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Moreland City Council

Local Impacts of Electronic Gaming Machine (EGM) Gambling in Moreland

Research Report
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Executive Summary

This document reports the findings of the *2010 – 2011 Local Impacts of Electronic Gaming Machine (EGM) Gambling in Moreland* research. This research was a multi-modal project covering a variety of both qualitative and quantitative components to compile a comprehensive understanding of EGM Gambling in Moreland. The results of this research project will be used to assist with the development of a social marketing plan, undertaking social impact assessments and enhancing land-use planning.

The research consisted of: two deliberative events with relevant service providers and other stakeholders; 20 in-depth interviews with venues, police and relevant community members; two focus groups, one with young people and one with businesses; and a telephone survey with 601 residents within the Moreland City Council (MCC) area. The data reported for the quantitative component of the research has been weighted by age, gender and location to ensure that it is in line with the population distribution for the Council area, as per the 2006 ABS Census data.

This executive summary covers the key findings of all components of the research (qualitative and quantitative), as well as key recommendations for consideration when designing a social marketing plan and programs to address EGM gambling in Moreland.

Demographic Profile

Within the community survey a number of demographic variables were measured to assess the representativeness of the sample against ABS figures (2006 Census) for the Moreland City Council area. As can be seen in the table below, the sample composition is relatively in line with ABS figures.

Suburb <i>(unweighted)</i>	N=	%	ABS 2006 %
Brunswick	90	15%	16%
Brunswick East	34	6%	6%
Brunswick West	54	9%	9%
Coburg	111	19%	18%
Coburg North	25	4%	5%
Fawkner	52	9%	9%
Glenroy	75	13%	14%
Gowanbrae	6	1%	<1%
Hadfield	18	3%	4%
Oak Park	29	5%	3%
Fitzroy North	3	<1%	<1%
Pascoe Vale	70	12%	10%
Pascoe Vale South	34	6%	7%
TOTAL	601	100%	100%

Country Born	%	Moreland ABS 2006 %
Australia	68%	65%
Italy	11%	8%
Greece	3%	3%
United Kingdom	3%	2%
New Zealand	2%	1%
Lebanon	1%	2%
Other	12%	

Occupation	%	Moreland ABS 2006 %
Full time employment	42%	37%
Part time employment	15%	18%
Looking for work	4%	4%
Household duties	4%	40%
Student	7%	
Retired	23%	
Unable to work	3%	

Participation in EGM Gambling in Moreland

The community survey collected a range of data relating to gambling participation amongst Moreland residents, as follows:

- 63% of people said that they had participated in *at least one* form of gambling activity within the 12 months prior to interview, the most common being lotteries (43%).
- 19% admit to having **played an EGM within the 12 months prior to interview**. As at 30 June 2010 the population of the Moreland City Council (MCC) area was estimated to be 150,838, suggesting that almost 30,000 people within the area played an EGM in the 12 months from March 2010 to March 2011.
- There were a number of notable **demographic variations** relating to EGM players:
 - Those with **lower levels of education** show **higher** levels of EGM gambling. 33% of those who had not finished secondary school and 27% those whose highest level of education was completion of year 12 were EGM gamblers. By contrast, only 14% of those who had completed undergraduate and 7% of postgraduate respondents were EGM gamblers;
 - Those with **children in their household** are significantly **less likely** to have played EGMs in the 12 months prior to interview (14%, 22% no children); and
 - Those in **Brunswick West** show significantly **lower** incidence of having played EGMs (6%), whilst incidence of having played EGMs was very **high** in **Glenroy** (34%) and **Oak Park** (38%).
- Much of the EGM gambling amongst Moreland residents is occurring **outside of the MCC area**. 50% named a venue outside of Moreland and 21% named the Melbourne Casino.
 - However, those who gamble within the MCC area will use venues closest to them.
 - The most popular venue within Moreland was **First and Last** (11% named this as their main venue).
- **Selection criteria** for EGM venues revolves around **security aspects** (84% named this as an important selection criteria), followed by **venue staff** (71% named as important).
- The primary **motivations** for playing EGMs are **to be social** (54% said this was a motivation at least some of the time), because it is **fun or exciting** (54%) or to **win big money** (49%).
 - The qualitative component of the research also revealed similar primary motivations, although the findings suggest that at-risk EGM gamblers can also be motivated strongly by life events and/or boredom.

The table below shows the averages for styles of play for EGM gamblers within Moreland.

EGM Behaviour	average
Number of times in the last year played EGMs in a club or hotel	11.6
Percentage of EGM gamblers who played in a club or hotel	85%
Number of times in the last year played EGMs in a casino	2.6
Percentage of EGM gamblers who played in a casino	44%
Time spent during each visit to a poker machine venue	56 mins
Money spent during each visit to a poker machine venue	\$99.80
Calculated estimated spend on EGMs per year	\$12, 508

Problem Gambling Prevalence

The standard nine statement Problem Gambling Severity Index (PGSI) was used within this survey to identify problem gamblers, with the following results. Figures are very similar to Victorian averages, as reported in the 2009 Department of Justice Research*.

It is important to note that the PGSI doesn’t establish which gambling activity the problem is directly associated with, and often gamblers will engage in more than one type of gambling activity.

Please note: problem gambling status cannot be directly assigned to the gambling activity, this is just a guide					
Problem Gambling Index	N=	Non	Low	Moderate	Problem
TOTAL MCC Sample	601	92%	5.3%	1.7%	0.9%
Total Gamblers (MCC Sample)	388	88%	8.2%	2.4%	1.3%
EGM Gamblers (MCC Sample)	122	80%	12.5%	3.6%	4.5%
Victoria 2008 *	15,000	91%	5.7%	2.4%	0.7%

Social Impacts of EGM Gambling in Moreland

Within this research project it was important to cover both the positive and negative potential social impacts of EGM gambling, in order to paint a comprehensive picture. However, in the initial qualitative research people reacted negatively to the suggestion that EGM gambling could have any positive impacts. For the remainder of the project the phrase *inadvertent benefits* was used in place of *positive impacts*.

- Very few (9%) spontaneously mentioned any **inadvertent benefits**.
 - Even after prompting with a number of pre-determined inadvertent benefits of EGM gambling, no more than a quarter agreed that any were in fact of importance to the MCC community. **Employment** and **Revenue for local sporting and community groups** ranked highest, each with 22%.
 - The qualitative research revealed that many believe that these benefits can be achieved through different means, through employment elsewhere or other fundraising activities.
 - Those aged **over 60 years** showed significantly higher incidences of believing EGMs to be beneficial through **providing a social outlet** (27% extremely + somewhat important, compared to 14% average), **providing a safe place to go** (29%, compared to 15% average) and **providing a source of entertainment** (27%, 11% average).
- 74% mentioned **negative impacts** unprompted, specifically financial problems (44%) and family neglect (19%).
 - When prompting with potential negative social impacts, most survey respondents indicated that they believed each impact to be happening in the Moreland City Council area, particularly **financial** (92% believed it to be having some impact), **family issues** (90%) and **depression or anxiety** (90%).
 - This correlates closely with the qualitative findings where the key impacts discussed were the **physical and mental health impacts** (such as lack of exercise, lowered self-esteem and depression), **financial impacts** (such as poverty, not being able to buy food or pay bills) and **family issues** (such as domestic violence and child neglect).

* Department of Justice, (2009), A Study of Gambling in Victoria -Problem Gambling from a Public Health Perspective.



Quality of Life

To assist in better understanding the Moreland community, a series of standardized questions were included in the community survey to explore quality of life. Being standardized, many of these measures can be compared to research results conducted in other areas of the state or indeed the country to see how Moreland compares to other regions. This data will also be valuable in helping to define target markets for social marketing.

- 65% of those living in Moreland consider their **quality of life** to be **excellent** or **very good**.
- 79% believe themselves to be in **excellent**, **very good**, or **good physical condition**.

These findings are fairly consistent across non-gamblers, EGM gamblers and other types of gamblers.

In the qualitative research, the issue of co-morbidities was raised in relation to quality of life issues, with the suggestion that problems with quality of life can be both a trigger to start using EGMs or as a result of EGM use. Furthermore, it was suggested that there is a risk that problem gamblers may be stigmatized as such and hence **socially isolated**, leading to additional mental health problems and reduced quality of life.

At-risk and Problem Gamblers

When breaking out at-risk or problem gamblers (PGSI), quality of life and perceived physical health fall significantly.

- PGSI show **higher** levels of **physical pain** preventing them from doing what they need to do (rating of 2.23, compared to an average of 1.85 where the higher the number the greater the issue).
- PGSI show **higher** incidences of needing **medical treatment** (2.29, compared to an average of 1.94).
- PGSI assign **lower** ratings to their **health** (30% said poor or fair, compared to 21% average).
- PGSI are more likely to have **negative feelings sometimes** (66%, compared to average 35%)
- PGSI are also more likely to use **tobacco products** (47%, compared to 21% average) and **marijuana** (22%, compared to 7% average).
- The incidence of having experienced *any* **financial difficulties** in the year prior to interview was significantly higher amongst those who were identified as low risk, medium risk or problem gamblers (44%, compared to 21% average).

Notable Demographic Variations

There were a number of notable demographic variations revealed through this research.

- The key observed variation by demographic was **age**. Whilst there were similar levels of use amongst the elderly and younger people, the reasons for use were very different. Indeed the qualitative research revealed that some elderly are particularly reliant on EGMs as a safe place to go and as a social outlet.
- **Culturally and Linguistically Diverse (CALD) groups** were identified through the qualitative research as having unique triggers to play, specifically the accessibility of EGMs to those who do not speak English, and the use of gambling related tours to familiarise themselves with the city.

- There is a correlation between **education** and EGM gambling, with incidence of using EGMs dropping in line with an increase in level of education. Indeed, within the qualitative research it was suggested that EGMs are positioned as a low socio-economic activity, and those with further education, and therefore higher incomes, will use other forms of gambling (such as ‘high roller’ rooms at the casino).
- In the qualitative stage it was found that many of the young participants (**under 20 year olds**) perceived personal financial benefits of EGM gambling, suggesting that there is a need for them to be educated about the low odds of winning. Furthermore, they are being exposed to EGM gambling through many popular computer games, so are associating the activity with entertainment. Where they do have negative perceptions of EGM gambling it is primarily driven through directly experiencing the negative impacts when a family member has a problem with gambling.

In Summary

This research revealed the very complex nature of EGM gambling within the Moreland City Council area.

Encouragingly, the incidence of problem gambling does not appear to be higher than the state average, however Moreland clearly has some issues which are unique to the municipality, primarily relating to the large CALD population.

The next pages of this report outline some of the key recommendations from the research, followed by a detailed analysis of both the quantitative and qualitative components.

Strategic Recommendations

It is clear from these findings that in order to reduce the incidence of EGM gambling, and therefore the negative impacts of this activity, it will be necessary to develop a strategy for communicating with the community to educate them of the risks of EGM gambling, as well as developing potential alternative activities for those who use EGM gambling as their primary social activity.

We have outlined below a number of recommendations to assist in facilitating these activities.

Community Awareness Programs

When designing media campaigns or community programs it is important to understand the current attitudes, perceptions and behaviours relating to EGM gambling.

- The **social aspect** is the main component driving people to take up gambling, especially EGM gambling. It needs to be considered that if use of EGMs for this purpose is to be reduced, alternative activities will need to be offered.
- Most people can recognise the negative impacts of EGMs, however those who use them do have a more **positive outlook** on their social impact. Therefore, the challenge will be to convince these current players of EGMs that the activity can be dangerous and educate them on how to **recognise the signs** of there being a problem.
- **Financial problems** are likely to be the most widely understood of the negative impacts, and therefore the primary opportunity when communicating the issues (many spontaneously mentioned this as an issue, 44%, and nearly all recognised it as such after prompting, 92%).
- Whilst many recognised the potential for **negative family impacts**, we would suggest that this may not be as effective an issue for communications as those with children show lower instances of being EGM gamblers. Furthermore, uptake of EGM gambling can often be to escape responsibility, therefore communicating to these people in a way that pushes their need to act responsibly may just perpetuate their problem with EGM gambling.
- There is a correlation between being an at-risk or problem gambler and having a poorer quality of life. In some instances, this reduced quality of life may be due to gambling, whereas in others it may lead to taking up gambling (**co-morbidities**). This finding will need to be taken into account when planning services to assist gamblers, as they will need to also address the quality of life issues faced by these people, including social isolation and mental health.
- Through discussions directly with EGM gamblers it is clear that in addition to traditional television media, providing **assistance information and education** on the risks of EGM gambling **within the venues** is very important.
 - Indeed, it was even felt that having **counselors** within the venues could be of assistance, although an ex-problem gambler feels that people with issues may be more responsive if they can seek assistance in a private setting instead, perhaps by providing them with letterbox flyers on the issue.
- There was a general call for more **shock advertising** to get the message across, using messages illustrating the damage it can do to one's health and one's family.
- However, there was also a call for **positive reinforcement** within the advertising by communicating the benefits of not using EGMs (along with alternative options), such as having more disposable income.

Alternative Activities

There are a number of aspects to take into consideration when designing potential alternative activities for EGM players.

- Alternative activities will need to capture the **fun or excitement** people feel from using EGMs, while being maintainable hobbies or past-times.
- Venues will need to be **easily accessible**, particularly for the elderly. Half of EGM players (50%) will play at a venue within the Moreland City Council area, whilst the other half will go to venues outside of the area, mostly the casino. Those in the older age groups show a greater tendency to visit local venues (63% of 60+ year olds), as do those who are low risk, moderate risk or problem gamblers (70%).
- Venues will also need to feel **safe and secure, provide good customer service, and provide a comfortable environment**, particularly for elderly residents, as these are the primary drivers to selection of an EGM venue. Furthermore, the **hospitality** aspect is of particular importance for those who are low risk, moderate risk or problem gamblers.
- EGM gamblers specifically are not as concerned with the **money aspect** as those who undertake other types of gambling; that is, they less frequently gamble to win money. Therefore, any alternative offerings to encourage participation in activities other than EGM gambling would not need to place as much attention on substituting the 'winning' aspect, but more so the social, recreational and coping aspects. However, alternative activities will still need to appear to be cost effective as many perceive EGM use to be a relatively cheap activity.
- **Co-morbidities** will need to be taken into account. As discussed earlier, there is a correlation between quality of life issues and problem gambling, therefore alternative activities will need to cater for those who are sometimes physically unwell.
- When conducting in-depths with EGM gamblers a number of alternatives activity ideas were put forth:
 - Going to restaurants;
 - Family days and fetes;
 - Walking groups;
 - Day trips to places other than the casino;
 - Venues without EGMs;
 - Carnivals and street parties;
 - Going to the movies;
 - Charity or sporting events;
 - Dancing; and
 - Spending time with the family.

Priority Populations

- **Culturally and Linguistically Diverse (CALD) Communities:** Special consideration will need to be made for people within these communities, both in relation to designing communication campaigns and programs to offer them alternative activities, with particular focus on newly arrived and refugee communities:
 - Need to consider that there are language barriers;
 - Some may have financial difficulties;
 - Many suffer from isolation;
 - There is a fair degree of unfamiliarity with their location; and
 - They may have jobs with non-standard working hours (such as taxi drivers) so would need to have activities available to them outside of standard hours.
- **Older People:** As with CALD communities, consideration needs to be made for the particular traits of elderly EGM players:
 - For many elderly players, going to an EGM venue is their primary form of social interaction;
 - EGM venues are considered a safe place to go away from their homes; and
 - It is a form of entertainment that they are able to participate in without too much physical exertion.

Other Suggested Strategies

- **Changes to EGM machines:** A number of suggestions were made with regards to the machines themselves. Specifically, there was the recommendation that the machines could be set so that people can only play a certain number of games per sitting, or a pre-commitment/card system could be introduced. A further idea was that the machine could have a warning system built in which notifies the player if they have been using the machine for longer than a set amount of time.
- **Changes to the venue:** Suggestions within the qualitative research include having (larger) clocks in the EGM rooms, alter the temperature of the venue so it is not as comfortable (e.g. too cold) and shorten the opening hours for EGM venues.

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Project Overview

Background and Objectives

Moreland City Council commissioned the Social Research Centre to undertake research into the social impact of Electronic Gaming Machine (EGM) gambling in the Moreland area.

Aim:

To gather social evidence of the local impacts of Electronic Gaming Machines (EGMs) on the Moreland community

The Social Research Centre brought on board the Problem Gambling Research and Treatment Centre (PGRTC) to assist with research design and analysis.

The key objectives of the research project were as follows:

- Develop an evidence base about the social impact of EGMs;
- Gather information on gambling activity in the area;
- Explore community attitudes and perceptions towards EGM gambling;
- Understand community perceptions of the local impacts of EGM gambling (positive and negative); and
- Gather data to ascertain the local impacts of EGM gambling.

It is envisaged that this research will be used in a number of ways:

- Policy development;
- Program development;
- Marketing strategy; and
- Planning permit assessment.

The research project included two components, a quantitative phase and a qualitative phase. The following report provides the results for each of these phases, leading with the quantitative findings which provide data on the community. The second part of the report covers the qualitative findings, which provide greater insight into the particular issues relating to EGM gambling in the Moreland area.

Quantitative Research Methodology

The quantitative research component of this project involved Computer Assisted Telephone Interviewing (CATI) a random sample of the Moreland community, using SampleWorx sample provision, which is based on Random Digit Dial (RDD) number generation.

Interviewing was conducted from the 2nd to the 25th of March 2011, with a total of n=601 interviews achieved. The average interview length was 17.5 minutes with a rate of 1.9 completed interviews per hour.

The field team was advised to aim to achieve a set of quotas by age, gender and suburb. These quotas were calculated using ABS Census data with the aim of achieving a representative distribution of individuals from the Moreland City Council area. However, given the difficulty in reaching certain demographics over the telephone, these were set as a guide rather than being rigid requirements. Some weighting was needed to readjust the data to ensure representation. Data was weighted to 2006 ABS Census figures to represent the population by gender and age range for the Moreland City Council area. The final sample numbers were as follows:

Age and Gender		Sample N=	Population	Target Sample	Weight
Males	18-24	36	6,805	41	1.14
	25-39	57	18,016	109	1.91
	40-59	126	10,631	64	0.51
	60+	99	12,135	73	0.74
Females	18-24	15	6,961	42	2.80
	25-39	83	18,500	112	1.35
	40-59	67	11,132	67	1.00
	60+	118	15,372	93	0.79

Given the higher than average representation of individuals from diverse cultural backgrounds living within the Moreland Local Government area, this research was designed to cater for up to 20% of interviews being conducted in languages other than English (LOTE). The final sample includes 14% of surveys conducted in LOTE (unweighted), with 64 in Italian, 16 in Greek and 4 in Arabic. There were also a number of interviews conducted in English with individuals whose main language at home was something other than English. When combining this with LOTE interviews, the total proportion of surveys conducted with people who mainly speak a language other than English at home was 20%.



Qualitative Research Methodology

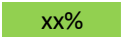
The qualitative component of this research project involved a number of different modules, conducted at different times, as follows. A detailed account of these components is included in the technical report (separate document) for this project:

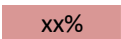
- **Deliberative Events** – At the commencement of the project the Social Research Centre conducted 2 x 3 hour deliberative events. The first was held on the 2nd of December 2010 with 9 attendees and the second was held on the 9th of December 2010 with 11 attendees. The participants within these events were drawn from lists of relevant service providers and stakeholders as provided by Moreland City Council. The event was facilitated by consultants from the Social Research Centre and involved a number of components to guide participants through a detailed discussion of EGM Gambling in Moreland, specific to the social impacts. The findings from these deliberative events have been included in the following qualitative report, and were also used to assist in developing the questionnaire materials for the quantitative stage of the project.
- **Pre-survey in-depths** – Prior to the quantitative research, consultants at the Social Research Centre conducted 6 in-depth interviews with EGM venue operators and police officers. The names and contact details for these were provided by Moreland City Council. These interviews were mostly conducted face to face at the respondents place of employment. These in-depth interviews provided valuable insight into the current state of play of EGM gambling within the Moreland area and assisted in fine-tuning the quantitative survey tool. In addition, relevant findings have been included within the following section of this report.
- **Mini-groups** – In early 2011 the Social Research Centre conducted two mini-groups, one with youth and one with businesses within the Moreland area. In order to ensure the confidentiality of participants in these groups, the recruiting methodology has been omitted from this report, as revealing this information would result in the easy identification of participants. The youth group consisted of 10 participants aged between 11 and 18, and the business group consisted of general business local to the Moreland City Council area. Findings from these two focus groups have been integrated into the following results section of this report, where relevant.
- **Post-survey telephone in-depths** – After completion of the quantitative survey in early 2011, 12 in-depth interviews were conducted with persons of note from the quantitative survey. Within the survey all respondents were asked if they were happy to be re-contacted for in-depth interviews and those who said yes were then extracted from the sample and contacted to invite them to participate in a 30 minute in-depth telephone interview. Respondents were offered an incentive of \$50 each, as a Coles Myer Voucher, for completing the interview. It was found to be very difficult to reach people who were problem gamblers within this component of the research due to the very low incidence within the quantitative sample, however we were able to speak to one problem gambler. These in-depths were primarily conducted with EGM gamblers, although a number were targeted toward elderly people in an attempt to better understand this market.

Notes on Charts / Tables

A number of methods have been used within this report to highlight statistically significant differences (at 95% confidence), as follows:

  shows a significantly high or low result at 95% confidence level, when compared to the total.

 Shows a significantly higher or lower incidence at 95% level of confidence between a particular group and the total.



The results presented in this document show weighted data, unless otherwise specified. Where a n value is presented (number of people who fall into a category) this represents the unweighted sample number.

Information is included below each chart to report the sample base, and question filtering, question format (weighted or unweighted, prompted or unprompted, single or multiple response) and question text.

Findings where the overall sample size is less than 30 have been marked with a # and should be considered as indicative only.

In some instances, totals may not add up to 100%. This may be due to either rounding and/or multiple responses being permitted.

Glossary

EGMs	Electronic Gaming Machines
ABS	Australian Bureau of Statistics
MCC	Moreland City Council
CATI	Computer Assisted Telephone Interviewing
PGSI	Problem Gambling Severity Index. Where used in charts and tables it represents all of those identified as low risk, moderate risk or problem gamblers.
CALD	Culturally and Linguistically Diverse

Quantitative Research

Community Survey to
Identify the Local Social
Impacts of EGMs



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1.1 Demographic Profile

1.1.1 Age, Gender and Location

The demographic profile outlined below shows the unweighted data. Whilst there were no solid quotas defined for this research, the introduction was altered to target key groups of demographics in order to obtain a sample structure as close to the Census statistics as possible. There are limitations with reaching those under the age of 40 years through landline telephone research, therefore it was difficult to achieve these targets.

