



An Exploratory Study of People's
Gambling Behaviours, Harm, and Help-
Seeking for Gambling Issues in the
Northern Territory

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Menzies School of Health Research

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PREFACE

This report presents findings from a follow-up qualitative study to the 2018 Northern Territory Gambling Prevalence and Wellbeing Survey. The study explored people's gambling behaviour, associated harms, help-seeking for gambling issues, and their views about current legislation on gambling in the Northern Territory (NT). The aim of this study was to generate an evidence base that could be used to inform targeted interventions for people experiencing harms from gambling in the NT.

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CONFLICTS OF INTEREST

The research team do not have any conflicts of interest to declare.

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Executive Summary

Background

This report presents findings from a follow-up qualitative study conducted between January and June in 2019 which recruited people from the 2018 Northern Territory Gambling Prevalence and Wellbeing Survey.

The overarching aim of this exploratory study was to provide insights into people's gambling behaviour, associated harms, help-seeking for gambling issues, and their views about current legislation on gambling in the NT, for a selection of regular gamblers on electronic gambling machines (EGMs), sports and racetrack betting, and people negatively affected by someone else's gambling.

The results of this study will provide an evidence base that the NTG, gambling industry, and counselling services can use to better inform policy and interventions that assist people experiencing gambling-related harms in the NT.

Methods

In-depth interviews were conducted with a targeted selection of respondents from the 2015 and 2018 NT Gambling Prevalence and Wellbeing Surveys. The sample comprised 27 participants, aged 18+ years, with representation from both Aboriginal and Non-Aboriginal people. The sample included weekly gamblers (split between EGMs, sports, and racetrack betting), non-regular gamblers, and those negatively affected by others' gambling. The interviews included both semi-structured and structured questions. The semi-structured questions explored participants' current and past experiences (in the past 12 months) about:

- gambling behaviour including reasons for gambling, use of venues, and how venues may have affected the way they gamble;
- the relationship between gambling, gambling-related problems, and other co-morbidities including excessive alcohol and drug use;
- strategies used for controlling gambling; and
- help-seeking for gambling issues, including being approached by and talking with personal contacts (e.g., partners, other family members, friends, work colleagues), formal services (e.g., General Practitioners (GPs), counsellors, welfare organisations, financial counsellors), and third parties (e.g., venue staff), about gambling.

Participants were also asked for their views about:

- who is appropriate and best-placed to intervene or help, and how it would be best to do so;
- what they thought might help so circumstances 'didn't get so bad';
- current legislation on gambling in the NT; and
- strategies and interventions government and other agencies could use to minimise harms from gambling in the NT.

A Framework Analysis approach was used for data analysis. Appropriate ethics approval was obtained, and all participants were provided a \$50 supermarket or store voucher for their time.

Results

Gambling behaviour

EGMs were mainly gambled on at the casinos, while sports and racetrack betting were done primarily online. The majority of the participants reported gambling on more than one activity. The reported gambling expenditure ranged between \$20 a day and \$2,000 a week.

In general, a lack of self-awareness of gambling behaviour, boredom, scarce opportunities for social interaction, and to win money and chasing losses, were reported as drivers of gambling. The reasons for gambling reported by participants from culturally and linguistically diverse (CALD, i.e., those who did not speak 'English only' at home) background were related to isolation associated with migrating to a new country. Factors associated with this group of people that led to gambling engagement included lifestyle changes (related to cultural differences), lack of support, stress, and boredom.

Negative impacts experienced from gambling

Both gamblers and those affected by someone else's gambling reported having experienced negative impacts from gambling. These included financial harms, relationship conflicts, emotional distress, and decrements to health. Among these, financial harm was the dominant negative impact of gambling reported by many participants across groups. Regardless of the cause and effect, the circular associations between gambling, financial stress, and social and emotional wellbeing were described by participants.

Help-seeking for gambling issues and self-regulation strategies

Similar responses were received from both gamblers and affected others relating to help-seeking for gambling issues. For the majority of participants, help for gambling issues was not sought. A lack of self-realisation of gambling issues and awareness of the available services, shame and embarrassment associated with gambling, and the cost of services, were reported as barriers to help-seeking. Stigma; shame; and lack of awareness and understanding of western concepts of counselling and treatment were reported as barriers to help-seeking for gambling issues by CALD participants.

Where help was sought, it was primarily informal (through family and friends) and was rarely preventive. Family and friends were also the preferred choices for intervening where gambling-related harms were evident. Counselling and welfare services were overwhelmingly preferred over medical doctors and other formal services, for both gamblers to approach and the services to offer help for gambling issues. Interestingly, similar responses were received from both gamblers and affected others. In many instances, self-help strategies were successful in controlling one's own gambling. The strategies included taking set amounts of cash to venues, setting limits on spending, and creating barriers to accessing money for

gambling. Low- and moderate-risk gamblers appeared to be more receptive of the negative impacts and harm from own gambling than high-risk gamblers.

Approaches to minimise harm from gambling

Participants were asked for their views about what they thought venues and government might do to minimise harms from gambling in the NT. Many strongly advocated for the venues (casinos, clubs, etc.) to train their staff so that they can identify problem gamblers and then offer them help. Other suggestions included putting up posters in venues to make people more aware of the gambling-related harms. Creating a system wherein the venues could make gamblers aware of their spending and thus help them limit their gambling expenditure, was also discussed.

The government position as a regulator was acknowledged. Recommendations included limiting (i) the daily number of hours of EGM playing, (ii) the bet size (e.g., introducing pre-commitment cards), (iii) the number of EGMs at the venues, and (iv) the opening hours of the venues. Participants also described the negative implications of note acceptors in EGMs and advocated for re-introducing the coin system. The need for legislation around smoking and alcohol use at the venues was also emphasised.

Participants appeared to be wary of the easy accessibility of online gambling and the potential associated harms, and thus stressed the need for a stronger regulation limiting accessibility to online gambling, especially for younger people. The need for strengthening the existing awareness and education interventions was also emphasised.

Conclusion

The results suggest that a targeted intervention approach has the potential to minimise harms from gambling. To be successful, the approach should consider the experiences and understandings of people who are at risk of gambling harm or are experiencing it.

Chapter 1: Introduction

1.1 Background

The gambling participation rate in Australia is among the highest in the world (Productivity Commission, 2010), with an estimated 64% of Australian adults take part in some form of gambling annually (Hing, Russell, Tolchard, & Nower, 2014). Further, about 2.5% of the adult Australian population experience moderate to severe problems caused by problem gambling (Productivity Commission, 2010). Also, every problem gambler's gambling activities negatively affect about six others around them (such as family and friends) (Goodwin, Browne, Rockloff, & Rose, 2017). This suggests that up to four million Australians experience harms from gambling including decrements to health and social and emotional wellbeing, psychological distress, and financial stress (Langham et al., 2016).

With the continued growth of the gambling industry in the Northern Territory (NT) (and more broadly in Australia), the government position as a regulator has also grown and become more complex, with targeted approaches to gambling regulation now the modus operandi to minimise gambling-related harms. The findings from a recent qualitative study conducted in the Australian Capital Territory provides insights into the potential of a targeted intervention approach to minimise harms from gambling (Davidson, Taylor-Rodgers, & Fogarty, 2018). Similarly, results from a qualitative study conducted with Tasmanians affected by someone else's gambling (affected others) suggested that prevention and treatment interventions tailored to address the causes and impacts of harms experienced by affected others are likely to address this issue (Acil Allen Consulting, Deakin University, Central Queensland University, & The Social Research Centre, 2017). Overall, studies have suggested that to be successful, interventions need to be receptive to the experiences and understandings of those who are at risk of gambling harm or are experiencing it (Davidson et al., 2018; Gainsbury, Hing, & Suhonen, 2014; Lubman et al., 2015; Thorne, Goodwin, Bryden, & Best, 2016).

The 2015 NT Gambling Prevalence and Wellbeing Survey found higher participation rates in keno, casino table games, sports betting, and any gambling in the NT compared with other jurisdictions in Australia (Stevens, Thoss, & Barnes, 2017). Playing electronic gambling machine (EGMs), sports betting, and casino table games were the activities with the highest percentage of at-risk gamblers, with problem gambling risk significantly increasing with frequency of play for these activities. Around 4% (6,500 people) of NT adults were classified as moderate risk or problem gamblers (Problem Gambling Severity Index (PGSI) 3+), while about 13% (23,000 people) of adults in the NT indicated that they had experienced at least one negative consequence from someone else's gambling in the year before the survey (Stevens et al., 2017).

Currently there exists limited qualitative research exploring community attitudes on gambling behaviours, harms from gambling, help-seeking for gambling issues, self-regulation, and government regulations on gambling, for the NT. This gap in knowledge means that there is a paucity of information that could be used to develop targeted interventions to minimise gambling-related harms in the NT context. To fill this gap in research, the NT government funded Menzies School of

Health Research to explore people's gambling behaviours, experience with gambling-related harms, help-seeking for gambling issues, and views on current legislation on gambling, in the NT.

1.2 Aim of the study

The overarching aim of the study is to provide insights into people's gambling behaviour, associated harms, help-seeking for gambling issues, and their views about current legislation on gambling in the NT, for a selection of regular gamblers on electronic gambling machines (EGMs), sports and racetrack betting, and people negatively affected by someone else's gambling.

It is anticipated that the results of this will provide an evidence base that the NTG, gambling industry, and counselling services can use to better inform policy and interventions that assist people experiencing gambling-related harms in the NT.

1.3 Study objectives

- Explore gambling behaviours and experiences.
- Provide insights into help-seeking behaviours for gambling issues, through formal services (e.g., health, community, and specialist gambling support services) and personal contacts (e.g., family, friends, and work colleagues).
- Assess the likelihood of recognition of gambling behaviours and associated harms by others, either in a gambling context (e.g., venues and online gambling), service delivery settings (e.g., health and community services), or in personal contexts (e.g., family, friends, and work colleagues).
- Assessing the openness of people experiencing harms to interventions, preferences for types of interventions, and the preferred contexts for offers of help.
- Exploring strategies by which people who are open to intervention can be directed to assistance and appropriate sources of information.
- Describing the range of self-help strategies people use to control their gambling.
- Exploring opinions on gambling legislation in the NT.

Note: For the convenience of writing, participants were categorised into two groups - gamblers and affected others, and referred to as such, throughout this report.

1.4 Structure of the report

This report consists of nine short chapters.

Chapter 2 provides an overview of the study's methodology. The chapter presents information on (i) sample selection; (ii) data collection; (iii) interview analysis; and (iv) ethics.

Chapter 3 presents findings on participants' gambling behaviour. This chapter provides information on (i) gambling activities; (ii) reasons for gambling; and (iii) use of venues.

Chapter 4 reports on participants' experience and views of the co-occurrence of gambling with other health and wellbeing issues. It provides an overview of the

negative impacts participants had experienced from their own (for gamblers) gambling and/or others' gambling.

Chapter 5 describes participants' experiences with and opinions about help-seeking (such as from where and in what circumstances) for gambling issues.

Chapter 6 reports on self-help strategies gamblers had used to limit, control, or stop gambling.

Chapter 7 presents participants' views about the appropriateness and usefulness of venues, personal contacts, and different professional services for gamblers to approach about their gambling issues.

Chapter 8 describes participants' views about how to best approach someone about their gambling. It also describes their opinions on who, what, and when interventions might best help people experiencing harm from their own gambling.

Chapter 9, the final chapter, summarises the study's findings and provides recommendations for addressing gambling harm in the NT.

Chapter 2: Methodology

This chapter presents an overview of the methodology used for this study, with Appendix C presenting information on the interview guides used for data collection.

2.1 Sample selection

A purposive sampling method was used to recruit the participants. Participants were selected from the 2015 and 2018 NT Gambling Prevalence and Wellbeing Surveys, as these surveys contained a question asking respondents' if they would be interested in participating in future research', with over 85% of respondents indicating they would. The focus of the sample selection was on regular (weekly) and non-regular (monthly) EGM, sports and racetrack gamblers, and people negatively affected by someone else's gambling. An initial list of respondents who met this criterion from the 2015 and 2018 surveys and agreed to be recontacted was generated. From that list, potential participants were contacted and invited to participate in the study. The selection also considered age, gender, Aboriginal status, and region where participants had lived at the time of recruitment.

The company, Roy Morgan Research (RMR) who carried out participant recruitment for the 2015 and 2018 Gambling Prevalence and Wellbeing Surveys (and owned the contact details of respondents) made initial contact with eligible people (n=241). Of these, 50 people agreed to participate in the study (Table 2.1). Menzies contacted all 50 people to arrange the interviews.

Table 2.1 Demographic characteristics of potential participants (n=50)

Target group	Age		Sex		Region			Total
	<35	35+	M	F	Darwin/ Palmerston	Alice Springs	Rest of NT	
Affected others	3	16	6	13	8	7	4	19
Regular (weekly) gamblers	3	21	19	5	22	0	2	24
Non-regular gamblers	1	6	7	0	7	0	0	7
Total	7	43	32	18	37	7	6	50

M = male; F = female

Where mobile phone numbers were available, initial contact was made via text messages. Those who did not respond to the text messages were followed-up by phone calls. Calls were made between 9am and 8.30pm weekdays, 10am and 5pm weekends, and were prohibited on public holidays. Text messages were re-sent to those who did not take the calls. Those who still did not respond and where email addresses were available, were sent an email at this stage. Up to five attempts were made to contact people.

Where mobile phone numbers were not available, calls were made on landline numbers. Calls were made between 9am and 8.30pm weekdays, 10am and 5pm weekends, and were prohibited on public holidays. Where email addresses were available, emails were also sent. Up to five attempts were made to contact people. Finally, 27 people agreed to participate in the study. The sample comprised eight

EGM gamblers, eight sports and racetrack bettors, and 11 who had experienced harms from others' gambling (Table 2.2).

Table 2.2 Participant distribution by the type of primary gambling activity

Category	n
EGM (Pokies) players	8
Sports and racetrack betting (including online betting) *	8
Affected others	11

*Sports betting and races were combined for descriptive purposes, as both include online and offline betting.

Of 27 participants, 17 were male, the majority belonged to 35+ age group (n=21), 20 were living in the Darwin-Palmerston region, and 17 identified themselves as Non-Aboriginal (including three participants from CALD background) (Table 2.3).

Table 2.3 Demographic characteristics of the final sample

Target group	Age		Sex		Region			Aboriginal status		Total
	<35	35+	M	F	Darwin/ Palmerston	Alice Springs	Rest of NT	Aboriginal	Non- Aboriginal	
Affected others	3	8	4	7	6	4	1	4	7	11
Regular (weekly) gamblers	2	11	10	3	11	0	2	3	10	13
Non-regular gamblers	1	2	3	0	3	0	0	3	0	3
Total	6	21	17	10	20	4	3	10	17	27

M = male; F = female

2.2 Data collection

Prior to conducting interviews, we held a half-day workshop with key stakeholders to identify emerging issues around compliance, type of gambling, health promotion, and safe gambling. Participants in the workshop included: policy officers, compliance and regulation officers from the Department of Attorney General and Justice, health promotion officers from the Department of Health, gambling counsellors, and gambling researchers.

