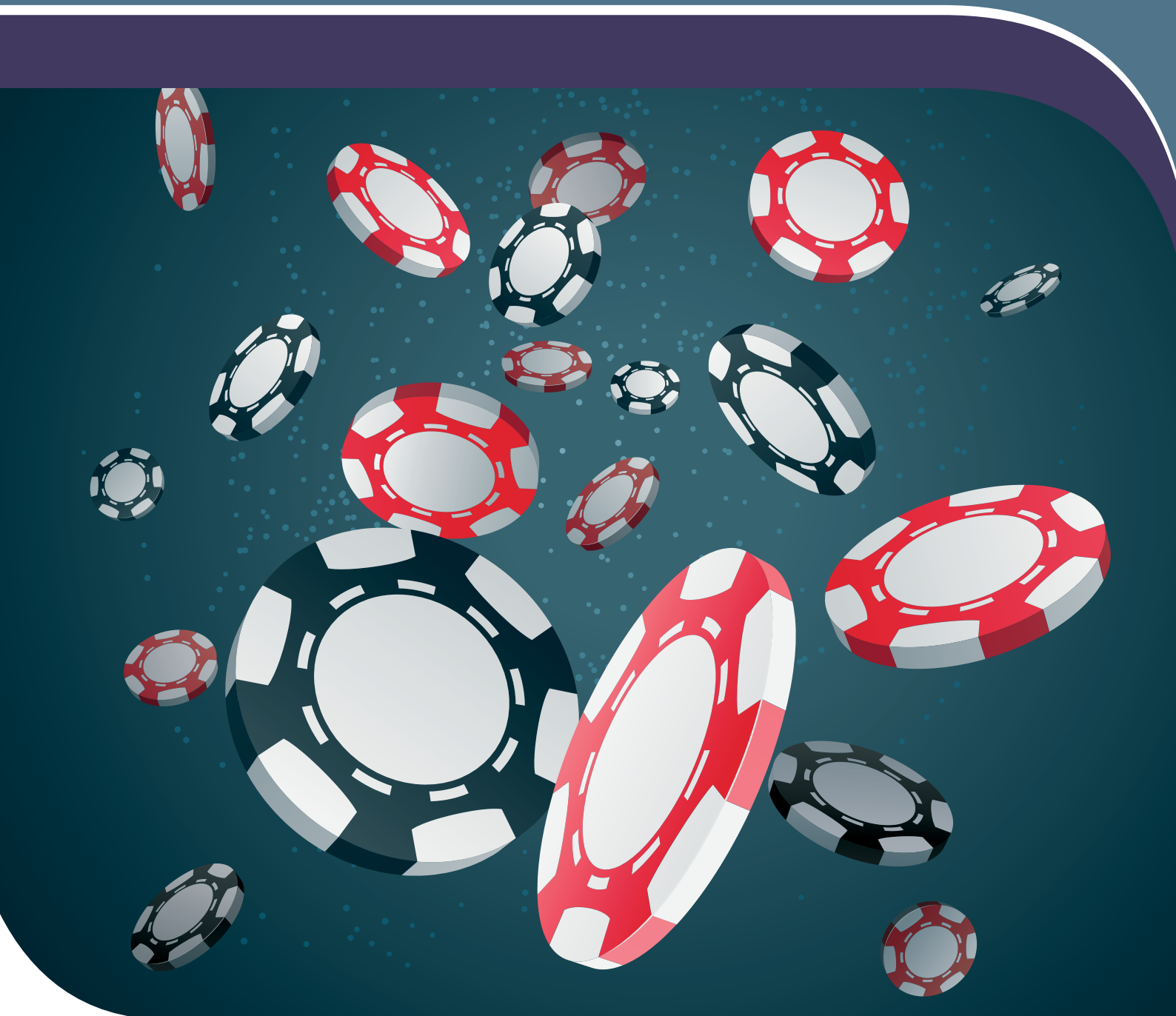


# Australian gambling research priorities

Summary findings from consultations conducted by  
the Australian Gambling Research Centre



**Australian Government**  
**Australian Institute of Family Studies**  
Australian Gambling Research Centre

The Australian Gambling Research Centre (AGRC) conducted consultations with individuals and groups in the gambling sector in 2013–14. The priority areas helped inform the development of the research directions for the AGRC as well as priorities for knowledge translation and exchange. They should also assist researchers and policy makers to develop research focused on improving the short- and long-term health and wellbeing of Australians who gamble and who are affected by gambling.

