

CONFIDENTIAL REPORT

**FORMATIVE INVESTIGATION INTO THE
EFFECTIVENESS OF GAMBLING VENUE EXCLUSION
PROCESSES IN NEW ZEALAND**

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EXECUTIVE SUMMARY

Background

Exclusion of patrons from gambling venues is potentially an effective early intervention for minimising harm from excessive gambling since it may contribute to the treatment and/or recovery of people with developing and established gambling problems. Internationally, some jurisdictional regulations mandate 'imposed exclusion' programmes, where gamblers with problems are identified by venue staff (usually casinos) and barred from gambling at those venues. In other jurisdictions, 'self-exclusion' programmes are in place, where gamblers may request that they be banned from the venue, removed from its mailing list and potentially face legal consequences if they re-enter the premises. Traditionally, such self-exclusion programmes have been operated by casinos but increasingly are being required for clubs and pubs where electronic gaming machines are located. In New Zealand, The Gambling Act 2003 stipulates that both imposed- and self- exclusion measures should be operated. The Act refers to these exclusion measures as an 'order' but colloquial use of the term 'contract' has been used throughout this report due to the word usage amongst participants in this research and in the literature.

However, there is a paucity of research regarding the effectiveness of gambling venue exclusion processes per se and even less information outside the casino environment. In addition, the effectiveness of the particular processes in force in New Zealand has not been evaluated. Currently, different processes are operated by different venues, for example with variations in minimum and maximum exclusion periods, and different requirements for re-entering the gambling venue when an exclusion contract comes to an end. Given that exclusion programmes consume private and public resources and are a legislated requirement, it is important that their effectiveness be ascertained. This will have substantial implications in terms of the potential to improve existing processes to ensure maximum minimisation of harms from gambling.

In August 2008, the Gambling and Addictions Research Centre at Auckland University of Technology was commissioned by the Ministry of Health to conduct the research project *Formative investigation into the effectiveness of gambling venue exclusion processes in New Zealand*.

The purpose of this project was two-fold: a) to ascertain the most suitable methodology and processes for researching venue excluders in order to robustly evaluate the effectiveness of current venue exclusion processes, and b) to gain some initial insight into the effectiveness of gambling (particularly electronic gaming machine and casino) venue exclusion processes in New Zealand.

Methodology

An international and national literature review relating to venue exclusion programmes/processes was conducted. This included international research, policies and processes as well as New Zealand regulations and context.

Three semi-structured focus groups were conducted with key stakeholders comprising problem gambling treatment providers or gambling venue (pubs and casino) staff. The purpose of the focus groups was to elicit views around current pub and casino venue exclusion processes including impacts and effectiveness.

The information obtained from the literature review and focus groups was used to design the survey questionnaire for gamblers excluded (self-initiated and venue-initiated) from gambling venues. The survey questionnaire covered gambling behaviours, awareness of exclusion processes, exclusion history, perceived effectiveness of exclusion processes, help-seeking behaviours, and a problem gambling screen. The survey questionnaires were cognitively tested prior to use to identify any issues with comprehension, wording or language.

One hundred and twenty three gamblers currently or recently excluded from venues in New Zealand completed a structured survey questionnaire either by post (n = 82), via the internet (n = 3) or by telephone (n = 38). Participants were recruited via gambling venues and a problem gambling treatment provider or self-selected into the study in response to advertisements. The different survey completion methods and recruitment strategies were incorporated into the study design to try to identify optimal methods for recruiting excluded gamblers for research purposes. This was one of the two main aims of this formative project.

Results

Literature review

Very little literature could be found in relation to venue-initiated exclusion processes with the majority focusing on self-exclusion. The review sought to broadly describe patron exclusion, including international variations in legislation and practice, document the evidence in support of its effectiveness, identify limitations in exclusion as a problem gambling intervention and make best practice recommendations. Overall, the findings suggested exclusion practices vary considerably in design and scope when considered on an international basis. For example, in some jurisdictions, exclusion practices are mandated whereas in others they are not. Similarly, the aim, length and process of exclusion vary widely both within and between countries. In New Zealand, casinos and Class 4¹ gambling venues are required to offer both venue initiated- and self-exclusion policies, thus the basic requirements of these policies are likely to be similar across venues, given the legislation. Whether or not these exclusion policies are effective in reducing gambling-related harm remains largely unproven; the required level and quality of investigation has yet to be conducted. Nevertheless, factors that may undermine the potential effectiveness of patron exclusion as a problem gambling intervention are widely recognised and best practice recommendations have been made. Thus, current exclusion practices can be assessed against practice recommendations. Whether adhering to a particular practice recommendation results in a greater reduction of harm, however, also remains largely unexamined.

Focus groups

Seven major themes were identified from the focus groups, which have been categorised into: positive aspects of exclusion, negative aspects of exclusion, exclusion processes, approach/intervention activities, breach procedures, re-entry requirements, and treatment provider and venue links.

Positive aspects were considered to relate to the benefits of exclusion contracts to gamblers in terms of being one facet in their process of dealing with problem gambling, and benefits to the business in terms of meeting legislation and maintaining viable business. Another

¹ Non-casino electronic gaming machine.

positive aspect was considered to be the increased interaction between venue staff and gamblers, prior to reaching the point where exclusion is required.

Negative aspects related to practicalities in implementing exclusion contracts, the necessity to confront gamblers who may react in an unknown or aggressive manner, and issues around a gambler's readiness to take the step to sign an exclusion contract. Treatment providers expressed discomfort when having to endorse a gambler to be "fine" to re-enter a venue after the end of an exclusion contract. Effectiveness of exclusion contracts was questioned when an excluded patron can gamble at an alternative venue, and with multi-venue exclusions when there are issues with identifying excluded gamblers. There were some issues with inadequate training for providing appropriate assistance and a concern with not knowing what happens to gamblers after they have been excluded (i.e. whether they are receiving help).

The participants from the participating Casino discussed the exclusion processes and it appears to be more elaborate and intricate than pub venue processes, probably due to their different core business (gambling entertainment versus food and beverage provision).

Formal hierarchical gambler approach procedures are operated in the casino environment versus a more ad hoc approach in a pub setting. All staff receive training, however, the level of their confidence to approach gamblers varies. Discussing a gambler's gambling before it needed to become a discussion about exclusion was deemed to be important.

Dealing with breaches of exclusion contracts is also more formalised in a casino environment versus a pub environment. Poor quality photographs are a major impediment to identifying excluded gamblers along with limitations on where the photographs can be kept/displayed. There appear to be issues with identifying breachers in an ethnically diverse population. Staff are more likely to recognise/remember regular patrons to their establishment. Some gamblers will disguise themselves to re-enter a venue to gamble, others breach their exclusion contracts inadvertently, for example they do not understand re-entry requirements.

Specific requirements set by the venue generally need to be met before re-entry to a casino at the end of an exclusion contract. This is not the case for re-entry to pub venues.

Venue staff and treatment provider staff expressed a desire for good communication and relationships between each other which was felt to be lacking to a greater or lesser extent. Some formal arrangements exist between casino and treatment services which are not in place between pub venues and treatment services.

Surveys

Socio-demographic data

Of the 123 participants (53% female, 46% male), 74% were aged between 30 and 55 years. European (62%), Maori (18%) and Asian (11%) populations were represented whilst Pacific people (1%) were not. Forty-four percent were married/de facto, half lived in households with a combined annual income of less than \$40,000. Forty-eight percent had no educational qualification or were educated to school certificate level. Participants resided throughout New Zealand; however, 85% lived in urban areas and 35% were recruited from Christchurch. Around one tenth reported a professional occupation.

Participation method

The survey was completed by post (67%), telephone interview (31%) or internet (2%). Telephone and postal participation were the most popular methods suggested for contacting excluded patrons.

Gambling activity

Prior to exclusion, gambling activities included non-casino electronic gaming machines (73%), casino electronic gaming machines (51%) and casino table games (29%); lottery products were also in the top five gambling activities.

Seventy-six percent were problem gamblers, 14% moderate risk gamblers, and six percent were low risk or non-problem gamblers prior to their exclusion contract.

Exclusion demographics

Self-exclusions accounted for 88%, venue-initiated exclusions for six percent, and seven percent had either had their exclusion initiated by a treatment service or had both self-and venue-initiated exclusions. All six casinos, and pubs and clubs were represented amongst participants' exclusions. The majority had multi-venue exclusions. For those with multiple exclusion contracts, 71% had to exclude from each venue individually. There were ethnic and gender differences in the 'most important venue' from which participants were excluded.

Exclusion contracts ranged from three months to lifetime, with the most common duration being 24 months (72%). Participants stated that the optimal length of time for an exclusion contract would be lifetime (29%) or 24 months (27%).

Initial awareness of exclusion contracts was mainly gained from sources external to gambling venues, via a gambling treatment provider (48%) or friends/family (26%). Venues as a source of initial knowledge were reported by 29% of participants. Seven percent reported that pop-ups on electronic gaming machines had encouraged them to consider exclusion.

Exclusion experience

Only 10% of participants reported being approached by venue staff to discuss their gambling behaviours prior to signing an exclusion contract with 58% of the approaches made in a casino setting. Being approached was generally not seen in a negative light with 4/13 specifically reporting a positive reaction. Overall, the exclusion process (including re-joining a venue at the end) was reported to be easy and staff helpful.

Only 42% of participants reported knowing what happens at the end of their exclusion contract. Of those who did not know, the information required was the options for automatic re-exclusion at the end of the contract, or a letter from the venue at the end detailing that the contract was over and if there were any re-entry requirements.

About one-fifth of participants stated they would gamble at the venue from which they are currently excluded at the end of their exclusion contract, with 46% stating they would not gamble at the venue.

Positive effects of exclusion contract/s on gambling behaviour included 44% gambling less in terms of time, 42% gambling less in terms of money, 37% ceased gambling, and 34% were attending (or recently attended) a gambling treatment service. Non-positive effects were 32% gambled at other venues, 11% gambled more on alternative forms of gambling, nine percent breached their exclusion contract, eight percent gambling stayed the same in terms of money, and five percent gambling stayed the same in terms of time.

Breaching exclusion contracts

Just over half of participants were completely deterred from gambling at the venue from which they were excluded. The remaining participants were deterred to varying extents. Thirty percent of participants reported breaching their exclusion contracts, with more pub

than casino gamblers doing so. The top two reasons for not breaching an exclusion contract were self-determination and fear of legal action. The main reasons for breaching were to gamble again and to 'test the system'.

Most participants who had breached an exclusion contract had done so on multiple occasions, more often amongst electronic gaming machine players than casino table game players. A few disguised themselves in an attempt not to be recognised. About half the respondents who had breached an exclusion contract reported being regularly recognised during a period of breaching but only about half of those reported being regularly approached by a staff member. Casino breachers were more likely to be approached than pub breachers.

Fifty-seven percent of participants gambled, during the period of their exclusion contract, at other venues from which they were not excluded, and 44% did so weekly or more often. A range of distance would be travelled to gamble with 30% travelling 10 km or less but 11% travelling more than 100 km.

Help-seeking behaviours

Sixty-nine percent of participants had contacted support/help services before excluding from a gambling venue, and 81% of those reported that the support/help service assisted in the decision to exclude from the venue. Only 59% of participants were given information/options about support/help services when they signed their exclusion contract, with more casino than pub participants receiving this information. Sixty-eight percent of participants had contacted help/support services during their exclusion contract.

Just over one-third of participants who re-entered a venue at the end of a period of exclusion had to attend gambling counselling sessions before re-entry; this was more likely to be a requirement for casino than pub re-entry. The majority found these counselling sessions helpful.

Conclusion

The findings from this formative project, together with the response rate of participants recruited via the helpline compared with the response rate from postal contact with venue database excluders, suggest that telephone contact of excluders on venue databases may be a good approach for future studies. The postal method used to recruit venue database excluders in the current project was successful, and consideration could be given to further strategies that would encourage greater participation, in future studies. In future studies, consideration should also be given to the recruitment of patrons from venues at the time of signing an exclusion contract. This would ensure the participation of current excluders and would also allow the potential for longitudinal studies to be conducted to follow participants over time and assess the effectiveness of an exclusion contract on their gambling behaviours.

The recruitment methodology was successful in gaining participation from gamblers who had excluded from all six of New Zealand's casinos and from pubs and clubs spanning the length and breadth of the country.

Whilst sample size was too small to compare venue-initiated exclusions against self-initiated exclusions, this formative project has indicated that current exclusion processes have a positive impact and are effective to varying degrees in reducing or stopping gambling activities and in encouraging help-seeking behaviours. Some differences were identified between casino and non-casino exclusion processes. Several areas for improvement were identified during the project both by stakeholders and excluded gamblers, who participated in

a survey. The suggested areas for improvement focused around general practice, improving multi-venue exclusion contracts, training issues, increased awareness-raising regarding exclusion processes, length of exclusion contracts, enforcement of exclusions, and treatment provider and venue links.

Two models of self-initiated exclusion were presented in the literature review: An enforcement model and an assistance-based model. From the findings of this current project, it would appear that an ideal model would actually encompass aspects of both models, providing the structure of the former together with the greater options and support for gamblers of the latter.



1. BACKGROUND

This project was a formative² investigation into the effectiveness of gambling venue exclusion processes in New Zealand, which are a legislated harm minimisation measure with minimal research to indicate effectiveness or otherwise. It is important to regulators, venues and their patrons that the effectiveness of current venue exclusion processes be ascertained to ensure maximum reduction of potential harms from gambling. It is anticipated that the results from this project may be informative for improving the effectiveness of venue exclusion processes, for policy development and for the development of methodologies for more in-depth investigation of current venue exclusion processes in New Zealand.

In August 2008, the Gambling and Addictions Research Centre at Auckland University of Technology was commissioned by the Ministry of Health to conduct the research project *Formative investigation into the effectiveness of gambling venue exclusion processes in New Zealand*.

Nationwide gambling availability in New Zealand includes six casinos in various urban locations (providing access to electronic gaming machines and table games), pubs/hotels and clubs hosting electronic gaming machines³, Totalisator Agency Boards (TABs) for racing and sports betting, Lottery products, and more informal forms of gambling such as Housie (bingo), card playing, and internet gambling.

Exclusion of patrons from gambling venues is potentially an effective early intervention for minimising harm from excessive gambling since it may contribute to the treatment and/or recovery of people with developing and established gambling problems. Internationally, some jurisdictional regulations mandate 'imposed exclusion' programmes, where gamblers with problems are identified by venue staff (usually casinos) and barred from gambling at those venues. In other jurisdictions, 'self-exclusion' programmes are in place, where gamblers may request that they be banned from the venue, removed from its mailing list and potentially face legal consequences if they re-enter the premises. Traditionally, such self-exclusion programmes have been operated by casinos but increasingly are being required for clubs and pubs where electronic gaming machines are located. In New Zealand, The Gambling Act 2003 stipulates that both imposed- and self- exclusion measures should be operated in casinos, venues hosting electronic gaming machines, and TABs.

However, there is a paucity of research regarding the effectiveness of gambling venue exclusion processes per se and even less information outside the casino environment. In addition, the effectiveness of the particular processes in force in New Zealand has not been evaluated. Currently, different processes are operated by different venues, for example with variations in minimum and maximum exclusion periods, and different requirements for re-entering a gambling venue when an exclusion contract comes to an end. Given that exclusion programmes consume private and public resources and are a legislated requirement, it is important that their effectiveness be ascertained - this will have substantial implications in terms of the potential to improve existing processes to ensure maximum minimisation of harms from gambling.

² A formative investigation is a pilot or preliminary project to scope methodological or best practice for conduct of a full research investigation.

³ There were just over 19,000 machines nationwide in September 2009. The maximum number of machines in any one venue is 18.

1.1 Research design

1.1.1 Objectives

The primary objectives of the project were to:

- Ascertain the most suitable methodology and processes for researching venue excluders in order to robustly evaluate the effectiveness of current venue exclusion processes
- Gain some initial insight into the effectiveness of gambling (particularly electronic gaming machine and casino) venue exclusion processes in New Zealand

The research was conducted in two phases.

Phase One

- Literature review
- Focus groups with key stakeholders including problem gambling treatment providers and gambling venue (pubs and casino) staff

Phase Two

- Structured surveys with gamblers currently or recently excluded from gambling venues with the survey completed by post, internet or telephone

1.1.2 Phase One

The first phase of the project involved two components.

Literature review

A review of relevant national and international literature pertaining to venue exclusion programmes/processes was conducted. This included international research, policies and processes as well as New Zealand regulations and context.

Findings from the literature review were used to provide focus to the survey used in Phase Two.

Focus groups

Three semi-structured focus groups were conducted with key stakeholders comprising problem gambling treatment providers or gambling venue (pubs and casino) staff. The purpose of the focus groups was to elicit views around current pub and casino venue exclusion processes including impacts and effectiveness.

Information obtained from the focus groups was also used to inform the design of the survey used in Phase Two.

1.1.3 Phase Two

The second phase of the project involved a structured survey with gamblers who were currently or had recently been excluded from gambling venues. Survey participants were recruited via the following means:

- With the assistance of gambling venues (national gaming machine trust and casino)
- With the assistance of a problem gambling treatment service
- Via media advertising



2. RESEARCH METHODOLOGY

2.1 Ethics approval

The project proposal was submitted to the AUT Ethics Committee (AUTEC) prior to conducting the first and second phases. AUTEC is a Health Research Council accredited human ethics committee. Participant materials (i.e. information sheet and consent form) and other relevant documents were submitted to AUTEC, which considers the ethical implications of proposals for research projects with human participants. AUT is committed to ensuring a high level of ethical research and AUTEC uses the following principles in its decision-making in order to enable this to happen:

Key principles:

- Informed and voluntary consent
- Respect for rights of privacy and confidentiality
- Minimisation of risk
- Truthfulness, including limitation of deception
- Social and cultural sensitivity including commitment to the principles of the Treaty of Waitangi/Te Tiriti O Waitangi
- Research adequacy
- Avoidance of conflict of interest

Other relevant principles:

- Respect for vulnerability of some participants
- Respect for property (including University property and intellectual property rights)

Ethics approval for Phase One was granted on 22 September 2008 (Appendix 1).

Ethics approval for Phase Two was granted on 19 December 2008 (Appendix 2).

During the research the following measures were taken to protect the identity of the participants:

- All participants were allocated a code by the research team to protect their identities
- No personal identifying information has been reported

In addition:

- Participants in focus groups and surveys were informed that participation in the research was voluntary and that they could withdraw at any time, prior to data reporting

2.2 Cultural awareness

Cultural safety, integrity and appropriateness of the research process were key considerations throughout, particularly in relation to kaupapa Maori research processes. In this regard, a Maori researcher within the Gambling and Addictions Research Centre, Papa Nahi (Ngapuhi), took responsibility for utilising tikanga Maori processes, where appropriate.

2.3 Literature review

The reviewed literature was identified by a range of search methodologies including: keyword searches ('exclusion', 'host responsibility' and 'problem gambling') of the EBSCO Health premier and EBSCO Megafire databases accessible through the AUT University library system; searches of gambling-related publications and reports listed on government websites (in particular New Zealand, the United Kingdom, Canadian state and provincial government, and Australian state and territory government) or the websites of problem gambling-related organisations, particularly those with searchable databases and/or libraries; requests for related information made to professional and informal networks; and manual searches of the reference pages listed in all related publications identified by the aforementioned methods.

The research team also has access to personal libraries relating to gambling research and policies, and other related subjects. These collections contain reports and articles that may have not been published in mainstream literature plus publications that may be difficult to obtain. They also include pre-publication reports and articles from a variety of sources. Where relevant, these materials were utilised for this project.

Each literature search accessed varying numbers of articles. There were varying degrees of overlap between the searches. A full list of titles and/or abstracts was obtained from each search. For titles or abstracts that appeared to be relevant to this project, full text publications were accessed electronically and reviewed.

2.4 Focus groups

Focus groups were conducted with key stakeholders who were knowledgeable in the area of gambling and venue exclusion processes⁴. In total, three focus groups (each lasting between 65 to 80 minutes) were held in Christchurch. Christchurch was a convenient central location for the participating gambling venue staff, as well as for problem gambling treatment providers and the research team

Focus group	Participant category	No. of participants
1	Problem gambling treatment providers	5
2	Casino staff involved in exclusion processes	8
3	Pub staff involved in exclusion processes	12

The participants in the focus groups were identified by the research team as key stakeholders able to usefully participate in the discussions. The focus groups were held between 29 September and 1 October 2008 and included a representative mix of stakeholders who were highly supportive as well as those who were less supportive, of exclusion processes. Participants in the casino staff focus group were from one casino, participants in the pub staff focus group were recruited from one participating trust.

Focus groups were semi-structured to elicit detailed discussion around:

- Uptake, implementation and enforcement of current venue exclusion processes
- Perceptions around the impact, effectiveness and usefulness of the current exclusion programmes

⁴ Clubs were not represented since this was a formative study with time and budget constraints and because the majority (80%) of non-casino electronic gaming machines are housed in a pub environment.

- Perceived effectiveness of the processes
- The impact of current exclusion processes on problem gambling
- Perceived occurrence of excluded gamblers breaching contracts, frequency of breaches, and process for, and effectiveness of, venue identification of breaches
- Perceived benefits and flaws of the current exclusion processes
- How venues can more effectively inform patrons about the self-exclusion processes
- How venue patrons can be encouraged to use the self-exclusion processes
- Effectiveness of staff training in the current venue exclusion processes

Data analysis

Focus groups were digitally recorded for subsequent transcription and analysis. A systematic qualitative analysis of similarities and differences in participants' perceptions was conducted to interpret the data from the transcribed recordings in relation to the original research questions. Emerging trends and patterns were grouped according to themes. Responses were ordered into more specific categories for comparative purposes to determine possible venue (pub versus casino) and other differences. A 'picture' of the perceived impacts and effectiveness of current venue exclusion processes emerged as the data analysis proceeded. Qualitative analyses were undertaken using NVivo (Version 2) software.

2.5 Surveys

The second phase of the project involved short structured surveys (approximately 20 minutes to complete) with gamblers who were currently or recently excluded (self-initiated or venue-initiated) from gambling venues, to gain information around awareness of exclusion processes, exclusion history, perceived effectiveness of exclusion processes, and help-seeking behaviour. Participants could choose to complete the surveys on paper (postal survey), through the internet or by telephone. The survey questionnaire (Appendix 3) was developed during the first phase of the research and was informed by the literature review and focus group findings.

Cognitive testing

The survey questionnaire was cognitively tested with nine gamblers prior to use (covering each of the four major ethnicities - European/Pakeha, Maori, Pacific and Asian), some of whom had excluded from venues on multiple occasions. The purpose of the cognitive testing was to identify any issues with comprehension, wording and/or language and to ensure that the measured constructs were the desired ones. Some minor wording changes were made to the survey following the cognitive testing.

Recruitment

One hundred and twenty-three participants currently or recently excluded from gambling venues (108 self-initiated, 7 venue-initiated, 8 other⁵) were recruited over a six-month period from 9 February to 10 August 2009. The total number of participants was recruited from an

⁵ 'Other' included examples where a treatment service had initiated the exclusion for a gambler, or where a gambler had both self- and venue-initiated exclusions.

estimated pool of 551 gamblers on the databases used. Since venue excluders are potentially a vulnerable population who may be averse to participating in research investigating the sensitive subject of exclusion processes, one of the aims of this formative project was to ascertain the most suitable methodology and processes for recruiting venue excluders. Thus, the sample size was not selected through statistical power analyses.

Recruitment of participants was via the following methods:

- Participating gambling venues (one of the six casinos and one of the six national gaming machine trusts⁶ with about 36 venues nationwide)⁷
- National problem gambling telephone helpline
- Advertisements in newspaper media

These methods of recruitment coupled with the results to the question asking about the venue of greatest importance to the participant allow for statements across all New Zealand casinos and class 4 venues throughout New Zealand.

Recruitment via gambling venues

Recruitment was from the databases of currently and recently excluded gamblers held by the participating gambling venues. To maintain participant anonymity and confidentiality, the venues contacted, where possible, all gamblers on their exclusion databases giving details of the project and inviting participation in the research⁸. The information and invitation were prepared by the Gambling and Addictions Research Centre and were accompanied by a letter supporting the research from the venue organisation. The contact was generally made by post, though in some cases, prior telephone contact was made. During the period of data collection, other potential participants were informed about the research at the time of excluding or re-entering a venue at the end of an exclusion contract.

Information sent by post was in plain envelopes. Excluded gamblers were invited in the written documentation to participate in the research and had full choice to voluntarily 'opt-in'.

