AUSTRALIAN GAMING COUNCIL

Submission to

INDEPENDENT PRICING AND REGULATORY TRIBUNAL

Review into Gambling Harm Minimisation Measures

The AGC welcomes the opportunity to make a submission to the IPART Review into gambling harm minimisation measures.

The objective of the AGC submission is not to comment on individual "harm minimisation" or consumer protection measures, but to propose a public policy framework consistent with minimising the prevalence of and reducing the incidence, of gambling problems in the community.

The AGC acknowledges and applauds the approach taken by the Tribunal to recognise varying degrees of risk and therefore the need to target measures according to resilience and vulnerability. It also acknowledges the Tribunal's caution not to oversimplify cause and effect, for example: a decrease in revenue automatically leads to a decrease in problem gambling.

This submission uses the term "gambling" in a generic sense and is not restricted to gaming machine play.

ABOUT THE AGC

The AGC was formed by leaders of Australia's gambling industries in June 2000. Its members are from all sectors of the gambling industries, including manufacturers, wagering, licensed operators, hotels, casinos, lotteries across all states.

The AGC is committed to a sustainable gambling industry that provides entertainment and economic benefits and one that reduces the potential for people to develop gambling problems.

The AGC's priorities include:

- Establishing a platform of independent scientific knowledge and expert advice on issues related to responsible and problematic gambling,

- Facilitating high quality, independent and publicly available research,

- Employing the findings of research, scientific knowledge and expert advice to inform public policy, industry practice and community understanding.

AGC research priorities focus on prevention and customer assistance strategies to inform industry practice.

Research will be:

- Developed in collaboration and consultation with key stakeholders

- Subject to the scrutiny of peer review to ensure the highest standards,

- Communicated to stakeholders to exchange views and explore implications to ensure the benefits of findings are captured.

<u>CONTENTS</u>

The AGC submission is in three parts:

1.   Public Policy Framework
2.   Approaches to Consumer Protection
3.   AGC Research Program

Please note:

For the purposes of this paper, consumer protection measures are elements of a responsible gaming strategy. Harm minimisation measures can refer to responsible gaming or treatment strategies.

OVERVIEW

The AGC believes that a discussion of "harm minimisation" is best understood in a framework, which establishes clear objectives, criteria and principles against which to assess measures.

The AGC endorses a policy development framework for gambling that takes account of costs and benefits and is multi-dimensional in its approach to reduce gambling related harm. It should recognise the range of gambling behaviours and prevention, harm minimisation and treatment strategies appropriate to build resilient communities and to target vulnerable groups.

The AGC proposes the following objectives for harm minimisation (responsible gaming) strategies:

- Minimise the incidence of problem gambling by aiming to prevent consumers at risk from developing problems with their gambling;

- Reduce the prevalence of problem gambling by assisting people who have a problem with their gambling[1];

- Preserve the consumer benefits associated with gambling for the vast majority of consumers.

The AGC proposes the following principles to guide the development of harm minimisation (responsible gaming) strategies:

- Consumers should have freedom of choice regarding their gambling options;
- Consumers should have the opportunity to make informed and responsible decisions, based on their personal preferences and individual circumstances;
- Problem gambling behaviours are not uniform and strategies to reduce the incidence and mitigate the prevalence must be based on an understanding of the different "pathways"[2] and profiles that lead to gambling problems;
- Intrusive measures are unlikely to work;
- Addressing problem gambling is a shared responsibility of individuals, industry, governments, community groups and treatment providers – this is consistent with a public health framework approach.

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[1] "Incidence is the number of new cases arising in a given time period, and prevalence is the average total number of cases during a given time period", Pathological Gambling: A Critical Review, Committee on the Social and Economic Impact of Pathological Gambling, National Research Council, Washington D.C., National Academy Press, 1999..

[2] Blaszczynski A., Pathways to Pathological Gambling: Identifying Typologies, eGambling, March 2000, Issue 1

- Outcomes and progress in dealing with and overcoming problem gambling must be measured.[3]

The AGC notes two contrasting models for harm minimisation (responsible gambling) strategies:

- Measures that seek to provide incentives and tools for consumers to gamble responsibly (according to their personal preference and individual circumstances) and industry to act responsibly,

- Measures that seek to mandate or control consumer behaviour to force a pattern of "responsible gambling"

The AGC notes that strategies for informed choice, early intervention, staff training and safety net options provide measures consistent with a public health framework to protect vulnerable groups, and to promote resilience in the community. Moreover, they seek to address erroneous beliefs about gambling and promote an environment and culture of consumer protection.