Based on the relevant literature (Davidson et al., 2018; The Victorian Responsible Gambling Foundation, 2012) and inputs from the workshop participants, separate interview guides were developed for each of the three categories of participants. There was a set of questions common across the guides, and a further set of questions that was specific to the individual guide (see Appendix A). Five to ten questions were developed for each objective.

Nearly all interviews (n=25) were conducted over the telephone; however, face-to-face interviews were conducted where requested (n=2). All interviews were conducted by the first author of this report. At the beginning of the interview, the Participant Information Sheet was read out to the participants and a verbal Informed consent was obtained. Each interview lasted for an average 30 minutes. All participants agreed for the interviews to be audio-recorded. All recordings were transcribed by a secure transcription service. Participants were given a \$50 voucher

from a choice of Woolworths/Coles/Big-W for their involvement in the study, as a token of appreciation, and compensation for their time. The vouchers could not be used to purchase alcohol, tobacco, and gambling products. Although the final sample was smaller than what was planned, the theoretical principle of saturation was reached (Corbin & Strauss, 2014; Strauss & Corbin, 1990), where new findings or insights were no longer revealed during the interviews. Therefore, interviewing more people would not have necessarily yield much new or relevant information.

The interviews included both semi-structured and structured questions. The semi-structured questions explored participants' current and past experiences (in the past 12 months) about:

- gambling behaviour including reasons for gambling, use of venues, and how venues may have affected the way they gamble;
- the relationship between gambling, gambling-related problems, and other co-morbidities including excessive alcohol and other drug use strategies used for controlling gambling; and
- help-seeking for gambling issues, including being approached by and talking with personal contacts (e.g., partners, other family members, friends, work colleagues), formal services (e.g., GPs, counsellors, welfare organisations, financial counsellors), and third parties (e.g., venue staff), about gambling.

Participants were also asked for their views about:

- who is appropriate and best-placed to intervene or help, and how it would be best to do so;
- what they thought might help so circumstances 'didn't get so bad';
- current legislation on gambling in the NT; and
- strategies and interventions government and other agencies could use to minimise harms from gambling in the NT.

At the end of the interviews, gamblers were asked structured questions on the PGSI, to assess their problem gambling risk. Participants were also given the opportunity to discuss anything they wanted about gambling that had not been covered during the interview.

2.3 Analysis

A Framework Analysis method was used to explore the interview data (Ritchie & Lewis, 2003). We considered this approach because it allows the inclusion of both pre-existing theoretical constructs (a deductive approach) and emergent data-driven themes (an inductive approach) to inform the development of the analytic framework. This approach also suited the objectives of the study, in that we had identified areas from the literature we wished to explore (Davidson et al., 2018) but also wanted to discover the unexpected, that is, identify themes in the data (Parkinson, Eatough, Holmes, Stapley, & Midgley, 2016; Gale, Heath, Cameron, Rashid, & Redwood, 2013).

NVivo 12 software was used to organise and manage the data. Participants are quoted throughout the results sections of the report (chapters 3-8). Sex (male and

female), age group (18–24, 25–34, 35–44, 45–54, 55–64, and 65+), region (Darwin/Palmerston [D/P], Alice Springs [AS], and Rest of NT), Aboriginal status (Aboriginal and Non-Aboriginal), and participant category (affected others, EGMs, and other betting) are noted for each quote. References to the PGSI scores are also made for gamblers.

2.4 Ethics

Ethics approval to conduct this study was sought from the Central Australian Human Research Ethics Committee (CA-19-3310) and the Human Research Ethics Committee of the Northern Territory Department of Health and Menzies School of Health Research (2019-3294).

Chapter 3: Gambling behaviour

This chapter presents information on participants' gambling behaviour (current and past 12 months). The discussion involved accessing information on (i) gambling activities; (ii) reasons for gambling; (iii) use of venues; and (iv) reinforcement to gambling behaviour.

3.1 Gambling activities

Gamblers were asked questions on gambling activities, frequency of playing, money spent on gambling activities, gambling locations they played at, and wins and losses on gambling, for the main type of gambling activity. Affected others were asked to describe the gambling activities of those whose gambling had affected them. Table 3.1 reports data from both gamblers and affected others.

Among the gambling group, playing EGMs was the popular primary gambling activity (n=7), followed by sports betting (n=6) and then racetrack betting (n=3), with the latter two played primarily online. Similarly, both EGMs (n=5) and online gambling (n=6; split between sports and horse racing) were the popular type of gambling activities reported by participants in the affected others group (Table 3.1). Based on the PGSI scores, most gamblers interviewed belonged to the moderate-risk group (n=11), with three participants classified as experiencing low-risk and problem gambling. The remaining (n=2) were classified as low-risk gamblers.

Table 3.1 Gambling participation by the main type of gambling activity

Activity	Group	
	Gamblers (n)	Affected others (n)
EGMs	7	5
Sports betting (including online betting)	6	4
Races (including online betting)	3	2

The majority of the participants (n=18) reported gambling on more than one activity. Of these, nearly all (n=14) reported gambling on two activities. In contrast, only four participants mentioned gambling on a solitary gambling activity:

"So not a lot. Actually, in the last probably three or four months there's been just some online gambling and mainly on sports. Actually, all on sports not including horse racing. And then one visit to a casino in Darwin. It does vary. The night at the casino was probably ahead of my disposal. Probably about two thousand dollars. And but I actually walked out early that night so I walked out with probably three and a half thousand in my pocket. So, a little that night on sports bet I put a hundred-dollar bet on. And that's on Rugby union I bet on rugby union at the moment. And I'm not doing terribly well. I'm losing probably lost about probably about five or six hundred dollars in the last three months I have lost. I play weekly. I use the Eventbrite 365 app". (M, 35–44, D/P, Non-Aboriginal, PGSI 5, other betting)

EGMs were played mainly at the casinos, and sports and racetrack betting were done primarily online, among participants. When asked about how much and how often they gambled on different activities, significant variations in responses were identified. The spending ranged from \$20 a day to \$2,000 a week:

"I've never had a huge win. I have some moderate wins but mostly I lose. I play pokies probably at least once a week. Money spent far too much probably a minimum of 400 dollars each time. I play at the casino in Darwin. Mostly losses but the occasional wins". (F, 65+, D/P, Non-Aboriginal, PGSI 8, EGM player)

A few participants reported a decline in their gambling activities over time:

"Yes, so at the moment I've toned down the gambling [pokies] that I was doing quite a bit. Now I'm playing some lotto. I'm three times a week putting some Keno on it too". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM player)

3.2 Reasons for gambling

When asked about the reasons for gambling, boredom and a lack of opportunities for social interaction were reported as the main drivers of gambling. Interestingly, these reasons were reported by both Australian born participants and those from culturally and linguistically diverse backgrounds (immigrants). Also, the PGSI scores for this cohort of participants were generally higher than other participants and were all classified experiencing moderate risk or problem gambling.

"I'd probably normally go out on my own but half the time, I meet people, make friends or meet people at the venues where I go to. So, it's more about boredom and go and meet people". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

"I just go to the casino if I get bored because there are not many activities in Darwin literally, so I just do it for time pass only". (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM player)

"I was probably spending at the time probably average four hundred a week. And I probably couldn't nearly afford to. I did because my personal life is very down and you know no girlfriend or anything or company really". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM player)

"Boredom, I guess. When you have too much time in hand, you know". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM player)

Boredom together with a couple of initial big wins encouraged people to gamble, as summarised in the below participant quote:

"Up until probably six or seven years ago, I didn't gamble much at all really. I only just played on the weekends when I was in a syndicate with some work mates and stuff like that. When I changed the job, I finished work in the afternoon or mid-afternoon, so, I used to stop at the pub for a couple of hours on the way home and then I started playing keno. I've put in 20 bucks on Keno here and there and then I had I had a pretty substantial win when I won forty-six thousand dollars. And that sort of I

know that's sort of [sic] hooked me in a way I just sort of kept playing kept playing and kept playing [sic]. And as far as the pokies go it was just a couple of blokes on the board on the weekend and just got to the pub to play the pokies [sic]". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM player)

Gambling appeared to dovetail well with the culture and familial influence. For example, one participant reported that gambling was a part of the Chinese culture and that everyone in his family had played EGMs. Unsurprisingly, chasing up dollars was another popular reason for gambling, as reported by many participants:

"In regard to culturally with the Chinese [sic], gambling is obviously a big thing with the Chinese culture. I don't have an experience of winning, therefore, I don't have that much push to gamble whereas my wife, she has experienced quite reasonable wins on the pokie machine and she loves pokie machines and she actually gambles quite big on it because she believes the bigger you gamble, the more you can win. But obviously the more you can lose [sic]. My parents have always gambled all their lives from my memory". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, EGM player)

"Well I've had a background in racing. I mean growing up. Yeah, I mean my family was involved with racing so sort of like in the blood [sic]. I don't gamble at the casino, I just love horse racing, and sports betting is a side interest you know, gambling adds more fun to it". (M, 55-64, D/P, Aboriginal, PGSI 2, other betting)

For many participants, gambling was an enjoyable pastime:

"Mmmm, I enjoy the mathematics behind studying horse racing. I like to study horses, jockeys, mathematics. Talk about it. Laugh about it. Watch the race". (M, 45-54, D/P, Non-Aboriginal, PGSI 4, other betting)

"I enjoy it. I find it relaxing. It's [casino] a safe place for women to go to. That's why I first started because I don't like going to pubs and stuff on my own. And it's zone out time I guess because I was working up there and I was pretty full on work. It was just the time to chill out, you know". (F, 65+, D/P, Non-Aboriginal, PGSI 8, EGM player)

3.3 Use of venues

In addition to the gambling activities, participants (gamblers) were prompted to describe other activities they undertook at the venues. They were asked questions on access to smoking rooms and alcohol, and other facilities such as cash through EFTPOS and ATMs, available at the venues.

The majority of the participants reported having access to alcohol, smoking rooms, and ATM and cash withdrawal facilities at the casinos, clubs, and pubs. However, none reported having access to such facilities at other venues such as the racing venues. In some cases, having easy access to these facilities had resulted in increased gambling and alcohol consumption:

"Yeah, there's an ATM right towards the front door. You basically withdraw money at the ATM... easy enough until the money runs out". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

"Absolutely, we do have access to smoking rooms at the casino. Smoking and gambling go hand-in-hand with a lot of people". (M, 55-64, D/P, Non- Aboriginal, PGSI 5, other betting)

"I don't smoke but definitely drink beers [at the casino]". (M, 55-64, D/P, Non- Aboriginal, PGSI 6, EGM gambler)

3.4 Reinforcement to gambling behaviour at the venues

Participants were asked to describe their experience with lighting effects, jackpot messages, and good fortune messages, displayed on EGMs; and melodies played by EGMs, in terms of their effect on their gambling behaviour. Many described having been influenced by these 'tricks' in some way:

"The music, the rewards, everything encourage you to keep gambling. In fact, I found it quite amazing that you even win just a very small amount, they congratulate you - wow fantastic, you've won or great win or great spin. And then the music, you know, in a crowded venue you hear a lot of the winning sounds telling you oh well someone's won over there and someone won here. These sounds and all that obviously trigger dopamine and influence your gambling". (M, 55-64, D/P, Non- Aboriginal, PGSI 5, EGM gambler)

"Oh jeez, see how much I won and see that bright light on the screen. It lights your eyes up and make you think oh I could win more if I keep going. I mean that makes it easier for you not to give up and you put in more money". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

However, the 'tricks' had not affected the gambling behaviour of other gamblers:

"It's good to hear it from another machine. You just think someone else has won, you know, but it doesn't really affect me". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

Chapter 4: Co-occurring problems and gambling harms

All participants were asked to describe their experience and views of the co-occurrence of gambling with other issues. This included questions on the negative impacts they had experienced from their own (for gamblers) or others' gambling (for affected others). Gamblers were also asked about the experience of others affected by their gambling.

4.1 How gambling can lead to other problems?

Financial consequences of gambling were discussed by nearly all participants. Strong language such as “get a gun and shoot yourself” and “lose everything” were used by participants to indicate the severity of the losses:

“Sometimes when you put such an extreme amount of money on the pokies and then run out of money, then you realise what have you done. You know, like really if you could get a gun and shoot yourself. It just leaves you look like a stupid”. (M, 55-64, D/P, Non- Aboriginal, PGSI 6, EGM gambler)

“When it becomes addictive, you start to get in there too many times. You can start to lose everything. You start to lose your rent money. People start to lose. When I meet people in general when they are gambling, they are not holding stuff anymore [sic]”. (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

Regardless of the direction of the relationship, participants explicitly described how monetary loss associated with gambling could jeopardise mental health and social wellbeing:

“Yes certainly, it [gambling] can lead to you know people over stretching financially. It can build depression that can lead to arguments between family members particularly spouses and it can lead to dependency and probably overstretching and people going into debt”. (M, 55-64, D/P, Non- Aboriginal, PGSI 5, other betting)

“You become distant. You won't really enjoy activities with friends if you don't have the money. You become isolated because you find gambling as your only form of addiction. It leads to stress and anxiety, yeah, and then you play even more”. (M, 25-34, D/P, Non- Aboriginal, PGSI 7, other betting)

4.2 Negative impacts experienced from own gambling

The circular associations of gambling with finances, and social and emotional wellbeing were discussed by participants. The harms described were predominantly monetary; however, gambling had also caused stress, frustration, and strained relationships to many participants. Most of the gamblers who identified that they had experienced harms from their own gambling had high PGSI scores.

“Oh, very frustrating when nothing happens you just keep putting money in, you get nothing in return and that's very frustrating to you. And I think asking myself why do I

keep coming back [to the casino] but then I keep telling myself that the next time I go [to the casino], I will have a big win, you know". (F, 65+, D/P, Non- Aboriginal, PGSI 8, EGM gambler)

For the following participant gambling had caused multiple serious issues:

"It was awful. I lost everything. I lost my partner of five years, lost a lot of money...I feel depressed and not confident at all". (M, 25-34, Rest of NT, Non- Aboriginal, PGSI 9, EGM gambler)

There were also participants who were thoughtful about their gambling and thus had not faced negative consequences. Ironically, one of such participant scored three on the PGSI:

"No not really. I've been I guess considerate enough when I do gamble I give myself a budget. I very seldom exceed it". (M, 55-64, D/P, Non- Aboriginal, PGSI 3, other betting)

"No. I just put a hundred dollars in my pocket and go [to the casino]. I don't keep any extra money with me, so if I win, I come back, if I lose I don't have any more money for playing". (M, 25-34, Rest of NT, Non- Aboriginal, PGSI 8, other betting)

4.3 Negative impacts experienced from others' gambling

Participants from the affected others group were asked about the relationship they had with the person whose gambling had affected them. The majority were affected by their spouse's gambling (n=5), followed by a parent (n=3), child (n=1), friend (n=1), and a relatives' gambling (n=1).

