide their services to consumers in other Member States than the one they are based in. Currently, most online gambling license holders are operating from tax havens like Malta and Gibraltar, and respect 'country of origin' rules regarding the provision of services.

Secondly, it is difficult for online gambling operators to supervise their customers as opposed to conventional gambling where it is possible to see whether the customer is under age, is drunk or in other ways intoxicated or behaving suspiciously. Also since access to online gambling services is easy and can be done in isolation, social checks and constraints that can be exercised by the presence of others are lacking.

### The code of conduct

The European Parliament adopted a non-binding resolution, a Code of Conduct, on the integrity of online gambling at its Strasbourg plenary, with 544 in favour, 36 against and 66 abstentions. In doing so, the House rejected an alternative minority opinion report (570 against, 74 for) arguing that gambling is an economic activity to which internal market rules on freedom to provide services should apply. The alternative report also argued that the dangers of online gambling, such as addiction, are unproven.

The final resolution underlined that member states have the right to regulate their culture-specific gambling structures, which finance sports and other social activities. Furthermore, online gambling operators must comply with the gambling legislation of the member state in which they provide their services and in which the consumer resides. The regulatory frameworks for the (conventional and online) gambling market in the EU are, as said before, very much heterogeneous.

In twenty EU Member States online gambling is allowed, whereas seven Member States have prohibited online gambling. Thirteen Member States have a liberalised market, while six have state-owned monopolies and one Member State (Sweden) has licensed a private monopoly. The Member States who have banned online gambling altogether or allow it only under monopoly conditions argue that these limitations are justified on grounds of social and public order.

However, there have been great disputes regarding the so-called national gambling monopolies. Numerous complaints have been filed with the European Commission by gambling companies, private persons and media organisations claiming that certain Member States are unlawfully protecting their gambling markets and the revenues arising from their monopolies. As a result the Commission has started infringement procedures against ten Member States, in order to verify whether national measures limiting the cross-border supply of online gambling are compatible with Community law.

MEPs asked the Council to seek a "potential political solution" to the problems of both online and traditional gambling and betting, set out joint measures to tackle match-fixing risks and develop standards for online gambling with regard to age limits and credit bans.

While a code of conduct on the sector could complement legislation, self-regulation alone is not enough for the gambling sector, and the report calls on the Commission and the Member states to:

Carry out research into the risks of online gambling

Take appropriate measures to combat illegal online gambling services and aggressive gambling advertising

Come forward with proposals for an EU approach to regulating online gambling.

The issue of regulating EU gambling markets, whether conventional or online, is very sensitive. But there is a clear need for clarification about the regulatory environment concerning online gambling. At present, several cases pending at the European Court of Justice right now are related to gambling.

In these cases The European Court of Justice has stated that freedom of movement (Article 49 of the EU Treaty) applies to gambling services. However the court has also stated that gambling may entail certain moral, religious and cultural aspects, involve a high risk of crime or fraud and may have damaging individual and social consequences. Restrictions may therefore be justified if they are necessary for consumer protection, for maintenance of the public order (prevention of fraud and crime), for maintaining of the social order (culture or morale) and for preventing gambling from being a source of private profit.

However, restrictions must serve to limit betting activities in a consistent and systematic manner, they must be applied in a non-discriminatory manner and they must not go beyond what is necessary to attain the end in view.

More information on the report and decision on on-line gambling in the European Union:

<http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//TEXT+TA+P6-TA-2009-0097+0+DOC+XML+V0//EN&language=EN>

<http://register.consilium.europa.eu/pdf/en/08/st16/st16022.en08.pdf>

<http://www.europarl.europa.eu/activities/committees/studies/download.do?file=23191>

### News flash:

Two days ago (Tuesday) the EU's top court ruled that national governments can uphold domestic restrictions on online gambling and ban foreign websites. But only if the intention is to stop fraud and crime (notice that it doesn't mention gambling problem).



*"Having to be surgically removed from your computer chair, leads me to believe that you do a LOT of online gambling."*

## New Technology in Gambling

This is a personal view from **Philip Townshend**, Research Director Problem Gambling Foundation of New Zealand.