Recruitment via gambling telephone helpline

All gambler callers to the helpline, who were currently excluded from at least one gambling venue (excluding those deemed by the counsellor to be at risk of harm to themselves or others), during the recruitment period were informed by the helpline counsellors about the research and invited to participate⁹.

Recruitment via advertisements

Advertisements asking for participants were placed in print media (free delivery community papers plus papers for sale) on several occasions during the period 29 April to 21 May 2009. Advertising was targeted to major areas with casinos (i.e. Auckland, Christchurch and Hamilton) plus a national newspaper. An example of the advertisements used is presented in Appendix 4. The print media featuring the advertisements were:

- Auckland City Harbour News
- Central Leader (Auckland City)
- East and Bays Courier (East Auckland)
- Eastern Courier (East Auckland)

⁶ Gaming machine trusts own electronic gaming machines which are located in non-casino venues (e.g. pubs, hotels and clubs).

⁷ Clubs were not included since this was a formative study with time and budget constraints and because the majority (80%) of non-casino electronic gaming machines are housed in pub environments.

⁸ The survey questionnaire and a reply-paid return envelope, plus details on completing the survey by telephone interview or on the internet, were included in the posted information package.

⁹ Gambler callers to the helpline are routinely asked about venue exclusion, i.e. whether they have excluded or have considered it.

- Manukau Courier (South Auckland)
- The Aucklander (Central edition)
- The Christchurch Press
- The Christchurch Mail
- The New Zealand Herald (Weekend Herald and Herald on Sunday)
- This Week (Hamilton and Raglan)

The majority of participants were recruited via the participating gambling venues and telephone helpline. Inclusion criteria were that participants were gamblers who were currently, or had recently been, excluded from one or more gambling venues or who had experience of venue exclusion processes.

Process

Participants recruited from gambling venue databases were offered the choice of completing the survey by: a) paper, b) internet, or c) telephone interview. Participants recruited via the telephone helpline completed the survey by telephone interview, and participants responding to media advertisements completed the survey by internet or telephone interview.

Paper copies of completed surveys were returned to the researchers in pre-paid envelopes. Internet surveys were accessible via a survey-specific website using the specialised online survey package, Survey Monkey. Telephone surveys were carried out by the research team; ethnically matched researchers were available, if required. The interviewers recorded participant responses on paper.

Participation

Five hundred and eighty-seven¹⁰ currently excluded gamblers on the participating gambling venue databases were contacted/posted information¹¹ about the research during the six-month recruitment period; a further 73 currently or recently excluded gamblers calling the telephone helpline were also informed about the research and invited to participate by the counsellor¹². Approximately 73 surveys were returned to the participating venues or to the researchers by the postal service as being undeliverable. It is likely that a substantially greater proportion of surveys also did not reach their destination due to contact details being out-of-date and/or inaccurate. Twenty-three telephone helpline clients declined to take part in the research when asked by the treatment service and a further 13 were not contactable, declined to take part or said they had already completed the survey in postal form, when contacted by a researcher. Thus, the optimistic total pool of potential participants has been described as 551, though as detailed above, it was likely significantly less than this number.

One hundred and twenty-three participants chose to complete the survey; this is a 22% response rate based on the optimistic total pool of 551 excluded gamblers. The research initially aimed for a recruitment of 100 excluded gamblers, thus the final participation total of 123 has exceeded that originally proposed and indicates the success of using a varied recruitment methodology.

¹⁰ This included 330 from the casino database and 257 from the national gaming machine trust database (which covered all the pubs hosting their gaming machines).

¹¹ The survey questionnaire and a reply-paid return envelope, plus details on completing the survey by telephone interview or on the internet, were included in the posted information package.

¹² If they agreed to participate, contact details were taken by the counsellor and passed to the research team who called the potential participant within 10 working days, where possible.

Data analysis

Paper recorded survey data were entered into the SPSS (version 16.0) statistical package and internet captured data were exported into SPSS, prior to analyses. Due to the small sample size (123 participants) only broad findings (mainly descriptive statistics and cross-tabular results) have been reported. Where possible, responses were ordered into more specific categories for comparative purposes to determine possible venue type (casino versus pub), and cultural or population group differences. Responses to open-ended questions were varied and extensive; they have been presented in summary form.

3. RESULTS

3.1 Literature review

3.1.1 Introduction

In this section, the broad aims of patron exclusion as understood in a problem gambling context are discussed, international variations in exclusion policy and practice are described and contrasted with local examples, evidence in support of exclusion as a problem gambling intervention is reviewed, limitations in exclusion practice are identified, and best practice recommendations are made. The review has focused on patron exclusion relating to casinos and electronic gaming machine venues as that is the focus of this project. However, the researchers acknowledge that other gambling venues also have exclusion processes in place, such as the Totalisator Agency Board (TAB), and that exclusion processes exist for some internet gambling websites. The information presented in this section is intended to contextualise the aims of the research project and was used to inform aspects of the research process.

3.1.2 Exclusion in a gambling context

Exclusion initiatives are a host responsibility feature of many gambling venues that aim to bar (exclude) patrons at risk of, or experiencing, gambling-related harm from the respective gambling premise(s) for a specified period of time. Exclusion is thought to be a potentially effective method for reducing gambling-related harm as it may reduce access to gambling opportunities and/or encourage the excluded patron to engage in some form of positive behaviour change. Internationally, some jurisdictional regulations mandate 'imposed exclusion' programmes, where gamblers with problems are identified by venue staff (usually casinos) and barred from gambling at those venues. In other jurisdictions, 'self-exclusion' programmes are in place, where gamblers may request that they be banned from the venue, removed from its mailing list and potentially face legal consequences if they re-enter the premises. Exclusion initiatives, irrespective of whether they are venue- or self-initiated, vary widely in scope. Key points of difference include the period of exclusion (i.e. the length of time for which the exclusion contract is valid), revocation opportunities (whether the exclusion contract can be revoked prior to contracted endpoint and if it can, when and how this can occur), level of enforcement (what measures are put in place to enforce exclusion contracts and the effectiveness of those measures), and the consequences for violating an exclusion contract (for the patron and/or gambling provider). These variations in exclusion practice are discussed in more detail in the sections to follow.

3.1.3 International legislation and practice

This section provides an international perspective on self-exclusion legislation and practice, with particular emphasis on Canadian, U.S. and Australian models, countries for which publicly available documentation and research are available and accessible. Whilst by no means a comprehensive review of international self-exclusion practices, the information presented should provide some sense of how different exclusion programmes from around the world function. An international perspective on venue-initiated exclusion has not been presented as the research team was unable to identify significant literature in this area. In fact, based on the literature that was identified for this review, it would seem that venue-

initiated exclusion (where the exclusion decision is based on suspected problem gambling rather than illegal or disruptive activity) is rarely practiced relative to self-exclusion. This is not to say that models of venue-initiated exclusion were not evident in the literature¹³, only that they were rarely identified and not in large enough numbers, or presented in enough detail, to allow meaningful discussion in the context of this review. This limitation applies to all sections of this review.

Legislation

Self-exclusion is legislated in some, but not all, Western countries (in which legalised gambling venues operate) (Australasian Gaming Council, 2008) and in those countries in which it is legislated, the legislation may only apply to certain gambling venues. Self-exclusion in Australian casinos is governed by state legislation except for the Northern Territory where there is a mandatory code of practice in place; in hotels and pubs, regulation varies with a mandatory code of practice operating in the Australian Capital Territory and Northern Territory, and with legislation in place for all the other states (Australasian Gaming Council, 2008). In the U.S., with regulation optional, only certain states have adopted the self-exclusion concept¹⁴ (Williams, West, & Simpson, 2007). In Canada, all casinos have some form of voluntary exclusion process in place; in some cases this is a province-wide process (e.g. in British Columbia and Alberta) whilst in other provinces it is casino-based (e.g. in Manitoba and Ontario) (Nowatzki, & Williams, 2002).

Where self-exclusion is legislated, compliance is generally overseen by regulatory authorities or industry bodies. For example, in Australia the self-exclusion programmes of Victoria, New South Wales and Tasmania are regulated by either a separate gambling authority or industry body. Likewise, in the U.S. (e.g. in Missouri) where self-exclusion programmes are regulated, responsibility is placed with local gambling boards to oversee the self-exclusion process (Townshend, 2007). In contrast, the Australian jurisdictions of Queensland and the Australian Capital Territory place administrative responsibility on the venue itself¹⁵.

The consequences for breaching a self-exclusion agreement are variable both between, and within, countries. Canadian regulation emphasises the responsibilities placed on the self-excluder, with breaches of contract for the self-excluder attracting possible fines of CAN\$5,000. In the U.S., duties are placed both on the venue and the self-excluder (Townshend, 2007); the venue to make reasonable efforts to detect and exclude the person in question and the self-excluder to honour their pledge to refrain from entry. In practice this means the venue takes reasonable efforts to check identification before advancing cash, to identify self-excluded persons who may be in a gambling facility and then to escort the self-excluded person from the venue. Self-excluder responsibilities include surrender of any winnings and chips in play. Variation in U.S. exclusion policies exists, however, as patrons who breach their self-exclusion agreements in a Missouri casino may be arrested for trespassing (Croucher, 2005; Napolitano, 2003). In Australian casinos, breaches of contract are supported with penalties and/or fines on patrons and/or venue operators (O'Neil et al., 2003b).

Practice

Self-exclusion practices vary according to the legislative requirements and/or codes of practice of the respective venues. Nevertheless, most (if not all) self-exclusion models require some form of registration procedure, remain active for a specified period of time, are

¹³ For example, a model of venue-initiated exclusion is discussed in De Bruin et al. (2001).

¹⁴ Namely Nevada, Illinois, Missouri, Michigan, Louisiana and tribal casinos in Connecticut.

¹⁵ With guidelines from the relevant regulatory authority.

enforced in some way, and have specified revocation and/or re-entry requirements. Drawing on international examples, each of these four areas is discussed below¹⁶.

Registration

Self-exclusion programmes may be advertised through pamphlets and/or signs available at the gambling venue, and for larger venues such as casinos, on company websites. Individuals fill out an application form and usually have their photograph taken. The photograph is usually kept discreetly within the designated venue to assist staff in the monitoring of self-excluded patrons. Self-exclusion programmes may also require venue operators to remove excluders from mailing lists, thus halting any mailings of promotional enticements. The policy may in addition require venues to refer to their list of self-excluded persons before issuing new players' cards, cashing cheques, extending credit, or paying out large jackpots. In many jurisdictions in the U.S., registration is frequently carried out at the office of the casino regulators (Nowatzki, & Williams, 2002; Townshend, 2007) as the gambling venues themselves do not often implement self-exclusion programmes.

Duration and scope of the exclusion contract

In some jurisdictions the period of exclusion is fixed while in others a choice of exclusion periods is offered. Across Australian states for example, New South Wales and Victoria offer self-exclusion contracts ranging between six and 36 months. In South Australia and Western Australia a fixed duration of at least 12 months is offered whilst in Queensland self-exclusions remain in place for five years and cannot be revoked within 12 months of first being initiated. In the Australian Capital Territory contracts may be valid for an unlimited period of exclusion and in Tasmania self-exclusion contracts are typically of three years duration (Australasian Gaming Council, 2008).

Some jurisdictions offer multi-venue self-exclusion programmes which allow patrons to exclude themselves from multiple venues at one time. Multi-venue exclusion is usually available in jurisdictions regulated by a gambling authority or industry body. For example, Canadian multi-venue exclusion, like that run by the Lottery and Gaming Corporation in Ontario, applies to all casinos in the province (Nowatzki, & Williams, 2002). Similar multi-venue programmes are operated by the New Jersey Casino Control Commission (U.S.) and certain states of Australia¹⁷. In the Australian state of Queensland and in the Australian Capital Territory, an exclusion contract applies only to the venue in which the patron has applied for the contract. However, in South Australia, patrons can exclude themselves at individual venues or can initiate single or multiple venue exclusion via the Independent Gambling Authority.

Where a venue oversees administration, exclusion contracts tend to apply to that venue only. Some venues offer partial exclusions to allow patrons under a self-exclusion contract access to non-gambling areas such as restaurants, bars or cafes. These may be appropriate in venues with separate or distinct gambling areas where monitoring patron access by staff is fairly straightforward. Venues with gambling machines located in multiple areas makes monitoring of self-excluders more difficult, in which case full venue exclusion may be easier to regulate.

¹⁶ There are often more aspects to a self-exclusion agreement than the four discussed here (e.g. staff training requirements or reporting protocols for breach detection). Thus, the presented discussion should not be considered a comprehensive account of international self-exclusion practice.

¹⁷ Namely Victoria, New South Wales, South Australia and Tasmania where patrons can nominate the venues from which they wish to be excluded (Australasian Gaming Council, 2008).

Enforcement

Williams, West, & Simpson (2007) state that self-exclusion programmes are only as effective as their ability to monitor and detect excluded persons; however, it can probably be assumed that for some people the self-exclusion contract itself may be enough of a deterrent to entering a venue, whilst for others self-excluding could be the first step in taking action to change gambling behaviour. As most jurisdictions allow gambling venues to be available to the public without the necessity of identification, programmes are often reliant on the diligence and ability of staff to identify excluded patrons (typically based on reference to a photograph obtained at exclusion contract registration). In this arrangement, it can be relatively easy for self-excluders to enter a gambling venue undetected¹⁸ (Croucher, 2005; Dickson-Gillespie et al., 2008). With manual identification of the self-excluder from a small photograph, it can be difficult for busy staff to monitor, especially in venues with a large clientele. Nowatzki and Williams (2002) identify this as a significant issue for self-exclusion programmes. Furthermore, with the increase in uptake of self-exclusion contracts in various jurisdictions and the subsequent increase in self-excluder numbers, monitoring and identification of breaches is likely to become increasingly tough. Conversely, in jurisdictions where gambling venues require patrons to show identification upon entrance to the venue, for example in Switzerland, the Netherlands and England, it is much easier for staff to implement effective self-exclusion monitoring policies (Dickson-Gillespie et al., 2008; Häfeli, 2005; Williams et al., 2007).

Revocation and/or re-entry process

Self-exclusion contracts are generally irrevocable for the time period covered or for a minimum specified period, although some jurisdictions have a process for agreements to be revoked. Some Australian states allow revocation of an exclusion contract (on completion of specific criteria) whilst others only allow revocation within a ‘cooling-off’ period after initiation of the exclusion contract, which varies from 24 hours to three days (Australasian Gaming Council, 2008). In New South Wales (Australia), overturning a contract before its expiry is difficult and requires the self-excluder to convince at least one counsellor that they no longer have a gambling problem (Croucher, 2005). In Tasmania (Australia), however, the exclusion contract may be revoked at any time following completion of a revocation of self-exclusion notice (Australasian Gaming Council, 2008). In the Nova Scotia and Ontario provinces of Canada, early reinstatement options are available after six months. In Ontario, patrons who have been excluded three times in three years must wait five years before applying for reinstatement. In exceptional circumstances, patrons in Saskatchewan (Canada) can appeal to the banning committee for a ban longer than one year, to be terminated (Responsible Gambling Council, 2008).

Requirements for re-entry to a gambling venue vary, with some jurisdictions having no conditions and others requiring a waiting period or a formal review process. In Canada, the revocation process in British Columbia is administered by the province’s lottery board, the British Columbia Lottery Corporation (BCLC). It begins with the completion of the revocation form by the self-excluder which is then reviewed by the BCLC manager of casino security and surveillance. The manager makes a ruling on whether to revoke the agreement or not. Similarly, Manitoba (Canada) revocation procedures involve review by the province’s lottery corporation with the additional step of mandatory attendance at a half-day gambling awareness workshop, which must be completed within the two-month period immediately prior to the end of the voluntary exclusion period. However, Nova Scotia (Canada) has a unique revocation process whereby a hearing is required for re-entry to the province’s casinos. The individual is required to complete a ‘consent to investigate form’ in addition to

¹⁸ One study into self-exclusion programmes found 36% of self-excluders admitted to having returned to the casino during the exclusion period (Dickson-Gillespie, Rugle, Rosenthal, & Fong, 2008).

the usual application form, allowing authorities to inspect the individual's personal and financial information. This is followed by a hearing in front of the Nova Scotia Utility and Review Board (Nowatzki & Williams, 2002).

3.1.4 New Zealand legislation and practice

Legislation

The Gambling Act 2003 requires that operators of casinos and gaming machine venues must issue exclusion orders to self-identified problem gamblers (Section 310, page 204) and must have policies in place to identify and approach problem gamblers, they may issue a venue-initiated exclusion order (Section 309, page 203). The maximum duration of either form of exclusion contract is two years, although briefer exclusion periods may be nominated. Venues are required to display a notice that they have a policy for identifying problem gamblers and the failure to display such notice can result in a fine up to NZ\$5,000. Once issued, breaching an exclusion contract (self- or venue-initiated) is considered an offence and a fine of up to NZ\$500 can be issued to the patron. Similarly, it is also an offence for casinos and gaming machine venues to allow excluded patrons to continue gambling and fines of up to NZ\$10,000 can be issued. In addition, and as noted by Townshend (2007), venues that allow excluded patrons to continue gambling may not meet the requirements for their annual licence renewal. Thus, the consequences for failing to abide by an exclusion contract could be potentially very significant for casino and gaming machine operators.

The Gambling Act 2003 also requires that employees¹⁹ of casinos and gaming machine venues undergo problem gambling awareness training. Furthermore, at a minimum, trained staff members must be able to:

- Approach any player that they have reasonable grounds to believe may be experiencing difficulties relating to problem gambling
- Provide information to players about the characteristics of problem gambling
- Provide information to players about the potential risks and consequences of problem gambling
- Provide information to players about how to access problem gambling treatment services
- Remind players that if the venue manager or the casino operator have reasonable grounds to believe that a player is a problem gambler they can ban that player for up to two years
- Remind players that they can identify themselves as problem gamblers and that they can request the venue manager or casino operator to exclude them from the gambling area of the venue for up to two years.

Accordingly, in addition to mandating venue-exclusion, the Gambling Act 2003 also requires that venue staff have the skills to carry out an exclusion contract when required.

Practice

As all casinos and Class 4 gambling (non-casino gaming machine) establishments are required to conform to government legislation as detailed in the Gambling Act 2003 then any variance in exclusion practice is likely to be minimal. Accordingly, the following operational

¹⁹ Casino licensees must provide training to all employees who come into contact with players during the course of their duties. Class 4 (non-casino gaming machine) venue licensees must provide training to the venue and enough staff to ensure that there is always a trained person at the venue when gambling is available.

policy for the management of both forms of exclusion, as described in a casino policy document, is likely to be broadly representative of industry practice throughout New Zealand:

- Applications and orders for exclusion are made on a standard form, consistent with any regulation under the Gambling Act 2003
- All exclusion orders made are enforceable by notice of trespass
- A register of all excluded individuals, along with their photos, is held by security and surveillance personnel and the Casino Inspectorate of the Department of Internal Affairs
- Excluded individuals may be required by the casino to undergo counselling and/or treatment from a recognised gambling treatment provider
- No excluded person can be re-admitted without the consent of casino management.

The casino policy is to immediately trespass any excluded person who attempts to enter or remain on the premises. This is achieved by:

- Maintaining continuous surveillance by security staff at the entrance and in all gambling areas
- Giving all security and surveillance staff immediate access to photographic records and having them also memorise these records.

With regard to enforcing venue-initiated exclusion programmes, casinos and Class 4 gambling venues are required to have a ‘problem gambler identification policy’ outlining how problem gamblers will be identified and how the exclusion process will be implemented. Two examples of such policies, from a casino and a national gaming machine trust²⁰, are described below.

Procedures for implementing the casino ‘problem gambler identification’ policy include general practices to discourage problem gambling, early intervention where a gambling problem is suspected and full intervention when a gambling problem is confirmed (presented below). To assist with decision-making regarding whether an intervention (early or full) is needed, the casino has identified examples (in the form of a problem gambling indicator list) of “problem gambling behaviour and circumstances when it will take notice and may intervene”.

- *General practices to discourage problem gambling:* signage variously outlining the casino’s customer care code, principles of harm reduction, cautionary problem gambling signs, or specialist support contacts; prominent display of pamphlets/leaflets, in English and non-English languages, that provide information on treatment services and support offices; regular staff training on recognition of problem gambling traits; limits on credit card transactions; clocks positioned prominently in casino; high standard of dress code; and adherence to host responsibility best practices in serving alcohol.
- *Early intervention:* staff training in problem gambler intervention processes (to certifiable standard); including information on problem gambling in employee circulars/newsletters; maintain strategies to intervene in an effective manner with problem gamblers, consistent with established good host management practices; where the casino has concerns, monitor gambling activities as to time spent in any one session, or amount expended less winnings; use intervention methods to enquire, interview, refer for help, or if appropriate consider excluding individuals when lesser options are ignored; automatically exclude from the casino any individual who self-identifies as a problem gambler, or who requests self-exclusion.

²⁰ A national gaming machine trust operates gaming machines in pub/hotel locations nationally and returns the net proceeds to charitable purposes.

- *Full intervention*: direct referral to Gambling Helpline or specialist treatment provider; suggesting to a patron that a break from play would be in his/her best interests; a voluntary or compulsory exclusion; initiating an exclusion contract where adult members of a family advise the casino in writing of their concern that the patron's gambling is out of control; prior to lifting any exclusion, requiring an individual to complete an assessment with a qualified treatment provider as to their gambling status. Family concerns may be taken into account in such an assessment and the casino maintains full discretion to continue the exclusion contract if concerns about the patron's gambling have not been allayed (up to a maximum of 24 months).

The national gaming machine trust policy, whilst focused more specifically on the act of identifying problem gamblers (rather than describing broader harm reduction measures), overlaps considerably with the casino policy. For example, the policy stipulates that the respective venue managers or persons acting on their behalf must approach a patron when there are "reasonable grounds to believe" that they may be a problem gambler. The gaming machine trust provides an 'indicator check list' to assist with this determination and recommends that where a patron demonstrates five or more of the listed indicators within a one-month period they should be considered to be a potential problem gambler and approached accordingly. The policy also states that information provided by third parties (e.g. where one party indicates that another party may have a gambling problem) should be afforded due consideration, but should not be acted upon in isolation. Rather, the venue manager and his/her staff should monitor the gambling activities of the person to establish whether there are reasonable grounds to make an approach.

In addition to stipulating when an approach may be warranted, the policy further states that information or advice about problem gambling must be provided to the patron, including: information about the characteristics of problem gambling (including recognised signs of problem gambling); information to a player about the potential risks and consequences of problem gambling; information about how to access problem gambling services; advice that the venue manager must identify any player who may be a problem gambler, and may ban any player from the gambling area of the venue for up to two years if the venue manager believes, on reasonable grounds, that person to be a problem gambler. If, subsequent to providing this information and after considering any explanation provided, the venue manager still has reasonable grounds to believe the patron is a problem gambler then the policy recommends that issuing an exclusion contract for a period of up to 24 months should be considered.

3.1.5 Effectiveness of self-exclusion as a problem gambling intervention

The effectiveness of self-exclusion as a problem gambling intervention can be measured in terms of utilisation, success in excluding banned patrons as well as the percentage of excluders who do not attempt to re-enter the venues, and the overall effect on gambling behaviour (Nowatzki, & Williams, 2002; Williams, Simpson, & West, 2007). Whilst not discussed in the published literature, these measures would equally apply to venue-initiated exclusion; however, rather than 'utilisation' a more important effectiveness measure would be how successful gambling venue staff were in identifying problem gamblers in order that they may be issued with an exclusion contract. Despite having some sense of how exclusion interventions should be evaluated, it would appear that very few research studies relating to evaluation of effectiveness of self-exclusion have been conducted. The literature search methodology identified only a small number of studies that sought to evaluate one or more self-exclusion interventions. No study evaluating a venue-initiated exclusion intervention

was identified. Those studies that were identified are discussed, by country of origin, below. This is followed by an overall summary of the available evidence.

Australian studies

In a study investigating gamblers' perspectives on the efficacy of responsible gambling measures in New South Wales clubs, Hing (2004) reported that only one-third of respondents knew what a self-exclusion programme was and only one-quarter had noticed signs relating to self-exclusion in the clubs. Hing concluded that enforcement of legislation around self-exclusion programmes (for example signage clearly located in venues) is key to ensuring that this responsible gambling measure is adequately implemented.

Researchers at the South Australian Centre for Economic Studies conducted an evaluation of self-exclusion programmes and harm minimisation measures in Victoria (O'Neil et al., 2003a). Face-to-face interviews with venue staff (from twelve gambling venues, covering pubs and clubs), self-excluded patrons and staff of a problem gambling counselling service were conducted by a team of researchers. Conclusions drawn from the evaluation indicated that available data on self-exclusion are input rather than outcomes based and thus "it is not possible to meaningfully comment on compliance by venues, rates of detection or notification rates and hence the effectiveness of exclusion as a protective measure" (O'Neil et al., 2003a). The authors also reported that self-excluded gamblers commonly breached the exclusion with no detection of the breach and that only a relatively small number of gamblers used a self-exclusion programme (O'Neil et al., 2003a).

