

# Research Programme 2017 - 2019

**December 2016**

# Introduction

## Purpose

1. In April 2016 the Responsible Gambling Strategy Board published the National Responsible Gambling Strategy 2016-17. Research to improve our understanding of a number of topics is crucial to the success of the strategy in reducing gambling-related harm. This paper sets out the Board's current view of the priorities for research to be commissioned in the period from April 2017 to March 2019.
2. Our hope is that by being specific about the research needed to fill current evidence gaps we will encourage a wide range of academics, research agencies and others to help deliver the work (which itself supports Priority Action 10 of the strategy to widen the research field).
3. This is intended to be a living document, subject to change in the light of new learning or emerging issues. It will be updated annually, although we will be prepared to consider new research requirements at any point should the need arise.
4. We would welcome comments on any part of the programme, particularly in relation to important topics we may have missed. Subject to the comments we receive, we intend to produce a refreshed version in April 2017.

## Roles and Responsibilities

5. In May 2016, the Responsible Gambling Strategy Board and GambleAware published a Research Commissioning and Governance Procedure which describes how research priorities are set and how research programmes are commissioned under the tripartite agreement between the Board, GambleAware and the Gambling Commission.<sup>1</sup> The purpose of the Procedure is to give transparency about the arrangements and to provide assurance that research priorities are set independently and that are delivered with integrity.
6. In brief:
  - **The Responsible Gambling Strategy Board** is responsible for the establishment and maintenance of this research programme. For each project, the Board will produce a research project brief outlining the policy context, setting the research questions to be addressed, explaining how these questions relate to strategic priorities, and describing how the research output is likely to be used.
  - **GambleAware** is responsible for developing and maintaining a commissioning plan based on this programme and seeking to deliver as much of it as possible within the limitations of available funding (while also meeting GambleAware's charitable objects). GambleAware may commission other research projects outside the scope of the programme, but consistent with its objectives, to the extent resources allow. GambleAware may also seek to identify other sources of funding to deliver the programme, such as appropriate research grants.

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<sup>1</sup> [Research Commissioning and Governance Procedure](#), Responsible Gambling Strategy Board, April 2016

- **The gambling industry** has no influence on the setting of priorities, on the research projects themselves or on the publication of research reports. It does have responsibility for supporting the research by making data and other information available. The Strategy also assigns responsibility to the industry for improving methods of identifying harmful play (Priority Action 5), for piloting interventions designed to inhibit harmful play or mitigate its effects (Priority Action 6) and for ensuring that any such interventions are robustly, publicly (and often independently) evaluated to ensure that any learning is shared (Priority Action 3). GambleAware, the Gambling Commission and the Responsible Gambling Strategy Board will take action to facilitate and support this activity.

### Structure of this document

7. The research projects in this document are grouped under the headings of the priority actions set out in the Strategy. Some projects may, in practice, be relevant to more than one of the priorities.
8. For most priority actions it is possible to define the research projects necessary to underpin them very specifically. Generally, we anticipate that these projects will be commissioned by GambleAware. For other priority actions, precise specification is more difficult at this stage. E.g. it is impossible to identify all the evaluations that will be required over the time period covered. Some interventions that will need to be evaluated are yet to be developed. In these cases, we have set out a more thematic approach. We anticipate that many of these projects will be led by stakeholders other than GambleAware, often by gambling operators or their representatives.
9. For each specific project, we have set out:
  - **Description and purpose:** A high-level outline of the issue and why it is important
  - **Research questions:** What we want to find out
  - **What we already know:** A brief overview of existing research and evidence
  - **Possible research techniques:** An indication of the nature of the research. This should be not interpreted as restrictive. We welcome innovative or alternative approaches.
10. In some areas any follow-up activity will be dependent on the initial stages of research on the topic. Where this is the case, we have provided some thoughts on what the follow up stages may need to cover.

### Quality assurance

11. GambleAware, as commissioners of most elements of this programme, will set out their principles for ensuring research is of high quality, represents value for money and is likely to be influential towards the objective of minimising gambling-related harm.

## Overarching principles

12. Two cross-cutting priority actions of the National Responsible Gambling Strategy that have not been connected to any specific research projects are also relevant:

- **Priority Action 11 – Horizon scanning:** The gambling industry is changing at a fast pace, introducing new products and ways of engaging with customers. It is important that the programme of research makes the most of opportunities to identify risks that are likely to materialise in the future, as well as those we currently face.
- **Priority Action 12 – Public engagement:** Gamblers, including those that have experienced harm, and their families and friends, are likely to be able to offer important insights to research. Consideration should be given to ways of capturing these insights in all research projects undertaken as a result of this programme.