Mandatory measures (such as slowing spin rates, mandatory breaks in play), often have unintended consequences and may result in consumers adapting their behaviour to suit the changed circumstances. This can be observed from the limited applied research available. Mandatory measures may also be misplaced insofar as they seek to "help" problem gamblers, who are best served by seeking professional service.

AGC Research

The AGC's view is that future research should focus on:

- Informed choice
- Early intervention and staff training
- Safety net options.

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[3] Blaszczynski A., Ladouceur R., & Shaffer H. J. (in press). A science-based framework for responsible gambling: the Reno model. Journal of Gambling Studies

POLICY FRAMEWORK

A meaningful discussion of how to protect consumers, or reduce harm, in the AGC's view, is best understood in a policy framework with clear objectives, criteria and principles against which to assess policy options.

A Public Health Perspective

A public health perspective proposes a methodology for understanding gambling behaviour in a multi-dimensional framework. It takes account of the costs and benefits of gambling and recognises prevention, harm minimisation and treatment strategies for vulnerable segments of the population and to build resilience in the community.

According to Shaffer and Korn, "like most public health matters, there is a complex relationship among multiple determinants. This confluence can produce a variety of possible outcomes ranging from desirable to undesirable. Applied to gambling, this public health paradigm invites consideration of a broad array of prevention, harm reduction and treatment strategies directed to various elements of the model."[4]

The public health framework for gambling is summarised in Figure 1

Figure 1: A Public Health Framework for Gambling
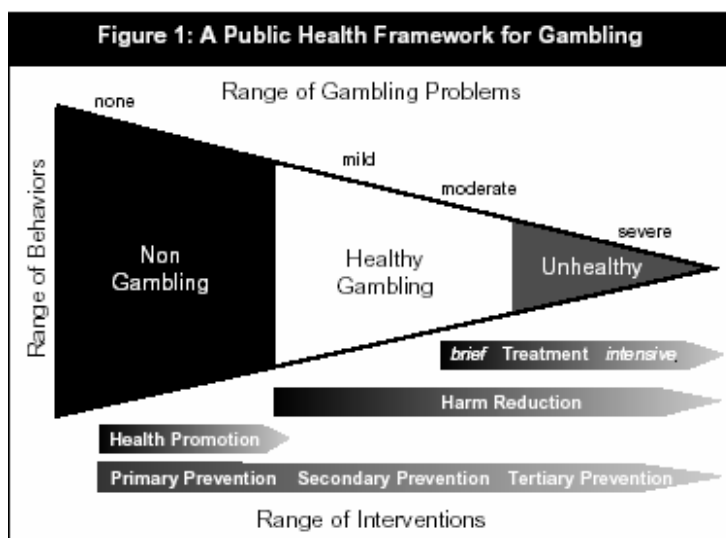
The public health framework correlates to the Tribunal's "focus on the effect of harm minimisation measures on problem gamblers, "at risk" gamblers and gamblers in general.

[4] Korn D., & Shaffer H., Gambling and the Health of the Public: Adopting a Public Health Perspective, Journal of Gambling Studies, Volume 15, No. 4, p. 289.

It is also consistent with public policy approaches for other industries associated with personal risk and potential negative social outcomes, such as alcohol or motor vehicle usage, where a public health model has been adopted.

To reduce alcohol abuse, public health policy seeks to understand vulnerable groups and risk factors. Strategies include active promotion of responsible drinking habits by providing consumer information on the consequences of excessive consumption and targeted campaigns aimed to influence "at risk" groups, ie youth binge drinking.

Objectives for Responsible Gambling Strategy

Public policy in the gambling sector has often been characterised by unclear and conflicting objectives, little or no scientific criteria or empirical research and a lack of benchmarks against which outcomes can be measured.

The AGC supports the approach taken the Productivity Commission, which focuses on balancing costs and benefits versus an unrealistic goal of total harm prevention.