## The national research priorities are to:

- understand gambling harm more broadly;
- determine ways to reduce or minimise harm from gambling;
- understand the ways in which community and gambling environments influence gambling;
- explore how new and emerging technologies influence gambling;
- examine the short- and long-term effects of marketing strategies on gambling;
- determine effective means of support and recovery for those harmed by gambling; and
- improve gambling research design and methodology.

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## Consultative process

The consultative process took place with key stakeholders from across Australia, including:

- researchers from diverse disciplines;
- practitioners and service providers;
- policy makers and regulators;
- community group representatives; and
- industry representatives.

### *Face-to-face and telephone consultations*

In total, 21 individual and group consultations were conducted with key, high-level stakeholders across Australia to gain an in-depth understanding of their views and experiences. Consultations were largely unstructured, with participants responding to open questions asking for their opinions on national and personal research priorities.

### *Online survey and other data*

To supplement the consultative process, 174 gambling-related professionals from all Australian states and territories completed an online survey asking about personal and national research priorities. Survey participants were asked to respond to questions relating to 11 research priorities identified through a critique of Australian gambling reviews and reports, as well

as an examination of relevant gambling research agendas developed by state government offices and Australian-based and international research centres. Forty per cent of participants also responded to follow-up open-ended questions relating to research priorities.

In addition, secondary data were obtained through AGRC participation in two international think tanks, two interdisciplinary expert dialogues and two international gambling conferences.

## *Data analysis*

The final analysis and interpretation used a primarily inductive framework and thematic analysis techniques. Data from the different sources were analysed separately and findings were compared and contrasted, then considered in terms of how identified priorities related to those discussed in key current national and international reviews of gambling research. Qualitative findings showed a high degree of coherence across sources. Analysis of the quantitative findings also showed that the most strongly endorsed topics were consistent with the qualitative analysis in terms of key research priorities. We have therefore combined all data to produce the seven key research areas that stakeholders considered to be important in terms of future research priorities. Some additional survey statistics can be found in the appendix to this document.

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## Research priorities

The research priority areas identified by the consultation process are described below.

### **Understanding gambling harm**

The need to better understand gambling-related harm was a strong theme to emerge from both the face-to-face consultations and qualitative survey data. It had several related elements:

- complexity of harms;
- thinking beyond problem gamblers;
- harm to significant others; and
- harm to vulnerable groups.

#### Complexity of harms

Many respondents in the face-to-face consultations discussed the need to better understand the complexity of gambling-related harms. This included better measurement and investigation of the various types of harm (e.g., self-harm, suicide, incarceration, debt, consequential comorbidities), the longevity of harms, and the extent of harms (e.g., who beside the gambler is harmed). For example, participants noted that gamblers who are incarcerated either directly or indirectly in relation to their own (or someone else's) gambling are likely to experience lifelong social and economic harms, many of which will extend to any partners or children.

#### Thinking beyond problem gamblers

Participants identified that research examining gambling issues tends to classify gamblers according to the severity of their problems, contrasting those classified as “problem” or “pathological” gamblers with other gamblers. It was argued that this has resulted in a misconception that only people with severe problems experience harm from their gambling. Respondents recommended that research broadens its focus to consider the much larger

group who may sit below the threshold for problem or pathological gambling but who are still experiencing harm from their gambling (e.g., those classified as low and moderate risk gamblers). As one survey participant stated, “detriment is more than problem gamblers”.