Table 1.1.1a Age and Gender

Age and Gender		N=	Survey %		Moreland ABS 2006 %	
Males	18-24	36	6%	53%	7%	48%
	25-39	57	10%		18%	
	40-59	126	21%		11%	
	60+	99	17%		12%	
Females	18-24	15	3%	47%	7%	52%
	25-29	83	14%		19%	
	40-59	67	11%		11%	
	60+	118	20%		15%	
TOTAL		601	100%		(unweighted)	

All respondents were asked to clarify their suburb, with loose quotas set for each suburb, to ensure representation across the Moreland City Council area.

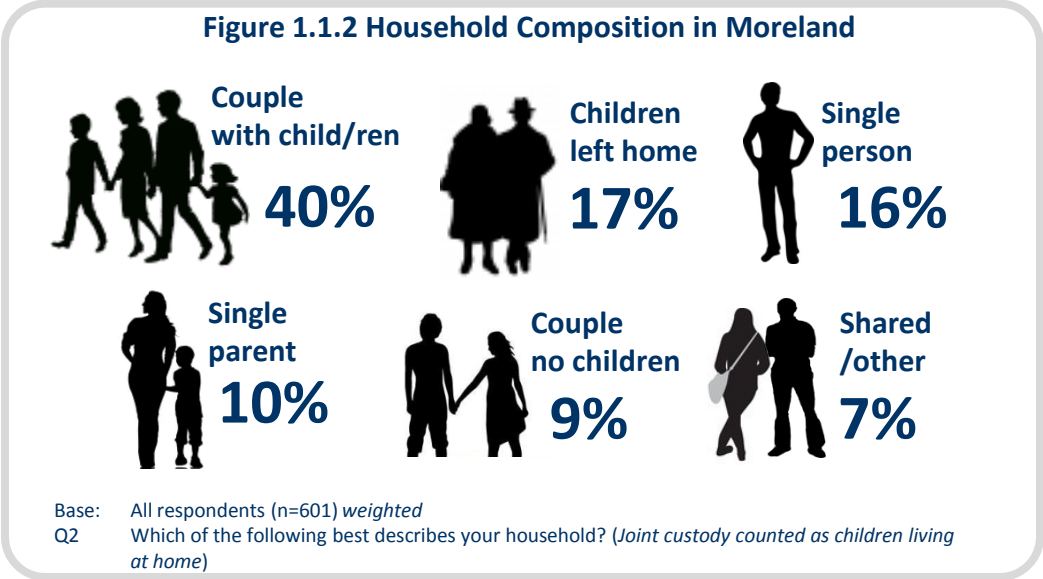
Table 1.1.1b Suburb

Suburb (unweighted)	N=	Survey %	ABS 2006 %
Brunswick	90	15%	16%
Brunswick East	34	6%	6%
Brunswick West	54	9%	9%
Coburg	111	19%	18%
Coburg North	25	4%	5%
Fawkner	52	9%	9%
Glenroy	75	13%	14%
Gowanbrae	6	1%	<1%
Hadfield	18	3%	4%
Oak Park	29	5%	3%
Fitzroy North	3	<1%	<1%
Pascoe Vale	70	12%	10%
Pascoe Vale South	34	6%	7%
TOTAL	601	100%	100%

1.1.2 Household Composition

A number of questions were asked to understand household composition. Firstly, respondents were asked to specify if there was anyone in their household, including themselves, within certain age ranges. Analysis of the results for this question show that 35% have children under the age of 18 in their household. For context purposes, the Moreland community profile (based on the 2006 Census) reports that 36% of households have children aged 15 or under. This would be a little higher when factoring in the 16 to 17 year olds (2% of the Moreland population, according to the 2006 Census data), but is still very similar to the survey findings.

When asked to specify their household structure, half said that they were in households with at least one parent and one child present. This is considerably higher than the *under 18* figure (35%), presumably due to there being a proportion of households where the child stays in the family home past the age of 18.



1.1.3 Occupation

As is generally the case with landline telephone surveying, the sample for this research covers a slightly higher proportion of part time and not employed people than the population distribution as reported in the 2006 Census.

Table 1.1.3 Occupation

Occupation	Survey %	Moreland ABS 2006 %
Full time employment	42%	37%
Part time employment	15%	18%
Looking for work	4%	4%
Household duties	4%	40%
Student	7%	
Retired	23%	
Unable to work	3%	

Base: All respondents (n=601) *weighted*
Q3 What is your current occupational status?

1.1.4 Income

Almost one in four (39%) of those surveyed indicated that they were receiving some sort of government pension at the time of interview. When asked to specify personal income, more than half (55%) said that their personal income was less than \$40,000 per annum before tax.

When comparing *personal income* sample structure with 2006 Census data for Moreland City Council Local Government Area some estimations have been made due to differences in categorisation. In the Census, 72% indicated their income to be \$41,599 or less, which can be loosely compared to 55% of the sample who said their income was less than \$40,000. In the Census, 23% gave a personal income range of \$41,600 to \$83,199, compared to 29% of the sample within the \$40,000 to \$80,000 range. Finally, the 2006 Census reports 5% to be individually earning \$83,200 or more, compared to 16% of the sample in the \$80,000 + income range. Given that incomes typically increase on an annual basis it is understandable that the sample structure leans towards the higher end of the spectrum when compared to population data from five years ago.

Table 1.1.4 Income

Income (before tax)	Survey %	Moreland ABS 2006 % (approx)
Less than \$25,000	41%	72%
\$25,000 to \$39,999	15%	
\$40,000 to \$64,999	18%	23%
\$65,000 to \$79,999	11%	
\$80,000 to \$129,999	9%	5%
\$130,000 or more	7%	

Don't know/refused 14%

Base: All respondents (n=601) *weighted*
Q5 Could you please tell me your approximate annual PERSONAL income BEFORE TAX?

1.1.5 Education

The sample for this research shows a higher representation of people who say they have been educated beyond year 12 level when compared to the 2006 Census data for the area.

Table 1.1.5 Education

Education	Survey %	Moreland ABS 2006 % (approx)
Up to year 11	25%	54%
Year 12	17%	
Trade	11%	14%
Tertiary	28%	32%
Post-graduate	18%	

Base: All respondents (n=601) *weighted*
Q8 What is the highest level of education you have completed?

1.1.6 Cultural Traits

The majority of those surveyed indicated that the main language spoken at home is English, with the top three languages other than English reflecting the 2006 Census data. When comparing to Census data, please note that the categorisation of English in the Census data is *English only* whereas it is very likely that a number of the survey respondents speak English *mainly*, but also speak other languages.

Table 1.1.6a Main Language

Main Language	Survey %	Moreland ABS 2006 %
English	80%	55%
Italian	10%	12%
Greek	4%	6%
Arabic	2%	6%
Cantonese	1%	1%

Other 4%

Base: All respondents (n=601) *weighted*

Q7 What is the main language spoken at home?

* 'English Only'

In addition to main language spoken at home, respondents were asked to specify in which country they were born. The figures for country of birth more closely align with the 2006 Census figures, with around two thirds indicating they were born in Australia.

Table 1.1.6b Country of Birth

Country Born	Survey %	Moreland ABS 2006 %
Australia	68%	65%
Italy	11%	8%
Greece	3%	3%
United Kingdom	3%	2%
New Zealand	2%	1%
Lebanon	1%	2%

Other 12%

Base: All respondents (n=601) *weighted*

Q6 In what country were you born?



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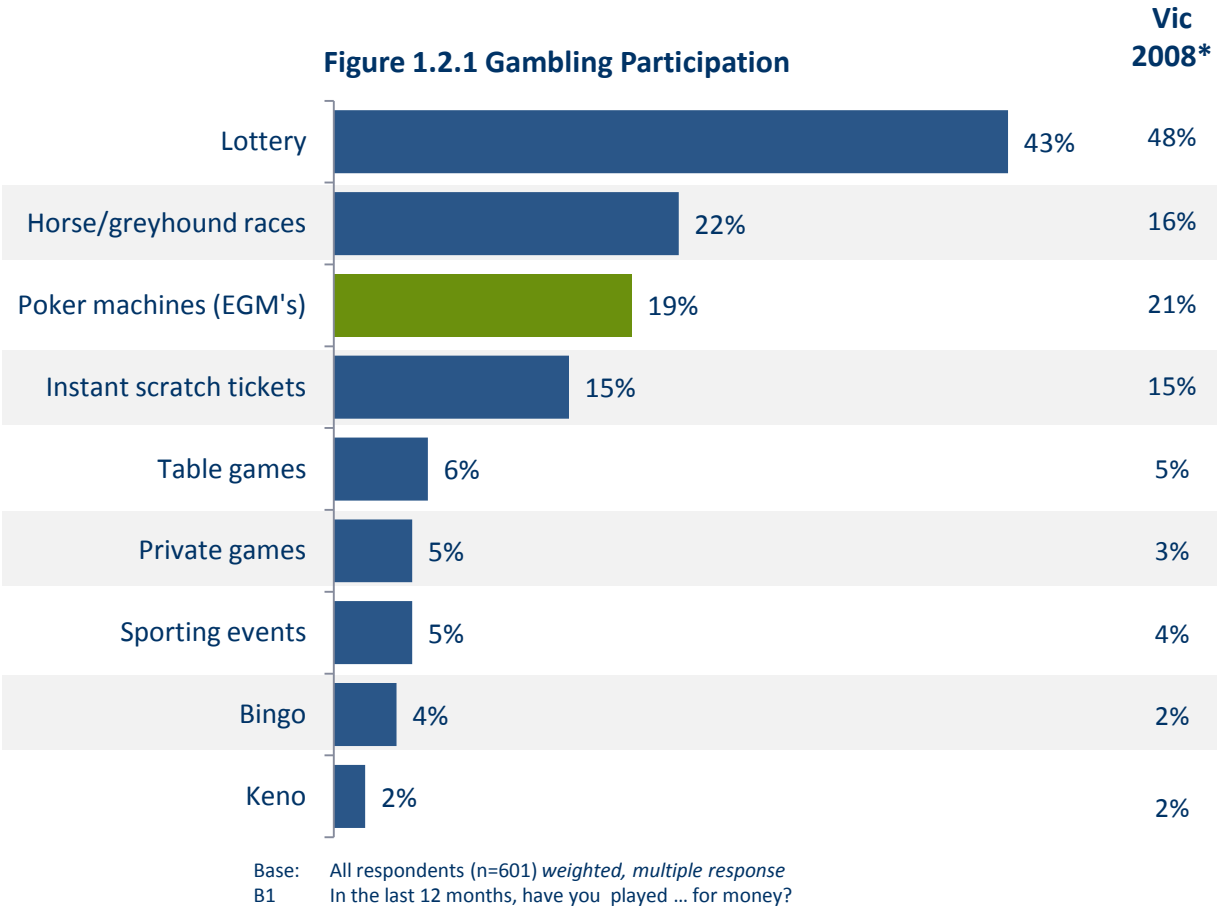
1.2 Gambling Participation

1.2.1 Gambling Activities

In order to gain a better understanding of gambling behaviour within the Moreland community, and identify those who use Electronic Gaming Machines (EGMs), all respondents were asked to specify whether they had participated in a number of gambling activities *for money* in the *12 months* prior to interview.

In total, 63% of people said that they had participated in *at least one* of these forms of gambling activities within the 12 months prior to interview.

When compared to the latest research conducted by the Department of Justice in Victoria (data collected in 2008) it is clear that the incidence of EGM gambling in Moreland is similar to the Victorian average.



* Department of Justice, (2009), A Study of Gambling in Victoria - Problem Gambling from a Public Health Perspective.

1.2.2 Problem Gambling

Within the survey tool the standard Problem Gambling Severity Index (PGSI) question was used to identify those individuals who are considered to be low risk, moderate risk or problem gamblers. The question consists of nine statements and asks respondents to indicate how often they experienced each within the 12 months prior to interview. These statements cover topics such as betting more than one can afford to lose, borrowing money to gamble, feeling guilty about the way one gambles and being told that one has a problem, amongst others. Through many studies in this field, an algorithm has been developed which takes the responses to these questions and assigns a PGSI score to each individual, which is then extrapolated into a category, as follows:

- Non-gambling: respondents in this group have not gambled at all in the past 12 months;
- Non-problem gambling: This group probably will not have experienced any indicators of behavioural problems or adverse consequences of gambling.;
- Low risk gambling: Respondents in this group may have an indicators of behavioral problems but likely will not have experienced any adverse consequences from gambling.;
- Moderate risk gambling: Respondents in this group may have endorsed a few of the indicators of behavioral problems, and may or may not have experienced adverse consequences from gambling; and
- Problem gambling: Respondents in this group are those who have experienced adverse consequences from their gambling, and may have lost control of their behavior.

The table below shows the distribution of problem gamblers within the sample for this research. In this table, percentages are calculated by row; therefore it can be seen that 80% of EGM gamblers were classified as non-problem gamblers, 12.5% were low risk, 3.6% were moderate risk and 4.5% were classified as problem gamblers.

Table 1.2.2a Problem Gambling

Please note: problem gambling status cannot be directly assigned to the gambling activity, this is just a guide					
Problem Gambling Index	N=	Non	Low	Moderate	Problem
TOTAL MCC Sample	601	92%	5.3%	1.7%	0.9%
Total Gamblers (MCC Sample)	388	88%	8.2%	2.4%	1.3%
EGM Gamblers (MCC Sample)	122	80%	12.5%	3.6%	4.5%
Victoria 2008 *	15,000	91%	5.7%	2.4%	0.7%

Also included in the previous table are the findings from the Department of Justice study conducted in 2008. These show that the incidence of problem gambling in Moreland is very similar to the Victorian average.

* Department of Justice, (2009), A Study of Gambling in Victoria -Problem Gambling from a Public Health Perspective.

When viewing Table 1.2.2b below, please note that the *problem gambling* status cannot be directly assigned to the gambling activity, as respondents may undertake more than one activity. Instead, this table serves as a guide to assess where particular types of gambling may have a stronger impact on problem gambling. For instance, those who said that they had played *Keno* and/or *Bingo* in the 12 months prior to interview show statistically higher incidences of being classified as *problem gamblers*, however we cannot say with confidence that their problem gambling status directly relates to these types of gambling; that is, they may bet more than they can afford to lose on, say, table games, but they play Keno or Bingo responsibly.

It can be seen in the following table that fewer of those who buy instant scratch tickets and/or lottery tickets have problems with their gambling.

Table 1.2.2b Problem Gambling by Gambling Activity

Please note: problem gambling status cannot be directly assigned to the gambling activity, this is just a guide					
Problem Gambling Index	N=	Non	Low	Moderate	Problem
TOTAL MCC Sample	601	92%	5.3%	1.7%	0.9%
EGMs	122	80%	12.5%	3.6%	4.5%
Horse/greyhound	130	81%	12.7%	4.5%	1.5%
Instant scratch tickets	88	90%	5.6%	3.4%	1.1%
Lottery	274	88%	9.8%	2%	0.4%
Keno	15 [#]	64%	14.3%	7.1%	14.3%
Table games	35	78%	10.8%	10.8%	0%
Bingo	24 [#]	75%	15%	0%	10%
Events	29 [#]	63%	25%	9.4%	3.1%
Non-gamblers	213	99%	0%	0.5%	0.5%

When calculated by gambling activity it is found that of the EGM gamblers, 4% were classified as problem gamblers , 3% as moderate risk gamblers and 13% as low risk gamblers. In total, this equates to 20% of EGM gamblers who are considered to be at some level of risk with their gambling. This level is much lower than among those who said that they had bet on sporting events (38%), played keno (34%) or played bingo (26%) in the 12 months prior to interview.

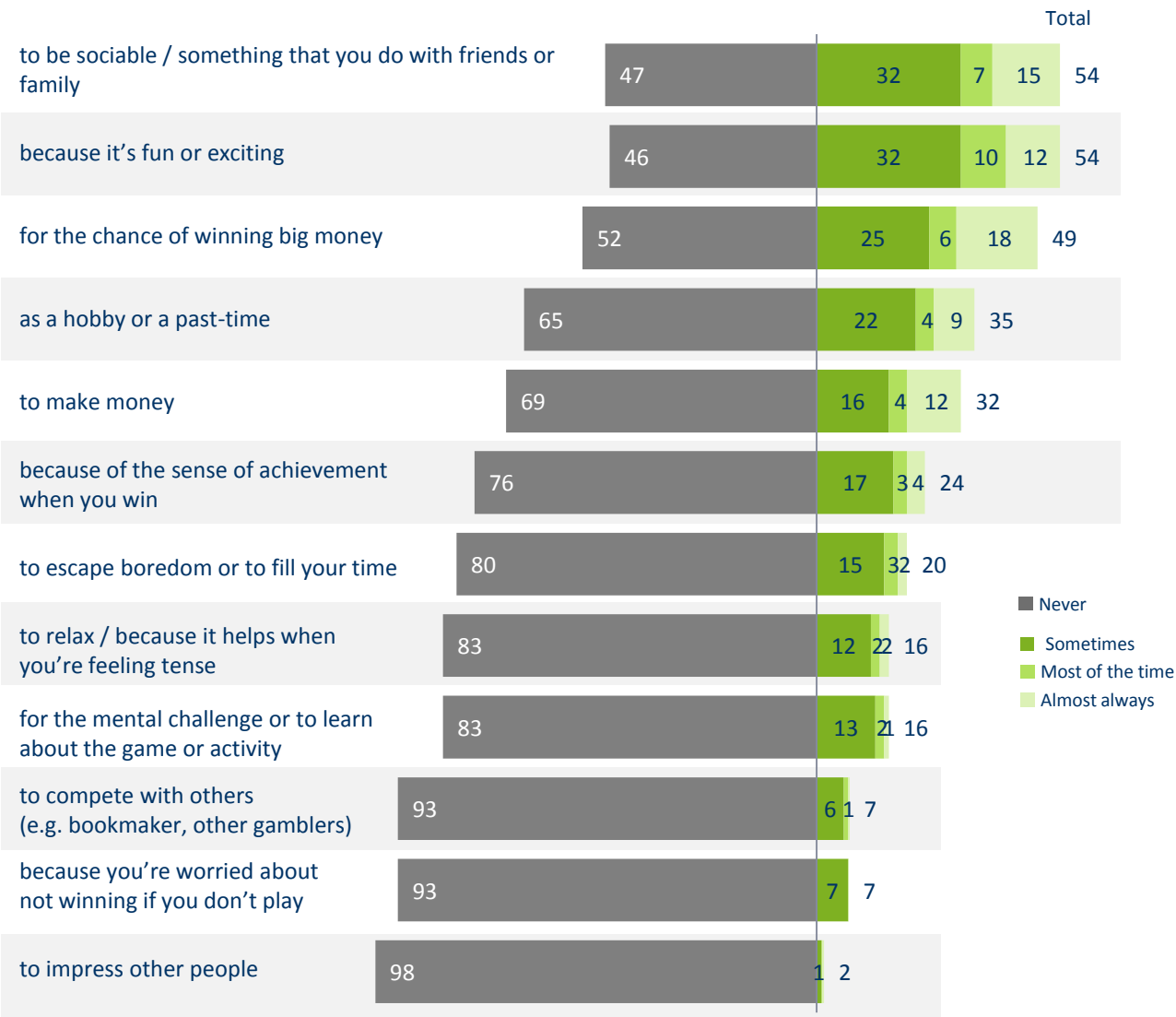
In order to ensure that this question achieved full coverage it was asked of all respondents, regardless of gambling status. Of the 601 people surveyed, 2 registered on the PGSI despite indicating that they hadn’t undertaken any of the gambling activities put forth in the survey.

For the remainder of this report charts and tables will report *PGSI* results, which will be a nett of low risk, moderate risk and problem gamblers.

1.2.3 Gambling Motivations

Those who were categorised as Gamblers (had undertaken one of the specified types of gambling activities within the 12 months prior to interview; n=388 unweighted), were then asked a question to ascertain their motivations for gambling. This question involved a series of statements, asking how often they take part in gambling activities for each reason.

Figure 1.2.3a Gambling Motivations



Base: Gamblers (n=388) weighted, statements randomised
D1 Do you almost always, most of the time, sometimes or never take part in gambling activities...?

Findings show that the social and entertainment aspects of gambling were the primary motivations for undertaking the activity. On the other end of the spectrum, very few admit to gambling to impress people, because they are worried about not winning if they don't play, or to compete with others.

The responses to this question were extrapolated into motivation categories. For this, *Never* was assigned a value of 1, *Sometimes* = 2, *Most of the time* =3 and *Almost always* = 4. These values were then summed as follows, and divided by the number of variables in the sum, to ascertain a number for each category.

Table 1.2.3b Motivation Categories

Motivation Category	Variables
Enhancement	to compete with others
	because it's fun or exciting
	for the mental challenge or to learn about the game or activity
	because of the sense of achievement when you win
Recreation	because it's fun or exciting
	as a hobby or a past-time
	to escape boredom or to fill your time
	to relax / because it helps when you're feeling tense
Social	to be sociable / something that you do with friends or family
Coping	to relax / because it helps when you're feeling tense
	to impress other people
Money	for the chance of winning big money
	to make money

The table following reports the means for each category. The higher the number the stronger the level of motivation.

Table 1.2.3c Motivation Category Results

Motivation Category	Total	Gambling Status		Age		
		EGM Gambler	Not EGM Gambler	18-24 year olds	40-59 year olds	60+ year olds
Enhancement	1.38	1.46	1.35	1.53	1.31	1.39
Recreation	1.49	1.70	1.40	1.42	1.44	1.63
Social	1.89	2.28	1.73	1.93	1.73	1.97
Coping	1.13	1.24	1.08	1.04	1.16	1.19
Money	1.74	1.54	1.82	1.55	1.94	1.54

In terms of categories of motivation, social and money reasons generally motivate people more than coping or enhancement factors. Those identified by the survey as low, moderate or problem gamblers showed significantly higher averages for all of these categories, and EGM gamblers were more motivated by all but the money category.

The research also shows that enhancement is of greater motivation to younger people, whereas the 40-59 year olds are more motivated by money.