Canadian studies

Ladouceur et al. (2000) investigated the characteristics and outcomes for a cohort of gamblers who used the Montreal Casino (Québec) self-exclusion programme. Two hundred and twenty individuals who had self-excluded from the casino participated in the study. Participants undertook a questionnaire which had four sections: 1) socio-demographic data, 2) the South Oaks Gambling Screen (past year time frame), 3) gambling habits (gambling experience at the casino and appreciation of the current self-exclusion), and 4) prior experiences with the self-exclusion service. The period of the exclusion varied, with two-thirds barring themselves for 12 months or less and one-quarter requesting the maximum 60 months. Ninety-five percent of the self-excluders met the criteria for probable pathological gambling, just under one-quarter had one or more previous exclusions, and 36% of the repeat excluders admitted returning to the casino to gamble whilst in the self-exclusion programme. Only 10% of gamblers who considered seeking professional help (about half of the self-excluders) actually accessed treatment services. It was concluded that self-exclusion was helpful for gamblers who might need assistance but were not ready to seek professional help (Ladouceur et al., 2000).

At a later date, Ladouceur and colleagues (2007) reported on a longitudinal study of self-excluders from the three casinos in Québec. One hundred and sixty one participants were asked to take part in telephone interviews after signing a self-exclusion agreement and were followed up at six, 12, 18 and 24 months. Participants were first-time self-excluders from the casino/s and had excluded themselves for a period of six, 12 or 24 months. The authors reported that the self-exclusion process appeared to have positive impacts in reducing participants' urge to gamble, perceived control over their gambling and negative consequences from gambling. These changes were only significant between the first interview and the six-month follow-up. However, by the six-month follow-up interview over half of the participants for whom the self-exclusion contract was still in force had returned to the casino or breached their contract, with many not identified by the casino. Most participants (93%) at the first interview (initiation of project) reported that they would opt for self-exclusion in the future; by the two-year follow-up interview, this had decreased to half of

the participants. One of the conclusions drawn by the authors was that if venues were subject to penalties for non-compliance, this might help reduce the incidence of non-identification of exclusion breaches (Ladouceur et al., 2007).

Further research on self-excluders at the Montreal Casino observed participation in, and evaluated satisfaction and usefulness of, an improved self-exclusion programme which included an initial voluntary evaluation with a self-exclusion counsellor, phone support from the counsellor throughout the duration of the exclusion contract and a mandatory meeting with the counsellor at the end of the exclusion contract. Of the 857 gamblers who signed an improved self-exclusion contract between November 2005 and May 2007 (gamblers could also choose to sign a regular, non-improved, self-exclusion contract), 116 completed a questionnaire about their satisfaction and perception of the usefulness. Results indicated that 75% of the time, participants chose the improved self-exclusion programme over the regular programme. Of those who chose the improved programme, 40% wanted the initial evaluation with a counsellor, with 37% of those actually attending the meeting (this equated to 15% of all the improved self-exclusion users). However, 70% attended the mandatory meeting required to end the self-exclusion period. Although there was high satisfaction with the improved self-exclusion programme, this was not significantly different from satisfaction noted in the previous Canadian studies (detailed above), thus the significance cannot be ascertained. However, respondents on the improved self-exclusion programme reported major improvements in a range of gambling-related behaviours and psychological distress which points to a beneficial effect of having counsellor support during the process (Tremblay, Boutin, & Ladouceur, 2008).

Schrans, Schellinck and Grace (2004) reported on a study investigating the extent that video lottery (electronic gaming machine) venue staff accurately identified self-excluded players who breached exclusion contracts and re-entered premises to gamble. The Nova Scotia Video Lottery Self-Exclusion Program Process Test took place over a three-month trial period with 45 venues and 36 self-excluded player participants. Only regular players scoring for non-problem gambling and meeting the criteria for participation were invited to take part in the study. Results from the trial indicated that venue staff accurately identified only about two-fifths of self-exclusion breaches and less than one-quarter (23%) of gambling sessions recorded by the self-excluded players. Schrans and colleagues concluded that ensuring venue interest and sustained performance in identifying self-exclusion breaches would be challenging, and that it is virtually impossible for retailers to consistently identify even a limited number of players in a busy setting, particularly when trying to identify less familiar patrons (Schrans et al., 2004).

In a report on self-exclusion and gambling conducted by the Responsible Gambling Council (RGC) (2008), twelve focus groups in seven provinces were held with 76 individuals with self-exclusion programme experience. Focus group participants were recruited through counselling agencies, newspaper advertisements and RGC's website. Preceding the beginning of each focus group, participants completed a survey that collected demographic information and information about their gambling behaviours prior to, and during, self-exclusion. Seventy-percent of participants had self-excluded once, while 21% had self-excluded two or more times. One-third of the participants reported breaching their self-exclusion agreements by gambling at the venues from which they had self-excluded. Of those who had breached their agreements, 69% were not detected. Of those participants who were detected, 63% reported that they went on to breach again. Although approximately 70% of participants reported that they gambled during self-exclusion, the results suggest that there was a notable reduction in the gambling activities of participants while self-excluded.

New Zealand studies

In a recent small-scale study (N=35) undertaken by Townsend (2007), clients of a single community problem gambling treatment service who had reported using a self-exclusion option between July 2004 and July 2006, were interviewed. The aim of this study was to report treatment outcome data from a sample of self-excluded problem gamblers. The clients had a comprehensive mental health/addiction assessment on entry to the service and were treated as outpatients for an average of six sessions. Follow-up assessment scores (completed in August 2006) for problem gambling, perceived control over gambling, and money lost on gambling were generally improved over initial assessment scores. Townsend suggests this indicates that self-exclusion may be more effective than has been previously reported for problem gamblers; however due to the small sample size, lack of control over the duration of the self-exclusion and the lack of independence in this study, more research is required in this area to make a definitive conclusion.

A recent study conducted by the Gambling and Addictions Research Centre investigating barriers and enablers to help-seeking behaviours by problem gamblers reported that only 15% (19/125) of participants recruited via a treatment provider identified venue intervention as a motivator for seeking help (Pulford et al., 2009). This would seem to correlate with Ladouceur and colleagues' (2000) findings that only a small percentage of self-excluders will subsequently enter a treatment service.

Summary of available evidence

Few studies have sought to evaluate the effectiveness of self-exclusion as a problem gambling intervention, and most of those that have been conducted are limited in methodology, size and scope. For example, prospective longitudinal studies examining the impact of a self-exclusion contract on subsequent gambling opportunities and/or problem gambling status were rare and there were no examples of a randomised controlled trial or any other form of controlled trial. The research that has been conducted suggests self-exclusion programmes are poorly utilised and relatively easy to breach. Nevertheless, there seems to be some evidence that they may usefully contribute to a reduction in gambling-related harm amongst those who do utilise them, although more and better research is needed before any conclusions can be drawn in this regard. As previously stated, the authors were unable to identify any study evaluating the effectiveness of venue-initiated exclusion. Thus, little can be stated regarding the effectiveness of venue-initiated exclusion at this point in time.

3.1.6 Identified limitations in current exclusion practices

Whilst there have been relatively few studies evaluating the effectiveness of self-exclusion as a problem gambling intervention, limitations and/or potential weaknesses in the self-exclusion process have been widely discussed²¹. Key issues are summarised under the headings 'programme expectations', 'programme implementation' and 'programme compliance and evaluation' below. The research team was unable to locate any critical discussion of venue-initiated exclusion; however, there is likely to be considerable overlap in the limitations of both forms of exclusion. Accordingly, this section concludes with a brief discussion of what

²¹ Most of the literature discussed in this and the following section pertains to international exclusion models or draws on research data obtained from countries other than New Zealand. The resulting information remains of value, especially as there is relatively little written about local exclusion practices, but may not readily apply to the New Zealand context. Exclusion practices common to this country require sound evaluation and/or critique before firm conclusions can be drawn regarding their strengths/weaknesses and best practice recommendations. The research findings presented in the latter chapters of this report represent a start to this investigative process.

these overlaps are likely to be and additional issues that may pertain to venue-initiated exclusion.

Programme expectations

In a recent paper, Blaszczyński et al. (2007) cautioned that if the roles and responsibilities of self-exclusion are not clearly defined then this may "...result in dissatisfaction, resentment and criticism of the programme" (p. 64). There is some evidence to suggest that gambling venue patrons' expectations of self-exclusion diverge from those of the venue operator. For example, after interviewing a group of self-excluders, O'Neil et al. (2003a) identified a discrepancy between "...many gamblers' perceptions of self-exclusion and what the program is able to deliver" (p. 19). In short, whilst many interviewees expected to be reliably prevented from entering a gambling venue, venues often operated on the expectation that the self-excluder would assume responsibility for honouring the self-exclusion contract. Consistent with the caution of Blaszczyński et al. (2007), this discrepancy in programme expectation resulted in interviewees expressing "anger" towards, or feeling "let down" by, the self-exclusion process. It remains a moot point regarding what the roles and responsibilities of self-exclusion should be. Napolitano (2003), for example, contends that self exclusion "...improperly shifts the responsibility for a gambler's behaviour from himself to the gaming establishment" (p. 313). Others contend that it is appropriate for the gambling industry to invest considerable resources into reliable self-exclusion enforcement initiatives (O'Neil et al., 2003a). Either way, if the patron and industry expectations of any particular exclusion contract are not in synchrony, then its potential effectiveness may be reduced.

On another level, researchers have also cautioned against expecting too much from self-exclusion. Nowatzki and Williams (2002), for example, argue that "...the development of self-exclusion programmes is only one of many policy tools that are needed to minimise problem gambling" (p. 22). In their opinion, a thorough intervention process would include: limiting casino hours of operation; removing automated banking machines from casinos; eliminating house credit; eliminating smoking and/or drinking from gambling venues; changing gambling environments to make people more aware of the current time and how to exit the establishment; and introducing responsible gambling features on electronic gaming machines. This notion that multi-faceted host responsibility responses to problem gambling are required is repeated elsewhere (O'Neil et al., 2003a). It has also been noted that self-exclusion is not a *treatment* intervention and should not be mistaken as such (Blaszczyński et al., 2007; Nowatzki, & Williams, 2002) and that self-exclusion may only be effective in-so-far as it results in abstinence from gambling (O'Neil et al., 2003a) or if it facilitates a meaningful behaviour change process (Responsible Gambling Council, 2008). Unrealistic expectations in any of these areas would not undermine the utility of a self-exclusion programme per se, but it may damage the credibility (and hence attractiveness) of a programme or prompt unreasonable outcome expectations.

Programme implementation

Numerous issues pertaining to programme promotion, registration, jurisdiction, and enforcement have been discussed in the literature. In general terms, it has been suggested that: self-exclusion programmes may be inadequately promoted and/or patrons discouraged from utilising them (Pulford et al., 2009; Ladouceur et al., 2000); that the registration process may be overly complicated, highly variable between venues (i.e. non-standardised), and with limited or no off-site access (Nowatzki, & Williams, 2002; Responsible Gambling Council, 2008); that the jurisdiction of a self-exclusion agreement may be limited to a single venue, or small number of venues, often necessitating multiple self-exclusion contracts from multiple venues (Nowatzki, & Williams, 2002); and that enforcement may be lax, difficult to implement (especially in those cases where an exclusion agreement covers multiple venues), or easily thwarted by patrons (Blaszczyński et al., 2007; Nowatzki, & Williams, 2002; O'Neil

et al., 2003a). In addition, it has been suggested that gambling venue staff tasked with registering self-excluders do not have the clinical skills necessary to assess the needs of the gambler and/or the capacity to identify and respond to possible suicide risk (Blaszczynski et al., 2007).

The implementation issues identified above may limit the effectiveness of a self-exclusion programme in a number of ways. If patrons are unaware of the availability of self-exclusion as an intervention or are discouraged from utilising it (e.g. by gambling venue staff, by the complexity of the registration process or by limited access to the registration process), then the number of problem gamblers who could potentially benefit from self-exclusion is reduced. Similarly, if self-excluders can easily gain continued access to gambling opportunities, through jurisdiction limitations, enforcement issues or agreement revocation, then the potential impact of self-exclusion as a meaningful intervention for those problem gamblers who do use it is blunted. The clinical skill of gambling venue staff, or lack thereof, is as much about patron safety as it is about enhancing the effectiveness of self-exclusion. As Blaszczynski and colleagues (2007) argue, if gambling venue staff charged with registering self-excluders possessed the necessary clinical skills then they would be ideally placed to provide the patron with a detailed needs assessment and may be more persuasive in encouraging specialist treatment contact (or could provide specialist assistance themselves). More importantly, however, they would be better equipped to identify the risk the self-excluder may pose to him/her self or others. Problem gambling is associated with significant financial and psychological stress (Ladouceur, Boisvert, Pepin, & Loranger, 1994; Morasco, vom Eigen, & Petry, 2006) and self-exclusion requests may well be motivated by a crisis event of some nature (Blaszczynski et al., 2007). Thus, it would be reasonable to conclude that the mental state of many patrons seeking self-exclusion may be less than ideal and the potential for significant harm exists.

Programme compliance and evaluation

The lack of independent regulation has been identified as a major limitation of many self-exclusion programmes (Blaszczynski et al., 2007; Ladouceur et al., 2007; O'Neil et al., 2003a). If the primary responsibility for operating and regulating self-exclusion is with the gambling industry then a conflict of interest arises. This is largely because gambling venue operators derive considerable revenue from "...the disproportionate spending of problem gamblers." (Banks, 2002, p. 24). Thus, as stated by O'Neil et al. (2003a), "...enforcing self-exclusion may impact directly on operator income" (p. vii). A lack of independent regulation may not only undermine the extent to which self-exclusion is enforced, it may also impact on: the degree to which self-exclusion is promoted in a venue (e.g. less regulation, less promotion); the intricacies of the registration process (e.g. complex registration processes designed to deter self-exclusion or easy revocation processes); the level of infrastructure support (inclusive of staff training, detection and monitoring systems, and quality improvement); and the level of resource expended establishing and maintaining relationships with specialist treatment and/or support services.

The lack of sound evaluation, as identified in section 3.1.5, is another major limitation of current self-exclusion programmes. The effectiveness of self-exclusion as a problem gambling intervention has yet to be clearly established. Not only is it uncertain whether or not self-exclusion is an effective intervention, there is very little evidence available on which to inform the specifics of a self-exclusion programme. For example, there is no clear consensus on optimal ban length, patron-friendly registration processes or on how to best link self-exclusion with possible treatment entry. Researchers have previously noted that the gambling industry expends a considerable amount of time and energy defending the credibility of self-exclusion when the same resource could be better spent developing "...appropriate monitoring systems and an effective self-exclusion system that could work in

an integrated way with complementary harm minimisation measures” (O’Neil et al., 2003a, p. viii). If current self-exclusion programmes were to be identified as having limited value then the gambling industry may be pressured, or elect, to adopt a greater range of host responsibility policies and/or more resource intensive forms of self-exclusion. Until such time as self-exclusion has been soundly evaluated, then its utility as a problem gambling intervention will remain unclear.

Venue-initiated exclusion considerations

As previously noted, the authors were unable to identify any reported comment on the limitations and/or potential weaknesses of venue-initiated exclusion. Nevertheless, the enforcement and jurisdiction issues discussed above would equally apply in this context as would the issues pertaining to programme compliance and evaluation. Logic would also suggest that identifying problem gamblers, in order that they may be excluded, would be a challenging task in many gambling venues. Informal approaches could be employed in which staff members are trained to identify possible problem gamblers and how to broach the subject of problem gambling with them. These staff members could then employ their skills as and when they believe they have ‘identified’ a probable problem gambler. A study conducted by Delfabbro and colleagues (2007) which involved surveys and consultation with industry staff (N=125) and problem gambling counsellors (N=15), a detailed survey study of regular gamblers (N=680) and observational work conducted within venues concluded that identification of problem gamblers within gambling venues is *theoretically* possible with several visible indicators that can differentiate problem players in situ from other non-problem gamblers. However, Delfabbro and colleagues also identified a number of barriers to the theoretical identification of problem gamblers, mainly related to training issues, and staff time and other commitments within the venue. They also stressed that identification of problem gamblers should not merely be based on checklists but placed in the context within which the behaviour occurs (Delfabbro et al., 2007) because whilst some indicators of problem behaviour are objective, others are subtle emotional responses which need to be contextualised.

Alternatively, a more structured approach could be employed in which staff members approach any gambler who conforms to objective, measurable criteria (perhaps based on money or time spent in the casino and/or changes in spending/use habits) regarding the possibility of problem gambling²². Both models would likely require a significant level of staff training and regulation in order to operate effectively; the latter model would also require reliable and prompt access to individual gambling records. Given the considerable cost, difficulty and sensitivity associated with both approaches, it is highly likely that they would only succeed in excluding most problem gamblers if compliance was monitored by an independent regulator and if the consequences for non-compliance (i.e. lax detection of problem gamblers) to the venue were considerable.

3.1.7 Best practice models of exclusion

The literature review identified a small number of papers presenting self-exclusion best practice recommendations (Blaszczynski et al., 2007; Nowatzki & Williams, 2002; O’Neil et al., 2003a; Responsible Gambling Council, 2008; Schrans et al., 2004). There was considerable overlap between the recommendations made in each paper (discussed below),

²² New Zealand operators currently employ an informal system, in which staff members are trained to identify and respond to suspected problem gamblers. As noted in section 3.1.4 gambling venue operators may employ a set of problem gambling ‘indicators’ to assist in this process; however, these indicators remain relatively subjective and are not readily measurable.

although some variation was evident. The presence of two contrasting models of self-exclusion, grounded in distinct conceptual frameworks, largely accounted for this variance. Whilst not necessarily labelled as such in the respective publications, these models have previously been termed the ‘enforcement’ and ‘individual assistance’ models of self-exclusion (Responsible Gambling Council, 2008) and are described in detail below. A sound understanding of each is important as self-exclusion service provision and outcome evaluation will vary according to which framework a self-exclusion programme was considered to be operating under. Best practice recommendations for venue-initiated exclusion were not identified by the search methodology; however, logic suggests that many of the self-exclusion recommendations would similarly apply to venue-initiated exclusion programmes. Further recommendations specific to venue-initiated exclusion, determined by the project team and grounded in an understanding of the exclusion literature, are presented in a later section.

Variance in best practice

Best practice recommendations for self-exclusion vary, in part, depending on whether emphasis is placed on enforcing the self-exclusion agreement or on assisting self-excluders to access help. Enforcement-based recommendations prioritise the detection and removal of self-excluders from gambling venues as an intervention in itself, whereas assistance-based recommendations prioritise the wider intervention opportunities a self-exclusion request presents. The two approaches are not mutually exclusive; advocates of enforcement-based models may still recommend attendance at a specialist treatment programme and effective enforcement may still be a feature of assistance-based models. As stated, the difference is often one of emphasis and is most evident in the priority given to different aspects of the self-exclusion process. Nevertheless, the implications for service provision and outcome evaluation on employing one or other approach are potentially considerable. For example, contrast O’Neil et al. (2003a) understanding of self-exclusion with that of Blaszczynski et al. (2007):

“In behavioural terms, self-exclusion can be a valuable tool because, by preventing the commencement of a session (theoretically), it is preventing engagement with gambling cues that could easily become a temptation to return to old gambling patterns.” (O’Neil et al., 2003a, p. 18).

“...self-exclusion would function as a gateway to accessing a system of complementary services and community resources that are individually tailored” (Blaszczynski et al., 2007, p.67).

As the enforcement model centres on gambling prevention, then: “The critical criterion for assessment of self-exclusion is how effectively it achieves abstinence through either voluntary self motivated behaviour, or subsequent detection and removal” (O’Neil et al., 2003a, p. 79). In other words, programme success is determined by the degree to which problem gamblers can be prevented from accessing gambling opportunities. As the assistance model focuses on problem recovery, a more valid measure of outcome may be the extent to which the programme engages problem gamblers in treatment or some other form of positive change process. There is less emphasis on venue enforcement under this model, as exemplified by Blaszczynski and colleagues (2007): it is the “...individual’s responsibility to refrain from re-entering the venue during the period of self-exclusion”. The enforcement-based model is considered the predominant form of self-exclusion in the contemporary environment (Responsible Gambling Council, 2008), whilst the assistance-based model may be better viewed as an emerging conceptual framework, aspects of which are beginning to be applied in practice.

Best practice recommendations

There is no single recognised gold standard for the provision of either enforcement- or assistance-based self-exclusion. Rather, there are various recommendations made by various

authors that largely, but not always, overlap. Two of the more well articulated sets of best practice recommendations are presented below: An enforcement model and an assistance model. Following the presentation of each, alternative and/or additional recommendations relevant to each model are summarised. This should provide the reader with a broader sense of how each model may best be applied. The section concludes with an overview of what might be considered best practice with respect to venue-initiated exclusion.

Best practice recommendations for an enforcement model of self-exclusion

Based on cross-jurisdictional analysis and lessons from the addiction literature, Nowatzki and Williams (2002) make the following recommendations regarding the best way to operate a self exclusion programme:

- *Mandatory promotion of self exclusion programmes:* All venues are required to prominently display information about the self-exclusion programme and how it works. It is mandatory to act on attempts by gamblers to self-exclude. Compliance is monitored by an independent regulatory body.
- *Irrevocable contracts and minimum ban length of five years:* There should be no opportunity for gambling venue access to be reinstated and there should be significant ban length to reduce risk of relapse.
- *Jurisdictional-wide programmes administered by the jurisdictional regulatory body:* Introduction of a standardised self-exclusion procedure across venues including options that do not require attendance at a casino/gambling venue (e.g. mail, Email, third party)
- *Extending exclusion to all gambling venues, and restricting all gambling to gambling venues:* Single exclusion agreement applies to all gambling venues inclusive of pubs/clubs and Totalisator Agency Board. Electronic gaming machines removed from non-gambling venues. In this way, exclusion agreement covers all forms of gambling and severely restricts access to alternative gambling forms.
- *Computerised identification checks for enforcement of self-exclusion:* Computerised identification checks prior to gambling venue entry or implementation of a visitor registration system.
- *Penalties both for venue and gambler upon violation of agreement:* Gambling venues incur a financial penalty for ‘breach of contract’ if a self-excluder is detected on site. Patron incurs a non-financial and non-criminal penalty (e.g. community service, trespass order). Policed by an independent regulatory body.
- *Optional counselling and mandatory gambling education prior to reinstatement:* When signing self-exclusion contracts, individuals are provided with professional contacts and strongly encouraged to seek counselling and attendance at a responsible gambling education seminar, compulsory for reinstatement.
- *Increased training and education of casino employees:* Train casino employees to be leaders in recognition and identification of pathological gambling and to actively intervene (limited to broaching issue of problem gambling and recommending self-exclusion/treatment intervention).

Consistent with the best practice recommendations put forward by Nowatzki and Williams (2002), O’Neil et al. (2003a) and Schrans et al. (2004) argue that self-exclusion programmes can only effectively be enforced if formal registration/identification systems are introduced at the point of entry to a gambling establishment or if exclusion processes are activated on each electronic gaming machine (e.g. via smart cards or loyalty schemes). Both, however, offer what O’Neil and colleagues describe as ‘second best’ enforcement solutions which may improve the effectiveness of current self-exclusion programmes if formal registration/identification systems are resisted. Schrans and colleagues (2004) suggest that enforcement may be enhanced by employing “...a dedicated staff member whose primary (or sole) responsibility would be to supervise the gaming area for breach detection” (p. 86) whereas

O'Neil and colleagues (2003a) recommend "mandate support technology such as high quality colour printers in venues to facilitate photo identification" (p. 88). Both also recommend a centralised, on-line or automated data management system for reporting breach detection and subsequent follow-up, and the provision of additional financial resources to assist with detection, reporting and programme evaluation initiatives. Despite presenting these 'second best' solutions, both sets of authors caution against expecting too much from a self-exclusion programme operating in an environment in which gambling venue patrons are not required to register/provide identification prior to venue entry. Schrans and colleagues (2004) even suggest that "...reliance on the ability of retail staff to subjectively detect and accurately report on the gaming activity of an 'excluded' player is neither reasonable nor appropriate" (pp. 88).

