It is my pleasure to present the Gambling Support Program Strategic Framework 2019–2023.

The Tasmanian Government is strongly committed to protecting vulnerable Tasmanians.

While many Tasmanians enjoy gambling as a form of entertainment, we also recognise that gambling causes harm for some people.

The Tasmanian Government takes a public health approach to reducing gambling harm that not only considers harms for individual gamblers but also their families and communities.

The Framework guides the Government’s approach to identifying, preventing and reducing gambling harm. It outlines gambling harm priorities, target outcomes and broad action areas for the next five years.

By drawing on consultation and research, the Framework provides a robust approach to preventing and reducing gambling harms in a complex and rapidly changing gambling environment.

It provides a clear strategic direction to inform the important and innovative work of the Gambling Support Program, while introducing a practical approach to setting and measuring outcomes.

I am pleased to endorse this document which reflects the Tasmanian Government’s continuing commitment to support Tasmanians at risk of harm from gambling.

HON. ROGER JAENSCH MP
Minister for Human Services
Overview

The gambling environment is dynamic and rapidly changing

The emergence of new products and advertising innovations are blurring the lines between traditional gambling, sport and gaming.

This complexity presents challenges for the delivery of harm prevention and harm minimisation strategies to affected communities.

While the Tasmanian Government recognises that many people in Tasmania participate in gambling as an entertainment or leisure activity, some people are harmed by gambling.

In Tasmania, gambling harm is addressed through a two-pronged harm reduction approach: regulation and a public health response.

“The Tasmanian Government is committed to preventing and reducing gambling harms.”

Regulation

Regulation reduces gambling harm by setting rules for how gambling is operated in Tasmania. The *Gaming Control Act 1993 (The Act)* provides the regulatory framework for gambling.

The key regulatory tool is the Responsible Gambling Mandatory Code of Practice for Tasmania (Mandatory Code). The Mandatory Code was developed to minimise harm from gambling in the Tasmanian community and make gambling environments safer.

Harm minimisation strategies include a player exclusion scheme and mandatory responsible conduct of gambling training for venue staff.

Gambling operators in Tasmania are required to meet the Mandatory Code and are encouraged to implement additional harm minimisation measures.

Public Health Response

A public health approach focuses on improving the health of populations by addressing a range of factors that impact on the health of communities.

It is a holistic method that shares the responsibility for improved health and wellbeing across individuals and community groups, businesses and government.

In Tasmania, gambling harm reduction includes community education, community capacity building and support services for people affected by gambling.

Through a public health approach, programs are delivered that address the key factors contributing to gambling harms. Partnerships with communities, industry and government are critical to the success of the programs.

Governance

**Tasmanian Liquor and Gaming Commission (TLGC)**

The TLGC is the independent regulator of gambling activities in Tasmania.

The functions of the TLGC include regulation and control of gambling, investigation of gaming and gaming activities, providing recommendations to the Treasurer concerning gambling matters, and the management of gambling complaints.

TLGC functions also include fostering responsible gambling and minimising the harm from problem gambling including the introduction of the Mandatory Code in 2012. The TLGC undertook the first five-year review of the Mandatory Code in 2017.
While the review highlighted the Code was effective in achieving harm minimisation objectives, a number of enhancements were identified and implemented as a result of the review.

TLGC delegates the operational aspects of regulation to the Department of Treasury and Finance, Liquor and Gaming Branch.

Department of Treasury and Finance (Treasury)

Treasury’s Liquor and Gaming Branch (LAGB) has overall responsibility for the administration of the The Act. The LAGB provides administrative, policy, licensing and compliance support to the TLGC. The role includes ensuring that prescribed licence holders and gaming permit holders comply with The Act and the Mandatory Code.

The LAGB also has administrative oversight of the Community Support Levy (CSL) expenditure and is responsible for recommending an annual CSL budget to the Treasurer and monitoring expenditure against the budget.

On behalf of the Treasurer, the LAGB manages a regular independent review of the social and economic impact of gambling in Tasmania. The Social and Economic Impact Study (SEIS) of Gambling in Tasmania is one of the main pieces of research the GSP used as evidence to inform its response to reducing harm from gambling. To date there have been four studies undertaken, with the findings released in 2008, 2012, 2015 and 2018.