1.2 Gambling Participation Section Summary

Use of EGMs within the municipality is in line with Victorian averages, as are the rates of problem and at risk gamblers. Those who play EGMs show a higher incidence of being problem gamblers , along with Keno players and Bingo players, although other research has shown that most problem gamblers play more than one type of betting game.

People are primarily motivated to gamble as a social activity and because they perceive it as fun, with EGM gamblers being driven more so by these social and recreational aspects than money.

This findings suggest that programs or communication aimed at reducing the risks of problem gambling on EGMs need to focus on providing/communicating social and entertainment alternatives.



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1.3 EGM Gambling

1.3.1 EGM Gambling Behaviour

This section reports the findings of a number of behavioural questions specific to poker machine, or Electronic Gaming Machine (EGM) gambling. The questions reported within this section were only asked of those who said that they had played an EGM in the 12 months prior to interview: n=122.

The first series of behavioural questions sought to identify frequency and type of play. There were no significant variations in responses to these questions across demographics, therefore we have reported only the overall findings.

Table 1.3.1a EGM Behaviours



EGM Behaviour	mean
Number of times in the last year played EGMs in a club or hotel	11.6
Percentage of EGM gamblers who played in a club or hotel	85%
Number of times in the last year played EGMs in a casino	2.6
Percentage of EGM gamblers who played in a casino	44%
Time spent during each visit to a poker machine venue	56mins
Money spent on EGM gambling during each visit to an EGM venue	\$99.80
Calculated estimated spend on EGMs per year	\$12, 508

When attempting to profile EGM gamblers by demographic variables, it was found that those who indicated they had used an EGM in the 12 months prior to interview had certain traits which were statistically notable:

- **Higher** incidence of EGM play amongst those who had started, but **not finished secondary school** (33%) and those whose highest level of education was **completion of year 12** (27%);
- Significantly **lower** incidences of EGM play amongst those who had completed **undergraduate** (14%) or **post graduate** (7%) University studies;
- Those with **children** in their household are significantly **less likely** to have played EGMs in the 12 months prior to interview (14%, 22% no children); and
- Those in **Brunswick West** show significantly **lower** incidence of having played EGMs (6%), whilst incidence of having played EGMs was **very high** in **Glenroy** (34%) and **Oak Park** (38%). Please see Table 1.3.1b on the following page for a full break-out by suburb.

Table 1.3.1b Gambling Status by Suburb

Suburb	n=*	Non-Gambler	Gambler	EGM Gambler	Low, Moderate risk or Problem Gambler (PGSI)
Brunswick	90	47%	53%	13%	7%
Brunswick East	34	405	60%	6%	11%
Brunswick West	54	305	70%	6%	4%
Coburg	111	415	59%	15%	5%
Coburg North	25 [#]	315	69%	27%	4%
Fawkner	52	39%	61%	30%	17%
Glenroy	75	25%	75%	34%	7%
Gowanbrae	6 [#]	445	56%	11%	0%
Hadfield	18 [#]	47%	53%	35%	0%
Oak Park	29 [#]	17%	83%	38%	14%
Fitzroy North	3 [#]	67%	33%	0%	0%
Pascoe Vale	70	415	59%	13%	5%
Pascoe Vale South	34	21%	79%	29%	21%
TOTAL	601	37%	63%	19%	8%

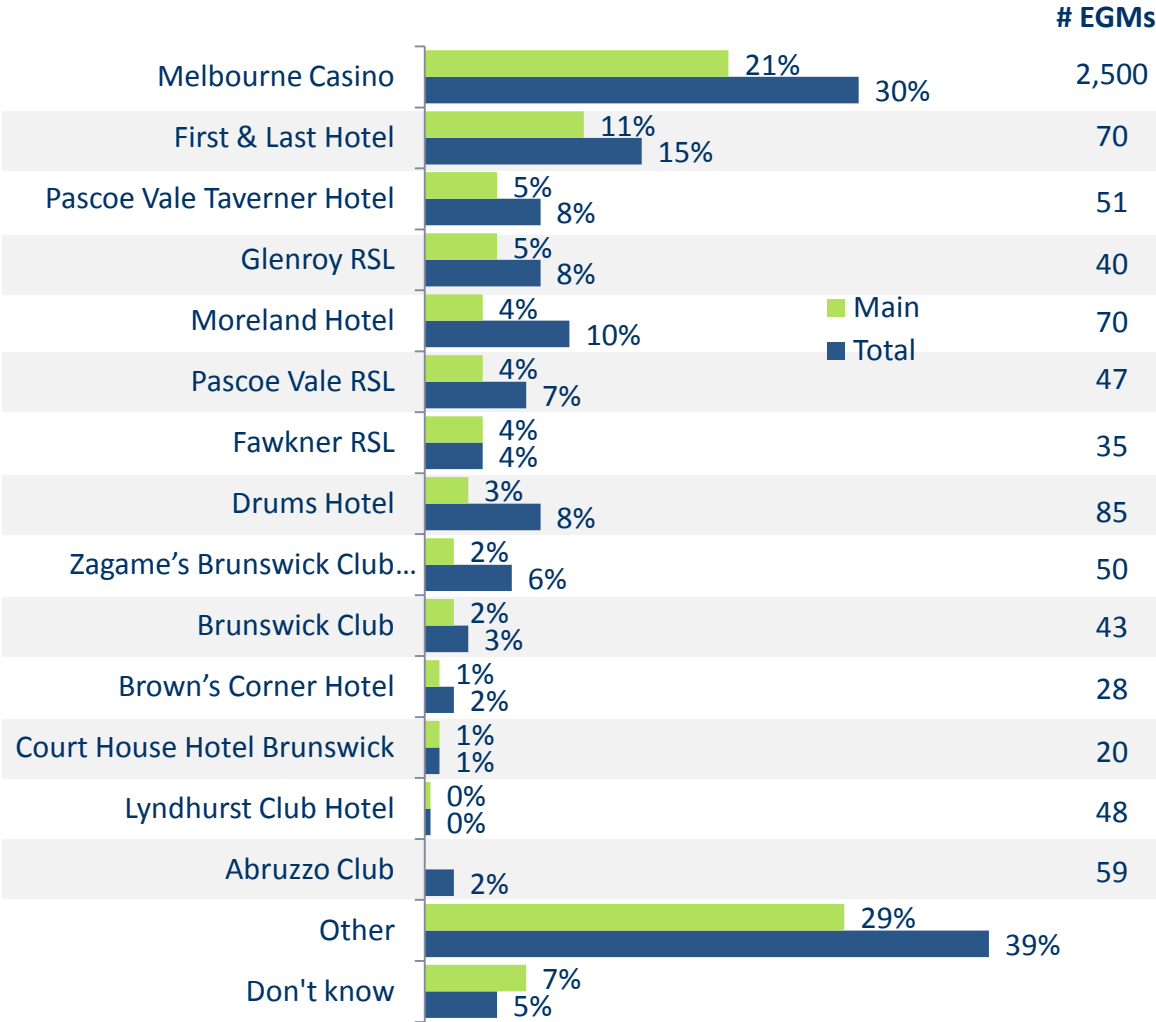
1.3.2 EGM Venue

All respondents were asked to indicate where they go to play EGMs, and if they named more than one location, which would be their main venue.

Results to an earlier question revealed that 15% of EGM gamblers had only played EGMs at the Casino in the year prior to interview, hence why the figure for this venue is so high.

Of the local EGM venues, the most commonly frequented are clearly *First and Last Hotel* and *Moreland Hotel*. When comparing incidence of being named a main venue with sample for the corresponding suburb and number of EGMs, there doesn't appear to be any correlation, meaning that it is highly likely that there are other selection factors at play in selection other than sample size, number of EGMs or proximity.

Figure 1.3.2a EGM Venue



Base: EGM Gamblers (n=122) weighted, unprompted
D6 Which venue(s) have you visited in the last 12 months to play poker machines?

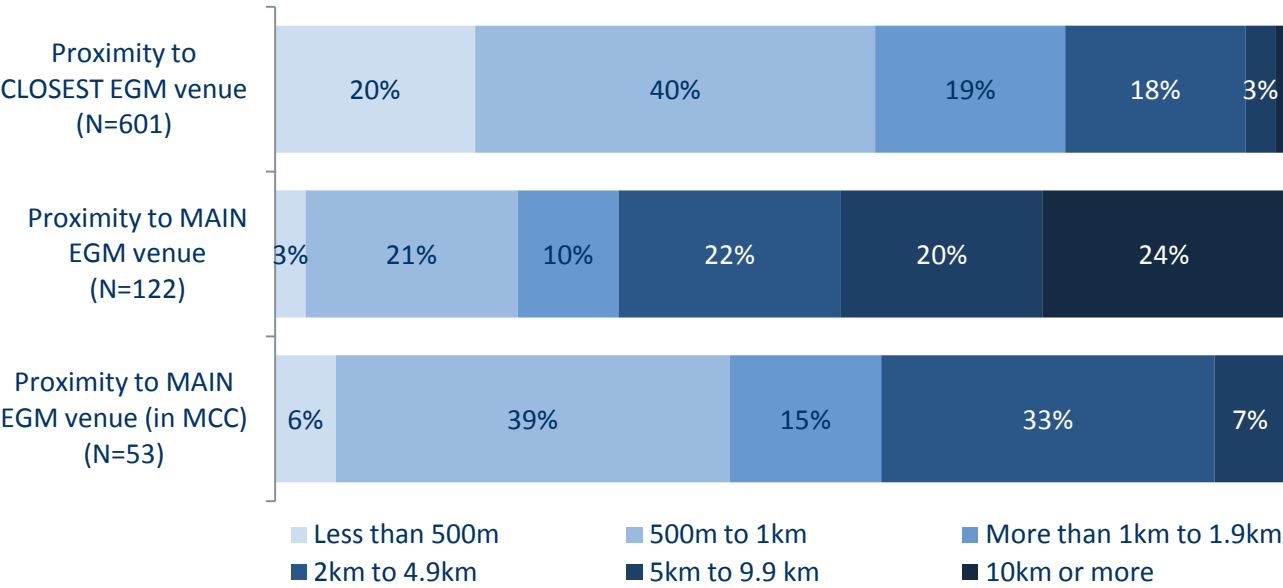
The high 'other' component in these responses could not be coded further as there was no more than three instances of any one venue from outside the Moreland City Council (MCC) area being named. This is a finding in itself as it shows that when people travel outside the MCC area to use EGMs, there is no key location that many will frequent. Indeed, perusal of the verbatim suggest that many of these instances were in other parts of the country or world, suggesting that many respondents who had visited EGM venues did so while on holidays.

At the start of the survey, all respondents were asked to indicate approximately how far they lived from the closest EGM venue. Just over one in ten (13%) didn't know. The responses from those who did know are reported in the top bar in the table below. It can be seen that more than half of believe that they live within 1km of an EGM venue.

Later in the survey EGM gamblers were asked how far away their **main** EGM venue was. Very few (2%) said that they didn't know. The second bar in the chart below shows the responses of those who did, revealing that people don't necessarily mostly attend their closest EGM venue.

Given that so many respondents specified the *casino* or *other* (out of MCC area) as their main venue, a third bar has been added to the chart below showing the proximity to venue amongst just those who specified their main venue as one within the Moreland City Council area. This is far more in line with proximity to closest venue, suggesting that those who play EGMs locally will often go to their closest venue.

Figure 1.3.2b Proximity to EGM Venue



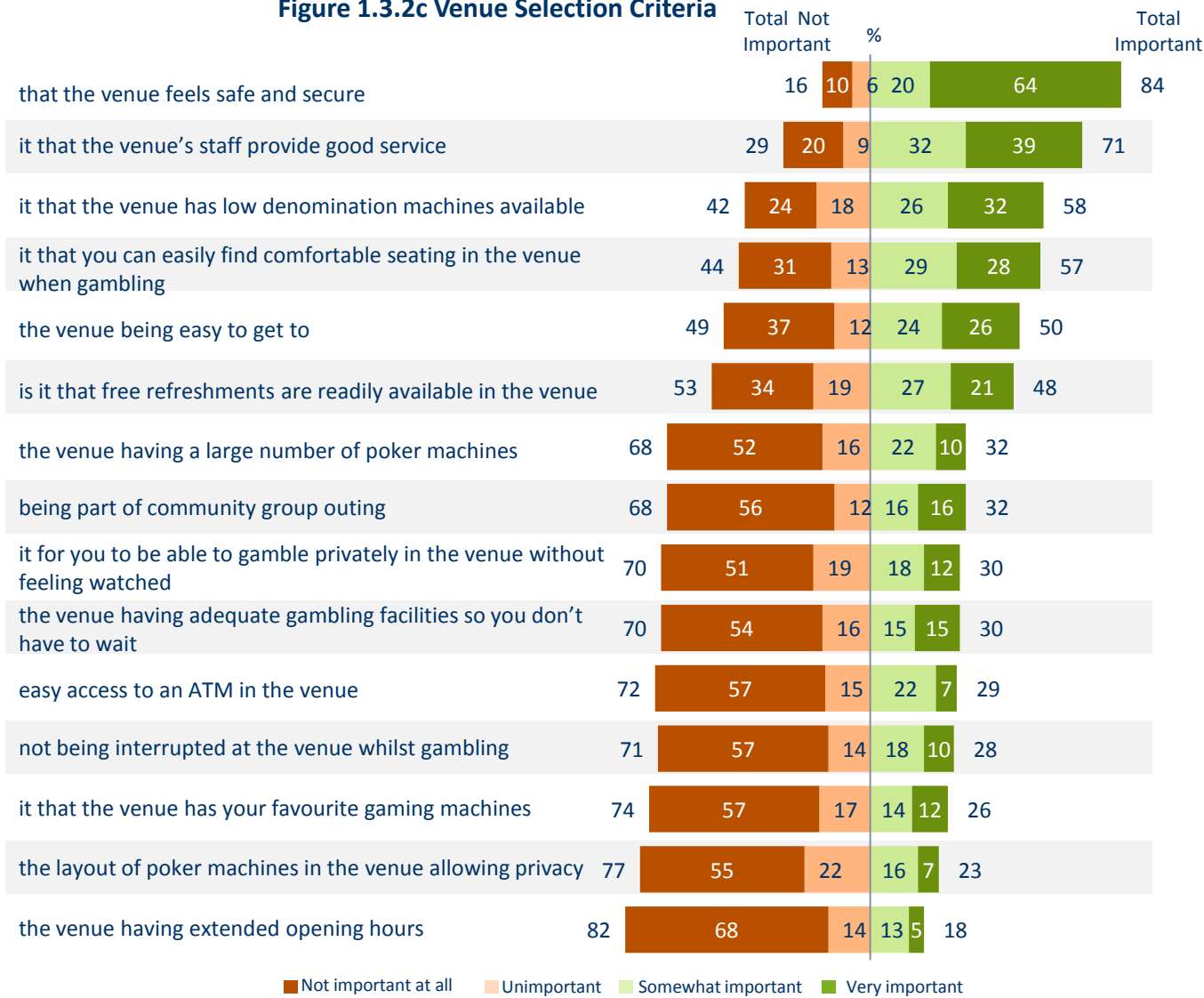
Base: On chart, *weighted, unprompted*
B2 Approximately how far away from your home is the closest location which has poker machines or electronic gaming machines?
D8 Roughly, how many kilometres FROM YOUR HOME is [INSERT MAIN VENUE]?

In order to better understand what drives an individual to select a venue, EGM gamblers were asked to rate a number of statements according to how important it is in their decision of where to gamble.

It is clear that feeling safe and secure is the primary driver of venue selection, with customer service as the second highest driver.

In terms of machines provided at the venue, low denomination machines are important for more than half, and a large number is a drawcard for around half. However, relatively few appear to have *favourite* gaming machines that they seek out when selecting a venue.

Figure 1.3.2c Venue Selection Criteria



Base: EGM Gamblers (n=122) weighted, statements randomised
D9 In your decision about where to gamble, how important is...?

As with the motivation ratings, the ratings for venue features were grouped into four venue categories, as outlined below.

Table 1.3.2d Venue Selection Categories

Venue Category	Variables
Location	the venue being easy to get to
	the venue having extended opening hours
Internal Features	easy access to an ATM in the venue
	the venue having adequate gambling facilities so you don't have to wait
	it for you to be able to gamble privately in the venue without feeling watched
	it that you can easily find comfortable seating in the venue when gambling
Hospitality	not being interrupted at the venue whilst gambling
	it that the venue's staff provide good service
	that the venue feels safe and secure
	is it that free refreshments are readily available in the venue
Gaming Machine	the venue having a large number of poker machines
	the layout of poker machines in the venue allowing privacy
	it that the venue has low denomination machines available
	it that the venue has your favourite gaming machines

The category total was taken by summing the ratings assigned for each statement (4 = *very important*, 3 = *somewhat important*, 2 = *unimportant*, 1 = *not important at all*), and then dividing by the number of statements within that category. The higher the number, the higher the assigned importance.

As can be seen in the table below, reporting means for each category, the hospitality characteristics rated the highest in terms of importance with regards to venue choice. Indeed, the hospitality aspects were of greater importance to those categorised as low, moderate or problem gamblers than those categorised as not being at risk. Conversely, location aspects were generally not as important.

Table 1.3.2e Venue Selection Category Results

Venue Category	Total	Gender		Gambling Status	
		Male	Female	Not low/mod/prob gambler	Low/mod/prob gambler
Location	1.98	1.91	2.06	1.95	2.11
Internal Features	2.03	1.93	2.15	2.00	2.17
Hospitality	2.62	2.66	2.56	2.54	2.90
Gaming Machine	2.06	1.89	2.25	1.99	2.30

1.3 EGM Gambling Section Summary

There is a clear correlation between level of education and EGM use, with use reducing as level of education rises. Furthermore, findings suggest that there are two *hot spots* of EGM gamblers within the municipality, specifically Glenroy and Oak Park.

Around half of EGM gamblers will play EGMs within the MCC area, and when they do they tend to visit the closest venue. However, further to location considerations, the key venue selection criteria are safety and service related.

The hospitality aspect (safety, service, refreshments etc) is particularly important for at risk and problem gamblers. Therefore, if seeking to provide alternative activities for these people it is going to be critical that the venue is safe, has friendly staff, and provides cheap or free refreshments.



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1.4 Impacts of EGMs

1.4.1 Personal Gambling Impacts

When EGM gamblers were asked which of a list of impacts they had experienced (see below for list), only 7% said that they had experienced any of the key negative impacts of EGM gambling.

- negatively affected how well you perform in your job
- resulted in you changing jobs
- resulted in your dismissal from work
- left you with not enough time to look after your family's interests
- resulted in you being declared bankrupt
- led to the breakup of an important relationship in your life
- led you to obtain money illegally, even if you intended to pay it back
- led to trouble with the police
- led to you not being able to pay bills or meet regular required payments (such as loan payments)
- led to you feeling more emotional than usual

When breaking this out by problem gambling status the frequency increases to 50% for moderate risk gamblers (n=6) and 80% for problem gamblers (n=5), yet decreases to 3% amongst non-problem gamblers (n=92).

Of the whole EGM sample, the most commonly experienced impact was *led to you feeling more emotional than usual* (7%), followed by *negatively affected how well you perform in your job* and *led to you not being able to pay bills or meet regular required payments*, both named by 3% (3 people).

1.4.2 Impact on Community

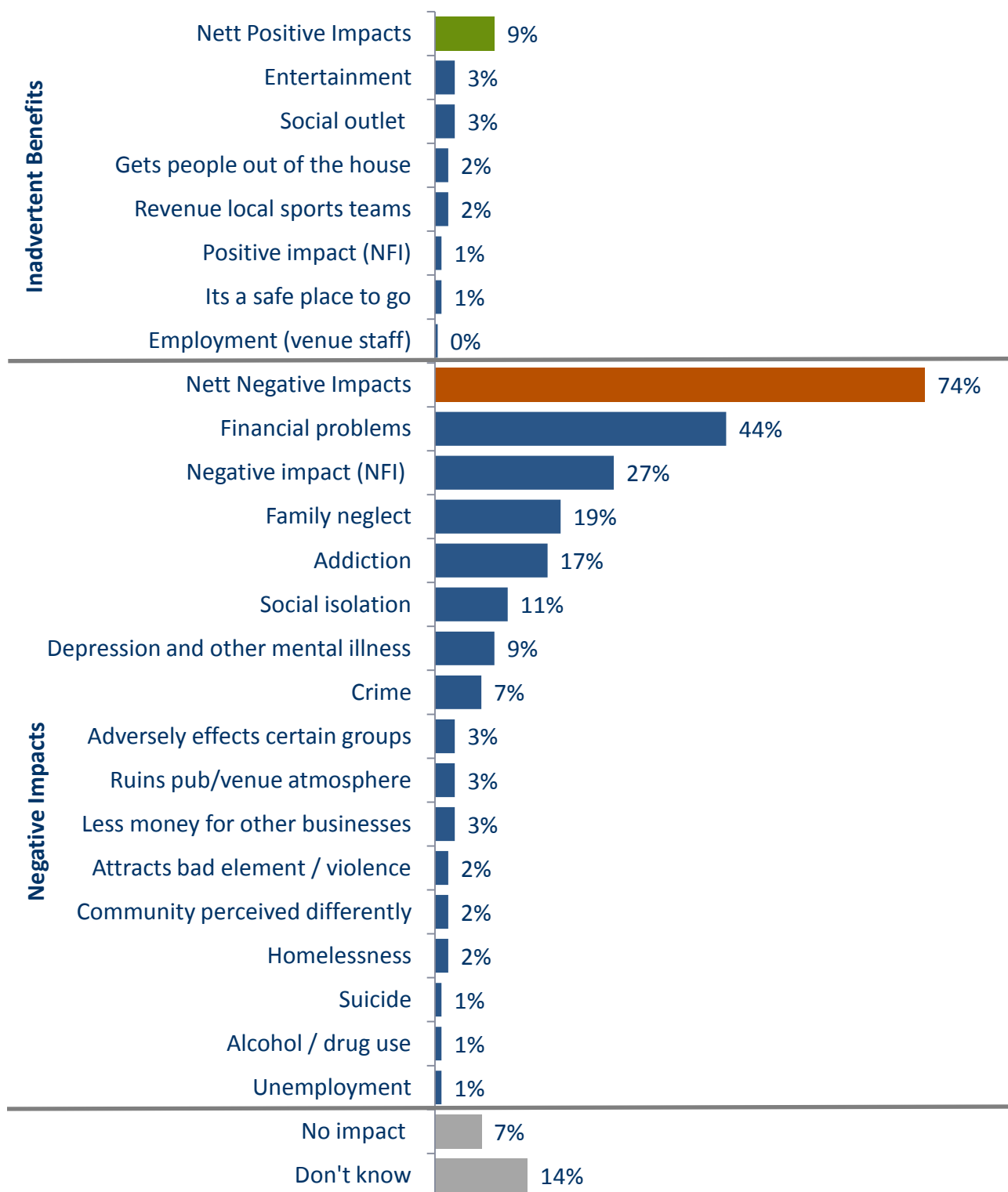
When asked to talk about perceived impacts of EGMs on the Moreland community (unprompted), more than two thirds (74%) spontaneously mentioned a negative impact, primarily revolving around financial problems, that is, not being able to pay for food, rent, etc.

