GAMBLING TRENDS, HARMS AND RESPONSES:

IRELAND IN AN INTERNATIONAL CONTEXT

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About this report

This report summarises a one-year research consultancy project funded by the Gambling Awareness Trust (GAT). GAT was established as a charity in 2019 to fund research, education and treatment services to help minimise gambling related harms in Ireland. It has received funding from the gambling industry. See https://gamblingawarenesstrust.ie/

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Executive Summary

- Almost two thirds of Irish people participate in some form of gambling. The most popular types of commercial gambling in Ireland are (in order): playing the national lottery and buying scratch cards, sports betting (in a betting shop or online) and betting at a horse or greyhound racing track (NACDA, 2018). New forms of online gambling and gaming are emerging in Ireland and internationally.
- 2. Traditionally betting was mostly done by men in their twenties and thirties in physical locations. Today men, women and youths under 18 are betting, and online betting is the fastest growing type of gambling (NACDA, 2018). The 'gamblification of sport' has become a major issue in many countries and has resulted in significant numbers of young males experiencing problem gambling in Ireland and around the world (McGee, 2020).
- 3. The gambling industry in Ireland is growing in revenue terms and the state benefits from this. Revenues accrued from the state betting tax suggest an online and offline betting industry alone in Ireland worth €4.75 billion in 2019. When one adds in the National Lottery and other forms of legal gambling, the value of the Irish gambling market annually is estimated at between €6 to €8 billion (Department of Justice and Equality, 2019).
- 4. The commercial betting and gaming industry in Ireland and globally is consolidating, and revenue growth is increasingly driven by online products. Online revenues have grown during the COVID lockdown as people moved from offline to online betting platforms. Many of the largest companies operating in Ireland offer international services and are publicly listed companies.
- 5. The National Lottery in Ireland was privatised and Premier Lotteries Ireland DAC was awarded a 20-year license by the Irish Government in November 2014. Buying or gifting scratch cards is common, and individuals can also play the lottery online. It is unclear how much the National Lottery is allowed to spend on marketing and advertising. 65% of gross gaming revenue goes to a 'good causes' competition each year. An independent regulator oversees the running of the National Lottery.
- 6. Casinos are illegal in Ireland. Since the early 2000s, however, 'private member club' casinos have opened in the major cities around Ireland. There are currently 36 of these in operation (Department of Justice and Equality, 2019).
- 7. The liberal attitude towards the gambling industry and gambling behaviour in Ireland, combined with the social stigma attached to problem gambling, has allowed for a number of harmful gambling practices to develop. The state is largely absent from population wide responses to harmful gambling. The repeated failure to update Ireland's legislative base on gambling marks it out from peer countries in the European Union and beyond. This absence is especially marked in the online gambling sphere and in relation to private casinos.
- 8. The gambling licensing regime in Ireland evolved in an ad hoc and patchwork fashion. It is difficult to assess the degree to which there is monitoring or oversight of licensing across all sub-sectors of the industry but the evidence in relation to gaming, lotteries and casinos in particular points to significant variation by county. New legislation was enacted on 1

December 2020 to update the licensing of small scale (largely localised) gaming and lotteries. While this was a welcome development, the bulk of the needed legislation has not yet been enacted and Ireland still does not have an independent regulator for gambling.

- 9. Online gambling services offered by some commercial companies are currently regulated by the Malta Gaming Authority (MGA) in Malta. This 'outsourcing' of licensing responsibility is reflective of an Irish regulatory system that is largely an 'analogue' one operating in a new digital age. Other European jurisdictions such as Norway have successfully changed their regulation of online 'offshore' entities and offer an example for Ireland to emulate.
- 10. In terms of public policy, gambling is a cross-departmental issue, encompassing roles for the Department of Justice, Health, Education, Tourism, Culture, Arts, Gaeltacht, Sport and Media and the Department of Finance. To date, most of the responsibility for gambling has been left to the Department of Justice. The prevalence and impacts of harmful gambling means that there should be a meaningful role for the Department of Health in relation to treatment and public education. The regulation of gambling advertising and related content falls within the remit of the Department for Tourism, Culture, Arts, Gaeltacht, Sport and Media and the new Media Commission.
- 11. The Conceptual Framework of Harmful Gambling (Abbott et al. 2018) identifies four gambling-specific factors (gambling environment, exposure, types and resources) and four general factors (social, cultural, psychological and biological) that should be considered in public or population wide responses to gambling harms. This report adopts this framework for understanding gambling harms and responses.
- 12. The terms 'problem gambling' and 'gambling problem' are used by many service providers in Ireland to avoid stigmatising their clients. Some clinical settings use the term 'gambling addiction'. The American Psychiatric Association in the United States reclassified gambling problems as 'gambling disorder' in DSM-5 in 2013, and it shares many features of substance addictions. European classifications published by the World Health Organisation (ICD-100) currently use the term 'pathological gambling'. The College of Psychiatrists of Ireland published a position paper on Gambling Disorder in 2020.
- 13. There is no single gambling diagnostic tool used by service providers in Ireland. The DSM-5 questionnaire is commonly used in diagnostic and health settings to identify and screen gambling disorder. The Problem Gambling Severity Index (PGSI) is often used with a general population as a screening tool.
- 14. There is very little data on the prevalence of problem gambling in Ireland and no regular national survey. This makes Ireland an outlier internationally, as many countries conduct annual studies. The latest available data suggests there is a prevalence rate of 0.8% and is based on a survey conducted in 2015. That would suggest that somewhere between 40,000-50,000 Irish people might be considered problem gamblers. Prevalence surveys provide data on the numbers of individual problem gamblers within a society, but less information on the wider social impacts of gambling.
- 15. International research demonstrates that for every single person identified with 'gambling disorder', up to 6 other people are impacted significantly (House of Lords, 2020). Langhan et

al. (2015) identify at least 8 different harms, ranging from financial and relationship to long term life course impacts. There is an urgent need to research and understand gambling in Ireland as a social, cultural and public policy issue. Many who develop gambling related problems do not bring them to the attention of others due to social stigma and the potential professional and private impacts.

- 16. H2 Gambling Capital (The Economist, 2017) reports that Ireland had the third-highest per capita rate of gambling losses in the world (after Australia and Singapore). As a country, gambling losses totalled \$2.2 billion US dollars with half coming from online gambling (The Economist, 2017).
- 17. A small number of academics, journalists and former gamblers in Ireland have documented some of the financial, mental, physical and criminal harms resulting from gambling for Irish people and their communities. Prominent sportspeople like GAA star Oisin McConville have told their stories of addiction and, in doing so, sought to educate the public about the toll that harmful gambling can take. These accounts provide harrowing stories and insights into the failure of existing responses to gambling harms.
- 18. The government should follow other international jurisdictions and institute a 'Harm Assessment Group' made up of relevant national and international health, social and legal experts to advise on responses to harmful gambling in Ireland. Our research suggests the best model for such an expert group can be found in Finland. An annual all-island conference for stakeholders around sharing best practice knowledge, research and experience with treatments across all sectors would be welcome and could be incorporated into the government's 'Shared Island' initiative.
- 19. The relationship between the media, professional sport, and gambling is deepening in Ireland and some commentators argue that the 'gamblification' of sport is a threat to its integrity. Recently the Irish Horserace Regulatory Board (IHRB) found evidence of suspicious betting activity following the suspected doping of a horse prior to a race in Tramore in Oct., 2018 and "irregular" patterns of betting activity have been identified around League of Ireland soccer matches. Some League of Ireland teams take sponsorship from betting companies.
- 20. Exposure to gambling marketing and advertising has grown rapidly in Ireland on all platforms but especially in the online sphere. Irish people are highly exposed to gambling promotion through the widespread availability of UK media in Irish homes. The National Lottery is also a significant advertiser on national media. Some sports have been associated with 'saturation' advertising of gambling products on television and social media, and research indicates that this has impacted most significantly on young men between the ages of 15 and 24. Research by Goldsmiths University recently found gambling logos or branding were visible on screen for between 71% and 89% of the BBC's flagship Match of the Day programmes, despite the fact that the BBC does not carry advertising. It is imperative that the regulatory system acknowledges the high levels of exposure to UK based gambling advertising and promotion and the growth of online gambling promotion more generally.

- 21. Many countries, and some industry operators, are introducing limits on the advertising and marketing of gambling across all forms of media. The current laissez-faire, largely self-regulatory approach to gambling marketing in Ireland is simply not sufficient, however, to prevent harms. An increasing body of international evidence suggests that robust independent regulation is required and that a *coercive rather* than a *persuasive* approach is more likely to reduce gambling harms.
- 22. An increasing number of peer countries have banned the sponsorship of sports teams by gambling companies. Some countries have also limited or prohibited 'in play' gambling promotions and/or instituted 'whistle to whistle' bans on gambling advertising during games. Italy has gone furthest in instituting a blanket prohibition on gambling advertising and sponsorships of sport. Ireland should follow the lead of other jurisdictions by, at the very least, developing explicit limitations on the hours and target audiences to which gambling advertisements can be shown on broadcast and online media. The state should also invest in gambling literacy and public health awareness campaigns.
- 23. Community organisations like the Gaelic Athletic Association (GAA) have introduced a prohibition on sponsorship from gambling companies and run gambling awareness workshops in every county on the island. These are based on similar athlete programmes in the UK and Australia. The Gaelic Players Association (GPA) also provides education and counselling workshops on gambling to almost 2,000 intercounty players.
- 24. Private gambling service operators and the National Lottery must display 'safe' or responsible gambling' policies and logos under their license conditions and under industry guidelines. Some betting companies have developed significant corporate social responsibility divisions and offer technological and financial solutions to limit individual gambling spending and losses. It is difficult to independently assess how effective these are as a response when offered on a company-by-company basis. We do not know how widespread such interventions are across all sub-sectors of the industry in Ireland but one evaluation of responsibility policies and tools on Irish websites found significant shortcomings (Cooney et al., 2018). Other research points to the ease with which gamblers can use multiple accounts to get around the industry's voluntary self-exclusion schemes.
- 25. A new regulatory regime in Ireland should follow the lead of other jurisdictions in insisting that gambling companies operating in Ireland introduce mandatory affordability checks, a ban on the use of credit cards for gambling, a robust self-exclusion regime for customers, limits on the speed of play and stakes committed for online gambling and enhanced testing for potential harm in any new products developed by gambling operators. Gambling companies should also be required to put an end to 'loyalty' programmes, bonus offerings, VIP schemes and other products which act (even if unintentionally) to incentivise harmful gambling, especially amongst existing problem gamblers.
- 26. Ireland's public health service (i.e. HSE) does not provide specific gambling addiction services. Many professionals in the public system encounter gambling addiction via their work in general mental health services or in alcohol or drug addiction. The most common gambling support available in Ireland is counselling. Other treatments include seeing a psychiatrist or a psychologist. Most of this takes place on an out-patient basis. The National Health Service (NHS) in the UK has rolled out a number of gambling treatment centres in

2019-20. The early evidence suggests these constitute a good model for Ireland to emulate. The London centre includes an entity specifically dedicated to treating young people with severe gambling problems. Funding should be provided from the planned social fund, envisaged under Ireland's new gambling legislation, and the service should be free at the point of use for those severely impacted by gambling addiction. It will be important to roll out this service in a way that is regionally balanced.

- 27. By contrast several charities and social enterprises offer gambling specific addiction helplines and counselling services around the country. Some of these services are operated by individuals who themselves experienced extreme gambling disorder in their lives. These organisations have a variety of funding sources, including from the gambling industry. Some of these services have moved online during the COVID pandemic. Mutual support services also exist, including an Irish branch of Gamblers Anonymous.
- 28. Ireland has little formalised gambling-specific training for healthcare professionals, although some are seeking it out on an individual basis. Few of the health and counselling practitioners we interviewed in the public and private sector had gambling specific training or expertise. The lack of such gambling-specific training, and lack of access to knowledge on best practice in treatment, is a key lacunae in the Irish treatment landscape and needs to be addressed urgently.
- 29. Our research indicates there is no single 'magic bullet' treatment pathway for individuals with chronic gambling problems. Rather, a combination of therapeutic and pharmacological interventions, along with longer term supports seem to produce the best outcomes. The most promising avenues of treatment internationally seem to converge around models of Cognitive Behavioural Therapy (CBT) but because the cohort of problem gamblers is a heterogeneous one, treatment pathways necessarily need to be individualised. Treatment should only be based on international best practice and in combination with much more targeted monitoring of and interdiction of societal gambling harms. Attention also needs to be paid to treatment efficacy and relapse.
- 30. Early intervention is key but this can only succeed if the model is adequately resourced and the results evaluated regularly by government and stakeholders. Public health authorities should lead in tackling gambling harms by establishing regional clinics and treatment referrals exclusively for gambling disorder. Emerging best practice indicates these steps should be publicly resourced at the outset before funding from mandatory industry levies is utilised to support treatment structures. There is a role for the private sector and independent charities in this sphere but these need to work in tandem with the public sector rather than in isolation from it.
- 31. The state benefits financially from betting taxes and from monies dispersed by the National Lottery. However, it has yet to develop a coherent national approach to gambling harms. In its absence, private companies, community groups, charities, and families are shouldering the costs. Some gambling companies are active in education and prioritise staff training and the introduction of new social responsibility tools, but this cannot be left to companies whose existence is based on the accrual of revenues from gambling. The industry is well represented in public discourse through its trade bodies and advertising. There is a distinct lack of data on, and representation for, problem gamblers and their families, apart from (the to-date limited) research conducted by academics and clinicians. The provision of education

and information for teenagers is especially important and should be better embedded within the second level curriculum and public health communication programmes.

32. The gambling industry and the Irish state have a 'duty of care' towards those who experience gambling harms. A new levy on the industry and funding from the state should be used to fund significantly enhanced public treatment provision, education and awareness of gambling related harms, and research into harmful gambling and the efficacy of responses to such in Ireland. The industry should **not** be directly involved in funding gambling research.

1. Introduction

This report provides a summary of work conducted as part of a one-year research project funded by the Gambling Awareness Trust in Ireland and conducted in late 2019 and 2020. The core focus of the project was on 1) trends in the gambling industry and gambling behaviour 2) conceptual and empirical evidence on harmful gambling, and 3) responses to gambling harms and emerging best practice. This report is based on a state-of-the-art literature review on gambling and the findings of 20 interviews with a range of gambling stakeholders.

The commercial global and national gambling industry is growing in revenue every year and expanding from traditional forms, like betting on horse racing and greyhound racing, or playing the lottery, into less visible types, including the rapid growth of online gambling. Localised and national lockdowns related to efforts to mitigate Covid 19 have not impacted discernibly on the revenues and growth of larger betting companies, especially those that offer online services, and in fact, those have continued on a growth trajectory in Ireland according to recently released company financial reports (The Irish Times, 11 November 2020).

While the total value of the industry in Ireland is hard to establish, data from the Office of the Irish Revenue Commissioners based on betting duty (which was raised from 1% to 2% in 2019), and intermediary duty, would suggest that legal gambling revenues in Ireland were worth €4.75 billion in 2019. To this we need to add the National Lottery (now privatised but with 10% growth in sales in 2018), private member club casinos, slot machine revenues etc. Adding these streams together the total value of gambling revenues in Ireland is probably between €6 billion and €8 billion (Department of Justice and Equality, 2019). The gambling ecosystem is wider than the industry and includes all economic, social and cultural activities that are involved in and/or impacted by commercial and non-commercial gambling activities.

The negative impacts of gambling have been conceptualised internationally using different terminology and methodological frameworks. While some studies refer to gambling harms, and some to problem gambling, there is also a specific medical condition or pathology called gambling disorder. Gambling disorder can be assessed medically on a scale ranging from mild, to moderate or severe, and shares some symptoms with other disorders and addictions. Nevertheless, the academic and general literature is clear — the negative consequences of gambling are not just individual and not just a health issue. Gambling can have adverse health, financial, sporting, and criminal consequences, and it impacts individuals, families, communities and Irish society more generally. In this report we adopt the **gambling harms framework** and situate gambling addiction or disorder within this framework. This approach allows researchers and policy makers to pay attention to the social, cultural and economic impacts of gambling, as well as its individual impacts.

Our extensive literature review concluded that there has been little published academic research on the gambling ecosystem and industry, nor on gambling behaviour and its social impacts in Ireland. Fulton (2015, 2017) has conducted the most substantive research from a social scientific perspective and O'Gara from a clinical and psychiatric approach (see 2017, 2019). Other small-scale studies have been conducted by students within Irish universities, exploring, for example the landscape of betting shops and gambling by students. Beyond this there have been several newspaper articles and television programmes providing powerful personal narratives and shining a

light on the individual and social harms that can occur from gambling. But we know very little about the impact of rapidly changing technology on the dynamics of gambling behaviour in Ireland.

Ireland is almost unique in Western Europe in not conducting regular prevalence studies to track the rate of harmful or problem gambling in the population. Summary data released by the Department of Health in 2019 (NACDA, 2018) demonstrated that almost two-thirds of the population (64.5%) in Ireland engage in various forms of gambling and highlighted the urgent need for robust new regulation and measures to protect consumers. The problem gambling prevalence rate in Ireland was 0.8% according to a general survey on addiction carried out in 2015 and published in 2019 (NACDA, 2018) but many believe this is an underestimate due both to the methodology employed and significant advances in technology, industry and media in the intervening five years. This estimate, nevertheless, suggests there are approximately 37,000 problem gamblers in Ireland. Some individuals and agencies have challenged the results of this survey suggesting the rate of problem gambling might be significantly higher than reported.

Problem gambling is socially stigmatised, and as with other social stigmas, the behaviour and its impacts can remain hidden for a long period of time from friends, family members and professionals. It can directly generate harms and exacerbate other problems - including physical and mental health issues, addictions to alcohol or drugs, financial losses, relationship breakdown and both professional and reputational damage. The increasing availability and ready accessibility of online gambling services, and its increasing promotion and mediatisation on traditional and (especially) social media channels, is exacerbating the hidden nature of the problem. Further, urgent research is needed to explore how gambling companies are using online personalised advertising, and profiling of gamblers and potential gamblers, including those under 18, as part of an aggressive 'ad-tech' approach to acquiring and keeping customers.

This report contributes to expanding and updating our knowledge and understanding of gambling and gambling harms in Ireland. It provides a social scientific perspective which expands beyond individual medical and health-based responses to evaluate the wider trends, impacts and international best practice in responses to gambling harm. Further, it updates available research to capture the mediatisation of gambling across television and social media, the emergence of digital and online platforms associated with gambling and e-sports, and the emergence of corporate social responsibility responses in parts of the industry. Finally, it examines the patchwork of public, private and charity services and initiatives which are responding to the individual and social harms caused by gambling in their communities and organisations.

This report is timely given the repeated delays in enacting updated gambling legislation in Ireland and the establishment of an all-party group and inquiry on Reducing Harm Related to Gambling in Northern Ireland². In the United Kingdom a major review of gambling legislation was instituted in January 2021 and this is expected to recommend significant new regulatory measures be put in place to protect consumers against gambling harms. This comes in the wake of a recent House of Lords report which estimated that for each problem gambler, six other people are harmed by the breakup of family units, loss of employment and accommodation and criminal behaviour (House of Lords, 2020).

Germany, the Netherlands and Spain are among peer countries introducing major legislative change around online gambling regulation in 2021. Ireland, however, is unique in Western Europe in failing to date to regulate online gambling and some major companies with a significant presence in the

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¹ For insight into the individual and familial impacts of harmful gambling in the Irish context, see Oisin McConville and Ewan MacKenna (2007), *The Gambler: Oisin McConville's Story* (Mainstream Publishing) and Declan Lynch and Tony O' Reilly (2018), *Tony 10: the astonishing story of the postman who gambled €10 million and lost it* (Gill Books).

² See https://www.gamharmapg.org/ Accessed Dec. 2020.

Irish market are regulated for online gambling in Malta. In 2019 legislation from 1956 was updated in 'The Gaming and Lotteries Amendment Bill 2019' which was finally enacted on 1 December 2020. But this addresses only a small and narrowly-based part of the gambling ecosystem in Ireland and does nothing to address the societal externalities arising from online gambling. Successive governments have promised and failed to deliver substantive regulatory change. It is long past the time when the state should have addressed this issue and our report makes it clear that Ireland now lags further behind other EU states than at any time in recent decades. Recent comments from Minister of State, James Browne TD suggest we will finally see an 'onminus' gambling bill enacted in 2021 and a new regulator put in place by 'summer 2021'. It remains to be seen, however, how much power the new regulator will be able to exercise and the extent to which the legislation will tip the balance towards protecting consumers from harm. Certainly the inter-departmental report produced by the government in 2019 (intended to guide the new legislation) seems to us to lack the ambition and scope needed to decisively tackle harmful gambling in Irish society.

In our view the forthcoming regulatory framework is only one part of the required societal and public policy response to the range of social harms and risks associated with gambling. There is an urgent need for a coordinated response across public and private spheres, government departments and agencies which brings together stakeholders in health, education, research, regulation and enforcement. At present there is a poor evidence base on gambling behaviours and harms in Ireland to inform policy developments, little transparency on industry licensing or practices across all sectors, little in the way of effective publicly funded treatment pathways for those suffering from gambling disorder, poor access to adequate and continuous training on gambling harms for service providers, no publicly funded awareness campaigns on gambling harms and a lack of information on regulatory oversight and enforcement. We hope that this report will prompt further research and action in all of these areas, and that Ireland emulates peer jurisdictions in Europe which have already put robust regulatory systems in place.

³ See the interview with Minister Browne in Paul Hosford's piece in *The Irish Examiner*, (30 Dec 2020), 'Gambling regulator set to be in place by summer', https://www.irishexaminer.com/news/arid-40198392.html

1.1 Research Objectives

The primary objective of this project was to situate commercial gambling trends, harms and responses in Ireland in relation to international data and experiences and to provide a resource for stakeholders, policymakers and future researchers to better evaluate the evolving Irish landscape. We aimed to provide an overview of existing data on gambling harms and problem gambling in Ireland and gather primary data on the types of responses to gambling harms currently on offer from public, commercial and charitable bodies in Ireland. We did not engage directly with gamblers or problem gamblers.

The research aims were to:

- 1. Understand trends in the gambling industry internationally and in Ireland.
- 2. Identify the key stakeholders in the gambling ecosystem internationally and in Ireland.
- 3. Collate publicly available data on gambling types and the prevalence of problem gambling internationally and in Ireland.
- 4. Map gambling supports and services internationally and in Ireland.
- 5. Map responses to gambling harms from stakeholders internationally and in Ireland, including in the spheres of health, education, and regulation. In addition to identify emerging best practices relevant to the Irish context.
- 6. Examine the Regulation and Policy Contexts in which gambling operates in Ireland and make recommendations about addressing deficits in the Irish approach to harmful gambling.

1.2 Methodology

This project combined desk-based research with primary data collection using semi-structured interviews conducted with a range of stakeholders in Ireland. The first half of the project involved desk research examining the international knowledge base on gambling, including data on the gambling industry, gambling prevalence and gambling harms, and putting emerging trends in Ireland into a global perspective. A working paper was produced in June 2020 which provides a summary of the first stage of the project⁴.

The second stage of the project involved our research team conducting field research. This was impacted by the closure of the university and the introduction of two protracted Covid19 lockdowns. As a result all our interviews were conducted online.

Our questions focussed on collecting data about the type of gamblers seeking help and therapy, the treatment programmes and other social services available in Ireland, and the effectiveness of such programmes and services. An additional focus was on the impact of Covid-19 on gambling behaviour, gamblers and the availability of supports.

Our interviews explored seven themes:

- 1. Information about problem gambling services
- 2. A profile of clients who present to these services
- 3. Definitions and categories of problem gambling

⁴ See Vazquez Mendoza, Lucia and Kerr, Aphra and O' Brennan, John (2020) *Gambling: Identifying international trends, approaches and responses (MUSSI Working Paper Series no. 13).* Working Paper. MUSSI, Maynooth, Co. Kildare, Ireland. Open access at http://mural.maynoothuniversity.ie/13219/

- 4. Services or treatment programmes and professional training
- 5. Initial assessment and treatment
- 6. Services or treatment programme efficacy
- 7. COVID-19's impact on gambling.

We conducted a total of 20 interviews with public and private organisations providing gambling and addiction treatments, and other stakeholders including community organisations, the media, trade associations and the gambling industry (see Appendix A. 2 for the full list).

The range of interviewees are not fully representative of the range of stakeholders in this space. For example, we did not speak to other academics, or to political representatives. We spoke informally to 3 people who declined to be formally interviewed. Where possible the interview data is supplemented by information from both formal and informal public documents, media and other sources. The interviews were transcribed, hand coded and analysed by the research team.

1.3 Organisation of this report

In the next chapter we introduce and review the key types of land and online commercial gambling, different definitions and terminology and explain the different approaches to understanding gambling related harms.

This is followed by a chapter on international trends in the commercial gambling industry and international responses to gambling harms.

Chapters four and five deal specifically with commercial gambling in Ireland and how Ireland compares to international jurisdictions in tackling gambling harms. Here we draw upon our desk-based research, document analysis and interviews.

In the final chapter we summarise our findings, identify gaps in the Irish response to gambling harms and suggest possible ways forward for different stakeholders.

2 Understanding Gambling and Gambling Harms

In this chapter we introduce definitions and approaches to gambling from the academic literature internationally. We summarise some of the terminology for discussing the negative impacts of gambling that can accrue to individuals and society and we introduce the gambling harms conceptual framework.

2.1 Definitions and Types of Gambling

Games of chance have a long history and in some contexts are linked to pre-Christian divination rituals and the will of the gods. Early anthropological studies distinguish games of chance from games of skill and most gambling involves a bet or stake where gamblers have no way to influence the outcome (Culin, 1992a, 1993b). Often gambling involves a 'randomising device' such as a dice or spinning a top. In Ireland we know that there was chariot racing on the Curragh as early as the 3rd century AD and that betting on horse races was introduced by the landed gentry in the 16th and 17th century (O 'Sullivan, 2018). The development of bookmakers or intermediaries who take and hold bets also has a long history.

Betting involves placing something of value at risk and thus gambling is defined as "staking money or something of material value on an event having an uncertain outcome in the hope of winning additional money and/or material goods" (Abbott et al., 2018:3). Others define gambling as "an activity which may be summarised as involving participation in games of chance for money" (Fulton, 2015:8). Gambling often involves placing a stake on sports or games, including horse racing, dog racing, football and golf. The classic slot machine or 'one-armed bandit' was built by a San Francisco car mechanic called Charles Fey, in 1895. Prior to this there were 'penny arcades', shooting galleries and other fairground attractions. Mäyrä (2008) and Huizinga (1949) provide histories of games and play as popular cultural forms.

From the late 1960s, the first mechanical and then digital games started to appear, and the computerisation of gambling is part of this wider trend in the development of digital games (Kerr, 2006). While many digital games companies do not wish to be associated with gambling or gambling mechanics, many gambling companies use the language of play and gaming to promote their services. In the last decade free-to-play games have started to introduce randomised mechanics into their games including the introduction of what has become known as 'loot boxes'. This has led academics to start to investigate the 'gamblification' of digital games and policy makers to become increasingly concerned about these mechanics as potentially blurring the boundaries between games of skill and games of chance (Macey et al., 2019; Kerr, 2017). Others are concerned about the gamblification of sports and other games.

Table 1 presents definitions which distinguish between commercial and other forms of gambling. In commercial forms of gambling, any money lost goes to the commercial operator whereas, in non-commercial recreational gambling, money lost is usually redistributed between participants. Gaming is problematic as a term and commercial operators from the gambling and digital games industry use this term knowingly and with caution depending on their perspective. In this report we focus specifically on commercial forms of gambling and forms of gaming that overlap with, or could be construed as, gambling.

Table 1: Forms of Gambling

CATEGORY Commercial Gambling Recreational Gambling Private Gambling Illegal Gambling Gaming

DEFINITION

This term refers to a formalised, regulated style of gambling that includes a variety of gambling types such as casinos, video lottery terminals, lottery tickets, horse racing, and legal sports betting, among others. The relationship between gambling provider and gamblers is unequal as the gambler usually loses money to the provider (Abbott et al., 2018).

This term refers to gambling as a recreational, leisure and social entertainment activity usually occurring in low-risk settings and/or controlled situations and involves the redistribution of money between participants (Abbott et al., 2018). Some researchers discuss positive aspects of recreational gambling (Per, 2013; Hilbrecht and Mock, 2019).

This term includes betting with friends. This type of gambling takes place in informal social settings, and the group members redistribute the money among all of them (Abbott et al., 2018).

This refers to gambling activities not constrained by laws or regulation to pay winners or to collect debts through legitimate avenues. The relationship between illegal operators and gamblers is unequal (Abbott et al., 2018).

The term gaming is sometimes used in the literature to refer to gambling activities, but they are not the same thing. Gaming refers to videogames only. Though gamblers achieve gambling outcomes by chance, gaming outcomes usually require skills and strategy. The development of games on social media platforms has blurred the line between gambling and gaming. Some games include elements of gambling (e.g., 'skin gambling', 'loot boxes' and gambling simulations), while some forms of gambling have adopted game-like elements (e.g., skill-based slot machines and arcade casino games) (Abbott et al., 2018).

Today commercial gambling refers to a diversity of gambling types from land-based or offline betting, lotteries, and casino games to new online forms, as shown in Table 2. In Ireland land-based gambling involving sports, bingo halls and amusement arcades are the most common and this influences the types of online or internet-based gambling that has emerged to date. Betting on the outcome of elections or other events is also quite common.⁵

⁵ More than £1.8 billion was bet on the US Presidential Election of 2020 with Betfair, the largest amount ever recorded for a political contest.

Table 2: Forms of Commercial Gambling

Type of Commercial Gambling

LAND-BASED GAMBLING

CASINO GAMES

- Slot machines
- Blackjack games
- Poker games
- Roulette
- Keno
- Craps
- Baccarat
- Other casino games

TRADITIONAL BETTING

- Sport betting using bookmaker shops
- Horse or dog betting on racecourses
- Any other type of betting in betting shops

NUMBER GAMES

- Lotteries
- Instant lotteries or
- "scratch-off" games
- Raffles
- Bingo
- The lotto

INTERNET GAMBLING

ONLINE CASINO GAMES

- Online Casino games*
- Online slots
- Online blackjack games
- Online poker
- Online roulette
- Other casino-style games**
- *Casino games on social media platforms, also known as social casino games, are not necessarily a form of gambling, and thus, not included in this category.
- **The range of online casino games is wider than land-based casino games.