## Research requirements

### Priority Action 1: Understanding and measuring harm

*“We have stressed the importance of seeking more comprehensive information about the nature and extent of gambling-related harm, so that considered judgements can be made about the type and quantum of resources needed to address it. In principle, better understanding ought also to make it easier to identify appropriate indicators by which to assess the success of the strategy.”*

**Page 18, The National Responsible Gambling Strategy**

13. GambleAware has already commissioned a first stage of research on gambling-related harm. In addition, GambleAware have also commissioned work to understand the costs to government associated with problem gambling. This is intended to be the first step towards creating a framework to understand and measure gambling-related harm. Achieving this goal would be a significant achievement, though we recognise that it is a challenging task.
14. If successful, the outcome would be a significant improvement on simply estimating numbers of problem gamblers. It would help us to understand more comprehensively the extent of harm to individuals, as well as their families, children, wider society, employers and the economy. It would allow different aspects of harm to be measured, e.g. to health (including mental health), criminal justice, welfare, debt, employment and public services.
15. The first stage is expected to be completed by March 2017. Depending on what it shows, it will be important to make quick decisions about commissioning subsequent phases. The projects set out below indicate our current thinking on how this could be taken forward.

## Specific projects

### **Project 1.1: Developing understanding of specific areas of gambling-related harm**

**Description:** This is likely to build more detailed understanding and insights into each 'area' of gambling-related harm as identified in the first phase of research. More work might be required to validate conclusions of the first phase, or to build understanding through primary research. The work should result in recommendations on what metrics need to be constructed and measured (or what data should be collected), and proposals for the design of any future surveys to measure gambling-related harm.

#### **Research questions:**

- What is the extent of gambling-related harm (i.e. what are its impacts, how does it materialise and what are its longer-term effects)?
- What metrics or data might need to be collected in order to monitor gambling-related harm?
- What qualitative insight can be obtained to accompany and supplement more quantitative descriptions of harm?
- What survey approaches might be needed to supplement this data collection? What sampling strategy would be needed (i.e. which groups of people would surveys target?)

**What we already know:** This work will build on the first phase already in progress, as well as other current research on the cost of gambling-related harm, such as that being undertaken by the Institute of Public Policy Research (IPPR).

**Possible research techniques:** Obtaining a more detailed and granular understanding of harm will need to involve the use of qualitative research techniques, such as in-depth interviews and focus groups. It may be necessary to commission specialist modules of research projects looking at different areas of harm.

Although different specialists may need to lead work on different areas of harm, it is likely to require a single overarching research project to ensure that the end product helps create a complete and consistent understanding of gambling-related harm.

### **Project 1.2: Building and testing a mechanism for measuring and monitoring gambling-related harm**

**Description:** This will use the knowledge generated from earlier work to pilot and design a more systematic process of measuring, monitoring and tracking harm over time through broader national metrics and bespoke survey instruments.

The outcomes should become the basis for on-going measurement of levels of gambling-related harm, allowing year-on-year changes to be reported.

#### **Research questions:**

- Can the tracker or monitoring mechanism indicate an overall 'level' of gambling-related harm?
- Can it credibly demonstrate changes from one time period to another?
- Can it provide good coverage of all different areas of gambling-related harm?
- Can data be collected cost effectively?

- Can the headline results be communicated effectively and convincingly?

We also want to know if it is possible to identify a 'multiplier' that can be applied to give a reasonable 'rule-of-thumb' estimate harm without having to carry-out bottom-up calculations. E.g. *for every PGSI-screen problem gambler, the average direct and indirect harm is 'X'*.

**What we already know:** This work will build on the two earlier phases of research.

**Possible research techniques:** A toolkit to measure gambling-related harm may require a combination of primary data collection through a survey alongside collection and tracking of published statistics. Any new survey instrument should be developed to the highest possible standards, incorporating cognitive testing and validation.

It may also be possible to identify other opportunities to collect data, e.g. by exploring whether crime data could be recorded in a way that captures gambling as an aggravating factor, as is done for alcohol and drugs-related crimes.

## Priority Action 2: Engagement with relevant public sector bodies and other agencies to encourage greater acceptance of responsibility for delivering the Strategy

*"...a wider range of public and other organisations need to accept their responsibilities for working in partnership to reduce gambling-related harm, in particular those individuals and organisations involved in mental or other health services, social welfare or criminal justice."*

**Page 19, The National Responsible Gambling Strategy**

16. Priority Action 2 recommends that gambling-related harm is treated as a public health issue, leading to a wider range of organisations using their skills and resources to tackle the problem.
17. Success requires progress to be made in two key areas: (i) tackling gambling-related harm in a comprehensive way alongside other public health issues like alcohol, drug misuse, or obesity, and (ii) encouraging a wider range of public (and other) organisations to accept their responsibilities for working in partnership to reduce gambling-related harm.
18. Research will help by:
  - Improving our understanding of gambling-related harm and how it presents alongside other health-related conditions including mental health.
  - Reviewing what approaches have worked well in other areas of public health, so as to identify and learn from approaches that have and have not been effective.

## Specific projects

### **Project 2.1: Conditions and behaviours that occur in parallel with gambling-related harm**

**Description:** It would be useful to explore the relationship between problem gambling and other health-related issues and behaviours. The evidence would contribute to a business case to encourage other agencies to work in partnership to help reduce gambling-related harm.