Participants reported having experienced multiple harms from others' gambling. The impact ranged from the struggle with finances, mental exhaustion, and difficulty in managing relationships, with varying degrees of severity. For some participants, the suffering was ongoing. For example, for the following participant, it started when she was young, and she was still suffering from the negative impacts from her mother's gambling. As well as affecting her and her family financially, it had social consequences to her:

"So, I'm 49 years old now. When I was 20 so this is nearly 30 years ago, and it still affects me now because it's still ongoing. I gave my mother all of my pay one day to pay the rent and do shopping. And when I returned home after work that day there was no shopping no food in the house and the rent hadn't been paid. So, we were nearly kicked out of our home Housing Commission home and we had to go to a relative's place to have dinner that night until I got some more money to keep on buying until the next payday. I didn't go out like I was always, I just wanted to stay home because I didn't have the money to spend anyway, because all my money was gone. So, it affected me that way where I couldn't go out and then I started saying to her [mother] that I didn't have any money because I didn't want to give her any money. So, I would tell her that I used it on something else". (F, 45-54, D/P, Aboriginal, affected others)

In other cases, gambling was done at levels where it had serious implications to the relationships:

"It's my nephew. He started [gambling] when he was 12, now he is 24, so he gambled half of his life. Basically, it was always money. Money money money [sic]. And threatening at times for money. I like to walk away but I haven't. I'd like. Yeah. I feel like [walk away] when he stands by me just for money. I'm just an idiot putting up with him. He has nearly burned every bridge he had, his biological family don't want them anymore, part of what happened is because of his gambling". (M, 55-64, D/P, Non-Aboriginal, affected others)

There were instances where gambling had put minor stress on the relationships with spouse and children, usually in the forms of frustration and overstretching of the finances:

"It causes me frustration. We [my husband and I] are trying to make it like control our family budget. And whilst it's not huge amounts it still it still has an impact on my stress. It has affected our relationship to a minor degree. And just you know conflicts and discussions that I guess get a little more of an argument rather than a discussion. And and [sic] then [it] has a negative impact or overflow onto our children. They don't like hearing us argue that if it starts off as a discussion and then can quickly become into a bit more of an argument. So, voices have been raised but no physical violence. Whilst it is part of our family income, they're not they're not [sic] amounts that that [sic] would affect my ability to feed my children or pay my mortgage or my other bills. Just leaves us with less money for other sort of forms of entertainment". (F, 35-44, Alice Springs, Aboriginal, affected others)

In some cases, gamblers were dishonest with their family about their gambling. In addition to creating financial tension and relationship issues, it had interfered with the mental wellbeing of the family members:

"Being the mother and having him live at home he would go to work and I believed he was earning income. But in reality, he was spending as much money gambling as he was earning. So, he really never had any money. So consequently, I was being said all my money's run out. You'll have to give me money so I can go buy some beers or I can buy the takeaway. I'm going with my friends, how about some money I'm going. So, what I believed was that and then he would use other excuses such as I didn't get enough hours this week. And I actually didn't understand the full extent of the issue until one day I saw the bank statements and I could see him drawing the money out in six minutes slots all transferred to the phone banking and pretty bad. There was some emotional tension due to the financial situation huh. And then there's probably been a little more going. It led to trust issues as well, so it was very taxing actually overall". (F, 55-64, D/P, Non-Aboriginal, affected others)

Apart from affecting families, gambling had also negatively impacted friendships and relationships at work:

"He [best friend] used to waste his pay every fortnight straight into the pokies, horses [racing], and dogs [racing]. In the end I just told him to please don't come near my door anymore because I'm not going to give you any money. if your kids or your wife want to come over, I'll give them what I've got to spare. But you're not been given

any money. Well it affected our relationship because I didn't want anything to do with him anymore. His wife and the kids ended up going into women's shelters because they had no way to live. I felt sorry for them because I really wanted to give them money so they can go and get a unit. But I knew that if they get a unit he'll be straight back there. He started asking for advance payment at work. And once I explained to his boss why he was doing it because his boss at that time was a friend of mine. And as far as his work colleagues go, they've all shunned him because he started asking them for money". (M, 65+, D/P, Non-Aboriginal, affected others)

Participants from CALD backgrounds reported that they ended up gambling themselves or they mentioned that their family members resorted to gambling, as a response to boredom and stress. The following female participant described her experience of her husband's gambling:

"We moved here to Australia, my husband and me only. We really don't have friends and family and the likes. And we both are working and then so when we get some money we save it for studies and for the future. But what he does is, when he sees some money in his bank account, he uses that money on gambling and he loses it all the time. Being in a different country with no family support and having arguments with him is mentally very taxing and him losing money on gambling all the time is financially very draining". (F, 35-44, D/P, Non-Aboriginal, affected others)

Intriguingly, none of the gamblers reported others having been affected by their gambling. However, a few of them with PGSI scores in the moderate risk range refused to or talked around answering this question:

"I don't personally think it affected any of my family in that regard. It's not like I disregarded my obligation to family and partner stuff while I was married nothing like that". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM gambler)

"I would say no one is affected by my gambling because I live alone and I have lived alone for more than ten years". (M, 65+, Rest of NT, Non-Aboriginal, PGSI 4, other betting)

"No, I don't think my gambling has affected anyone. My wife doesn't like it. but It's not to the point where I mean she just thinks it's pointless. But it doesn't cause any rift in our relationship or anything along those lines. I think [that's] because we're not spending a huge amount of money on it anymore. She doesn't really like me going to the casino but I think it has got more to do with the beer than it has to be with gambling". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

4.4 Alcohol and other drug use

About one in two gamblers reported having used alcohol or other drugs, with the former being much more popular. Use of alcohol or other drugs did not appear to be linked to high PGSI scores in most cases.

"Oh, I don't smoke. I have a drink this now and then. I used to be a big drinker but ever since I turned 50, I have a drink now and then only for special occasions like weddings, funerals, birthdays, that's all". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

Some of the drug use reported was simply listing use of alcohol or cigarettes and attempts to quit or limit the use:

"I smoke cigarettes and was drinking a fair bit but not now". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

"I quit smoking just over a year ago. I do use nicotine patch though". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, EGM gambler)

"No, I don't smoke but I do drink have a drink in a while. I drink sporadically. I do have a wine or a beer. But I don't think I'm a big drinker". (M, 55-64, D/P, Aboriginal, PGSI 2, other betting)

Chapter 5: Help-seeking and wanting help

This chapter describes participants' experiences with and opinions about help-seeking (such as from where and in what circumstances) for gambling issues.

5.1 Accessing help for gambling harms

Gamblers were asked to describe their experience with accessing help for gambling harms or issues they had experienced from their own gambling. The majority were aware of the existing support and services. However, many of them had not sought help or accessed services for gambling harms or issues.

The below participant had not sought support for his gambling. However, he was aware of the available resources through his family:

"No, I've managed to pull myself up when I thought it was getting silly. But I'm aware of you know these anonymous hotlines. You can ring, those various websites so you can engage with. Yeah. If you know if you don't want to deal with a human being face to face or you can go face to face. There's thankfully for me because my father was a bad gambler. And you know I was able to observe that as I was growing up. I have. Yes, I have gambled and I still gamble in the ways I described. But I keep it under pretty tight control". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

One person described his experience with the support service he had used in the past as to how it had helped him to control his gambling in the long-term:

"Because yeah, I've been through a couple of sessions, I had about four and six sessions with a lady [counsellor]. The sessions went for about an hour. We were talking about how to better myself, what should I do, what shouldn't I do. That's how we went about it. And that was helpful. And it taught me a little bit. Yeah, and that's how I do my gambling now. I don't gamble as much now as what I did." (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

Participants who were affected by others' gambling were asked whether they sought or offered help to those whose gambling affected them. The question generated varied responses. Some of them had wanted to offer help but could not because the gambler had never admitted issues with their gambling:

"No, never seek out [sic] any help for her [mother]. She always said that it wouldn't happen again, and 30 years later still till today I still help her now and again financially [sic] but she's still gambling. I always thought about it and you know picked up information you know being in my profession, I've picked up information along the way and thought about it. I think I did once or twice maybe slipped cards [self-help cards] into her purse and she got angry and upset with me for doing that. So, I never did it again". (F, 45-54, D/P, Aboriginal, affected others)

"Even if I did he [son] wouldn't take it. He doesn't need help any sort of help that you offer for people if they're not willing to go themselves. Look I actually wanted him to go to my mindset coach that I use and get some adjustment to his attitude and his

mindset and see if he would improve. But you know I wasn't fully aware of how bad it was. It's like he would talk about betting on the horses and he would only talk about when he wins, won't talk about the losses". (F, 55-64, D/P, Non-Aboriginal, affected others)

In other cases, help was offered but was not accepted:

"Yes. We went to AA [Alcohol Anonymous] and then the Gamblers Anonymous [sessions]. I spoke to Lifeline. He [best friend] was in the room and was told to ask questions, [but] he didn't want to do anything because he couldn't understand [sic] he had a problem". (M, 65+, D/P, Non-Aboriginal, affected others)

5.2 Wanting help or support

When asked whether they had ever wanted help or support for any gambling harms or issues, the majority of the participants responded in negative. The most popular reasons for not wanting or seeking help were 1) they believed that they could deal with their problems themselves and 2) they thought that their gambling was not bad enough to seek help:

"I wanted to but I never did. Cause I wanted to keep it all private to myself". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

"No, not at the moment. I'm not that bad. Yes, I know later on [sic] I want to stop. I know what my limits are". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

The below participant was pleased with the kind of support he had received; however, wished he could get more help:

"I could've got more sessions with this lady. She said after six sessions, there was nothing more she could help me with, but if she would ask me to come back, I would and talk about a bit more about my issue because that [the sessions] was helpful." (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

One participant from CALD background wanted to seek help for her husband's gambling issues, but being new to the country, she was not aware of the available support services. Moreover, she was hesitant to seek help because of the lack of awareness and understanding of western concepts of counselling and treatment:

"Being new to the country, I don't know where to get help [from]. I also don't know how it works here, because, like we are from a different culture, so these things may be different here, you know." (F, 35-44, D/P, Non-Aboriginal, affected others)

5.3 When is it appropriate to seek help?

Participants were tapped into describing their opinions on how bad would things need to get before they would seek help for gambling issues. Severe financial impacts were mentioned as the major threshold for seeking help. However, seeking help in a preventive manner was rarely discussed in the interviews:

“Well it depends on how much you can afford to gamble, really isn't it? If you can gamble fifty dollars a week and it doesn't make a big difference to your lifestyle, that's fine. But if you're gambling five hundred dollars a week, you're going to miss out on things. You're not going to register your new car or you're going to not pay bills. And that means you're going to have problems. And you know you've got to know when to stop and seek help”. (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

“Well for me it was noticing that we were struggling to pay the bills and that bank account was empty and it should have had money in it because I'd only just been paid, I get paid monthly, so my wage goes in and you notice it in the bank accounts you know [sic]. So, I noticed that there wasn't enough to pay certain bills. Like I said my wife was spending two or three hours going to get a loaf of bread or a bottle of milk or something. So, for me it was pretty obvious that she needed some sort of help with her gambling issues”. (M, 35-44, D/P, Non-Aboriginal, affected others)

Financial impacts leading to strained relationships and poor mental health were indicative of seeking help. However, most of the participants noted that seeking help was unlikely to happen until consequences were severe:

“When it hits rock bottom, I guess. But when they're [gamblers] starting to ask money from other people and loaning money and borrowing money just to go down [to the venues to gamble] they try and win back money that they've lost. That's the time and you probably need to step in and have a chat with someone about their gambling. When with kids going hungry, no food in the house and that causes a lot of burden, and sometimes strains relationships as well. That's definitely the time to seek help”. (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

“I think that before you lose everything. With that said it really does turn into psychological issues”. (F, 45-54, Alice Springs, Aboriginal, affected others)

“Like if it's giving a lot of stress, I mean if all the time I'm thinking about the same thing again, it's time to speak up and look for a remedy”. (F, 35-44, D/P, Non-Aboriginal, affected others)

These last comments highlight how co-morbidities such as shame and psychological distress discussed in Chapter 5 accompany financial stress, which stems directly from gambling.

Chapter 6: Self-help strategies to regulate gambling

This chapter reports on strategies gamblers had used to regulate their gambling. Nearly all who had used self-help strategies reported improvement in their gambling behaviour.

Strategies were commonly used to limit rather than stop gambling. This primarily included taking set amounts of cash to venues, setting limits on spending, and creating barriers to accessing money or limits on gambling expenditure:

“Yeah, just self-imposed amounts. You know like with the horses that you might know more than a certain amount of them you know not more than 50 dollars in an afternoon. With the weekly lotto which again is gambling, I know it's not a form of gambling, it is gambling. Just the basic ticket. And with the scratchies, just you know maximum 20 dollars or so and managed to hit those targets, so you know when you're gambling you are tempted. You know you try to win it back. Well, but I think setting those financial limits. And not going over them weekly is the key”. (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

“When I say that I don't have family btw, I do have mother and father but I don't see them. So, I wouldn't approach them. I would approach nobody other than as I've done recently is self-control and limit my visiting to the pub and I have gone down to about fifty to sixty dollars for gambling. And it really helped me to regulate my gambling”. (M, 45-54, D/P, Non-Aboriginal, PGSI 4, other betting)

“Yeah, I don't carry a lot of money in my pocket when I go to the casino. I switch off my phone. I put all my cards in my bag and just carry a hundred dollars”. (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

Other strategies that helped people to control their gambling were self-exclusion from venues and online betting services, and using lines of credit. Although these strategies were known to many, only a few had reported using them:

“And maybe you need to self-exclude or ask them the venues to ban you. I just sort of I have already did once this week already. I don't feel like it to go again. I keep busy cooking dinner instead of going to the club”. (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

Alternative activities such as volunteering and socialising had also helped people to consciously distract their mind from gambling:

“So, you join some volunteer thing. It's active [sic] activate your mind to something else. That's the key I guess. Yeah, I'd be eager to do something else rather than gambling. That's why you know I want to play sport. I didn't gamble at all because you know my mind was on other things. So, I didn't gamble as much in the last three months because I've moved from Darwin to South Australia. And even even [sic] though members of my family, some of them gamble, but you know I do have other things to do, so, I'm not too bad while I'm here. The key is to have something else to do. Whether it's a personal project or intermingling with other people. Yeah, while you're doing something else you're not thinking about it. It's only when you've been on too long or if you sit in your room too long and you know you're going to do

something. So, what you do is you just go down the pub. At least I'm not drinking and gambling". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

Willpower also came through as one of the facilitators of abstaining oneself from gambling; however, in only a few instances:

"No, no, to me it was just like giving up smoking or giving up drinking. You just gotta [sic] be strong and sort of assure yourself that you ain't gonna [sic] do it. Just gotta [sic] just say no to yourself. You know what I tell myself that I am not gonna [sic] go out this week. I just got to live in the reality. I just have reduced it [gambling] quite a bit I haven't I haven't [sic] stopped altogether, but it helps". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM gambler)

Involving the support of other people to cut down on gambling was also discussed:

"Yeah I go out and do things that are different you know. I go out and be with people, talk to people, sit down and spend the day somewhere. It's when your mind is on it, you only think about it like putting in Twenty dollars and thinking about a eighty thousand dollar jackpot. But it's all in the head. You just you think you're going to do that and then you go down and you end up losing it. But you walk out worse than you did when you walked in. People go in and chase money you know. Can you chase it? No, you can't chase it". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

Chapter 7: Who is appropriate for gamblers to approach to seek help?