ONLINE BETTING*

- Online sport betting using traditional bookmaker's websites or other websites
- Online betting on horse or dog racing via Internet
- Fantasy sports betting
- Spread betting (including on sports and financial markets)
- * Online betting takes place on the internet, and it is characterised by several popular features such as 'in-play' gambling (which allow a client to bet while the event is in progress) and 'cash-out' (which enable users to get their money back before the event is over).

ONLINE NUMBER GAMES

- Lotteries
- Instant lotteries
- Raffles
- Bingo
- The lotto

Understanding the diversity of forms and types of gambling is necessary to understand the social and cultural contexts of gambling and related problems, according to Abbott et al. (2004). This is important because there is some evidence associating specific types of gambling activities more closely with gambling-related problems (i.e., internet gambling, betting on sports and horse races, slots and Video Lottery Terminals (VLTs)) (Holtgraves, 2009). Further, different types and forms of gambling may be preferred by different demographic groups (Abbott et al., 2004).

2.2. Understanding the Negative Impacts of Gambling

Researchers have approached the negative impacts of gambling in different ways depending on their discipline. Medical researchers and professionals, and especially those coming from a psychological or psychiatric approach, focus on the individual and their biological, mental and physical well-being. This approach tends to focus on assessing symptoms and the individual. However other disciplines

and professionals take a broader perspective and include the influence of social, cultural, and environmental factors on gambling patterns and, in turn, how gambling harms or impacts society.

'Problem gambling' is the most common term used in the academic literature to capture the negative impacts of gambling (Abbott et al., 2004; Ajdahi and Wolgast, 2014; Bernhard, 2007; Blaszczynski and Nower, 2002; Calado and Griffiths, 2016; Fulton, 2017; Griffiths, 2009; Hing et al., 2016a; Hing et al., 2016b; Holtgraves, 2009; Khanbhai et al., 2017; Meyer et al., 2009; Murphy, 2019; Nower et al., 2015; Sharpe, 2002; Williams, 2012; Zangeneh and Haydon, 2004). Problem gambling is not a medical term, but health practitioners and researchers often use this term interchangeably with pathological, disordered or addictive gambling to describe gambling behaviours associated with health problems.

For example, Professor Colin O'Gara opens his book, *Gambling Addiction in Ireland* (2019) by stating that the past decade has seen a distinct increase in the numbers presenting for the treatment of 'problem gambling' at the addiction clinic that he heads at St John of God Hospital in Dublin. Diagnosis of gambling problems involves scoring individuals using a screening tool (essentially a set of questions agreed upon by the American Psychiatric Association or other medical or research-based organisation) and rating the patient's symptoms on a scale from mild through to severe. An appropriate treatment plan is then put in place for the patient. Patients are referred to his clinic by general practitioners.

An Ontario based Gambling Research Centre in Canada employs the term 'harmful gambling' and has published 'A Conceptual Framework of Harmful Gambling' with inputs from an international panel of experts (Abbott et al., 2018). Using the term 'harm' aligns with risk-based approaches to policy-making and is common, for example, in internet-based and online research and policies. The resulting framework attempts to capture a broad range of harms, including financial, physical and mental health issues, and addiction, and considers the gambling environment and exposure/availability of gambling as well as general factors including cultural, social, psychological and biological. They note that attitudes and access to gambling varies from context to context.

Some studies undertaken in Australia and New Zealand have also adopted the harmful gambling approach. For example, New Zealand's 2003 Gambling Act understands gambling harm to include "any kind of harm or distress arising from, or exacerbated by, a person's gambling" (Langham et al. 2016:2). In this study, the authors differentiate between general, crisis and legacy harms and include, for example phenomena such as cultural shame, reduced connections to ethnic kin and the cultural community, loss of employment and a reliance on social welfare. Table 3 summarises these approaches and terms. These heterogeneous terms capture different dimensions, different types of harms and different levels of severity of gambling disorder.

Table 3: Terms used to Understand Negative Gambling Impacts

CONCEPT DEFINITION HARMFUL GAMBLING This term refers to "any type of repetitive gambling that a person engages in that leads to recurring negative consequences, such as significant financial problems, addiction, or physical and mental health issues" (Abbott et al., 2018:4). The authors also consider that the gambler's family, social network, and community may also experience adverse effects. Harmful gambling behaviour is independent of an individual's gambling status as well as the severity, frequency or intensity of gambling (Abbott et al., 2018: 6). Problem gambling is used to "indicate situations where gambling has PROBLEM GAMBLING become problematic for the gambler, that is the gambler has control issues with gambling and there have been negative consequences as a result of this gambling behaviour" (Fulton, 2015:12). The term is not restricted to health problems but also might include social, cultural and financial consequences and relational conflicts (Langham et al., 2015). The Canadian Consortium for Gambling Research defines problem gambling as "gambling behaviour that creates negative consequences for the gambler, others in his or her social network, or for the community" (cited by Ferris and Wynne, 2001: 8). PATHOLOGICAL The Diagnostic and Statistical Manual of Mental Disorders (DSM-4) GAMBLING defined pathological gambling as an impulsive-control disorder, where the sudden loss of control caused damage and disruption to an individual's social networks (Clark, 2014). GAMBLING DISORDER The fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) reclassified pathological gambling into an addiction and subsequently changed the name to "Gambling Disorder" (Reilly and Smith, 2014). The College of Psychiatrists of Ireland (2020) also employs this term. Other related terms include: "gambling addiction" or "compulsive gambling." The reason behind the change was the growing evidence that problem gambling shares common elements with substance use disorders (Clark, 2014; Reilly and Smith, 2014).

The term 'harmful gambling' includes pathological gambling, gambling disorder and addiction but goes beyond such to include other dimensions. It pivots away from a focus on symptoms and the individual's ability to control their impulses. Importantly, it also moves us away from what might be stigmatising language or terminology, as discussed recently by Blaszczynski et al. (2020). In this publication, the authors note that the behaviour of those with gambling disorder are perceived as core traits of the individual and may be viewed as arising from fundamental character or moral weakness, lack of self-control, and/or self-centeredness. The authors recommend the following terms be avoided: problem gambler', 'disordered gambler', 'disordered gambling', 'pathological gambler', or 'pathological gambling', 'addicted gambler', 'impaired gambler', 'compulsive gambler', or

'self-excluded gambler'. Social stigma can adversely affect the sufferer and crucially reduce the readiness of a sufferer to disclose the problem and seek treatment.

Our research team works within the social sciences and brings to bear perspectives from Sociology, Anthropology, Public Policy and Governance. As such our interests and approach to the negative impacts of gambling align better with the literature and approaches on gambling harms and the societal and public policy perspective of these harms. We are concerned about those who are not presenting for treatment but who may still be suffering negative consequences. We are concerned that certain demographic groups may be underrepresented in the current research including women, children, ethnic minorities and people from lower socio-economic backgrounds. Of course, the health or clinical perspective fits within the conceptualisation of harmful gambling and is a crucial part of any set of responses. However, we would suggest that this is far from sufficient to understand the range of harms we need to consider and in order to formulate an adequate public response.

2.3 Factors contributing to gambling harms

There are many people who do not gamble, and many gamblers can engage in recreational gambling with no apparent harm. However, of those who experience harms, there are at least three levels to consider: those who experience mild, moderate or chronic harms. Those who experience mild to chronic harms can be problem gamblers, but those who experience chronic harms are also considered to be suffering from a gambling disorder or addiction. As Griffiths (2015) has noted, 'gambling addiction' and 'problem gambling' are not the same: "all gambling addicts are problem gamblers but not all problem gamblers are gambling addicts" (Griffiths, 2015:37).

Problem gambling is a multi-faceted phenomenon, with a complexity of factors driving this behaviour (Griffiths et al., 2009). Further, the pathways into problem gambling can vary significantly and produce different gambling activities (Holtgraves, 2009). Abbott et al. (2018) have developed a 'Conceptual Framework of Harmful Gambling' which is now in its third edition. They classified the key factors into four gambling-specific factors (environment, exposure, types and resources) and four general factors (social, cultural, psychological and biological) with several sub-factors as outlined in Table 4. This framework provides a comprehensive approach towards understanding the range of factors that we need to consider in any meaningful public response to gambling harms.

Table 4: Conceptual Framework of Harmful Gambling

GAMBLING SPECIFIC FACTORS

Gambling Environment can affect the nature and frequency of gambling activity, and the degree of gambling-related harm that results.

Gambling Exposure is a prerequisite for harmful gambling since no gambling would occur without the opportunity to do so.

Gambling Types refers to various forms of gambling, which may have different potential to cause harm.

Gambling Resources available to the individual that can prevent or reduce harm.

GENERAL FACTORS

Cultural Factors have an impact on gambling prevalence, the popularity of various gambling forms, attitudes towards gambling, and gambling practices.

Social Factors encompass both interactions among people and their collective co-existence, shape how commercial gambling is made available and how others perceive people who develop difficulties. It also influences attitudes and beliefs about different types of gambling and best practices for treatment.

Psychological Factors include individual characteristics that might affect gambling.

Biological Factors may help explain why some people and not others engage in harmful gambling.

- 1.1 Economic variables
- 1.2 Socio-Political environment
- 1.3 Public policy
- 1.4 Culture of social responsibility
- 1.5 Gambling setting
- 1.6 Accessibility
- 1.7 Adaptation
- 1.8 Marketing and Messaging.
- 1.9 Convergence of gaming and gambling
- 1.10 Structural Characteristics
- 1.11 Motivational characteristics
- 1.12 Service access and use
- 1.13 Harm reduction and prevention
- 1.14 Risk Assessment
- 1.15 Interventions
- 2.1 Ethnicity and traditions
- 2.2 Indigenous peoples.
- 2.3 Socio-cultural attitudes
- 2.4 Religion and other beliefs
- 2.5 Gambling cultures
- 2.6 Gender
- 2.7 Social Demographics
- 2.8 Family and peer gambling involvement
- 2.9 Educations system
- 2.10 Neighbourhood
- 2.11 Stigmatization
- 2.12 Deviance
- 2.13 Personality and temperament
- 2.14 Coping styles, including biology & social environment
- 2.15 Self-perceptions shape personal features
- 2.16 Social learning
- 2.17 Lifespan Development
- 2.18 Comorbid disorders
- 2.19 Subjective well-being
- 2.20 Adverse childhood experiences
- 2.21 Judgment and Decision-making
- 2.22 Genetic Inheritance
- 2.23 Neurobiology

Source: Based on Abbott et al. (2018:6-7)

Table 5 lists eight types of gambling-related harms identified in Langham et al.'s (2015) study. Evidence from a wide range of jurisdictions shows that the most prevalent negative consequence of engaging in gambling activities is financial harm. Langham et al. (2015) identify three levels of financial harm ranging from immediate losses, to seeking to generate extra funds to cover losses to an inability to meet essential living expenses.

Other harms include: the disruption and breakdown of relationships with partners, family, friends and the broader community; psychological harms including social isolation, shame, stigma; health and wellbeing harms, cultural harms including on ones' beliefs and practices; work/study harms; criminality and life course or intergenerational harms and losses.

Table 5: A Taxonomy of Gambling Related Harms

CATEGORY DEFINITION Financial Harms This category includes different levels of financial harm such as 1) immediate monetary loss, 2) fund generation and debt generation, to 3) unable to meet essential expenditure which can have immediate and non-immediate consequences. **Relationship Conflict** The gambling-related harms affect the relationship between gamblers and their family, friends and community mainly in two dimensions, loss of time and loss of trust. Psychological Distress Gamblers and affected others report emotional and psychological distress from the inability to control gambling behaviours, desperations from not being able to recover losses, feelings of shame and guilt, lack of safety due to (sometimes) illegal actions and online gambling scope. **Health Decrement** This research area is not well developed, but some findings have found indirect impacts on the individual's health and wellbeing. Related issues are suicidal ideation. Culture includes beliefs, practices and roles. Some doctrines forbid Cultural Harm participation in gambling activities. However, gamblers challenge these beliefs and fail to participate in the community and fulfil their expected roles. Consequently, gamblers reduce their connections to the cultural community. Work/Study Impact Tiredness and absenteeism from work or educational settings because of gambling activities and ongoing poor performance are the main issues. **Criminal Activity** The types of criminal activities include crimes of negligence, crimes of duress (or coercion) and crimes of opportunity. Life Course Harms Includes adverse effects in the gambler's life on significant life course events and trajectories (e.g., marriage, having children, others), loss of primary relationships and social connections, having to move towns due to the impact of gambling activities, homelessness or incarceration due to gambling.

Source: Based on Langham et al. (2015)

3 International Gambling Trends, Harms and Responses

In this chapter we gather evidence from international jurisdictions and present a summary of statistical data which we have collated on international gambling markets, gambling trends and the prevalence of gambling harms.

We also present an overview of the range of responses to gambling harms in different countries and regions around the world, from Australia to Canada, the United Kingdom, and EU peer states. This chapter provides the international context in which to situate our work on gambling trends and responses in Ireland which we deal with more specifically in the following two chapters.

3.1 The Global Gambling Environment and Regional Variations

The social acceptability of, and propensity to, gamble varies widely from country to country globally. Many religious traditions consider gambling to be a moral issue, and about six-in-ten people globally consider gambling to be an unacceptable practice, according to a survey conducted by Pew Research (2014). This figure exhibits considerable fluctuation by region. In countries where gambling activities are widespread, the social and cultural attitudes to gambling are generally more accepting. A quarter or fewer in France (13%), Canada (23%), and the US (24%) say gambling is an unacceptable practice. Japan has the highest rate of acceptance of gambling (38%). Across the European Union, social attitudes to gambling are generally amongst the most permissive in the world.

It is difficult to obtain robust independent statistical data on gambling industry revenues and markets. We are reliant on market information provided by trade associations and specialist global research agencies such as H2 Gambling Capital and Statista for an international perspective. The global gambling market is segmented geographically into six regions, namely Africa, Asia, Europe, North America, Oceania and Central/South America. The fastest-growing market in the world is the Asia region (32%). North America (29%) and Europe (26%) are the second and third largest regions, respectively, with significant market share. Figure 1 shows the gambling share by region.



Figure 1 Global Gambling Market by Revenues

Source: Global Gambling & Gaming Consultants (2019)

The gambling market is a diverse and expanding sector globally. Much industry data in consultancy reports is presented in total 'gross win' terms. Statista defines a gross win as "the stakes/wagers placed minus the prizes and pay-outs but including bonuses." The industry grew by \$50 billion dollars since 2010, with the value of this market reaching \$457 billion gross wins in 2019 (H2 Gambling Capital, 2020). This analysis is supported by other market consulting firms (Arizton, 2018; Global Gambling & Gaming Consultants, 2019; TechNavio, 2018; The Business Research Company, 2019) who also concur that the gambling sector will go on growing even where most major markets will be heavily impacted by COVID 19 into 2021 and beyond.

Although Asia is the leading gambling region by gambling gross win accrued, the USA continues to be the largest single market in absolute terms, accounting for \$119.5 billion dollars, or 30.2% of the total global gambling gross win in 2019, with China coming in second place (Global Gambling & Gaming Consultants, 2019; H2 Gambling Capital, 2020). Figure 2 shows the leading countries by total gambling gross win in 2019. Figure 3 indicates that the USA, China, Japan, Italy and the United Kingdom account for 70.8% of the total global gambling gross win in 2019. Europe is the third fastest-growing market in the world after Asia and North America. Italy, with \$20.3 billion dollars, and the UK, with \$19.5 billion dollars, in gross gambling win in 2019, account for the most significant European gambling markets (H2 Gambling Capital, 2020).

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Figure 2 Leading Countries by Total Gambling Gross Win 2019 (in Billion US Dollars)

Source: H2 Gambling Capital (2020)

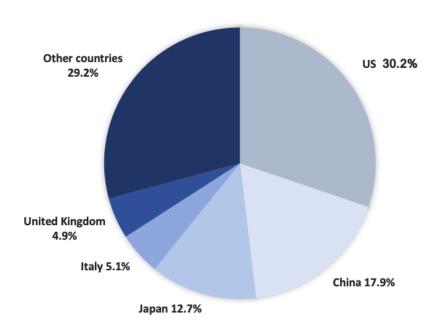


Figure 3: The Top Five Markets by Total Gambling Gross Win 2019

Source: H2 Gambling Capital (2020)

In absolute terms, the European Union Member States with the largest populations are home to the largest gambling markets. However, the size of the population does not have much to do with the propensity to gamble (Griffiths, 2009). In 2009, Griffiths reported that Ireland had the largest propensity for gambling according to its gambling expenditure per capita. Other reports suggest that, of the five largest member states by population, only Italy is in the top five for gambling expenditure per capita (2nd overall) as shown in figure 4. The top five gambling countries by GGR are: Greece (1.14%), Italy (1.06%), Portugal (0.9%), Finland (0.88%) and the Czech Republic (0.84%) (Statista Research Department, 2019a). Notably, Ireland had fallen to eighth place in the 2018 data, just behind the UK in its propensity to gamble.

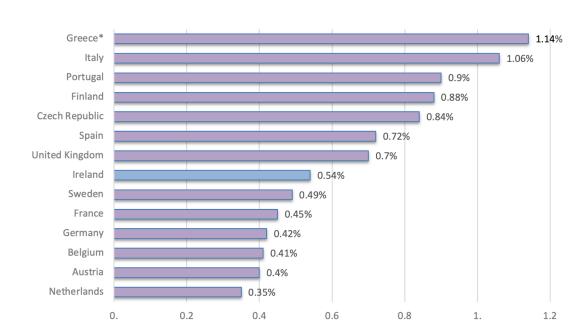


Figure 4: Gross Gaming Revenue (GGR) as a Share of GDP in Select European Countries 2018

Source: Statista Research Department (2019a)

3.2 Global Gaming Types and the Growth of Online gambling

The global gambling market consists of many different types of gambling activities. Figure 5 shows that **betting** is the most popular gambling activity in the world, with 36% of the global gambling market, followed by casinos. Industry forecasts suggest that betting revenues will continue to increase, while casinos will remain stable for the foreseeable future.

Figure 5: Market Share by Gambling Types from 2007 to 2014, with Projected Figures for 2015 to 2021.

Source: Statista Research Department (2018a)

Many of these reports do not distinguish between offline and online gambling markets. Where online gambling is considered, we can observe significant growth in online gross win and a decline in the share of land-based types in recent years. In 2012, land-based gambling accounted for 92% of the sector across all markets (H2 Gambling Capital, 2013), while by 2020 land-based gambling had declined to 87%, (H2 Gambling Capital, 2020).

Europe is the leading region of **online gambling** in the world. Figure 6 shows the online market share worldwide. The European online gambling market constituted approximately a 48.9% share of the global online market in 2017 and a 49.2% share in 2018 (European Gaming & Betting Association, 2019a). The European Gaming and Betting Association (EGBA) in partnership with H2 Gambling Capital have estimated that the overall online GGR in Europe would reach approximately €29.3 billion by 2020 (European Gaming & Betting Association, 2019a). Different factors have accelerated the growth of online gambling. These include the diffusion of smartphones and apps after 2007, the spread of cryptocurrencies (i.e., bitcoin) as an alternative option to cash, and the increased use of credit and debit cards linked with secure digital payment options.

Africa 0.9% Latin America & the Caribbean 1.3% Rest of Europe 4.0% International **Market Share** Oceania 6.1% (%) North America 11.7% Asia / Middle East 27.1% 48.9% ■ EU28

Figure 6: Global Online Market Share in 2017

Source: European Gaming & Betting Association (2019a)

In terms of individual European countries, the UK market accounted for the most substantial portion of the total EU online gambling with 34.2% and a market value of €7.3 billion GGR, as shown in figure 7 (before the UK's formal departure from the European Union on 2 January 2021).

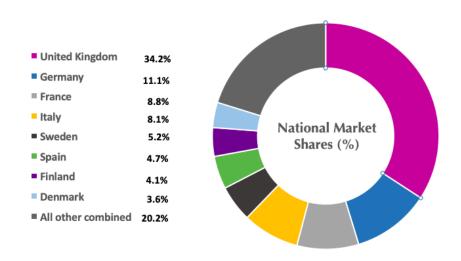


Figure 7: National Online Gambling Market Share (EU-28) in 2018

Source: European Gaming & Betting Association (2019b)

The major companies in the online gambling industry include companies that are familiar in Ireland, including GVC Holdings (incl. Ladbrokes/Coral and now rebranded as Entain), Bet365, Flutter

Entertainment (including Paddy Power/Betfair) and Caesars Entertainment (including William Hill). Figure 8 shows the top ten online gambling companies worldwide in 2019.

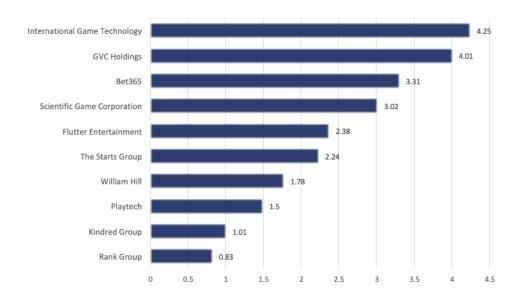


Figure 8: Top 10 Online Gambling Companies in the World in 2019, by Revenue (in Billion EUR)

Source: Bet365 plc (2019), Flutter Entertainment plc (2019), GVC Holdings plc (2019), International Game Technology PLC (2019), Kindred Group plc (2019), Playtech plc (2019), Rank Group plc (2019), The Starts Group plc (2020), William Hill plc (2019) and 888 Holdings plc (2019).

Sports betting is the most popular form of European online gambling with 42.5% of the total EU market share (worth €9.4 billion GGR), followed by casino games at 32.4% (€7.2 billion GGR), lotteries at 12.6% (€2.8 billion GGR), poker at 5% (€1.1 billion GGR), bingo at 4.3% (€1 billion GGR), and other games with a 3.2% market share (€0.7 billion GGR) (European Gaming & Betting Association, 2019a). See Figure 9.

9 9.4 7.2 7 6 5 1.1 1 1 0.7 Sport Betting Casino Games Lottery Poker Bingo Other Games

Figure 9: European Online Gambling Activities in GGR € billions

Source: European Gaming & Betting Association (2019a)

3.3. The Prevalence of Gambling Harms Internationally

Some studies have found that up to 60% of gambling revenues derive from problem gamblers (Egerer et al., 2018; House of Lords, 2020). In Australia, the Victorian Problem Gambling Foundation found that the cost of problem gambling in the state of Victoria in 2014-15 totalled AUD7 billion (Browne et al., 2017). To put this in context, the Victorian government accrues roughly AUD6 billion a year in tax revenue from gambling. Thus, it appears that gambling has a negative net effect on Victoria, or (viewed more narrowly) at least on the state's balance sheet. As such, understanding the prevalence of problem gambling is an important aspect of understanding what might constitute appropriate public responses.

Problem gambling rates from countries which have carried out surveys using the Problem Gambling Severity Index (PGSI) are presented in Figure 10. Here we see that prevalence rates of problem gambling in these countries vary from 0.3% to 3.3%, with the average rate across these countries being 1.2%. New figures from the Spanish Ministry of Health (based on the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) show that an estimated 670,000 citizens aged between 15 and 64 have already developed, or are at risk of developing, gambling problems, with a prevalence rate of 2.2% (Harrison, 15 December 2020). This has prompted the Spanish authorities to introduce significant new controls on the gambling industry. In Australia, there are estimated to be more than 1 million people who gamble to problematic levels. The evidence suggests problem gamblers spend more than four times on gambling compared to those without problems, "spending on average 27% of their disposable household income on gambling, an amount estimated to be about four times their annual household utility costs, or more than half their grocery costs," often defaulting on these vital expenditures as a consequence of problem gambling (Oakes, Pols and Lawn, 2020).

The UK House of Lords report (2020) estimates that there are at least one third of a million problem gamblers in the UK (a prevalence rate of 0.7%), with a further 0.8% of the population considered 'moderate risk', with 55,000 problem gamblers identified in the 11-16 age cohort. This report revealed significant regional differences: only 0.2% of people in the south west of the UK are considered problem gamblers, whereas in the North East and the West Midlands the prevalence rate goes up to 1.1%. Strikingly, the prevalence rate of gambling-related problems in Northern Ireland (2.3%) comes in behind only Hong Kong (3.3%) and South Africa (3.2%) (Dunne et al., 2017). Why is the figure for Northern Ireland so high? There is clearly a case for more detailed research here. There is scope too for comparative work examining the nature and scale of problem gambling across the two jurisdictions on the island of Ireland and how Northern Ireland compares to the other devolved regions of the UK.

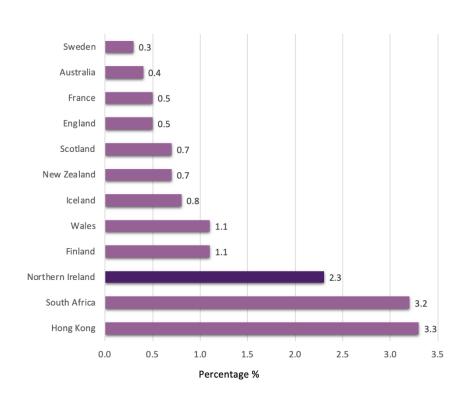


Figure 10: Comparison of Problem Gambling Severity Index Scores Globally

Source: Dunne et al. (2017)

Another key piece of research encompassing 30 different countries, conducted by the Alberta Gambling Research Institute in Canada, demonstrated that there are wide variations in problem gambling rates across different jurisdictions, from 0.5% to 7.6%, with the average rate across all countries being 2%. Finland, at 3.3%, exhibits one of the highest prevalence rates in the EU (*The Economist*, 3 Oct 2019). The Alberta Gambling Research Institute's analysis is based on calculations to standardise problem gambling prevalence rates. Each study uses different methodological procedures, screening instruments and time frames which makes it difficult to compare such studies directly. Because of the failure to date to conduct any meaningful prevalence surveys, Ireland is not included in this study. Figure 11 demonstrates at least an indicative mapping of problem gambling rates worldwide.

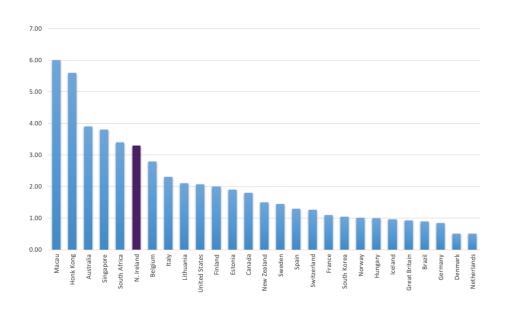


Figure 11: Gambling Problem Prevalence Rates Worldwide

Source: Alberta Gambling Research Institute (nd)

Despite variations in problem gambling prevalence rates, there are some consistent results concerning the socio-demographic characteristics of problem gamblers. Problem gambling is more prevalent among men, individuals of a younger age (under 30 years) and single individuals or divorced people (Calado and Griffiths, 2016; Dunne et al., 2017; Abbott et al., 2018). Additional characteristics include individuals who are unemployed or with a low income, individuals with a lower level of education and individuals that belong to an ethnic minority (non-Caucasian ethnicity) (Calado and Griffiths, 2016, Abbott et al., 2018). The House of Lords report (2020) found that among boys of 11-16, fully 2% were classified as problem gamblers; the only age group with a higher percentage of problem gambling is 25 to 34 year old men, at 2.4%. For girls of 11-16, while the problem gambling rate is much lower than for boys (0.7%), it is still over double the rate of any other female age cohort.

Some studies have found that harmful gambling is related to certain occupations (Abbott et al., 2018). However, the relationship between gambling and occupations, job stress or unemployment, needs further research. Most studies only examine the annual household income and do not consider the full spectrum of people's assets concerning their gambling behaviour (Abbott et al., 2018). One area that has received recent research interest is the relationship between gambling, problem gambling, and homelessness (Nower et al., 2015; Rash and Petry, 2016; Sharman and D' Ardenne, 201). The House of Lords report (2020), citing some of these studies states that 11.6% of the homeless population experiences gambling-related harm, an alarming 10 times the rate of harm in the general population. Other research found that rates of problem gambling in the prison population are between 12 to 24 times greater than in the general population.

3.4 International Responses to Gambling Harms

Our research indicates that the increased awareness internationally of the harms wrought on individuals and societies by gambling has produced a diverse range of responses by private and public actors. A combination of focused academic research, the increasing number of people presenting for treatment across many jurisdictions and a significant increase in media exposure of gambling harms, has brought gambling into sharper focus in many countries and triggered calls for robust legislative responses. Public representatives have increasingly sought to highlight gambling harms and make the gambling industry more accountable. Even within the gambling industry, we have seen acknowledgement that there is a pressing need to introduce appropriate responses and dedicate substantial resources to limit, and - where possible - prevent harms from gambling. This section reviews a range of international practices and measures implemented by a range of actors (the state, the gambling industry and other stakeholders) to prevent and/or address gambling harms and to ensure adequate consumer protection. These responses break down into four broad categories: health responses, education, national legislation and other mitigation measures. Some responses attempt to reduce demand for gambling, while others target reducing access to gambling products. Some of these measures are targeted at individuals while others operate at a population or national level.

3.4.1 Health Responses and Treatments

There is an increasing recognition of gambling as a significant public health issue around the world. In many jurisdictions, treatment support services are available as part of a generalised mental health treatment pathway, or as part of addiction treatment, or (more rarely) as standalone services. The existing body of research confirms high levels of 'comorbidity' - where harmful gambling co-exists with mental illness and/or substance addictions. Most people who present for treatment go through a screening process; this is important as gamblers are heterogeneous and the types of gambling they engage in are also diverse. However, the numbers who present for treatment are generally low and Abbott et al. (2018:59) state that only from 7-12% of problem gamblers seek treatment. The barriers to accessing treatment include: lack of knowledge about these services, geography, cost, cultural and linguistic factors, and the threat of social stigma.