A full break-out of responses can be seen in the chart overleaf. Just under one in ten (9%) spontaneously named a positive impact. Expectedly, the incidence of naming a positive impact is significantly higher amongst gamblers in general (11%, 5% non-gamblers), and particularly EGM gamblers (19%, 6% non-EGM gamblers).

The chart overleaf presents all unprompted mentions with a Nett figure for *Positive* and *Negative*. This Nett figure shows the combined incidence of people who said any one of the positive or negative impacts. For instance, if a single respondent said both *crime* and *addiction* they would only be recorded once in the Nett calculation.

Also in relation to this chart overleaf, the reference to “NFI” means “No Further Information”. In these instances the interviewer has probed the questions as best they can, but the respondent has been unable to provide more detail.

Figure 1.4.2 Impact on Community



Base: All respondents (n=601) *weighted, unprompted*
 E1 What impact do you think poker machines have on your local community?

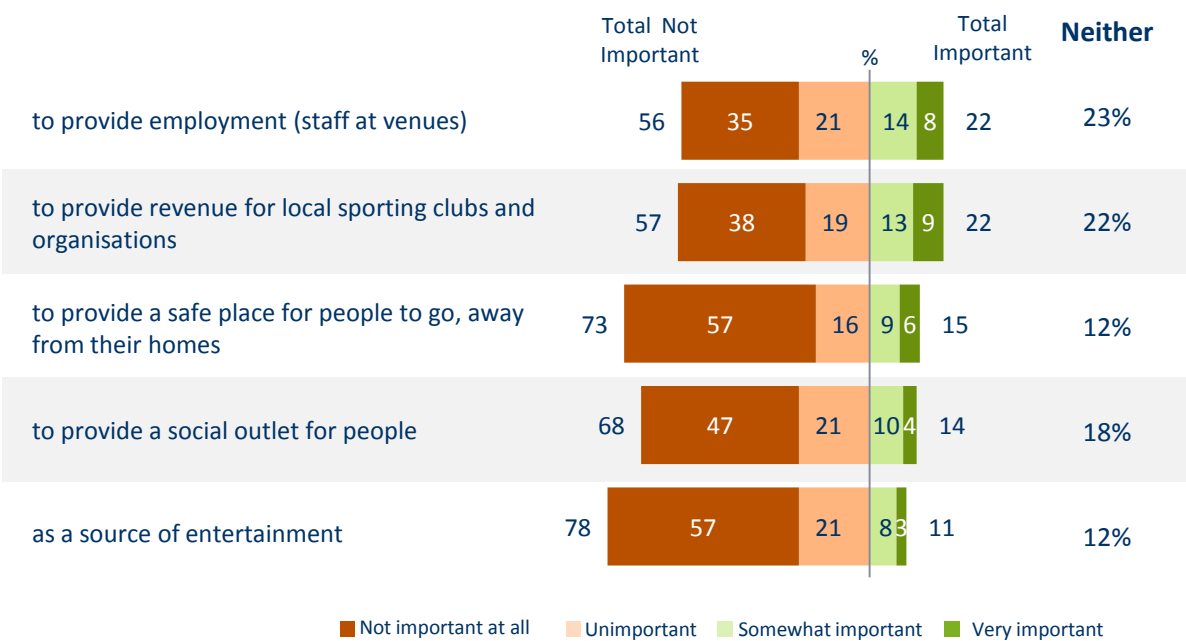
1.4.3 Potential Benefits

Following the unprompted exploration of community perceptions of EGM gambling, respondents were prompted with a number of potential benefits and asked to indicate how important they thought each was to the Moreland community. The qualitative research showed that the concept of benefits of EGM gambling was often difficult for people to grasp, so the interviewers were briefed to encourage people to try and appreciate that these are *inadvertent* benefits rather than direct positives.

Despite this, for most of the *potential benefits* statements, the majority of people did not perceive any benefit to the Moreland community. However, just over one in five (22%) did see some benefit in terms of providing employment or revenue for local sporting clubs.

The qualitative research shows that there is a general perception that if EGMs weren't available there would be alternative options available to cater for all of these community functions. That is, there would be other jobs, or other sources of funding for local sports, other social outlets, etc.

Figure 1.4.3 Benefits of EGMs



Base: All respondents (n=601) *weighted, statements randomised*
E2 How important do you think it is to have poker machines in the Moreland area (INSERT STATEMENT)?

Not surprisingly, those who use EGMs show a greater propensity to perceive these as benefits, in particular, employment (34% EGM gamblers said *somewhat* or *extremely*, compared to 18% non-EGM gamblers).

There were also some clear variations by age group:

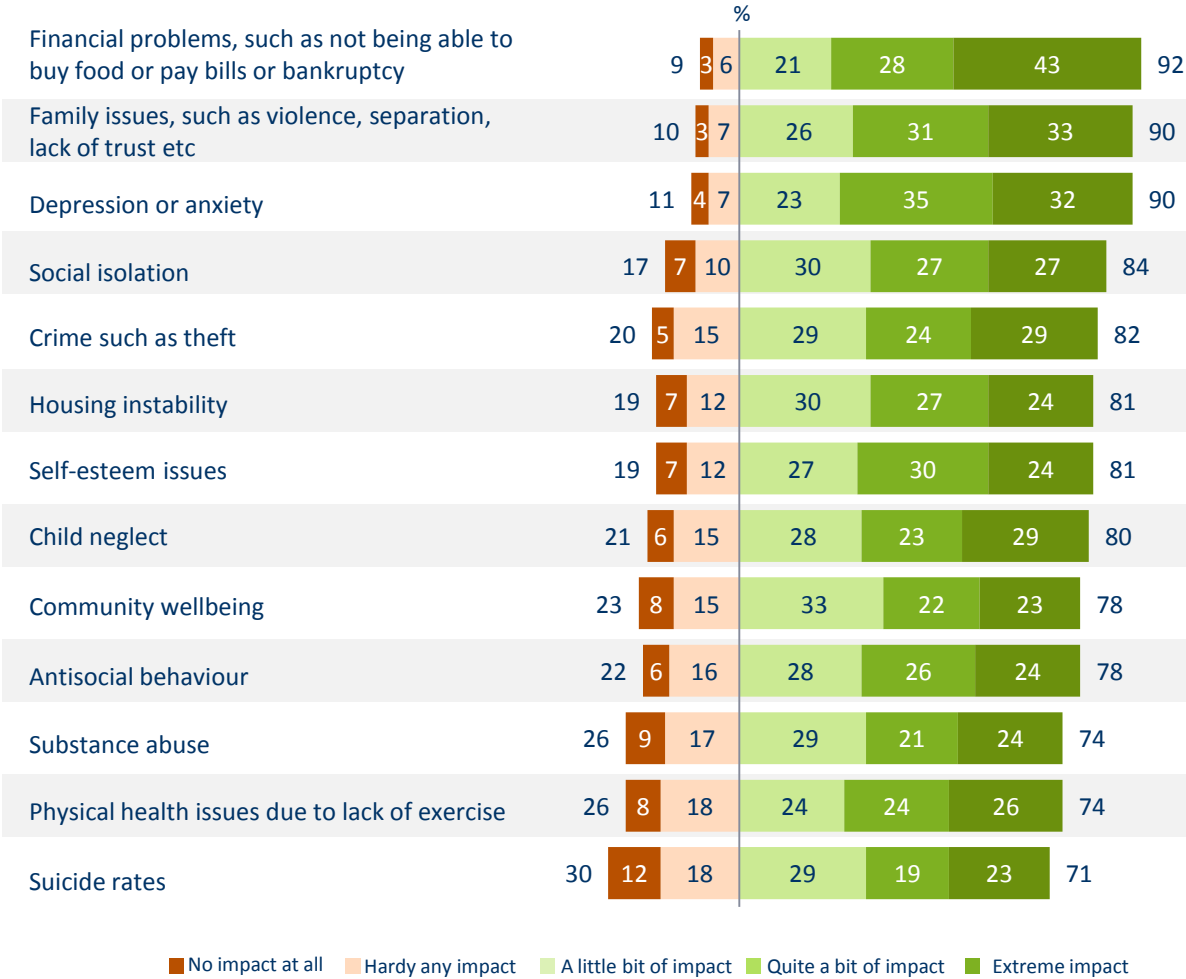
- Those in the mid age ranges (25-39 and 40-59) were more likely to perceive there to be no benefit at all with regards to providing revenue to sporting organisations (42% and 46% respectively, compared to 25% 18-24 year olds and 30% 60+ year olds).
- 25-39 year olds were also much more likely than 60+ year olds to perceive there to be no benefit to EGMs with regards to providing a social outlet (57%, 38% 60+ year olds), providing a safe place for people to go (67%, 46% 60+ year olds), and a source of entertainment (65%, 44% 60+ year olds).
- Indeed, those aged 60 years and over show consistently higher incidences of perceiving all of these potential outcomes of EGMs as benefits, suggesting that this offering is of greater social importance to these older segments of the community.

1.4.4 Negative Impacts

Following ratings of the importance of potential benefits, all respondents were then asked to rate their perceived level of impact of EGMs. It was found in the qualitative research that some people felt that they couldn't say what they thought the impact was as they didn't know the actual figures, so interviewers were briefed to explain that we are seeking *perceptions* more so than actual knowledge.

More than two thirds of Moreland residents feel that EGMs are having each of these negative impacts within the Moreland area. This finding clearly shows that EGMs are widely considered to be a social issue with widespread negative connotations. Indeed, the most pronounced issues in the eyes of Moreland residents are financial problems and family issues.

Figure 1.4.4a Perceived Negative Impact of EGMs



Base: All respondents (n=601) *weighted, statements randomised*
 E3 How much of an impact do you think poker machines have in the Moreland area on (INSERT STATEMENT)?

The table below summarises the mean rating for the level of impact statements, where 1 = *no impact at all*, 2 = *hardly any impact*, 3 = *a little bit of impact*, 4 = *quite a bit of impact* and 5 = *extreme impact*. Therefore, the higher the mean, the greater the proportion of the community who perceive it as an impact of EGMs.

It is clear from these findings that females are much more likely to perceive there to be negative social impacts of EGMs than males.

Of note is that those over the age of 40 years show significantly higher incidences of perceiving most negative impacts, despite this age group also showing higher incidences of believing there are important social benefits from EGMs. These findings suggest that this group sees the benefits in terms of entertainment and social opportunities, but also recognises that there are many problems with this activity as well.

There were no statistically significant variations in results for this question when comparing PGSI with other gambling status.

Table 1.4.4b Impacts of EGMs

Impacts of EGMs means	Total	Gender		Gambling Status		Age	
		Male	Female	EGM Gambler	Not EGM Gambler	18-39 yo	40+ yo
Physical health issues	3.42	3.18	3.65	3.13	3.49	3.26	3.60
Self-esteem issues	3.53	3.34	3.71	3.34	3.57	3.39	3.69
Depression or anxiety	3.85	3.76	3.94	3.73	3.88	3.75	3.96
Child neglect	3.53	3.31	3.74	3.32	3.58	3.41	3.67
Family issues	3.84	3.69	3.98	3.70	3.88	3.71	3.99
Crime such as theft	3.57	3.36	3.78	3.46	3.60	3.43	3.74
Social isolation	3.56	3.30	3.80	3.44	3.59	3.45	3.69
Antisocial behaviour	3.45	3.23	3.66	3.40	3.47	3.39	3.53
Financial problems	4.02	3.91	4.11	3.86	4.05	3.98	4.06
Suicide rates	3.24	3.05	3.43	3.16	3.26	3.04	3.48
Substance abuse	3.37	3.07	3.67	3.14	3.43	3.24	3.53
Housing instability	3.49	3.32	3.65	3.32	3.52	3.35	3.66
Community wellbeing	3.37	3.24	3.49	3.17	3.41	3.19	3.57

1.4 Impact of EGMs

Most people spontaneously think of negative community impacts when talking about the social impacts of EGM gambling (74%), focusing primarily on financial and family neglect issues. Even after prompting of benefits, few believed there to be *inadvertent benefits* from EGMs, although those who admit to playing EGMs are more likely to believe that there are benefits.

Indeed, there was a need to use the terminology *inadvertent benefits* to elicit any potential positive impacts at all, as the qualitative research found an extreme resistance to the term 'positive' as associated with EGMs.

Negative impacts of EGMs are generally considered to be more extreme by females and those over the age of 40 years. Whether this is due to being more well versed on the consequences, or generally just more extreme with their views cannot be determined. However, the general trend whereby most people identify there to be a wide variety of potential negative social impacts suggests that educating people about the issues is going to be easily accepted. Indeed, this widespread recognition of negative impacts may go so far as to suggest that a different approach to community education is needed, one that goes beyond education about the consequences and instead focuses on communicating strategies for avoiding the problem in the first instance.



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1.6 Comorbidities

1.5.1 Overall Quality of Life

There are a number of both personal and social variables which are widely considered to be linked to EGM gambling. This are generally considered to be *comorbidities* as in many cases it is difficult to establish whether they are a *cause* or *effect* of the EGM gambling.

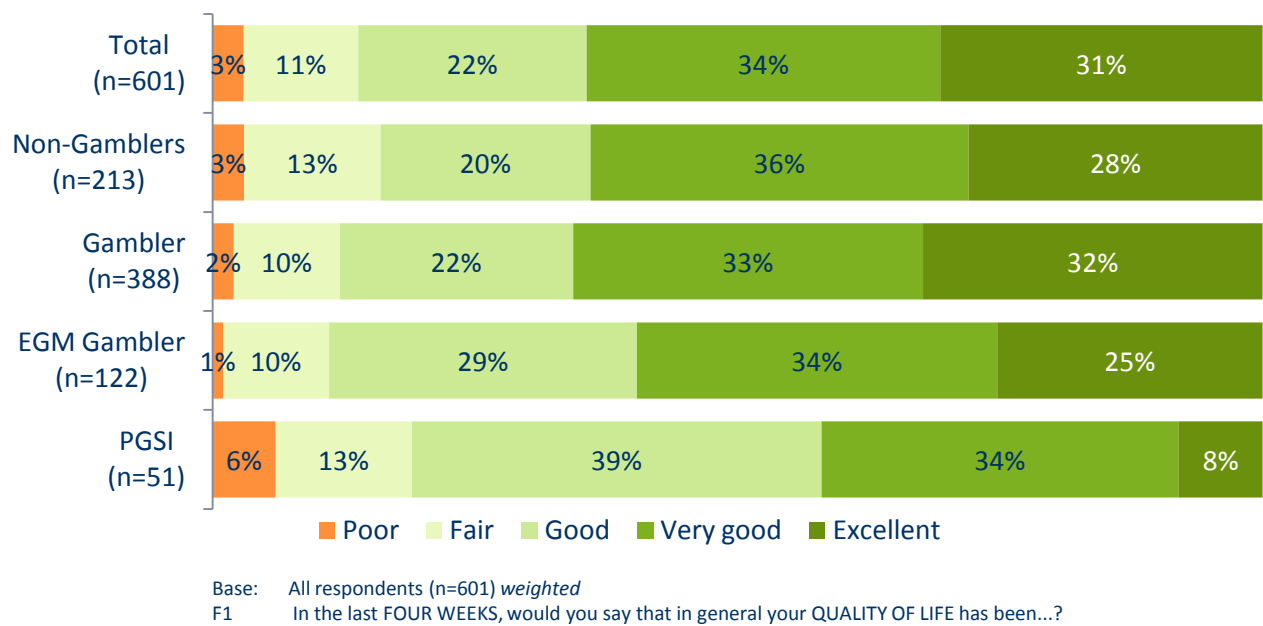
A section was included in the survey to explore these variables amongst the Moreland community, with the aim of determining any correlations between these and EGM gambling. Furthermore, many of these questions are drawn from the World Health Organisation Quality of Life instrument (WHO-QoL BREF), therefore may be used to compare to Australian norms, however the last report on this was in 2000 so we feel that there has been too large a time gap to make any direct comparisons. Furthermore, we did not use all of the items of any one subscale so comparisons would need to be made on individual measures.

The first of these variables was a general self-rating of *quality of life*. Almost two thirds (65%) of those living in Moreland consider their quality of life to be *excellent* or *very good*.

However, those over the age of 60 years show a significantly high level of reporting their quality of life to be *fair* (25%) or *poor* (7%).

Furthermore, those who were identified as low risk, moderate risk or problem gamblers generally report a poorer quality of life than those who don't fall within this category, with only 8% saying *excellent*. However, there was no notable difference in reported quality of life when comparing EGM gamblers and non EGM gamblers.

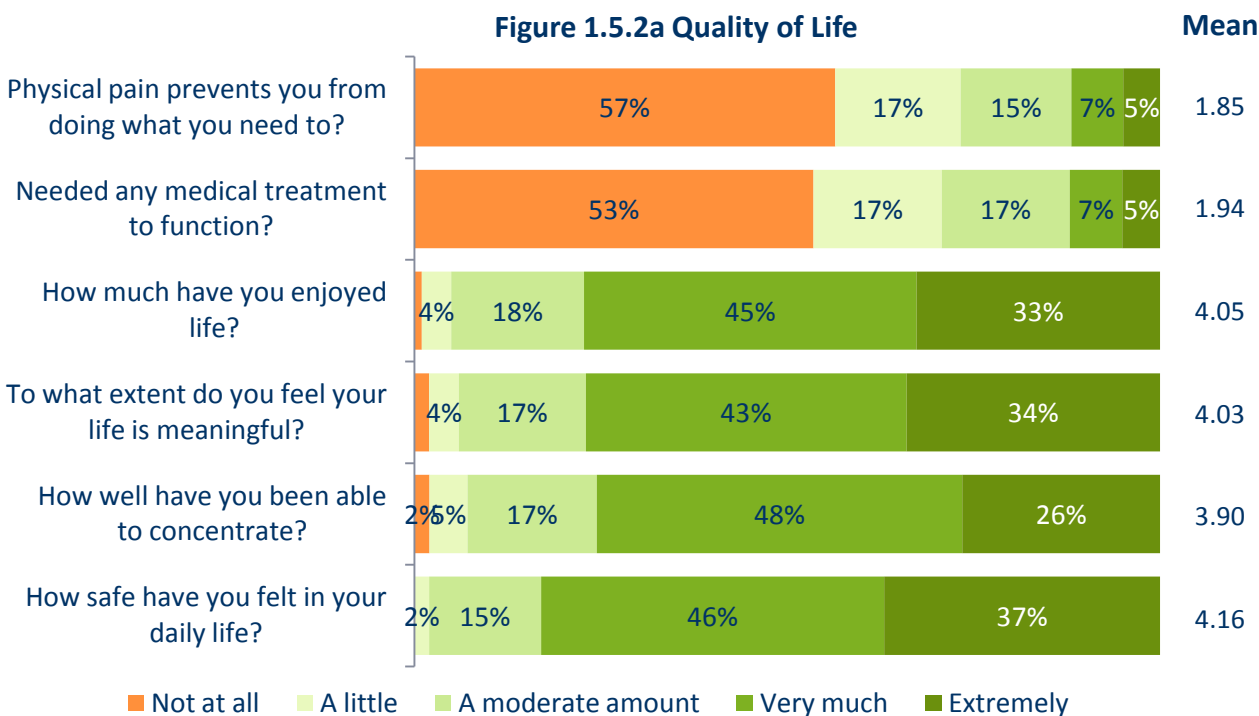
Figure 1.5.1 Quality of Life Rating



1.5.2 Quality of Life

With regards to quality of life, a series of questions were asked to better understand facets of this concept.

When conducting a linear regression on this data, with overall quality of life as the dependant variable, it is clear that the amount they have enjoyed life is the strongest determinant of overall quality of life (Beta value of -.2.68), followed by medical treatment (B=.239) and safety (B=.212). The factor of least determination over general quality of life is physical pain (B=.114).



Base: All respondents (n=601) *weighted*
F3 The next questions ask about how much you have experienced certain things in the LAST FOUR WEEKS.

When analysing the means (whereby 1= *not at all* up to 5 = *extremely*) it is apparent that those who were categorised as low risk, medium risk or problem gamblers (PGSI) more commonly have issues with physical pain and the need for medical treatment. Those aged 60 years or over also show significantly higher levels of issues with these two aspects of quality of life (mean of 2.36 and 2.82 respectively).