## Harm to significant others

Research to document and understand harms experienced by the families of gamblers was rated as being of national importance by participants in both the surveys and the face-to-face consultations. This was a particular concern for service practitioners, who have hands-on experience with problem gamblers in recovery and their families. It was argued that high gambling expenditure often has consequences beyond the individual, and family members bear the brunt of reduced household incomes. Gambling problems can also result in a range of other effects on the family, including intimate partner and family violence, relationship breakdown, loss of trust, suicide, mental illness, or reduced opportunities for children of problem gamblers (see Dowling, 2014). Some respondents discussed the benefits of conducting longitudinal research to investigate the long-term effects of gambling on families, such as ongoing debt, mental health issues and relationship breakdowns.

## Harm to vulnerable groups

Survey participants and discussants identified a need for research to “drill down” to better understand the gambling experiences of particular sub-groups within the community who are identified to be at greater risk of harm. This includes venue workers, culturally and linguistically diverse (CALD) groups, new migrant groups, Aboriginal and Torres Strait Islander communities, young people, seniors, and those with disabilities. There is also likely to be variability in risk within these sub-groups (e.g., young male migrants may be more at risk than other migrants). This research was seen to be important for describing the harms and vulnerabilities of these groups as well as identifying particular support or harm reduction needs. Respondents also discussed the potential need for specific incentives or strategies to successfully engage some sub-groups in treatment or to educate them about gambling risks.

## Reducing and preventing harm

Most stakeholder discussions included the need for research to determine effective harm reduction or harm minimisation measures. Particular areas identified as requiring attention were:

- gambling products and environments;
- evaluation of harm minimisation measures; and
- protective factors.

## Gambling products and environments

Face-to-face consultations singled out the need for research to investigate the potential harms stemming from different gambling product features, and the ways in which harm may be reduced through amendments to the product and/or venue environment. Product-based harm reduction was also strongly endorsed as a national research priority by all sectors within the survey except industry respondents.

Specific topics identified by participants included:

- using player data to inform on player risk (e.g., tracking play patterns and developing algorithms around risky and non-risky play patterns);

- pre-commitment technology as a method of harm reduction/prevention;
- relative effectiveness of harm reduction measures across different gambling platforms (e.g., online vs land-based gambling environments);
- self-exclusion (barriers and supports, multi-venue and/or electronic sign-up); and
- staff interventions to support increased identification of, and approach towards, potential problem gamblers in venues.

## Evaluation of harm minimisation measures

Face-to-face consultations and survey respondents from all sectors supported the need for evaluations of the cost-effectiveness of current and proposed harm minimisation initiatives. Wide dissemination of findings from such evaluations can be used to encourage the broad implementation of effective harm reduction measures and discourage the implementation of initiatives that have been found to be only minimally effective or to have unintended negative consequences. It was noted that evaluations can be very costly, so it is important that these costs are built into planning for any future harm reduction implementations.

## Protective factors

Stakeholder discussions also identified a need for research into factors that may protect against the development of harm, and factors related to non-harmful gambling. Several stakeholder groups discussed the need to better understand the relationship between consumption and harm so that safer consumption thresholds could be identified and communicated to the community, similar to the *Australian Guidelines to Reduce Health Risks From Drinking Alcohol*, developed by the National Health and Medical Research Council (NHMRC; 2009).

## Understanding gambling within the local environment

Consultations and qualitative survey data across stakeholder groups identified a need for research examining gambling and gambling-related harm at a local community level. Issues surrounding this theme included:

- community diversity within state-level data;
- venues within local communities; and
- vulnerable groups within local communities.

### Community diversity within state-level data

Concerns were expressed that data aggregated at state or national level were not able to consider push and pull factors that operate at the local level. Examination of electronic gaming machine (EGM) data, for example, shows uneven distribution of EGMs and EGM expenditure within different regions. It was considered likely that gambling consumption and harm differ similarly across communities, and that this has been under-examined. One researcher stated:

Prevalence studies as such are not particularly useful, but focused research into specific local areas (particularly those where gambling can be expected to have significant effects) would be helpful.

