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RESTRICTING ACCESS: SELF-EXCLUSION AS A GAMBLING HARM MINIMISATION MEASURE IN GREAT BRITAIN

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ABSTRACT

The purpose of this review was to examine the academic literature regarding self-exclusion as a form of harm minimisation in gambling and consider views from gambling operators and treatment providers. The extant literature was limited in that most studies were completed more than five ago; related specifically to a particular product or jurisdiction; relied on weak research designs and drew from self-selected samples. There were however some consistent findings indicating that in order to improve effectiveness, self-exclusion protocols should be: actively yet strategically promoted; quick and simple to implement; administered by attentive, well-trained staff; attracting sufficient investment in resources and technology to improve enforcement; and comprehensive rather than isolated in coverage (where feasible). Programmes should also be subject to robust evaluation and regulatory expectations should be detailed and specific rather than open to interpretation and general. Further scoping of the feasibility of multi-operator self-exclusion schemes (MOSES) was identified as a priority for future work.

1 INTRODUCTION

Enabling gamblers to remove themselves from the gambling situation (operationally referred to as ‘voluntary self-exclusion’) is the most restrictive of harm minimisation measures. There is mixed support for the usefulness of

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self-exclusion. Some suggest that it is an important component of a public health response to minimising gambling related-harm (Gainsbury, 2013), whereas others (Productivity Commission, 2010) identify it as a reactive, inflexible approach primarily facilitating abstinence rather than control.

Our ability to control our behaviour is determined by our personal goals, our motivations, the feedback we receive about our behaviour and our ‘self-regulatory resources’ (i.e., our reserves of ‘willpower’, and how quickly it becomes depleted) (Vohs, Baumeister, Ciarocco, 2005; Vohs, Baumeister, & Tice, 2008). Considered in these terms, self-exclusion has traditionally been the ‘last resort’ when other approaches to facilitate player control fail. Operators can help to facilitate self-control by providing timely behavioural feedback, limit-setting options, and restricting access to additional funds. However, if self-control still breaks down, operators can remove the need to rely on a player’s ‘self-regulatory resources’ by denying access to their gambling products. This option requires ceasing gambling altogether (depending on which gambling opportunities are covered in the agreement). However, restrictions on gambling access are now being used more creatively and more flexibly to promote responsible gambling to a wider range of gamblers (Griffiths, Wood, Parke, 2009).

The form of self-exclusion agreements varies considerably according to product, operator, venue, sector, channel and jurisdiction. Key variations in form include whether:

- provision and promotion is voluntary or mandatory;
- agreements are enforced on a site-specific or operation-wide basis;
- agreements are revocable;
- duration of agreement is brief, long-lasting or permanent;
- customers are removed from all promotion and mailing lists;
- information regarding treatment and support is provided;
- winnings may be confiscated in the event of a breach (e.g., disentitlement);
- third parties can enact a self-exclusion agreement;
- agreements only apply to certain products under certain conditions and;
- agreements should be legally binding contracts with sanctions for breaches by either/both parties.

The existing literature will only make a limited contribution to current academic, operational and regulatory challenges in Great Britain regarding self-exclusion for the following reasons:

- The majority of the research studies were completed over five years ago. Gambling generally, and self-exclusion specifically, are influenced by changes in technology (e.g., more opportunities to

circumvent the agreement; more opportunities for sharing and managing central lists between operators).

- Most studies focus on large, destination resort style casinos.
- None of the studies draw their samples from gamblers in Great Britain.
- Most studies consider agreements relating to land-based and not remote operations.
- Most studies did not use a control group and consequently any impact cannot be causally attributed to the self-exclusion intervention (i.e., gamblers might have improved naturally even in the absence of undertaking self-exclusion).
- Most studies used samples which were self-selected (i.e., the sample may not be representative of all self-excluders) and relied on self-report data (inaccurate or biased recall).
- Finally, it is not clear from the research what gambling alternatives were available. For example, greater accessibility to gambling (remote or land-based) will be likely to undermine a self-exclusion agreement with one venue or provider.

The aim of this review is to provide a review of current understanding of the nature and effectiveness of self-exclusion as a form of harm minimisation in gambling. This article:

1. Examines the academic literature regarding self-exclusion as harm minimisation in gambling;
2. Considers views from two key stakeholders: gambling operators and treatment professionals who operate in Great Britain.

This review will be useful for a broad range of stakeholders including industry, regulators, treatment professionals and researchers. This review extends to consider operational and regulatory issues through identifying priority areas for research and offering initial guidance on how existing research findings could be applied in operator-based approaches to self-exclusion. While this review has been written with the British context in mind, we consider that most issues will have some relevance beyond Great Britain.

2 METHOD

Academic literature reviewed in this report was identified in three concurrent phases: a search of online electronic databases; grey literature accessed through web-based searches, personal knowledge and professional contacts; and through ‘snowballing’, where references within other academic papers are pursued (Greenhalgh & Peacock, 2005).

Academic databases searched included: Academic Search Elite, Business Source Complete, PsychArticles, PsychInfo, Science Direct and Scopus. In addition, generalist web search engines (Google, and subsequently Google Scholar) were also used to identify relevant grey literature or technical reports not subject to traditional peer-review processes. Other relevant literature has also been considered using a similar approach where an appropriate link has been made with self-exclusion.

While the theoretical basis for using self-exclusion as a form of harm minimisation is discussed in this report, the RGSB's Self-Exclusion Working Group¹ believed that it was also important to obtain a practical understanding of the operational issues from those working in the gambling industry and a better understanding of the clinical and practical issues from those working in treatment organisations. Views on these issues were expected to provide additional insight to supplement that provided in the academic literature.

Throughout our review of the academic literature, examples of the qualitative responses from the stakeholder surveys are provided to support or contest the findings. These responses are not representative of the stakeholder group as a whole, rather they are the viewpoints of the individuals who chose to respond to the survey. However, they do provide a useful perspective and add useful context to the on-going debate around self-exclusion. Data in the dialogue boxes were derived from the Treatment Providers Survey and Operators Surveys.

It is important at the outset to stress the limitations of the qualitative approach employed in both of these exploratory stakeholder surveys. Samples for both surveys are small, self-selected and are not necessarily representative of treatment providers or gambling operators generally. The purpose of these two exploratory surveys was not to provide 'evidence' but rather to provide indicative perspectives through rich description and professional insight which may not have been recently captured elsewhere in relation to the British context. Due to constraints on time and budget, brief convenience samples were employed as a 'first-step' to better understanding the attitudes and concerns of these two stakeholder groups. For this reason, cautious consideration should be given to the qualitative data presented here, while acknowledging that the data are not necessarily representative of all gambling operators and treatment providers. Large scale representative surveys would be required if conclusions were to be drawn regarding proportions of responses from each stakeholder group, and we do not currently consider that obtaining a reliable sense of such proportions is a priority for research in self-exclusion. Frequencies of responses highlighted in the two tables which follow are indicative and are used primarily to summarise the open-ended responses in a concise and accessible way.

¹ The Responsible Gambling Strategy Board (RGSB) set up an expert working group called the Self-Exclusion Working Group (SEWG) in order to gather evidence and plan future work activity relating to self-exclusion.

2.1 Gambling operator perspectives

Table 1 is a summary table of the themes of open-ended responses from a survey sent out to some of the largest gambling operators that serve residents in Great Britain. The open-ended format to the survey questions yielded qualitative data and these have been presented thematically in the main body of the report. It is worth reiterating that these findings are indicative and offer limited value from a quantitative perspective, given the small self-selected sample. For each question, responses have been grouped into themes, and the frequency with which these themes have been endorsed is then indicated by the number of asterisks (i.e., **** denotes four different operators making a similar point in their responses).

Table 1. Response Summaries for Gambling Operators Survey

Principle	Response Themes from Open-ended Survey Response Data			
The availability of self-exclusion should be actively promoted in the venue or on the website.	Yes, it should be actively promoted *****	It should be easily accessible and clearly visible *****	Encouraged, where appropriate, as a part of broader responsible gambling messaging ****	
Self-exclusion agreements should be irrevocable over the agreed time frame.	Yes, with no exceptions *****	Revocable after 6-12 months ****	Revocable after interview with staff **	Yes, but with stricter interaction requirements *
No marketing should be permitted to customers during the self-exclusion period.	Yes **** * * * * * **	Yes, but some untargeted marketing (e.g., billboards, affiliate marketing) is hard to control **	Yes, but there will be mistakes at times *	
Referrals should be made to third party organisations that can offer support, information and treatment for excluders where appropriate.	Yes, they are given information (not a direct referral by staff) **** * * * * * ***	No, this should be the customer's choice *	Third party support may not be appropriate but information is given if requested *	GambleAware™ details should also be given *
Up-to-date training on managing the self-exclusion process should be provided to the appropriate staff.	Yes *****	Yes, all staff get self-exclusion training *****	Yes, all customer-facing staff *****	Senior managers or dedicated teams get in-depth training **
The customer's account should be locked upon initiating	Yes	Not relevant (e.g., land-based)	Access is given to allow funds to be withdrawn	

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Table 1. Response Summaries for Gambling Operators Survey

