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A Public Health Approach to gambling

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This paper is an abbreviation of papers by Kate Roberts and Phil Townshend. Please contact the authors for the full texts and references of these papers.

The Origins of the Public Health Approach

The concept of public health has its origins in the 19th century work of visionaries such as Edwin Chadwick who noted the relationship between public hygiene and disease control. These early explorations grounded disease control in the relationship between;

- The individual affected (the *Host*)
- The bacteria/disease and its form of transference (*Agent*)
- The supporting socio-economic and physical habitat (*environment*).

Public Health has drawn from epidemiology, environmental health, and population health to become “the new public health” approach to health and wellness.

A New Public Health Paradigm

The 1970's saw a renewed interest in the social determinants of health due to the costs of traditional health care and the increasing impacts of 20th century lifestyles on the health of populations. This renaissance was driven by the work of Lalonde (1974) with a core belief that improving health would depend upon improvements in environment, modifying risky lifestyles and increasing understanding of human biology. The Lalonde Report became the turning point for the health field in re-aligning health policy away from an individual model of health care to consider both environment and lifestyles. The new public health movement, as

it came to be called, was based on a social model of health which challenged the narrow approach of the individual medical model.

The Lalonde report was a keystone in the development of what became the new public health paradigm embodied by the WHO in 1986 in the Ottawa Charter for Health Promotion. This Charter is regarded as a template for “prevention rather than cure”. It remains a guiding framework for the development of government commitments to promoting a population's health and wellness “not just the absence of disease”.

The five principles for action of the Ottawa Charter are:

Build Healthy Public Policy. This is not just health policy, all public policy must consider its impact on health.

Create environments which support healthy living. Such as living, work and leisure environments that do not create or contribute to poor health.

Strengthen community action on health. Communities themselves should determine what their needs are and how best to meet them.

Help people develop their skills so they gain control over their own health.

Reorientate the health care system to promote a better balance between health promotion and curative services.

Secretariat:

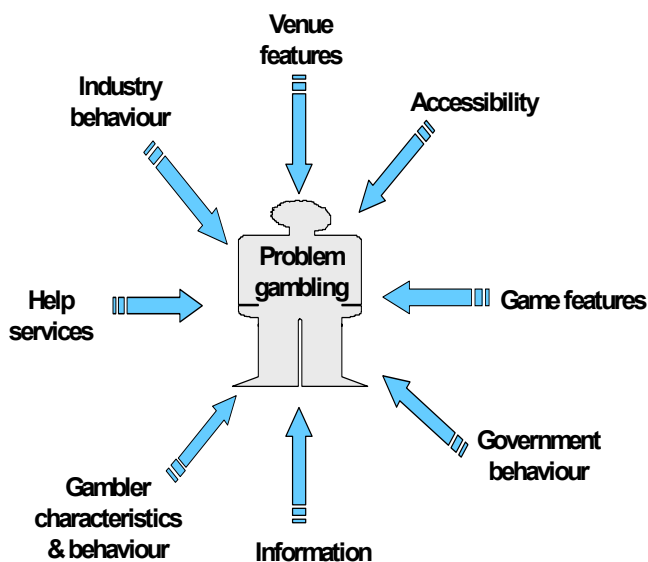
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The Relevance of the Public Health Approach to Gambling Policy and Practice

Public health approaches, including health promotion, have been widely adopted with other population health issues such as drug, alcohol and tobacco use along with pandemics such as AIDS and the N1H1 Flu and it can also be applied to gambling. It is suggested that unlike substance abuse, problem gambling is not a discreet disorder but may involve a range of accepted behaviours occurring within a subculture.

A public health approach to problem gambling promotes a sociological understanding accepting the likely influences on individual behaviours from a range of social, cultural, political, institutional and environmental factors and places the problem clearly within an epidemiological framework (see Fig.1, Productivity Commission, 1999). This shift in thinking goes beyond the traditional medical model of problem gambling with its emphasis on “treating” individual behaviour.

Fig: 1 An Epidemiological Framework For Problem Gambling



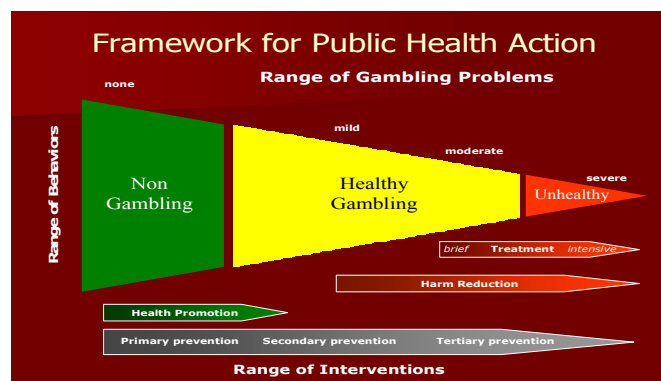
The public health model of gambling seeks to involve multiple sectors of the community in addressing gambling issues and avoids the “victim blaming” inherent in individualistic approaches. It is an approach that holds consumer and community participation as central to responding to gambling. A key outcome of this model is a “whole of government approach” involving partnerships and

collaboration across all government sectors with a role to play in primary, secondary and tertiary prevention.