The American Psychiatric Association provides a diagnostic approach to identify problematic gambling behaviours and symptoms as a gambling disorder or addiction (DSM-V). Gambling disorder is categorised as "persistent and recurrent" problematic gambling behaviour that causes significant impairment and distress. The World Health Organisation International Classification of Diseases (ICD-10) describes a disorder of 'pathological gambling'. Other self-assessment tools exist and include the Problem Gambling Severity Index (PGSI), based on the Canadian Problem Gambling Index (See O'Gara, 2019:69-70). This was developed to measure problem gambling in the general population and not in a clinical setting. Some researchers have argued that the PGSI is open to misinterpretation and the answers can be ambiguous (Ferris et al., 2001).

Treatment interventions target individuals identified as gambling addicts, those who are in recovery from addiction and those who have relapsed. A recent literature review classified treatment intervention as 1) therapeutic interventions, 2) pharmacological treatments, and 3) self-help and mutual support interventions (Blank et al., 2019). These are similar to the categories employed in the O'Gara (2019) study. Figure 12 summarises this classification of treatment interventions.

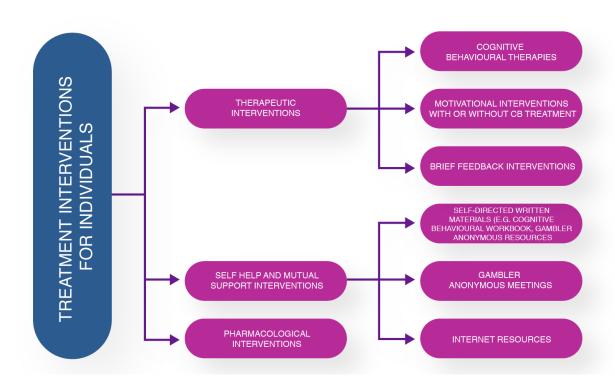


Figure 12. Classification of Treatment Interventions

Source: Based on Blank et al. (2019).

Therapeutic interventions for gambling addiction include cognitive and behavioural therapies (CBT), motivational interviewing (MI) and other psychological therapies. Counsellors deliver these therapies as face-to-face interventions but these so-called 'brief interventions' may also come in the form of self-help, group or mutual support interventions, and some are available online.

Abbott et al. (2018:62) note that there is a growing body of research to support the efficacy of psychotherapy, including cognitive behavioural treatments and motivational interviewing. Cognitive Behavioural Therapy (CBT) is the most used treatment method for harmful gambling (Chretien et al., 2017; Petry, 2017; Tolchard, 2017). Treatment providers offer CBT on an individual or group basis, with interventions occurring either in a face-to-face setting with a therapist or auto administered by the gambler herself/himself (Chretien et al., 2017). CBT includes a range of approaches, including Exposure therapy and Cognitive Restructuring, regarded as two of the most effective approaches to reduce gambling related harms (Tolchard, 2017). CBT-based interventions have been shown to reduce the propensity for gambling harms in the most severely disordered gambling patients immediately after treatment but the College of Psychiatrists of Ireland (2020) points out that there is little data available to evaluate its efficacy in the longer term.

Motivational interviewing (MI) is a therapeutic intervention aimed at facilitating behavioural change. Academic analysis of MI interventions suggests that motivational interviewing may be an effective style of therapy for gambling addiction in the short term (Yakovenko et al. 2015). However, Yalovenko et al. (2015) are unsure of the positive effects of MI being maintained over time. These researchers noticed that the short-duration of MI makes this intervention a useful supplemental approach to other evidence-based treatments such as CBT. There is evidence suggesting benefits from MI combined with CB treatments, but not MI alone, according to a review of psychological interventions (Petry et al., 2017).

English Premier League football club, Southampton FC has recently partnered with RecoverMe, a new mobile app intended to help gamblers manage problems (A Football Report Blog, 2020). The Recover Me app was developed by three junior doctors in consultation with psychiatrists, psychologists and individuals struggling with gambling problems. It employs CBT to treat problems and is both inexpensive and readily accessible. It is designed to help users reflect on their gambling patterns, question their choices and encourage responsibility. For all the promise attached to such platforms, Southampton FC almost simultaneously signed a new contract for the 2020-21 Premier league season with sportsbet.io part of the coingaming group, a cryptocurrency-based sports betting firm. This was after it terminated a three year sponsorship deal with the Chinese company LD Sports (France24,2019). The impression created by such activity is one of hypocrisy. Gambling sponsorship is pervasive in football in the UK and these efforts to support problem gamblers might well be viewed as public relations exercises rather than a genuine attempt to mitigate gambling harms. Nevertheless, the use of CBT in this sphere is striking and we will probably see wider uptake of such apps in the future in order to tackle gambling harms amongst young age cohorts in particular.

Though CBT and MI interventions seem to work better with problem gamblers than other treatment approaches, it is also essential to note that treatment outcomes differ for each patient. The success rates after treatment range from 39% to 89%, with success rates at the 12-month interval follow-up ranging from as low as 30% to as high as 71% (Merkouris et al., 2016). Merkouris et al. (2016) attribute the variation in success rates to the heterogeneity of problem gamblers and the variability in the definition and measurement of successful treatment outcomes (e.g., self-reporting or clinically administered measures of gambling behaviour, gambling symptom severity, diagnosis, relapse, abstinence and controlled gambling). In addition, there can be quite a high drop-out rate from treatment programmes. For all these caveats, however, CBT-based therapeutic intervention seems to offer the most effective form of ihealth-based intervention.

Brief interventions are short conversations revolving around discussion of personalised information about an individual's gambling behaviour. Peter et al. (2019) found that brief interventions comprise no more than one session, and they are more effective when accompanied by gambling-related educational elements, and when used in conjunction with motivational interviewing. Quilty et al. (2019) showed some success in reducing gambling behaviour in the short term. However, Blank et al. (2019) considers that those results should be viewed with caution given the small sample employed in the research. A comparison of these therapeutic interventions at present suggests efficacious outcomes only in the short term. Blank et al. (2019) conclude that further research is needed to investigate the effectiveness of treatments or modes of delivery (e.g., face-to-face, phone or internet) over the longer term.

Pharmacological interventions can also be used to treat gambling addiction (Blank et al, 2019). Drugs include opioid antagonists, glutameric agents, antidepressants, antipsychotics, mood stabilisers and topiramate (an anticonvulsant). O'Gara (2019:167) discusses the use of Naltrexone in the treatment of gambling disorder in his practice in Ireland. Naltrexone is an opioid antagonist that blocks receptors in the brain called opioid receptors. This can affect the transmission of dopamine in the brain. O'Gara notes that the efficacy of drugs in relation to gambling is mixed depending on contextual and individual circumstances. A specialist might also have to prescribe antidepressant or anti-anxiety medication during addiction treatment. In terms of the effectiveness of pharmacological treatments, a recent analysis concluded that there is not enough evidence to support or disprove pharmacological interventions for gambling (Blank et al., 2019). Employed alongside other interventions, however, such as CBT, there is enough evidence to suggest this is an avenue well worth pursuing (College of Psychiatrists of Ireland, 2020).

Self-help and mutual support interventions are interventions managed by individuals themselves to reduce their gambling behaviour or treat the symptoms of their harmful gambling. Such interventions include self-directed treatments, mostly involving written materials, provided in a

workbook or Internet format, based upon CBT principles (Blank et al., 2019; van der Maas). However, other studies reviewing self-help strategies also include self-exclusion, time limit setting, monetary limit-setting and other responsible gambling practices which can be regulated by law and where gambling companies take on significant responsibility for policing the system (Drawson et al., 2017; Matheson et al., 2019). These interventions straddle the divide between prevention approaches and therapeutic treatments but emphasise the importance of early intervention and the different responsibilities of the individual gambler, gambling companies and the state or regulatory body. Witkiewitz et al. (2014) have proposed the incorporation of mindfulness practices into the treatment of gambling addiction. Chen et al. (2020) have developed a mindfulness-based relapse prevention (MBRP) program that includes exercise and relaxation techniques, group sessions and guidance to deal with the urges and temptations to gamble. Although mindfulness-based treatments might be growing in popularity among addiction treatment providers (Witkiewitz et al., 2014), there is no comprehensive assessment to date of the effectiveness of mindfulness-based approaches or comparison with more traditional approaches such as cognitive behavioural therapy and Gambler Anonymous programs.

Gamblers Anonymous (GA) is an international organisation founded in Los Angeles in 1957 and with local branches in a large number of countries, including Ireland. It provides mutual aid groups to address harmful gambling. Schuler et al. (2016) reviewed the literature on GA and found that GA is an accessible treatment option and cost-effective resource for individuals experiencing problems with gambling, especially for those people with low income and those with gambling-related debt. Self-help and mutual support interventions are an alternative to formalized treatment in situations where stigma is a significant barrier to care, and where problem gambling services are scarce (Matheson et al., 2019). However, due to the relative paucity of studies on this topic, the outcomes of such interventions are unclear.

Finally, Blanks et al. (2019) explore ongoing interventions to support recovery and prevent relapse into gambling. The recovery of individuals affected by harmful gambling does not always finish at the completion of treatment. Some people might go through a lifelong struggle to avoid relapse. One study found that 75% of participants had relapsed to gambling three months after they had quit (Hodgins et al, 2007). According to this research, those participants who were involved in treatment and follow-up services (including Gamblers Anonymous) had better outcomes than those who did not benefit from treatment and follow-up intervention. However, only 25% received support after treatment (Hodgins et al, 2007). Therefore, follow-up services, 'aftercare' and relapse interventions seem essential to prevent individuals from resuming the patterns of harmful gambling after a period of abstinence. In the line of relapse prevention initiatives, Hodgins et al (2007) developed information material and sent them to problem gamblers via email. Though the results showed that providing extended relapse prevention bibliotherapy to problem gamblers does not improve outcomes per se, the overview booklet may be an alternative for individuals who have quit gambling and who may not be able to access post-treatment interventions.

The range of treatment pathways described here can be delivered through public or private entities. In Great Britain, the National Health Service (NHS) has, in recent years, opened a number of clinics specifically for gambling addictions under the banner of the 'National Gambling Treatment Service (NGTS). These clinics include multidisciplinary teams, including consultant psychiatrists, clinical psychologists, and senior mental health nurses. The ethos of the service is that 'any door is the right door' where gambling disorder is concerned, and clients can be referred through public or private entities. The treatments provided at these clinics includes psychological therapies, addiction treatment programmes, mental health intervention, family therapy and peer support. The latest clinic to open was Sunderland in early 2020. This followed a clinic in Leeds (opened with an 11-strong team in September 2019) and London. The NHS has committed to opening more such clinics, with a facility in Manchester, to serve the northwest of England next to open in 2021. The London clinic was

founded by a GP practice and the express intention was to develop an integrated care treatment pathway which would also provide training to GPs to help identify gambling problems in their patients.

In December 2019, the NHS revealed that 321 people had been admitted to hospital for gambling addiction in the 2018-19 fiscal year, more than double the number who presented in 2014-15 (O' Boyle, 9 January 2020a). These new addiction clinics are part of a more long-term NHS strategy, with up to 14 new clinics to be rolled out, including a number of centres specifically designed to treat young people with gambling problems. These clinics offer a concrete model on Ireland's doorstep which could be emulated, with the HSE taking the lead and launching treatment clinics on a regional basis.

There is increasing evidence of the efficacy of the National Gambling Treatment Service (NGTS). An analysis of the 9,008 clients that completed treatment through the NGTS between March 2019 and April 2020 revealed that 60% of those defined as problem gamblers were no longer classified in that category by the end of treatment. It also demonstrated that 90% of patients saw their Problem Gambling Severity Index (PSGI) score improve. This came alongside improvements in treatment completion rates, with the proportion of patients completing their treatment rising from 59% in 2015-16 to 69% in 2019-20. The analysis suggested that a significant number of patients began gambling early in their lives: 25% said they started gambling by the age of 19, with 50% stating that their problems began before the age of 24. The majority of these players were online players, reflecting the substantial move to online platforms in recent years, with 69% saying they gambled through this route. For those that gambled online, sports betting was the most popular product, used by 25% of NGTS clients, followed by online slots at 22%, then table games at 20% (Harrison, 29 October 2020). This data is consistent with the picture emerging internationally with an increase in online gambling and a striking number of young people presenting for treatment.

Governments across Europe and in many other jurisdictions are beginning to provide significant financial and expert resources for research on harmful gambling and addiction and to fund entities treating gambling addiction. This includes sponsorship of charities dedicated to investigating harmful gambling and putting in place partnerships with universities in order to better identify, prevent and tackle gambling harms. The Estonian government, for example, recently provided €200,000 to the non-governmental organisation, Gambling Addiction Counselling Centre, to monitor harmful gambling patterns and provide a centre for gambling addicts and their family members. The partnership allows the Estonian government to cooperate with and empower NGOs, supporting their organisational development and operational capacity (Mulheir, 4 December 2020). In New Zealand, harmful gambling services are resourced through a levy on gambling operators introduced in 2016 (Mateparae, 2019). The levy is collected from the profits of New Zealand's four main forms of gambling: gaming machines in pubs and clubs; casinos; the New Zealand Racing Board and the New Zealand Lotteries Commission. The Ministry of Health is responsible for the prevention and treatment of problem gambling, including the funding and co-ordination of problem gambling services.

Our research indicates there is no single 'magic bullet' treatment for individuals with chronic gambling problems. Rather, a combination of therapeutic interventions and longer term engagement seem to produce the best results where harmful gambling is concerned and results vary according to the individual and cultural context (Harrison, 29 October, 2020; O'Boyle, 9 January 2020). Early intervention is key but this can only succeed if the model is adequately resourced and the results evaluated. Public health authorities should lead in tackling gambling harms by establishing regional clinics and treatment referrals exclusively for gambling disorder. Emerging best practice indicates these steps should be publicly resourced at the outset before funding from mandatory industry levies is utilised to support treatment structures. There is a role for the private sector and

independent charities in this sphere - but these need to work in tandem with the public sector rather

Better and more targeted (gambling-specific) training of GPs and healthcare workers across the public, private and charity sectors also needs to be prioritised, providing each region with teams of professionals dedicated to screening and treatment of those presenting with gambling problems. The most promising avenues of treatment internationally seem to be CBT-based but because the cohort of problem gamblers is a heterogeneous one, treatment pathways necessarily need to be individualised. Treatment pathways should only be based on international best practice and in combination with much more targeted monitoring of and interdiction of societal gambling harms. An annual all-island conference for sharing best practice knowledge, research and experience with treatments across all the sectors would be welcome.

3.4.2 Education and Prevention Initiatives

than in isolation from it.

Gambling awareness and education programmes focus mainly on prevention and are being implemented throughout the world as part of the response to the growing prevalence of individual and societal gambling harms. These programmes target individuals from different age cohorts in different settings such as in schools and universities, the workplace, sports organisations, and public institutions (e.g., police, prison and probation services). They are delivered in these spaces and/or through the media and via the internet. Such initiatives include media information/awareness campaigns, workshops, school programs and community information campaigns. Such programmes can be targeted at specific age groups or communities perceived to be particularly at risk from harmful gambling and are increasingly viewed as preferable to late-stage therapeutic interventions where gambling problems have become acute.

3.4.2.1 Public and Industry Gambling Awareness Campaigns

Public information campaigns are now widely employed as a prevention strategy in a range of jurisdictions and, for the industry, are often now part of licensing regimes in national or sub-national regulatory settings. Such initiatives can be described as 'information/awareness campaigns' (Williams et al. 2012). They are usually designed and delivered by governmental health or social services departments, or schools, sometimes in partnership with the gambling industry. Their purpose is driving awareness of the risks associated with gambling and the signs/symptoms of problems with gambling. In addition, they deliver information about services available to help individuals experiencing difficulties with their gambling. Campaigns may focus on dispelling gambling myths and fallacies, or facilitating individuals developing a better understanding of how various gambling activities work, in terms of mathematical odds and risk.⁶ The existing evidence suggests that improvements in knowledge and awareness are evident in the responses of people who attend to these messages, although their impact on behavioural change more broadly is less certain (Williams et. al., 2012).

Responsible gambling is a broad term, often used by the gambling industry (IBA, 2020; Schultz, 2020). The industry, in many jurisdictions, now runs 'Gambling Awareness Weeks' or 'Responsible Gambling Weeks' (and variations thereof) to raise awareness of the risks and potential harms associated with gambling. The UK Gambling Industry, led by the Betting and Gaming Council (BGC), the Bingo Association (BA) and the British Amusement Catering Trade Association (BACTA), for

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⁶ See "Safer Gambling". The Betting and Gaming Council. Accessed 15 November, 2020. https://bettingandgamingcouncil.com/safer-gambling/

gambling.

example, run a Safer Gambling Week and in 2018 this was extended to Ireland with the support of IBA members (November 19-25, 2020). The annual campaign builds upon 'Responsible Gambling Week', which began in 2017. This was the first campaign to unite all sectors of the gambling industry to run an awareness and education campaign. The BGC (a betting industry association) uses a multimedia strategy to encourage individuals to set limits before betting. One specific recent campaign - *The Limits are Good* - included a series of videos focused on individual behaviour in gambling settings. These series of videos do not target prevention, but rather moderation and self-control of behaviour. In the United States, the National Council on Problem Gambling (NCPG) provides a comprehensive set of resources that provides education, guidance and access to further resources.⁷ The NCPG runs a national campaign 'Problem Gambling Awareness Month', with the

main purpose of increasing public awareness of problem gambling and the availability of prevention, treatment and recovery services, and encouraging healthcare providers to screen clients for problem

In the UK, the industry has also developed a 'safer gambling training' programme for employees of gambling companies. This takes the form of a digital learning platform to provide specialist training to staff to allow them interdict harmful gambling in customers where they encounter it, and, in general, to strengthen player protections. The resources have been developed using a methodology known as 'flipped learning', derived from neuroscience and the ways the brain learns and adapts to technology. The Canadian Responsible Gambling Council (RGC) acts as an independent evaluator of this programme (BGC, 2020). Other jurisdictions are also asking gambling operators to train their employees (at least to some level) in responsible gambling practices.

The gambling industry has recently embraced the idea of appointing experts to roles within their organisations to advise on harmful gambling and how to better protect problem gamblers. Professor Mark Griffiths of Nottingham Trent University, UK, a renowned expert on behavioural addiction and psychology joined GVC Holdings (now rebranded as Entain) in 2020 to assist the operator's responsible gambling strategy. His work will involve oversight and scrutiny of GVC's gambling policies and to suggest ways the company can improve player protections. Griffiths will also have access to data from GVC/Entain's 160 million customers to help formulate new policies. Griffiths will have significant input into the company's 'advanced responsibility and care' programme. This programme is designed to produce scientific breakdown of individual players' behaviour and come up with scientifically supported solutions to harmful gambling (Todorov, 25 November 2020). Many commentators were surprised to see Tom Watson, former deputy-leader of the Labour Party and a frequent critic of the gambling industry, appointed by Flutter to advise the company on gambling reform (*The Guardian*, 17 September 2020). At the same time, the Dutch gambling regulator Kansspelautoriteit (KSA) appointed addiction expert and clinical psychologist Geert-Jan Meerkerk as a research partner (Mulligan, 9 October 2020).

Efforts to educate the public about the potential harms caused by gambling are relatively recent in countries with high rates of gambling. It has proceeded from the belated acceptance by industry and governments that gambling products were causing immense harm to some individuals, families and to society more generally. Public awareness campaigns have thus been launched by both the industry and by national regulators or governments in the effort to reduce such harms. It is unclear as yet how effective such awareness campaigns are. In most jurisdictions, the amounts spent on information and awareness campaigns pales into insignificance relative to the vast amounts spent on the promotion of gambling products. Such awareness and information campaigns constitute just one element of a much broader strategy of prevention and mitigation of gambling harms.

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National Council on Problem Gambling (NCPG), https://www.ncpgambling.org/programs-resources/programs/pgam/

3.4.2.2 School and Youth Education Programs

Gambling education programmes specifically targeted at young adolescents and teenagers have been designed and are in use in many international jurisdictions. The reasons to be concerned about this age group are multiple. Some researchers have pointed out the vulnerability of youth cohorts due to their lack of development and cognitive immaturities (Emond et al., 2019; Emond and Griffiths, 2020). The availability of legal gambling and the ready accessibility of gambling platforms has only increased this vulnerability (Volberg et al., 2010; St-Pierre Renée et al., 2014; Emond et al., 2019), with online gambling being the most prevalent form of gambling among young people (Griffiths and Parke, 2010; Gainsbury et al., 2015; Hollén et al., 2020). The 'gamblification' of football has enticed more and more young men into the embrace of gambling culture, as more and more football clubs and media partner with, or are sponsored by, gambling companies.

The evidence suggests that a large (and increasing) proportion of young people engage in gambling (Volberg et al., 2010; Purdie et al., 2011; Calado et al., 2017; Andrie et al., 2019; Pisarska and Ostaszewski, 2020), with problem gambling prevalence rates significantly higher than is present in older cohorts (Volberg et al., 2010; Purdie et al., 2011; Wardle et al., 2014; Calado et al., 2017). A recent international review reported that 0.2–12.3% of youth meet the criteria for problem gambling, notwithstanding differences in methodology (Calado et al., 2017). Some studies also show problem gambling behaviours associated with mental health problems, substance abuse (e.g., smoking, alcohol, drug consumption), suicide, criminal activity and disruption of family relationships, in addition to work and school-related problems (Temcheff et al., 2011; Cook et al., 2015; Emond et al., 2019; Calado et al., 2019; Emond and Griffiths, 2020; Mestre-Bach et al., 2021). Our interviews with stake-holders reveal that harmful gambling amongst young people in Ireland is also associated with co-dependencies, typically alcohol and drugs.

Based on previous findings, jurisdictions such as Australia and Canada have implemented diverse prevention and intervention strategies aimed at young people. 'Primary prevention' is one type of intervention to prevent youth problem gambling (Keen et al., 2017; Calado et al., 2019). These programmes target young people who have not yet gambled with the objective of avoiding the development of problems. The essential components in the design of primary prevention programs are risk analysis and protective factors related to gambling (Calado et al., 2019). For example, they address gambling-related knowledge and misconceptions (e.g., teaching gambling probabilities) (Calado et al., 2019; Oh et al., 2017). Other interventions address more general factors associated with adolescent risky behaviours such as self-monitoring, problem-solving, coping skills, decision-making skills, impulsivity control, and sensation seeking (i.e., a tendency to seek new and different feelings and experiences) (Oh et al., 2017; Calado et al., 2019). Primary prevention programmes constitute 80% of all prevention programmes, and most of them are schools-based (Calado et al., 2019), especially in countries like Australia, where many young people under 15 have access to commercial gambling opportunities and platforms (Keen et al., 2019). Most of these initiatives are incorporated into education curricula or offered as independent workshops (Keen et al., 2017). Others are administered outside of schools such as in youth centres, adjacent community spaces and the juvenile justice system (Keen et al., 2017).

The Victorian Responsible Gambling Foundation has developed a school education program to raise awareness about gambling harms and help young people make informed choices. This education program consists of a series of secondary curriculum-based units covering a variety of subject areas such as literacy and numeracy skills and personal development. In the VCAL literacy unit, students critically analyse the potential influences that can shape gambling attitudes, including advertising and games that simulate gambling (VRGF, 2016a). In this VCAL numeracy unit, students learn about the randomness of gambling games/activities along with the limited chances of winning, relative to the size of gambling losses in Australia and the difficulty in predicting outcomes (VRGF, 2016b). In

this way students learn to recognise when gambling may be becoming a concern or danger to themselves and how to seek help (VRGF, 2016c).

In the UK, the Department for Education has recently approved a new gambling curriculum for secondary schools that will develop young people's knowledge, understanding, skills and personal attributes needed to deal with gambling risks and financial issues (PSHE Association, 2019). Secondary schools across the UK started offering the curriculum from September 2020, as part of the PSHE (personal, social, health and economic) education program. The PSHE education is the school curriculum subject which prepares young people for their transition to adulthood.⁸

Another innovative response for preventing and reducing gambling-related problems is the provision of digital education and prevention programmes. The expansion of internet accessibility, and, most recently, COVID19 restrictions, have encouraged a global move toward and embrace of e-learning. An example of this type of initiative in the gambling education sphere is Deakin University's digital education project. In 2019, Dr Nick Patterson from Deakin University's School of Information Technology received \$250,000 AUD to deliver two free online courses targeting the broader community, and to develop resources for schools and support centres throughout NS (NSW Government, 2019). The two-year project funded by the Office of Responsible Gambling in New South Wales has the primary goal of increasing the societal understanding of responsible gambling strategies and attendant gambling risks and harms by using a social learning platform. A similar initiative is offered by The Royal Society for Public Health (RSPH) in the UK targeting professionals working with vulnerable people. The free e-learning course⁹ has the purpose of training professionals to provide intervention to address risk and harms related to harmful gambling.

In June 2019, the NHS of the United Kingdom announced it would launch its first gambling clinic for children. The service, aimed exclusively at those aged 13 to 25, came about in response to deepening concerns that young people were being increasingly exposed to gambling advertising. It opened alongside the UK's (then) only dedicated gambling addiction clinic in Earl's Court, London. A further 14 NHS treatment centres were due to open across England in 2019-21 (*The Independent*, 27 June 2019). In late 2020 evidence emerged from the first year of the Earl's Court NHS clinic. It showed that up to 55,000 children (mainly boys) between the ages of 11 and 16 had a serious problem, mainly through betting online on football and in online casinos. One teenager who became addicted at 13 subsequently plunged his father's business into bankruptcy after stealing £60,000 to fuel his addiction. One 12 year old used his father's business card to set up an online account and "blew £20,000 in one night's online roulette".

Dr Henrietta Bowden-Jones, director of the National Problem Gambling Clinic said: "We are talking heavy, heavy gambling in a population of young people who clearly cannot afford it." Dr Bowden-Jones said almost a fifth of her patients, aged 13 to 25, had debts of between £20,000 to £100,000. "Only a quarter of these young children and adults had no debt." The average daily spend of patients was £194, while the monthly spend was £2,808 and the average number of days spent gambling each month was 13. She added: "These large sums are a clear indication, now more than ever, we need to address the issue of protecting young people from gambling. The current legislation is not fit for digital purpose and does not protect our children and young people." So far (up to October 2020) 82 children and young people had been referred. More than nine in 10 were male. Dr Bowden-Jones testified before Parliament in October 2020: "A lot of the gambling problems are to do with sport. The normalisation of gambling in sport is leading the majority of our people into early

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⁸ See the website: https://responsiblegambling.vic.gov.au/about-us/

⁹ Understanding and responding to gambling-related harm: A brief guide for professionals https://www.rsph.org.uk/our-services/e-learning/courses/understanding-and-responding-to-gambling-relatedh arm.html

experiences that will forever mark their lives. They're either online doing sport or they're in bookmakers doing horses and sport." (*Sunday Mirror*, 24 October 2020).

School and university programmes are designed to raise awareness and provide information about harmful gambling to young people. These are a recent addition in most jurisdictions and suffer from being under-resourced and are sometimes introduced as part of wider digital education platforms. They are specifically designed as preventative interventions but are being implemented in a rapidly changing digital space, where targeted advertising and aggressive marketing of gambling products to young people often present gambling as glamorous and 'cool'. In June 2020, independent charity YGAM (The Young Gamers and Gamblers Education Trust) launched a new 'Student Hub' website dedicated to providing resources and activities to support students at university and raise awareness on the issue of gambling harms on university campuses. Created with input from current students, the website features interactive elements along with case studies derived from the lived-experience of students, the objective is to highlight the real harms potentially caused by gambling on university campuses (Harrison, 20 November 2020). Universities and student unions have a duty of care towards their students and there is clearly a role for each in raising awareness and fostering harm prevention efforts in a segment of the population which universal surveys demonstrate is particularly vulnerable to gambling harms. The evidence suggests that these programmes can help but only where adequately resourced and as part of a broader societal approach to harmful gambling.

3.4.3 Limits on gambling advertising, marketing and promotion

The expansion of the gambling industry internationally has been accompanied by a concomitant increase in the industry's spend on advertising, marketing and promotion and the significant penetration of gambling products into both traditional and online media platforms. The use by gambling companies of devices such as 'free bets (for new customers), bonus and loyalty schemes, in-play inducements and VIP 'rewards' regimes have all come in for significant scrutiny in international settings and shone a disturbing light on the aggressive practices being employed to bring in new customers and hold on to existing ones. The expansive presence of gambling companies in both traditional and 'new' media has led to concerns in many jurisdictions about the negative social impacts arising from the marketing of gambling products and an effort to circumscribe or limit its penetration. This is particularly the case where gambling is associated with sports. Indeed concerns about the 'gamblification' of sport have led to increasing curbs on advertising, marketing and promotion of gambling products in many jurisdictions, and, in some cases to outright bans on gambling sponsorship of sports. The trend appears to mirror earlier efforts to comprehensively remove alcohol and tobacco advertising from sports.

In January 2019, Italy implemented a blanket prohibition on gambling advertising and sponsorships (including television, radio and the internet and including even indirect product placement), with the specific aim of limiting the further spread of harmful gambling. The ban was the brainchild of Lugio Di Miao, then Deputy Prime Minister and leader of the Five Star Movement, after Italy's public health agency, Istituto Superiore della Sanità (ISS), released the results of a large-scale survey commissioned by Italy's gambling regulator (AAMS) into the scope of the nation's gambling activities, both on and offline (Department of Justice and Equality, 2019). The survey found that 30% of problem players choose to play based on advertising they had seen or heard, which suggested that the ban might have an impact in this regard. It is estimated that there are currently 1.5 million problem gamblers in Italy of which 70,000 are minors (for whom gaming is legally prohibited) (Department of Justice and Equality, 2019). The survey was conducted with the aim of establishing a broad picture of the dynamics contributing to the development of problematic behaviour (Department of Justice and Equality, 2019). The ban was fiercely opposed by the gambling industry which had succeeded in having online gambling comprehensively deregulated in Italy as early as 2006. Serie A football clubs overnight lost over €20 million in annual sponsorship deals (McCarthy, 29 January 2020). The ban entered fully into force on 14 July 2019.