A government survey respondent noted the importance of both broad and narrowly focused research. This respondent suggested that “a national comprehensive and regularly conducted gambling survey is a high priority”. However, the respondent also discussed the need for localised data to allow a more nuanced examination of variations within different communities,

suggesting that “the survey should allow researchers to drill down to gain a picture of what is happening at the regional, local level”. This respondent suggested that this type of research should examine “social and economic indicators as well as gambling indicators”.

Respondents noted the importance of considering both protective and risk factors that may operate at a community level. Understanding of variation within communities was again considered important; for example, which factors within a high-risk community may protect against harm, and which may increase the risk of harm.

Discussions emphasised the need for such research to examine a variety of communities across Australia. This was considered important, as it was argued that the influence of the various factors was likely to differ both within and across states and territories in Australia.

## Venues within local communities

Participants suggested that locally based research should explore the twin environments of venues and the surrounding community in terms of their influence on gambling. For example, participants discussed the need to examine venue environments in terms of social access (e.g., what pulls people in); whether gambling is a major or minor focus of a venue; whether venues cluster (and whether this matters); and whether venues are enmeshed in community spaces and what effects this may have. Factors discussed in relation to the non-gambling environment included relative employment opportunities, socio-economic status, alternative leisure options, and community attitudes to gambling.

## Vulnerable groups within local communities

It was suggested that local-level research should consider some of the more vulnerable groups within selected communities (e.g., those in government housing, young people, new migrants). This type of local, group-specific data could be useful to inform responses by community and service groups as well as planning considerations at various government levels. For example, a local government officer articulated frustration with gaming regulations and application processes for local governments, and had an interest in building “capacity for local governments to do follow-up research to measure harms following increased pokies, for example”.

This type of research has the potential to provide a very nuanced understanding of the effects of gambling on particular groups at a local level. However, research design should consider ways to facilitate more general applicability of such research findings beyond these groups and these communities.

## Examination of new and emerging technologies

Gambling technologies have evolved enormously in recent times, and consultations with various stakeholders reflected widespread interest and concern about the potential effects of access to new gambling opportunities through new platforms and technologies. Discussion centred on:

- understanding new gambling technologies;
- ease of gambling accessibility; and
- blurring of boundaries between gambling and video/online games.

## Understanding new gambling technologies

Emphasis was placed on the need to understand more about Internet gambling, including forms that are legally available in Australia and those accessible to Australians but not regulated here. Discussions also encompassed the need to identify ways in which governments could minimise harm in the online gambling space, including the need for research that investigates the relative safety of products available online and ways to minimise harm associated with such products.

## Ease of gambling accessibility

The very high accessibility to gambling products through online platforms—including innovations in mobile technologies (e.g., through smart phones, tablets)—has generated concern within the general community. This concern was reflected in the consultations and survey responses. Online gambling products were thought to have dramatically increased accessibility to gambling for some communities, including people living in regional and remote areas who had previously had quite limited access. Respondents raised concerns that this sudden increase in access could lead to an increase in the incidence of problem gambling within these regions. For example, one survey participant described Internet gambling as a “boom industry” within the Indigenous community in South Australia, and commented that problem gambling is “very prevalent in the regional areas, as the majority of teenage and adult community members have a ‘smart’ phone, which is their only access to the Internet”. Research that considers online gambling uptake and play patterns within different regions and within groups that have traditionally had very low gambling access would increase understanding of this new phenomenon.

## Blurring of boundaries between gambling and video/online games

Several respondent discussions considered the importance of examining the blurring of boundaries between gambling and video/online games. This includes the incorporation of gambling games into video games, free smartphone and online gambling games, and the introduction of interactive features into EGM play that are traditionally associated with video games. There was interest in whether, and how, playing on these gambling simulators leads to monetised gambling, both across the community and within specific sub-groups; for example, the long-term effect of this type of gambling exposure on minors (e.g., introduction to gambling, normalisation of gambling), the potential attraction of interactive gambling features for young people, and links between interactive features and erroneous gambling beliefs.