Shaffer (2003) argued that the public health perspective for gambling had four guiding principles:

1. **Scientific research is the foundation of public knowledge**—A public health perspective requires that policy and action are based upon sound scientific research.
2. **Public health knowledge comes from population based observations**—The public health approach explores the distribution and determinants of gambling and gambling harm across a population.
3. **Health initiatives are proactive (for example, health promotion and prevention are primary while treatment is secondary)** - Korn and Shaffer (1999) suggested that the public health perspective protects and advances health by:
 - **Preventing** gambling related harm in individuals and groups who are most susceptible.
 - **Promoting** balanced and informed policies towards gambling and people who gamble.
 - **Protecting** vulnerable groups from gambling harm.
4. **Public health is balanced and considers both the costs and benefits of gambling** -The public health approach to gambling encourages the balance of many different perspectives, research methodologies and considerations and gives a broad perspective on gambling and not just a focus on the costs.

Fig .2 A Framework for Public Health Action



Korn and Shaffer

What Would A Public Health Approach to Gambling Look Like In Practice?

Gambling issues are not “owned” by any organization, industry, government or non-government sector. Gambling is owned by the community as in the NZ Health Sponsorship Council slogan:

Problem Gambling - Our Communities, Our Families, Our Problem

A public health framework involves a comprehensive and integrated approach to the problem and engages many sectors in working towards solutions. Problem gambling is not seen as the sole domain of governments, counselors or industry but creates the opportunity for all sectors to work toward defined and measurable goals within a whole of population approach.

In practice this means de-normalising gambling in the community (awareness, information, education), building alternatives to gambling for recreation/entertainment, reducing dependency of industry and governments on revenue (legislation) strengthening harm reduction interventions (industry regulation), reducing supply and accessibility (numbers of gambling machines per capita and locations), building community awareness about gambling risks (social mass marketing) and developing culturally appropriate interventions. These interventions involve both Person and Agent actions.

Community Actions

Build capacity of communities (including vulnerable groups) through addressing underlying issues of socio-economic disadvantage, strengthen resilience through personal skills development, treat health issues and educate individuals and communities about gambling risks, health screen for incidence of PG and treat those affected. Provide a holistic approach through working with families and communities.

Agent Actions

Change National Standards to make safer Electronic Gambling Machines, use technology to create a Win – Win, improve machine safety through smart card technology, limit access to high intensity machines (by placing them in casinos) with lower intensity machines in community settings. Use venue environments to reduce harm through reducing incentives to play, developing healthy alternatives, and increase duty of care/host responsibility (Player Tracking, Early Intervention).

Operationalising a Public Health Approach to Gambling

New Zealand has adopted the public health approach to gambling by adopting legislation that defines gambling as a public health issue. From this it follows that treating people with gambling problems is something we have to do as a caring society, while accepting that treatment alone is never going to solve a public health problem. To achieve this requires wider social change. Public Health and Social Marketing campaigns contribute to this but social activism has been the vital factor in achieving success.

Social Activism in a Public Health Response to Gambling

An important part of social activism is the orchestration of the media. In NZ this has involved highlighting the connection between gambling and crime, corruption in the gambling industry, and the social costs of gambling in the news and comment media. By law slot machine gambling in NZ exists to fund community groups and organisations such as the Problem Gambling Foundation have drawn the public's attention to the inefficiency and inconsistency of this funding model.

A critical feature of social activism is having a voice in the political processes. In this context the most important voice is the consumers, particularly those individuals and families affected by gambling. Social activism has included empowering consumers to speak and it is readily observed that politicians and the gambling industry find it difficult to counter eloquent and assertive consumers in the way they can discount treatment, public health providers and researchers. This has required leadership and coordination as consumers don't have the resources to coordinate their strategies and need help and support to stay safe when dealing with the media. Treatment providers have begun to perceive each intervention as a small public health intervention and public health providers need treatment providers and consumers to gain credibility.

A combined approach coordinated by social activism has bought about changes in public opinion in NZ that have been independently established through multiple surveys of attitudes to gambling since 1995. Public opinion has changed so that both the numbers participating in all forms of gambling and their spend has decreased steadily over recent years predating the international gambling downturn resulting from the

current recession. Now a majority of NZ adults see gambling, particularly on slots as a socially harmful activity. As a result of this public health focus the slot machine industry has publicly accepted that it has a social contract with the community and that to be sustainable it must provide its product in a socially responsible fashion. The industry has recently announced far reaching host responsibility interventions that can be independently verified and include a commitment to player tracking and feedback technology.