This chapter presents participants' views about venues, personal contacts, and different professional services in terms of how appropriate and helpful they might be for gamblers to approach about their gambling issues.

7.1 Within formal services

By counsellors

When asked whether they thought it would be appropriate for gamblers to approach a counsellor (counselling psychologist, financial counsellor, etc.) for gambling issues, many participants responded in the affirmative:

"I would approach a counsellor instead of talking to my family because they've got their own problems. If you understand that you've got a problem and you're talking about it, it's better than not talking about it". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

However, getting people to attend such a service in the first place was a major issue described by the participants:

"Maybe a psychological counsellor or financial services could help gamblers if they want to seek help. If someone goes out of their way to actually call up [the services], they have come to the realisation that they've got a problem and they've gone to the trouble of seeking help which is positive. Yeah, you've got to get that person to make that phone call in the first place". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM gambler)

"Well before they get to that point they will consider they don't have a problem. So, but, when they do reach that point where they feel that they need help, I think the best people are those skilled in dealing with these issues. I mean you can't sort of manage this by yourself, so, we need to consult other professionals and counsellors. But counsellors need to confide into the gamblers that they can actually help them, otherwise they won't engage". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

Expenses associated with accessing services was described as a barrier for seeking professional help:

"Well... yeah, I guess psychologists or financial counsellors or someone in that sort of field. I suppose it depends on the level of your problem and whether you feel you need to access services. Because a lot of time, a lot of financial involvement is there. Unfortunately, we couldn't really afford most of these. Like I said we're certainly not rolling in money at the moment, more like in terms of paying for some of these services. We can't afford it. And in terms of getting them free, lot of them you get a very initial consultation and a little bit of guidance but anything more they require a

payment or part payment and you just kind of go, Oh! I can't afford it". (M, 35-44, D/P, Non-Aboriginal, affected others)

By general practitioners (GPs)

Compared with counselling psychologists and financial counsellors, GPs appeared to have a much lesser potential for gamblers to approach for help-seeking:

"Oh, I think I think [sic] counsellors would be, GP not so much, but a lot of counselling service like a personal health service or something along those lines I think would probably be a great place to start". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"The services would, like I said Amity would or maybe a financial counsellor. But I think GPs can't, they don't specialise in gambling and you know to help with addictive behaviour like gambling you need someone that deals with this". (F, 18-24, D/P, Non-Aboriginal, affected others)

Participants also suggested that GPs could be a possible point of referral to other, more specific services:

"I don't think GPs could help in this case because they are not trained to do it, but they can tell you where to go for help". (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"We have a long-term GP we see and we we [sic] do discuss quite a bit of you know bits and pieces within. More so for initial support and for guidance on where to go next. He is very insightful on a lot of that sort of thing. So, yeah, I guess we're pretty lucky in that circumstance". (M, 35-44, D/P, Non-Aboriginal, affected others)

By welfare services

Welfare services such as Salvation Army and Centrelink were discussed in a positive light in the context of help-seeking; however, not many were aware of these services:

"Yeah. Well look I personally would be thinking of Lifeline and Salvation Army that would be the services that I would consider during the moment of crisis". (M, 45-54, D/P, Non-Aboriginal, PGSI 4, other betting)

"So, there's a couple places you can go get help like Salvation Army and then one can go to Gamblers Anonymous to try and get help. They will help you understand gambling is not good for you". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

"I think Centrelink offers a bit of help and counselling. The people there are quite good with youth unemployment and stuff." (F, 55-64, D/P, Non-Aboriginal, affected others)

Others

For some participants, attending services in person was difficult due to the shame and stigma associated with gambling, and thus they preferred seeking help from services such as Gamblers Anonymous (GA) and/or a phone chat, to maintain the anonymity:

“Gamblers Anonymous or Amity or you know one of the service providers that helps with people with gambling problems. Especially, Gamblers Anonymous, because for some people it’s hard to talk face-to-face with someone about it. But I think unless they want to stop gambling, it’s very hard and they won’t seek out anybody I think”. (F, 45-54, D/P, Aboriginal, affected others)

“Like we have Alcohol Anonymous for people with alcohol problems, where they can talk about their issues but no one can see them, and there is no shame or no one call you bad, likewise I would go to Gamblers Anonymous because of the anonymity. Or I would like to talk someone on phone like I’m talking to you [the interviewer] right now.” (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

“So, there’s a couple places you can go get help like Salvation Army and then one can go to Gamblers Anonymous to try and get help and support from other gamblers. They will help you understand gambling is not good for you”. (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

Some also stressed the involvement of other gamblers and/or people in providing support and help:

“I reckon again if you go with someone, it will really be helpful in this sense that if you keep on losing and that person understands their situation then they’ll stop you. Otherwise you will keep putting in the money. So, it’s good to have a company and it could be helpful”. (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

One participant stressed the importance of health professionals specialised in the addiction space, for help-seeking:

“But I believe that there should be specialty services so that if someone was doing their degree in public health or primary health care, for example, they might be able to specialise in addiction or and part of that big gambling [sic]. So, a person that is capable of discussing the problem at that level would be good. But sometimes in order to get a person to that type of a professional, you need or should be going through other processes of court or Community Justice Centre”. (F, 45-54, Alice Springs, Aboriginal, affected others)

7.2 By personal contacts

By family and partners

Throughout the interviews, the role of the family was discussed in a positive light for help-seeking:

"I believe that family would definitely be helpful because it's the first line of defence, but not [work] colleague because if you're at work, you don't really want your whole workplace know that you're a gambler". (F, 18-24, D/P, Non-Aboriginal, affected others)

Trust and comfort appeared as the main drivers of approaching family members for help:

"Look I think the first people I'll go to are those who I trust and it would be someone in their family. I think the family then needs to support the gambler to get professional help". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

"If someone is having gambling problems or issues for their gambling so it's something I think family and friends could help [sic]. If it was a family member...my brother or someone like that or sister [sic] I probably sit down and have a word with them, yes, but not with someone else". (M, 65+, Rest of NT, Non-Aboriginal, PGSI 4, other betting)

Approaching partners for help was also discussed; however, to a lesser extent, and mixed responses were received:

"Yeah. It depends on your support network around you I suppose. So, but to me you know because if I if I [sic] had a problem with gambling and I really wanted to do something about it then by all means I I [sic] don't think I'd go to my wife because she doesn't like it [gambling]. But It's not to the point where I mean she just thinks it's pointless. But you know there would be friends and family around me that I could sit with and speak to about it". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"I think more partner because they will be with them all the time you know [sic]. I think a partner would be better than a family member". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

The role of family was acknowledged; however, a lack of self-realisation of gambling issues in the first place, was described as a barrier to reach out to family. Bad relationship with family appeared as another barrier to seek help:

"Maybe other family members if the gambler thinks it's a problem which often I think in my experience it's not. They don't actually think that they have a problem. In my experience with my husband if he gambles at the casino and if he has a big win, he just wants to gamble more. He sees it just a way to make money gamble but he doesn't realise the risk of losing money that he has just won". (F, 35-44, Alice Springs, Aboriginal, affected others)

"I think gamblers don't admit to anybody how much they gamble, so friends and family probably don't know until they're finally hit the rock bottom. Well I don't have family or partner. When I say that I don't have family btw, I do have mother and father but I don't see them. So, I wouldn't approach them". (M, 45-54, D/P, Non-Aboriginal, PGSI 4, other betting)

Through friends

After family, friends were the other most likely avenues for gamblers to discuss gambling problems:

"It's definitely appropriate for gamblers to reach out to friends or their work colleagues or whoever they can, to seek help. That step is going to take you to getting help to tell people about it". (M, 25-34, Rest of NT, Non-Aboriginal, affected others)

"A friend is a good person or your partner is a good person to let you know that you are going over a bit and approach for help". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

Shame and embarrassment were discussed as barriers to approaching friends in some cases. In one such instance, the spouse was the preferred choice:

"So, with gambling and I guess it might be the same with alcohol, I think he [son] was very embarrassed about the fact that he'd got himself into so much in deep trouble and he didn't confide in his friends at all". (M, 55-64, D/P, Non-Aboriginal, affected others)

"In terms of friendships or whatever it was it's it's [sic] not something that we've really discussed with too many people because I think she's [wife] dealing with the you know [sic] she's very embarrassed and very ashamed, she's admitted to it and she keeps talking to me about it". (M, 35-44, D/P, Non-Aboriginal, affected others)

By work colleagues

Discussing gambling-related issues with work colleagues was considered appropriate by a few participants; however, to a much lesser extent than family and friends:

"It's definitely appropriate for gamblers to reach out to friends or their work colleagues or whoever they can, to seek help. That step is going to take you to getting help to tell people about it". (M, 25-34, Rest of NT, Non-Aboriginal, affected others)

"For me I did talk to one of my work colleagues about it [wife's gambling issue] in a very general sort of manner. She's pretty much only told I think three or four people about it because she's very embarrassed and very ashamed, even now, more than 12 months on [sic]. For me it was good just to kind of see someone else's opinion. The person I talked to I wouldn't say they had a gambling problem but they put a few bets here or there and they go to the pokies every few weeks and I thought maybe they'd have a bit of a different perspective on things. That was kind of helpful". (M, 35-44, D/P, Non-Aboriginal, affected others)

One participant specifically described the need to destigmatise gambling so that gamblers can readily approach friends and work colleagues for help:

"I do think it is appropriate for gamblers to approach friends or maybe work colleagues to seek help if they see that they have problem gambling. Yeah, I think that there should be enough information out there for a friend or a colleague to be able to refer a friend or colleague to a gambling service. But it is not something that I believe in. It should be destigmatised to a point where a colleague or friend can refer to a gambling organisation but it doesn't have to be anybody or everybody's business". (F, 45-54, Alice Springs, Aboriginal, affected others)

"I believe that family would definitely be helpful because it's the first line of defence, but not [work] colleague because if you're at work you don't really want your whole workplace knowing that you're a gambler". (F, 18-24, D/P, Non-Aboriginal, affected others)

7.3 In venues

A few participants were also aware of the assistance available at venues (such as gambling helplines and posters put up at the back doors of the toilets) that could be accessed by gamblers to get help for their gambling issues:

"The venues have always got tickets up there saying If you find gambling is a problem then you need to go to gambling anonymous. They have got stickers and posters up there saying if you think gambling is getting too much or financially a burden you need to ring gamblers anonymous or something like that and they've got a number on that you gotta [sic] ring. But there's no one at the venue you can talk to about your [gambling] issues". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

"Oh, there are little brochures available at the venues that say, you know, if you want to have help with your gambling problem, call us. Most gambling venues I've been to have got little self-help cards. So, if you have a gambling problem, those little cards you can pick up". (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

"Well there are services available on every pokie machine you've got a number to call if you are having trouble with gambling. I can't I can't [sic] tell you the number because I've never used that". (M, 65+, Rest of NT, Non-Aboriginal, PGSI 4, other betting)

"You know there's lots of posters and signs in the gambling room saying - if you gamble too much, seek help. I think honestly being on the back of a toilet door is more effective because they've got to go to the toilet at some point and having the anti-gambling signs is more effective on the back of a toilet door than in the pokies room [sic]". (F, 18-24, D/P, Non-Aboriginal, affected others)

7.4 Others

Participants also described other resources that were available for gamblers to access for gambling issues. The resources primarily included web-based applications that help people to monitor their gambling, and online and offline (e.g., television) advertisements containing information on gambling helplines:

"There's lots of web apps and mobile apps that you can use now to monitor and control [gambling], provided you willing to do it". (F, 55-64, D/P, Non-Aboriginal, affected others)

"I guess since all those gambling helplines that pops up on TV or on phone or you can probably Google gambling helplines or something for gamblers. I guess on the Internet these days you can get any information". (F, 35-44, Alice Springs, Aboriginal, affected others)

"Well I think it's not hard for people to go to a Web site or a Web chats and those sorts of things because they don't know who they're talking to. You know what I mean it puts an anonymous thing [sic]" (F, 55-64, D/P, Non-Aboriginal, affected others).

Online assistance was preferred over other sources, especially where there were issues of embarrassment and shame associated with gambling:

"Well I think they do advertise pretty well. The gambling helpline. And if one gets to that point where it really is drastic I would imagine that would be the first point of call. You could always do that because you can stay anonymous if you wish to try things it's a good thing". (F, 65+, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"So, had I not done that I probably would have kept going. But in general terms it's very hard because people don't want to talk to someone even having a phone server you're still talking to someone. Perhaps Internet where they can remain anonymous. Like I said my wife she underwent a lot of shame and felt very very embarrassed for quite a while after it so I doubt she'd want to have identified herself publicly in any way. So, I guess some anonymous sort of service would probably be a way forward". (M, 35-44, D/P, Non-Aboriginal, affected others)

Chapter 8: The best approach

This chapter presents participants' views about how to best approach someone about their gambling, 'so things don't get so bad'. They were asked to describe who, what, and when interventions might best help people experiencing harm from their own gambling.

8.1 Who can intervene?

The interviews tapped into participants' opinions about who they thought would be best placed to help gamblers experiencing harms from their own gambling. The purpose of this question was to gather information on the appropriateness of personal contacts, formal services, and venues to approach gamblers about gambling.