Belgium has also recently introduced new regulations surrounding the promotion and advertising of gambling products. Legislation passed in October 2018 restricted online gambling advertising. Online casino operators will be restricted to promoting services on government-approved websites, with constricted messaging. Advertising of sports betting on television is restricted to after the 8pm watershed with no promotion allowed during the broadcast of live sports events. A ban on celebrity and/or athlete promotion of gambling products has also been part of Belgium's modified approach to advertising and promotion (Department of Justice and Equality, 2019). In the Netherlands, the upcoming 'Remote Gambling Act' which will come into effect on 1 March 2021, includes a measure which will bar the advertising of gambling-related content between 6am and 9 pm, during which time gambling companies cannot contact gamblers with free promotion offers. This measure is part of the new conditionality regime for licenses (Affiliate Insider, 2020). Spain also made significant moves in 2020 to put in place stringent new rules on gambling advertising, with Covid 19 playing an important role in the tightening of regulations. Gambling operators will no longer be permitted to have branding on sports teams' shirts, and will also be prohibited from purchasing naming rights to stadiums, event spaces or competitions. An earlier edition of the new regulations contained exceptions on the limits to advertising so that gambling operators could advertise around live sports events taking place between 8pm and 5am and only limited betting company sponsorship. Those exceptions have now been removed. TV and radio advertisements for gambling will now only be permitted between 1am and 5am. These changes were greeted with dismay by the gambling industry in Spain (iGB, 9 July 2020).

Norway has also moved to change its gambling advertising regulations. From 1 January 2021, the Norwegian Media Authority has the authority to prevent overseas gambling entities advertising their products in Norway. The Norwegian Ministry of Culture has also tightened guidelines for domestic operators *Norsk Tipping* and *Norsk Rikstoto*, limiting their advertising to "what is necessary to channel consumers away from unlicensed private operators and towards the two state-owned operators". The Norwegian government directly acted upon evidence assembled by the University of Bergen's 'Extent of Gambling and Computer Gambling Problems in Norway in 2019', which showed an increase in gambling problems compared with the previous survey from 2015, in part attributed to increased advertising and marketing (Mulligan, 21 December 2020).

In 2018, Australia introduced a 'whistle to whistle' ban on gambling advertising, from five minutes before until five minutes after sporting events broadcast between the hours of 05:00 and 20:30. The Australian Communications and Media Authority (ACMA) will have powers to determine programme standards for gambling advertisements that apply to certain broadcasters and pay-tv providers. The media standards body will set standards for advertising on broadcast media. The Authority introduced new rules which came into effect in September 2018 which allowed for close monitoring of the adherence to these rules by gambling companies. These tighter regulations extended the ban on adverts to sports streaming platforms between 5am and 830pm. The rules state that no gambling advertising or promotion is allowed during play or during breaks in play (such as time outs or half time intervals) and no promotion of gambling products by representatives of gambling entities, 30 minutes before or after a live event. In addition, broadcasters are not allowed to promote any gambling content that may be socially irresponsible (ACMA, 2020). Individual sports organisations such as Cricket New South Wales have also imposed significant new restrictions on gambling advertising, despite Cricket Australia (Australia's governing body for cricket) being in partnership with a major gambling company (bet365) (Gardner, 23 October 2020)

In the United Kingdom, a raft of measures has recently been introduced via a web of interconnecting enforcement institutions and agencies. Gambling advertising standards are issued by the Committees of Advertising Practice (CAP) with a significant compliance role for its sister-organisation, the Advertising Standards Authority (ASA). The Competition and Markets Authority (CMA) also plays a role in ensuring that gambling adverts do not mislead customers. The UK Gambling Commission

limits the issuing of licenses to those entities that do not mislead customers about 'free bets', loyalty or bonus promotions and has cracked down significantly on what it regards as misleading advertising, in particular promotions which glamourise gambling. In 2017, for example, the Gambling Commission fined one operator £300,000 for misleading advertising on its own and three affiliates' websites (Department of Justice and Equality, 2019). GVC (the owner of Ladbrokes) was fined £350, 000 after one of its entities, FoxyBingo, "repeatedly mislead consumers" with offers of free bonuses (Guardian, 14 February 2018). Subsequent to this, the Gambling Commission introduced changes to "strengthen requirements in key areas" and ensure compliance with UK advertising codes became a new "social responsibility code" (Gambling Commission, 2019b). This meant that gambling operators that breach any aspect of the code now face significant financial penalties for failure to fulfill obligations. One key target was adverts "that create an inappropriate sense of urgency" including 'bet now' offers during live events (Guardian, 14 February 2018). The most notorious among this genre of adverts was that fronted by veteran actor Ray Winstone for bet365, repeatedly urging people to 'get on' as live events progressed. This form of 'celebritisation' of gambling has now been severely limited and Ray Winstone's face has disappeared from advertising platforms. Also amongst the new requirements was a measure preventing gambling companies from engaging in direct electronic marketing of products without the express consent of the customer. The Commission also expressed concern that not enough was being done about the imagery and wording of gambling products that were likely to appeal to children (Gambling Commission, 2019b).

Gambling accounts for up to £1.5 billion per annum in UK advertising sales. In November 2018 the largest broadcast operator, Sky TV, announced a significant cut in the number of gambling adverts its outlets would broadcast in future. This self-restrictive move came about after sustained concern in the UK about the negative impacts of gambling and rising concern about addiction. Sky committed to imposing a limit of one gambling advert per commercial break on its channels after August 2019 (as opposed to a maximum of four adverts previously). All forms of gambling are subject to the new rules. The restrictions are expected to cost Sky tens of millions of pounds in lost revenue. Sky told the House of Lords inquiry that in August 2019, the first month of the new football season, saw a drop of 84% in the number of TV adverts placed before the 9pm watershed (House of Lords, 2020). From 2020, Sky allows viewers to exclude gambling from commercial breaks entirely. Technology built into its new set top boxes and those of cable operator Virgin Media will insert alternative advertising in its place (Department of Justice and Equality, 2019). Given that Sky broadcasts throughout Ireland, it is highly likely that these changes will be implemented in the Irish broadcast market.

UK-based betting companies have supported these restrictions on television advertising before 9pm. A research study commissioned by Gambleaware in late 2018 found that of the total £1.5 billion UK advertising spend by gambling companies in 2017, some £1.25 billion was targeted at social media and online platforms, whereas only 20% of the total was spent on TV advertising (Department of Justice and Equality, 2019; GambleAware, 2018; IGRG, 2020). Of that almost half a billion pounds was spent on promoting sports betting. In late 2018 the Industry Group for Responsible Gambling (IGRG), the collective body for the five main UK gambling trade groups, announced the introduction of a voluntary pre-watershed 'whistle-to-whistle' ban on betting adverts during televised sport, to be introduced in summer 2019 (with exemptions for horse racing and greyhound racing). Modelled on the scheme introduced in Australia earlier that year, and mentioned above, betting adverts are banned from five minutes before to five minutes after an event concludes (Department of Justice and Equality, 2019). No gambling advertising is shown during 'whistle to whistle' live televised sport before the 'watershed' of 9pm. Flutter decided to remove adverts for Paddy Power and Betfair on perimeter LEDs and interview boards at all English and UK football grounds. GVC has gone further in ending all shirt sponsorship as well as perimeter advertising (House of Lords, 2020). The IGRG introduced these changes through a revised code for socially responsible advertising. New changes

came into effect on 1 October 2020 (IGRG, 2020). Many other European jurisdictions introduced bans on gambling advertising and promotion in response to the arrival of Covid-19 in early 2020.

Because gambling advertising is now overwhelmingly focused on social media and the online world, the pace at which national regulators have sought to impose responsible advertising and promotion measures has trailed significantly behind the capacity of the industry to develop new, "dynamic" products. The June 2020 UK House of Lords report showed that the gambling industry spends about £1.5 billion on advertising in the UK and that 60% of profits come from just 5% "who are already problem gamblers, or at risk of becoming so" (House of Lords, 2020) Even after committing to a Covid-linked suspension of advertising, several large companies found a loophole and employed 'safe gambling ads' which were "simply commercials disguised as social responsibility messages" (Wired, 4 Dec 2020). The BBC interviewed one recovering gambling addict in May 2020 who attested to "being baited by the gambling companies with ads that nudge him to take a spin on the roulette wheel or have a go at the slots" (BBC News, 2 May 2020. The use of bonuses, loyalty and/or VIP schemes and 'bet to view' inducements has also emerged as a key part of the strategy of gambling companies for holding on to valuable customers. Advertising is a key element of this strategy with social media used to retain the attention of problem gamblers and special treatment given to those who gamble large sums. VIPs constitute a small select group, comprising only about 5% of customers but they provide up to half of the profits of major gambling operators. 8% of VIP clients are estimated to be problem gamblers. VIP clients are - typically - wined, dined and provided with financial incentives to keep betting. They constitute a significantly disproportionate group within the constellation of regular gamblers (Wired, 4 Dec 2020).

There is a growing movement across Europe to ban all forms of inducements, including 'free bets', bonus rewards, loyalty/VIP programmes and 'bet to view' streaming schemes as part of a wider effort to limit the amount of advertising and promotion of gambling products across both 'traditional' and 'new' media platforms. While many of these regulatory innovations are in their infancy, the urgency attached to patterns of harmful gambling linked to aggressive marketing and promotion by gambling operators, is compelling enhanced actions to curb, limit or outrightly ban the marketing products viewed as most dangerous to consumers. The regulatory landscape is intimately bound up with legislative change as governments seek to impose order on both analogue and digital forms of gambling and protect consumers from harm.

3.4.4 National Legislation, Regulation and Sanctions

The increasing presence of independent regulatory bodies in international jurisdictions has undoubtedly led to a more interventionist set of responses towards harmful gambling at public policy level. In some countries, the very arrival of new regulatory bodies and the threat of potentially coercive action they carry, has, in itself prompted gambling companies to step up their responses to specific gambling harms. Where instances of poor practice or failures by gambling companies to live up to their obligations towards customers are cited by the media or members of parliament, the pressure on gambling companies can increase significantly. That has prompted some companies to 'get ahead of the curve' on at least some issues that fall within the purview of gambling regulators.

The UK Gambling Commission (UKGC) has been foremost among these regulatory agencies taking a muscular approach to licensing and regulation. This is important in the Irish context because the 2019 Irish government inter-departmental report clearly states that the UK model is the one most appropriate to Ireland. The UKGC has issued a series of fines to gambling companies for what it deems serious breaches of obligations. These fines amounted to almost £20 million in 2018 for a range of transgressions, including failing to protect customers and failing to uphold industry anti-money laundering obligations. This figure was an increase on the £18.4 million fines issued in 2017 and just £1.7 million in 2016. One third of this amount (more than £7 million) was paid by

Daub Alderney which runs a number of online sites covering bingo, slots and casino gaming, including Lucky Pants Bingo and Kitty Bingo. Paddy Power/ Betfair (now renamed Flutter) was fined £2.2 million for a raft of failures, including allowing one punter to gamble almost £900,000 with money stolen from a dogs home in Birmingham (The Irish Times, 16 October 2018). The Gambling Commission said it had found repeated examples of customers being allowed to gamble significant sums of money in short time frames, "way beyond their personal affordability and without any intervention from the operator". (The Independent, 27 June 2019). Most recently, Boylesports was fined £2.8 million for a series of failures on money laundering. The operator was found to have breached the rules on its boylesports.com and Boylecasino.com websites by not putting appropriate risk assessment procedures in place (Racing Post, 2020). This was the latest in a series of fines issued by the Gambling Commission. In March 2020, it fined the online betting firm, Betway, a record £11.6 million for accepting stolen money from 'VIP' customers, some of whom "were demonstrating clear signs of gambling addiction". Betway accepted £8 million in deposits over four years from one customer, who lost £4 million. This was despite the fact that the customer's account was flagged 20 times as a potential risk. Another customer deposited £1.6 million and lost more than £700, 000 over three years, despite being unemployed. This was the latest in a series of failures at the company (Guardian, 12 March 2020).

In April 2020 the Gambling Commission fined Caesars Entertainment the even greater sum of £13 million for failures related to the company's 'VIP' schemes. Three senior managers at the company had their license to run a gambling entity withdrawn. Such 'VIP' schemes are widely used across the gambling industry and have come in for particular scrutiny and criticism in the UK because of the incentives they provide to customers to keep gambling while losing money. Caesars was also found guilty of failing to uphold anti-money laundering policies (*The Guardian*, 2 April 2020). In 2017 the online casino 888 was fined £7.8 million for what the Gambling Commission termed "outrageous failures" after 7,000 customers who had voluntarily excluded themselves from their accounts were still able to access their accounts (*The Guardian*, 31 August 2017). One customer was allowed to place more than 850,000 bets worth £1.3 million in a single year, with money stolen from their employer (*The Guardian*, 12 March 2020). Self-exclusion mechanisms are tools designed to enable people to self-exclude themselves from gambling platforms.

Although the UK Gambling Commission has demonstrated a real willingness to impose sanctions on gambling companies which fail to meet their obligations, it is worth noting that the total amount of fines levied remains somewhat insignificant. In 2018 these amounted to just 0.13% of the industry's £14.5bn of profits and only 1.6% of the amount that gambling-related harm is estimated to cost the UK annually, in additional health service and criminal justice costs, as well as welfare claims. Adam Bradford of the Safer Online Gambling Group thus described the 2018-19 fines as "loose change" compared to the profits of Britain's gambling firms. "Addicts are collateral damage for these companies; a point on the balance sheet. This is not a harm prevention report, it's a smokescreen. There needs to be a quicker route to revoking licences where harm has been caused." In addition, he argued that the Gambling Commission was "not fit for purpose" and called for much tougher prevention methods rather than a focus on fines levied after lives had been "turned upside down". "These fines are just false economics to me," he said. "They are coming from profits of companies that are doing wrong" (*The Independent*, 27 June 2019). The review of gambling legislation in the UK in 2021 is expected to recommend an even more muscular enforcement regime going forward.

2020 saw significant advances in regulation of the gambling industry in other jurisdictions across Europe. The Netherlands is currently moving towards the legalisation and regulation of online casinos in 2021. Germany is doing something similar. There, the state of Schleswig-Holstein has been the only Länder (region) where online gambling has been legal in recent years. For this reason, many German gambling entities have been licensed in Schleswig-Holstein. The landscape will change significantly in 2021 after all regional entities agreed to change the approach to online regulation.

There will be a new state treaty and overarching regulatory body that will hold responsibility for regulating online casinos and other betting activity. These new regulations are due to come into force in July 2021 (Casino Life, 2020). The new German model is to some extent based on the Spanish Gambling Act (known as Law 13/2011). Amongst other things the Spanish reform is perceived to have led to a significant increase in taxable revenue and German legislators expect a similar dynamic once the new law is enacted. The Dutch government will establish a new licensing system under the long-awaited 'Remote Gambling Act' which will come into effect on 1 March 2021. The conditionality regime for licenses includes a demand that gambling companies create a policy on addiction prevention. Spain's sweeping changes to its legislative base in 2020 concluded on 3 November 2020 when a Royal Decree on the Commercial Communications of Gambling Activity came into force. The new regulations introduced stringent curbs on advertising of gambling products and banned sports sponsorships by gambling companies. Advertising on TV and radio will be limited to the hours between 1 am and 5am, a measure that also extends to YouTube and other social media channels. Age verification measures have been beefed up to try and protect younger people from gambling harms. Promotional bonuses were severely limited in scope and a new, unified self-exclusion register put in place. The Spanish authorities defended these new regulations by claiming that the gambling advertising spend had tripled in Spain over the previous four years, and that new evidence showed a significant increase in gambling by people between 18 and 25 years old. Whereas in 2017 the government stated that 28% of new players came from that age cohort, this increased to 40% by 2019 (Harrison, 4 November 2020).

Summing up developments internationally in the sphere of regulation, we have identified a clear pattern of governments updating old and outdated legislation and introducing new forms of regulation of the gambling industry. The move from 'analogue' forms of gambling to an increasingly digitised range of activity has left governments trailing behind the industry and seeking to catch up with technological developments, whilst protecting consumers from predatory advertising, marketing and promotion of harmful gambling products. While some parts of the industry have made some efforts to put in place responsible policies to interdict gambling harms, these have been found to be insufficient to prevent gambling harms. As a result regulators at regional and national level have become increasingly forceful in the ways they exercise oversight and scrutiny of the industry. The evidence base suggests that regulators need to be absolutely independent of both state and industry influence and prepared to take a muscular approach to the industry. To this end national regulatory offices must have within their arsenal the fullest range of coercive powers, including the power to impose significant financial sanctions on industry operators who fall short of honouring their obligations under the law and the power to revoke licenses.

3.4.5 Credit-Card Gambling Ban and Payment Blocking

International research shows that ready access to credit within gambling venues and online often incentivises problem gamblers to go beyond acceptable levels of risk (Oakes, Pols and Lawn, 2020). Credit card bans and payment blocking measures constitute another initiative introduced in different countries, in recent years, designed to protect gamblers and minimise gambling harms. The credit card gambling ban has the primary purpose of blocking gambling-related transactions when someone tries to pay for a gambling transaction with their credit card. By doing so, the ban prevents individuals from gambling with money which they (potentially) do not have. Variants of this approach are in evidence in an increasing number of countries and this kind of instrument supporting responsible gambling is being utilised as part of a broader matrix of preventative policies.

The UK is the only jurisdiction which has implemented a complete (offline and online) credit-card gambling ban. Research by the UK Gambling Commission (UKGC) demonstrated that of the approximately 10.5 million people in the UK who gamble online an estimated 800,000 do so via

credit cards, and about 22% of online gamblers using credit cards to gamble (approximately 175,000) were classified as problem gamblers, "with even more at some risk of harm" (Gambling Commission, 14 January 2020). Following reviews on gambling matters and public consideration between 2018 and 2019, the UKGC announced a ban on gambling operators allowing consumers in the UK to use credit cards to gamble. This policy came into effect in the UK on April 14th, 2020 and encompasses both online and land-based gambling. Previously individuals had to contact different gambling providers to block their accounts (e.g., self-exclusion), had to buy gambling-specific blocking software (e.g., Gamban, Gamblock, Betfilter and BetBlocker) or had to use banking apps that block gambling transactions. People who want to place a bet now have to either use a debit card or deposit cash in an online account. The ban is intended to provide an additional layer of protection to vulnerable gamblers against potential financial harm caused by excessive gambling.

In Australia, each state government introduced restrictions on the use of credit cards for gambling in casinos, on racetracks and poker machines between 2001 and 2003 (Productivity Commission, 2010). And while the general trend is one of greater restrictions being imposed over time, the operational model is still something of a patchwork quilt, reflecting differences between state and federal approaches. The tighter range of restrictions gradually introduced meant individuals could not use credit cards to gamble or to make cash withdrawals at ATMs or EFTPOS (Electronic Funds Transfer at Point of Service) in gambling areas of licenced venues. Moreover, in February 2018, the federal government prohibited online gambling operators from offering or providing (house) credit to individuals as part of the National Consumer Protection Framework for Online Wagering (DSS, 2018). Although gamblers can still use some credit cards for gambling online, via betting apps and for purchasing lottery tickets in Australia, some financial institutions have blocked gambling on the credit cards they provide (ABA, 2019). In July 2019, for example, Macquarie Bank became the first major bank to prevent all credit card transactions on gambling and lottery purchases. 11 Other banks following this initiative are Citibank, Suncorp, Bank of Queensland, Virgin Money and American Express (ABA, 2019). National Australia Bank (NAB) instead provides a choice to block (offline and online) gambling transactions on NAB credit and debit cards via its mobile app or website. 12 Australia and New Zealand Banking Group Limited (ANZ) decided to decline any transactions associated with gambling or gaming on a credit card with a balance at, or above, 85% of their credit limit. 13 Other gambling-specific bank measures include tools to help customers track their spending, trained customer support teams, and referrals to support services. The Australian Banking Association (ABA) has recently opened a public consultation to decide if all banks should implement a complete credit-card ban. While ABA is still considering all responses, opposition has emerged in the gambling industry and from lottery retailers and newsagents, 14 who argue that this measure would have significant adverse effects on their business (ABA, 2019).

In New Zealand, the Department of Internal Affairs (DIA) is similarly examining the introduction of a comprehensive ban on the use of credit cards for online gambling (Department of Internal Affairs, 2019). In mid-2019, the DIA opened a public consultation in the form of a public discussion document on online gambling in New Zealand. The primary purpose was to update the current gambling law for the new digital age of gambling. Presently the New Zealand law prohibits remote

¹⁰ In the UK, the financial institutions that provided apps that block gambling transactions were Monzo, Starling, Barclays, Lloyds, Santander, Royal Bank of Scotland (RBS), HSBC, Halifax and NatWest.

¹¹ Macquarie Bank, How do gambling and lottery restrictions on my credit card works, Visited November 2, 2020. https://help.macquarie.com/article/How-do-gambling-and-lottery-restrictions-on-my-credit-card-work

¹² National Australian Bank, https://www.nab.com.au/personal/customer-support/gambling-restriction

¹³ ANZ (2019) Gambling guidelines.

https://www.anz.com.au/personal/credit-cards/using/rates-feesterms/gambling-limits/

¹⁴ The Australian lottery and newsagents association stands up for your business again.

https://www.alna.net.au/the-australian-lottery-and-newsagents-association-stands-up-for-your-business-again /

interactive gambling (e.g., Internet gambling), except for the Lotteries Commission (government-owned Lotto) and the Racing Industry Transition Agency (TAB). However, many New Zealanders gamble online with operators based outside New Zealand (e.g., casino websites, sports betting applications). The DIA's document focused on the potential for banning the use of credit cards for gambling online (either blocking their use on websites not licensed in New Zealand or banning their use entirely) and geo-blocking access to overseas gambling sites. The consultation period closed in September 2019 and the DIA has not released its decision at the time our report was finalised in early 2021. In the meantime, the New Zealand Bankers Association (NZBA) argued that restricted access to online gambling sites through ISPs would have a more significant impact than banning credit card use.¹⁵

In Norway, an online gambling payment ban came into effect at the beginning of 2020 (iGB, 12 December 2019; Lotteritilsynet, 2020). This measure is different from a credit-card ban as it blocks all payment transactions only with unauthorised and overseas online gambling operators. The ban applies to deposits from gamblers to overseas gambling operators, most commonly via credit card. The ban also applies to the payment of winnings to the gambler's bank account. Initially, the Norwegian Gaming Authority (Lotteriog Stiftelsestilsynet) enforced a ban on payments to and from gambling operators back in 2010. However, the ban was deemed ineffective as most foreign gambling companies introduced payment solutions to evade the ban. Some of these solutions included the use of third-party payment services as well as the use of payment identity masking technology. The new law addresses this situation by empowering Norwegian banks to block transactions based on company names and by targeting specific bank account numbers. In Germany, the federal government has adopted a different approach to deal with unauthorised and cross-border gambling sites. The German state of Lower Saxony (Niedersachsen) is banning payment providers which process transactions related to illegal online gambling operators. In June 2019, the government, for the first time, issued a prohibition order in relation to PayPal for online gambling (iGB, 21 August 2019). A new German 'Interstate Treaty' will take effect on 1 July 2021 under which (for the first time) certain types of online gambling will become licensable. It will need to be approved by the European Commission and by 13 of Germany's 16 Lander (states) by the end of March 2021 in order to come into force on the planned date of 1 July. Restrictions on credit card use are included in the consumer protection measures.

Although consumer protection and harm minimisation are the main arguments usually deployed in support of restrictions on online gambling, another concern is the potential for avoidance of taxation (Gainsbury et al., 2018). Some online gambling operators avoid paying taxes by basing themselves offshore. Norway, Germany, Australia and New Zealand only permit access to licenced operators, mostly stated-owned or state-affiliated gambling companies. However, the regulation of online gambling represents a great challenge for governments. Though it is illegal for unauthorised operators to provide gambling services in these countries, it is not illegal for locals to participate in gambling via unregulated gambling sites. Thus, some governments are considering the credit card ban and payment block as a solution to limit the access of illegal operators. The Australian federal government has requested Internet Service Providers (ISPs) to block access to illegal online gambling websites in Australia. In addition, Canberra is collaborating with other gambling regulators and enforcing prohibitions on those providing illegal gambling services or those working with illegal gambling companies (e.g., third parties) (ACMA, 2018). In the UK, in contrast, the government has opted for an open licensing system. It means that the government will tax both the gambling

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Submission to the DIA consultation from NZBA, https://www.nzba.org.nz/wp-content/uploads/2019/09/190930-NZBA-submission-DIA-online-gamblingconsultation.pdf

companies based in the UK and those located overseas on their gambling profits from UK customers. 16

The (sometimes chronic) misuse of credit by problem gamblers involves three parties: the gambler, the gambling operator and the financial institution which facilitates credit-based gambling activity. A combination of updated national legislation and the oversight activities of activist regulatory bodies has brought significant change in many jurisdictions, with the United Kingdom leading the way in introducing an outright ban on the use of credit cards for gambling, and many other countries implementing either partial or more ambitious limitations on gambling via credit. These measures seek to protect consumers from harm and to a large extent have been accepted by gambling operators as an important tool for interdicting excessive financial losses on the part of customers. Our research suggests the UK model of a comprehensive ban on credit cards for gambling constitutes an appropriate model for Ireland to follow as a new regulatory regime is put in place in 2021.

3.4.6 Self-Exclusion Schemes

Self-exclusion measures are designed to help individual gamblers to stop gambling for at least six months – whether online or in licensed premises - and to be supported in this process. While it is up to the gambler to stick to the exclusion commitment, gambling companies are now obliged to uphold such agreements in many international jurisdictions. Self-exclusion is one of the most popular gambler protection measures now in use in these settings. Canada, Australia, the United States and most European countries have all encouraged or enforced the development and implementation of self-exclusion initiatives. Self-exclusion is a voluntary commitment, in which the gambler agrees to exclude themselves from gambling. In practice, individuals ask the operator to enforce exclusion by setting up procedures to identify self-banned gamblers and denying them the opportunity to gamble. Self-exclusion programmes across the world are diverse due to the heterogeneous nature of the industry, the differential pace of industry developments and different regulatory and jurisdictional environments.

Gambling Compliance classifies these programs in two categories: operator level and national level¹⁷. At operator level, each gambling operator has its own self-exclusion regime. At the national level, the relevant regulatory authorities regulate the self-exclusion for multiple operators by region or the entire country. National self-exclusion registers of gamblers have become more common in recent years. The *operator* self-exclusion approach places primary responsibility on the individual. In contrast, the *national* self-exclusion registers reflect a government commitment and a more active public policy role aimed at addressing society's gambling-related problems. The nationwide schemes ban individuals from gambling in different venues and various types of gambling. In addition, they are increasingly making participation mandatory for all licenced operators.

National self-exclusion programs exist in Australia, Belgium, Denmark, Estonia, France, Germany, Italy, Latvia, Lithuania, Portugal, Slovakia, Spain, Sweden, Switzerland and the UK. The Czech Republic was the latest EU state to introduce a national gambling exclusion register in September 2020. Licensed operators in the country will also be required to join the programme and begin

General Betting Duty, Pool Betting Duty and Remote Gaming https://www.gov.uk/guidance/general-betting-duty-pool-betting-duty-and-remote-gaming-duty

¹⁷ Gambling Compliance, https://gamblingcompliance.com/infographic/self-exclusion-requirements-europe

¹⁸ SRIJ, Self-Exclusion, https://www.srij.turismodeportugal.pt/en/responsible-gambling/self-exclusion/

¹⁹ Spelpaus.se https://www.spelpaus.se

²⁰ References to Switzerland's nationwide exclusion register are also found in Motka et al. (2018) and Lischer and Schwarz (2018). Also in webpage ESBK (Federal Casino Commission), https://www.esbk.admin.ch/esbk/de/home.html

²¹ Multi Operator Self-Exclusion Scheme, https://self-exclusion.co.uk/

blocking access to their services in early 2021. Apart from players who sign up to the scheme voluntarily, individuals can also be added to the register by a third party if they are being treated for problem gambling or are gambling in an unsustainable way; are declared bankrupt; or are receiving welfare payments from the Czech state (iGB, 2020). The Netherlands Gambling Authority (Kansspelautoriteit) has also confirmed plans to implement a nationwide self-exclusion system in the form of a 'Central Register for Exclusion of Gambling' (CRUKS) by March 1, 2021 (O'Boyle, 23 October 2020). A player can access Cruks through DigilD, a form of online identification that allows Dutch residents to access online services and government websites in the Netherlands. In order to register, they must input their public service number (BSN). If the player is not a Dutch citizen, they must instead add details of foreign identity documents such as a passport. Finland is trialing a national self-exclusion model in early 2021, underpinned by a mandatory national ID card verification with a full rollout to follow later in the year. Spain has also moved to improve its self-exclusion models. In September 2020 representatives of Spain's 17 autonomous communities (regions) agreed to integrate each region's self-exclusion scheme for gambling, to better coordinate player protection efforts throughout the country. Spain's gambling regulator, Dirección General de Ordenación del

Juego (DGOJ), has maintained an online self-exclusion database since 2015. The consolidation of what was something of a patchwork quilt of regional self-exclusion models is the latest measure

designed to increase player protections for gamblers in Spain (Noy, 23 September 2020).

National self-exclusion models differ in terms of scope. Some programs restrict all forms of gambling, while others allow only some types. In Australia, the National Self-Exclusion Register,²³ only covers online gambling. In Portugal, SRIJ (Serviço de Regulação e Inspeção de Jogos) allows individuals to exclude themselves only from gambling websites and casinos. In Sweden, spelpaus.se (the Swedish self-exclusion register) includes all online gambling services, in-person betting, bingo facilities, gambling machines and at all land-based casinos operated by Casino Cosmopol (iGB, 17 February 2019). The trend now is towards much more comprehensive exclusion schemes encompassing both online and offline gambling platforms. National self-exclusion registers are maintained either by the relevant regulatory authorities or by voluntary organisations. For instance, the Register of Voluntary Excluded Players (ROFUS) is the Danish Gambling Authority's register of self-excluded gamblers, for those who wish to self-exclude temporarily or permanently from online gambling and all physical casinos in Denmark. In the UK, different independent organisations administer each form of gambling. For example, SENSE is the scheme for all land-based UK casinos, GAMSTOP for online gambling and Bacta for arcades and adult gaming centres. At the same time, all the UK organisations participate in the multi-operator scheme (MOSES),²⁴ which allows individuals to make a single request to self-exclude themselves from the same type of gambling within their area.