The Productivity Commission proposed that rather than "imposing or tightening a constraint on the amount of gambling" policy should "seek to meet the recreational demand for gambling while reducing the social costs associated with each unit thereof."

The Commission went on to say that it "does not favour measures which reduce the social costs of gambling no matter what the sacrifice to the private benefits". Rather, its approach was to "seek ways that, as far as practical, reduce the social costs of gambling without reducing the benefits."

The AGC agrees that it is impractical and untenable to have "zero risk" as an objective. As the Commission commented, this would lead to "banning of everything that causes harm including things that entail substantial net benefits to the community."[5]

Korn and Shaffer[6] propose the following objectives for public health policy in gambling:

- "**Prevent** gambling-related problem in individuals and groups at risk of gambling addiction,

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[5] Productivity Commission 1999, Australia's Gambling Industries, Report No. 10
[6] Korn D., & Shaffer H., Gambling and the Health of the Public: Adopting a Public Health Perspective, Journal of Gambling Studies, Volume 15, No. 4, p. 289.

- **Promote** informed and balanced attitudes, behaviours and policies towards gambling and gamblers both by individuals and by communities, and
- **Protect** vulnerable groups from gambling-related harm"

Drawing on the above discussion, the AGC proposes the following objectives for responsible gambling strategies:

- Minimise the incidence of problem gambling by aiming to prevent consumers at risk from developing problems with their gambling,

- Reduce the prevalence of problem gambling by assisting people who have a problem with their gambling,

- Preserve the consumer benefits associated with gambling for the vast majority of consumers.

Here, incidence describes the number of new cases of problem gambling and prevalence, the proportion of the population at any point of time, estimated to have a problem with their gambling.

Principles to Guide Responsible Gambling Strategies

The AGC endorses the following policy principles to guide the development of responsible gambling strategies, consistent with the above objectives and a public health approach to dealing with problem gambling.

These principles are based on the **Reno Model. [7]**

- Consumers have freedom of choice regarding their gambling options;
- Consumers should have the opportunity to make informed and responsible decisions, based on their personal preferences and individual circumstances;
- Problem gambling behaviours are not uniform and strategies to reduce the incidence and mitigate the prevalence must be based on an understanding of the different "pathways"[8] and profiles that lead to gambling problems;
- Intrusive measures, designed to control or mandate consumer behaviour are unlikely to work;

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[7] Blaszczynski A., Ladouceur R., & Shaffer H. J. (in press). A science-based framework for responsible gambling: the Reno model. Journal of Gambling Studies

[8] Blaszczynski A., Pathways to Pathological Gambling: Identifying Typologies, eGambling March 2000, Issue 1

- Addressing problem gambling is a shared responsibility of individuals, industry, governments, community groups and treatment providers;
- Outcomes and progress in dealing with and overcoming problem gambling must be measured.

APPROACHES TO HARM MINIMISATION

Two trends have emerged in consumer protection and harm minimisation in gambling:

- Measures to provide incentives and tools for individuals to gamble responsibly, according to their individual preferences and personal circumstances, and for industry to act in a socially responsible way.

- Measures that seek to mandate or control consumer behaviour to force a pattern of "responsible gambling".

These approaches are discussed below.

Strategies for responsible gambling (industry and individuals)

The **Reno Model** defines responsible gambling as "policies and practices designed to prevent and reduce any potential harms associated with gambling; these policies and practices often incorporate a diverse range of interventions designed to guarantee consumer protection, community/consumer awareness and education, harm minimisation and effective access to efficacious treatment."

The section below discusses a range of possible industry strategies for responsible gambling, ie measures to "reduce the rate of development of new cases of gambling related disorders".

Informed Choice

The **Reno Model**[9] proposes as a central tenet, that the ultimate decision to gamble is with the individual – gambling represents a choice and to make the decision properly, consumers must be provided with the opportunity to be informed.

Similarly, the UK treatment provider, GAMCARE[10] states,

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[9] Blaszczynski A., Ladouceur R., & Shaffer H. J. (in press). A science-based framework for responsible gambling: the Reno model. Journal of Gambling Studies

[10] Gamcare, Registered Charity in London, Paul Bellringer OBE Chief Executive

"The responsibility for an individual's gambling is their own, the responsibility to exercise a duty of care is that of the operator."