It would also provide a pointer on whether it would be valuable to have more regular and standardised screening for problem gambling for people who present for other types of treatment (or services like debt advice) so it can be treated in combination.

An improved understanding of linkages and correlations would inform treatment and commissioning decisions by providing insight into how better to treat patients.

#### **Research questions:**

- What other conditions are those experiencing, or at-risk of, problem gambling more likely to suffer from?
- When conditions are present in combination, which is likely to trigger someone to seek help from health (or other) services?
- Given these conditions, what services might we reasonably expect those suffering gambling-related harm to present, and in what numbers? What costs to public services are associated with this?

**What we already know:** We have some understanding of what behaviours and issues often occur alongside problem gambling. E.g. we know that gambling is more prevalent among those who smoke and consume alcohol. We also know that the prevalence of problem gambling is higher among those suffering worse health and well-being. There is already a strong evidence base to build from, including:

- British Gambling Prevalence Surveys 1999, 2007 and 2010
- BGPS 2007 secondary analysis: gambling co-morbidities and health
- Health Survey for England/Scottish Health Survey
- Adult Psychiatric Morbidity Survey 2007
- RGT-commissioned research on gambling-related harm and how to measure it
- RGT-commissioned research into costs to Government from problem gambling.

**Possible research techniques:** The project could involve a systematic review of studies on comorbidities. In the first instance, consideration should be given to whether we can extract additional value from existing datasets, particularly their potential to tell us more about links and correlations:

- Secondary analysis of prevalence datasets (e.g. the Health Survey for England and Scottish Health Survey, which contain significant amounts of data on health-related behaviours and conditions). Data from different years could be combined to boost sample sizes for analysis.
- Secondary analysis of other datasets, such as Adult Psychiatric Morbidity Survey 2007 which focus on respondents' mental health.
- Interrogation of data from treatment providers (via GambleAware's Data Reporting Framework) to analyse the comorbidities of those gamblers presenting at treatment services.

- Exploring what value we can extract from data from existing longitudinal studies that contain gambling questions (e.g. ALSPAC, Millennium Cohort Study).
- Pilots could be started with support agencies to collect data about their patrons and their experience of gambling-related harm.

A second stage could then be qualitative research to understand people's experiences and provide insight into the inter-relationship of problem gambling and other problems.

## **Project 2.2: Lessons from other public health approaches**

**Description:** We should investigate lessons we can learn from other areas of public health. The focus should be on those public health issues that share significant parallels with gambling (in this respect alcohol and obesity are likely to be promising sources of learning).

### **Research questions:**

- What can be learnt from other areas of public health?
- To what extent can lessons from these approaches be transferred to efforts to reduce gambling-related harm?
- What approaches have proved less successful, and why?

**What we already know:** Data from prevalence surveys provide a good understanding of what proportion of the population are at-risk or problem gamblers. Once research into gambling-related harm (Priority Action 1) is further advanced, we should have a better understanding of what gambling-related harm looks like and how it impacts on people. Other sources of evidence include:

- Problem gambling and gambling-related harm – a public health issue? (RGT)
- Health on the High Street (Royal Society of Public Health)
- FOBT use and problem gambling across the Liverpool City region (Liverpool Public Health Observatory)
- Gambling: the hidden addiction (Royal College of Psychiatrists).

**Possible research techniques:** The project is likely to involve a systematic literature review of literature on public health approaches, both in gambling and other analogous fields. It could also include in-depth interviews or Delphi study.

## **Priority Action 3: Consolidating a culture of evaluation**

*“The gambling industry is now committing significant resources to harm minimisation, over and above its voluntary contributions to the Responsible Gambling Trust (GambleAware). It is important that those resources are well-directed, that any interventions are robustly evaluated and that information is routinely shared with other operators and stakeholders so that appropriate lessons can be learnt”.*

19. The Strategy expects every significant harm minimisation intervention to be routinely and independently evaluated in line with the good practice principles outlined in the RGSB Evaluation Protocol.<sup>2</sup> Evaluations should be published or otherwise shared, so that learning is disseminated.
20. Process evaluations can provide interesting insights into whether an intervention was implemented as intended. But it is only *impact* evaluations that can provide the necessary evidence of effectiveness.

### **Roles and responsibilities in evaluation**

21. The Strategy suggested that the industry should take the lead in evaluating harm minimisation interventions. Where this involves activities that are required by the Gambling Commission's Licence Conditions and Codes of Practice (LCCP), we would expect to see these evaluations delivered in close partnership with the Commission. We would also expect the Commission and the government play a role evaluating the impact of any changes that result from the Gambling Review or any other legislative changes.
22. We expect GambleAware to play a significant role in the success of this priority action. Support by GambleAware does not mean they will provide funding. Their input is more likely to involve facilitation and coordination. It is likely to involve:
  - **Improving the capacity and ability of the industry to conduct and commission evaluations:** Following the publication of the Evaluation Protocol, work is in progress to support the industry to undertake robust evaluations. GambleAware has begun delivery of bespoke evaluation training and has also started to plan the development of evaluation 'FAQs', access to workshop materials and expert advice, details of appropriate evaluation contractors, and guidance on how to commission an evaluation. We expect this work to continue, and to evolve as the industry's requirements change or become more apparent.
  - **Practical coordination of evaluations:** Independent evaluations are perceived as more objective and robust, resulting in more credible results and increased stakeholder confidence. There may be circumstances where the industry provides money to GambleAware to commission and manage an independent evaluation of a particular initiative or intervention.<sup>3</sup>
  - **Facilitating the sharing of learning:** The successful consolidation of a culture of evaluation should see every significant new intervention routinely subjected to impact evaluation. These should be published and findings shared between operators. In these circumstances, it should become possible to commission reviews of a number of completed evaluations by theme (or sector). These 'meta-evaluations' could be used to consolidate and distil key learning points, share learnings effectively within the industry, and communicate the findings to a wider audience.