## Exploring gambling advertising and marketing

Recent years have seen exponential growth in advertising for online gambling products in Australia. Saturation marketing techniques have led to community concern about the effects of these promotions. Concern has been particularly strong in relation to the effects on minors of gambling advertising in public spaces; for example, on television and at sporting grounds (see Hing, 2014, for a detailed discussion). This widespread concern was mirrored in survey responses and consultation discussions with all stakeholders, with the exception of those from the gambling industry.

There was a strong consensus for research to examine the effects of saturation advertising techniques and the potential for this marketing to normalise specific forms of gambling within the community; for example, by linking gambling to an interest in sports. In addition,

there were strong calls for research to examine the short- and longer term effects of exposure to gambling advertising and promotion on young people and children.

## Effective support and recovery for those harmed by gambling

The need for research into ways to assist those harmed by gambling was raised in many discussions. There was a major focus on the need for research to examine ways to assist those *other than* the small minority who seek formal, professional help. Topics included:

- recovery processes;
- barriers to accessing help;
- early intervention and screening;
- support for significant others; and
- evaluation of counselling, treatment and support services.

### Recovery processes

Respondents discussed the importance of research examining the recovery processes in gamblers. The need to examine help-seeking and recovery pathways as a national priority was similarly highly endorsed across most sectors in the survey. This included examination of self-help strategies in terms of who uses self-help strategies, the types of strategies used, when they are used, whether they are effective, and what could support self-help.

### Barriers to accessing help

Stigmatisation, “self-loathing” and “pathologising” were identified as being significant barriers to problem gamblers and their families seeking help. Research to inform the development of interventions to change community attitudes in this respect was suggested. Barriers to accessing help and support, including stigmatisation, have been examined in prior research. Better communication of these findings would be of assistance to ensure that future research extends rather than replicates existing knowledge.

### Early intervention and screening

Barriers to gambling help-seeking also means that people may present at, or interact with, non-gambling support services for related issues. This may include primary care services (e.g., emergency departments, GPs, police), community health services, and other specialist services (e.g., financial counselling, alcohol/drug services, mental health services). Researcher respondents indicated that research linked to screening and early intervention initiatives within these allied services could improve service delivery and support by informing on allied service use by those harmed by gambling. Survey respondents from most sectors similarly showed strong support for research into alternative service delivery models.

### Support for significant others

Survey and face-to-face respondents, particularly those from help services, highlighted a need for research exploring treatment and support options for the families of those harmed by gambling. Very little is currently known about the support needs of family members or whether existing options are effective.



## Evaluation of counselling, treatment and support services

Finally, stakeholders supported the need for systematic and objective evaluations of the effectiveness of help and recovery initiatives that are in place. This is an important consideration, particularly in terms of the effectiveness of new support initiatives such as telephone and online support, where very limited research exists.

## Improving research design and methodology

Various stakeholders talked about the importance of addressing research design and methodology issues, and increasing the policy relevance of research to strengthen its applicability. Key issues included:

- measurement of gambling involvement;
- standards of evidence;
- longitudinal research; and
- research to inform policy.

## Measurement of gambling involvement

The need for reliable and valid scales of gambling involvement was strongly endorsed by government and industry respondents. One researcher stakeholder meeting raised the issue of measurement accuracy, noting that responses can be affected by stigma and response error. An industry stakeholder argued for problem gambling measures that account for the Australian context.

Related to the need to better understand gambling harms, other stakeholders discussed the need to broaden the scope of harms measured; for example, to include interactions with the criminal justice system, stigma, and suicide attempts. An industry stakeholder also suggested investigating whether there was a natural population baseline for gambling problems below which rates were unlikely to fall.