Principle	Response Themes from Open-ended Survey Response Data			
any exclusion agreement and any available funds are paid out to the customer.	*****	***	*	
Options should be provided to customers to exclude by different types of gambling offered by the same operator.	No blanket approach favoured to offer 'complete protection' from harm *****	Yes *****	Too difficult or resource intensive (usually land-based) ****	May only be suitable to some customers *
Options should be provided to customers to exclude across remote and land-based operations of the same operator (where applicable).	Yes *****	Not Applicable *****	If customer requests (extending to different channels should not be automatic) ****	Difficult enforcing from remote to shop **
Options should be provided to exclude across multiple operators (remote or land-based)?	Supportive but considered not currently feasible *****	Yes, but also given the option to close just one account **	Yes **	Each operator should be responsible for managing their own player exclusions *
Options should be made available for considering third party self-exclusion (i.e., a request made by a concerned significant other).	Taken into consideration but no direct action *****	Too many challenges (legal and data protection in particular) *****	Do not agree *****	Yes ***
The effectiveness of self-exclusion programmes should be evaluated on a regular basis.	Yes *****	Yes, but difficult to measure *****	We do not currently do this **	
Penalties should be imposed on the customer in the case of a breach.	No, not feasible/too difficult to enforce *****	No, unfair to customer *****	Yes *****	Winnings should be confiscated ****
Penalties should be imposed on the operator in the case of a breach.	No *****	Yes, if operator wilfully disregards agreement (e.g., knowingly accepts excluded players) *****	Unfair as appropriate technology is not available ****	Already exists in licensing conditions ***

Table 1. Response Summaries for Gambling Operators Survey

Principle	Response Themes from Open-ended Survey Response Data			
The minimum duration for a self-exclusion agreement should be six months.	Yes *****	Optimum period is unknown ***	Shorter, more flexible durations should also be offered ***	At least one year ***
The minimum duration for a self-exclusion agreement should be flexible and defined by the player.	Minimum six months but over six months should be flexible *****	No *****	Yes *****	More flexibility would place greater pressure on resources ***
Should players be reinstated automatically at the end of the term of the exclusion period or should the operator engage with the player to gauge appropriateness of a return before any reinstatement?	Staff-customer interaction should be required first (e.g., 'positive action' letter confirming they no longer have a problem; an interview with staff) *****	Automatic reinstatement but play (e.g. limits) and marketing should be controlled ****	Automatic reinstatement ***	An objective assessment of vulnerability should made before reinstating **
Following reinstatement, should players be monitored by the operator, to assess ongoing risk or vulnerability? If yes, how should this be done?	Monitor risky play (using behavioural analytics or staff monitoring) *****	Yes ****	Responsible gambling tools suggested or mandated *****	Ongoing monitoring is not feasible ***
Should a request for self-exclusion take immediate effect, or should there be a 24-hour cooling off period? Does it depend on product or channel?	Self-exclusion should take immediate effect *****	There should be a 24-hour cooling-off period *****	There should be staff/customer interaction to explain the process to ensure the customer understand what is involved *	
Should players have the option to request self-exclusion without having to interact with customer services or come into the venue (land-based)?	Yes *****	No, customer service interaction is useful for determining real reason for excluding *****	No, the customer needs to fully understand what the agreement entails *****	No, presenting valid identification is required **
If you have any other comments in relation to self-exclusion in Great Britain, please include these here:	Additional themes included:			
	1. Self-exclusion is only part of the answer <i>"The clue is in the title, 'self'. Self-exclusion cannot be effective for someone who does not want to comply, it can help those who genuinely want help. It is a step for an</i>			

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Principle	Response Themes from Open-ended Survey Response Data
	<p><i>individual who is recognising they have a problem, it cannot be the solution for an addict. It's very hard to develop an effective nationwide scheme because it needs so many other parties to take part (e.g. ,banks) and other trade parties AGCs etc. However, we should always try and improve what we do."</i></p> <p><i>"The key word to me has always been 'self'. Strategies should be developed on the belief that we are working to support customers who genuinely wish to control their gambling and not restricted on the basis of what may go wrong with the other occupational excluders or chancers."</i></p> <p><i>"It cannot be helpful to problem gamblers to present exclusion as a complete solution. It is simply never going to be that and it should not, in our view, be presented as a way to ensure someone never gambles again and a solution to their problem."</i></p> <p><i>"As above, we believe the SE system has merit but is not the sole solution. Equally, it is not accurate to say all self-exclusions represent those with pathological or serious gambling problems. We place equal merit on working with customers to limit their play or visits, believing it can be better to play in a location where they are known and supported, rather than exclude them so they then go somewhere else where they are not so protected."</i></p> <p>2. Industry sharing of experiences</p> <p><i>"An industry funded website or forum may have merits for individuals to share experiences and fears and promote suggestions as to how they could have been helped more under the particular set of circumstances that they encountered."</i></p>

Notes: Some operators made more than one point and some made no points or did not have sufficient explanation to warrant inclusion; so frequencies do not necessarily total to 26 responses for each question. Some categories are not mutually exclusive but arranged in the most descriptive and useful way to represent subtle differences in responses.

A large majority of gambling operators responding to the survey supported the following principles of best practice in self-exclusion:

- agreements should be irrevocable;
- marketing should not be permitted during the self-exclusion period;
- Information on third party support and treatment should be provided;
- all staff involved in self-exclusion should have regular, up-to-date training;
- options should be provided to exclude across multiple operators (provided barriers can be overcome);
- provision should be evaluated on a regular basis;
- penalties to either operator or customer were inadequate for improving enforcement;
- reinstating access following the end of an agreement should not be automatic but should involve either initial interaction with staff or ongoing monitoring of account to assess risk;
- requests to exclude should take immediate effect.

There was limited consensus between operators regarding the following principles:

- options should be provided to customers to exclude by different product;
- exactly how information from third parties might be used in the self-exclusion process;
- appropriate duration of a ban and the substantive difference between cooling-off breaks and self-exclusion;
- players being able to enact self-exclusion without interacting with staff or coming into the venue (so that there is mutual understanding between parties regarding player motivations and implications of the agreement);
- whilst all operators agreed that self-exclusion should be accessible, there was less certainty regarding what ‘active promotion’ necessarily entailed.

2.2 Treatment provider perspectives

A range of treatment organisations were approached and invited to participate in a survey designed to improve understanding regarding treatment providers’ attitudes and views on clients’ experiences of self-exclusion.² It should be noted that clients currently receiving support and/or treatment for their gambling will not necessarily be representative of all players who decide to self-exclude. A summary of the open-ended questions and responses grouped by theme and response frequency is presented in Table 2.

Table 2: Response Summaries for Treatment Providers Survey

Question	Categories							
Overall to what extent has self-exclusion been effective in assisting people to address their gambling dependency or to help them control their gambling?	Land-based less effective (e.g., no membership scheme or monitoring; staff happy to reinstate; limited options on lottery products)	Multi-operator exclusion – self-exclusion agreements are too easy to circumvent	Certain sectors more vigilant than others (limited specificity)	Too much advertising and marketing material	More effective to use a filter (e.g., Gamblock)	Ineffective – duration not long enough	Self-exclusion difficult when gambling is an integral part of clients’ social landscape	More successful when used in conjunction with treatment and other support
	*****	*****	*****	****	****	***	**	**

² This survey was designed and administered by the Self-Exclusion Working Group and the National Clinicians Network Forum.

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Table 2: Response Summaries for Treatment Providers Survey

What, in your experience, have been the reasons clients have not taken up the opportunity to self-exclude?	Able to gamble elsewhere *****	Not ready to stop gambling *****	Shame and embarrassment ****	Lack of trust in the system ***	Inconvenience, cost or effort of self-exclusion ***			
What, in your experience, have been the reasons why clients have continued or returned to gambling during the time a self-exclusion agreement has been in force?	Not ready to quit *****	Can gamble elsewhere ****	Agreements not rigorously enforced or policed ***	To test the system ***	Pressure of advertising ***	No additional support in place ***	Peer pressure/no alternative activities in place **	Responsibility for enforcement unclear **
If, in your knowledge, family or friends of the gambler have been assisted or supported by him/her being subject to a self-exclusion agreement please list their comments in this box.	There should be more information on its availability ****	It's a positive step/shows commitment **	Needs to be better enforced **	Feel they are policing the gambler *	Allows them to trust the gambler again *			
In your opinion, as a treatment provider, how could self-exclusion be improved to enhance player protection measures?	Better enforcement (use technology, penalties for breach) ***** *	Staff training should be improved *****	Should be multi-operator ****	More promotion and information provision ****	Should be immediate/direct ****	No advertising should be allowed during exclusion period ***	Should be linked to treatment (e.g., reinstated only on professional advice) **	Tailored exclusion should be allowed, rather than blanket bans **

Notes: Some treatment providers made more than one point and some made no points or did not have sufficient explanation to warrant inclusion; categories are not mutually exclusive but arranged in the most descriptive and useful way to represent subtle differences in responses.

3 LITERATURE REVIEW AND STAKEHOLDER PERSPECTIVES

3.1 Promoting self-exclusion

Simplicity and convenience are key guiding principles underpinning successful self-exclusion (Gainsbury, 2013; Nowatzki & Williams, 2002; Responsible Gambling Council, 2008; Williams, West & Simpson, 2013). However, the active promotion of self-exclusion varies considerably across operators, sectors and jurisdictions.

Treatment Providers Survey – Low levels of uptake

Although records of self-exclusion engagement are not systematically kept by all treatment providers, an example given indicates that only a small minority of those in treatment have engaged with self-exclusion prior to seeking help.

