

## Addressing Gambling Harm

### Background

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Problem gambling can affect health, relationships, finances, employment, and children, and the harms from gambling can extend to the entire community. Issues around gambling may also involve many different groups of people, not just gamblers. The Health Sponsorship Council's (HSC's) 2006/07 *Gaming and Betting Activities Survey (GBAS)* asked New Zealanders about who they thought had responsibility for preventing gambling harm.

### Research Details

#### Methodology

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All respondents (n=1,973) were asked how extensive or limited (on a five point agreement scale – very extensive, fairly extensive, neither extensive nor limited, fairly limited and very limited) they thought the role of the following groups should be in preventing people from gambling too much:

- individuals and their families
- health and social services
- the government
- gambling operators
- the whole community.

All adult respondents (n=1,774) were also asked to indicate their level of agreement with the statement 'There is presently a need for your community to discuss problems that can be brought on by gambling and work out local solutions'.

Relative differences between demographic sub-groups have been reported.

### Detailed Findings

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#### *Who should prevent problem gambling?*

- **Individuals and their families.** The highest proportion of respondents (84%) felt that the role of individuals and families should be 'extensive', with over half saying it should be 'very extensive'. Māori and European/Others were more likely than Asian or Pacific peoples to feel that the role should be extensive. People living in the least deprived areas were more likely to say that the role should be extensive.
- **Health and social services.** Over three in four respondents (76%) felt that the role of health and social services should be extensive. Younger respondents aged 15 to 24 years were less likely to think that the role should be extensive.
- **The government.** Almost three in four (72%) respondents felt that the government should play an extensive role. Non-gamblers and

## Addressing Gambling Harm (continued)

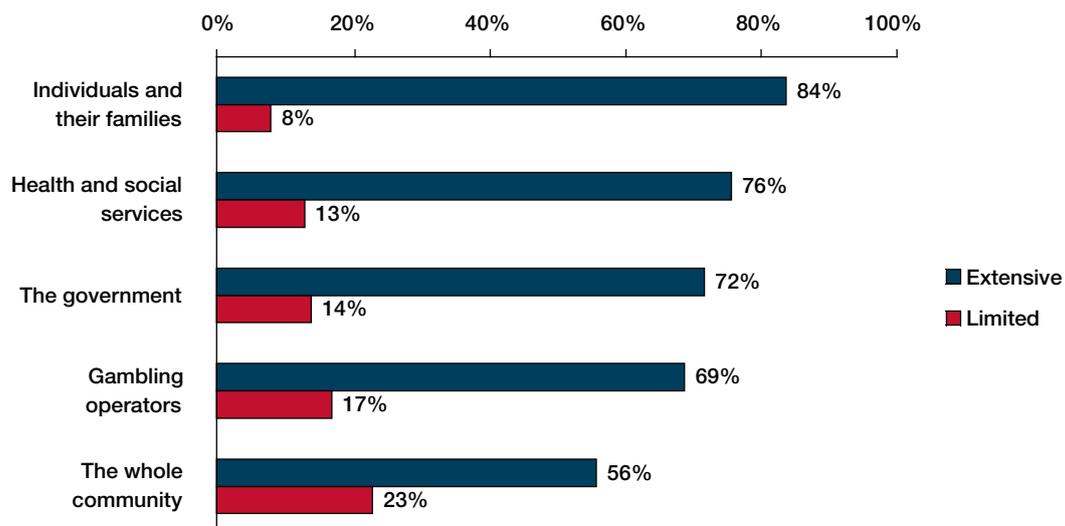
infrequent gamblers were more likely to feel that the government’s role should be extensive. Frequent gamblers were more likely to think that the government’s role should be limited. Between ethnic groups, Māori were the most likely to say that the government’s role should be extensive, while Asian peoples were the least likely.

- Gambling operators.** Over two-thirds (69%) of respondents thought that the role of gambling operators in preventing problem gambling should be extensive. This opinion was more commonly held among Māori (69%) and people of European/Other ethnicities (73%). Respondents who lived in more deprived areas were more likely to think that the gambling operators’ role should be

limited. Frequent, continuous gamblers were also more likely than other types of gambler or non-gamblers to think that the gambling operators’ role in preventing problem gambling should be limited.