Best practice recommendations for an assistance model of self-exclusion

Blaszczynski and colleagues (2007) propose a model in which self-exclusion would function as a gateway to accessing a system of complementary services and community resources that are individually tailored. This system, depicted schematically in Figure 1, introduces specialist educators and independent auditors into the self-exclusion process. The responsibilities of each, as well as those of the gambling venue, are detailed below:

- *Responsibilities of the self-exclusion educator:* Initiates contact with the self-excluder upon entry to the programme; conducts initial assessment and provides referral to indicated services (including treatment, financial and social support services); educates regarding the principles and purpose of self-exclusion as well as concepts involved in problem gambling and the recovery process; provides intensive case-management over the course of the exclusion agreement; serves as an ongoing supportive linkage between workers at gambling venues, gamblers and available resources.
- *Responsibilities of the venue:* Provide employee education and infrastructure support needed to initiate the self-exclusion process and facilitate contact with the educator; educate clients on the availability and public value of self-exclusion based on empirically-derived information; devise and institute protocols for identifying and managing individuals who breach self-exclusion agreements; display adequate signage regarding self-exclusion options; cooperate with periodic, random spot-checks by independent auditors; be subject to some form of penalty for non-compliance.
- *Responsibilities of the independent auditor:* Provide performance reports describing the operation and effectiveness of the self-exclusion programme, including the performance of the industry and educators; review and report venue compliance with the first four points listed under 'responsibilities of the venue' above; consult with educator and staff members regarding the implementation of the programme and recommendations for continued improvement.

Figure 1: Schematic representation of an assistance-based model of self-exclusion

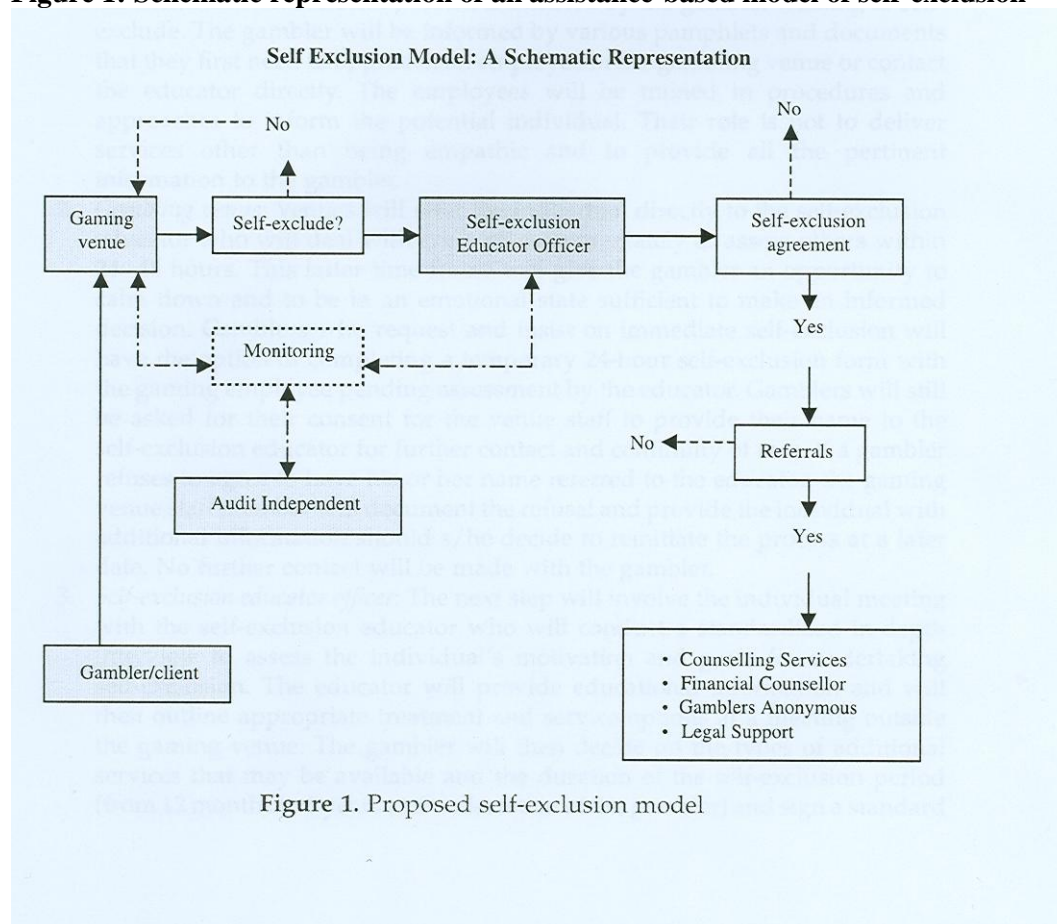


Figure 1. Proposed self-exclusion model

Source: Blaszczynski, Ladouceur & Nower, 2007

The model proposed by Blaszczynski and colleagues (2007) may be considered a relatively ‘extreme’ version of assistance-based self-exclusion. A broader view on assistance-based self-exclusion, accommodating less extreme forms of service provision, was recently presented in a discussion paper by the Canadian-based Responsible Gambling Council (RGC) (Responsible Gambling Council, 2008). According to the RGC, employing an assistance-based approach to self-exclusion means: “...responding in a helpful way to individuals’ concerns; working through the registration process in a respectful, timely manner, providing information about counselling options (e.g. financial, self-help and treatment referrals) so that individuals may decide what is best for them, according to their own timeframes (i.e. readiness to address their problem); and encouraging these individuals to take advantage of the assistance available” (p. 46). Many of the recommendations as to how an assistance-based model of self-exclusion might be implemented were consistent with those expressed by advocates of enforcement-based models including: greater promotion of self-exclusion within venues, greater clarification regarding self-exclusion roles and responsibilities, expanding registration access points, enhancing detection via the greater use of technology, broadening the jurisdiction of self-exclusion agreements, employing an active reinstatement process (rather than default expiry of agreement), and to consider (if sound evaluation suggests it is beneficial) greater regulatory oversight and penalties.

Consistent with the underlying premise of an assistance-based model, there are detailed best practice recommendations regarding the self-exclusion registration process. According to the Responsible Gambling Council report (2008), the registration process should be conducted by dedicated staff specially trained to provide a respectful and discrete service in a comfortable

setting and in a timely manner. Topics covered between the staff member and the patron during the registration process should include: roles and expectations of the gambling provider and the person who has chosen to self exclude; ban length options that best meet the individual's needs; how breaches will be managed; what happens to player cards and loyalty points (if applicable); whether the person who has self-excluded has more than one player card or is registered under more than one name (if applicable); support options (e.g. local gambling counselling, helpline number, financial counselling, online resources, and self-help resources); processes for renewal and reinstatement; confidentiality and privacy agreements; and the cessation of promotional materials. Information pertaining to each of these topics would be presented in take-home material and consent would be sought for a follow-up call to be made at some point in the near future. This call could be made by the staff member or an agreed other (e.g. counsellor from local gambling treatment service) and the purpose would be to ensure the patron understood what was discussed during the registration process and to offer information and/or referral to a specialist treatment service.

Best practice recommendations for venue-initiated exclusion

Best practice recommendations for venue-initiated exclusion would also vary, in part, depending on whether they were placed within an enforcement- or assistance-based framework. As with the self-exclusion recommendations discussed previously, an enforcement-based model would centre on preventing access to gambling opportunities whilst an assistance-based model would centre on promoting a positive behaviour change process. Accordingly, the recommendations previously discussed under each of these models would largely apply in a venue-initiated exclusion context. An additional feature of any venue-initiated exclusion programme, however, would be the process by which problem gamblers are identified in the first instance (in order that they may be excluded). As discussed in section 3.1.6, informal approaches could be employed in which staff members are trained to identify possible problem gamblers and how to broach the subject of problem gambling with them. These staff members could then employ their skills as and when they believe they have 'identified' a probable problem gambler. Alternatively, a more structured approach could be employed in which staff members approach any gambler who conforms to specified criteria (perhaps based on money or time spent in the venue and/or changes in spending/use habits) regarding the possibility of problem gambling. Finally, venues often have a 'third party' exclusion option whereby a person (often a friend or relative of a gambler) may approach a venue and request that a particular gambler be excluded. Venues can then follow-up on this request and ascertain the best process to take with the particular gambler.

The structured approach presents as the more credible method of problem gambling detection as it relies on more objective 'measurement' criteria. An example of how such an approach may work is also presented by De Bruin and colleagues (2001), based on the experience of Holland Casino. In this model, all visitors to the casino are required to register and their registration system allows the history and visiting frequency of any patron to be accessed at any time at all Holland Casino venues. Any change in a patron's frequency of gambling can then be automatically detected and staff can be prompted to approach the gambler and recommend some form of protective measure. Whilst this model presents as the ideal, it may be difficult to implement in many gambling venues especially if visitor registration is not mandated. Thus, the informal model of problem gambler detection is more likely to be utilised. Adequate and regular (given high rates of staff turnover) staff training would be essential if this model were to work, and would perhaps be most successful if dedicated staff members were trained to detect, carry-out and enforce venue-initiated exclusion programmes. There would also be considerable advantage in widely promoting the programme, and

possibly implementing a low threshold of suspicion²³, so that patrons are not taken unaware, if approached by a staff member, regarding the possibility of problem gambling.

3.1.8 Summary

This review sought to broadly describe patron exclusion, including international variations in legislation and practice, document the evidence in support of its effectiveness, identify limitations in exclusion as a problem gambling intervention and make best practice recommendations. Overall, the findings suggest exclusion practices vary considerably in design and scope when considered on an international basis. For example, in some jurisdictions, exclusion practices are mandated whereas in others they are not. Similarly, the aim, length and process of exclusion vary widely both within and between countries. In New Zealand, casinos and Class 4 gambling venues are required to offer both venue initiated- and self-exclusion policies, thus the basic requirements of these policies are likely to be similar across venues, given the legislation.. Whether or not these exclusion policies are effective in reducing gambling-related harm remains largely unproven; the required level and quality of investigation has yet to be conducted. Nevertheless, factors that may undermine the potential effectiveness of patron exclusion as a problem gambling intervention are widely recognised and best practice recommendations have been made. Thus, current exclusion practices can be assessed against practice recommendations. Whether adhering to a particular practice recommendation results in a greater reduction of harm, however, also remains largely unexamined.

²³ Possibly similar to the policy in many supermarkets of seeking identification for an alcohol purchase from anyone who looks 25 years or younger, even though the legal purchasing age is 18 years.

3.2 Focus groups

Focus groups were conducted with problem gambling treatment providers (counsellors), and gambling venue staff involved in exclusion processes (casino and pub including gambling floor managers, host responsibility staff and security staff).

The participants in the focus groups were identified by the research team, in discussion with the relevant stakeholder organisations, as key stakeholders able to usefully participate in the discussions.

Focus groups were semi-structured to elicit detailed discussion around:

- Uptake, implementation and enforcement of current venue exclusion processes
- Perceptions around the impact, effectiveness and usefulness of the current exclusion programmes
- Perceived effectiveness of the processes
- The impact of current exclusion processes on problem gambling
- Perceived occurrence of excluded gamblers breaching contracts, frequency of breaches, and process for, and effectiveness of, venue identification of breaches
- Perceived benefits and flaws of the current exclusion processes
- How venues can more effectively inform patrons about the self-exclusion processes
- How venue patrons can be encouraged to use the self-exclusion processes
- Effectiveness of staff training in the current venue exclusion processes

The following section of the report provides a summary of the themes identified from the analysis of focus group transcripts. As there was wide discussion within the groups, the themes that are reported are those pertinent to issues of gambling and venue exclusion processes.

3.2.1 *Principal themes*

Seven major themes were identified from the focus group analyses. These have been reported under the broad headings of:

- Positive aspects of exclusion
- Negative aspects of exclusion
- Exclusion processes
- Approach/intervention activities
- Breach procedures
- Re-entry requirements
- Treatment provider and venue links

Whilst it was apparent that there are several differences in the implementation of exclusion processes between pub and casino settings, there are also many similarities. There were many shared positive and negative aspects in relation to current practice. Additionally, although there appeared to be some level of wariness in the relationship (or lack of relationship) between treatment providers and venue staff, there seemed to be a willingness to be open-minded in working together to achieve procedural outcomes that will be of benefit to problem gamblers.

3.2.2 *Positive aspects of exclusion*

The action of excluding problem gamblers from a venue was discussed by participants from all focus groups as having positive effects, both from a human/person perspective and from a business perspective. From a human/person perspective, participants noted that exclusion often helped with a gambler's process of dealing with problem gambling, not as a sole remedy, but as one option in a multi-faceted approach. From a business perspective, exclusion was seen as a positive way to meet the requirements of the Gambling Act 2003 and a way to maintain a viable business.

"I see it as a positive." (Casino focus group)

"It's a really useful tool for clients, an external tool, to help them not go to the venues that they've been frequenting to go gambling. A lot of clients find that a really helpful way to do it, particularly with the casino." (Treatment provider focus group)

"Exclusion is just one of a number of tools that can be used to assist people who have issues because nobody wants a problem gambler on their doorstep." (Pub focus group)

"It seems to function quite well in terms of my experience, it works quite well in terms of it's relatively easy for them to do it, they go in and they talk to the guy at the casino and they get their photo taken." (Treatment provider focus group)

"I think it works well, I think that it gives us options and that's backed up by the Gambling Act." (Casino focus group)

In order to try and prevent gambling at harmful levels, casino focus group participants discussed the positive aspect of increased interaction with gamblers, prior to progression to an exclusion contract.

"...encouraging gaming staff to interact more with customers, building relationships, looking after them so we don't have to get to the point where we say 'you have issues, we are going to exclude you', to really look after the customer, we understand that if we do that we will have a sustainable customer, its good for business but also really good for them, really good for them." (Casino focus group)

"I notice that a lot of interventions that are conducted, that people do alter their behaviour from it, which is, it doesn't often have to go down that line of exclusion, just the fact that someone has called them or spoken to them or interacted with them is enough to see a behavioural change." (Casino focus group)

However, as well as the positive and beneficial side to current exclusion practices, there are flaws, and participants discussed a number of concerns and negative aspects.

3.2.3 *Negative aspects of exclusion*

The concerns/negative aspects of exclusion processes discussed by participants included practicalities in implementing exclusion contracts, the necessity to confront a person who may react in an unknown and aggressive manner, and issues around a gambler's readiness to take the step to sign an exclusion contract. Suggestions were raised regarding additional steps in the process such as communication and discussion with gamblers before raising the topic of

excluding from a venue; some participants felt that the stage of exclusion contract implementation was too late a stage to help or guide a gambler.

"You never know what you are going to experience day-to-day with the negative aspects of troubled gambling, its very emotional for some people, some people think its none of our business, some people think its none of our business how much they spend." (Casino focus group)

"The process is negative for some, they get angry, confronted." (Casino focus group)

"...people have to be prepared to accept it themselves before you can actually do anything about it." (Pub focus group)

"You can approach people and you can say 'hey' to people, 'hey look you think you might be popping a little too much in there?' and if people don't believe that they are or people aren't prepared at that point in time to accept the information, you're wasting your time and what you're really doing is affecting your long term business." (Pub focus group)

Treatment provider participants discussed a negative aspect of their roles as being uncomfortable when endorsing a gambler to be "fine" to re-enter a venue after the end of an exclusion contract, despite a gambler's wishes.

"The hardest part for me in the whole process would be when they choose to un-exclude as in a counsellor making that judgement. Of course they're going to say that everything is fine." (Treatment provider focus group)

"There are huge questions for me around, after the end of the two years if the person wants to go back and what our role is there, of course we cannot say that the gambling person has suddenly become safe to go gambling and that decision needs to be made by the casino but I have questions about whether we should do that work at all." (Treatment provider focus group)

Gambling venue participants questioned the effectiveness of exclusion contracts when a patron can move from one pub to another or from a casino to a Class 4 (pub/hotel/club) venue. Discussion around multi-venue exclusion contracts included the problem of identification of a greater number of gamblers per venue, who may not be regular patrons, and led to some discussion around positive ways to deal with this issue. It was reported that once a gambler has excluded from a pub they are seldom seen in the same venue for a drink or meal, which participants thought may be due to shame/stigma. Pub focus group participants reported this as a business loss since gambling is not their main business.

"Casino exclusion is driving them into the Class 4 venues." (Casino focus group)

"Pubs aren't effective 'cause they just go down to the next one down the road." (Treatment provider focus group)

"It doesn't stop them from going into another bar though does it?" (Pub focus group)

"Queenstown have their blanket exclusion policy, you self-excluded yourself from one venue and you self-exclude from the lot, but do that in the biggest cities makes sense, it's a huge ask to have all that information in the database sending that information over to everyone, and then trying to enforce it." (Casino focus group)

“That would be good if we could just exclude them from our side of town.” (Pub focus group)

“I’ve never seen any person that’s excluded from the pokie room, come back into the bar for a meal or a couple of drinks. That’s just not human nature you know, they’ve lost face in that public arena - not coming back.” (Pub focus group)

Pub venue participants also voiced a concern about not knowing what happens to gamblers after they have been excluded (i.e. whether the gambler received any treatment/help) and thus not being able to assist them further. A number of participants voiced concerns about past excluders whom they felt needed immediate assistance that they were not trained to provide, nor could they find an appropriate person to attend the gambler (e.g. if the gambler was in an agitated, highly distressed state).

“Once somebody’s excluded themselves, is there actually a follow-up from these? ... and actually make sure that they have got the support and back-up to actually take it further.” (Pub focus group)

“They’re excluding themselves, they’re at least getting the first step right, but once they’re excluded no one knows what’s happening to them.” (Pub focus group)

When discussing the practicalities of exclusion processes, another major identified problem was the difficulty for venue staff when trying to identify a gambler who has been excluded from other venues, and the fact that this then reduces the effectiveness of exclusion contracts as a whole. The topic of breaching exclusion contracts was also discussed as a negative. These issues are covered in more detail in section 3.2.6 on breach procedures.

3.2.4 Exclusion processes

It was apparent that different exclusion processes are operated by participants from casino and pub venues. The disparity appeared to be created by the differences in the venues’ core business. For casino participants, gambling is the main business; thus staff are recruited and trained regarding host responsibility, gambler behaviour and who to contact to initiate an exclusion process. However, for pub participants, the core business is the provision of food and beverage, with gambling being secondary. Thus, it appeared that a more elaborate and intricate process was implemented by casino participants whilst a more simplistic and opportunistic approach was followed by pub participants.

“The process for that is they can talk to any staff member, usually security is contacted and security will take them through the process and that is usually the security manager and there is a form to be filled out and a photo to be taken and fill out another form called an ‘exclusion details form’ which gives us the ability to connect them with a treatment service.” (Casino focus group)

“We are trained in the gambling legislation and how it should be implemented pretty much so you go to the training and somebody approaches you, you pass it on to the manager or security and they will contact security.” (Casino focus group)

“...constantly building a bigger picture and with our host responsibility log all different departments are feeding into that so that a neat thing is they can look back at the history and look at what the other departments have put in, it is for us but there are a number of

things we use to build that picture... that's that information coming in from security, surveillance, gaming departments, front line staff, um then surveillance monitoring this person and looking for other behavioural signs that could be a concern like when they get a big win whether or not they are happy about it or they get a loss, hitting the machine, angry or that sort of stuff and then maybe have a look at their play.” (Casino focus group)

“We mainly just ask the participant to exclude himself, we don't initiate too much.” (Pub focus group)

“I had a guy the other day with self-exclusion form and photo, he's obviously taken them away and done it, I didn't even have a clue who he was and he reckons he's come to the bar all the time and I'm there 90% of the time. It's difficult if they're only coming in and going straight into your pokie room, they're just a face, whereas if you actually know them because they're coming up and having a drink at the bar and a bit of a chat, then the face becomes a bit more...” (Pub focus group)

“We don't actually have authority to exclude people on behalf of another venue operator so that's a legal issue.” (Pub focus group)

“Gaming for these people is only a peripheral part of business according to the Department of Internal Affairs and yet they've got this huge obligation, if something goes wrong you're in the firing line and to have someone that can go from one hotel, be excluded, that can walk across the road to the other one is solving nothing.” (Pub focus group)

“It seems as though there seems to be a good system with the casino in terms of host responsibility. In terms of the pubs I'm not so sure. That's the difficulty for me.” (Treatment provider focus group)

The different exclusion processes operated by the casino and pub venues have inevitably led to different methods for approaching suspected problem gamblers within a venue prior to initiation of an exclusion contract.

3.2.5 Approach/intervention activities

The casino has instigated formal procedures whereby information is gathered and a hierarchy is followed as to who approaches a gambler. In the pub environment, any of the staff may be required to approach a gambler, or take an opportunity to discuss exclusion with a gambler, for example at the EFTPOS machine. Participants commented that all staff should have received some level of training to deal with approaches by, or with, gamblers. The concerns appear to be related to the level of personal confidence in how to deal with a given situation and in how that situation may unfold. Some participants discussed how gamblers can become aggressive towards them and how they felt about this in line with their level of training or how to deal with this in a busy work environment.

“I know certainly from a surveillance point of view, yeah you figure its worth having a chat to them and generally normally the security shift manager deals with them.” (Casino focus group)

“They will keep an open mind as to what the next step is, you never quite know what is going to come out of the conversation and quite often that is the directing factor in which path we go down sometimes.” (Casino focus group)

“We can talk to them when they come to the EFTPOS machine can’t we because that’s where it’s sort of private, at the EFTPOS machine you can just say ‘well look, do you think you should be taking out another \$200?’” (Pub focus group)

“Personal confidence to know for myself within the gaming shift manager role and approach someone and ask them on what you see...” (Casino focus group)

Participants also discussed how gamblers may react very differently when approached to discuss their gambling behaviour and how they are sometimes unsure of how someone will react to an approach. Participants in both venue focus groups discussed their aim to approach and discuss a gambler’s gambling behaviour prior to it needing to become a discussion about exclusion. This was deemed to be important in helping their customers before it became a crisis point in their lives.

“We have had people [who] are just really angry, I mean to tell someone that they have issues ah it just, you know, well...what it does, you’re right, it does create an issue.” (Casino focus group)

“And you have to actually read a person before you can go and approach them, because some of them can be quite aggressive and get abusive back at you, and some of them you can just sit and talk to, and they will listen and you give them the piece of paper and they put it in their handbag and whether they do or not is up to them. At least you’ve done your bit to try.” (Pub focus group)

“The gaming guys, they have a lot of interactions with customers, its not always about exclusion or self-exclusion, mainly like, I think one of the things, you guys probably correct me but um encouraging gaming staff to interact more with customers, building relationships, looking after them” (Casino focus group)

Treatment provider participants had little comment about approaches to gamblers.

3.2.6 Breach procedures

Casino participants discussed the specific procedures in place at their venue to deal with breaches that, in the worst case, culminate with the police being called to remove the breacher. Pub participants identified that their procedure was generally to approach the breacher and to ask them to leave the venue or to ask for age identification as a means of verifying who the person was (noted to be an ‘easy’ request as people are used to providing identification in a drinking environment) and then ‘blue slipping’ the gambler (i.e. issuing a trespass order). Concerns were raised by the participants regarding criticism they have received from treatment providers in relation to following through with breached trespass orders that give a gambler a criminal record.

“We get briefed before every shift we start, um freshly excluded or come in, we have a picture in our computer database so we look at that sometimes, and store it in the memory banks.” (Casino focus group)

“Every hour we scan the gaming floor for people, like everybody, including the machines, we are looking at everybody’s face. Then we use the database to filter.” (Casino focus group)

“...and they are found on our premises we will call the police.” (Casino focus group)

“From my experience most of the people who breach then trespass and they do go through the court process, they get a diversion and then they write us a letter, an apology and then go to [name of treatment provider]” (Casino focus group)

“...because we haven’t really been particularly highly trained on how you approach someone.” (Pub focus group)

“You can trespass it.” (Pub focus group)

“You can actually get I.D. off people really easily now because people tend to hand it over.” (Pub focus group)

“That is where there is also conflict because some of the other members of the treatment providers around our gambling liaison group that we run quarterly... facets of the group believe we shouldn’t be trespassing people and giving young people criminal records.” (Casino focus group)

Venue participants also discussed concerns around the logistics of identifying excluded gamblers and the most effective way to accomplish this. Quality, colour photographs were considered a good start, with concerns raised in relation to old drivers’ license photographs and bad quality faxed photographs. There are also limitations as to where photographs can be displayed in venues as they cannot be in a publicly visible/accessible location. Thus casino managers cannot have the photographs displayed on their personal computers and similarly in pubs the photographs cannot be visible in staff rooms or behind the bar where non-gaming staff work. Pub focus group participants noted that if a gambler came into the venue to exclude, the staff were more likely to remember them, and that regular gambling patrons were also more likely to be remembered. Issues appear to arise when venue staff need to identify an excluded gambler that has not previously visited that venue (e.g. on a multi-site exclusion contract). Focus group participants also raised some concerns about how effective multi-venue exclusions are due to the number of faces needing to be identified by venue staff and in particular in relation to the identification of breachers in an ethnically diverse population.