“Anecdotally, the proportion of clients who approach the service for counselling who have self-excluded from betting shops or casinos before contact with us is in the region of 5-15%. This figure is based on assessment notes where it may have been mentioned by the client, either as a successful initial method or otherwise.”

Simplicity is important

The limited capabilities of a problem gambler was also identified as an important reason for having a simple and convenient registration process:

“Only 40% of them actually wanted to go through the process of self-excluding as they have to go into each outlet they were trying to avoid and ban themselves from each filling in a form/including photos. Obviously to go into that environment without gambling is nigh on impossible due to the stimuli that would be in there for them. Not to mention spending what money they have on getting passport photos done. This process also requires forward planning and organisation; generally speaking when someone is in the midst of a gambling problem they can't do either.”

Gambling Operators Survey – Staff contact or not?

Most operators supported the notion that a player should be able to enact an agreement without having to interact with customer services staff:

“...shame, guilt, fear etc are a common features among addicts or players who believe that they might develop an unhealthy attitude towards their gambling therefore giving them the option to self-exclude without interaction is advisable because forcing them to interact with customer services first might put an extra threshold they might not overcome.”

“We believe it can be very difficult and shameful for players to admit that they have lost control over their gambling. We do not see any reasons, why the industry should aim to artificially make this threshold any higher than necessary. We believe the best way to file self-exclusion is a clear and unambiguous web interface that fully informs the player of all consequences his decision will have. After filing this form, the player should receive a written confirmation of his request that signposts relevant counselling offers. We however agree that the player should not be forced to use one specific medium. Self-exclusion requests should be accepted via all channels, which can assure the identity of the requestor.”

However, some operators disagreed and suggested that staff-customer interactions are important in determining that exclusion is right for them, that the customer is who they say they are, and that they understand what they are committing to:

“...the implications of the exclusion need to be clear, the documentation completed correctly and a photograph provided. [...] this can be done in shop or via telephone contact with our designated exclusion line. To do otherwise creates unmanageable situations for operators and, ultimately means that exclusions are not properly implemented.”

“We would say ‘no’ otherwise the customer may not have the opportunity to fully discuss self-exclusion with a member of staff in order to understand what the agreement entails, whether or not it is right for them and what the implications are of entering into one. We do agree however, that a customer should be able to renew their annual self-exclusion agreement without the need to re-enter the betting premises (ie by calling a dedicated Customer Care number).”

According to the literature, operator-based promotion of self-exclusion in various jurisdictions is considered to be comparatively weak. In one study in Australia, for example, despite the mandatory promotion of self-exclusion programmes, only 10% of venues were identified as visibly promoting their programmes (Interchurch Gambling Taskforce, 2000). In a South Australian

sample of self-excluders, it was reported that only 11% were prompted by staff, and of the 17% who had independently approached staff to request possible options for managing their problem, only half were given information about self-exclusion (Hing & Nuske, 2012). Similarly, in a German sample, only 39% reported any previous awareness of the option to self-exclude prior to seeking help on their own initiative (Hayer & Meyer, 2011a). Rate of uptake of self-exclusion options among problem gamblers is considered to be very low. Estimates range between 0.4% and 3.5% of problem gamblers in land-based venues (Nowatzki & Williams, 2003; O'Neil et al., 2003; SACES, 2003).

Treatment Providers Survey – Active promotion is important

Current promotion and levels of awareness were considered to be inadequate among some treatment organisations:

“A more pro-active approach from gambling venues when recognising problematic gamblers, staff could approach these clients and talk to them about self-exclusion and other support available (more staff training may help to support this) My understanding is that this is supposed to happen now however very few of my clients have disclosed having experience of this.”

“I think it is imperative to make everyone aware of the tools and strategies involved with self-exclusion and often family/friends will be very supportive of this step being taken but have often been sceptical on how it works and if it works.”

Views here were generally critical of operator role in promoting and facilitating self-exclusion.

“Clients express concern of ‘walking in there’, being tempted and losing control.”

“Several clients reported being ‘talked out’ of self-exclusion by the bookie.”

“The client who self-excluded from an adult gaming centre had quite a challenging experience. There were a number of barriers that had to be overcome, i.e., the establishment had no accessible literature. Self-exclusion was not promoted within the organisation i.e., posters displayed. We challenged two establishments requesting their policies and procedures on self-exclusion.”

It was suggested that the following should be done:

“Large notices on display to offer self-exclusion as a support to problematic gambling. More information could be made visible to clients in gambling venues about self-exclusion.”

“Help for problem gambling should be offered to staff. Helpline numbers should be more visible.”

“Making online self-exclusion options easier to find and choose.”

“Having easily identified links – on gambling sites – to sites where self-exclusion is explained.”

“Periodic written reminders to individuals to confirm their self-exclusion timescales.”

Gambling Operators Survey – Requirement to define ‘active promotion’

Operators’ comments point to a need for a clearer definition of what is meant by ‘active promotion’ of self-exclusion, specifying the difference between accessibility and promotion:

“We believe self-exclusion should be available to all customers. Whether it should be ‘actively promoted’ is a question of definition.”

“It should be clearly available and simple to access so people in need can utilise it without any difficulty.”

“Not actively promoted but available in all venues and all staff aware of the self-exclusion process.”

Enacting self-exclusion and cooling-off

While there was no coverage of this issue in the academic literature, responses from both surveys suggest that requests to self-exclude should take immediate effect.

Treatment Providers Survey – Requests should take immediate effect

“Venues should not be able to offer 24 hours cooling off period – we all tend to change our mind after a night’s sleep – if a person has experienced problems with gambling that should be taken seriously immediately, before someone with a gambling problem goes back to chasing in the forlorn hope to win his losses back.”

Gambling Operators Survey – Requests should take immediate effect

The majority of operators suggested that requests to enact a self-exclusion agreement should be implemented immediately:

“In the case of self-exclusion we are dealing with a potential addict. We fail to see why we would artificially delay the acceptance of a self-exclusion request, knowing that the player has a very high risk of relapse. We believe self-exclusion should be implemented at the first possible point in time after the player's request. Delays should only be acceptable in case the request was ambiguous (e.g., player not mentioning whether the self-exclusion should be temporary or indefinite).”

Barriers to uptake

Nowatski and Williams (2002) suggest that in practice, the self-exclusion process requires an investment of time and potential embarrassment, both of which may act as disincentives to uptake. Disincentives are considered in more detail below.

The general requirement for self-exclusion to be simple and convenient is arguably most relevant to the implementation process once the gambler has made the decision to take action. A variety of options for activation, such as via the internet, by telephone or in person, should be made available (Productivity Commission, 2010). Technology may drive evolution in this regard, drawing on other media promoting convenience such as mobile phones and apps. In addition to variety in channels, consideration might also be given to extending activation points beyond operations to potentially including relevant third parties such as treatment providers or the regulator (Responsible Gambling Council, 2008).

Requirements to enact a self-exclusion agreement in person (or through phoning customer services in the case of remote gambling) may cause embarrassment, thereby acting as a disincentive (Productivity Commission, 2010). This may be due to the potential stigma of help-seeking behaviour. Individuals suffering more generally from psychological or psychiatric distress, even if severe, often do not seek help (Bebbington, Meltzer, Brugha, Farrell, Jenkins, Ceresa, & Lewis, 2000). Specifically, only around 10 to 15% of problem gamblers ever seek help (Cunningham, 2005; Slutske, 2006; Volberg, Nysse-Carris, & Gerstein, 2006; Productivity Commission, 1999; Ministry of Health, 2007; Suurvali, Hodgins, Toneatto, & Cunningham, 2008).

Finally, if a gambler has taken steps to stop gambling, and has demonstrated impaired control in the gambling environment, then it may be counter-productive to require them to visit the gambling venue. Hing and Nuske (2012) found that self-excluding in the gambling venue put the individual in a position of necessary further exposure to gambling. This may also apply to remote gambling where the gambler is required to visit the website to enact.

Reinstatement

Reinstatement, i.e. re-entering into a self-exclusion agreement at the end of its original term, should be made possible from various points of access, thus removing the need to visit the venue and face potential temptation to gamble (Hing & Nuske, 2012; Responsible Gambling Council, 2008). It has also been recommended that the restrictions should only be lifted after some form of ‘positive action’ (i.e., a request to return to the casino) rather than permitting access automatically at the end of the exclusion period (Responsible Gambling Council, 2008).

Treatment Providers Survey – Positive action

The need for such positive action was consistent with some views from treatment providers:

“In Australia a person has to apply in writing to a venue to be allowed back after the self-exclusion period has expired. Canberra Casino would insist that a gambling counsellor would write a recommendation that it would be okay to do so, since they were concerned that responsible gambling could be sustainable.”

Gambling Operators Survey – Access should not be automatic

The most common response by operators was that there should be some form of engagement prior to reinstating a customer and terminating an exclusion agreement:

“Our approach is that there should be some engagement. We do not believe an automatic reinstatement (i.e., without even asking) is appropriate, although we do not feel it necessarily requires a full discussion if it is the first such request and there are no mitigating factors. However, for any contentious request (e.g., something of concern written on the request form) and/or a second or third request, we would always want and expect a conversation and would make a decision based on what we believe is best (which can and does sometimes result in a refusal).”