- The whole community.** Over one-half (56%) of respondents felt that the whole community should have an extensive role in preventing gambling harm. Almost one-quarter (23%) felt that the community’s role should be limited. Non-gamblers were more likely than all types of gamblers to think that the community should have an extensive role. Pacific peoples were the most likely (66%) to think the community’s role should be extensive, compared with people of other ethnicities.

Figure 1 “What should the role of the following groups be in preventing people from gambling too much?”



## Addressing Gambling Harm (continued)

### Community's role in preventing problem gambling

All adult respondents (n=1,774) were asked whether they agreed or disagreed that there was a need for their community to work out solutions to gambling problems.

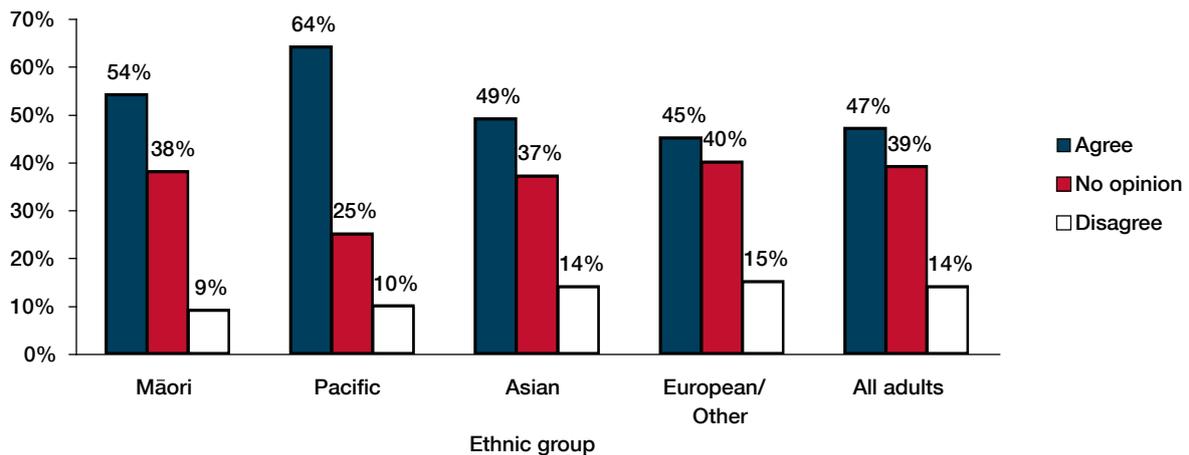
Almost one-half (47%) of adults agreed with the statement, while 14%

disagreed. Two in five (39%) had no feeling either way.

Pacific peoples were more likely to agree that there was a need for their community to address gambling problems.

Respondents living in more deprived areas were more likely to agree, while respondents in low-deprivation areas were more likely to disagree.

Figure 2: "There is presently a need for your community to discuss problems that can be brought on by gambling and work out local solutions": Agree or disagree



## Addressing Gambling Harm (continued)

### About the Survey

- The findings provide a 'benchmark' for developing and evaluating public health initiatives. The survey contributes to New Zealand's public health approach to addressing gambling harm.
- The GBAS is a nationwide face-to-face survey of 1,774 adult New Zealand residents aged 18 years and over. The survey also included a sample of 199 young people aged 15 to 17 years, resulting in 1,973 people taking part in the survey.
- The sample, with a response rate of 66.3%, included 876 people of European/Other ethnicities, 495 Māori, 267 Pacific peoples and 335 Asian people.
- The data have been adjusted (weighted) to ensure they are representative of the New Zealand population.
- A full description of the 2006/07 GBAS survey methodology and full report can be found online at [www.hsc.org.nz/researchpublications.html](http://www.hsc.org.nz/researchpublications.html)

#### About the HSC

The HSC is a crown entity that uses health promotion initiatives to promote health and encourage healthy lifestyles, with a long-term focus on reducing the social, financial and health costs of a number of health behaviours.

#### Citation

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