8.1.1 Personal contacts

Family and partners

Throughout the interviews, family (excluding partners) was overwhelmingly the preferred choice for approaching and talking to gamblers about their gambling:

"If it was a family member...my brother or someone like that or sister [sic] I probably sit down and have a word with them, yes, but not with someone else". (M, 65+, Rest of NT, Non-Aboriginal, PGSI 4, other betting)

However, intervening was discussed when the harms were evident; intervening in a preventive manner was rarely discussed:

"He [son] was pretty secretive about it and I think that's the problem with most of the gamblers. He only confided in me when he got into trouble. He eventually came to me and it turns out he didn't do it soon enough because he thought he could get his way out of the problem but not when he realised that it was in deep. And it was you know causing issues, financial issues for him and stress and emotions and things like that to us". (M, 55-64, D/P, Non-Aboriginal, affected others)

A lack of self-realisation of gambling issues in the first place was described as a barrier for the family to intervene and offer help:

"Well, I mean I still tried to talk to her [mother] about it. But you know it's it's [sic] very hard because she still denies that she has a problem. You know as such that it affects all of us. So, last week I lent her 500 dollars because she needed to pay rent. And when I asked her that what had happened to her pension money, she said that she you know [sic] she made some excuse that Centrelink had messed around with her payday, so she didn't get paid. I know it's not true but I still give her the money because I know without it you know [sic] she's going to struggle". (F, 45-54, D/P, Aboriginal, affected others)

"I think they are probably the ones, the family, who gets put under the stress the most if you've got a family member doing it [gambling] and yeah it's sort of a frustrating thing. But the family can't help unless they [gamblers] want to seek help and go through the help process, it's really tough, you know. Yeah, it can take really long to make someone realise that their gambling is an issue for the family and they really need to get help, you know". (M, 25-34, Rest of NT, Non-Aboriginal, affected others)

In a few cases, gamblers appeared to be unwilling for family to intervene:

"Maybe a close family member to help them with their finances. But I don't know if the person is willing to let someone help with their finances and keep their money secure so, they [gamblers] can't have easy access to it. Mmmm...maybe that would be helpful". (F, 35-44, Alice Springs, Aboriginal, affected others)

However, some positive lived experiences were also shared:

"Like I said I was very lucky that we've got quite a good relationship and I picked up on what was going on. So, had I not done that, it probably would have kept going. We talked about it, we dealt with it and since then pretty much she's [wife] not gambled much, she has been doing it with very limited amounts of money". (M, 35-44, D/P, Non-Aboriginal, affected others)

Confusion about the role of family members was also discussed:

"So, family should be involved but if there is an existing addiction problem in the family, then who's going to help who?". (F, 35-44, Alice Springs, Aboriginal, affected others)

Shame associated with gambling had caused gamblers to hide their gambling issues from family and thus was described as a barrier for family members to intervene and offer support:

I tried to tell his [husband] family about the [gambling] issue. I tried to tell his sister as well, but he stopped me. He didn't want me to tell his family because he had a very positive social image. I just told his sister that he was giving me this tension and she spoke with him and then he said to her that I was just making a fool of him. Because back home he never did such things, he was very good, so, she also believed him and asked me not to contact her again about his gambling problem". (F, 35-44, D/P, Non-Aboriginal, affected others)

"So, once he [son] came to me then I wanted to let his mom know confidentially [about his gambling issues] but knowing he didn't want that either, he didn't want anyone to know and put us in a very difficult situation. So, I let her know, of course, as his mother but he didn't know that I'd done and he still doesn't know it but I did. His mother and I put our heads together and, you know, we tried to connect him with some help and support apart from us". (M, 55-64, D/P, Non-Aboriginal, affected others)

Compared with other family members, the appropriateness of partners intervening for help was described by only two participants:

"I think more partner [sic] because they will be with them [gamblers] all the time you know. Those are the ones that can sort of say hey your gambling is causing us trouble and now you've to decide if you want to go and see someone about it. Yeah, I think a partner would be better than a family member". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

"A friend is a good person or your partner is a good person to let you know that you are going over a bit and approach for help". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

In a very few instances, participants emphasised the importance of strategies family members need to develop before becoming involved:

"I think they'd have to be really strong to be to be able to encourage that person to get help, it [the strategies] has to be something effective if they're willing to speak up to the person that has a gambling problem. I think some people kind of just go along with it rather than trying to help them". (F, 35-44, Alice Springs, Aboriginal, affected others)

Friends and work colleagues

Friends were the second most preferred choice for approaching and talking to people about their gambling. However, none of the participants had discussed the role of work colleagues in this context:

"A friend is a good person or your partner is a good person to let you know that you are going over a bit and approach for help". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

Closeness was described as a common reason for being open to friends intervening:

"It just needs a friend really to offer you an alternative. You know like what are you doing this weekend? Let's go do this and then you've got something to look forward to. I'm not a bad person. Everyone thinks they need to do their own things and they don't involve me". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

"That could be a good friend, a good friend might be able to do that, like you know saying that you are gambling a bit too much you. We only just started gambling and we thought it was fun. And now you're getting in a bit too serious. I think a friend would be best for that. Yeah". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, other betting)

One participant described both the positive impacts and potential negative consequences of friends intervening:

"Yeah, friends and family. I guess the people I have a good relationship with, I can intervene without worrying too much about the relationship ending or not getting such and such result. But I guess it can sometimes affect the relationship between people when you do point it out. If a person doesn't agree with you or doesn't like what you would be telling them. But I guess I guess [sic] sometimes you just you just

got [sic] to come out and say it". (M, 25-34, Rest of NT, Non-Aboriginal, affected other)

Suggesting alternative activities to gambling was thought of as a powerful way for friends intervening:

"Their own friends and colleagues might be able to do that for them. You know I don't think personally it would work by tapping people on the shoulder and say you've got a problem. I don't think that would work because people don't like to be told, it has to come from the person themselves". (F, 65+, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"And I believe friends, where if you realise your friend has a gambling problem, one should do more activities with them - invite them out for talking, exercise and all that. And realise that sometimes they gamble because of boredom. Just point them to other situations where problems can occur from their gambling and not just blame them about their gambling. Just bring up a situation where they have to think about what they're doing. It not actually targeted at the person, it's that talking about the situation where they might have seen themselves in and felt bad about it". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

One participant described that friends intervening had worked initially; however, not in the longer-term:

"I don't know. We've had some we have some good friends that told him that he's got a problem. When he's feeling sorry for himself he moved on a bit. He goes over their comments. But once he has gotten the money, he goes and tries his luck again". (M, 55-64, D/P, Non-Aboriginal, affected others)

8.1.2 Formal services and other sources

Participants were asked whether they thought it would be appropriate for formal services (such as counsellors, GPs, and welfare services) to approach gamblers about gambling. Only a few of them deemed them appropriate; however, the comments were not comprehensive enough to make conclusions:

"I'm just thinking outside the grounds...thinking service providers like the Gambling [sic] Anonymous or counsellors for their financial people you know that can tell these people that you know you're really just financially going down and that you are just spending money in a casino and you are gambling your money away. And you've got nothing to eat for the next three days or four days. These sort of examples, you know". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

"Maybe somebody from the Aboriginal medical services can have a conversation with them [gamblers] and can refer to other services to have a conversation. But at the same time speaking to somebody about their gambling problem, which should be confidential, is tricky. There could be people at the centre who can talk to these people and provide information in the form of posters and cards with contact details, that sort". (F, 45-54, D/P, Aboriginal, affected other)

"You know both myself and my other half have tried talking to him [son]. That's probably not the best approach because he goes instantly into defence mode saying I don't do that, I'm doing it, blah blah blah. I think it's only the networks that they form and if you are still at school it might be teachers and those police officers they put in schools". (F, 55-64, D/P, Non-Aboriginal, affected other)

8.1.3 In venues

Participants were asked to describe what they thought about how suitable it was for venue staff to approach or talk to people about their gambling. Some positive comments were received from participants mainly suggesting venues to employ mechanisms wherein the staff could recognise problem gamblers and offer them help:

"I believe venues should be helping people as well. So maybe approaching, having managers approach people with obvious problems. I have seen in the Northern Territory people putting in fifty dollars or one hundred dollars in the machine at a time. I believe the venues if they see someone excessing say five hundred dollars in an hour, they can tell if there is a problem or they are extremely rich but most of the time it is the extreme problem I believe. Say venues could be could be helping the public a little bit more instead of it's being all about the money". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

However, the idea of venues intervening was described as confrontational, by some participants:

"Maybe venues like the casinos and clubs and pubs [sic] might introduce the same rights for the venue staff that they do about responsible service of alcohol, I you know, like if someone's drunk they [staff] can say that they can't drink any more. Similarly, if they see someone that's been sitting on pokie machines for six hours, they can say something like I think you've been on the machines long enough, you should get off now. But then you know like it's my right, you cannot tell me how much I can drink or play. How you would ever go about it. I have to do it by myself [sic]". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM gambler)

To avoid confrontation, some participants suggested potential alternative ways venues could use to help people with their gambling issues:

"I'm not too sure to be honest because being a gambler myself I don't like to be hassled with that. Probably the staff could give you a letter that you can take home and read when you get home and then maybe act on it. But to do it while you're there in the venue I don't think would work. I can imagine if somebody will approach me, I'll say go. You know". (F, 65+, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"The thing always depends on taking opinion of the people and leaving the casino like if they lose money, they [venues] need to tell them [gamblers] what is the option. What is the type of action they can take to help themselves. For example, you should gamble responsibly and just for time pass. You shouldn't depend financially on gambling". (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

However, the idea of venues offering help did not resonate with one participant:

“Actually, in the gambling place, to offer you an alternative, you know, obviously the venue is not going to like it because they're [the venues] going to lose too much money”. (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

8.2 When to intervene?

Participants were asked to reflect on how bad things need to be for someone to say something or intervene. Intervening was discussed when severe financial, emotional, and social consequences of gambling were evident. However, intervening in a preventive manner was rarely discussed.

“When it hits rock bottom, I guess. But when they're [gamblers] starting to ask money from other people and loaning money and borrowing money just to go down [to the venues to gamble] they try and win back money that they've lost. That's the time you probably need to step in and have a chat with someone about their gambling. When kids going hungry, no food in the house and that causes a lot of burden, and sometimes strains relationships as well. That's definitely the time to seek help”. (F, 55-64, D/P, Aboriginal, PGSI 4, other betting)

“When anger starts coming out and frustration and stress really when the anxiety builds up and the stress builds up and I don't know if insulting their family or if anything like that, it should be talked about [sic]”. (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

Powerful terms such as “detrimental”, and phrases such as “lose everything”, “lost house”, and “bank account was empty”, were used by participants to indicate the severity of consequences:

“He [best friend] didn't know when to stop, he used to waste his pay every fortnight straight into the pokies. Well, he lost his house, yeah, he had to sell it off. The money he got, instead of giving some to his missus and the kids, he just went down to the casino. Well that was very very very [sic] serious, he lost over \$300,000. He was like I'm going to the butcher or I'm going out shopping at the Woollies, but what he was doing was going to the casino instead. I said, you need help mate. He sort of started listening, but as soon as I said you need to get financial assistance or financial counselling, he would say he didn't have trouble with finances. I was like I know you do because your wife has rung me saying there was no bread in the fridge. He gets paid six times as much as I do then how come he never got any money. So, in such cases it's good to talk to them but then sometimes if you try and talk to them, you're the worst enemy, you know”. (M, 65+, D/P, Non-Aboriginal, affected other)

“Well for me it was noticing that we were struggling to pay the bills and the bank account was empty and it should have had money in it because I'd only just been paid. So, I noticed that there wasn't enough [money] to pay certain bills. Like I said my wife was spending two or three hours going out to get a loaf of bread or a bottle of milk or something. So, for me it was pretty obvious to identify the issue and took it up with her”. (M, 35-44, D/P, Non-Aboriginal, affected other)

“Well...yeah...Jeez I don't know... It's very hard one. I think that people don't really see issues with themselves. Yeah you know. So, it's very hard to highlight someone that they are actually doing something detrimental to themselves. So, it's about

people, especially if they've got kids you know very aware of anything that the parents are doing that really harm their children." (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"I think that before you lose everything. With that said it really does turn into psychological issues". (F, 45-54, Alice Springs, Non-Aboriginal, affected other)

Affordability of gambling was discussed by one participant. Gambling was seen appropriate where it did not stretch people financially; however, not in other cases:

"Well it depends on how much you can afford to gamble, really isn't it? Yeah. If you can gamble fifty dollars a week and it doesn't make a big difference to your lifestyle, it's fine. But if you're gambling five hundred dollars a week and you're going to miss out on things...you're not going to register your new car or you're going to not pay bills, and that means you're going to have problems. Yeah. And you know you've got to know when to stop and if not, someone needs to tell you to stop". (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

8.3 What to say?

On being asked what they thought might be best for others to say (to intervene) that might encourage gamblers to seek help about their gambling, myriad approaches were suggested by participants.

Some participants had preferred honest and straightforward conversations:

"I guess probably some sort of the truth in a gentle way. It's probably the better way to approach someone but with different individuals, it has to be different. So, yeah, in my circumstance it was... I kind of confronted my wife the same time she admitted to it. So, I think we both knew what was going on and it was just the right time to discuss it. And, yeah, but I try to approach it very carefully perhaps in a way where you can provide yourself with an avenue out if things get a bit heated and you don't want to put yourself in a position where someone might become angry and or whatever". (M, 35-44, D/P, Non-Aboriginal, affected other)

"Like I said before I've got the questions to ask, "do you think you need help with gambling?" or "how are you going with gambling?". Open-ended questions would be the best thing to say because when we go out for dinner or some show and if there is a pokies room, she'll [mother] leave and spend half an hour in the pokies room and when she gets back to the table I ask like Mom do you want to spend time bit long you know you missed the good conversation. And I say, "are you saving for that caravan", "why do you throwing your money away [on pokies]?", you know that kind of stuff. Oh, I even say stuff like you want me to hold your wallet, take some money with you and spend the rest later. And that works quite well". (F, 18-24, D/P, Non-Aboriginal, affected other)

Others preferred the conversations to be straightforward but non-confrontational:

"And I like talking to people about their problems as I would like others to talk to me should I've got a problem [with gambling]. For me, I know my limits, but, you know, other people don't know what their limits are. So, sitting down and talking to them

and saying you know what should be their limits. Leave your card or your bank card at home and stuff like that. Once you've spent that \$50 or \$100, go home, that's the way to stop yourself". (F, 55-64, D/P, Aboriginal, PGSI 4, EGM gambler)

Making the other person realise the issue in the first place and then intervene, was another way suggested by some participants:

"Well it might be difficult particularly if the person doesn't believe they've got a problem. So, the first thing is that the person has got to recognise the issue and then comes the method of negotiation and by negotiation, I mean like someone has to say listen mate, the kids are on the streets and you haven't got any money. So, the first thing is how you go about it if someone wants to hear what you have got to say". (M, 55-64, D/P, Non-Aboriginal, PGSI 3, other betting)

"I'd be like I want to talk to you about gambling and you can tell me whatever you feel and then we can find out a way to get a solution because your gambling is creating problems for us. I would like to explain what I'm going through and then I would encourage him [husband] to speak up so that we can find a mutual understanding and it does not create further problems and differences between us". (F, 35-44, D/P, Non-Aboriginal, affected other)

Others suggested ways wherein they could bring in the gambling issue into the normal conversations:

"I would try and and [sic]bring the conversation around that way you know how are the kids going with food or clothing or do they need new shoes. Why can't you afford it? Maybe you're spending a little bit too much money on you know on the pokie machine. Yeah, something along those lines. You know you need to pick a weakness in their arm on that it can break through their whole bravado about no I don't have a problem. At least when people have already identified that they've got a problem, then it's much easy to find a solution. Once you can get them realise that they have an issue, you know". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"You know some people will listen and then but the others will take it the wrong way. Yeah, you can have arguments if you try to help someone and say look I think you need to go and see this person or that doctor or whatever about the gambling, you know. Some people don't take it in the right way. I mean some people are going to get angry and I fully understand that. So, when you know that person is going to get angry, you have to bring it into a conversation I think. Try to go through the back door and not just go straight up and tell them. Go around the back and say well you know we should spend time like blah blah blah and then you know this a little bit too much or I mean something like that...that sort of idea you know". (M, 45-54, D/P, Non-Aboriginal, PGSI 3, affected other)