Some operators suggested that reinstatement should be accompanied by additional controls or restrictions:

“In our opinion any account that is reinstated should be fitted with a loss limit. Therefore the account should not be reinstated automatically. Before being reinstated the player needs to ask for it in writing (email) and should then get an email highlighting the info available on responsible gaming and asking them to make a suggestion for a daily, weekly or monthly loss limit (or all at the same

time). The responsible gaming department has to assess the account prior to receiving an answer from the customer and has to have a clear number of max loss at hand before the customer comes back with his or her answer. If the customer comes back with a higher figure then the responsible gaming department cannot set the limit higher as previously determined internally (or leave the account closed as the case may be). If limit suggested by customer is lower than what has been determined internally then usually the customer gets the limit he asked for (in any case never higher than suggested by the customer).” “What I would suggest would be that the account is automatically reopened after the termination of the self-exclusion period, but no marketing material should be sent to the customer stating that the exclusion is over. The customer still has to log in in order to play. Then it is up to the customer to choose whether or not the customer should play on the account. If the operator engages with the customer after the self-exclusion period has passed, this may result in enticing a player who might not want to play.”

Detection and enforcement of self-exclusion

In research exploring casino-based self-exclusions in other jurisdictions, evidence suggests that at least 50% continue to gamble either with the same provider or elsewhere (DeBruin, 2001; Ladouceur, Jacques, Giroux, Ferland, & Leblond, 2000; Ly, 2010; Nelson et al., 2010) and that 33–77% of breaches go undetected by staff (Croucher et al., 2006; Schellinck & Schrans, 2004). Nelson and colleagues (2010), in their Missouri casino-based study, followed up with 113 self-excluders reporting that only 25% ceased gambling completely. Of that sample, 16% had reported breaching their agreement with the originating casino.

Evidence also suggests that the probability of a breach increases considerably over the duration of an individual’s agreement (Ladouceur, Sylvain, & Gosselin, 2007; Ly 2010). In Tasmania, for example, only one person from a sample of 40 self-excluders reported gambling during the first three months, however over half of the sample eventually did breach before the end of their agreement (Ly, 2010).

Disincentives for breaching self-exclusion

Ly (2010, p.57) identified that a key disincentive to breaching self-exclusion agreements was embarrassment, with patrons suggesting that they “*just couldn’t go*”. However, the impact of potentially being embarrassed may be moderated by perceived responsibility for maintaining that agreement (with embarrassment potentially being lower where they reject responsibility). Even where consumers are made aware of their rights and responsibilities under a self-exclusion agreement, many still believe it is the responsibility of the operator to ban them from accessing and participating in gambling activities (Responsible Gambling Council, 2008).

Treatment Professionals Survey – Client disincentives for breaches

“... the sense of shame they state they would feel if they were refused entry to a venue that they have excluded themselves from are often intrinsic as to how effective the self-exclusion will be for a client.”

One treatment provider provided a list of reasons for clients attempting to breach:

“Underlying personal difficulties which keep re-emerging; Using gambling as a coping strategy; Strong attachment to gambling due to past use; Gambling is easily accessible on high street and online; Exposure to advertisements; Unable to replace gambling with other activities.”

Penalising the self-excluder may act as a disincentive to breaching their agreement. However, financial penalties may be unworkable, as this would suggest that the problem gambler has control over their gambling, which not usually the case (Napolitano, 2003; Faregh & Leth-Steenon, 2009). Nowatzki and Williams (2002) warn against the use of a financial penalty given the deleterious impact it would be likely to have on a problem gambler’s economic situation.

Gambling Operators Survey – Customer penalties inappropriate

Operators were not supportive of penalising the customer as a disincentive.

“...gambling addiction is a disease with an ‘unreasonable’ urge to gamble, penalties would not deter and would not serve anything in our opinion.”

The most common response was that penalising customers would not be feasible and would be too difficult to manage:

“To be able to enforce, self-exclusion could no longer be a ‘voluntary’ agreement with the added emphasis being on the customer to comply. It is difficult to see how penalties would benefit either party and would be impractical to manage – especially with the legal consequences of each case.”

While imposing financial penalties may not be feasible, an alternative disincentive may be to withhold any winnings where gamblers are in breach of their self-exclusion agreement. This is done in various US states (Illinois, Pennsylvania, Michigan and New Jersey; Ladell & Smith, 2011). The primary disincentive for the problem gambler in this instance is to remove the motivation to chase losses. While evidence suggests that the long-term motivation of problem gamblers is not financial (Binde, 2013; Stewart & Zack, 2008), the opportunity to gamble and win money is still a critical component of impaired control, given its relationship to excessive loss-

chasing behaviour. The British Columbia Lottery Corporation found some support for this claim from stakeholder interviews following their implementation of a disentanglement policy (Ladell & Smith, 2011) in addition to suggestions that reduced excitement may also deter breaches.

Gambling Operators Survey – Withholding winnings as a disincentive

Some operators suggested that disentanglement may be the most appropriate disincentive:

“As all bets are voided and all funds returned the penalty for the player is they cannot receive winnings on accounts opened after an exclusion...”

“What penalties are envisaged? The customer, if found on the premises, certainly should not be able to retain any of his winnings.”

Some operators outline that these issues are not straightforward even if the aim is laudable.

“We feel this [penalties] is difficult. By means of self-exclusion, the customer states that he might be experiencing relevant gambling-related problems, potentially ranging up to a mental disorder. We are unsure whether such a player would be responsible for his behaviour, when trying to circumvent a self-exclusion. However, we agree that trying to circumvent self-exclusion provisions should be disincentivised.”

“There are an increasing number of cases where people try to claim back losses on the pretence of having a gambling problem (and, of course, sometimes when they legitimately do) and the issue of liability for a SE breach is a difficult one. As an industry, we do not believe that operators should be liable for repayment if a SE customer does not keep their side of the agreement by staying away. We would not expect them to return winnings accrued during a breach. The threat of imposing ‘penalties’ depends on what is intended, but the idea of threatening prosecution for trespass has been used and is not a bad idea if it helps keep them away and protect against claims if they do get in. Even then, whether such penalties could realistically be enforced in practice is another matter, but they can serve as a deterrent.”

One option would be to void all potential winnings by self-excluders who had gained access to gambling opportunities.

It has been suggested that the operator may allocate forfeited winnings to support research, treatment and education in problem gambling, which would ensure there is no misunderstanding regarding the aims and objectives of the initiative (Productivity Commission, 2010).

However, the extent to which this approach would be legally enforceable is questionable. Napolitano (2003) suggests that, in some jurisdictions where

such arrangements are in place, these ultimately have not proved legally permissible. However, the legal framework may have shifted over the last decade.

In some jurisdictions (e.g., Tasmania, Ly, 2010) breaches incur fines for the operator, a practice that has been advocated by some experts (Nowatzki & Williams, 2002) to incentivise improved enforcement efforts among operators. Furthermore, in some jurisdictions, such as the Netherlands, computerised ID checks are required for casino entry and the level of recorded breaches is significantly reduced if not eradicated as result (Nowatzki & Williams, 2002).

Treatment Providers Survey – Operator penalties could improve commitment

There was some support for operator penalties among clinicians, with some stating that enforcement would be more effective:

[in response to a question on potential improvements] “If a penalty was introduced to gambling establishments who do not effectively uphold the self-exclusion agreement by allowing self-excluded clients to continue gambling in their establishments.”

***Gambling Operators Survey* – Operator penalties for wilful disregard of agreements**

Some operators suggest that this might be appropriate for wilful disregard of self-exclusion agreements:

“Depends on the nature of the breach”

“Depending on the breach of the self-exclusion, penalties should be imposed if the operator removed a person's self-exclusion despite the agreement being a certain time frame.”

“In the case of negligence or knowingly breaching, then yes: breach would need to be defined carefully.”

“Penalties should apply, but only in the case of negligence by the operator. More relevant however, all losses of a self-excluder who managed to gain access to gambling opportunities should be voided (parallel to voiding all winnings in q 14).”

Other operators point out that penalties, although not necessarily automatic nor systematic, may already be applied by the regulator:

“SE must be a two way agreement with both sides making best efforts to meet their side of the arrangement. An operator should be expected to make best efforts and are required by the LCCP to do so. Any potential for ‘penalties’ is therefore down to the Commission in terms of whether the operator is realistically meeting its obligations. However, that would be for wholesale breaches. For the odd individual breach, the operator should not be liable provided they take

action to address any weakness in their systems that might have contributed.”

Improving detection

Ly (2010) makes the following suggestions for the improvement of detection accuracy in self-exclusion:

- requiring self-excluders to provide both a profile and a camera-facing photograph for each agreement and requiring staff to spend time looking at the photos at the start of every shift;
- electronic (such as a driver’s licence or player card) rather than paper-based systems could enable operators to effectively check patrons against a database of self-excluders;
- an electronic identification system may also have the added benefit of enabling venues to detect minors, identify other unwelcome patrons, and to assist player tracking and data management.

Treatment Providers Survey – Detection and enforcement need improvement

There was a general sense among clinicians that enforcement was poor in most locations.

Some concerns were expressed that some gambling industry staff wilfully disregarded self-exclusion agreements:

“A client reported that he had self-excluded and went in anyway, which prompted the person at the counter to reinstate him (since my client ‘obviously wanted to gamble again’).”

An area that was identified as being weak on enforcement was retail outlets selling lottery tickets and scratch cards:

“The most difficult area to self-exclude from was issues around lotteries and scratch cards due to the volume of opportunity to gamble on these and the lack of recognition that such activities could cause, particularly by shop owners and small retailers.”