Further, respondents discussed the need for the development of core items and scales for consistent use across Australian studies. It was suggested that this would result in uniform data, allow cross-study comparisons and cross-validation of findings, and assist in articulating root causes of gambling issues (e.g., differences in gambling that may be attributable to differing regional environments). Consistency in items was considered to be particularly important for larger Australian studies (e.g., prevalence and longitudinal surveys). Questions nominated for inclusion concerned frequency and type of gambling, and measurement of gambling issues.

## Standards of evidence

There was broad support for large, well-funded and scientifically rigorous research. Stakeholders discussed the need for clear articulation of the research standards required to construct an evidence base to inform good policy development. This was a response to concerns expressed by several participants about the risk of: (a) research that is insufficiently rigorous being used to underpin policy development; and (b) academically rigorous research being deemed inappropriate or insufficient to guide policy decision-making.

## Longitudinal research

There was support for Australian-based longitudinal research on gambling. This type of research was acknowledged to be expensive but important. Longitudinal studies can examine

change over time in gambling behaviour and risk, as well as relationships between various risk and protective factors and the development of, or recovery from, gambling-related issues. Emergent international and Australian-based longitudinal research suggests there may be greater instability in the severity of gambling issues over time for those experiencing low and moderate levels of problems compared to those experiencing severe issues or no gambling issues (Billi, Stone, Marden, & Yeung, 2014; Romild, 2014). It was suggested that these groups should be studied over time to determine potential causes of behaviour change and inform on harm-reduction and prevention interventions.

Some groups discussed the need for longitudinal research to gauge and describe any harms experienced over time by family members of problem gamblers. Further, some government respondents linked research focused on the local environment with a longitudinal design:

Localised, place-based studies of problem gambling prevalence and the impacts on health will assist councils [to] understand gambling risk and harm at the local level. Studies that look at prevalence and impacts on particular populations over time (e.g., a longitudinal study) will also help to understand the experiences of gambling and broader impacts.

It should be noted, however, that there are significant challenges associated with longitudinal designs that rely on identifying and retaining people presenting with low prevalence concerns (as is the case with problem gamblers, who make up a small proportion of the population). These issues are likely to be further exacerbated where the recruitment pool is located in a small, geographically restricted site. Sampling or data analytic strategies to overcome these issues would be important.

## Research to inform policy

Government policy makers discussed the importance of linking research to policy. Discussions identified that policy-relevant considerations need to be built into the research design and into dissemination efforts to increase the policy reach of findings. For example, government stakeholders discussed the need for researchers to more clearly explain the policy implications and recommendations of findings. Related to this was a request that the means by which findings can be translated into practical programs be clearly articulated within research. Discussions also suggested that more targeted communication of findings might be necessary if research recommendations relate to policy areas beyond gambling. It was noted that the ability of a researcher to do this would be limited if those funding the research placed restrictions on publishing the findings or implications based on the findings.

Some policy makers and regulators also noted that legislation tends to be fairly inflexible by its nature, and that it would more difficult to enact policy change in some instances; specifically, where:

- research recommendations relate to a need to amend stable environmental arrangements (e.g., number, size, location of venues); and
- findings suggest a need for tailored or nuanced responses (e.g., recommendations relating to venue design or location depending on specific environmental contexts, or findings that suggest a need to protect a particularly vulnerable group within a community).

If research findings suggest a major change to the environmental context, any actions would require careful consideration of the implications for all concerned stakeholders. Piloting of changes to determine their relative effectiveness may be required prior to a widespread roll-out.

Finally, policy and regulator discussants emphasised the importance of researchers acknowledging how and when findings may be dependent on a particular environmental context (e.g., accessibility to gambling opportunities, regulatory environment). Findings may not generalise to other regions with different environmental constraints. Conversely, stakeholders noted that research findings from one region could potentially inform on the need for more uniform rules and regulations across states and territories; that is, best practice regulation across the Australian environment.