Informed choice establishes a set of conditions under which competent individuals make decisions based on the appropriate information, which has been adequately understood, and in arriving at a decision, the individual has not been subject to coercion or undue influence or inducement.[11]

There are several issues involved in satisfying these conditions for potential consumers of gambling products.

First of all there is no consensus on what defines appropriate information. The Reno Model suggests that the probability of winning and pay rates is likely to be insufficient. The key reason is that while this information communicates factual data, it does not address the propensity of gamblers to hold erroneous beliefs about the nature of gambling and ability to control random events.

Erroneous beliefs are commonly associated with an illusion that the player can win or control the outcome of play. Providing the appropriate information therefore requires an adequate understanding of beliefs and attitudes that influence gambling behaviour. Unless attitudes and beliefs are modified to be cognisant of relevant information, there is unlikely to be any impact on gambling behaviour.

Shaffer and Korn[12] suggest harm reduction strategies for gamblers, for example, healthy gambling guidelines, like low drinking guidelines in the alcohol industry.

Proactive Strategies

Proactive Strategies aim to prevent "at risk" gamblers from migrating to problem gambling.

Initiatives to achieve this from an industry perspective include:

- Staff training to be aware of and to offer assistance to customers that may have a problem with their gambling. Current Issues Related to Identifying the Problem Gambler in the Gaming Venue[13], provides a

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[11] Council for International Organisations of Medical Sciences, International Ethical Guidelines for Biomedical Research Involving Human Subjects, November 2002

[12] Korn D., & Shaffer H., Gambling and the Health of the Public: Adopting a Public Health Perspective, Journal of Gambling Studies, Volume 15, No. 4, p. 289.

[13] Allcock C, Editor Identifying the Problem Gambler in the Gambling Venue Australian Gaming Council, August 2002

body of expert advice regarding what might be problem gambling behaviours and how staff should deal with customers presenting with potential problem gambling behavious.

- House policies, clear lines for accountability, reporting mechanisms and follow-up procedures for dealing with responsible gambling issues, such as calls from family and friends regarding customers.

- Work place culture that encourages and fosters customer care and social responsibility.

Safety net options

The **Reno model** makes an important distinction between policies to promote consumer protection and policies to promote effective treatment of diagnosed problem gambling behaviour.

The measures discussed below seek to promote effective treatment for individuals assessed clinically to have a gambling problem.

The principle measures are:

Self-exclusion programs and other safety net options.

The AGC is currently researching elements of effective self-exclusion programs, to understand better from a behavioural science perspective, the concept of self-exclusion, the objectives of self-exclusion, the conditions under which the objectives are likely to be met, the likelihood of success and how to measure success and failure.

Other safety net options are also being explored, principally, how industry can integrate and co-ordinate self-exclusion and customer assistance programs with professional treatment providers and support services.

Strategies for mandating play

For the purposes of this paper, "mandating play" refers to measures contained in the IPART paper, such as slower spin rates, forced payment of wins, mandated smart cards, removal of visual and sound stimuli, reduction of maximum permissible win and restrictions on note acceptors.

The AGC's view, supported by available research and expert opinion, is that these measures are unlikely to achieve the objectives of reducing incidence or minimising prevalence. Nor do they meet the criteria for developing consumer protection, or responsible gambling measures.

As the Tribunal is no doubt aware, little applied research exists on the efficacy of harm minimisation or responsible gambling measures.

The AGC is aware of two landmark studies.

The Nova Scotia Gambling Corporation introduced "responsible gambling features" (RFGs) to VLTs in May 2001.

These measures were:

- Permanent on-screen clocks,
- Amounts wagered in dollars and cents, not credits,
- Pop-up reminders at 60, 90 and 120 minutes of continuous play,
- 5 minute cash out warning at 145 minutes of continuous play and mandatory cash out at 150 minutes.

Focal Research consultants, Dr Tony Schellinck and Tracy Schrans[14], were commissioned to review the impact of the new machines in moderating problem gambling behaviours to examine:

- Awareness and exposure to features,
- Effect on player behaviour, perceptions and attitudes,
- Possible improvements to the RGFs to enhance their effectiveness in mediating excessive play (primarily according to the Canadian Problem Gambling Index).