Despite the gambling reality being losing money and sometimes debt, poverty, crime and domestic violence the prevailing world view of gambling has been the mega destination casino. This was characterised by a sense of extravagance and optimism, and populated by courageous men in white suits that never lose (either the money or the girl). This image was epitomised by the Los Vegas strip with ever newer bigger brighter and more expensive casinos. The mega casino has had a good run; it was started by the "wise guys" with an air of the risqué and danger and taken over by bankers, and tax men with an air of exploitation. In the last couple of years the mega model has ceased to fit with the mood of the financial world, it has gone out of fashion. There are many factors contributing to this but no particular reason other than the fickleness' of fashion.

The mega gambling destination model relied on there not being saturation gambling, that's changed now with Macau, Slovenia and Singapore already joining the Los Vegas mega club and plenty more prospective club members waiting in line. In many local jurisdictions, saturation with machine gambling has exposed everyone to the folly of the gambling dream contributing to the demystifying of the mega model. The mega model required huge capital investment and delivered huge returns to investors and regulators. Now unfashionable, mega casinos operators are going bust, their share prices are crashing, the world view of optimism and opulence is replaced by an expectation of recession and frugality and the big bright mega gambling model is yesterday-tomorrows gambling destination is going to be the World Wide Web.

e gambling has the feel of the early phase of an expedient curve. Its not widely accepted yet and not much squared is still not much, but e gambling growth is substantial and if expedient means it will rapidly become significant. The early up takers were the usual technology suspects, male, young, techno savvy risk takers, the second wave was and is baby boomers with money time but a bit less techno savvy and the next wave will be anyone with a cell phone- that's everyone from five to seventy five who will gamble on their phones between texts.

Because gambling is not a real thing (it's really just a set of rules) it fits neatly into the clicks and mortar technology. Anything with an element of randomness or uncertainty can be a medium for gambling and the net offers huge flexibility as a mode of gambling. If the event being gambled on is too uncertain for there to be a reliable house advantage the e gambling provider can let the punters decide odds and take a share of the pool. With a world wide audience and no tax they don't have to take much to be profitable and business is booming. Already the European Gambling Commission

estimates the e gambling market at over US\$10b. Of the 27 EU states 19 are currently reviewing their online gambling rules and 7 have moved to local licensing models characterised by existing casinos and lottery monopolies offering gambling on line while EU governments move to embrace online gambling through Financial Transaction Taxation.

US growth has been slowed by the prohibition on e-gambling but despite this half of the international internet gambling revenue comes from the US and all indications are the legal impediments to e gambling will be temporary. The US prohibition law is under attack, the Payments System Protection Act which calls for suspension of most of the Unlawful Internet Gaming Enforcement Act has been passed through the US Congress and the WWTO has been highly critical of the US attitude to e gambling regarding it as protectionist.

My prediction is governments become increasingly involved in the regulation and enforcement of net practices in order to allow e commerce to flourish which will remove a significant lack of confidence barrier to the expansion of e gambling. This will expose recession strapped governments to the temptation to tax e gambling which will overwhelm their desire to protect their citizens and allow for a boom in net based gambling.

Any up side to e gambling that might arise from better host responsibility requirements enforceable through a centralised system will be degraded by the lack of regulation and ethics in the system. Just today I have seen an e gambling client who used the self banning feature on an internet poker site. This worked for that site but she was immediately contacted by numerous other gambling sites inviting her to join- she did. They had obviously been given her details by the site she banned herself from.

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## Join the Gambling and Public Health Alliance International

**Connect** with Alliance members around the world dedicated to reducing and eliminating gambling related harm.

**Partner** with Alliance members internationally on issues relating to reducing gambling harm.

**Share** knowledge and information about international developments in legislation, policy and programmes to utilise in the task of reducing gambling harm.

**Benefit** from the support and advice provided by Alliance members worldwide.

**Receive** regular electronic newsletters and keep up-to-date with news from other members around the world on developments and issues in their region or country.

Membership to the Alliance is free. The Alliance receives no funding or support from the gambling industry.

[www.gaphai.org.nz](http://www.gaphai.org.nz)

Secretariat: Glenda Northey

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The next edition of this newsletter will include an article about the impact of the global financial crisis on gambling. Some suggest that a declining economy can increase levels of gambling activity. Mark Henley would love to hear from any one with observations, local articles or jurisdictional gambling expenditure data related to the global financial crisis, email: [mark.henley@ucwesleyadelaide.org.au](mailto:mark.henley@ucwesleyadelaide.org.au)

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