Confidential conversations were deemed appropriate where shame was associated with gambling. Also, phone chats were preferred over face-to-face conversations in such cases:

"Whenever people are in a situation where they are literally worried or ashamed, they need to be taken into a private thing and offered helped. They should be told that if they keep on losing money and it's just not about losing money, it's also about

the psychological issues they have from gambling. The conversations should not be told to anyone". (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"Speaking on the phone with you [the interviewer] now is easier for me to talk about gambling. Because you've got particular questions to ask and that's making me think of my own gambling, you know. So that is one thing. Yeah. but as for someone to approach me about it I might get offended". (M, 65+, Rest of NT, Non-Aboriginal, PGSI 4, other betting)

"I think it's easier to do an online discussion with them like you're doing with me now and it might be more appropriate". (F, 45-54, Alice Springs, Aboriginal, affected other)

In cases where anonymity was a concern due to the shame and embarrassment, online interventions were considered better than the conventional approaches:

"In general terms it's very hard because people don't want to talk to someone, for example, even when having a phone conversation, you're still talking to someone. Perhaps Internet where they can remain anonymous, would be really good. Like I said, my wife, she underwent a lot of shame and felt very very [sic] embarrassed for quite a while, so, I doubt she'd want to have identified herself publicly in any way. So, I guess some anonymous sort of service would probably be a way forward". (M, 35-44, D/P, Non-Aboriginal, affected other)

Some participants stressed the need for a level of sensitivity and empathy in the conversations with people experiencing problems:

"I think initially it's got to be support and that was difficult because of the shock and the amounts of money that were involved with my son I mean two lots of 15,000 dollars. You know that's that's [sic] a lot of money. I'm retired but but [sic], of course, I, you know, I helped him. So, I think I had to, you know, bit my tongue and hold back on the, you know the emotion and the anger and and [sic] be as supportive as I possibly could to let him know that at least he was telling someone and that was me. And I guess that's the first step to admitting that you've got a problem". (M, 55-64, D/P, Non-Aboriginal, affected other)

"I think we need to be positive. I mean everybody is negative to him [nephew] about his gambling. I didn't approach him very well. I got really angry on the fact that he doesn't pay his rent, if he doesn't put in for food and electricity; all his money goes on his lifestyle. We've gotten to the stage where I can't talk about it anymore because I was seeing all the negatives. But I think I should've taken a more positive attitude when confronting him". (M, 55-64, D/P, Non-Aboriginal, affected other)

To avoid direct confrontation, one participant preferred formal services to intervene:

"I suppose that's that's [sic] a little bit hard just to know how to start the conversation. Because I mean... I don't know... if you know... like me as a daughter I could if there's a... you know... if there was somebody that I could speak to confidentially and give them... you know... information about my mother and her gambling and then in turn they could call her. But then... you know... she'd say where'd you get my

number from... that sort of stuff. So, I'm not sure about that one actually". (F, 45-54, D/P, Aboriginal, affected other)

Others were willing to intervene; however, they were reluctant because of the fear of strained relationships it might cause:

"I think sometimes you just got to come out and then say what what's there what's what what [sic] you think and gambling is just getting out of control and putting stress on the rest of family or friends or whatever You need to find some help. Stop doing this. Otherwise you're going to lose them. You got to tell them the truth sometimes. I think if it is someone from my immediate family. I would I would [sic] probably step in a lot earlier and say and say [sic] something but it's from my wife's side of the family, so, yeah, it's hard for me to jump in and to not fracture a relationship which could have happened with me". (M, 25-34, Rest of NT, Non-Aboriginal, affected other)

8.4 Measures to minimise harms from gambling

Participants were asked for their views about what they thought venues and government could do to minimise harms from gambling in the NT. The discussions primarily focused on seeking opinions on preventive measures rather than on post-harm interventions.

8.4.1 Venues

The majority of participants strongly advocated for the venues (casinos, clubs, etc.) to train their staff to help them identify problem gamblers and offer them help:

"I think casinos, in particular, should be made more accountable through the law or the legislation, so that security and staff at casinos can recognise who regular patrons are... you know... spending long periods of time. If they're under surveillance, I'm sure they can work out how much money people are putting in the machines and restrict them from playing more, so basically recognising people who have a high degree or a high-risk situation". (F, 35-44, Alice Springs, Aboriginal, affected other)

"I think they [venues] can train people [staff] at the clubs to identify people [gamblers] who come all the time and spend all their money. I think that they should offer them education and alert people as to what the early signs of problem gambling are. Like how do you spend your spare time? What should you be doing? What is a healthy alternative? Has your [account] balance gone down in the last half an hour while you sat there [gambling]? Those sorts of messages. And then suggesting them the alternatives, like go and join the basketball game and play bowls, or go out for a walk". (F, 55-64, D/P, Non-Aboriginal, affected other)

"Casinos, I think need a little bit more regulation although you know they say that they are very strict on patrons in relation to gambling while they're intoxicated and you know looking out for their patrons. I know for a fact that that's not really the case. I've seen people in my group that are truly intoxicated but spending hundreds of dollars and because they are spending so much, they're receiving free drinks. I think

there's many things that can be done in that arena to prevent people from falling into that kind of danger". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"Minimise harms from gambling...mmm... having venues more responsible for problem gamblers. All the venues, you know, you can talk to the bar staff and they'll tell you who's the problem gamblers [sic]. They know who is silly but they're told not to say it. So, the venues should take some responsibility, you know". (M, 25-34, D/P, Non-Aboriginal, PGSI 7, other betting)

Other suggestions included putting up the posters at the venues to make people aware of the gambling-related harms:

"People are going to go the toilets anyway, so, they [the venues] could probably do more advertising like putting up posters at the back of the toilet doors which I think is the most effective place to advertise. No one is going to listen to the responsible gambling advertisements on the TV or the posters that are put up in the pokies room, you know". (F, 18-24, D/P, Non-Aboriginal, affected other)

One participant recommended the provision of a pre-commitment card wherein gamblers could load up to a fixed amount on the card for a day, as a measure to assist them limit their gambling expenditure:

"For example, you're only allowed to spend 100 bucks at one go, so, you go and get some kind of gaming card and get a \$100 credit on that card and then use that on the machine. But then once that's done, it's done. And then you have to wait 24 hours before you can do it again". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

Based on his personal experience, the below participant recommended venues to create a system wherein they might make gamblers aware of their spending which might help them limit their gambling expenditure:

"What I found interesting was I went to Crown Casino once and interestingly enough they actually send me an email stating how much I had bet and how much I had won. I haven't received this kind of information from any other casino. So, I think something like that would be good in that they actually tell you how much you spend and how much you get in return. So, this actually come back to you as in you put some X amount of dollars into a machine and then it's up to you to work out if you could use that money for other things". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, other betting)

8.4.2 Government

Participants strongly recommended for the government to make stricter legislation around gambling. They were also aware of the revenues government, venues, and the gambling industry generated from gambling, and thus were unsure of the actions government might exercise to regulate gambling:

"I think they [revenues from gambling] are necessary evil for the government because of the tax or the revenue that they get out of it. So, it's not in their best interests to provide funding for helpline and counselling because they don't care to

stop people from gambling because they get so much out of it. You know it's a really grey area. You know it's not like smoking where there's you know they provide help to people that smoke if they're going to give up cigarettes but the benefit they get out of not paying it into the health system is so much greater, isn't it?". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"The irony of the whole thing is that the government has introduced measures to solve a problem but they're the ones that allow you to gamble, it's ridiculous. You can bet on horses on Saturdays and Sundays and all night and all around form the world. You can bet in South Africa, you can bet in America. You can bet on you know on all sports. You can bet on bloody hockey in Alaska. You know it's just it's just [sic] the way it's made available. They are backed by the government. It's obviously that there's gambling houses or gambling companies that have the authority to do it, and that authority is backed by government". (M, 55-64, D/P, Non-Aboriginal, PGSI 3, other betting)

The suggestions included capping the daily number of hours of playing and the bet size, and limiting the number of EGMs at the venues:

"I think one way would be the amount of revenue that venues make for every dollar like they pay back 10 cents in every dollar or something. I think it should be almost turned around. That the people making the money should be making significantly less money. I do remember when I think when I first turned 18, you know, the casino had hundreds and hundreds of machines but most local venues only had you know maybe 10 or 20. But now they seem to have a hundred, two hundred machines. So, perhaps minimise the number of machines, minimise the amount of margins venues get, and minimise the amount of bet, so, you know the maximum bet becomes a dollar rather than 10 dollars or so. And like I said minimise the amount you can win". (M, 35-44, D/P, Non-Aboriginal, affected other)

"I wouldn't mind if they [government] scrap them [pokies]. But it's too much revenue from them they'll never ever do it because too much of a cash flow for them and for the venue as well. So, it'll never stop. So, you know like I said and if they can limit how much a person can bet in one go would be probably be the best. But they won't because like I said they don't want to". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

The conversations also included discussions around the potential effectiveness of implementing pre-commitment cards to limit the bet size:

"Some strict policies I think. Some policies can be made like after a certain amount of money you spend on gambling, you can't do anymore. Setting a limit, you know, so that it doesn't cause any financial and mental stress to the gamblers' family. The person can only play up to this limit". (F, 45-54, D/P, Aboriginal, affected other)

"That'd be good if they [government] could limit the amount that you spend on them [pokies] in the venues on a given day and you can use only some kind of gambling card to load the money on and play. So, once you've reached that limit, you can't play anymore and wait 24 hours for the next play. The system should apply throughout the state doesn't matter where you go. If you've reached the limit and want to use the card in the venue they will say oh you've already spent the

maximum amount for the day and you can't spend anymore. You know something like that". (M, 65+, D/P, Non-Aboriginal, PGSI 12, EGM gambler)

This was thought of as an effort towards reducing the amount of gambling and the revenues:

"Reduce the number of machines that are out there. You Know, I think the majority of gambling problems lie in the residential pubs and clubs in the streets where people can just go and put in \$100 or \$200 every now and again. But there's a lot of people doing that. You know, I know, for example, there's one sports club in Darwin that has funded the redevelopment with the proceeds from their pokie machines from last year and are spending hundreds of thousands of dollars on the financial advancement of the club is great. But what's it doing to the community? Reducing the number of machines is a big place to start. Casinos I think they are an entertainment venue. I don't know whether we need lots and lots of pokie machines in there [community venues]". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

"I think you wouldn't be chasing such big jackpots either. I think that's part of the problem with my wife as she lost some money and she tried to win it and she lost some more and lost some more and then her betting got significantly bigger because you don't win on small bets you only win on big bets allegedly, so, you know, reducing the revenue to the owners of the machine I guess would help [sic]". (M, 35-44, D/P, Non-Aboriginal, affected other)

Some participants described the potential effectiveness of limiting the opening hours of the venues in reducing the amount of gambling:

"Yes, definitely, the hours are terrible. I think the gaming rooms open at 8:00 or 9:00 in the morning and then they close at 3:00 a.m. You know they kind of carry on. The longer they are open, the more opportunities for people to sit down. You know just reduce the number of hours that they can operate and the impact will be far more. They are just open all the time". (M, 35-44, D/P, Non-Aboriginal, PGSI 5, other betting)

However, a few thought that this measure might impinge on people's right to freedom:

"No, I strictly don't think so. I think that people should be allowed to do things they want whether it's at 2 o'clock in the morning or 9 o'clock at night. Most clubs are open and they have limited hours and I'm happy enough with the hours to be as they are. I don't think somebody should come to the pub at 8 o'clock and in the evening and discover that the pokie machines are turned off yet the club is still open until 10 o'clock. I think they [gamblers] have a right to be in and do whatever they want at any time". (M, 45-54, D/P, Non-Aboriginal, PGSI 4, other betting)

Adaptation of successful international gambling legislation in the Australian context was also suggested by one participant:

"Well the government could stop and shut down casinos and all that sort of thing. But a bit late now because they're revenue raisers, ain't they? I think in Singapore the local people aren't allowed to go to the casino, they have to pay to go there or something like. So, if that were the case here [in Australia], it might stop people from

going if they had to pay an entry fee. And if they don't allow membership of clubs at casinos because they are an incentive to keep going, it would prevent people to go there". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, EGM gambler)

Participants stressed the need for creating advertisements containing powerful messages about gambling-related harms. For example, the advertisements featuring gamblers who had previously experienced harms from gambling and how they had benefitted from gambling interventions:

"I think government could make advertisements wherein there are messages from gamblers on how it [gambling] has affected their lives and health in terms of stress and stuff like that. So, people get to know that how gambling affects other people in gamblers' lives and not just the person who is actually doing it. These kinds of ads will be much more effective than the regular ads, you know". (F, 35-44, Alice Springs, Aboriginal, affected other)

"The government should produce ads to show the downfalls of gambling or the side of gambling that people don't think about and show the stuff that's corrupting or possibly corrupt and so forth. But once again I think the thing is whether people really pay attention to it like the ads for alcoholics... you know... people look at them [the ads], make fun and get rid of them. They say that I haven't got a problem. But you know they live in denial, they should come to the reality". (M, 55-64, D/P, Non-Aboriginal, PGSI 6, EGM gambler)

Regulating the timing of the advertisements was also discussed:

"So, I think online betting should be treated like alcohol and tobacco. I think my nephew and his girlfriend both do online gambling as well. And I think it is remarkably addictive for them. I think the advertising on TV should be like tobacco and alcohol and should be banned like no advertising before 9 pm. And I think it should be an integrated approach". (M, 55-64, D/P, Non-Aboriginal, affected other)

As a preventive measure, participants also recommended these efforts to be targeted at those in the younger age groups:

"And in terms of education and awareness, I guess targeting school kids is probably the best option, bit like smoking and alcoholism. I tend to drop off a little bit when they start educating at younger kids. So, by the time they get to the age where they can do these things they'll not see them as glamorous. And that's probably another way to make them less glamorous, less shiny, less noisy [sic]". (M, 35-44, D/P, Non-Aboriginal, affected other)

"I think it all begins with education at a very early age in the schools. That's where we learn everything... you know... the negatives. The kids should be told about the negative effects of gambling before they get to know it in the adulthood, like for most other things including alcohol". (M, 55-64, D/P, Aboriginal, PGSI 2, other betting)

Some participants used strong terms such as "lip service" when referring to the existing government efforts:

"I think probably what the government can do is show what has happened to certain people who have had problem gambling and what problems it had caused. Therefore, problem gamblers can relate to what's being said that look I'm not the only one and, yeah, it is an issue. So more just basically education from the government. But the government makes so much money from gambling, you know, it's like the smoking thing. The government does make a lot of money from it and at the end of the day, the government does is what I consider lip service. But then at the end of the day, it's up to the people themselves - they want to help themselves and want to stop gambling". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, EGM gambler)