Treasury is developing proposed legislation to implement the Government’s Future of Gaming in Tasmania election policy. Under the Government’s Future of Gaming in Tasmania policy, the levy will be extended to Electronic Gaming Machines (EGM) in casinos from 2020, which will, in effect, double the pool of funds available under the CSL. This increased funding will allow for a greater investment in harm minimisation and preventative health.

Department of Communities Tasmania (Communities Tasmania) Gambling Support Program (GSP)

The GSP is responsible for delivering the Government’s public health response to gambling in Tasmania. The program is funded through the CSL and reports to the Minister for Human Services.

The CSL currently comprises 4 per cent of the gross profits of electronic gaming machines (EGMs) in hotels and clubs throughout Tasmania. The Act directs the distribution of the CSL as follows:

- 25% of CSL for charitable organisations
- 25% of CSL for sporting and recreation clubs
- 50% of CSL for support services for people affected by gambling, community education, research and other health services

The GSP is primarily responsible for the expenditure of the 50 per cent CSL component for gambling support services, community education and research. The GSP is also responsible for the expenditure of the 25 per cent CSL component for charitable organisations.

The 25 per cent component for sporting and recreation clubs is administered by Communities, Sport and Recreation (CSR) within Communities Tasmania.

The GSP meets the Government’s obligations under The Act by commissioning specialist support services, developing and delivering community education and awareness programs and collaborating across communities, government and industry to identify and respond to gambling risks and harms.
Problem Gambling

What is problem gambling?

Research commissioned by Australian states and territories recommended the following definition for problem gambling:

“Problem gambling is characterised by many difficulties in limiting money and/or time spent on gambling which leads to adverse consequences for the gambler, others, or for the community.”

The American Psychiatric Association’s Diagnostic and Statistical Manual for Mental Disorders, Fifth Edition (DSM-5), recognises gambling disorder as an addictive disorder.

While the DSM-5 definition is helpful for psychiatric purposes, the Australian definition of problem gambling is more applicable to harm minimisation policy and programs as it includes a wide range of gamblers who do not have a formal psychiatric diagnosis.

Both definitions are underpinned by the concept that problem gambling is identified through gambling behaviours and the impact of gambling on the lives of gamblers and the people around them.

How is problem gambling assessed?

People accessing gambling harm support programs are screened to determine the severity of their gambling issues. The most widely used screening tool is the Problem Gambling Severity Index (PGSI) which examines gambling behaviours and impacts in the previous year. Based on the frequency of gambling behaviours and impacts, a total score is generated which indicates the gambler’s current PGSI category.

<table>
<thead>
<tr>
<th>PGSI Score</th>
<th>PGSI Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>8+</td>
<td>Problem Gambling</td>
</tr>
<tr>
<td>3–7</td>
<td>Moderate Risk</td>
</tr>
<tr>
<td>1–2</td>
<td>Low Risk</td>
</tr>
<tr>
<td>0</td>
<td>No Risk</td>
</tr>
</tbody>
</table>

The GSP does not describe people that meet the problem gambling criteria as problem gamblers. The GSP uses terms including high-risk gamblers and people impacted by gambling. This is a conscious effort to reduce stigma by:

• emphasising the person rather than the behaviour
• recognising that gamblers may not be wholly responsible for their issues with gambling
• acknowledging that the impacts of gambling may be on people around the gambler rather than the gambler themselves.

Progression against the PGSI is not linear. Gamblers may move up and down the PGSI index depending on a range of factors such as active support arrangements, difficult life events, frequency of gambling and the availability of gambling triggers.
What leads to problem gambling?

There is no one factor or influence that leads to problem gambling.

Problem gambling behaviour may develop due to a variety of social, psychological, cognitive and biological factors. A genetic predisposition to addictive behaviours, influence of family and friends, experience of gambling at an early age, social isolation, availability of gambling products, safety and security, financial and general literacy, substance abuse, and mental and emotional health all might be factors that influence a person’s gambling behaviour.

In addition, gambling can be extremely complex. Emerging technologies are making gambling more accessible and not understanding how gambling works can be a contributing factor to a person developing a problem with gambling.

What are the impacts of problem gambling?

It is not uncommon for problem gambling to result in relationship and family breakdown, alcohol and drug use, anxiety, depression, poor health outcomes, financial difficulties and criminality.