“It is very difficult to effectively self-exclude from lottery retail outlets due to the sheer volume of different premises offering this provision.”

Self-exclusion was reported as most effective when the gambler attended one venue in particular:

“Clients find self-exclusion most effective, when they gamble alone or in a specific gambling place; such as a betting shop.”

“Clients who find self-exclusion more successful are generally those that use only one or two betting shops habitually.”

“Self-exclusion in betting shops seems to work if it is the client’s regular betting shop but excluding from all in one company in a given area seems to be less effective according to feedback.”

The use of technology was raised as a potentially important strategy for improving enforcing and detection:

“Gambling establishments should have digital photos that should be circulated throughout all branches.”

“Modern technology to be used nationwide to make the process more effective and easier to deploy.”

Introduce mandatory electronic membership cards to enable gambling, which would be disabled or taken away from self-excluded gamblers.

3.2 Impact of self-exclusion

There currently exists a void of robust evaluation studies which can offer any meaningful insight into the impact of self-exclusion in minimising gambling-related harm (Gainsbury, 2013; Nowatzki & Williams, 2002; Responsible Gambling Council, 2008). Evaluation of impact should explore ‘effectiveness’ (impact on gambling-related harm) and ‘efficiency’ (required resources being used optimally to minimise harm) rather than just promotion and take-up as the only indicators of success.

In terms of effectiveness, numerous studies across a variety of jurisdictions have reported reductions in problem gambling (Hayer & Meyer, 2011a; Ladouceur & colleagues, 2000, 2007; Nelson et al., 2010; Tremblay et al., 2008). There has also been support that such positive impacts are enduring, with impact still noted at follow-up periods up to ten years later (Nelson et al., 2010; Hayer & Meyer, 2011a). Improvements in well-being (Hayer & Meyer, 2011a; Ladouceur et al., 2007; Nelson et al., 2010), control over gambling (Ladouceur et al., 2007), and social and familial functioning (Ladouceur et al., 2007; Tremblay et al., 2008) have also been reported. No studies to date have examined efficiency in provision.

Treatment Providers Survey – Assistance for significant others

Some clinicians identified that the self-exclusion process provided additional support for those significant others in the gambler’s social support network:

“Most of the partners felt that it was a positive step and showed their partner was willing to do something to correct their behaviours.”

“Where family support is available, feedback has suggested that family members feel the gambler has made a higher level of commitment to change.”

“This enables the family/friends to begin to trust in the gambler again.”

Gambling Operators Survey – Evaluation not an easy task

Some operators make the point that evaluating impact is not straightforward:

“In-house we evaluate how well we monitor and spot related accounts but how does the industry measure whether self-exclusion is helping people with gambling issues or just utilised as a method of account

closure and the people with gambling issues just close their accounts in the normal way.”

“We agree [that evaluation should be done] — although it is difficult to necessarily assess how effective they have been. We assess and compare the number of exclusions each year, but remain unclear whether more is good or bad as there are various mitigating factors. For example, is more a result of an increase in problem gamblers or better awareness through information being provided? How do we know whether someone who excluded has benefited if we don't see them again? Has it helped their problem or have they simply gone to gamble elsewhere? It is difficult for operators to contact SE customers and ask ‘how is it going?’ as this could be misconstrued or have the wrong effect.”

“By what measures is an operator supposed to evaluate the effectiveness of a self-exclusion programme? If the person never comes back? If he comes back after his self-exclusion and is a model customer?”

3.3 Who self-excludes?

Research examining land-based self-exclusion suggests that there is a particular demographic profile for the typical land-based self-excluder. Self-excluders are predominantly male, middle-aged, married or cohabiting, and the vast majority are problem gamblers (De Bruin et al., 2001; Haefeli, 2002; Ladouceur et al., 2000; Ladouceur et al., 2007; Nelson et al., 2010; Steinberg & Velardo, 2002). Gender differences are also reported, with female self-excluders more likely to be older, be divorced, separated or widowed, have shorter gambling careers and to prefer games determined by chance (Nower & Blaszczynski, 2006). In remote gambling settings, the profile tends to vary somewhat, with excluders being more likely to be single (Hayer & Mayer, 2011) and younger (Dragcevic et al., 2013; Hayer & Mayer, 2011; Wardle, 2012).

While the earlier empirical evidence offers some support for the claim that it is predominantly problem gamblers who request exclusion agreements (Ladouceur et al., 2000; Steinberg & Verlado, 2002; Blaszczynski & Nower, 2004), more recent European studies focussing on samples from remote operations have shown that self-exclusion agreements are used by players from across the full spectrum of gambling participation (Griffiths et al., 2009; Hayer & Meyer, 2011; Wardle, 2012) with as few as 10% of excluders in one study doing so to manage gambling-related harm (Griffiths et al., 2009). Griffiths et al. also reported that less than 1% of their remote gambling sample used self-exclusion to attempt a permanent cessation of gambling. However, it is unclear whether these differences in motivation reflect changes over time, differences across jurisdiction, differences between remote and land-based operations or a combination of these factors.

In a series of innovative studies using player data captured from a remote gambling operator, Shaffer and colleagues identified a series of behavioural markers indicative of whether a gambler eventually self-excludes, including higher staking levels, higher levels of net expenditure, greater variability in betting and greater frequency of play (Braverman & Shaffer, 2012; LaBrie & Shaffer, 2011; Xuan & Shaffer, 2009). In another study, also drawing on behavioural data, this time from a different remote operator, Dragicevic et al. (2013) reported that self-excluders were more likely to have a higher net expenditure and to play casino games.

Multi-Operator Self-Exclusion Schemes (MOSES)

A fundamental criticism of existing self-exclusion arrangements, in relation to both land-based and remote gambling, is the relative ease with which most consumers can continue to gamble at other venues, sites, operators, sectors or jurisdictions. This situation not only undermines the potential impact of self-exclusion to problem gamblers but also penalises more responsible operators. Consequently, there exists an imperative to explore and develop a ‘collective’ option where data and resources can be shared, so that gamblers can have the choice of a more comprehensive reach when they take the decision to self-exclude.

An important consideration, particularly in the context of land-based operations, is that outcomes should justify the resources that would be required to support them. For example, it may not be a prudent use of resources to develop a system permitting a consumer enacting a self-exclusion agreement in the south of England, to expect an exclusion request to be successfully enforced in a venue of the same operator in the north of Scotland. The likelihood of such a system being necessary to minimise harm would be extremely low, and the resources required to support it would be extremely high. This focus on efficiency is not about protecting industry profits, but about ensuring that resources dedicated to harm minimisation are used in an optimal way.

Regarding options in the remote sector, technological developments can drive self-exclusion to evolve through the creation and maintenance of an anonymous and secure ‘register’ (Dragicevic, 2011; Francis, Dragicevic & Parke, 2012). Such technology could give gamblers the option to restrict access beyond the original site to other operators participating in the scheme.

Treatment Providers Survey – Multi-operator self-exclusion is important

The need for multi-operator self-exclusion schemes was endorsed. Allowing the customer to choose between all or only a selection of venues and sites was considered to be important.

“The one comment that occurs on a regular basis is the need for global self-exclusion or a national database that works with all online companies, to stop clients going from one to another with ease.”

There were also some examples of where this was being tried and developed:

“There is an organisation already in existence called ‘count me out’ www.countmeout.org.uk, they have a service that allows a person to self-exclude without having to enter a gambling establishment to do it and a database set up covering several areas. It has 126 industry members showing on the website who are connected to it at the moment. Currently it is utilised mainly with casinos/ arcades etc., however if the main companies also signed up this could be useful.”

Gambling Operators Survey – Multi-operator self-exclusion is important but presents challenges

The vast majority of responses identify that this is an important but challenging objective.

An interesting point regarding resources was made, in that focussing on a specific region across all operators will be more effective than focussing on all regions across just one operator.

“We agree and are working on this with other land-based operators. There is an argument that a total exclusion across a local area (all types of gambling) is more valid than across multiple operators of the same product, but who may not be represented in the same town. However, anything that allows a customer to easily extend their request (without having to make it multiple times) is desirable. Online is more difficult, due to the vast number of sites, but the UK point of consumption licensing might bring this closer to reality. Again, as long as the customer has the choice it makes sense. They must have that choice in order to overcome the data protection issues of otherwise sharing their information with other sites without their consent.”

“A national database that operators can access would be a great introduction. Locality needs looking into, automatic boundaries inside which exclusion from all operators take place.”

Only one of the 26 participating operators suggested that each operator should be responsible for managing their own player exclusions.