Some peer jurisdictions are now moving towards a so-called 'single customer view' approach to the exclusion of problem gamblers. This encompasses multiple gambling companies pooling information about potentially vulnerable customers and providing these customers with a capacity to self exclude from different companies across both land-based and online platforms. In the UK, GAMSTOP was developed by the industry and is now a licensing requirement. It can take up to 24

²² Kansspelautoriteit, https://kansspelautoriteit.nl/

²³ At the end of 2019, Australia government approved a new National Self-Exclusion Register which will be implemented by the Australian Communications and Media Authority (ACMA) Alongside the new legislation, the government has also introduced the Interactive Gambling Amendment (National Self-exclusion Register) Bill 2019, which will impose a levy on persons who provide licensed interactive wagering services.

²⁴ Multi-operator self-exclusion schemes (MOSES) evaluation and impact assessment principles. Gambling Commission, Available at <a href="https://www.gamblingcommission.gov.uk/for-gambling-businesses/Compliance/General-compliance/Social-res-ponsibility/Self-exclusion/Multi-operator-self-exclusion-schemes-MOSES-evaluation-and-impact-assessment-principles.aspx

hours for the mechanism to become effective once initialled by the customer. After this period, the gambler will be excluded from gambling for variable periods (6 months, 1 year or 5 years, depending on the option chosen). Once the minimum duration period has elapsed, the self-exclusion will remain in operation unless and until the person voluntarily returns to GAMSTOP to ask for it to be removed (Department of Justice and Equality, 2019). From 31 March 2020, all Gambling Commission licensed online operators in the UK (except lotteries that don't offer instant win games) are required to participate in GAMSTOP. Registration with GAMSTOP allows a consumer to self-exclude from all such operators with a single request (Gambling Commission, 2020). There are some concerns in the UK about the flaws which have been highlighted in the GAMSTOP scheme: despite registering with the scheme, in an investigation by the BBC, gamblers were able to make bets online by simply changing their user details. There have been numerous recent reports from many addicted gamblers who were easily able to get around the system (BBC news, 13 January 2019).

In issuing record fines in 2018-19 on gambling operators for failing to uphold, amongst other rules, those on self-exclusion, the UK Gambling Commission's figures show that this system is frequently ineffective. Gambling operators recorded 1.6 million incidents in 2018-19 where people had signed up to exclude themselves and 135,700 times when those people were able to gamble anyway. Figures obtained by *The Independent* under the UK Freedom of Information laws show that the Commission received 1,797 complaints from individuals about self-exclusion between the start of 2018 and May 2019. The Commission carried out more than 160 investigations into the conduct of gambling companies in 2018-19 resulting in a variety of financial penalties being levelled. The Commission noted signs of progress and "pockets of developing good practice" in the United Kingdom but stated that much more needs to be done to ensure that gambling firms are committed to ensuring the welfare of their customers (*The Independent*, 27 June 2019). The Gambling Commission engaged with operators and tech companies in 2020 to test a 'single customer view' model, where customer activity with all gambling operators may be seen. The Chief Executive, Neil McArthur argues that this model would be a true 'game changer' in respect of offering much more robust customer protection (O' Boyle, 18 November 2020).

In New South Wales, Australia, the state government has engaged in extensive consultation with the aim of introducing new measures of enhanced self-exclusion. These include a potential legal obligation for clubs and pubs to actively identify and assist any players (of poker machines) demonstrating signs of problem gambling, with a requirement for a trained member of staff on duty to monitor all gambling devices and activity. Interestingly, this proposal also goes further than any jurisdiction in Europe in providing a mechanism for involuntary self-exclusion of gamblers, whereby family members impacted by harmful gambling could apply to have an individual banned from venues hosting gaming machines (Harrison, 23 October 2020).

In a review of self-exclusion programmes internationally, Gainsbury (2014) found that most participants experienced benefits from such schemes, including reduced gambling frequency, decreased gambling expenditure, and increased quality of life. Though self-exclusion mechanisms indicate positive benefits, research also found that most problem gamblers are not utilising self-exclusion programs. Gainsbury (2014) made a number of recommendations to reduce barriers to programme entry including: the provision of clear information about self-exclusion programmes, a more effective registration process, a range of periods for exclusion and the removal of all self-excluded persons from the advertising and promotion mailing lists of gambling companies. Another important finding is that self-exclusion programmes are not entirely effective in preventing individuals from gambling in venues from which they have not excluded themselves, or from participating in other types of gambling (Gainsbury, 2014, Motka et al., 2018, The Independent, 27 June 2019). Operators find it difficult to verify self-excluded gamblers in the absence of clear regulation and effective policies (Gainsbury, 2014; *The Irish Times*, 16 October 2018). Motka et al.

(2018) suggest that self-exclusion programs should allow individuals to be able to exclude themselves from multiple venues within a single enrolment.

The case for a 'single customer view' approach and comprehensive models of exclusion (both voluntary and involuntary) are increasingly being made by advocacy groups and by national regulators. Evidence about the efficacy of such models is being accumulated in real world settings where the individual gambler, her/his family, the gambling operator and the state play different roles in triggering exclusion. The United Kingdom again provides an excellent model that might be successfully emulated in Ireland. As with other mitigation policies the efficacy of such tools will depend on the oversight and authority wielded by the independent regulator when that body comes into being.

3.4.7 Pre-Commitment-Limit Setting (money and time)

The pre-commitment system is a mechanism whereby the gambler sets limits of/on money and time before commencing gambling (Williams et al., 2012). It is considered a socially responsible tool as it helps gamblers to control their spending (Wood and Griffiths, 2010). Pre-commitment usually refers to gambler-initiated limits as part of the operator's responsibility program, but there are also pre-commitment systems built into some legislative interventions (Williams, 2010).

International jurisdictions have implemented different models of pre-commitment systems. These models may be full, partial, mandatory or voluntary (Ladouceur et al., 2012, Thomas et al., 2016). Full and partial systems involve securing a gambler's registration for gambling (e.g., using a card or logging on with an ID). A full or maximalist system requires all gamblers to register to gamble but they are not necessarily required to set limits. In contrast, a partial system gives the gambler a choice to either gamble within a registration system or gamble outside one. Mandatory systems require all people to set limits on money or time, while voluntary systems allow gamblers to choose whether they want to set limits or not. Based on these options, pre-commitment systems have been implemented in different ways.

As of January 2021, Norway and Sweden are the only jurisdictions which have implemented full systems. Norway has introduced a full, mandatory, (monthly) loss limit-setting system for most forms of gambling (online gambling, sports betting and Electronic Gaming Machines), except lotteries and scratch cards (Williams, 2010, Williams et al., 2012, Thomas et al., 2016). In this system, all gamblers must register and have a smart card with ID to participate with *Norsk Tipping* (the Norwegian state monopoly for lottery, sports betting, EGMs and online gambling). The smart-card customer identification system also allows gamblers to indicate their personal time and spending limits. However, personal limits must be set at a lower level than the mandatory "global" (i.e., jurisdiction-wide) loss limit which is NOK 20,000 (iGB, 12 April 2019; Auer et al., 2020) (approximately EUR 1,700) per month. In Sweden, the government-owned company *Svenska Spel*²⁵ has opted to implement a hybrid scheme (Ladouceur et al., 2012, Thomas et al., 2016). Registration for online gambling is compulsory. However, pre-commitment features only apply to particular types of online gambling. For example, deposit limits for online lotteries, sport betting and casinos are mandatory, but loss limits and time limits are optional.

In Australia, the federal government has implemented a national pre-commitment system for online gambling and certain states have introduced various pre-commitment systems for land-based EGMs (Williams, 2010, Williams et al., 2012, Thomas et al., 2016). In the online environment, a 'Voluntary opt-out pre-commitment scheme' (deposit limits) has been introduced as part of the National Consumer Protection Framework for Online Wagering (DSS, 2018). Since 2018, all online gambling companies must provide a limit-setting tool. In the land-based setting, there have also been attempts to develop a national pre-commitment scheme for EGMs in Australia. In 2012, the Australian

²⁵ See svenskaspelh https://om.svenskaspel.se/spelansvar/

government passed National Gambling Reform legislation which proposed all EGMs be linked together as part of a state-wide or territory-wide mandatory precommitment system, with only one card to fit all. However, in 2013, the government decided to support only a venue-based voluntary scheme, where a different card or account will be required for every venue. Currently, Victoria is the only Australian state to adopt a voluntary, jurisdictionally based pre-commitment scheme (called "YourPlay".)

The Nova Scotia state government in Canada decided to discontinue its pre-commitment system known as My-Play (Ladouceur et al., 2012, Williams, 2010, Williams et al., 2012, Thomas et al., 2016). My-Play, introduced in 2012, was a full and voluntary pre-commitment system on the local EGMs, called video lottery terminals, or VLTs. However, the government removed the My-Play system from all VLTs in Nova Scotia in 2014 as it was not meeting objectives. According to a press release, "it did not reduce play by people with gambling addictions, and in fact, the vast majority of play sessions didn't even use the main features of the product" (Nova Scotia, 2014). Additionally, the cost of keeping the system was deemed not justifiable.

When discussing a pre-commitment system involving a card loaded with money before entering a gambling venue, Nower and Blaszcynski (2010) noted differences among gamblers in Queensland, Australia. Non-problem gamblers and low-risk gamblers are more likely to set limits before they play and stick to them. In contrast problem gamblers were the least likely group to use any form of pre-commitment or limit-setting before playing. Besides, they not only lost track of money while gambling, but they were rarely aware of whether they were winning or losing during play. Nower and Blaszcynski (2010) suggest that pre-commitment mechanisms would be most beneficial to problem gamblers if they are implemented in a way that problem gamblers cannot circumvent their self-imposed limits.

Trials of voluntary systems in Australia demonstrate that participation in the system is low: usually less than 1% of participants (Delfabbro, 2012; Salis, Wardle, Morris, an Excell, 2015) - and that people perceive partial systems to be useful only for people with existing gambling problems (Delfabbro, 2012; Responsible Gambling Working Party, 2010; Schellinck and Schrans, 2010). The partial pre-commitment system in Nova Scotia demonstrated that cards became a stigmatising marker of perceived problem gambling (Schellinck and Schrans, 2010). The incorporation of pre-commitment limiting into electronic loyalty programmes has been strongly criticised (Williams, West, and Simpson, 2012). These systems provide users with conflicting messages about their spending. On the one hand, they reward the gambler for increasing their spending, while on the other hand, they offer a tool intended to assist them in constraining their spending.

Despite this obvious conflict, a number of systems have adopted this model, including the YourPlay system in the state of Victoria, Australia. However, partial-limit and voluntary-limit players might easily circumvent their limits by moving to another machine or swapping their card with another player, so the extent to which these voluntary systems reduced harms was not evidently significant. The take-up of pre-commitment limiting was also low, with a majority of gamblers in venues where it was offered declining to use the limit setting features (although other features including cashless gaming proved quite popular). Another review of pre-commitment systems concluded that such voluntary schemes are not attractive to gamblers (Ladouceur et al., 2012). This assessment suggests that such difficulties' raise questions as to the attractiveness of a voluntary pre-commitment system, pointing perhaps to the need to implement a mandatory system in order to be successful'.

In a recent study centred around limit-setting, Griffiths, Hopfgartner and Auer (2020) attest that the gambling company, Kindred (Swedish-founded but Malta-based) provided the researchers with access to a dataset of 49,560 players who had placed at least one wager. They found that among the most gambling-intense players, those who had voluntarily set limits gambled significantly less money a year later compared with those who had not. They argue that "given that those individuals with

the highest gambling intensity are more likely to comprise problem gamblers, we concluded that limit-setting appears to be an effective responsible gambling tool because the top 10% of the most gambling-intense individuals in our study had significantly reduced their gambling expenditure over a one-year period."

Another recent study (Auer and Griffiths, 2020) evaluated the effectiveness of targeted messages among 7,134 Swedish online gamblers who played at one of five sites within the ComeOn Group between July 2019 and January 2020. They found that online gamblers who had received personalised feedback (i.e., feedback concerning their own actual gambling behaviour in the form of text messages) wagered significantly less money on both the day they read a personalised message and for the seven days after they read a personalised message. These findings, the authors contend, supported their previous real-world studies, which had shown that targeted personalised information can be an effective tool for online gambling companies to use to reduce gambling expenditure among their clientele and gambling-related harms. Until now, the main use of pre-commitment systems has been for online gambling and land-based EGMs. Most pre-commitment systems involve the use of registration because it allows the user to keep track of their gambling. The card or account also allows people to view their gambling history, set time limits and money limits or exclude themselves. However, there is evidence that land-based limit-setting tools may not be as effective. A partial system may be ineffective in supporting gamblers to stick to predetermined limits. While in a venue, partial systems may serve as (passive) reminders to gamblers rather than actively support gamblers at such critical junctures.

The Covid pandemic in 2020 led some states to re-appraise and re-calibrate their approach to loss-limiting mechanisms. Belgium, Finland, Sweden, and Spain were among the European countries to impose new loss-limiting measures. From 1 May 2020, the monthly loss limit on all online gambling games in Finland was lowered from €2,000 to €500, while the daily limit was lowered from €1,000 to €500. The 2021 review of gambling legislation in the UK is set to closely examine online casino and electronic slot machine games where gamblers can bet unlimited amounts. Where the UK successfully reduced the maximum stake allowable for Fixed Odds Betting Terminals (FOBTs) from £100 to £2 in 2018 (a move fiercely opposed by the gambling industry), there is a realisation that the shift to online gambling leaves gamblers vulnerable to the same predatory forces associated with land-based FOBTs. The UK debate on FOBTs threw up an important conversation around differentiation between different types of gambling products. Some gambling products are clearly more problematic than others: in the UK it was revealed that 40% of those who regularly used FOBTs were problem gamblers, a much higher figure than for other gambling products (O'Boyle, 11 December 2020). By examining the breakdown of gambling-related harms, product by product, it should be possible to identify those products that are most likely to lead to addiction or problematic patterns of gambling. Thus in several jurisdictions there are lively debates taking place around levels of product-specific gambling harm. At the very least we should expect to see much more scrutiny of new products when they are brought to market by gambling operators.

3.4.8 Other Gambling Harm Prevention Technologies

Some research suggests that technologies have the potential to minimize the negative impacts of gambling (Hong, 2020; Shaffer et al., 2020). Artificial intelligence (AI) techniques can be used in the prevention of gambling harms in land-based and online gambling platforms, including the identification and reduction of fraud and crimes by monitoring behavioural patterns of clients for any abnormal changes or anomalies (Hong, 2020). The use of facial recognition (as an identification system) can help casino operators to cut down on fraud, enforce client self-exclusion bans and prevent underage young people from gambling. They can also help in the analysis of data to monitor gambling behaviour and detect at risk and problem gamblers. There is no identifiable 'best practice'

anywhere in the world of regulation to prevent the misuse of technological advances in gambling and some of these technologies may impinge upon user privacy in certain contexts.

Behavioural tracking is one of the most frequently used approaches by gambling operators to collect data about online gambling and gamblers (Griffiths, 2020). The various online gambling tools such as limit setting, pop-up messaging and personalised feedback rely on behavioural tracking algorithms (Griffiths, 2020). Behavioural tracking technologies have different functions, including tracking gambling patterns and personalising games, offers and rewards. Though Griffiths and Park have already pointed out the potential dangers attached to gambling services using data about/on gamblers, they argue that behavioural tracking data could also be used to identify problem gamblers (Griffiths, 2020). Griffiths and Auer have used account-based tracking data provided by gambling operators in their research. They argue that "the use of such tracking data has considerably moved the field of gambling studies forward, particularly because of the high-quality large-scale data available and the fact that many of the studies published are 'real world' studies, of real gamblers, on real gambling platforms, in real time." Such studies are based on data sharing between academics and service operators and raise important ethical and transparency questions. Most gambling researchers do not have access to industry behavioural data.

More recently, the gambling industry has integrated behavioural tracking technologies with responsible gambling practices. An example is the "Customer Activity and Awareness Programme ("CAAP") implemented by Flutter Entertainment. "CAAP is our proprietary machine learning model which uses an algorithm to identify customers who may need intervention, based on their behaviour" The increasing number of countries implementing either partial or full bans on gambling advertising and sponsorship (especially associated with sports) has forced gambling operators to change focus from so-called 'above the line' advertising and marketing to other forms of digital promotion techniques, including leveraging proprietary data and using data science to deliver personalised and improved recommendations for clients (O'Boyle, 15 December 2020). This new interest in 'ad-tech' carries the danger that gambling operators will simply try to overcome the bans on 'above the line' advertising by much greater focus on micro-targeting of customers for individualised 'recommendations' and product pitches.

Despite offering various prevention possibilities, there are also risks to gamblers from the use of AI in gambling services and products. AI technologies are used to optimise product and service design, personalise the user interface of Electronic Gaming Machines (EGMs) and predict what products would be of the highest interest to increase revenue (Hong, 2020). Another study describes how the design of EGMs tries to keep clients playing for long periods of time (Schull, 2005). According to a new study by University of Alberta researchers, sound and visual effects on slot machines may increase the payer's desire to play (Spetch et al., 2020).

Responsible Gambling, Flutter website, accessed 10 November 2020, https://www.flutter.com/operating-responsibly/responsible-gambling

4. Gambling Trends and Harms in Ireland

In this chapter we provide an overview of the gambling ecosystem, industry trends and gambling harms in Ireland. In doing so we draw both from our extensive literature review, analysis of (the very limited) previous studies of gambling and gambling harms in Ireland and our interviews with key stakeholders. The report then goes on to compare responses to gambling harms in Ireland to those that have emerged in international peer countries, as outlined in Chapter 3.

4.1 The Gambling Ecosystem in Ireland

The gambling ecosystem in Ireland includes a range of stakeholders and activities including the National Lottery, shop and on course betting, bingo halls, slot or gaming machines and private members clubs (which function as casinos). It includes both land based and online types of gambling. The national gambling industry is growing in revenue every year and expanding from traditional outlets like horse racing and greyhound tracks into sports betting and less visible types, including casinos and a significantly expanded online gambling sphere. Commercial forms of legal gambling constitute a significant activity in Ireland, generating approximately €8 billion in revenue annually, and employing an estimated 8,000 people (Department of Justice and Equality, 2019).

The state established a national lottery in 1986 and initially the lottery was run by *An Post*, the Irish postal service. The National Lottery was privatised in November 2014 and Premier Lotteries Ireland (PLI) was awarded a 20-year license by the Irish Government. Key shareholders include the Ontario Teachers' Pension Plan, *An Post* and *An Post* Pension Funds. The National Lottery runs the Lotto, Euro millions and Tele bingo games in Ireland. In 2017 the most popular products were scratch cards (28.9%), the Lotto (28.6%) and Euromillions (9.6%) (Indecon; 2018:11). They install and operate an extensive network of terminals throughout shops in Ireland and online betting was introduced in 2009. The National Lottery offers 27 different 'instant win' games on their website.

According to the Indecon (2018) report, the National Lottery earns €101.3 million for the state (excluding shareholder returns). In addition, under the terms of their license, almost 30% of sales are reserved to go to 'good causes'. In 2017 €226.3 million was transferred to Government Departments to part-fund activities in rural and community development; transport, tourism and sport; arts, heritage and the Gaeltacht, Health and Children and Youth Affairs (Indecon; 2018:18). The amount in 2018 was marginally down at €224.6 million. Under their licence terms, PLI is also required to operate the National Lottery in a manner that "prevents problem play" and implements a player protection framework. The Office of the Regulator of the National Lottery was established in 2013 and is funded by a levy on the industry (see https://www.rnl.ie/). It monitors the company which operates the lottery, can impose sanctions for breaches of license conditions but also must ensure the long term sustainability of the lottery. In 2018 the regulator found that the level of compliance in sales to under 18s in shops was 'not good enough' (The Regulator of the National Lottery, 2019).

The wider betting landscape in Ireland includes retail bookmakers, online bookmakers, online betting intermediaries, and on-course bookmakers. The state levies a betting duty on traditional betting, remote betting and betting commissions. In 2015 there was an increase in the net receipts garnered from betting duty because of the incorporation of online bookmakers and betting intermediaries into the licensing regime. The 2015 legislation required traditional (land-based) bookmakers to obtain a licence and for online bookmakers to pay the 1% betting duty, while online betting intermediaries are required to pay a tax of 15% of commission for the use of their facilities (Department of Finance, 2018). In 2019, the Fine Gael-led government increased the gambling duty from 1% to 2% and the betting intermediary duty from 10% to 25%. Land-based gambling is still the most prevalent form of gambling in the country, despite the increase in online activity. The retail betting sector accounted

for €51.8 million in betting duty in 2019, suggesting a turnover of about €2.59 billion of the €4.75 billion for the betting sub-sector of the industry.

The number of bookmakers' licences issued/renewed in recent years has declined. At present, there are 243 licensed bookmakers (Office of the Revenue Commissioners, 2020d) and 790 licensed bookmaking offices in operation in Ireland (Office of the Revenue Commissioners, 2020c). This figure differs slightly from the Irish Bookmakers Association (IBA) which states that there are 813 betting shops currently operating in Ireland. The IBA, in addition, relates that 572 shops closed in the country between 2008 and 2019. Much of the overall trend was attributed to larger betting firms consolidating their market position by buying up smaller firms or their shops, although the Irish Bookmakers Association (IBA) contends that a combination of the recession after 2008, increased betting duties and the move to online betting account for much of the decline in the number of shops operating in the Republic. It is unclear at the time of writing whether the extended periods of 'lockdown' associated with Covid 19 will result in more betting shops and bookmaking firms closing for good.

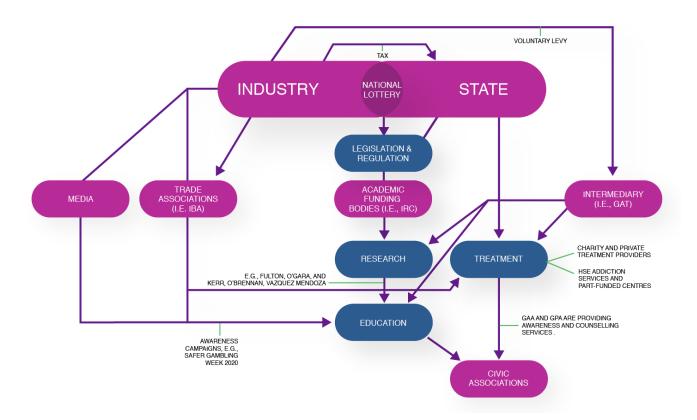
The most significant growth in the international gambling sector has been in the online sphere over the last decade. Advances in technology have accelerated the move from land-based to the online arena. There are a growing number of offshore gambling operators offering betting services or 'betting intermediary services' in Ireland. These operators are required to obtain a remote bookmaker's license or remote intermediary's license from the Revenue Commissioners (Department of Justice and Equality, 2019). A number of representative trade bodies are active in representing the interests of the various sub-sections of the industry including the Irish Bookmakers Association (IBA), the Irish National Professional Bookmakers Association (INPBA, representing racecourse bookmakers), the Gaming and Leisure Association of Ireland (GLAI, in operation until 2019) and the Irish Amusements Trades Association.

Commercial semi-state entities Horse Racing Ireland (HRI) and Greyhound Racing Ireland (GRI, formerly known as Bord na gCon) are the governing bodies for Ireland's horse racing and greyhound racing industries respectively. They are intimately linked to the gambling ecosystem in Ireland by virtue of funding, sponsorship and cultural legacies. There are 14 licensed greyhound racing tracks (9 of which are owned and controlled by GRI) and 26 horse racing tracks around Ireland in total. Horse Racing Ireland reported attendance at race meetings of 1.3 million in 2019 (up 3.2% on 2018), and betting on the racecourse of €78.9 million (HRI, 2019). Although betting with on-course bookmakers increased to €58.4 million (about 6.6%), the on-course turnover of Tote Ireland fell by just under 1%, and total Tote betting was down 13% (HRI, 2019). It is worth pointing out, however, that these relatively positive figures stand against a precipitous fall in turnover in the betting ring of the order of 75% since 2009 (*The Irish Times*, 28 January 2020). HRI and GRI will receive an estimated €96 million in state financial subventions in 2021 (RTE 2020), though it should be stated that the increase in betting duty in 2018, from 1% to 2%, increased revenue by 81% (to approximately €95 million) and this almost covered (for the first time) the entire subvention of the state to the horse and greyhound industry.

Figure 13 provides a map of the Irish gambling ecosystem and the relationships between the various stakeholders in the Irish system. This diagram is adapted from one developed by Rebecca Cassidy et al. (2014) in the UK, whose European Research Council (ERC) funded project examined gambling and the relationship between various stakeholders in the UK, Croatia and Macau. Our diagram is informed by the primary and secondary data we analysed during our project. The key stakeholders in Ireland are the state, the industry (including related social enterprises), the National Lottery, a range of treatment service providers, academic research bodies and civil society groups. Two things are of particular interest in the Irish case. First, the flows of money (levies and tax) from the industry and National Lottery accruing to the State. Second, the number of charity and civil society actors who

are involved in education, public awareness and the provision of treatment for gambling harms. The latter is significant because it reflects the relative absence of the state in, for example, treating patients with gambling disorder. Indeed, one of the key features of the Irish gambling landscape (see Chapter 5) is the relative absence of the state in education and research, and the passivity of the state in terms of the regulation of gambling and gambling harms.

Figure 13. The Irish Gambling Ecosystem.



Source: Adapted from Cassidy (2014).

4.2 Gambling Licensing and Regulation

The licensing of gambling in Ireland developed in an ad hoc way and seems increasingly inadequate relative to the changes in gambling activity over the last decade. The government's inter-departmental working group on future licensing stated that the current approach is fragmented and incoherent "and does not facilitate a consistent and effective approach to licensing, compliance and enforcement, consumer protection and the protection of vulnerable persons, including of underage persons." There is very little regulation of online activities and thus the existing regulatory scheme is still very much tied to a land-based gambling ecosystem. The fragmentation also militates against revenue raising possibilities from licensing fees, duties and taxation "which could better fund regulatory activities and treatment for gambling addiction" (Department of Justice and Equality, 2019, p. 11). Online gambling is regulated by the issuing of so-called 'remote licenses': applicants submit a 'Certificate of Personal Fitness' and the Minister for Justice and Equality issues certificates after consultation with An Garda Síochána.

In July 2013, the government published the Gambling Control Bill, which was intended to replace all existing gaming, lottery and betting legislation (with the exception of that governing the National Lottery). The General Scheme provided for all licensing, regulatory and compliance functions for gambling to become the responsibility of the Minister for Justice and Equality. The regulatory function would be undertaken by a proposed 'Office for Gambling Control Ireland'. The original proposal was for this body to be housed within the Department of Justice and Equality as an 'executive office' and not as a statutorily independent office. It is striking that this proposal did not embrace the idea of an independent regulator, as in other jurisdictions. Rather, regulation (including enforcement) would be kept in-house within the Department. The proposed legislation was not progressed through the Oireachtas. The Department assigned special responsibility to Minister of State David Stanton TD, and set up a 'Gambling Policy Division' on 1 January 2017. It took another year, however, for the government to agree to a proposal on gambling legislation reform. The key difference between this proposal and the earlier General Scheme lay in the statutorily independent role for the proposed independent gambling regulatory authority. The change in approach reflected increased contact between the Department and peer units in other EU member states, and the trend internationally toward employing independent regulatory bodies. The change also reflected consciousness of the challenge presented to regulation by fast-changing technology across the gambling ecosystem (Department of Justice and Equality, 2019). Seed funding to establish a new gambling regulator was secured by the Department of Justice in Budget 2021.

The <u>Gaming and Lotteries</u> (Amendment) Act 2019 came into effect on 1 December 2020 and this legislation has updated the licensing of gaming machines and lotteries, set limits on stakes and prizes, and standardised the minimum age for gambling and gaming at 18 years of age. The scope of the Act, however, was extremely narrow and did nothing to address the regulation of the online gambling sphere. In response to frustration at the slow speed at which Ireland's legislative base was being updated, Minister for State James Browne TD stated in an interview with *The Irish Examiner* newspaper that the government would have the new regulator in place by summer 2021 with the remainder of the gambling legislation to follow before the end of 2021. Mr Browne said the legislation could potentially include spending limits, stronger age verification measures, for online gambling, and significant restrictions on advertising and promotion of gambling products (*Irish Examiner*, 30 December 2020).

4.3 Gambling Behaviour in Ireland

The Prevalence of Drug Use and Gambling in Ireland survey found that 64.5% of people in Ireland engaged in various forms of gambling in the previous year (NACDA, 2018). 41.4% of Irish respondents report gambling every month, or more often. The highest level of participation occurred among those aged 55-64 (72.4%), followed by 35-44-year olds (70.5%) and 45-54-year-olds (69.4%) (NACDA, 2018). The purchase of lottery tickets and scratch cards constitutes the most common form of gambling in Ireland in all age groups. According to Bulletin 7, 56.7% of the Irish population bought a lottery ticket or scratch card in person in the previous 12 months, with just over 35% doing so monthly or more frequently. Only 8.3% played lottery games online monthly (NACDA, 2018:6). Of those who bought lottery tickets (26%) and played lottery games online (28%) did so once per week.