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<sup>2</sup> [Evaluation Protocol](#), Responsible Gambling Strategy Board, April 2016.

<sup>3</sup> This level of independence may afford other advantages – e.g. there may be circumstances where operators are not permitted to have further contact with those affected by the intervention (such as self-excluders).

## Priority Action 4: Increased understanding of the effects of product characteristics and environment

*“An effective harm minimisation strategy needs to address not only the individual player, but also features of the product (stake size, speed of play, volatility and so on) and the environment in which play is offered (opening hours, location, layout etc.). It should be conscious of the interaction between any of these factors, and recognise the potentially varying levels of risk associated with different gambling activities”.*

**Page 21, The National Responsible Gambling Strategy**

23. The research required for this priority action will help us better understand whether, how and why some gambling products are more harmful than others.

24. To begin to answer these questions, we will need to understand:

- How and why people play particular products, and how this varies by location.
- How and why the way people gamble differs between products and by socio-economic characteristics of players (and the answers they give to problem gambling screening questions).
- Gamblers' motivations for gambling in particular environments, or in particular ways.
- Why do people start, continue or stop gambling, and what triggers them to move in and out of harmful periods of play?
- What role does marketing and advertising play?
- How are children affected by the normalization of gambling in society?

25. Answering some of these questions will involve analysis of real play data, provided by the gambling industry. We think that all sectors of the gambling industry should regularly share descriptive data and make it available for research.

26. It is possible that some of the projects set out below will need to be delivered as a series of smaller projects covering specific products or sectors.

### Specific projects

#### **Project 4.1: The effect of advertising on young people's behaviour and perception of gambling**

**Description:** An increase in the volume of advertising, combined with advances in technology offering opportunities for increased marketing and advertising, has exacerbated a longstanding concern - the effect of gambling advertising, particularly on children and young people. It is important that we improve our understanding of the effect of gambling advertising on young people. It is likely that this will require projects which assess young people's perception of gambling advertising, and the impact it has on their behaviour.

#### **Research questions:**

- What are young people's perceptions about gambling from its marketing and advertising (broadcast and online)?

- What impact does gambling advertising have on young people's attitudes towards gambling, responsible gambling and gambling behaviour?
- Does a perceived 'normalisation' of gambling, from widespread advertising, influence behaviour?
- Do favourable perceptions of gambling from advertising influence not only *whether* young people gamble, but *how* they gamble?

**What we already know:** There is a relatively limited evidence base to assess whether gambling advertising has a direct effect on young people's gambling activities. Newly introduced questions in the Gambling Commission's Young Persons Omnibus have started to provide some quantitative insight into young people's exposure to advertising, their perceptions of gambling, and gambling behaviour. New research could draw on:

- Gambling advertising: a critical research review
- IPSOS Mori Young Persons omnibus
- Gambling and Social Media (DEMOS)
- Research on young people and their use of alcohol and tobacco.

**Possible research techniques:** A potential first step could be secondary analysis of data from the Gambling Commission's Young Person's Omnibus Survey in order to explore the relationship between exposure to advertising, attitudes towards gambling, and gambling behaviour. This analysis could inform subsequent stages of qualitative research.

#### **Project 4.2: How people gamble and how this varies between product and environment**

**Description:** Currently, we have a limited understanding of how people play on certain products, and how this differs by environment or location. Real play data need to be interrogated and analysed to provide descriptive statistics on play across a number of products. Where similar games are offered in different environments, these figures should be compared across locations.

#### **Research questions:**

- Are products played differently in different environments and premises? (This should cover remote, casinos, bookmakers, bingo, arcades and lotteries)
- If so, what impact do these differences have on:
  - How much people stake?
  - How fast they play?
  - How long they play for?
  - Whether players adopt higher or lower risk approaches to their play?
  - Session outcome (how much people win or lose)?
  - Whether return to player messaging has any impact on player choice?

**What we already know:** We have a good understanding of patterns of play on certain types of gaming machine, but most of the focus of research has been on machines that are only generally available in one type of venue (i.e. gaming machines in bookmakers).

This research needs to acknowledge that the demographics of players will also be different across types of premises.

**Possible research techniques:** The project should build on approaches employed in GambleAware's machines research programme. Real play data should be subjected to analysis to produce descriptive statistics on differences in intensity of play and session outcome for a variety of gambling products/games.