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## Summary and implications

The national research priorities presented here were derived from extensive consultation with major gambling stakeholders from around Australia and with international gambling experts. The research priorities identified should not be seen as exhaustive, but are intended to drive the development of knowledge in areas recognised to be of immediate and long-term importance to the health and wellbeing of all Australians who gamble or are affected by gambling.



Figure 1: Gambling research priorities

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## Appendix

Survey respondents rated each of 11 identified research areas in terms of: (a) relevance to their personal work; and (b) national importance.

### *Relevance to personal work*

As illustrated in Table 1, the research areas that were most strongly endorsed in terms of relevance to personal work related to:

- evaluation of harm-minimisation measures;
- investigation of problem gambling in relation to vulnerable groups (e.g., youth, CALD, Indigenous, disabled, regional);
- investigation of problem gambling in relation to families;
- investigation of help-seeking and recovery pathways, including self-help and informal help (e.g., social support); and
- investigation of the role of the environment on gambling patterns, including advertising and interactive gambling.

**Table 1: Participants' endorsement of proposed research themes as relevant to their work (rated quite or very relevant)**

	All sectors		Research sector		Government sector		Services sector		Industry sector	
	<i>N</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Evaluation of harm-minimisation measures	147	85	18	75	26	90	80	88	14	78
Vulnerable groups	131	75	22	96	27	93	78	87	10	59
Problem gambling in relation to families	124	71	14	58	21	72	70	77	10	59
Help-seeking and recovery pathways	124	71	15	63	16	55	72	79	13	72
Environmental factors	121	70	18	75	24	83	63	69	10	59
Awareness campaigns evaluation	110	63	9 <sup>a</sup>	38	19 <sup>a,b</sup>	65	62 <sup>b</sup>	68	13 <sup>a,b</sup>	77
Efficacy of counselling therapies	101	58	13 <sup>a,b</sup>	54	10 <sup>b</sup>	35	65 <sup>a</sup>	71	8 <sup>a,b</sup>	50
Product features and potential harm	101	58	11	46	21	72	52	57	12	67
Service delivery models (e.g., "no wrong door")	88	51	12	50	11	38	56	62	5	29
Validity and reliability of scales	81	47	15	63	13	45	10	59	79	49
Efficacy of pharmaceutical treatment	60	35	8 <sup>a,b</sup>	33	4 <sup>b</sup>	14	41 <sup>a</sup>	45	4 <sup>a,b</sup>	24
<b>Totals</b>	<b>162</b>		<b>24</b>		<b>29</b>		<b>91</b>		<b>18</b>	

Note: The notations <sup>a</sup> and <sup>b</sup> denote statistically significant ( $p < .05$ ) differences between two or more sectors in their endorsement of a research theme. To test for statistically significant differences between sectors, cross tabs with z-tests were conducted. Sectors that were found to be statistically different from one another are noted by displaying a different letter (e.g., Researchers <sup>a</sup> and Services <sup>b</sup>). A Bonferroni correction was applied to the z-test to adjust for the number of comparisons conducted (Pallant, 2007). Some group sizes were relatively small, so findings in relation to these groups should be treated with some caution.

An examination of the responses of different sectors suggested that there was general consensus among participants across the sectors in terms of the relative personal relevance of research themes to their work. Some minor differences were apparent. Industry participants were proportionally less likely than other groups to report that research involving vulnerable groups, environmental factors and service delivery models was relevant to their personal

work, but they were more likely to think that research investigating help-seeking and recovery pathways was relevant to them. Practitioner groups were somewhat more likely to report that research investigating help-seeking, family effects, awareness campaigns and the efficacy of pharmaceutical or counselling therapies would be relevant to their work, compared to other groups. Government representatives were particularly strong in their personal endorsement of research involving families, but proportionally less likely to see the personal relevance of research examining treatments (e.g., efficacy of pharmaceutical treatments, counselling therapies and service delivery models).