Gambling in a bookmaker's shop (15.3%) and betting at a horse or greyhound event (12.7%) are the second and third most common forms of gambling in Ireland (NACDA, 2018). Sports betting is an increasingly popular activity, as is the case in most comparable markets. Bookmakers quote odds on a wide range of sports events, including darts, football games, golf, Gaelic football, hurling, snooker, and tennis. The Prevalence of Drug Use and Gambling in Ireland report also notes that of individuals who placed bets on sports events in a bookmaker's shop, 27.5% did so 2-5 times in the previous year, and 14.3% did so weekly (NACDA, 2018). Finally, playing cards and/or playing gaming or slot machines is less popular than other traditional forms of gambling. Playing cards occupies the fourth place, with 7.8% reporting this form of gambling in the previous 12 months, according to Bulletin 7 of the 2014/15 Drugs Prevalence Survey (NACDA, 2018). Only 4.3% of participants reported having played a gaming or slot machine (NACDA, 2018). Private gaming is excluded from the scope of the Gaming and Lotteries Acts. This has given rise to the operation of private members' clubs as casinos and card clubs. Currently there are 36 such private clubs in existence in Ireland (Department of Justice and Equality, 2019). The opening hours, age restrictions and general operations of such clubs are not regulated by statute. There is no return to the State in terms of licence fee income or tax (Department of Justice and Equality, 2019).

There are differences in gambling types and forms by age and gender. Males under 35 are more likely to bet in a bookmaker's shop or online while older males are more likely to buy a lottery ticket and all other gambling types decline. The most popular male form of gambling was placing a bet in a bookmaker's shop followed by gambling online and playing a card game for money. Females under 34 are more likely to play the lottery in person and the percentage who do so increases with age. The next most popular form of gambling was playing the lottery online but this accounted for a relatively small percentage. The percentage who played bingo increased with age but never got above 5% (NACDA, 2018:10).

In terms of amounts of money gambled, the same survey provides percentages by age and gender (NACDA, 2018:12). Young males (15-34-year olds) are most likely to spend more than €250 on placing bets on sporting events in a bookmaker's shop, with 15.3% of young males reporting this form of gambling, more than double the proportion in the next nearest group (7.1% of males aged 35-64). Spending more than €250 in the last year on playing bingo in person is most common in females and increases with age (2.6% of females over 65 years old report spending more than €250 per year on playing bingo). Spending more than €250 in the last year on sports events online or by telephone is most frequent in young males aged 15-34 (6.6%).

Some previous research has been conducted by economists on Ireland's National Lottery. The Lotto began in Ireland in 1988, and in 1990 Irish betting shops started introducing fixed-odds bets on the result of the Lotto draw. In 1995, the Irish National Lottery reported that this secondary market was affecting its sales and consequently lobbied unsuccessfully to make this practice illegal. In 1997, the Irish National Lottery introduced its own fixed-odds game, Lotto 5-4-3-2-1. Purfield and Waldron (1999) examined fluctuations on the National Lottery (Lotto) sales and of fixed-odds betting on the

Lotto draw – in the form of Lucky Numbers in Ireland or Lucky Choice in the United Kingdom – to determine whether 'side betting' on the Lotto draw diverted money from the beneficiaries of the National Lottery. The authors found that consumers appear to complement their Lotto purchases with Lucky Numbers bets. This means that side betting on the outcome of the Lotto has little impact on Lotto sales - but does point to interesting relationships between different types of betting and the expansion in types of betting.

Another study examined the determinants of lottery participation and expenditure. Crowley et al. (2012) use a 'double hurdle model' of socio-economic and socio-demographic indicators to identify the determinants of Irish households' participation in, and expenditure on, the lottery, using data from the Irish Household Budget Survey of 2004/2005. The authors found that gender, social class, marital status, the presence of children in the home and household size significantly affect lottery participation. Lottery expenditures are affected by income, location of the household, gender, age, education, social class and whether the household has positive betting expenditures. Furthermore, evidence shows that those who play the lottery are from lower socio-economic backgrounds, and lottery expenditures represent a regressive social tax.

Building on the previous study, Eakins (2016) studied household gambling expenditures on bookmaker/tote betting and the National Lottery using the Irish Household Budget Survey (HBS). They found that households with an older and less educated head of household participate in, and spend more on both forms of gambling than those households with children. There is also evidence to suggest that households with an unemployed head of household have a higher likelihood of participation in gambling. The post-2008 recession affected gambling in different ways. Bookmaker/tote expenditures changed "from a necessity to a luxury good, while lottery expenditures increased their necessity status" (Eakins, 2016, p. 211). According to Eakins (2016), this can be explained by the fact that playing the lottery requires less time, knowledge and risk and has potentially greater benefits attached to it in comparison to bookmaker/tote betting.

The research group in St. John of God Hospital in Dublin has conducted a national survey of online gambling behaviours (Columb and O'Gara, 2017), which was published in late 2017 in the *Irish Journal of Psychological Medicine*. The online survey analysed the responses of 208 gamblers in Ireland between December 2014 to June 2015 on a) what online gambling activities people are engaging with/in; b) the reasons for choosing to gamble online; c) their attitudes to online gambling and; d) the financial and mental consequences of online gambling. The study found that the most popular activities were horse racing, sports betting and greyhound racing among both regular and occasional gamblers. The most popular devices that they use to gamble are mobile apps. The main reason for gambling online was the prospect of winning money, but access appears to play an important role in the use of online gambling. The study also reported that an alarming 74.5% of respondents stated that online gambling had caused financial problems in their household.

A small number of qualitative studies provide insights into gambling harms in Ireland including Fulton (2015; 2017; 2019a; 2019b;). Fulton (2015) is an exploratory, ethnographic research project focused on the social impact of gambling and problem gambling. This study collected and compared data from: 1) ten interviews with addiction service providers' representatives; 2) twenty-two interviews with gamblers throughout Ireland; 3) twenty-two interviews with family members or friends of the gamblers, and 4) a focus group with seven gambling industry representatives (Fulton, 2015). Fulton found that gamblers have various strategies to rationalise their gambling (e.g., explain away losses and unpaid bills), attempt to control the people and environment around them so that they could continue to gamble and were highly secretive about their gambling. The study also analysed the impact of technology (e.g., the use of different devices for online gambling) and the social impact of excessive gambling behaviour on families and social networks. An important finding was that problem gamblers often started gambling as teenagers, which revealed further research is needed to understand how under-age people secure access to gambling platforms and the socialisation of young

people into gambling. In Fulton (2019b), the author explored the social impact of "non-sharing information behaviour" in the gamblers' life and social relationships. Non-sharing information behaviour refers to the action of withholding or hiding of information from other people. This study analysed 22 in-depth interviews with gamblers, together with their social connections, either family members or friends between 2014 and 2015. According to Fulton, "understanding how secrecy functions in decision making can help create awareness around risky circumstances, offer approaches to reduce harm, and inform regulatory and social reforms to protect those who are vulnerable or who have been affected negatively" (Fulton, 2019b: 156).

Mc Namara was awarded a PhD in 2017 from TCD for research on 'The Betting Shop: A Sociological Perspective'. In a 2017 journal article he focused on the actions and interactions of regular customers of betting shops; specifically, how they explain betting failures. The data were gathered using participant observation with customers and staff in betting shops in Dublin. He described how customers explained their monetary losses through 'responsibility-shifting' onto external factors such as a) the uncertainty of the outcome of races and b) attributing blame to others (Mc Namara, 2017). His (2020) book expands further the ways in which gamblers restore their self-esteem and the role of betting advertising announcements in betting shops. There is, however, little discussion of problem gambling. Flood (2000) conducted an MA thesis in 2000 at Maynooth University. His thesis provides a small-scale sociological account of the gambling subculture in betting shops in Ireland and the positive social outcomes for gamblers. In this study betting shops provide a place of enjoyment and socialisation, but also a means of belonging to a social network. The author collected data using participant observation in two bookmakers located in Carlow, Ireland. Some researchers mentioned the prevalence of gambling in young people, but there has been little published to date about this. We are aware of some ongoing research on the topic of student gambling trends and we look forward to seeing that published.

Finally, there is little work, apart from Fulton's, on the impact of gambling on family, friends and the wider community. Fulton (2019a), draws upon data obtained from ethnographic observation in addiction treatment centres together with in-depth interviews with different participants, including addiction counsellors, recovering gamblers, and gamblers' social connections. This paper concluded that the social impact of harmful gambling is much wider than on the individual gamblers, and affects gamblers, families and the broader community. This is consistent with international research findings which demonstrate that for every gambler engaged in harmful gambling, up to 6 or 7 other individuals are impacted (House of Lords, 2020). Fulton strongly emphasised the need for legislation and policy development in Ireland to address increasing incidences of gambling harms. Summing up, we can state that the knowledge base around harmful gambling in Ireland remains threadbare. The studies cited above provide some insights into gambling on the national Lottery and in betting shops but there is little research on the variegated online gambling sector, gaming and casino games in Ireland. There is a paucity of information about social perceptions, stigma and gender differences in gambling patterns in Ireland. At the very least there is a compelling case for significantly accelerated sociological research into the different ways in which gambling matters in people's lives and the harms associated with patterns of problem gambling in specific cohorts of the population.

4.4 The Prevalence of Gambling Harms

The expansion in the types and prevalence of commercial gambling, especially the increased resort to online gambling, along with the relative lack of regulation has brought significant problems and harms to diverse groups within the Irish population. Though gambling was an activity traditionally associated almost exclusively with men, there is an appreciable rise in gambling evident among young people, women and athletes in Ireland and in international settings. Harm from gambling affects not only the person who gambles but also family, friends, workplaces and communities.

Prevalence rates of harmful gambling have been difficult to calibrate, not least because of different systems of measurement employed in different jurisdictions. The problem extends to the differential use of screening instruments and time frames which makes it difficult to compare such studies directly. The analysis of 94 separate studies in 30 different countries conducted by the Alberta Gambling Research Institute in Canada (see Chapter 3) demonstrated that there are wide variations in problem gambling rates across different international jurisdictions, from 0.5% to 7.6%, with the average rate across all countries being 2%. The Alberta Gambling Research Institute's analysis is based on calculations to standardise problem gambling prevalence rates. Ireland was not included in this international study.

Efforts to estimate harmful gambling rates on the island of Ireland have been very recent. Crucially, there is no regular gambling-specific prevalence survey in Ireland that measures gambling behaviour and the impact of participation in gambling activities on gamblers. Bulletin 7 of the 2014/15 Drugs Prevalence Survey (NACDA, 2018) reported that the problem gambling prevalence rate in Ireland is 0.8% (NACDA, 2018, p. 14). This estimation suggests approximately 40,000 problem gamblers in Ireland. Males have a higher prevalence of problem gambling than females (1.4% vs. 0.2%), and males aged 25-34 years have the highest rate (2.9%), followed by males aged 18-24 years (1.9%) (NACDA, 2018:14). The number of people presenting to Health Service Executive treatment services in Ireland with harmful gambling issues was 208 in 2015, 195 in 2016 and 219 in 2017 (Department of Justice and Equality, 2019). These figures would suggest that people are either not presenting for treatment or are presenting to private/commercial or charity treatment services rather than the (thinly resourced) state service. Before the publication of this survey, government agencies and stakeholders used other international data (where available). For example, the Institute of Public Health in Ireland (2010) produced a report using Northern Ireland and the United Kingdom survey prevalence data. Extrapolating from this data, the report estimated that between 0.6 and 1% of the population in Ireland, or approximately 40,000 people, experience problems related to gambling.

Strikingly, the figure of 0.8% for harmful gambling in Ireland contrasts with 2.3% found in Northern Ireland in 2016 (Dunne et al., 2017). According to the latest prevalence survey in Northern Ireland, the north has the highest rate of problem gambling across the United Kingdom (Dunne et al., 2017). The prevalence rate is in fact, almost four times higher in Northern Ireland than in England (Dunne et al., 2017). Problem gambling in Northern Ireland is also high relative to other regions where agencies have carried out gambling prevalence surveys. Problem gambling rates from other countries which have carried out surveys using the PGSI (Problem Gambling Severity Index) are presented in Figure 10. The prevalence rates of gambling-related problems in Northern Ireland comes in behind only Hong Kong (3.3%) and Africa (3.2%) (Dunne et al., 2017).

Why is the figure for Northern Ireland so high? There is clearly a case for more calibrated research here, but one reason may be the legacy of the Troubles (1968-1998) and the considerable degree of trauma and PTSD suffered by many during the conflict. There is a different regulatory regime with for example Northern Ireland betting shops having slot machines in them, but not opening on a Sunday. There is clearly scope for comparative work examining the nature and scale of problem gambling across the two jurisdictions on the island of Ireland - especially given the all Ireland nature of some sports (e.g rugby, GAA) and cross border media flows with the rest of the UK. The Northern Ireland Executive initiated a public consultation on gambling harms in 2020 with oral hearings expected to take place in early 2021. The discrepancy in harmful gambling prevalence rates between Ireland and Northern Ireland, along with the fact that the material for Ireland collected in 2014/2015 was published only four years later, raise questions about the contemporary reliability of the prevalence data for Ireland. It also demonstrates the relative absence of the state in an area where there seems an urgent need for the regular collation and publication of prevalence data. If Ireland's response to harmful gambling is to improve, it can only happen through informed public policy based on a sound evidential base.

One of the most significant harms from gambling is financial loss. Research published in 2017 (by H2 Gambling Capital), suggested that Ireland lies behind only Australia and Singapore in terms of financial losses from gambling. Gambling losses accrued in Ireland totalled €2.1 billion, indicating that about €470 per adult, per annum, is lost on different forms of gambling (Department of Justice and Equality, 2019). The research indicated that about half of the gambling losses in Ireland comes from online activity with traditional sports betting the second most significant (Department of Justice and Equality, 2019; *The Economist*, 2017). Further analysis of the NACDA survey responses (measured according to the DSM-IV problem gambling instrument), found that for both male and female gamblers, the most common reason for problem gambling was chasing (financial) losses. The second most highly reported item for males was a preoccupation with gambling and for females was that they had tried to cut back on gambling but failed (NACDA, 2018: 15).

When the socio-economic background of gamblers was analysed in the NACDA report, the most likely gamblers were middle management, senior civil servants, managers and business owners (2019:13). For both buying a lottery ticket and gambling in a bookmaker's shop, the percentages were highest amongst B and C1 middle class respondents, with slightly higher C1 and C2 skilled people betting in bookmaker's, and slightly more A and B respondents betting at horse or dog race meetings. In other words in Ireland the professional, middle and working classes gamble. Another important finding is the prevalence of problem gambling in young males (2.9% in males aged 25-34 and 1.9% in males aged 18-24) (NACDA, 2018). Indeed, even though the legal age for buying lottery tickets or being in a bookmakers is 18, young males below the age of 18 report betting at horse or dog race meetings (9.4%) and are gambling in bookmaker's shops (5.8%), despite increased age verification checks performed by gambling company employees. 7.3% reported betting monthly in a bookmaker's shop (2018:10). 15.3% of 15-34 year olds males spent more than €250 in a bookmaker's shop and 6.6% did so online (2018:12).

In the UK, annual surveys of gambling behaviours of young people aged 11-16 are conducted in England, Wales and Scotland. A 2018 report by the UK Gambling Commission, for example, found that 1.7% of 11-16 year olds could be classified as 'problem gamblers' and 2.2% of that cohort were "at risk" (Gambling Commission, 2019). Also, researchers in the UK are using the Avon Longitudinal Study of Parents and Children (ALSPAC) to investigate gambling behaviour and problem gambling in the transition from adolescence to young adulthood, among youth aged 17-24 years (Emond et al., 2019). These results seem to underline the necessity for more granular, and more frequent research on this age cohort and the relationship between youth gambling and the 'gamblification of sport'.

4.5 Insights into Individual and Societal Harms – findings from our interviews

The harms associated with problem gambling are significant and include financial problems, relationship breakdowns, abuse or neglect of partners and children, and adverse childhood experiences that disrupt relationships. Harms also include health and wellbeing and, in the most severe cases, gambling can contribute to the loss of life. Gamblers can lose their jobs, their homes and some become criminals in order to cover their financial losses. Gambling can also have high social costs. Gambling harms families, friends, communities, and society, sometimes in significant numbers.

The following quotations are taken from our interviews with treatment service providers. They provide some more qualitative insights into the types of gambling harms experienced in Ireland and the connections between gambling and mental health, family and relationship breakdown and crime. They also point to the shame and stigma associated with problem gambling.

Interview 07102020: I think to understand the impacts of gambling you kind of need to look at it in a multi-dimensional perspective. So, there are the impacts on the individual who is engaging in the behaviour, the financial aspects of that, the personal relational impact that has, the kind of psychological emotional impact that has especially when somebody's gambling behaviour begins to escalate, and losses increase etc. Not always, but sometimes people get involved in crime to either fund their gambling or pay gambling debts, etc, running up bills for gambling if you like, maybe stealing to pay their gambling debts. And then the impact as well on those people who are in close relations with the individual gambler, partners, spouses, parents, family members, employers etc. And the impact on the wider community as well. So those would be, let's say, some of the dimensions or the impacts of problem gambling as I understand it.

Interview 19182020: The most obvious one is the financial impact and usually people who contact (our service) are in quite severe financial difficulties of some degree. It has a massive negative impact on relationships so there is usually a huge breach of trust in relationships and there can be quite a lot of fighting, a lot of secrecy within the relationship. There can be loss of home, loss of job, sometimes there can be criminal proceedings against a person who has stolen money to fund their gambling. Depression, anxiety, high stress levels, suicidal ideation is very common. Quite a lot of childhood trauma, adverse childhood experiences. They would be main harms.

Interview 25082020: The negative impacts are huge. If I was to start with overall the negative social consequences of gambling, I mean family. Peers and family are very affected by gambling. There is a negative health impact, worry and stress, and there is a huge financial hardship in family. This all helps to decrease quality of life (of) the family and the gambler. There is a stigma and stress for some people. I have worked in the prisons as a counsellor, I have met people in prison because of criminal acts because of the gambling, fraud and stealing money. People going bankrupt and then paying off loans, getting loans from loan sharks and from money lenders at a very high percentage (of APR) to pay back.

Also, what I find is dishonesty is huge and shame, shame is very, very big. So then some of the interpersonal consequences would be, it is often the cause for domestic violence from partners, it is a huge burden on the family, relationship breakdown. Absentee parenting, a father or whoever the gambler is, his body is present in the house, but his psychological state is not there. So, there can be neglect of family values and neglect of the family and that can have a very serious impact over the years. There is a negative impact on the physical and mental health of other family members and the gambler.

Another interviewee suggested the cited prevalence figures for Ireland may significantly under-state the nature of gambling harms in the country, in particular because of the migration of activity to online platforms. He said: "Right now you can bet in the middle of the night on Australian rules football matches. You can bet in the middle of the night on some tennis match in Argentina, right? So nothing could have been more conducive to addiction than this, right? It's a bit like if you've got gambling problem and you've got an online gambling account. It's a bit like an alcoholic living in a pub." He further suggested that "what we do know is that gambling is essentially a very secretive thing, abjectly online gambling. It's extraordinary hard to get hard figures on it because part of the addiction is the secrecy." He also pointed to the "hugely addictive nature of online gambling itself, deliberately designed in that way." I mean, it isn't an accident that people get addicted to online gambling, but they're kind of meant to, you know, the systems are set up in that way...... like all forms of the Internet...... The way we're addicted to our smartphones, those systems are addictive. Inherently addictive, you know, the way people were constantly scrolling on our smartphone. "

Our findings add further emphasis to stories reported in the media in Ireland (*Irish Independent*, 2013, 2014, 2016a, 2016b, Lynch, 2018). Murphy (2019) investigated the relationship between gambling harms and sport through a case study of an amateur sporting organisation, the Gaelic Athletic Association (GAA) in Ireland. He conducted focus groups and semi-structured interviews with GAA players in Cork Institute of Technology, Ireland, as well as interviewing leading members of the GAA, Gaelic Players Association (GPA) and addiction counsellors. He analysed his findings using the Health Belief Model (HBM) from the fields of health psychology and health education. The model seems to have the potential to explain the (individual) addictive disorder gambler's behaviour but is much more limited in its capacity to understand the broader risk factors for problem gambling within the GAA.

In summary, our interviews confirm the pattern of harms identified in international research over the past two decades is also evident in the Irish landscape. Treatment providers attest to patients experiencing the full gambit of harms, from significant financial losses through to damage to romantic and familial relationships and extending to criminal activity in pursuit of 'chasing' gambling losses.

4.6 The impact of COVID 19 on gamblers and society

There is some evidence that Covid 19 has exacerbated underlying patterns of harmful gambling in Ireland and in other jurisdictions. During lockdowns betting shops have been closed and live sporting events cancelled. DEspite this during the first lockdown period, from March to May 2020, health professionals speculated in the mass media that individuals would gamble more online during the lockdown and hence called for action to introduce limits on online gambling activities to reduce the potential of the exacerbation of problem gambling (*The Irish Times, 30 April* 2020). While some European countries (Finland, Germany and Spain, for example) have been tightening their laws and implementing restrictions on online gambling platforms or advertising in response to the lockdown (*The Irish Times,* 30 April 2020), no specific regulatory actions were taken by the government in Ireland. Further, Ireland still does specifically regulate online gambling.

In the UK, data from the Gambling Commission demonstrated that in March 2020, online virtual sports betting increased by 88% and online poker by 53% compared to the same month in 2019 (Wired, 4 Dec 2020). Lockdowns, it has been argued "not only pushed gambling further into the online sphere. They also made people suffering from gambling addiction, those at risk of developing one, and those in recovery more vulnerable". A combination of people working from home for protracted periods with constant access to the internet (and thus to online gambling options) with feelings of boredom, isolation and anxiety, along with intra-familial conflict contributed to an increasing number of people turning to online gambling. The greater time spent looking at computer screens in order to work or fill in time exposed many people to more online gambling advertisements. Data for October 2020 provided by the Gambling Commission showed a further big increase in the online market - Gross Gambling Yield (GGY) increased by 29% month-on-month with a 7% increase in active accounts and 12% increase in the number of bets. In addition, the number of online slots sessions lasting longer than an hour (considered problematic) increased by 12% in October from September (corresponding with newly imposed regional lockdowns in the UK). Slots GGY also increased by 10% (Gambling Commission, 17 Dec 2020). The micro-targeting of individuals by social media platforms meant that even after self-excluding from gambling websites, many individuals were still being bombarded with adverts for gambling products. This included sponsored posts, celebrity endorsed gambling products and stories promoting gambling. Neil McArthur, Chief Executive of the Gambling Commission, told the House of Commons Public Accounts Committee that about 15% of gamblers "were now spending more time gambling, rising to 60% of the most engaged gamblers, who are at higher risk of addiction". The Gordon Moody Association told the BBC that in May 2020 the interactions on their helpline tripled. The charity also related that it had seen a spike in the number of women requesting support who are primarily drawn to online games such as bingo (BBC News, 2 May 2020; *Wired*, 4 Dec 2020).

Research conducted in Sweden found that although a significant number of gamblers decreased their gambling activity as a result of Covid, more than a quarter of the high risk gamblers attested to gambling more than before the pandemic. The survey, conducted by researchers at Lund University employing the Problem Gambling Severity Index (PGSI), found that 5.9% of gamblers said they gambled more since the coronavirus hit, compared with 11.6% who said they gambled less. The research identified online poker players as the most likely category of gamblers to gamble more, followed by those who played online bingo, and then those who played at online casinos. Strikingly, young people were more likely to gamble more, with 17.7% of 18 to 24 year olds, and 13.0% of 25 to 29 year olds, reporting doing so. Older cohorts were likely to gamble less. Among people categorised as "moderate risk" gamblers, scoring three to seven on the PGSI index and making up 5% of the sample, 21% said they gambled more. However, the most striking finding concerned those in the "high risk" category, who scored an eight or above on the PGSI index. 27% said they gambled more. Worryingly, among those high risk gamblers who had self-excluded over the previous year, 33% reported gambling more (O' Boyle, 15 June 2020).

The closure of betting shops and casinos in Ireland has had an impact on sections of the gambling industry and consumer behaviour - but the evidence suggests this has not led to an overall reduction in gambling prevalence or revenues in sub-sectors which cater to online gambling and gaming. Industry interviewees indicated that the closure of betting shops, live sports and race tracks meant gamblers moved to other types of online gambling services. Indeed, global quarterly revenues for Flutter Entertainment, for example, rose by 30 per cent to £1.3 billion (€1.45 billion) in the third quarter of 2020. Flutter owns Paddy Power and Betfair as well as a range of American and Australian entities.

Findings from our interviews with treatment services indicate that gambling harms certainly persisted and may have deepened during the Covid period. Helplink Mental Health's records reported an increase in the number of people seeking help for gambling addiction problems between May and June (Helplink, 2020). The Extern Problem Gambling Project (formerly Problem Gambling Ireland) also noticed a marked rise in people contacting the helpline service since the implementation of Covid restrictions. One interviewee (14092020) stated: "It (harmful gambling) became more of a problem due to the basic circumstances of kind of living remotely..... I've heard that the COVID payments for younger people, again young men. Have this regular source of like cash and nothing to do with it and that I've heard of their relatives such as their mother or whoever getting on to problem gambling associations." The lack of live televised sport for an extended period may also have encouraged migration to other online activities such as poker and casino play. As one interviewee put it: "It diverted them towards these other issues. The other areas like casino games and card games, which they never looked at before maybe and now they've acquired another enthusiasm."

The arrival of lockdowns in Ireland in 2020 also forced a change in the way many treatment centres and counsellors supported their clients. These organisations had to adroitly adapt and provide their counselling services online (using Skype, WhatsApp or Microsoft Teams) or by phone. The Dunlewey Treatment Centre, for example, attests to engaging "Health and well-being calls" to monitor their clients. Many centres remained closed throughout the lockdown period for in-patient treatment, and have cancelled important support services such as their group therapies and family visits. Delays in treatment responses were attested to by many of our interviewees as a consequence of Covid, with a range of knock-on negative impacts on clients.

This change has certainly also impacted the recovery of some patients as family supports play an essential role in the treatment sessions. The move to online delivery of supports also brought the risk of a drop in participation. One interviewee (01092020) from a treatment centre, for example, stated: "Some people did not want to engage, like I noticed I run SMART Recovery group three times a week and when we meet in person we got between 20, 25 people in a room and then when we met online we got 6 to 10." Another interviewee (09102020) pointed to the disruption in the linkages between services, where the treatment centre makes a referral for a client to other services: "It has slowed down our referrals as well because the community workers aren't meeting people face to face anymore and we would see, particularly with our cohorts of 15 to 21 year olds, a lot more complex mental health issues because they are not getting to their local supports so they are coming straight to us." Summing up, we can say with confidence that the imposition of repeated lockdowns in Ireland since March 2020 has had a significant effect on gambling behaviour. Early evidence suggests that the already significant migration of gamblers to online gambling platforms was further accelerated by lockdown and that existing patterns of gambling harms deepened as many individuals struggled with anxiety, depression, boredom and the easy and constant availability of online gambling options. At the very least, there is a case for significant further research on the impact of Covid 19 on the gambling industry and on Irish gamblers' engagement with gambling.

5. Responses to Gambling Harms in Ireland

In this section we draw upon our interviews and document analysis to map and identify the range of responses to gambling harms that have been attempted and/or implemented to date in Ireland. Our starting point for this review of the Irish landscape was the list of responses we identified internationally (see section 3.4), allowing us to compare how Ireland has responded to gambling harms relative to peer countries.

Our analysis makes clear that far too few of the responses identified internationally have been implemented in Ireland to date. The failure to develop a comprehensive public health response or to (as yet) put in place an independent regulator and update gambling legislation, means that many of the state responses evident in peer jurisdictions in Europe and elsewhere are not being implemented in Ireland. Where responses exist they are often piecemeal, rely on individual rather than social actions, and their efficacy is not independently evaluated. The consequence of this is that gambling harms are not being seriously addressed in Ireland. Despite some very welcome interventions, the overall picture documented in this chapter represents a serious failure on the part of the state and the industry (as the two key stakeholders who benefit financially from gambling) to respond adequately to individuals and communities who are suffering from gambling harms in Ireland.

5.1 Public Health Approaches and Treatment Services for Gamblers

Severe levels of gambling disorder have been described by medical professionals as a set of behaviours which display symptoms of an addictive illness and can be diagnosed with diagnostic tools and treated with individualised or generalised treatment programmes. Less severe forms can be treated with a range of other treatments including counselling, peer support and self-help strategies. There is an increased recognition of gambling as a public health issue around the world, and while the approach to the problem varies country to country, many jurisdictions have developed approaches tailored to local cultural and social contexts. In Ireland by comparison we found that there is no specific public health approach or policy for gambling disorder within the public or state health system. This suggests Ireland is now a significant outlier in the international context.

Our research work confirms the findings of two previous studies by a research team based in St. John of God Hospital in Dublin. Columb et al., (2018) investigated service provision around problem gambling and found that a potentially large number of people with gambling problems were not being identified and treated. This is due to the ways in which the Irish healthcare system treats referrals of individuals with suspected gambling problems, as well as a lack of basic information about the nature and scale of problem gambling in Ireland. The study also reported the need for more specialists in addiction to assess and manage gambling disorders effectively. O'Gara (2019) demonstrated that problem gamblers have to access generic addiction services, instead of receiving specialised treatment for gambling disorder. General practitioners simply do not have the option of making a gambling-specific referral for patients. Significant gaps in service provision were highlighted in many of our interviews. Here, for example, is the response of our of our interviewees:

Interview 07102020: "the oral direction from our operational manager and clinical directors is that officially we don't treat gambling disorders. Now that is the official stated policy, it is not written, but the reality of our practice environments is that people presenting with alcohol or drug problems very often have gambling issues either to the forefront or very often maybe lurking in the background somewhere (...) but very often it is a part of our work

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and we do end up responding to it in an unofficial capacity".

Echoing this point, another interviewee stated: "I think gambling falls in a really unfortunate place. It's not drug and alcohol. I don't know what Department it falls in under. It should get a lot of attention, but doesn't' (Interview 01092020) A number of different interviewees based in treatment centres suggested there "should definitely be a specific service for gamblers with tools with evidence based treatment models..... that's a massive gap even in terms of government".

The Irish health services tend to treat all problem gamblers as gambling addicts. Problem gambling and gambling addiction actually involve two different types of gamblers and differential levels of harmful gambling. Gamblers can exhibit problems with their gambling, and this gambling behaviour might be disrupting their life. However, not all problem gamblers can or should be classified as having a gambling addiction. The health services in Ireland simply do not make a sufficient separation at present between these two types of problem gamblers. In great part this is due to the lack of clear definition of terms and differentiation between types of gamblers, as well as a lack of prevalence data available in Ireland.