The results were mixed.

- The percent of times players reported losing track of time and money, or playing beyond desired time limits declined for all players, most strongly for those taking up regular play on new machines;

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[14] Schellinck T., Schrans T., Responsible Gaming Features on Video Lottery Terminals, September 2003

- The average session duration declined marginally for those switching to the new terminals from 136 minutes to 114 minutes;

- There was no significant change in the average amount of money spent each time played;

- On a machine basis, not a per player basis, the amount spent per minute increased. The rate of expenditure was higher on the new machines than on the old terminals;

- Entrenched player behaviours, such as cashing out and continuing to play or running credits down to zero before putting in more money and chasing losses have implications for the effectiveness of some of the responsible gaming features, specifically the pop-up reminders and mandatory cash out. These behaviours tend to reset the internal clock for the pop-up reminders and they are avoided altogether. Subsequently, harmful behaviour such as chasing losses may continue;

- Interestingly, players rated the bill acceptors as more effective than some responsible gambling features in assisting them to manage time and money spent. In fact, the stability of expenditure within a shorter time period was partly attributed to the addition of bill acceptors, which assisted players in setting a budget.

Dr Michael Walker's peer review of the study is attached.

The other significant study was by the University of Sydney.[15]

The study examined 3 proposed modifications to egms:

- Removal of note acceptors
- Slowing the speed of play
- Reducing the maximum bet from $10 to $1

The impact of these measures was reviewed in terms of "harm minimisation" and enjoyment.

In summary, the findings were that:

- Removing note acceptors had no impact on "harm minimisation" and was "neutral" in terms of enjoyment;

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[15] Blaszczynski A., Sharpe L., Walker M., The Assessment of the Impact of the Reconfiguration on electronic Gaming Machines as Harm Minimisation Strategies for Problem Gambling, November 2001

- Slowing the speed of game had no impact on "harm minimisation" and decreased the enjoyment factor for problem gamblers and for recreational gamblers;

- Reducing the maximum bet had some impact on "harm minimisation" and increased the enjoyment factor for problem gamblers, but reduced it for recreational players.

Implications

The AGC suggests the following in relation to features to mandate play.

Firstly, player behaviour appears to adapt to the changed conditions, which may explain, in part, why problem gambling incidence rates are similar around the world[16], despite variations in types of machine, EGMs versus VLT's, with or without note acceptors, etc. One theory suggests that players have goal driven behaviour, which accounts for the adaption of play to meet the goals of the player.

Professor Ladouceur notes "Informed Consent should be based on knowledge of relevant variables available and not on an intrusive or imposed attitude from a third party. Intrusiveness is not the way to promote responsible gambling and it may even produce deleterious effects." [17]

Secondly, these features may confuse objective of consumer protection, harm minimisation and treatment. The **Reno Model** notes that the primary objective of consumer protection is to prevent the development of new cases. Players who have developed a diagnosed problem require professional treatment including counselling and other health services.

Finally, these measures may be inconsistent with the objectives, insofar as they diminish player enjoyment without evidence of a reduction in social costs.

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[16] Australian Gaming Council A Database on Australia's Gambling Industries, 2003
[17] R. Ladouceur – Training materials 2002

AGC RESEARCH PROGRAM

The AGC research facilitation program has three components:

- Informed choice

- Early intervention strategies

- Safety net options

As a starting point, the AGC established the **Responsible Gaming Code: A Framework for Responsible Gaming**[18].   The Framework Code was the first of its kind in Australia to be applicable to all venues.

The Framework Code emphasises the importance of evidence based measures and commits the AGC to facilitate research to better understand the causes and possible preventions of problem gambling.

The AGC's initial research has been to inform staff training, to better understand observable behaviours associated with problem gambling. **Current Issues Related to Identifying the Problem Gambler in the Gambling Venue**[19], was a ground breaking piece of work, drawing on the expertise of internationally respected authorities on gambling behaviour.

It is an example of how pragmatic research can be employed to address key issues that shape policy responses to problem gambling. In this case, the discussion paper has been used by governments, industry and educators to inform aspects of staff training and effective customer assistance in situations where customers may be experiencing problems with their gambling.