### **Project 4.3: Consumer vulnerability: Linking data on play with individuals' socio-economic background and attitudes to gambling**

**Description:** It is important to build on the project above to explore what learning can be extracted from matching real play data with the individual to whom it is connected. Where possible, existing datasets or data capture mechanisms (such as loyalty cards, or online play) should be combined with surveys of players to enable analysis of how people's play varies by sociodemographic status, attitudes to gambling, and problem gambling status. Where play data is not systematically recorded (i.e. anonymous, terrestrial gambling) consideration should be given to how this can be collected.

#### **Research questions:**

- How does people's play vary by a range of socio-economic and demographic characteristics?
- How does play vary depending on people's responses to screening questions about problem gambling status or gambling-related harm, and other questions about attitudes to gambling?
- How do these behaviours vary across products and over time?
- How can we improve our understanding of who is more vulnerable to gambling-related harm?
- What are the effects on player behaviour of those features of gaming machines that enable them to set time or money limits, give information about the likelihood of winning?

**What we already know:** Research on loyalty card holders provided valuable insights into people who use gaming machines in licensed betting offices.

**Possible research techniques:** There are some circumstances where play is attributable to a known individual (e.g. play where a loyalty card is used, or online gambling where all play is account-based). Where play data is not recorded and/or is not attributable to a known individual, relationships will need to be generated by new primary research. This may involve a combination of in-venue observational research, interviews with players and self-report gambling diaries.

These approaches could be supplemented by in-depth interviews or focus groups with gamblers who participate in a wide range of activities, in a range of venues. Consideration could also be given to utilising loyalty card schemes of operators who offer both terrestrial and remote products to compare the behaviour of customers across each.

#### **Project 4.4: Remote gambling: The impact of accessibility and the effect of being on-line in decision making and behaviour**

**Description:** The Strategy highlights the prevailing trend of a shift towards remote gambling, including via mobile phones and other portable devices. We need to understand the effects of this trend, particularly increased availability and other characteristics of remote gambling, such as the perception of anonymity which comes from a lack of face to face interaction with the gambling operator. The Gambling Commission also recently consulted on its approach to virtual currencies and 'in-game' items, which can be used to gamble. A key concern was the protection of children who could be exposed to gambling. Research on remote gambling should cover the full range of activities defined as within the scope of regulation.

#### **Research questions:**

- What effect does the instant accessibility offered by online gambling have on the risk of harm?
- Does greater accessibility contribute to the maintenance and development of problematic play?
- Does this play a more causal or exacerbating role?
- How does 'being online' influence people's play – do people behave differently than they would in land-based environments?
- What risks are associated with gambling markets that use virtual currencies and 'in-game' items – particularly in relation to young people?
- To what extent are these risk factors offset by the potential for greater protections in online play (e.g. all play is account-based)?

**What we already know:** We know how many people gamble online, and the rate of problematic gambling among this population. There is also research, from disciplines such as psychology and sociology, which has explored why people can behave very differently when online.

Research could draw on:

- British Gambling Prevalence Surveys 1999, 2007 and 2010
- Research to inform practical implications of harm minimisation for remote gambling operators serving British customers, PWC (when available)
- Getting grounded in problematic play: Using digital grounded theory to examine problem gambling and harm minimisation opportunities for remote gambling (when available)
- Gambling (2010) Australian Productivity Commission report
- Harvard analysis of Bwin customer data.

**Possible research techniques:** The first stage of this work will require a decision on whether it should commence with a systematic literature review, drawing together all that is known in this area. Consideration will need to be given to the nature of primary research and how participants can be recruited.

#### **Project 4.5: Longitudinal study: Why do people move in and out of harmful play?**

**Description:** This research will explore the factors that cause people to start, continue and stop gambling. It would also look at how their gambling takes place across different products and environments (including remote), including the reasons for switching between different forms of gambling.

In particular, this research should aim to identify triggers of harmful play, and factors that lead to recovery. These insights would have a wide range of implications for policy making and the design of prevention and treatment interventions.

#### **Research questions:**

- How do motivations to gamble vary by product?
- Are particular products more likely to be 'gateway' activities, and what does a typical 'progression' in gambling look like?
- What types of change in players' lives are likely to lead to a reduction or cessation in harmful play?
- What role do factors like marketing and advertising play?
- How does this vary according to demographics and other characteristics that might be seen as markers of 'vulnerability'?
- What helps players to make positive decisions regarding harm prevention?

**What we already know:** Harmful gambling can be episodic and is often non-linear - people move in and out of problematic behaviour. This work could build on a range of existing research:

- Changes in machine gambling behaviour (NatCen, 2014)
- Gambling careers: a longitudinal, qualitative study of gambling behaviour (Reith)
- Longitudinal research studies (ALSPAC, Millennium Cohort Study)
- Gambling advertising: a critical research review (Per Binde review).