Others were wary of the effectiveness of the current and future efforts in this context:

"And it's a physical thing. The advertising campaigns whether they are adequate or not, you never know. Even the gambling sites say gamble responsibly and all sort of stuff. It doesn't matter where you are. I mean what's responsible gambling? Seriously. It's irresponsible right from the moment you put money on something". (M, 55-64, D/P, Non-Aboriginal, PGSI 3, other betting)

"Gamblers won't listen. I think it's a waste of money in creating awareness and stuff. People who listen to all this won't go into bad gambling to my knowledge, anyway. Putting up the awareness stuff is a waste of money". (M, 25-34, D/P, Non-Aboriginal, PGSI 6, other betting)

The need for legislation around smoking and alcohol at the venues was also discussed:

"They should get rid of the smoking rooms at the venues. That way people have to go outside to smoke and it will minimise some gambling time. I know you can press the bell and the attendant comes up to serve you alcohol right there [at the machines]. The government can get rid of that or make some kind of legislation where you can't serve someone alcohol when they're playing a gambling machine. That that [sic] would also minimise some gambling time". (F, 18-24, D/P, Non-Aboriginal, affected other)

Participants were asked their opinions about the change in policy that allowed note acceptors to be installed on EGMs located in hotels and clubs, and people to load up to \$1000 in any denomination of note into the EGMs instead of the previous dollar coin system. Most of them described the negative implications of note acceptors in EGMs and advocated for re-introducing the coin system:

"There's a lot of difference between one dollar and one thousand dollars. People who have less money play with like ten dollars, 20 or 30 dollars, but if they earn like thousand dollars they will play with hundred dollars and keep on playing until they lose like ten thousand dollars. If they put like one dollar and lose one dollar, they end up losing like 20-30 dollars, which will make a big difference [to their losses]". (M, 25-34, D/P, Non-Aboriginal, PGSI 8, EGM gambler)

"Yeah, that [the dollar coin system] would slow it down. You know the note acceptors and I've seen people put in 50 after 50 after 50. And for example, if they were to put in 200 coins it would take them some time to reach that dollar amount". (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

"It's interesting because the gambling industry is quite clever, they say you can play one cent but not many people play one cent, maybe pensioners. And what happens is that I have noticed with my partner playing the machine that they seem to win a lot more bigger prizes when they put more money in it. And these days they also have these options like you can play one line or ten lines and you can pay you know one cent per line or pay up to two or three dollars per line and obviously winnings are bigger when you play bigger and it all comes down to relativity of how much you can afford. So, going back to a dollar coins would help". (M, 55-64, D/P, Non-Aboriginal, PGSI 5, EGM gambler)

Participants appeared to be wary of the accessibility of online gambling and the potential associated harms, and thus stressed the need for stronger regulation:

"I think there should be stricter laws made on especially online gambling. I think it's very accessible for people of any age to be able to transfer money from... you know... with internet banking being so accessible these days people being able to transfer money into online accounts. I think this needs to be restricted. Also have stricter licensing on clubs and pubs to limit the number of gaming machines they can have. I think there's too many and it's too accessible here." (F, 35-44, Alice Springs, Aboriginal, affected other)

"Online gambling really needs a bit of regulation and sports betting is a new thing. There doesn't seem to be any sort of governance on online gambling whatsoever. The legislation is not keeping up with the times. If the owner of the website doesn't comply with the law you lock them up or put fines. They [government] can regulate every single aspect of it, if they want to". (M, 55-64, D/P, Non-Aboriginal, PGSI 1, EGM gambler)

However, regulating online gambling was considered 'tricky' by some participants. The need for finding alternative ways of entertainment was also discussed:

"I'm not someone that would support online gambling simply because it's not the right environment for people to be trying to appreciate gaming. Even people who are incapacitated or injured are able to do it. I think we could be doing more for them and giving them better community development rather than giving them the opportunity to do gambling. So, the accessibility should be reduced. There should be certain limits set on how much a person can gamble and there should be a better entertainment instead. But then what all would you regulate, everything can be done through back door, you know". (M, 55-64, D/P, Non-Aboriginal, affected other)

Strong views against online gambling were also expressed:

"They [online gambling] are a lot cheaper than the pokies and should not be allowed at all in Australia". (M, 25-34, Rest of NT, Non-Aboriginal, affected other)

In cases where people were unsure of the ways of discussing the gambling-related issues with gamblers, the necessity for developing resources to help them with the issue was voiced:

"I think I think [sic] I've said at the start that this gambling issue for my mother... it has been 30 years so far. So, hopefully you know if there is some more literature or

education or things that can be done by the government to help people like myself to start a conversation with the gamblers and how to stop them or help them to stop. That would be a big help. You know because at the moment it's still very hard to try and tell somebody when they think that they don't have a problem". (F, 45-54, D/P, Aboriginal, affected other)

Chapter 9: Conclusions and recommendations

This chapter provides a summary of the findings of this study. Based on the findings, it also includes recommendations for addressing harm from gambling in the NT from a public health perspective.

9.1 Main findings

Overall, the findings presented in this report provide a greater understanding of the lived experience of gamblers and affected others, complimenting the existing quantitative gambling research in the NT. Viewing the findings from a public health lens, a targeted approach seems to have the potential to address and minimise harms from gambling. The approach needs to be inclusive of the experiences and understandings of people who are at risk of gambling harm (preventive approach) or are experiencing it (interventional approach), that is, tailored to address the causes and impacts of harms experienced by people (Acil Allen Consulting et al., 2017; Davidson et al., 2018).

9.1.1 Gambling behaviour

EGMs were mainly gambled on at the casinos, while sports and racetrack betting were done primarily online. The majority of the participants reported gambling on more than one activity. The reported gambling expenditure ranged between \$20 a day and \$2,000 a week.

A lack of self-awareness of gambling behaviour, boredom, scarce opportunities for social interaction, and to win money and chasing losses, were reported as drivers of gambling. The reasons for gambling reported by participants from CALD background were largely related to isolation associated with migrating to a new country. Factors associated with this group of people that led to gambling engagement included lifestyle changes (related to cultural differences), lack of support, stress, and boredom.

9.1.2 Negative impacts experienced from gambling

The negative impacts from gambling were experienced by both gamblers and those affected by someone else's gambling. These included financial harms, emotional distress, tensions in relationship, and decrements to health. Similar findings were noted across both groups, with financial harm being the dominant negative impact of gambling reported by many participants across groups. Regardless of the direction of the relationship, the circular associations between gambling, financial stress, and social and emotional wellbeing were discussed by participants. These associations are discussed below in light of Langham's conceptual framework of gambling harms (Abbott et al., 2018; Langham et al., 2016).

Financial harms: The first level involved harms associated with the reduction or loss of capacity to meet expenditure that had instant consequences. This included the inability to buy food, clothing, access health care services, housing, and other basic items. Such consequences had caused emotional and psychological distress to

others (primarily) who were not part of the choice, primarily due to the incapability to manage the situation.

The second level of financial harm involved the loss of capacity to buy items because of conscious or unconscious choice made by gamblers to spend surplus income on gambling. Instances of regret following this choice were reported by gamblers in our sample. As well as affecting gamblers, the choice had affected those who were not part of the choice and identified it as an instance of harm.

Emotional distress and relationship conflicts: Emotional distress and anxiety were reported by both gamblers and affected others because of gambling. For gamblers, the reasons primarily included a lack of self-awareness (or denial) of gambling issues and how their gambling could affect others, an inability to control their own gambling behaviours, and desperation in trying to recover losses associated with gambling. The affected others reported experiences of their inability to manage the behaviour of the person who gambled or the impacts from that gambling, such as monetary losses.

Shame and embarrassment were the most pervasive kinds of emotional and psychological distress reported by gamblers and affected others (including both Aboriginal and Non-Aboriginal participants) in this study. Shame and embarrassment also led to social isolation for both gamblers and affected others and prevented help-seeking in many instances. Further, an inability to control gambling and associated psychological discomfort had led to relationship conflicts as reported by participants.

Decrements to health: In this study, we identified links between gambling and engagement with smoking and alcohol use. Many participants described that gambling, smoking, and alcohol use go 'hand-in-hand'; however, given the qualitative nature of the study, we could not determine the direction of this relationship. As described above, the mental manifestations of gambling included stress, anxiety, and distress.

9.1.3 Help-seeking for gambling issues and self-help strategies

Similar responses were received from both gamblers and affected others relating to help-seeking for gambling issues. In majority of the cases, help for gambling issues was not sought. The reasons for not seeking help were a lack of self-realisation of gambling issues and awareness of the available services, shame and embarrassment associated with gambling, and the cost of services. Stigma; shame; and lack of awareness and understanding of western concepts of counselling and treatment were reported as barriers to help-seeking for gambling issues by CALD participants.

Where help was sought, it was primarily informal (through family and friends) and was rarely preventive. Family and friends were also the preferred choices for intervening where gambling-related harms were evident. Counselling and welfare services were overwhelmingly preferred over medical doctors and other formal services, for both gamblers to approach and the services to offer help for gambling issues. Interestingly, similar responses were received from both gamblers and affected others.

In many instances, self-help strategies such as taking set amounts of cash to venues, setting limits on spending, and creating barriers to accessing money for gambling, were successful in controlling one's own gambling.

9.1.4 Approaches to minimise harm from gambling

The government position as a regulator was acknowledged. Recommendations included limiting (i) the daily number of hours of EGM playing, (ii) the bet size and time spent gambling (e.g., through pre-commitment cards), (iii) the number of EGMs at the venues, and (iv) the opening hours of the venues. Participants also described the negative implications of note acceptors in EGMs and advocated for re-introducing the coin system. The need for stronger legislation around smoking and alcohol use at the venues was also emphasised.

Participants were cautious of the easy accessibility of online gambling and associated harms, and thus stressed the need for a stronger regulation limiting accessibility to online gambling, especially among the younger age groups. The need for strengthening the existing awareness and education interventions was also emphasised.

Venues (casinos, clubs, etc.) were also recognised as potential sources to offer help to gamblers. The suggestions included (i) venues to train their staff to help them identify problem gamblers and offer them help; (ii) putting up posters at venues to make people aware of the gambling-related harms, and (iii) creating a system wherein the venues could make gamblers aware of their spending and thus help them limit their gambling expenditure.

9.2 Recommendations

Key findings from the research that could be used to underpin approaches to intervention are:

- Boredom and isolation were described as facilitators of gambling. Providing alternative modes of entertainment and encouraging people to engage in activities that involve the support of others, may help people to limit their gambling.
- A lack of self-awareness of gambling behaviour was one of the drivers of gambling. Therefore, strategies aimed at improving awareness of gambling behaviour such as keeping track of losses and venues issuing regular statements on gambling expenditure to their patrons may facilitate the self-identification of gambling issues.
- Gamblers who were aware of their gambling issues appeared to be resistant to seeking help, especially higher problem gambling risk gamblers. Initiatives that portray positive outcomes from gambling interventions may encourage them to seek help. For example, creating advertisements featuring gamblers who had previously benefitted from gambling interventions.

- Many deemed personal contacts appropriate to approach for help and them to offer help. Hence, interventions that guide close others about raising gambling in general conversation may encourage gamblers to seek help. Also, interventions that provide information about formal services may facilitate close others to refer gamblers to the services for help.
- Self-help strategies helped gamblers to limit their gambling. Therefore, interventions that provide information on such strategies are likely to be successful, especially where shame and embarrassment are associated with gambling.
- People experiencing gambling problems are likely to be identifiable by venue staff and other gamblers at gambling venues. Interventions that provide information to venue staff and other gamblers about identifying and approaching people with gambling harms and offering help may be useful in addressing and minimising the impacts of problem gambling.
- Low- and moderate-risk gamblers in our study were more receptive of the negative impacts and harm from own gambling than high-risk gamblers. Thus, preventive interventions targeted at these groups may have a significant impact in addressing and minimising gambling harm in the community.
- Participants from CALD backgrounds in this study comprised both gamblers and affected others. Additional reasons (different from that of Australian born participants) for gambling were reported by participants from these backgrounds, primarily associated with migration that led to gambling engagement. Given an estimated 100% increase in CALD population between 2006 and 2016 (Australian Bureau of Statistics, 2016) in the NT, and that people from CALD backgrounds are at higher risk of problem gambling in the NT (The not as yet published report from the 2018 NT Gambling Prevalence and Wellbeing Survey), it would be worth exploring diverse range of opinions and attitudes to gambling, recognising that not all individuals and communities share the same views or values, in future studies. This will help to design culturally and linguistically appropriate gambling support services and minimise harm from gambling among CALD communities in the NT.

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Appendices

Appendix A: Participant Information Sheet

PARTICIPANT INFORMATION SHEET

An Exploratory Study of Gambling Behaviours, Harm, and Help-Seeking for Gambling Issues in The Northern Territory

This Is for You to Keep

Menzies and NT Department of Health Human Research Ethics Committee approval number:
2019-3294

Principal Investigator: Dr Matthew Stevens

Dear Participant,

You are invited to participate in the study described below.

What is the study about?

This study will explore peoples' attitudes towards gambling and factors associated with excessive gambling and help-seeking, among gamblers and those affected by someone else's gambling problems.

Who is undertaking the study?

This study is being conducted by the Menzies School of Health Research, as part of the 2018 Gambling Prevalence and Wellbeing Survey. The study has been funded by the Northern Territory Government's Community Benefit Fund.

Why am I being invited to participate?

You are being invited as you participated in the 2015 and/or 2018 Gambling Prevalence and Wellbeing Surveys and agreed to be recontacted to participate in future research projects.

What am I being invited to do?

You will be asked questions on what you think about problem gambling risk, gambling activities, excessive gambling and help-seeking. There is no right or wrong answer to any of the questions, so please feel free to express your views. For your convenience, you will be interviewed by telephone unless you opt for a face-to-face interview. If you agree, the interview will be audio-taped, as it will help us not miss any information you provide during the interview and will also help us to analyse the information.

How much time will my involvement in the study take?

We expect the interview will take between 30 and 50 minutes to complete. You will be provided with a \$50 voucher from a choice (e.g. Woollies, Coles, K-Mart, Big-W) for your involvement in this research, as a token of appreciation and a compensation for your time.

Are there any risks associated with participating in this study?

The only foreseeable risk associated with your participation in the study is that some questions and discussion may upset you. If you feel upset or uncomfortable at any time during the interview, please pause and take your time, and if you do not want to answer a question, that is fine. If you would like to talk further with someone about your or someone else's gambling or other issue, you may contact Amity Community Services on 1800 858 858 - 24 Hr Toll Free helpline, and Lifeline on 13 1114.

What are the potential benefits of the study?

It is expected that NT residents will benefit directly or indirectly from the study's results. The information will help government, industry, and service providers to develop policy and programs to minimise gambling-related harm in the community.

Can I withdraw from the study?

