Tackling gambling harm to improve health equity in New South Wales

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The issue

People lost a total of $9.8 bn to the gambling industry in New South Wales (NSW) in 2017-18. Between June to November 2020, poker machine losses in NSW from clubs alone were $2.2 bn, up 7% from the same period in 2019. Despite this demonstrative harm, current policy approaches have been unable to reduce the risks and impact of gambling-related harm in NSW. Gambling exacerbates financial hardship, domestic violence, and other addictive behaviours; all detrimental determinants of health.

What we already knew

Gambling-related harm is unfairly distributed among economically and socially disadvantaged groups that are commonly associated with a range of mental and physical health comorbidities. The established ‘Responsible Gambling’ (RG) approach is increasingly inadequate in preventing or minimising gambling-related harm. RG is a voluntary expression of concern developed by the gambling industry in the 1990s.

New evidence suggests...

Recent research found little evidence suggesting RG measures are effective in Australia and overseas. For example, self-exclusion, the use of RG signage (e.g., ‘gamble responsibly’), and the removal of automatic teller machines (ATMs) from gambling rooms or venues.

A public health (PH) approach is considered far more effective, feasible, and practical despite opposition from invested interests. A PH approach looks at the effects of an issue on the whole population. It recognises that prevention is better than cure and that external and internal factors influence people’s behaviour. A PH approach to gambling acknowledges that a successful strategy cannot focus solely on individual gamblers but also needs to encompass products, environments, marketing, and the wider context in which gambling occurs. Identified strategies here include legislative or regulatory measures that tackle the availability, licensing, advertising, and price of products.

The strength of the evidence in practice

Several governments worldwide have adopted a PH approach as a framework to minimise, reduce or prevent gambling-related harm. This is based on the success of PH approaches in other areas of society, including disease control, nutrition, physical exercise, and reductions in smoking. Yet, more evidence and evaluation are required to show the efficacy of the ‘whole of population’ approaches over individual-focused or RG approaches to reduce gambling-related harm.

Putting it into policy and action

Gambling-related harm arises from a complex interplay of factors at multiple levels. At an organisational level, there needs to be increased funding for early prevention. More community awareness campaigns should dispel common misconceptions and correct faulty cognitions about gambling products at a population level. Finally, at the industry level, no victim-blaming (e.g., problem gamblers) and changes to hours of operations, location and density of venues, and available type of gambling formats.

References