**Possible research techniques:** Although cost implications have previously deterred efforts to conduct longitudinal research, innovations in on-line engagement may provide the possibility of delivering longitudinal research in a way that represents value for money. There are also options to consider exploiting existing longitudinal studies (especially those which already have a gambling element).

#### **Project 4.6: Motivations for gambling**

**Description:** Understanding what motivates people to use different products, or to gamble in different environments (including on-line), would be valuable when considering how people will respond to social responsibility initiatives and regulatory changes. In particular, it would help make regulatory changes and player protections more effective by avoiding unintended consequences and displacing harm to other types of gambling.

#### **Research questions:**

- Why do people take part in particular forms of gambling?
- How does this vary according to personal and socio-economic characteristics that might indicate people who are more vulnerable to harm?

- What influence do different product characteristics have on the way people gamble, including, stake levels, speed of play and volatility?
- What information do players pay attention to, and what do they ignore?
- How do players respond to different forms of information and intervention?
- What are players' attitudes to operators' social responsibility initiatives?
- What role does responsible gambling messaging have upon players?

Research should also help us to understand what value consumers place on the social responsibility actions taken by operators. It would be useful to understand whether there are circumstances when positive perceptions of operators' social responsibility actions have an impact on consumers' decision-making.

**What we already know:** The British Gambling Prevalence Survey contained questions on motivations for gambling, but focused on why people gamble in general, not their motivations for taking part in specific activities. The Young Persons Omnibus has questions to unpick motivations for trying gambling for the first time, but again, this is not split by activity. The National Lottery recently carried out research with Ipsos MORI, using behavioural economics to understand why and how people gamble and what information influences their decision-making.

**Possible research techniques:** There are several ways this could be approached. All should be explored:

- Behavioural economics provides opportunities to explore peoples' decision making and how this is influenced by a wide range of factors. The National Lottery research studied a cohort of players, exploring the reasons for their decision-making at the point in time they made these decisions, rather than in interviews after the event. This provided in-depth insights into player behaviour that will be useful for designing the type of information provided to players. This approach could be replicated across different sectors.
- Discrete choice experiments can be used to understand preferences by asking individuals about different scenarios, e.g. would you rather have unlimited maximum stakes via account-based play, or a capped maximum stake and anonymous play? This approach could be conducted with different groups of players, e.g. people identified as low risk and at-risk gamblers.
- Lab-based neuroscience experiments – to shed more light on what players' neurological/biological responses are to particular game characteristics and features. This could be framed around exploring differences between what people say and what they do in practice. It would require input from experimental scientists to develop it effectively.

## Priority Action 5: Improving methods of identifying harmful play

*“There is a need to continue to improve the methods used to identify harmful play across all sectors of the industry – through the use of data, through observation and interaction by well-trained staff, through effective messaging which prompts self-reflection, or in other ways”.*

**Page 22, The National Responsible Gambling Strategy**

27. We have not specified specific projects in this area as it is important that the industry leads. However, we will play a role holding others to account if the work does not progress at pace. In line with Priority Action 3, the effectiveness of this work should also be evaluated to demonstrate its effectiveness and allow improvements to be made as required.
28. There has been considerable recent effort in developing and testing algorithms, to explore their ability to predict problematic play on gaming machines. Similar work is now being undertaken in relation to remote play to determine whether algorithms can detect potentially harmful play online.
29. Algorithms can only ever be part of a package of approaches to identify potentially harmful play. More traditional approaches, such as staff interactions are required. Initiatives to improve the quality and consistency of staff interactions should also be evaluated.

## Priority Action 6: Piloting interventions

*“Identifying harmful play is of little use in itself unless it is followed by successful intervention designed to inhibit it, or to mitigate its effects. There is now welcome acceptance among many operators of the need to experiment with different forms of intervention – customer interaction, messaging, debit card blocking and so on – either at the level of individual firms or collectively through industry groups such as IGRG and the Senet Group. It is important that these good intentions, and the work done to date, continue to be translated into concrete action”.*

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30. The impact evaluation of gambling management tools and other harm prevention interventions should be a central focus of the evaluation work discussed under Priority Action 3 and the Evaluation Protocol.
31. We want to see operators, often working in collaboration with each other, designing and implementing pilot projects to test interventions to reduce gambling-related harm. We would expect to see this approach adopted over a wide range of different types of support and intervention, to be taking place in all sectors of the industry.

32. Valuable insights should be obtained from behavioural economics, which provides insights into how people make decisions and use the information that is provided to them.
33. We also hope to see results of impact evaluations being shared between operators and not treated as a competitive exercise.

## Priority Action 7: Self-exclusion

### Introduction and why it's important

*Indicators of success - "(We would expect to see) schemes in place and followed by evaluations designed to improve their effectiveness and assess the extent they are effective at reducing gambling-related harm and not, for example, simply displacing activity into other forms of gambling. We would also hope to see improvements in levels of awareness amongst gamblers of the possibility of self-exclusion."*

**Page 25, The National Responsible Gambling Strategy**

34. Work on multi-operator self-exclusion schemes is well advanced. These schemes should be evaluated to assess the extent they are effective at reducing gambling-related harm, and how they might be improved.
35. Evaluation will require the selection of suitable metrics to measure impact. Ultimately, we want to understand whether self-exclusion, and multi-operator approaches in particular, has actually helped people reduce or avoid gambling-related harm. This means that process evaluations alone will not be sufficient.
36. It should also consider capturing wider potential benefits, such as whether those that self-exclude experience a reduction in direct marketing. This could be expected to be a result of the greater opportunity for operators and third party marketing firms to better coordinate their activities.