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Gambling and Free Trade

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Free traders regard gambling as just another product or service which should be unfettered by borders. This creates conflicts for governments serving the competing requirements of protecting their populations from uncontrolled gambling and protecting state owned monopolies that use gambling to fund government and provide community funding while also conforming to free trade rules. In most jurisdictions governments have an additional conflict as they are both legislators and gambling providers and often provide gambling under a monopoly imposed through regulation. Internet gambling is a focus for sovereignty issues as internet gambling providers offer their services to customers globally and may not be bound by local host responsibility regulations, taxes or levies.

The cross border issue has been big in the Economic Union where rules about the unimpeded flow of people, capital and products and services between EU member states are seen as fundamental to the existence of the EU. These rules rest on Article 49 of the EU Treaty which the European Court has previously found applies to gambling. Protectionism that undermines the free flow of capital and goods across EU borders is seen as taking the “economic”

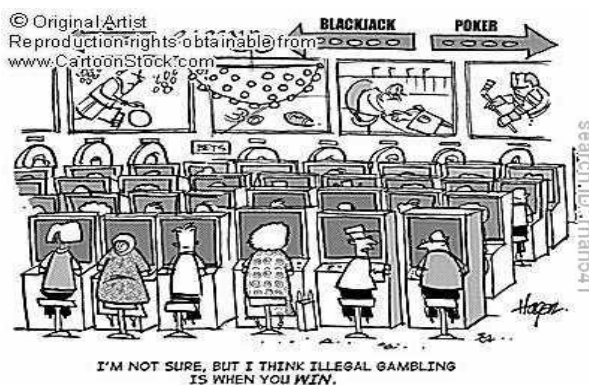
out of EU and as a serious threat to the very integrity of the union.

Recent progress has been made on this issue with the European Parliament adopting a non binding resolution that includes a code of conduct on internet gambling. The code allows member states to regulate their culture-specific gambling structures. These are gambling that finance sports and other social activities. In addition this code attempts to force online gambling operators to comply both with the gambling legislation of the state in which they provide gambling and in which the consumer lives.

Despite the EU’s willingness to put internal controls on internet gambling the EU has been at the forefront of a challenge to the US anti cross boarder regulations. This issue looks as though it will be resolved by compensation to non US jurisdictions providing offshore internet gambling and by the US removing gambling from future trade treaties. However there are strong forces within the US still working to repeal the legislation banning gambling across state lines which effectively bans internet gambling.

This is an issue in New Zealand as we are about to sign a free trade agreement with China which is, I understand is silent on, and therefore includes gambling and internet gambling. This may open New Zealand to gambling providers distributed through Asia who would not be required to contribute to the NZ levy on gambling losses and would be in conflict with the Gambling Act 2003 which gives the government a monopoly on offering internet gambling here.

As an alliance of persons concerned about gambling we need to engage in an ongoing discussion around gambling and free trade so that we are not just reacting to the gambling industry and governments.



What's happening around the world?

In the USA

Gambling Legalization and Expansion: Developments in the USA

Rachel A. Volberg, Ph.D.

In difficult financial times, governments in the USA have often resorted to legalization or to expansions of existing gambling operations to plug gaps in their budgets and avoid the unpopular steps of raising taxes and cutting services. The latest recession has been accompanied by numerous proposals in US states to allow or expand slot machines or casinos. Even before the bottom fell out of the stock market in the Autumn of 2008, Kansas, Maryland and Pennsylvania had passed legislation permitting thousands of slot machines located at racetracks or at casino-style facilities. In Colorado, voters approved a constitutional amendment in November that increases bet limits, permits additional games and allows 24/7 operations at the casinos in three former mining communities in the Rocky Mountains near Denver.

Legislation to legalize or expand gambling opportunities is presently under consideration in at least ten more states. Approaches range from tribal offers of revenue sharing with state governments in exchange for allowing Class III slot machines to numerous legislative proposals to permit slot machines at racetracks or to establish resort-style casinos or both.

Given the economic climate, experts believe that expansions in racetrack slot machines are more likely to pass than full-fledged casino developments. If so, there are plenty of states with proposals on the table. And even if the economy improves, states that still face poor revenue predictions may give further consideration to casino-style gambling. One final piece of the puzzle in the USA remains Internet gambling: it now appears likely that pro-gambling legislation will be introduced in the coming federal legislative session by the powerful chair of the House Financial Services Committee.

In Australia

Mark Henley

Manager Advocacy and Communications; Uniting-Care Wesley Adelaide

Most gambling policy attention in Australia is currently focused on the review of Australia's gambling industries by the Productivity Commission. "The Productivity Commission is the Australian Government's independent research and advisory body on a range of economic, social and environmental issues affecting the welfare of Australians." The Commission's report of its first review of Australia's gambling industries was released in

August 1999, and at the time was regarded as one of the most comprehensive reviews of gambling undertaken.