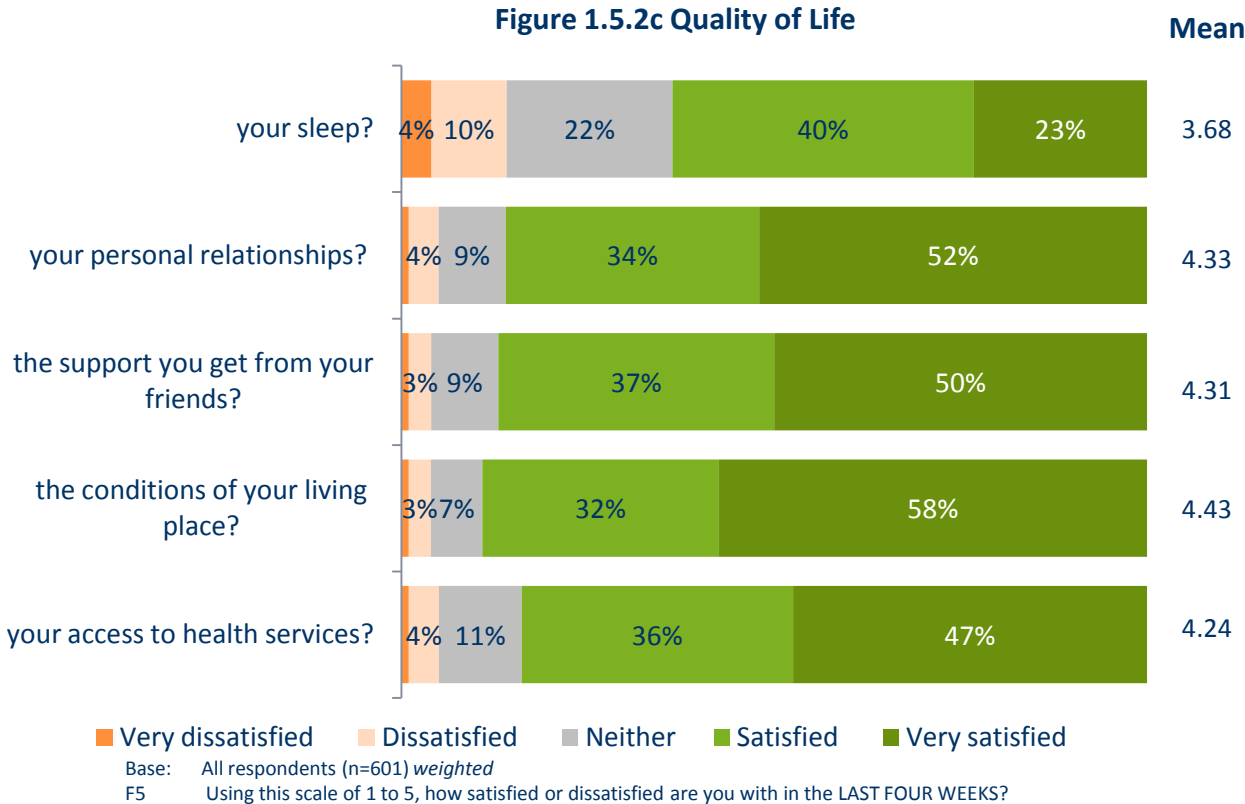
Table 1.5.2b Physical Health Ratings

Physical Health Ratings	Total (n=601)	Non-Gamblers (n=213)	Gambler (n=388)	EGM Gambler (n=122)	PGSI (n=51)
Physical pain prevents you from doing what you need to?	1.85	1.84	1.86	1.99	2.23
Needed any medical treatment to function?	1.94	1.95	1.94	1.96	2.29
How much have you enjoyed life?	4.05	4.07	4.04	3.96	3.74
To what extent do you feel your life is meaningful?	4.03	4.04	4.03	3.96	3.78
How well have you been able to concentrate?	3.90	3.84	3.94	3.94	3.65
How safe have you felt in your daily life?	4.16	4.12	4.18	4.17	4.08

All respondents were then asked a sequence of questions to ascertain their level of satisfaction with a number of aspects of their life. Most respondents were relatively satisfied with all of these variables, although around 14% did report having issues with sleep.

Conducting a linear regression on these statements, comparing against overall quality of life as the dependant variable, shows that sleep and access to health services generally have no impact on overall quality of life rating (sig figure of more than 0.1), whereas conditions of living place (B=-.322), support from friends and family (B=-.265) and personal relationships (B=-.205) do.

Figure 1.5.2c Quality of Life



As can be seen in the table below, reporting means (higher means equals greater level of satisfaction), those who were identified as low risk, moderate risk or problem gamblers clearly have greater issues with personal relationships, support from friends and access to health services.

Table 1.5.2d Quality of Life Ratings

Quality of Life Ratings <i>means</i>	Total (n=601)	Non-Gamblers (n=213)	Gambler (n=388)	EGM Gambler (n=122)	PGSI (n=51)
your sleep?	3.68	3.78	3.63	3.61	3.40
your personal relationships?	4.33	4.31	4.34	4.38	3.94
the support you get from your friends?	4.31	4.31	4.31	4.28	4.06
the conditions of your living place?	4.43	4.42	4.43	4.39	4.28
your access to health services?	4.24	4.25	4.23	4.18	3.94

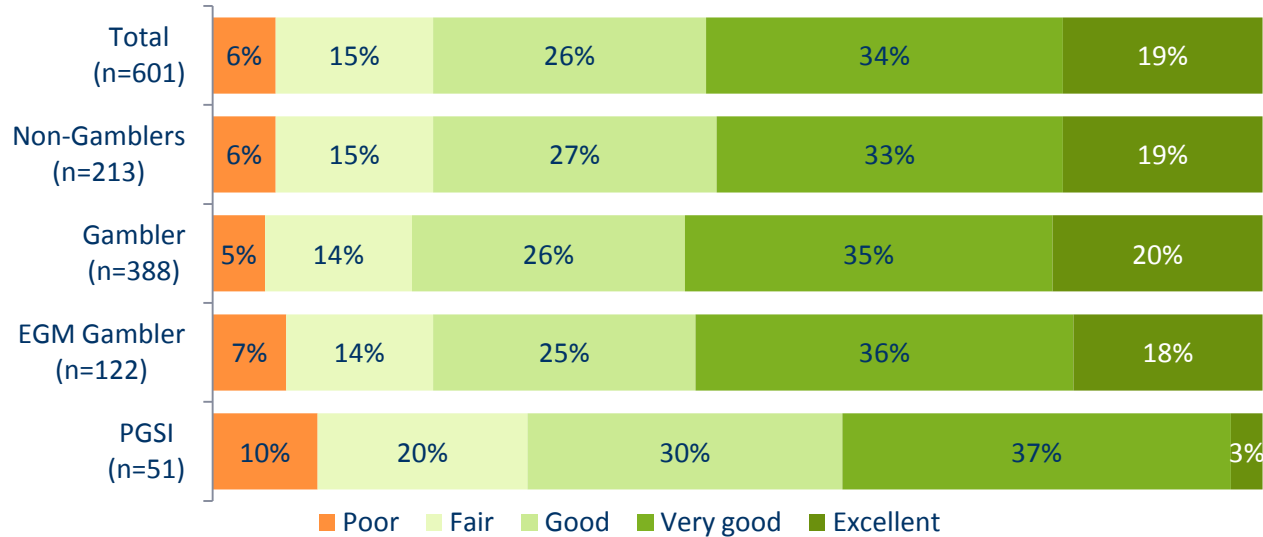
1.5.3 Overall Physical Health

A later question asked all respondents to report their perceived level of physical health. Just over half (53%) rated their physical health as excellent or very good.

As with quality of life, EGM gamblers show little variation to the general population with regards to physical health, however those defined as low risk, moderate risk or problem gamblers show a significantly poorer self-rating for physical health.

The age correlation observed with regards to quality of life is also apparent with physical health, with those over the age of 60 years showing significantly higher incidences of reporting fair (30%) or poor (12%) physical health. Incidentally, when viewing the profile of low risk, moderate risk and problem gamblers, the distribution across ages is relatively consistent, so these two observations (age and problem gamblers) are independent of each other.

Figure 1.5.3 Physical Health Rating

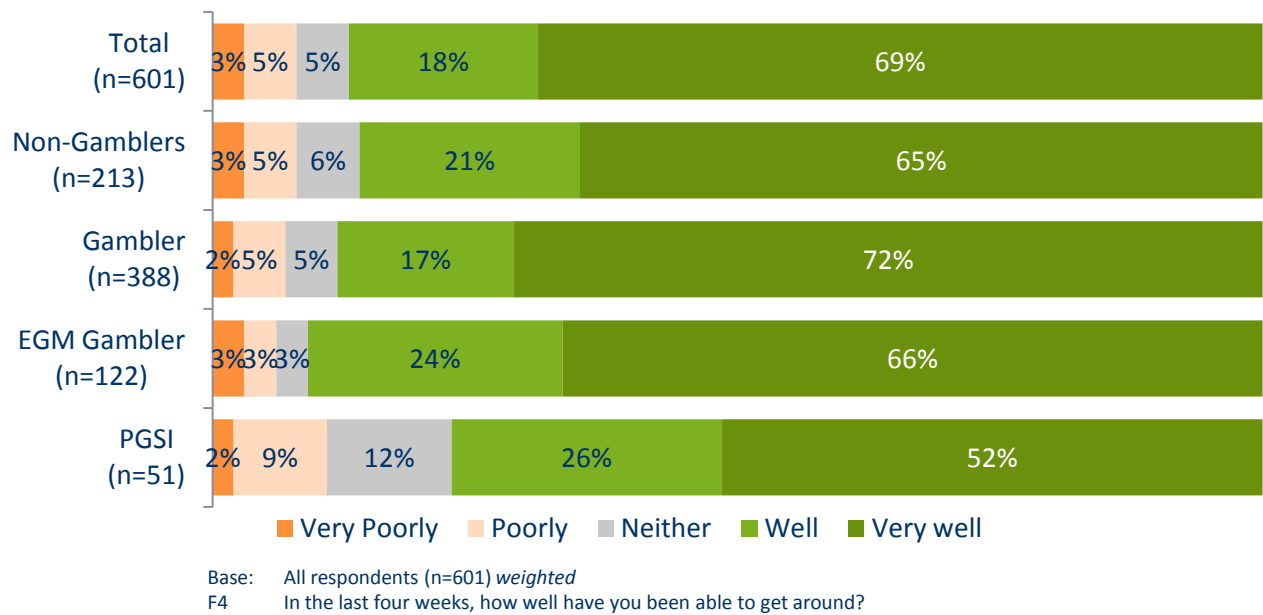


Base: All respondents (n=601) weighted
F2 Over the PAST 12 MONTHS, would you say that in general your PHYSICAL HEALTH has been...?

1.5.4 Ability to Get Around

Very few people indicated that they have difficulty getting around, although the incidence of having difficulty with this is higher amongst low risk, moderate risk and problem gamblers (11% *poorly* + *very poorly*) and those over the age of 60 years (17%).

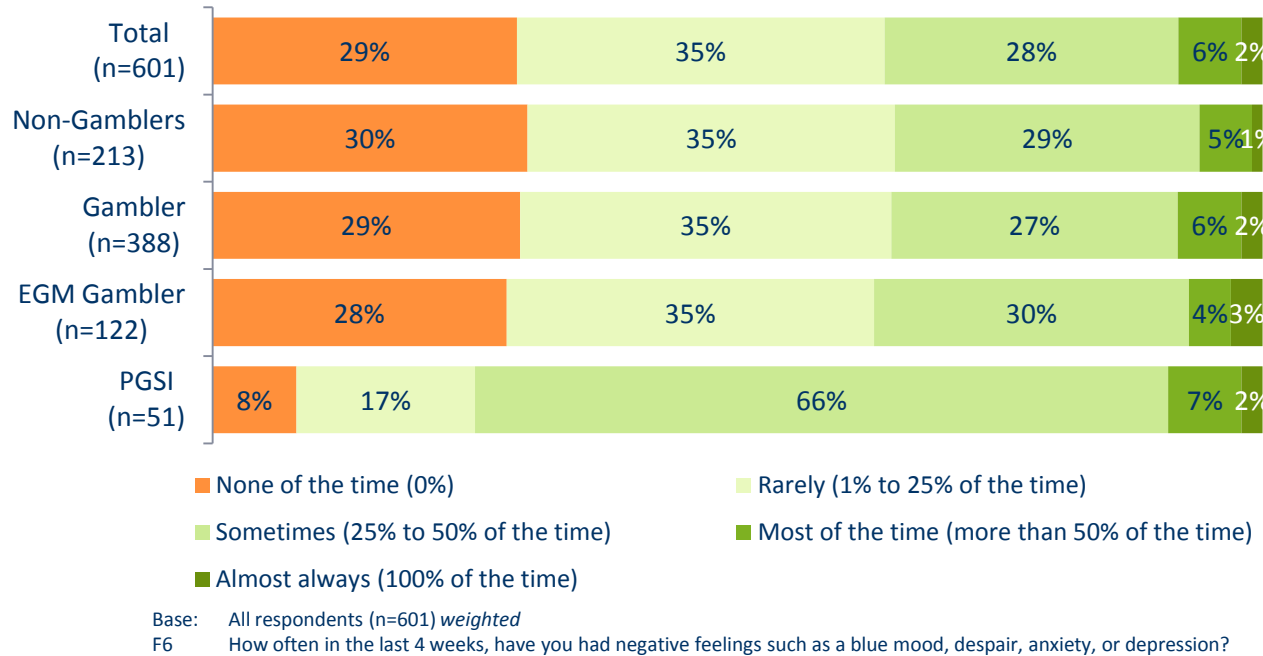
Figure 1.5.4 Ability to Get Around



1.5.5 Negative Feelings

Around two thirds (71%) of Moreland residents admit to ever having negative feelings in the four weeks prior to interview. This increases to 92% amongst those identified as low risk, moderate risk or problem gamblers. This PGSI group has a significantly high incidence of saying that they *sometimes* (25% to 50% of the time) (66%) have negative moods.

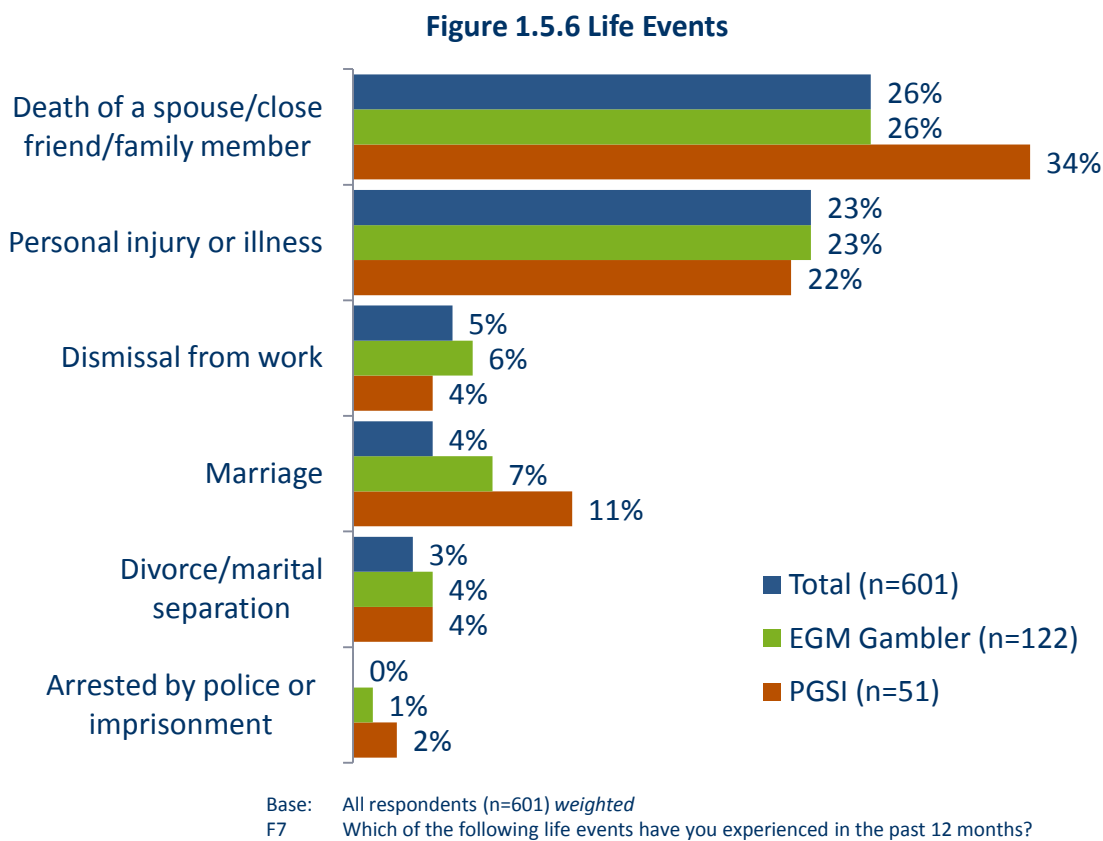
Figure 1.5.5 Negative Feelings



1.5.6 Life Events

In order to better understand the experiences of those in the Moreland area, all respondents were asked to indicate which of a number of life events they had experienced in the 12 months prior to interview. These items represent the top 8 most stressful life events in the Holmes and Rahe Stress Scale. They indicate that there may be risk but also that there may be consequences. Approximately one quarter (26%) indicated they had experienced a death of a spouse, close friend or family member and 23% indicating they had suffered a personal injury or illness.

The figures shown on the chart relating to low risk, moderate risk and problem gamblers (PGSI) may look like notable variations to the average, however these differences are not statistically significant.



There is a standard measure, or *life events score* which is commonly generated as a result of this question. When undertaking this life events score calculation on this data, the overall total is 43.79. When comparing the total life events score across demographics and gambling status it is clear that there is no statistically significant variation. Where variations are evident, such as for PGSI in the figure above, the sample bases are too small to confidently say that the difference is statistically significant (for a base of 51, the proportion 34% requires a variance of more than $\pm 13\%$ to be statistically notable). This suggests that, in the Moreland area, these life events are not influencing propensity to gamble, or become a problem gambler.

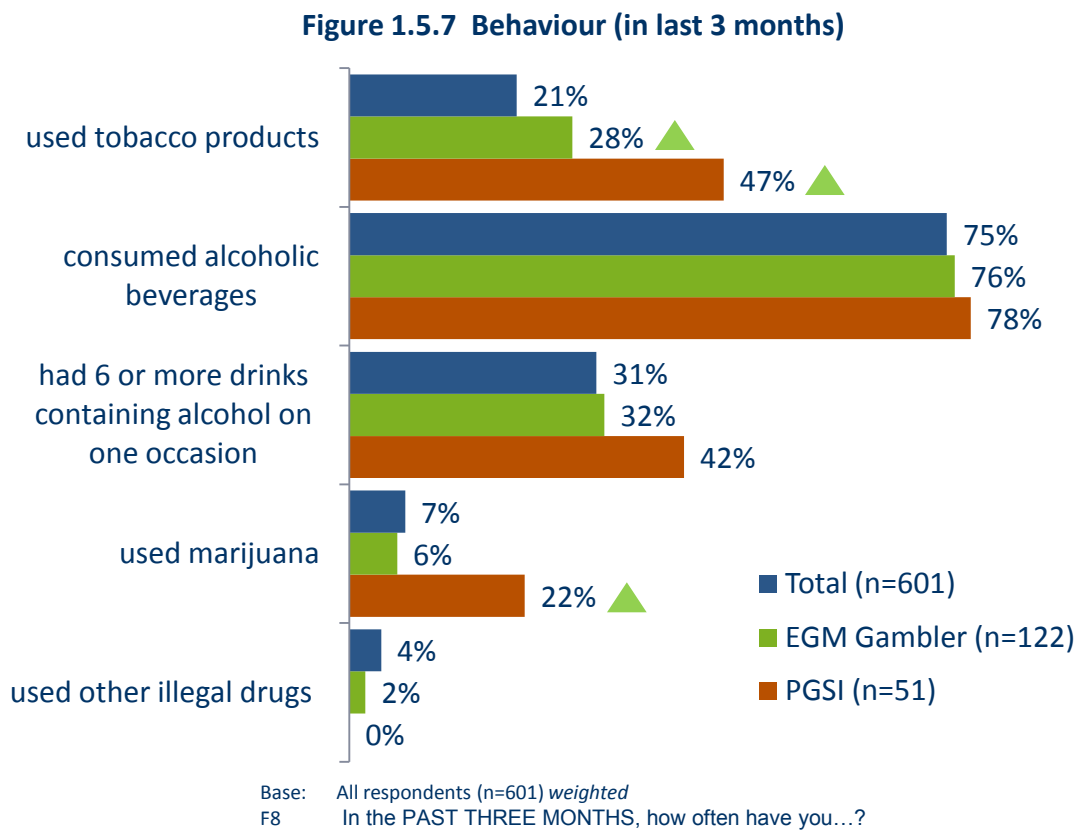
* The Holmes and Rahe Stress Scale was developed in 1967 based on a study of 5,000 medical records. A positive correlation was found between life events and illness. A matrix was developed where different life events were assigned values according to their influence on health (for instance, death of a spouse has a life event score of 100). It was found that those with a stress scale of more than 150 have an increased risk of illness. 11% of the MCC sample registered more than 150 on this scale, but there were no significant variations in this by gambling status.

1.5.7 Alcohol and Substance Use

A further question sought to identify addictive or harmful behaviour by measuring self reported incidence of consumption of alcohol, tobacco and illegal drugs.

As can be seen in the chart below, those identified as low risk, moderate risk or problem gamblers (PGSI) show significantly higher incidence of using tobacco products and marijuana, but not other illegal drugs.

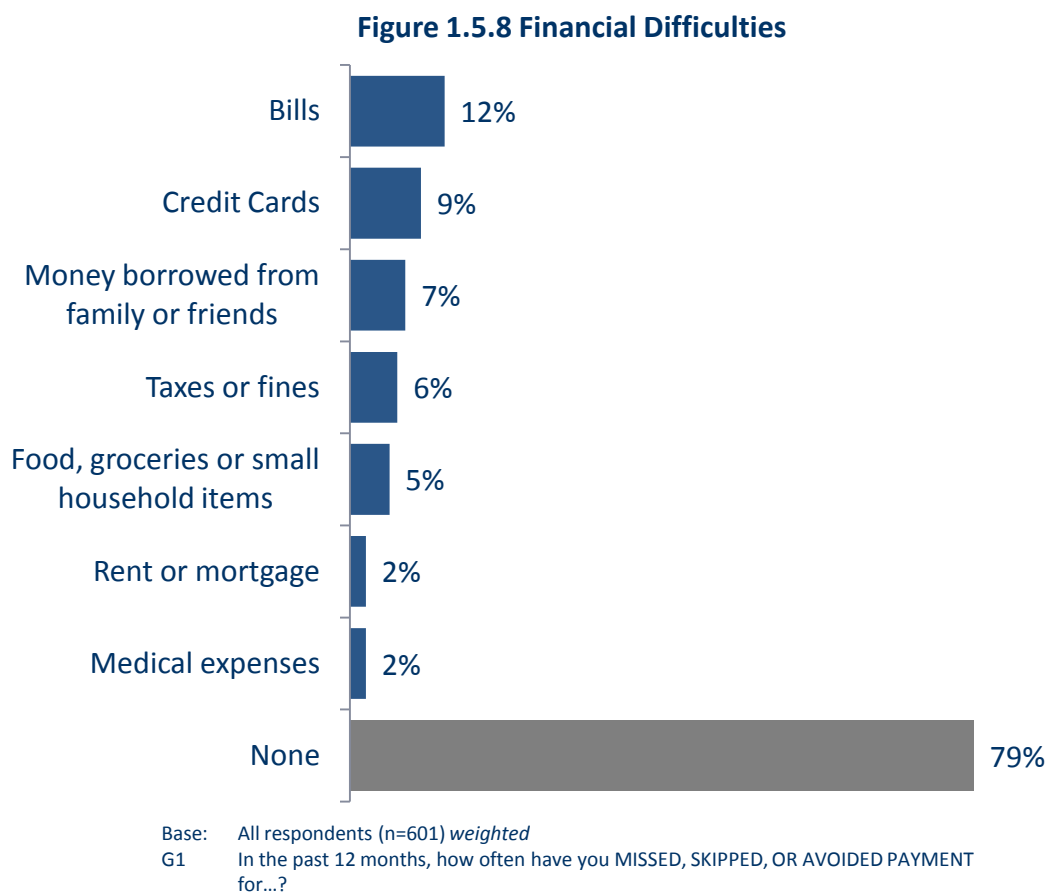
With regards to drinking, gamblers in general (not specific to EGM) show significantly higher incidences of consuming alcohol (79%, compared to 67% non-gamblers) and binge drinking (6 or more drinks – 35% gamblers compared to 23% non-gamblers).