The AGC Framework Code is currently being redrafted to reflect the findings of the research, to ensure that industry practices are evidence based and most importantly, to further develop a culture of social responsibility in the gambling industry by setting a high benchmark of accountability.

The AGC is currently undertaking research regarding **Self-Exclusion and Other Safety Net Options**[20], which investigates self exclusion programs from first principles.

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[18] Australian Gaming Council, Responsible Gaming Code A Framework For Responsible Gaming, September 2001

[19] Allcock C. Editor, Current Issues Related to Identifying the Problem Gambler in the Gambling Venue, Australian Gaming Council, August 2002
[20] Ladouceur R., Blaszczynski A., Nower L., (in press) Self Exclusion and Other Safety Net Options, Australian Gaming Council

Despite the importance placed on self-exclusion as an tool to assist problem gamblers, there is little research to the conditions under which self exclusion is effective and how to measure its success.

The AGC is undertaking this comprehensive research project, to better understand self-exclusion from first principles, to inform industry practice and to provide community confidence.

ATLANTIC LOTTERY CORPORATION
VIDEO LOTTERY
RESPONSIBLE GAMING FEATURE
RESEARCH

An Evaluation by Professor Michael Walker

The evaluation that follows is an attempt to answer some of the critical questions being asked about the Responsible Gaming Features Study (the RGF study) reported by Schellink & Schrans (Oct, 2002). The research was conducted from May 2001 to February 2002 to evaluate the effect of various harm minimisation features on the time and money expenditure of VL players.

How good are the credentials of the researchers?

Tony Schellink and Tracy Schrans designed, conducted and published a landmark study of VL play in Nova Scotia in 1998. That research is widely regarded in the academic community as the best designed and most reliable survey research conducted anywhere and at any time in the area of gambling. The results are the basis of the best insights currently available on the motivations and behaviour of slot machine players. Professor Schellink has an extensive history of survey research in the area of lotteries. There is no question that the results of the RGF study are legitimate and the product of carefully designed and implemented research strategies.

What did the RGF study investigate?

The harm minimisation features under investigated were:
(a)   a clock visible on the machine;
(b)   bets, wins and total cash shown in dollars and cents (not credits);
(c)   screen messages after continuous play for 60, 90, 120 minutes;
(d)   mandatory pay out at 150 minutes with a warning at 145 minutes.

The expectation was that individuals playing machines equipped with these features would on the whole play for a shorter period of time and lose less money. It was expected that each of the features would have a greater effect for problem gamblers that for low risk regular gamblers. Each RGF machine was equipped with all of the features listed.

What did the RGF study find out?

Although many analyses were conducted, the critical analyses were those that compared the time and money spent by players who in the course of the research switched from playing the older non-RGF machines most of the time (75%+) to playing the RGF

machines most of the time (called "switchers"). Especially important was the relative impact on problem gamblers.

The results show that:
- the average session length of switchers decreased significantly from 136 minutes on the older machines to 114 minutes on the RGF machines;
- the average expenditure (loss) per session was not significantly different for the older machines ($61.58) compared to the RGF machines ($60).

Sample size precluded analysis of whether problem gamblers are affected differently from non-problem gamblers by the RGFs.

Some indicative results are obtained by comparing problem gamblers who were aware of the new features with those who were not:
- players with a high risk of problem gambling who were exposed to the 60 minute message reported reduced expenditure relative to those not exposed to the message. This effect was not present for the 90 or 120 minute messages;
- similarly the 5 minute warning for cash out had no relative effects.

How do we understand the main results?

Essentially, on average, players reported losing the same money in shorter sessions when playing the new RGF machines. The implication is that the new machines involved a higher rate of expenditure by players. Various explanations include:

- the new RGF machines had faster games;
- the new RGF machines had bill acceptors;
- players may have played the new games differently (eg higher credits/line).

It is known that the new RGF machines contained new games which proved attractive to many of the players. The authors refer to the faster speed of play on the RGF machines as "an unexpected aspect of the new machines" (p.2-40).

How were all the various effects disentangled?

Two statistical approaches were used:
(1) analysis of adopters (people who played the RGF machines) versus non-adopters;
(2) analysis of switchers versus non-switchers.