Table 3: Challenges and Potential Solutions for Implementing Collective Self-Exclusion in the Remote Gambling Sector (S. Dragicevic, personal communication, September 18, 2011; Francis et al., 2012)

Industry Concerns	Response
Technical integration	<p>*A small number of data fields are required to share amongst operators which are available from every operator making operator integration very simple</p> <p>*In addition operators can manually upload CSV files to the system, which means that operators can start sharing relevant data without any technology integration</p>
System development and maintenance cost	<p>*In the case of VeriPlay³ established cloud technologies are used, it is quickly and easily scaled to on-board additional operators. The cost of storage, central processing units and network bandwidth has exponentially decreased since the 1980s e.g., the cost per terabyte of storage from Apple in 1980 was \$14 million, today it is \$70 (Barracuda). Therefore this is not an issue</p> <p>*Additional industry and regulatory requirements can also be quickly and cost effectively added to the system to ensure it can evolve at the pace that industry innovation changes to meet operator requirements e.g., supporting self-exclusion across different gaming verticals</p> <p>*Arguably more expensive self-exclusion systems (e.g. facial recognition technology) have already been adopted in some global jurisdictions e.g., Canada.</p>
Data privacy	<p>*Secure encryption algorithms ensures data always remains anonymous except for the operators sending and receiving the data i.e., ensuring a player’s anonymity by separating a player’s identity from the player’s account data. This can be achieved through a number of proven statistical and mathematical methods, including data reduction, data perturbation and data hashing methods</p> <p>*Therefore data stored in this encrypted format is meaningless to the operator of the self-exclusion service (VeriPlay) and is arguably more secure than when stored in the gambling operator’s own data centre</p> <p>*There is a precedent for sharing data as operators today share anonymised player data for non-commercial reasons e.g., European Sports Security Association (ESSA) to ensure integrity in online sports betting, bwin and Harvard Medical School’s collaboration into problem gambling research</p>
Conflicting national laws	<p>*Not a valid reason, as it makes sense to adopt schemes at a national level as it is likely one would need to be a citizen of a regulated jurisdiction to gamble, which is what many jurisdictions are now actively implementing e.g., the Danish regulator is taking a step towards such a scheme with ROFUS (problem gambling register)</p>
Service abuse	<p>*Independent audits could enforce the integrity of a scheme. However, it is highly unlikely that established and regulated operators would risk their reputations by abusing such a scheme. If required, penalties could also be defined by the industry and/or regulators to ensure service abuse does not exist</p>
Driving customers to unregulated	<p>*Ensuring customers gamble with responsible, regulated operators is a broader regulatory issue that the EU and the industry need to work together to tackle and is not an excuse for not implementing such a service which could go a long way</p>

³ Veriplay is a proprietary self-exclusion solution – see www.veriplay.org

Table 3: Challenges and Potential Solutions for Implementing Collective Self-Exclusion in the Remote Gambling Sector (S. Dragicevic, personal communication, September 18, 2011; Francis et al., 2012)

operators	in protecting vulnerable gamblers
Independent service management	*The service could be governed collaboratively with relevant industry organizations or could be technically managed on behalf of a regulator or problem gambling treatment provider. The service could also easily be hosted on a regulator or other server if required

Operational challenges

Table 3 summarises the potential challenges that have been identified by the industry, and responses/resolutions to these challenges (S. Dragicevic, personal communication, September 18, 2011; Francis et al., 2012). Concerns include prohibitive costs, concerns over data privacy, integration challenges with various IT infrastructures, the potential for service abuse, driving customers to unregulated markets, and the need for independent service management. Dragicevic and colleagues believe some of the challenges can be overcome through effective policy and process design and through the use of secure technologies that are currently used to protect player data in regulated markets.

Table 4: Governance Options for Collective Self-Exclusion (Francis et al., 2012)

Scoring Criteria		D	F	A	F	I	F	I	V	F	B
Functional Scope Potential	<i>Multi-Channel Support</i> Can the approach support multi-operator self-exclusion across multiple gaming channels e.g., retail, internet, mobile, etc?	5	5	5	5	5	5	5	5	5	2
	<i>Integrate Future Requirements</i> Is the approach flexible and extendable to integrate future industry developments and functional requirements e.g., managing self-exclusion by gaming vertical across operators?	4	6	6	6	6	6	6	6	6	2
	<i>Multiple-Access Points</i> Can the approach support multiple integration approaches, such as access to a central list via a technology integration (e.g., web API), human access to a list via a portal, etc?	6	6	6	6	6	6	6	6	6	1
	<i>Supports Problem Gambling Research</i> Does the approach lend itself to support future academic research into problem gambling, for example via access to anonymised player data on problem gamblers on a central list?	6	5	5	5	5	5	5	5	5	2

Table 4: Governance Options for Collective Self-Exclusion (Francis et al., 2012)

Total		21	22	16	7
Adoption Potential	<i>Mandatory Operator Adoption</i> Can the approach achieve mandatory adoption from gambling operators in a jurisdiction?	6	4	2	1
	<i>Low Marketing Effort</i> Does the approach require minimal marketing effort to raise sufficient awareness amongst all consumers?	6	3	1	2
	<i>Low Cost to Player</i> Does the approach require minimal time and cost to consumer to use?	6	6	3	1
	<i>Low Cost to Operator</i> Does the approach require the minimal operator investment in developing and/or integrating to the solution or service?	3	2	4	5
Total		21	15	10	9

Notes: scored 0-6 with 6 being positive

3.4 Delivery and governance options

Francis et al. (2012) assessed the potential options for the delivery and governance of a collective self-exclusion solution and categorised these into four categories of system: a ‘regulator-driven system’ whereby operators would be mandated to generate, manage and use a collective list (e.g., Danish regulatory approach); an ‘operator-driven system’ overseen by an industry collaboration in the absence of mandatory regulatory requirements; a ‘player-driven system’ where players voluntarily add their names to the list and gambling operators can engage on their own terms (e.g., Aristotle and PlayerVerify); and a final option involving ‘computer blocking software’ which is purchased, downloaded and blocks access to gambling sites (e.g., Gamblock).

Francis et al. carried out a subjective assessment of the potential effectiveness of approaches according to two dimensions they developed, including ‘Functional Scope Potential’ and ‘Player Adoption Potential’. This assessment is summarised in Table 4. Francis et al. concluded that the preferred governance solution would either be regulator-led with significant industry involvement, or operator-led with regulator endorsement. The player-driven and software blocking approaches were considered inferior due to significant limitations as identified in the table. However, if ‘simplicity’ and ‘barriers to implementation’ were considered as part of the assessment, then a player-driven system may also carry weight, particularly if it initiates a process which eventually leads to a more robust approach in due course.

3.5 Optimal duration of agreement

Duration of exclusion agreements varies considerably from a matter of hours in some remote operations (Griffiths, Wood, & Parke, 2009) to lifetime bans in some US states (e.g., Missouri; Nower & Blaszczynski, 2008). However, there is currently no academic consensus on the optimum length of exclusion for promoting harm minimisation and well-being. Nowatzki and Williams (2002) advocate an irrevocable five-year contract and there is evidence that longer terms are preferred by gamblers (Ly, 2010; Steinberg & Velardo, 2002). There has also been evidence that longer bans result in lower and more stable visiting frequencies following the ban (De Bruin et al., 2001).

Gambling Operators Survey – Preference for six-month minimum length

The most common response was that a six-month minimum term was currently employed (not necessarily that it was most appropriate) and this probably reflects licensing conditions.

Some operators suggested that shorter more flexible arrangements were not in the best interest of the player:

“I don’t agree with this [flexible options for shorter ban length], the player has a ‘gambling problem’ and there should be some period of time within which it is feasible that behaviour can change, if it is controlled by the player they could request a week and what difference in reality can a week make to a behavioural problem such as compulsive gambling.”

It was suggested, depending on the sector and whether remote or land-based, this may not be the best use of resources for harm minimisation:

“LBO-wise, it is far too difficult for staff to manage multiple ending agreements where there is no membership entry system. Across all other brands it would be abused too, purely as customers would not associate the seriousness of entering into a self-exclusion agreement with say a period of 48 hours. It would be utilised more as a method of ‘taking a break’ as opposed to a long term commitment to control gambling spend, for which it was originally intended.”

Conversely, some suggest that retaining flexibility through using shorter bans with the option to review or terminate may be most effective (Blaszczynski & Nower, 2004; Griffiths, et al., 2009; Productivity Commission, 2010) and that short-term options should be available as long-term or permanent bans may deter uptake (Productivity Commission, 2010). In the sample of internet gamblers, Griffiths et al. (2009) found 10% used the self-exclusion facility to take a ‘temporary’ break for a period of time. The most preferred exclusion term identified was a week-long term, endorsed by 46% of the sample.

Flexibility in duration of agreement may promote self-control for those preferring not to abstain, and may also increase uptake and the range of gamblers willing to consider it as an option for staying in control. Although self-exclusion has traditionally been considered one of the final options for consumers failing to regulate their gambling behaviour (Williams et al., 2012), with increasing evidence that problem gambling is not necessarily a chronic condition (Delfabbro, 2013; Reith & Dobbie, 2012) the impact of shorter, more flexible exclusion arrangements merits further research.

Treatment Providers Survey – Longer duration is preferable

The general feeling was that there should be a longer minimum ban length than 6-12 months:

“Minimum exclusion period in Australia tends to be 12 months; I don’t think that six months are long enough.”

“Venues only appear to offer the minimum six-month period rather than inform about options.”

3.6 Links to treatment

In some jurisdictions, self-exclusion agreements are linked with treatment, either by referring self-excluders to sources of help, by mandating attendance at treatment sessions prior to reinstatement, or by offering ongoing treatment and support as an integral part of the self-exclusion agreement (Ladouceur et al., 2000, 2007; Nowatzki & Williams, 2002). There is mixed support for whether operators should play a more active role. While there is some support that self-excluders would value signposting (O’Neil, 2003; Responsible Gambling Council, 2008), other evidence suggests that taking the step to exclude was sufficient for managing their gambling (Ladouceur et al., 2007). Further, Ladouceur et al. found that the majority of self-excluders were unreceptive to the notion of therapeutic support, with 49% considering it but only 10% eventually accessing it.