### Specific projects

#### **Project 7.1: Self-exclusion: Awareness and barriers**

**Description:** As well as evaluating the effectiveness of schemes (which may be better led on a sector by sector basis), it may also be necessary to understand, across all sectors, consumers' awareness of self-exclusion and barriers to its use. This could be included in evaluations themselves, but it may be beneficial to plan for cross-sector research (to be led by GambleAware) to gain a broader perspective. The research could also explore whether self-exclusion could be positioned more as a play management tool prior to problems emerging.

#### **Research questions:**

- Why do more people who could benefit from self-exclusion not use it?
- Is it because of lack of awareness, or other barriers?

- What are players' perceptions of gambling management tools and self-exclusion? Who do they think they are for? Does there appear to be a stigma attached? If so, how can they be normalised and promoted?
- What do gamblers want from these types of tool?

**What we already know:** There is emerging international evidence that the language used around responsible gambling is extremely important and can discourage take up of gambling management tools (e.g. 'responsible' may be considered judgemental and implies irresponsibility). Research could build on:

- Self-exclusion as a gambling harm minimisation measure in GB: An overview of the academic evidence and perspectives from industry and treatment (RGT)
- Australian Productivity Commission report on gambling
- RGT-commissioned review of operator-based harm minimisation
- Gambling Commission exploratory work (using omnibus survey) on general awareness and uptake of self-exclusion.

**Possible research techniques:** This research may need to combine quantitative surveys to test wider awareness with more in-depth research with smaller groups of gamblers to understand their attitudes and how they make decisions.

## Priority Action 8: Education to prevent gambling-related harm

*"Too little is still known about the potential role of education in preventing or mitigating gambling-related harm, particularly in relation to children and young persons for whom damaging life-time patterns of behaviour can become established."*

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37. In principle, prevention of harm is better than cure, and so the role of education, as a key form of prevention, needs to be better understood. Priority Action 8 calls for research to identify what is most likely to work, and for pilots to be developed to test the feasibility of these options. The research should cover education for the whole population, but look in particular, an emphasis on at what might work with young people.
38. The Strategy recognises that developing effective preventative education has proved challenging in relation to other areas of public health. It would be valuable to learn from the experiences of others and to consider what could be usefully transferred to the specific challenges of minimising gambling-related harm.
39. It will be important to identify which pilots are suitable for wider delivery and demonstrate which approaches do not represent value for money, allowing resources to be allocated to more productive interventions.

## Specific projects

### **Project 8.1: What works in preventative education: Pilot design**

**Description:** Research needs to explore the potential for education to be used as a harm minimisation tool. This should look at the lessons learnt from comparable education schemes to identify options that merit further exploration through research, trialling and evaluation. It would be valuable to review areas of public health, such as prevention of alcohol-related harm. The work would be closely linked to activity in relation to Priority Action 2.

#### **Research questions:**

- What lessons can be learnt from comparable areas of public health, and can these be applied to the design of initiatives to minimise gambling-related harm?
- Should specific demographic groups be targeted by preventative education? What techniques are most likely to prove effective with different demographic groups?
- Is it possible to target groups of people who might be considered more vulnerable to gambling-related harm?

**What we already know:** Education has been shown to be relatively effective at improving knowledge and changing attitudes, but the evidence on its ability to engender behaviour change is far from conclusive. There also remains uncertainty over the potential for any unintended consequences. This is particularly important when considering work with young people.

There is already existing work that can be built on:

- Work on young people engagement programmes by Fast Forward and Demos, which already provide examples of action research in this area
- RGSB response to consultation on PSHE curriculum
- Evaluations of population education schemes, such as those delivered by GambleAware and Senet.

**Possible research techniques:** This work would involve a systematic literature/evidence review to identify comparable education schemes which may be candidates for further trialling, piloting and evaluation. It could be enhanced by adopting a Delphi study to inform the design of pilot activities.

The research should take account of insights from behavioural economics and other disciplines, and should result in a clear strategic approach to the use of education as a harm minimisation tool.

### **Project 8.2: Preventative education: Action research pilots**

**Description:** The first phase research project would need to be followed by ‘action research’ activities where pilot activities and initiatives are designed, delivered and evaluated.

It may be necessary to consider both gambling specific education pilots and options to embed education about gambling into existing public health interventions. E.g. online safety awareness could provide a suitable opportunity to highlight messages about remote gambling.

#### **Research questions:**

- What works – and how can this be evaluated?
- How can pilots be improved?
- What pilots are suitable for wider delivery?