This second inquiry into gambling will spend less time on quantifying levels of gambling on gambling harm, regarding these issues as understood, and will take a more public policy approach to its final report. Issues that the Commission will cover include:

- the participation profile of gambling, including problem gamblers and those at risk of problem gambling
 - the economic impacts of the gambling industries, including industry size, growth, employment, organisation and interrelationships with other industries, such as tourism, leisure, other entertainment and retailing
 - the social impacts of the gambling industries,
 - the contribution of gambling revenue on community development activity and employment
 - the effects of the regulatory structures
 - the implications of new technologies (such as the Internet), including the effect on traditional government controls on the gambling industries
- evaluate the effectiveness and success of these harm minimisation measures used by the State and Territory Governments.

By the end of April 2009, 223 submissions had been received in response to the Commission's discussion paper, with a few stragglers still completing submissions, which were due by Easter. So interest is still very high in gambling issues.

The next step is for a draft report to be released in about August 2009, with about two months of consultation on key issues following its release. The final report will be presented to government in December this year.

The Australian Productivity Commission's web site is www.pc.gov.au for people who want to follow the progress of this significant inquiry.

In New Zealand

Peter Adams

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Graeme Ramsey

CEO PGFNZ

During the 1990's New Zealand endured ten years of rises in gambling which resulted in net loss rising almost fourfold to approximately US\$1.1 billion by 2004. This rise was largely caused by the introduction of electronic gaming machines (EGMs) to New Zealand and their rapid deployment in the pubs and clubs of New Zealand's communities.

In the early 2000s, efforts were made to formulate a comprehensive public health approach to gambling. These opportunities were incorporated into the drafting and final enactment of the 2003 Gambling Act

where the New Zealand government was first in the world to recognise gambling formally as a public health issue.

Currently in New Zealand gambling operators are levied a percentage of their turnover to provide for research, treatment and public health initiatives. This equates to approximately NZ\$20 million per year. This funding is collected by government and distributed via the Ministry of Health.

Not surprisingly, gambling industry figures continue to challenge public health conceptions of harm from gambling and they seek to promote a medicalised model which narrows attention to troubled individuals needing treatment services and diverts attention away from wider economic and political determinants. Accordingly public health initiatives are regularly challenged despite the growing support and accumulating evidence that public health approaches are benefiting New Zealand communities; for example, community concern as measured by the annual health survey has risen year-by-year; expenditure on EGMs continues to drop; and presentations for treatment are slowly declining across the sector.

Over time, those involved with gambling services have come to appreciate the strong link between public health and treatment. For example, access to services often depends on the level of general public awareness of gambling as an issue. The Asian team employed by PGF New Zealand has moved steadily over time from targeting community awareness to a service where public health and treatment initiatives are seen as interlinked and complementary. The New Zealand version of a public health approach to gambling identifies three main areas of activity; namely, harm minimisation, health promotion and political determinants. This approach is discussed in detail in an article by Peter Adams, John Raeburn and Kawshi De Silva which was recently published in the leading journal in the field, *Addiction* (vol 104, pp. 688-698)

As always, political environments change approaches over time. With the current world wide financial crises and the election of a right-leaning government in New Zealand, the emphasis is shifting back towards a traditional emphasis on individually-focused costs and efficiencies, and is showing signs of moving away from a public health focus. This is of significant concern to those working in the sector.

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A public health approach has served New Zealand well to date. A model exists for other countries to examine and substantial interest has been shown to these measures and their impacts. The task now is to ensure that the economic realities of gambling continue to justify this emphasis within New Zealand.



Pokies/EGMs take everything

Conferences for 2009/10

May 25th - 29th, 2009 at Harrah's Lake Tahoe. 14th International Conference on Gambling and Risk taking URL: http://www.unr.edu/gaming/14th_Conference_Brochure.pdf

25 - 27 June 2009. 23rd National Conference on Problem Gambling Prevention, Treatment, Responsible Gaming, Research and Recovery Indianapolis, Indiana USA www.ncpgambling.org/

August 12-14 2009 Midwest Conference on Problem gambling and substance abuse, Roads to recovery. Hilton Frontenac, St Louis. <http://www.actmissouri.org/PDF%20Files/MCPGSAReqForm.pdf>

November 18-20, 2009 [NAGS 19th Annual Conference. A National Approach.](http://www.nags.org.au/) Rydges Lakeside, Canberra, ACT, Australia <http://www.nags.org.au/>

February 24 -26 2010. International Gambling Conference Crowne Plaza, Auckland, NZ. The implications of technology for policy, practice and research. <http://www.pgfnz.co.nz/2010conference/index.htm>

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