Treatment Providers Survey – Treatment is the best solution

“I think it would be very difficult if not impossible to implement a self-exclusion system which would be effective in the way we/society want it to be. This, in my view, is because of the nature of the human mind when it is in a state of ambivalence. Our actions can suggest we desire to stop doing something when our psychological desire is still to do it. We are often not ready to change things as change can mean loss and anxiety. Further, taking preventative measures may simply be a means of appeasing others. However, there is still a measure of protection or minimisation of harm that self-exclusion offers and the use of it may contain an already unwieldy problem for the client. In that respect, offering self-exclusion that is linked somehow to getting real help/treatment would be a better way to administer it.”

Gambling Operators Survey – ‘Inform’ rather than ‘refer’ regarding treatment

The overwhelming majority of operators reported that while they do not make direct referral for various reasons (data protection, lack of clinical expertise), they do provide sign-posting information regarding various relevant resources:

“We have information on where customers can obtain help but it is not appropriate for staff who are not medically or psychiatrically trained to be making referrals. It is also impractical in a 24-hour gaming business as this would require a team of appropriately trained people to be employed round the clock for the occasional person who requires such assistance. The cost would massively outweigh the advantages.”

“This is not done within our organisation unless we have agreement with the person who self-excluded, due to the Data Protection Act. We do however provide customers who request exclusion due to gambling problems and/or addiction, local information of where help can be obtained.”

Beyond the notion of sign-posting, it is not clear whether operator-based self-exclusion should carry with it the requirement to seek some form of treatment. Most forms of talking therapies have been shown only to benefit those who are receptive and motivated (Arean & Miranda, 1996; Cooper et al., 2003). For this reason, mandatory counselling is not likely to be effective, and may actually act as a deterrent to entering into a self-exclusion arrangement (Nowatzki & Williams, 2002; Ladouceur et al., 2007; Responsible Gambling Council, 2008). Ly (2010) suggested that an alternative option may be to nominate a sponsor known to the individual to provide social support during the process, which could work better than a helpline providing support from strangers. Ly suggests that this may also help with potential boredom and social support during exclusion.

Third-party exclusion requests

Some operations in some jurisdictions have explored ‘third-party’ exclusions whereby a significant other can request an exclusion be enacted to protect the welfare of the problem gambler (Thompson, 2001). However, this approach would require that the significant other can correctly identify that such an intervention is needed, which is a questionable assumption. It has been shown that, while often motivated by an intrinsic desire to solve their gambling problems, 23% of self-excluders are persuaded by others to negotiate a self-exclusion agreement (Nelson et al., 2010). Also, such an approach opens up the possibility of abuse and would be likely to invoke a significant administrative burden. Nowatzki and Williams (2002) concluded

in their review that this approach has been employed with only limited success.

Gambling Operators Survey – Consideration rather than automatic action

Operators generally identify that this approach is fraught with issues and may not be reliable for reasons already captured above. Some operators suggest that this information may still be used even if it does directly trigger the exclusion:

“It has to be done in a manner not to go against the Data Protection Act. If a third party contacts the company because they are worried that a person is playing too much or having a problem, the customer service agent will disclose that no information can be given about the account holder due to the Data Protection Act. Nonetheless, customer service asks the third party to send the request in writing with the third party's ID. This is then escalated to legal and responsible gaming in order to determine the best course of action, for example, contacting the customer proactively after a day to discuss his/her gambling.”

“We agree that often indication by third parties had been helpful to identify potential problem gamblers. However indication by third parties has also been extremely misleading in some cases (we have even seen requests for third-party exclusion as harassment in ongoing divorce disputes). We therefore do not believe that naively accepting third-party exclusion requests would be reasonable (or constitutional). We have however introduced a process that allows intervention by third parties, while maintaining the rights of the player:

1) Information by third party is accepted, third party is informed that due to privacy regulation we cannot confirm whether the person is our customer;

2) Third party is however informed that we will investigate the case and approach the person, in case he is our customer; third party is asked whether they want to remain anonymous or whether they want to be mentioned, when we confront the player; 3) If the person is our customer, we investigate the case, confront the player and demand explanation; and 4) If no or no sufficient explanation is provided, we take the right to impose exclusion on the player; this exclusion is however our decision based on our risk-management and our house right. It is not the direct consequence of the third-party request.”

“...third-party concern can be listened to and interaction with that customer can then happen, but the process should always be player and operator driven together.”

“We always consider third-party concerns, follow up and interact with the customer and ensure action is taken if appropriate.”

“These options are available within our Policy. It usually requires the individual to be spoken to first – as it is not unknown for a

‘concerned’ third party to be out of step with the reality and/or acting in their own self-interests or prejudices. However, we reserve the right to enact an ‘enforced exclusion’ if it transpires that the third-party claim is correct but the individual does not accept it.”

3.7 *Self-exclusion by product*

One of the most controversial issues debated in gambling studies is whether different products have a variable potential to cause harm. There are various perspectives on this point:

- variations in the form of gambling have little relevance over the form of gambling-related harm (LaPlante, et al., 2009; Griffiths & Auer, 2012; Błaszczynski, 2013);
- availability rather than form of gambling is more important (Abbott, Francis, Dowling, & Coull, 2011);
- the form of gambling is an important determinant of gambling-related harm (Orford, Griffiths, & Wardle, 2012; Parke & Griffiths, 2007).

Preferences to limit exclusions to certain products may also be determined by individual (e.g., personality, motivation and preferences) and environmental (location, medium, accessibility) variables. However, there are currently no directly relevant studies examining this issue, and therefore research which explores player perspectives on harm minimisation strategy is required, of which the potential value of self-exclusion according to product should be a primary focus.

Gambling Operators Survey – No consensus on exclusion by product

Operators were split on this with half of respondents suggesting that such flexibility is important and the other half suggesting that half-measures would undermine a player’s attempt to minimise harm, and therefore they would seek to require a blanket ban across all products.

“Based on the syndrome model of addiction, this could be a dangerous thing to do. While a customer might be encountering only problems with slot machines today, he might be encountering problems with other types of games after having ‘excluded from slots’ (=addiction hopping). Self-exclusion in its original meaning should therefore always aim to affect all types of games offered.”

“Distinguishing between soft and hard gambling is very dangerous, a self-exclusion should be from all forms of gambling.”

Some operators suggested some products were identified for exclusion more frequently than other forms:

“...very rarely do customers require sports gambling to be removed, it’s almost always casino and slots.”

Observations were also made that this was easier in a remote setting: “Online this is easily achievable but, in retail, the exclusion has to be from the shop. It would be almost impossible for the shop team for it to be otherwise.”

Treatment Providers Survey – Preference for flexibility in focus of ban

One provider stated that this is becoming more acceptable:

“The face of gambling has changed dramatically over the last few years and so has the face of the problematic gambler, so being able to exclude from forms of gambling they wish to exclude from or have identified are more of a risk to them would be very helpful”.

3.8 Staff training and corporate culture

Research from gambling jurisdictions suggests that whilst venue staff appear confident of protocol when customers actively seek information, there is often ambiguity regarding procedure and responsibility when staff observe customers clearly experiencing distress (Delfabbro, Borgas, & King, 2012; Hing & Nuske, 2011a; Hing & Nuske, 2011b; McCain, Tsai, & Bellino, 2009). Evidence suggests that part of the uncertainty of staff in engaging in customer intervention is uncertainty regarding the legitimacy of the process, and to what extent such intervention is perceived as a valued action by corporate management (Hing, 2007; Hing & Nuske, 2011a). Research clearly indicates that employees are in favour of further training in customer interaction in order to have clarification regarding procedures and responsibilities (Giroux, Boutin, Ladouceur, Lachance & Dufour, 2008; Hing, 2007), and the Productivity Commission (2009) countenanced the case for all employees on the gaming floor to have such intervention training.

Ultimately, evidence suggests that staff who underwent responsible gambling training to provide problem gambling and referral information, not only felt more confident and empowered to respond proactively to distressed customers, but were also more likely to intervene (Giroux et al., 2008; Ladouceur, Boutin, Doucet, Dumont, Provencher, Giroux et al., 2004). However, it is argued that management must more actively monitor customer intervention from floor staff, or online customer service staff, in terms of rewarding staff for effective interventions and potentially disciplining staff who did not respond appropriately in this respect (Kranacher, 2006; McCain et al., 2009). Although it may not be feasible to evaluate with any accuracy the validity or effectiveness of staff judgements and actions regarding customer interactions, the underlying proposition was to create mechanisms to demonstrate corporate support and commitment towards proactively providing problem gambling and referral information. Research clearly demonstrates that employees’ perception of the ethical climate, via genuine

managerial support, strongly influences whether they implement responsible gambling practices or not (Boo & Koh, 2001; McCain et al., 2009; Peterson, 2002).

Given the inherent challenges in proactively intervening and providing at-risk customers with problem gambling and referral information, it is argued that efforts should be made to reduce potential barriers to customers self-identifying themselves as experiencing problems and requiring assistance. Research indicates that lack of knowledge of available services is a primary barrier in customers seeking assistance (Hodgins & el Guebaly, 2000; McMillen et al., 2004; Rockloff & Schofield, 2004). Further reported barriers to seeking assistance include a lack of trust regarding confidentiality, uncertainty regarding the processes that will be initiated once the customer self-identifies as experiencing gambling difficulties, and potential stigma (Hing, Holdsworth, Tiyce & Breen, 2014; Hing, Nuske, & Gainsbury, 2011; Rockloff & Schofield, 2004; Scull, Butler, Mutzleburg, 2003). Therefore, it is reasonable to conclude that efforts should be concentrated on increasing awareness of what assistance is available on request, and assurances of confidentiality.