“The photograph’s in black and white, they send something that size out to fifty places, how the hell do you do it?” (Pub focus group)

“I think they’d rather have a face-to-face than a letter arrive in the mail with this tiny little photo because then at least you’ve got some chance of recognising them.” (Pub focus group)

“...can’t have it as your screensaver.” (Casino focus group)

“...because people can see and will be breaching other people’s privacy by saying ‘big excluded breaches.’” (Casino focus group)

“You can’t put it up where public can see it or anyone who’s not a pokie person. So you can’t have it in your staff room.” (Pub focus group)

“We put them in the pokies clip board.” (Pub focus group)

“The other thing with them though is that most people that are excluded are known customers, so we know who they are.” (Casino focus group)

“The pubs, there’s different charities on a few so if one wants to work with this one then they should be linked. About the monitoring too, you can ban yourself from the whole city but if nobody enforces it, that person can still go back and not be noticed.” (Treatment provider focus group)

“I think that’s a major issue and multi-exclusions are becoming a thing that is being utilised by a lot of regions, that’s where a person excludes themselves from one venue there’s a process put in place whereby they are excluded from a whole load of venues. While that addresses one problem what you guys have sort of touched on already about passing the problem down the street, the downside of that is practically from your point of view how do you police vast numbers of excluded people because of course, the quantities will grow.” (Pub focus group)

“These multi photos that have been sent out with these Asians on it with these license sized photos, you can’t [identify them], it’s just a joke. But effectively they’ve been given the photograph so they should know, but there was no practicality with it.” (Pub focus group)

“She’s managed to break it [the exclusion] many, many times even though it was for the whole of Christchurch. I think partly it’s because she is an Asian woman and for Europeans/Pakeha we’re very unskilled at discerning Asian faces so that’s part of why she manages to break the ban a few times.” (Treatment provider focus group)

Participants in each of the focus groups agreed that breaches of exclusion contracts definitely occur. Venue participants also commented that they had observed a number of excluded gamblers in alternative gambling venues close to the venue from which they were excluded. There was discussion about the motivations for breaching and the lengths that some patrons will go to in order to try and avoid detection, such as wearing wigs or costumes as disguises. Treatment provider participants discussed anecdotal accounts of gamblers breaching exclusion contracts and not being detected due to disguises. Further anecdotal accounts included gamblers who were disappointed if they were identified breaching an exclusion contract when they had not previously been noticed. Treatment provider participants also discussed that for many gamblers, being caught trying to breach an exclusion contract was a good experience for their treatment and could lead to realisation that an exclusion contract was a real and tangible thing.

“Pubs aren’t effective ‘cause they just go down to the next one down the road.” (Treatment provider focus group)

“If they barred themselves in Christchurch, they could drive down to Dunedin. Although they’re the same company or share owning, they don’t have the system to link to see this person has been barred.” (Treatment provider focus group)

“Not all of them self-barrred are willing, they are forced into it by their wives or parents or whatever, not all of them are willing to do that so they’re bound to breach - those people.” (Treatment provider focus group)

“...and those who are going to breach their exclusion, it’s a small percentage, not everyone.”

(Casino focus group)

“Two weeks ago I had a couple come in, I recognised him I thought, I pulled out the form, double-checked the photo and I took it to him and I said look you know this is you.”

(Pub focus group)

“Rules are made to be broken, they say they can sneak in, sometimes the casinos have different staff or the staff ratio changes I’m not sure how correct that is. At times, they’ve said, it’s quite easy. I remember one guy telling me once ‘I only get caught if I want to get caught.’” (Treatment provider focus group)

“Often they will do things like put a wig on or grow a moustache or that sort of thing.” (Treatment provider focus group)

“She was more distressed that they caught her out after five times in a month.” (Treatment provider focus group)

“I’ve had a women recently who has tested it out and I think that is definitely what happens, they’ll test it out and she’s been asked to leave so she’s found out it works.” (Treatment provider focus group)

“...one guy wrote us a letter apologising for breaching so it has obviously hit him quite hard.” (Casino focus group)

“I think for a lot of people to actually do that self-banning, it is kind of really recognising for themselves, yes, I’ve got a problem and I’m going to try and put some safety around that so, and then some of them breach it obviously.” (Treatment provider focus group)

Participants discussed the level of comprehension required by excluded gamblers regarding re-entry to venues. They felt that sometimes gamblers inadvertently breached exclusion contracts without understanding they were doing so because they had not completed re-entry requirements (e.g. if the exclusion contract had reached its end point but re-entry was not automatic without completion of specific requirements). This also occurred where venues automatically excluded a patron from multiple venues in different cities.

“He said ‘how long’s it for? I didn’t realise. I thought I could come back.’” (Pub focus group)

“...but some people have been quite adamant ‘oh look I actually didn’t realise’ ...and they have been quite honest... ‘and I was in last week and I actually didn’t realise what I had to go through once it expired.’” (Casino focus group)

3.2.7 Re-entry requirements

Casino focus group participants stated that exclusion contracts are generally for a one- or two-year (maximum) period with a requirement for gamblers to meet re-entry requirements before being allowed back into the casino (i.e. re-entry is not automatic). These requirements include sessions at a treatment service. A similar process did not appear to be in process at the pub venues.

“We usually impose a maximum of two years... if it’s a self exclusion we give them the option of one year.” (Casino focus group)

“If you haven’t had a re-entry interview with Mr X and Mrs Y over there, you will not be allowed in the casino, if you haven’t been to see a counsellor... you won’t be allowed in the casino.” (Casino focus group)

Treatment provider participants discussed that re-entry requirements are sometimes not understood by gamblers; in the past this had been a particular issue for migrants when language was a barrier. However, this had recently changed with translated material available in various languages. Some participants also discussed a lack of their own understanding regarding how venues operated with regard to exclusion processes including re-entry requirements.

“I don’t think they’re very good at explaining what will happen at the end of the two years.” (Treatment provider focus group)

“Also we have translated the order [exclusion contract] in Chinese and Korean so it’s more clear now. I give it to the casino, we translate it, then laminate it and leave it in their office and we have Korean or Chinese people.” (Treatment provider focus group)

“I know myself now that I’m meeting casino staff next week, I’m going to be asking for some of those pamphlets because I’d like to build my information up a wee bit.” (Treatment provider focus group)

As previously mentioned in section 3.2.3, treatment provider participants did not like having to give an opinion on the suitability of a client to re-enter a venue at the end of an exclusion contract; however, they appeared to be happy to comment on whether the gambler had actively taken part in counselling sessions or had merely attended the sessions. There was also some discussion by treatment provider participants about whether they should be doing the re-entry counselling or whether the casino should develop and implement their own process.

“We do six sessions of a re-entry programme. The last session is the most important one. We change their gambling behaviour and also it will be a safe control of gambling. They need to have a safety plan. So, how many days a week, how many times and how much money they take and they have to follow that for three months.” (Treatment provider focus group)

“I think the casino should develop some sort of a programme for themselves because they have the ultimate decision at the end, so why don’t they develop a programme of their own or why don’t we ask those people who want to do that [re-enter the casino] to pay for the service.” (Treatment provider focus group)

3.2.8 Treatment provider and venue links

The final major theme to arise from the focus groups related to links and relationships between treatment providers and venues. This included discussion on where the relationship was felt to be poor and how improvements could be made. There appeared to be a genuine desire for improved communication and linkages between the two groups.

Casino focus group participants commented that the casino exclusion contract has a tick box requesting permission to pass an excluder's details to a treatment provider. They also discussed that the national gambling helpline was a method of instantly connecting someone with a treatment provider, and that the casino has standing appointments for face-to-face counselling to which they can schedule gamblers. However, these initiatives only work when a gambler is willing to take part in them. No such arrangements appear to exist within the pub venue context.

"They can tick either option one or option two; option one gives consent to pass on their details... option two gives us, well they sign the form and we can book them into a pre-booked counselling appointment for any day." (Casino focus group)

"One of the other things we have done to help them with that process is to have much more of an open dialogue with treatment providers... we call up [name of treatment service] and say 'how did the counselling go, what was some of the positive aspects, what's your sort of feeling on this person', yeah so that's sort of tried to establish a bit of communication there." (Casino focus group)

From discussions in the three focus groups, it was apparent that there was a lack of faith between treatment provider and venue participants. Casino participants reported that the casino had amended its procedures to improve the relationship, but some treatment provider participants voiced major concerns whilst admitting that many excluder referrals did come directly from the casino. Pub focus group participants and treatment provider participants appeared to have a more negative relationship; however, pub participants voiced a clear request to improve the relationship and to obtain unbiased assistance for their problem gambling patrons and for their staff. It was felt important that the relationship would need to be balanced and not taken as an open invitation to disrupt other gamblers without good reason, which appeared to have been an issue in the past.

"One of the other things we have done to help them with that process is to have much more of an open dialogue with treatment providers." (Casino focus group)

"With the casino I have worked out a system with them." (Treatment provider focus group)

"I guess we could preclude that a little bit by maybe working closer with the casino in terms of what do they think the chances are that this person could get re-admitted. So that we actually make a connection with the casino, not at the end of that programme but at the beginning." (Treatment provider focus group)

"I believe there's a 'them and us' syndrome with the problem gambling side of it and the venue operators and that needs to come together and people need to work together if the whole situation is going to work from the start." (Pub focus group)

"They don't listen to us because we seem self-serving, we don't listen to them because we see them as being very self-serving." (Pub focus group)

"Maybe someone from the [name of treatment provider] could go around and liaise with our operators and speak with them and try and create some sort of working relationship." (Pub focus group)

"We had [name of treatment provider] come in around November/December. They pop out and see what's going on and all that. But I think they're invading that person's right

to play the pokies because they're approaching a person who doesn't have a problem, it could be almost like an insult." (Pub focus group)

"You might invite them to come and talk to one person you perceive to be a problem gambler but they'd see that as an invitation to talk to everyone in the room." (Pub focus group)

3.3 Surveys

Presented in this Section are data from the surveys completed by 123 gamblers currently or recently excluded from one or more gambling venues. This included 108 self-initiated excluders, seven venue-initiated excluders and eight participants whose exclusion had been initiated by a treatment service or where their exclusion was both self- and venue-initiated.

The surveys were designed to elicit information around awareness of exclusion processes, exclusion history, perceived effectiveness of exclusion processes, and help-seeking behaviour. In general, as many participants had multiple concurrent exclusion contracts, they were asked to respond to questions thinking about their current/most recent exclusion from the gambling venue that was *most important* to them.

Presented data include socio-demographics, method of participation, exclusion demographics, exclusion experience, breaching exclusion contracts, help-seeking behaviours, and participant's additional comments.

Due to the small sample size (123 participants) only broad findings (mainly descriptive statistics and cross-tabular results) have been reported; statistical analyses were not possible. Thus, all data should be treated with caution and cannot be generalised to the excluded gambler population as a whole.

3.3.1 *Socio-demographic data*

Table 1 presents socio-demographic data. Of the 123 participants, there were slightly more females than males (53% female, 46% male) and the majority (74%) were between the ages of 30 and 55 years old. Sixty-two percent of participants were New Zealand European, 18% Maori, 11% Asian and less than one percent was Pacific. Forty-four percent of participants were married or in de-facto relationships, 19% were separated/divorced and one-third (33%) were single. Half (51%) of the participants lived in households with a combined annual income of less than \$40,000, another 28% had annual household incomes of between \$40,001 and \$80,000, and four percent had household incomes of over \$150,000. Half of the participants (48%) had no educational qualification or were educated to school certificate level. Eighty-five percent of participants lived in urban areas with just over one-third (35%) residing in Christchurch and 11% residing in Auckland; participants, however, were recruited from throughout New Zealand.

Over a quarter of participants were unemployed, beneficiaries, or out of the paid workforce (e.g. stay-at-home parents, students and retirees). A quarter of those employed were working as cleaners, casual workers, caregivers or factory/timber workers. Around one in ten participants reported a professional occupation (predominantly education or nursing). There were also a notable number of participants who indicated they were self employed or sales people.

3.3.2 *Participation method*

Sixty-seven percent of the participants completed a postal survey form, 31% completed the survey by telephone with a researcher, and two percent completed the survey over the

internet. Telephone and postal participation were the most popular methods suggested for contact of excluded patrons (59% and 40% respectively) (Table 2).

Table 1: Participant demographics

Variable	Number (%)	
Gender	Male	57 (46%)
	Female	65 (53%)
Age (years)	<20	2 (2%)
	20-24	8 (7%)
	25-29	4 (3%)
	30-34	12 (10%)
	35-39	20 (16%)
	40-44	18 (15%)
	45-49	16 (13%)
	50-54	25 (20%)
	55-59	5 (4%)
	60-64	4 (3%)
65 + years	9 (7%)	
Ethnicity	NZ European	76 (62%)
	Maori	22 (18%)
	Pacific Island	1 (<1%)
	Asian	14 (11%)
	Other	7 (6%)
Marital status	Married/de-facto	54 (44%)
	Single	41 (33%)
	Separated/divorced	23 (19%)
	Widowed	3 (2%)
Household income	Up to \$20,000	31 (25%)
	\$20,001 - \$40,000	32 (26%)
	\$40,001 - \$60,000	21 (17%)
	\$60,001 - \$80,000	13 (11%)
	\$80,001 - \$100,000	6 (5%)
	\$100,001 - \$150,000	9 (7%)
	\$150,001 - \$200 000	1 (<1%)
Over \$200,000	4 (3%)	
Qualifications	No qualification	26 (21%)
	School Certificate	33 (27%)
	U.E./Matric/6th Form/Bursary	15 (12%)
	Technical or trade qualification	17 (14%)
	University graduate	18 (15%)
	Other tertiary qualification	17 (14%)
Location	Urban area	104 (85%)
	Rural area	14 (11%)

N=123; not all numbers add up to 123 and not all percentages add up to 100% due to missing data

Table 1: Participant demographics continued

Variable		Number (%)	
Town/city	Christchurch	43	(35%)
	Auckland	14	(11%)
	Hamilton	8	(7%)
	Dunedin	6	(5%)
	Wellington	5	(4%)
	Rotorua	5	(4%)
	Hawkes Bay	4	(4%)
	Putaruru/Tokoroa	4	(4%)
	Northland	4	(4%)
	Whangamata	3	(2%)
	Tauranga/Waihi/Papamoa	3	(2%)
	Nelson	2	(2%)
	Invercargill	2	(2%)
	Taupo	2	(2%)
	Palmerston North	2	(2%)
	New Plymouth	1	(<1%)
	Otago	1	(<1%)
	Gisborne	1	(<1%)
	Rodney district	1	(<1%)
	Timaru	1	(<1%)
Wainui	1	(<1%)	
Wanganui	1	(<1%)	
Whakatane	1	(<1%)	

N=123; not all numbers add up to 123 and not all percentages add up to 100% due to missing data

Table 2: Method of participation and best contact method

Variable		Number (%)	
Method of participation	Postal	82	(67%)
	Telephone	38	(31%)
	Internet	3	(2%)
Best method of contact[#]	Telephone	73	(59%)
	Post	49	(40%)
	Via gambling treatment services	32	(26%)
	Email	22	(18%)
	Via advertisements	21	(17%)
	Via gambling venues	19	(15%)

N=123

More than one option could be selected

3.3.3 *Gambling activity*

Given that participants were people who had been excluded from gaming machine venues/casinos it is not surprising that the most popular gambling activity before exclusion was pub electronic gaming machines (73%). Half (51%) of the participants had gambled on casino electronic gaming machines and just under one-third (29%) on casino table games. Lottery products were also in the top five gambling activities. Typical weekly expenditure on these forms of gambling was variable with the greatest being \$10,000 on casino table games and \$5,000 on electronic gaming machines (Table 3).

Table 3: Top five gambling activities

Gambling activity[#]	Number (%)		Weekly expenditure
Gaming machines or pokies in a pub (not in a casino or club)	90	(73%)	\$5 - \$5,000
Lotto (including Strike, Powerball and Big Wednesday)	73	(59%)	\$3 - \$150
Gaming machines or pokies at a casino	63	(51%)	\$20 - \$5,000
Instant Kiwi or other scratch ticket	54	(44%)	\$1 - \$140
Table games or any other games (excluding pokies) at a casino	36	(29%)	\$20 - \$10,000

N=123

More than one activity could be selected

Data pertaining to problem gambling severity (measured using the Problem Gambling Severity Index - PGSI²⁴) are presented in Table 4. Participants were asked to respond to the questions in the 12 months prior to their current/most recent period of exclusion. Three-quarters (76%) of the participants were classified as problem gamblers and a further 14% were at moderate risk of developing gambling problems. These findings were expected given that the participants had subsequently excluded themselves from at least one gambling venue. Three percent of participants were classified as low risk gamblers and a further three percent as non-problem gamblers in the 12 months prior to exclusion.

Table 4: Gambling severity (PGSI categorisation)

Classification	Number (%)	
Non-problem gambler	4	(3%)
Low risk gambler	4	(3%)
Moderate risk gambler	17	(14%)
Problem gambler	93	(76%)

N=123; numbers do not add up to 123 and percentages do not add up to 100% due to missing data

3.3.4 Exclusion demographics

A majority of participants (88%) had self-excluded from a gambling venue, six percent had their exclusion initiated by a venue²⁵ and seven percent stated that their exclusion was initiated in the 'other' category²⁶.

All six of New Zealand's casinos were represented by participants as being a venue from where they had been excluded, though as to be expected due to the recruitment methodology, a larger proportion of participants had excluded from Christchurch casino than the other venues. Participants were also currently/recently excluded from pubs and clubs; some were single venue exclusions with the majority being multi-venue exclusions (Table 5).

²⁴ The nine-item problem gambling screen from the Canadian Problem Gambling Index (Ferris & Wynne, 2001).

²⁵ Seven participants had venue-initiated exclusion contracts: six had their exclusion initiated by a casino, three by a pub and one by a club (some participants had multiple exclusion contracts).

²⁶ This included examples where a treatment service had initiated the exclusion or where a gambler had both self- and venue-initiated exclusions.

Table 5: Exclusion venue type and number/location

Venue [#]	Number (%)	
Casino	Location	
	Christchurch	42 (34%)
	Auckland Sky City	12 (10%)
	Dunedin	11 (9%)
	Hamilton Sky City	8 (7%)
	Queenstown Sky City and Lasseters Wharf	4 (3%)
Pubs	Number of venues	
	1	13 (11%)
	2	10 (8%)
	3	8 (7%)
	4	4 (3%)
	5	7 (6%)
	6 or more	37 (30%)
Clubs	Number of venues	
	1	6 (5%)
	2	3 (2%)
	3	3 (2%)
	4	1 (<1%)
	5	2 (2%)
	6 or more	15 (12%)

N=123

More than one venue type could be selected

Forty percent of participants had only had one exclusion contract; however, the other participants had excluded from venues on multiple occasions ranging from twice to up to 50 times (Table 6). For participants with current multiple exclusion contracts, 71% had to exclude from each venue individually whilst one-quarter (24%) were able to exclude from all venues in one process (i.e. one request). All participants were asked to state which was the 'most important' type of venue from which they were excluded. Some ethnic differences were noted with the majority of European participants reporting casino or pub (63/76), whilst a majority of Maori participants reported pub venues (16/22) and almost all Asian participants reported casino venues (13/14). A slight gender difference was also noted with 29/57 males and 17/65 females reporting that the casino was the most important venue, and 22/57 males and 36/65 females reporting pubs were the most important venue.

Sixty percent of participants had only excluded from one type of gambling venue (e.g. casino, pub or club), with the remaining 40% having excluded from more than one type of venue. Of casino excluders 62% (40/65) had only excluded from that type of venue whereas for pub excluders, 39% (31/79) had only excluded from that type of venue. All 30 club excluders were excluded from more than one venue type.

The most common length of time for an exclusion contract was 24 months (72%) with the range being from three months to a lifetime ban (Table 6). When asked what would be the best period of time for an exclusion contract, 29% of participants stated lifetime, 27% stated 24 months and 11% stated 12 months. Both six and 60 months were endorsed by seven percent of participants. All other periods of time were endorsed by two percent or less of the participants (Table 6).

Table 6: Number and length of exclusion contracts

Variable	Number (%)	
Number of exclusion contracts		
1	49	(40%)
2	12	(10%)
3	16	(13%)
4	7	(6%)
5 - 10	18	(15%)
11 - 20	9	(7%)
21 - 30	5	(4%)
31 - 50	3	(2%)
Length of current/most recent exclusion contract (months)		
3	1	(<1%)
6	5	(4%)
8	1	(<1%)
12	14	(11%)
18	1	(<1%)
20	1	(<1%)
24	89	(72%)
27	1	(<1%)
60	1	(<1%)
Lifetime	6	(5%)
Perceived optimal length of exclusion contract (months)		
0	1	(<1%)
3	1	(<1%)
6	8	(7%)
12	13	(11%)
24	33	(27%)
36	2	(2%)
48	1	(<1%)
60	9	(7%)
120	2	(2%)
360	1	(<1%)
Lifetime	35	(29%)

N=123; numbers do not add up to 123 and percentages do not add up to 100% due to missing data

Just under half of the participants (48%) found out about exclusion contracts via a gambling treatment provider, with a quarter (26%) learning about exclusions through friends or family. Brochures/notices at gambling venues and/or being informed about exclusion by venue staff were reported as the source of knowledge by 29% of participants (Table 7). Participants were asked whether pop-up messages on electronic gaming machines had encouraged them to consider exclusion; seven percent responded affirmatively.

Table 7: Method of learning about exclusion contracts

Method[#]	Number (%)	
Informed by gambling treatment service	59	(48%)
Informed by a friend or family member	32	(26%)
Other (e.g. past experience, advertisements)	22	(18%)
Informed by gambling venue staff	19	(15%)
Brochure or notice at the gambling venue	17	(14%)

N=123

More than one source of information could be selected

For a majority of participants, the reason for exclusion was that they were spending too much money on gambling (85%), with just under half (46%) reporting spending too much time on gambling. Other reasons were that a gambling treatment service or friend/family had suggested exclusion (24% and 28%) respectively. Venue staff suggesting or requesting exclusion accounted for only seven percent of the responses in total. A large variety of other reasons was also given incorporating for example, depression, mental health problems, being out of control, gambling taking over their life, and craving the lights and sounds of the venue (Table 8).

Table 8: Reason for exclusion

Reason for exclusion[#]	Number (%)	
Spending too much money	104	(85%)
Spending too much time	57	(46%)
Friend or family suggested exclusion	34	(28%)
Gambling treatment service suggested exclusion	29	(24%)
Venue staff told gambler to exclude	5	(4%)
Venue staff suggested it	4	(3%)
Other	35	(29%)

N=123

More than one reason could be selected

3.3.5 Exclusion experience

Venue approach

Only 10% (12/123) of participants reported being approached in a venue by staff to discuss their gambling, or time or money spent gambling, prior to signing their exclusion contract. Just over half (58%) of the venue staff approaches had been made in a casino setting. One participant was approached by a staff member but only informed that they would be monitored and another participant was not sure whether they had been approached.

Of the 13 participants who had been approached by venue staff prior to signing an exclusion contract, two each reported this to be a positive or very positive experience, three reported a negative or very negative experience and six had neutral feelings (Table 9). Thus, overall, being approached was generally not seen in a negative light. However, as the sample size is extremely small, this finding must be treated with extreme caution.

Only three participants commented on the approach made by venue staff, and indicated that the staff appeared to recognise that the gambler was experiencing problems; however one participant reported that venue staff had over-estimated the extent of the problem. Suggestions for improving the approach of gamblers by venue staff included providing a private area to talk, and discussing venue concerns clearly, seriously and sensitively whilst conveying a degree of empathy. One participant reported that even though there was annoyance at the time of the approach, concern expressed by the venue staff member was appreciated and subsequently contributed to the participant's decision to seek help to reduce gambling.

Table 9: Reaction to being approached by venue staff

Reaction to approach	Number (%)	
Very positive	2	(15%)
Positive	2	(15%)
Neutral	6	(46%)
Negative	1	(8%)
Very negative	2	(15%)

N=13

Percentages do not add up to 100% due to rounding

Ease of process and helpfulness of staff

Almost two-thirds (64%) of respondents reported the exclusion process to be easy or very easy to go through; however, one-fifth (20%) reported the process to be difficult or very difficult (Table 10). There did not appear to be any venue differences (casino versus pubs versus clubs) in the ease of undergoing an exclusion process.