Indeed, when calculating *probable hazardous drinking* (those who have had 6 or more drinks monthly or more often – overall 22%) it is apparent that general gamblers are much more likely to engage in hazardous drinking (26%, compared to 15% non-gamblers), as are those who are low risk, medium risk or problem gamblers (40%, compared to 20% not problem gamblers). However, there is no notable statistical difference between EGM gamblers and those who hadn't used EGMs in the year prior to interview when analysing probable hazardous drinking.

1.5.8 Financial Difficulties

All respondents were asked to specify how many times they had missed, skipped or avoided payment for a number of financial hardship situations in the 12 months prior to interview, with very few saying that they had:



The incidence of having experienced *any* of these was 21%, increasing to a significant 44% amongst those who were identified as low risk, medium risk or problem gamblers. From this list, the key financial difficulties experienced by low/medium/problem gamblers are paying bills (30%), paying credit cards (20%), medical expenses (7%) and money borrowed from family or friends (25%).

1.5 Comorbidities

When exploring a variety of quality of life, mental and physical health and life events variables it is clear that those who are *at risk* or *problem gamblers (PGSI)* experience a much higher incidence of these issues.

Specifically, those identified as PGSI on average rate themselves as having lower quality of life, more problems with physical pain, a higher incidence of needing medical treatment, lower levels satisfaction with their personal relationships, lower physical health rating and experience negative feelings more often.

Whether this is as a result of gambling, or the initial trigger to use EGMs, can not be identified. However, it does clearly show that in order to assist problem gamblers the available resources will need to encompass services that cover a variety of health and well being issues.

Qualitative Research

Stakeholder Insight into the Local Social Impacts of EGM Gambling





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2.1 Results

2.1.1 Qualitative Participants

The level of experience with the social impacts of EGM gambling was varied across all of the participants in the qualitative stages of the research.

The aim of the deliberative events were to reach those who had some experience with EGM gambling in the Moreland area. Among participants in these events, experience ranged from no experience at all to working directly with people with EGM problems. It was found that many of those who initially perceived that they had little experience in the area had indeed experienced an effect of EGM gambling in some way, suggesting that for some it is not a phenomenon which is immediately salient. This observation alone highlights the importance of raising awareness amongst the community as it is a social issue that may go unnoticed if it is not greatly impacting on the individual.

In addition, there were a number of participants with industry experience, working directly with venues and EGM players. The deliberative events also involved a number of participants where indirect experience was gained through working with families. In some cases EGM gambling problems emerged as triggers for family issues which in turn resulted in seeking help through various support services. Finally, there were a number of deliberative event participants from related community groups.

The two focus groups covered general community members and were not focused on speaking to people with direct experience. Instead one was focused on young people, discussing with a group of teenagers their perceptions about EGM gambling and its' social impacts. The other group was with businesses, to gauge the perceived impact on their business. Despite EGM experience not being within the recruitment specifications, it was found that many of those we spoke to had either indirect or direct experience with someone who had used EGMs or who had a problem with them.

The in-depth interviews covered a variety of individuals, all with some kind of direct experience with EGM gambling. These included venue operators, police officers and EGM gamblers.

2.1.2 EGM Gambling Background

EGM Gambling Motivations

Whilst it was not a requirement of the brief, we began many of the qualitative enquiries by giving participants the opportunity to discuss why they believe people start using EGMs. There is a lot of literature in the field exploring this topic, however we felt it was important to cover this in part to allow them to discuss this topic (as it is one that we felt many would want to bring up in the conversation) and also to provide some further insight into motivations to assist in the design of community education and social marketing strategies.

A variety of different reasons were put forth, as discussed below. The quantitative research provides further information on this issue, specific to the extent to which each motivating factor is at play within the Moreland community (Section 1.2.3: Gambling Motivations).

Social

One of the main motivations identified in the quantitative research, social reasons, was also widely discussed in the qualitative research. This social reasons motivator is essentially two-fold; on the one hand some people will use it to relieve boredom, whilst on the other they will use it to enhance other social activities. In both instances it is primarily a function of feeling as though one is interacting with other people. With regards to the boredom driver, it was felt that EGM gambling provided an important social outlet for many people who had little else to do with their time. For some it may even be a way to meet new people. This was observed to be particularly the case amongst the elderly and the non-working (often female and Culturally and Linguistically Diverse (CALD)) member of the family. One observation was that EGM gambling was a legitimized acceptable place for women to go because EGM venues are widely considered to be social environments.

It was also observed that EGM gambling provides an activity for friendship groups. Indeed, one venue operator observed that often groups of young people will have a meal at the venue and then as after-meal entertainment they will spend a short time on the EGMs. It was further observed, that this style of play, whereby it is a group of friends undertaking the activity as an aside to other social engagement, they will seldom spend large quantities of money or time on the EGMs.

“From my experience its either [...], a change that’s happened and this is a way of responding to that change or replacing something or it’s an opportunistic thing as a social outlet or an entertainment / recreation outlet”

Furthermore, in the deliberative events there was a discussion around the positioning of EGMs within hotel venues leading to the uptake of EGM use as a social activity. Given that there are people for whom meeting at a hotel is part of their socializing, it was felt that the reduction in inhibitions caused by alcohol, coupled with the appeal of hearing money being dispensed by the EGMs can lead to use, and indeed sometimes over-use due to intoxication leading to losing track of expenditure.

“It’s a social place so they can legitimize that they can be there – putting money into the machine is part of the culture in those places – then you have the drinking and the chatting – it’s very easy to lose track of how much you are putting into a machine”

During discussions it became clear that there is a perception that there is a segment of EGM players who play the machines to feel as if they are socializing without actually having to speak with other people. Their desire to do this may stem from mental health issues, or lack of personal confidence. It was felt that these people see the benefits of having somewhere climate controlled to go, away from their house, with free or cheap refreshments. This was particularly observed amongst the CALD community, where recent immigrants are unfamiliar with the language, have no local family or friends and do not yet have employment.

Recreation

The perception that playing EGMs is fun or exciting is believed to motivate some people to play. Indeed there are even bus trips which perpetuate this perception, which are observed to be popular amongst the older segments of the population. Often these bus trips involve free meals and travel, and provide people with an outlet for socializing, so are viewed as an attractive form of entertainment for particular segments of the community.

It was further observed that in some communities there are few entertainment or recreation alternatives, so if people want a safe place to go away from their home to relax and even socialize, a gaming venue is the only option for many, especially with venues being open longer hours and near public transport. Even when these venues are not the only option, they have entertainment appeal due to their habit offering of subsidized meals and refreshments, climate controlled environment, and in some cases perceived safety.

Money

For some EGM gamblers, a key motivation is perceived to be the money, be it chasing losses, the thrill of the win or the hope of winning money. Whilst it can be assumed that there would be some underlying desire to win money for every individual who plays, these specific financial drivers are presumed to be most prominent amongst at-risk or problem gamblers. Indeed, it was observed that there is a segment for whom the hope of winning money may be a way for them to make ends meet. One example was provided of this type of situation, where a family had gone from two incomes to one due to the birth of their child, and the EGM gambling was considered to be a way to gain additional money each month to cover expenses.

There was also some discussion about the perception of winning, and how from a psychological perspective sometimes people can lose sight of the losses.

"The wins are more memorable than the losses. They lose \$10 here, \$20 here, \$50 on another occasion. All of that adds up to a huge amount of money but it's the time they win \$300 that they remember, not the \$1,000 that they've lost on the way to winning that \$300"

Coping

The concept of psychological issues motivating the play of EGMs does not solely mean that the player has a mental health problem. For instance, there are many psychological triggers used by EGMs and venues to encourage play, including bright lights, sounds and imagery.

However, it was also observed that the play of EGMs can correlate with mental health problems. One such problem was put forth as self esteem issues, whereby people play because they are dissatisfied with other areas of their life, or they do not have the esteem to socialize verbally and it makes them feel as though they are still in a social environment. Furthermore it was understood that others may use EGMs to block out some aspect of their life that they do not wish to think about, be it depression, emotional issues or other mental health problems.

Escapism was also put forth as a potential motivator, escaping boredom, partners, violence or even a change in life situation such as the death of a family member or other trauma.

EGM Gambling compared to other types of Gambling

A short amount of time was also devoted to the difference between EGM gambling and other types of gambling. As this enquiry was a minor objective of the research, it was covered briefly.

Within one of the deliberative events, it was suggested that there was a subconscious hierarchy – almost a class system - to gambling, whereby horse racing is perceived to be superior to EGM gambling because EGM gamblers are *“mindlessly trapped in a machine.”* It was suggested that the prevailing feeling amongst the gambling community was that more money can be made with sports racing and that EGMs are designed to suck people in and lose a lot of money.

There was further suggestion that EGMs promoted a kind of mythical thinking, particularly in regards to the perceived chance of winning. For instance, frequent EGM players have a lucky car park, or lucky machine. Whilst this phenomenon isn't limited to EGM gambling, it was felt that it is more prominent amongst EGM gamblers.

EGM gambling was also perceived as having a wider array of psychological effects on the player than other forms of gambling. Some felt that EGMs were far more effective at *“sucking people in”* by providing intermittent reinforcement (the inherent cycle of comparatively small wins that accompanies the more frequent losses), and causing a *“trance like state”*. Indeed, when in this *“trance”* it was put forth that people can lose a lot of money without realizing it and also switch off from their worries and concerns.

Further examples of EGM venues *“fishing”* for players and *“keeping them hooked”* were also noted: one participant gave the example of a venue that had a wall between the EGMs and the bistro area that didn't stretch all the way to the roof, so diners could hear when people won, enticing them to play. In another example, it was pointed out that some venues have no clocks or transparent windows in the gaming room, so people are unaware of how long they are there.

The fact that the machine appears to respond to the user was suggested as unique to EGMs, and in all likelihood very appealing to those who feel socially isolated.

EGM gambling was also perceived to be a less common form of problem gambling, but when people do have a problem it can be far more detrimental financially.

Finally, in one focus group, it was suggested that EGM gambling is often perceived as a more acceptable form of gambling and seems harmless to many (until a full accounting of losses over a reasonable period is made).

Why do people develop gambling problems?

Based on the experience and perceptions of participants in the qualitative research, there are a number of factors which are understood to trigger problem gambling with EGMs.

One of these is a major life event. Examples given include the death of a loved one, trauma or loss of employment.

"A lady who is a volunteer didn't start gambling until she was about 55 and that was when her son died in a car accident – she'd never gambled before but suddenly in response to that trauma she developed a gambling addiction"

An addictive personality was also considered to be a trigger to having problems with EGM gambling. It was felt that there is a certain proportion of the population who are genetically predisposed to becoming addicted, be it to alcohol, cigarettes, gambling or other harmful activities. It is felt that the easy accessibility of EGMs makes this an activity which is highly addictive to these predisposed people. Perpetuation of this addictiveness is the immediate nature of EGMs:

"It's immediate. If you are going to lose, it's immediate. Whereas with horse racing, if you're serious about it, you have to study the form, wait for the race to occur. With Tatts lotto you have to buy your ticket and wait 24 / 48 hours for the draw. The only immediate forms are machines where you can rattle off a game every 20 seconds"

Strategies to stop people becoming problem gamblers

The deliberative events brought together a number of people who work in the area of gambling harm minimization. Therefore we took the opportunity to have a brief discussion with them about the potential actions that can be taken to stop people from becoming problem gamblers. The key suggestion was the provision of alternative recreation, particularly for the elderly and immigrants. When providing alternative entertainment, consideration needs to be made to providing an environment that replicates the benefits of EGM gambling venues; a climate-controlled safe venue suitable for socializing. Some suggestions made were sports clubs (perhaps bowling clubs for the elderly who are unable to play more active sports), community clubs, 'men's sheds', and neighborhood houses.

When designing alternatives to EGM gambling the qualitative discussions raised the point that it is important to consider that there will be a need for both day time and night time alternatives, and that the target markets for each will be different. It is assumed that day time players consist of mothers, the unemployed and shift workers whereas night time players are usually employed during the day.

Another option discussed was the adjustment of machines using a number of strategies:

- Slow down the number of games people can play; and
- Pre-commitment / smart card system (although this reduces revenue for the venues so would be difficult to implement).

There was also some talk of training the staff in venues to recognize when someone has a problem and recommend the gamblers help resources. Indeed, there is currently a program running in Victoria to train venue staff on this very thing. However, one of the venue operators voiced his concern with encouraging staff members to be directly involved in encouraging that customers seek assistance because of the level of emotional and physical risk to the employee. Instead, this venue made assistance information feely and easily available within the venue.

From a baseline perspective, some considered that Australian society is partly to blame for addictive EGM behaviour, and that a shift in social thinking would be needed to reduce problem gambling. This perception was specific to the belief that *“money can buy happiness and you are great if you have it”*. It was observed that the meaning of money is different in different cultures, which can be particularly observed through some CALD communities who do not show much interest in EGM gambling. Indeed, one participant put forth the perception that Vietnamese and Chinese communities were more at-risk than others due to their strong cultural belief in luck. With regards to the sociological acceptance of EGM behaviour, there was also the argument that our society is moving towards finding enjoyment sitting in front of machines (computers, televisions etc), which easily transfers to EGMs.

From an advertising perspective, the main suggestion was that any communication portray the potential damage of EGM gambling. It was felt that the *“ads at the moment just don’t stick like the BeyondBlue sticks”*. Instead there was a call for advertising similar to anti-smoking campaign, where the hazards and *potentially devastating consequences* of EGM gambling are portrayed.

Whilst the discussion on this topic was very productive it is important to note that one participant did put forth the suggestion that I *“If they have a problem, of course [offer alternative recreation], but if they haven’t got a problem and they actually enjoy it who’s to say that it’s the wrong thing to be doing?”*

In terms of who should be putting these strategies and campaigns into place, many felt that it should be a whole of community response, involving:

- Government;
- community services;
- families; and
- education (e.g secondary school).

Others felt that government policy would be necessary, specifically the pre-commitment strategy. However, it was mentioned that this pre-commitment would have to be compulsory in order to work effectively.

It is clear that EGM gambling is a complex issue, with varying motivations and triggers to uptake. As with many other forms of gambling it serves as a social activity, however in many ways it is more accessible than other gambling types as it is perceived to be cheap, it is locally available, provides a safe environment and doesn’t require any form of strategy to be successful. The qualitative research suggests that action most likely to have an impact on EGM problem gambling will need to involve both equipping people to recognise the real financial and personal cost, and providing suitable alternative activities which are safe, social, cheap and entertaining.

2.1.3 Social Impacts

A key component of the qualitative research was to explore Moreland community perceptions with regards to the social impacts of EGM gambling. The initial qualitative research with service providers (deliberative events), police, venue operators, businesses and young people (in-depths and focus groups) aimed to gain a comprehensive understanding of these perceptions. This information was used to design the survey tool for the community research (see Section 1 of this report), but is also reported below to provide further insight into the main issues at play.

Inadvertent benefits

The discussion of social impacts of gambling began with the inadvertent benefits. It was identified within the first deliberative event that the use of the term positive impacts of EGM gambling was reacted to in a negative way, due to people believing that the EGM gambling could not be viewed in a positive way. Therefore we developed the term inadvertent benefits to try and encourage people to discuss the topic without becoming upset by the fact that we were trying to view EGM gambling in a way other than negative. Indeed, in the initial session, when still using the term positive impacts many participants insisted that there were none at all and refused to talk about the topic in this way.

Young people generally found it a lot easier to put forth suggested inadvertent benefits of EGM gambling than the adults we spoke to.

Financial benefits

There were three key perceived financial benefits of EGMs on the community, specifically venue revenue, employment and perceived reality of winning. Indeed, financial benefits were one of the key areas mentioned by young people for this topic, specific to the benefit to the individual when they win large amounts of money.

“You could pay off your mortgage”

From a venue revenue perspective, this was obviously of financial benefit to the venue owner, however there were other follow-on benefits observed, such as component of this revenue being donated to local sporting organizations, many of whom would struggle to continue operating without these donations. Furthermore, the venue revenue helps to support the provision of private facilities to the local community by way of venue hire facilities for private events.

As an aside, this venue revenue is also of benefit to the state, through taxes, and therefore provides additional finances for distribution to social services. Although some argue that there might be a reduction in the extent of need for social service funding without EGMs. Still others argued that without EGMs this tax would be collected through the GST by people purchasing goods and services with their money instead. Despite this observed benefit to local organisations, within the young people group it was felt that direct fundraising activities could be an alternative option for these community groups, and there was a small risk that this support might encourage people to play EGMs, because the money is going to a good cause.

EGMs also provide employment in the local community, through the hire of staff to serve customers and clean the venue. It was argued however that this is a *“2 edged sword. If money was spent in other ways, maybe there would be more employment”*. In short, community benefits were generally recognised, but it is important not to overstate them.

The final financial benefit mentioned was the perceived value of winning, in that it was understood that the gambler would feel that they have won money and this would result in them being happier, which would in turn effect other aspects of their life in a more positive way. Indeed, in the young persons group it was perceived that that one could pay off debts, such as a mortgage, with winnings from EGM gambling. This is a concerning finding as many within the group agreed that this would be a good thing. Education as to the likelihood of this type of win occurring would be critical to help these young people realise that it is not a feasible outcome.

Social

Through the discussions of the perceived benefits, many were able to identify some social benefits to EGM gambling. Specifically it was felt that for some people, playing EGMs would be better than them sitting at home doing nothing as it gives people a reason to leave their house. Furthermore, the offering of free bus trips to EGM venues aids in social cohesion, as it is encouraging people to meet and socialize with others within their community. For some segments of the community, playing EGMs may be a good opportunity for them to meet new friends, or indeed catch up with existing friends. However, it was observed that the social aspect is often more of a perception than a reality.

"I feel that that is a perception more than reality because I am not convinced that people sitting at gaming machines end up having meaningful conversations with the people next to them that result in any kind of social connection at all"

In essence, EGM venues are considered to be a place where people can meet with friends in a safe, clean and warm environment.

"You might bump into someone you know but it's OK if you don't as well"

Among young people, it was understood that playing EGMs was a good social outlet, especially for the elderly. It was understood that for some people it is a legitimate source of entertainment in an environment which is generally considered to be safe, although one person said that one could be mugged for winnings so it was not necessarily as safe as it felt. One participant even felt that it would be a good way to make new friends.

Health

There was some discussion within the second deliberative event in particular that playing EGMs may result in a respite from stress for some people, thereby having the positive health benefit of stress relief. However it was noted that losing money on EGMs can then cause more stress after the activity so it is not always a long-term solution. If used for respite from stress at home, it was observed that the problems would still be there when they returned, further accentuating the short nature of this benefit.

Other

A number of other potential benefits were briefly mentioned, such as:

- Exercise – walking to and from the venue;
- Safe Haven – it is a safe place for people to go, particularly for women (it is felt there was a risk of harassment of women at a hotel);
- Free/cheap food; and
- Friendly staff.

“Some people are getting a lot out of the staff, a lot out of the facility. They are enjoying it. It’s actually making a difference. If they’ve got the gaming under control it’s really really good”

In summary, although when pushed people were able to identify a few potential social benefits of EGMs, they were almost always accompanied by a proviso that there were negative aspects as well, such as employment drawing from other opportunities, social being just a perception and not reality and stress relief being very short lived.

Negative Impacts

None of those who participated in the qualitative aspect of this research had any difficulty thinking of, or discussing, the perceived negative impacts of EGMs on the community, even those who insisted that they had no experience in the field could offer an opinion on the matter.

A wide variety of perceived negative impacts were offered, and have been categorized and discussed in the following sections.

Health

There are two components to negative health aspects of EGM gambling, physical and mental health.

Fewer physical health impacts were put forth by the adults we spoke to, with the main ones being a lack of exercise (due to sitting at EGMs for long periods) and the adverse physical effects from some of the mental health impacts such as stress and depression (e.g blood pressure). However, within the youth group discussion a number of potential physical health problems were put forth, including poor eyesight from staring at the EGM lights for long periods, RSI or finger injuries from pressing the buttons for long periods, hearing loss from the volume of the machines, dehydration because they are too engrossed in the machine and neglect to drink water, turn to eating junk food rather than home cooked meals, and neglect medication through forgetting to take it or not going to the doctors as often.

The perceived mental health effects were extensive. With many of these, there was a perception of co-morbidity, whereby the EGM gambling could be a cause or an effect of the mental health issue. One such example was addiction, particularly drug and alcohol addiction, be it that they gamble to pay for their addiction, or they develop the addiction to try and counter the gambling. Anxiety and depression were also discussed, with suggestion that for some people suffering from these, playing EGMs was an escape from their problems.

Another discussion put forth the perception that EGM gambling would reduce self-esteem, through repeated losses, family problems or lack of finances to provide for oneself or ones family. It was even felt that the mental pressure of EGM problem gambling could in some cases lead to suicide or self harm.

[Problem Gambler] “My family would rarely know that it impacts me personally. Mentally and physically impacts on me. I was affected by depression in the past and became withdrawn. I didn’t want to do anything or go out anywhere and was very unhappy, which in turn impacts your kids which doesn’t really help you, as you are punishing yourself. I used to think I was not good enough to go out, since I’d done wrong by going to the pokies. I didn’t deserve to go out. You can become very self absorbed.

The young people we spoke to felt that EGM use could result in a change in personality, where people become angry when they lose, and that this loss of money can lead to stress and even suicide. Furthermore, it was perceived that EGM gambling could lead to people asking for money in the street or even manipulating their own friends or family members for money.