### *Nationally important research*

The themes considered nationally important by most participants were similar to those considered important to personal work, with more consensus than disparity across groups. As Table 2 shows, the five themes endorsed by the greatest proportion of participants were:

- evaluation of harm-minimisation measures;
- investigation of problem gambling in relation to vulnerable groups (e.g., youth, CALD, Indigenous, disabled, regional);
- investigation of the role of the environment on gambling patterns, including advertising and interactive gambling;
- evaluation of the effects of product features and their potential harm; and
- investigation of help-seeking and recovery pathways, including self-help and informal help (e.g., social support).

**Table 2: Participants' endorsement of proposed research themes as nationally important (rated quite or very important)**

	All sectors		Research sector		Government sector		Services sector		Industry sector	
	<i>N</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Evaluation of harm-minimisation measures	153	88	20	87	27	93	83	92	16	94
Vulnerable groups	146	84	19	95	20	91	60	86	10	71
Environmental factors	144	83	19	83	26	90	80	89	11	65
Product features and potential harm	143	82	18 <sup>a,b</sup>	78	29 <sup>c</sup>	100	80 <sup>b,c</sup>	89	9 <sup>a</sup>	53
Help-seeking and recovery pathways	140	81	16	67	22	76	79	88	15	88
Problem gambling in relation to families	138	79	16	70	24	83	79	88	11	65
Awareness campaigns evaluation	135	78	14 <sup>a</sup>	61	21 <sup>a,b</sup>	72	79 <sup>b</sup>	88	14 <sup>a,b</sup>	82
Efficacy of counselling therapies	131	75	15	65	22	76	76	84	11	65
Service delivery models (e.g., "no wrong door")	121	70	16 <sup>a,b</sup>	70	20 <sup>a,b</sup>	69	71 <sup>b</sup>	79	8 <sup>a</sup>	47
Validity and reliability of scales	116	67	14	61	21	72	61	68	13	77
Efficacy of pharmaceutical treatment	89	51	8	35	16	55	54	60	6	35
<b>Totals</b>	<b>162</b>		<b>24</b>		<b>29</b>		<b>91</b>		<b>18</b>	

Note: The notations <sup>a</sup>, <sup>b</sup> and <sup>c</sup> denote statistically significant ( $p < .05$ ) differences between two or more sectors in their endorsement of a research theme. To test for statistically significant differences between sectors, cross tabs with z-tests were conducted. Sectors that were found to be statistically different from one another are noted by displaying a different letter (e.g., Researchers <sup>a</sup> and Services <sup>b</sup>). A Bonferroni correction was applied to the z-test to adjust for the number of comparisons conducted (Pallant, 2007). Some group sizes were relatively small, so findings in relation to these groups should be treated with some caution.

Generally, the findings suggest that research with a general public health focus is considered important at a national level by all gambling profession sectors. Industry respondents were proportionally less likely to endorse as national priorities research investigating the potential harms that may be related to particular product or environmental factors, service delivery models, or the efficacy of pharmaceutical treatments. Service sector respondents tended to be stronger in their endorsement as national priorities of research investigating the effects of gambling on families and evaluating awareness campaigns and counselling therapies, compared to other groups. Research respondents were somewhat less likely to consider research into help-seeking and recovery pathways, the efficacy of pharmaceutical treatments or awareness campaigns as national priorities, compared to some other groups. The clearest disparity was in terms of research investigating the potential harms associated with product features, with 100% of government representatives considering this to be nationally relevant, compared to only 53% of industry representatives.

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Suggested citation: Thomas, A., Vasiliadis, S., & Deblaquiere, J. (2015). *Australian gambling research priorities: Summary findings from consultations conducted by the Australian Gambling Research Centre*. Melbourne: Australian Institute of Family Studies.



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Internet: <[www.aifs.gov.au](http://www.aifs.gov.au)>

ISBN 978-1-76016-005-0 (PDF);  
ISBN 978-1-76016-006-7 (online);  
ISBN 978-1-76016-007-4 (EPUB)