Harm created by problem gambling is not isolated to the individual. The Productivity Commission\(^2\) found that for each person experiencing problems with their gambling “several others are affected including family members, friends, employers and colleagues”

The Australian Gambling Research Centre\(^3\) looked at the impact of gambling problems on families and found that:

“Common family impacts include financial hardship, impaired family relationships, diminished emotional and physical health, family conflict, mistrust, family neglect, communication breakdown and confusion about family roles and responsibilities. There is also consistent evidence that gambling problems are associated with family violence and that they are transmitted from one generation to the next.”

Problem gambling is strongly associated with feelings of guilt, shame, embarrassment and denial, leading to low levels of people seeking help. The Productivity Commission estimated that only between 8 and 17 per cent of people experiencing problems with their gambling seek support, with most help seeking triggered by some form of gambling-related crisis.
Gambling in Tasmania

Participation

The Fourth Social and Economic Impact Study of Gambling in Tasmania (SEIS) 2017 found that 58.5 per cent of Tasmanians had participated in some form of gambling in the previous year. Gambling activities included electronic gaming machines (EGMs), lotteries, keno, casino table games, bingo, horse/greyhound racing, sporting or other events, scratch tickets, informal private games and other gambling activities. The 2017 SEIS found that the most common forms of gambling for Tasmanians were lottery tickets (38.5 per cent of Tasmanians participated in the previous year), keno (25.9 per cent), instant scratch tickets (20.5 per cent) and EGMs (18.6 per cent).

<table>
<thead>
<tr>
<th>Gambling type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lotteries</td>
<td>38.5%</td>
</tr>
<tr>
<td>Keno</td>
<td>25.9%</td>
</tr>
<tr>
<td>Instant scratch tickets</td>
<td>20.5%</td>
</tr>
<tr>
<td>EGMs</td>
<td>18.6%</td>
</tr>
<tr>
<td>Horse or greyhound racing</td>
<td>9.9%</td>
</tr>
<tr>
<td>Casino table games</td>
<td>5.1%</td>
</tr>
<tr>
<td>Sporting or other event</td>
<td>3.6%</td>
</tr>
<tr>
<td>Informal private games</td>
<td>2.8%</td>
</tr>
<tr>
<td>Bingo</td>
<td>1.9%</td>
</tr>
<tr>
<td>Other gambling activity</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Categories of Gamblers

The 2017 SEIS found that 0.6 per cent of Tasmanian adults were classified as high risk gamblers and 1.4 per cent of Tasmanian adults were classified as moderate risk gamblers.

High and Moderate Risk Gamblers

The 2017 SEIS found that high and moderate risk gamblers participated in gambling significantly more often and lost significantly more on gambling than no risk gamblers.

Out of 100 Tasmanian adults:

- 2 are high/moderate risk gamblers (2.0%)
- 5 are low risk gamblers (4.8%)
- 52 gamble without any risk factors (51.8%)
- 41 don’t gamble at all (41.5%)

**Losses**

The Tasmanian Liquor and Gaming Commission reported total player gambling losses for 2018-19 of $264,349,461. This total includes losses for casino table gambling, Keno, lotteries and EGMs, but does not include losses on race betting, instant scratch tickets, online gambling or private betting.

Note: Losses are likely higher than the 2017 SEIS findings as it is noted in the 2017 SEIS that “gamblers’ self-reported gambling expenditure is typically underreported compared to government data.”

The Australian Gambling Research Centre *Gambling activity in Australia* research report (2017) estimated national gambling losses for 2015 of $8.609 billion.

The 2017 SEIS indicated that moderate and high risk gamblers had a somewhat poorer quality of life than no risk gamblers, including being less likely to:

- feel ‘satisfied’ or ‘very satisfied’ with their health (54.2 per cent), ability to perform daily living activities (71.6 per cent), with themselves (66.5 per cent) or their personal relationships (79.1 per cent)
- feel they ‘completely’ or ‘mostly’ had enough money to meet their needs (61.1 per cent) or had enough energy for everyday life (54.6 per cent)
- rate their quality of life as either ‘good’ or ‘very good’ (66.9 per cent).

The 2017 SEIS also reported that 77 per cent of people that accessed Tasmanian Government-funded gambling support services reported that gambling had been a problem for two years or more.

**EGMs**

The Tasmanian Liquor and Gaming Commission reported total player EGM losses for 2018-19 of $172,175,233. Losses were higher in hotels and clubs ($104,496,962) than in casinos ($67,678,271).