Interview 01092020: "What do you mean, gambling problems? They might have addiction to gambling so that I have lost control over their ability to choose when they can gamble. So I now maybe I don't have enough information around gambling, but it would just be gambling addiction, wouldn't' it? There wouldn't' be various types of. Ok, this is working maybe."

Reaffirming this point, another interviewee stated: "We just treat all the clients as the same for gambling addiction" (Interview 04092020).

Gambling-related problems in Ireland are mainly addressed indirectly through the provision of treatment and counselling services. The Health Service Executive Drug and Alcohol Services provide addiction treatment to gamblers that present with alcohol or drug problems. The HSE provides up to 8 sessions of counselling under the 'Counselling in Primary Care' (CIPC) service from 240 different locations in Ireland.²⁷ The service deals (amongst other issues) with anxiety, depression, loss and relationship issues, and is available to holders of a 'Medical Card'. On average doctors refer up to 20,000 people per year through the service. At any one time up to 2,000 individuals might be 'in the system'²⁸. Community projects, funded by the Regional Drug and Alcohol Task Forces around Ireland, also offer some services to gamblers, if associated with other addictions, usually via community mental health nurses (College of Psychiatrists of Ireland, 2020). Community addiction counsellors usually adapt tools and approaches available for drug and alcohol treatment to gambling addiction but regional discrepancies are evident in the availability of multidisciplinary staff and resources (Columb et al. 2018).

Though HSE addiction counsellors have not received formal training in gambling addiction, some of them have taken short training courses to fill the knowledge gap. The limited training available in Ireland thus involves an adaptation of therapeutic approaches and models used in alcohol and drug addiction. As one interviewee stated: "You know, community reinforcement approach, solution-focused, all that stuff that he brought in (the course). We have been using those models

https://www.hse.ie/eng/services/list/4/mental-health-services/counsellingpc/

https://www.hse.ie/eng/services/list/4/mental-health-services/counsellingpc/

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²⁷ See HSE, Counselling in Primary Care (CIPC)

²⁸ See HSE Counselling in Primary Care (CIPC)

anyway within substance use. They are not specific for gambling". As gambling addicts and problem gamblers might differ significantly from alcohol and drug addicts, they might require very different types of interventions. The inadequacy of this 'one size fits all' approach was a consistent theme in our interviews with stakeholders.

Examining the training terrain In Ireland, the Diploma in "Substance Misuse and Addiction Studies" (NFQ 7) includes gambling addiction as part of the course. This Diploma programme is coordinated and delivered by University College Cork (UCC) in collaboration with the HSE Cork-Kerry Community Healthcare Addiction Services. ²⁹ Currently, the course only includes three hours on problem gambling as part of the treatment modules. However, the coordinators are proposing to increase gambling related content to 10 credit/40 hours lessons to provide more in-depth knowledge about problem gambling and to fill the gap in education and training in this area. Our interviews certainly suggest a lack of specialised knowledge on the part of those health practitioners in the public and private spheres and a desire to acquire the skills needed to successfully treat individuals presenting with the effects of harmful gambling.

Extern Problem Gambling Project (previously Problem Gambling Ireland) is a charity that offers gambling specific education and training for health professionals, counsellors and psychotherapists. Their counsellors have delivered some professional training in Ireland to employees of the HSE in different locations. They offer a 6 hour training course called "Foundation in Problem Gambling Assessment and Brief Interventions" which is accredited by the Nursing and Midwifery Board of Ireland. Among the topics covered in this short course are identifying risk factors associated with problem gambling, evaluating the full spectrum of gambling behaviour, the psychology and neurobiology of harmful gambling and both harm reduction and relapse strategies ³⁰. The organisation also provides a truncated online version of this course.

Gambling addiction in Ireland is treated in both residential and non-residential settings. Most people experiencing problems with gambling are treated in the community in non-residential settings and specifically through addiction counselling. In the public health service, non-residential treatment is free of charge. Addiction counsellors provide an assessment (using the DMS-5 questionnaire), counselling (such as cognitive behavioural therapy) or make referrals to residential treatment centres or other types of support, including mutual support groups like Gamblers Anonymous Ireland. However, once the treatment is completed, there is no standard way to assess the effectiveness of treatment outcomes.

Interview 04092020. "We are not really good at this. We're unsure about this, really to be honest. The goal is your quality of life (should) be improved. Some of the staff will use a pre and post questionnaire. It may not be specific to the changes in their gambling behaviour but their overall quality of life (...) But that's something that we need to work on ".

Interview 25082020. "There is no marker really, it is about quality of life, and it is about discontinuing the behaviour of gambling".

As in the case of other addictions, people who are trying to stop their gambling or control it need support to avoid relapses. The health service should provide their clients with a relapse prevention plan similar to those used to address other forms of addiction. Usually, this prevention plan includes having occasional meetings, whose approach is the same as in treatment.

Interview 25082020: "CBT is the main therapy, but we also use motivational interviewing, we would use cognitive therapy on its own and relapse prevention".

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²⁹ Programme 'Substance Misuse and Addiction Studies', UCC Adult Education Courses, https://www.ucc.ie/en/ace-dsmas/

³⁰ See the website: https://www.problemgambling.ie/problem-gambling-training.html

Finally, another important gap in interventions in the Irish health services is screening and early detection of people at risk of developing a gambling addiction. Early intervention can disrupt patterns of problem gambling and has been shown to be highly effective in reducing gambling disordered related behaviours (College of Psychiatrists of Ireland, 2020; Robson et al., 2002). Many people do not seek help because of the stigma related to gambling. When they do seek help, it is because the severity of their problems is often very significant; individuals may be heavily in debt or at risk of suicide. Therefore, prevention is equally or even more important than treatment. An example of a potentially useful screening and prevention initiative is already in place in the UK. In 2018, Gambler Aware announced a two year £1.5m partnership with Citizens Advice, designed to help front line staff better understand, prevent and reduce gambling-related harms. The Citizen Advice service in England, Wales and Scotland are piloting a screening tool for gambling addiction (Gambling Commission, December 2019). There has been no similar initiative in Ireland to date.

Summing up, our research indicates that Ireland lags significantly behind peer countries in the provision of treatment pathways for those with severe gambling problems. HSE service provision is not specialised but part of a general 'toolkit' for managing drug and alcohol addiction. Regional discrepancies characterise the public system and make it difficult for gamblers experiencing problems to access services in their areas. Private services exist but are expensive. Screening for gambling addiction is virtually non-existent and makes it difficult to interdict those at risk of developing significant problems with harmful gambling. Gamblers are often reluctant to raise addiction problems with their GPs and when GPs do identify patients with gambling disorder, there is no dedicated treatment pathway, forcing patients to rely on a poorly resourced public 'omnibus' service that lumps in gambling disorder with alcohol and drug problems. Relative to the scale of accelerating patterns of harmful gambling in Ireland, this system is not fit for purpose.

5.2 Charity, Voluntary and Private Treatment Services Providers

Treatment for individuals having problems with gambling in Ireland is also available from charities and privately owned or commercial service providers. Table 6 and Figure 14 provides a list of charity, voluntary, civil and privately run services that we identified on the island of Ireland. Like the public health approach, these centres treat gambling based on a generalised addiction model but some offer early intervention services, counselling helplines and both residential and non-residential treatments.

Table 6: Charity, Voluntary and Private Problem Gambling Service Providers in Ireland

Aiseiri Rehabilitation Clinics (Different locations)		
Bushypark Addiction Treatment Centre (Ennis)		
Cuan Mhuire Addiction Treatment Centres (Different locations)		
Dunlewey Addiction Services (Belfast and Northern Ireland but with		
counsellors in the Republic of Ireland also)		
Gamblers Anonymous Ireland (Different locations)		
Helplink Mental Health (Galway, Mayo)		
Hope House Residential Center (Mayo)		
Rutland Centre (Dublin)		
Saint John of God Hospital Research Group (Dublin)		
Saoirse Treatment Centre (Limerick)		
Smarmore Castle Private Clinic (Louth)		
Spectrum Mental Health (Different locations)		

Substance Abuse Service, The Lodge, St Vincent's Hospital (Dublin)

Tabor Lodge - Residential Addiction Treatment Centre (Cork)

The Gambling Clinic - Extern Problem Gambling (Dublin and Waterford)

The Grove (Kerry)

Gaelic Athletic Association counselling services to intercounty players (32 counties)

White Oaks Centre (Donegal)

Aiseiri Rehabilitation Clinics (Different locations) Bushypark Addiction Treatment Centre (Ennis) Cuan Mhuire Addiction Treatment Centres (Different locations) Dunlewey Addiction Services (Belfast & other locations) **Gamblers Anonymous** Ireland (Different locations) Helplink Mental Health Hope House Residential Center (Mayo) Rutland Centre (Dublin) Saint John of God Hospital Research Group (Dublin) Saoirse Treatment Centre (Limerick)) Smarmore Castle Private Clinic (Louth) Spectrum Mental Health (Different locations) Substance Abuse Service, The Lodge, St Vincent's Hospital Tabor Lodge - Residential Addiction Treatment Centre (Cork) The Gambling Clinic -Extern Problem Gambling (Dublin and Waterford) GAA counselling services (32 counties) White Oaks Centre (Donegal)

Figure 14: Charity, Voluntary and Private Problem Gambling Service Providers in Ireland

As is the case in the treatment offered by the public health services, there is no clear distinction made between problem gambling and gambling addiction. In fact, charity and private treatment centres also use other terms such as gambling disorder or compulsive gambling.

Interview 09102020: "We would probably originally have used gambling disorder or gambling addiction. I suppose now currently I would prefer to use problem gambling".

Few of our interviewees demonstrated significant knowledge of the difference between these terms.

Interview 19082020: "you don't have to be addicted to gambling to have a gambling problem, you can be experiencing gambling related harm without meeting the criteria for a gambling addiction. If you are addicted to gambling you also have a gambling problem. So both groups would come under the broad umbrella of problem gambling".

Interview 14082020: "We use 'problem gambling' as the term for the service. We do that because, a couple of reasons, the word addiction can be very, very strong for people and they don't want to associate themselves with having an addiction while they might associate themselves with having a problem with gambling".

Some centres offer residential in-patient treatment, residential out-patient treatment, and either group or individual therapies. The most common form of treatment is face-to-face counselling. Some services tailor the treatment programmes to the clients' needs, while other services offer the same programme and the same approach to all their clients. Treatment approaches differ across each service provider and typically have a mix of techniques such as cognitive behaviour therapy (CBT), motivational interviewing or solution-focused therapy. However, our interviews suggest that a majority of counsellors single out CBT as one of the most effective methods for addressing harmful gambling. Programmes usually include from 6 to 12 sessions, over a period of 2 months or over one year. The cost ranges between €50-€80 per 1-hour session, but some organisations (i.e., Dunlewey, Helplink and Extern Problem Gambling's associated entity, The Gambling Clinic,) offer free services. Some of these centres receive funding from the Irish Bookmakers Association (via the Gambling Awareness Trust) or other charities. Cuan Mhuire, for example, opened the first residential treatment service specifically for harmful gambling in 2020, with the help of the Gambling Awareness Trust.

These centres offer a range of different services, including helplines, which often serve as the main point of contact with those affected by gambling. By calling the helpline, people find out more information about the support services and counselling available in their area. Such services do an initial assessment of the client's profile and the severity of the problem. Based on the initial evaluation and current service demand, helplines may refer clients to their services or other centres. In terms of assessment, most of the services use a questionnaire. This tool might be the DSM-5, Problem Gambling Severity Index (PGSI), Rosenberg self-esteem scale or other questionnaires to assess the level and severity of the problem and then decide the appropriate treatment pathway.

However, similar to the public sector, there is no consensus on how to assess the outcomes of treatments.

Interview 22102020 "All clients are invited to evaluate the experience at discharge, and then our main way of evaluating and measuring the effectiveness is through attendance at continuing care programs".

Interview 09102020 "We use two or three scales (..) and then we would check in with the young person so on a weekly basis they would check in with us when they finish treatment,

and that would give us an indicator of how well they are managing in the community. So it is subjective and objective".

As is the case with other addiction services, charities and private services endeavour to deal with gambling relapse. Prevention plans are put in place after treatment to help the gambler in the process of recovering. Regular services include occasional individual or group meetings with clients.

However, Covid19 has presented significant challenges for both service providers and clients. Service providers have to implement new measures to prevent relapses. For example, Dunlewey implemented well-being calls, which consist of calls to clients to check how their clients are coping with their gambling and lockdown. There is some evidence that Covid19 has changed gambling behaviour for the worse in Ireland, as in other jurisdictions. With land-based casinos and betting shops closed, some gamblers have stopped gambling, while other gamblers have switched to the online sphere and even increased their gambling.

Interview 210282020 And a real rise in the online, especially since the Covid, it has really gone through the roof. I have seen a lot, and females as well would be the casinos more, the online roulette and the tables. Football, the football betting has gone really through the roof, I see it a lot, instead of the bookies now and going in and physically handing over the cash it is definitely the betting on the football is probably one of the biggest spikes I have seen anyway. Casinos, since they have been closed more so, that is where they have gone from the actual casinos to the online. So I have seen a huge spike of online gambling as well. That is what a lot of my clients would present with.

Interview 17082020 (Covid19) has helped a lot of people at the start, it helped a lot of people with the compulsions to gamble because sport has been taken out of the equation or the bookies have been closed. On the flip side, again it is like a double barrel, on the flip side you would see that people have drifted or have discovered online gambling that may have not discovered it before (...) we have seen lately a lot more women have presented for help whereas before you would have a smaller percentage. So I would kind of, again this is my personal opinion, that women I think are more resourceful and more in regard to when they have a gambling issue they just about hold everything together easier. Not easier, they hold everything together better, so I think because of the Covid, and because the casinos have not been open they have drifted on to the online and have lost control a lot quicker online because online is just instant.

Covid19 has exposed significant gaps within the Irish health system with regard to behavioural addictions and shone a renewed light on the vulnerability of gamblers. Gambling seems to be expanding and appealing to a diversity of people, including women and young people and the pandemic appears to have reinforced existing trends while accelerating others, in particular the move to online platforms (and thus less visible forms of gambling). In this kind of landscape, providing supports to those who are experiencing problems with gambling is even more of an imperative, but the early evidence suggests that support services have been very patchy and inadequate. Our research also suggests that private providers and charities are disproportionately likely to be the main service providers in relation to patterns of harmful gambling in Ireland. These entities literally plug the gaps in state services, in both national and regional terms.

5.3 Education and Prevention Initiatives

Gambling education programmes and awareness training constitute an important preventative strategy in response to gambling internationally and these programmes are beginning to be introduced in Ireland too. These programmes target individuals from specific age cohorts, in different settings such as in schools and universities, workplaces, or sports organisations, and are projected through television, radio and the Internet as well as within specific settings. In Australia, the Victorian government set up the Responsible Gambling Foundation by statute, to address the challenges presented by gambling harms to the community. Such initiatives include school programmes, workshops, and - more broadly - societal information/awareness campaigns. However, much of this training in Ireland is funded or organised by the gambling industry or civil society rather than the government. Indeed the absence of the state is particularly striking here. The task of raising awareness among potentially vulnerable cohorts of the population and providing information about harmful gambling largely falls to non-state entities.

The only notable exception to this general absence of the state lies in education. School programmes carry at least some potential for targeting young people. In Ireland, the syllabus for Social, Personal and Health Education (SPHE) at the post-primary level contains some content which engages with gambling issues (Fulton, 2015). One of the purposes of the SPHE is to develop student's skills and knowledge to enable them to make informed decisions when faced with a range of challenging issues, including the use and potential abuse of alcohol and other substances. Though the SPHE syllabus does not include gambling as a specific subject, this topic falls under the 'Making Decisions' strand of the programme, and "it is a matter for the management of schools to consider which programmes may best suit their individual needs", according to the Irish Minister for Education and Skills.³¹ Although the argument can be made that this devolves decision-making on syllabus content to individual schools, it also indicates that the Department of Education and Skills does not provide sufficient direction or leadership to ensure that schools make pupils aware of the potential harm caused by gambling.

In the relative absence of education programmes for Irish adolescents, the charity Problem Gambling Ireland (now renamed Extern Problem Gambling) has developed resources for parents. In April 2019, for example, it published a "Parent Guide to Gambling" and "Recognising the signs of teenage gambling". The first document briefly addressed how to explain the world of gambling to children and highlight the risk involved in participating in gambling activities. The second guide listed some indicators to recognise when a teenager has developed a problem with gambling and how to talk about their gambling. The charity also developed a podcast and delivers harm prevention talks to both second and third level students. The website also provides a link to the Victorian Responsible Gambling Foundation's guide for parents on how to talk about gambling with teenagers. This is exactly the kind of publication the Irish government should consider producing for Irish teenagers.

Other civil society and sporting organisations are also involved in different forms of educational activity and awareness raising. The Gaelic Athletic Association (GAA) has led the way as a national sports body providing education and counselling support to players. Gambling-related problems within GAA circles have come to prominence in recent years with several high-profile GAA players (e.g., Oisin McConville (*Irish Independent*, 20 December 2014) Niall McNamee (*Irish Independent*, 14 November 2013), Cathal McCarron (*Irish Independent*, 30 October 2016), David Glenon (*The Journal.ie*, 2018) and others (*Irish Independent*, 13 May 2016)) publicly acknowledging their problems with gambling. The Gaelic Athletic Association launched the campaign "Reduce the Odds" in 2018 to inform GAA members of the Association's gambling policy and educate members about

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School Curriculum. Dail Eireann Debate, Tuesday, 23 July 2019 https://www.oireachtas.ie/en/debates/question/2019-07-23/490/

problem gambling. The campaign included the distribution of awareness posters to all GAA clubs, and a workshop for clubs and squads made available on request. To date more than 20 such workshops have been facilitated. In part this came about because of the awareness within the GAA of the ever-increasing number of elite (inter-county) players asking for help with gambling problems. Former GAA athletes who have experience of problem gambling, as well as trained consultants and volunteers deliver these workshops and share their experiences. Oisin McConville, the former Armagh player, subsequently trained as a counsellor and psychotherapist and helps deliver the workshop programme for the Association. Every county has a health and wellness volunteer and this network is used to disseminate the awareness programme to every club in the country. In addition, all inter-county players now have access to a free counselling service (through the GPA). The GAA had planned to run a major one-day awareness campaign on problem gambling during the semi-finals matches in the All Ireland Championships at Croke Park in 2020. This had to be postponed due to COVID 19. In 2021, however, the Association will launch a new education and awareness campaign on both a national and regional level, available to its 1600 clubs in the 32 counties of Ireland. Funding of €52,000 was awarded by the Gambling Awareness Trust to develop the training programme, to train facilitators to deliver the content and for an advertising campaign aimed at players and members at all levels.

Youth gambling is an increasing problem, especially among university students. The Union of Students in Ireland (USI) has proposed a Gambling Harm Reduction Strategy. The primary purpose is "to provide a framework for good practice for the support of students, the promotion of well-being and prevention of gambling dependency difficulties, to be implemented by both the Union of Students in Ireland and local Students' Unions" (Union of Students in Ireland, 2017). Some local students' unions around Ireland have already started to provide information and resources to students on gambling and associated harms. To date the Irish universities have not produced a coordinated approach to harmful gambling within their community. Neither have any of Ireland's universities or technological colleges, nor the Irish Universities Association (IUA) addressed the problem in any meaningful way. There should be a role here for Irish third level institutions in evaluating the extent of problem gambling amongst student bodies and introducing policies to combat the problem.

A recent industry initiative in the UK and Ireland is the annual awareness-raising campaign, 'Responsible Gambling Week', rebranded in 2020 (19-25 November) as 'Safer Gambling Week'. This campaign started in 2017 in the UK and launched for the first time in Ireland in 2018 (RGWeekIrl2018) with the Irish Bookmakers Association taking a lead on behalf of the industry (Interview 15092020). The theme for the RGWeekIrl2018 campaign was "A great tip – know when to stop". The purpose was to talk about how to gamble responsibly and provide information on the available treatment services. The National Lottery displays a 'Play Responsibly' policy on its website which directs people to charity, self and mutual help supports and interventions. But it is noteworthy that the Safer Gambling initiative came from the gambling industry rather than the Irish state. It represents another instance where we can mark the absence of the state in a policy sphere where there is increasing evidence of significant societal harm.

Despite industry developments around responsible or safe gambling, a recent analysis of responsible gambling tools across different online gambling operations in Ireland (Cooney et al., 2018) found significant shortcomings. The study evaluated 39 Irish gambling websites and compared them with non-Irish gambling websites. The research team found that while the majority of operators have a responsible gambling webpage and most offer some type of responsible gambling tool (i.e., spending limits, self-exclusion, cooling-off periods, reality checks, etc.) they generally exhibited poorer performance in comparison with their non-Irish counterparts. Many of these websites needed to improve their responsible gambling features, especially "in the area of behavioural feedback tools,

age verification, and limit-setting, to facilitate robust consumer protection" (Cooney et al., 2018, p. 10).

A related piece of research investigated online gaming and gaming disorders (Columb et al., 2019). This study briefly discusses the interrelationship between gaming and gambling through the use of a recent development in games called 'loot boxes'¹². Although there is still debate around whether loot boxes represent a form of gambling or not, Ireland has labelled loot-boxes as a form of game (Columb et al., 2019). A number of other European countries have pushed for loot boxes to be labelled a gambling mechanic and for them to be removed from online games aimed at teenagers and children as they are deemed to encourage games of chance. In 2020 the Pan European Game Information System introduced a new label for games to inform consumers when a paid random item is present in a game.³²

It is also the case that responsible gambling messaging must compete with the aggressive marketing and promotion activities of gambling companies. Messages designed to help gamblers engage in responsible engagement with gambling products are often barely visible relative to advertisements for new customers, player loyalty rewards and endless saturation promotion of specific products and/or events. Some recent evidence suggests problem gamblers in Ireland identify blanket advertising during televised sports fixtures as a particular problem. The effect of this advertising is to negate the potentially useful role played by social responsibility tools and safe gambling messaging. International evidence increasingly points towards a complete ban on advertising and promotion of gambling products/prices immediately before and during sports events as an important interventionist tool. Equally, better targeting of responsible gambling tools would benefit those who engage in harmful gambling.

5.4 Legislation, Regulation, Sanctions and Policies

The research we have conducted over the duration of this project suggests there is a very urgent need for legislation and policy development in Ireland to address gambling harms. On April 17, 2019, Professor Crystal Fulton of UCD made this point very succinctly when invited to appear before the Oireachtas Joint Committee on Justice and Equality and answer questions on the regulation and control of the gambling sector (Oireachtas, 17 April 2019). Her work has clearly informed the policy and legislative structures that are emerging in Ireland. O' Gara (2017) similarly has made the case for an urgent need to update Ireland's gambling legislative base. Nevertheless, Ireland still lags significantly behind peer jurisdictions in the oversight and regulation of gambling, especially developments in Great Britain.

The Programme for Government, agreed between Fianna Fail, Fine Gael and the Green Party in 2020, commits the Irish government to implement new legislation on gambling and to establish an independent regulator covering both land-based and online gambling with "the powers to regulate advertising, gambling websites and apps". This was an important change from the 2013 General Scheme of the Gambling Control Bill (which was not implemented) and which had proposed an 'Office for Gambling Control Ireland' to be located within the Department of Justice and Equality rather than a statutorily independent agency (Department of Justice and Equality, 2019).

The government has faced significant criticism from a range of stakeholders for its failure to update current legislation and in particular for its failure to keep up with technological changes over the past decade. It has also failed to address the emergence of private casinos. One interviewee expressed frustration "that there seems to be this constant delay and constant prevarication" (where regulation is concerned). This individual also said that "just even to acknowledge at an official level that there is

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³² For more see https://pegi.info/news/pegi-introduces-feature-notice

some kind of a problem that requires some kind of vaguely urgent response, right? That is still lacking."

Much of the work on updating Ireland's gambling legislation was done by an inter-departmental working group on 'Future licensing and regulation of gambling', chaired by the (then) Minister of State at the Department of Justice and Equality, David Stanton TD. This followed on from the establishment of the Gambling Policy Division within the Department of Justice and Equality in January 2017. The working group consisted of representatives of key government departments engaged with gambling issues, and, in addition, the Office of the Attorney General and An Garda Síochána. The Working Group met formally 6 times between February 2018 and January 2019 (Department of Justice and Equality, 2019).

Subsequently, in 2019 the government finally published the Gaming and Lotteries (Amendment) Bill which provides for a comprehensive overhaul of legislation dating back to the Betting Act (1931) and the Gaming and Lotteries Act (1956). Minister for Justice Helen McEntee stated in 2020 that "Work is currently underway in my department on the development of the legislation to provide the necessary modern licensing and regulatory provisions for the Irish gambling industry. I hope to bring proposals in that regard to Government next year," and that "given the size, complexity and technological development of the modern gambling industry and having regard to the outdated and complex arrangements, it will be important that the regulator will be established on a strong footing and adequately resourced to carry out this important task".³³

A commencement order that brought the Gaming and Lotteries (Amendment) Bill into force came into effect on December 1, 2020. But the appointment of an independent regulatory authority (which had been agreed by the previous government as far back as 10 January 2018) has been delayed again until 2021 at the earliest. Linked to this, the actual legislation introduced on 1 December 2020 was extremely limited in scope, covering only a narrow part of the gambling ecosystem and limiting itself to (mostly small-scale) lottery licensing of gaming and lotteries. The greater part of the legislation has yet to be enacted. Minister of State James Browne TD told *The Irish Examiner* newspaper that it was the government's intention to enact the remainder of the gambling legislation in 2021 with a new, independent regulator in place by summer 2021 (*Irish Examiner*, 30 December 2020).

The absence of an independent regulator matters. The willingness of the UK Gambling Commission to impose significant financial sanctions on gambling companies (detailed in chapter 3) is evidence enough for both the need, and impact, that such sanctions can make. No such fines have ever been issued in Ireland because of the lack of an independent regulator. The inter-departmental group recommended in 2019 that the new independent regulator should have effective sanctioning powers if consumer protection was to be achieved". However, it also suggested that "there may be constitutional limits on its ability to impose fines or administrative sanctions on gambling operators as might be necessary". In this regard the group states that "the office of the Attorney General should advise on the legality of permitting the regulatory authority to impose fines and administrative sanctions on gambling operators" (Department of Justice and Equality, 2019). This looks like a cop-out. The Irish government seems to accept and be guided by the best practice UK model of mitigating gambling harms. But when it comes to the issue of providing the regulator with the power of coercive sanctions, that seems like a step too far. Minister Browne has stated that the new legislation "could include spending limits, stronger age verification for mobile gambling, and a prohibition on promotions aimed at luring customers back to gambling" (Irish Examiner, 30 December 2020). However, the Minister stated that there would be no specific legislation of video

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³³ Ireland's Plan to Establish Gambling Regulator Delayed Again, 16 September 2020, European Gaming, https://europeangaming.eu/portal/compliance-updates/2020/09/16/77747/irelands-plan-to-establish-gambling-regulator-delayed-again/

game 'loot boxes', despite peer countries such as Belgium and the Netherlands banning these products.

International best practice would suggest that the planned legislation in Ireland needs to revisit its approach to addressing the promotion of and access to gambling, and that the independent regulator needs a robust range of sanctions to address the behaviour of certain industry actors. The regulatory authority should have the power to sanction any gambling operator operating in the jurisdiction deemed to have failed to live up to its obligation to protect customers from harm. They may also wish to examine online operators registered outside of the jurisdiction.

5.5 Limits on Gambling Advertising, Marketing and Promotion

The amount of gambling advertising on broadcast and social media in Ireland increased exponentially over the last decade, and is particularly prevalent around sporting programmes and within media programming. Horse racing, football, darts and snooker are amongst the sports most frequently cited in relation to gambling adverts or promotions. One interviewee, summing up the regulatory dilemmas, stated that "you could simply stop advertising gambling in every way, right? Having said that, if you do that, then media organizations are in trouble because they rely on advertising. Sports themselves are in huge trouble because gambling has now embedded itself so deeply into sport that there are many sports that simply wouldn't exist anymore if they weren't sponsored by gambling companies. This is what has been happening, why the governments have been asleep. Gambling companies have been buying up the world, if you like" (Interview 14092020).

There is virtually no oversight of the vast amount of advertising and promotion of gambling products in Ireland. In regard to advertising and the promotion of gambling, the 2019 inter-departmental group came down on the side of equivocation, self-regulation and a reliance on consumer complaints. In proposing an overarching Code in respect of all gambling advertising, sponsorships and promotions, the recommendation was that the proposed new gambling regulatory authority should work with existing self regulatory authorities including the Advertising Standards Association of Ireland (ASAI) and the Broadcasting Association of Ireland (BAI), as well as consumer bodies, and sporting organisations such as the GAA. This was after President Michael D. Higgins called for a ban on gambling advertising around sporting events.

The Irish Bookmakers Association has adopted a voluntary code, encompassing responsible gambling messaging on all adverts, together with training for staff. The approach taken by the Irish government's inter-departmental working group was one of persuasion rather than active coercion: "The Code shall contain appropriate, proportionate and effective measures having due regard to potential negative consequences for sporting organisations and events" (Department of Justice and Equality, 2019:57). Further, the regulator should "adopt a persuasive approach to combating egregious advertising or promotion of gambling activities" (Department of Justice and Equality, 2019:57). The tentative nature of the approach is again evident in the suggestion that gambling products might be accompanied by the "health warnings" imposed on cigarette and alcohol products (Department of Justice and Equality, 2019:57). This is despite the strong evidence in the public domain about the increased penetration of gambling advertising and promotion pitches across a large range of television and social media platforms in recent years. The approach looks increasingly weak compared to the increasingly muscular interventions now being adopted by gambling and advertising regulators across Europe, where significant bans or tight limitations on advertising, marketing and promotion are now being implemented in Italy, the Netherlands, Spain and other jurisdictions.