The analysis of adopters is reported in section 2 (the General Overview) whereas analysis of switchers is contained in section 4 (impact of RGFs on session length and expenditure).

In the analysis of adopters, the statistical analysis is straightforward and conclusions are conservative. The various unwanted effects are described including:

(1) <u>regression to the mean</u>. By selecting high frequency players to start with, some regression to the mean would be expected in expenditure and time. Some of the players might have had a specially heavy gambling month and later months would decrease. Those who had a light month may not have been selected due to less availability.

(2) <u>change in rate of expenditure</u>. see above.

(3) <u>rates of attraction to the RGF machines</u>. Players with a high risk of problem gambling were more attracted to and adopted the RGF machines compared to low risk players.

These three effects are acknowledged in the adoption study and discussed in reaching conclusions.

In the analysis of switchers, a more complex analysis is conducted in which a large number of factors associated with problem gambling (other than RGFs) are factored in.

What does the report recommend?

- clock
  Have a permanent clock on machines and make it distinctive. There is also a suggestion that the clock might be made available to players to pre-set their session length.

- <u>cash display</u>
  Move from credit display machines to cash display machines. There is a suggestion to explore machine-based budgetting features as well.

- <u>messages</u>
  Retain the messages after 60, 90 & 120 minutes. Furthermore, freeze the display for 15 seconds and continue the display until there is response from the player. Messages every 20 to 30 minutes to be considered.

- <u>mandatory cash out</u>
  Retain the mandatory cash out and warning but give a longer warning period. Also, mandatory cash out after large wins should be considered.

Will the recommended changes have large effects?

In general, it is unlikely that any of the RGFs investigated will have large effects if implemented. The size of the effects observed in the study are low.

- <u>clock</u>
  The clock was not associated decreases in session length or expenditure. However, most players liked having a clock on the machine (72% of those who adopted the new machines). Expectation: little to no effect.

- <u>cash display</u>

A cash display was associated with minimal effects. However, it was the most preferred of the RGFs by players. Expectation: little to no effect.

- messages
  The 90 min and 120 min messages had minimal impact. The 60 minute message was associated with a small reduction in playing time and, for players with a high risk of problem gambling, was associated with a small decrease in expenditure. In general, players did not like the pop-up messages. Expectation: a small beneficial effect.

- mandatory cash out
  Mandatory cash out had no impact on problem players. This feature was disliked and players believed that it would have no beneficial impact. Expectation: no effect.

What differences are there between the NSW study and the Nova Scotia study?

The major difference in methodology between the studies was that the NSW study was conducted primarily by observation whereas the Nova Scotia study was based on self report to a questionnaire administered by telephone. Whereas the NSW study monitored the play of individuals (eg session length, strategy, bet size etc), the Nova Scotia Scotia study asked players to recall such information over the last month.

The major problem with the questionnaire approach is that individuals know that they are part of a study. Such knowledge may sensitise them to various aspects of their play (which may be beneficial) or may facilitate the formation of stereotypes (broad beliefs about play patterns not based on reality but based on expectation).

The major problem with the observational approach is that many measurements are limited to a single session of play.

What differences are there between the NSW Study [1] and the Nova Scotia study?

The major difference in methodology between the studies was that the NSW study was conducted primarily by observation whereas the Nova Scotia study was based on self report in response to a questionnaire administered by telephone. While the NSW study monitored the play of individuals (eg session length, strategy, bet size etc), the Nova Scotia study asked players to recall such information over the last month.

The major problem with the questionnaire approach is that individuals know that they are part of a study. Such knowledge may sensitise them to various aspects of their play (which may be beneficial) or may facilitate the formation of stereotypes (broad beliefs about play patterns not based on reality but based on expectation).

The major problems with the observational approach are that many measurements are limited to a single session of play and players may act abnormally knowing that they are

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[1] Blaszczynski A, Sharpe, L, Walker, M. *The Assessment of the Impact of Reconfiguration on Electronic Gaming Machines as Harm Minimisation Strategies for Problem Gambling*: A Report for the Gaming Industry Operators Group, November 2001.

being observed. In an ideal world questionnaire methods would be combined with observational methods to cross-validate results.