Table 10: Ease of undergoing exclusion process

Ease of exclusion process	Number (%)	
Very easy	52	(43%)
Easy	25	(21%)
Not easy or hard	21	(17%)
Difficult	17	(14%)
Very difficult	7	(6%)

N=122

Percentages do not add up to 100% due to rounding

A majority of participants (78%) who initiated their exclusion contract (i.e. self-initiated exclusion) reported the venue staff to be helpful or very helpful in that process, and only eight percent of participants reported staff to be unhelpful or very unhelpful (Table 11). There did not appear to be any venue differences (casino versus pubs versus clubs) in the helpfulness of staff with self-excluders.

Table 11: Helpfulness of venue staff for self-exclusions

Helpfulness	Number (%)	
Very helpful	55	(51%)
Helpful	29	(27%)
Not helpful or unhelpful	17	(16%)
Unhelpful	3	(3%)
Very unhelpful	5	(5%)

N=109

Percentages do not add up to 100% due to rounding

End of exclusion contract

Only 42% of participants (51/123) reporting knowing what happens (the process) at the end of their exclusion contract, with one-fifth (26/123) reporting being told by gambling venue staff, 13% (16/123) having been given information about the process by venue staff and 12% (15/123) having been informed by a counsellor. A further 10% (12/123) had found out about the process by other means.

Of the 68 participants who reported not knowing what happens at the end of their exclusion contract, 45 (66%) would have liked to have been given that information. Of the 39 participants who detailed the information they would have liked, the majority wanted to know what the options were for automatic re-exclusion at the end of an exclusion contract, or

a letter from the venue at the end of the contract informing the excluder that the contract was over and if there were any re-entry requirements. The general feeling appeared to be that these participants did not know what happens at the end of their exclusion contract. Other requests for information included: a pamphlet detailing the exclusion contract and processes for venue staff, and a copy of the exclusion contract (in one case, a counsellor held the contract for a participant).

Twenty-three participants stated that they did not want to know what happens at the end of their exclusion contract; the reason given by the majority of these was that they did not intend to go back to gambling so it was irrelevant.

About one-fifth of participants (22%) stated that they thought they would gamble at the venue from which they were currently excluded, when their exclusion contract ended. Reasons for going back to gamble included being addicted to gambling, that the gambling is now under control, and that it was entertainment. Just under one half (46%) reported they would not gamble at the venue with reasons being that it would upset the family if they did, that they did not want to gamble any more, that it was too much of a temptation to gamble, or that they would re-exclude. The remaining participants either did not know if they would gamble again at the venue or did not respond to the question.

Of the 43 participants who reported re-joining a venue at the end of an exclusion contract, 71% found the process to be easy or very easy; however 28% reported the process to have been difficult, and a further two percent reported it was very difficult (Table 12).

Table 12: Ease of re-joining a venue at end of exclusion contract

Ease	Number (%)
Very easy	21 (49%)
Easy	9 (21%)
Difficult	12 (28%)
Very difficult	1 (2%)

N=43

Percentages do not add up to 100% due to rounding

Suggested improvements to exclusion processes

Thirty-eight percent of participants reported that the exclusion process they underwent could have been improved; 47% reported that no improvement was necessary.

Participants generally described desiring a comprehensive and standardised exclusion process to which all venues would commit. Comments focused on how the self-exclusion process is accessed in the first place, the procedure itself (including suggestions for improvement in the interpersonal/relational engagement between staff and gamblers) as well as general comments about the need to increase awareness of gambling problems, and exclusion as one of the tools used to overcome them.

Many participants expressed a desire to be able to access the self-exclusion process remotely (e.g. online or by post), in order to avoid both the temptation to gamble and potential embarrassment in approaching staff, particularly at venues where participants felt that they were 'regulars' and known to staff. One respondent also discussed a different view, desiring someone trustworthy to accompany them to visit and exclude from each venue individually, giving a sense of achievement and enhancing their commitment to exclude.

“Always having someone come round the venues with me. This is what a staff member did with me once, visiting each venue individually and excluding, that personal contact and ritual embeds it in my mind.” (Participant H13)

Several participants commented that venues could provide a private place away from the gambling area to go through the exclusion process and some expressed concern around the confidentiality of the process.

“If they could provide some sort of assurance of confidentiality. You have to provide a lot of information and I’m still not sure why they need my birth date.” (Participant H35)

Participants also commented that once a gambler has decided to exclude, venue staff should be prepared and know what to do and where to find the forms as well as making sure they know all the facts, for example the venue policy around re-entry after the period of exclusion has ended.

“I can see how embarrassment would deter some people from excluding. One staff member was not trained in the process, had to get a manager which just prolonged it. You just want to get out.” (Participant H10)

A few participants felt that venues should have all the resources needed to complete the exclusion on-site, such as a camera to take a photograph and a photocopier to be able to provide the gambler with a copy of their exclusion contract. Other participants commented that they would like to be able to exclude from multiple venues by filling in one form at a venue of their choice, thus only having to ‘go through’ the process once.

Respondents also made many comments about the demeanour of venue staff members during the exclusion contract process and how gamblers are treated by staff, expressing a preference for engaging with friendly, helpful, supportive and encouraging staff who show empathy. There was criticism of staff who were perceived to be too heavy-handed in their approach.

“Treating me with respect, having fines for voluntary exclusion is not fair - all I need is someone to tap me on the shoulder and remind me I’m not meant to be there. I’ve not done anything illegal and don’t deserve to be treated like a criminal. They threatened me with being trespassed and not even allowed back for a meal.” (Participant H36)

There was also criticism of staff being seen to be letting people off too lightly, being unable or unwilling to police excluded patrons, as well as the suggestion of venues being driven by profit margins and not harm minimisation. Many participants commented on the ease with which they were able to break their exclusion contracts and that as well as monitoring current excluders, staff need to be more proactive in approaching gamblers they feel may be at risk of developing problems with their gambling.

More generally, awareness and advertising was seen to be lacking around the effects of gambling problems and the exclusion process as an option for people to take up.

“More advertisement of the process, if I had known about it sooner I might have excluded sooner, I only found out through counselling.” (Participant PR1)

What was done well?

Half of the participants (51%) reported that some aspects of the exclusion process were done well, one-fifth (20%) reported nothing was done well and one-quarter (26%) were not sure.

Open-ended responses to this question revealed that participants appreciated contact with venue staff who facilitated the exclusion process quickly, clearly explained the process and terms of the contract, offered encouragement (and congratulations!) in recognition of the courage taken to exclude, showed positivity and support. Many participants mentioned feeling supported and encouraged, particularly after receiving congratulatory letters from the venues from which they had excluded.

Conversely, participants did not appreciate being kept waiting as a result of venue staff who were unprepared for, or unfamiliar with, the exclusion process. Some participants reported unhelpful comments made by venue staff such as asking the participant to “just stay away” from the machines or encouraging the participant to return to gamble after the exclusion contract expires, or placing too much emphasis on the punitive consequences of breaking contracts, which was perceived to be too heavy-handed. One participant reported being disappointed with a lack of response from 30 of 33 venues after writing to them to exclude. A couple of participants responded in the negative to this question to convey that for them the process was always going to be a “pretty average” experience or an “uncomfortable thing to do”, independent of venue efforts.

What would make the exclusion process easier?

Participants most often mentioned that venues could advertise both the exclusion process and other problem gambling help options more effectively, have a procedure to monitor gamblers’ time and money spent (e.g. “Have membership which is renewed annually and includes questions and data regarding individual’s gambling”), as well as make sure that their staff are trained to expect and carry out the process quickly and sensitively. A few participants suggested that staff should also be proactive in suggesting exclusion or making referrals for problem gambling counselling. Some participants also questioned the ability of venues to successfully detect excluded patrons and prevent them re-entering and suggested that processes needed to be developed, be visible, and standardised around this. Many participants simply stated that the “highly addictive” pokie (electronic gaming) machines should be removed from all venues.

Effect of exclusion contract on gambling behaviour

When asked how their gambling had changed since signing their exclusion contract, 44% of participants reported that they were gambling less in terms of time and 42% were gambling less in terms of money. Thirty-seven percent of participants had stopped gambling altogether. About one-third (34%) of participants were attending (or had recently attended) a gambling treatment service and only four percent had thought about going to a treatment service without actually doing so (Table 13). These are all positive effects of exclusion contracts.

However, for some participants the exclusion contracts had not had such positive effects and they: gambled at other venues (32%), gambled more on alternative forms of gambling (11%), still gambled at the venue where they were excluded (9%) (i.e. they breached their exclusion contract - breaching is discussed in the next section), or their gambling had stayed the same in terms of money (8%) and time (5%) (Table 13).

Additional analysis did show that for some participants there were confounding effects such as reduction in gambling spend (time or money) but increase in gambling at other venues or alternative forms, or they were gambling less but were still gambling in the venue they have excluded from.

Table 13: Effect of exclusion contract on gambling behaviour

Variable [#]	Number (%)	
<i>Positive effects</i>		
Gambling less in terms of time	54	(44%)
Gambling less in terms of money	52	(42%)
Stopped gambling	45	(37%)
Now attending (or recently attended) a gambling counselling/ treatment service	42	(34%)
Have thought about going to a gambling counselling/treatment service (but haven't done so yet)	5	(4%)
<i>Negative/no effects</i>		
Gamble at other venues instead of the one I am excluded from	39	(32%)
Gamble more on alternative forms of gambling	13	(11%)
Still gamble at the venue I am excluded from	11	(9%)
Gambling has stayed the same in terms of money	10	(8%)
Gambling has stayed the same in terms of time	6	(5%)

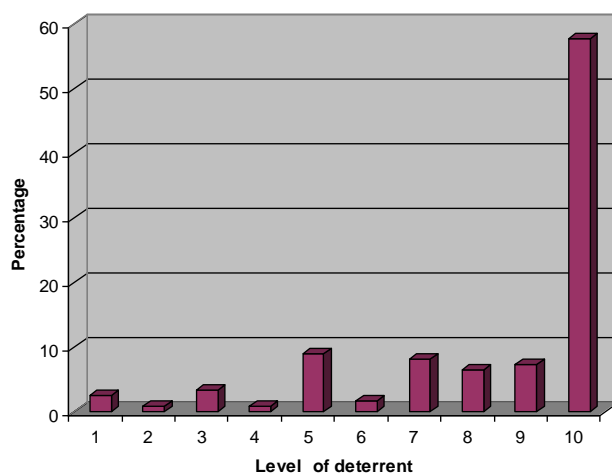
N=123

More than one effect could be selected

3.3.6 Breaching exclusion contracts

On a scale of 0 to 10, where 0 was 'not at all' and 10 was 'completely', participants were asked to rate how much their exclusion contract had deterred them from going to the venue to gamble. As shown in Figure 2, just over half (58%) of participants were completely deterred from gambling at the venue. However, for the other half of participants they were deterred to a variable lesser extent. There did not appear to be any venue differences (casino versus pubs versus clubs) in the deterrent effect of exclusion contracts.

Whilst 70% of respondents (83/118) reported never having breached an exclusion contract by returning to the venue to gamble whilst they were still barred from doing so, the other 30% of respondents (35/118) indicated that they had breached an exclusion contract. There appeared to be a difference between casino and pub breachers with 18% of casino respondents reporting breaching an exclusion contract versus 29% of pub respondents.

Figure 2: Level of deterrent of exclusion contract

The top two reasons for not breaching an exclusion contract (each reported by 52% of participants) were self-determination (not to gamble/breach) and fear of legal action (such as a night in remand, prosecution or a criminal record). Twenty-nine percent of participants reported a fear of being identified if they breached an exclusion contract. Twenty-four percent of participants reported an ‘other’ reason; in general this was the embarrassment they would feel if they were caught breaching. Eleven percent of participants reported no factors prevented them from breaching an exclusion contract (Table 14).

Table 14: Reasons for not breaching an exclusion contract

Reasons for not breaching [#]	Number (%)	
Self-determination	64	(52%)
Fear of legal action	64	(52%)
Fear of being identified	36	(29%)
Other	30	(24%)
None	13	(11%)

N=123

More than one response could be selected

Percentages do not add up to 100% due to rounding

For the following results which relate to respondents who reported breaching an exclusion contract, the sample size is very small and thus all findings should be treated with caution and should not be taken to be necessarily representative of all excluded gamblers who breach exclusion contracts.

Of the 32 respondents who reported the number of times they had breached an exclusion contract, seven reported breaching only once. All other respondents had breached their exclusion contract on multiple occasions with 14 reporting breaching on six or more occasions (Table 15). Breaching an exclusion contract occurred more often amongst electronic gaming machine players (26/34) in comparison with casino table game players (5/34). Six out of 33 respondents had attempted to disguise themselves so that venue staff would not recognise them when they breached an exclusion contract.

Table 15: Number of times participant breached exclusion contract

Number of times	Number (%)	
1	7	(22%)
2	5	(16%)
3	5	(16%)
4	1	(3%)
5	0	-
6 or more	14	(44%)

N=32

Percentages do not add up to 100% due to rounding

Almost one-quarter (24%) of respondents who had breached an exclusion contract reported always being recognised by venue staff during the breach and a further 24% reported being recognised on most occasions of breaching. However, 15% reported rarely being recognised and a further 24% reported never being recognised (Table 16). There appeared to be a difference between casino and pub breachers with 5/8 casino respondents reporting being recognised most times or always versus 5/16 pub respondent breachers.

Just over half (55%) of participants who were recognised by venue staff during an exclusion contract breach, reported that they were always or on most occasions approached by a staff member. A further 42% of participants reported never or rarely being approached when they

were recognised during a breach (Table 16). Again there appeared to be a difference between casino and pub breachers with 5/7 casino respondents reporting being approached most times or always versus 7/17 pub respondent breachers.

A majority of participants (88%) who were approached by venue staff whilst breaching an exclusion contract were asked to leave the venue. Twenty-six percent of participants reported that venue staff had talked to them about the exclusion contract, and 17% reported that venue staff talked to them about the legal consequences/penalties for breaching an exclusion contract. Trespassing or police being called were each reported by one respondent, and no respondents reported venue staff talking to them about gambling treatment services when they were approached for breaching an exclusion contract. Responses in the 'other' category included being shouted at by a staff member and being warned by a staff member (Table 16).

Table 16: Recognition/approach/outcome by venue staff during a breach

Variable		Number (%)
Recognised	Always	8 (24%)
	Most times	8 (24%)
	Rarely	5 (15%)
	Never	8 (24%)
	Don't know	4 (12%)
Approached	Always	13 (42%)
	Most times	4 (13%)
	Rarely	4 (13%)
	Never	9 (29%)
	Don't know	1 (3%)
Outcome of approach[#]	Asked to leave	21 (88%)
	Talked about exclusion contract	6 (26%)
	Talked about legal consequences	4 (17%)
	Escorted out of venue	3 (13%)
	Trespassed	1 (4%)
	Already trespassed, police called	1 (4%)
	Talked about gambling treatment services	0 -
	Other	3 (13%)

Percentages do not add up to 100% due to rounding

More than one response could be selected

Twenty-three of 33 of respondents breached an exclusion contract to gamble again and 5/33 did so to attend the venue for some other reason such as attending a social function, dinner or drinks. Interestingly, 8/33 breached their exclusion contract to 'test the system'. Responses in the 'other' category included: not caring about the exclusion contract, forgetting they were under an exclusion contract, watching a friend gamble (rather than gambling themselves), because it was easy to breach, being bored and wanting to gamble, feeling in control of their gambling, and to try and make money to pay bills (Table 17).

Table 17: Reasons for breaching an exclusion contract

Variable		Number (%)
Reason for breaching[#]	To gamble again	23 (70%)
	To test the system	8 (24%)
	To attend a function/dinner/drink at venue	5 (15%)
	Other	13 (39%)

N=33

More than one response could be selected

Fifty-seven percent (70/123) of participants had gambled, during the period of their exclusion contract, at other venues from which they were not excluded. Table 18 details reasons why participants opted to gamble at other venues, the frequency of gambling at the alternative venues and the maximum distance travelled to reach those venues.

The most popular reason for gambling at an alternative venue was because the participant was excluded from their usual venue (31%); 21% gambled at an alternative venue because they did not want to be excluded from that particular venue and 18% gambled at an alternative venue to gamble on something different. ‘Other’ reasons given for gambling at alternative venues included: greed, being addicted to gambling, for entertainment, out of boredom, participant had safety nets in relation to their gambling, being out of town/on holiday, and to “test myself”.

Forty-four percent of respondents who gambled at alternative venues during the period of their exclusion contract, did so weekly or more often. Twenty-six percent gambled either two to three times per month (15%) or monthly (11%), with the remainder (29%) gambling less than monthly at alternative venues.

About one-third (36%) of participants reported that they would not gamble at an alternative venue. About another third (30%) reported travelling up to 10 km to do so, the remaining third reported travelling greater than 10 km with 11% reporting travelling over 100 km to gamble at alternative venues.

Table 18: Reasons, frequency and distance travelled to gamble at another venue

Variable		Number	(%)
Reason for gambling at other venues^{#†}	Because excluded from usual venue	22	(31%)
	Didn't want to exclude from other venue	15	(21%)
	To gamble on something different	13	(18%)
	Other	40	(56%)
Frequency of other venue gambling[†]	Weekly or more often	32	(44%)
	2 - 3 times per month	11	(15%)
	Monthly	8	(11%)
	Less than once a month	21	(29%)
Maximum distance travelled to other venue^{††}	Wouldn't gamble	44	(36%)
	0 - 5 km	25	(20%)
	6 - 10 km	12	(10%)
	11 - 20 km	8	(7%)
	21 - 40 km	5	(4%)
	41 - 50 km	1	(<1%)
	51 - 100 km	4	(3%)
	More than 100 km	13	(11%)

[†] N=70, ^{††} N=123

Percentages do not add up to 100% due to missing data

More than one response could be selected

3.3.7 Help-seeking behaviours

Sixty-nine percent (81/123) of participants reported contacting support/help services *before* excluding from a gambling venue. Table 19 shows the services contacted. Two-thirds of participants had contacted the national Gambling Helpline and/or a gambling counselling

service, and 18% had sought assistance from other professional support services such as a budget advisor, Gamblers Anonymous, a private counsellor, or a social worker.

Of 77 respondents who reported seeking help prior to exclusion, 81% reported that attending the support/help service assisted in their decision to exclude from the venue. There appeared to be no difference between participants excluding from casinos versus those excluding from pub venues.

Table 19: Support/help service contacted prior to exclusion

Variable	Number (%)
Service[#]	
Gambling counselling service	55 (67%)
Gambling Helpline	54 (66%)
Other professional service	14 (18%)

N=82

More than one response could be selected

Fifty-nine percent (72/123) of participants reported that gambling support/help or assistance options or information was given to them when they signed their exclusion contract. There appeared to be a slight difference between casinos and pubs with 71% of casino respondents reporting receiving support/help information versus 58% of pub respondents.

A majority of respondents (82%) who received information about support/help services reported the information to be helpful or very helpful; only one respondent reported the information as unhelpful and no respondents thought it was very unhelpful (Table 20).

Table 20: Helpfulness of information received about support/help services

Helpfulness of received information	Number (%)
Very helpful	33 (47%)
Helpful	25 (35%)
Neither helpful nor unhelpful	12 (17%)
Unhelpful	1 (1%)
Very unhelpful	0 -

N=71

Of the 44 respondents who reported not being given any information about support/help services when they signed their exclusion contract, just under half (47%) thought it would have been helpful or very helpful to have received the information. Forty-eight percent thought the information would have been neither helpful nor unhelpful and four percent felt it would have been unhelpful/very unhelpful (Table 21).

Table 21: Perceived helpfulness of having information about support/help services

Perceived helpfulness of information	Number (%)
Very helpful	11 (26%)
Helpful	9 (21%)
Neither helpful nor unhelpful	20 (48%)
Unhelpful	1 (2%)
Very unhelpful	1 (2%)

N=44

Percentages do not add up to 100% due to rounding

Sixty-eight percent (84/123) of participants had contacted support/help services *during* their exclusion contract, with 38% contacting the Gambling Helpline, 45% a gambling counselling

service and 12% contacting another professional body (e.g. Gamblers Anonymous, debt-line, social worker, Lifeline).

One-third (35%) of participants (18/52) who had re-entered a venue to gamble at the end of an exclusion contract had to attend gambling counselling sessions before re-entry; 62% (32/52) of participants did not have to attend counselling sessions to re-enter a venue. There appeared to be a difference between casinos and pubs with 14/20 casino respondents reporting attending counselling sessions prior to re-entry versus 2/25 pub respondents.

Twenty-two participants commented on the helpfulness of the counselling sessions prior to re-entry to a venue. The majority (20/22) reported the counselling to be helpful (8/22) or very helpful (12/22). One respondent each reported the counselling to be either not helpful or useless.

Of respondents currently excluded from a venue, 24% (24/101) thought that they would go to a counselling service when their exclusion contract was about to end so that they could re-enter the venue to gamble, 51% (51/101) responded in the negative and 26% (26/101) did not know whether they would attend a counselling service. There appeared to be a difference between casinos and pubs with 13/32 casino respondents reporting they would attend counselling sessions prior to re-entry versus 13/55 pub respondents.

Most participants reported contacting support/help services to obtain support and/or information around, or another perspective, on their gambling, for example common responses were: "To discuss the problem and get advice" and "Someone to talk to". Many participants reported being in a crisis stage at the time, with this crisis including some combination of feeling their gambling was out of control, being about to lose their partner/loved ones, being in serious financial trouble, and feeling depressed and suicidal. Some participants simply reported that they wanted to stop gambling. Other participants stated they were looking for help in resisting the urge to gamble (keeping them on track with either stopping or reducing their gambling), and a similar number stated that they had contacted help services in order to be allowed to re-enter a venue to gamble.

3.3.8 Participants' additional comments

Several participants provided additional information at the end of the questionnaire, in response to the question "Is there anything else you would like to tell us?" The varied responses have been categorised and summarised below:

Venues

- Staff need to be more alert to, and exclude/challenge patrons, with gambling problems. There appeared to be a perception that staff know which patrons are having problems and sometimes chose to do nothing to help.
- Staff need to be specially trained to handle exclusions, and take every person who requests an exclusion contract seriously.
- Venues' ability and commitment to monitoring and enforcing exclusions was questioned where breaching is possible for excluded persons (and has been found to be easy for some), for example "It felt like a joke the first 50 times I went in without getting caught".

Exclusion contracts

- Taking out exclusion contracts is associated with a sense of relief for some participants, and are seen by a few as a first step to ‘hold’ someone until they are able to receive counselling to help them take more control.
 - Exclusion forms should be readily available, i.e. not hidden behind the bar.
 - The exclusion process should be conducted privately, sensitively and quickly.
 - Time periods for exclusion contracts should be flexible to a gambler’s needs; for life, if required.
-

4. DISCUSSION

The primary objectives of this project were to:

- Ascertain the most suitable methodology and processes for researching venue excluders in order to robustly evaluate the effectiveness of current venue exclusion processes
- Gain some initial insight into the effectiveness of gambling (particularly electronic gaming machine and casino) venue exclusion processes in New Zealand

To achieve these objectives a comprehensive review of relevant literature relating to gambling and venue exclusion processes was completed, focus groups were held with key stakeholders, and surveys were conducted with gamblers currently or recently excluded from one or more gambling venues at the time of the study. Findings from each area of investigation are presented in Chapter Three of this report. The present Chapter draws together key findings and discusses their importance and relevance in terms of the research objectives.

Methodological considerations

As detailed above, one of the primary objectives of this formative project was to ascertain the most suitable methodology and processes for researching venue excluders. To this end, various recruitment methods were utilised comprising: a) inviting participation from excluded patrons on a casino and national gaming machine trust's databases, b) inviting participation from excluded patrons contacting a national gambling telephone helpline, and c) advertising for excluded patrons to participate in the research.

Additionally, a variety of survey completion methods were offered to potential participants, namely: a) completion of the survey on paper and posting to the researchers in a reply-paid envelope, b) completion of the survey by telephone interview with a researcher, and c) completion of the survey over the internet.

The advertisement method for recruiting participants was particularly unsuccessful with only one participant contacting the researchers to complete the survey in response to an advertisement; however, as three internet surveys were also completed it is unknown whether these were in response to advertisements or were participants recruited via other methods who opted for that method of survey completion. Either way, the internet and advertising did not appear to be viable methods for recruiting participants for research about exclusion processes.