The horse racing industry in Ireland is deemed to constitute a 'special case' where advertising and promotion of gambling are concerned, as a good proportion of race sponsorship is provided by

gambling companies. The industry, it is often argued, would be in peril without the sponsorship of gambling companies. These companies are provided with saturation coverage on the two dedicated horse racing channels (Racing TV and Sky Sports Racing) and their representatives are invited on to these channels on almost a daily basis to talk up their products. Racing TV now holds the contract to broadcast all Irish race meetings, so matters more for the promotion of gambling products to an Irish audience. RTE continues to transmit the most important races in the annual calendar and upped its coverage significantly during 2020 when horse racing was the first sport to be given the green light to resume after the spring Covid wave.

In the broader sphere, the BAI can only regulate advertising by media organisations licensed in Ireland and thus has no remit with regard to cross channel and transnational operations such as Sky, ITV, UTV or the BBC. The focus of the existing codes is on limiting advertising that glamorises gambling, or suggests it provides an escape from personal or social problems or implies that gambling is a solution to financial or personal issues. Many of the complaints made to the BAI and the ASAI relate to gambling advertising that has already aired and thus consumers have already been exposed to it. Companies often use humour in their advertising, especially Paddy Power, which has been criticised on many occasions for producing controversial adverts (Most recently in early 2020, an advert fronted by actor Colm Meaney, pitting the "Irish" against the "English" in advance of the Cheltenham Festival). However the ASAI does little to monitor advertising during matches, promotional materials like hoarding in sports stadiums or discussions of odds and betting in general broadcast programmes (which is akin to product placement).

The National Lottery is an extensive media advertiser across all forms of media. Advertising by the National Lottery does not fall under the remit of either the ASAI or the BAI. There is also nothing in the National Lottery Act 2013 on advertising. The National Lottery website does carry its code of practice on advertising and marketing and notes that it complies with the ASAI code of standards. It notes that its marketing communications and public relations should not encourage problem play or portray any actions that would be considered socially irresponsible or lead to social, financial or emotional harm. It specifically notes that the national lottery should not exploit popular or youth culture in its materials or try to appeal directly to those under 18. Media reports in the summer of 2020 noted that the National Lottery operators in the UK, Camelot, had spent £115 million of good causes money on advertising (*The Times*, 26 July 2020). Camelot Lottery Solutions provides lottery services to the National Lottery in Ireland and the National Lottery website notes that they draw upon their extensive experience from the UK.³⁴ Some more transparency on advertising and marketing spend by the National Lottery and an open complaints procedure would be welcome in this sphere.

In 2018 the GAA voted to introduce an explicit ban on gambling sponsorship and advertising at all levels of the sport throughout the island of Ireland. From the GAA perspective there was "a fear that, the sport for sports sake was being diminished, that unless you had the message being presented by gambling firms, unless you had a wager or bet on a sporting event, then you didn't have skin in the game, so to speak whereas our entire model is based on use, you playing for the club from where you were born, you support the County in which you live or from where you were raised" (Interview 17092020). The Association was also fearful about wagering on GAA games, especially at club level, and the impact this might have on the integrity of the games and the Association; this fear also fed into a general desire to deal with the problem decisively. The GAA would like to go further by banning the 'in play' betting options offered on games. This is the kind of proactive approach only an independent regulator can champion, according to our interviewee from the GAA.

The socially responsible approach taken by the GAA stands in stark contrast to the approach of the Football Association of Ireland (FAI). In early 2019, the Association signed a sponsorship deal with a

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³⁴ See About the National Lottery, https://www.lottery.ie/about

Kenyan betting company, Sport Pesa, already a sponsor of Cork City FC within the League of Ireland. This was the last such deal agreed by controversial FAI CEO John Delaney before he stepped down from the role of chief executive and one widely criticised by gambling addiction organisations. The deal was terminated in February 2020. But the FAI's failure to engage in proper due diligence raised wider concerns about its lax approach to the penetration of gambling into its domain. The Association had earlier sold the rights to 'stream' League of Ireland games to an organisation called Trackchamp whose main activity seems to be streaming of football games on betting sites. While this might provide greater exposure internationally to League of Ireland football, there seems little benefit to FAI Clubs. Allegations of match fixing have also been levelled at the League of Ireland. Two Athlone Town players - Igors Labuts and Dragos Sfrijan - were banned following an investigation into a game against Longford Town in 2017. They were two players brought in by the Portuguese/Chinese consortium that took over Athlone Town in an opaque deal in 2017, following meetings with - and subsequent support - from the FAI. The FAI gave its imprimatur to this takeover, despite serious allegations of match-fixing in Eastern Europe associated with Athlone's owners and some players. In 2019 the Garda's National Economic Crime Unit arrived in Hogan Park where Limerick FC train on the back of more match-fixing allegations (this time in an FAI Cup fixture Limerick played at Sligo Town). The FAI subsequently confirmed that a UEFA report had highlighted suspicious betting activity on two Limerick matches, the Sligo match in question and a game against Shelbourne in April, which Limerick lost 2-0. The combination of poor funding, low wages for players and poor due diligence by the FAI leaves Irish soccer particularly vulnerable to the negative impacts of association with gambling (O' Sullivan, 2018).

In early 2021 Dundalk, the most successful League of Ireland club over the previous 5 years, announced BetRegal as its new sponsor. At the same time, it was revealed that the FAI (which currently has no sponsors for any of its international teams nor for the League of Ireland) was considering a sponsorship deal with Paddy Power ahead of its upcoming centenary year (*The Sunday Times*, 17 January 2021). After extensive negative media coverage of the story, the FAI backed off and announced that it would not after all partner with Paddy Power. Given that the Irish government had to bail out the FAI to the tune of €20 million in 2020 (in addition to an annual subvention of nearly €3 million) after catastrophic mismanagement of the Association's finances (*The Irish Times*, 30 January 2020), it would seem astonishing that the Association would even contemplate sponsorship from a gambling company at a time when the Irish government was preparing to introduce new legislation to address serious concerns about gambling harms in Ireland.

Regardless of the advertising codes which operate in Ireland, it is common for soccer players in the UK to wear the logos of betting companies and for broadcast and live streamed programmes to broadcast multiple gambling adverts before, during and after matches. 'In play' betting, sometimes called 'whistle to whistle' gambling online, is becoming the dominant form of sports betting in many European markets, although restrictions have been introduced in the UK and elsewhere (see Chapter 3.4.3). Irish viewers are exposed to such gambling promotion by virtue of the dominance in Irish sports broadcasting of UK-based entities. One interviewee, summing up how he saw the entanglement of betting and sport in Ireland, stated: "they're (the gambling companies) constantly putting out positive images, positive messages, advertising all over the place, and that is raising unawareness. If you like that, they're putting out the opposite message that like there's nothing to worry about it here" (Interview 4092020).

During the 2019-20 English Premier league season, fully half of the 20 teams had sponsorship from gambling companies with team jerseys emblazoned with the logos of such companies (Aston Villa, Bournemouth, Burnley, Crystal Palace, Everton, Newcastle, Norwich, Watford, West Ham, Wolves,). None of these companies were headquartered in Britain. Research by Goldsmiths University recently found gambling logos or branding were visible on screen for between 71% and 89% of the BBC's flagship *Match of the Day* programmes, despite the fact that the BBC does not carry

advertising. The same research team found that the BBC'c children's football magazine was full of gambling logos. The May 2019 issue of the 68-page magazine contained 52 such gambling company logos (Djohari, Weston, Cassidy, and Kulas-Reid, 2020). The dominance of betting companies was even more evident in the Championship (effectively the second ranking league) where 17 out of 24 club shirts were branded with the logos of betting companies (The Guardian, 19 July 2019). Tom Watson, at the time Deputy-leader of the Labour party, said in response that the gambling companies were behaving very irresponsibly: 'Less than a year ago, we were told by the gambling industry that they are committed to reducing the amount of advertising in football. We were told that we are facing a 'watershed moment' in which they would strive to provide an ever safer gambling environment. "These are their words, not mine. But it is impossible to take these words in good faith when we are actually seeing an increase in gambling advertising around matches. Watson argued that "The time for warm words is over. Either the industry is going to act in good faith, or we will need stricter regulation of gambling advertising - starting with a ban on football shirt sponsorship." (The Guardian, 19 July 2019). Mr. Watson's credibility was later thrown into doubt when, after leaving parliament in 2020, he joined Flutter to advise the company on gambling reform (The Guardian, 17 September 2020).

This vast over-preponderance of gambling firms linked to top football clubs has meant that a generation of young men has grown up strongly associating their support for the game with gambling, leading to "dire consequences" for many (The Guardian, 10 January 2019). The explosion of gambling advertising across football platforms since the UK government deregulated gambling in 2005, combined with the ease of access facilitated by smartphone technology dating from about the same time has resulted in the 'gamblification' of football, according to Dr. Darragh McGee of the University of Bath. McGee spent two years working closely with two groups of football supporters aged 18-35 in Bristol and Derry, recording their gambling habits in depth, in a research project funded by the British Academy. His findings (McGee, 2020) include some of the young men telling him they can no longer watch a football match unless they have multiple bets; commonly they have up to 25 accounts with online gambling companies, and their football conversations with mates are all about betting, rather than the game. Participants said the gambling companies' marketing is extremely effective, particularly the offers of "free" bets, and that their losses did not feel like real money because they are placed so casually on a phone and no longer involve going to a bookmaker's shop. McGee attests that he found the intensity of the online gambling culture in football as one that has had catastrophic impacts on many of the participants: "Far from being the knowledge-based, risk-free activity it is marketed as, the profound appeal of online sports gambling has had dire consequences for many young men". The study documented the unfolding stories of several young men whose everyday lives are punctuated by deepening social and financial precarity, high-interest payday loans and bank debt, mortgage defaults, family breakdown, and mental health struggles. "In particular, for young men who find themselves deprived of viable routes to employment opportunities, gambling promises an alternative route to wealth, social capital and masculine affirmation, yet most end up ensnared in a cycle of indebtedness" (McGee, 2020).

There is little reason to believe that young men in Ireland are not being similarly impacted by the presence and activity of gambling companies in English Premier League Soccer. The appropriate responses in Ireland to such activity and the harms they are evidently generating is necessarily complicated by the 'duality' of the problem - these clubs are based in England yet have large fan bases in Ireland and the broadcast of their games is via broadcasters jurisdictionally based in England yet broadcasting the same content in Ireland. There is clearly a role here for an independent regulator, acting in concert potentially with the ASAI and BAI, to work out a platform of enhanced regulation of advertising and marketing. But the multi-jurisdictional setting for this problem makes it a particularly difficult problem to resolve. Nevertheless, international trends all point to the need for a coercive rather than persuasive approach by regulators and to a maximalist rather than minimalist approach to regulation.

The relationship between the media, professional sport, and gambling is undoubtedly deepening in Ireland in horse racing, as well as soccer, and in ways that are deeply troubling. The potential for corruption of sports linked to gambling is evident in the scandal around Irish trainer Charles Byrnes who was handed a six month training ban in January 2021, after one of his horses was found to have been given huge amounts of sedative prior to a race at Tramore in October 2018. The Irish Horserace Regulatory Board (IHRB) provided evidence of suspicious betting activity, suggesting the horse in question had been "nobbled" for financial gain by an unidentified third party. This episode highlighted the questionable practices of betting exchanges in facilitating opaque transactions. There have been a series of such questionable transactions linked to Irish racing in recent years, suggesting the presence of significant levels of corruption and malfeasance. If gambling companies cannot identify the ultimate beneficiaries of such transactions, the probity and legitimacy of the racing industry will be severely impacted. Reputational damage may be irreversible (*Racing Post*, 20 January 2021). It is for these reasons that some commentators describe the 'gamblification' of sport as a distinct threat to the integrity of sport in Ireland and other countries.

5.6 Self-exclusion schemes

Self-exclusion schemes are in increasing use internationally and employed as part of measures to mitigate harms from gambling. In Ireland, the Inter-Departmental Working Group (Department of Justice and Equality, 2019) reviewed the option of introducing a national self-exclusion register but argued that it would be difficult to implement due to GDPR regulations and the absence of a national identity card in Ireland. The group noted the increasing demands for "a national self-exclusion register or mechanism whereby persons could seek to prevent themselves from placing a bet or engaging in a gaming activity" (Department of Justice and Equality, 2019, p. 94). The report was doubtful about how any such mechanism might work, noting in particular the potential complications presented by (new) GDPR requirements. The group was also unsure about where responsibility for maintaining such a self-exclusion might lie, despite the fact that, in other jurisdictions, this comes under the aegis of the independent gambling regulator. The group also cited the lack of a national identity card in Ireland as a potential difficulty in "over the counter" recognition of gamblers in land-based gambling settings (Department of Justice and Equality, 2019, p. 89). The lack of a national identity card system has proved no barrier to the UK introducing an identity check system. This kind of equivocation seems to be a consistent pattern in the Irish public policy response to developments in the gambling sphere: where best practice models exist in other jurisdictions the response in Ireland seems to be 'that's fine in principle. But the Irish context presents specific (usually legal) difficulties' which suggest we should be very cautious about legislating any change.

The current self-exclusion schemes available in Ireland are entirely voluntary and fragmented. Individuals who decide to withdraw themselves from gambling for a specified period have to submit a written request to each gambling company or venue. The Irish Bookmakers Association told us (Interview 15092020) that it introduced a policy called 'Think 21' some years ago and this is designed to ensure nobody under 18 can bet in an Irish betting shop. Another measure ensures that 15-20% of shop window space is devoted to responsible gambling messages. Staff are trained in promoting, using and checking the self-exclusion scheme, according to the IBA (Interview 15092020). Though self-exclusion schemes seem to have benefits in reducing time and money spent on gambling, this system has its limitations. Clients can revoke and cancel their contract or gamble with other companies or venues. In some instances, self-excluded clients may enter the venue from where they excluded themselves and staff seem ill equipped to deal with such breaches. Gambling online also represents a challenge as users might have multiple accounts.

We found virtually no research on the effectiveness of such programmes in Ireland or how we can improve them. We do not know the profile of self-excluders. There are other types of self-exclusion programmes not yet available in Ireland, such as the involuntary exclusions (i.e., those initiated by a third party, such as a family member or the gambling operator). It would be worth exploring the introduction of multi-operator self-exclusion schemes as exist in other countries, including in the UK. The one exception is the Gaming and Leisure Association of Ireland (GLAI) which provided clients with the opportunity to ban themselves from all GLAI affiliated casinos by filling out one form (when the GLAI was active prior to 2020)³⁵. Other technology-based interventions promoted in Ireland focus on self-help and mutual support. Examples include the *Gambling Therapy* app which provides support through live chat, forums and email. Other self-help tools track spending. There is also software to block online gambling websites and gambling-related advertising such as *Betfilter* and *Ganblock* Apps. However, one recent study (Cooney et al 2018) which compared these responsible gambling tools found that the Irish iterations performed significantly less well than those in other EU jurisdictions.

Where other jurisdictions took concrete measures early in the Covid pandemic to protect vulnerable gamblers, Ireland did virtually nothing. The inaction led to a prominent group of healthcare specialists and advocates (including Oisin McConville and Professor Colin O' Gara) writing an open letter to the CEOs of the major gambling companies in Ireland, pleading with them to immediately implement mandatory deposit and spending limits on their online gambling platforms, for the duration of the Covid pandemic. They cited the actions taken by peer countries including Belgium, Latvia, Lithuania, Portugal, Spain, Sweden and the UK to restrict online gambling and/or advertising and marketing, "on the basis that people were more vulnerable to gambling problematically during the lockdown" (*The Irish Times*, 30 April 2020). The absence of an independent regulator for the sector meant that any restrictions introduced would have to be executed by the gambling companies themselves. in the event no such restrictions were imposed.

It seems to us that the new Dutch legislation (The Remote Gambling Act comes into effect in the Netherlands on 1 March 2021) offers a very good example for Ireland to emulate. In this new Dutch model, a player can access the Centraal Register Uitsluiting Kansspelen (Cruks) through DigilD, a form of online identification that allows Dutch residents to access online services and government websites in the Netherlands. In order to register, they must input their public service number (BSN). If the player is not a Dutch citizen, they must instead add details of foreign identity documents such as a passport. Cruks is a multi-operator and multi-platform mechanism of self-exclusion, both land-based and online. The Dutch government states that the new rules fit with EU law as they are non-discriminatory and no more restrictive than what is needed to balance the rights of gambling companies against those of individuals needing protection from gambling harms. In the Irish context, there is no reason that, for example, the public services card cannot be used for identity checks and a 'single customer view' model put in place across the gambling industry.

³⁵ See GLAI Self Exclusion Form, http://glai.ie/downloads/policy/GLAI_Self_Exlusion.pdf

6. Gaps in Responses to Gambling Harms in Ireland

Our review of Gambling Trends, Harms and Responses in Ireland has found that Ireland lags significantly behind many countries with similar levels of gambling activity and behaviour. If we compare responses to gambling internationally in Chapter 3 and in Ireland in Chapter 5, it is evident that there has been a distinct lack of leadership in the public policy approach to gambling in general in Ireland, and a lack of coherence in the concomitant public response to gambling harms. Linked to this, there has been a failure to gather an expansive evidence base to support the development and implementation of robust public policies. The recurring failure to update legislation, in particular to take account of online gambling and widespread gambling advertising, leaves Irish consumers of gambling products particularly vulnerable to gambling harms.

The gambling industry in Ireland is highly successful in revenue terms with some companies operating internationally across multiple jurisdictions. The industry also includes the National Lottery, small betting shops, private casinos and gaming machines. Gambling is an accessible leisure activity around the country but one which causes real harms and stigmatisation to individuals, families and communities. Underage betting and gambling occurs, often 'under the radar' and especially online via easily accessible mobile technology. Contemporary gambling activities are still games of chance, but online gambling has raised the stakes for both the gambler and for Irish society. Aggressive, targeted and personalised gambling advertising and marketing occurs on an increasing basis online and is both highly individualised and omnipresent across social media. The problematic inter-linkages between gambling, online betting and televised sport are all too evident in coverage of English Premier league soccer and horse racing in particular. The 'gamblification of sport' is now a live issue in many jurisdictions, whether in relation to saturation advertising by gambling companies or the incentivisation of corruption facilitated by opaque online platforms. Gambling disorder is too easily dismissed as an individual problem but the financial losses, relationship breakups, mental illness, comorbidities and crimes associated with harmful gambling can have significant societal impact. Indeed, it is estimated that for each individual problem gambler, up to six other individuals are impacted by that gambler's harmful activity (House of Lords, 2020).

The response to patterns of harmful gambling in Ireland has largely revolved around a public health approach which does not properly acknowledge or address the specifics of (sometimes multidimensional) gambling harms, accompanied by a patchwork of charitable, private/commercial and civil society-based education and treatment interventions which are reliant on funding from a narrow range of sources and starved of the resources and training needed to effectively respond to harmful gambling. Many of these responses focus on the individual and take a medical approach informed by an individual responsibility model. This is not to question the sterling efforts of counsellors, medical professionals, charities and civil society organisations which have taken the initiative to engage directly with the problem as it has developed in Ireland, and provide services for individuals harmed by gambling. Rather, it is to point to the overwhelming reliance on these organisations in Ireland, to plug the gaps in, or make up for, the absence of the state's response. This approach is all the more questionable when we look at the financial returns to the state from taxes, levies and the National Lottery.

Meanwhile the gambling industry in Ireland, in all of its diversity, is governed by an entirely outdated legislative architecture. Parts of the industry have been lobbying for an updated framework for many years, particularly companies with a footprint in the UK where there has been significant regulatory change already, and where further reform is expected in 2021, on foot of a newly instituted review of gambling legislation and policy. Other parts of the industry are clearly bad actors and largely ignore

what legislation exists. Gambling companies have introduced some responsible gambling tools to monitor and intervene in situations where individual gambling harms escalate - and some of these would appear to use automated tools to monitor and flag problematic behaviour. However, this is not a transparent process and it is unknown how widespread this approach is, much less whether these interventions actually help individuals to overcome their problems. At least one study of online websites and their policies in Ireland found them to be very inadequate.

The steady flow of media stories about individuals in Ireland who have gambled significant amounts of money and found themselves in situations of extreme difficulty would suggest that the Irish variants of these (increasingly widely used) responsible gambling tools are not effective or sufficient. In the absence of a strong, independent regulator, there is little incentive for commercial operators to limit the spending of their customers or intervene purposefully to interdict gambling harms. Even where a regulatory framework exists, problems persist. Both the ASAI and the Office of the Regulator of the National Lottery have identified a number of breaches of codes with regard to underage betting, unsolicited marketing and companies which have suggested that gambling might be a means of dealing with financial problems. Mis-licensing of gambling machines has been uncovered and, even though casinos are illegal in Ireland, they are operating in many major cities as private members clubs.

Current legislative and health responses are thus entirely inadequate and to a large degree are being subverted by accelerated developments in the technology landscape, by media deregulation in other countries and local efforts at evasion. As a result the agenda is being set largely by actors and developments outside of the state and thus beyond specifically Irish cultural and social contexts. The legislative approach taken in Ireland compares unfavourably to other liberal countries where gambling is widespread - including Great Britain, Canada, Australia and New Zealand, and indeed to many EU partner states. Germany, the Netherlands and Spain are among the EU states introducing substantial legislative and regulatory change in 2021.

An inter-departmental group set up by the government recommended the establishment of an independent regulator in 2019 and suggested that this office/agency should have effective sanctioning powers if substantive consumer protection was to be achieved. However, it also suggested that "there may be constitutional limits on its ability to impose fines or administrative sanctions on gambling operators as might be necessary". In this regard the group stated that "the office of the Attorney General should advise on the legality of permitting the regulatory authority to impose fines and administrative sanctions on gambling operators" (Department of Justice and Equality, 2019). The strong sense of our research team is that the kind of obstacles to tackling harms from gambling identified in this report are not unique to Ireland and have been overcome in many peer jurisdictions. In other words there is no reason to think that an independent regulator could not have the same impact in Ireland as the Gambling Commission has had in the United Kingdom. Similarly, the restrictions on advertising and promotion of gambling products being introduced in many EU states this year could easily be put in place in Ireland, notwithstanding the reach of UK media and advertising into the Irish market.

The new legislation should provide for a range of important consumer protection measures including partial or full prohibitions on inducements to bet (such as 'VIP' schemes, return of lost players funds and close monitoring of "free bet" and "Loyalty" schemes) as well as loss-limiting measures, an enhanced and comprehensive 'single customer view' self exclusion regime and substantial oversight of these protective mechanisms by the regulator. It is readily apparent that these measures can only work if the regulator is given muscular powers of enforcement and, in particular, the power to sanction gambling operators who fail to uphold these customer protection norms. Ireland's new legislation is expected to provide for the establishment of a 'Social Fund' with the express purpose of "promoting socially responsible gambling and assisting in counteracting the ill effects for players, their families and society, of irresponsible gambling". Revenue raised from gambling license

operators would be used for a range of activities, including public education and awareness programmes, and research into harmful gambling, as well as significantly increased provision of treatment programmes in Ireland. This model closely resembles that developed in the UK and in New Zealand (Department of Justice and Equality, 2019). In the latter jurisdiction, harmful gambling services are resourced through a levy on gambling operators introduced in 2016. The levy is collected from the profits of New Zealand's four main forms of gambling: gaming machines in pubs and clubs; casinos; the New Zealand Racing Board and the New Zealand Lotteries Commission. The Ministry of Health is responsible for the prevention and treatment of problem gambling, including the funding and co-ordination of problem gambling services.

By far the most curious aspect of responses to gambling harms in Ireland is the absence of satisfactory prevalence data. The relevant agencies simply do not gather or collate systematic national data to help us understand the prevalence of gambling in Ireland, the relative levels of gambling disorder and related wider social harms. A full year of extensive research by this project team has identified a small amount of important research by academics, some pioneering investigative journalism by individual reporters, and some powerful stories gathered by television documentary makers working with courageous recovering gambing addicts and their families. The evidence that we do possess at this point on industry behaviour and individual and social harms is sufficient to justify a call for urgent public policy responses across a number of government departments and a much more coherent approach to the licensing, regulation and societal impact of gambling. The enactment of the 'Gaming and Lotteries Amendment Act' ("the 2019 Act") on 1 December 2020 was a step in the right direction but the scope of that legislation was extremely narrow. The government needs to implement substantive legislative change, incorporating oversight of the entire gambling ecosystem in Ireland, including online gambling. An independent regulator should be established without further delay. Too much time has already been wasted and 2021 must see a decisive change in the Irish gambling landscape. COVID can not be allowed to further stall this important legislative agenda because COVID is further contributing to the growth of online gambling and potentially gambling harms more broadly.

Appendices

A.1. Interview Questions

A.1.1 Interview with gambling support services

1. Information about the interviewee and the gambling organisation

- 1.1. When was your organisation founded and by whom?
- 1.2. Why was it founded?
- 1.3. What would you describe as the core service provided by your organisation?
- 1.4. What type of organisation are you? (public/private/charity/ mix/other)
- 1.5. How are you funded? Do you receive public funding from the state and if yes what % of your income comes from there?
- 1.6. What is your role in the organisation?
- 1.7. How many staff are employed? How many staff are volunteers?
- 1.8. What are their roles /occupations?
- 1.9. Do your staff have any specialist qualifications and training? And do your staff receive training in problem gambling?

2. Definitions of Gambling and Gambling Type

- 2.1. What kinds of gambling problems do your clients tend to present with?
- 2.2. What are the key harms or negative social impacts of gambling that you encounter?
- 2.3. Do you encounter any specific harms or patterns that you think are specific to Ireland?
- 2.4. Do you classify clients according to the type of gambling activity?
- 2.5. Have gambling types changed at all over the past decade (or shorter if a newer organisation)? Are there any new types or patterns of behaviour?
- 2.6. In your experience does gambling tend to co-occur with other social or psychological problems? Please elaborate.
- 2.7. The literature uses terms such as 'gambling addiction', 'gambling disorder' or 'problem gambling'. What term do you use and why?

3. Services or Treatment Programme

- 3.1. What type of specific gambling service or treatment programme to help gamblers do you provide? (For example, one-to-one counselling service, online counselling, residential (inpatient) treatment programmes or outpatient addiction treatment.) and which is the most used?
- 3.2. Can you tell us more about the service/treatment programme (for example, duration of the programme, hours per week, hours per session, cost, session topics)?
- 3.3. Do you specialise in a particular treatment approach and if so why? (For example, medical addiction treatment, cognitive therapy, cognitive—behavioural (CB) therapy, motivational interventions (MI), motivational interventions (MI) with CB therapy, Family Therapy, Addiction Counselling, or other programmes.)
- 3.4. Do you provide any specific gambling service to help families and friends affected by gambling? If yes, please elaborate?

4. Initial Assessment, Treatment and Follow Up

- 4.1. How do you decide if treatment is required?
- 4.2. How do you determine what is the most appropriate therapy or response?
- 4.3. How do you judge the severity of the problem and gambling involvement?
- 4.4. Do you refer clients to other organisations? If so which ones?
- 4.5. How do you measure the effectiveness of treatment outcomes?
- 4.6. Do you tend to get repeat clients or people with ongoing needs?
- 4.7. What role can families or other social groups provide in treatment and follow up?
- 4.8. Is there any independent oversight of your service?

5. Profile of clients

- 5.1. Do you know how many people you have engaged with since you were founded?
- 5.2. How many people have entered treatment (at least one treatment session)?
- 5.3. Do you keep information on the demographic profile of your clients (sex, marital status, age, employment status?) Is there a specific demographic profile that present to you?
- 5.4. Do your clients tend to be working?
- 5.5. Do you deal with young people under 18?
- 5.6. Where in Ireland do your clients mostly come from? (location)
- 5.7. Has Covid 19 had any particular impacts on your patients/clients?
- 5.8. Have you continued to provide your services during lockdown?
- 5.9. Is there anything else you would like to add?

A.1.2 Interviews with other Stakeholders

- 1. You work for _____can you tell us about your role in the organisation?
- 2. What would you describe as the core service provided by your organisation?
- 3. What type of organisation are you? (public/private/charity/ mix/other)
- 4. (rephrase as appropriate) How are you funded?
- 5. Does your organisation have formal, written policies on engaging with the negative social impacts of gambling?
- 6. Is the development of your policies on negative social impacts based on a particular evidence base? (data/consultations/other).
- 7. Are there good independent sources of data on the industry and prevalence of gambling?
- 8. Do you examine evidence from other jurisdictions and incorporate this into your analysis?
- 9. What do you think are the main negative impacts of gambling in Ireland more generally?
- 10. Do you think that gambling in Ireland differs in any way to gambling internationally?
- 11. What do you (or your organisation/party) propose could be done to ameliorate the negative impacts of gambling and by whom?
- 12. Do you know of any good examples of effective treatments or responses that are offered in other countries that are not available in Ireland?
- 13. Ireland does not conduct prevalence of gambling addiction studies why do you think this is?
- 14. We are about to enact legislation on gambling what is your view on the potential impact of legislation in this area?
- 15. Did you directly engage with legislators on the process leading to the development of this act?
- 16. Many of the biggest gambling companies operate internationally and in Ireland what are they doing and what more could they do?
- 17. Does online gambling pose particular challenges? Does it require specific or unique responses?
- 18. To your knowledge has COVID19 had any impact on gambling behaviour?
- 19. Is there anything else you would like to add?

A.2. Table of Interviews – by organisation type and number

Organisation	Type of Organisation	Number of Interviewees
Gaelic Athletic Association	Community/Sports	1
Aiseiri Addiction Treatment Centre	Charity	1
Dunlewey Addiction Services	Charity	2
Tabor Group Addiction Treatment services	Charity	1
Helplink Mental Health	Charity	2
Gamblers Anonymous Ireland	Fellowship of Members, Irish branch of international organisation.	1
Irish Defence Forces	Public	2
HSE Community Addiction and Mental Health Services Donegal	Public	1
HSE Community Alcohol and Drug Services (CADS) Longford/Westmeath	Public	1
HSE Southern Regional Drug and Alcohol Task Force	Public	1
Addiction Counsellors of Ireland	Professional Member Association	1
Extern Problem Gambling Project	Social Enterprise	2
Journalist	Private/Media	1
Irish Bookmakers Association	Trade Association/industry	1
Flutter Entertainment plc	Private Company/ industry	2

Total = 20

Charity and Community = 6
Public sector = 4
Private/commercial & gambling industry= 6

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