All of these potential mental health impacts were understood to place a burden on the mental health industry, particularly the care industry when the family structure breaks down.

Self-enforced social isolation was also discussed. It was believed that people can become blamed for their EGM gambling and labeled as a problem gambler, which in turn leads to them socially isolating themselves due to the associated shame and stigma. One participant even mentioned a situation they were aware of where an individual was excluded from their family due to their EGM gambling.

Family

As a follow on from mental health impacts then impacting on the family, a more in-depth discussion of family impacts in general occurred. Specifically, the negative impact EGM gambling can have on innocent spouses and dependants, and the belief that it can even lead to homelessness (unable to pay rent, or asked to leave the family home due to gambling).

In one deliberative event there was extensive discussion about the specific effects it can have on child development, primarily due to the provision of proper nutrition (which would be lacking if there was not adequate money for food due to EGM gambling) and missing out on education or social activities due to lack of finances or lack of effort on the part of the parent(s). Furthermore, EGM gambling could result in a breakdown of the family, which in turn could lead to child development problems.

One participant suggested that children of problem gamblers are more likely to be problem gamblers themselves due to the activity being normalized and hearing about the money their parents have won. However, in the young person’s focus group, there were a couple of participants whose parents had in the past been problem gamblers and these individuals were insistent that they would not follow their parents addiction because they had personally experienced the negative impacts, specifically not having enough money for food, and the gambler having depression.

“There is a lot of evidence that children of problem gamblers are more likely to become problem gamblers themselves. Gambling is normalized, part of that is parents talking about the money they have won, not the money they’ve lost. People give their kids money to bet on the Melbourne cup and if they win, they get to keep the money, if they lose, it wasn’t their money to begin with so it’s a way of shielding the kids from the fact that you lose money and giving them the sense that you win money”

Another negative family impact discussed was domestic violence. It was felt that stress and financial problems caused by problem EGM gambling could result in violence within the home. One respondent suggested that this was primarily characterized by the male with the gambling problem and the female on the receiving end of the domestic violence. It was mentioned that this type of domestic violence can also effect children in families. Furthermore, in some instances a pre-existing case of domestic violence may lead to EGM play, using the activity as a way to escape the domestic situation.

In the focus group with young people a number of family issues were discussed, specifically, situations where parents leave children alone within a venue whilst they are in the EGM area playing. In one instance a respondent had observed a young child looking after a baby for a number of hours in the dining area whilst their parent was playing EGMs. Perceptions of the potential family impacts revolve around themes of neglect and poverty. It was believed that EGM gambling can lead to family members not being able to provide a house, food, clothing or pay bills. Indeed, it was perceived that this lack of finances can lead to fights between family members and even the break-up of families. One participant specifically referenced the cartoon *The Simpsons* in relation to family impacts, referring to the EGM gambler missing family events due to their addiction.

Financial

Through discussions about the negative social impacts of EGM gambling a wide variety of financial issues were raised. Financial difficulties within the family unit was the primary one mentioned. This covers many aspects:

- Less income for nutritious food;
- Can't buy groceries for the week;
- Children having no lunch at school, not being able to have breakfast, not being accepted at school for not having the right clothes;
- Missing meals; and
- Inability to pay mortgage or rent, leading to homelessness.

"We have implied poverty but poverty is the real issue here. Particularly if they are low income earners in the first place and then they are racking up debt – it compounds the issue"

It was put forth that EGMs are the fastest way to lose money quickly because they are limitless; *"If you have access to money, you can spend it all. Substance abuse is different. You can only drink so much before you pass out"*. This ties in closely with psychological issues relating to addiction, where people engage in repetitive behaviour despite the consequences.

Negative financial impact on the community was also raised, with the suggestion the EGM gambling *"takes money away from communities and hands it to already very wealthy corporates"*. This places a drain on private support services, particularly services who provide support to those disadvantaged from gambling. It was suggested that if the \$70 million lost on EGMs was put towards other businesses and services there would be a significant benefit to the community.

“\$70 million would pay for a lot of food or sports classes or music lessons or community education programs or shoes for kids, whatever it is. A lot of spending in other areas would create a lot more employment and would have a much more positive benefit [to the community]”

One of the perceived key issues with EGMs was that it was perceived as affordable entertainment, particularly by those on a lower income. Within the discussions it was felt that those on higher incomes were able to afford other entertainment, for instance movies or restaurants. Furthermore, the perception is that one only needs to put in a small amount of money, but then they get sucked in and feel the need to put in more to receive a return on their investment. Other forms of gambling, such as table games at the casino, often require a much higher initial input of money (e.g. \$50 tables) therefore are often inaccessible to those on lower incomes.

It was further suggested that EGM gambling can impact on finances through loss of employment due to not showing up for work or even stealing from the employer to pay for an EGM habit.

“We experienced that [theft] ourselves. Eight years ago, we had a treasurer who played the pokies and used our funds. She went through a really bad black period in her life with her relationship and she had a responsible job with cash and she turned to gambling – it became addictive and she lost thousands. She paid quite a bit of it back but who knows how much she took, we just don’t know”

Crime

Although there was only one individual in the qualitative research who had experienced any EGM-related crime first hand (see quote above relating to fraud), one venue operator said that he had to be careful where he parked his car due to break-ins. However, it is difficult to say whether this can be directly attributed to EGMs. Furthermore, the in-depth interviews with police officers provided insight into crime particular to the Moreland area, but again it is impossible to directly attribute this observed crime to EGMs. Officers felt that EGM usage could very well be a contributing factor to familial financial insecurity, however it was not a primary cause. In the deliberative event discussions it was felt that it is feasible that problems with EGM gambling could lead to crimes such as theft from homes, cars and even business (as the above example illustrates).

The venue operators revealed that there is little crime within the venues, such as violence or theft, which can be directly related to EGM players. One operator mentioned that he can recognize a drug dealer because they wear bum bags, however, he said that they seldom go to the EGM area of the venue as EGM players (at his venue at least) do not tend to have any interest in illegal drugs. However, there were a few observed instances where EGM players adopted antisocial behaviours, such as swearing, spitting and hitting machines when they did not win.

Amongst young people, it was felt that if people spent a lot of time on one machine, and then someone else uses the machine after them and wins the first person may get angry and fight the second person. No one had directly witnessed this, but they felt it would likely happen. In addition to fights, it was perceived that general anger could occur, where people yell and become angry if they lose money. The main criminal impacts mentioned by young people were blackmail and fraud, begging, stealing and fighting and harassment.

2.1.4 CALD Community Variations

Within the deliberative events the topic of CALD communities was explored. Specifically, participants were asked if there were any differences in EGM gambling habits among these communities. A number of participants were able to provide some insight due to their job roles at the time.

Initially, there was a general consensus that there is no difference in EGM use between those from CALD communities and those who are not, however as the topic was discussed further it was discovered that it is in fact a very complex issue.

On the one hand, the perception was that CALD communities have more close-knit families, leading to the mothers not being left on their own very often, thereby reducing their need and opportunity for seeking out alternative forms of entertainment. However, upon exploring the issue in more detail it became apparent that those in CALD communities often experienced more risk factors which would make them vulnerable to developing a problem with EGM gambling, such as:

- Isolation;
- Language barriers; and
- Not as well off financially

Refugees and asylum seekers were a more unique subset of the CALD community for a number of additional reasons:

- They will often have a lack of money initially, leading them to seek out opportunities for increasing their financial base, often through betting;
- They are more at-risk of social isolation due to their limited English language skills, lack of knowledge about the area and lack of friends or family in the country;

“Pokie machines are so prominent you can get to it easily. There is not a lot else for people to do”

- It was observed that when they do get work it is often shift work (such as taxi driver) which involves unusual work hours, leaving them having to find a social activity during hours where little else other than EGM venues are open; and

“When they get work, it’s things like Taxi driver, which has risk factors (work finishes at 5am so they have nothing else to do)”

- It was also observed that some refugees or asylum seekers will use the casino bus services to go to the city to get out of the house, familiarise themselves with the city, and because it is free. Often they will not know how to get to the city and/or they are too scared to go alone so these bus trips perform a valuable service.

CALD groups in general are also perceived to be at-risk due to their lack of understanding of the value of the Australian currency.

"[they don't have the] understanding that what you need from the shops is going to cost 80% of what you have and if you spend \$50 you won't have enough for what you need"

An important point made in the deliberative event was that any marketing campaign to address these issues within CALD communities would need to consider that those with greatest need of education may also have poor literacy skills. The language barriers provide challenges with regards to increasing awareness of the risks and also provision of services. Furthermore the options for alternative entertainment for those who do not speak English are limited. EGMs are unique in that they do not require an understanding of the language to operate them.

"You don't need the language to play the games, the buttons light up when you need to press them, they just need to pick red or black"

Overseas students were also identified as a potential risk group. It was put forth that they arrive with large amounts of money for their schooling, don't have the support networks of other students, and have no social networks around them, so are drawn to EGM gambling. One of the major issues with addressing the overseas student EGM gamblers is if they become problem gamblers they use their money quickly and then have to go home, so they "slip through the cracks" of the system and therefore it is difficult to reach them to help.

2.1.5 Older People

Among those who participated in the qualitative aspects of this project, there was often mention of the elderly as a key group who use EGMs. For some this categorisation was merely a perception (such as in the case of young people's views) whereas in other cases, such as venue operators, it was an observed player trait.

There is a general assumption that the elderly are more frequent EGM gamblers, using the activity as a social outlet and something to relieve boredom and get them out of the house, however it is perceived that the elderly are not as often at-risk gamblers as they use EGMs more so for the social aspects than the hope of winning money. In addition, EGM venues provide a safe environment for them to play amid growing concerns about the dangers of public spaces.

Indeed, the venue operators surveyed within this research all suggested that the elderly were the core market for EGMs, yet will rarely play them to the extent whereby it would be considered problem gambling. To illustrate this point, one venue operator said that the elderly patrons would often use the EGMs for hours at a time and spend no more than \$20, due to their use of single lines of play.

In some instances, the trend towards the elderly playing EGMs is leveraged off other activities within the venues which appeal to this demographic, for instance bingo nights. Patrons will attend for the bingo night and then play the EGMs afterwards.

Other EGM related activities also target the elderly, with casino busses being provided for day trips. These provide people with entertainment and the opportunity to socialise.

Providing entertainment for those who are elderly is a key function of society and EGMs seem to perform this function in terms of providing easily accessible entertainment and a safe place to go. However, given the lower income of those who are retired, it is a risky activity should the individual develop an addiction. Therefore it is important to provide alternative activities which can provide a similar level of accessibility, entertainment and safety.

2.1.6 Other At Risk Groups

Throughout all of the qualitative research a number of groups of people were identified as being more at-risk of becoming problem gamblers than others.

Vulnerable

The research suggests that it is widely believed that EGMs prey on the vulnerable. By vulnerable, our understanding is that this means people who have some occurrence in their life which leaves them feeling the need for escape or social interaction.

“You don’t feel the need to get close to the next big win if you have a million dollars sitting in your back pocket but you might if you owe rent next week for a \$1,000 that you haven’t got, you might be inclined to spend your last \$100 to get the \$1,000 because what other choice have you got?”

“For example, I spoke to a mum one day – her son was gambling and leaving her grandchildren without basic needs and she said “he needs to go out because he has friends there and he needs to speak to someone” she didn’t see it as a problem”

Low socio-economic status

As touched on earlier, it was felt that those from a low socio-economic background are more susceptible to taking up EGM gambling and developing a problem with it. This is due to a number of reasons, including the inability to afford other forms of entertainment, a lack of education about the odds, and the need to chase losses due to low levels of income. However, it was mentioned by one participant that this is possibly due to a stigma rather than reality. The same respondent did observe that per capita there do seem to be more machines in the low socio-economic areas. Whether this is due to demand or not is not clear.

“They [high socio-economic people] would go to the high roller room in Crown rather than sitting on the pokies for 2 hours”

Mental health issues

There were a variety of reasons put forth as to why those with mental health issues are more susceptible to developing problems with EGM gambling:

- Disconnection from society;
- Less likely to be working during the day;
- Don’t have the ability to stop;
- Looking for a way to escape anxiety or depression; or
- Self-esteem issues (from childhood or adult relationships).

Shift Workers

There was some discussion about shift workers being a high risk group, in particular taxi drivers, due to the lack of alternative entertainment options during the times they are not working.

Gender

There were not any instances throughout the qualitative research where any participants felt that there was any difference in EGM use, or propensity to develop a gambling problem, by gender. Whilst it was recognised that some people were likely more at-risk due to their situation, for instance stay-at-home mothers who have the time during the day to visit EGM venues, no one had experienced this phenomenon in reality. Instead it was generally believed that use of EGMs was relatively consistent across the genders.

Other

In the discussion with young people, when asked if they thought there were any types of people who were more likely to have problems with EGM gambling, participants raised a number of categories.

- Those with addictive personalities, in particular people who have problems with drug or alcohol addiction;
- Those who have little education as they do not understand the risks involved with playing EGMs;
- Older people (those within the 50 to 80 year old bracket) as they use it as a social outlet; and
- Older people with gambling problems (*"Crazy old cup-throwing women"*). This suggestion was based on the direct experience of one participant who had seen an elderly woman throw a cup across the room when she didn't win on an EGM.

2.1.7 Perceptions of Younger People

The focus group held with young people who live within the Moreland City Council area revealed a number of variations in perceptions amongst these youth.

The group consisted of 10 youth, aged between 11 and 18 years of age, with an even mix of males and females. Given most of the participants were too young to have legally gambled themselves, few had hands-on experience with EGM gambling. However, it became clear throughout the discussion that many had indeed experienced the dynamics of gambling, that is, playing a game of chance for reward, within components of the computer games they are exposed to. Some examples given were the Mario game on the Nintendo DS handheld game console and a Pokemon game. According to the provided descriptions, many games targeted at children involved components which are clearly gambling functions, with some even going so far as to look just like EGMs that one would find in an EGM venue. Almost all participants within the group had played a computer game with a component very similar to EGM gambling, although the general consensus was that they didn't enjoy these parts of the games because they always lost.

A number of participants (six out of the ten) had experienced gambling through family members or friends' families. When talking about people they knew who play EGMs, there were a variety of types of players, and personal reactions to their playing:

- In one instance a participants friends mum would give her money whenever she won on the EGMs and it was perceived that this was functioning as an encouragement to gamble.
- One participants said that their grandmother plays EGMs once a month. It was perceived that this behaviour was OK as it is a source of entertainment for her and she is responsible about how much she spends. It was a general consensus amongst the group that if one depends on winning then it is a bad activity, however if EGMs are played purely for entertainment with friends then it is OK;
- Another participant had an experience where their father had lost everything due to EGM gambling, with his previous family, and he ended up in a situation where he had to start his life again. This particular person was instant that they would never play EGMs as a result; and
- Another direct experience was where one participants father and uncle play EGMs together. In this instance the participant understood that they would set themselves a particular amount of money for the session (say, \$20 each) and if either one of them won any money they would split it.

In addition to this direct experience, many mentioned television shows as one of the main ways they had experienced gambling. Indeed, there are even shows, such as Las Vegas, which revolve around gambling, although it was discussed that the type of gambling shown on this particular show was more often table games rather than EGMs. However, many said that they recalled seeing people playing EGMs on television shows (yet couldn't recall which shows they were), and that in these instances the shows were glamorising the use of EGMs.

There was a general lack of awareness of proximity to an EGM venue amongst these young people. A couple had been to an EGM venue before, although their experiences with these places were negative. For instance, at one Moreland venue, one person said that you can "*Smell the desperation*". They had seen young people, estimated to be around seven years old, waiting at the door for their parents to come out of the EGM area.

Despite not having personally used EGMs, young people were able to identify a wide variety of impacts of EGM gambling on individuals:

- Change in personality;
- Lose everything (such as their house and family);
- Crime (stealing money);
- Inability to afford food;
- Isolation, which could lead to depression or suicide;
- Anxiety; and
- Family stress

In addition there was a recognition that EGM gambling can take over an individual's life.

"It starts off small, the more they do it the more they want to play until it becomes the foundation of their life"

Reducing the Risks

Young people perceive that there are a number of things that can be done to reduce the risk of people developing problems with EGM gambling:

- Have clocks in the venues (or larger clocks) so that people who are playing can easily see what time it is;
- Alter the temperature of the venue so that it is uncomfortable (e.g. too cold) therefore people don't want to stay there for long periods of time;
- Have the venues closed at set times rather than being open constantly. This concept was discussed in some length, with a variety of ideas such as setting a 'no gambling' times where the machines are turned off; and
- Have warnings on the machines if someone has been playing the same machine for longer than a set amount of time;

Positioning of EGM Venues

At the end of the focus group with young people they were asked if there was any type of place they felt that the Council should avoid allowing EGMs to be placed in venues. There was a strong consensus that EGMs should be kept out of areas with young families, where children were reliant on their parents to support them, as these people have more to lose. Likewise, areas with a high incidence of low income households should also be avoided when deciding on EGM venue locations, as these people also have more to lose. There was a suggestion that EGMs should be placed in areas where there are few people who live in the area.

2.1.8 Alternatives to EGM Gambling

One of the key strategies discussed with regards to reducing EGM gambling, particularly problem gambling, involves alternative activities that could be provided.

It was felt that alternative offerings need to address the main drivers to undertaking EGM gambling in the first place, specifically providing a safe and inexpensive social situation.

However, one participant raised the issue that “Another form of entertainment is not going to solve the problem for those who are problem gamblers because problem gambling is symptomatic of a deeper issue”. (Instead, this group offered some suggestions for making the machine a less harmful product by introducing pre-commitment, slowing the machine down, changing the design - can only use \$5 at a time). It was felt that reducing the number of the machines was unlikely to help as “problem gamblers are going to find a machine”.

“As a community worker, I have a problem with putting the onus on the individual – saying that we will control the individual. I think that the only way to control peoples access if machines continue to be there is to control the number of machines and also make them so that you can’t put \$50 at a time in, that they are all 5c or whatever and you can’t play those multiple things and lose a fortune at a time”

2.1.9 Unique Regional Variations

In order to understand whether there are any factors unique to the Moreland area which need to be taken into account, participants were asked to discuss if there was any variation in EGM gambling when comparing Victoria to other states or indeed Moreland City Council area to other Council areas.

In the deliberative events it was observed that EGMs are relatively new in Victoria. One participant felt that it was easy to see the difference in our society before and after the introduction of EGMs, particularly because it is easy for people to “drop by their local venue 4 to 5 times a week”. It was felt that in places such as NSW they are more “at arms length” whereas in Victoria we are looking more closely at addressing the problem.

Furthermore there was a perception that the machines in Victoria are set at higher losses than other parts of the country.

With regards to the Moreland area specifically, there is a perception that EGMs are more accessible than in some other areas because there are so many venues with machines along Sydney Road.

Furthermore, it is believed that the high incidence of CALD individuals in Moreland could lead to higher levels of problem gambling, due to the vulnerabilities of this community mentioned earlier. However, one individual observed that the CALD community in Moreland does have a high incidence of people from Muslim background, and it is understood that this religion prohibits gambling. It is important to note, however, that the CALD community is not more affected because they are in Moreland, there are just a higher proportion of them in the municipality:

“It has an impact on the CALD community because they are here – They are not more affected”

Finally, there was a perception that Moreland might have more of a problem with EGM gambling due to a higher incidence of low Socio-economic-status households.

2.1.10 EGM Gamblers

After the conclusion of the quantitative research, a series of in-depth interviews were undertaken with EGM gamblers who had participated in the survey (and indicated that they would be happy to then participate in further research). These in-depth interviews covered a variety of aspects relating to triggers to uptake, positive and negative aspects of playing, effect on their lifestyle, potential alternatives, triggers to reduced play, communication opportunities and perceptions of social impacts. Findings from these additional in-depths have been discussed below.

Triggers to Play

In order to assist in understanding what is driving EGM gamblers to use EGMs, we asked them if there is any particular trigger which encouraged them to start playing EGMs', and also if there is a trigger which results in them wanting to use EGMs.

With regards to initial uptake, few could identify anything beyond a desire to just get out of the house, using them as a form of entertainment. Indeed, one respondent said that the establishment they were visiting one time had machines that she happened to use, but she didn't go looking for them.

However, there were a few people we spoke to, primarily the more frequent EGM users, who visit EGM venues expressly to play the machines, or will feel inclined to play them if they are present. Presumably this is the trigger that differentiates those who are at-risk of developing a problem and those who are only occasional players of EGMs.

"If I'm at a venue with a machine (for a social occasion, out for dinner with friends or family) I will specifically want to use the machine if I'm there."

Continued play beyond the first try of EGMs was for a number of reasons. The EGM players surveyed who were regular infrequent players (once a month) it was treated as a social outing.

"My wife and I do it about once a month with a budget of \$20 each"

Those who play very infrequently would appear to do so because they are with other people who play the machines.

Within the in-depth research one at-risk gambler was interviewed and the story behind her uptake of EGM gambling was considerably different. She had started using EGMs through working at an EGM venue and developed a EGM playing habit after the death of a loved one, to help her cope with the depression and stress. At the time of interview she no longer had a problem with her EGM gambling, but said that occasional play occurred for entertainment purposes.

Likes and Dislikes

Of the EGM gamblers we spoke to, many like passing away the time on EGMs. It was seen as a way to get out of the house in an environment where they are not required to do anything for other people. This seems to be consistent across age groups.

"It's a good excuse to have a drink and waste time"

The possibility of winning money was also a positive aspect of playing mentioned by many. No other aspects of EGMs could be identified through these in-depth interviews as being *liked*.

In terms of dislikes, the key one is the infrequency of making any money off the EGMs. There were also other mentions of dislikes, specific to them being antisocial and even in one instance "evil". There was also a recognition of the addictive nature, with one respondent saying that in the past they had a problem with skipping social events to play, and even lying to their partner about their playing habits. One respondent said that their main dislike of EGMs was to see other people *getting caught up in it*. It was felt that they are very easy to use so it is easy for people to become addicted to them. However, those who were recognising the ease of addictiveness of the activity did not consider themselves to be addicted, indeed, they were fairly infrequent players (once a month or less often), suggesting that there may be a group of semi-regular players who are able to participate in EGM use without developing a problem.

Reduced Play Triggers

In order to understand what types of life events or communications have been effective in the past, EGM gamblers were asked if there was anything that resulted in a reduction of the frequency of them playing. While most were not frequent players, one person said that she used to play more in the past but had reduced the frequency of play due to a death in the family, which in turn made her realise that life is short and that she was disappointing her loved ones for no gain.