Recruitment via the telephone helpline revealed only a small number of gambler callers who were currently or recently excluded from venues during the six-month data collection period (only 73 potential participants) of which 68% initially agreed to participate in the survey. However, one quarter (26%) of those subsequently did not take part because they could not be contacted by the researchers, had changed their minds about participating, or had already participated via one of the other recruitment methods. Helpline clients completed the survey via telephone interview. This method of recruiting participants was, therefore, relatively successful but with the low numbers of excluders calling the helpline, is likely to be an unviable major recruitment source for larger research projects investigating the topic of exclusion processes.

Of the total 123 participants, 82 were known to have been recruited via gambling venue databases²⁷. Whilst this is a low response rate from the 587 database gamblers invited to participate in the research, many of the contact details were out-of-date²⁸ and the invitation to participate did not always reach its intended destination (evidenced by NZ Post returned mail); it is unknown how many more letters did not reach their destination but were thrown away rather than being 'returned to sender'. All 82 participants chose to complete the paper version of the survey.

As part of the survey, all participants were asked to select (from a choice of options) what they thought was the best method for researchers to contact people excluded from gambling venues. Multiple selections were allowed. The option with the greatest endorsement (59%) was by telephone. The next most endorsed option was by post (40%). There may be some bias in these responses given that these were excluders who had self-selected into the project, having been contacted by telephone or post, and those who did not participate may have had different views.

However, these findings, together with the response rate of participants recruited via the helpline compared with the response rate from postal contact with venue database excluders, suggest that telephone contact of excluders on venue databases may be a good approach for future studies. There are some ethical considerations around this method of approach in that the initial telephone contact would have to be made by the gambling venue holding the database to protect gambler confidentiality, and there may be some issues around venue time involved to recruit participants and coercion effect²⁹; these would need careful consideration before any such approach was taken. Another confounder would be that in some cases, venues do not currently record contact telephone numbers of gamblers excluding from their venues. The postal method used to recruit venue database excluders in the current project was successful, and consideration could be given to further strategies that would encourage greater participation, in future studies, although traditionally response rate to postal surveys is low compared to other recruitment methods. Additionally, as this current research initially aimed for recruitment of 100 excluded gamblers, the final participation total of 123 exceeded that originally proposed and indicates the success of using a varied recruitment methodology.

In future studies, consideration should also be given to the recruitment of patrons from venues at the time of signing an exclusion contract. This would ensure the participation of current excluders (and would remove the confounder of old, out-of-date, database information and recall bias) and would also allow the potential for longitudinal studies to be conducted to follow participants over time and assess the effectiveness of an exclusion contract on their gambling behaviours.

The recruitment methodologies used in the present study seemed adequate for recruiting European (62%), Maori (18%) and Asian participants (11%), relative to national population percentages of these groups (65%, 14%, 9% respectively at 2006 Census), though it is unknown whether the recruited populations proportionately represented the excluded population profile. Recruitment of Pacific participants was unsuccessful in this formative project at less than one percent (versus 7% national population). Assuming that Pacific gamblers are excluded from venues at least at a proportional rate to other ethnicities, careful consideration will need to be made as to how to recruit participants from this population group in future studies investigating this topic.

²⁷ As previously detailed, the origin of the three internet survey participants is unknown.

²⁸ Some of the exclusion database records were up to five years old.

²⁹ Participants need to voluntarily opt in to research with no possible coercion effect from researchers or other interested parties.

The recruitment methodology was successful in gaining participation from gamblers who had excluded from all six of New Zealand's casinos and from pubs and clubs spanning the length and breadth of the country.

Three-quarters (76%) of participants were categorised as problem gamblers (using the PGSI) prior to their exclusion contract, 14% were moderate risk gamblers and the remaining six percent were low risk or non-problem gamblers. Given that participants were asked to recall their gambling behaviour in the 12-months *prior* to their current/most recent exclusion contract, these findings may have been affected by recall bias and are likely to be conservative with the reality being that gambling problems were more severe than recalled.

Exclusion demographics

Only seven of the 123 participants reported their exclusion contract being solely initiated by a gambling venue. Thus, this formative project showed a distinct bias in the recruitment of self-excluded participants. Whilst, anecdotally, pub excluders are generally self- rather than venue-initiated, the potential for recruiting venue-initiated excluders from casinos was greater than eventuated. Therefore, further thought will be required to access this population in future research. Of the seven venue-initiated excluders, six had their exclusion initiated by a casino, three by a pub and one by a club (some participants had multiple exclusion contracts). It may be that since venue-initiated excluders have not excluded on their own initiative, they may be in denial about their problematic gambling, or have some resentment towards the venue and thus may be less inclined to complete a survey about their exclusion experience. This may be one reason for the lack of research literature with gamblers who have venue-initiated exclusion contracts.

Unfortunately, since the sample size for venue-initiated exclusion participants was very low in comparison to the self-initiated exclusion participants, it has not been possible to make any comparisons between the effectiveness of exclusion processes, including breach identification and frequency, between the two types of exclusions.

From the survey results it was apparent that whilst a proportion of participants only had one exclusion contract, a majority either had multiple concurrent exclusion contracts in place (or were excluded from multiple venues) or had previously excluded from venues on several, and in some cases numerous, occasions.

Having multiple concurrent exclusion contracts means that a gambler is banned from several venues at once; this could remove the temptation for them to gamble at alternative venues. Survey results indicated that 57% had gambled, during the period of their exclusion contract, at other venues from which they were not excluded and of those, 31% had done so because they were excluded from their usual venue. Eleven percent of the total sample stated they would travel more than 100 km to gamble at another venue. Of participants with multiple exclusion contracts, only a quarter had been able to multi-exclude through a single process with 71% having to exclude themselves from individual venues. This is likely to be a barrier for some gamblers to exclude from more than one venue and thus paves the way for gambling at alternative venues.

Therefore, it would seem logical that having the option for multi-venue exclusion processes would be of benefit to problem gamblers, who would lose the easy option of accessing another nearby venue to gamble, and who would easily be able to exclude from multiple venues without having to ask for exclusion on multiple occasions. For example, many

participants wanted to access the self-exclusion process remotely (e.g. online or by post) which would remove the temptation to gamble and the embarrassment factor of going through the process on multiple occasions. However, multi-venue exclusion does not come without issues as evidenced from key stakeholder focus group discussions, ranging from problems in implementing such processes (especially in larger areas with significant numbers of venues and venue operators) to enforcing them (i.e. identifying gamblers who breach the exclusion contracts) (see later section on breaching exclusion contracts).

Sixty percent of survey participants had held more than one exclusion contract. Whilst some of these would have been concurrent, others would likely have re-excluded when their contracts came to an end. This was evidenced by comments that time periods should be flexible to a gambler's need and there should be an option for life exclusion if required. Almost three quarters of participants held two-year exclusion contracts though the range was from three months to lifetime. The most popular perceived optimal lengths for exclusion contracts were two-years and lifetime.

Exclusion experience

It appeared that knowledge of exclusion processes was not widespread within venues, with only 14% of survey participants learning about the exclusion option through brochures or notices at the gambling venue and 15% being informed by gambling venue staff. Almost half of participants learnt about exclusions through a gambling treatment service and a quarter via friends or family members. Given that pop-up information forcing mandatory breaks in play is now a part of all electronic gaming machines, it is also of interest to note that seven percent of participants reported that pop-up messages had encouraged them to consider exclusion. Survey participants commented on the lack of general awareness about exclusion options and in some cases, lack of knowledge by venue staff. Thus, there appears to be significant scope for increased availability of information about exclusion options within venues and for increased dissemination of this information to venue patrons, particularly for those who are not already seeking help through a gambling treatment service and who thus cannot find out about exclusion options through that means.

Mixed findings were reported by survey participants regarding their experience of excluding from a venue/s. This included initial approach by venue staff (if any) through to the actual process of excluding from a venue and then re-joining a venue at the end of an exclusion contract, where applicable.

Very few survey participants (only 10%) reported having been approached by venue staff to discuss their gambling, or time or money spent gambling, prior to signing their exclusion contract, and only one-third of these respondents reported a positive experience, although a further 46% were neutral about the approach. The low level of approach of potential problem gamblers by venue staff may be attributed to three major reasons. Firstly, the current lack of documented definitive early behavioural indicators which venue staff might use to identify a potential problem gambler, secondly, as discussed in the focus groups, concerns around staff members' confidence in approaching gamblers who may potentially become aggressive, and thirdly if the number of venue-initiated excluded participants had been higher, the approach rate may have been greater (since these patrons may have been exhibiting more obvious behavioural signs of problem gambling). Venue staff realised the importance of approaching their customers before gambling became a crisis point in their lives.

However, once the decision to exclude had been made, participants generally found the process easy; only one-fifth reported the process to be difficult or very difficult. Additionally,

only eight percent of survey participants who initiated their own exclusion (self-exclusion) reported staff to be unhelpful or very unhelpful. There did not appear to be any differences in process ease or helpfulness of staff between casinos and pubs, which is a positive sign indicating that, in general, venues are taking the exclusion process seriously and treating their patrons with courtesy and respect.

Another area of the exclusion process where there appeared to be a lack of information or communication between venue staff and gamblers was around what happens at the end of an exclusion contract. Only 42% of survey participants reported knowing the process. Of those who were unaware of the process but who wished to know (two-thirds of those who did not know), the requested information was around options for automatic re-exclusion at the end of a contract, or a letter at the end of the contract informing the excluder that it was over and if there were any re-entry requirements. These two types of information fit with survey responses whereby just under half of participants reported they would not gamble again at the end of their exclusion contract and about one fifth reported that they thought they would gamble again at the venue when their exclusion contract expired.

Survey participants suggested improvements to the process which included a private place/area to conduct the exclusion process and to provide re-assurance about confidentiality. There were also some concerns about lack of staff knowledge in the process. This may be a consequence of the varied processes in place between different types of venue caused by differences in the venues' core businesses³⁰; it was apparent from the focus groups that a more elaborate and intricate process was implemented by participating casino staff participants whilst a more simplistic and opportunistic approach appeared to be followed by pub staff participants.

Survey participants reported appreciating venue staff who facilitated the exclusion process quickly and clearly, and who offered encouragement, a positive attitude and support. Conversely, negative feelings were reported by participants when venue staff were unprepared or unfamiliar with the exclusion process. Any unfamiliarity with implementation of the exclusion process may be a training issue; in the focus groups some participants voiced concerns that they were unable to provide immediate assistance to customers due to a lack of training. It may also be related to personal confidence in approaching a potential problem gambler, particularly when there is a fear of aggressive behaviour. Focus group participants thus felt it important to be able to discuss a gambler's gambling behaviour prior to it becoming a discussion about exclusion.

Breaching exclusion contracts

Just over half of survey participants reported that their exclusion contract had completely deterred them from gambling at the venue from which they were excluded, with the remaining participants deterred to varying extents. Thus, being excluded from a gambling venue is not a total deterrent; some gamblers do breach exclusion contracts by returning to the venue to gamble, with a majority of those breaching on multiple occasions. In this study, 30% reported breaching their contract/s with a greater number returning to pubs to gamble than to casinos and with more electronic gaming machine players breaching than casino table game players.

³⁰ Casinos provide gambling opportunities and train their staff more rigorously in host responsibility practices, whilst the core business of pubs is the provision of food and beverage.

The difference in numbers of breaches in a pub versus a casino environment or a machine versus table game environment may be a function of the exclusion processes in place, the prime business of the venues and the amount of staff interaction with the gamblers. As discussed in the focus groups, the prime business of a casino is gambling where the host responsibility and exclusion training processes appear to be more structured than in a pub environment where the prime purpose is not gambling. For example, casino staff are more likely to be briefed at the start of every shift in relation to excluded patrons, whilst pub staff are more likely to have photographs of excluders in a special folder which they have to proactively review. This may mean that casino staff are more likely to spot gamblers breaching their exclusion contracts in comparison to pub staff, which may make excluded gamblers more wary of breaching a contract in a casino environment (i.e. there is more risk of being caught). In addition, electronic gaming machine playing is relatively isolated with no staff interaction required, whilst table game players have interaction with the venue staff member dealing or activating the game; regular table game players are thus more likely to be recognised by venue staff and this presumably would make breaching exclusion contracts more difficult.

Focus group participants discussed their perception that excluded patrons would sometimes re-enter the venue (breach) to 'test' the system or would disguise themselves to attempt to avoid detection. This perception by venue and treatment stakeholders was correct to some extent with almost one-quarter (8/33) of the survey participants who had breached an exclusion contract reporting that they did so 'to test the system' and 18% (6/33) reporting disguising themselves. However, as numbers were small, these results must be treated with caution and not be taken to reflect the behaviours of all excluded gamblers.

Of participants who had breached exclusion contracts, one-quarter reported always being recognised by venue staff during a breach and a further quarter reported being recognised on most occasions. However, it appeared that respondents were not always approached by venue staff after being recognised with only 55% reporting that they were always, or on most occasions, approached whilst breaching. Caution must be exercised in interpreting these results since they relate to a small sample size and are dependent on participant recall and perception as to whether they were, or were not, recognised and then approached. Notwithstanding, there is some effectiveness in identifying excluded gamblers who re-enter venues to gamble, and enforcement of exclusion contracts, although there remains room for improvement. Focus group participants identified difficulties with recognising faces in an ethnically diverse population where, for example "...for Europeans/Pakeha we're very unskilled at discerning Asian faces..." and this may be one reason why excluded gamblers were not always recognised during re-entry to a venue, or may lead to uncertainty on a staff member's part as to whether to approach someone they believe may be breaching an exclusion contract.

Other issues with identifying excluded patrons revolved around the quality, or lack thereof, of photographs taken or received by venues (particularly for multi-venue exclusions) and limitations as to where the photographs could be displayed. This was a significant concern of venue staff focus group participants, who also noted that patrons were more likely to be recognised if they had physically entered the venue to exclude or if they had been regular patrons (i.e. if the staff 'knew' them).

Focus group participants agreed that patrons not only breach exclusion contracts but will also gamble in alternative venues close to the venue of exclusion. This was corroborated in the survey where over half (57%) of the participants reported they had gambled at venues from which they were not excluded during their period of exclusion, and only one third (36%) reported that they would not gamble at an alternative venue. For those who did gamble

elsewhere only 30% reported gambling in the local vicinity (0 - 10 km distance) with others travelling further afield and 11% (13/123) travelling over 100 km. Almost half (44%) of those gambling at alternative venues did so weekly or more often, meaning that they continued to be regular gamblers even whilst excluded from another venue. The main reasons for gambling at alternative venues were because the participant was excluded from their usual venue, because they did not want to be excluded from the alternative venue or to gamble on something different (from the gambling at the venue from where they were excluded). This latter reason implies to some extent, that gamblers, whilst acknowledging that they have a problem with one form of gambling, may feel comfortable continuing with another mode of gambling.

Help-seeking behaviours

Since proactive self-exclusion from a gambling venue denotes acknowledgement and awareness of a problem or likelihood of a problem, this may also be a first step to help-seeking for problem gambling. Sixty-nine percent of survey participants had contacted support/help services prior to excluding from a gambling venue, with two-thirds reporting contacting specialist gambling help services (helpline or face-to-face counselling service), and four fifths (81%) reporting that the service had assisted in the decision to exclude from a venue. In fact, 48% of participants found out about exclusion contracts via a gambling treatment service.

Furthermore, over half (59%) of survey participants reported being given information about support/help services when they signed their exclusion contract, with the majority of these (82%) reporting the information to be helpful. Casino respondents were more likely to have been given the information than pub respondents (71% versus 58%). Sixty-eight percent of participants contacted support/help services during the period of their exclusion contract.

Whilst this is a pilot study and results cannot be generalised, they identify that counselling services can play an important role in the exclusion process and this indicates that development of a good relationship between treatment services and gambling venues would likely be beneficial to problem gamblers. Focus group discussions indicated a more positive relationship between the participating casino staff and treatment provider staff than was seen between pub staff and treatment provider staff. However, there was a genuine desire for improved communication and linkages between venues and treatment providers. Where linkages were lacking, this may have been a consequence of poor communications, for example pub focus group participants (in particular) expressed concern that they did not always know who could assist a gambler and once a patron was excluded they had no idea if that person was receiving appropriate support.

Casino exclusion policies were more likely, than pubs, to require mandatory counselling sessions before an excluded patron could be considered for re-entry to the venue at the expiration of an exclusion contract. Of survey participants who had undergone this process, most (20/22) reported the counselling to be helpful. However, this could be interpreted in one of two ways; either the counselling was helpful in terms of assisting a participant to gamble in a controlled manner or the counselling was helpful to enable re-entry to the venue (without which re-entry would not be possible). Certainly, some treatment provider focus group participants were uncomfortable with the role they provided when making a judgement as to whether an excluded gambler was 'fine' to recommence gambling at the end of an exclusion period.

Summary

Over and above the question areas already discussed, survey participants were asked how their gambling had changed since signing their exclusion contract. Several positive impacts were reported including gambling less in terms of time and expenditure, quitting gambling, and attending (or recently attending) a gambling treatment service. Other positive effects were that taking out exclusion contracts was associated with a sense of relief for some people and a first supporting step until they could access counselling. On the whole, survey participants viewed the process of excluding to be positive in terms of venue staff approach and behaviour. In particular, participants appreciated feeling supported and encouraged by venue staff once they had decided to exclude.

Whilst there was self-selection of participants into the study, which may have led to responses biased towards positive effects (i.e. those who had a good experience are more likely to expend the time to take part in a survey than those who have had a negative experience), there were also some less positive effects whereby participants gambled at alternative venues, gambled more on alternative forms of gambling, breached their exclusion contracts or had not altered their gambling in terms of time and expenditure. There were also negative experiences with staff.

Thus, overall there appear to be many positive and beneficial aspects to the current exclusion processes indicating that the fundamental concept is sound and the current processes in place have a good foundation. However, the study found several areas where improvement to the processes would be beneficial, with suggestions originating from key stakeholders as well as survey participants. These suggested areas for improvement are detailed below and should be considered as constructive ideas for more effective exclusion processes rather than a criticism of current practice.

General

- Standardise, as far as is practicable, exclusion processes between different venues/venue types.
- Have exclusion forms easily available for patrons, i.e. not 'hidden' behind the bar (i.e. so gamblers do not have to ask for the forms).
- Offer online and postal options for excluding.
- Have a private area at the venue for conduct of an exclusion contract with a patron.
- Have resources available to take patron photographs for the exclusion contract and ensure patrons receive a copy of the exclusion contract.

Multi-venue exclusion contracts

- Increase options for excluding from multiple venues in one go.
- There are issues with identifying excluded gamblers who are not regular patrons of a venue which could be ameliorated by having good quality colour photographs provided to all venues from which the gambler has excluded.

Training

- There is room for improved standardised training, particularly outside the casino environment. This would likely cover processes for ensuring staff are up-to-date with currently excluded patrons, and also in how to approach patrons suspected of having problematic gambling or suspected of breaching an exclusion contract.
- Venue staff coming into contact with gamblers should have standardised knowledge of exclusion processes and how to implement them including where forms are stored, and how to inform patrons of what happens during a contract, if the contract is breached and what happens at the end of an exclusion contract. Particular care must

be taken in multi-venue exclusion contracts if the venues have different standard processes.

Awareness raising regarding exclusion processes

- Venues should be more proactive in advertising, and informing patrons of, exclusion options.

Length of exclusion contract

- A lifetime ban should be a standard option for gamblers excluding from venues, in addition to the current standard one and two-year options.
- There should be options (or a process) for automatic re-exclusion at the end of a fixed-length contract.

Enforcement

- Processes need to be developed for enforcement of exclusion contracts by increased/better identification of patrons breaching contracts and approach of those patrons by venue staff. This appears to be more of an issue with non-casino venues.

Treatment provider and venue links

- There is a need for improved communication and linkages between venue staff and gambling treatment services, particularly outside the casino environment. This linkage was considered important by both sets of key stakeholders in the focus groups.
- As part of improved linkages, systems could be established to ensure that excluded gamblers receive the support they need, for example immediate access to a counsellor, if required.

Conclusion

The findings from this formative project, together with the response rate of participants recruited via the national helpline compared with the response rate from postal contact with venue database excluders, suggest that telephone contact of excluders on venue databases may be a good approach for future studies. The postal method used to recruit venue database excluders in the current project was successful, and consideration could be given to further strategies that would encourage greater participation, in future studies. In future studies, consideration should also be given to the recruitment of patrons from venues at the time of signing an exclusion contract. This would ensure the participation of current excluders and would also allow the potential for longitudinal studies to be conducted to follow participants over time and assess the effectiveness of an exclusion contract on their gambling behaviours.

The recruitment methodology was successful in gaining participation from gamblers who had excluded from all six of New Zealand's casinos and from pubs and clubs spanning the length and breadth of the country.

Whilst sample size was too small to compare venue-initiated exclusions against self-initiated exclusions, this formative project has indicated that current exclusion processes have a positive impact and are effective to varying degrees in reducing or stopping gambling activities and in encouraging help-seeking behaviours. Some differences were identified between casino and non-casino exclusion processes. Several areas for improvement were identified during the project both by stakeholders and excluded gamblers who participated in a survey.

Two models of self-initiated exclusion were presented in the literature review: An enforcement model and an assistance-based model. From the findings of this current project, it would appear that an ideal model would actually encompass aspects of both models, providing the structure of the former together with the greater options and support for gamblers of the latter.

5. LIMITATIONS OF THIS STUDY

This was a formative investigation into the effectiveness of gambling venue exclusion processes. However, a major aim of the project was also to ascertain the most effective means of recruiting excluded participants into this type of research, since this population was considered likely to be a challenging group to reach due to issues of shame and stigma.

Participants self-selected into the study after being informed about the research. A major recruitment approach was of excluded gamblers accessed via contact details stored on the databases of one of New Zealand's six casinos and one of the six major national gaming machine trusts. Approximately one-third of the gaming machine trust's venues are located in the same city as the casino. However, the researchers acknowledged that the population of that city was not representative of the New Zealand population as a whole, having a higher percentage of Europeans and a lower percentage of Maori and Pacific peoples than nationally³¹. However, to offset this limitation, participants were also recruited from the whole of the trust's national database (two-thirds of their venues are outside the aforementioned selected city), via a national gambling helpline and also via advertisements placed in major newspapers throughout New Zealand.

A further database limitation was that records covered approximately five years. Thus, some of the participants potentially had excluded several years prior to completing the survey, which could have led to significant recall bias in the responses. It also meant that some contact details were no longer current so the invitation to participate in the survey did not reach all excluders on the databases.

Whilst legislation demands that casino and Class 4³² gambling venues have effective exclusion processes in place, the finer details of the processes are not legislated and are thus likely to vary slightly from casino to casino and from one gaming machine trust to another. Therefore, the findings from this research regarding effectiveness of exclusion processes are not necessarily representative of exclusion processes throughout New Zealand venues as a whole. Nevertheless, the effective aspects of those processes examined as part of this research remain valid and suggestions for improvements in processes remain pertinent.

Other limitations relate to focus group data and open-ended survey question responses which were coded prior to analysis. This involved subjective judgement by the researchers. However, the judgement bias was minimised as at least two members of the research team were involved in the coding process. Open-ended questions also only measure what people think when asked the question, and not necessarily their full knowledge.

Therefore, the results from this study must be treated with appropriate caution and should not be generalised to the New Zealand venue excluded gambler population as a whole. In particular, Pacific participants were lacking and separate analyses for different ethnic groups could generally not be performed. Similarly, very few venue-initiated (as opposed to self-initiated) excluded gamblers participated in the research. It is likely that the recruitment methods utilised for this study were inappropriate to access these particular population groups and any subsequent studies should be cognisant of this.

However, much valuable information has been gleaned from this formative project, in particular in terms of the best, and least, effective recruitment methods for accessing excluded

³¹ The Asian population percentage was similar between the selected city and nationally.

³² Non-casino electronic gaming machine.

gamblers for research projects, and in terms of identifying positive and negative aspects of current exclusion processes. Thus, as the study was designed to be formative, it was not meant to be in-depth and representative, and as such has achieved its purpose.

6. REFERENCES

Australasian Gaming Council. (2008). *A database on Australia's gambling industry 2008/09*. Melbourne: Australasian Gaming Council.

Banks, G. (2002). *The Productivity Commission's gambling inquiry: Three years on*. Presentation to the 12th Annual Conference of the National Association for Gambling Studies, Melbourne, 21 November. Canberra: Australian Productivity Commission.

Blaszczynski, A., Ladouceur, R., & Nower, L. (2007). Self-exclusion: A proposed gateway to treatment model. *International Gambling Studies*, 7(1), 59-71.