In 2018-19, 79 per cent of people that accessed Tasmanian Government-funded gambling support services and provided a primary gambling activity reported EGMs as their primary gambling activity.
$104m EGM Losses 2018-19 Pubs and Clubs by LGA

* Municipalities with less than three premises have been combined: Break O’Day, Brighton, Circular Head, Derwent Valley, Huon Valley, Kentish, Kingborough, Latrobe, Meander Valley and Southern Midlands.

** Total losses may not reflect sum of component losses due to rounding.

* Not including EGMs at Wrest Point or Country Club.


Online Gambling

While exact losses for casino table gambling, Keno, lotteries and EGMs are captured through regulation, online gambling losses can only be estimated through prevalence studies. The 2017 SEIS reported that 10.8 per cent of Tasmanian adults and 18.4 per cent of Tasmanian gamblers had participated in some form of online gambling in the previous year.

The 2017 SEIS noted that the most common forms of online gambling were buying lottery tickets (6.2 per cent), betting on horse or greyhound racing (3.8 per cent) and betting on sports or other events (2.6 per cent).

Participation in online gambling was significantly higher among:

- young people – 25 to 34 years (16.2 per cent) and 35 to 44 years (13.7 per cent)
- people living as a couple with children at home (12.8 per cent)
- people in paid full-time employment (17.1 per cent)
- people with personal annual incomes of $40 000 – $59 999 (15.3 per cent), $80 000 – $119 999 (22.7 per cent) or $120 000 or more (19.6 per cent).

Online gamblers reported a significantly higher frequency of past year participation in any form of gambling (83.3 times per year versus 32.2 times per year) and a higher average annual spend ($2 115 versus $688) than those who did not participate in online gambling.
Framework Purpose

This GSP Strategic Framework provides a roadmap for how the GSP will prevent and reduce gambling harms. This Framework has been developed in partnership with key stakeholders using contemporary research, including prevalence and gambling losses.

This Framework sets out the priority areas, outcomes and actions that the GSP will focus on between 2019 and 2023.

This Framework aims to:

- prevent gambling harms before they begin by building community understanding and awareness of gambling
- reduce the impact of gambling harms through early intervention and specialist support services for people impacted by gambling.

This Framework identifies three Priority Areas that inform the broad directions of the GSP work program for the next four years.

Each one has an Outcome that describes a high-level goal for each Priority Area and a set of Actions that describe how that goal will be delivered.

In addition to this Framework, the GSP will develop Annual Action Plans that detail measurable activities for undertaking the Actions and achieving the Outcomes for the Priority Areas. The GSP will report against the Annual Action Plans to the Minister for Human Services.
Priority Areas

PRIORITY AREA ONE: Support

Outcome

*Individuals, families and communities have access to high-quality gambling support services.*

Actions

- Commission organisations to provide high-quality, accessible and available therapeutic and other support for people affected by gambling.
- Directly and through partnerships at industry, local and community levels, raise awareness of the support available for people affected by gambling.
- Investigate emerging technologies and innovations that may provide additional support for people affected by gambling.
- Collaborate and contribute to policy discussions and strategy development with other jurisdictions.
- Commission local research where gaps have been identified in Australian based research.

PRIORITY AREA TWO: Education

Outcome

*Tasmanians understand the risks of gambling and are able to make informed choices about gambling.*

Actions

- Deliver community education programs that target people at all points of the gambling continuum, including prevention, early intervention and high-risk gambling initiatives.
- Develop innovative, evidence-informed and contemporary awareness programs that provide an understanding of gambling risks and harms.
- Deliver messages through many mediums to reach a wide variety of audiences.
- Develop tools that assist communities to identify and address gambling harm, including awareness of support options and destigmatising help-seeking behaviour.
PRIORITY AREA THREE: Resilience

Outcome

Tasmanian communities are able to identify and respond to gambling related harm and issues.

Actions

• Support community place-based organisations to be responsive to gambling risks and harms.

• Support health professionals and the community sector to recognise and respond to gambling issues.

• Collaborate with community organisations and other stakeholders to foster greater financial literacy.

• Partner with government, industry and communities to address the factors that contribute to problem gambling, eg social isolation.

• Facilitate opportunities for stakeholders and the community to develop alternative activities for those impacted by gambling.
References

1. Problem Gambling and Harm: Towards a National Definition (Neal, Delfabbro & O’Neil, 2005)
3. The impact of gambling problems on families – AGRC Discussion Paper No. 1 (Dowling 2014)