**What we already know:** This project will build on the findings of the earlier stage of research.

**Possible research techniques:** Action research would allow well designed pilots to be run and the impacts measured.

## **Priority Action 9: Building the quality and capacity of treatment**

*“We welcome the progress the Trust (GambleAware) has made in establishing and implementing a core database in the form of the Data Reporting Framework. The Trust (GambleAware) intends to use this and other evidence to explore the impact of treatment on different groups and to investigate how the quality and effectiveness of brief interventions and more sustained treatment, residential or otherwise, can be improved.”*

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Although GambleAware is developing improved systems to inform the commissioning of treatment. Research and evaluation can play a role in finding ways of improving access to treatment and in understanding its effectiveness.

### **Specific projects**

#### **Project 9.1: Treatment: Delivery gap analysis**

**Description:** Research should be used to build up a picture of demand for treatment services, which can be compared with the services that are actually supplied.

Analysis is required to link work on what we know about who is affected by gambling-related harms with who presents for treatment. We know there is a large discrepancy between the numbers receiving treatment and the numbers of people estimated to be problem or at-risk gamblers. It is likely that a large number of people who could benefit from support are not receiving it.

A better insight into unmet demand for treatment and support could be used to target interventions to bring more people who need it forward for treatment.

**Research questions:**

- Are there geographic gaps in availability of treatment services?
- Is the right mix of treatment service available across the country?
- Are people with certain demographic or socio-economic characteristics not coming forward for treatment?
- Is there sufficient treatment available for young people (if not, this may lead to a need for additional specific research in this area)?
- Are there any barriers to access of treatment?

**What we already know:** Information to support this will be available from:

- Information from the Data Reporting Framework (DRF)
- BGPS and Health Surveys
- First phase study on gambling-related harm (PWC).

**Possible research techniques:** This project could be aided by an analysis of the profile of treatment service users and what we know about demographic characteristics of problem gamblers and those suffering gambling-related harm. The research would also draw on existing data and evidence collected through GambleAware's Data Reporting Framework.

**Project 9.2: What works in gambling treatment?**

**Description:** Evaluation is required to understand the impact of treatment services on different groups and to investigate the quality and effectiveness of different modes of delivery (e.g. brief interventions/psychosocial treatment and residential). Evaluation should pay close attention to understanding the value for money of different approaches.

**Research questions:**

- What works and for whom?
- What approaches represent best value for money?
- How can existing delivery be improved?

**What we already know:** Emerging evidence from the RGT's Data Reporting Framework should provide insight into the relative effectiveness of different modes of treatment delivery. This needs to be combined with impact evaluation, including the collection of evidence on those who undergo treatment.

**Possible research techniques:** A wide range of evaluation methods could be applied. The earlier section on evaluation outlines key features of the approach we would expect to evaluation more generally.

### **Project 9.3: Opportunities for improving treatment through technology**

**Description:** Technology could play an increased role in delivering treatment and encouraging people who need it to come forward.

**Research questions:** Research needs to help us understand how treatment services work better in a world where people live more digital lives.

**What we already know:** The remote sector has experienced significant growth, and more people are accessing services on-line.

**Possible research techniques:** There will be increased opportunities to harness social media to promote the availability of treatment. E.g. in other fields, such as fitness and healthy eating, virtual networks are used to support clients to meet their goals. A review of lessons from elsewhere could form the starting point for this work.

## Annex A – Project list and priorities

The table below outlines the key priorities and indicates our recommendations on the sequencing for the commissioning. The timing for commissioning will be set out in GambleAware’s commissioning plan, which will take into account capacity and availability of funding. Six projects are highlighted as of particular high priority. Some projects are dependent on the completion of other projects or activities. In practice, commissioning will need to be flexible and adaptive to developments in the gambling market and policy environment.

Priority Action	Project	Project Title	Priorities		
			High Priority	Sequence	Dependencies
1	1.1	Developing understanding of specific areas of gambling-related harm	High	1	Dependent on 1.1
	1.2	Building and testing a mechanism for measuring and monitoring gambling-related harm		-	
2	2.1	Conditions and behaviours that occur in parallel with gambling-related harm		9	
	2.2	Lessons from other public health approaches		12	
4	4.1	The effect of advertising on young people’s behaviour and perceptions of gambling	High	2	
	4.2	How people gamble and how this varies between product and environment		3	
	4.3	Consumer vulnerability: Linking data on play with individuals’ socio-economic background and attitudes to gambling		7	
	4.4	Remote gambling: The impact of accessibility and the effect of being on-line in decision making and behaviour		8	
	4.5	Longitudinal study: Why do people move in and out of harmful play?		10	
	4.6	Motivations for gambling		11	
7	7.1	Self-exclusion: Awareness and barriers		-	Dependent on all multi-operators schemes being in operation
8	8.1	What works in preventative education: Pilot design	High	4	Dependent on 4.1
	8.2	Preventative education: Action research pilots		-	
9	9.1	Treatment: Delivery gap analysis		5	
	9.2	What works in gambling treatment?		6	
	9.3	Opportunities for improving treatment through technology		13	