Croucher, R. (2005). Self-exclusion programs for problem gamblers in Australia. *Journal of the Academy of Business and Economics*. Retrieved 31 October 2008 from: http://findarticles.com/p/articles/mi_m0OGT/is_/ai_n16619650?tag=artBody;coll

De Bruin, D.E., Leenders, F.R.J., Fris, M., Verbraeck, H.T., Bramm, R.V., & van de Wijngaart, G.F. (2001). *Visitors of Holland Casino: Effectiveness of the policy for the prevention of problem gambling* (English synopsis). University of Utrecht, the Netherlands: Addictions Research Institute.

Delfabbro, P., Osborn, A., Nevile, M., Skelt, L., & McMillen, J. (2007). *Identifying problem gamblers in gambling venues*. Melbourne: Gambling Research Australia.

Dickson-Gillespie, L., Rugle, L., Rosenthal, R., & Fong, T. (2008). Preventing the incidence and harm of gambling problems. *The Journal of Primary Prevention*, 29(1), 37-55.

Ferris, J., & Wynne, H. (2001). *The Canadian Problem Gambling Index: Final report*. Ottawa: Canadian Centre on Substance Abuse.

Gambling Act 2003. (2003). Wellington: Public Act 51.

Häfeli, J. (2005). *After three years of responsible gaming practice in Switzerland - Does it work?* Paper presented at 6th European Conference on Gambling Studies and Policy Issues, Malmo, Sweden.

Hing, N. (2004). The efficacy of responsible gambling measures in NSW clubs: The gamblers' perspective. *Gambling Research*, 16(1), 32-46.

Ladouceur, R., Boisvert, J.-M., Pepin, M., & Loranger, M. (1994). Social cost of pathological gambling. *Journal of Gambling Behavior*, 10(4), 399-409.

Ladouceur, R., Jacques, C., Giroux, I., Ferland, F., & Leblond, J. (2000). Analysis of a casino's self-exclusion program. *Journal of Gambling Studies*, 16(4), 453-460.

Ladouceur, R., Sylvain, C., & Gosselin, P. (2007). Self-exclusion program: A longitudinal evaluation study. *Journal of Gambling Studies*, 23, 85-94.

Morasco, B.J., vom Eigen, K.A., & Petry, N.M. (2006). Severity of gambling is associated with physical and emotional health in urban primary care patients. *General Hospital Psychiatry*, 28(2), 94-100.

Napolitano, F. (2003). The self-exclusion program: Legal and clinical considerations. *Journal of Gambling Studies*, 19(3), 303-315.

Nowatzki, N.R., & Williams, R.J. (2002). Casino self-exclusion programmes: A review of the issues. *International Gambling Studies*, 2(1), 3-25.

O'Neil, M., Whetton, S., Dolman, B., Herbert, M., Giannopoulos, V., O'Neil, D., & Wordley, J. (2003a). *Evaluation of self-exclusion programs and harm minimisation measures. Report A*. Adelaide: The South Australian Centre for Economic Studies.

O'Neil, M., Whetton, S., Dolman, B., Herbert, M., Giannopoulos, V., O'Neil, D., & Wordley, J. (2003b). (2003). *Summary of Australian States and Territories: Self-exclusion programs and harm minimisation policies/strategies. Report B*. Adelaide: The South Australian Centre for Economic Studies.

Pulford, J., Bellringer, M., Abbott, M., Clarke, D., Hodgins, D., & Williams, J. (2009). Reasons for seeking help for a gambling problem: The experiences of gamblers who have sought specialist assistance and the perceptions of those who have not. *Journal of Gambling Studies*, 25(1), 19-32.

Responsible Gambling Council. (2008). *From enforcement to assistance: Evolving best practices in self-exclusion*. Toronto: Responsible Gambling Council.

Schrans, T., Schelinck, T., & Grace, J. (2004). *2004 NS VL Self-exclusion programme process test. Final Report prepared for Nova Scotia Gaming Corporation*. Nova Scotia: Focal Research Consultants Ltd.

Townshend, P. (2007). Self-exclusion in a public health environment: An effective treatment option in New Zealand. *International Journal of Mental Health and Addiction*, 5, 390-395.

Tremblay, N., Boutin, C., & Ladouceur, R. (2008). Improved self-exclusion program: Preliminary results. *Journal of Gambling Studies*, 24(4), 505-518.

Williams, R.J., Simpson, R.I., & West, B.L. (2007). Prevention of problem gambling. In G. Smith., D.C. Hodgins. & R.J. Williams. (Eds.), *Research and measurement issues in gambling studies*. San Diego: Elsevier Inc.

Williams, R.J., West, B.L., & Simpson, R.I. (2007). *Prevention of problem gambling: A comprehensive review of the evidence*. Guelph, Ontario: Ontario Problem Gambling Research Centre.

APPENDIX 1
Ethical approval - Phase One

MEMORANDUM
Auckland University of Technology Ethics Committee
(AUTEC)

To: Maria Bellringer
From: **Madeline Banda** Executive Secretary, AUTEC
Date: 22 September 2008
Subject: Ethics Application Number 08/194 **Formative investigation into the effectiveness of gambling venue exclusion processes in New Zealand.**

Dear Maria

Thank you for providing written evidence as requested. I am pleased to advise that it satisfies the points raised by the Auckland University of Technology Ethics Committee (AUTEC) at their meeting on 8 September 2008 and that I have approved your ethics application. This delegated approval is made in accordance with section 5.3.2.3 of AUTEC's *Applying for Ethics Approval: Guidelines and Procedures* and is subject to endorsement at AUTEC's meeting on 13 October 2008.

Your ethics application is approved for a period of three years until 22 September 2011.

This approval is for the initial focus group stage of the research only. Information and documentation relating to surveys needs to be submitted for consideration and approval before that data collection occurs.

I advise that as part of the ethics approval process, you are required to submit the following to AUTEC:

- A brief annual progress report using form EA2, which is available online through <http://www.aut.ac.nz/about/ethics>. When necessary this form may also be used to request an extension of the approval at least one month prior to its expiry on 22 September 2011;
- A brief report on the status of the project using form EA3, which is available online through <http://www.aut.ac.nz/about/ethics>. This report is to be submitted either when the approval expires on 22 September 2011 or on completion of the project, whichever comes sooner;

It is a condition of approval that AUTEC is notified of any adverse events or if the research does not commence. AUTEC approval needs to be sought for any alteration to the research, including any alteration of or addition to any documents that are provided to participants. You are reminded that, as applicant, you are responsible for ensuring that research undertaken under this approval occurs within the parameters outlined in the approved application.

Please note that AUTEC grants ethical approval only. If you require management approval from an institution or organisation for your research, then you will need to make the arrangements necessary to obtain this.

When communicating with us about this application, we ask that you use the application number and study title to enable us to provide you with prompt service. Should you have any further enquiries regarding this matter, you are welcome to contact Charles Grinter, Ethics Coordinator, by email at charles.grinter@aut.ac.nz or by telephone on 921 9999 at extension 8860.

On behalf of the AUTEC and myself, I wish you success with your research and look forward to reading about it in your reports.

Yours sincerely



Madeline Banda
Executive Secretary
Auckland University of Technology Ethics Committee

APPENDIX 2
Ethical approval - Phase Two

MEMORANDUM
Auckland University of Technology Ethics Committee
(AUTEC)

To: Maria Bellringer
From: **Madeline Banda** Executive Secretary, AUTEC
Date: 19 December 2008
Subject: Ethics Application Number 08/194 **Formative investigation into the effectiveness of gambling venue exclusion processes in New Zealand.**

Dear Maria

Thank you for providing written evidence as requested. I am pleased to advise that it satisfies the points raised by the Auckland University of Technology Ethics Committee (AUTEC) at their meeting on 13 October 2008 and that I have approved the second stage of your ethics application. This delegated approval is made in accordance with section 5.3.2.3 of AUTEC's *Applying for Ethics Approval: Guidelines and Procedures* and is subject to endorsement at AUTEC's meeting on 19 January 2009.

This approval is only for the second stage of the research, relating to surveys. Information and documentation relating to any further stages needs to be submitted for consideration and approval before data collection occurs.

I remind you that as part of the ethics approval process, you are required to submit the following to AUTEC:

- A brief annual progress report using form EA2, which is available online through <http://www.aut.ac.nz/about/ethics>. When necessary this form may also be used to request an extension of the approval at least one month prior to its expiry on 22 September 2011;
- A brief report on the status of the project using form EA3, which is available online through <http://www.aut.ac.nz/about/ethics>. This report is to be submitted either when the approval expires on 22 September 2011 or on completion of the project, whichever comes sooner;

It is a condition of approval that AUTEC is notified of any adverse events or if the research does not commence. AUTEC approval needs to be sought for any alteration to the research, including any alteration of or addition to any documents that are provided to participants. You are reminded that, as applicant, you are responsible for ensuring that research undertaken under this approval occurs within the parameters outlined in the approved application.

Please note that AUTEC grants ethical approval only. If you require management approval from an institution or organisation for your research, then you will need to make the arrangements necessary to obtain this.

When communicating with us about this application, we ask that you use the application number and study title to enable us to provide you with prompt service. Should you have any further enquiries regarding this matter, you are welcome to contact Charles Grinter, Ethics Coordinator, by email at charles.grinter@aut.ac.nz or by telephone on 921 9999 at extension 8860.

On behalf of the AUTEC and myself, I wish you success with your research and look forward to reading about it in your reports.

Yours sincerely



Madeline Banda
Executive Secretary
Auckland University of Technology Ethics Committee

APPENDIX 3
Survey

SECTION A

We would like to start with some questions around exclusion procedures (being banned) from gambling venues, to find out about your situation and your experience of being excluded from a gambling venue. This includes exclusions initiated by yourself or by a gambling venue.

1. You are: *(tick one box only)*

- Currently excluded from one or more gambling venues
- Recently excluded from one or more gambling venues but are no longer excluded

2. Have you completed any periods of exclusion?

- Yes *(answer questions below)* No *(go to Q3)*
- If Yes, how many months since your exclusion contract ended: _____
- If Yes, did you re-exclude yourself from the venue or any other venue?
 - Yes No

The next questions relate to your current or most recently completed exclusion period

3. Which gambling venues are/were you excluded from? *(tick all that apply)*

- Casino
 - Auckland Sky City Casino
 - Hamilton Sky City Casino
 - Christchurch Casino
 - Dunedin Casino
 - Queenstown Sky City Casino
 - Queenstown Lasseters Wharf Casino

Pub

Number of pubs excluded from (*tick one number only*)

1 2 3 4
 5

6 or more

Location of pub/s (City,
town) _____

Club

Number of clubs excluded from (*tick one number only*)

1 2 3 4
 5

6 or more

Location of club/s (City,
town) _____

TAB (*tick one number only*)

Number of TABs excluded from

1 2 3 4
 5

6 or more

Location of TAB/s (City,
town) _____

If you are/were excluded from any other type of gambling venue, please write
its name here: _____

4. Of all the venues you have named in Question 3, which type of venue was the most
important one you are/were excluded from (i.e. the one you gambled at the most and
wanted to exclude from the most) (*tick one box only*)

Casino

Pub

Club

TAB

Other (Please specify)

5. How many times have you excluded from your most important gambling venue (as selected in question 4)?
- 1 2 3 4
 5
 6 or more
6. Altogether, how many times have you excluded from gambling venues (i.e. how many separate exclusion contracts have you had)? _____
7. What is/was the length of time of your current/most recent exclusion contract from your most important venue (state in months or years)? _____
8. If you are currently excluded, how far through your exclusion contract (for your most important venue) are you? Please state the number of years/months to go before your contract ends _____
9. If you are/were excluded from ONE pub and/or club and/or TAB (i.e. not excluded from multiple venues) is this because.... (*tick only one*)
- You only wanted to be excluded from this one
 You didn't know you could be excluded from more than one venue
 It's too difficult to exclude from more than one venue
 Other explanation (please specify)

 Not applicable as you are excluded from multiple venues
10. If you are/were excluded from multiple gambling venues (more than one venue) did you... (*tick only one*)
- Exclude from them all in one go (you only had to make one request)
 Exclude from each venue individually (you had to make a request to each venue)
 Other (please specify)

11. If you have excluded from multiple gambling venues, what were your reasons/ criteria for choosing the particular venues? (*tick all that apply*)

The location of the venues

- Near to home
- Near to work
- Other (please specify):

Type of gambling

- Casino table games
- Casino pokies
- Pokies at pub
- Pokies at club
- TAB
- Other (please specify)

Ease/knowledge of exclusion process

Able to do multiple exclusions with one form

12. Was your exclusion contract (from your most important venue) initiated by the gambling venue or by yourself? (*tick only one*)

Initiated by the gambling venue

Initiated by me

Other (please specify)

13. How did you find out about exclusion contracts at the most important gambling venue that you are/were excluded from? (*tick all that apply*)

Brochure or notice at the gambling venue

Informed by the gambling venue staff

Informed by a problem gambling treatment service

- Informed by a friend or family member
- Other
 - Please state (e.g. through probation, court) _____

14. Before your current/most recent gambling venue exclusion, did anything else help encourage you to consider excluding? (*tick all that apply*)

- Pop up message/s on the pokie machines
- Information on problem gambling at the venue
- Information about problem gambling treatment services at the venue
- Other
 - Please specify _____

15. What are/were your reasons for your exclusion contract from your most important venue? (*tick all that apply*)

- I was spending too much money on gambling
- I was spending too much time on gambling
- The gambling venue staff suggested it to me
- The gambling venue staff told me I had to exclude
- A problem gambling treatment service suggested it to me
- A friend or family member suggested it to me
- For another reason
 - Please specify _____

16. Before you signed an exclusion contract with your most important venue, were you approached in the venue by any staff to discuss your gambling, time spent gambling or money spent gambling?

- Yes (*answer questions below*) No(*go to Q17*) Not sure (*go to Q17*)
- If yes, how was this approach made? _____

Who made this approach? _____

How did you feel about the gambling venue staff member talking to you on this subject? (*tick the one most close to the way you feel*)

very positive positive neutral negative very negative

17. If you were approached by venue staff before excluding from your most important venue, did it influence your decision to exclude?

Yes (*answer questions below*) No (*go to Q18*) Not sure(*go to Q18*)

How could the approach have been improved? (*tick all that apply*)

The timing of the approach (please specify)

The person who approached me (please specify)

Where I was approached (please specify)

What the person said to me (please specify)

How the person spoke to me (please specify)

Anything else (please specify)

18. How easy was it for you to go through the process of excluding from your most important venue?

Very easy Easy Not easy or hard Difficult Very difficult

Please explain _____

19. If you initiated your exclusion contract, how helpful were the gambling venue staff to you when you wanted to exclude from the venue?

Very helpful Helpful Neither helpful or unhelpful

Unhelpful Very unhelpful Not applicable

20. Is there anything that could have improved the process of excluding for you?

- Yes No Don't know

If yes, please explain _____

21. Was any part of the exclusion process done really well?

- Yes No Don't know

If yes, please explain _____

If no, please explain _____

22. What is the longest period you have ever been excluded from any gambling venue (state years or months)? _____

23. What is the shortest period you have ever been excluded from any gambling venue (state years or months)? _____

24. What do you think would be the best period (length of time) to be excluded which could help you better control your gambling (state years or months)? _____

25. What could gambling venues do to make exclusion from the venue easier for gamblers?

26. How has your gambling changed since you signed your exclusion contract? (*tick all that apply*)

- I have stopped gambling
- I am gambling less in terms of money
- I am gambling less in terms of time
- My gambling has stayed the same in terms of money
- My gambling has stayed the same in terms of time
- I still gamble at the venue I am excluded from
- I gamble at other venues instead of the one I am excluded from
- I gamble more on alternative forms of gambling

30. If you have breached your exclusion contract, did you attempt to disguise yourself so the venue staff would not recognise you?

- Yes No

31. If you have breached your exclusion contract were you recognised by the venue staff? (*tick one only*)

- Always Most times Rarely Never Don't know

32. If you were recognised, were you approached by the venue staff? (*tick one only*)

- Always Most times Rarely Never Don't know

33. If staff have approached you when you breached, what happened next? (*tick all that apply*)

- They asked me to leave
- They escorted me out of the venue
- They talked to me about the exclusion contract and what it means to me
- They talked to me about legal consequences/penalties for breaching
- They trespassed me ('blue slipped' me)
- I was already trespassed and they called the police
- They talked to me about gambling treatment services
- Other
- Please specify _____

34. If you have breached your exclusion contract, why did you do so? (*tick all that apply*)

- To gamble again
- To test the system
- To attend a function/dinner/drink at the venue
- Other reason
- Please specify _____

35. Have you breached an exclusion contract at any other gambling venues (other than your main/most important venue)?

- Yes No Not applicable

36. What factors prevented you from breaching your exclusion contract? (*tick all that apply*)

- Self-determination
- Fear of being identified
- Fear of legal action (e.g. night in remand, prosecution, criminal record)
- Other (please specify) _____
- None

37. During your exclusion contract, have you gambled at other venues that you are/were not excluded from?

- Yes No
- If yes, why have you gambled at these places? (*tick all that apply*)
- I didn't want to exclude from there
- Because I am excluded from my usual venue
- To gamble on something different
- Other
- Please specify _____
- If yes, how often do/did you gamble at these other venues? (*tick one only*)
- Weekly or more often 2-3 times a month Monthly
- Less than once a month

38. What maximum distance would you travel to another venue (where you are not excluded) to gamble? (*tick one only*)

- I wouldn't gamble
- 0 to 5 kilometres
- 6 to 10 kilometres
- 11 to 20 kilometres

- 21 to 40 kilometres
- 41 to 50 kilometres
- 51 to 100 kilometres
- More than 100 kilometres

39. Do/did you know what happens at the end of your exclusion contract?

- Yes
- No
- Not sure

If yes, how did you find out about what happens? (*tick all that apply*)

- The gambling venue staff told me
- The gambling venue staff gave me information about it
- A counsellor told me
- Other
 - Please specify _____

If no or not sure, would you have liked information about what happens at the end of the exclusion contract?

- Yes
- No

If yes, what information would you have liked?

If no, why not? _____

40. If you are currently excluded, do you think you will gamble at the venue you are excluded from when the exclusion contract ends?

- Yes
- No
- Don't know

If yes, why? _____

If no, why not? _____

41. In the past, if you have re-joined a venue after the end of an exclusion contract, how easy was it to do so?

- Very easy
- Easy
- Difficult
- Very difficult

SECTION B

Now a few questions about counselling and other gambling related services.

1. In the past if you re-entered a venue to gamble at the end of an exclusion contract, did you have to attend problem gambling counselling sessions first?
 Yes No Don't know Not applicable
 If yes, how helpful did you find the counselling sessions?
 Very helpful Helpful Not helpful Useless

2. Did you contact any support/help services about your gambling before excluding from your most important gambling venue? (*tick all that apply*)
 Yes
 Gambling Helpline
 A gambling counselling service
 Other professional service
 Please specify _____
 No (*go to Q4*)

3. If you answered yes to Question 2 (in this section), did contacting the support/help service help you to decide to exclude from the gambling venue?
 Yes No Don't know

4. When you signed your exclusion contact, were gambling support/help or assistance options or information given to you?
 Yes No Don't know
 If yes, how helpful was this information for you?
 Very helpful Helpful Neither helpful or unhelpful
 Unhelpful Very unhelpful
 If no, how helpful would it have been to have this information?
 Very helpful Helpful Neither helpful or unhelpful
 Unhelpful Very unhelpful

5. Did you contact any support/help services about your gambling during your exclusion contract
 Yes
 Gambling Helpline

- A gambling counselling service
- Other professional service
 - Please specify _____

No

6. If you are currently excluded from a venue, will you be going to any counselling service about your gambling when your current exclusion contract is about to end so that you can re-enter the venue to gamble?

- Yes No Don't know Not applicable

7. If you have contacted a support/help organisation about your gambling, why did you do so?

SECTION C

Now we would like to ask you a few questions about your gambling before you signed your current exclusion contract.

1. Which of the following gambling activities did you take part in during the last 12 months before your exclusion contract? (*tick all that apply*)

a) Lotto (including Strike, Powerball and Big Wednesday) YES NO

 If yes, did you do this weekly or more often? YES NO

 If yes, how much money did you spend in a typical week on this activity? \$ _____

b) Keno (not in a casino) YES NO

 If yes, did you do this weekly or more often? YES NO

 If yes, how much money did you spend in a typical week on this activity? \$ _____

c) Instant Kiwi or other scratch ticket YES NO

 If yes, did you do this weekly or more often? YES NO

 If yes, how much money did you spend in a typical week on this activity? \$ _____

d) Other lotteries and raffles YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

e) Housie (bingo) for money YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

f) Horse or dog racing (excluding office sweepstakes) YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

g) Sports betting at the TAB or with an overseas betting organisation YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$ _____

h) Gaming machines or pokies at a casino YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

i) Table games or any other games (excluding pokies) at a casino YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

j) Gaming machines or pokies in a pub (not in a casino or club) YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

k) Gaming machines or pokies in a club (not in a casino or pub) YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

l) Internet-based gambling YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

m) Other gambling activity. Please specify: YES NO

If yes, did you do this weekly or more often? YES NO

If yes, how much money did you spend in a typical week on this activity? \$_____

n) None of the above YES NO

2. Thinking about the past 12 months before your current/most recent exclusion contract, how often did you bet more than you could really afford to lose?

Never Sometimes Most of the time Almost always

3. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did you need to gamble with larger amounts of money to get the same feeling of excitement?

Never Sometimes Most of the time Almost always

4. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did you go back another day to try to win back the money you lost?

Never Sometimes Most of the time Almost always

5. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did you borrow money or sell anything to get money to gamble?

Never Sometimes Most of the time Almost always

6. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did you feel that you might have a problem with gambling?

Never Sometimes Most of the time Almost always

7. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did people criticise your betting or tell you that you had a gambling problem? (regardless of whether or not you thought it was true)
- Never Sometimes Most of the time Almost always
8. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did you feel guilty about the way you gamble, or what happens when you gamble?
- Never Sometimes Most of the time Almost always
9. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did your gambling cause you any health problems, including stress or anxiety?
- Never Sometimes Most of the time Almost always
10. Thinking about the past 12 months, before your current/most recent exclusion contract, how often did your gambling cause any financial problems for you or your household?
- Never Sometimes Most of the time Almost always

SECTION D

Finally we would like to ask a few general questions.

1. What do you feel is the best way for researchers to contact people excluded from gambling venues?
- By telephone
- By post
- By Email
- Via gambling venues
- Via gambling treatment services
- Via advertisements
- Other
- Please specify _____

2. Gender: Male Female

3. Age:

- <20 years 20-24 years 25-29 years 30-34 years
 35-39 years 40-44 years 45-49 years 50-54 years
 55-59 years 60-64 years 65+ years

4. Ethnicity (*tick all boxes that apply*):

- New Zealand European
 Maori
 Pacific Island (please further specify) _____
 Asian (please further specify) _____
 Other

Please specify _____

5. Are you:

- Married/de-facto relationship
 Single
 Separated/Divorced
 Widowed

6. What is your current occupation? _____

7. Which of these groups best describes your total annual household income from all income earners and all other sources before tax?

- Up to \$20,000
 Between \$20,001 and \$40,000
 Between \$40,001 and \$60,000
 Between \$60,001 and \$80,000
 Between \$80,001 and \$100,000
 Between \$100,001 and \$150,000
 Between \$150,001 and \$200,000
 Over \$200,000

8. Geographic location

What town or city do you live in or close to? _____

Do you live in an...

- Urban area Rural area

9. Which of these groups describes the last level you completed in formal education?
(Tick all boxes that apply)

- No qualification
 School Certificate
 U.E./Matric/6th Form/Bursary
 Technical or Trade Qualification
 University Graduate
 Other Tertiary Qualification

Is there anything else you would like to tell us in relation to exclusion contracts or the process of getting these?

Thank-you for taking the time to complete this questionnaire. All your responses will remain anonymous and confidential.

APPENDIX 4
Example of advertisement

AUT
UNIVERSITY

Gambling Research - *can you help?*

AUT University is researching people's experiences of being excluded (barred) from a gambling venue.
If you have been excluded (self- or venue-initiated) from a gambling venue and would like to help with this research,
we'd like to hear from you.

PHONE Katie Palmer on 09 921 9999 extn 7640
or EMAIL katie.palmer@aut.ac.nz
for a researcher to call you back and do the survey with you over the phone.

Or Complete a 20 min survey **ONLINE** at www.aut-grc.ac.nz

ALL INFORMATION GIVEN IN THE SURVEY WILL BE CONFIDENTIAL.

For more information contact:
09 921 9999 extn 7640 and speak with Katie Palmer.

AUT UNIVERSITY **GAMBLING AND ADDICTIONS
RESEARCH CENTRE**