"It costs more than it is worth"

Another respondent, who had only played once in the year prior to interview, indicated that she didn't play EGMs again because she found them to be boring.

Other regular yet infrequent players who participated in the research had not experienced any life events which resulted in their reduction in play, although the frequency of use for these people was low, therefore reduced play was not as much of an issue.

Potential Channels for Communication or Education

In order to understand the best way to communicate with EGM gamblers, all in-depth EGM gambler respondents were asked what would be the best way to reach them with education messages about the risks of EGM use. As is often the case when undertaking research, most suggested that some type of television campaign would be effective. One suggestion was that it would be beneficial for these television communications to be aired late at night, when people are returning from EGM venues, in order to best reach those who need to see and hear the messages.

There were also a number of other delivery suggestions, specifically:

- **At the venues** – the method of in-venue media delivery suggestions varied from flyers and posters within the venue to the provision of an individual to assist EGM gamblers, for instance a counselor at a booth within the EGM venue;
- **Flyers in the mail** – or some form of letterbox drop. One respondent felt that this type of delivery of communication would be more effective for the psyche of the problem gambler; and

“There is a certain type of person who wants help but they don’t want to admit it, so this means they can consider it for themselves from the comfort of their own home”

- There was also the suggestion that some sort of **warning** could be integrated into the machine if someone was undertaking behaviour which could be interpreted as at-risk EGM use (such as prolonged use).

Potential Content for Communication or Education

In addition to the channel for message delivery, EGM players were asked what type of content they feel would need to be within this communication to reach at-risk or problem EGM gamblers.

In most cases respondents felt that the best way to communicate the potential risk of EGM gambling would be to show the negative connotations of problem gambling. Some suggestions along these lines were:

- Images of people struggling financially – *“Would you like this to happen to you?”*;
- Using shock tactics similar to the TAC ads (Transport Accident Commission who have been depicting graphic accidents within their advertisements to communicate the road safety message) – Showing what happens to people when they gamble their life away. This strategy could also involve using statistics about how many problem gamblers there are, and the crime associated with it;
- Communicate that gambling can affect your family and can make you a different person – Show how it can make people withdrawn and depressed so that people can understand how it will hurt them personally. Indeed it is often a theme in social change marketing to illustrate the personal impacts of a behaviour as people then have a greater ability to grasp the real risks of their behaviour, so this suggestion is very sound;
- Emphasize how it can affect life in other areas – examples provided included social isolation and financial difficulties such as not being able to pay the rent or buy food;
- Another suggestion was to show how it can ruin a person’s family;

- Use of scenarios was also suggested, specifically, showing how unlikely it is that one will win money on EGMs, and even when you do there is a limit to how much you can win if you play frequently due to the odds of winning. There is currently a television advertisement on air that addresses this very point, by showing that one has more chance of finding buried treasure than winning on EGMs; and
- A further suggestion was to show the benefits of not using EGMs. This strategy of social marketing has been employed frequently of late as there are schools of thought that reinforcing benefits can be more effective than shock tactics. Some of the suggested benefits to communicate include having more money to pay bills, being less socially isolated, having more time for themselves, and the ability to communicate better with family and friends.

Potential Alternatives

EGM gamblers were asked to suggest some activities which might serve as alternatives to use of EGMs. Whilst some of these suggestions can meet the initial entertainment driver to play, none cater for the potential winning of money aspect.

Specific to the potential social benefits of EGMs, some alternatives were suggested as follows:

- **Revenue to community groups and sports clubs** – Rather than gaining revenue from EGM venues it was suggested that these groups and clubs could instead generate revenue through sponsorship and fundraising events. However, one respondent did suggest that that clubs and groups would struggle to raise the extent of funds that they would otherwise receive from EGM venues. It was considered that provision of sporting and community groups is very important as they...;

“keep kids out of trouble and gives them a place to go”

- **No EGM Clubs** - To cover the social benefits it was suggested that some feasible alternatives would be to provide clubs that don't have EGMs, such as the local Italian club. It was envisaged that these clubs could have activities such as live music and even pool competitions;
- **Stress Relief** - As an alternative to the stress relief aspect of EGM gambling it was suggested that people could instead have a massage or even see a movie; and
- **Dance Nights** - For entertainment, one respondent suggested bringing back the old dancing nights, like the ones they had in the 50's and 60's, as an alternative to EGMs.
- **Pub Alternatives** - In addition there were suggestions such as providing live music, pool tables, other things to do at the pub.

Despite all of these suggested alternative activities, no one was able to offer an alternative activity to meet the **safe place to go** benefit of EGM gambling. This is perhaps one of the key issues to be considered when planning alternative entertainment options.

Aside from directly addressing the social benefits of EGMs with suggested alternative activities, EGM gamblers were asked to suggest general activities that they thought might be potential alternatives to playing EGMs. There were a wide variety of suggestions:

- Bingo;
- Going to restaurants;
- Family days and fetes;
- Walking groups;
- Day trips to places other than the casino;
- Going out for coffees or going out for a drink with friends;
- Venues without machines;

“so you can enjoy yourself without feeling the need to use the machine as well. Most of them time, they're at ay of the bars/clubs that I go to. If they're there I will use them. Sometimes in the past, I would leave the party to play them.”

- Carnivals, street parties for the community;
- Going to the movies;
- Charity events or sporting events;
- Dancing; and
- Spending time with the family.

These in-depth interviews with EGM gamblers provided valuable insight into the attitudes and perceptions of people who play EGMs. Anecdotally, it would seem that the key risk factors leading to problem gambling stem from a stressful experience or addictive personalities. This being the case, there is very little opportunity for changing infrastructure to minimise problem gambling, but instead there is a need to educate people as to the risks and provide alternative outlets for their stress or grief. It will be important to focus this communication in-venue, as well as reaching people in the comfort of their own homes, with many recommending the reinforcement of the benefits of not using EGMs to encourage problem gamblers to stop.

Conclusion

In conclusion, this research project provides valuable insight into community perceptions of EGM gambling in Moreland, as well as measuring current behaviours with regards to gambling.

Whilst findings suggest that there is a similar incidence of EGM use in Moreland when compared to Victoria in general, the higher incidence of CALD individuals within the council area clearly introduces unique challenges when seeking to address the local impacts of EGM gambling and considering options for alternative entertainment.

It is clear from the research that the community at large is likely to understand the need for initiatives to reduce the impacts of EGMs. However, some people will still find a need to use EGMs, be it for entertainment purposes, socialising or because they have a gambling problem. The challenge will be to develop strategies to minimise negative social impacts across varying motivations for use of EGMs.

Appendices



THE SOCIAL
RESEARCH CENTRE



Moreland City Council

Appendix 1 – Questionnaire

- S1 Good afternoon / evening. My name is (...) and I am calling on behalf of the Moreland City Council from the Social Research Centre. Today we are conducting a survey on social issues within the area to help Council prioritise resources. In order to ensure we get a good mix of responses, may I please speak to the youngest male in the household aged 18 or over? (IF NO MALES) In that case, may I please speak to the youngest female in the household aged 18 or over?
- (IF NECESSARY: The information from this survey will be used by the Moreland City Council to prioritise resources and assist in planning for various social issues which we will cover in the questionnaire. The specific topics will be revealed throughout the survey.)**
- S3 The information and opinions you provide will be used only for research purposes. In particular, no individual responses will be given to Council; instead they will be combined with those from other participants in this research.
- While we'd prefer that you answer all the questions, if there are any questions that you'd rather not answer, that's fine, just let me know.
- The interview today will take between 15 and 20 minutes, depending on your answers.
- Are you able to continue?
- S4 My supervisor may monitor this interview for quality assurance purposes. Please tell me if you do not want this to happen.
- A1 Thank you. I am going to start by asking you a couple of questions about yourself, to help us group your responses with other people. First, what is the postcode where you live?
- A2 So as to ensure we get a good distribution of respondents, in which suburb do you live?
- *(IF IN BORDER REGION) (A2=Gowanbrae or Fitzroy North)**
- A3 Which council area are you situated in?
- A4 What is your age in years?
- *(REFUSED AGE in A4)**
- A5 Which age group are you in?
- A6 RECORD GENDER
- B1 For the first section of this survey we will be asking some questions about gambling. I am going to start by reading a list of popular gambling activities and find out if you have played them FOR MONEY in the previous 12 months. In the last 12 months, have you ...(READ OUT)?
- (STATEMENTS) (RANDOMIZE a-i)
- Played poker machines or electronic gaming machines
 - Bet on horse or greyhound races (excluding sweeps such as for Melbourne Cup)
 - Purchased instant scratch tickets
 - Played a lottery (INTERVIEWER NOTE: such as Tattsлото, Powerball, the pools, \$2 Jackpot lottery, Tatts 2, or Tatts Keno)
 - Played Keno
 - Played casino table games such as blackjack, roulette or poker
 - Played bingo
 - Bet on sporting events or other events such as, TV show results, election results
 - Bet on informal private games (e.g. cards, mah-jong, snooker), (INTERVIEWER NOTE: also online or offline computer games, board games, sports)
 - Participated in any other gambling activity that I haven't mentioned (excluding raffles or sweeps)?
- (SPECIFY)
- (RESPONSE FRAME)
- Yes
 - No
 - Don't know
 - Refused

B2 Approximately how far away from your home is the closest location which has poker machines or electronic gaming machines?

*(NOT GAMBLERS) (NONE IN B1)

C1 We recognize that you say that you haven't gambled in the past 12 months, however we need to ask everyone the next series of questions just in case one of them happens to relate to you. Please bear with me and I will go through it as quickly as possible for you.

C2 For this next series of questions, please try to be as accurate as possible. Thinking about the last 12 months how often (READ OUT)

(STATEMENTS) (RANDOMIZE)

- a. have you bet more than you could really afford to lose?
- b. have you needed to gamble with larger amounts of money to get the same feeling of excitement?
- c. have you gone back another day to try to win back the money you lost?
- d. have you borrowed money or sold anything to get money to gamble?
- e. have you felt that you might have a problem with gambling?
- f. have people criticized your betting or told you that you had a gambling problem, whether or not you thought it was true?
- g. have you felt guilty about the way you gamble or what happens when you gamble?
- h. has your gambling caused you any health problems, including stress or anxiety?
- i. has your gambling caused financial problems for you or your household?

(RESPONSE FRAME)

1. Almost always
2. Most of the time
3. Sometimes
4. Never
5. (Don't know)
6. (Refused)

*(GAMBLER) (DV0 = 1)

D1 The questions that follow refer to reasons that some people have given about why they take part in gambling activities. Do you almost always, most of the time, sometimes or never take part in gambling activities (READ OUT)?

(STATEMENTS) (RANDOMIZE)

- a. for the chance of winning big money
- b. as a hobby or a past-time
- c. to escape boredom or to fill your time
- d. because you're worried about not winning if you don't play
- e. because it's fun or exciting
- f. for the mental challenge or to learn about the game or activity
- g. because of the sense of achievement when you win
- h. to be sociable / something that you do with friends or family
- i. to make money
- j. to relax / because it helps when you're feeling tense
- k. to compete with others (e.g. bookmaker, other gamblers)
- l. to impress other people

(RESPONSE FRAME)

1. Almost always
2. Most of the time
3. Sometimes
4. Never
5. (Don't know)
6. (Refused)

EGM GAMBLER QUESTIONS

ASKED ONLY OF THOSE WHO SAID THEY HAD PLAYED AN EGM IN THE 12 MONTHS PRIOR TO INTERVIEW

- D2 I am now going to ask you some questions specifically about your poker machine gambling. *(STRING TEXT) In the last 12 months, how many times per week, per month or per year have you played POKER MACHINES...(READ OUT)?
(INTERVIEWER NOTE: This refers to number of sessions of playing poker machines, NOT number of individual machines played)
(STATEMENTS)
a. In a club or hotel
b. In a casino
- D3 In the past 12 months, how much time ON AVERAGE did you spend playing poker machines during EACH VISIT to a poker machine venue?
(IF NECESSARY: You can specify hours and/or minutes, whichever is easiest)
(INTERVIEWER NOTE: Each time equals one session (i.e., betting during a discrete period of time EXCLUDING BREAKS at one location)
- D4 In the past 12 months, how much money, ON AVERAGE, did you SPEND on poker machines during EACH VISIT to a poker machine venue? By SPEND we mean the difference between what you took with you (including any additional money withdrawn or borrowed during the period of play) and what you had left when you finished playing
(INTERVIEWER NOTE: Each visit = one session (i.e., betting during a discrete period of time at one location) | Spend = doesn't include counter meals etc)
- D6 Which venue(s) have you visited in the last 12 months to play poker machines? Any others?
- *(MORE THAN ONE EGM VENUE) (D6=MORE THAN ONE RESPONSE)
- D7 Which of these poker machine venues would you consider to be your main venue?
- D8 Roughly, how many kilometres FROM YOUR HOME is (INSERT MAIN VENUE)?
- D9 I am now going to ask you about different features of poker machine gambling venues (such as hotels, clubs, or casinos) that may influence where you decide to gamble. In your decision about where to gamble, how important is (INSERT STATEMENT)? Would you say... (READ OUT RESPONSE FRAME)?
(STATEMENTS) (RANDOMIZE)
a. the venue being easy to get to
b. the venue having extended opening hours
c. easy access to an ATM in the venue
d. the venue having adequate gambling facilities so you don't have to wait
e. it for you to be able to gamble privately in the venue without feeling watched
f. it that the venue's staff provide good service
g. that the venue feels safe and secure
h. it that the venue has low denomination machines available
i. it that you can easily find comfortable seating in the venue when gambling
j. it that the venue has your favourite gaming machines
k. is it that free refreshments are readily available in the venue
l. being part of community group outing
m. not being interrupted at the venue whilst gambling
n. the venue having a large number of poker machines
o. the layout of poker machines in the venue allowing privacy

(RESPONSE FRAME)
1. Very important
2. Somewhat important
3. Unimportant
4. Not important at all
5. (Don't know)
6. (Refused)

EGM GAMBLER QUESTIONS

ASKED ONLY OF THOSE WHO SAID THEY HAD PLAYED AN EGM IN THE 12 MONTHS PRIOR TO INTERVIEW

D10 The next questions are about how gambling can adversely affect people. I'm going to read out some statements and I'd like you to tell me whether this situation has happened to you at any stage since you started using poker machines.

(STATEMENTS) (RANDOMIZE)

- a. negatively affected how well you perform in your job
- b. resulted in you changing jobs
- c. resulted in your dismissal from work
- d. left you with not enough time to look after your family's interests
- e. resulted in you being declared bankrupt
- f. led to the breakup of an important relationship in your life
- g. led you to obtain money illegally, even if you intended to pay it back
- h. led to trouble with the police
- i. led to you not being able to pay bills or meet regular required payments (such as loan payments)
- j. led to you feeling more emotional than usual

(RESPONSE FRAME)

- 1. Yes
- 2. No
- 3. (Don't know)
- 4. (Refused)
- 5. (Not applicable)

ALL RESPONDENTS ASKED THE FOLLOWING

E1 I would now like to talk about poker machines and your local community. For the following questions there are no right or wrong answers, we want to know YOUR opinions and perceptions. What impact do you think poker machines have on your local community?

(MULTIPLES ALLOWED) (PROBE FULLY)

E2 I would now like to talk about the potential benefits of poker machines on the community, then move on to the potential problems. Please rate each of the following on a scale of one to five, where one means that it is not at all important and 5 means that it is extremely important. How important do you think it is to have poker machines in the Moreland area (INSERT STATEMENT)?

(INTERVIEWER NOTE: If they say that there are alternatives that would be better, then this would mean that it is 'not important')

(STATEMENTS) (RANDOMIZE)

- a. to provide revenue for local sporting clubs and organisations
- b. to provide employment (staff at venues)
- c. to provide a social outlet for people
- d. to provide a safe place for people to go, away from their homes
- e. as a source of entertainment

(RESPONSE FRAME)

- 1. Not at all important
- 2. Not very important
- 3. Neither important nor unimportant
- 4. Somewhat important
- 5. Extremely important
- 5. (Don't know)
- 6. (Refused)

*(ALL)

E3 For the next section, please use a rating scale of one to five again, this time where one means that it has no impact at all and 5 means that it has an extreme impact. How much of an impact do you think poker machines have in the Moreland area on (INSERT STATEMENT)?

(STATEMENTS) (RANDOMIZE)

- a. Physical health issues due to lack of exercise
- b. Self-esteem issues
- c. Depression or anxiety
- d. Child neglect
- e. Family issues, such as violence, separation, lack of trust etc
- f. Crime such as theft
- g. Social isolation
- h. Antisocial behaviour
- i. Financial problems, such as not being able to buy food or pay bills or bankruptcy
- j. Suicide rates
- k. Substance abuse
- l. Housing instability
- m. Community wellbeing

(RESPONSE FRAME)

- 1. Not impact at all
- 2. Hardly any impact
- 3. A little bit of impact
- 4. Quite a bit of impact
- 5. Extreme impact
- 5. (Don't know)
- 6. (Refused)

F1 The next questions ask how you feel about your quality of life, health, or other areas of your life. Please keep in mind your standards, hopes, pleasures and concerns. In the last FOUR MONTHS, would you say that in general your QUALITY OF LIFE has been excellent, very good, good, fair or poor?

F2 Over the PAST 12 MONTHS, would you say that in general your PHYSICAL HEALTH has been excellent, very good, good, fair or poor?

F3 The next questions ask about how much you have experienced certain things in the LAST FOUR WEEKS. For each, please use the scale extremely, very much, a moderate amount, a little or not at all.

(STATEMENTS) (RANDOMIZE)

- a. To what extent do you feel that physical pain prevents you from doing what you need to do?
(INTERVIEWER NOTE: ASKING ABOUT DEGREE OF IMPAIRMENT, NOT FREQUENCY)
- b. How much have you needed any medical treatment to function in your daily life? (INTERVIEWER NOTE: THE KEY IS FUNCTIONING, SO IT CAN INCLUDE THINGS SUCH AS ASPRIN IF THEY CAN'T FUNCTION WITHOUT IT)
- c. How much have you enjoyed life?
- d. To what extent do you feel your life is meaningful?
- e. How well have you been able to concentrate?
- f. How safe have you felt in your daily life?

(RESPONSE FRAME)

- 1. Extremely
- 2. Very much
- 3. A moderate amount
- 4. A little
- 5. Not at all
- 6. (Don't know)
- 7. (Refused)

- F4 In the last four weeks, how well have you been able to get around? Would you say very poorly, poorly, neither well nor poorly, well or very well?
- F5 I am now going to read out a number of statements and ask how satisfied or dissatisfied you are with each, specific to the LAST FOUR WEEKS. Please use a scale of one to five where 1 is very dissatisfied, 2 is dissatisfied, 3 is neither, 4 is satisfied and 5 is very satisfied. Using this scale of 1 to 5, how satisfied or dissatisfied are you with (INSERT STATEMENT)
(STATEMENTS) (RANDOMIZE)
- your sleep?
 - your personal relationships?
 - the support you get from your friends?
 - the conditions of your living place?
 - your access to health services?
- F6 How often in the last 4 weeks, have you had negative feelings such as a blue mood, despair, anxiety, or depression? Would you say almost always (100% of the time), most of the time (more than 50% of the time), sometimes (25% to 50% of the time), rarely (1% to 25% of the time), or never (0%)?
- F7 Now I'd like you to think about things that happened in your life during the past 12 months. Which of the following life events have you experienced in the past 12 months?
(STATEMENTS) (RANDOMIZE)
- Death of a spouse or close friend or family member
 - Divorce/marital separation
 - Arrested by police or imprisonment
 - Personal injury or illness
 - Marriage
 - Dismissal from work
- F8 I am now going to ask you some questions about your experience of using tobacco products and other drugs over the past 3 months. Please be assured that the information you provide will be treated as strictly confidential. In the PAST THREE MONTHS, how often have you... (INSERT STATEMENT)?
(INTERVIEWER NOTE: If they say 'Never', code as 'Not in the last 3 months')
(STATEMENTS)
- used tobacco products (INTERVIEWER NOTE: cigarettes, chewing tobacco, cigars, etc.)
 - consumed alcoholic beverages (INTERVIEWER NOTE: beer, wine, spirits, etc.)
 - had 6 or more drinks containing alcohol on one occasion
 - used marijuana
 - used other illegal drugs (INTERVIEWER NOTE: cocaine, amphetamines, hallucinogens, opioids (heroin) etc)
- (RESPONSE FRAME)
- Daily or Almost Daily
 - Weekly
 - Monthly
 - Less than monthly
 - Not at all in the last 3 months
 - (Don't know)
 - (Refused)

- G1 Moving on now to think about finances. In the past 12 months, how often have you MISSED, SKIPPED, OR AVOIDED PAYMENT for ... (INSERT STATEMENT)?
(STATEMENTS) (RANDOMIZE STATEMENTS a TO g)
- rent or mortgage
 - bills, such as electricity, gas, car registration or phone
 - credit cards or other loans (INTERVIEWER NOTE: bank/financial institution credit card such as Visa or Mastercard, or store credit card such as Myer)
 - food, groceries, or small household items
 - medical expenses (e.g. doctor, dentist, medicine)
 - Taxes or fines (e.g. speeding, parking, tolls)
 - money borrowed from family or friends (INTERVIEWER NOTE: that is, not been able to pay them back when you said you would)

(RESPONSE FRAME)

- Very often
- Often
- Sometimes
- Rarely
- Never
- (Not applicable)
- (Don't know)
- (Refused)

- Q1 Now I have a few questions to help us group your responses with other people. Is there anyone in your household, INCLUDING YOURSELF, aged...(READ OUT)? (MULTIPLES ALLOWED)
- 65 years or older
 - 40 to 64 years old
 - 18 to 39 years old
 - 13 to 17 years old
 - 8 to 12 years old
 - 3 to 7 years old
 - Under 3 years old
 - (Refused)

Q2 Which of the following best describes your household?

Q3 What is your current occupational status?

Q4 Do you receive any government benefits (such as Austudy, Unemployment allowance, Pension etc)?

Q5 Could you please tell me your approximate annual PERSONAL income BEFORE TAX?

Q6 In what country were you born?

Q7 What is the main language spoken at home?

Q8 What is the highest level of education you have completed?

Screened for interest in future research

That is all the questions that I have for you. Thank you very much again for your assistance and time. A reminder that my name is (...) from the Social Research Centre. This research has been conducted on behalf of the Moreland City Council