Part of the reticence of employees in directly approaching a customer who has not self-identified is related to concern regarding hostile responses from customers who feel that their privacy is being invaded without their consent (Hing & Nuske, 2011a; 2011b). As noted in previous studies, problem gamblers in the gambling environment are more likely to demonstrate negative emotional states such as anger and frustration (Delfabbro et al., 2007; Schellinck & Schrans, 2004). The probable negative emotional disposition of problem gamblers is likely to make the interaction with the customer even more challenging. Hing and Nuske (2011b) propose that attempts should be made to encourage a cultural shift, where gamblers are informed that displays of distress or problem gambling behavioural indicators will stimulate customer interaction from employees. They propose a parallel is drawn to venue employees' intervention when customers appear overtly intoxicated, where staff intervention is perceived as within their legitimate rights and responsibilities, rather than as an unnecessary intrusion. However, it is fully acknowledged that creating support for, and acceptance of, such an ethical climate within gambling venues would require a considerable cultural shift emanating from significant public awareness campaigns (Hing & Nuske, 2011b).

Treatment Providers Survey – Cultural shift regarding the role of training

“Staff should be better trained. Local and national helplines should be known by staff.”

“Staff need to be trained and made aware of the seriousness of an individual’s request to be excluded. I have heard of a person with dual diagnosis being ridiculed when requesting to self-exclude.”

“Regular, up-to-date training for front line staff – betting shops, casinos – in areas concerning self-exclusion.”

“In general the feedback from those self-excluding has been received well by well-trained personnel but this still has room for improvement and more understanding.”

There were isolated examples of very poor customer service reported by some treatment organisations, emphasising the importance of good staff training and the need for a strong culture of social responsibility within an organisation:

“One gentleman relayed how he had gone in to self-exclude himself and the cashier didn’t know how to process his request and asked him to wait for the manager to come in or come back later. He decided to wait, gambled what money he had and left; the same cashier took his money and never said a word.”

“Another experience discussed was that the cashier accepted his self-exclusion but said not to worry you can still come in and have your dinner and you can always change your mind and have a gamble if you like.”

Gambling Operators Survey – Staff training an important basis for the provision of self-exclusion

All of the operators agreed with the general principle, with some sectors or operations only focussing on staff where this constitutes a key part of their job (customer-facing staff, area managers). For example, a game designer or an odds compiler in a remote operation may not require a detailed knowledge of self-exclusion principles.

“Training when it comes to responsible gaming at our company is split in various levels, and the self-exclusion process is mentioned in all the training. Every customer service agent gets the RG training on policies and procedures (thus specifically covering self-exclusion step by step) on an annual basis.”

Card-blocking as an adjunct to self-exclusion in some land-based venues

Notwithstanding the absence of any empirical evidence, it was considered appropriate to make brief mention of a possible component measure that might merit consideration both in terms of operational practice and for further research. There may be potential to augment the provision of self-exclusion through allowing self-excluders to request blocking the use of debit or credit cards in land-based venues (where player identification and detecting breaches, particularly outside a ‘local area’, proves to be more difficult).

In theory, this may be possible directly through the bank if merchant codes, identified as ‘gambling-related’, could be prohibited. Alternatively, this might be feasible by direct agreement with gambling operators. Potential benefits of this option could be quick and easy implementation across venues at a regional or national level and a reduced chance of a breach; at least for that specific payment method). There may also be a number of limitations with this approach, the most notable of which, is that gamblers would still be able to gamble using cash if they entered the venue undetected.

A detailed consideration of this component measure and the various complexities regarding its merits, limitations and operational issues is beyond the scope of this review. However, evidence suggests that problem gamblers are more likely seek access to additional funds and make multiple withdrawals within a gambling session (McMillen, Marshall & Murphy, 2004; Productivity Commission, 1999) and for this reason, exploring additional restrictions for self-excluders on ‘in-venue options’ for accessing additional funds warrants further examination.

4 SUMMARY AND CONCLUSIONS

The theoretical basis for using self-exclusion as a harm minimisation tool is relatively unambiguous. Put simply, removing the opportunity to gamble from those who struggle with self-control in a gambling-related context will help minimise at least some gambling-related harm. However, the most efficient approach to implementation and enforcement, and to what extent this will reduce gambling-related harm, and who is likely to benefit most, are issues which continue to challenge stakeholders.

From reviewing the literature, effective self-exclusion protocols should:

- be actively but strategically promoted;
- be quick and simple to implement;
- be administered by staff with relevant, up-to-date and regular training;
- attract sufficient investment in resources and technology to improve enforcement;
- have comprehensive (i.e. multi-site, multi-operator) rather than isolated coverage where feasible.

However, work is needed to assess the operational feasibility and clinical implications of these recommendations, which in turn will yield important information regarding optimum strategy for delivery and function. When considering investment in different harm minimisation choices, what is most important is that those resources aimed at harm minimisation are used efficiently. Options which are expensive, difficult to implement and/or manage, offer minimal reductions on gambling-related harm and adversely

affect the gambling experience (for those not experiencing harm) should be identified as inefficient with resources being diverted to more promising harm minimisation options.

Consequently, self-exclusion is a very good idea in principle and likely to help reduce gambling-related harm when employed with other strategies: however, the real challenge lies in establishing specific principles for efficient self-exclusion (e.g., promotion, duration, product focus, degree of flexibility etc.) and making a judgement as to what proportion of spend on harm minimisation should be allocated to self-exclusion.

In addition we draw the reader's attention to the conclusions drawn in a recent broader review of operator-based approaches to harm minimisation (see Blaszczyński, Parke, Parke and Rigbye, 2014). Based on this review we also suggest that the following will likely be important in facilitating effective self-exclusion:

1. The at-risk player should be engaged, wherever possible, before significant harm is experienced.
2. Appropriate responsible gambling intervention training, with clear specification of staff responsibilities, should be put in place.
3. Self-exclusion strategies should be evaluated using robust research designs, adequately-sized samples, adequate outcome variables and follow-up measures.
4. Guidelines for self-exclusion should be prescriptive wherever possible (e.g., specifications regarding what constitutes a minimum acceptable level of 'active promotion'). While the absence of empirical evidence on the effectiveness of different approaches current limits the level of specificity that can be achieved, working groups involving multiple stakeholders should work together to develop principles in the interim period until the evidence-base catches up.

5 RESEARCH PRIORITIES FOR SELF-EXCLUSION

Based on this review, we believe priorities for identifying best practice in self-exclusion relate to practical as well as theoretical examination. Initial priorities are suggested below.

Ongoing assessment of options for Multi-Operator Self-Exclusion Schemes

There is compelling justification for continuing to explore the opportunities for connecting self-exclusion across venues and operators. This should be a top priority for strengthening self-exclusion and harm minimisation more generally. Even among operators responding in the survey, an overwhelming majority were supportive of this strategy in principle, providing the barriers can be overcome. A detailed consideration of the technological, operational and legal issues that will constrain or otherwise shape the potential range of solutions is required. In addition, the most

appropriate governance arrangements also need to be determined (i.e., regulator driven, player driven or operator driven).

Resolving these issues is likely to require ongoing consultation between stakeholders in the first instance, rather than traditional empirical research. Part of this feasibility work should include operational trials in relation to potential technology solutions to explore potential challenges documented by Dragicevic and colleagues. Such trials should involve the participation of multiple operators currently serving British citizens in order to test a solution over a reasonable timescale. This should allow potential barriers to be examined in a systematic and controlled way.

Player survey on player behaviour and perspectives on self-exclusion

A key conclusion from this review is that stakeholders require a better understanding of the potential costs and impacts of various approaches to the promotion and enforcement of self-exclusion in order to facilitate policy-orientated decision-making. A relatively inexpensive and expedient first option would involve a survey seeking player perspectives on the likely uptake and impact of more innovative approaches to self-exclusion (e.g., disentanglement options, product-specific exclusion) and developing an improved understanding of post-exclusion behaviour (including continued gambling with other venues, different operators, different products or through different channels). This initial research could identify more promising areas to pilot some experimental research in order to obtain robust empirical evidence regarding costs and impact.

Trialling optimal approaches for improving detection and preventing breaches

It is also recommended that work identifying and trialling the most efficient approaches and technologies in the detection and enforcement of self-exclusion in land-based environments is carried out and documented. At the time of writing, trials examining the potential impact of facial recognition in detection and enforcement in the British gambling industry are under way in casinos (e.g., National Casino Forum) and adult entertainment centres (e.g., Praecepte). Identifying and exploring options for restricting debit and credit card use in land-based venues as a primary or adjunct facility to self-exclude may also hold promise.

Identification of plausible harm

As part of a broader programme of harm minimisation research, further studies should continue to explore the feasibility and accuracy of classifying gamblers who may be at risk or experiencing harm. If accurate and reliable identification is possible, then the promotion and implementation of self-exclusion can be more targeted. We recommend that work in this area continues to be a priority including strategies such as drawing on observable behavioural indicators overtly displayed by individuals, as well as extending investigations beyond gaming machines to other forms of gambling.

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