Yes, if you choose to withdraw, you can do so at any time. There will be no negative consequences if you withdraw.

What will happen to my information?

No identifiable information you provide us in interviews will be stored. All information collected in the study will be kept on password protected computers and will only be available to the research team for analyses. Your name and other personal details will not be made public and nothing written in the Report will link you personally to the study. You have the option in the consent form, of providing an email/postal address, if you ask to be kept informed about the study.

Who do I contact if I have questions about the study?

You may contact the following persons if you have questions about the study:

- 1) Dr Matthew Stevens: Matthew.stevens@menzies.edu.au; (08) 8946 8524
- 2) Dr Himanshu Gupta: Himanshu.gupta@menzies.edu.au; (08) 8946 8597

What if I have a complaint or any concerns?

This study has been approved by the NT Department of Health & Menzies School of Health Research Human Research Ethics Committee (approval number 2019-3294). The study will be conducted according to the NHMRC National Statement on Ethical Conduct in Human Research (2007).

If you have questions or problems associated with your participation in the study or wish to raise a concern or complaint about the study, you may like to contact Matthew or Himanshu. If you wish to speak with an independent person regarding concerns or a complaint, please contact the Human Research Ethics Committee's Secretariat on:

Phone: 08 8946 8600

Email: ethics@menzies.edu.au

Post: Menzies School of Health Research
PO Box 41096
Casuarina NT 0811

Any complaint or concern will be treated in confidence and fully investigated. You will be informed of the outcome.

Yours sincerely,



Dr Matthew Stevens (Principal Investigator)

Appendix B: Consent Form

Consent Form

An Exploratory Study of Gambling Behaviours, Harm, and Help-Seeking for Gambling Issues in The Northern Territory

This Means You Can Say NO

Menzies and NT Department of Health Human Research Ethics Committee Approval Number: 2019-3294

Contact person: Dr Matthew Stevens or Dr Himanshu Gupta

Contact details: matthew.stevens@menzies.edu.au (08) 8946 8524

himanshu.gupta@menzies.edu.au (08) 8946 8597

Declaration by Participant

- I have read the Participant Information Sheet or someone has read it to me in a language that I understand.
- I understand the purposes and procedures of the study (including audio recording of the interview) and any risks relating to my participation in the study.
- I have had an opportunity to ask questions and I am satisfied with the answers I have received.
- I freely agree to participate in this study and understand that I am free to withdraw at any time during my participation in the study without having any negative consequences to my withdrawal.

Name of Participant: _____

De-identified ID: _____

Email: _____

Postal address (optional): _____

Signature: _____

Date: _____

Declaration by Researcher

I have given a verbal explanation of the study; its procedures and risks and I believe that the participant has understood that explanation.

Name of Researcher: _____

Signature: _____

Date: _____

Appendix C: Interview schedule

C.1 EGM gamblers

1. Gambling behaviour

- Tell me about your gambling activities – type of activities, how often do you play, money spent on pokies, where do you play (gambling locations), when (cover current and past), wins/losses, etc.
- Why do you gamble?
- Did you go with anyone?
- How did you use venue (what else did you do in the space)? (probe for having access to smoking room, alcohol, cash through eftpos and ATM withdrawals at the venue)

2. Gambling problems and being personally approached

- What you think how regular gambling can lead to other problems?
- Tell me about the negative impacts you experienced from your own regular gambling.
- What are your experiences of others around you (family, friends, work colleagues, etc.) being affected by your gambling. In what ways did it affect them?
- Have you been approached by venue staff?
- Were you gambling at the time?
- What were the reasons they approached you for?
- How did you feel being approached about gambling (not necessarily problems) by venue staff - was it appropriate?
- Did they offer any information, resources or services? If so, please tell me about them. Were they helpful for you? What parts were helpful? What parts were not so helpful?
- Other than venue staff, have you ever been approached about gambling (not necessarily problems) by anyone else - was it appropriate?
- Who, what did they say, how did they go about it, were you gambling at the time, in a venue. Was it ok?

3. Who is appropriate to approach people about gambling (not necessarily problems)?

I'm going to ask you a few more questions....

- Who do you think might be appropriate for gamblers to approach about their gambling? This might include offering help or assistance with help-seeking for gambling problems (other than venue staff).
- Separately ask about:
 - partner, other family
 - friends,
 - colleagues
 - Services (e.g. GPs, health services, counsellors, welfare, financial counsellors)
 - Anyone else?
- Are any of these inappropriate?

4. Who would be the best to approach - someone, how, where, when?

One of the things we want to find out is how to best approach someone about their gambling, so things might not get so bad. We know some people can find it uncomfortable to approach someone to help.

- Who do you think would be best placed to help people 'so things don't get so bad'?
- What do you think would be best to say?
- In a venue?
- While gambling?
- How bad would things need to be for you to say something?
- What do you think might encourage people to get help?
- Do you think there is a way that would make you/other people feel more comfortable talking about gambling?

5. Other strategies and interventions

- Did you use any strategies to control gambling?
- What kind of strategies did you use? (also ask about self-help, self-exclusion from venues and online betting services, used lines of credit)
- How did they help you to regulate your gambling?
- In May 2013, the NTG legislated to allow for the installation of note acceptors on EGMs in clubs and pubs, allowing gamblers to load up to \$1000 in any denomination of note. Tasmania and SA only allow \$1 coins to be inserted (same as NT before change). The change in the NT has seen a large increase in EGM player losses.
 - Do you think it would make EGMs less harmful (e.g. spend less money) if people could only insert coins?
 - How much money do you think someone should be able to put into an EGM in one go?
- Think about the EGM venue/s you usually go to
 - Do you have access to cash through eftpos and ATM withdrawals at the venue?
 - What do you think could be the consequences of handling cash while gambling (both positive and negative)?
 - *Prompt: ease of playing, higher risks of robbery.*
- Others - reduced hours of playing, reduced bet size, etc.?
- Pokies often display lighting effects, jackpot messages, good fortune messages and melodies? How do you think they affected your gambling behaviour?

6. Help-seeking and health, recent and past

- Have you ever wanted/got help for gambling problems?
- What were the reasons for seeking help?
- Who did you talk to for assistance in finding a gambling help service? OR How did you find a gambling help service?
- What kind of help you wanted?
- Did you get what they wanted?
- Was there any assistance you might have wanted that you didn't get?
- I am going to ask some questions about health and services. I would like you to think about when you've been gambling a lot, were you seeing

- GPs;
- health services;
- counsellors;
- welfare services;
- financial services;
- any other?

Ask at the end of the interview - What do you think governments could do to minimise harms from gambling?

PGSI

We will also ask a handful of questions we asked in the previous phone interviews. (For face-to-face interviews, offer to ask them the PGSI questions or fill it in and put it in an envelope (confidential)).

Now I'd like you to think about all your gambling in the past 12 months...

INTERVIEWER NOTE: PLEASE READ OUT "thinking about the last 12 months" READ OUT BEFORE EVERY STATEMENT

DO NOT FLIP – KEEP GRID IN ORDER

	Never	Some times	Most of the time	Almost always
PGSI1 - Thinking about the past 12 months, how often have you bet more than you could really afford to lose? Would you say: (1)	0	1	2	3
PGSI2 - Thinking about the past 12 months, how often have you needed to gamble with larger amounts of money to get the same feeling of excitement? (2)	0	1	2	3
PGSI3 - Thinking about the past 12 months, how often have you gone back another day to try to win back the money you lost? (3)	0	1	2	3
PGSI4 - Thinking about the past 12 months, how often have you borrowed money or sold anything to get money to gamble? (4)	0	1	2	3
PGSI5 - Thinking about the past 12 months, how often have you felt that you might have a problem with gambling? (5)	0	1	2	3
PGSI6 - Thinking about the past 12 months, how often have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true? (6)	0	1	2	3
PGSI7 - Thinking about the past 12 months, how often have you felt guilty about the way you gamble, or what happens when you gamble? (7)	0	1	2	3
PGSI8 - Thinking about the past 12 months, how often has gambling caused you any health problems, including stress or anxiety? (8)	0	1	2	3
PGSI9 - Thinking about the past 12 months, how often has your gambling caused any financial problems for you or your household? (9)	0	1	2	3

CPGI_SCORE = PGSI1 + PGSI2 + PGSI3 + PGSI4 + PGSI5 + PGSI6 + PGSI7 + PGSI8 + PGSI9

C.2 Other bettors

1. Gambling behaviour

- Ask about gambling activities –
 - type of activities: sport like AFL, cricket or tennis (excluding fantasy sports or footy tipping competitions), horse or harness or greyhound racing (excluding sweeps)
 - how often do you play?
 - money spent
 - where do you play (gambling locations – online, sports company, app, pub, club, casino, over the telephone, other)
 - when (cover current and past)
 - wins/losses, etc.
- Why do you gamble?
- Did you go with anyone (for in-venue sports/racetrack betting)?

2. Gambling problems and being personally approached

- What you think how regular gambling can lead to other problems?
- Tell us about the negative impacts you experienced from your own regular gambling.
- What are your experiences of others around you (family, friends, work colleagues, etc.) being affected by your gambling. In what ways did it affect them?
- Have you been approached by betting company (online gamblers)?
- Were you gambling at the time?
- What were the reasons they approached you for?
- How did you feel being approached about gambling (not necessarily problems) - was it appropriate?
- Did they offer any information, resources or services? If so, please tell me about them. Were they helpful for you? What parts were helpful? What parts were not so helpful?
- Other than the betting company, have you ever been approached about gambling (not necessarily problems) by anyone else - was it appropriate?
- Who, what did they say, how did they go about it, were you gambling at the time, in a venue. Was it ok?

3. Who is appropriate to approach people about gambling (not necessarily problems)?

I'm going to ask you a few more questions....

- Who do you think might be appropriate to approach people about their gambling? This might include offering help or assistance with help-seeking for gambling problems (other than the betting company).
- Separately ask about:
 - partner, other family
 - friends,
 - colleagues
 - Services (e.g. GPs, health services, counsellors, welfare, financial counsellors)

- Anyone else?
- Are any of these inappropriate?

4. Who would be the best to approach - someone, how, where, when?

One of the things we want to find out is how to best approach someone about their gambling, so things might not get so bad. We know some people can find it uncomfortable to approach someone to help.

- Who do you think would be best placed to help people 'so things don't get so bad'?
- What do you think would be best to say?
- In a venue?
- While gambling?
- How bad would things need to be for you to say something?
- What do you think might encourage people to get help?
- Do you think there is a way that would make you/other people feel more comfortable talking about gambling?

5. Other strategies and interventions

- Did you use any strategies to control gambling?
- What kind of strategies did you use? (also ask about self-help, self-exclusion from venues and online betting services)
- How did they help you to regulate your gambling?
- Since February 2018, online wagering providers have been prohibited from offering any credit, voucher, reward, or other benefit as an incentive to open an account, to people who gamble on their site or app, or to refer another person to open an account.
 - Do you think the government should change legislation to go back to previous measure wherein online wagering providers online would act like a bank to offer lines of credit to online gamblers? If so, why?
 - How do you think this measure would help to protect consumers?

Prompt: This measure is designed to protect consumers from incentive-based marketing and strengthen standards for direct marketing.

Prompt: It also includes preventing turnover requirements to withdrawing winnings from complementary betting credits or tokens.
- Online wagering providers are required to use the same messaging about the risks and potential harm of gambling in their advertising, direct marketing, websites, and other direct communications to their customers.
 - How do you think this measure would help to protect consumers?

Prompt: Would this help to avoid inconsistent or ineffective messages about responsible gambling, and make sure messages reach people as they are making gambling decisions?

6. Help-seeking and health, recent and past

- Have you ever wanted/got help for gambling problems?
- What were the reasons for seeking help?
- Who did you talk to for assistance in finding a gambling help service? OR How did you find a gambling help service?
- What kind of help you wanted?
- Did you get what they wanted?

- Was there any assistance you might have wanted that you didn't get?
- I am going to ask some questions about health and services. I would like you to think about when you've been gambling a lot, were you seeing
 - GPs;
 - health services;
 - counsellors;
 - welfare services;
 - financial services;
 - any other?

Ask at the end of the interview - What do you think governments could do to minimise harms from gambling?

PGSI

We will also ask a handful of questions we asked in the previous phone interviews. (For face-to-face interviews, offer to ask them the PGSI questions or fill it in and put it in an envelope (confidential)).

Now I'd like you to think about all your gambling in the past 12 months...

INTERVIEWER NOTE: PLEASE READ OUT "thinking about the last 12 months" READ OUT BEFORE EVERY STATEMENT

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	Never	Some times	Most of the time	Almost always
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PGSI2 - Thinking about the past 12 months, how often have you needed to gamble with larger amounts of money to get the same feeling of excitement? (2)	0	1	2	3
PGSI3 - Thinking about the past 12 months, how often have you gone back another day to try to win back the money you lost? (3)	0	1	2	3
PGSI4 - Thinking about the past 12 months, how often have you borrowed money or sold anything to get money to gamble? (4)	0	1	2	3
PGSI5 - Thinking about the past 12 months, how often have you felt that you might have a problem with gambling? (5)	0	1	2	3
PGSI6 - Thinking about the past 12 months, how often have people criticized your betting or told you that you had a gambling problem, regardless of whether or not you thought it was true? (6)	0	1	2	3
PGSI7 - Thinking about the past 12 months, how often have you felt guilty about the way you gamble, or what happens when you gamble? (7)	0	1	2	3

CPGI_SCORE = PGSI1 + PGSI2 + PGSI3 + PGSI4 + PGSI5 + PGSI6 + PGSI7 + PGSI8 + PGSI9

C.3 Affected others

1. Affected by someone else's gambling

- Have you been negatively affected by someone else's gambling?
- Who were they?
- What was the main type of gambling they were doing when you were negatively affected?
- In what way/s has this person's gambling affected you?
- Did you seek help? If so, from where/who? If not, what were the reasons?

2. Who is appropriate to approach people about gambling (not necessarily problems)?

I'm going to ask you a few more questions....

- Who do you think might be appropriate to approach people about their gambling? This might include offering help or assistance with help-seeking for gambling problems (other than venue staff/betting company).
- Separately ask about:
 - partner, other family
 - friends,
 - colleagues
 - Services (e.g. GPs, health services, counsellors, welfare, financial counsellors)
 - Anyone else?
- Are any of these inappropriate?

3. Who would be the best to approach - someone, how, where, when?

One of the things we want to find out is how to best approach someone about their gambling, so things might not get so bad. We know some people can find it uncomfortable to approach someone to help.

- Who do you think would be best placed to help people 'so things don't get so bad'?
- What do you think would be best to say?
- In a venue?
- While gambling?
- How bad would things need to be for you to say something?

4. Other strategies and interventions

- Aside from accessing services, what else might help people so things don't get so bad (venues, partners, family, friends, etc.)?
- What do you think might encourage people to get help?
- Do you think there is a way that would make you/other people feel more comfortable talking about gambling?

Ask at the end of the interview - What do you think governments could do to minimise harms from gambling?